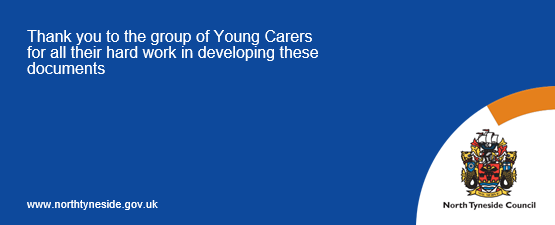
**Young Carers  
Transition Assessment**



**Note :  
This assessment is to be completed with the young carer between the ages of 16 and 18.**

**This is a statutory assessment and must be completed within 28 days**

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**DETAILS**

|  |  |
| --- | --- |
| **Young carers details** | |
| **Full name** |  |
| **DOB** |  |
| **Gender** |  |
| **Address** |  |
| **Email** |  |
| **Phone Number** |  |
| **School/College/Job** |  |
| **Cared for details** | |
|  | |
| **Full name** |  |
| **DOB** |  |
| **Gender** |  |
| **Care needs/ reason for care** |  |
| **Assessor details** | |
| **Full name and role** |  |
| **Organisation** |  |
| **Tel** |  |
| **Email** |  |
| **Date assessment completed** |  |

I have been given and understand the leaflet on Information Sharing and in signing this form I am agreeing to receiving the service and that my personal information and that of the children I have parental responsibility for, can be shared with other agencies as required, to ensure I receive the best service and support.

|  |  |
| --- | --- |
|  | **Signature of young carer** |

Completed Young Carers’ Transition Assessments parts 1 & 2 should be sent via secure email to: youngcarersassessment@northtyneside.gov.uk

**MY CARING ROLE**

**Do you care for more than one person?  
  
Do you live with the person you look after?  
  
What does your day look like?** *Use the ‘Caring Role’ page as a prompt.*

**Are you able to leave the person you care for?  
  
Do you need to care for them during the night? What does that involve?  
  
Are their care needs constant or do they change?**

**Who else helps you and the person you care for?***This could be a friend or family member, do they have paid carers? Or it could be a group that supports you or counsellors you speak to.*

Lots of young carers have reported that it can be difficult to make plans for their future because they feel they won’t be able to leave home or get a job as the person they care for will need them to stay home. For some, that’s not a problem, but if you would like to do something other than be a full-time carer, this assessment can help you to start making plans for your future and the care of your family member.

**Do you want to continue caring past 18?**

**If you do, what needs to happen to support you in this?**

**If not, what type of care/support would the person you care for need?**

**Would the person you care for like to be referred to North Tyneside Council for an Adults Needs Assessment?**

As a young adult carer, you can access support from North Tyneside Carers’ Centre. They offer information and advice, peer support and training specifically to help you with your caring responsibilities.

|  |  |
| --- | --- |
| **Fill in the main tasks below** | **Fill in extra information here. For example, how often, who, where, how does this make the young adult feel? Does anyone in the house share this role?** |
|  | |
| **Keep someone company** | e.g. parent |
|  | |
| **Take brothers/sisters to school** |  |
|  | |
| **Look after brothers/sisters** |  |
|  | |
| **Take someone out** |  |
|  | |
| **Interpret or use sign language** |  |
|  | |
| **Food shopping** |  |
|  | |
| **Clean the house** |  |
|  | |
| **Pay bills** |  |
|  | |
| **Help someone wash** |  |
|  | |
| **Lift or carry heavy things** |  |
|  | |
| **Wash dishes** |  |
|  | |
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|  | |

**WORK & EDUCATION**

**MY HEALTH AND WELLBEING**

**How is your physical health? Do you get regular exercise and eat well? Do you have any conditions yourself?  
  
Do you want help to improve this? Do you have an Ease Card, if so describe how you are using it?**

Some young carers have their own mental health issues, it’s important that these are recognised and support is put in place to keep them healthy.

**Do you have any mental health issues or conditions yourself?**

**If so, are you getting any support with this?** *G.P., Counselling, medication, CAMHS etc?*

**If you feel that your caring role affects your mental health, can you describe how?**

Young carers are often very focussed on other people and their needs and tend not to ask for help with their own problems.

**Do you have any worries about yourself and your future? You any problems with your sleep or with your own stress or anxiety?**

Lots of young carers tell us that their caring role and not wanting to talk about it with their peers can make them feel isolated from their friends and other young people.

**Are you ever lonely? Can you tell us about that?**

**Do you get enough free time for yourself?**

**What do you enjoy doing in your free time?  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
How is your school life? (e.g. learning, enjoyment, concentration in lessons, attendance/punctuality, friendships/relationships with teachers)**

**Describe your job/apprenticeship course or the subjects you have chosen:  
  
  
  
  
Does being a carer impact your ability to access work/education/training?**

Some young carers can claim Carers Allowance when they reach the age of 16 or are entitled to a student bursaries in college . We’re going to ask a question about money, we’re doing this to make sure you have all the information you need about what you’re entitled to, not to pry unnecessarily into your family’s’ finances.  
**What is your financial situation?***Are you claiming a student bursary, Carers’ Allowance, or other grants or financial support? Do you have a part-time job?* **Would you like some extra help with money management skills, claiming benefits etc?  
  
  
Have you made any plans for your work/education in the future?  
  
  
Would you like any extra support with CV writing, job applications, Personal Statements etc?**

**YOUR GOALS**

**What kind of support have you received to help work out what you would like to do when you’re older?  
  
  
  
What would you like to achieve in the future?**

An Adult Needs Assessment is done by a council Physio-Therapist or Social Worker, they make a home visit and look at what help and support is needed and can give advice on claiming benefits etc.

**Do you want to be registered as a young adult carer with North Tyneside Carers’ Centre?  
  
  
  
Is there anything else you think we should know in order to best support you?**

**Do you have any questions?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Goal** | **Action** | **By Who?** | **By When?** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**If you would like advice, guidance or help troubleshooting when completing this Transition Assessment, help identifying what services may be available or help with supporting young adult carers, please call North Tyneside Carers’ Centre on 249 6480**  
  
Once you have completed this form, if you have secure email, please send to:[**YoungCarerAssessment@northtyneside.gov.uk**](mailto:YoungCarerAssessment@northtyneside.gov.uk)Alternatively, please send a copy via post or courier to: **Early Help Assessment Team, North Tyneside Council, Quadrant East, Silverlink North, Cobalt Business Park, North Tyneside, NE27 0BY  
Courier Code: D1  
  
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