My wishes

Name Click or tap here to enter text.

D.O.B. Click or tap here to enter text. NHS number Click or tap here to enter text.

Address Click or tap here to enter text.

Postcode Click or tap here to enter text.

How others should usually contact me

Click or tap here to enter text.

My communication difficulties are

Click or tap here to enter text.

**My Emergency Contacts:**

(e.g. friends, family, neighbours, clinical team)

|  |  |  |
| --- | --- | --- |
| Name: | Contact numbers & address: | Are they aware of your wishes? When should we contact them? |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

**Important Information about me**, that an ambulance person

needs to know, (e.g. Previous operation, glass eye, dextrocardia,

missing body part, disability, allergy)

|  |
| --- |
| Click or tap here to enter text. |

**Information about my home.** (e.g. keycode - which I consent to securely share, who can care for my pets, access problems)

|  |
| --- |
| Click or tap here to enter text. |

**My expectations of my care & what matters to me** (May include preferences, cultural, religious/spiritual needs, beliefs, etc.)

|  |
| --- |
| Click or tap here to enter text. |

**I have health conditions that sometimes require urgent medical care** (e.g. infections, diabetic collapse, fits, breathlessness, confusion)

|  |  |
| --- | --- |
| PROBLEM OR CONDITION | How I would like this to be managed (Meds to use & where they are kept, what has worked in the past, etc.) |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. |

Knowing whether you would prefer to stay at home or go into hospital while managing each one of these problems is helpful. You may need to discuss this & the management of these problems with your GP or Specialist.

If you are completing this form on behalf of someone else then you will need to provide evidence that you are authorised to do so. E.g. Lasting Power of Attorney (Health and Welfare), child’s age, court order, etc.

Information passed to your GP practice in this form will be shared to your

Summary Care Record, supporting your care, when needed anywhere

across England.

Since the COVID-19 pandemic, the following **Additional Information** has

also been shared to your Summary Care Record.

• Diagnoses & significant events from your past medical history.

• Information about teams looking after you.

• Advance Care Plan information & personal preferences.

**You may wish to consent** to continued sharing of this Additional Information

to your Summary Care Record, just in case the old rules return post COVID.

If so, then please complete below:

Signature….......................................................................................................

**Sign, print your name, date & pass to GP practice**

OR

NameClick or tap here to enter text. DateClick or tap here to enter text.

**Print your name & sign electronically by sending via your email**

Relationship *(if relevant)* Click or tap here to enter text.

|  |  |  |  |
| --- | --- | --- | --- |
| I would like to discuss tissue donation further with my clinical team. | | |  |
| I would like to discuss Cardio-Pulmonary Resuscitation CPR further. | | |  |
| My practice will supply a printed **Future Care Plan**  for my records or fridge door. | | on PAPER |  |
| or via EMAIL |  |
| Email: Click or tap here to enter text. | | |

Practice Admin Use: Date of Receipt: ………..………… Initials: …………………

Date information added into the patients Future Planning Template………………

Initials……………………

Keep this paper copy as proof of receipt for no more than 3 months.

Details on where, in EMIS or SystmONE, to enter data go to the webpage:

[www.futureplanning.org.uk/AdminSupport](http://www.futureplanning.org.uk/AdminSupport)



