



SECTION 1: Young Person's Details	ID/Reg No:
Date CAT-YC conducted..... By: (Staff name)..... Young person's initials..... Gender (circle) Male Female Other..... Ethnicity..... Age..... Date of birth..... School/College name..... School Contact.....	Relationship of person caring for (e.g. mother, father)..... Nature of their illness/disability..... Additional/significant information about the cared for: How many adults live in the home?..... How many children live in the home (with ages)? .....
Are any other agencies involved with the young person or the cared for family member(s)...YES/NO If YES, please give details of social worker or lead professional..... Any current safeguarding concerns? Yes/No/Maybe	

SECTION 2: IDENTIFY CARING ROLE	SECTION 3:																																																																
<p>A) Do you currently have any needs or concerns about looking after someone in your family who needs support, or about your own health and well-being? (please tick one)      Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/></p> <p>B) If yes, does anyone else in the family share caring responsibilities with you? (please tick one)      Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><i>(If no needs raised with this opening question continue with the rest of the CAT-YC. If there are needs raised, listen to them now before progressing with the CAT-YC, as it will help to guide you about the young carer's priorities)</i></p> <p><b>SCREEN NEEDS</b> Complete the screening questions below together circling the level of need or perceived need the young carer has for each alert. The language may be adapted for younger children, but all topics should be covered. Please provide <u>one response for all questions</u>. Then add up their need alert score using the levels below. Any <b>HIGH</b> needs identified should be prioritised for action as soon as possible regardless of the overall score.</p> <p>  NONE (Score 0),           LOW need (Score 1),           MEDIUM need (Score 2),           HIGH need (Score 3)       </p> <table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #f4a460;"> <th style="width: 5%;"></th> <th style="width: 45%;">How much help or support do you need with:</th> <th style="width: 10%;">0</th> <th style="width: 10%;">1</th> <th style="width: 10%;">2</th> <th style="width: 10%;">3</th> </tr> </thead> <tbody> <tr> <td rowspan="5" style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">PART A: The Current Caring Situation</td> <td>1) ...any of the jobs that you do in your caring role?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2) ...any caring jobs that you would prefer not to do?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3) ...making a plan of who to contact in case of an emergency?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4) ...giving medication, or checking it has been taken?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>5) ...supporting or caring for anyone else in the family?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td rowspan="5" style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold;">PART B: Carer Health &amp; Wellbeing</td> <td>6) ...speaking to someone about getting support with your caring role?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7) ... feeling bullied or lonely because of your caring role?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>8) ...your own health or with how you feel?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>9) ...having a break or time away from your caring role?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>10) ...anything that is stressful about school or college, or stressful in general?</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2" style="background-color: #f4a460;"><b>Sub-total of alerts</b></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		How much help or support do you need with:	0	1	2	3	PART A: The Current Caring Situation	1) ...any of the jobs that you do in your caring role?					2) ...any caring jobs that you would prefer not to do?					3) ...making a plan of who to contact in case of an emergency?					4) ...giving medication, or checking it has been taken?					5) ...supporting or caring for anyone else in the family?					PART B: Carer Health & Wellbeing	6) ...speaking to someone about getting support with your caring role?					7) ... feeling bullied or lonely because of your caring role?					8) ...your own health or with how you feel?					9) ...having a break or time away from your caring role?					10) ...anything that is stressful about school or college, or stressful in general?					<b>Sub-total of alerts</b>						<p>Indicate the total score for needs identified for Q1 -Q10 on the thermometer</p> <p style="text-align: right;">Total Score = <input style="width: 50px;" type="text"/></p>
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<p>C) Check if there is anything else the young person wants to talk about or raise as a concern, or wishes to record themselves on the CAT-YC (make notes overleaf as appropriate)</p> <p>D) How able do you feel to continue providing care at the current level for the person/people? (please circle one number on the scale)</p> <table style="width:100%; text-align: center;"> <tr> <td style="width: 50%;">Not Very Able</td> <td style="width: 50%;">Very Able</td> </tr> <tr> <td>1</td> <td>5</td> </tr> <tr> <td>2</td> <td>4</td> </tr> <tr> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>2</td> </tr> </table>		Not Very Able	Very Able	1	5	2	4	3	3	4	2																																																						
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**SECTION 4: IMPORTANT NEXT STEPS** For any medium or high needs please contact Barnardos Action with Young Carers Service on 0151 228 4455 or via email [youngcarers.liverpool@barnardos.org.uk](mailto:youngcarers.liverpool@barnardos.org.uk) so a team member can provide information and support to request a young carers assessment of need. Some general guidance is below.

<b>Q1</b>	Encourage young carer to talk about what their caring role involves; provide advice or refer for support if necessary
<b>Q2</b>	Discuss likes/dislikes and consider onward referral to appropriate services, if necessary
<b>Q3</b>	Discuss emergency plan and provide list of names and contact numbers in an easily accessible format
<b>Q4</b>	Discuss concerns; if appropriate, liaise with health and social care professionals
<b>Q5</b>	Encourage young carer to talk about family situation and refer for support as necessary
<b>Q6</b>	Discuss who else (if anyone) supports them (formally or informally) and liaise with or refer as necessary
<b>Q7</b>	Discuss concerns, provide information as necessary and speak to school staff if agreed and required
<b>Q8</b>	Provide information and liaise with appropriate health care professionals, if agreed and required
<b>Q9</b>	Provide information about local groups or services in the community
<b>Q10</b>	Identify concerns and liaise with named contact at school/college, if agreed, or other health and social care professionals, if necessary

**SECTION 5: MAKE A PLAN TOGETHER:** Use this table to briefly note the details of **up to three priority alerts requiring action now**; any actions taken today, any next steps which have been agreed, who is responsible for them and when they will be reviewed

<b>Brief summary of needs identified by alerts</b> (Identify what would help most at this time) <b>Prioritise any HIGH needs identified</b>	<b>Any immediate action taken?</b> (e.g. info, advice or referral to other services)	<b>Any next steps required?</b> (e.g. referral to other services)	<b>Who is responsible for the next step or follow-up?</b>	<b>Date of review or follow up</b>
<b>Staff Notes:</b>			<b>Young Carer Notes:</b>	

**SECTION 6: Next Review:** Agree a review date and who should be responsible for following up the review. All questions must be revisited during a review to monitor the support provided and any change in the alerts.

**Date of next review**.....**with**.....**by phone or face-to-face**.....

**SECTION 7: YOUNG CARER CONSENT FOR USE OF DATA: I consent to the following use of my data from the CAT-YC form:**

- to enable staff to act on my behalf to get help or support from other services or professionals
- nameless information of the alerts to be shared to identify gaps in services or service development
- nameless information of the alerts to be shared with the Edge Hill University team for the CAT-YC evaluation study

**Young carer or proxy signature:**.....(Relationship:.....).**Date:**.....