

# Do you have a communication need?



We recognise that some of our patients may require information in a particular format to meet a specific communication need.

To help us to communicate with you effectively we would like to record your communication needs on your electronic patient record.

Once we have recorded your needs on our system it will help us, where possible to give you information and send you appointment letters in an appropriate format to meet your needs. Unfortunately, currently there may be times when we are unable to provide you with information in your chosen format, but we are working to improve our systems so we can meet your needs more consistently .

Please use this form to tell us about any specific communication needs that you may have.

Please send this completed form to:

Switchboard Team  
Harrogate District Hospital  
Lancaster Park Road  
Harrogate HG2 7SX  
01423 885959

Please note that we aim to share this information with all relevant staff within Harrogate and District NHS Foundation Trust. We may also share this information with other health professionals such as your GP to enable your needs to be understood and met consistently.

**This information is available in other formats on request.**

### Adjustments to written information

- Appointment information via SMS to .....
- Written Information via e-mail to .....
- Information via audio email file to .....
- Braille  Easy Read
- Large print  Contrast (pale yellow)
- Other (please specify) .....

We can also send copies of your appointment letters to another person of your choice.

I would like a copy of my appointment letter sending to:

Name: .....

Address: .....

Postcode .....

### Communication Support in appointments

- Hearing loop  Extended appointment
- Lip reads  Uses hearing aid

#### Interpreter

- Language (please specify)
- BSL
- Other (please specify) .....

### Verbal contact

- Telephone  Text relay
- Other (please specify)

I confirm that I agree to my specific communication needs and preferences being recorded on my hospital record and shared with NHS staff.

Name ..... Date of birth .....

Address .....

Postcode .....

Signature ..... Date .....