

Keysafe Access Form

When a 999 call is received our team within the Ambulance Operations Centre (AOC) will use our Computer Aided Dispatch (CAD) system to process the call. Within the CAD system we have the ability to add a flag to an address. When a 999 call is received for that address, our call handler is then alerted that a flag has been placed on the address and this information is then passed to the attending crews.

This form should be completed to request that a Key Safe or Access Code Flag is to be added to our CAD system. It must be completed by the patient, building owner or someone acting on behalf of the patient with their consent.

We will review the request and if accepted, the flag will be retained on the property for three years before being removed. If you require the flag to be removed before this time or have any amendments, such as a change of address or change of code, please resubmit this form with the new information. When the three years have expired, you will need to reapply for the flag.

- We must remind you that it is your responsibility to inform us of any changes to the flag.
- Requests can take up to 14 working days to be amended on the CAD system.
- EEAST cannot be held responsible for any incorrect information given.
- In the event of a life-threatening emergency, force may be used to gain entry to a property where the information is incorrect or the access instructions are not concise.

The provided information will be stored on our Computer Aided Dispatch (CAD) system, the information will be visible to ambulance crews, first responders, control room staff and may be shared with other emergency services. This flag will be stored on our CAD system until requested to be removed or 3 years have expired. It is your responsibility to update us of any changes in information or to request the flag to be removed. If there is a query about the information we will contact you. If we do not receive a response back within 30 days, the flag will be removed.





☐ Is this a new flag?			
☐ Is this a change of information?			
☐ Is this a move of address?			
☐ Is this a request to remove?			
Personal information (of the person completing this form):			
Full name of requestee:			
Email address:			
Telephone number:			
Locations of keysafe:			
Keysafe number:			
Address line 1:			
Address line 2:			
Town:			
Region:			
Postcode:			
Country:			





Patient Information Patient's full name: Patient's date of birth: Patient's telephone: Patient's email address Does the patient give consent for us to store and share this information? (If the patient is unable to give consent, please ensure you are able to give consent.	Additional information relating to access: (e.g. locations to the keysafe):
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their behalf).	
☐ Yes ☐ No ☐ Unable to consent	☐ Yes ☐ No ☐ Unable to consent
their behalf).	





If unable to consent, please explain why:	

Signature of patient (or requestee if the patient is unable to consent)

Please return the form either by email to cadflags@eastamb.nhs.uk or by post to:

CAD Markers
East of England Ambulance Service NHS Trust
Bedford Office
Hammond Road
Bedford
MK41 ORG

