

## Client Flow Team: Hospital Case #145

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Client details	
Name: <b>Marybelle Johns</b>	
Date of birth: <b>16/08/1956</b>	
NHS number: <b>943-476-5919</b>	MRN number: <b>consequuntur</b>
OPAS ID: <b>85</b>	Gender: <b>Other</b>
Address: <b>9835 Venessa Grove, Apt. 429, Suite 300, Westberg, DE08 3WI</b>	
Phone: <b>079 6507597 / 06488 3324067</b>	Email: <b>marybelle_johns@example.com</b>
GP: <b>Klein-Crist (EH2), neque</b>	
Next of kin: <b>Voluptates modi autem hic voluptatum nisi optio recusandae.</b>	
Relevant medical history: <b>Aspernatur assumenda excepturi occaecati numquam officia voluptate quasi.</b>	
Mobility issues: <b>Perspiciatis eveniet consequuntur accusantium dignissimos optio ut odit.</b>	
Memory issues: <b>Diagnosed dementia, MCI, Undiagnosed dementia</b>	
Existing package of care: <b>Sequi maxime exercitationem sit commodi.</b>	
Living arrangements: <b>Lives alone. Aliquam id beatae quam minima magni.</b>	

Admission reason
Voluptatibus voluptate accusantium nihil modi accusamus iure.

Referrals
21/05/2024: Referred by Michaela Cummerata, michaela_cummerata@example.com, 047 5809715, Therapist, source: Home First Team, Hub Bed Team, Crisis Assessment & Response Team

Hospital case details	
Hospital: <b>comm_hosp_city</b>	
Seen in hospital by: -	
Has pendant alarm? <b>Yes</b>	Has key safe? <b>Yes</b>
Digital support required? <b>Tech Buddy referral needed</b>	
Financial Entitlements: <b>Would like other entitlements check</b>	
Support required post discharge: <b>Welfare check, e.g. Heating, lights on, food in fridge check, Let family/neighbours know, Late Spring, Silver Pride</b>	

Follow up needed? <b>No</b>
Office tasks:
Actions taken: <b>Family or carer contacted, Information pack issued, Personal Health Budget discussed, Helped with 3 practical tasks: Repellat illum quod ipsa doloremque labore.</b>
Discharge destination/date: <b>accusantium, June 19, 2024</b>

**Notes**