**Preparing for Independence Tool**

**How Am I Getting On?**

These lists are designed to encourage you to start thinking ahead and support you as you transition into adult life.

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The lists in this pack are designed to enable you to plan ahead and work with your carers, professionals, and the people around you to ensure that as you reach adult life you become as independent at possible and reach your full potential. It is important that you have meaningful actions that will be useful for you and help you to progress.

It is really important that you, along with the people around you start thinking about, discussing and preparing for your future as you reach adulthood.

The lists can be a useful tool for you to use when you are preparing for meetings or discussions about your future.

The lists are aimed to be a starting point for discussions and considerations. They do not need to be completed in one go and they can be updated and reflected on as regularly as you decide.

# **Let’s think about Life Skills and Looking After Yourself**

**This list is designed to support you to think about the life skills that you need as you reach adulthood. Being able to look after yourself and become as independent as possible will help to prepare you for adult life.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you have photo identification? |  |  |
| Do you have your birth certificate? |  |  |
| Do you have a passport? |  |  |
| Do you have a driving licence? |  |  |
| Can you find your way around your local community? |  |  |
| Can you safely find your way to other towns/locations? |  |  |
| Are you confident using public transport? |  |  |
| Do you know how much public transportation will cost you? |  |  |
| Are you good at arriving on time for appointments? |  |  |
| Do you think you have a good attitude towards people? |  |  |
| Is it easy for you to sort things out with someone if you disagree? |  |  |
| Could you safely stick up for yourself in a difficult situation? |  |  |
| Do you know how to access support if you are abused/racially attacked/threatened? |  |  |
| Would you know how to deal with practical problems, e.g., shower leak, dripping tap, a power cut, gas leak? |  |  |
| Do you know how to get a replacement birth certificate, driving licence, passport or other formal document? |  |  |
| Would you know how to book a holiday and get insurance? |  |  |
| Do you know how to look after your body and keep clean? |  |  |
| Do you ever have any problems with your appearance? |  |  |
| Do you know what parts of your body you should check regularly? |  |  |
| Do you know how to care for your clothes and do laundry? |  |  |
| Do you know what to do to keep yourself safe when travelling? |  |  |
| Do you know how to keep yourself safe when using the Internet? |  |  |
| Do you know who you can ask for help about keeping safe? |  |  |
| Do you know how to report a crime? |  |  |

**Let’s think about Life Skills and Looking After Yourself - Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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1. **Let’s think about Knowing Your Rights and Having a Voice**

**This list is designed to support you to think about your rights as an adult and how to have a voice. Knowing how to find out your rights and being able to access support will enable you with achieving a more positive adult life.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you know what your basic human rights are? |  |  |
| Do you know your rights as a care leaver? |  |  |
| Do you know how to join a Care Leavers group and Youth Voice? |  |  |
| Do you know how to make a complaint? |  |  |
| Do you know who to ask for help to ensure your voice is heard? |  |  |
| Do you know about the voting system in England and how to vote? |  |  |
| Do you know how to ask for help to find out about your rights? |  |  |
| Do you feel confident enough to stand up and have your say? |  |  |
| Do you feel safe and able to express your identity and/or beliefs? |  |  |
| Do you know which organisations you can contact about legal issues? |  |  |
| Do you know how to contact a solicitor or appropriate adult? |  |  |
| Do you know how to access your file from the Council?  |  |  |
| Do you feel part of your care planning process? |  |  |
| Do you know what plans are made with you to prepare for adulthood? |  |  |
| Do you know what workers should do to ensure you are getting on okay when you are in care and have a voice? |  |  |
| Do you know what a pathway plan is? |  |  |
| Do you have someone to talk with if you have difficulties with: your social worker, carers, personal adviser or other professional? |  |  |
| Do you know what each of the different workers that you have are responsible for? |  |  |
| Do you know what age you can ride a moped and drive a car? |  |  |
| Do you know what ages you can have sex? |  |  |
| Do you understand consent and the right to say no to sexual acts? |  |  |
| Do you know what ages you can get married? |  |  |
| Do you understand what exploitation is and how to seek support? |  |  |

**Let’s think about Knowing Your Rights & Having A Voice- Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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1. **Let’s think about Health**

**This list is designed to support you to think about your health & wellbeing as you reach adulthood. Thinking about your health, how to access support and remain as healthy and active as possible can help you to have a better quality of life.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Are you registered with a doctor? |  |  |
| If you answered no, do you know how to register with a doctor? |  |  |
| Are you registered with a dentist? |  |  |
| If you answered no, do you know how to register with a dentist? |  |  |
| Do you have regular health checks ups? |  |  |
| Have you ever been for an eye test? |  |  |
| Do you know how/where to book an eye test? |  |  |
| If you wear glasses, do you have an up-to-date prescription? |  |  |
| Do you know what a healthy and balanced diet is? |  |  |
| Do you have a healthy and balanced diet? |  |  |
| Can you cook for yourself? |  |  |
| Can you cook a healthy meal on a budget? |  |  |
| Do you get good sleep at night? |  |  |
| Do you get regular exercise? |  |  |
| Do you know who to talk to about addictions, including alcohol, drugs and cigarettes? |  |  |
| Do you know who you can talk to if you are feeling down, worried or depressed? |  |  |
| Do you get angry if things do not go your way? |  |  |
| Do you worry about things a lot? |  |  |
| Do you know what to do to help yourself relax? |  |  |
| Do you know about Sexually Transmitted Infections? |  |  |
| Do you know about the morning after pill? |  |  |
| Do you have contact details for your health professionals? |  |  |
| Do you understand which health professionals will continue supporting you as an adult? |  |  |

**Let’s think about Health - Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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1. **Let’s think about Relationships**

**This list is designed to support you to think about your relationships as you reach adulthood. Having positive relationships can lead to a more fulfilling adult life. Knowing how to keep yourself safe and identify positive groups can help you constructively fill your time and give a sense of belonging.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you have good friends who you can trust? |  |  |
| Do you see your friends often enough? |  |  |
| Do you have a good relationship with your family or carers? |  |  |
| Do you see your family as often as you like? |  |  |
| Do you have professionals in your life who you can trust? |  |  |
| Do you know about your life before you came into care? |  |  |
| Do you know about your family, culture or religion? |  |  |
| Do you attend any youth groups? |  |  |
| Do you attend any activities including sports clubs? |  |  |
| Do you know who will be there to support you when you leave care? |  |  |
| Do you know who to ask about relationship issues? |  |  |
| Do you know about safe sex and contraception? |  |  |
| Do you understand consent in sexual relationships? |  |  |
| Do you know where to go for support around sexual health? |  |  |
| Do you know where to get advice about becoming or being a parent? |  |  |
| Do you have anyone you can take to about very personal issues? |  |  |
| Do you know who your social worker or personal adviser is? |  |  |
| Do you feel supported with your relationships? |  |  |
| Do you have updated contact details for professionals that you work with? |  |  |
| If you are going to live alone, have you thought about how you would deal with being lonely? |  |  |

**Let’s think about Relationships – Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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1. **Let’s think about Money**

**This list is designed to support you to think about your financial security as you approach adulthood. Thinking about your finances could help you to better manage your money, stay out of debt and plan to save for things in the future.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you have a bank account? |  |  |
| If not, do you know how to open a bank account? |  |  |
| Do you understand what budgeting money means? |  |  |
| Do you know where your income will come from when you leave care? |  |  |
| Do you know how much money you will get per week? |  |  |
| Have you ever gone shopping for your weekly food? |  |  |
| Have you ever saved up to buy something? |  |  |
| Do you have any savings? |  |  |
| Do you have a savings goal? |  |  |
| Do you know how to budget your money? |  |  |
| Have you had the chance to budget your money for the week? |  |  |
| Have you had the chance to budget your money for the month? |  |  |
| Did you manage to successfully make your money last for the week/month? |  |  |
| Do you know how to read a bill? Phone bill Gas/electricity/water bills Council tax bill |  |  |
| Do you know how to ensure bills are paid on time? |  |  |
| Do you know what a Direct Debit is? |  |  |
| Do you know about different types of credit and the problems these can cause? |  |  |
| Are you worried about money? |  |  |
| Do you have somebody that you can talk to about money if you are worried? |  |  |
| Are you confident about budgeting to cover your bills when you live independently? |  |  |

**Let’s think about Money - Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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1. **Let’s think about Accommodation**

**This list is designed to support you to think about your future accommodation as you reach adulthood. Understanding your options and preparing for future living arrangements could reduce some of the worries that you might have.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you know where you might live when you leave care? |  |  |
| Is your name on the housing register? |  |  |
| Do you understand the housing register and housing options? |  |  |
| Do you know what kind of accommodation you can apply for when you leave care? |  |  |
| Do you know how long you might have to wait for accommodation? |  |  |
| Do you know what a tenancy agreement is? |  |  |
| Do you know what utility bills you will have to pay? |  |  |
| Do you know what you will need to set up your home?  |  |  |
| Do you know how much it will cost to set up your home? (e.g., buying furniture) |  |  |
| Do you know what items are a priority for setting up your home? |  |  |
| Are you good at basic DIY, like changing a light bulb, painting a wall, putting together flat-pack furniture? |  |  |
| Do you know how to keep your home clean? |  |  |
| Do you know how to save energy in your home? |  |  |
| If something in your home needed fixing, would you know who to ask for help? |  |  |
| Do you know who can help you with accommodation issues? |  |  |
| Do you know what to do if you have a problem with your neighbour? |  |  |
| Do you know what to do if you have a problem with your visitors? |  |  |
| Do you know what the Environmental Health Agency is and what it can help you with? |  |  |
| Do you know how to be a good neighbour? |  |  |
| Do you know how to keep yourself safe at home? |  |  |
| Do you know about insurances that you might want when you get a property? |  |  |
| Do you have emergency contact details you would need? For example, for your landlord? |  |  |

**Let’s think about Accommodation – Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
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# **7. Let’s think about** **Education, Training and Employment**

**This list is designed to support you to think about your Education, Training and Employment as you reach adulthood. Having aspirations and goals around your future education, training and employment will better prepare you for achieving a more positive adult life.**

|  |  |  |
| --- | --- | --- |
| **Check** | **Yes** | **No** |
| Do you have a copy of your national insurance number? |  |  |
| Are you currently in education, training or employment? |  |  |
| Have you worked with a careers or employment advisor? |  |  |
| Do you know where you can go for a job or career advice? |  |  |
| Do you know where to go for education and training advice? |  |  |
| Do you know what kind of job or career you would like? |  |  |
| Do you know what education or skills you will need to get the job you want? |  |  |
| Do you know how to write a CV? |  |  |
| Do you know where to go for help writing a CV? |  |  |
| Do you know how to find job vacancies? |  |  |
| Do you feel confident about writing a job application? |  |  |
| Do you know where to get help with writing a job application? |  |  |
| Do you feel confident about going to a job interview? |  |  |
| Do you know what to wear to a job interview? |  |  |
| Do you know how to prepare for a job interview? |  |  |
| Are you confident about using computers and the internet? |  |  |
| Do you know what the minimum wage is? |  |  |
| Do you know about different training opportunities? |  |  |
| Would you know what to do if somebody was treating you unfairly at work or college? |  |  |
| Would you consider volunteering in your local community? |  |  |

**Let’s think about Education, Training and Employment – Actions**

|  |  |  |
| --- | --- | --- |
| **What do you need to find out?****What do you need to work on?** | **What will you do?** | **Where will you go to find out?****Who will you ask for support?** |
|  |  |  |
|  |  |  |

The lists have been adapted using ‘Get Ready for Adult Life’ (2007, What Makes the Difference) and Dorset Council’s Transfer Checklist for Care Leavers.

To find out about the local offer for Care Leavers please go to: [www.dorsetcouncil.gov.uk/young people-families/young peoples-social-care/young people-in-care/local-offer-for-care-leavers/local-offer-for-care-leavers](http://www.dorsetcouncil.gov.uk/children-families/childrens-social-care/children-in-care/local-offer-for-care-leavers/local-offer-for-care-leavers)

**Social Worker ………………………………………**

**Phone Number……………….….….………………**

**Personal Adviser ………………………....……..**

**Phone Number…………….…….….……………**

**Out of Hours ……………………………………….**

**Phone Number…………….…….….……………..**

**Advocate ………………………………………….…**

**Phone Number…………….…….….………………**