

Do you look after someone?

Could they manage without your help?

Do you provide unpaid care to a friend, neighbour, or family member who couldn't manage without your help?

Do they need your help because they are frail, elderly, have a physical illness, suffer with mental health issues or have an addiction to drugs or alcohol?

If the answer is yes to either, or both, of the questions above, it is extremely likely that you are a Carer, whether you were aware of it or not.

If you do look after someone do you realise you can register with your GP as a Carer if you are providing this support on a regular basis. If your GP surgery is aware that you are a Carer they can monitor how caring may be affecting your health or emotional wellbeing and signpost you to additional support.

You do not need to be living with the person you look after to be registered as a Carer.

If you would like to be registered then please complete this form and return to your GP practice.



It would be helpful if you could complete this Checklist as it will show exactly what you are doing for the person you support.

Support with	Yes	No	How often
Personal Care:			Daily
Do you help with Washing, Dressing			Weekly
Toileting as examples?			Monthly
			Less frequently
Domestic support			Daily
Do you help with Cooking,			Weekly
Housework, Shopping as examples?			Monthly
			Less frequently
Physical Care			Daily
Do you help with Helping someone			Weekly
who has problems with their			Monthly
mobility?			Less frequently
Financial Support			Daily
Do you help with banking or paying			Weekly
bills as examples?			Monthly
			Less frequently
Health Care			Daily
Do you have to speak to health			Weekly
professionals, attend appointments,			Monthly Less frequently
order or collect medication for the			Less nequently
person you support?			De 1
Emotional Support			Daily
Do you provide support by being a			Weekly
listening ear or keeping them			Monthly Less frequently
company as an example?			
Communication support			Daily
Do you have to translate for the			Weekly
person you support?			Monthly
Do they have a sensory impairment?			Less frequently
Do you have to help them with reading/writing			
			Is this
Other support.			Daily
Please tell us about other			Weekly
support you provide.			Monthly
			Less frequently?
			Less rrequently:
		1	



Carer Registration form

To the Practice Manager [or relevant lead] at

Practice,

I am writing to request that I am registered as an unpaid carer.

My details are as follows:

Name	
Date of birth	
NHS Number (if known)	
Address	
Postcode	
Preferred contact	
number	
Email address	
Your relationship to	
the person you	
support	

The details of the person I support are:

(Please leave blank if person you care for does not provide written consent for their details to be shared)

Name	
Date of birth	
NHS Number (if known)	
Address	
Postcode	

Signature of Carer

Date:

I confirm that the person above does provide support to me and I consent to my details being shared

Signature of Person I support



Date: