

**Young Carers Service Re-design  
Progress report to People and Families Scrutiny Committee  
September 2019**

**Background**

The Children and Families Act 2014 defines a young carer as “*a person under 18 who provides or intends to provide care for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work).*”

In September 2017 the Cabinet made the decision to agree the re-design proposals for a new ‘in-house’ young carers service to be delivered from April 2018.

Prior to this, provision supported by ECC was made via the voluntary service sector to provide ‘respite groups’ in each district, which was awarded to seven providers across Essex, Action for Family Carers (Colchester, Maldon, Epping, Harlow, Uttlesford), Carers Choices (Basildon, Castle Point), Chelmsford YMCA (Chelmsford), Brentwood Crossroads (Brentwood), Tendring Crossroads (Tendring), Supporting Children & Families Together (Rochford).

Secondly, a limited support service provided in secondary schools, and young adult carer support was delivered by Action for Family Carers.

Young carers statutory assessments were conducted by Targeted Youth Advisers from the Youth Service.

Additional funding had been made available for extra one-off respite opportunities, such as day trips and weekend residential delivered by the providers listed above during the Easter and Summer school holidays.

The need for a different model of delivery was based on concerns about the inconsistency of delivery by different partners in different Districts, and the lack of evidence of impact and outcomes from existing provision that demonstrated young carers will be protected from inappropriate caring and have the support they need to learn, develop and thrive and to enjoy positive childhoods.

The existing provision had no any meaningful service for under 8's. Most importantly, it did not reflect the priorities for support as identified by young carers themselves through the work of the Children's Commissioner and our own engagement groups, namely improved identification, awareness and support by schools/further education/higher education/employers, a need to ease their caring burden and a new service that should be personalised and appropriate support offered relating to individual level of need and relevant to the age of the young carer.

In the year 2016/17, the previous providers commissioned to provide support in each district, listed 870 young carers known to them, but on average less than 55% of those young carers actually attended ‘respite’ groups in that year, and less than 34% received 1:1 support. About 478 young carers attended a young carers group at least once for social respite activities, and of those about 295 received 1:1 support.

## **New Service delivery**

The new service which comprises 8 Senior Key Workers, 13 Key Workers and 2 School Development Co-ordinators, was officially launched in September 2018 following a recruitment process regrettably delayed by ECC organisational re-design processes. However, young carers support was maintained by the Targeted Youth adviser team through the interim period.

The new team offers a young carer Key Worker approach based within each quadrant in Essex, delivered via ECC Youth Service.

The service delivers the support as endorsed by the People & Families Scrutiny Committee in March 2017 as follows:

- Provide a three tier scheme linked to level of need and led by quadrant based senior key worker (higher need L3/4) and key workers (lower need L1/2).
- To offer independent statutory assessment and bespoke support relating to the needs, aspirations, attainment and health of the young carer. Ensuring multi-agency engagement and signposting to other services where possible.
- Training workshops for young carers – e.g. manual handling, health and safety in the home, fire safety, dealing with bereavement, resilience, dealing with medication; online safety.
- Targeted periodic young carers and young adult carers peer workshops where they are not already engaging with universal services or other young carer provision – facilitated by the key worker team and planned in partnership with young carers.
- Provide targeted significant respite opportunities allowing Young Carers to meet, connect and have time for meaningful activity away from their caring roles where not already engaging with universal services or other young carers provision.
- Support access to universal youth provision and engagement in sports, arts or cultural opportunities of their choice and in support of their aspirations.
- Long term tracking and intervention at key transition points via ECC Mosaic & Capita One systems.
- Establish and facilitate service users young carers forum to quality assure existing provision and co-produce future direction of young carers activities and provision.
- The creation of a new website for young carers in Essex. Must include links to all provision and support opportunities i.e. VCS providers, Kooth, and other opportunities.
- Two school support workers to work with all Essex schools & FE/HE to help raise awareness and support them to develop practice, protocols and systems that support young carers, achieve Healthy School Award benchmarks, national Young Carers in Schools Award standards and enable them to better meet Ofsted requirements to evidence outcomes for young carers.

- The provision and implementation of the 'Street Nannies' scheme for Young Carers across the County – to become self-sustaining after 3 years – involves extended family/friends/neighbours/volunteers offering time to assist with tasks normally undertaken by the young carer in order to ease the burden of their caring roles.

## **Evidence of outcomes and impact to September 2019**

The new service has received 1275 referrals to date. 13% relate to young carers who identify as BAME as opposed to only 6% reported in 2016/2017 by providers, and 148 were under 8 years old at the time of referral of which 7 are under 5, the youngest being 2 years old.

Only 16% of referrals have been previously known to social care, as opposed to 75% of referrals for assessment in 2016/2017.

In 87 instances we have been unable to contact the family to progress the referral, and on 88 occasions support was refused by the family.

Referrals have been received from 148 schools (103 primary, 37 secondary, 1 6<sup>th</sup> Form College, 5 SEN, 1 Independent, 1 alternative provision); 21 voluntary sector providers (including 6 young carers groups); NHS services; Social Care teams (including Family Solutions); Education Access team; Employability & Skills team; Youth Service; Specialist Teacher Team; a Borough Council and Great Ormond Street Hospital.

We have also received 88 self/family referrals and 92 anonymous referrals which seem to be mainly from schools which forgot to identify themselves as the referrer.

The team have carried out 879 statutory assessments.

Besides the main focus of their work being casework with 965 young carers and their families, which has included 72 young adult carers (16-24 yrs), the team have also delivered:

- 40 training workshops on topics such as Internet safety/cyberbullying; Young Driver lessons; First Aid; Kooth online counselling; Jamie's Food for Thought 10 week course (with Rotary), Epilepsy awareness, school transition support, Art Therapy 6 week programme, Work Readiness – CV & Interview Skills, Manual Handling, Mindfulness workshop, Cookery, Creation Station emotional resilience workshop, Mental Health First Aid
- 36 significant respite events, including Kidzania Trip; Science Museum; Hadleigh Park Glamping; Caroty Wood Residential; Sky TV Academy; PGL Residential, Jimmy's Farm Day; Mercury Theatre tour and panto; Harlow Playhouse tour and panto; Virtigo climbing wall, Colchester Zoo, Danbury Outdoors residential, Mersea outdoors, St Marks College residential, Lambourne End activity day, Essex Wildlife Trust and Microsoft HQ residential
- 55 peer support workshops
- 37 service user forums
- 35 drop-in or support sessions

The summer school holidays is a period when many young carers find themselves increasingly lonely and isolated, so it is important to have a range of opportunities available to address these issues and ensure support is available. This year our Young Carers team organised an amazing 57 different sessions including residentials, drop-ins and workshops in addition to ongoing 1:1 support work and assessments throughout the summer holiday period.

The service also organised a successful 'Supporting Young Carers in Essex' conference to mark national young carers awareness day, which was attended by 138 participants from a range of sectors including social care, schools and voluntary organisations. The day included young carers themselves, key note speakers including Cabinet Member for Education and Director of Education and was opened by Government Minister of State for Care, Caroline Dinenage MP.

The team have also recently launched an innovative new communication App working with Essex based Piota, which provides information, news, online contact, links to voluntary providers and enables alerts to be sent for upcoming events and appointments. Additionally, information across ECC websites has been updated and an online referral form makes access to the team as easy as possible.

Key workers have held or attended 39 Team Around the Family (TAF) multi-agency meetings, and 13 Children in Need and Child Protection meetings.

Most importantly, the team have been able to evidence the following outcomes for young carers and their families as a result of their interventions:

- ✓ Improved attainment, attendance and engagement with School, FE/HE, training or work

Outcome Evidenced	Number of cases
Career guidance/support	12
Reduced school exclusions	6
Early lunch pass provided at school	1
Improved attainment in school	86
Improved attendance at school	87
Increased awareness of caring role in education setting	647
Increased engagement in school lessons	78
Increased knowledge of work readiness	29
School allocated time out card	62
Secured school exam rooming arrangements	2
Successful school placement appeals (new school place awarded)	3
Supported aspirations for further or higher education	37
Supported in finding work experience	3
Supported to apply and attend college	12
Timetable changes at school to accommodate young carer needs	6

Transition support to new school	12
Young adult carer accessing training and or employment	2
Young carers advocating young carer status by delivering assemblies/posters around school etc.	15

✓ Increased Knowledge and Skills for young carer

Improved knowledge of what do in an emergency	161
Increased understanding and knowledge of cared for condition	194
Skills from training/workshops being implemented at home/school etc	37
Supporting young carers and their families to travel more confidently (e.g. with travel training or applying for government funded vehicles.)	31

✓ Personal development of young carer

Access to mental health support for young carer or “cared for”	25
Improved anger management (less angry)	32
Empowering the young person	214
Improved social skills resulting in friendships	291
Increased self-esteem	294
Reducing isolation	249
Reduction in anxiety and individual worries	247
Reduction in self harming behaviours	31
Reduction of risky behaviour e.g. gang activity or absconding	21

✓ Family and cared-for support

Adult social care installed stair lift	3
Adult social care referral made	2
Occupational therapy referral made for home adaptations	17
Support put in place for cared for	90
Support with Housing issues	2

✓ Accessing wider support

Supported access to universal youth provision	142
Referrals to other support agencies	279
Referrals to statutory services	36
Supported to attend youth service including NCS, Youth club, DofE	12

Please find attached in the appendix, 8 case studies that evidence the outcomes of the intervention by a key worker or Senior Key Worker.

## User Feedback

Some examples of feedback from service users about the work of the team are provided below. So far we have not received any complaints nor negative feedback.

*"I' has looked forward to J's frequent visits to talk to her at primary school. She really likes him and benefits hugely from being able to open up her feelings to him. Thank you." - LS, I's grandmother*

*"Essex young carers have been helping myself and my daughter for nearly a year without your service and help I don't think my daughter E would have coped you have been amazing support and have helped give her confidence B is such a support. Your service has given us such amazing help thank you" – E's Mum*

*"Wanted you to know what a fantastic job you are all doing. K had a rough 2018 what with L's diagnosis on top of his sister's chronic illness.*

*But you were there, put no pressure on him, he gets to mix with other kids with similar family lives. You are helping K build up his confidence again after having the wind knocked out of his sails.*

*Keep up the good work, it is truly appreciated"- K's Mum*

*"As a young carer myself, I can cope with the physical side of the job but with the emotional side, the young carers service provides so much support and help when I'm feeling down or not myself and it also gives me the ability to meet other carers from different backgrounds but as a whole understand how I'm feeling. I am so grateful for the support the young carers service has given me over the past year and a bit and how fantastic and welcoming the whole service is. I have had experiences with services in the past relating to what I do and I can say that this has been the most supportive and friendly and helpful group I have ever come across and I don't want to leave." – JO young carer*

*"As a parent I appreciate everything that this service offers to my daughter, allowing her to sound off when she needs to knowing she hides things from us as she feels we already have enough to deal with. The days that T visits she always comes back looking somewhat chilled. The days out with the other young carers is so beneficial to my daughter, as to I'm sure is beneficial to the other children. Being able to let their hair down and just be kids with no responsibilities. My daughter comes alive every time she's been out or away with young carers service. I can rest assured that she is safe but having fun. I would highly recommend this service and wish there were more key workers so they could see more children. I wish there were more funding to allow these children to have more help and breaks as they work extremely hard trying to cope with home and school work. The key worker is an angel in disguise she has managed to build a trust with my daughter after she was let down before by a different key worker with a different young carer service" – JO's Mum*

*"The Young Carers Team now come in to see pupils very regularly and also frequently call in to book meeting rooms for their sessions. The Team are all so professional and friendly, a real pleasure to work with. Most importantly, they are always promptly on time which is reassuring and reliable for the Pupils, and the rapport they have with them is always warm, supportive and heartfelt. As you know*

*we see a lot of other support agencies and organisations, but the Young Carers Team stand out on their own” – Secondary school*

*“I hope this finds you well, I just wanted to say a MASSIVE MASSIVE Thank you for all of your hard work and support that you have given me, the team and our identified Young Carer's and families here at W's over the last few months. The service you provide is exceptional, real decent people wanting to make a difference. I'm sorry I overload you with work but I wouldn't bother if you weren't all so darn good!” – Secondary School*

*“I am overwhelmed with how brilliant the service is. The power of C and her appeal letter has made such a difference to our lives now the children can go to a school closer to our new home” - Mum*

*“...came to both the forum and Jimmy's Farm trip had previously not been attending school full time because her lack of confidence encouraged behaviours that got her onto a reduced timetable. Since half term she is more confident, attending school more regularly, engaging in play therapy well, and been allowed on her first school trip!!!” – a parent*

*“I just wanted to say, J doesn't talk or tells us much how he gets on with his sessions. We are lucky to get any information from him about how his day at school was, but what Dan and I have realised is that he talks about you and the bond he has with you so we thank you for that.” – J's Mum & Dad*

*“..I had lost all faith in the doctors, hospitals and care System but now being in contact with your team my faith has now been restored there really is people out there that want to help and do the best they can so thank you again” – Mum*

*“..it has built her confidence and she wanted to stay in school more..” – Mum*

## **Schools Development Work**

A key objective of the strategy is to improve identification and support for young carers in schools across Essex in response to feedback from young carers during engagement work.

The Schools Development Co-ordinators have been working closely with The Children's Society and Carers Trust, who administer the Young Carers in Schools Award, to enable us to share examples of good practice and enable Essex schools to develop effective means to identify, provide support and improve attainment and attendance by their pupils who are young carers.

The team also visited schools across England to learn from their experience of achieving the Award at all levels and collect examples of positive engagement. This has now been collated into a 'good practice guide' that is being shared with schools through engagement with our team.

Since January 2019 the Co-ordinators have supported 44 schools towards making submissions to receive the national Young Carers in School Award (YCiS). Prior to April 2018, only 8 schools in Essex had achieved the Award.

Basildon Academy and Greensward Academy have both been successful in achieving the Award at Silver level. They are now being supported towards succeeding at Gold.

Potter Street Academy, Milldene Primary, Greensward Academy, Great Bardfield Primary School, Saffron Walden County High School, Gosbecks Primary, Felmores Academy, Chipping Hill Primary School and Baddow Hall Primary School have all been successfully supported to achieve at Bronze level.

A further 7 schools are still awaiting confirmation of their Award (Hedingham School, The Cathedral School, Northlands Primary School, Honywood School, St Johns Green Primary School, Spring Meadow Primary School, St Helena School).

Additionally, 26 schools are working with the Co-ordinators on the Award and should be able to have them confirmed later in the year.

The Schools Development Co-ordinators have delivered a number of assemblies and training events in schools, and ran a countywide awareness raising and training event for school staff in May. Further termly training opportunities will be offered in the future.

In Essex, the majority of schools have achieved the Healthy Schools Award, which includes young carers support benchmarks. The Schools Development Co-ordinators have been working with the Healthy Schools Advisors and have attended their conference.

Examples of feedback received from schools include;

Would you recommend the service to other schools?

*"Yes, not only does it provide knowledge and understanding, the outcomes of the award have an exceptional impact. Increased awareness for parents, teachers and children, more identification of young carers, continual support for young carers (homework support, time to talk, drop ins) as well as being informed how to refer to Essex Youth Service to gain further information on the process to gain support from relevant key workers"*

*"Yes, very much so.*

*We are very proud to have completed the bronze award."*

*"...have both been amazing, they have been at the end of the phone when I've needed them for any queries I may have had. C has come to the school to check my evidence and to point out if I had any missing."*

*"Yes, I would definitely recommend the service to other schools as it is a good source of information."*



*“Definitely. Already had a meeting to discuss the steps of Silver Award. Hope to aim for Gold in the near future.”*

### **Street Nannies Scheme**

As a result of the Street Nannies pilot project being evaluated by the steering group and concluding it was largely unsuccessful in delivering the desired outcomes, and after further consideration of the potential of such an approach by the new Essex Young Carers Service team based on cases they were involved with at the time, it was decided to no longer pursue this scheme.

With the agreement of the Cabinet Member, it was decided that the intended post to support this initiative would be better deployed as an additional key worker in North East Essex where we had the smallest team, whilst experiencing high levels of referrals and some very challenging cases.

An additional Key Worker joined the NE team in August 2019.

### **Additional Grant Funding to Voluntary Sector providers**

Due to the delay in recruiting to the new service from April 2018, there was an underspend on the staffing budget. Therefore, in order to maximise the impact on our young carers it was decided to offer a ‘one off’ grant funding round to voluntary sector young carer providers to support additional significant respite activities (day trips/residentials), as this had been an area of development specifically requested by young carers themselves during engagement sessions.

Grants of up to £3500 were made available to 11 local voluntary sector young carers groups to offer additional activities, and a total of £26,700 was distributed.

### **Voluntary Sector Provision**

Despite the challenging financial circumstances faced by the voluntary sector providers, particularly as a result of the reduction in support from ECC, it has been pleasing to note their success in maintaining provision of local respite groups and support in schools in some districts.

Sadly, provision delivered in Brentwood by Crossroads Care has ceased, as did the provision in Braintree in 2017. Currently these areas do not have any offer of regular respite groups for young carers.

All young carers providers are given the opportunity to meet together and share information, news and opportunities at periodic engagement sessions facilitated by the Youth Service Commissioners.

### **Areas of concern for further exploration highlighted to Cabinet Member**

There is a need for greater clarity around ‘Consent’ – how can services engage with young carers where need for support is evident when parents refuse?

For some cases it would be useful to have access to personal budgets/grants as a lack of funds in the family for items such as scout uniform/laptop/driving lessons/engagement in activities restricts a young carer's opportunities. Similarly, access to transport or affordable public transport in some cases is restricting access to opportunities.

Work has started collaboratively with Carers First and adult social care commissioners exploring an improved offer of provision including pathways for transition to adult services and awareness raising with FE/HE/employers for young adult carers support (16-24yrs).

## **Awards**

It is worth noting that the Essex Young Carers Service has been successful in being shortlisted for 'You Make a Difference in Essex' - Team of the Year, to be announced on 10<sup>th</sup> October 2019 and the national Children & Young People's Award for Public Sector Team of the Year, to be announced on 28<sup>th</sup> November 2019.

## **Appendix - Case Studies**

### **Case 1 – Mid Area**

#### **The young carers family situation and caring role**

JK helps care for his Dad. A few years ago, JK identified that Dad had a drug addiction to prescription painkillers. JK tried to support Dad but after a few weeks told Mum about Dad's issues. This took a toll on the family and resulted in Mum and Dad separating and Dad moving out of the family home.

Mum had to reduce her hours at work and now only works at the weekend. Dad returns to the family home at the weekend to look after JK and his younger siblings. Dad has been supported to overcome his addiction but still suffers with mental ill health.

JK's caring role is both practical and emotional. When Dad is at the family home JK's caring responsibilities involve:

- Looking after his younger siblings
- Cleaning the house
- Making sure Dad is ok and keeping him company

Alongside his caring responsibilities connected to his Dad, being the oldest child JK is also a support for his Mum and is often her shoulder to cry on.

#### **The impact of caring on the young carer**

JK is very close to his Dad and the split has affected him, he can contact his Dad anytime and they still have a strong relationship.

JK is currently struggling with sleeping and will only get a few hours' sleep some nights.

JK is struggling with his anxiety which affects him both at school and home. JK explained that he can be social at school, but he does not like to leave the house when he is not at school, he will often wear headphones when he does go out as he does not like crowds. JK explained that he can become overwhelmed at school and some lessons such as Maths can be a trigger. This results in him spending time in his allocated safe space in school or contacting his Mum who will then collect him from school. This is affecting his attendance with both his lessons and at school in general.

JK does self-harm; he is quite open with Mum about this but does not like to upset her. JK is currently receiving support from EWMHS and CAVS.

**Agreed action plan and actions taken including signposting or support from other agencies**

- Arrange 121 sessions in school with JK to complete direct work on understanding his caring role and a safe space to discuss his worries.
- Look into establishing a healthier sleep routine.
- Referral to the Chelmsford YMCA for their Young Carers Club.
- Invite JK to any relevant workshops and significant respite trips.

**Actual outcomes and positive impact of support for the young carer and family**

- Regularly attending the YMCA Young Carers Club and has made a new group of friends there.
- On completing the 121 targeted work referred to AfFC for their school drop in support and arranged meeting for JK to meet their worker.
- JK has attended two workshops; Ready for Work and First Aid at Mersea Outdoors.
- JK has increased both his attendance and attainment at school. In the last month he has been in all his lessons and has not had to be collected early from school.
- JK has not self-harmed recently. He did acknowledge that he does sometimes have thoughts about self-harming but feels he is in a more positive state and has the strength to overcome the thoughts.
- Created a healthier night time routine which JK attempts to follow however due to mock exams recently he has been staying up late to revise.
- JK identified within his review outcome star that he had gained a greater understanding of his caring role and had increased self-esteem.
- JK identified that he is less anxious about attending new places and events. He has improved with socialising and will leave the house not wearing his headphones but feels there is still an opportunity for this to increase further.

**Case 2 – Mid Area**

**The young carers family situation and caring role:**

HB is 11 years old and lives with his mother and his older half-brother. HB cares for his mum, NG, who suffers with hypermobility and clinical depression. NG finds it

difficult to move around and can have periods of feeling very low and struggling to do things such as housework and cooking. NG reports that she is often in a great deal of pain.

As a result of NG's conditions, HB helps his Mum to stand from a sitting position, helps her up the stairs and around the house. HB enjoys cooking and often makes dinner for his family. HB also offers emotional support to his mum when she is feeling low.

### **The impact of caring on the young carer:**

HB is impacted by his mum's depression as she finds it difficult to leave the house and have people over. She also struggles to walk HB to clubs or school due to the pain she is in. NG has said that she struggles with housework and the house is often very messy which leads her into a bit of a 'rut'. School have reported that, on occasion, HB has missed school due to his mum needing him at home to help her. HB has been unable to attend school trips as a result of his caring role and Mum has found it difficult to be proactive with things such as securing him a secondary school placement. HB has also told his keyworker that he has hurt his back previously from helping his mum to get up and around.

### **Agreed action plan and actions taken including signposting or support from other agencies:**

HB's original action plan consisted of the following:

- HB's school to be made more aware of his caring role
- HB to have 1.1 sessions with a keyworker
- HB to be given respite opportunities.
- Letter to be written in support of NG being given a car from disability support team.

However, as HB's intervention started, these further actions became necessary:

- Referral to adult social care to be made for Mum.
- Support with transitioning to new school
- Support with learning how to lift his mum safely without hurting himself.

### **Actual Outcomes and positive impact of support for the Young Carer and family**

Since working with Essex Young Carers Service, HB's mum has been given a car by the disability support team, which HB's mum believes is largely due to the letter written by the service. NG has said that having a car has "changed [her] life", as she is now able to drive HB to attend more opportunities and being able to drive instead of walk has stopped the pain from being as severe.

HB has had 1.1 sessions with a keyworker and, in addition to being able to talk about his caring role, he did some work around communication and aspirations.

The service has liaised with the school regarding HB's caring role to give them a more detailed understanding of his responsibilities at home. This has resulted in HB

being invited to attend the school's lunchtime young carer club and has led to a good working relationship between the service and the school in which concerns and information are shared.

HB was able to attend a respite day to Danbury outdoors, in which he said that he had made friends with other young carers who "know how it feels". HB has also signed up to attend our Manual Handling workshop which will support him in helping his mum to get around the house without injuring himself. He has a place on a workshop we have arranged with the Children's Society which will address issues such as peer pressure, bullying and transitioning to secondary school.

The Essex Young Carers Service has arranged for a social worker from the adult social care team to and speak to NG about the support she can receive around cleaning etc.

### **Case 3 – South Area**

#### **The young carer's family situation and caring role**

JM is a 14 year of boy who is on a child protection plan due to his Dad's alcoholism and mental health such as psychosis. Dad also has tumours which result in him attending ongoing medical appointments/treatments along with seeing his mental health worker and open road for alcohol dependency/misuse. When Dad is intoxicated he becomes violent and uncoherent which led to J being put on the plan through social care. J's Mum also lives within the family home and attends all medical appointments to support Dad.

The referral came from J's social worker who felt that due to J's family environment he was at high risk of being involved in risky behaviours such as Gang affiliation and associated with unhealthy relationships.

J's home life also affected his education and the violence he witnessed at home was being displayed at school with J having fights and being suspended on many occasions, which then led to him having a below average attendance.

J had also suffered bereavements with the loss of his Grandad the previous year that he helped care for and most recently his beloved dog that he grew up with from a small child. These underlining emotional issues were never dealt with.

#### **The impact of caring on the young carer**

- The emotional impact this is having on J's mental health and wellbeing with violent outbursts being his only outlet.
- The impact this is having on J's education as he is unable to verbalise how he feels and displays this through anger
- Being involved in unhealthy relationships/risky behaviours as he unable to identify healthy peer's support/relationships.

#### **Agreed action plan and actions taken including signposting or support from other agencies.**

- Meeting with social worker to discuss safety plan and case
- Meeting with School to discuss further support/counselling and inform of caring role issues and concerns.

- Direct work 1-1 Around identifying unhealthy/healthy relationships
- Direct work 1-1 Emotional support and understanding behaviours.
- Direct work 1-1 De-escalation techniques and anger management strategies.
- Direct work 1-1 Understanding Dad's mental health
- Referral to bereavement counselling

### **Outcomes and positive impact of support for the young carer and family.**

Completion of all direct work which J feels has helped him. There have been no further incidents of J having had any disputes at school due to him implementing the strategies/de-escalation techniques. (Please see attached feedback form).

Attendance has improved, J now associates with healthy peer support relationships, no further suspension's, J is on the counselling waiting list and there is now good communication with school. Safety plan is in place to ensure J's safety. Dad has been engaging with all support offered which has significantly reduced incidences and behaviours at home. Continual support is being offered.

## **Case 4 – South Area**

### **The young carers family situation and caring role**

PB is 11 years old and has a complex family situation, his whole family are previous victims of abuse.

PB is caring for his Mum who has physical and mental health problems, sister with an eating disorder and suicidal tendencies, brother with Schizophrenia and learning difficulties and second brother with Autism.

### **The impact of caring on the young carer**

When we completed the initial assessment, PB was undertaking high caring duties, often staying up all night to monitor his family to ensure their safety and ensure none of them tried to take their own life. PB's emotional wellbeing was low at this stage and apart from school he did not leave the family home. PB appeared to have his own difficulties vocalising his emotional difficulties.

### **Agreed action plan and actions taken including signposting or support from other agencies**

- Team Around Family meeting held at school to put further support in place. School had been relatively unaware of the caring role due to minimal communication with Mum.
- PB was apprehensive about joining respite activities due to his own anxieties, so we held small social skills groups doing team games to build his confidence around this.
- Referrals made for additional support for the wider family, including Occupational Therapy for Mum and ESTEP Psychosis support for brother.
- Drawing and Talking was completed in school with Senior Key Worker to work through emotional difficulties due to issues verbalising them.
- Supported to attend School Nurse drop in with Mum to seek diagnosis for own needs.

- Support with the transition to Secondary School, including arranging additional visits and supporting to attend these, referring for Travel Training, supporting the appeal for school transport and holding a School Transition Workshop with other young carers moving to the same school.

### **Outcomes and positive impact of support for the young carer and family**

- School are now aware of significant caring responsibilities and have put further support in place. This includes a communication book, regular check ins from pastoral staff, and the school also funded a term of piano lessons from pupil premium as this was a favourite hobby of PB's.
- TAF meetings are ongoing and now involve professionals supporting all members of the family.
- PB has built confidence in socialising and has since attended many respite opportunities, including the pantomime, Sky Academy London and a two night residential to Carroty Wood, where he built good friendships with other Young Carers.
- Professionals are now supporting the whole family
- PB has completed Drawing and Talking programme and benefited from these sessions, giving positive feedback to Mum.
- PB has now been diagnosed with High Functioning ASD to enable him to get correct support for his own needs.
- PB is feeling less anxious about the move to secondary school. He has already made friends, has had the opportunity to ask questions about his worries and has completed Travel Training successfully.
- Mum has thanked the service for the difference it has made and sent emails of praise.

## **Case 5 – North East Area**

### **The young carers family situation and caring role**

R is in KS2 and lives at home with his older brother who is a school refuser, older sister who attends a SEND school and his mum. R has another older sister who lives with Nan. Mum has complex health needs, including NEAD epilepsy, anxiety and depression, heart and nervous system conditions, and has had multiple strokes and a heart attack. R's sister that lives at home has epilepsy and complex learning disabilities. Both mum and sister receive regular allocated carer hours.

R helps with cooking and cleaning around the house and provides support when his mum or sister has a seizure by getting cushions, medication and additional help when needed. When mum is experiencing difficulties with her mental health R will use his own pocket money to buy mum chocolate biscuits or a donut from the local shop, then sit and watch films with her to help her feel better.

### **The impact of caring on the young carer**

R has found it difficult to engage at school with his learning, often thinking about home or finds aspects of school overwhelming. He has commented that he would

prefer to be at home where he can see his mum and sister and help when needed. He displays challenging and aggressive behaviour at school, which has led R to being excluded 1-2 times a week this academic year and was at risk of permanent exclusion. R has not been able to remain in his own class for a large portion of this academic year because of his behaviour towards his peers and adults in the class. R has difficulties with making friendships. Mum feels R is not able to access opportunities and activities outside of school like his peers do due to the circumstances at home.

### **Agreed action plan**

The following action plan was agreed with home and school:

Drawing and Talking sessions, Solution Focus 1:1s, Young Carer role 1:1s, invite to respite activities, first aid and cooking skills sessions (waiting list for next cooking course), school to offer R a place on Wildlife Wellbeing sessions (starts Sept 2019), careers talk with Police Officer because R wants to join the Police when older (arranged Sept 2019).

### **Actual Outcomes and positive impact of support for the young carer and family**

Head Teacher feedback - "R has now gone 4 weeks without being excluded and only once in the 2 weeks prior to that. This is a great improvement. He talks to trusted adults more about his feelings when he feels angry or about concerns at home or school, instead of acting on his feelings, and because of this he has been able to join his class again."

Young Person feedback – "I now have my 'best days' and I am making good choices. I like being back in my class, I have been allowed back in because I make good choices. When I do my learning, I get 5 minutes reward time and I get to choose a friend to spend my reward time with. I have more friends now that I like to play with."

Parent feedback – "It has given R time to be a child and not just a young carer. He is experiencing things others his own age get to do."

## **Case 6 – North East Area**

### **The young carers family situation and caring role**

YC lives at home with Mum (Arthritis, plantar fasciitis, anxiety, depression, cyst on spine, receiving treatment for stroke and angina) younger brother (11 – ASD), older sister (21) and her two children (niece – 2yrs and nephew – 5yrs ASD). Also has another older sister (25 – Asperger's and ADHD) who lives in own home with her daughter (4 yrs). Father has contact but does not live at home.

YC is caring for Mum and assists in caring for Brother, Sister and Nephew. YC provides helps with cooking, tidying the house, bathing nieces and nephews, food shopping, changing beds, washing and gardening. YC uses the app 'Money Matters' to help pay the household bills. They get Mum's medication and attend hospital appointments with her, in addition to calling for medical assistance for Mum when



required. YC helps Mum wash and dress on occasions where she is in too much pain (awaiting wet room to be installed upstairs to help this). Emotional support is also provided by the YC by picking up on Mum's emotional state and assisting around house to support. Mum's eyesight has been affected by her health conditions and is unable to drive. The YC catches two buses to attend college her part time job. The sisters who are able to drive help out with lifts when able.

YC suffers from anxiety, particularly in social situations, for this they have been seeing a counsellor with the organisation 'Healthy Minds'. YC is trying to balance a full educational timetable of 4 A level subjects, looking after her family, and a part time job. Recent exams and mocks have caused a huge increase in anxiety as rooming and timetabling provisions are not always adhered to. YC has ambitions of becoming a Child Psychotherapist or Teacher and would like to go to University but is unsure the family could afford and facilitate this. YC often worries when at College about mum attempting to attend medical appointments alone, due to potential injuries or difficulties on route.

### **Outcomes and positive impact of support for the young carer and family**

YC engaged in a 1:1 to complete an outcome star to identify key areas she would like to work on and achieve with the help of the service. She identified exploring her options for University in connection with her young carer role (cost, distance from home etc), the need to get some work/life balance, create some designated 'me time'. In line with these aims the first thing the kw did was meet with YC to see if there was anything that she would like to bring to the Head of College's attention in addition to the information from the assessment. YC highlighted three things: special exam arrangements previously agreed not being adhered to, letting tutors know about anxiety, and informing selected teachers (English x 3 teachers) of young carers role. Based on this the was shared was received positively by the College and YC was commended for the level of care she was providing whilst maintaining such good attendance and attainment (was previously unaware of the full extent of caring role). The Head of College suggested that the young carer be able to have a flexible study day (usually Friday expected in College) where YC is able to study from home if it would suit, allowing her to spend more quality time with Mum whilst Brother and Nieces and Nephews are at school, as well as being able to help attend medical appointments when necessary. Head of College informed all YC's teachers of her anxiety and her English Teachers about her young carer role. He also confirmed he would be chasing up the exams officer as he wasn't happy about how the previous exams had been handled. YC attended a visit to Cambridge University and took part in the informative activities about University, course selection, course requirements, University life and student finance. The day had a positive effect on the Young Carers view of whether University is achievable and the Young Carer has specifically asked to do a 1:1 session looking at Student Finance and bursaries etc. We ordered prospectuses for Universities up to 1.5 hours away (a distance agreed with the Young Carer) to look at course requirements in a future 1:1. YC's exams 'went well compared to past exams', and she commented that all exam procedures discussed with the head of college had been followed and made the whole process much less stressful.

YC's mother has also recently sustained injuries to her neck and back after a fall down the stairs and was requiring significantly increased amounts of care. This happened around the time that YC was completing exams. The key worker produced a letter to the Uncle's employer to illustrate the increasing need for care in the family home. The uncle now visits the family home each weekend to help with care, allowing the young carer time to study and attend her part time job.

YC has also recently requested to and completed a week's work experience with the key worker as she is interested in a profession helping young people and felt she had had a positive experience with the service and would like to see how the service is helping others, in order to broaden her perception of possible careers in the future.

## **Case 7 – West Area**

### **The young carers family situation and caring role**

K lives at home with her young brother and mum with dad in and out the home, mum struggles with her mental health and depression. K is a constant emotional support for mum and helps with her younger brother. The family live in a cramped flat in an anti-social building and mum has been known to have anti-social behaviour and get into fights with other residents. K is around when this happens and helps to calm mum down and distract her brother. K is aware when mum is having a bad day and becomes more loving and cheerful around mum to make her feel better.

### **The impact of caring on the young carer**

School voiced that K struggles in friendship groups and is distant with peers and teachers, her record within school is not good with bad attendance and appearance. Whilst working with the family, they moved to social care and put onto a child in need plan. Mums mental health had become worse and she was struggling to cope with the children and to care for them. K stopped talking in her sessions and was worried she was going to say something wrong or get mum into trouble. K was constantly worrying about mum and her younger brother.

### **Agreed action plan and actions taken including signposting or support from other agencies**

- 6-8 1:1 session
- Attend TAF/CIN meetings
- Refer K onto an extra emotional support service
- Find K an after-school club and support mum to do this.
- Provide K with respite opportunities

### **Outcomes and positive impact of support for the young Carer and family**

- Positive response at Children in Need meetings
- K attends a drama therapy club at school
- K attends after school club
- Attendance is higher at school
- K's appearance is better, and she has new glasses
- K has a better relationship with her young brother and dad

- Family have attended 3 family forums
- K has attended 1 peer workshop and 1 significant respite residential

## **Case 8 – West Area**

### **The young carers family situation and caring role**

M was referred into the service by Family Solutions as she is a young carer for her mother who suffers from mental health needs. Mum's emotional wellbeing impacts on M who also shows levels of anxiety and is school refusing. M displays controlling behaviour in the home and in school.

### **The impact of caring on the young carer**

Due to her caring responsibilities M suffers from her own emotional needs and as a result has a poor relationship with the school. M has bad attendance and Mum has paid fines over this. Relationship between family and school have broken down meaning M rarely attends and when she does is often not in lessons.

### **Agreed action plan and actions taken including signposting or support from other agencies**

Reengage M back into education. I arranged 6 1:1 sessions to discuss the issues M faces in school.

Build a better relationship with mum and school

Invite M to targeted respite/workshops to help her build her confidence in Groups and encourage her to feel more confident when at school and to also reduce her isolation.

### **Outcomes and positive impact of support for the young Carer and family**

After failing to meet with M in school, I arranged a meeting with M at home. When I arrived, M was guarded and defensive. Over the next 90 minutes she gradually relaxed and started to talk about why she didn't want to be in school; the circle of non-attendance she had gotten herself into. – behind in lessons, staff and students making a fuss if she went in, not knowing what work should have been done or where she was at.

I discussed these issues with school and arranged to meet M at the reception on the following Monday. I ensured I was there when she arrived and went into a meeting with the head of year, M and mum. We discussed M's caring role and how this can at times impact her attendance and looked at any work that can be caught up on over the summer. We also discussed how to address issues in school, (what M and school agree not mum). School agreed to give M a card that allows her to leave lessons when she is struggling and a new designated adult that she felt safe talking to.

All the points that were worrying M were addressed and M's school attendance has improved. Both mum and M feel listened to and relations with school are improving.