

GP Details (if Different to yours)

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What is your relationship to the patient?

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Are you Next of Kin? Yes / No

Are you the emergency Contact: Yes / No

Do you have permission to Discuss Medical

Records with Carer? Yes / No

How many hours of unpaid care do you
provide each week?

Are you in receipt of Carers Allowance for
providing care for the patient?

Yes / No

Would you like us to refer you to
Northamptonshire Carers? Yes / No

**Thank you for providing this
information. We will now contact the
patient and gain verbal consent to
add your details to their medical
record as their carer.**



Useful Contact Numbers and websites:

Citizens Advice: 03330383221

<https://www.cawnac.org.uk>

Mind: tel: 0300-102-1234

Carers UK: advice@carersuk.org

Carers Allowance: [Carer's Allowance:
Make a claim - GOV.UK](#)

**KINGSTHORPE MEDICAL
CENTRE
EASTERN AVENUE SOUTH
KINGSTHORPE
NORTHAMPTON
NN2 7JN**

**01604 713823 /
Kingsthorpe.K83035@nhs.net**

KINGSTHORPE MEDICAL CENTRE

Carers Leaflet



**Do you care for someone who is
ill, frail, disabled or has mental
health or substance misuse
problems? Are they dependant
on you for help with day to day
tasks and / or responsibilities of
everyday living?**

**If so, then you are a carer and
may like some support for your-
self. This leaflet will be able to
give you more information on
where to access support.**

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