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| **Person’s Name**  Click or tap here to enter text. | **ID No**  Click or tap here to enter text. |

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| **Date and Time** | Click or tap here to enter text. |
| **Care worker name** | Click or tap here to enter text. |
| **Action already taken by care worker** | **Accessed and checked all rooms  Shouted at letterbox/windows and listened  Called home phone  Called mobile  Called NOK  Spoken to neighbours  Checked/called known locations  Checked vicinity, local shops etc.**  **Saw/heard evidence of emergency and called 999 Other/Notes:**  Click or tap here to enter text. |
| **Office checklist** | **Care schedule and notes checked to ensure no error in communication or relevant info from other staff at previous visit  Check for pre-planned procedure – if so, follow.**  **Called home phone  Called mobile  Called NOK/contacts  Called neighbours  Called known locations  Checked location on tracker**  Click or tap here to enter text. |
| **Hospitals** | **Hospital Name 1 – phone number Reception XXXX XXXX A&E XXXX XXXX** Click or tap here to enter text.  **Hospital Name 2 – phone number Reception XXXX XXXX A&E XXXX XXXX** Click or tap here to enter text.  **Hospital Name 3 – phone number Reception XXXX XXXX A&E XXXX XXXX** Click or tap here to enter text. |
| **Care worker instructions given** | **Move on (by) Manager name:** Click or tap here to enter text. **At time:** Click or tap here to enter text.  **Further local checks** **Outcome:** Click or tap here to enter text.  **Return at time:** Click or tap here to enter text. |
| **Escalation** | **NOK assumed responsibility and will update Details:** Click or tap here to enter text.  **Welfare check by police/other professional requested Details:** Click or tap here to enter text.  **Other Details:** Click or tap here to enter text. |
| **Outcome** | Click or tap here to enter text. |
| **Notifications** | **CQC  Social Services (routine)  Safeguarding  Other**  Click or tap here to enter text. |
| **Action to be taken** | Click or tap here to enter text. |

***Ensure all evidence of communication, email trails etc. and action taken is attached before filing.***

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| **Manager Signoff** | **Date**  Click or tap to enter a date. |