

FAMILY HISTORY ADMISSION SUPPORT QUESTIONNAIRE

Please take a moment to consider the questions below. Once complete please give it to the manager of the care home so they may use it to help plan the holistic care of your family member/relative.

If you have any photos of when they were younger we would like to scan them for use in their care plan, during activities and for display in their rooms.

A head and shoulder portrait would also be helpful for creating a door plaque to assist with room identification. A picture of someone's prime years may be more recognisable to them especially to those living with dementia.

Please supply copies of any photo's supplied so we may keep them and reuse them throughout their stay with us.

These little extra touches are a great help to us and the people we care for and would be much appreciated.

Thank you for your help.

Care Home: _____

Service User name: _____

Date of Birth: _____

Place of Birth: _____

Father's name: _____

Fathers Profession: _____

Mother's name: _____

Mother's Profession: _____

PROFESSION AND EVENTS OF NOTE IN EARLY LIFE:	EARLY YEARS & SCHOOLS, BIG EVENTS:	BROUGHT UP WHERE:

MARRIAGE:	<p>Date:</p> <p>At:</p> <p>Spouse name:</p> <p>Children's names:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
SPOUSE DETAILS:	
CHILDRENS DETAILS:	

LIKES & DISLIKES:	MUSIC:
LIKES & DISLIKES:	FILM STARS/FILMS:
LIKES & DISLIKES:	TV PROGRAMMES:
RELIGION/CHURCHGOER:	

HOBBIES AND INTERESTS OR ANY SMALL DETAILS THAT WILL SPARK MEMORIES:

SERVICE USER &/or RELATIVES ACKNOWLEDGEMENT

Completed by Service User

On behalf of Service User

Signature:

Print name:

Date:

Relationship to Service User:

