

My health and the future

This is an Advance Statement. You can use it to say anything that is important to you about your health or care. Doing this means people will know what you do and do not want if you cannot tell them.

This form was designed with St Mungo's residents, for people who have experienced or are experiencing homelessness.

About me

Name:

Date of birth:

Address:

Phone number:

Preferred language:

GP details

GP Surgery:

Address:

Phone number:

Important contacts

(Anyone that you would like to be contacted if you went into hospital or became very unwell)

Name:

Phone number:

About me

The things I would like you to know about me...

Is there anything from your past that you would like people to know about? Something that you are proud of or feel you are good at? Did you have a job or hobby that you enjoyed? Do you have a hobby now that you enjoy? Is the place where you were born important to you?

The things that are important in my everyday life are...

What activities or hobbies do you enjoy doing? What music do you like? Do you wear glasses or a hearing aid? Do you smoke and / or drink? Are you a very sociable person, or do you prefer quiet time on your own?

My religious, spiritual or cultural beliefs are...

Do you follow/celebrate a particular religion or faith? What does this mean to you? Would you like a representative of your faith to visit you if you were in hospital? Are there any prayers, ceremonies, or holidays you take part in? Are you not religious and want to have no religious involvement in your life?

The things I do not like...

Do you dislike certain activities, music, or foods? Are you scared of anything, such as needles or being alone for too long? Is there anything that helps you if you are angry or stressed? Do you dislike feeling too hot or too cold? Or is there something you don't like being asked or talking about?

My Care

Important information to know when caring for me...

Do you have a daily routine you like to stick to? What time do you get up and go to bed? Do you prefer a bath or shower? At the moment, what can you do on your own or what would you like help with? Do you like to have help with cleaning where you live or not?

My food preferences are...

Are you vegetarian, or vegan? Do you like sweet, salty, plain or spicy food? Do you have a favourite meal? What kind of drink do you like? How many cups of coffee or tea do you have a day? Do you have any allergies, or are there any foods or drink that you can't have because of your religion or faith?

The place I would like to be cared for is...

If you were very ill, would you like to be cared for in a hospital or in a hospice? Is there anyone you would like to visit you? Is there anything you would like to be taken with you if you go to hospital, for example cigarettes, glasses or a favourite jumper?

My Treatment

I have the following condition or illness...

Do you have a medical condition or illness? Are you having any treatment? What medications you are taking?

Things that are important to know about my health are...

What are the things you do for yourself that make you feel well? What are the signs that you are feeling unwell or stressed? Do you have problems hearing or seeing? Do you have any allergies?

The things that I would prefer not to happen to me are...

Would you prefer not to be taken to hospital? Do you have any worries such as being in pain or being sedated? Is there anyone you would not want to visit you or be informed if you became unwell?

Signature

Signed:

Date:

You should review this form every two years or sooner if your health changes to make sure it still reflects your wishes. If you need to make a lot of changes it is a good idea to complete a new form so that your wishes are clear and easy to understand.