Birmingham Mind Registered Charity no: 1003906

Referral Form for Carers Wellbeing Service

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| --- | --- | --- | --- | --- | --- |
| Name: | | DOB: | | | Age |
| Full address:    Post code: | | | | | |
| Contact number: | | | Gender: | | |
| Email: | | | | | |
| Other languages/communication needs: | | | | | |
| GP  Name:  Address:  Contact Number: | | | | | |
| Who is the person/ people that you care for? Civil partner or spouse, Boyfriend or girlfriend, Parent, Child, Friend, Neighbour etc. Please specify | | | | | |
| Approximately how many hours care do you provide per week? | | | | | |
| Describe your caring responsibilities in your own words: | | | | | |
| Who should we contact in case of emergency?  Name:  Relationship to you:  Contact number: | | | | | |
| Name (please print) | Signature | | | Date | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| MIND_Birmingham_Stack  Birmingham Mind Registered Charity no: 1003906  **Information for Monitoring Purposes**  Strictly Private and Confidential  Monitoring is a vital part of our future funding. The information that you provide is confidential and is used anonymously for the Birmingham Mind Carer Wellbeing Service monitoring outcomes only. Personal details will be not be divulged to any 3rd party. **Thank-you** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Gender (please state)** | | | | | Male | | | | | | | | | Female | | | | | | | Transgender | | | |
|  | | | | | Non Binary | | | | | | | | | Gender Fluid | | | | | | | Other | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| **How would you describe your ethnic origin?** Please tick the relevant box | | | | | | | | | | | | | | | | | | | | | | | | |
| African | | | | | | | | | |  | Asian or Asian British - Bangladeshi | | | | | | | | | | | | |  |
| Asian or Asian British - Indian | | | | | | | | | |  | Asian or Asian British - Pakistani | | | | | | | | | | | | |  |
| Asian or Asian British - Other | | | | | | | | | |  | Black or Black British - African | | | | | | | | | | | | |  |
| Black or Black British - Caribbean | | | | | | | | | |  | Black or Black British - Other | | | | | | | | | | | | |  |
| Chinese | | | | | | | | | |  | Eastern European | | | | | | | | | | | | |  |
| Mixed - White and Asian | | | | | | | | | |  | Mixed - White and Black African | | | | | | | | | | | | |  |
| Mixed - White and Black Caribbean | | | | | | | | | |  | White - British | | | | | | | | | | | | |  |
| White - Irish | | | | | | | | | |  | White - Other | | | | | | | | | | | | |  |
| Other – please specify | | | | | | | | | |  |  | | | | | | | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nationality**: | | | | | | | | | | | | | | | | | | | | | | | | |
| **How would you describe your religion or belief?** | | | | | | | | | | | | | | | | | | | | | | | | |
| Christian | Jewish | | Buddhist | | | Muslim | | Sikh | | | | Hindu | | | Other Religion or Belief | | | | No Religion | | | | Rather Not Say | |
| **Your marital status:** | | | | | | | | | | | | | | | | | | | | | | | | |
| Single | | Married | | | | | Separated | | | | | | | Divorced | | | Widowed | | | | | Civil Partnership | | |
| Same Sex Marriage | | | | | | | Living with Partner | | | | | | | | | | Prefer not to say | | | | | | | |
| **How would you describe your sexuality?** | | | | | | | | | | | | | | | | | | | | | | | | |
| Heterosexual | | Gay | | | | | Lesbian | | | | | | | Transsexual | | | Bi Sexual | | | | | Prefer Not to Say | | |
| **Your employment status:** | | | | | | | | | | | | | | | | | | | | | | | | |
| Carer | | Full time work | | | | | Part time work | | | | | | | Self employed | | In education | | | | | | Volunteer | | |
| Not in training,education or employment | | | | | | | | | | | | | |  | | | | | | | | | | |
| **Refugee status:** | | | | Yes | | | | | | | | | No | | | | | | | Unknown | | | | |
| **What form of transport do you regularly use?** | | | | | | | | | | | | | | | | | | | | | | | | |
| Car | | Train | | | | | On Foot | | | | | | | Taxis | | | Bike | | | | | Bus | | |
| Other (please state) | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you smoke** | | | | | | | | | YES | | | | | | | | | NO | | | | | | |
| **What are your main language(s):** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you consider yourself to be disabled?**  **If yes please specify** e.g. Learning Disabilities, Mental Health, Physical Disability, Sensory Impairment | | | | | | | | | | | | | | | | | | | | | | | | |

**Consent to Share: Please Read the Statements Before Signing**

**By signing this consent to share form you understand and agree to:**

1. Receiving further communications (e.g. promotional emails) YES or NO
2. Receiving communication via (please tick all that apply)
   1. Email
   2. Mail
   3. Telephone
   4. Text
   5. None
3. Information held by Birmingham Mind about me, for example my support file can be made available internally and to external agencies for audit purposes. (Information used for external audits is subject to confidentiality protocols between Birmingham Mind and the relevant agency.)
4. Information can be placed on Birmingham Mind's computerised database, subject to the Data Protection Act.
5. I understand that it may be necessary to share information elsewhere without my consent;
   1. If my own or other people's health and safety is at risk.
   2. If there is a child protection or vulnerable adult issue.
6. To enable Birmingham Mind to provide appropriate support to you it will be necessary to contact and share information with other agencies. I agree to Birmingham Mind sharing appropriate information with the following agencies:

**SIGNED BY THE SERVICE USER:**

**DATE:**

**SIGNED BY BIRMINGHAM MIND STAFF:**

**DATE:**