**Confidential**

**National Safeguarding Alert Template**

This Crisis/Emergency Management Plan gives details about the patient’s usual health presentation and risks if they become unwell. Please use this information in conjunction with your assessment of the immediate situation.

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| **Patient’s personal information** | |
| Name |  |
| Date of birth |  |
| Address |  |
| Postcode |  |
| NHS number |  |
| Contact number |  |

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| **Usual Presentation and Risks (Include health and social care information)** | |
| Usual presentation including vital signs |  |
| Clinical management |  |
| Medication |  |
| Nutrition and hydration |  |
| Psychiatric |  |
| Assessment and observation plan |  |
| Risks |  |
| Advice to other professionals |  |
| CP-IS alert |  |

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| **Recommendations in the event of a crisis / emergency** |
| For further information regarding (insert patient’s name) please contact ~   1. Lead clinician’s name & number 2. Trust 24 hour contact |

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| **Parties to this confidential regional / national safeguarding alert** |
| 1. Lead clinician’s name & contact 2. Regional safeguarding lead name & contact 3. National safeguarding lead & contact |