



GP Practice Carer Questionnaire

The questionnaire below can be used by GP practices who want to understand the impact of caring on their patients who are carers and how they can best support them. Please feel free to edit the document and if you have any comments or suggestions as to how it can be improved then please email primarycare@carers.org

DO YOU LOOK AFTER SOMEONE WHO CAN'T GET BY WITHOUT YOUR HELP?

Please answer these questions and let us know how we can best support you as a carer.

If you are an unpaid carer who provides care and support to a partner, relative, friend or neighbour who wouldn't be able to get by on their own, we'd really appreciate your answers to the questions below. Your answers will tell us how we can best support you as a carer, both now and in the future.

Please tell us your age by ticking the box at the side of the age ranges below:-

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under 18 years		18-24 years		25-30 years		31-40 Years	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41-50 years		51-64 years		65-74 years		75 years and over	

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More about you

In addition to being a carer, are you:
(Please tick all that apply)

- At school
- At college/university
- Employed (full or part-time, including self-employed)
- Retired from paid work
- Unable to work due to long-term sickness
- Looking after home/family
- Other (please give details below)

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Whilst being a carer have you ever:

	Yes	No
• Felt that your caring role has made you ill	[]	[]
• Injured yourself when lifting or moving someone	[]	[]
• Felt stressed, anxious or depressed (or anything similar)	[]	[]
• Put off seeing your GP because you didn't have time	[]	[]
• Not taken medical treatment you should have taken	[]	[]
• Had to stop paid work so you could continue caring	[]	[]
• Felt isolated or lonely	[]	[]
• Felt it hard to leave somebody so you could attend an appointment	[]	[]
• Found it difficult to take the person you care for to the GP practice	[]	[]

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How else can we help you?

Please use the box on the right to suggest anything we could do to help you as a carer	
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Many thanks for taking the time to complete this questionnaire. Please place it in the box provided in the practice waiting room.

IMORTANT

If you haven't already let us know that you're a carer, please mention it to a member of staff at the practice so that we can make a note of it on your medical records. With your permission, we can also refer you to your local carers service for information, advice and support.

If you or the person you care for is **urgently** in need of support, please ask us to refer you to social services or call them directly without delay.