



Young Carers Pathway

Interim Joint Protocol 2015 – 2017

To be reviewed 1st November 2016

**Nottingham City Children and Adult Services
and Carers Federation Action for Young Carers**

**For the identification and assessment
of young carers, siblings and their families**

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1.0 Aim

The purpose of this protocol is to set out the pathway for support for young carers and the responsibilities of Nottingham City Council Children and Adult Services and the main commissioned provider, Carers Federation Action for Young Carers, in light of the Children and Families Act and the Care Act 2014.

This document is an interim protocol with ongoing development work to establish a 'Think Family' approach to the identification, assessment and provision of support to young carers, their siblings and families. To prevent crises arising through early identification and intervention, and for assessment and support for families to be combined where appropriate. It supports the Memorandum of Understanding 'Working Together to Support Young Carers and their Families' to aid joint work between Children and Adult Services and Action for Young Carers.

For the Local Authority to meet the legal requirements to undertake and record a young carer's needs assessment, an interim solution is in place. In the current case management system, adjustments are planned for guidance in the Children's Assessment, the Common Assessment Framework and the Priority Families Assessment. Further development on children and family assessments will be incorporated into the transformation project for the new case management system for Children and Adult Services.

The document sets out:

- How we will identify, assess and support young carers;
- The duties and responsibilities for Children and Adult Services and Carers Federation Action for Young Carers in relation to young carers; and
- Good practice in working with young carers.

2.0 A Young Carer - Definition

Under the Children & Families Act 2014, the definition of a young carer is a person under 18 who provides or intends to provide care for another person. The concept of care includes practical or emotional support, and 'another person' means anyone within the same family, be they adult or child.

Most young carers look after one of their parents or care for a brother or sister, for example, where a family member has a condition such as a disability, illness, mental health condition or a drug and alcohol problem. They do extra jobs in and around the home, such as cooking, cleaning or helping someone to get dressed and move around. In some cases young carers may be involved in providing personal care around assistance in going to the toilet and washing. Young carers can also be involved in the administration of medication. A young carer may also provide ongoing emotional support or undertake a monitoring role to keep the person that they are caring for safe. Older siblings may also be required to look after younger children in the family.

3.0 Young Carers' Rights

The law changed for young carers from April 2015. The new rights to assessment include:

- All young carers under the age of 18 will have a right to an assessment regardless of who they care for, what type of care they provide or how often they provide it.
- A young carer has the right to an assessment based on the appearance of need, which means that young carers will no longer have to request an assessment or be undertaking a 'regular and substantial' amount of care.
- An assessment can still be requested but should also be offered.
- The Local Authority must take a whole family approach to assessing and supporting adults, so that young carer's needs are identified when undertaking an adult or adult carer's needs assessment.
- The Local Authority should ensure that Adult's and Children's Social Services work together to ensure assessments are effective.

4.0 Young Carer's Needs Assessment

The Local Authority must ensure that a young carer's needs assessment is carried out to determine the amount, nature and type of care the young carer provides or intends to provide. The assessment must consider the impact of the needs of the young carer's family, on the well-being of the young carer and any child in the family and in particular on the young carer's education, personal and emotional development and identify whether the young carer is negatively affected by their caring role. All circumstances should be taken into account when assessing the tasks the young carer is performing or intends to

perform and whether they are excessive and inappropriate for the young carer's age, sex, wishes and feelings.

The young carer's needs assessment can be combined with any other assessment of needs for support of the young carer, the person cared for or a member of the young carer's family. The assessment should identify what the young carer's support needs would be if they were relieved of their caring tasks or if the person cared for is assessed and provided with alternative support and to what extent the family and wider family relies upon the young carer.

An assessment can be refused if the young carer does not appear to have needs for support or the Local Authority has carried out an assessment and the needs or circumstances **have not** changed.

The Local Authority must also look at the young carer's education, training, leisure opportunities and their views about their future. When assessing a young carer the Local Authority should always involve and ask the young carer about their wishes, feelings, preferences and outcomes of the assessment. It must also include differences of opinion between the young carer, their parents and the person cared for.

To ensure full participation in the assessment the Local Authority must provide information in a way that is understandable for the young carer, the person cared for, their parents and anyone else the young carer or their parents want to be involved. The assessment should identify and consider the young carer's friends and family to contribute to the intended outcomes.

The parents and where appropriate the young carer, should receive a written record of the assessment. This should include whether the Local Authority thinks the young carer needs support, whether their services could provide the young carer with that support and whether they will give the young carer that support. It should also explain what the young carer can do if they or their parents disagree with the assessment.

Provided that the child or young person and their family both agree, the Local Authority can assess both their needs as a young carer and the needs of the person they are caring for, at the same time.

If the young carer is 16 or over, and they are not in full-time education the young carer may be eligible for help finding work as well as help with their family's finances, for instance through benefits such as Carer's Allowance.

The young carer's needs assessment is the best route to find out about what is available in their situation.

5.0 Carers Federation Action for Young Carers, Nottingham

Carers Federation Action for Young Carers (AYC) is the main commissioned provider for young carers in Nottingham City.

AYC's aim is to identify and offer as much support to young carers within the city as possible whether through 1-1 support, advocacy, group work and/or activities. AYC continue to link with local services alongside schools to ensure all professionals are aware of young carers and the support they require, whilst undertaking tasks that may have a significant impact on their own day to day lives.

Below are some examples of what young carers have told AYC some things that are really important to them.

- **Having a whole family approach assessment.**
"Having an assessment gave me a better understanding of what I do for my mum. It is the first time that I have recognised myself as a young carer." (October 2015, 16yrs)
- **Taking a break.**
"I really loved it going to the cinema with other young carers as it gave me a break from my sister without having to worry." (October 2015, 11 yrs)
- **Having someone to talk to.**
"My Support Worker is very kind and friendly. She is really interested in listening to and helping me." (November 2015, 15 yrs)

6.0 Explore Family, Lifeline Nottingham

Explore Family work in Nottingham City with the whole family and carers where there is an impact on family life from substance misuse.

This work enables Explore Family to identify whether there is a child or young person providing care to other family members or carers.

Where a child or young person has been identified as providing care to an adult, Action for Young Carers and Explore Family will jointly assess the young carer's needs.

7.0 Young Carers Pathway

Roles and responsibilities in the Identification and Assessment of Young Carers

7.1 Carers Federation Action for Young Carers (AYC)

When AYC receives a referral, an assessment will be undertaken with the young carer and their family to identify their support needs by completing an Action for Young Carers Family Assessment of Need.

If a young carer has additional needs and there are no immediate safeguarding concerns, AYC will initiate a CAF.

If the child is not known to Children's Services and it is identified that they are a child in need or a child at risk of significant harm, a referral will be made to Children's Services by contacting **Children and Families Direct on 0115 87 64800 and submit a Multi-Agency Request Form (MARF) within 48 hours. Send the MARF to Nottingham City Council Children's Services by secure email: candf.direct@nottinghamcity.gcsx.gov.uk.** (See Appendix 3 and form attached.)

In most circumstances, if a referral is made to Children's Social Care, AYC will continue to work with the young carer.

Where AYC believes a young carer is providing inappropriate care to an adult, they will make a referral to Adult Social Care through the **Rapid Response Team**. AYC will refer the young carer to the Rapid Response Team by completing a referral form to Adult Social Care. (See Appendix 2 and form attached).

The referral will clarify what support the young carer is providing and whether there are concerns in relation to the young carer. AYC will inform the family that they are making a referral to Adult Social Care and that in some circumstances this information may be passed on to Children's Social Care.

AYC will provide monthly performance reports on all young carers who have received an assessment to the Children and Adults Commissioning Team.

7.2 Explore Family, Nottingham

Explore Family will identify a child or young person who is providing care to other family members or carers where there is impact from substance misuse.

The child or young person identified as providing care will be offered a referral to Action for Young Carers (AYC). Action for Young Carers and Explore Family will jointly complete a referral form to Adult Social Care to determine whether the young carer is providing inappropriate care to an adult.

If it is identified that the young carer is providing inappropriate care, AYC will complete a referral to Adult Social Care through the Rapid Response Team. If the Rapid Response Team identifies concerns for the young carer, unless there is an immediate safeguarding concern, Rapid Response will liaise with Action for Young Carers and/or Explore Family as appropriate, before referring into Children and Families Direct. Additional support to the young carer will be provided by the Rapid Response Team and/or Explore Family as appropriate.

7.3 Adult Services

Where there has been a new referral to the Nottingham Health and Care Point and a young carer is identified, an assessment of the family will be carried out by Adult Social Care. A decision will then be made as to whether to refer the young carer to Children's Services where:

- Additional needs are identified
- There is a safeguarding concern

If support is required only in relation to their caring role, a referral will be made to AYC.

Where a referral is made to the Nottingham Health and Care Point and the case has previously been open to one of the Specialist Teams, the Specialist Team will be responsible for making the referral to Children's Services.

Children's Services referrals will be made through Children & Families Direct. Children & Families Direct will decide whether the threshold for a Children's Assessment is met, in which case they will transfer the case through to the Duty Team for a Children's Assessment or decide whether a package of Early Help or Targeted Family Support is appropriate through a CAF (Common Assessment Framework), in which case the referral will be passed to the relevant team in Children's Services.

Where an assessment of the adult is carried out and there is a young carer, AYC will be asked to carry out a parallel assessment of the young carer's needs and this will form the joint assessment. The assessment will consider what is required to prevent the young carer from undertaking an inappropriate caring role.

7.4 Children's Services

If a child is identified through Children's Services as being a young carer, where a child is identified as:

- Having additional or extensive needs, a CAF will be initiated.
- A child in need or safeguarding concerns, a Children's Assessment will be undertaken.
- If none of the above, a referral should be made to AYC.

Where a young carer meets the criteria for Children's Services, all Children's Services will refer to Adult Services through the Rapid Response Team.

Where Children's Services remain involved with the young carer and it is identified that the young carer has inappropriate caring responsibilities, Children's Services will be responsible for referring to Adult Services through the **Rapid Response Team**.

Children's Services will refer all young carers who do not meet the Children's Services threshold to AYC who will complete a Family Assessment of Need. Children's Services will be responsible for making a referral to Adult Services through the **Rapid Response Team**.

Children's Services will continue to provide support in line with the Children's Partnership Family Support Pathway. In most cases AYC will continue to provide support in relation to the young carer's caring role.

Referrals to Adult Services for both Children's Services and AYC will be undertaken by email. (See Appendix 2 and form attached).

Adult Services will notify the referrer as to whether the adult is eligible for provision.

Where it is not assessed that there is a need for care, but the young carer is providing inappropriate care, this may indicate a safeguarding concern.

7.5 Other agencies

Agencies such as health or schools that have identified a child as a young carer should make a referral to Children and Families Direct for an assessment to take place.

8.0 Where a Young Carer Cares for a Disabled Sibling

Siblings should be considered as part of a disabled child's assessment with a response that is consistent with identified need. Where a young carer cares for a disabled sibling the Children's Disability Team may have already identified their sibling and support needs. The Children's Disability team will be best placed to undertake an assessment.

In some circumstances, a sibling may be identified who is a young carer and may require a CAF (Common Assessment Framework) to identify their support needs and provide a care plan.

9.0 Identification of Emerging Adult Mental Health Concerns

In complex family situations where Adult Services identify emerging adult mental health concerns and/or the adult refuses services and/or the adult is not eligible for services and there is a young carer present in the household, a Young Carer Needs Assessment should be undertaken to measure the impact and risks of the caring role on the young carer.

The Team Manager for Adult Services should contact the Team Manager in Children and Families Direct by phone or by e-mail or may require completion of a Multi-Agency Request Form.

If the young carer is known to Children's Services, a meeting should be convened with representation from Adult Services, Children's Services and Action for Young Carers to agree an action plan to address the child's needs.

This meeting should be arranged within 14 working days from notification of the emerging adult mental health concerns.

The agreed actions should be recorded on both Children and Adult Services case recording system.

10.0 Escalation Process

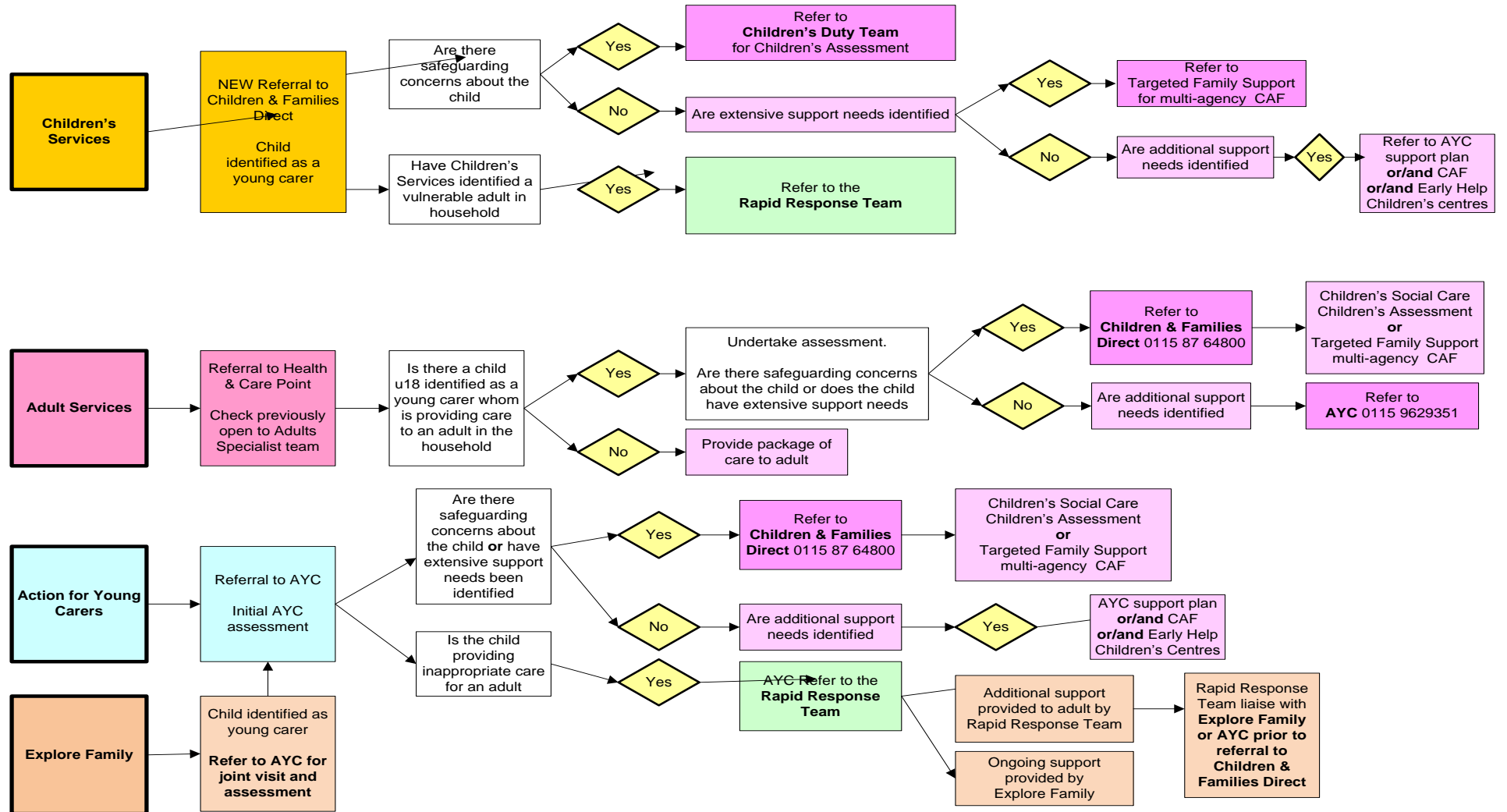
In the event of services being unable to agree on issues and identify appropriate ways of resolving blocks, the issue must be resolved within 48 hours. This will involve referring the case to the relevant Service Manager for resolution within 24 hours. If this cannot be achieved, the case must be referred to the relevant Heads of Service for resolution within a further 24 hours.

At all stages of this process until a resolution is achieved, continuing case responsibility for managing risk and meeting needs will be held by the exporting team.

It is important to compile an audit trail of case resolution, agreed actions and evidence of decision making. This must be clearly recorded on CareFirst within the observations section of the child's case file; for example, the date actions were agreed and by whom.

In order to capture ongoing learning from this process a meeting will take place between children, adults and AYC every three months. A record of these meetings will be maintained by AYC and a copy provided to Head of Service in Children and Adult Services.

Young Carers Pathway Identification and assessment of need, support and protection



ADULT SOCIAL CARE REFERRAL FORM

REFERRAL MADE BY			
Name:		Address:	
Tel No:			
Professional/Relationship:			
Agency/Team:			
Date:			

Have you discussed & obtained agreement for this referral?	Yes		No		
If no – does it meet one of criteria to continue without permission?					
Mental Health	<input type="checkbox"/>	Abuse or neglect	<input type="checkbox"/>	At risk	<input type="checkbox"/>

<u>REFERRAL AND BASIC INFORMATION FOR THE YOUNG CARER/S:</u>								
		Permanent Address including Postcode						
First Name(s)								
Second Name								
Date of Birth		Current Address/Location if Different including Postcode:						
Gender	Male						Female	
Phone No:								
Care First ID:								
Ethnicity:				Religion:				
Language				Interpreter required Yes / No	Yes		No	
<u>REFERRAL AND BASIC INFORMATION FOR ADULT & CARED FOR:</u>								
Title				Permanent Address including Postcode				
First Name(s)								
Second Name								

Date of Birth								
Gender	Male		Female	Current Address/Location if Different including Postcode:				
Phone No:								
NHS Number								
Care First ID:								
Ethnicity:				Religion:				
Language				Interpreter required Yes / No	Yes		No	
Accommodation Type	House			Ground Floor Flat		2 nd Floor Flat (Highrise)		
	Bungalow			1 st Floor Flat		Sheltered		
Tenure	Owns Property			Private rented		Social rented		

REFERRAL AND BASIC INFORMATION:

What support/care needs is the young carer/s providing?

What impact is this having on the young carer/s?

What sort of help is being requested?

Are there any allegations of abuse or neglect?

The following information is required by Adult Social Care to complete a referral. Please provide as much of this information as possible from your existing notes so that citizens only have to tell their story once.

HEALTH CONDITIONS OR DISABILITIES REGARDING THE CITIZEN BEING CARED FOR:

--

CURRENT SUPPORT

Detail any help or support received – list services and also support from family, friends or carers:

--

COMMUNICATION NEEDS

Preferred first language, sensory impairment, speech and language difficulties, language used/interpreter needed:

--

PERSONAL CARE NEEDS

Are they able to wash and dress independently, any continence issues

--

MOBILITY

How does the citizen mobilize? Any walking aids? How are transfers - including chair, toilet, bed and stairs. Is there a history of falls? Is there a care alarm in place?

--

DOMESTIC TASKS

Can they complete their own shopping, cleaning etc.

--

SOCIAL ACTIVITIES

Does the citizen complete any social activities i.e. a day centre

--

MEALS

How are they managing meals, can they prepare themselves? Can they use a cooker/microwave?

--

MEMORY PROBLEMS

Any cognitive impairment, short term memory loss or diagnosis?

--

REFERRAL AND BASIC INFORMATION**GP NAME****NAME OF PRACTICE****TEL NO.**

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NEXT OF KIN/ OTHER SIGNIFICANT PEOPLE – CARERS/RELATIVES/FRIENDS**Full Name:****Relationship:****Tel No.**

WHAT IS THE BEST WAY TO CONTACT THE PERSON? TICK ALL THAT APPLYTelephone E-Mail Letter Via Carer Other

ANY OTHER RELEVANT INFORMATION INCLUDING IDENTIFIED RISKS

Are there any Key safes, Pets, any warnings / alerts, any parking issues, etc.

--

CHILDREN'S SERVICES Multi Agency Request for Services Form (MARF)

This form should be used to make a referral/request for services to Nottingham City Council Children's Services for safeguarding or support services.

(Where you believe there is immediate risk of significant harm please contact the Police.

For urgent safeguarding concerns please make the referral by telephone to 0115 8764800 and submit the MARF (within 48 hours)

Send the MARF to Nottingham City Council Children's Services by secure email: candf.direct@nottinghamcity.gcsx.gov.uk

CONSENT AND CONFIDENTIALITY (NB when seeking consent please ensure that parents/carers understand that the information will be shared with services where considered appropriate to do so)

Is this a safeguarding referral?

DETAILS of the child/young person you are making the referral/request about

FAMILY NAME		FIRST NAME (S)	
DOB / AGE/EDD		GENDER	
ETHNICITY		RELIGION	
FIRST LANGUAGE		INTERPRETER NEEDED	
Disability	If you are aware that the child has a diagnosed disability, please provide details including any Education, Health and Care Plan (EHCP).		
NHS No			
ADDRESS			
HOME TELEPHONE		MOBILE No.	
GP ADDRESS		Health Visitor, School Nurse,	

		Family Nurse Practitioner	
NURSERY / SCHOOL / CHILDREN CENTRE			
Has this referra/request been discussed with the parent/carer ?			
Has the parent given consent to the referral/request being made?			
What are the parents/carers views about your concerns and this referral/request? What is the family/individual hoping to achieve?			
Has this referral/request been discussed with the child/young person?			
What are the child/young person's views about your concerns and this referral/request? What is the Child/Young Person hoping to achieve?			
If the answer is 'no' to any of the above please state reason why. NB Requests for support services need parent consent.			
Is there any information contained in this referral/request that needs to remain confidential from the child or family? If yes please outline specific information to remain confidential and why.			
<u>NB</u> DETAILS OF THE REFERRER, A PROFESSIONAL, CANNOT REMAIN CONFIDENTIAL UNLESS THERE ARE <u>EXCEPTIONAL</u> CIRCUMSTANCES.			
Name of person completing referral/request			
Relationship to child			
Date			
Telephone number			
Secure email			

Address					
FAMILY COMPOSITION AND HOUSEHOLD MEMBERS					
NAME	M/F	DOB	Relation to child	Ethnicity	Language
SIGNIFICANT OTHERS – NOT IN THE HOUSEHOLD.					
NAME & Contact Details if known	M/F	DOB	Relation to child	Ethnicity	Language
Have you initiated or completed a CAF/ Priority Families Assessment? Yes					
If yes please submit CAF/ Priority families Assessment with this form.					
Name and contact details of Lead Worker:					
Presenting issues in the family household at the time of this referral. This information will be used to pre-check eligibility for Priority Families.					
Parents & children involved in crime or anti-social behaviour			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Children have not been attending school regularly			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Children who need help			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Adults out of work or have serious debt issues			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Young people at risk of worklessness.			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Domestic violence and abuse			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		
Parents and children with health problems			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Known		

DETAILS OF THE REFERRAL/REQUEST—(Harm/Need Statement) What are you worried about?

Provide reasons for the referral; describe the (significant) harm that has already happened/ likely to happen to the child/unborn. Include how those responsible for the child were involved. If this is a request for support services please state why additional support is needed.

What do you know about this family, why are you involved?

What's Working Well? - What contributes to the child's general wellbeing?

What's Working Well? Existing Safety -Describe actions taken by parents/caring adults that are proven to help meet the child/young person's needs or reduce the danger /risk when it occurs – give examples of how and when this happened.

DANGER/WORRY STATEMENT: If things carry on without change, what are you worried will happen in the immediate future, medium and long term. Be specific and base your thinking on research and professional expertise.

Outline what you are worried the parent/carer may do or not do or will happen in the future and the possible impact of these actions on the child/ren. Which are the most significant for the child and describe the likely impact on their safety or well-being if there needs remain unmet?

**Having thought about what you're worried about and what is working well, rate how worried you are about _____ today and why ?
Where on a scale of 0-10. Where 10 means that everything that needs to happen for the child to be safe and well is happening and no extra professional involvement is needed 0 means things are so bad the child is no longer able to live at home.**

Based on everything that you currently know please provide your safety/wellbeing scale along with the reason why to help us understand your level of worries about the situation.

What needs to happen? SAFETY /WELLBEING GOALS. Describe precisely what outcomes you need to see to be satisfied that _____ is safe and their needs are being. This must directly relate to the Danger/worry Statement.

What needs to change in order to make the situation safer and healthier for the child? What would indicate that progress is being made? What would you need to see to say this problem was really sorted?

ACTION. What do you expect to happen next? (be specific about support being requested and focus for any assessment and who you think should contribute to that assessment)

The information provided here and above will help determine the urgency and nature of any action required, particularly the need for statutory intervention. Please consider whether the

child's primary need is for protection and requires urgent statutory intervention.

Please detail any special needs or circumstances of any family member, which may affect this referral or communication and understanding between the family and professional agencies.

DETAILS OF OTHER AGENCIES INVOLVED WITH THE FAMILY/CHILD (REN): The form also allows for other agencies to be listed. Details of agencies involved allows for easier sharing of information and therefore more effective provision of service/support. Please list all agencies, working with the family

Agency	Names	Address and tel. no.	Current involvement

ANY FURTHER RELEVANT INFORMATION