

## Next steps

Please ask to be given 'The Guide on Carers Support in Surrey' and take a look at your surgery's Carers Resource File. If you feel that your health is suffering due to looking after someone, please make an appointment to see your doctor.

## Organisations who can help

Surrey County Council Social Care and Health Team  
**0300 200 1005** please select adult social care from the available options  
**surreycc.gov.uk**

Local Carers Support Organisation  
For details please go to **surreyinformationpoint.org.uk**  
For more information visit  
**actionforcarers.org.uk**

### Consent to Share Data

By filling in this form I consent to information about me being shared with other people and voluntary organisations that support me now or may do so in the future. (These may include: Carer Support Workers, GPs and Health Professionals.)

Your surgery will ensure that all personal data you provide in this form will be kept secure and processed only in accordance with the requirements of the Data Protection Act 1998. Please contact your surgery should you have any queries.



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# Do you look after someone who could not manage without you?

Many people look after friends or relations who need support due to frailty, disability or a serious health condition, mental ill health or substance misuse. If you're one of them, you could get help and support, but first we need to know who you are and about your caring role. Just take a moment to fill out this form and hand it in to your surgery receptionist.

## Tell us about yourself

Your first names

Your surname

Your home address

Your age

Your doctor's name

Your surgery name

Your date of birth

Your email address

Your mobile number

Your home number

## Tell us more about your caring role

How does your caring role affect your life?

What is the nature of the condition you care for?

- Please tick this box if you wish to have a carers assessment with Surrey County Council Social Care.

### **Carers Support offer FREE independent advice for carers**

- Please tick this box if you wish to be referred to Carers Support.

- Please tick this box if you wish to be referred to Surrey Young Carers (If you are under 18).

You can tick more than one

Your signature  
and today's date

Please note: Completing this form does not automatically entitle you to have access to the medical records of the person you are caring for. Check your surgery policy regarding this.

**All done? Then just hand or post this completed form to the receptionist at your doctor's surgery.**