



YOUNG CARERS' SUPPORT

Norman House, Beaver Business Park, Beaver Road,
Ashford, Kent TN23 7SH

Telephone: 01233 665393, Fax:01233 646709

Email: youngcarers@carers-ashford.org.uk



YOUNG CARERS INITIAL REFERRAL/ ASSESSMENT FORM - **CONFIDENTIAL**

Date

Name/agency and contact number of person completing form

.....

Name of Young Carer D.O.B. M/F

Name of Young Carer D.O.B. M/F

Address

.....
.....

Post Code Telephone:

Name of Parent/ guardian.....

Ethnic category, please tick **one** from the following list:

WHITE

British

Irish

Any other White background

MIXED

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background

BLACK OR BLACK BRITISH

Caribbean

African

Any other Black background

OTHER ETHNIC GROUPS

Chinese

Any other ethnic group

Information not given

ASIAN OR ASIAN BRITISH

Indian

Pakistani

Bangladeshi

Any other Asian background

PTO

Does the young person have any disabilities/ issues of their own the project should be aware of i.e. ADHD, medical or health condition etc YES/ NO

If yes, please give details.....
.....

Is the young person aware of the referral YES/ NO

Can we send information to the home address YES/ NO

If not, please provide an alternative contact.....
.....

Who is the young person caring for (name & relationship to young person)

.....

Main reason for caring:

Physical disability

Mental Health issues

Substance misuse

Long term illness

Learning disabilities

Is the young person the primary carer

YES/ NO

Details of the cared for – as much information as possible please

.....
.....
.....
.....
.....

Details of others living in the home

.....
.....

How is the young person affected by their caring role? How would support help them?

.....
.....
.....
.....

Name of school attended

Are there any other agencies currently involved with the young person – who?

.....
.....

In the case of sibling carers, we will pass parents/ guardians details onto Carers Support who will offer services and support to parents caring for their children. Please tick this box if you do NOT want details passed onto Carers Support

CONFIDENTIALITY STATEMENT

As Young Carers' Support Workers, we will strive to respect Young Carers' rights to privacy and space.

All information given will be held in the strictest confidence *except* in cases involving **CHILD PROTECTION ISSUES.**

If you wish to have further information concerning Young Carers' Support confidentiality policy, please contact the Senior Support Worker.

Please return this form to
Angie Hollingsworth
Young Carers' Support
Norman House
Beaver Business Park
Beaver Road
Ashford
Kent
TN23 7SH

**Young Carers Support –
Empathy Not Sympathy**

