Y SORT IT
YOUNG CARERS STATEMENT
APRIL 2020
“Because We Care”

Being a young carer can massively impact on your free time. We juggle our lives on looking out for our loved ones who need our support. Being a young carer, can be tough but can also be rewarding.

We need someone who will listen to us long term, who really knows us as a family, not just from reading notes but by speaking to us & listening; These are some of the things we need as Young Carers:

"We need time with my family where my caring role is not a priority."
"We need to be able to focus on our future and studies without neglecting our caring roles."
"We need TIME: everyone needs it but we need it more, we sometimes need more time to finish homework, or a break from our caring role & to have fun."

We sometime worry about what will happen in the future and can get tired. We worry about the decisions we have to make and the impact these have on us and our families. Being a Young Carer can be rewarding, you learn loads of stuff along the way, sometimes things you didn’t even know about yourself. Develop good coping, communication and problem solving skills anre just some of the things you will or have already learned.

Everyone at some point when they a caring needs a bit of support, so we have asked Teachers, Social Work & Health workers including local GP’s and Youth Workers to be more Carer Aware by doing the following:

Notice us! Look out for some of the signs that we could be a young carer, have a chat with us, even if its just to check in how we are getting on Listen! To what we have to say, sometime it not just our caring role we want to talk about or we need support with. Take time to Understand our abilities, our strengths but help us when we need support, & Take Action, we know we have the right to have a break, an education, to be protected, to be involved in discussions which affect our lives…….

To help those who want to support us, we have helped designed a tool which will help each Young Carer in West Dunbartonshire make there own statement. This will include information about you, your family and what its like being a young carer. This will help idenify any of your needs to have a life alongside caring and to improve your health & wellbeing

BECAUSE WE CARE!
Best Wishes Y sort it Young Carers
How to explain assessment


Why an assessment?

The overall aim is to make sure that you have everything you need in order to feel happy and be healthy and safe. To make sure this is happening we need to find out how things are going for you and your family or whoever looks after you.

What will it involve?
We would like to talk to you about the things that are important to you. Like your caring role, the person/s you care for, who you live with, who you see about home, friends, school or college, work or other things happening in your life at the moment. We will discuss your plans for the future and any problems or issues you may feel you are needing support with and about things that you would might like to change.

What happens to this information?
The information will be kept safe & secure in a computer file which will be exclusively Y sort it Young Carers staff, Manager & Depute can access only. You can access this at any time.

Information from your statement that would benefit your school or home life would be shared with your pupil support leader, and if and anyone else that is supporting you, for example social worker, but only with your agreement.

What then?
Together we will agree a support plan with your Young Carers Support worker. We will discuss various options of support available including youth clubs, group work, respite and short breaks, school monthly drop in’s and if needed targeted 1-2-1 support.

What say do I get in this?
It is important that your views are heard. We can decide together about who else we will share your personal information with. Your opinions will be taken seriously at all times.

Something important to add, we can decide together about some parts of the process BUT if we are worried that you or anyone else is at risk or is in danger, we will HAVE TO share this with the appropriate people in order to keep you safe.
### All About You

**Name of Young Person:**

**Date of Birth:**

**Gender:**

**Ethnic Origin:**

**Address:**

**Postcode:**

**Mobile:**

**Email:**

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**Name of Parent/Guardian:**

**Date of Birth:**

**Gender:**

**Ethnic Origin:**

**Address:** (if different from above)

**Postcode**

**Mobile:**

**Email:**

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**Does the Young Person have own Social Worker or Support Worker?**

**YES / NO**

If yes please give details:

**Is the Young Person currently having any of the following? LAAC / Child Protection Register / Supervision Order / Foster Care / Kinship Care. If YES please give brief detail:**

**Has the Young Person, together with his/her parent/guardian, given their consent for you to provide their details and refer them to our organisation for possible service input?**

**YES ☐ NO ☐**
Are the School / College or University aware that the young person is a potential Young Carer?
If YES has this referral been recorded on their Personnel File (SEEmiS) YES / NO

Does their caring role have an effect on their Education? YES / NO
If YES, please provide details:

Does the young person currently receive any other Additional Support in or out of school? YES / NO
If YES, please provide details:

Do you currently receive any other Additional Support in school? YES / NO
If YES, please provide details:
## Who do you care for?

**Name of the Main person being cared for:**  
- Relationship to Young Carer:  
- Date of Birth:  
- Gender:  
- Ethnic Origin:  
- Address:  
- Postcode:  
- Mobile:  
- Email:  
- Nature of Illness:  

<table>
<thead>
<tr>
<th>Name of any Additional person being cared for:</th>
<th>Relationship to Young Carer:</th>
<th>Date of Birth:</th>
<th>Gender:</th>
<th>Ethnic Origin:</th>
<th>Address:</th>
<th>Postcode:</th>
<th>Mobile:</th>
<th>Email:</th>
<th>Nature of Illness:</th>
</tr>
</thead>
</table>

Do you live with the person that you care for?  
- Yes [ ]  
- No [ ]  
- Sometimes [ ]

Please describe any other details about your living situation, you would like to share with us?
Dynamics Of Family Household. Who lives at home?

Please state any risks / safety issues we should be aware of when visiting the family at home, please provide details:

Is the Young Carer the main carer for the person(s) detailed in above?  
If 'No', who else at home is also a Carer?  
Name(s):  
What is their Relationship(s) to the Young Carer?

Does the young carer have additional responsibilities to look after siblings?  
If yes, please provide details:

What does the young person’s caring role involve? E.g. personal care, moving/handling, emotional support, medication etc.

What impact does the young person’s caring role have on them, and how well are they currently coping with it? Please provide details:

Do you feel that the young person would benefit from another service within our organisation, e.g. befriending / mentoring, advocacy, please give details:

Does the young carer currently receive service input from any other statutory or voluntary agency?  
If yes, please provide details:
Getting to know you.....

What do you enjoy doing with your free time, do you have any hobbies or interests, what are you favourite subjects at school, or activities...do you go any youth groups / teams out with school?

How many hours per week do you spend on your health and wellbeing i.e. this can include football/netball practice, dance classes, yoga, swimming etc....

Can you swim unaided?  YES / NO

If yes are you:  beginner [ ] confident [ ] very confident [ ]

Do you know what a Young Carers is?  Yes [ ] No [ ] Not Sure [ ]

“A Young Carer is someone under 18, who provides care for members of their family, including parents, bother or sisters, grandparents or wider family, this can be someone with a disability, learning need, mental health issues, because of illness or sickness, or alcohol or drug issues”

Do you think this describes you?  Yes [ ] No [ ] Not Sure [ ]

What age did you first start caring?

How many hrs per week caring do you do? 0-5hrs [ ] 6-15hrs [ ] 16hrs plus [ ] not sure [ ]
<table>
<thead>
<tr>
<th>Your Caring Jobs</th>
<th>SOMETIMES</th>
<th>A LOT OF THE TIMES</th>
<th>NEVER</th>
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</thead>
<tbody>
<tr>
<td>Hoover, tidy, dust other rooms, clean clothes, do washing etc.</td>
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<tr>
<td>Make Meals and or snacks</td>
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<tr>
<td>Wash up dishes or put dishes in the dishwasher</td>
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<tr>
<td>Take responsibility for shopping for food</td>
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<td>Help with lifting or carrying heavy things</td>
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<td>Help with paperwork e.g. writing letters/filling in forms etc.</td>
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<tr>
<td>Help with financial matters such as dealing with bills, banking, collecting benefits</td>
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<tr>
<td>Work part time to bring in money</td>
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<td>Interpret for someone because English is not their first language</td>
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<tr>
<td>Signing for someone you live with because they are hearing impaired</td>
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<tr>
<td>Give medicines, make sure someone takes their pills, give injections and changing dresses etc</td>
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<tr>
<td>Help someone you live with with personal care</td>
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<tr>
<td>Help someone you live with in and out of bed</td>
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<tr>
<td>Help someone you live with dress or undress</td>
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<tr>
<td>Help someone you live with eat and drink</td>
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<td>Keep someone you live with company e.g. by sitting with them, reading, watching tv etc</td>
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<td>Take someone you live with out e.g. for a walk or see friends or relatives</td>
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<tr>
<td>Take someone you live with to Dr/hospital appointments</td>
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Caring & your school life

Does your school know about your caring responsibilities?  YES / NO

If yes who supports you?

If no would you like them to know?

Have you taken time off school or been late because of my caring role?  YES / NO

If yes how often and why?

Do you get picked on or bullied at school?  YES / NO

If yes, have you told anyone? Are there any details you would like to share?

Do you ever get struggle to concentrate in class or at home doing homework?  YES / NO

If yes what subjects?

Is there anything else you would like to tell us about school?
How do you feel about being a carer?

<table>
<thead>
<tr>
<th>Because of my caring roles:</th>
<th>SOMETIMES</th>
<th>A LOT OF THE TIME</th>
<th>NEVER</th>
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<tbody>
<tr>
<td>I like who I am</td>
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<tr>
<td>I feel I am doing something good</td>
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<td>I feel that I am helping</td>
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<tr>
<td>I feel closer to my family</td>
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<td>I feel good about myself</td>
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<td>I feel that I am learning useful things</td>
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<td>My parents are proud of the kind of person I am</td>
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<td>I feel I am better able to cope with problems</td>
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<td>I feel like running away</td>
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<td>I feel very lonely</td>
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<td>I feel like I can't cope</td>
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<td>I feel stressed</td>
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<td>I can't stop thinking about what I have to do</td>
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<tr>
<td>I have to do things that make me upset</td>
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<tr>
<td>I miss out on sleep e.g. have to get up in the night or stay up late in order to look after someone</td>
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</table>

Which one of your caring jobs you like the most?
Please tell us a little bit about it & why you like this caring job?

Which one of your caring jobs do you dislike or upsets you the most?
Please tell us a little bit about it & please say why you dislike this caring job;
Discuss and tick any groups/activities the Young Person would like involved in. Ensure leaflets and or information is given out.

- Young Carer Monthly School Drop In's
- Respite & Short Breaks Opportunities
- Targeted 1-2-1 Support
- Holiday programme Activities
- Carbeth Hut Visits
- Young Carer Support Groups

Please indicate which one (Youngers, Small Group or YAC):

- WD Leisure/Health and Wellbeing Package

Please give more information (annual membership, other activities etc)

- Street Play Sessions (WD Wide)
- Youth Clubs (Hub and Bonhill)
- Street Bikes
Emergency Planning

In an emergency is there someone you would like contacted? Please tell us who and how best to contact them:

Office Use Only

<table>
<thead>
<tr>
<th>Date YCS Completed:</th>
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<tbody>
<tr>
<td>Staff Name:</td>
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<td>1st Review Due:</td>
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