

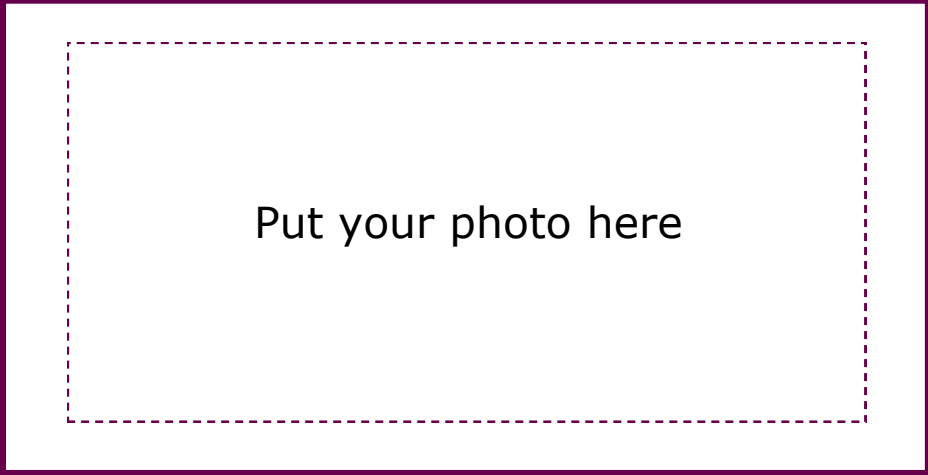


MacIntyre
Providing support...your way



My plan for after I die

Part B



My name



Date of Birth



Date I finished
filling in this plan



I did this plan with



We will check this
plan again on



This information is private.

This plan can be shared with people who support me like family and staff and health professionals This is so they know what I want and can follow my plan



Reviewed Dec 2024

Contents

Part B

My Plan After I Die



- Religion and faith and beliefs and wishes

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- Thinking about -
Being buried

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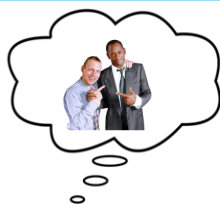
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Being cremated

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My funeral service

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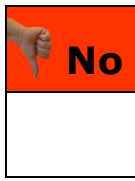
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A will

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- Thinking about -
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- Sharing my information

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- Who to contact

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- What needs to happen
next



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Religion and faith and beliefs and wishes




Do you have a religion

 Yes	 No

If the answer is no then skip to page.....



My religion is



My minister or priest or spiritual leader is



Phone number





Address





My faith or beliefs or culture mean I have important things that must happen when I die

 Yes	 No



These are things like

- opening a window
- being buried within 2 days of dying
- a priest being with me when I die



If yes

write the important things below





You can say what is important to you when you are dying



Maybe things you want near you like

- your favourite things
- photos
- flowers
- fresh bedding and pyjamas
- favourite music

Write your important things here





Thinking about - Being buried



This is what happens when you are buried



Your body goes in a coffin



Your friends and family go to the graveyard

People will talk about your life



The coffin then goes into the ground



Usually a grave stone or name is put on the top



Thinking about - Being cremated



This is what happens when you are cremated



Your body goes in a coffin



Your friends and family go to the crematorium

People will talk about your life



Your body is burnt in fire

The ash is put in a pot



You can decide where you want your pot of ash to go



The ash can be put in a special place
This is called scattering the ashes



The ash can be buried

This does **not** have to be in a
graveyard





You can still have a grave stone or
name plate



What do you want to happen to your body after you die





Do you want your body to be buried

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

If you have chosen Yes to being buried go to pages 27 and 28





Do you want your body to be cremated

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

If you have chosen Yes to being cremated go to page 29





Do you want something else to happen to your body

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

If you have chosen Yes to something else go to page 30



I would like support to find out more about this before I make a decision

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>



Being buried



I need to buy a place to be buried

Yes	No



I want to be buried at





I already have my own place to be buried

Yes	No



This place is at




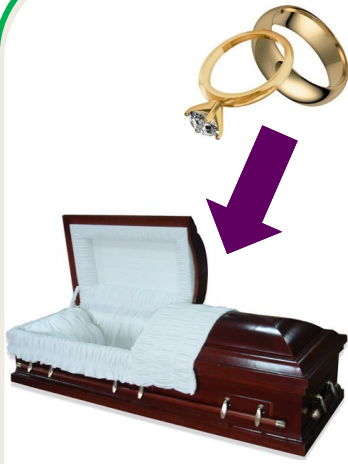

I can be buried in my family grave

Yes	No





My family grave is at







I want special things put in my coffin

 Yes	 No

The special things I want are





I want to have a grave stone where I am buried

 Yes	 No



I want a name plate where I am buried

 Yes	 No



I want this name and these words on my grave stone or name plate







Being cremated



I want my ashes buried

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>





I want my ashes buried at







I want a name plate where my ashes are buried

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>




I would like my ashes scattered

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>



I want my ashes scattered at





I want something else to happen to my body







Thinking about - My funeral service



This is when friends and family say goodbye to the person who has died



Do you want someone to help plan your funeral

 Yes	 No



If yes

Fill in the boxes below



Name



Address



Phone number



This is my





Do you want a funeral director to look after your funeral

Yes	No



If yes

Fill in the boxes below



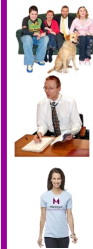
Name



Address



Phone number



This is my



Do you have a Funeral Plan

Yes	No



If yes

Fill in the boxes below



The company which has my Funeral Plan is



008563XJTR

The Policy Number is





Their phone number is





Do you want to choose who does your funeral service

 Yes	 No



If yes
Fill in the boxes below



Name



Address



Phone number





This is my



I want my funeral service at

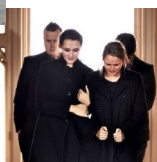


I want my funeral service to be quiet

 Yes	 No



This is what I want people to wear at my funeral service







Some people like flowers to be sent to their family and some people like money to be given to charity



I would like flowers at my funeral service

 Yes	 No



My favourite flowers are



A large empty rounded rectangle for writing, with a small icon of a hand holding a pen in the top right corner.



I would like people to give money to charity

 Yes	 No

My favourite charities are





A large empty rounded rectangle for writing, with a small icon of a hand holding a pen in the top right corner.




You may want people to talk about you and your life at your funeral service






You may have people that you **do not** want to talk about you and your life at your funeral service

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

Tick **Yes** or **No** for people in the boxes

 **Name**



 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

 **Address**



 **Phone number**





This is my









 **Name**



 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

 **Address**



 **Phone number**




This is my









Name



Yes No

Address




Phone number





This is my



Name



Yes No

Address




Phone number





This is my



Name



Yes No




Address




Phone number





This is my



Name



Yes No




Address



Phone number



This is my





Do you want music at your funeral service

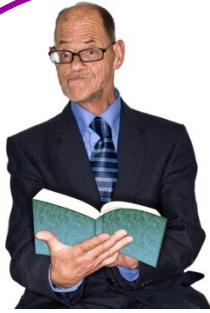
Yes	No





If yes

write the music you want played or sung at your funeral service





Do you want something read at your funeral service

 Yes	 No



If yes

write what you would like read at your funeral service





Thinking about - People remembering me



I want something to be done so people remember me

Yes	No



I want a tree planted by my friends and family

Yes	No



I want my name on a bench

Yes	No



I want something else so people remember me

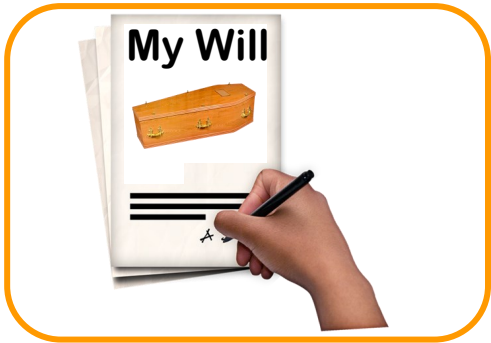


What more do I need to know to make this decision





Thinking about - A will



A will is legal paperwork
This means what it says must be done
It tells everyone what you want to happen

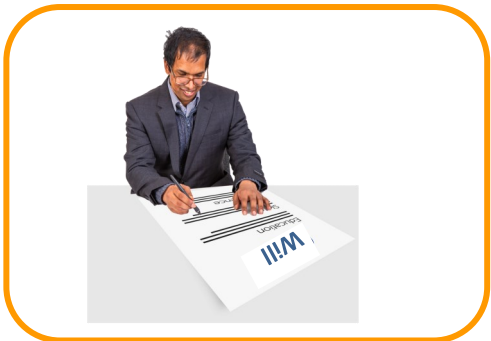


You can decide what you want to happen

- to your body
- to your things



You can choose a person to make sure things happen the way you want them to
This person is called the Executor of the will



Your will must be written in a special way
It must be written properly



Your will must be witnessed
This means someone must watch you sign your will
They must then sign it too



Do you have a will

Yes	No



If yes

Fill in who has your will

Name

Address

This is my

Phone number



Do you have an Executor of the will

Yes	No



If yes

Fill in who the Executor of the will is

Name

Address

This is my



Phone number



I do not have a will



I have decided who will get my things when I die

 Yes	 No
<input type="checkbox"/>	<input type="checkbox"/>

This if for



This if for



This if for



This if for



This if for



This is not legally binding, but your wishes will be respected

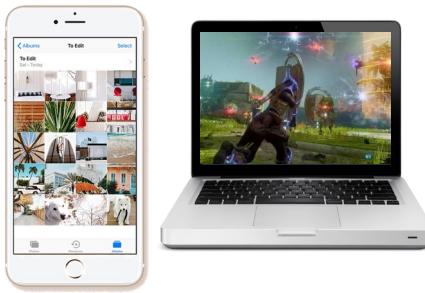


Thinking about - My technology



Lots of people use technology like

- phones
- iPads
- computers



Lots of people have things like

- photos and videos
- stories
- games

on their technology

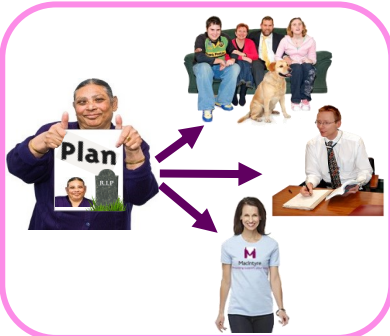


Lots of people use things like



- Facebook
- TikTok
- Snap Chat
- Twitter



You can choose a person to sort these
out when you die



Do you want someone to sort out your technology when you die

 Yes	 No



If yes
Fill in the boxes below



Name



Address



Phone number



This is my



Where will this person find your passwords and codes



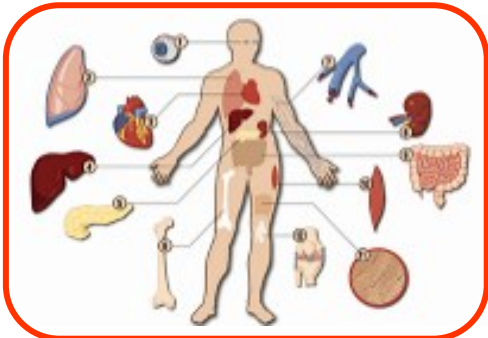


Thinking about - Organ donation when I die



You can choose to be an organ donor when you die

The law has now changed and you need to let the NHS know if you do **not** want to donate your organs

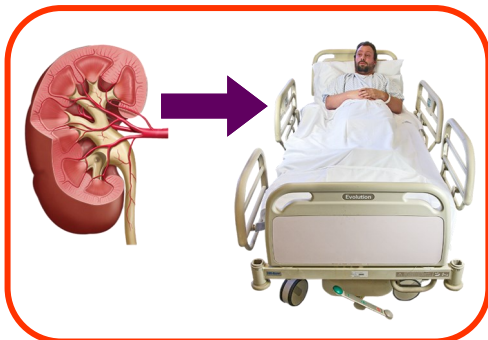


An organ is part of your body like the

- kidneys
- heart



Donation is giving somebody something for free



Organ donation means when you die your organs can be given to people that need them because they are very ill



You can choose if you want to do this

There is no right or wrong choice
It is up to you



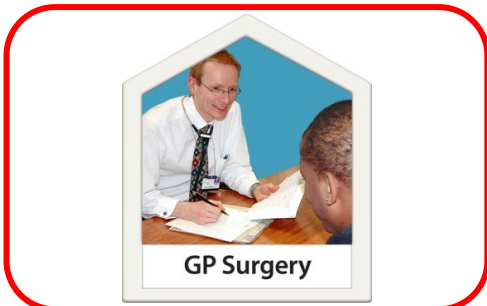
If you do **not** want to be an organ donor then you can choose to do this



- online



- by phone



- at your doctors



I have chosen to be an organ donor

Yes	No	Not sure



I would like support to find out more about this before I make a decision

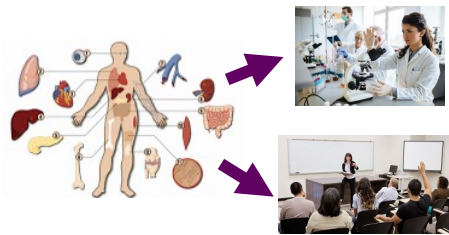
Yes	No



Thinking about— Helping science when I die



You can choose to help other people in different ways when you die



You can choose to leave your body or parts of your body

- to science
- for learning



This means scientist can use your body when you die for

- experiments
- to teach other people



You can choose if you want to do this

There is no right or wrong choice
It is up to you



I have chosen
to help
science

Yes	No	Not sure



I would like support
to find out more
about this before I
make a decision

Yes	No



Sharing my information





You may want other people to have a copy of your plan like

- your family
- your doctor
- your Support Staff



Do other people have a copy of this plan

 Yes	 No



If yes

Fill in the boxes below and on the next page

 **Name** 

 **Address** 

 **Phone number** 

This is my 



Name

Address

Phone number

This is my

Name

Address

Phone number

This is my

Name

Address

Phone number

This is my

Name

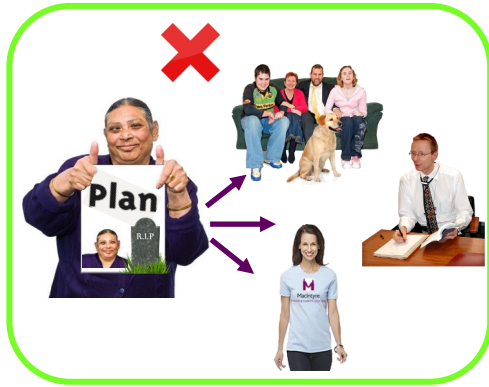
Address

Phone number

This is my



You may want other people to talk about your care or treatment



You may have people that you **do not** want to talk about your care or treatment

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Tick **Yes** or **No** for people in the boxes

Name

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Address

Phone number

This is my

Name


Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Address



Phone number

This is my

Name



Yes No

Address




Phone number





This is my



Name



Yes No

Address




Phone number





This is my



Name



Yes No

Address




Phone number





This is my



Name



Yes No

Address



Phone number



This is my





Who to contact when I die



This page is to think about people who would need to be told when you die
For example family or friends

Name of person



Who are they



Contact number





What needs to happen next



This page is for planning
What do I want to know more about
How will staff help me with this

Insert picture

We will



Insert picture

We will



Insert picture

We will



Insert picture

We will



Your name



Staff name

