

Your household plan

Your name: _____

Who can you ask for help and support? Make a list of friends, family, neighbours and support workers you can contact for help if you or someone in your home gets COVID-19.

Discuss this plan with your whānau and keep it somewhere that's easy for everyone to find.

Important contacts

Name	Telephone	Name	Telephone
_____	_____	_____	_____
_____	_____	_____	_____
Childcare		Care for other family members	
_____	_____	_____	_____
Who can take care of your animals?		Your vet	
_____	_____	_____	_____
Who else do you care for?		Who will you contact to provide care for them?	
_____	_____	_____	_____
Your doctor		Pharmacy	
_____	_____	_____	_____
Work		School	
_____	_____	_____	_____
Carers or support workers		Other important contacts	
_____	_____	_____	_____
_____	_____	_____	_____

Helpful numbers

COVID-19 Healthline: **0800 358 5453**

Press 2 for the Disability Call Centre.

Text **8988**

Disability Vaccination Call Centre:

0800 829 935 Text: **027 281 5017**

Book a vaccine: **0800 28 29 26**

Book a COVID-19 test: **0800 258 5453**

Work and Income: **0800 559 009**

Women's Refuge: **0800 733 843**

PlunketLine: **0800 933 922**

Age Concern New Zealand: **0800 652 105**

Youthline: **0800 376 633**

Outline: **0800 688 5463** (6pm - 9pm)

Mental Health Support: call or **text 1737**

Alcohol and Drug Helpline: **0800 787 797**

Your medical information

Keep this somewhere that's easy to find

Your name _____

Do you have any health conditions or disabilities ambulance or medical staff need to know about?

What do ambulance or medical staff need to know to keep you safe?

If you need to go to hospital or an isolation facility, what do you need to bring with you? e.g. hearing aids, glasses, wheelchair or mobility aid, batteries, phone, tablet or laptop.

Do you have a service animal?

Are you allergic to any medications?

Other allergies

What medications do you usually take?

What do ambulance or medical staff need to know or do to communicate with you?

Do you need a NZSL Interpreter? _____

Do you need assistance or equipment to move around? _____

What do ambulance or medical staff need to know if they are lifting or moving you?

Who makes decisions about your health care?

I make my own decisions

I have support to make decisions

Please contact _____

Telephone _____

Do you have a Health Passport? _____

Keep your Health Passport with this plan.

A Health Passport is a booklet you can write in to tell medical staff more information about what you need to be safe and comfortable. It lets them have access to your medical care.

If you don't have a Health Passport, would you like us to send you one?

You can email disability@ccdhub.org.nz

or download one at

www.hdc.org.nz/disability/my-health-passport/