

Carer's Passport

If you are helping to look after someone else because they cannot manage by themselves then you are a carer.



We also recognise the Leicester, Leicestershire and Rutland Carer's Passport. If you hold one of these, please talk to a member of staff.

How are carers supported by this hospital?

It can be a difficult time when someone you care for is admitted to hospital. You may wish to be with your relative or friend more to continue to support them.

If you are providing a lot of care, you are also very likely to know a lot about their condition and how the person you are caring for likes to be cared for.

If you are supporting someone, then we will arrange for you to have a Carer's Passport. This has a number of benefits which will help you as a carer.

We also recognise that you might already have the Leicester, Leicestershire and Rutland Carer's Passport. If you hold one of these we will arrange for you to have a hospital Carer's Passport for the duration of their hospital stay.

To access a Leicester, Leicestershire and Rutland Carer's Passport please contact the carers service in your areas (see back of booklet for contact details).

As a Carer's Passport holder at this hospital, you can:

- Visit out of normal visiting hours
- Provide assistance with personal care, meals and drinking if you wish to
- Be actively involved in discussions about the person
- Be involved in discussion and planning for discharge from hospital
- Provide support to the person you care for when they are having tests in the hospital

During their time in hospital, your Carers Passport will entitle you to the following, if required, at the discretion of Ward Sister:

- Free / reduced car parking
- Meal voucher for use in the canteen provided by the ward
- Regular drinks whilst on the ward
- Occasionally being able to stay overnight

A Carer's Passport is an offer of support. It can be withdrawn at staff discretion or if the patient withdraws their consent.

The Carer's Passport does not affect your basic rights as a carer. At the point of hospital discharge, you have a right to be consulted as a carer and have an assessment of your needs. This is true of all carers, whether you have Carer's Passport or not.

More Information

You can request a carer's assessment by contacting one of the agencies mentioned on page 7.

For further information please see our Patient Information Leaflet 'THINK CARER?'

Consent to issue a Carer's Passport

Patient has consented to a Carer's Passport

Yes

No

Patient does not have capacity but would benefit from assistance from their carer

Yes

No

If neither of the above statements are true, then a Carer's Passport cannot be issued. If the Carer's Passport has been revoked, please give a date:

Consent authorised by:

Print Name:

Job Title:

Application Form

Signed copies should be made available for both the carer and the person's hospital records.

Patient's Name:

**By signing below, I indicate that I am aware of the terms of this scheme.
In particular:**

- I understand that the Carer's Passport can be withdrawn without notice at staff discretion or if the person withdraws their consent
- I know that I may be asked to leave for privacy reasons, when others may need rest, or to enable medical staff to carry out their duties
- I know that hygiene and infection control is important in wards and I will follow any arrangements that are in place
- I will tell staff if I'm entering or leaving the ward outside of normal visiting hours
- I understand that staff will talk to me about what is confidential and what information can be shared with me
- I will have discussion with the nurse in charge of my loved one about how involved I want to be in the persons care
- I know that the Carer's Passport is for the duration of the person's stay in hospital and will cease when they are discharged. I may be asked to complete this form again, if the person is readmitted. I understand this ensures the hospital keep up-to-date records of who is caring as this can change.

Carer's Name:

Phone Number:

Carer's Signature:

Date:

Relationship to Patient:

Passport authorised by:

Print Name:

Job Title:

Date:

Carer's Contract

To make sure that all of the care needs are met, and that everyone understands their role, please tick the boxes below of the parts of care that you would like to be involved in as a carer:

- | | |
|------------------------------|--------------------------|
| • Mouthcare / Cleaning teeth | <input type="checkbox"/> |
| • Washing and dressing | <input type="checkbox"/> |
| • Repositioning the Patient | <input type="checkbox"/> |
| • Toileting | <input type="checkbox"/> |
| • Help at mealtimes | <input type="checkbox"/> |
| • Help with drinks | <input type="checkbox"/> |
| • Making the bed | <input type="checkbox"/> |
| • Sitting Patient out of bed | <input type="checkbox"/> |
| • Night time routine | <input type="checkbox"/> |

Other sources of support and information for carers

Leicester City

Leicester Carer Support Service

Information and Advice for Carers / Age UK Leicester Shire & Rutland

0116 222 0538

E-mail: carers@ageukleics.org.uk

Leicestershire County Council

Support for Carers

Leicestershire Support For Carers

01858 468543

E-mail: maureen@supportforcarers.org

Rutland County Council

Rutland Community Wellbeing Service

01572 725 805

E-mail: info@rutlandrap.org.uk

