

**YOUNG CARERS**

To: Health and Wellbeing Board

Date: 30<sup>th</sup> April 2015

From: Tom Jefford Head of Youth Support Services

**1.0 PURPOSE**

- 1.1 To update the HWB board regarding the re-commissioning of services for young carers in the context of changing national legislation.

**2.0 BACKGROUND**

- 2.1 Children Families and Adults (CFA) currently commissions a support contract for young carers from Centre 33 and from the Carers Trust. Centre 33 covers Cambridge City, South and East Cambridgeshire and Carers Trust Huntingdonshire and Fenland. This service was developed following the National Carers strategy of 2008 and was designed and commissioned following a local needs assessment and development process. The budget is £158k. Juliet Snell from Centre 33 also chairs the County strategy group for young carers. Responsibility for this work in CFA has historically been shared between Richard Holland, Head of Service for Disability and Tom Jefford with the budget responsibility passing across to E and P just recently. The contract pays for the support of those with highest need with Centre 33 and the Carers Trust both using their own funds and grants to deliver for lower need young carers. The services provided are good but it is accepted by all that the model of supported all age group work needs to change given that there are waiting lists of young carers seeking to access services. The system needs to create progression and movement with a new expanded delivery model.
- 2.2 It is planned to re-commission the support services in 2015 as it nears the end of the current contract period. However this is also a period of change with new legislative burdens coming into place from April 1<sup>st</sup> 2015. Whilst anticipated for some time, the actual regulations arrived late in draft form and are not yet final which has made planning difficult. However, an allocation of additional funding was made through the County business planning process to commit an additional annual budget of £175k to young carers from April 2015 in anticipation. The new contract needs to reflect the demands of the new legislation where appropriate.
- 2.3 A time line has been established which will seek a 8 month extension of the current support contract, the development of a new service specification which takes account of rising need and new requirements and a procurement process with a new service commissioned by November. This is still a tight timescale although procurement team support has been agreed. The strategy group met for the last time in January to free up the participants to bid for the work. A workshop in February was the starting point for raising awareness of young carer issues and developing the specification with young carers presenting their own ideas and

issues to the workshop attendees. These ideas include training of school staff, online support and participation work. It is anticipated that whilst the Carers Trust and Centre 33, have worked collaboratively and non-competitively to date dividing the County in two, that both organisations are likely to make whole County bids for the new contract.

### **3.0 SUPPORTING PARAGRAPHS**

3.1 Section 96 of the Children and Families Act 2014 introduces new rights for young carers to improve how young carers and their families are identified and supported. From April 2015 all young carers will be entitled to an assessment of their needs by the Local Authority. This new provision is intended to work alongside measures in the Care Act 2014 for assessing adults to enable a whole family approach to providing assessment and support to take place seamlessly. The Department for Education finally sent out a consultation on the young carer draft regulations on 22<sup>nd</sup> December 2014 with a response date of 26<sup>th</sup> January 2015. Final regulations were laid before Parliament on 6<sup>th</sup> March with more detailed guidance anticipated.

3.2 Section 96 of the Children and Families Act 2014 defines a young carer as;

*“...a person under 18 who provides or intends to provide care for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work).”*

A Local Authority must assess whether a young carer within their area has needs for support and, if so, what those needs are, if —

(a) It appears to the Authority that the young carer may have needs for support, or;

b) The Authority receives a request from the young carer or a parent of the young carer to assess the young carer’s needs for support.

3.3 The regulations set out the matters to which the Local Authority must have regard in carrying out a young carer’s needs assessment. The scope of a young carer’s needs assessment is set out in regard to the issues that a Local Authority must take into account when carrying out a young carer’s needs assessment. Further specification is anticipated in the final guidance which will also define the term “whole family approach”.

3.4 A whole family approach clearly implies making sure that any assessment takes into account and evaluates how the needs of the person being cared for impacts on the needs of a child or young person who is identified as a possible young carer, or on any other child in the household. This approach is intended to allow the Local Authority to combine a young carer’s needs assessment with any other assessment in relation to the young carer, the person cared for or another member of the young carer’s family.

3.5 For children’s social care the Children and Families Act modifies section 17 of the Children Act to allow the Local Authority to combine a young carers’ assessment with the assessment of adults in the household, where the young carer and the

person being cared for agree. To some extent a proportion of young carers have always been regarded as falling under section 17 but this change strengthens this provision.

- 3.6 For adult social care the Care and Support (Assessment) Regulations 2014 require that the Local Authority assessing an individual with care needs must “consider the impact of the individual’s needs on the well-being, welfare, education and development of any child involved in providing care and identify whether any of the tasks which the child is performing for the individual are inappropriate for the child to perform having regard to all the circumstances” (Regulation 4(3))
- 3.7 Whilst these measures are intended to avoid young carers and the people they care for having to be assessed by different agencies working independently and in isolation from one and other, the actual task of making this work in a collaborative manner between adult and children’s services is going to require work. The aspiration of the changes is clear in that by combining assessments for young carers and their families there is the potential to offer a single route enabling them to access the right kind of help. The reality of this may be much more difficult although if achieved would certainly bode well for collaborative working across CFA .and with key partners such as CPFT and the Inclusion substance misuse services.
- 3.8 The draft regulations suggest that a young carers’ needs assessment must take into account the feelings, wishes and aspirations of the child concerned and of their family. The assessment should draw on a wide range of evidence about their needs and of the needs of the person they care for. The evidence for the assessment is likely to include information held by adult health and care services. The young carers’ needs assessment must note any differences of opinion between the young carer and the person cared for about the nature of that care and about how, in future, this might be provided to avoid relying on the child having to take on an excessive caring role. Young carers will need the same access to education, career choices and wider opportunities as other children in the community without care responsibilities. It may prove beneficial to learn from the assessment process being used by Together For Families programme which takes in a variety of information from different sources. Initially at least a slightly modified Common Assessment Form (CAF) will be used.
- 3.9 The regulations state that the professional appointed to carry out a young carers’ needs assessment must have the necessary knowledge and skills to assess the child’s developmental needs and make any consequent recommendations about future intervention and support. This suggests that the person need not be a qualified social worker and indeed could be from a voluntary sector agency. The recently let adult carer contract combines an assessment function and the provision of support thereafter. This means that the Carers Trust must remain within the allocated budget even if assessed needs are high. At this point it is not proposed to combine these functions for young carers.

- 3.10 The regulations stress the importance of gathering a wide range of information including that held by education and health professionals in order to form a view about how the child is affected by their responsibilities as a young carer. The assessment should also take account of relevant information about the clinical and care needs of the person cared for which will be known to health and adult care services.
- 3.11 When assessing the needs of a young carer, account must be taken of the impact of the child's caring role on their health and development. The assessment should address whether the child's caring role limits their educational opportunities, whether caring prevents the child from building relationships and friendships and how caring affects the child's emotional wellbeing. The assessment must also reach a view about whether any of the child's caring tasks are "inappropriate", in view of child's own needs and personal circumstances. Inappropriate tasks could include, personal care, lifting, administering medication, maintaining the family budget or providing emotional support to the adult.
- 3.12 If, as a result of their caring role, a young carer is assessed as unlikely to achieve, maintain, or have the opportunity of achieving or maintaining a reasonable standard of health or development without the provision for services, they will be a child in need, under Section 17 of the Act and entitled to services to support them.
- 3.13 Services could be provided by CFA but could also include assistance from local adult services or from health services (though there is no duty under the Care Act to meet the needs of an adult who does not otherwise meet the eligibility criteria in order to support a carer under 18). This would include adults with substance misuse issues for example. The provision of services to support the person the child cares for should help the young carer by limiting the extent of their caring responsibilities.
- 3.14 A written copy of the completed assessment must be given to the young carer, their parents and to any other person, if a young carer, or their parent, requests. Young carers and their families must also understand how to make representations or complain, if they are dissatisfied with the conduct of the assessment

#### **4.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY**

- 4.1 If relevant, a reference to the alignment with the Cambridgeshire Health and Wellbeing Strategy (link to Strategy <http://tinyurl.com/ccch-wstrat>).

#### **5.0 IMPLICATIONS**

- 5.1 The new legislative burdens will create new challenges across CFA and other partners such as CPFT and require a different way of working and collaboration. Should a young carer be identified by adult services, by children's services or by self-identification will the service responses be the same? The draft regulations are relatively loose in terms of who does what and it is entirely possible to interpret them as placing the burdens largely upon adults or largely upon children's services.

What is clear is that an active planning process that adequately represents both perspectives will be crucial in making sense of this locally. In that regard there are organisational challenges which should bind children and adult services closer in service of a co-ordinated pathway.

- 5.2 There is a balance to strike between the allocation of budget to the commissioned support provision and to the staffing capacity required for assessment. As an interim measure from April 1<sup>st</sup> to March 16 two experienced Children's Locality Workers who have been working with Inclusion Substance Misuse Service on a Link Worker project will both work half time to provide young carer assessments. It is not clear if this will be enough capacity or not but by making temporary arrangements we can gauge the level of demand before committing to permanent appointments. As already stated the capacity within the current commissioned support is stretched and the model of support needs revision. As more young carers are likely to be identified it is inevitable that demand will increase and so this pressure will need to be met.
- 5.3 It would be possible to add the assessment function to the existing workforce rather than to create new posts but this is unlikely to be favoured not least as failure to carry out an assessment may be challenged and could lead to cases proceeding to the Local Government Ombudsman. Therefore a significant development task would be required to develop the skills of staff to respond to the new assessment requirements and to set out clear pathways for staff to follow.
- 5.4 It is not yet clear if a national template for young carer assessment will be developed building on work undertaken by leading charities such as the Children's Society or whether CAF or the single assessment will be able to capture the required information or be adapted to do so. Locally, Centre 33 has piloted an assessment of young carers which has required a significant number of visits to complete. This is an assessment and an initial piece of casework akin to a Lead Professional model. We will seek to learn more about the potential of this model and how the Locality Workers will both transition young carers to the contracted support and in some circumstances also develop pathways to other services as a Lead Professional.
- 5.5 The current service providers have suggested that we make an age split in the services possibly from 8-14 or 15 and another group from 14 or 15 upwards. The aim is to develop a rolling modular programme that gives a group experience to young carers in which they can develop a peer group. Following this the group that then exit this move to a virtual group which can continue to be supported and moderated. The current services are good at developing participative work with young carers and in working with schools in particular with issues such as school understanding, school attendance, careers advice and bullying are high on young carers' agendas. There are some very good school based services and further development of these is seen as key to the new model being developed.

## 6.0 RECOMMENDATION/DECISION REQUIRED

- 6.1 The Board are asked to note the new burdens for the assessment of young carers being placed upon the County Council, NHS and partners and the plans in place to meet these.
- 6.2 The Board are asked to note the strategic and cultural challenges that will need to be overcome in order to facilitate effective cross agency working in order to enable young carers to be identified by partners and the pathways opened to meet their needs.

Source Documents	Location
Young carer regulations 2015	<a href="http://www.legislation.gov.uk/uksi/2015/527/pdfs/uksi_20150527_en.pdf">www.legislation.gov.uk/uksi/2015/527/pdfs/uksi_20150527_en.pdf</a>