Stirling & Clackmannanshire CARERS

Emergency Care Plan

Use this document to record important information that can help with continuity of care if you are not able to provide it. It should be completed, kept up to date, and stored in an easily accessible place.

Carer Details

Name			
Address			
Main Contact Number		Alternative Number	
Email Address			

Person Being Cared For

Full Name		Date of Birth	
Address			
Relationship to Carer			

Medical Details

GP Name & Surgery		GP Phone Number	
Diagnosed Conditions			
Allergies/Sensitivities			

Medication Details

Medication Name	Dosage	When to take	How to take	Adminstered by	Storage	Notes

Attach additional sheet if needed

Care Needs

Mobility	
Eating & Drinking	
Toileting & Hygiene	
Communication	

Daily Routine

Morning	Afternoon	Evening	Night

Emergency Contacts

Primary Contact Name			
Relationship			
Main Contact Number		Alternative Number	
Secondary Contact Name			
Relationship			
Main Contact Number		Alternative Number	

Safeguarding & Risk Information

Known Risks	
Alarms or Monitoring Devices	

Advance Decisions & Legal Information

Advance Care Plan	
DNACPR	
Power of Attorney	
Location of Documents	

Additional Notes

Review Information

Date Completed	Completed By	Last Review	Next Review