Gateshead Health NHS Foundation Trust





Health and Care Passport

Name:

Learning Disability Diamond Standards

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My Details

This Health and Care Passport should be completed by you and the people that know you best. By filling it in, you are giving permission for your information to be shared with health and care staff who are caring for you. This is called consent.



Tick yes if you agree to this.

To those people providing care to me: This health care passport has information about me, to help you support and care for me. You can get more information about my medical records through the Health Information Exchange on the Great North Care Record.

Name	My name is I like to be called
	My pronouns are: he/his she/her they/them
June 1972	NHS number
M T W T F S 1 2 40 1	Date of birth
Your Street	Address
123 4567 1 2 3	Mobile number
4 5 6 7 8 9 ★ 0 #	Landline number

Communication

How well do I know and understand speech...



Polski Cymraeg बाश्ला लिभि Ilone alle What languages I speak...

Communication aids or tools I use...



The best way to give me information is: e.g. easy read, with carer etc.

Home Environment





How many hours support a week do I have...

Who do I normally live with...



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I need help with my posture when sitting / lying What help do I normally need...



I need help to get about What help do I normally need...



Supporting pain or distress in Hospital Page 10

How do you know I am in pain...



How to support me if I'm in pain...



Different ways I communicate when I am distressed...



Supporting pain or distress in Hospital Page 11

Things that are likely to cause me distress (triggers)...



Things you can do to help me not become distressed...



Things that you can do to support me when I have already become distressed....



Normally...



I sleep a lot

I am usually very quiet

I am very chatty

Support in Hospital



If I am staying in hospital who needs to stay and how often..



What to do to help me in places that are strange for me...



How to support me to be happy...



When I'm happy I will...



How to support me to keep calm and happy (consider pain relief)...



How I take medicine: You can tick more than one box...



whole tablet

other

crushed tablet



Sight and Hearing



Hearing (problems with hearing):



I have problems with my hearing

I wear a hearing aid

I lip read

More information about my hearing...

Food and Drink



Other food concerns...

I am at risk of choking...



Additional information...



Keeping Safe



How I keep safe... e.g. bed rails, support with challenging behaviour, do I wander, do I fall



Sleeping, my normal sleep patterns and routine are...



Things I like, please do this...

Things I don't like, please don't do this...



Keeping Safe

3 things that will make my stay in hospital better...

Is there any other information we should know whilst you are in hospital...



Have you had help to complete this Health and Care

Passport? Tick yes or



If yes who has helped you?