

About me — personal care plan

A one-page sheet so anyone helping you knows who you are, what matters to you, and how you like to be supported.

England first · Free printable template · Large text · Fill in by hand or in Word

Please read this first

Information only — not advice. This is a free blank template from Social Care Made Easy (socialcaremadeeasy.co.uk). It is not legal, medical or financial advice. It is not a substitute for a council care and support plan, a professional risk assessment, or advice from a GP, nurse or social care worker. It is not made by the NHS, DWP or any council. Fill it in yourself for personal use. Rules in England can differ from Scotland, Wales and Northern Ireland.

Urgent help

In an emergency, or if someone's life is at risk, call 999. For urgent medical help, call NHS 111 or go to 111.nhs.uk. For anything else about health, speak to a GP.

1. About the person

Preferred name: _____

Full legal name (if different): _____

Date of birth: _____

Address: _____

NHS number (optional): _____

Date this sheet was filled in: _____

2. Who I am

Write a few lines about yourself — what you like people to know first.

3. What matters to me

People who matter to me: _____

Things I enjoy: _____

Things that worry or upset me: _____

Routines I like to keep: _____

4. How I like to be supported

Getting up and dressed

What help I need: _____

How I like it done: _____

Washing and bathing

What help I need: _____

How I like it done: _____

Eating and drinking

What help I need: _____

How I like it done: _____

Moving around the home

What help I need: _____

How I like it done: _____

Going to the toilet

What help I need: _____

How I like it done: _____

Taking medicines

What help I need: _____

How I like it done: _____

Talking and being understood

What help I need: _____

How I like it done: _____

Going out

What help I need: _____

How I like it done: _____

Night time

What help I need: _____

How I like it done: _____

5. Communication

Best way to talk with me: _____

Hearing / sight / language notes: _____

Things that help me understand: _____

6. Health notes (brief)

Keep this short. Detailed medicines go on the Medication record template.

Main health conditions: _____

Allergies: _____

GP name and phone: _____

Pharmacy name and phone: _____

7. Important contacts

Name	Who they are	Phone

8. Not a council plan

If you have a care and support plan from your council, keep that too. This sheet does not replace it. You can still ask your council for a free needs assessment:

<https://www.nhs.uk/social-care-and-support/help-from-social-services-and-charities/getting-a-needs-assessment/>

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