

HEALTH AND CARE PASSPORT

Supporting me in a healthcare setting

My name is:

I like to be known as:

This passport has important information in to let you know how best to help me.

This passport belongs to me, please make sure it goes home with me.

Date of completion:

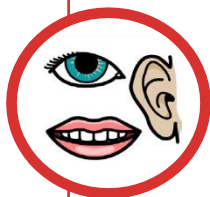
Date of review:



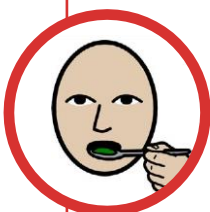
- RED:** Things you must know immediately
- AMBER:** Things that will help you support me
- GREEN:** Things that will make things better for me

Things you must know immediately

Communication (speaking, easy words, pictures, signs, photos, objects, Makaton)



Eating and drinking (support, special cups or cutlery, thickened fluids, soft diet)



Positioning and mobility (walking aid, wheelchair, sleep system, profiling bed)



How will you know I am in pain?

(I will tell you, body language, facial expressions or noises/sounds)



Things that will help you support me

Health conditions (eg. epilepsy, diabetes, asthma, heart problems)



Personal care (help, washing, dressing, toileting needs)



Support I may need during a procedure / medical intervention



Sensory needs (sensory equipment, loud noises, bright lights, tactile)



Things that will help make my stay better

Additional things that will help me feel more comfortable



Things that I may find upsetting or difficult.



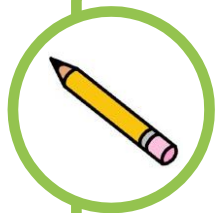
Support I have in the community



What I need for a safe discharge



Additional Information / Notes



USEFUL CONTACT INFORMATION



Community Team

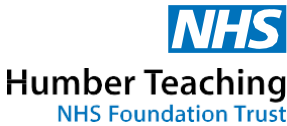


Hospital Liaison



Communication Tool

Developed in partnership with:



www.humbertcp.co.uk