My Coronavirus (COVID-19)

Emergency Plan

This plan is for you and everyone who lives in your home. You could create one each or complete one for all the household.

Who might you need to phone in an	Doctor:					
emergency?	Pharmacy:					
Write your emergency	School:					
numbers here.	Next of	Next of Kin:				
Then make sure these	ICE Co	ontact:				
have been added to your phone(s)	NHS H	ealth Enquiries:	Cal	I 111		
YOU AND YOUR HOUSEHOLD						
Who lives with you?	vith you?					
See Page 4 For their						
emergency details section)						
Do you or anyone in your household have any dietary	Name:	e: Die		etary Requirements:		
requirements:	Name:		Die	Dietary Requirements:		
	Name:	С		lietary Requirements:		
	Name:			Dietary Requirements:		
Name				Dietary Requirements:		
Are you/is anyone you live with elderly or more at risk for any other reason?		Yes		No		
If yes - Write names and anything else that people might need to know in an emergency.		Name:		Reason:		
		Name:		Reason:		
		Name:		Reason:		
		Name:		Reason:		
		Name:		Reason:		

List any essential	Name:		Medication		Where Is it stored?	
medications you take and where your						
medication is stored.						
Do this for everyone in						
your household.						
Try to make sure that you have a couple of						
weeks supply.						
How will you get						
prescriptions if your too ill to get them						
yourself?						
Do you have children		Yes			No	
in the household	N.1					
If yes, who could help look after the kids in	Name:			Telephone:		
the day if their schools						
close or you get ill?				-		
If yes, who could help look after the kids	Name: Telephone:					
overnight?						
Do you care for an		Yes			No	
adult who lives with you?		165			NO	
If yes, who could	Name:			Telephone:		
support them in an				•		
emergency? Do you have pets in						
the household?	Yes			No		
If yes, who could look	Name			Telephone		
after your pets in an emergency						
Do you care for						
anyone who doesn't	Yes			No		
live with you? If Yes, what is their	Name:		Telephone:		Address:	
name and contact	ivanic.		reiepriorie.		Addiess.	
information						
OTHER PRACTICAL ST	UFF					
Who has your spare keys in		Name:		Telephone:		
case anyone needs to get into your house?		Name:		Telephone:		
Who could help with foo	od	Name:		Telephone:		
shopping if you get ill?	side if Brookfoot		Prookfo		ct·	
What food can you set aside, if any so you can ear for a day or two while you make longer plans?		Breakfast:			Breakfast:	
		Lunch:		Lunch:		
		Dinner:		Dinner:		
Could anyone help with travel/lifts if really need		Name:		Telephone:		
Is there anything else ye						
need to plan?						

FRIENDS AND NETWORK		
Who have you spoken to about your plan? Emergency plans are best		
when shared!		
Are you listed on anyone else's plan? Write their name here:		
HOME COMFORTS		
Here note down anything you know comforts you or makes you feel abit better when you are ill		
(example: drinking water, sleeping or listening to music. Do this for everyone in your household)		

Others in Your Household:

If different to your own details. Who do others in your household need to contact in the case of emergency?

Make sure these contact details are in each person's phone(s)

Name:	Doctor:	
	Pharmacy:	
	School:	
	Next of Kin:	
	Others:	
Name:	Doctor:	
	Pharmacy:	
	School:	
	Next of Kin:	
	Others:	
Name:	Doctor:	
	Pharmacy:	
	School:	
	Next of Kin:	
	Others:	
Name:	Doctor:	
	Pharmacy:	
	School:	
	Next of Kin:	
	Others:	
Name:	Doctor:	
	Pharmacy:	
	School:	
	Next of Kin:	
	Others:	
		<u> </u>

Symptom Tracker:

In the case that you or anyone in your household start to show signs of the coronavirus here is a space to keep track of when the symptoms started, what symptoms you had and a space to write down your isolation period start and finish date. Isolation periods should be 14 days in total.

Symptoms include: High Temperature/Fever, Dry Cough, A Shortness of Breath And Body Aches.

Name	Start date of symptoms	What were the symptoms	Finish date of isolation period (14 days after start of symptoms)	How are you feeling after the 14 days of isolation? If it continues call 111	