

A Strategy for Young Carers in Solihull

December 2008

1. Introduction

- 1.1 The recently published report “Carers at the Heart of 21st Century Families and Communities”¹ acknowledges that many young carers value the contribution they are able to make within their families, and that caring can be a positive experience, helping to foster maturity and independence and strengthen family ties. At the same time it also outlines the Government’s view that children and young people should be protected from inappropriate caring, and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters Outcomes.
- 1.2 Young carers have been identified as a priority within the Children and Young People Plan as potentially one of the most vulnerable groups of children and young people, at risk of experiencing poorer outcomes than their peers. The needs of young carers are often hidden, yet the pressures of caring for a family member can often have a wider effect on their emotional well-being.
- 1.3 Being a young carer can have detrimental effects on young people, including problems at school, health problems, emotional difficulties, isolation, lack of time for leisure, feeling different, pressure from keeping family problems a secret, problems with transition to adulthood, lack of recognition and a feeling they are not listened to.
- 1.4 Many young carers have particular problems at school, including poor educational performance and difficulty in fitting in with their peers. Such problems may be a consequence of poor attendance at school, and the pressure and stress caused by caring responsibilities.
- 1.5 The issue is not, however, just about educational attainment. Young carers can be at risk of social isolation due to additional home life responsibilities, missing out on many of the leisure opportunities available to their peers. They are also more at risk of bullying, often in relation to the adult they care for, for example having a parent with poor mental health or a substance misuse problem, and this has been recognised in recent guidance for schools.²
- 1.6 Many local areas, including Solihull, have specialist services for young carers (Solihull Young Carers). However the report “Carers at the Heart of 21st Century Families and Communities” highlights the vital role of universal services- schools, GP’s, hospitals- in young carers lives. The support, understanding and practical guidance young carers receive through these settings can make a significant difference to their lives. Where it is lacking, young carers say it adds substantially to the pressures and problems they face.
- 1.7 The purpose of this strategy is; -

¹ Carers at the Heart of 21st Century families and communities, HM Government 2008

² Safe to Learn: Embedding Anti Bullying work in schools DCSF 2007

- to ensure that young carers in Solihull are recognised and valued,
- to increase the support available to young carers , particularly through universal services, so as to improve outcomes,
- to take an integrated approach to meeting the needs of young carers across all agencies, including adult services, in order to reduce the numbers of young people who feel they must take on or continue in an inappropriate caring role.

2. Definitions of Young Carers

- 2.1 In Solihull, stakeholders have agreed a comprehensive definition of young carers ³ as “...children and young people under 18 who provide care, assistance and support to another family member. They carry out, often on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would normally be associated with an adult. The person receiving the care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or another condition connected with a need for care, support or supervision. Factors which influence the extent and nature of young carers tasks and responsibilities include the illness/disability, family structure, gender, culture, religion, income and the availability and quality of professional support and services”
- 2.2 It is proposed that Solihull adopt this wider definition of young carers as it explicitly includes siblings, and the factors leading to caring responsibilities, which can often be complex.
- 2.3 For practical purposes, especially when working with young carers themselves, a shorter, more child friendly definition will be used which states that “ Young carers are young people under the age of 18 who look after someone in their family who has an illness, a disability, mental ill health or a substance misuse problem. Young carers take on practical and/or emotional caring responsibilities that would normally be expected of an adult”.
- 2.4 This definition is the one adopted by Solihull Young Carers, and reflects several definitions of a ‘young carer’ that exist in current legislation and guidance.

3. Stakeholder Involvement

- 3.1 There has been a small multi agency Management Group for the Young Carers Project, Solihull Young Carers, in existence for some time, which meets 4 times a year, which has acted as a steering group for the Young Carers Project, and has overseen a number of Young Carers ’ audits in recent years. The Group has representation from the Princess Royal Carers Centre, Children with Disabilities Team, Education Welfare Service, and the School Nurses team.
- 3.2 A wider group of stakeholders, including practitioners from health, education, substance misuse service, youth service, CAHMS, and the wider voluntary sector has met three times in recent months to help shape this strategy. It is this wider group of stakeholders who will continue to be involved in future developments, implementation of the strategy and subsequent annual action plans.

³ Becker,S (2000) Young Carers, in Davies,M (ed) The Blackwell Encyclopaedia of Social Work. Oxford: Blackwell Publishers

3.3 The Children's Society Participation Team have been commissioned to work with young carers to ensure their active involvement in the development and the monitoring of the Strategy, building on previous work over recent years, including a DVD produced by Young Carers in Solihull in 2007.

4. **Our Vision**

4.1 At a recent workshop event with stakeholders in Solihull⁴, it was proposed to adopt the Government's new 10 year vision for young carers - " That children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters Outcomes "

5. **Measures of Success**

5.1 If the strategy is to be deemed a success in improving outcomes for young carers, over time we would expect to see the following improvements: -

5.1.1 Service Audits report an increased awareness of the needs of young carers across all agencies, and all staff providing services are well informed about young carers issues.

5.1.2 Agencies, including schools, are able to evidence how many young carers are accessing their services.

5.1.3 There are working protocols in place to support better integration between services, in particular between adult and children's services, with whole family support offered to families affected by illness, disability or substance misuse where there are young carers.

5.1.4 There is evidence that the needs of young carers are being assessed through the use of the CAF in order to provide support at the earliest possible stage.

5.1.5 There is improved school attendance by young carers (future measure)

5.1.6 There is increased access to leisure opportunities by young carers (future measure)

5.1.7 Young carers feel consulted about services that affect them and their families

5.1.8 Young carers and their families have access to information about services, financial support etc that is timely and easily accessible

5.1.9 Young carers feel supported, listened to and valued in their caring responsibilities at school

5.1.10 There is increased access to support of specialist services for the most vulnerable young carers, e.g. CAMHS and Stra8up.

5.1.11 Young carers have access to a Young Carers service

⁴ Outcomes Based Accountability Workshop – Young Carers 16th September 2008

6. National Context

- 6.1 The recent Carers Review, which undertook a series of national consultations and a review of broader evidence to prepare the report “Carers at the Heart of 21st Century Families and Communities” acknowledges that precise national data on the scale of formal caring by children is limited. Information on the extent of the impact on opportunities for young carers, or how caring contributes to negative health and other outcomes of the longer term is not available. The hidden nature of caring within families has meant that there has been little systematic identification and tracking.
- 6.2 The 2001 Census indicated some 139,000 children across England were offering some care to family, neighbours and friends, and of these some 22,00 were reported to be caring for substantial periods of time- between 20 and 50 hours per week. However because of the Census methodology, there is a question about whether these figures are an over or under estimate.
- 6.3 There is, however, growing evidence of the difficulties and disadvantages many young carers ' face. For example, national research has shown that between 13% of primary aged children 27% of secondary aged children/young people are experiencing some problems at school as a result of their caring responsibilities.⁵ This research also showed that incidence of missed schooling or educational difficulties is most marked for young people who care or support a relative with drug or alcohol problems.
- 6.4 Young carers are often in families living in relative poverty, so they may also be affected by other factors known to be linked to poorer outcomes such as worklessness, lone parent households, substance misuse and parental mental ill health. Similarly, young carers can be particularly disadvantaged when making the transition to adulthood, and many feel their caring responsibilities limit their choices and options.
- 6.5 In responses to the national consultation for the Carers Review, undertaken in 2007, young carers reported particularly concerns about the gaps in support for the person they cared for and for the wider family. This was the top priority, and many felt they had no choice other than to step in to fill the gap. Other main concerns were gaps in emergency support, not enough short breaks and project based support for young carers themselves, and lack of understanding and support from GP's, schools and other front line settings. They asked for more support for parents to be parents, for the family to be a family, and for support to give them the time and space they need.
- 6.6 From spring 2009 there will be a new national carer's helpline, which will provide young carers with an easy to access source of information with signposting to more specialist sources of support. It will be important that we promote this helpline locally at the appropriate time.

7. What Works for Young Carers?

- 7.1 In the light of national consultations and other evidence, recent national guidance and good practice all direct practitioners to consider the needs of the young carers within the context of the family.

⁵ Deardon and Becker, Young Carers in the UK: The 2004 Report, 2004

- 7.2 Reaching Out: Think Family, the first report from the Families at Risk Review⁶ highlighted the importance of the home environment and the crucial influence of parents in determining outcomes for children. When parents face multiple problems in their own lives the impact can be severe and enduring for both themselves and for their children. Adult services have a vital role to play in a Think Family approach, which means looking at individual needs in the context of the whole family, so clients are seen not just as individuals but as parents or family members.
- 7.3 Family pathfinders are currently developing models of good practice in the implementation of think family approaches, including Extended Family Pathfinders for Young Carers, who are testing models of preventative support around the person cared for and the wider family, which will help ensure that children within these families do not have to take on inappropriate caring roles. This work will be an important source of information about what works for young carers.
- 7.4 National evidence suggests that some schools provide high quality, tailored support through their pastoral and other support systems, such as school nurses, though many do not. Young Carers and other stakeholders report that where support works best, it involves action to address the root causes of the problem, particularly gaps in support around the person being cared for.
- 7.5 The Children's Society National Young Carers Initiative has been funded by the DCSF, in partnership with The Princess Royal Trust for Carers to develop training and support for local areas to encourage and support effective implementation of interagency whole-family assessments and service delivery at local practice level, promoting joint working between adult and children's services.
- 7.6 The Children's Society has also recently published Key Principles of Practice to support agencies to respond to the needs of young carers and promote whole family working. The principles recognise; -
- There is a need to safeguard children by working towards the prevention of children undertaking inappropriate care of any family member
 - The key to change is a whole family approach to needs led assessments to ensure that service provision is child focused and family oriented

Example of good practice

The SPACE project was developed by Hillingdon Carers to give support to young people caring for a family member affected by substance misuse and to prevent family breakdown – 86 young people were supported by this project in 2007/8. SPACE works with all the organisations and agencies in contact with a young person's family, and rather than treat one problem or one family member in isolation, it addresses problems and families in the round.

⁶ Reaching Out: Think Family

- Young carers and their families are the experts in their own lives and as such must be fully involved in the development and delivery of support services

Example of good practice

The Dundee Young Carers Forum meets on a monthly basis. They hold 'tell it like it is' events, which include a focus on parents and provides them with opportunities to express their views on having children who are young carers. There is also a Family Support Worker who supports the parents with advice and support, and this role has led to better engagement with the families of young carers, which has improved outcomes for young carers themselves.

- Young carers should have the same access to education and careers choices as their peers
- It is essential to continue to raise awareness of young carers and to support and influence change effectively, work with young carers and their families must be monitored and evaluated regularly.

Example of good practice

Norwich and District Young Carers Schools Project has excellent links with schools and other agencies. Its aims are to identify and give support to young carers in schools across Norfolk. Services offered include support groups, training for professionals, awareness –raising sessions and assemblies in schools

- Local Young Carers projects and other direct services should be available to provide safe, quality support to those children who continue to be affected by any caring role within their family.

Example of good practice

The Southampton Sibling Group provides an opportunity for siblings to express some of their feelings of what it is like to grow up with a disabled sibling. Group work helps to combat feelings of isolation and secrecy. It provides siblings with fun activities and a positive experience and a chance to mix with a peer group who have similar experiences to themselves.

- 7.7 Further national research is being commissioned to assess the impact of project-based support for young carers, as a detailed evaluation of the different approaches by specialist projects and their impact on outcomes for young carers is lacking. The evidence and learning from this research will be shared so local provision can reflect best practice in quality and impact.

8. Local Context

- 8.1 The 2001 Census indicated that at that time there were 658 children and young people between the ages of 4 and 19 providing care of between 1 and 50+ hours in Solihull. However this is likely to be an underestimate as national studies show that between 4 and 10% of the population will have been carers at some time in their childhood. (See Appendix 3)
- 8.2 In 2005, a local needs analysis of children of substance misusing parents identified 368 children, and estimated a total of approximately 1606 children and young people up to 18 in the Borough, as affected by this issue.
- 8.3 As part of the commissioning approach to improving outcomes for young carers, an audit was undertaken during spring 2008 to look at needs, and map current services to find out how local agencies were responding to the needs of young carers. (See Appendix 2)
- 8.4 Questionnaires were sent out to all schools, social care teams, the Care Trust, and a variety of other agencies. There were a total of 48 responses, and the main conclusion from the audit was that there is a lack of knowledge and understanding by professionals about young carers and their needs.
 - 8.4.1 The majority of services were not aware of any young carers using their service.
 - 8.4.2 Only two services mentioned a specific process to identify young carers, with one school nurse routinely asking all 7-12 year olds if they look after someone in their family, but its clear that there is no consistent approach.
 - 8.4.3 The majority of respondents felt that not knowing that a young person was a carer would be a barrier to them getting the best out of the service offered, as appropriate referral, practical help and emotional support may not be forthcoming unless the need for it was identified.
 - 8.4.4 Of the services offered to young carers, the most commonly mentioned were information, advice and signposting to other agencies; direct support to young **carers** included additional support for the person being cared for, in order to provide respite for the young carer; arranging outings for the young carer, if funds were available; Stra8up, and transition planning.
 - 8.4.5 In answer to a question about whether they had made adjustments to their services for a young carer, just over half the respondents answered yes, giving examples such as negotiating timetable issues, start and finish times at school, extensions on course work, timing of reviews and more flexibility about venues for support, highlighting the benefits of awareness to individual needs.
 - 8.4.6 Over half of respondents felt more could be done to support young carers, suggesting a number of areas for action including; greater efforts to identify young carers; awareness raising; training for teams; improved provision of information; support groups; more targeted support, including support for the person being cared for; and a more consistent approach across agencies, linked to safeguarding.
 - 8.4.7 In terms of barriers preventing services being more supportive to young carers, there were issues raised about time, staff resources and funding, and again lack of awareness of which young people are carers was seen as a barrier to access, as was issues of confidentiality and data protection.
 - 8.4.8 Examples of services that respondents would like to see included support groups; trips; respite; counselling support; help with education; advice and information

8.5 In December 2007 young carers in Solihull were involved in developing a DVD where they shared their feelings and experiences of being a young carer. The young carers responded to a series of question:

What does being a young carer mean to you?

- Someone who cares for a member of their family i.e. Mum
- Someone who helps in many different ways
- We are young people who's job it is to care for a member of the family 24/7
- That you look after someone
- We help parents and care for them
- Someone who cares for someone else

What are some of the positives of being a young carer?

- Helping, loving, caring
- Seeing my Mom's happy face in the morning
- Loving, fun, helpful
- Being close to family
- Knowing that i am helping the people i love

What are some of the negatives about being a young carer?

- Having to do the housework
- You don't get much time for yourself and it can be stressful
- Hardly getting any breaks and being treated different to other people
- Not allowed out and don't get to see your friends anymore
- Nothing

Who might be the best person/place to go to for support or advice?

- School
- Family
- Grandparents
- Support worker
- Solihull Young Carers
- Social Services
- Police

8.6 To date there has been little consultation with parents of young carers to seek their views about how services in Solihull are meeting the needs of their family, and how this might be improved. This will be addressed within the Implementation Plan, however, there is evidence from consultations undertaken in other parts of the country that better coordination of services, particularly between adult and children's services is crucial. " I would like an assessment for each person in need in our family and for all professionals to get together and talk about us as a family rather than as separate individuals" Disabled Parent⁷

8.7 In Solihull there is a specialist service for young carers - Solihull Young Carers, which has been managed by The Princess Royal Trust for Carers, as part of Solihull Carers Centre since November 2004. Prior to this, Crossroads – Caring for Carers provided the service.

⁷ The Children's Society: Young Carers Initiative website www.youngcarer.com

- 8.8 Solihull Young Carers currently works with 43 young carers who are designated as the primary carer in the family. Any other children in the household who provide caring duties currently cannot access the service. Siblings of children with a disability are frequently referred to Solihull Young Carers, but they are unable to offer a service due to lack of resources. Currently there is one full time worker in the Young Carers Service, 1 sessional worker and 5 volunteers.
- 8.9 Solihull Young Carers currently works with 9-18 year olds living in Solihull, and aims to support them through various means – 1:1 support, advocacy, information and advice, activities and days out with their peers, both through young carers and local leisure groups. Solihull Young Carers are based in Chelmsley Wood, but work across the north and south of Solihull, meeting with young people in schools, youth and community centres, leisure services and at home. Young people who access the service receive support for their individual needs, but are also encouraged to engage with their peers in other youth settings.
- 8.10 On the recent DVD produced by young carers, the following comment comes from a young carer aged 10 “ Young Carers is good fun, because we get to go out on trips and it gives you a break from helping your mom or dad”
- 8.11 Solihull Young Carers reports a lack of referrals from adult services, which reflects the national picture that there is insufficient consideration of whole family approaches in Solihull.

9. Resources

- 9.1 Solihull Young Carers receives a proportion of the Carers Grant, which comes into the authority via the Care Trust. From April 2009/10 the proportion of grant available to support services to young carers will be £30,000 per year.
- 9.2 Other funding for the Young Carers Service comes from charitable grants, i.e. a one off grants, and small grants for activities. Grant funding for core costs is becoming increasingly difficult to access, though opportunities for innovative projects and one off grants for trips and activities are more readily available.
- 9.3 Solihull Council supports Solihull Young Carers through supervision and support for the Young Carers worker offered through the Youth Service.
- 9.4 In the financial year 2008/9 there is a shortfall in funding for Solihull Young Carers, and £12.5k has been identified from the Children’s Fund grant to meet this shortfall. A longer-term sustainability plan is essential to ensure the continuity and growth of a young carers project beyond current capacity.
- 9.5 Resources through programmes such as National Healthy Schools Programme, the Social and Emotional Aspects of Learning (SEAL), Parenting Support and Extended Services have substantially increased the investment in support for emotional well –being and mental health linked to school. There is currently little evidence nationally or locally as to how young carers have specifically benefited from these opportunities and this investment.
- 9.6 As well as the human resources available through SEAL and the Healthy Schools programme, other resources available to support young carers include, Education Welfare Officers, Child and Family Support workers, CAF Co-ordinators and Lead Professionals.
- 9.7 There are future funding commitments in the recent national strategy for carers to support broader awareness -raising across schools and other children’s settings on caring in families and the issues this raises, and tailored training materials to be used with GP’s and hospital discharge teams though it is unclear how and when this funding will be available.
- 9.8 Additionally resources will be required to address the proposed actions in the strategy.

10. Priorities for Action

10.1 The priorities for action have come from work with stakeholders and include: -

10.1.1 Increase the capacity of specialist support for young carers

10.1.2 Improve the data available about numbers of young carers in Solihull and which services they are accessing

10.1.3 Raise awareness, particularly in universal services, about the needs of young carers

10.1.4 Improve integrated working to support young carers, through CAF, IYSS and whole family approaches to increase access to services, including more joined up support around the person cared for.

10.1.5 Increase opportunities for young carers and their parents to be actively involved in planning and evaluating services to meet their needs

11. Appendices

1) Young Carers Strategy Implementation Plan 2008-10

2) Solihull Young Carers Audit 2008

3) Demographic Information – Young Carers

Appendix 1

Young Carers Strategy- Implementation Plan 2008 (Feb 09)

Objectives	Key actions	Timescales	Resources	Lead	Milestones/ Commentary
1. Planning and delivery of a programme of awareness raising events, to raise the profile of young carers cross the CYP Trust partnership	<p>Develop a programme of briefings etc for key staff to launch the Strategy</p> <ul style="list-style-type: none"> • Connexions • School SENCO's • School Nurse team • Education Welfare • Youth Service/SCVYS • Children's Centre Teams • Children's Social Work Services • Voluntary Sector Forum • Child and Family Support Workers • Adult teams – Care Trust 	March – June 2009	Within existing resources	Commissioning Lead	<p>Articles in Education Express</p> <p>Key staff teams identified</p> <p>Set of slides produced</p> <p>Programme of briefings delivered</p>
	Conference on Young Carers, including celebration of Young Carers	2010	tba	Commissioning Lead/ Solihull Young Carers	Conference date agreed
	Regular Audit of services to monitor uptake of services and awareness of needs	Feb 2010	Within existing resources	Commissioning Lead	Audit will check progress on raising awareness with key agencies

Objectives	Key actions	Timescales	Resources	Lead	Milestones/ Commentary
2. Improved data about the number Young Carers in Solihull	Develop an identification tool/checklist for recognising young carers to be used by all agencies	April 2009	Within existing resources	Commissioning Lead/ Trust Information Officer	Research into good practice from elsewhere
	Investigate/Identify process for adding an appropriate flag on Tribal database and on Care First –(as Connexions database)	Feb 2009		Commissioning Lead/ Connexions Lead	Run a report from Connexions database re Young Carers
3. Improved data about the needs of Young Carers	Routine reporting of data from services about identified needs to inform ongoing commissioning	From 2010		Commissioning Lead	Link to assessment framework developments as part of SCFSM
4.Improve access to information for Young Carers and their families	Dedicated pages on the 4u2do website, Solihull Youth Space and new Council web pages for children and young people	Summer 2009	Sure Start Grant	Implementation. Manager – Information Project	Create links to good sources of support ie Connexions Direct /Helpline/ 14-19 Prospectus

Objectives	Key actions	Timescales	Resources	Lead	Milestones/ Commentary
Improve access to information for Young Carers and their families	Audit of secondary schools/colleges/PRU's to assess themselves against IAG quality standards	Spring 2009	Connexions	Connexions Area Manager	<p>Summary report produced to inform action plan to support early identification and referrals</p> <p>Schools identify their own action plan for identifying and responding to vulnerable young people</p> <p>All young people have an action plan with extra support at key points ie Y9 and Y11</p>
	Targeted information for parents, particular about financial support, Direct Payments, benefits, community care services etc	April 09	Sure Start Grant	Implementation Manager – Information Project	Linked to FIS developments
	Ensure that consideration of the particular needs of disabled parents within the Parenting Strategy also reflects any issues relating to young carers	April 09	Sure Start Grant Extended Services Grant	Parenting Commissioner.	<p>Understand the role of parents, and carers and the wider community in parenting/ family support</p> <p>Develop a Family Support Plan to meet current and future needs</p> <p>Redesign, commission or decommission services</p>

Objectives	Key actions	Timescales	Resources	Lead	Milestones/Commentary
5. Increase the capacity of specialist support	Develop a business plan for Solihull Young Carers, which addresses issues of budget, sustainability, fund raising etc	January 09	Carers Grant Children's Fund Other grants	Chief Officer- Solihull Carers/ Commissioning Lead	Business Plan agreed as part of SLA for 2009/10
	Identify specialist support available through other agencies	April 09		Commissioning Lead	
	Ensure Solihull Young Carers has effective links with a range of statutory and community services	Ongoing		Solihull Young Carers Project Worker	Linked to SLA

Objectives	Key actions	Timescales	Resources	Lead	Milestones/Commentary
6. Integrated working to support Young Carers	The needs of young carers continue to be included in the Common Induction Programme, including E-Induction, and other multi agency training	Ongoing	Within existing resources	Workforce Development Manager	Included in consultation on Common Induction Training
	Monitor the use of CAF to assess needs of young carers, with the TAF to include adult services Trigger question to be added to CAF processes around young carers	Jan 09 Summer 09	Within existing resources	Implementation Manager- CAF	Question added to Monitoring Form to ascertain whether young person is a young carer Being a young carer is an early identifier for the CAF model process
	Agreed pathways of support in place for young carers from an early stage in their caring role as part of Family Support Strategy		Sure Start Grant/ Extended Services Grant	Parenting Commissioner	Develop family support menu and entitlement Link to Think Family approaches – appropriate protocols in place

Objectives	Key actions	Timescales	Resources	Lead	Milestones/Commentary
Integrated working to support Young Carers cont.	Str8tup to develop further its whole family working, to protect children of substance misusing parents from inappropriate caring and levels of responsibility – Hidden Harm.	Subject top successful bid- from April 09	Stra8Up	Stra8Up Lead	Bid to Children in Need submitted – Jan 09 Successful Projects announced April 09 Working group on Hidden Harm set up - April 09
	Increase young carers ' access to support, positive activities and broader recreational activities, including play, leisure and sports activities.	Ongoing	Youth Service/ PAYP	Head of Youth Service	
	Stronger links to be developed to the safeguarding agenda	tba	Within existing resources	Safeguarding Business Manager/ Commissioning Lead	Item on agenda for LSCB
	14-19 Strategy to address barriers to young carers accessing further education	Ongoing	Within existing resources	School Improvement Advisor- 14-19	Discussed with key leaders for 14-19 agenda

Objectives	Key actions	Timescales	Resources	Lead	Milestones/Commentary
Integrated working to support Young Carers cont.	Establish a working group to explore good practice in identifying and supporting young carers in schools	September 09	Within existing resources	Senior Education Welfare Officer	Working group established Specify the role of a designated member of staff to support young carers – for consultation with schools Policy/practice guidance developed for schools Pilot early identification tool in group of schools
	Develop a protocol between adult and children's services to improve integration and whole family approaches	tba	Within existing resources	Family Support Service Manager / Children's Disability Team Manager	Research into protocols used in other areas
	The Aiming High for Disabled Children – Short Breaks Commissioning Strategy to include consideration of siblings who assist with caring.	September 09	Aiming High for Disabled Children Grant- Short breaks	Commissioning Lead- Short Breaks	Consultations with stakeholders by end of March 2009 Service Specification by April 2009

Objectives	Key actions	Timescales	Resources	Lead	Milestones/Commentary
7. Increased opportunities for young carers to get involved in service development, future plans and awareness raising	Mechanisms in place to assess young carers' satisfaction with services offered by all services i.e. HRBQ, Youth Service consultations, Young Carers	Ongoing		Trust Information Officer	Specific question in HRBQ- are you a young carer?
	Develop new indicator of success of Young Carers strategy with young carers	By end of 2009		Solihull Young Carers Project Worker	Young carers consultation with other young carers- results by March 2009
8. Parents of Young Carers are involved in service development	Research views of parents	tba	Sure Start Grant/ DCATCH	Parent Engagement Co-ordinator /Trust Information Officer	Link to Parents Forum developments Views of disabled parents included

Appendix 2
Solihull Young Carers Audit 2008

Summary of responses

The Young Carers Strategy group carried out a survey from February – April 2008 to find out how the various agencies in Solihull were responding to the needs of young carers. Questionnaires were sent out to all Solihull schools, social care teams, the Care Trust, and a variety of other agencies. We apologise to anyone we left out.

There were a total of 48 replies.

Who responded?

Responses were received from a variety of organisations – the majority were statutory organisations providing health (school nurses, health visitors, community nurses, specialist health services for children and families), education (schools, education welfare officers), and social care services (social work teams). Other services represented provided specialised services such as drug and alcohol support, domestic abuse, and housing related services.

Type of Organisation	Service Provided			
	Health	Social Care	Education	Other
SMBC (non-school)	1	6	7	2
SMBC (schools)			12	
Solihull Care Trust	10	6		1
Voluntary / Not for Profit/Charity				3

Table 1 – Respondents by organisation + service provided

Who are these agencies working with?

We asked the organisations who, primarily, they worked with – children (and what age group), adults or both. The majority of respondents were working primarily with children.

	Primary Client Group					Children and Adults	Adults only
	Children only						
	Aged up to 5	Aged up to 11	Aged up to 16	Aged up to 19 / 19+			
Aged from 0	3	4	2	8	6	6	
Aged from 5	N/A	3	5	4			
Aged from 11	N/A	N/A	5	4			
Aged from 16	N/A	N/A	N/A	4			

Table 2 – Primary client group of respondents

NB the figures above add up to more than 48, as some respondents working with children and adults gave a specific age range, so are represented twice.

How many young carers were known to the organisations?

The majority of organisations were not aware of any young carers using their service.

	Number of young carers known						
	0	1	2	3	4	15	Not stated
Number of organisations	32	3	7	2	1	1	2
Number of young carers known (total 42)	0	3	14	6	4	15	0

Table 3 – Number of young carers known to respondents

How old were the young carers?

Of those respondents who did identify young carers, not all stated how old the carers were. Also, not all respondents gave ages in such a way that they could be accurately assigned to age groups e.g. “11 aged 9 – 13”. The table below, therefore, is the best approximation of the ages of the young carers identified.

	Age									
	0-5	6-8	9-10	11	12	13	14	15	16	17+
Number of young carers	1	1	2	3	4	4	6	2	3	3

Table 4 – age of young carers known to the respondents

How are Young Carers Identified?

We asked how the agencies identified young carers using their services. Only 2 mentioned a specific process to identify young carers – a hospital social work team had a Carers Centre worker based with the team, and a school nurse routinely asked all 7 – 12 year olds if they looked after someone in their family. Most either relied on the referral information they received identifying that the young person was a carer, the young carer identifying themselves as such, or on their standard assessment process. Some indicated that the information may come out as the working relationship with the young person or family grows. Some respondents identified that this may not be adequate e.g. “I am not as pro-active as I should be – it may come as part of the assessment”. “no consistent approach”.

Method identified	Number
Assessment process	18
Referral information / others identifying that young person is a carer	14
Young carer identifying themselves as such	5

School attendance as a clue	2
Specific effort to find out if there is a young carer	2
Comment about inadequacy of current methods	2
Not stated	13

Table 5 – Methods of identifying young carers

NB some respondents identified multiple methods of identification e.g. referral information and assessment process, so the above figures add up to more than 48.

What definition of young carers are the agencies using?

We gave the following definition of a young carer, and asked if respondents were using this, or another definition:

Young carers are young people under the age of 18 who look after someone in their family who has an illness, a disability, a mental health or substance misuse problem. Young carers take on practical and/or emotional caring responsibilities that would normally be expected of an adult.

Many respondents did not answer this question, perhaps indicating that they were not using any specific definition. Only one respondent gave a different definition, which was “someone who is providing emotional and practical support to a parent, or having responsibilities of younger siblings or grandparents”.

Defintion used	Number
No definition	6
Same definition as above	12
Different definition	1
Not answered	29

Table 6 – Definition of young carer used by the respondents

Young carers who have not been identified as such

We asked if respondents thought there might be other young carers using their service, who had not been identified as such. A majority acknowledged that there may be, though other respondents expressed their confidence that their assessment processes would identify any young carers as such.

Do you think there may be other young carers using your service, who have not been identified as such?	Number
Yes, possible	29
No	9
Not answered	10

Table 7 – Possibility that young carers may not have been identified

Is it a problem that young carers may not be identified?

We asked if it would not knowing that a young person was a carer would be a barrier to them getting the best out of the service being provided, or if it would not make any difference to the way in which the agency would work with them. A majority felt that not knowing that someone was a young carer would be a barrier to providing them with the service they needed. Many made comments that specific, appropriate support would not be forthcoming unless the need for it was identified, such as referrals on to other agencies, practical support such as transport, family and emotional support. The young person and their family would not be made aware of what support they could receive. Some mentioned that families can be hard to engage, and may hide the fact that a young person has caring responsibilities.

Others, however, felt that not knowing that a young person was a carer would not make any difference to the service they received, as the referral and assessment process would identify all the relevant issues – “if the child has poor attendance + attainment, we would be making contact with the child + family”, “shouldn’t be a barrier as the service is based on a comprehensive assessment of need”.

Is it a problem that young carers may not be identified?	Number
Yes	20
No	9
Not answered	19

Table 8 – is it a problem that young carers may not have been identified?

Additional specific services for young carers

We asked if the agencies provided any specific additional services for young carers, and if so, what were they. Of those who answered yes, the most commonly mentioned services were advice, information and signposting, followed by referral on to other agencies, direct work with the young carer and additional support for the person being cared for, as respite for the young carer. One agency mentioned that they may arrange outings for the young carer, if funds were available. Another agency mentioned transition planning.

Do you provide any additional specific services for young carers?	Number
Yes	19
No	11
Not answered	18

Table 9 – do the respondents provide additional specific services for young carers

Adjustments to overall services

We asked if the agencies made any adjustments to the services they provided if the young person was a carer, and if so, how. Of those who answered yes, the most common adjustment was to offer more time and flexibility (13 of the 22). Examples given were negotiating timetable issues and start + finish times in school, timing of visits, more regular review, homework clubs, extensions on course work etc. Offering home visits, or conversely, offering to meet outside the home if the young carer preferred, were also mentioned. Some respondents indicated that they would raise the awareness of other colleagues, both to the fact that the young person was a carer, and what that meant. The agency which had identified the most young carers said they would provide “transport and food, to provide some respite from the responsibilities at home”.

Do you make any adjustments in your services for young carers?	Number
Yes	22
No	11
Not answered	15

Table 10 – do the respondents make adjustments in their services for young carers?

Would a young carer know how to seek support?

We asked if a young carer using the respondent's service would know how to seek support if they wanted it, and if so, how. Of those who answered this question, two-thirds said that they would. The most common method mentioned (11 respondents) was via direct contact between the worker and the young carer. However, comments seemed to indicate that this would generally be dependent on either the worker knowing the young person was a carer, and therefore giving the information, or the young carer themselves asking for it. There was also reference to leaflets, posters, notice boards, drop-in sessions. However, it is likely that much of this information would be about how to seek support generally from that service, rather than inviting young carers specifically to seek support, and even some of those answering yes indicated that they were not really sure – "I hope so", "not sure" etc.

Would a young carer using your service know how to seek support?	Number
Yes	22
No	11
Not answered	15

Table 11 – would young carers know how to seek support?
What else could be done to support young carers

We asked if the agencies could do more to support young carers, and if so, what. Over half of all respondents said that yes, more could be done. The most commonly mentioned areas for additional support were more targeted support, greater efforts to identify young carers, provision of information, signposting and referral on where appropriate, support groups, and emotional support. Better links with other agencies were mentioned, as was more support for the person being cared for, to relieve the young carer. One agency felt they would be enabled to contribute to the young carers support if there was "a consistent approach, linked to safeguarding".

However, a number of respondents also indicated that, though they thought more could be done, they were not sure what ("I would welcome suggestions"). A number mentioned awareness raising in the agencies, training for their teams, and having more information themselves to give young carers.

Could your service do more to support young carers?	Number
Yes	29
No	1
Not answered	18

Table 12 – could more be done by respondents to support young carers?

Barriers preventing agencies being more supportive

We asked if there were any barriers to prevent the agencies from providing the additional support they had identified in the previous question. Over half the respondents who identified barriers referred in some way to resources – time, staff, funding, service criteria. 5 agencies referred to not being aware of which young people are carers, and also cited confidentiality and data protection issues as barriers to information sharing. 2 agencies also referred to their own lack of knowledge about the issue.

Are there any barriers to prevent your service doing more for young carers?	Number
Yes	21
No	7
Not answered	20

Table 12 – barriers to doing more for young carers

What services would you like to see for young carers?

We asked what services respondents would like to see being made available to young carers. Just over half (25) gave examples. The most commonly mentioned services were support groups, trips etc (9), respite (7), counselling (5), support with education (5), advice and information (4). Other specific services mentioned were a weekend telephone line, drop-in sessions out of hours, activities at all times (weekly, weekend, school holidays), peer approach, more inclusion in mainstream activities multi-agency approach, advocacy. 3 respondents said that they did not know enough about the issue to suggest anything, and another 2 referred to the need for more awareness raising and understanding of how caring responsibilities impact on the young person.

What services would you like to see for young carers?	Number
Gave examples of services they would like to see	25
Indicated no need for services	0
Not answered	23

Table 13 – did respondents suggest services for young carers

Other comments made by respondents

We ended the questionnaire with an opportunity to make any other comments. Only 12 respondents made any comment, these are reproduced below.

“It would be helpful if we as a school could be made aware of those pupils who are young carers” (school)

“Often difficult to identify young carers as they are unaware this is the role they fulfil. Can be sporadic and seem just their day to day role. Support needed to allow respite and to empower children to self refer” (school)

“Whilst understanding that it is hard to be able to offer support for those caring for siblings when a parent is unwell due to restrictions on the level of service project can offer. It feels as though these young people are still young carers and should be offered a service as they are still having to undergo responsibilities for a family member” (Education Welfare)

“Relatively simple to make adjustments from the Centre Would be interested in exploring issues on a broader basis” (Education)

“I worked with young carers in another authority and really enjoyed the experience. I know the young people felt the support was vital and I would do what I could in this team for a young person in this situation” (social work)

“I have not, as yet, worked with young carers, but do understand that they have specific needs. Currently I would suggest referral for young carers to a specialised service with expertise in this area such as the Solihull Carers Centre” (social care)

“Siblings of disabled children are not generally eligible for young carers’ services, but the impact of having a disabled brother or sister can be enormous. More services for this group would be helpful” (social work)

“....do not directly provide services to young carers, I can see some small gaps in our operational practices whereby there is a lack of synergy with the associated safeguarding agenda as a whole.’s services touch the local community in a number of ways and provide opportunities to identify young carers who may be isolated. Establishing an operational protocol for both identifying and referring these cases would close these gaps” (other)

“We need to ensure that young carers, like other young people in Solihull, are able to reach the six targets of ECM” (health)

“Such services are essential” (health)

“Difficult to define ‘young carers’ in our work. Some siblings help with their disabled brother or sister as in any other family. There are probably families where the parent/s have a learning disability and the children do some caring, out of their role, but none that the team could identify at present” (nursing)

“Many of the young people who are considered to be young carers probably do not realise what ordinary childhood is as they have probably grown into their role” (health)

Originator: Lynda Akhtar

30.5.08

Appendix 3

Number of Young Carers in Solihull

The 2001 Census indicates were 658 children and young people aged between 4 and 19 years of age providing care in Solihull, however this is likely to be an underestimate as studies show that between 4 and 10% of the population will have been carers at some time in their childhood.

Some young carers will not see themselves as carers and in some instances, particularly where parents have mental health or drug and alcohol problems, parents themselves may not recognise that they need support, nor that their child provides that support

population	All people	Provide no care	1-19 hours caring	20-40 hours caring	50+ hours caring
0 to 4	11196	11196			
5 to 7	7817	7802	12	-	3
8 to 9	5647	5629	18	-	-
10 to 11	5925	5854	62	6	3
12 to 14	8512	8361	133	11	7
15	2706	2626	77	3	-
16 to 17	5335	5172	129	22	12
18 to 19	4185	4015	153	10	7
Total			584	52	32

Source: 2001 Census Data