

Patient Archetypes: Designing Care for People with Complex Needs

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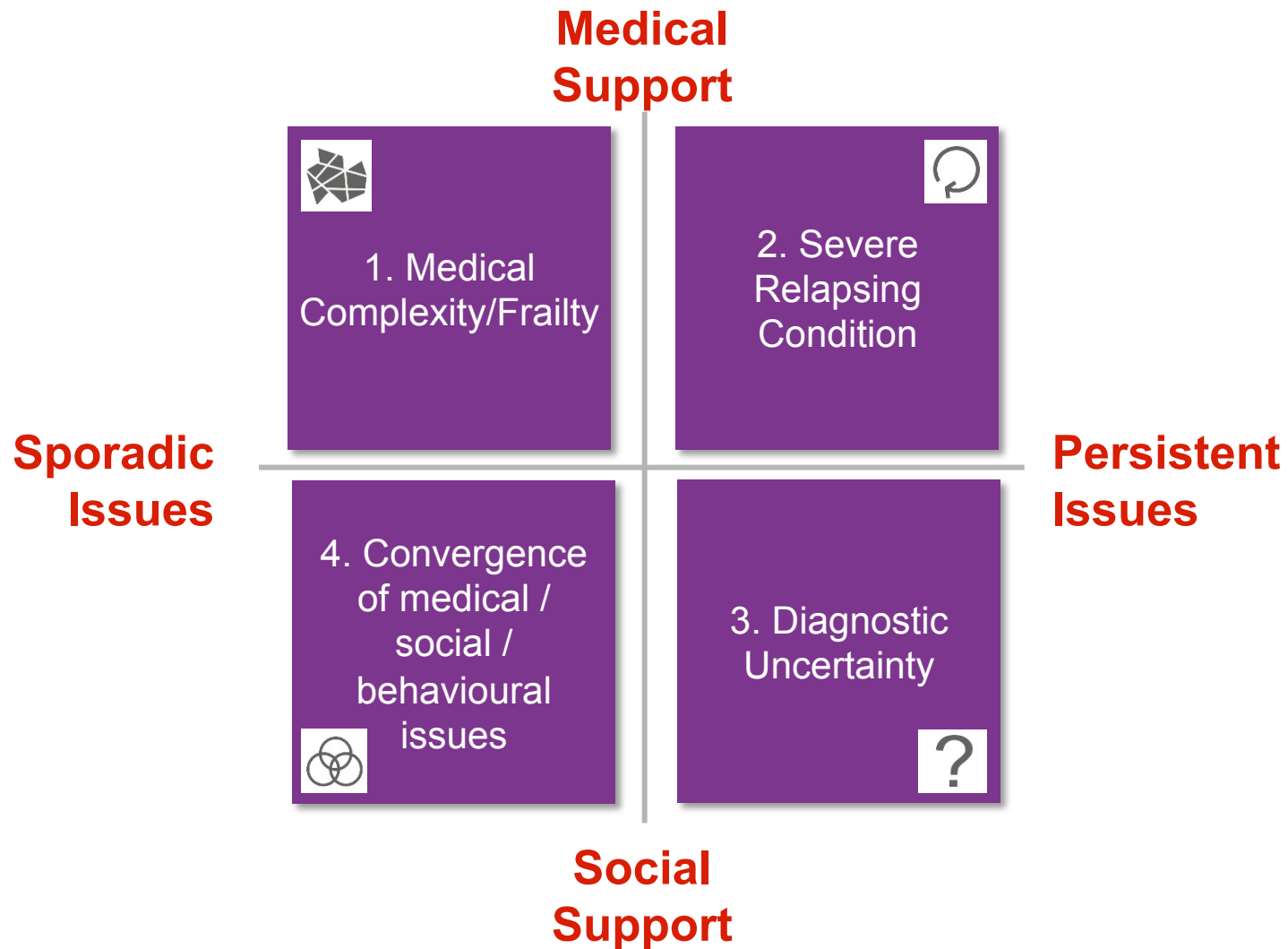
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Archetypes of High Users



Coordinated Care Plan

My identifiers		Last verified:	Last verified by:
Given name:	Preferred name:	Surname:	
Date of birth:	Health Link: Mid-west	OHIP insured: 3T	
Health card #:	Telephone #:	Mother tongue:	
Official language: Engli	Ethnicity/culture:	Religion or social group:	
Marital status: Never marr	Where I currently live: Private dwelling		
People who live with me: No one	People who depend on me:		
Primary contact:	Relationship to me:	Telephone #:	
Emergency contact:	Relationship to me:	Telephone #:	

My care team		Last verified:	Last verified by:
Name	Role or relationship	Telephone #	Lead care coordinator
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
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I rely on most at home			
The people I rely on at home are feeling: 3T			

My health issues		Last verified:	Last verified by:
	Description	Clinical description	Date of onset
Physical Health			Stable
			Unstable
Mental Health			Unstable
Social Health			Unstable
Frailty assessment score:		Assessment type:	Date of assessment:

My plan to achieve my goals for care		Last verified:	Last verified by:
What is most important to me right now:			
What concerns me most about my healthcare right now:			
What I hope to achieve	What we can do to achieve it	Who will be responsible	Barriers and challenges
My plan for future situations			
I have received information about advanced care planning:			
I have a completed advanced care plan:		My ACP is located here:	
I have a Power of Attorney (POA) for personal care:		My POA document is located here:	
POA for personal care's name:	Relationship to me:	Telephone #:	
As I understand it, my advanced care plan says:			