

# Young Carers request for an assessment

HEROIC LEADERS  
CARING POWERFUL  
HELPFUL INSPIRING  
#WALSALLYOUNGCARER  
COMMITTED  
DEDICATED  
AMAZING  
CARER  
VITAL  
♥

## What is the criteria for making a Young Carers Referral?

- Children and young people between the ages of 8 and 18
- Living in Walsall
- Caring for a parent/guardian, relative, sibling, neighbour

## Are you a Young Carer?

Young Carers are children and young people aged 8-18, who provide regular and ongoing care and emotional support to a family member who is physically or mentally disabled or misuses substances.

## Young carers usually care for parents, grandparents or siblings and help their family members with;

- Shopping, cooking, cleaning, changing beds
- Bathing, Dressing, toileting, feeding
- Keeping them safe
- Managing the household, managing money, paying bills
- Nursing tasks, attending medical appointments, giving medication
- Providing emotional support, which may mean checking in on them, spending time with them, helping them to regulate their emotions. Responding to behaviour that is demanding / challenging
- Acting as their advocate, supporting them to communicate, translating and using other methods of communication such as sign language.

If you think you are a young carer the Walsall Young Carer's service is here to help and support you. We will work with you and your family to look at ways of supporting you as a young carer as well as the family member you care for. We will carry out a young carer's assessment and this is an opportunity for you and your family to talk with a member of staff from Early Help about your caring role. We will encourage you to share information about your caring responsibilities and how this makes you feel. Together we will consider what help is available.

## Following the completion of the assessment, we will offer you;

- An opportunity to join the young carers group and participate in offsite activities where you can meet other young carers, have fun, learn new skills and gain new experiences
- Identify a young carers champion to ensure that you have someone who is there that you can listen to.
- You will receive a young carer's ID card
- You will receive a free leisure pass to access council leisure service
- Person centred support for you and your family
- We can support you in attending meetings with other services and act as a advocate to ensure that your views and needs are heard.

## For more information on the young carers service, please see our website:

<https://go.walsall.gov.uk/children-and-young-people/early-help/early-help-professionals/young-carers>

Once you have completed the request for an assessment can you please send this form to;

Early Help Hub - [EHPathway@walsall.gov.uk](mailto:EHPathway@walsall.gov.uk)



Walsall Council



Young Carers  
"dedicated,  
compassionate  
and caring"

# Walsall Young Carer's Assessment

HEROIC  
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## 1. What is your...

Name

Date of birth

Address

Gender

Ethnicity

What School, Alternative education,  
college do you go to?

Medical needs

Do you have a Disability?

Language needs

The best way to get in touch with you is;

Email address

Contact number

## 2. What are your Parents/Carer's details

1# Name

2# Name

Contact number

Contact number

Address

Address

Do they live in your household?

Yes  No

Do they live in your household?

Yes  No

Email address

Email address

## 3. Who is helping you complete this form?

Name of referrer;

Telephone number

Organisation

What is your relationship with this person?

Email address

#### 4. Who do you Care for (Details of cared for person)

Name

What is their relationship with you?

Do they have a medical condition?

Do they have a diagnosed need?

What services do they receive support from?

#### 5. Please share what responsibilities you have in the home/what jobs do you do?

#### 6. Who do you live with?

Name

Name

Date of birth

Date of birth

Contact number

Contact number

**7. Are there any other 'services' or professionals helping you at the moment and if so who are they?**

**If you are caring for more than one person please add details below**

**8. Do you and/or your family need more support with the following?**

Education

Early years

Health

Drugs and alcohol

Family relationship

Abuse and exploitation

Crime prevention and tackling

Crime

Domestic violence

Secure housing

Financial stability

Other

## Consent for an Assessment of need

The following consent statement must be explained to all the CYPs and adults who have provided information included in this form. Each Children and Young People or adult must agree with the consent level agreed below.

Consent statement Personal information collected during the Early Help process will be stored and used by the Early help partnership to deliver services to address the needs identified for your family. All information will be treated as confidential and stored and used in line with data protection obligations, information will not be shared without your agreement unless there is a need to by law to either: (a) Prevent harm occurring (b) Prevent the law being broken (c) Comply with our public authority obligations If you wish to withdraw consent to share information or to take part in the Young carers assessment, you can do so by contacting Walsall Young carers team. The young carers team may need to consider whether there are reasons to continue to share some or all of the information with other agencies to prevent harm occurring or prevent the law being broken. For further information on the way Walsall Council manages data and information sharing please see the main Walsall Council Website.

### Consent agreed

- I agree** to my information being shared in order that the work can take place and services to help and support me can be provided.
- I consent** to the Young carers team approaching and receiving information from partner agencies to assist with the development and delivery of support.
- I only agree** to my information being shared with certain people and agencies (please list in other information below)
- I do not agree** to information being shared. Other information Click or tap here to enter text.

Family consent for the professional must ensure that everyone who has contributed to the data in this form understands the consent statement. Everyone must be comfortable with the level of consent agreed for their data.

**Young person to sign below**

**Date**

**Parent/carer to sign below**

**Date**

If they are unable to sign, please state how you indicated their approval and record the date and time of the agreement.

Submit the form Save your completed form and send it back to us: [EHPathway@walsall.gov.uk](mailto:EHPathway@walsall.gov.uk)