

Are you a Carer?

Do you look after a relative, friend or neighbour who is ill, frail, disabled, has a mental health concern or problematic substance use and who could not manage without your help? If so, then you are a Carer and there are a number of ways you can get help and support. The first step is to take a few moments to read this note and complete the form on the reverse of this sheet.

Why you should complete the Carer Registration Form

Your surgery is part of the Investors in Carers (IiC) scheme aimed at making sure Carers receive recognition of their caring role and information on the support available to them. You should have been given a copy of the Investors in Carers leaflet along with this registration form. The leaflet provides more detail on the benefits of registering as a Carer.

By completing Section A of the form, the surgery will record you as a Carer on your patient record.

Section B refers to the support that is available to Carers through the Carmarthenshire Carers Information service (CCIS). This may include:

- An appointment with the Carers Outreach Worker, who can meet you in your own home, or at a preferred location. They provide a *listening ear* and can help you to prioritise your needs and better manage the impact of your caring role.
- The Carmarthenshire Carers Information Pack contains information on a range of topics such as practical help, benefits and legal matters. It also includes contact details for other organisations that may be able to offer support for you and/or the person you care for.
- The Carmarthenshire Carers News, a free quarterly newsletter packed with information about services, details of events and issues that concern Carers and the person they care for.
- If someone else helps you with your caring role you may be asked if they also wish to be contacted to access help and support (e.g by the Young Adult Carers project for 16-25 year olds).

For further information please contact the Carers Information Service on **0300 0200 002** or email **info@carmarthenshirecarers.org.uk**.

Carers providing or intending to provide care for someone can request a Carers Assessment from social care. To request a Carers Assessment, please contact Careline on 01267 224466.

What happens when you hand the completed form back to a member of surgery staff?

Once a member of staff from the surgery has checked that you have completed Sections A and/or B, you will be asked to sign the bottom of the form. The member of staff will also sign the form.

The Surgery will then add your Carer details to its database so that all staff know that you are a Carer and should receive appropriate advice and support.

If you have indicated that you wish to receive further information your details will be forwarded as appropriate. **Once entered on the relevant database/s (either the surgery and/or CCIS) the personal information provided will only be used for the purposes detailed above.**

Name of Surgery:

CARERS REGISTRATION/REFERRAL FORM



Investors in Carers - Carmarthenshire

Please read the Explanatory Note on the other side of this form before completing sections A and/or B. If you need help filling in this form a member of Surgery staff will be happy to assist.

A **Welsh language** version and a large print version are available on request.

Section A – Informing your surgery that you are a Carer

Your Details:	
Name: (Mr / Mrs / Miss / Ms)	M / F
Address:	
Post code:	D.o.B:
Telephone:	Mobile:
E-mail:	
Nature of Illness/disability/condition of the person you care for:	

Section B – Receiving further information

Would you like to find out what help and support is available through the Carmarthenshire Carers Information Service (CCIS)? Please see overleaf for more information.	YES / NO
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How would you say you are currently coping with your caring role? (please tick)

Coping well	Just managing	Really struggling	At crisis point
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Signed: **(Carer)** **Date:**

(Please note that by signing this form you consent to having your 'Carer' details added to your surgery patient record and forwarded to the CCIS if you have circled Yes in section B.)

For surgery staff member only:

I confirm that I have checked the information above, that the carer understands the explanatory notes, and has signed the form.

Name & signature: **Date:**

Once Sections A & B have been completed and signed **please either send to:**
Carers Information Service, The Palms Unit 3, 96 Queen Victoria Rd, Llanelli, Carmarthenshire SA15 2TH,
or email to info@carmarthenshirecarers.org.uk **within 5 working days.**

If you have any questions about this form, please contact the Carers Information Service on 0300 0200 002.

