**Worcestershire Young Carers**

Additional Information

Young Carer’s name

Who is the Young Person caring for?

(Name and relationship)

How long have they been a carer?

 (Number of years)

Has the family had any involvement

with Children’s Services?

 Has the household been subject to a

CP or CIN plan?

*Please provide name of child & duration of plan*



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Has a professional assessment been completed (e.g. Early Help)?

Does the Young Carer have an EHCP?

Is the Young Person a main or

secondary carer?

Does the Young Person have any

special needs or a disability?

*Please provide details*

Does the Young Person pose No one Staff Family Themselves

any risk to the

following:

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