

Someone Depends on Me



In an **emergency**

please call

01738 458065

immediately

Emergency Carers Card

This is a **Free** service for Carers

If you are the carer of someone who would be at risk if something were to happen to you or the parent of a child with complex additional support needs then the **Carers Card** could give you the peace of mind and reassurance that the person who depends on you will be looked after in an emergency situation.

If you or someone you know would like a copy of this document in another language or format, (on occasion only a summary of the document will be provided in translation), this can be arranged by contacting Kevin Heller 01738 476894

اگر آپ کے کسی جاننے والے کو اس دستاویز کی نقل کسی اور زبان یا شکل میں چاہیے تو، اس کا خلاصہ (معمولاً صرف اس کا خلاصہ ہی پیش کیا جاتا ہے) اس کا اعداد 01738 476894 سے رابطہ کر کے کیا جاسکتا ہے۔

如貴方或您的親友有需要將此文件的內容翻譯成其他語言或格式 (某些情況下，可能只會提供文件的摘要翻譯)，請聯絡 Kevin Heller 01738 476894

Kevin Heller 01738 476894

來電免費。



Carer's Emergency Card Application Form



To be completed in Block Capitals

A. Carers Details (includes parents of children with complex additional support needs)

Name _____

Address _____

Tel (including area code) _____ Home _____ Work/Mobile _____

Relationship to person cared for _____

B. Person to be cared for Details (includes children with complex additional support needs)

Title _____ Forename _____

DOB _____ Surname _____

Address _____

_____ Post Code _____

Tel (including area code) _____ Sex _____

Person to be cared for Medical Details

Relevant Medical Information _____

Doctor's Name _____

Address _____

Tel (including area code) _____

Needs of Person to be cared for

AM Needs _____

Lunchtime/PM Needs _____

Tea Time Needs _____

Tuck-In Needs _____

Overnight Needs _____

Additional Needs/Supporting Information (including communication needs) _____

_____ (Attach additional sheet if required)

Please quote my identity number which is

Registration will involve giving details of the needs of the person cared for plus two emergency keyholders and will operate through the Community Alarm 24 hours-a-day.

Once registered you will be issued with a credit sized card with your unique identification number and the emergency telephone number.

In the case of an emergency the person finding the card would phone the emergency number and quote the identity number. Staff at the Community Alarm scheme would then arrange for one of the emergency keyholders or a member of the mobile response team to visit the cared for to provide reassurance whilst they organise appropriate care as required.

If you wish to register please complete the attached form and send to:

Community Alarm Scheme
Riverview House
Friarton Road
PERTH
PH2 8DF

The information you give is only for the use of the Carers Emergency Card Scheme. For further information call **0845 3011100**



C. Emergency Keyholders Details for Cared for Person

1 Name _____ Address _____
Tel (including area code) _____
Relationship _____
Signature of person agreeing to be emergency keyholder _____
Consent Given Yes/No _____

2 Name _____ Address _____
Tel (including area code) _____
Relationship _____
Signature of person agreeing to be emergency keyholder _____
Consent Given Yes/No _____

Household Details of Cared for Person
Name of other occupants and relationship _____

I hereby give permission for Perth & Kinross Council to include me on their Carer's Emergency Card Database. I understand people having keys to my home may affect my home insurance and that it is my responsibility to check my personal details.
Signature of Cared for Person _____
(unless under 16 years)
Date _____

Signature of Carer/Parent _____
Date _____

Data Protection Act 1998 (Article 10)
The information provided by you and by relevant third parties will be used in assessing and meeting your care needs. It may include both medical and other details and may be shared with other appropriate professionals and service providers. In terms of the Data Protection Act 1998, you are entitled to know what personal information Perth & Kinross Council hold about you, on payment of a fee of £10. Applications should be made to the Executive Director of Housing & Community Care, Pullar House, 35 Kinnoull Street, PERTH PH1 5GD.

If you need help to complete this form please contact your local Social Work Services Office.

Office Use Only

Authorised by _____
Designation _____
Date _____

Carer's ID No _____
URN No _____
CHI _____