Palliative Pathway Activation

ame:	
Лу Care Plan	
y goals described:	
re required to achieve my goals:	

My living situation and cultural needs

My needs described:
Requirements to achieve my goals:
Requirements to achieve my goals.
My next of kin contact details (name, phone, main English speaker):

My emotional and spiritual needs

My emotional and spiritual needs described:		
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Requirements to achieve needs:		
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Additional comments

Comments or questions: