

Connecting Carers and Carers Emergency Card

Take the first step to getting connected in South Gloucestershire



Groups & Activities

Peace of mind when you're out and about

Staying in Touch

Where to get Help & Support

Connecting Carers in South Gloucestershire

A carer is someone who provides support to family or friends who could not manage without them. If you look after someone who relies on you to help them live as independently as possible, then you are a carer. Carers Support Centre can put you in touch with other organisations, activities, other carers and services that may interest or benefit you as a carer. Anyone can become a carer and we know that every carer's situation is different. For you, it may have taken some time to realise you are a carer. The sooner we can identify carers the better, so that we can help you find the support that will benefit you the most.

Why apply to Connecting Carers?

Connecting Carers is a free, voluntary and independent register for carers who live in South Gloucestershire or care for someone who lives in South Gloucestershire. We can provide a range of information about practical services for carers, including the Carers Emergency Card, confidential telephone helpline, one to one support, training, sitting services and carers support groups.

What happens to your information:

The information you give will be held securely and won't be passed to any other organisation without your consent. We do ask for surgery details. If you agree, we will let your GP surgery know that you are a carer. This means that your GP surgery will be able to make sure you are looking after your own health.

What is a Carers Emergency Card:

If the person you care for lives in South Gloucestershire (this means they pay their council tax to South Gloucestershire Council) you may want to apply for a Carers Emergency Card. This is a free service and gives peace of mind to carers when they are out and about. Carers carry a card which identifies them as a carer and has a personal identification number. If a carer is taken seriously ill or has an accident/emergency, dialling the telephone number on the card lets a 24 hour Emergency Call Centre know that the person they care for needs help.

If the person you care for pays council tax to Bristol City Council you will need a Bristol card. For a Bristol card call Care Direct on **0117 922 2700**.

How does it work?

Carers carry a card which shows their name and unique identification number. In the event of an emergency the telephone number on the front of the card can be called to trigger the emergency response. The Emergency Call Centre take the call and contact the people you have given as emergency contacts. If there are no emergency contacts, or they are not available to help, key information is then passed onto the Rapid Response Team, operated by South Gloucestershire Council.

What to do next:

If you want to join our register, apply for a Carers Emergency Card and receive information from us, please fill in the Connecting Carers Application form **and** the Carers Emergency Card form.

Send the form back to:

FREEPOST RSSU-EZEA-JLLR
Carers Support Centre
The Vassall Centre
Gill Avenue
Fishponds
Bristol BS16 2QQ

We will then send you an information pack and your Carers Emergency Card (if you have applied for one). We will keep you updated on a regular basis through a newsletter. We will also let you know about any consultations and planned strategies or policy changes in relation to carers. Wherever possible we would like to make use of email for sending our newsletters and other communications. If possible please provide your email address as this will help to reduce our postage.

What if you need help?

If you want help filling in this form, or need information in a different format/ language, please contact us.

Connecting Carers Application Form

Please complete in black pen.

Title: (Mr/Mrs/Miss/Ms)	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
Full name:	
Date of birth:	
Full address and postcode:	
Contact details:	Home phone:
	Mobile phone:
	Work phone:
	Email:
GP's surgery name:	
I am happy for my GP to be informed that I am a carer:	Yes <input type="checkbox"/> No <input type="checkbox"/>

I understand that the data I provide will only be used by the provider(s) responsible for maintaining Connecting Carers. Please tick.

Disability and Communication Needs

Please tell us about any disability, communication or language needs **you** have and how this affects you?

An interpreter can be arranged to help people who require assistance in written or spoken communications. Please describe your needs.

The person **I care for** has these difficulties/disabilities:

(Please tick all that apply)

Physical disability Hearing loss Sight loss Mental Health
 Learning Difficulty Elderly frail Long term illness Dementia
 Substance misuse Other (please specify)

What main illness/condition does the person **you care for** have?

Help us tailor and monitor Carers' Services

Please answer the following optional questions about yourself. The information you supply will help us to better understand the needs of all carers so that we can tailor our support to you. We will also use this information to monitor the services we provide. Responses to these questions will remain confidential. Individuals will not be identified and personal details will not be published.

What is your ethnicity?

Please tick one only

I am White

- English/Welsh/Scottish/N Irish/British
- Irish
- Other White group (please specify)

I am of Mixed Ethnic Origin

- White and Asian
- White and Black African
- White and Black Caribbean
- Other mixed group (please specify)

I am Asian or Asian British

- Bangladeshi
- Indian
- Pakistani
- Other Asian group (please specify)

I am Black or Black British

- African
- Caribbean
- Other Black group (please specify)

I am Chinese

- Chinese
- Other Ethnic group (please specify)

I am a Gypsy/traveller

- Irish heritage
- Other (please specify)

What is your religion/belief?

Please tick one only

- Buddhist
- Christian
- Hindu
- Jewish
- Muslim
- Sikh
- No religion
- Prefer not to say
- Any other religion (please specify)

What is your sexual orientation?

Please tick one only

- Bisexual
- Gay man
- Gay woman/lesbian
- Heterosexual
- Other/prefer not to say

Do you identify as a transgender person?

- Yes
- No
- Prefer not to say

On average, how many hours a week do you help the person you care for?

- Less than 50 hours
- More than 50 hours

South Gloucestershire Carers Emergency Card

Carers Emergency Card application

To join this service the person you care for must live in South Gloucestershire (this means they pay their council tax to South Gloucestershire Council).

We need to ask you some additional questions about the person you care for and about access to their home. This information will be passed to the Emergency Call Centre and held securely by them. In the case of an emergency it will be passed to South Gloucestershire Council's Rapid Response Team if necessary. The information you supply is only used for this scheme.

First of all you need to decide who will be an emergency contact and/or keyholder. You need to let them know you are giving their details to us. You also need to tell the person you care for that you will be carrying an emergency card and what this means.

Please note that Carers Support Centre and the Rapid Response Team cannot be responsible for damage to the property if access is not available and emergency services need to gain access.

Filling in the form

Please complete **all** the questions on **both** of the forms and make sure you sign it.

Who is an emergency contact?

On page 7 we ask you to give details of 2 emergency contacts if you can. A contact is a person (not the carer themselves) who can be called in an emergency. They should be someone who may be able to take over some of the caring role for the person you care for. The emergency contact is the person who will be contacted **first**. If you do not have any emergency contacts, you can still register for a Carers Emergency Card.

Who is a keyholder?

On page 7 we ask you to give us details of 2 keyholders if you can. A keyholder is a person (other than you or your partner) who has a set

of keys to the cared for person's property and lives locally. This could be a neighbour, friend or relative at a different address.

In an emergency, the keyholder will **only** be asked to provide a key if access is required.

They will not be expected to carry out any care unless you have told us they are also an emergency contact. We do require at least 1 local keyholder to process your card or you may want to consider having a key safe fitted.

What is a keysafe?

A keysafe is a small, secure box usually attached to the outside wall of a property – in this case the home of the person you care for. You can safely leave a spare set of keys in the key safe. A keysafe number is then used to gain access to the keys.

For security reasons, please **do not** write your keysafe number on this registration form. Before posting your form back phone: **0117 958 9907** at Carers Support Centre, leaving your name and keysafe number only.

What if I care for more than one person?

If you care for more than one person, please complete a form for each person. You can get an extra form by contacting Carers Line on: **0117 965 2200**.

If you are completing more than one form please return them in the same envelope.



Details of the person you care for

Title: (Mr/Mrs/Miss/Ms)	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say <input type="checkbox"/>
Full name:	
Date of birth:	
Full address and postcode:	
Telephone number:	Home:
	Mobile:
	Other daytime contact: (work, college, school, day centre)
	Email:
GP's surgery name:	

The person I care for is my: (e.g. wife, son, partner, friend, neighbour)

Disability & Communication needs

Please tick anything they have difficulty with & provide brief details where necessary.

Communication	<input type="checkbox"/>	Moving around	<input type="checkbox"/>
Memory difficulties	<input type="checkbox"/>	Washing or dressing	<input type="checkbox"/>
Aggressive/Challenging behaviour	<input type="checkbox"/>	Toileting	<input type="checkbox"/>
Eating/Drinking	<input type="checkbox"/>	Allergies	<input type="checkbox"/>
Food preparation	<input type="checkbox"/>		

If you have ticked any of the boxes above please give details in the box below

Is there anything else they may need essential assistance with if you or your contacts were not there to support them?

Emergency Contact Details

Please refer to page 5 BEFORE completing

Emergency contact

Full Name:

Address:

.....

Post code:

Telephone no:

Mobile no:

Work no:

Relationship to the cared for person:

(e.g. wife, son, friend, neighbour)

.....

Also a keyholder? Yes No

Emergency contact

Full Name:

Address:

.....

Post code:

Telephone no:

Mobile no:

Work no:

Relationship to the cared for person:

(e.g. wife, son, friend, neighbour)

.....

Also a keyholder? Yes No

If neither of your Emergency Contacts are Keyholders, please provide the details of at least one local keyholder below

Keyholder 1

Full name:

Address:

.....

Post code:

Telephone no:

Mobile no:

Work no:

Keyholder 2

Full name:

Address:

.....

Post code:

Telephone no:

Mobile no:

Work no:

Keysafe

Yes No Location at property

Please **do not** write the keysafe number on this form. Before posting your form back phone **0117 958 9907** at Carers Support Centre, leaving your name and keysafe number only.

Continued overleaf

Additional Information for the Rapid Response team

If a member of the Rapid Response Team is called to the property what do they need to know? E.g. information about access to the property not previously mentioned i.e. steps, gates, pets etc.

Is there a Message in a Bottle at the property? Yes No

It is very important to let the Emergency Call Centre know if any information **including keysafe numbers** change. You can do this by calling the number on the card.

YOUR CONSENT

In the event of an emergency, I agree that the information on this form can be shared with anyone named on it, or with professionals and agencies that may need to be involved in providing emergency care.

Carer's full name (please use capital letters):

Signature: Date:

Please tell us where you heard about the Carers Emergency Card?

GP surgery South Gloucestershire Council Carers Support Centre
Hospital Other (please specify)

For office use only