

Carer's In Case of Emergency plan



This form will help you to plan for the unexpected and ensure the person you care for is looked after should you become unwell or there is an emergency and you are unable to care for them at short notice. It is very important that you talk to the people you include on the form about what they might be able to do, and how their information will be stored. Keep a copy of the form where it can easily be found.

Information to be used when at short notice I am unable to provide care

My Details

Name	John Smith	Title	Mr
Address	14, Church St, WGC	Postcode	AL8 4QE
Telephone No	01707333123	Mobile No	xxxxxxx
Gender	male	Ethnicity	Black British
Date of Birth	10.06.1926	Date form completed	23.10.2020

Details of the person I care for

I have consent from the person I care for to share this data	Yes		
Persons name	Clara Smith	Title	Mrs
Preferred name	Clara	Date of Birth	10.08.1930
Address	As above	Post Code	As above
Telephone	As above	Relationship to carer	wife
Gender	female	Ethnicity	Black British

More about the person I care for

Please give a brief description of the person and their circumstances	Clara was diagnosed with vascular dementia 2 years ago. She also has diabetes and visual impairment.
Do they have any communication needs? If so, what are they?	Clara can communicate her basic needs and wishes. She is unable to make and receive calls. She needs support with all forms of correspondence.
Do they have any memory problems? (e.g. dementia)	Yes. Clara's cognitive functioning has declined rapidly in last 6 months.

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What I help with

What do you as a carer help with...	Please give details below
Medication, when is it required and what do you do? Where is it stored? Is it collected or delivered?	John gives medication in the morning, at lunchtime and in the evening. John administers insulin injections between 8-9am and 6-7pm each day. Medication is delivered 4 weekly from the pharmacy in a blister pack. It is kept in the cupboard in the kitchen above the microwave.
Which GP practice and which pharmacy does the person being cared for use?	Garden City GP Practice 01707898921 Lloyds Pharmacy 01707 544323
Meals and helping to eat and drink?	Clara requires encouragement and physical support to eat and drink at all mealtimes. Food must be a soft diet as Clara has swallowing difficulties. John provides this support.
Getting to the toilet?	Clara walks with a zimmer frame and requires orientation to be able to get to the bathroom. Clara requires physical support to ensure she is clean after using the toilet. Clara may require a pad change as she often does not make it in time to the toilet due to her restricted mobility. John provides this support
Getting washed and dressed?	Clara requires full support to maintain all aspects of personal hygiene, including oral care, personal grooming and dressing and undressing. John is providing all this support.
Any other support? E.g. this could include mental health support	John ensures Clara is safe throughout the day and night. He provides Clara with reassurance as he can become particularly anxious in the evening. John manages all Clara's medical appointments and does all the shopping, laundry and additional tasks.
Is anyone else involved in providing care, paid or unpaid?	Yes
If yes, please give details	John employed a personal assistant once a day to assist Clara with her personal care routines in the morning. However, due to Covid 19 this has temporarily been put on hold.
How long can the person you care for usually be left alone	Clara cannot be left on her own. Her cognitive function has declined so she is no longer aware of potential risks.
Do you provide help during the night?	Yes
If yes, what help do you provide during the night?	Clara generally sleeps well but will get up to use the toilet during the night and requires orientation and support so John needs to provide this.

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What would you want to happen if you were unable to continue to provide care?	My daughter lives nearby and in the short term (1 or 2 nights) would want to try to care for Clara if this was possible. However, as Clara needs 24/7 care if my daughter was not able to provide this care Clara would need an emergency respite residential placement.
Have you spoken to the person you care for about what they want?	Yes
What does the person you care for want to happen if you were unable to care for them?	As above

Who could help out in an emergency, family, friends and neighbours?

People to be informed (do not include Carer)

You need to confirm that you have the permission of the people below to share their details with Adult Care Services (ACS) for the purposes of being contacted in an emergency.

Please list in order of contact priority, with who we should contact first as number 1

Contact order	Name (do not include Carer)	Relationship to cared for	Contact details	Can ACS contact them in an emergency?	Will they look after pets?
1.	Penelope Jones	Daughter	01707665542	yes	yes
2.					
3.					
4.					

If you don't have contacts who can help would you wish Adult Care Services to help out in an <i>emergency</i>?	Yes
Does the person you care for have any pets?	Yes
If yes, what pets and where are they? What care would they require? Please indicate who can look after them in the 'people to be informed' section above	Yes. A black cat called Fluffy. requires feeding and fresh water twice a day

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Property Access

Can the person you care for answer the door?	No
Do they have a keysafe?	Yes
If they have a Keysafe what is the number? How else would we access the property?	4532 Key safe is to left of the front door on the wall. Also daughter has key

Assistive technology

Does the person you care for have any assistive technology that triggers an alarm? (e.g. careline/telecare, pendant alarm)	No
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Additional Information

Do you have Lasting Power of Attorney for health and welfare for the person you care for?	Yes
If yes, where is it kept?	Sideboard left hand drawer
Do you have Lasting Power of Attorney for property and financial affairs for the person you care for?	Yes
If yes, where is it kept?	Sideboard left hand drawer
Does the person you care for have care funded through continuing health care (CHC)?	Don't Know
Does the person you care for have a DNR/DNAR (do not resuscitate/do not attempt resuscitation) form in place?	Yes
If yes, where is it kept?	Sideboard left hand drawer
Does the person you care for have an advanced care plan?	Don't Know
If yes, where is it kept?	

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Anything else

Is there anything else that you think we need to know?

I no longer leave Clara on her own due to her memory loss and restricted mobility.