# Appendix K - Care Group Daily Sitrep Template

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| Care Group Details |
| Care Group: | Date: |
| Name & Role: | Time: |
| Telephone: |  |
| Email: |  |
| * Form to be completed daily by Care Group Silver Commands
* Care Group to send forms to rdash.emergencyplanning@nhs.net by 1030am
* Please complete all fields. If there is nothing to report, or the information request is not applicable, please insert NIL or N/A.
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| SITREP |
| Operational Issues  |
| Are you experiencing any **serious** operational difficulties (e.g. service closure)? Y/N (If yes, please provide details) |  |
| Do you have any issues you wish to escalate? |  |
| Patient Related Issues. Please detail:* Inpatient constraints (i.e. closed beds)
* Patients to come in who cannot be accepted immediately and why
* Surge in demand
* Community pressures
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| Staffing Issues. Please detail* Teams with high absence rates impacting on service delivery
* Individual staffing concerns
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| Partner Agency/Locality Issues. Please detail:* All DToCs
* Interface issues
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| Support Services Issues (i.e. domestic, IT, estates etc) |  |