



Referring to Newham Carers Community

Who are Newham Carers Community?

We are a newly commissioned service which is delivered in a partnership of *Age UK East London* as Lead, with *Subco Trust and The Renewal Programme* to provide support to carers and young carers across the borough of Newham. We offer free and confidential advice, information, activities and support to unpaid carers living or caring for someone living in Newham.

Who is a Carer?

A carer is someone of **any age**, who without payment, provides help and support to a partner, child, relative, friend or neighbour, who could not manage without their help. This could be due to age, physical or mental illness, addiction or disability.

Making a referral:

Attached is the referral form for our service for adult carers. Please complete as much information as you can as this will help when we contact the carer and avoid unnecessary repetition.

You may either post the form to us at:

If you have any questions or would like to speak to a Carers Support Worker before making a referral, please contact the team on: **020 3954 3143** or email: info@newhamcarerscommunity.org.uk

Referrers Details

Date of Referral:	
Referring Organisation:	
Name:	Job Title:
Contact Phone number:	
Contact Email:	
Has the Carers given their consent to this referral? (answer required)	

Carers Details

Name:	
Address:	
	Post code:
Telephone number: Can we leave a message?	Mobile number:
Email:	
What is the best way to make contact with the Carer?	
Does the Carer have a good understanding of written & spoken English?	
Is there anything we should be aware of when making contact?	
Equality Data <i>(please complete if you know any of the following, as this may save us asking again)</i>	
Date of Birth:	Gender:
Sexual Orientation:	Religion:
Ethnicity:	
Does the carer have a Disability? Yes / No <i>If yes, please state:</i>	

About the Cared For Person

Name:
Relationship to the Carer:
Dependent's Condition/Disability:
Has this been formally diagnosed? Yes / No <i>If not is this under investigation by a medical or mental health professional?</i>
Does the dependent live with the Carer? Yes / No <i>If no, please give address or living arrangement (e.g., residential/nursing home, own home, with another family member)</i>

Brief description of caring responsibilities

What support is the carer providing e.g., personal care, emotional support, practical support, financial/admin assistance) and how often?

Does anyone else, including paid care, provide care support and if so, who?

A description of what action your organisation is taking to assist the carer?

Have you referred/signposted the carer to another organisation? If yes, who?

Has the carer had a Carers Assessment? Yes / No / Unsure

If yes, when did they have their assessment and details of assessor?

If the carer is being referred for a carer's assessment, is there anything specific they would like for themselves or for the cared-for person?

What is the purpose of this referral to the service? (tick all applicable)

- | | | | |
|----------------------------------|--------------------------|--------------------------------|--------------------------|
| Information and advice | <input type="checkbox"/> | Emotional or Wellbeing support | <input type="checkbox"/> |
| Contact with other carers | <input type="checkbox"/> | Other (please clarify below) | <input type="checkbox"/> |
| Social/Physical Activities | <input type="checkbox"/> | | |
| Newsletter and Carer information | <input type="checkbox"/> | | |

