CHILDREN AND YOUNG PEOPLE SELECT COMMITTEE				
Report Title	Annual Report on Young Carers			
Key Decision	No			Item No. 6
Ward	All			
Contributors	Alastair Pettigrew Director, Children's Social Care			
Class	Open		Date: 23 <sup>rd</sup> June 2015	

#### 1. Summary and Purpose

- 1.1 The purpose of this report is to:
  - inform the Select Committee about the new range of duties to young carers enshrined in the Children and Families Act 2014 and Care Act 2014.
  - provide a profile of young carers in Lewisham and explain the current arrangements for meeting their needs.
  - provide an assessment of the impact of the services on outcomes for young people in line with our Children and Young People's Plan 2012- 2015, where the focus is on narrowing the gaps for disadvantaged children by providing timely and joined up support services so that they are able to enjoy and achieve.

#### 2. Recommendations

2.1 The recommendation is for the Committee to note the content of the report.

## 3. Definitions, Policy and Legal Context

3.1 Young carers are children and young people under 18 who provide regular and ongoing practical, personal care and, or emotional support to a family member who has a physical, learning or mental disability, or who misuses substances, or where there are issues of domestic violence. The term 'young carer' does not apply to the everyday and occasional help around the home that may often be expected of or given by children in families. The key factor is whether the young carer's caring

- responsibilities persist over time and prevent the young person from achieving and enjoying life like other children.
- 3.2 Helping out with tasks at home should not be an automatic cause for concern. Caring can be a positive and valued experience that strengthens family ties and builds personal skills.
- 3.3 A Joint Carers' Strategy was developed in 2013 2016 in line with the ambitions for children in the Children and Young People Plan 2012-2016. The Joint Carers' Strategy is currently being revised to deliver the new requirements set out in the Children and Families Act 2014 and the Care Act 2014.
- 3.4 <u>A Summary of Statutory Obligations in relation to Young Carers</u>
  The Carers Recognition and Services Act 1995 gave carers a right to an assessment of their own needs and their ability to continue caring. This applies to carers of all ages and is relevant for young carers aged between 16-18. Young carers in this category are entitled to claim benefits in their own right should they wish to care for relatives at home.
- 3.5 The Children and Families Act 2014 and the Care Act 2014, have introduced new statutory duties which confer additional rights to an assessment. The new duties came into force on the 1<sup>st</sup> April 2015.
- 3.6 The Children and Families Act 2014 (Part 5, Section 96), gives young carers more rights to be identified, offered information, receive an assessment and be supported using a whole family approach. Local authorities are required to assess all young carers up to the age of 18, regardless of who they care for, what type of care they provide and how often they provide it.
- 3.7 Local Authorities must check what help any young carer needs as soon as they know they might need help, or if the young carers asks them. The check is called a 'Young Carer's Needs Assessment'. In the past, young carers always had to ask first if they wanted the Local Authority to provide help they needed. During the assessment, the Local Authority must ask the young carer and their parents' views, when they are considering what help is needed. They also have to ask anyone else the young carer or their parent wants them to ask. Following the assessment, the Local Authority must decide what support is needed. This could involve giving help to the person that the young carer looks after, so that the young carer does not have to do so much caring. Therefore, it is important that the children's and adult services do joined up work so that young carers and young adult carers benefit from a whole family approach and professionals working together.
- 3.8 The Children and Families Act also requires Local Authorities to find out if there are young carers in their area and if they have needs for support. This means the Local Authority must proactively identify young carers rather than wait for young people and their families to come forward and

request an assessment. Local Authorities are required to take "reasonable steps" to identify young carers in their area. In Lewisham, we have a track record of being proactive in locating/identifying young carers through awareness raising sessions. Carers Lewisham in partnership with Lewisham Council have worked with schools in Lewisham to sign up to the Lewisham Schools Young Carers' Charter. The aim of the Charter is to ensure that all Young Carers are supported. School is very important to children and young people and for Young Carers to know that they are being supported can change their lives.

- 3.9 The Care Act 2014 requires that adult services need to be involved in planning the support a young carer may need once they reach 18. 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.
- 3.10 The Care Act also enables children to have their own carers' needs assessment carried out, and 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.
- 3.11 The Care Act requires that if a young carer is likely to have needs when they become 18, the Local Authority must assess them if it considers there is "significant benefit" to the individual in doing so. This is regardless of whether the child or individual currently receives any services.
- 3.12 When either a child or a young carer approaches their 18th birthday, they may ask for an assessment. A parent or carer may also ask for an assessment as the child they are caring for approaches 18.
- 3.13 In the assessments, Local Authorities must consider the needs of the person, what needs they are likely to have when they (or the child they care for) becomes 18, and the outcomes they want to achieve in life. They should consider what types of adult care and support might be of benefit at that point, and consider whether other options beyond formal services might help the individual achieve their desired outcomes.
- 3.14 Lewisham has arrangements in place to comply with the new legislation. There is a dedicated Young Carer's Social Worker (YCSW) who is able to undertake Young Carers Needs Assessments. The YCSW carries out awareness training sessions so that the partnership is proactive in referring young carers to the local authority for an assessment. The YCSW also reviews the support plan for young carers who are transitioning to adulthood. Further work is being undertaken jointly by Adult and Children's Social Care to explore the best arrangements to enable a cost effective and seamless transition in provision of support services once the young carer becomes an adult.

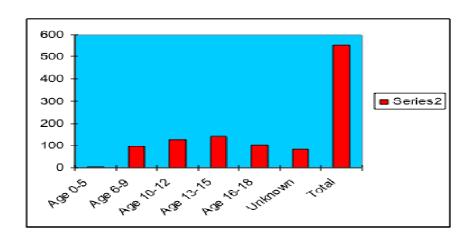
#### 4. Details

## 4.1 The Profile of Young Carers in Lewisham

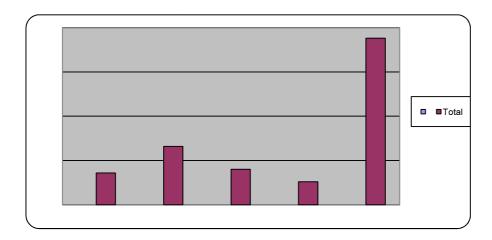
- 4.1.1 According to the Census in 2013, there are 166,363, young carers in England. This is thought to be an underrepresentation of the true picture as many remain unknown to professionals. However, this is the best figure that we have. According to the Office of National Statistics, in 2013 there were 13 million children in England. This means that at least 1.3% of children in England are likely to be young carers.
- 4.1.2 According to the Office of National Statistics (Sub-national Population Projection 2012) Lewisham has a population of about 290,000 people, with one in four residents aged below 19 years (72,500).
- 4.1.3 Like all other local authorities, Lewisham does not have exact figures on the number of young carers in the area. Our estimates rely on the number of young carers who are registered with Carers Lewisham, Building Bridges and known to the Social Worker for Young Careers. Carers Lewisham and Building Bridges are commissioned voluntary agencies. Both provide services to young carers but Building Bridges specialises in providing support to young carers whose parents have mental health issues.
- 4.1.4 Carers Lewisham have reported that they have 553 young carers registered with them. Building Bridges have only kept records of the numbers of carers they have for the calendar year 2013, which is 94 registered young carers. The Young Carers Social Worker (YCSW) has identified 195 young carers. The best we can estimate is that there are 842 known young carers in Lewisham or 1.16% of the overall population of children. This is slightly under the national profile where 1.3% of children and young people are thought to be young carers. Despite the financial challenges, we have retained a specialist Young Carers Social Worker so that we can continue to identify more young carers who may be struggling and in need of support.

## 4.2 Age of Young Carers in Lewisham

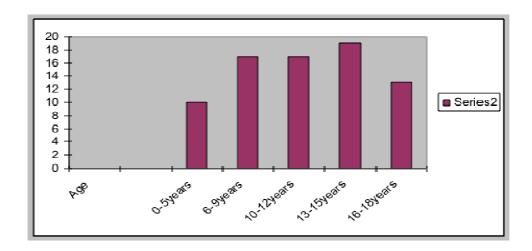
4.2.1 Carers Lewisham have provided the following information overleaf about the age of carers. Although the age range is from 6-18, the majority of young carers are aged between the ages of 13-15.



4.2.2 Building Bridges has a slightly different age profile with the majority aged between 9-12 years.



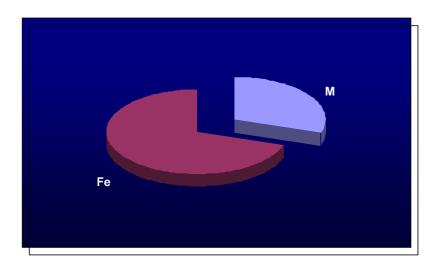
4.2.3 The age profile of young carers coming to the attention of the YCSW is similar to Carers Lewisham where the highest numbers of young carers are aged 13-15 years. These years are particularly important to educational assessments and attainment at Key Stage 3 and GCSEs.



4.2.4 All children in a family are included in a Young Carers Assessment, which is why 0-5 year olds feature in this category. The actual caring is carried out by older siblings but it is important to monitor the younger siblings too, as they often take over caring responsibilities as they grow older.

## 4.3 Gender of Young Carers in Lewisham

4.3.1 Cares Lewisham have not been able to provide a gender breakdown of their young carers. Building Bridges have stated that 49% are female and 51% are male. The YCSW reports a higher percentage of female carers 71% of females and 29% males.



## 4.4 Ethnicity of Young Carers in Lewisham

4.4.1 Lewisham is an ethnically diverse borough, 46.5 % of the population are from Black and Minority Groups (BME) compared to 40.2% in other parts of London and 12.5% in England. In 2011, the two largest BME groups were Black African (12%) and Black Caribbean (11%). Lewisham child health profile reports that 25.2% of the population of Lewisham are children and young people. 76.0% of schoolchildren are from a minority ethnic group.

#### Carers Lewisham:

White British	Black Caribbean	Black African	Mixed	Other
89	186	127	49	102

## **Building Bridges:**

White	Black	Black		
British	Caribbean	African	Mixed	Other
19	30	19	11	15

#### Children's Social Care:

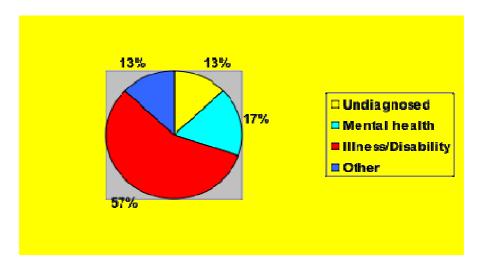
White British	Black Caribbean	Black African	Mixed	Other
16	76	51	36	16

Collated percentage		
White British	15%	124
Black Caribbean	35%	292
Black African	23%	197
Mixed	11%	96
Other	16%	133

4.4.2 The purpose of collating data on ethnicity is to ascertain whether ethnicity is a barrier in the identification of young carers. It would appear from these figures that white children may be under identified. In order to make better judgments, we need to ascertain whether we have more BME young carers because BME adults are more likely to suffer from a disability or mental illness than their white counterparts.

## 4.5 Adult Disability/ illness

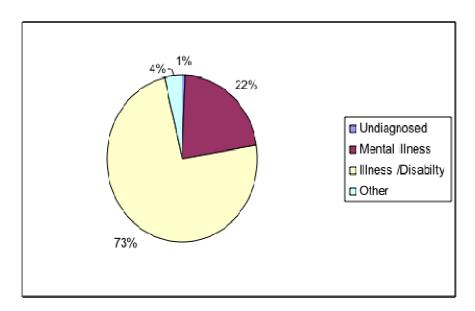
4.5.1 The diagram below shows the main adult health issues which impact on young carers.



4.5.2 Referrals received by the YCSW are categorised by four Adult Needs groups. The highest category of referrals were for parents or siblings who had a long-term illness or disability, this was closely followed by

those with mental health issues. A number of cases initially had no confirmed diagnoses however, there was clear evidence that they required a medical assessment and support services.

#### 4.5.3 Carers Lewisham - cared for illness/disability



- 4.5.4 Building Bridges anecdotally report that there has been a substantial increase in referrals to their services for young carers looking after a parent with mental illness.
- 4.5.5 It is estimated that 19.8% of Lewisham's population may have a common mental Illness (e.g. anxiety or depression) at any one time. Severe mental illness that includes psychotic disorders such as schizophrenia and bipolar disorder is estimated to affect 1.1% of Lewisham's population. For both common mental illness and severe mental illness, the figures are higher than the national average of 0.7%, reflecting Lewisham's urban and ethnic demographic.<sup>1</sup>
- 4.5.6 In cases of severe mental illness, black men living in the UK are much more likely to be diagnosed and/or formally sectioned under the Mental Health Act than their white counterparts.<sup>2</sup>
- 4.5.7 Lewisham Joint Strategic Needs Assessment estimates that 19.85% of Lewisham' population may have a common mental illness (e.g. anxiety or depression) at any one time. Approximately 5,400 adults in Lewisham have a learning disability.<sup>3</sup>
- 4.5.8 There is no common definition of disability, but 14% of Lewisham residents identify themselves as being limited in carrying out day-to-day

<sup>2</sup> Lewisham's Joint Strategic Needs Assessment

<sup>&</sup>lt;sup>1</sup> Lewisham's Joint Strategic Needs Assessment

<sup>&</sup>lt;sup>3</sup> Lewisham's Joint Strategic Needs Assessment

- activities. Increasing numbers of people have long-term conditions such as diabetes or COPD and the numbers will increase with an ageing population as will those who have more than two conditions. Lewisham's BME communities are at greater risk from long-term conditions such as diabetes, hypertension and stroke.
- 4.5.9 BME children seem to be over represented in the population of Young carers (85%) against a population of 76% of school coming from BME groups. However the over representation may be explained in part by the fact that BME adults are more likely to suffer from mental ill health and disabling illnesses.
- 4.6 Arrangements for the provision of Support to Young Carers in Lewisham
- 4.61. In addition to the support provided through the Early Intervention services within the London Borough of Lewisham, we also commission a number of voluntary organisations to provide support directly to the young carers or through the whole family approach. These services include:
- 4.6.2 **Carers Lewisham:** offer Information, Advice and Support to all carers and young carers in the Borough of Lewisham. It also supports young carers with after school "drop in" support twice a week and a homework club once a week during term time.
- 4.6.3 **The Yew Tree Project** A specialist support project for people caring for someone who is close to the end of their life. Carers are supported to access benefits, practical support and breaks and are offered emotional support and advice about Power of Attorney and Advance Directives. The project is based in Carers Lewisham.
- 4.6.4 **Family Action (Building Bridges)** work with families where a parent has a mental health problem to offer "whole-family" support.
- 4.6.5 **Contact a Family** provides short breaks and events for families with disabled children and young people.

#### 4.7 Children Social Care

- 4.7.1 As stated previously, Lewisham Children Social Care has a dedicated Young Carers Social Worker (YCSW). The primary role of the YCSW is to raise awareness and to complete needs assessments of young carers and liaise with Adults Services to plan transitional arrangements.
- 4.8 Young Carer Assessment and Outcomes
- 4.8.1 The YCSW received 94 notifications in 2012 2013 and 195 notifications in 2013 -2014 –a total of 289. Out of 289 notifications, 140 young carers assessments have been completed.

- 4.8.2 There has been marked yearly increase in the number of notifications received for young carers, however not all are assessed because:
  - The case was transferred to a mainstream social worker, as there were child protection issues.
  - It transpired that the child in the family was not carrying out caring duties as these were undertaken by adult family members or friends.
  - The parents refused to consent to an assessment. In such instances, the YCSW checks that there are no safeguarding issues.
- 4.8.3 In the light of the new legislation referred to in section 3 of this report, there will be a change in practice. Young carers' assessments will be completed in tandem with investigation of child protection issues. Legal advice will have to be sought, on a case by case basis, where there is a difference of opinion between the parent and the young person. In some cases of mental ill health, parents have refused the offer of an assessment even though the young carer thought it would be helpful.
- 4.8.4 In the 140 cases where assessments were completed, referrals were made to appropriate support services to minimise caring responsibilities, facilitate school attendance and promote leisure opportunities.
- 4.9 Outcomes for Young Carers who have been assessed by the Young Carers Social Worker
- 4.9.1 All young carers not registered with a GP are now registered to improve opportunities for health needs being met.
- 4.9.2 All young carers with non-attendance, lateness or who have been excluded from school are now appropriately supported. Out of the 140 young carer's assessments, 137 now have above 93% school attendance. In the 3 cases where attendance remained unsatisfactory concerted efforts were made to address the issue.

## Case Studies

4.9.3 Child A is a 16-year-old boy. He is mature, well behaved and much attached to his mother who is bedridden due to physical disabilities. Child A claimed that he was missing school sometimes because the carers did not arrive on time and he was worried that his mother will be left unattended in bed. The mother had also telephoned the school saying that Child A was off sick. The social worker suspected that the mother might have been keeping Child A at home to meet her own emotional needs. The social worker has liaised with carers and asked to see their logs on attendance and compare these against school absences. The mother will be challenged by Attendance and Welfare if Child A misses school when carers have attended on time. Issues relating to lateness of carers were also addressed.

- 4.9.4 Child B is a 12-year-old boy whose mother suffers from mental ill health. His mother has panic attacks. Child B is anxious about what will happen to his mother when he is at school. Child B has said that he feels embarrassed because his mother insists on walking him to school and shouts inappropriately. The focus of the intervention has been to reassure Child B that his mother will be fine through provision of mental health support services, however this was not working. The Social Worker has arranged for family support workers to go to the home of Child B and get him off to school to break the cycle with mixed.
- 4.10 Promoting awareness about Young Carers amongst Professionals
- 4.10.1 The Children and Families Act requires the local authority to take "reasonable steps" to identify young carers in their area. A key role of the YCSW is to raise awareness of young carers amongst professionals.
- 4.10.2 The YCSW delivers LSCB training on young carers to professionals every year.
- 4.10.3 Bespoke presentations aimed at raising awareness have been delivered by the YCSW to SLAM, Speedwell, Lewisham Disability Coalition, ISIS and across Children and Adult Social Care.
- 4.10.4 The YCSW continues to contribute to on-going networking meetings that occur across health, education, adult and children's care providers. The YCSW is the single point of contact relating to sharing information, and providing guidance on responding to the needs of Young carers.
- 4.10.5 Schools play a pivotal role in identification of young carers. In order to promote awareness Carers Lewisham, Children & Young Peoples Directorate organised a mail out to all Secondary and Primary schools in the borough, to promote the School Charter which requires the school to agree to sign-up to:- A pledge to acknowledge that young carers are seen and heard, recognised, respected, valued supported.
- 4.10.6Carers Lewisham report that a number of Lewisham Schools have signed up to the School Charter,2011-2012 (23), 2012-2013 (18) and 2013-2014 (27) Total (68). There are 67 primary and 14 Secondary Schools in Lewisham, the aim is to have 100% of the schools signed-up by 2016.<sup>4</sup>

#### 4.11 Areas for further development

4.11.1 The Team Manager for YCSW will meet with commissioned services to develop an accurate database on young carers and analyse the source of referrals by agency and target low referring agencies for awareness raising and further training.

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<sup>&</sup>lt;sup>4</sup> Hidden from View 2013

- 4.11.2 Develop protocols with Adults Services on assessing needs of carers transitioning to young adulthood and continue developing the whole family approach.
- 4.11.3 Strengthen the focus on educational attainment by setting up a project called 'School Attendance and Young Carers'. The project will look at the list of known young carers and review all cases where attendance is below 93%. Causes contributing to poor school attendance will be addressed though multiagency coordination and intervention.

## 5 Financial implications

- 5.1 It is too early to tell whether there will be a demand for more assessment and the cost of providing support because of the Children and Families and Carers Act 2014. It is hoped that wider publicity and national campaigns will lead to more young carers coming forward for support so that support can be provided early and reduce the need for more costly specialist services.
- 5.2 There are no financial implications arising from agreement of the recommendations to the report.

## 6 Legal implications

6.1 The legal framework of the Councils duties have been set out in the body of the report.

## 7 Crime and disorder implications

- 7.1 There are no crime and disorder implications arising out of this report
- 8 Equalities implications
- 8.1 Young carers are a potentially disadvantaged group and the arrangements are in place to mitigate the risk of a poor quality of life, bereft of opportunities to enjoy social activities and fulfill their potential to achieve in education and gain employment.
- 8.2 The Equality Act 2010 (the Act) introduced a new public sector equality duty (the equality duty or the duty). It covers the following nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 8.3 In summary, the Council must, in the exercise of its functions, have due regard to the need to:
  - eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - advance equality of opportunity between people who share a protected characteristic and those who do not.

- foster good relations between people who share a protected characteristic and those who do not.
- 8.4 The duty continues to be a "have regard duty", and the weight to be attached to it is a matter for the Mayor, bearing in mind the issues of relevance and proportionality. It is not an absolute requirement to eliminate unlawful discrimination, advance equality of opportunity or foster good relations.
- The Equality and Human Rights Commission has recently issued Technical Guidance on the Public Sector Equality Duty and statutory guidance entitled "Equality Act 2010 Services, Public Functions & Associations Statutory Code of Practice". The Council must have regard to the statutory code in so far as it relates to the duty and attention is drawn to Chapter 11 which deals particularly with the equality duty. The Technical Guidance also covers what public authorities should do to meet the duty. This includes steps that are legally required, as well as recommended actions. The guidance does not have statutory force but nonetheless regard should be had to it, as failure to do so without compelling reason would be of evidential value. The statutory code and the technical guidance can be found at: <a href="http://www.equalityhumanrights.com/legal-and-policy/equality-act/equality-act-codes-of-practice-and-technical-guidance/">http://www.equalityhumanrights.com/legal-and-policy/equality-act/equality-act-codes-of-practice-and-technical-guidance/</a>
  - 8.6 The Equality and Human Rights Commission (EHRC) has previously issued five guides for public authorities in England giving advice on the equality duty:
    - 1. The essential guide to the public sector equality duty
    - 2. Meeting the equality duty in policy and decision-making
    - 3. Engagement and the equality duty
    - 4. Equality objectives and the equality duty
    - 5. Equality information and the equality duty
  - 8.7 The essential guide provides an overview of the equality duty requirements including the general equality duty, the specific duties and who they apply to. It covers what public authorities should do to meet the duty including steps that are legally required, as well as recommended actions. The other four documents provide more detailed guidance on key areas and advice on good practice. Further information and resources are available at:

    <a href="http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/guidance-on-the-equality-duty/">http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/guidance-on-the-equality-duty/</a>

#### 9 Environmental implications

9.1 There are no environmental implications arising from this report.

# Background documents and originator

None.

If there are any queries on this report please contact Naeema Sarkar Service Manager Referral & Assessment on 020 8314 8290.