**Contingency Plan**

Contingency planning is a key part of any personalised care and support planning process. It is likely that you will already have covered this in your personalised care and support plan. However, it is important that you, and your staff, are prepared for this eventuality.

Here is a list of things which may become applicable. Not all of these will apply to you, but it is important that you think about each one and either discount it as not applicable to your situation or make a plan, if possible, to manage it. There may be other things you identify that you feel need to be addressed. Keep this supplementary plan with your current personalised care and support plan, if you have one, so that you can easily refer to it.

This template contains prompts to help you think about how best to complete the detail for your care and support needs. These prompts are only suggestions, you may have other questions that you will also need to think about.

| **The essential things that I need to have support with on a daily basis**  List the things included in your personalised care and support plan. This will help people coming into your home see what care and support you need. |
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# Contingency planning

| **Care and support** | **What I will do if this happens** |
| --- | --- |
| My paid care workers are sick or not able to attend, e.g. due to them self-isolating due to Covid |  |
| My unpaid care workers are sick or not able to attend |  |
| Both my paid care workers and unpaid carers are sick or not able to attend at the same time |  |
| I have specialist healthcare tasks that are usually carried out by my paid care workers or unpaid carers, who may not be available |  |
| My care needs change as a result of becoming infected with Covid-19 |  |
| My paid care worker becomes unwell while working on a shift with me |  |

# What can be done to help with the following?

| **Task** | **What can be done to help** |
| --- | --- |
| Getting routine prescription and medication supplies, including reserve supplies and rescue medication |  |
| Repair of specialist equipment, for example hoists, wheelchairs |  |
| Supplies / consumables - ensuring regular supplies are maintained and any additional supplies are accessible in a timely way |  |
| Arrangements for shielding, for example food and essentials |  |
| Plans for routine or follow-up appointments and tests, for example regular blood tests |  |

# Who can I contact in an emergency?

| **Name** | **Their relationship to me** | **Contact details (telephone, email, address)** |
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