

What would happen to the **person you look after** if you have an **emergency**?

The **Emergency Plan** can give you **peace of mind**.



It takes **10 minutes** to fill in your plan and then send us your **registration** in the Freepost envelope.

What is the emergency plan?

An emergency plan includes information about what actions should be taken if you are temporarily unable to care because something has happened to you. The plan is then kept somewhere safe and visible (either at your home or your cared for persons home).

Why do I need an emergency plan?

Having a plan in place can save time and stress during a difficult and emotional situation. Having all the information and contact details together in one place and easy to find, can help everyone involved make better decisions, quickly, when they need to and give you peace of mind.

How does the Emergency Plan work?

If you find yourself unable to contact anyone yourself due to an emergency, the details on your alert card will be used to call a 24 hour call centre. They will alert your chosen contacts that the person you care for will need some support in your absence.

If you are struggling to fill out your emergency plan, please ask us for support. We are very happy to help and we can fill out the forms with you.

03456 434 435* *Monday to Friday 8am – 6pm
Saturday 9am – 1pm

info@devoncarers.org.uk
www.devoncarers.org.uk

Instructions to create your emergency plan

① Step one:

Fill out the emergency plan template and put it into a jar. Label the jar with one of these stickers and **put it into your fridge**. Put a sticker on the outer fridge door and the last sticker on your front door. →

② Step two:

Fill out the details on the emergency plan registration form and **send it to us**. We will then send you an alert card that you can keep in your wallet in case of an emergency.

③ Step three (optional):

If you feel your caring role is more complex, you can contact us to send you the emergency plan extension template to **keep in the cared for persons house**.

Stick me on a jar, on your fridge door and on your front door



If you care for more than one person - please contact us and ask for another emergency plan template. **If you would like the template in a different accessibility format, please contact us.**

Emergency Plan Step One

Keep me in a labelled jar in your fridge

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I am a carer

My full name: _____

The full name of the person I care for: _____

The cared for person: lives with me lives elsewhere

Their contact details (if different): _____

My relationship with the person I care for: _____

Who to contact in an emergency (tick all that apply):

- Contact the person I care for, as they can organise alternative support.
- Contact care agency providing support
- Contact my emergency contacts (please put their details below)
- Contact the Devon County Council Social Care Services (Care Direct 0345 1551 007)

- _____
- _____
- _____

Consent:

Carer: I consent to information about me being shared with relevant others, such as health professionals.

Signed: _____ Date: _____

Cared For: I consent to information about me being shared with relevant others, such as health professionals.

Please tick if the cared for person does not have mental capacity to sign

Signed: _____ Date: _____

Optional: Step 3

Emergency Plan Details
The simple emergency plan that most carers use is on the other side of this page. The person I care for either does not live with with me or has complex needs.

Details about the support they need can be found:

The information is stored on Jointly app, and the emergency contacts above have access

Emergency Plan Step One

Keep me in a labelled jar in your fridge

1

Simple Plan

- The person I care for is **able** to manage or arrange their care for themselves but will need to be contacted to let them know I am not available and to reassure them.
- The person I care for is **not able** to manage or arrange their care for themselves and one of my emergency contacts will need to be called to arrange alternative care arrangements.

How long can the cared for person manage without someone to help them?

Less than 2 hours 2-4 hours 4-6 hours 6-12 hours 12+ hours

The person I care for has the following medical condition(s):

It affects them in the following way:

Medication taken (or where information is stored):

Support required:

Anything else you think is important to know:

GP surgery and phone number:

Other professionals involved in their care and contact number:		
Name and who they are	Why they need to be contacted	How to contact

Emergency Plan Step Two

Send me back to
Devon Carers in the
freepost envelope

2

Emergency Plan Registration

In order to register your Emergency Plan, you need to fill in these details and send these **RED** documents back to us using the freepost envelope to our **freepost address**.

Alert Card

When you've sent this document back to us, you will receive your Alert Card. The Alert Card can be kept in your wallet / purse and be used in an emergency to alert a 24 hour call centre who will contact your emergency contacts to let them know the person you care for may need help.

Important!

- When we receive your registration, we will contact your emergency contacts to let them know their details are being held and why, **so make sure you let your emergency contacts know how you have included them in your Emergency Plan.**
- We will also contact the person you care for (if they do not live with you) to advise that we will be holding their details on our system.

Your consent and information sharing

I confirm that I am an adult carer for someone aged over 18 who lives in Devon

I confirm that I have a suitable emergency plan in place which is up to date. It is stored at:

My home The home of the person I care for Other

It is located: _____

- I understand that Devon Carers will use the information I have given to register my Emergency Plan and use the information in case I am incapacitated due to an emergency.
- I understand that it is my responsibility to inform Devon Carers of any changes to the details I have provided.
- I have made sure to let my emergency contacts know of the role they have in my emergency plan and they have consented to their information being held and used in an emergency.
- I have read and understood the privacy policy located on the back of the booklet cover.

Signature: _____

Date: _____

Emergency Plan Step Two

Send me back to
Devon Carers in the
freepost envelope

2

Please complete in BLOCK CAPITALS

About you (the carer): Preferred name: _____

Title: _____ First name: _____ Last name: _____

Address: _____ Postcode: _____

Phone number (main): _____ (alternative): _____

About the person you care for: Preferred name: _____

Title: _____ First name: _____ Last name: _____

Address: _____ Postcode: _____

Phone number (main): _____ (alternative): _____

Key safe location: _____ Key safe code: _____

Doctor name: _____ Doctor surgery: _____

Emergency Contacts

If you do not have any family members or friends to list as an emergency contact, please go to the last page to tick the social services option.

Contact 1 Key holder

Title: _____ First name: _____ Last name: _____

Address:* _____ Postcode: _____

Phone number: _____ **Address is held temporarily to send the notification letter. Then the address is deleted.*

Contact 1 can:

- | | |
|---|--|
| <input type="checkbox"/> Let the cared for person know what is going on | <input type="checkbox"/> Prepare a meal |
| <input type="checkbox"/> Getting shopping / prescriptions | <input type="checkbox"/> Check if they are ok |
| <input type="checkbox"/> Let officials / agreed people into the property | <input type="checkbox"/> Walk dog / feed pets |
| <input type="checkbox"/> Provide personal care (washing, dressing, toileting) | <input type="checkbox"/> Administer medication |
| <input type="checkbox"/> Help out short term until someone else can step in | <input type="checkbox"/> Prompt to take medicine |
| <input type="checkbox"/> Help with getting in and out of chair / bed | |
| <input type="checkbox"/> Other: | |

Emergency Plan Step Two

Send me back to Devon Carers in the freepost envelope



Emergency Plan Step Two

Send me back to Devon Carers in the freepost envelope



Contact 2 Key holder

Title: _____ First name: _____ Last name: _____

Address:* _____ Postcode: _____

Phone number: _____ **Address is held temporarily to send the notification letter. Then the address is deleted.*

Contact 2 can:

<input type="checkbox"/> Let the cared for person know what is going on	<input type="checkbox"/> Prepare a meal
<input type="checkbox"/> Getting shopping / prescriptions	<input type="checkbox"/> Check if they are ok
<input type="checkbox"/> Let officials / agreed people into the property	<input type="checkbox"/> Walk dog / feed pets
<input type="checkbox"/> Provide personal care (washing, dressing, toileting)	<input type="checkbox"/> Administer medication
<input type="checkbox"/> Help out short term until someone else can step in	<input type="checkbox"/> Prompt to take medicine
<input type="checkbox"/> Help with getting in and out of chair / bed	
<input type="checkbox"/> Other:	

Contact 3 Key holder

Title: _____ First name: _____ Last name: _____

Address:* _____ Postcode: _____

Phone number: _____ **Address is held temporarily to send the notification letter. Then the address is deleted.*

Contact 3 can:

<input type="checkbox"/> Let the cared for person know what is going on	<input type="checkbox"/> Prepare a meal
<input type="checkbox"/> Getting shopping / prescriptions	<input type="checkbox"/> Check if they are ok
<input type="checkbox"/> Let officials / agreed people into the property	<input type="checkbox"/> Walk dog / feed pets
<input type="checkbox"/> Provide personal care (washing, dressing, toileting)	<input type="checkbox"/> Administer medication
<input type="checkbox"/> Help out short term until someone else can step in	<input type="checkbox"/> Prompt to take medicine
<input type="checkbox"/> Help with getting in and out of chair / bed	
<input type="checkbox"/> Other:	

Social Services Contact:

- I have been unable to identify a friend or family member able to help in an emergency.
- The person I care for is known to Devon County Council Adult Social Services (Care Direct) who have details of their support needs. We have signed below to confirm that in an emergency, where we are unable to make this call ourselves, we authorise the emergency helpline to contact the GP or Devon County Council Adult Social Services (Care Direct) on our behalf.

Consent:

Carer: I consent to information about me being shared with relevant others.

Signed: _____ Date: _____

Cared For Person: I consent to information about me being shared with relevant others.

Please tick if the cared for person does not have mental capacity to sign

Signed: _____ Date: _____

Checklist on completing the Emergency Plan:

- Step One:**
- Complete blue forms (Emergency Plan Step One)
 - Roll up the blue forms and put them into a jar
 - Label the jar with one of the 'Devon Carers' emergency stickers
 - Put the jar into the fridge inside the door
 - Put another emergency sticker on the outside door of the fridge
 - Put the last sticker on the inside of the front door of your house so medical professionals know where to look and find your emergency plan
- Step Two:**
- Complete the red forms (Emergency Plan Step Two)
 - Send the completed red forms (Emergency Plan Step Two) to Devon Carers in the freepost envelope provided
- Step Three:**
- If you would like a more detailed emergency plan than the 'Simple Plan' provided in **Step One** then **tick here to** request an 'Emergency Plan Extension' from Devon Carers

Next Steps

Alert Card

Once you've posted your emergency plan, you will receive your Alert Card in the post. The Alert Card should be kept in your wallet or purse so that it is accessible. We also have an escalation plan that you can request from us to help plan for the future.



Privacy Statement

What information is collected for this service

When registering your emergency plan, information will be stored on a secure cloud-based database. This will include personal information about you, the person you care for and any emergency contacts and will include name, address, and contact details.

Who do we share information with?

Your information will be available to Devon Carers staff, the 24-hour support line provider (Devon Doctors) and anyone else you have indicated we should share your details with on the emergency plan, such as the local authority or GP. In certain situations we may share your information without your agreement, such as to prevent serious crime, terrorism or others being put at risk.

Keeping it up to date

In order for the emergency plan to be effective it is important to review it periodically and let us know of any changes.

How long do we hold your information?

We will hold your personal information on our systems for as long as you are registered for the service. This will extend past the point when you tell us that you are no longer a carer or no longer require our services, in order for us to meet the commissioner's requirements as legislated by the Care Act 2014 and case law.

For more details about how we use your information please refer to our website <https://devoncarers.org.uk/privacy-policy/>