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|  | **Personalised Carer Support Plan** |

*For use by employers to support employees with external caring responsibilities*

Employee Name

Team

Manager

Who are you providing care for (eg relation, friend)

What are their caring needs (eg dementia, old age, disability)

Summarise the carer responsibilities you have for this person

What is the possible impact on your role at x organisation of this carers role

Starting the working day later ….. (details)

Leaving work earlier ….. (details)

Leaving during the day and returning ….. (details)

Taking short notice absences ….. (details)

Making and receiving personal phone calls ….. (details)

Are there any other issues the employer needs to be aware of

How will the employer be kept up to date with the development of the circumstances of the carer?

What is the process to be followed in an emergency eg who to notify, and other contact details?

What arrangements have been put in place to allow flexibility for the employee eg tailored flexible working arrangements

What are the arrangements for paid/unpaid leave for time off for caring

What information and support is being provided for the carer eg the use of Carers Leeds support workers?

What review process is to be used for this Support Plan

How will your caring needs be communicated to the rest of the team/organisation

Any other relevant factors or information

**Signed…………………………………………………. Employee**

**Signed…………………………………………………. Manager**

**Date…………………………….**