Personalised Wellbeing Plan

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| **My name:**  | **I like to be known as:**  |
| **NHS Number:** | **Phone number:** | **Email Address:** |
|  **Address:**  | **Post Code:**  |
| Things you need to know about my health |
| **My health condition(s)…**  |
| **Medication I take …** |
| **It is kept …** | **I take it by:**  |
| **What matters to me most whilst I am staying at home and keeping away from people...****What I am worried about whilst I am staying at home and keeping away from people...** |
|  |
| **What support I will need whilst I am staying at home and keeping away from other people** |
|  **What I will do…** |
| **What my family, friends and neighbours will do …** |
| **Other help I will need …** |
| **Where I can get help now …** |
| If you have any questions, please contact: |
|  **My GP is** …**Telephone****number:** |  **My designated****emergency contact is:****Telephone number:** | **Relationship to me…** | **Other …****e.g. social worker, housing****association, care worker****Telephone number:** |