

Care Recovery and Wellness Plan

Personal Information

Name:

Birth Date:

Contact no:

Address:

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Key Support Contact

Name:

Support Type:

Contact no:

Availability:

Emergency Contact

Name:

Relation:

Contact no:

When receiving care, I value:

When taking care of myself, I am motivated by:

Recovery plan

Your recovery journey for discharge.

Discuss the steps that are required to get you back to your home and community.
What goals can you set yourself to recovery.
What types of support will you need to help you achieve these goals?

- Who is involved?
- What is the support type?
- When will it take place?
- Where will it take place?
- Why?

What is important to me about my care?

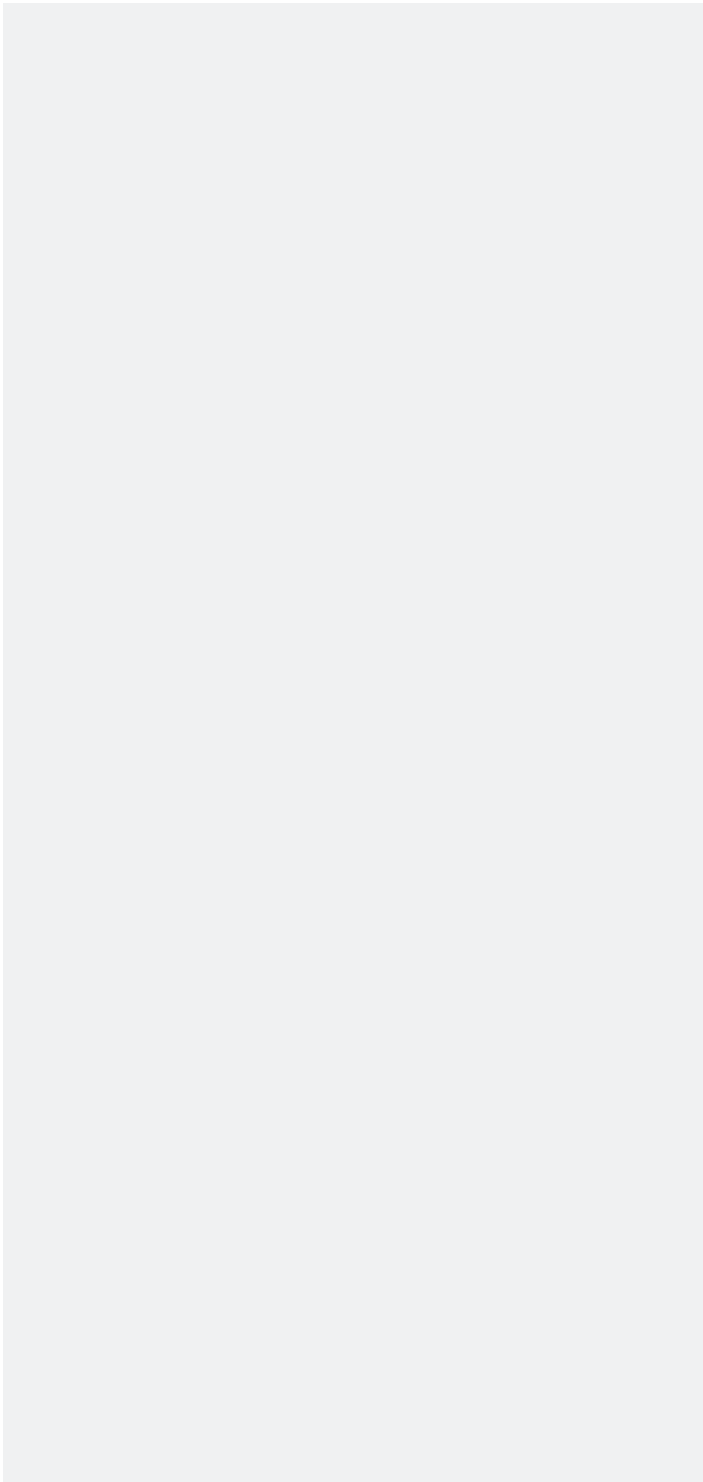
Things I would like you to know when supporting me:

What are the things I can do for myself?

Short-term goals that you can achieve now.

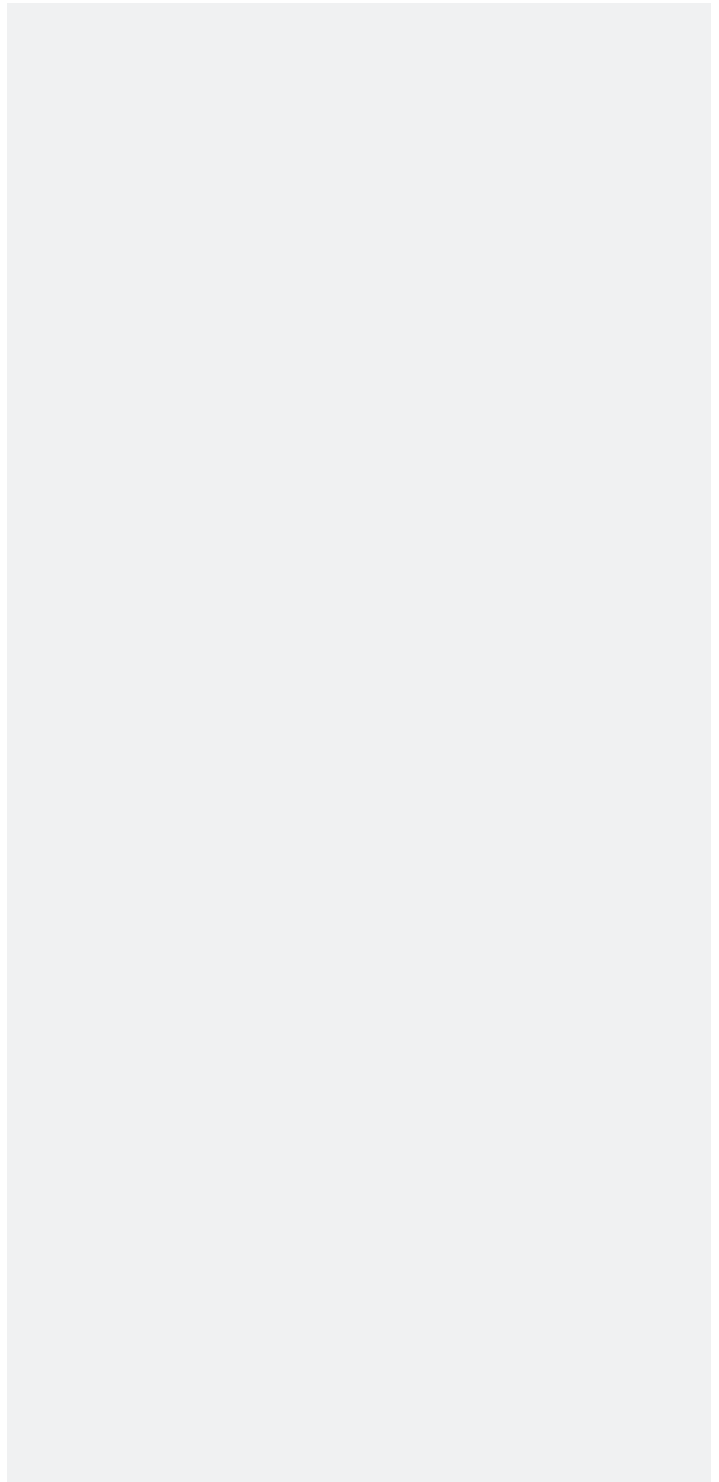
What might I need a little help with?

Near future goals that you can work towards.



What I require ongoing support with?

Future goals that you need support with.



Wellness plan

Keeping well when you are back at home

This section can help you think about wellness activities you would like to take part in once you are home. This can include things like appointments with health and social care professionals, 3rd sector organisations, community events, social activities, leisure and entertainment.

- Who is involved?
- When will it take place?
- Where will it take place?
- Things you need to bring.

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Monday

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Tuesday

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Wednesday

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Thursday

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Friday

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Saturday

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Sunday