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Ambulance (Life Threatening)	GP, Nurse, Allied Health, Pharmacy (Non- Life Threatening)	Police matter	Family matter	Additional information
<ol> <li>000</li> <li>Dr/ Nurse on Call</li> <li>NOK/ Emergency contact</li> <li>Care Manager / HCP provider</li> <li>Incident Report</li> <li>Further notification might include:</li> <li>Health care team</li> <li>Support workers</li> </ol>	<ol> <li>NOK/ Emergency contact</li> <li>Medical professional team/Dr or Nurse on Call</li> <li>Care Manager / HCP provider</li> <li>Incident Report</li> <li>Further notification might include:</li> <li>Ambulance</li> <li>Elder Abuse</li> <li>SIRS</li> </ol>	<ol> <li>000</li> <li>NOK/ Emergency contact</li> <li>Care Manager /HCP provider</li> <li>Incident Report</li> <li>Further notification might include:</li> <li>Elder Abuse</li> <li>OPAN</li> <li>SIRS</li> </ol>	<ol> <li>Care Manager /HCP provider</li> <li>NOK/ Emergency contact</li> <li>Further notification might include: Incident Report</li> <li>Elder Abuse</li> <li>OPAN</li> <li>State Guardianship</li> </ol>	<ul> <li>This items listed are examples only, it is not a complete list.</li> <li>Events can move from one column to another depending on the severity. For example, it might be appropriate to see a GP for dehydration, however if it is severe, it would be more appropriate to call an ambulance.</li> <li>Groups or individuals not listed in the communicate chain might need to be involved depending on the circumstance of the event. For example, Guardianship might be sought for a client who is no longer able to make decisions for themselves.</li> <li>It is recommended that all carers, both formal and informal should be first aid trained and have adequate first aid supplies available.</li> </ul>
No Pulse Blocked airway/ choking Stroke Major blood loss Loss of consciousness/ collapse Chest pain Respiratory Distress Suspected overdose/ poisoning Acute mental health episode including convulsion/fitting Suspected Fractures or major injury Severe burns or scalds Cyanosis Drowning Severe allergic reaction	<ul> <li>Fall with head strike or injury</li> <li>Medication management concerns</li> <li>Pressure injury</li> <li>Slow to heal wounds</li> <li>Unexplained cuts/wounds/bruising</li> <li>Lacerations</li> <li>Suspected infection</li> <li>Urinary Tract Infection (UTI)</li> <li>Dehydration</li> <li>Dysphagia/ dysphasia</li> <li>Weight loss /Loss of appetite</li> <li>New and/or untreated incontinence</li> <li>Constipation</li> <li>Increased confusion/ cognitive</li> <li>decline</li> <li>Unexplained persistent pain</li> <li>Unresolved pain</li> <li>Minor allergic reactions</li> <li>Coughing at mealtimes</li> <li>Disturbed sleep</li> </ul>	Missing from care Elder Abuse Welfare checks Dangerous behaviour/ behavioral management Carer fearing for safety Suspected Abuse Family Violence Drug or alcohol influence posing a risk	Unmet needs – electricity, food, clothes, basic needs Items gone missing – bank card, phone, belongings Grief Transport needs Voicing loneliness Faulty equipment Missed care Dental issues Refusal of care Driving safety Declining cognition Signs of deterioration or change	

Dental issues