

## E4 Emergency File / Box Contents List – Appendix 4

EMERGENCY FILE	OA Day Services (stand alone)	OA Day Services within a residential	OA Residential Services	DMH Day Services	DMH Supported Living Services	Shared Lives Services	Extra Care Housing Service
Your Local Plan (Updated / reviewed yearly)	✓		✓	√	✓	N/A	✓
The details of your evacuation location(s) and key holders. (Appendix 5a & 5b)	~	home (as		✓	✓	N/A	~
Floor plan of the building	✓	residential)	✓	✓	✓	N/A	$\checkmark$
On call rota and contact details	✓	N/A	✓	✓	✓	N/A	✓
Contact details for all staff e.g., S4 Sheet, cardex, file	~	✓	✓	✓	✓	✓	✓
Service user details e.g., cardex or DMH grab sheet.	~	✓	N/A	✓	✓	✓	√
Two copies of the personal emergency evacuation spreadsheet service users (F5 Appendix E section 5)	N/A	N/A	~	N/A	N/A	N/A	N/A
The Adult Services / Corporate Contingency Plan.	~	As per residential	~	~	~	~	~
EMERGENCY BOX							
Handheld torches / lantern torches	✓		✓	~	✓	~	√
Spare batteries if required	~		✓	√	✓	✓	✓
Standard plug-in phone (in case the electricity goes off)	~	1.	✓	✓	✓	✓	✓
Notebook	~	As per	✓	✓	✓	✓	✓
Pens / pencils	~	residential box	~	✓	✓	✓	√
Glove / aprons	√ 500		~	✓	✓	✓	$\checkmark$
Hand gel	~	1	~	✓	✓	✓	$\checkmark$
Wristbands (to be kept blank until needed)	N/A	1	✓	✓	N/A	N/A	✓

Extra Care	Support at	OA Day	Residential	DMH Day	DMH	Community	Shared Lives
Housing	Home	Services	Services	Services	Supported	Equipment	Service
Servce ✓	Service	~	√	✓	Living Services	Services X	