

SELF ASSESSMENT – Section 18

It would assist the Medway Carers Centre greatly, if you would fill in this self-assessment form and return it to the address overleaf.

Data Protection Information

If you request to go on our mailing list, information will go onto a computer database. This may be only your name, address and phone number, if that is what you wish. However, we can hold other information about you as a family carer, enabling us to pass on statistics to interested and legitimate parties, e.g. our funders and Social Services.

The information they receive is numbers and statistics only, Names and Addresses are entirely confidential and kept within the confines of the Princess Royal Trust Medway Carers Centre Confidentiality Policy. Sometimes, as an individual Carer, when you are requesting us to liaise with other services etc., we need to give information about you. In this instance it is only with your express permission to do so, whether verbal or written. The statistics given enable agencies such as Medway Council to plan services for the future and to build up an accurate picture of Carers in Medway.

Name of Carer..... Date

Address
.....

Age D.O.B..... Tel No

Email Address:.....

Name of person who is being Cared for
.....

Relationship i.e. Husband/Wife/Partner/Son/Daughter/Parent/Friend/Other

Address if different from above
.....

Age.....D.O.B. Tel. No.

Please state disability/illness
.....

How long have you been Caring?

How is your own health?

Do you care for anybody else?

How did you hear about us?

Has the person you care for had a full Community Care Assessment? Yes/No

If so when?Where did the assessment take place?.....,.....

What is your Care Managers' Name?

.....

Does the person you care for receive any of the following Community Care Services?
(tick each service received)

Day Centre	Meals on Wheels	Home Care
Help with transport	Short breaks/respite	Telehelp Service
Telephone costs	Community Nurse	

Do you feel you need help with accessing any of the above services? Yes/No

Has the person you care for had an Occupational Therapy Assessment?

Have you had a Carers Assessment? Yes/No If so, when?

Were you happy with the Carers Assessment:.....

Where did it take place?

.....

Are you getting all you are entitled to:.....

Is the person you are caring for in receipt of any of the following (tick where appropriate)

And indicate how much:

Attendance Allowance:..... Disability Living Allowance:.....

Housing Benefit:..... Income Support:.....

Council tax exemption/reduction:..... Minimum Income Guarantee:.....

If you are below pensionable age are you working? Yes/No

Do you receive a Carers Allowance? Yes/No

For Monitoring Purposes, could you kindly state the group with which you identify

White British () Asian () Jewish () Afro Caribbean () Other European ()

Somalian () Chinese () Other please specify.

Is your main language English? If not, please specify:.....

Name and Address of your GP

.....
.....

Please tick if appropriate

I would like to speak to a Carers Support worker

I would like to be put on a mailing list for a newsletter

Please use the space below to make any comments or requests.

This information package was correct at the time of production. We cannot accept any responsibility for changes made since that time. The Information pack is up-dated on a regular basis.

For further details on the Carers Centre services and activities please contact:

The Princess Royal Trust, Medway Carers Centre

3 Canterbury Street, Gillingham, Kent, ME7 5TP Tel: 01634 577340