This is my **Supported Needs and Disability Passport**:

HM Government of Gibraltar

Ministry of Equality, Employment, Culture and Tourism

My Name is:

Please look at this passport **thoroughly** before interacting with me.

GHA

HM Government of Gibraltar

Department of Education

care Agency

Things you **must** know about me

Full Name:

Prefer to be called:

GHA Number:

Date of Birth:

Address:

Telephone:

How I communicate / What Language I speak:

Next of Kin / Legal Guardian:

Relationship (e.g. mother):

Telephone:

Address:

My diagnosis is:

This affects me by:

My social worker's name is:

Tel:

Things you **must** know about me

Religion:

Ethnicity:

Religious Needs:

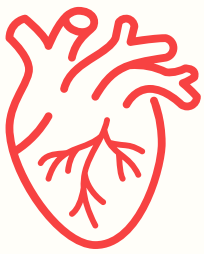
GP Name:

Address:

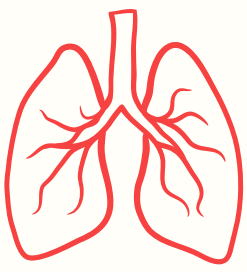
Telephone:

List of allergies:

Medical Interventions - e.g. preferred method of taking out blood:



Please list any cardio-vascular problems:



Please list whether you have any breathing problems, risk of choking, dysphagia etc...

Things you **must** know about me

Current medication:

How I take medication (e.g. whole tablets, crushed tablets):

My **current** treatment plan:

My medical **history**:

If I am feeling anxious, I may:

Things you **must** know about me

What to do if I am anxious:

I have a "**Do Not Resuscitate**" order in place **YES** **NO**

I have had a capacity assessment conducted. Details:

I have a Lasting Power's of Attorney in place. It can be found here:

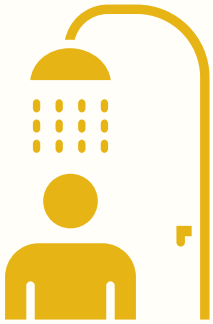
Other professionals I visit:

Things that are **important** to me

Please consider the information below which is especially **important** when assisting me.

How you know I am in pain:

Moving around (e.g. walking aids, posture):



Personal care (e.g. dressing, washing):

Sensory:

Things that are **important** to me

How I eat (e.g. food cut up, pureed, assistance):

How I drink (e.g. thickened fluids):

How I keep safe (e.g. self-soothing techniques):

How I use the toilet (e.g. continence aids):

Sleeping (e.g. sleep pattern and routine):

My **likes** and **dislikes**

Please **get to know me** personally before assisting me professionally/medically.

Things that make me **happy**, things I like to do:

Things I do **not** like or that bother me:

Clubs/Associations I belong to:

Education

Nursery

Nursery:

Teacher:

Support Given:

Lower Primary School

School:

Reception Teacher:

SENCO:

Support Given:

Year 1 Teacher:

SENCO:

Support Given:

Education

Year 2 Teacher:

SENCO:

Support Given:

Upper Primary School

School:

Year 3 Teacher:

SENCO:

Support Given:

Year 4 Teacher:

SENCO:

Support Given:

Year 5 Teacher:

SENCO:

Support Given:

Year 6 Teacher:

SENCO:

Support Given:

Secondary School

School:

Year 7 Teacher(s):

SENCO:

Support Given:

Year 8 Teacher(s):

SENCO:

Support Given:

Year 9 Teacher(s):

SENCO:

Support Given:

Year 10 Teacher(s):

SENCO:

Support Given:

Year 11 Teacher(s):

SENCO:

Support Given:

Year 12 Teacher(s):

SENCO:

Support Given:

Year 13 Teacher:

SENCO:

Support Given:

Gibraltar College for Further Education

Did you attend the Gibraltar College for Further Education? **YES** **NO**

SENCO:

Support Given:

Have you studied in University? (including Online University Course) **YES** **NO**

University Name:

Course Studied:

Support Given:

Employment

Please only provide us with your **current** employer details.

Are you currently in employment?: **YES** **NO**

Organisation:

Job Title:

List any **Reasonable Adjustments** provided:

Are you in the Supported Employment Programme?: **YES** **NO**

Have you completed a Personal Emergency Evacuation Plan (**PEEP**) Form? **YES** **NO**

Concessions

Please tick whether you are in receipt of any of the following:

		YES	NO
	**Blue Badge**	☐	☐
	**Frontier Pass**	☐	☐
	**Disability Information Card**	☐	☐
	**Radar Key**	☐	☐

Useful Contact Details

Supported Needs and Disability Office
Tel: 200 42196
Email: sndo@gibraltar.gov.gi

GHA Neurodevelopment and Disability Manager
Email: ghasndo@gha.gi

Department of Education
Tel: 200 77486
Tel: 200 78638
Email: info.edu@gibraltar.gov.gi

Care Agency
Tel: 200 78528
Email: infocareagency@gibraltar.gov.gi