

YOUNG CARERS

To: Health and Wellbeing Board

Date: 10th July 2014

From: Juliet Snell, Director, Centre 33

1.0 PURPOSE

1.1 Two new laws designed to identify and support Young Carers will require Cambridgeshire to develop a plan for new ways of working. They place a duty on the local authority, emphasise integrated services and are the responsibility of the Health and Well-being Board to oversee. Young Carers in Cambridgeshire have raised concerns about lack of support and understanding in schools, difficult transitions to adulthood and lack of support for the cared for person.

2.0 BACKGROUND

2.1 Young carers are children and young people who look after someone in their family who has an illness, a disability, a mental health problem or a substance misuse problem, taking on practical and/or emotional caring responsibilities that would normally be expected of an adult.

2.2 Many Young Carers go unrecognised. According to the 2011 census, 4,208 young people under 25 years in Cambridgeshire provide unpaid care. Nationally there were 20% more Young Carers in 2011 than in 2001. Though the census is our only definitive measure of Young Caring across the whole population, it is completed by adults and so is widely accepted as an under-representation.

2.3 Of the 9,065 year 8 and 10 school pupils who completed the 2012 health related behaviour survey, 452, or almost 5% self-identified as Young Carers. As the rate of caring increases with age, this suggests that as many as 1 in 20 teenagers identify themselves as carers. *There are almost certainly Young Carers in every school and probably every classroom.*

2.4 What risks do Young Carers face?

- There is a large body of reliable evidence about the lives of Young Carers and how their caring role impacts on their future.
- Poverty: Young Carers are significantly more likely to grow up in poor families, with all the associated needs and risks that this brings. The average annual income for families with a young carer is £5000 less than families who do not have a young carer.
- Poor access to learning: Young carers have significantly lower attendance at school and educational attainment at GCSE level, *the equivalent to nine grades lower overall than their peers* e.g. the difference between nine B's and nine C's.

- Economic inactivity: Young carers are more likely than the national average to be not in education, employment or training (NEET) between the ages of 16 and 19; 1 in 4 carers between the ages of 16 and 25 are NEET.
- Poor physical and emotional health and risks: Young Carers are at higher risk of poor health and risk-taking behaviour as they move into adulthood. Cambridgeshire Young Carers are twice as likely to see physical aggression at home, and twice as likely to be bullied, than their peers. Half worry about their health, and one in 5 describe themselves as unfit. 17% said that a boyfriend or girlfriend had used threatening behaviour towards them, as compared to 8% of the wider population. 37% had a medium to low self-esteem score.
- Difficult transitions to adulthood: There is currently a pilot underway in Cambridgeshire which addresses the specific needs of Young Carers as they move to adulthood. Early findings from this pilot suggest that Young Carers are not getting enough support about careers and education options, are experiencing challenges at school and are struggling with their caring role in particular between the ages of 14 and 18.

2.5 What do Cambridgeshire Young Carers tell us?

In Cambridgeshire there is a network of 16 Young Carers groups. Members of these groups are nominated to district and county participation groups where they work together to explore and present the issues and views of Young Carers. The groups recently reviewed their priorities based on feedback from all groups:

- Improve awareness and support in schools
- Ensure Young Carers make good transitions to adulthood and improve support for Young Adult Carers.
- Improve identification and assessment of Young Carers especially by adult and health services.
- Improve awareness amongst young people and challenge stigma.
- Improve support within families and communication with whole families by professionals.
- Improve access to regular groups and activities.
- Improve access to respite.¹

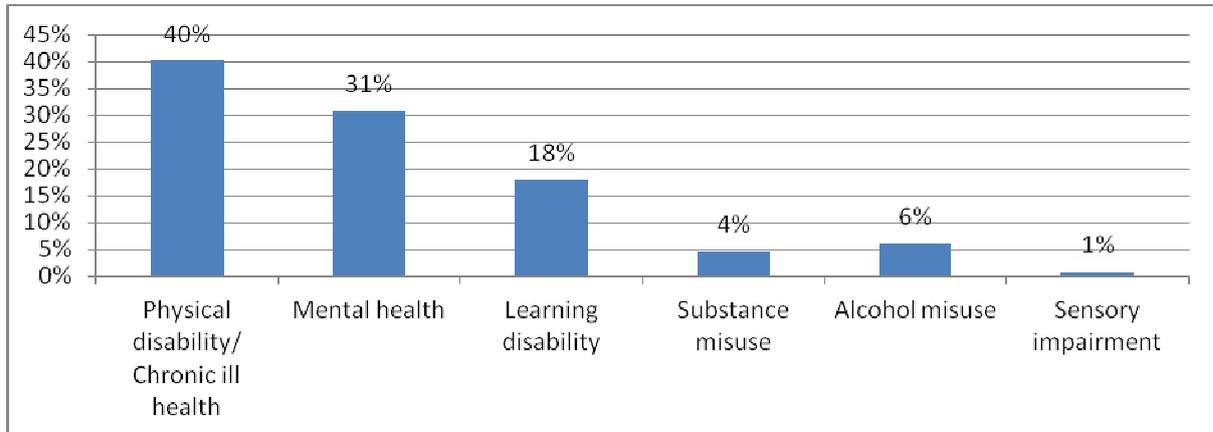
2.6 How are Young Carers in Cambridgeshire identified?

Below is a summary of the management information from the Young Carers Projects;

Project	2012-13	2013-14
Young Carers registered with Young Carers Projects (some of these will not be accessing groups but will receive newsletters and may have had assessments)	562	483
Young Carers regularly attending fortnightly support, activity and respite groups	335	320
One-to-one support sessions	137	80
Attendance at activities, trips and holidays	175	124
Attendance at specific and focused participation activities	40	40

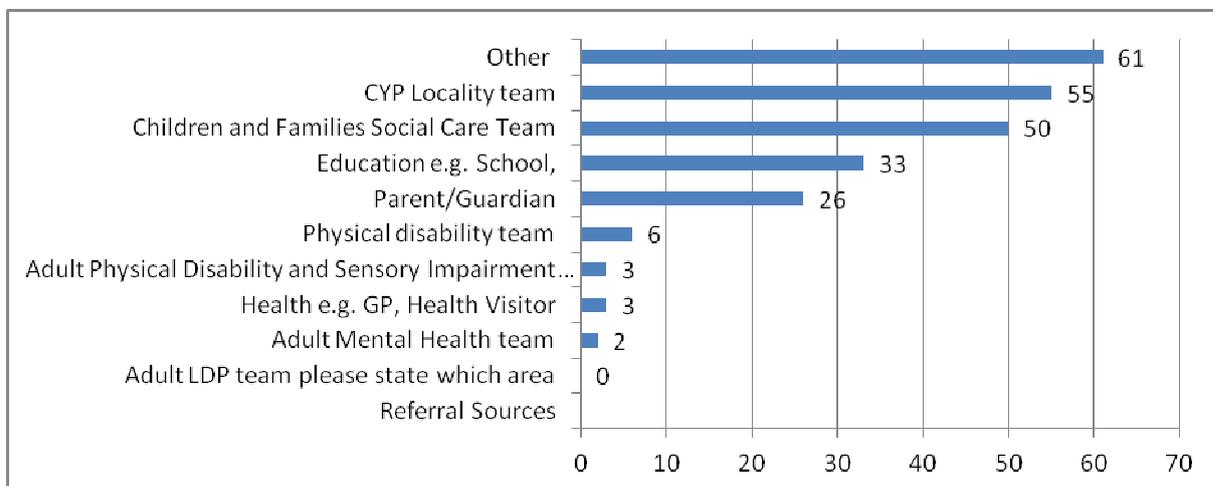
¹ From County YC participation group priorities, May 2014.

2.7 Centre 33, as chair of the Cambridgeshire Young Carers Strategy Group, collates and reviews management information. Amongst other things, this explores referral patterns to Young Carers Projects. We can see the issues that the cared for person in the family faces:



2.8 75% of Young Carers care for an adult, with around 50% caring for their mother. If services were identifying Young Carers early and before the Young Carer had suffered significant impact, we would expect a good proportion of referrals to come from services for adults, including secondary adult mental health services and GPs working with people with mental health needs.

2.9 In practice, referrals tend to come from children and young people’s services, indicating that the Young Carer has come to the notice of services that they are in touch with, due to issues they are facing in their development:



2.10 Please note the “other” category includes a wide range of other referral sources. The majority of these are from children and young people’s services, with a handful from adult carers teams and 2 from adult drug and alcohol teams.

2.11 CYCSG aim to see this pattern reversed; with Young Carers recognised by the services of their cared for person before crises develop. The new statutory requirements provide an opportunity for us to improve this.

3.0 SUPPORTING PARAGRAPHS

- 3.1 Young Carers are seen as a vulnerable group, and as such they should be prioritised for services from a wide range of providers, such as County Council locality teams.
- 3.2 There are 3 commissioned services in the County specifically for Young Carers:
- **Support for 150+ Young Carers; Huntingdonshire and Fenland**, delivered by Carers Trust Cambridgeshire. Provision of fortnightly groups and school groups in term time only; with joint projects with localities/community organisations in holiday periods. The holiday schedule of activities and trips engages Young Carers from Huntingdonshire and Fenland together in dual area events/activities and separately in each local area. There are additional specific activities and trips including one-to-one projects with young carers subject to a Child Protection /Children in Need plan, which are externally funded. Young Carers are also offered participation opportunities through involvement in national young carer initiatives (through national Carers Trust and the Children's Society) as well as Cambridgeshire's participation network in partnership with Centre 33. Carers Trust Cambridgeshire is a contributor to the county's multi agency strategy group and action plan.
 - **Support for 140 (100 funded by local authority, 40 externally) Young Carers; South and East Cambridgeshire and Cambridge City**, delivered by Centre 33. Provision of fortnightly respite groups (term-time), one-to-one support and advocacy outside of groups and activities, trips and holidays. Provision of awareness raising sessions to workers across agencies. Centre 33 provide additional services to Young Carers with charitable funding; a pilot of Young Carers Assessments, additional trips and holidays, and enhanced group activities in some areas.
 - **Delivery of a county-wide participation network of Young Carers and leadership of the multi-agency strategic response to Young Carers needs**, delivered by Centre 33. Provision of monthly participation groups across the county. Leadership of a multi-agency strategy group, and coordination of a strategic action plan that links to the needs and priorities of Young Carers themselves.
- 3.3 Examples of good practice: Please see Appendix 1 for 2 examples of good practice from Cambridgeshire; Carers Trust pilot provision for Young Adult Carers, and Centre 33's pilot Young Carers Assessment project.
- 3.4 Changes in law
- 3.5 The Children and Families Act 2014
- The new Children and Families Act, given royal assent in March 2014 will mean changes to the law to give greater protection to vulnerable children, better support for children whose parents are separating, a new system to help children with special educational needs and disabilities, and help for parents to balance work and family life. The act also ensures changes to the adoption system can be put into practice.
 - Young carers have stronger rights to assessment and support, in line with the Care Act for adult carers. Now, when a child is identified as a young carer, the needs of everyone in the family will be considered. It is envisaged that this will trigger both children's and adults' support services into action – assessing why a child is caring,

what needs to change and what would help the family to prevent children from taking on this responsibility in the first place. Detailed guidance is yet to be published, but it is clear that these new rights will demand services to do things differently and will require a step change in levels of service.

3.6 The Care Act 2014

- The new Care Act, given royal assent in May 2014, gives carers *the same recognition, respect and parity of esteem with those they support*. The measures, alongside those introduced in the Children and Families Act, aim to identify young carers and their support needs earlier.
- The Care Act places a duty on local authorities to consider the needs of children living in households where there is an adult who has a disability or impairment that requires help or care. This could include assessing what an adult needs to enable them to fulfil their parental responsibilities towards their children, or to ensure that young people do not undertake inappropriate caring responsibilities. When looking at an adult's, needs local authorities have to consider whether a child is in the household and consider whether any of the children may undertake any care roles in the home, as part of a "whole family assessment".
- The Act also says that adult social care services need to be involved in planning the support a young carer may need once they reach 18. It introduces a new right for young carers aged 16 to 18 who are transitioning to adulthood to have their specific needs assessed in light of how their role might change. This also applies to adult carers of children where it appears likely that the adult carer will have needs for support after the child turns 18.

4.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

4.1 See Section 5 below.

5.0 IMPLICATIONS

5.1 *From early 2015, Young Carers in Cambridgeshire will have a new entitlement to a Carers Assessment, which will need to address their needs as a carer and any inappropriate caring they do. Current resource and provision does not have the capacity to deliver this. The Cambridgeshire Health and Well-being board hold the responsibility to ensure the entitlement is provided for.*

5.2 Young Carers needs cut across the 6 priorities of the Cambridgeshire Health and Well-being Board and Network. Partners within the network will have specific roles to play in improving the support Young Carers and their families receive. Specifically:

5.3 ***Priority 1: Ensure a positive start to life for children, young people and their families***

- Each agency should as a minimum enable the identification and onward referral of Young Carers by skilling and informing their workforce. Key agencies such as health trusts, social care and schools should be able to report on the numbers of Young Carers identified.

- Agencies caring for and supporting adults with health problems, disabilities or substance misuse issues should acknowledge that parents of Young Carers may need extra support in order to parent effectively.
- All agencies should acknowledge Young Carers as a vulnerable group.
- Schools should recognise and address the risks to educational outcomes for Young Carers and put in place support to “narrow the gap” as with other vulnerable groups.
- There is a county-wide participation network of Young Carers, who provide an opportunity for all agencies to consult with and involve Young Carers.

5.4 ***Priority 3: Encourage healthy lifestyles and behaviours in all actions and activities while respecting people’s personal choices***

- Agencies providing services that support healthy lifestyles should acknowledge Young Carers as group facing barriers to access that risk exclusion, and need to address these barriers.
- In particular, Young Carers are particularly affected by poverty and poor mobility. They need to be specifically targeted with schemes to help them access healthy lifestyles.
- Young Carers are at higher risk than their peers of poor mental health and risk-taking behaviour. They should be targeted alongside other high risk groups in preventative work in these areas.

5.5 ***Priority 4: Create a safe environment and help to build strong communities, wellbeing and mental health***

- There is a strong correlation between being a Young Carer and risk of poor mental and physical health. Young Carers of parents with mental health needs are at particular risk, and Adult Mental Health providers should adopt whole family approaches when planning packages of care.
- Adult services do not identify or meet the needs of Young Carers, and this should urgently be addressed.
- Particularly in mental health and drug and alcohol services, a focus only on the patient leaves Young Carers vulnerable; either due to inappropriate caring, lack of involvement and voice as carers, or as children in need of protection.
- Young Carers risk homelessness as families are affected by ill health or relationships break down. Currently, they can get caught between housing providers, family home and social care, especially when 16 or 17. Their entitlement to safe housing if their family cannot accommodate them at this age should be clarified.

5.6 ***Priority 6: Work together effectively***

- Young Carers needs cut across all agencies. In particular, they can only be met if adult and children and young people’s services work together. Current structures and practices do not allow for this.

6.0 RECOMMENDATION/DECISION REQUIRED

- 6.1 For the Board to consider the report and how it can support the improvement of arrangements and outcomes for Young Carers

Appendix 1: Examples of good practice; Carers Trust Cambridgeshire

Working in partnership

Carers Trust Cambridgeshire (CTC) work very closely with CCC locality teams, particularly in Huntingdonshire. We have developed strong partnerships that enable the establishment of new groups, jointly supported by staff from both CTC and localities. This has benefits in respect of a bigger presence through LARM/CAF/CP/CiN processes, more multi agency awareness through partnerships (Education and Social Care) and the ability to enable YC's to access more mainstream activities. In addition, it has been beneficial in respect of added value projects, such as supporting Young Carers through 2 arts award programme that have been specifically developed and facilitated by Locality Teams (Huntingdon and Ramsey). The development of some joint funding bids is being discussed, where local specific Young Carers projects can be delivered.

Schools projects (externally funded) are supporting Young Carers to maintain good attendance and enabling strong awareness of Young Carers within secondary schools in particular.

Young Adult Carers

The Strive Project (Young Adult Carers) funded through Carers Trust time for Change project offers a year-long direct delivery project to 50 young people (16-21 year olds) in Huntingdonshire and Fenland. The project was specifically designed to be themed based and address issues faced by Young Carers in transition.

- Confidence and aspiration
- Economic well being
- Education, employment and training
- Health and well being

External providers and guest speakers will deliver the majority of the project and a pilot scheme of family assessments is also an integral part of the project delivery. This will enable evidencing of Young Adult Carers and families' access to carers support through adult social care and other agencies that support carers.

We have great support from local councils and through local rotary clubs. A young adult carer is undertaking a week long leadership and development course funded by St Ives Rotary club.

Appendix 2: Examples of good practice; Centre 33

Young Carers Assessment Pilot

Centre 33 launched a three year pilot to deliver Young Carers Assessments routinely to all Young Carers in advance of their transition to Further Education. Centre 33 had some limited capacity to offer Young Carers one-to-one support from a project worker before the pilot. However, as a scarce resource, it tended to be used by Young Carers in times of crisis, and opportunities for preventative work was lost.

The YCA service is offered to any Young Carer in year 9/10 (age 13-15) and has capacity to see 30-40 Young Carers each year. Young Carers are identified in YC groups and by promotion of the service to year heads in secondary schools and to locality teams. An assessment tool; an appendix to a CAF (common assessment framework) form was developed and is amended in response to the needs of Young Carers.

The intended outcomes of the project are;

- Reduce Isolation
- Increase Aspirations
- Be better supported

Our learning from the first half of the pilot has been:

Before Children In Need provided funding, we used any one-to-one capacity we had to deal with crises and to support young people after things had deteriorated in their families. This project provides us with the time and tools to take a really good look at where a young person currently is and how they feel about their world, and allow conversations and support looking at the future.

Through the project the young carers in transitions feel enabled to look beyond their caring role, to challenge professionals and families to support aspirations and put in place a support network that enables the young person to access what they need to remove barriers and achieve outcomes.

Key learning points:

- Work around transitions needs to start at an earlier age for young carers.
- Young Carers may be placed in classes that do not encourage them to reach their full potential due to attendance issues, and concentration difficulties – This is not ok.
- Parents may have limitations due to their own needs, and may struggle to challenge what support their child needs, or to ensure they receive support entitled to.
- Practical support – help to attend open days, interviews and college applications.

Bike It

Centre 33's Bike it! project aims to reduce the isolation of Young Carers living in Cambridge through supporting them to develop the skills and confidence in cycling leading to increased access to their community, improved opportunities to make and maintain friendships, increased opportunity for physical exercise improving their physical and mental health and reduced reliance on less green transport methods such as taxis.

For Centre 33 this project is a departure from our regular groups model for one term in the City, to explore whether Young Carers can be enabled to have increased access to leisure, health and friendships outside of YC groups. The project is still underway, but early findings have shown that many Young Carers lack even very basic independent mobility skills and resources. Young Carers have accessed a more flexible range of activities, with one-to-one and small group bike rides alongside drop-in groups- sometimes focussed on particular themes.