Unpaid Carer Registration Form

Does someone at home or in the community rely on you to help them get by? If so, you may be an unpaid carer and have a right to access support for yourself. Telling your GP about your caring role can help make sure you get the support and help you need. Please fill in the form below and return it to reception to notify us you are a carer for someone.

If your caring situation changes in the future, please make the surgery aware.

For Patients

Please fill in the details below if you would like your unpaid carer status to be recorded in your medical records and your name added to the practice's Carers Register. If the patient with an unpaid caring role is under 16, this form should be completed by their parent/ guardian.

Carer Details

* Indicates required field

| Full name* | |
|---|--|
| DOB* | |
| NHS Number (if known) | |
| Address | |
| Telephone number | |
| Email address | |
| Date* | |
| Patient signature* | |
| (If above patient is under 16, parental/ guardian signature) | |



Please tick here and complete the fields overleaf if you would like your details passed on to local unpaid carers support charity, The Carers Centre for Brighton & Hove.

| Relationship to the cared-for person | |
|--------------------------------------|--|
| Age of the cared-for person | |
| Conditions of the cared-for person | |

For practice staff

Please see that the above patient is coded as a carer on their clinical records using one of the following SNOMED CT codes for unpaid carers. These codes apply to both young and adult carers. Either code will identify the patient as a carer but please ensure the same code is used consistently across the practice.

224484003 Patient themselves provides care 302767002 Patient cares for a relative

If the patient has consented for their information to be shared with The Carers Centre for Brighton & Hove, please send their details on to carers.hub@nhs.net