**Hospital Admission Letter**

**Almshouse Association Template**

|  |  |  |
| --- | --- | --- |
| Charity Name  \*\* | Charity Contact Details | Charity Commission Number |

**Dear (XXX)**

I understand (name of individual) has been admitted to your ward. (Name of individual) has been a resident of (name of Charity) for (XXX) years.

(Name of Charity\*\*) is run and managed by voluntary trustees. (There is/is no Warden on site). As we do not provide round the clock cover or any staff with nursing training, we do not undertake nursing duties nor provide personal care or meals on a regular basis. It is therefore very important that we know when (name of resident) is expected to be discharged from hospital so that any necessary support from social services or the local medical centre can be arranged in advance.

The (name of resident) current GP is (name of surgery or doctor)

The (name of resident) is currently prescribed (insert medication details)

At the time of admission, the individual was (use the most appropriate phrase(s))

* completely independent
* supported by home help
* supported by meals on wheels
* supported by district nurse
* requiring help with (XXX)

(Name of resident) general health (use appropriate phrase, with added information as necessary)

* has been good
* has been fair apart from (XXX)
* has been poor, owing to (XXX)

(Name of resident) has been (use appropriate phrase)

* mentally entirely clear and takes a lively interest in life
* showing signs of becoming forgetful and less able to look after him/herself
* diagnosed as suffering from dementia.

The present illness started on (insert date)

It might also help you to know that (XXX)

I will be pleased to provide any further information that might help you and can be contacted on (contact details)

Yours sincerely/faithfully

Name

Position

\*\* INSERT IF APPROPRIATE: Please note ‘Hospital’ in the charity name dates from the time when hospital meant ‘lodging house’. The charity has no medical or nursing staff.