Do you look after or care for someone at home?

The questions in this paper are designed to help you think about your caring role and what support you might need to make your life a little easier or help you make time for more fun stuff.

Please feel free to make notes, draw pictures or use the form however is best for you.
What will happen to this booklet?

This is your booklet and it is your way to tell an adult who you trust about your caring at home. This will help you and the adult find ways to make your life and your caring role easier.

The adult who works with you on your booklet might be able to help you with everything you need. If they can’t, they might know other people who can.

Our Agreement

Worker:
- I will share this booklet with people if I think they can help you or your family
- I will let you know who I share this with, unless I am worried about your safety, about crime or cannot contact you
- Only I or someone from my team will share this booklet
- I will make sure this booklet is stored securely
- Some details from this booklet might be used for monitoring purposes, which is how we check that we are working with everyone we should be

Signed: ________________________________

Young person:
- I know that this booklet might get shared with other people who can help me and my family so that I don’t have to explain it all over again
- I understand what my worker will do with this booklet and the information in it (written above).

Signed: ________________________________
Basic information about me:

My name: .............................................................................................
My DOB: ..............................................................................................
My Address: .........................................................................................
.................................................................................................
.................................................................................................
My telephone number: ......................................................................
My school: ...........................................................................................
My doctor: ...........................................................................................

The best way to get in touch with me is:
.................................................................................................
.................................................................................................

Please tell us if you need any help with communicating (eg, do you need an interpreter, Braille etc)
.................................................................................................
.................................................................................................
About my role as a carer:

About the person I care for....
(please tell us who you care for and why they need your care and support)

What I do as a carer...
(please tell us what you do to help the person you care for)

Do you wish you knew more about their illness?

YES  ☑  NO  ☐

Do you live with the person you care for?

YES  ☑  NO  ☐

Tell us what an average week is like for you, what kind of things do you usually do?

Weekdays (Monday to Friday)  Weekends (Saturday and Sunday)

Things I find difficult and might need help with
Draw on me!
Emotional support I provide....
(please tell us about the things you do to support the person you care for with their feelings; this might include, reassuring them, stopping them from getting angry, looking after them if they have been drinking alcohol or taking drugs, keeping an eye on them, helping them to relax)

Physical things I do....
(for example cooking, cleaning, medication, shopping, dressing, lifting, carrying, caring in the night, making doctors appointments, bathing, paying bills, caring for brothers & sisters)

Do you ever have to stop the person you care for from trying to harm themselves or others?

YES ☑ NO ☐

Some things I need help with...

Things I find difficult
My week...

On a normal week, what are the best bits? What do you enjoy the most? (eg, seeing friends, playing sports, your favourite lessons at school)
My week...

On a normal week, what are the worst bits? What do you enjoy the least?
(eg cleaning up, particular lessons at school, things you find boring or upsetting)
Fun stuff!

What things do you like to do in your spare time?

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Do you feel you have enough time to spend with your friends or family doing things you enjoy, most weeks?

**YES**  
**NO**  

Do you have enough time for yourself to do the things you enjoy, most weeks? (for example, spending time with friends, hobbies, sports)

**YES**  
**NO**  

Are there things that you would like to do, but can't because of your role as a carer?

**YES**  
**NO**  

Can you say what some of these things are?

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Draw on me!
School/ College

Do you think being your caring role makes school/college more difficult for you in any way?

YES ☑️ ☐ NO ☐ 

If you ticked YES, please tell us what things are made difficult and what things might help you.

Things I find difficult at school/ college?

Things I need help with...

Do your teachers know about your caring role?

YES ☑️ ☐ NO ☐ 

Are you happy for your teachers and other staff at school/college to know about your caring role?

YES ☑️ ☐ NO ☐
Do you think that being a carer will make it more difficult for you to find or keep a job?

YES  

NO

Why do you think being a carer is/ will make finding a job more difficult?

What would make it easier for you to find a job after school/college?

Can you think of anything that might make this easier?

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

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### How I feel about life...

**Do you feel confident both in school and outside of school?**

<table>
<thead>
<tr>
<th>Very confident</th>
<th>Quite confident</th>
<th>Somewhere in the middle</th>
<th>Quite unconfident</th>
<th>Very unconfident</th>
</tr>
</thead>
</table>

**In your life in general, how happy do you feel?**

<table>
<thead>
<tr>
<th>Very happy</th>
<th>Quite happy</th>
<th>Somewhere in the middle</th>
<th>Quite unhappy</th>
<th>Very unhappy</th>
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**In your life in general, how safe do you feel?**

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<th>Very safe</th>
<th>Quite safe</th>
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<th>Quite unsafe</th>
<th>Very unsafe</th>
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**How healthy do you feel at the moment?**

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<th>Very healthy</th>
<th>Quite healthy</th>
<th>Somewhere in the middle</th>
<th>Quite unhealthy</th>
<th>Very unhealthy</th>
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Being heard

Do you think people listen to what you are saying and how you are feeling?

YES  ☑️    NO  ☐️

If you said no, can you tell us who you feel isn't listening or understanding you sometimes 
(eg, you parents, your teachers, your friends, professionals)

Do you think you are included in important decisions about you and your life? 
(eg, where you live, where you go to school etc)

YES  ☑️    NO  ☐️

Do you think that you're free to make your own choices about what you do and who you spend your time with?

All of the time  ☑️    Some of the time  ☑️    Not often enough  ☑️    Never  ☐️

Is there anybody who knows about the caring you're doing at the moment?

YES  ☑️    NO  ☐️

If so, who? ................................................................................................................................................................

Would you like someone to talk to?

YES  ☑️    NO  ☐️
Draw on me!
Supporting me

Some things that would make my life easier, help me with my caring or make me feel better

Who can I turn to for advice or support?

Would you like a break from your caring role?

How easy is it to see a Doctor if you need to?

Really Easy    Easy    Difficult    Impossible
### Making life easier...

<table>
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<tr>
<th>What are we going to do now?</th>
<th>Who will do it?</th>
<th>By when?</th>
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This plan will be reviewed on ........................................
Important things:

Some useful contacts!

• Sheffield Young Carers  0114 258 4595  [www.sheffieldyoungcarers.org.uk](http://www.sheffieldyoungcarers.org.uk)
• VOYCE (Views of Young Carers Explained)  0114 234 8846  [www.chilypep.org.uk/voyce](http://www.chilypep.org.uk/voyce)
• Interchange Sheffield  [www.interchangesheffield.org.uk](http://www.interchangesheffield.org.uk)
• Young Carers  0844 800 4361  [www.youngcarers.net](http://www.youngcarers.net)
• Young Carers Short Breaks scheme  0114 205 3779
• Sheffield 101 service  call 101 (non emergency council services or police)
• NHS Direct call 111  [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)
• Emergency - Police, Fire or Ambulance  call 999

My Notes: