

Do you look after or care for someone at home?

The questions in this young carer statement are designed to help you think about your caring role and what support you might need to make your life a little easier.

Feel free to make notes, draw pictures or use the form however is best for you.

What will happen to this information?

This is your statement and it is your way to tell an adult who you trust about your caring role. This will help you and the adult find ways to make your life and your caring role a bit easier.

The adult who works with you on your statement might be able to help you with everything you need. If they can't, they might know other people who can help.

Our agreement

Adult worker:

- ✓ I will make sure that you get a copy of your statement.
- ✓ I will share your statement with people if I think they can help you or your family, with your consent.
- ✓ I will let you know who I share this with, unless I am worried about your safety, about crime or cannot contact you.
- ✓ Only I or someone from my team will share your statement.
- ✓ I will make sure your statement is stored securely.
- ✓ Some details from your statement might be used for monitoring purposes, which is how we check that we are working with everyone we should be and in the correct way.

Signed

Child / young person:

- ✓ I will get a copy of my statement to keep.
- ✓ I know that my statement might get shared with other people who can help me and my family so that I don't have to explain it all over again.
- ✓ I understand what the adult worker supporting me will do with this booklet and the information in it (as above).

Signed

About me

My name _____ Date of birth _____ Gender _____

My address _____ My school _____

My role as a young carer

Age started caring _____ Hours caring per week _____ Am I the main carer? Yes No

I look after

- Mum
- Dad
- Brother
- Sister
- Grandparent
- Someone else

How do I care

- Stay in
- Extra chores
- Personal care
- Help communicating
- Emotional support
- Other

Is there anything else you want to tell us?

Who else lives at home? _____

What other services provide support to the person you care for? _____

1

Does anyone help me care?

2

What help would I like with caring?

3

Has anything in my family changed recently?

4

Do you feel you have enough time to do things you enjoy?

5

I can usually take part in...

IDEAS: Things my friends do, school activities, time for myself.

6

Sometimes I miss out on...

7

What would I like to change for me or my family?

IDEAS: Meet other young carers, take a short break, time to myself, more choices.

8 Does my caring role make school / further education / work more difficult for you in any way?

If Yes, please tell us what things are made difficult and what things might help you.

9 Does my school or further education know about my caring role?

Yes No

If Yes, who?

10 What could my school / further education do to help support me?

11

Do you think people listen to what you are saying about your caring role?

If No, can you tell us who you feel isn't listening or understanding you sometimes?

12

My physical health is...

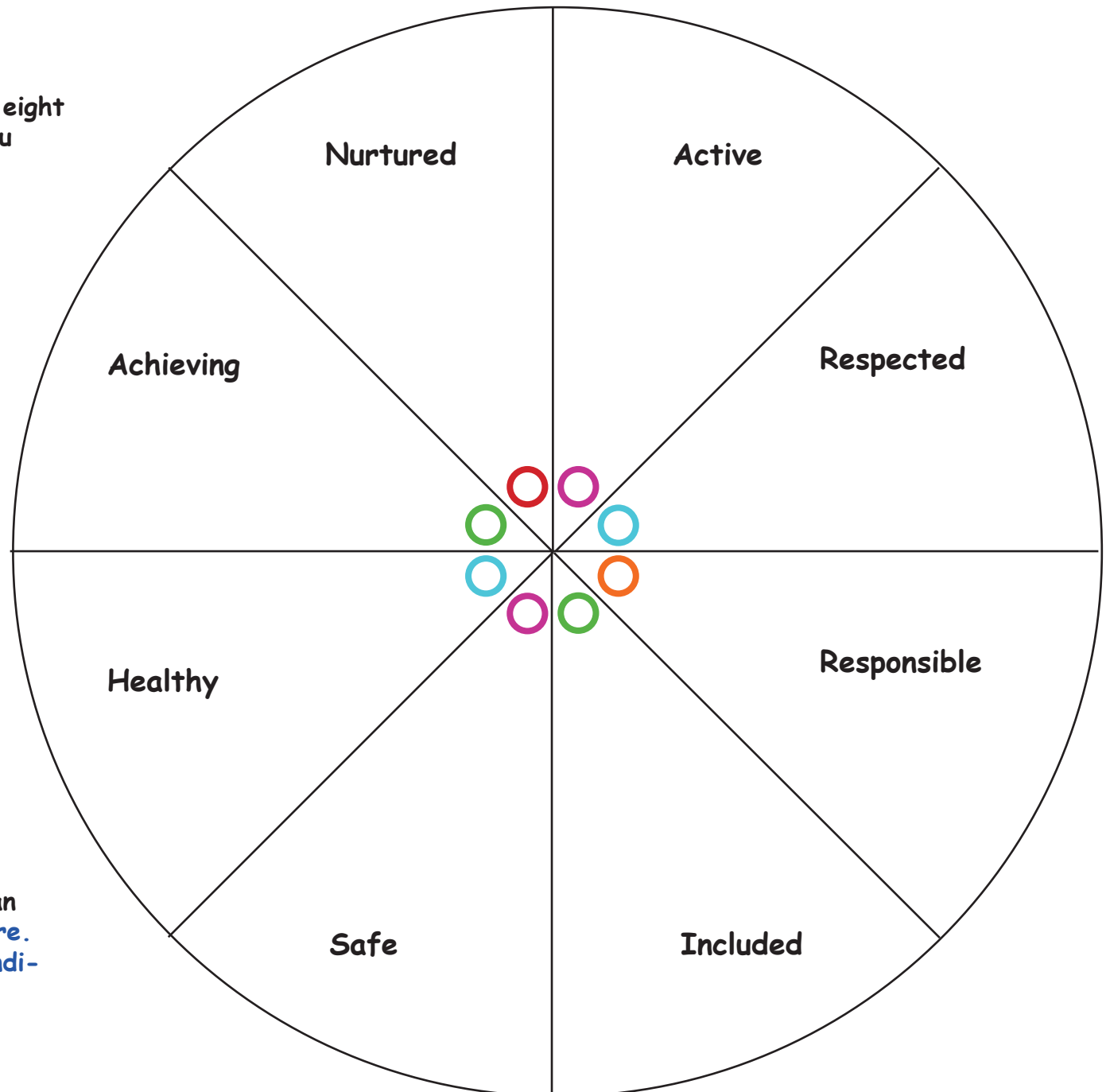
13

My emotional health is...

Wellbeing wheel

This is a wellbeing wheel. It has eight wellbeing indicators. Rate how you feel from 1 to 5.

- 1 - Not at all
- 2 - Not very
- 3 - Fairly
- 4 - Mostly
- 5 - Very



Wellbeing indication definitions can be found at <http://girfec-ayrshire.co.uk/what-is-girfec/wellbeing-indicators/>

Making life a bit easier

What are we going to do?	Who will do it?	By when?

Statement completed on (date) _____ by _____ (name of worker)

My statement will be reviewed on (date) _____ by _____ (name of worker)



Emergency planning (what are some of the important things to do if I can no longer care or help?)

THINK of the things someone else would need to know, need to do, who they would contact to help and any useful contact information).

Some useful contacts

South Ayrshire Carers Centre, phone on 01292 263 000, or email southayrshire.carers@unity-enterprise.com
South Ayrshire Health and Social Care Partnership, phone 0300 123 0900 or email young.carers@south-ayrshire.gov.uk
NHS Direct, phone on 111

Only in the event of an emergency contact Police, Fire or Ambulance by phoning 999

Office use only

Source of referral _____

Is this a New YCS or Review of YCS

Date YCS requested / offered _____

Date parent / guardian informed _____

YCS completed (date) _____

YCS declined (date) _____

Young carers CareFirst number _____

Young carers CHI number _____

Is young carer recorded on SEEMIS

Eligibility threshold _____

Cared for person

Name _____ Gender _____ Age _____ Ethnicity _____

Address _____

Cared for person
CareFirst number _____

Cared for person
CHI number _____



Young Carer Statement

Last reviewed: January 2020