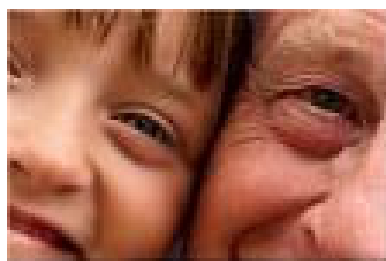


THE YOUNG CARERS' STRATEGY FOR HALTON

DRAFT

January 2012-2014



Summary

Young carers are a particularly vulnerable group within our Borough. This is because they can often be difficult to identify; in order to keep their family together a characteristic can be that their home lives are kept hidden and they keep quiet about their circumstances, often through concern over what may happen to their family if anyone finds out about their caring role. Subsequently, young carers could become children in need themselves, requiring a range of support services to protect them from potential future harm.

Young carers are therefore a priority within Halton for all agencies and this strategy presents a multi agency vision, agreed by young carers themselves, whereby all identified, known and potential young carers are able to reach their full potential in life. It highlights the needs of young carers, with the aim of ensuring that they all have access to projects/services which can provide support for their emotional and personal needs and social and educational development. It encourages agencies to work with families, supporting them to reduce the amount of inappropriate care that a child/young person provides to any family member. In implementing this vision we will ensure that:

- Every young person who is potentially a young carer will receive the help and support they need to ensure they can make informed choices regarding their caring responsibilities and any potential impact upon them. These choices are not a “once in a lifetime decision” but are reviewed with the young person on a regular basis as part of any support plan for them or the cared for person.
- Professionals recognise that young carers are entitled to be children and young people first and ensure access to, or make provision for, young carers to have the time and opportunity to pursue leisure activities, have fun and personal development opportunities.
- Every young carer receives a range of timely, practical and emotional support to help them manage their caring role, ensuring they do not have to take on tasks or responsibilities inappropriate to their age or understanding.
- Support and information will be accessible and will recognise and respect their caring role and any specific cultural needs they may have
- Every young carer has the opportunity to extend and fulfil his or her potential and receive sufficient support to enable them to attend school regularly and benefit from the opportunities offered to all young people at their school, college or other education provision.
- All agencies raise awareness through strategies to profile the needs of young carers and ensure that they tailor their work with adult service users to minimise the burden on young carers.

The Children Act 1989 places a statutory obligation on agencies to work together to support and improve the life chances of all children, including those in a caring role. A holistic approach to the identification and assessment of need is crucial so that young carers’ needs can be met:

- (i) agencies should ensure that the health needs of young carers are identified and met. The impact of their role on their own health could include anxiety or depression, eating disorders, self harm, or use of alcohol or drugs.
- (ii) young carers should be protected in their home, school and community. They may experience bullying at school because of the care they provide at home, or because they have a disabled sibling.

- (iii) young carers often miss out on their schooling because of their caring role at home. Schools should ensure that there is no consequences for a child who regularly does not hand their homework in, is late for lessons, or misses school. Sensitive discussions and enquiries may be necessary to ensure their caring role is not adversely impacting on their education.
- (iv) young carers should be encouraged and supported to make a positive contribution to society through school, leisure and their family. This means agencies need to consider ways of supporting the family to reduce the hours of caring for the young carer.
- (v) young carers should not miss the opportunity to gain meaningful employment - which may include part-time/Saturday work when they are still in education, or full-time employment on the completion of their education. Support to achieve all the above aims will contribute to this final aim.

The document highlights the joint working taking place, and further work needed, between Halton's Communities Directorate and Children and Enterprise Directorate in respect of Young carers. The 2 Directorates have a duty to meet the needs of carers in Halton, whether they are an adult or a child. Therefore the strategy stands alongside and complements the Joint Commissioning Strategy for Carers (2009-12), as well as the Children and Young People Plan (revised 2011). Offering a range of help and support is a statutory requirement for Adult's and Children's Services and the majority of these are adult carers. However, the needs of Young Carers cannot be overlooked and therefore this strategy is a separate document, although inextricably linked to the Halton's overarching Joint Commissioning Strategy for Carers (2009 – 2012).

The strategy recognises the need to ensure that resources are available to enable young carers to take their place in the community with confidence. The action plan covers these areas so that colleagues across statutory and voluntary agencies are aware of their responsibilities regarding young carers.

The action plan accompanying the strategy sets out clear targets over the next 3 years in respect of young carers. The implementation of the strategy via the action plan will be monitored by the Early Help and Support Strategic Group (EhAS), a subgroup of the Children's Trust.

Finally, the document has been fully shared with young carers, their families and colleagues from the Carers Strategic Group. Carers have agreed the vision and the key objectives of the strategy. They have also contributed significantly to the areas of work identified to implement the strategy (see section 6 and action plan); in particular specific tasks and goals that they consider crucial, not only to raise awareness of young carers' issues, but to ensure that young carers are fully supported and their needs are fully met.

1. Strategic vision and objectives

1.1 Young carers themselves have discussed and agreed the overall vision for this strategy. The vision and values of the young carers themselves compare well to those set out in the Joint Commissioning Strategy for Carers (2009 – 2012):

- Carers will be recognised and valued
- Carers will be supported and enabled to care as long as they wish to do so
- Carers will be enabled to have some regular time for themselves, free of their caring duties
- All agencies will work in partnership with carers to provide the help and services carers need
- All agencies will work together to plan and develop services for, and with, carers
- Information on issues of relevance to carers will be made available to carers, statutory and voluntary agencies, and the wider community.

The values highlight some points particularly relevant to young carers which are shared in this strategy:

- All agencies need to work in partnership to improve support for carers as part of mainstream community care and children's services;
- A pro-active approach will be taken to identify, accommodate and support diverse needs of the carer
- The role played by carers is recognised and valued
- Carers will be involved in decision making about their needs and consulted about their preferences for services
- No carer will be compelled to care or to continue caring if they no longer feel able to do so
- Former carers will be helped to access support to enable them to adjust to their new circumstances
- Service providers will ensure equity in the provision of support to carers, whatever the illness or disability of the person they are caring for
- Carers will continue to be involved in planning and determining the types of services available
- Carers will be invited to take part in the evaluation of services.

1.2 The strategy supports the 3 priorities and aims of Halton's revised Children and Young Peoples Plan (CYPP April 2011). The Children's Trust Partnership, the group of agencies that formally approve this Plan has agreed 3 cross cutting priorities and the strategic objectives for Young Carers can be seen through these 3 priorities:

i. To improve outcomes for children and young people through embedding integrated processes to deliver early help and support:

The key objective here is to ensure that the model and philosophy of working with young carers ensure that young carers are assessed and appropriate support put in place as soon as possible from when they are first identified. The overall aim is to help that young carer as early as possible in order to prevent their own needs from increasing and more intrusive interventions becoming necessary for them and their whole family. Another key element is looking at how services can best address the needs of young carers in families that fall under the “hidden harm” agenda. This means that clear protocols are needed between children’s and adults’ services (adult mental health and drug and alcohol services) so that young carers’ needs are identified early whether this is via adults or children’s services.

ii. To improve outcomes for children and young people through effective joint commissioning:

The objective here is that young carers benefit from a range of help and support services available within the Borough, that they have choice from a variety of activities and sessions that enable them to continue to enjoy life, continue with their caring role, but also reach their own potential. This has to be achieved via integrated and effective commissioning arrangements between all partner agencies so that services are readily accessible and everyone is clear on their roles and responsibilities. Professionals working with young carers must ensure that there is a balance between having the same opportunities as those not undertaking a caring role, with having their particular needs recognised. All statutory and voluntary agencies need to offer inclusive services that continuously strive to improve outcomes for young carers and their families.

ii. To improve outcomes for our most vulnerable children and young people by targeting services effectively:

Young Carers are a vulnerable group by nature of their own caring role and are at risk of becoming excluded within the wider community. Agencies need the awareness and skills to understand the needs of young carers and be able to deploy resources to help enable them to reach their full potential. The life chances of Young Carers should not be affected by their caring role and they have the same entitlement to access educational, social and developmental opportunities as any other child/ young person.

1.1 The Trust’s values highlight the way in which this strategy seeks to achieve these key objectives:

- (i) Working together in creating a clear vision and ambition about what we want to do for our children and young people and how we are going to get there
- (ii) Working together to create a sense of ownership in building a borough that our children and young people can be proud of
- (iii) Working together to make sure we are accountable to the community by providing services and support, which reflect their lives and needs

- (iv) Working together with integrity to make sure all children and young people in Halton receive and have access to the best we can offer
- (v) Working together to build an inclusive Borough which values diversity and works hard to promote equality of access and opportunity
- (vi) Working together in an honest and open manner, which appreciates different opinions and welcomes alternative perspectives on the path to finding a way forward
- (vii) Working together in ways that demonstrate a professional respect for everybody involved in making a difference to the lives of children and young people in Halton

2. Definition and Legislative Context

2.1 There is a wide range of legislation, local policy and standards influencing this strategy:

- Services for Young Carers: A Framework (2002)
- Children Act 1989 and 2004
- Carers Recognition and Services Act 1995
- Disabled Children Act 2000
- Carers Equal Opportunities Act 2004
- HBC Joint Commissioning Strategy for Carers (2009-2012)
- The Carers and Disabled Children Act 2000
- The NHS and Community Care Act (1990)
- The National Service Framework for Children, Young People and Maternity Services

2.2 The previous Government's National Strategy for Carers (June 2008) set out the vision for supporting Carers over the next decade; it included short-term commitments and identified longer-term priorities. Additional investment led to extended planned breaks for carers. There was also an increased emphasis on joint agency working, and on the need for the National Health Service to more effectively engage with carers.

2.3 Carers often need support to be able to continue caring and to lead active lives as well. The intended outcome is that with additional investment and a clear vision carers can be treated with respect, have a degree of financial security, and receive quality advice and support from health, social care and other agencies. Carers should be treated as expert partners and there would be more choice and control over how they receive support.

2.4 Young carers are defined as children and young people under the age of 18 years who provide care to a parent, a sibling, another family member or a friend who has a physical illness / disability; mental ill health; sensory disability or has a problematic use of drugs or alcohol. The care given may be practical, physical and/or emotional. The level of care they provide would usually be undertaken by an adult and as a result

of this has a significant impact on their normal childhood. “The terms ‘disability’ and ‘long-term illness’ do not just mean a physical disability or illness, but also cover, for example, learning disability, substance misuse, frailty and old age”.

- 2.4 The child or young person does not have to live with the person they care for and the term does not refer to young people under the age of 18 years who are caring for their own children. The term also does not refer to young people under the age of 18 years who accept an age appropriate role in taking increasing responsibility for household tasks in homes with a disabled, sick or mentally ill parent.
- 2.5 The overall impact of caring on a young person varies; they could experience:
- Reduced school attendance
 - Social isolation
 - Emotional difficulties as a result of trying to balance the need to help their family members but also have their own needs met.

It is therefore important to assess needs on an individual basis (Service for Young Carers; A Framework 2002). Examples of some of the tasks that children undertake include personal and intimate care for other members of the family (which may include adults of the opposite sex to the child), giving medication, lifting, budgeting, shopping, housework, collecting prescriptions and benefits, communicating for a parent or parenting younger siblings.

- 2.6 The definition is broad and encompasses young carers in a range of relationships with the person for whom they care. It is important, however, within this strategy to acknowledge and prioritise the needs of those young people caring for an adult in a family where there are no other adults, that is, a child caring for a single parent. These young people are acknowledged as those at greatest risk of the adverse effects of caring and likely to need greater levels of support.
- 2.7 Children acting in a caring capacity within their family may be ‘children in need’ (Children Act 1989), especially when their caring role inhibits the experience and normal development of childhood. Children who care have the same rights as all children. Caution is needed, however, with younger children. Whilst they may be taking on caring roles within the family this may be as a result of wider, more concerning factors that are impacting on both their physical and emotional health. For a younger child, for example aged 5 or 6yrs, issues of neglect need to be considered primarily over their caring role.
- 2.8 Young carers have a right to an assessment of their own needs as a carer and to have their views taken into account (Carers Recognition and Services Act 1995, Disabled Children Act 2000); and also assistance and support to engage in education and employment (Carers Equal Opportunities Act 2004). They can access their own Carers Assessment from the age of 16.

3. Local Context

- 3.1 With regard to numbers locally, there is no absolute figure for the number of young carers in the borough or the UK. Young carers are only known to agencies when they or their families chose to identify themselves. Therefore, the true extent of caring by children and young people is 'hidden'. The 2001 Census identified 175,000 young carers aged under 18yrs in the United Kingdom, 474 of whom are in Halton.
- 3.2 The Mott MacDonald (2006) research carried out in Halton stated 24,508 young people between the ages of 5 and 19 years live in Halton in 2004. Research carried out by Saul Becker et al (1995) suggests that 2.1% of the population of young people are young carers. Based on this projection, an estimated 515 young carers live in Halton. The difference of 41 between the estimated figure and the self declared figure (8% of the total) may be said to represent the 'hidden' young carers in Halton.
- 3.3 This is a very conservative estimate given the formula of 2.1% does not include all those young carers from families where a family member has an alcohol or substance misuse issue.
- 3.4 Given the above, a more realistic estimate on the numbers of young carers' in Halton would be 4.1% of the total cohort of 5-19 year olds. Recent research states "*Current estimates for this in England and Wales are between 250,000 and 300,000 children with at least one parent who has a serious drug problem- representing 2-3% of children under 16.*" (Is the harm still hidden? Best, Witton, Homayoun, Manning and Day - 2007)

4. Key Objectives

- 4.1 There are 3 more specific objectives linked to the Children's Trust's priorities that this strategy strives to achieve:

i. Inclusive Provision for young carers

Agencies involved believe that young carers are seen as children first, by promoting inclusion and supporting them to be able to undertake educational and leisure activities with their peers. The aim is to ensure young carers are prioritised and offered a continuum of support across the levels of need, from access to universal services within the Borough to more specialist (statutory) services where this needed.

Some young carers will be at greater risk of exclusion due to additional factors to contend with as they grow up. For example, teenagers who are about to leave school may not feel able, ready or confident enough to go on to further education, employment or training (EET) due to their personal circumstances and their loyalty to their family.

It is recognised that many young carers gain benefit from meeting with children in a similar situation to themselves and should therefore be supported to take advantage of a choice of specialist projects and community based activities. Young people tell us they value opportunities to meet with peers who have similar responsibilities.

As a result of work over the last year schools are beginning to put in place arrangements to help recognise the needs of young carers. This is a positive step and further development work is needed to help all schools achieve a consistent approach to the identification and support to young carers.

ii. **Physical Health and Emotional Wellbeing of young carers**

A priority is to ensure that the health needs of young carers are recognised and met by the National Health Service, including GPs, School Nurses and other health colleagues where necessary. The physical and emotional wellbeing of young carers need to remain a priority for all agencies, especially those who have direct contact with young carers or other members of their families. Policies and procedures are needed that cover all aspects of young carers and the challenges they face. Primary Mental Health services and CAMHS need to have processes in place to monitor the emotional wellbeing of young carers, especially those where “hidden harm” is a factor (see 5.1.3).

iii. **Choice for Young Carers**

Children in a caring role should be supported to make choices about their life and feel confident that if they are not able or do not wish to provide the care, then the needs of the cared for person are addressed holistically. Young Carers should be encouraged to take part in activities with their peers who are not carers. Statutory and voluntary and community services also provide services which are available to young carers across the Borough, offering activities and support on an individual and group basis. There need to be simple, understandable pathways for young carers to access a range of suitable help and support, where options are available and duplication is avoided; and agencies need to sign up to their roles and responsibilities. It is vital that families with young carers are not adversely affected by any gaps in service provision, and any gaps there may be between Adult and Children’s Services. Therefore, a clear model of supporting young carers is crucial here, as well as clear lines of accountability for professionals involved. Progress here will be promoted and monitored by the Young Carers LIT Sub Group; and ultimately the Children’s Trust in conjunction with Carers Strategic Group.

5. **Team Around the Family (TAF)- an ‘early help’ approach to young carers**

- 5.1 Achieving these objectives fits into Halton’s model of early help and support to children and families. This is Team Around the Family (TAF), a model fully endorsed by the Children’s Trust. The principle is that the earlier that additional needs are identified within a family, the quicker support can be arranged, thereby helping to prevent needs from escalating and families then requiring more intrusive and specialist

interventions. The needs of young carers fit neatly into this model. Young carers need to be identified as soon as possible, so tailored help and support can be offered to them and their families. When achieved, this will help enable them to function without the need for statutory interventions. There are a number of key features of the model which link directly with needs of young carers:

- 5.1.1 **Single point of entry:** The model works on the principle that there should be one point of access for all queries that are not relating to either child protection or child in need issues. The point of entry and coordination of many services come via two Integrated Working Support Teams (IWST), one covering Runcorn, the other Widnes. IWST coordinates consultations with professionals working with families and helps to ensure that professionals involved can access services that are most appropriate to the family's needs. Halton Carers Centre is a component of the model as it acts as the point of call for the majority of queries regarding young carers. The Centre is key in the identification and assessment of young carers in the Borough, as well as the coordination and oversight of support services. Where further, more specialist support may become necessary the Centre would request additional input via HBC's Support Team; if there were any immediate safeguarding issues then Children Social Care would be contacted. At any point during their involvement the Centre could consider whether a CAF (Common Assessment Framework) would be beneficial for the child, especially when additional needs have been identified and multi-agency input is needed. At any point here the IWST Teams are available for any help or guidance on this. (See **appendix 1**, young carer model).
- 5.1.2 **Continuum of support:** Early help and support sits in between universal and statutory services; therefore there is a continuum of support available to young carers across Halton's levels of need. Enabling carers' access to universal services is the aim wherever possible and can result in a number of benefits and support for young carers, for example:
- i. Sports and leisure services and youth service provision are all supported to work proactively with young carers' services to engage and facilitate access.
 - ii. Connexions Personal Advisers offer an information, advice, and guidance service for all 13-19 year olds (up to the age of 25 for young people with a learning disability and/or disabilities). Connexions advisers need to be aware of young carers' issues so they can identify carers when they present to access the Connexions service. They must be aware of the referral pathways so they can advise and sign post young carers to the specific services available to them.
 - iii. The Youth Service has prioritised young carers as a targeted group. Youth workers need to be trained about the issues young carers face. They must be able to recognise young carers and sign post them to specialist services as well as working inclusively with them so they can get the most from this important universal service.

However, it is recognised that it is not always possible to offer support via universal or other targeted/ early help services. Therefore the model ensures a smooth transition between this lower level support and statutory services. From the young carer's perspective, and their family, the whole process and provision of service needs to feel seamless with no disruption to the professional input and service they could be currently receiving.

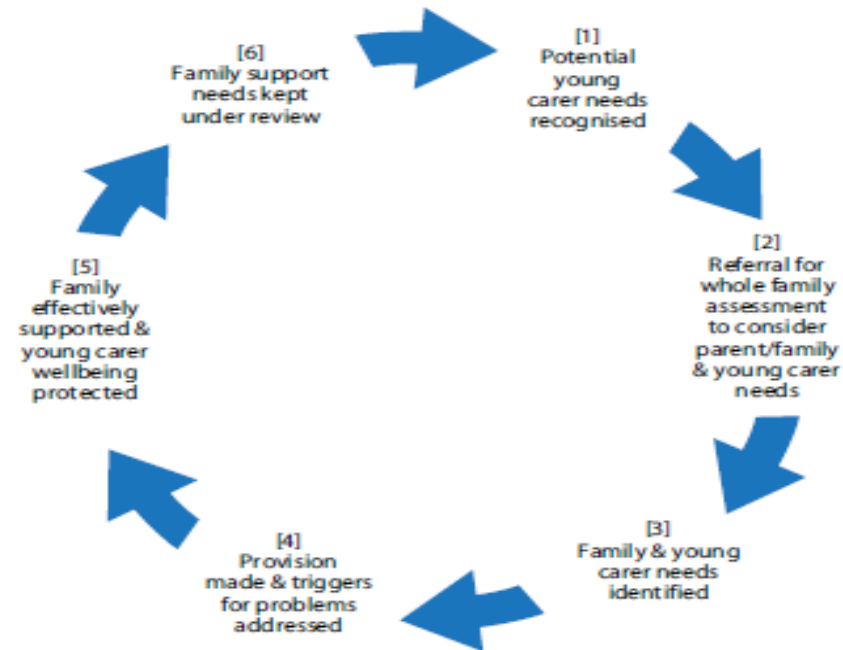
5.1.3 **Safeguarding and ‘Hidden Harm’:** Young carers must be seen as children first; it is their caring responsibilities that increase their vulnerability, for example,

- i. Increased likelihood of compromised parenting, eg due to parents’ drug/alcohol use or mental health problems- ‘hidden harm’
- ii. Absence from school and/ or other universal settings

Consequently, there’s the potential for safeguarding issues to arise, especially where younger children are concerned. More professionals across Adults and Children’s services are now recognising the need to work closer together to safeguard children in families where drug and substance misuse and/or serious and enduring mental health issues impact significantly on children. It is imperative that safeguarding issues are dealt with in a timely and appropriate manner by all professionals. Clear lines of responsibility and accountability are required and working protocols between agencies should assist workers and managers to coordinate their interventions more effectively. The Memorandum of Understanding between Children’s and Adults’ services helps facilitate joint working where young carers are involved (see 7.2). Young carers and the issue of ‘hidden harm’ are also highlighted in the safeguarding induction booklet for new staff.

5.1.4 **Child and family empowerment:** A strong feature of the model is the focus on individual and family strengths. It works on the basis that families should identify their own difficulties and solutions wherever possible, and empowered to make their own decisions. Professionals involved should adopt a holistic, ‘Think Family’ approach, considering the whole family (child, adults, extended family and wider community) when assessing the needs of young carers. This will allow services to be agreed following full engagement of the whole family. This method of working requires a commitment from all professionals to work holistically in the best interests of the whole family, a key outcome being that young carers don’t take on an inappropriate caring role.

Diagram 2: Virtuous circle: a whole family approach



Young carers: vision for future services

- Universal services – GPs, schools, etc – equipped to play their part in early identification.
- Targeted and project-based support: good practice already available in some areas shared across all others.
- All areas focusing greater effort on prevention – better joined up support around the family so young carers are protected.

Think Family Toolkit – Improving Support for families at risk (Guidance note 9, September 2009)

6. Implementing the Young Carers Strategy

6.1 The objectives highlighted lead to 8 key areas of work that have been identified to implement the strategy. There is the need to:

- i. Raise awareness of young carers amongst professionals
- ii. Promote educational achievement and attainment for young carers’
- iii. Ensure the young carers’ service is fully integrated into the Team Around the Family model of early help and support, including universal services
- iv. Ensure young carers entering transition are supported appropriately.
- v. Develop a range of services designed to support young carers and their families where pathways and roles are clear and duplication is avoided
- vi. Ensure that professional workers adopt a holistic approach when determining the needs of a young carer, ie the whole family is considered during any assessment and provision of services
- vii. Ensure health colleagues and other partners promote the positive emotional wellbeing and mental and physical health of young carers
- viii. Ensure stronger and more meaningful involvement of young carers to influence and shape services for Carers

7. Children’s Services and Adult Services

7.1 A crucial theme underpinning the 8 areas of work and that Halton’s Children’s Services and Adults Services Departments must recognise and act upon, is the need to work closely together to ensure families are assessed and their needs met holistically as outlined in The Children Act and National Service Framework for Children, Young People and Maternity Services. The family must be seen as a “whole” and their needs met accordingly, not addressed in isolation by the two Departments where adult and child’s needs are addressed separately. Alongside this, the role of voluntary and community organisations must be acknowledged. Using this ‘Think Family’ approach comprehensive packages of support to families in need should be provided by all agencies working together.

7.2 **Development of a Memorandum of Understanding (MoU) between Children and Adult services:** In 2009, Directors of Adult and Children’s services signed up to the development of a MoU. Key principles were agreed to help prevent young carers becoming vulnerable: early identification and support; no gaps between Adult’s and Children’s Services; and Adults’ and Children’s professionals should work together in the best interests of young carers, including assessment processes and the coordination of services. Locally, the MoU is being implemented strategically and operationally./ There is commitment to joined up approach via joint representation on the Carers’ Strategic Group and joint contract monitoring is now place. Frontline staff have also come together in a joint workshop to look at hidden harm issues within families. Further work is still required so that colleagues from DAAT, Mental Health and Children’s Services are clear on their roles and responsibilities when working with families where drug and/or alcohol misuse, or sever and enduring mental health issues are impacting on the potential development and well being of young people.

7.3 **Young Carers' Sub-LIT group and the voice of young carers**

Building on a successful model in Adult services Halton has established a multi-agency Young Carers Sub-LIT group. Here, young carers are encouraged and supported in being part of the monitoring and oversight of services to young carers. It is their opportunity to voice their opinions and concerns and be fully involved in service planning and monitoring. This group feeds into the wider group of adult providers, and, ultimately, the Carers Strategic Group.

7.4 To help them to do this, young carers are offered training to enable them to speak in groups and improve their own self esteem and confidence. The aim is for them to freely share their views and therefore be better equipped to take an active role in identifying gaps in service provision; and make recommendations to the Carer's Strategic Group on funding allocations for young carers' breaks.

7.5 The LIT Group operates at a time most convenient for young carers to attend. Importantly, the decision was jointly made by agencies that the group should be facilitated independently to ensure full participation by young carers. Therefore the facilitation is commissioned out to a voluntary organisation whose remit is to ensure that strategic developments are informed by young carers themselves; also that young carers play a lead in the monitoring of the action plan accompanying this strategy (see **appendix 2**).

8. **Management Information**

8.1 An improved management information system about young carers is being developed within the Borough. It is vital to know which young people are young carers so the objectives of this strategy can be met. Currently each provider of short break services keeps their own record of young carers and Halton monitors this. The aim is to create one overarching database, monitored by the Carers' Centre and HBC, using the data from all agencies working with young carers. This means all providers and HBC need to work closely together to ensure that all known young carers are recorded and there is no duplication of information across the Borough between different providers.

8.2 With this central database of young carers HBC will be able to track progress more closely without concern over duplication; achievements can be reported on as well as any issues highlighted that need further work. Where gaps or concerns arise, timely action can be taken to address these in order to better support young carers. They may, for example, be experiencing difficulties in education because of their caring responsibilities; or their own health needs may be affected. The database will be able to highlight these and work is underway to make the system enable this analysis to take place.

9. **Monitoring the Young Carers' strategy**

9.1 Halton Children's Trust has overall responsibility for the outcomes of young carers, hence regular reporting to the Trust is necessary regarding the strategy and its action plan.

- 9.2 The strategy and action plan is monitored and evaluated via the Carers Strategic Group, where there are 6 sub groups which oversee Services to Carers. As highlighted, one of these groups is the Young Carers Local Implementation Team Sub group (LIT). This group consists of Young Carers and service providers and is facilitated independently to ensure the views of everyone are taken into account, especially carers themselves.
- 9.2 Operationally, the implementation of the strategy and action plan will be monitored by the Young Carers LIT Group. The purpose of this group is to monitor the services available to young carers in the Borough, their effectiveness, and to highlight any gaps in services provision. Any such issues raised by the Group will be fed up to the Carers Strategic Group for further discussion and action taken where necessary. Issues raised will also be reported to The Children's Trust, given its responsibility towards all Halton's children.
- 9.3 The link between Adults and Children's Services is maintained especially by the fact that there is representation on both groups by the Divisional Manager responsible for young carers. This ensures consistency between the groups with less chance of issues being missed. It also ensure smooth communication between the 2 Directorates as well as local providers.

The implementation Plan supporting the strategy follows:

1. Raising awareness of young carers amongst professionals

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
To ensure the profile of young carers is raised amongst professionals and that they are aware of the issues young carers face and impact on their lives	Highlight young carers in child safeguarding training in the context of the potential emotional impact on them as young people	HSCB Mgr	Professionals are fully aware of the issues young carers face and how these can limit young carers' aspirations and life chances as well as damage their emotional health and wellbeing	Rolling programme 'Working Together to Safeguard Children' x3 per year	Number of professionals accessing safeguarding training Course evaluations highlight learning re young carers to measure levels of competence Number of agencies that incorporate young carers into their safeguarding booklets	
	Highlight young carers in HBC's Levels of Need training	TAF	As above	Rolling programme X2 year	Number of professionals attending levels of need training	
	Make reference to young carers in workforce safeguarding induction booklet	HSCB Mgr	As above	Jan 2012	Number of induction booklets taken up	Complete
	Use a variety of media to promote issues and raise awareness amongst professionals	Young carers Lead organisation	As above	Dec 2013	Number of awareness/promotional events each year, led by young carers	

2. Promote educational achievement and attainment for young carers

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
To ensure professionals are equipped with knowledge and information on young carers and the impact their caring role has on their educational attendance	Identify designated persons in schools to play key role re young carers	Heads Governing Body Designated person	Clear designated person in each school to identify potential young carers. Support for young carers accessible via school or signposted elsewhere as soon as need arises	Jan 2013	Attendance rates at school Attainment levels of young carers at school % increase in requests for services by schools Number of establishments with accessible information	
	Ensure schools have access to up to date information re support services for young carers Ensure young carers are involved in developing training and delivering this to professionals within schools	All school staff Carers Centre HBC Young Carers	All schools are confident about who to contact in the case of any concerns about young carers Young carers take lead role in training professionals		Number of young carers involved in training professionals Number of young carers involved in peer mentoring	
That schools work in partnership with organisations, to ensure young carers have their own individually assessed needs met appropriately	Increase knowledge of services & establish pathways to services from schools	Schools HBC Carers Centre	Professionals confident who to contact re young carers issues and concerns	July 2013	% increase in calls to services via schools	

2. Promote educational achievement and attainment for young carers

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
For young carers to seek advice and support in school	<p>Awareness-raising sessions in schools via drop-ins; presentations</p> <p>Publicise services available</p> <p>Highlight young carers via PSHE work. Promote positive image of caring role</p>	<p>Carers Centre Providers Youth Service</p> <p>Carers Centre Schools Community and voluntary organisations</p>	<p>Positive images of illness and disability to encourage understanding</p> <p>Young carers confident to ask for help and able to identify themselves as young carers</p> <p>Caring role de-stigmatised</p> <p>Increased peer support for young carers</p> <p>Access to effective range of services to help prevent carers' needs increasing</p>	July 2013	<p>% increase in young people asking for information and advice re young carers</p> <p>% reduction of incidence of bullying within school re caring role</p> <p>% increase in take up of services, including counselling services</p> <p>Number of positive reviews of services</p>	
To ensure young carers can reach their educational potential.	<p>Recognise young carers as a priority group</p> <p>Enhance support systems within school</p>	<p>Schools Carers Centre</p> <p>Contracted Service providers</p>	<p>School attendance takes account of caring roles & timely identification of such pupils.</p> <p>Young carers do not miss school due to caring role</p>	Sept 2013 onwards	<p>% decrease in non-attendance rates due to caring role</p> <p>% decrease in no. of occasions where young carer is penalised for non-attendance</p>	

2. Promote educational achievement and attainment for young carers

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
	<p>Increase awareness of how caring roles impact on school attendance.</p> <p>Monitor attendance patterns re young carers</p>		<p>Increase in access to individual support services.</p> <p>Increased attendance for those who have caring roles</p> <p>Young carers reach educational attainment levels</p> <p>Young carers are emotionally & physically healthy through their school life.</p>		<p>% increase in attendance of young carers</p> <p>% increase in young carers accessing further education</p> <p>% increase of young carers receiving grades A*-C GCSE (incl English and Maths)</p>	

3. Ensure that young carers' services are fully aligned with the Team Around the Family model of early help and support services

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
To ensure services for young carers are fully integrated into Halton's TAF model of early help and support.	Share 'TAF' model with partners. Embed pathways within model	TAF staff Communities Directorate Partners Schools	Needs identified early & access to services. Clarity on pathways to services re carers	Dec 2012	% increase in requests for services for young carers % increase in known and identified carers	
To have one central database of young carers known and identified young carers in the Borough	Collate robust management information across contracted service providers Establish 1 database	Children and Families Dept Communities Directorate Carers Centre Contracted providers	Young Carers identified across all levels of need. Accurate number of young carers 1 managed database, overseen by HBC	Sept 2012	Launch date of one database Confirmation of management and oversight arrangements	
To enable young carers to reach potential via holistic assessments, and a range of services across the levels of need	Award varied contracts with no duplication Award contracts with clear outputs and outcomes Establish single, clear assessment process Contract monitoring incl input from young carers	Carers Centre Contracted Providers IWST Teams	Range of effective services from universal to targeted & specialist No duplication or gaps in services or pathways to services Think family approach adopted by all professionals	April 2012	% increase in young carers open to social care that have their needs met via CAF or universal provision % increase in agencies working with young carers-children's and adults' services % increase in CAF assessment re young carers	

4. Ensure young carers entering transition are supported appropriately

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
That young carers have access to a wide range of employment and training opportunities	<p>Link young carers to employment initiatives, eg via Job Centre Plus / other employment and career organisations</p> <p>Ensure training for advisors includes young carers' issues</p>	<p>Connexions</p> <p>Schools & colleges</p>	<p>Young carers receive appropriate careers advice and support for further education</p> <p>Wider activities available to young carers beyond 16yrs</p> <p>Positive transition into employment or further training</p>	Dec 2012	<p>% uptake of services re careers and further education, employment and training</p> <p>% of young carers going on to further education, employment or training</p>	
For young carers to successfully make the transition into adulthood	<p>Establish clear pathways & continuity of support between children's and adult services</p> <p>Clarify transition protocols and individual roles between Carers Centre and Young Carers services</p> <p>Raise profile of the needs of young carers and the type of support required</p>	<p>Schools Colleges</p> <p>TAF</p> <p>Local providers</p>	<p>Young carers are well prepared in advance and well supported through transition into adult support services</p> <p>Young carers are aware of their rights and services available as they become young adult carers eg carers' direct payments at 16+yrs</p>	Sept 2012	<p>No. young carers that go on to receive support as adults via organisations</p> <p>No young carers satisfied with help and support during transition process</p>	

5. Develop a range of services designed to support young carers, disabled parents and their families provided by the Voluntary and Community Organisations, Statutory and Private agencies

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
That services are available across the levels of need via one single point of entry	Establish point of entry & clear pathways to assessment & services	HBC Providers Young carers	Young carers identified swiftly & range of quality services offered	April 2012	Time taken to identify and assess young carers	
To develop services based on local need, with smooth transition from universal through to specialist services if needs increase	Agree pathways to universal services, incl Leisure & Youth Services and schools	TAF IWST Commissioning	Effective services based on local need. Young carers access inclusive activities in community	April 2012	% of young carers open to social care % young carers accessing universal services	
	Review role of HBC staff & clarify function of IWST		Specialist services only when there is an assessed need.	Sept 2012	Number young carers assessed as needing specialist intervention	
To ensure young carers are fully involved in all aspects of service design and delivery	Set up group for young carers & ensure full input in the monitoring/ shaping of services	Communities Directorate Children/ Enterprise Young carers Vol orgs	Young carers fully involved in service design and monitoring	April 2012	Number of services monitored by Commissioning and young carers themselves	
To ensure a range of commissioned services, from peer support to short breaks, that benefit the whole family	Develop further principles of MoU, ie joint approach to young carers by Children and Communities Directorates	Communities/ Children's Commissioning TAF Young carers	Holistic approach between both Directorates re meeting families' needs	April 2012	Total number of commissioned services via both Directorates Feedback from providers and families	

6. Ensure that professional workers consider the needs of the whole family when they make an assessment and provide services

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
To assess young carers' needs holistically, taking into account family strengths as well as difficulties.	Develop further Memorandum of Understanding protocol between Communities and Children and Enterprise Directorate	TAF DAAT Mental health services	Integrated working between agencies and Departments/ Directorates Holistic assessment with named lead professionals where appropriate	Dec 2012	No. young carers with CAF or other holistic assessment Number assessments undertaken by different agencies involved with young carers	
To work across Directorates to identify young carers and assess their needs	Establish joint training for staff within Adults and Children's Services	As above	Issues of hidden harm identified and needs assessed and met swiftly	Nov 2012	% increase in Adult workers involved with young carers Number of training sessions held	
For professionals to undertake assessments where necessary, involving young carers and their families.	Implement levels of need training across Borough Undertake CAF or other appropriate assessments when necessary	All professionals	Most appropriate lead professional identified for young carer Support services put in place in timely manner	Dec 2011 Dec 2011 Onwards	Number of assessments undertaken re young carers Number of different agencies undertaking assessments	

7. Health – Promoting the positive emotional and mental health and wellbeing of young carers

Objective	Action	By Whom	Outcomes	Timescale	Measure	Progress
To work in partnership with all health colleagues to effectively identify, assess, support and safeguard young carers.	Develop protocols and practices that clarify roles of agencies working with young carers; and that focus on the impact of drugs, alcohol, mental health on the well-being of young carers	CAMHS Schools, DAAT, Children's and Adult services, HSCB	Holistic assessments highlight all needs and safeguarding issues and appropriate services are agreed taking account of all issues	Dec 2012	Implementation of protocols & workshops between Adults/ children's services No. assessments undertaken by Adult-led services	
To identify young carers as early as possible in order to ensure their physical & emotional health & they are safeguarded especially where there are hidden harm issues	Continue to develop principles of the MoU & develop 'think family' approach with young carers Establish working protocols between Children's & drug/alcohol mental health services, based on current research & documents Ensure young carers can access counselling/ other support when need arises via groups, 1-1 sessions and phone/ text service	All professionals Health colleagues Schools TAF Adult Services	Young carers are physically & emotionally healthy via effective holistic assessments and timely early help Fast track access to health services & counselling where appropriate Young carers have access to sport/ leisure facilities		No. young carers identified by Adult services No. jointly worked cases involving young carers No. young carers identified by adult services Number of young carers access sport/ leisure facilities Number of young carers accessing courses/ training re healthy living & positive caring	