

My Personal Directions for Quality Living

Name:
Date:
To my caregivers paid and unpaid:
I am recording my personal preferences and information about my self, in case I need long-term care services in my home or in a long-term care facility. I hope this information will be useful to those who assist me. Please always talk to me about my day-to-day life to see what it is that I want and enjoy. However, the information below may provide some help in understanding me and in providing my care.
I want my caregivers to know:
The way I like to awaken & begin my day:
The way I relax and prepare to sleep at night:
Activities I enjoy:
Things that I would like to have in my room: