**渋谷区個別避難計画書**

**別記第３号様式（第４条関係）**

**（宛先）渋谷区長**

**作成日：　　年　　　月　　　日　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　記入者：**

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| **１　本人情報** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **フリガナ** |  | | | | | | | | | | | | **性別** | | |  | | | | **生年**  **月日** | | | | |  | | | | | | | |
| **氏名** |  | | | | | | | | | | | |
| **住所** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **電話** | **自宅 ：** |  | | | | | | | | | | | **携帯 ：** | | | |  | | | | | | | | | | | | | | | |
| **心身等の情報** | **障害者**  **手帳** | **□** | **身体** | | | | | **□** | **知的** | | | | **□** | **精神** | | | | | | | **□** | | | **その他** | | | | | | | | |
|  | **（** |  | | **）級** | |  | **（** |  | | **）級** |  | **（** |  | | | **）級** | | |  | | | **（** | |  | | | | | | **）** |
| **介護**  **認定** | **要支援** | | | **□** | | **１** | **□** | **２** |  | **要介護** | | | **□** | | **１** | | | **□** | | | | **２** | | | **□** | **３** | **□** | **４** | **□** | **５** | |
| **障がい者サポートカードの所持の有無** | | | | | | | | | | | | **□** | | | **有** | | | | | | **□** | | | | **無** | | | | | | |
| **セーフティ見守りサポート事業への登録** | | | | | | | | | | | | **□** | | | **有** | | | | | | **□** | | | | **無** | | | | | | |

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| **２　世帯情報** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **世帯の構成** | **□** | **ひとり暮らし** | | | | | **□** | | | **同居人あり** | | | | | | **全員６５歳以上か。** | | | | | | | | | **□** | | | | **はい** | | | | **□** | | | **いいえ** | | |
| **ペット** | **□** | **いる** | | | | | **□** | | | **いない** | | | | | | **種類　：** | | | |  | | | | | | | | | | | | | | | | | | |
| **世帯構成員** | **氏名** | |  | | | | | | | | | | | | | | | | | | | | **続柄** | | | | | |  | | | | | | | | | |
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| **居住環境** | **建物** | | **□** | | **戸建て** | | | | **□** | | | | **集合住宅** | | | | | **□** | **その他** | | | | **（** | | |  | | | | | | | | | | | **）** | |
| **構造** | | **□** | | **木造** | | | | **□** | | | | **鉄筋・鉄構造** | | | | | | **エレベーター** | | | | **□** | | | | **有** | | | | | | | **□** | **無** | | | |
| **居住階** | |  | | | **階建ての** | | | | | |  | | | **階** | | | | | | | | | | | | | | | | | | | | | | | |
| **避難先** | **地震** | | **一時集合**  **場所** | | | | |  | | | | | | | | | **避難場所** | | | |  | | | | | | | **避難所** | | | |  | | | | | | |
| **風水害** | | **□** | **在宅避難** | | | | | | | **□** | | | **近隣の自主避難施設** | | | | | | | | **□** | | **その他** | | | | | | **（** |  | | | | | | | **）** |

**▲避難先は在宅避難、親戚・知人宅、ホテル等も含めて検討してください。**

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| **３　緊急連絡先** | | | | | | | | | |
| **①** | **フリガナ** |  | **本人との**  **関係** |  | | **電話** | |  | |
| **氏名** |  |
| **住所** |  | | | | | | | |
| **②** | **フリガナ** |  | **本人との関係** | |  | | **電話** | |  |
| **氏名** |  |
| **住所** |  | | | | | | | |

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| **４　避難の支援をしてくれる方** | | | | | | | | | | |
| **①** | **フリガナ** |  | | **本人との**  **関係** | |  | **電話** | |  | |
| **氏名** |  | |
| **住所** |  | | | | | | | | |
| **②** | **フリガナ** |  | **本人との**  **関係** | |  | | | **電話** | |  |
| **氏名** |  |
| **住所** |  | | | | | | | | |

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| **５　避難の支援方法** | | | | | | | | | | | | |
| **介助の**  **必要性** | **□** | **介助不要** | **□** | **一部介助が必要** | | | **□** | **全介助が必要** | | | | |
| **避難手段** | **□** | **徒歩・** | **□** | **車いす** | **□** | **タクシー（介護タクシー等含む）** | | | **□** | **その他** | | |
| **交通機関** |  | **施設バス** | | | **（** |  | **）** |
| **具体的な**  **支援方法** |  | | | | | | | | | | | |
| **避難時の**  **留意事項** |  | | | | | | | | | | | |
| **避難時の**  **持ち物** |  | | | | | | | | | | | |

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| **６　避難先での生活支援方法** | | | | | | | |
| **避難先への同行者** | **フリガナ** |  | | **本人との**  **関係** |  | **電話** |  |
| **氏名** |  | |
| **住所** |  | | | | | |
| **避難先での支援**  **（該当があれば避難先の支援者に申し出る）**  **※詳細は特記事項に記載** | | **□** | **排泄、食事、着替え等において介助を要する。** | | | | |
| **□** | **集団生活が難しく、個室等の落ち着けるスペースが必要** | | | | |
| **□** | **情報収集・コミュニケーションに困難を伴うので、支援が必要** | | | | |
| **□** | **その他、避難生活時に不安なことがある。** | | | | |

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| **７　支援関係者（計画作成者）** | | | | | | |
| **自主防災組織** |  | |  | |  | |
| **民生委員** |  | | | |  | |
| **地域包括支援センター** |  | | | **見守りサポート**  **協力員** | |  |
| **担当ケアマネジャー・**  **相談支援専門員** | **事業所名** |  | | **担当者** | |  |

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| **８　特記事項** |
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| **※普段使っている福祉・介護サービスの内容、避難所で支援してほしいこと（情報伝達の仕方・移動の支援・避難所でのケア）、かかりつけ医療期間・医師、治療中の病気、服用薬・服用上の注意などがあればここに記載してください。** |