

Who I Am

**This booklet will help you get to know me
and how best to support me**

My name is:

I like to be called:

This is for you to stick your
favourite photograph of yourself.
We can help you print one
if you do not have one.

**This booklet belongs to me; please ensure
it stays with me at all times.**



Guidance

- This booklet helps us to get to know you and ensure we respect your wishes.
- This book can be completed by yourself or by those who know you best.
- We recognise that we are all different and things can change regularly, so we encourage you to update and change the information if you need to.



Communication

Tell us how you prefer to communicate (e.g. talking, writing, sign language).

Language(s):

.....
.....
.....

Hearing:

.....
.....
.....

Vision:

.....
.....
.....

Speech:

.....
.....
.....

Communication Aids:

.....
.....
.....



Activities and routines

These routines are important to me:

.....

.....

.....

.....

Things I like to do for myself:

.....

.....

.....

Things I may need help with:

.....

.....

.....

Things I enjoy doing:

.....

.....

.....

Things that might worry or distress me:

.....

.....

.....



Activities and routines

Things that make me feel better when I'm worried or distressed:

I like it when people talk to me about these topics:

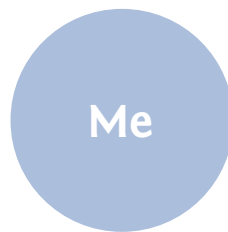
My favourite TV programmes are:

My favourite music is:

Family and friends

Family Tree – include all relevant people in your family.

You can also include people who have passed away as they still remain important to you.



The people who are important to me are (please include the relationship):

.....

.....

.....

Pets:

.....

.....

.....



Environment

List any belongings you like to have near you. This may include photos, books, objects or anything else that is important to you.

A series of horizontal dotted lines for writing, spanning the width of the page.



Clothing

Include if there are items of clothing you prefer to wear.

I like to wear in the day:

.....

.....

.....

.....

.....

.....

I like to wear at night:

.....

.....

.....

.....

.....

.....

I do not like to wear:

.....

.....

.....

.....

.....

.....



Tell us about how you normally move around. Include if you use any aids or special equipment to help mobilise. Include if you need any help with certain activities.

I can:

.....

.....

.....

.....

.....

.....

Mobility aids:

.....

.....

.....

.....

.....

.....

I may need help with:

.....

.....

.....

.....

.....

.....



Nutrition

I like to eat:

.....

.....

I like to drink:

.....

.....

I don't like to eat:

.....

.....

I don't like to drink:

.....

.....

I might need help with:

.....

.....

Equipment I may need:

.....

.....

Special dietary requirements:

.....

.....



Toileting needs

My day time toileting routine is:

.....

.....

.....

.....

.....

My night time toileting routine is (e.g. needing to get up in the night):

.....

.....

.....

.....

.....

Toileting equipment (e.g. commode, urine bottles):

.....

.....

.....

.....

Additional information (e.g. catheter, stoma, continence products):

.....

.....

.....

.....



I wake up at:

.....

I go to sleep at:

.....

Things that help me get to sleep:

.....

.....

.....

.....

If I wake up in the night, these things help me get back to sleep:

.....

.....

.....

.....

I like to rest in the day: Yes No

Additional information (e.g. night light on, door open/closed, TV on, radio on):

.....

.....

.....

.....

.....



My condition

Things I might experience when I am unwell:

If I am unwell, I may communicate how I am feeling by:

It helps when I:



Medications

Tell us how you like to take your medications (e.g. one by one or spread out).
You do not need to list your medications.

.....

.....

.....

.....

.....



Additional information

This space is left for you to tell us anything that has not been mentioned that is important to you:

.....

.....

.....

.....

.....

.....

.....

.....

Completed by:

Relationship to you:

Date:



St Luke's Hospice
Little Common Lane
Sheffield S11 9NE

www.stlukeshospice.org.uk

T: 0114 236 9911
E: info@hospicesheffield.co.uk



Registered Charity No. 254402



WORLD
LAND
TRUST™

www.carbonbalancedprint.com
CBP2225