

## Care and Support Emergency/Contingency Plan

**Adult Social Care: 0116 305 0004**

**Outside Office Hours: 0116 255 1606**

Name of Carer	
Date Plan made	
Name of the person you care for	
Address	
Telephone number(s)	
Medication – urgent	
Medication – non-urgent	
Ongoing treatment and medical conditions	
Doctor / Surgery contact details	
Name and contact details of the person or people who can be contacted to provide help for the person you care for	
Contact details of the organisation(s) that are paid to support the person you care for	
Who have you shared this plan with? For example family, friends and or Adult Social Care	
Other information that you think would be useful in an emergency	