Dear GP, 

My name is……………..

I like to be called…………….

I am …….…years old and I have a Learning Disability. Please make sure I am on your Learning Disability Register.

Below is some useful information about me.

I would like to have my Annual Health Check.

Please contact ……………………………………………….(me / my parents / carer) to arrange an appointment.

This is the best way to contact me…………………..( sms/mobile/ phone call/letter/email)

I can / cannot come to the surgery for this.

Below are some reasonable adjustments I will need when we meet.

Thank you

A picture containing diagram

Description automatically generatedGraphical user interface, application

Description automatically generatedRectangle

Description automatically generated with medium confidence

Graphical user interface

Description automatically generatedA picture containing diagram

Description automatically generated

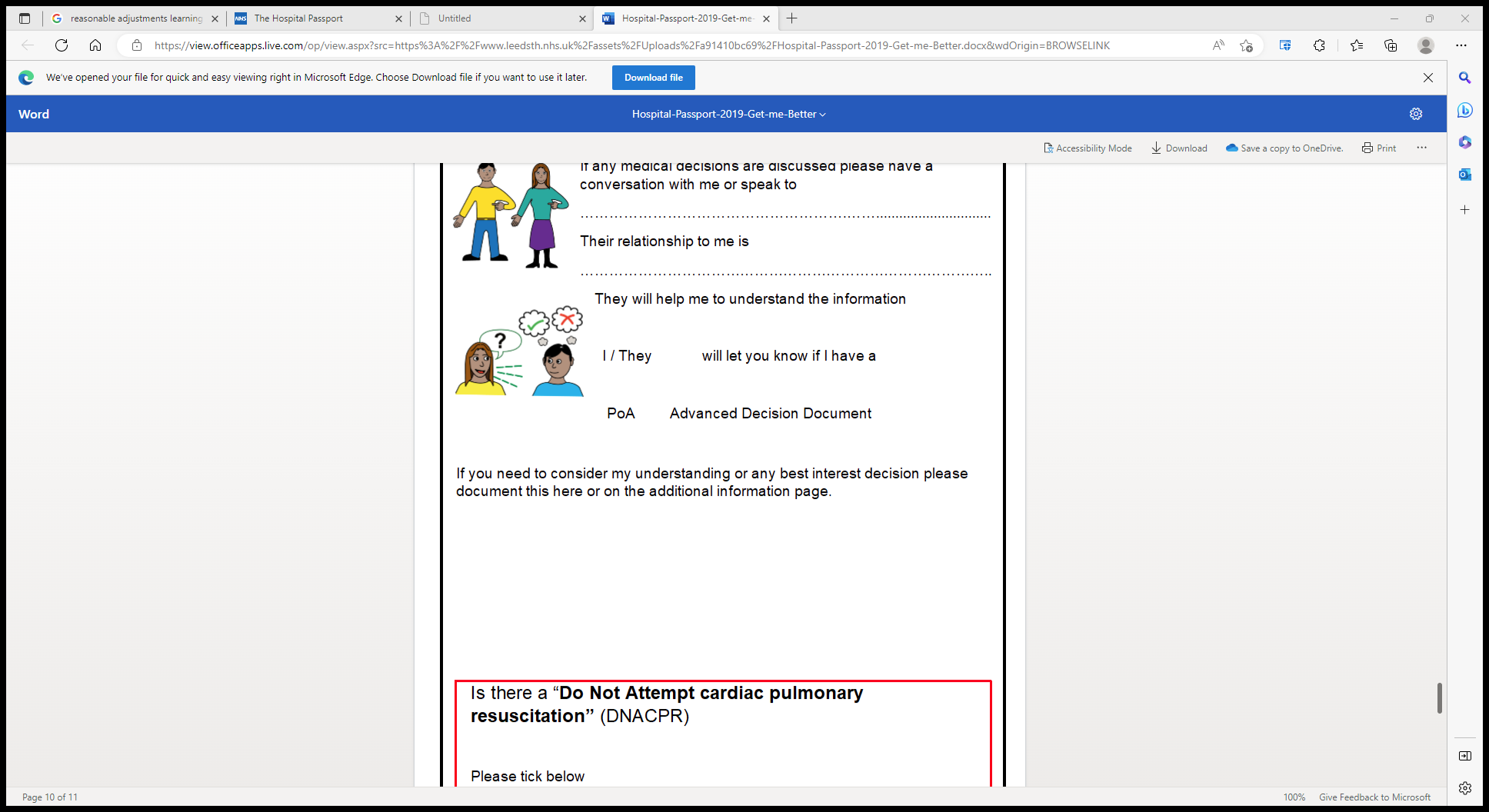
I have problems seeing or hearing.

I need alternative forms of communication like Makaton, BSL

Graphical user interface, application

Description automatically generated

Any other reasonable adjustments or comments



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Plymouth Community Learning Disabilities Team/FMS/09-2020