

Referral Pack

Community First New Forest
71 Christchurch Road
Ringwood
Hampshire
BH24 1DH
01425 482773
marie.shotbolt@cfnf.org.uk



**Hampshire
Young Carers
Alliance**

Please read ALL the information below before making a referral

Done

The Whole Family Approach

Defining a Young Carer

Identifying a Young Carer

Caring Tasks

Information Sharing

Referral Form

Checklist

The Whole Family Approach

When assessing the support required by a young carer it is important to take into account the needs of the whole family and how these needs impact on one another. The *Whole Family Pathway* www.youngcarer.com is a web based resource signposting practitioners to support for young carers and their families. Following the pathway will help you to understand the assessments and support available for young carers. There is a need to be sensitive to cultural perceptions and needs around disability, illness and caring whilst recognising a child's fundamental rights to a safe and secure childhood.

A young person may be involved in the care of an adult or child if they have:

- a physical disability or sensory impairment
- a learning disability
- a long term illness
- HIV/Aids
- mental ill health
- drug/alcohol-dependency

More information about the extent of the impact of the person's condition on the family may be gained by asking the following questions:

1. Who helps to care for the person at home?
2. What effect does their condition and personal care needs have on the family?
3. Is there a child/young person in the family who helps to provide care?
4. How does this affect the child/young person physically, emotionally or educationally?
5. Is there any direct help that would support the young carer?
6. Does the parent need support in their parenting role?
7. What can be offered to help the whole family?

Some families may not know about the services or support available to them. Some families may be reluctant to involve agencies in their family situation or be fearful of acknowledging children's caring roles.

Defining a Young Carer

“Children and young people under the age of 18 who provide regular and ongoing care and emotional support to a family member who has a long-term illness, disability or addiction to drugs and/or alcohol”.

While most children and young people help parents to some degree some may be taking on caring responsibilities that are inappropriate for a child and that have a negative impact on their own well being.

Identifying a Young Carer

Inappropriate levels of caring impact on a child's emotional and physical health as well as their educational achievement and life chances.

The following are examples of the effects on children and young people providing care who are not supported:

- Problems at school, with completing homework and getting qualifications
- Lack of aspirations and career opportunities
- Isolation from other children of the same age and from other family members, feeling that no one else understands his or her experience
- Lack of time for play, sport or leisure activities
- Conflict between the needs of the person they are caring for and their own needs leading to feelings of guilt and resentment
- Lack of recognition, praise or respect for their contribution
- Emotional impacts, such as worry, depression, self-harm

Some young carers experience being stigmatised or bullied and some may have behavioural difficulties. However, there are also positives for young carers who are well supported

- Increased Independence and maturity for their age
- Advanced life skills such as a caring attitude or being a good listener
- Increased knowledge of disability and illness

Caring Tasks

Some examples of the tasks young people undertake are:

- **Household chores** – including washing, cooking and cleaning on behalf of the whole family.
- **Personal care** – such as giving medication, changing dressings, assisting with mobility.
- **Intimate care** – washing, dressing and assisting with toilet requirements.
- **Emotional support** – monitoring and meeting the emotional needs of the person.
- **Childcare** – helping to care for younger siblings, including escorting to school, in addition to other caring tasks.
- **Other** – household administration such as paying bills. Accompanying the cared-for person to hospital. Acting as a translator for non-speaking sensory impaired.

Information Sharing

Please gain consent for information sharing from the parent/young person before completing this referral form. If possible, please get them to sign the following statement:

By completing this referral I am consenting for the organisation to which I am/my child is being referred to hold the data on this form on a GDPR-compliant database which is shared with Hampshire Young Carers Alliance (HYCA) partners, and in paper format.

I consent that this information may be shared between relevant project staff and that this information will only be used to support me and my family. I understand that confidentiality is overruled where safeguarding is concerned. If the details on this form are to be shared with agencies outside the one I am being referred to, I expect to be asked for my consent for my information or my child's to be shared, except in the cases of safeguarding. I accept that the responsibility to provide up to date information is my own and will endeavour to provide this as and when applicable.

Signed by Parent/Guardian:

Date:

Referral Form

Referrer

Name		Email	
Agency		Position	
Landline		Mobile	
Signed		Date	

Parent

Name		Email	
Address			
Landline		Mobile	
Signed		Date	

Is the family part of the following?

Child Protection Plan	Yes	No	Early Help Hub	Yes	No
Children In Need Plan	Yes	No	Supported Families	Yes	No

Family Structure

Cared For

Name		Relationship to Young Person		
Age		Date of Birth		
Nature of Illness or Disability				
	(Please give as much detail as you can)			
	Physical Disability	Learning Disability	Drug/Alcohol Dependency	Mental Health
How does this affect the family?				

Support

Agency Name		Name	
		Position	
What support are they providing?	Mum / Dad / Brother / Sister / Young Person		
Landline		Email	
Mobile			

Agency Name		Name	
		Position	
What support are they providing?	Mum / Dad / Brother / Sister / Young Person		
Landline		Email	
Mobile			

Agency Name		Name	
		Position	
What support are they providing?	Mum / Dad / Brother / Sister / Young Person		
Landline		Email	
Mobile			

Agency Name		Name	
		Position	
What support are they providing?	Mum / Dad / Brother / Sister / Young Person		
Landline		Email	
Mobile			

Young Person

Name		Sex	
Age		Date of Birth	
School		Year Group	
Understanding of Illness or Disability	(Please give as much detail as you can)		
Caring Activity	(This can be physical and/or emotional)		
Impacts of Caring	(This can be positive and/or negative)		
Needs	(This can be time-out, someone to talk to etc...)		

Check List	Yes	No
The young person is between 7-18 years old		
The young person lives in the New Forest District		
The young person is caring for family member		
The young person is aware of the referral		
The parent is aware of the referral		
The school is aware of the referral		

If you have ticked 'No' to any of the above, please contact us before making the referral.

Please Return To

Community First New Forest - Young Carers
 71 Christchurch Road
 Ringwood
 Hampshire
 BH24 1DH