YOUNG CARERS TASK AND FINISH GROUP REPORT

"It could be argued that there is a fine line between being a young carer and a child labourer": Young Carers service provider

EXECUTIVE SUMMARY

This is a report of a one-day Task and Finish Group, held on 19 January 2017. The People and Families Scrutiny Committee was already committed to undertake a piece of work on young carers when they received a similar request from the Cabinet Member for Communities and Corporate: the committee was asked to help inform a paper to be presented to the Health and Wellbeing Board on the future offer for young carers. The committee's Young Carers Task and Finish Group agreed to host a 'scrutiny in a day' event for this purpose.

Young carers provider organisations and to young adult carers were invited to attend alongside commissioners and commissioning support officers, as well as Members of the People and Families Scrutiny Committee. There were, in total, 19 attendees (listed below) and following contributions, investigation, and validation of evidence, the following were agreed as **recommendations**:

- 1. All providers have signed-up to the agreed action plan and the People and Families Scrutiny Committee also fully endorses the plan; the People and Families Scrutiny Committee should receive a bi-annual update on progress with the action plan;
- 2. IT is a real issue for some providers, as well as being expensive. Support for young carers, understandably, takes priority over IT. Providers also do not always have the capacity to undertake IT tasks such as updating their websites and associated tasks. As a statutory service is being provided ECC should provide dedicated IT support to providers delivering the service on behalf of the statutory authority;
- 3. With regard to the lack of GP referrals the ECC Public Health team, through social prescription, currently pick up adult carer referrals and this should be extended to young carers;
- 4. Housing authorities have a key role to play with young carers in terms of their housing provision, both for the here and now, and when young carers move into their own accommodation. It is recommended a seminar is held with the Essex local housing authorities, as well as social housing providers and the County Council to raise awareness of housing issues specifically related to young carers;
- 5. It is recognised the key role schools play, and in particular primary schools. One of the recurring comments from the young adult carers was the stigma attached to being a young carer and the lack of recognition and understanding at their schools and with particular reference to bullying.

Therefore, connections with primary schools should be continued by providers and be an explicit part of future funding grant contracts;

6. The new Pre-birth to 19 service contract with Virgin Care provides opportunity to embed a young carers' offer. Virgin Care is renowned for doing good work with young carers and, therefore, negotiation to include young carers' specific targets in the specifications of the contract should be undertaken with Virgin Care to include this as part of the contract. This would place Essex in an almost unique position to offer young carers ongoing support.

<u>CONTEXT</u>

In 2015 the People and Families Scrutiny Committee, through a Task and Finish Group, made recommendations to inform the development of a new Essex Carers Strategy to cover 2015-2020. One of the recommendations was that the Committee were provided with progress reports on the Strategy. In May 2016 a progress report was provided and from that the Committee agreed that further scrutiny work should be undertaken, specifically looking at young carers, in the autumn/winter 2016/17. This decision was informed by a passionate presentation to the committee by Michael O'Brien, Head of Commissioning Education and Lifelong Learning; Mousumi Basu, Head of Commissioning Vulnerable People; Tim Frances, Youth Work Commissioner; and Helen Gilbert, Senior Commissioning Delivery Officer.

In advance of the scrutiny-in-a-day session, the Task and Finish Group received the Children's Commissioner report: *The Support Provided to Young Carers in England*, published in December 2016, which identified seven critical areas:

- Four out of five young carers may not be receiving support from their local authority
- Just over a quarter of young carers have additional care needs of their own
- There are young carers under the age of 5 years
- Not all local authorities are taking steps to identify children who may be providing care in their area
- 94% of children referred to the local authority as a potential young carer, who were deemed not to require support, had not received an assessment at all
- The emphasis on identification and assessment in legislation may lead to support for young carers being overlooked
- Young carers want to enjoy their childhood and for services to listen to them and respect their views

There is general agreement that the above is not specifically true for Essex, and in particular since April 2015, and even more so since the development of the agreed Young Carers Action Plan, around 12 months ago. Providers made a significant contribution to the creation and development of the action plan, alongside young

carers themselves and this was presented to the full People and Families Scrutiny Committee in October 2016.

RECOMMENDATION 1

All providers have signed-up to the agreed action plan and the People and Families Scrutiny Committee also fully endorses the plan; the People and Families Scrutiny Committee should receive a bi-annual update on progress with the action plan.

Owner: Chairman of the People and Families Scrutiny Committee **Implementation Review Date:** July 2017 **Impact Review Date:** January 2018

The report received by the full Committee in October 2016 provided further context related to Essex specifically. This outlined that support for young carers is conducted via a multi-layered approach, for example support may be provided through Saturday respite, home visits, day trips, specialist skills training and emergency/crisis plans. Additionally the adoption of new media, such as telephone helplines and online support are key to reaching as many vulnerable young carers as possible. All this allows young carers to build networks and gain peer support.

The October 2016 report stated that young carers do not wish to be considered 'different' in any way; issues that affect young people generally also affect young carers. It is considered, due to the nature of and the dedication to their responsibilities, that young carers grow up too quickly and, often, miss out on a large variety of education and leisure activities due to the time and financial restrictions resulting from parents who are often unable to work. Social isolation is still a real issue for many young carers often with very little support. The Essex SHEU Survey shows that 48% of young carers are afraid to go to school in the county due to bullying.

Members heard that research indicates the average age of the onset of care for young carers is 12 years – however, this is likely to be the average age of their awareness of care. Further research undertaken estimates that for every £1 invested in a young carer around £1.68-£1.73 is given back, showing support for young carers to be a real invest to save issue.

Members heard that, in general, adult carers get better support than young carers, and this leads to concerns that real issues can be overlooked. Therefore, it should be recognised that there is, at times, familial fear of assessments and often concern that an assessment of need is undertaken in the home with young carers being reticent to 'tell all' in proximity to the person cared for. There is full agreement in Essex that there should be positive awareness of young carers and to raise their status - this is related to the lack of awareness by society in general.

FINDINGS OF THE TASK AND FINISH GROUP

The Task and Finish Group heard there are no referrals for under-5's in Essex and, in any case, no services for such are available in the county. This does, of course, not mean that there are no young carers of 5 years or younger. There have, however, been referrals for 6 and 7 year olds. 50% of young carers are under the age of 11 and there has been a significant increase in the number of referrals. Census data would indicate that there are at least 300, and up to 500 young carers aged 8 years and under.

The full Committee heard in May 2016 that there are issues around the management of the transition from young carer into adult carer and also when there has been a break in caring. It is accepted that there should be awareness raising of such issues and training to manage the transition better and ensure nobody is missed.

Providers argue there is insufficient funding for young carers and consider this shorttermism and whether support is sustainable given this. They argue there should be support for them beyond specific activity. Provision of statutory care should be covered by statutory funding, they state. However, statutory authorities are decreasing funding and, therefore, it is becoming increasingly difficult to achieve and maintain funding for young carers. Some providers struggle with IT in terms of updating their websites and other administrative tasks and this can impact upon the work they are able to undertake.

RECOMMENDATION 2

IT is a real issue for some providers, as well as being expensive. Support for young carers, understandably, takes priority over IT. Providers' also do not always have the capacity to undertake IT tasks such as updating their websites and associated tasks. As a statutory service is being provided ECC should provide dedicated IT support to providers delivering the service on behalf of the statutory authority.

Owner: Cabinet Member for Communities and Corporate and Cabinet Member for Digital Innovation, IT and Customer Services Implementation Review Date: July 2017 Impact Review Date: January 2018

Providers emphasised their view that work with young carers in Essex has not been well funded and, historically, they have been given a contribution to the delivery of services of £20,000, and then this was reduced to £15,000 when services were commissioned, and as a result fundraising applications are made to grant giving charities to sustain services, and these grants often specify that the money should not be used to provide any service that local authorities have a statutory duty to provide. This could lead to a very serious situation if grant funding charities decided to rescind funding because of the fine line providers are walking to deliver services. The concern of providers was that the progress on the action plan may suffer if

appropriate levels of funding are not provided. Longer-term funding, rather than annual funding, would be the preferred model for providers with three-year contracts with the added option of extensions would provide commitment and continuity and longitudinal support. An example of practices in other parts of England was provided relating to Surrey County Council who grant fund Action for Carers (Surrey) in the region of £850,000 whereas the total pot of funding that is currently available in Essex is around £250,000, providers wished this disparity to be recognised in this report.

The Task and Finish Group heard of considerable concern expressed by both providers and young adult carers over the lack of GP referrals of young carers – most come through self-referral, schools and the family solutions referrals team at ECC. Action for Family Carers representatives stated they had only received one GP referral in the last year. The young adult carers communicated real concerns about GPs and stated they do not get listened to and are sent away. It was even reported that, on at least one occasion, GPs have been dismissive of suicidal thoughts. The young adult carers also queried whether GPs actually know how to make young carers referrals.

RECOMMENDATION 3

With regard to the lack of GP referrals the ECC Public Health team, through social prescription, currently pick up adult carer referrals and this should be extended to young carers.

Owner: Cabinet Member for Communities and Corporate **Implementation Review Date:** July 2017 **Impact Review Date:** January 2018

There is anecdotal evidence that young carers are less transient and, thus, more likely to stay within their locality. There is a real benefit in this that they are empathetic and are more likely to give back to the community once their responsibilities cease.

Young carers state that mental health support is not provided quickly enough – key workers can offer advice but are not qualified to offer mental health advice. Mental Health services need to be fit for purpose for young carers and an out-of-hours Mental Health service would mean young carers could access services as school/college/work/caring roles prevent them from being able so to do.

The question should be raised what is available for young carers who suffer bereavement? It was noted that social housing providers have a requirement for bereaved young carers to vacate properties within very short timescales. Specific guidance could be developed by housing authorities for young carers upon reaching maturity, and in the event of bereavement; however such guidance would be out of the control of Essex County Council. Young carers have other crisis points and, therefore, coping strategies need to be developed in future.

RECOMMENDATION 4

Housing authorities have a key role to play with young carers in terms of their housing provision, both for the here and now, and when young carers move into their own accommodation. It is recommended that a seminar is held with the Essex local housing authorities as well as social housing providers, and the County Council to raise awareness of housing issues specifically related to young carers.

Owner: Cabinet Member for Communities and Corporate Implementation Review Date: July 2017 Impact Review Date: January 2018

Through investigation the Task and Finish Group heard that with regard to education Ofsted does have guidelines which consider actions a school undertakes related to the referral and support of young carers. However, the question should be asked whether schools recognise the implications, as it is known certain schools do not. Also school nurse training has not been well attended in the past. Further Education Colleges, presently, do not have facility on their application forms to indicate whether a student is a young carer. However, for Higher Education entry UCAS does have such a tick-box. Action for Family Carers has a good relationship with Anglia Ruskin University.

RECOMMENDATION 5

It is recognised the key role schools play, and in particular primary schools. One of the recurring comments from the young adult carers was the stigma attached to being a young carer and the lack of recognition and understanding at their schools – and with particular reference to bullying. Therefore, connections with primary schoold should be continued by providers and be an explicit part of future funding grant contracts.

Owner: Cabinet Member for Education and Lifelong Learning **Implementation Review Date:** July 2017 **Impact Review Date:** January 2018

Young adult carers reported they need support later in the day when they need it more, for example school and college work cannot be started until late in the evening due to caring responsibilities. Peer support is important to young carers so they can talk about 'normal' rather than just talking about their caring responsibilities.. This is particularly important when they have had a bad day or week. When residential opportunities were provided to young carers these proved to be a success, the Task and Finish Group heard, as young carers were able to make new friends and enhance their peer support group.

RECOMMENDATION 6

The new Pre-birth to 19 service contract with Virgin Care provides opportunity to embed a young carers' offer. Virgin Care is renowned for doing good work with young carers and, therefore, negotiation to include young carers' specific targets in the specifications of the contract should be undertaken with Virgin Care to include this as part of the contract. This would place Essex in an almost unique position to offer young carers ongoing support.

Owner: Cabinet Member for Communities and Corporate; and Cabinet Member for Adults and Children Implementation Review Date: July 2017 Impact Review Date: January 2018

It was agreed that a best-case scenario is for a young carer to get to reach 20 years and be at the same stage, educationally, emotionally and socially as someone of the same age that has not had caring responsibilities. Investigations have found the individuality of a young carer can suffer significantly, and it should be acknowledged that caring is an aspect of the young person's personality it does not, and should not, define them.

Cultural differences and traditions do not mean support should not be given to young carers within BME groups.

There are locality specific issues, therefore, for purpose of continuity, key workers should have sound local knowledge. Some locations in Essex do have sufficient numbers of support workers the young adult carers group reported.

I commend this report to the Cabinet Members named above within the recommendations.

Councillor Ian Grundy Chairman of the People and Families Scrutiny Committee

Attendees:

Essex County Council: Councillor Ian Grundy, Councillor Keith Bobbin, Councillor Jenny Chandler, Councillor Colin Sargeant and Councillor Anne Brown. Tim Frances, Neil Songer, Michael Cleary, and Robert Fox.

Providers: Paul Ramsden, Carers Choices; Andy Trewern, Supporting Carers and Families Together; Heather Hunt and Yvonne Playle, Action for Family Carers; and Andy Drake, YMCA Essex.

Young Adult Carers: Five young adult carers attended (names withheld for the purpose of this report)