## Support for Young Carers

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### FOREWORD

We do not know how many young carers there are in Hackney. It is therefore very difficult to both identity young carers' needs in the borough and provide them with the necessary support.

Although the Commission began this review into Support for Young Carers with the vision to prevent Hackney's children becoming young carers, the evidence gathered indicated that under the current economic climate it is more difficult to prevent some children from becoming young carers. However, the Commission is clear that the aspiration should be preventing children and young people from taking on caring responsibilities within a family, and where this is not possible, supporting these young people so that their opportunities and life choices are not unduly limited by their role as young carers.

We therefore urge the Council and partner agencies to focus on raising awareness of young carers, identifying young carers' needs, and providing young carers with support through a multi-agency approach.

Support for young carers cannot be improved through one organisation alone; young carers and their families come into contact with a range of public agencies and these organisations need to work together to provide better support. We are concerned that there is a lack of focus on supporting young carers within organisations in the borough, in particular those that provide services to adults; there is thus a need for a better coordinated approach to identifying young carers and providing support to them across the borough.

On the basis of our findings the Commission has made sixteen recommendations: recommendations one to four concern all service
providers; recommendation five involves young carer services; recommendations six to eleven cover schools and education; recommendations twelve to fourteen concern adult social care and children’s social care; and recommendations fifteen to sixteen involve health services.

I would like to thank all those who took part in this review, through providing information to the Commission and discussing how to improve services for young carers in Hackney. I would particularly like to thank the young carers we spoke to during this review; their evidence was integral to the recommendations we have made.

I commend this report to Cabinet and Council.

Cllr Gulay Icoz
Chair - Children and Young People Scrutiny Commission
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1. INTRODUCTION

1.1. The issue of young carers was raised by members of Hackney Youth Parliament following the primary research they carried out with young people during the Commission’s review of Raising Aspirations in 2009/10. During the research Hackney Youth Parliament spoke to young people whose aspirations were restricted by their caring responsibilities, whether for their younger siblings, parents or older relatives. This review aimed to look at the topic in depth and consider what support is available to this often overlooked group of young people in Hackney.

1.2. The terms of reference for this review stated that the Commission planned to consider whether the Council and partners provide sufficient support to young carers in Hackney. Many different services in the borough come into contact with young carers and the Commission wanted to find out if these services and organisations work together to support young carers and their families in the borough, and how this joint working can be improved. The Commission was also interested in how the outcomes for young carers can be improved.

1.3. Evidence for this review was collected over a period of four months. At its formal meetings the Commission heard from Children’s Social Care, Adult Social Care, local health providers (including Homerton University Hospital NHS Foundation Trust, East London NHS Foundation Trust, CHYPS Plus and GPs), The Learning Trust and school representatives, Young Hackney, Connexions, Hackney DAAT (Drug and Alcohol Action team), City and Hackney Carers Centre, the Chair of the National Young Carers Coalition and Hackney Young Carers Project. Commission Members heard directly from young carers about their experiences and the support they have received in a formal Commission meeting and at a focus group held at Hackney Young Carers Project. Members also heard from the family members of young carers about their experiences. Minutes and agendas for all of the meetings are a matter of public record and are available on the Council’s website: www.hackney.gov.uk

1.4. The Commission would particularly like to thank the young carers that were involved in this review for sharing their experiences which helped Members better understand the lives of young carers and the challenges they face. Their experiences and views about how services can be improved were central to this review.

1.5. Hackney Youth Parliament also carried out a piece of work to contribute to this review and as part of the UK Youth Parliament’s scrutiny initiative. This included interviewing young people in the borough and holding a Youth Scrutiny Panel into the topic of support for young carers. Three members of Hackney Youth Parliament have also formally joined the Commission as co-optees and therefore took part in the evidence gathering sessions as part of this review. The Commission would like to thank Hackney Youth Parliament for their involvement in this review and for the youth perspective they were able to bring to questioning sessions.
1.6. The Commission is grateful to everyone who gave up their time to help make the review a success and hopes that the recommendations put forward will help to improve support for young carers in Hackney.
2. SUMMARY AND RECOMMENDATIONS

Summary

2.1. Too many young carers in Hackney are currently ‘hidden’ and they and their families are not receiving the support they need. Young people’s lives should not be limited by any caring responsibilities they undertake: they should not merely be helped to care for relatives but encouraged to live their own lives to the full. In particular their prospects in education, careers and relationships should be affected as little as possible by their young carer activities.

2.2. To improve support for young carers in Hackney, there needs to be a multi-agency approach. This is not an issue that can be improved through one organisation alone; young carers and their families come into contact with a range of public agencies and these organisations need to work together to provide better support. The Commission is concerned that there is a lack of focus on supporting young carers within organisations in the borough, in particular those that provide services to adults. Every organisation that comes into contact with young carers in Hackney should have a named lead for young carers. This person needs to have a passion for improving support for young carers but also be at an appropriate level to drive the young carer agenda forward in the organisation.

2.3. There needs to be a coordinated approach to identifying young carers and providing support to them across the borough and the Commission believes that establishing a multi-agency steering group is the most appropriate way to make this happen. This group should be made up of the named leads for young carers, as well as representatives from other relevant services. The steering group should be responsible for implementing and monitoring a Hackney Young Carers Delivery Plan.

2.4. There is no accurate figure for the number of young carers in Hackney and this makes it difficult to assess the true scale of the problem. Although different services may have information about young carers they have come into contact with, this information is not passed on anywhere. There needs to be a central coordination point for this information so we can better understand how many young carers there are in the borough. The Commission believes this will allow evidence-based decisions to be made regarding funding for services for young carers and will help define the future priorities for the multi-agency steering group.

2.5. It is vital that young carers have opportunities to take part in fun activities away from their home responsibilities and have the chance to meet other young carers who will understand their situations and help them realise they are not alone. The Commission has been consistently impressed by the excellent service provided by Hackney Young Carers Project and the high esteem it is held in by the young carers it supports and their families. It is important that funding for services for young carers continues and that these services reach as many young carers as possible.
2.6. A key recurring theme of this review is the need to raise awareness of young carers amongst staff in all organisations: schools, healthcare providers, adult social care, children's social care and drug and alcohol services. All of these organisations have trained staff to be aware of safeguarding issues and the Commission is confident that if staff have serious safeguarding concerns about a child's home situation, then this will be referred onto Children's Social Care. However, there appears to be confusion about what action should be taken when staff suspect a child is taking on caring responsibilities within a family, or that this is something that staff, especially in adult services, should be considering. The Commission wants to see an improved awareness of young carers through providing training and information materials aimed at helping staff from all organisations identify young carers and help them to access relevant support.

2.7. Schools in Hackney need to do more to support young carers. The Commission was disappointed to hear from young carers and parents about their experiences at schools in the borough and the lack of understanding and awareness for young carers' needs. The Commission believes awareness needs to be raised amongst teachers and school governors, and each school should have a nominated lead teacher for young carers. This lead teacher will be responsible for raising awareness of young carers within the school, be able to provide advice to other school staff, and be an approachable and known contact point for young carers to speak to about their home situation and any additional support they may need.

2.8. Schools also need to work to raise awareness amongst pupils of young carers to promote better understanding amongst their peers, as well as helping young carers to self-identify themselves and realise there is support available for them and they are not alone in their situation. Young carers listed problems with homework deadlines, punctuality, after school detentions, and access to phones during school time and complained about the inflexibility of teachers around these issues even if they know they are a young carer. The Commission wants to see flexible measures in schools to help young carers as these can make a huge difference helping them in attending regularly and not falling behind. The Commission encourages schools to share good practice for the work they do to support young carers.

2.9. Moving from primary school to secondary school is always a major transition point for children, but it can be more problematic for young carers. The location of a new school may be a major consideration for families with young carers because of their home responsibilities or role in taking younger siblings to and from school. The Commission wants the school admissions service to consider how young carers’ needs can be taken account of in the transfer to secondary school. It is also important that primary schools pass information about young carers onto secondary schools so that they can put any necessary support in place when they start at their new school.

2.10. There is a need for far more work to coordinate and join up work between adult and children’s services and a greater focus on a whole family approach. The Commission is concerned that adult social workers and health
professionals still do not think of service users as parents and properly consider the impact of an adult’s condition on the children within a family.

2.11. While this review focussed on young carers under 18 years of age, many of its recommendations also apply to young adult carers (aged 18 – 25) and the Commission is keen that support services for young carers do not end when they turn 18. The support needs of a young adult carer (aged 16 – 25 years) may be very different to the support needs of an 80 year old who is caring for their partner and the Commission encourages consideration being given to the needs of young adult carers when planning and commissioning support services for carers.

2.12. Health providers, such as GPs, hospitals or adult mental health services, are the first place a family turns to for help with an illness or disability and therefore should play a key role in identifying if a child is taking on caring responsibilities within a family. More consideration also needs to be given to the health needs of young carers, for example through providing an annual invite for a health and wellbeing check for young carers with a GP, and providing flexibility in services to allow them to access support.

2.13. The major themes from the evidence heard during this review were the lack of communication between different services about young carers, the need to raise awareness of young carers, the importance of a whole family approach, the importance of providing support for young carers in universal settings in particular schools, and the need for young carers’ voices to be heard. The recommendations set out in this report aim to address these points.

**Recommendations**

2.14. Members request that a report be submitted to the Commission in July 2012, providing an interim update on progress made in response to the following recommendations.

2.15. The Commission makes the following recommendations, the findings for which are presented in Section 5 of the report:

**For all services**

**Recommendation One**

The importance of having a named lead for young carers in relevant agencies is emphasised by national organisations such as The Princess Royal Trust for Carers and The Children’s Society. This will help ensure support for young carers is recognised and coordinated within each organisation and there is a clear contact point for young carers’ issues.

*The Commission recommends that every organisation that comes into contact with young carers in Hackney has a named lead for young carers – at a minimum this should include the Council, The Learning*
Trust, Homerton University Hospital NHS Foundation Trust, East London NHS Foundation Trust and NHS East London and the City. This person needs to have a passion for improving support for young carers but also be at an appropriate level to drive the young carer agenda forward in the organisation.

**Recommendation Two**

From the evidence heard during the review, there appears to be a lack of communication between services in Hackney about providing support to young carers. There needs to be a coordinated approach to identifying young carers and providing support to them across the borough and a multi-agency steering group is the most appropriate place for these important discussions.

The Commission recommends that a young carers multi-agency steering group is established, made up of the named leads from each organisation. This group will be responsible for creating a joined up approach to working with young carers in Hackney and to discuss coordinating support for young carers across services.

There is national guidance produced by The Princess Royal Trust for Carers and the Children’s Society\(^1\) about the organisations and roles that it is recommended should sit on a young carers multi-agency steering group and we suggest this, along with the list on page 24, is used as a starting point when considering the roles that should be represented on the group.

**Recommendation Three**

The recently refreshed Hackney Carers Strategy for 2011 – 14 states that a young carers strategy will be prepared in early 2012. The Commission believes this needs to be a multi-agency strategy and delivery plan to provide a real focus for support for young carers in Hackney.

The Commission recommends there should be a Hackney Young Carers Delivery Plan. This should be agreed by all organisations on the multi-agency steering group and the group should be responsible for implementing and monitoring the delivery plan.

It is requested that a report outlining progress against the actions in the delivery plan will be presented to the Children and Young People Scrutiny Commission on an annual basis.

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Appendix A

**Recommendation Four**

There is no accurate figure for the number of young carers in Hackney and no central coordination point for this information from different agencies. It is universally acknowledged that the majority of young carers are hidden therefore as we are encouraging better identification of young carers in all settings, there should be a central place for this information from different agencies to be collated to allow for better future planning of services.

The Commission recommends the Council and multi-agency steering group should consider how to compile accurate data on the number of young carers in Hackney. The relevant team or service within the Council that will collect this data needs to be identified and all social agencies, especially schools, GPs, hospitals, adult social services and adult mental health teams, should be aware of their responsibility to identify and report cases of young caring to this team. This data should be available tabulated in terms of the rough level of caring responsibilities (light, medium, heavy).^2^

This will allow evidence-based decisions to be made regarding funding for services for young carers and will help define the future priorities for the multi-agency steering group.

**Young carers service**

**Recommendation Five**

The Council currently commissions Hackney Young Carers Project to provide a specific support service to young carers in the borough. This is acknowledged as the main way young carers are currently supported in Hackney. The Commission has been consistently impressed by the excellent service provided by the project and the high esteem it is held in by the young carers it supports and their families. The project’s annual funding was cut from £135,000 to £100,000 for 2011/12. The project’s contract for this period states that they will maintain a caseload of approximately 140 young carers as an average over the contract term. The last two quarterly reports have shown the project is supporting over this number (153 during April – June 2011, and 157 during July – September 2011, and they are currently supporting 171 in January 2012) and the latest report states that “new referrals are on the increase again”. However the Commission acknowledges that there are far more young carers in the borough than are currently being supported by this project.

Many of the other recommendations of this review focus on increasing awareness of young carers and therefore improving their identification and

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referrals onto further support such as Hackney Young Carers Project, therefore it is expected that more young carers will be referred onto young carer services as a result of this review.

It is important that funding for services for young carers continues and that services reach as many young carers as possible. Specific services such as Young Carer Projects are excellent value for money and national research has found that for every £1 invested in a young carers’ service, the saving to society is £6.72.³

**The Commission recommends that services for young carers continue to be a significant priority for funding.**

Once the recommendations from this review have an effect on support for young carers provided through mainstream services, any significant changes to dedicated services for young carers in the future need to show clearly that what they are replacing is as good as or better than the current level of support provided.

**Schools/education**

**Recommendation Six**

The Commission agrees with The Children’s Society and The Princess Royal Trust for Carers that “significant, positive and lasting changes can be made to the lives of young carers and their families if every school designates a committed and well informed School Lead for Young Carers who has the ability to inspire, lead and support all staff, governors, pupils and parents to recognise and meet the needs of young carers”⁴.

**The Commission recommends there is a nominated lead teacher for young carers in every Hackney school.**

**The lead teacher should:**
- be responsible for raising awareness of young carers within the school
- attend training on young carers and cascade this training to other teachers and support staff in the school
- be able to provide advice to other school staff about young carers and providing flexible support to these pupils because of their caring responsibilities
- be an approachable and known contact point for young carers to speak to about their home situation and any additional support they may need

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⁴ The Princess Royal Trust for Carers and the Children’s Society School (2009), *Lead for Young Carers and their Families – An exemplar job description*
- make contact with Hackney Young Carers Project so the project knows who to contact regarding young carers in each school in the borough

Recommendation Seven

The Commission recognises the importance of school governing bodies in managing the progress of a school and making a significant contribution to the leadership and management of a school. The Commission believes that more school governors need to be made aware of the challenges many young people face in school because of their caring responsibilities, and how providing flexible support can help them achieve their potential.

The Commission recommends that school governing bodies appoint a lead governor for young carers to help promote young carer awareness and support within schools. The Commission also suggests an awareness raising session about young carers could be included in a future HASGA (Hackney School Governors Association) meeting. This session could include young carers talking about the problems they have in school and what would help them.

Recommendation Eight

The young carers the Commission spoke to during this review all suggested that schools need to help in raising awareness of young people with caring responsibilities amongst other pupils, as well as doing more to discuss the reasons behind caring responsibilities including disability, mental health and substance misuse problems.

(a) The Commission recommends schools work to raise awareness amongst pupils of young carers for example through assemblies, PSHE lessons, or days to raise awareness of young carers as with anti-bullying days. Young carers suggested that they could go into other schools to talk about their experiences so that other young people understand more about what it is like to have caring responsibilities.

Hackney Young Carers Project regularly sends information and posters about the project to every school in the borough but this is rarely displayed in schools as none of the young carers the Commission spoke to, who attend a wide variety of schools across the borough, said they had ever seen any information about young carers or the support available displayed at their schools.

(b) The Commission also recommends that schools should display posters about young carers with the contact details for Hackney Young Carers Project and the phone number for Hackney Carers Helpline. These posters should also include the name of the lead
teacher for young carers at that school and how they can contact them so young carers know there is someone at the school they can talk to.

Recommendation Nine

When moving from primary to secondary school, the location of a new school may be a major consideration for families with young carers, because of the distance from home to school, or siblings’ schools if they are responsible for taking younger siblings to and from school.

(a) The Commission recommends the school admissions service be asked to consider how young carers’ needs can be taken account of in the transfer to secondary school.

It is important that primary schools pass on information about young carers onto secondary schools when they transfer to their new school. This will ensure that secondary schools understand the young carer’s home situation and additional responsibilities and can put any necessary support in place when they start at their new secondary school.

(b) The Commission recommends that secondary schools include a tick box about young carer status on the transition forms they use for gathering information from primary schools about pupils beginning in Year 7 so that information about young carers is passed on when they transfer to secondary school.

Recommendation Ten

The Commission heard many times during this review about how schools could help young carers more by being more understanding about their additional responsibilities and by raising awareness about young carers. Young carers listed problems with homework deadlines, punctuality, after school detentions, and access to phones during school time and complained about the inflexibility of teachers around these issues even if they know they are a young carer.

The Commission recommends that schools consider flexible measures to support young carers, for example flexibility around homework to take into account a pupil’s caring responsibilities, understanding if they have problems with punctuality as they might have to take younger siblings to school, and allowing access to a phone during school hours if young carers are worried about a relative at home. Measures such as these can all make a huge difference to young carers at school and help them in attending regularly and not falling behind.
**Recommendation Eleven**

Innovative approaches need to be taken to encourage schools to recognise the additional needs of young carers and provide appropriate support for this group of pupils. A borough-wide recognition scheme for the work being done in schools to support young carers would raise the profile of this often overlooked group of pupils and share good practice between schools. This scheme could be modelled on the one introduced in Swindon in 2010/11, and further information about how this scheme works in Swindon is available in Appendix Two.

The Commission recommends an award scheme (bronze to gold) is introduced for schools for the work they do to support young carers, similar to the scheme introduced in Swindon. This would provide recognition for this work and would be a way for schools to share good practice with other schools.

**Adult Social Care and Children’s Social Care**

**Recommendation Twelve**

There appears to be a lack of awareness of young carers amongst social workers in the borough. In particular the parents the Commission spoke to complained about adult social workers and said they do not consider the role their children play in caring for them or offer the support their family needs. There were also complaints about the lack of communication between adult and children’s services.

(a) The Commission recommends that awareness is raised of young carers amongst staff in adult and children’s social care, through training and distribution of information materials. All staff should be trained to identify young carers and know how to refer them onto relevant support.

(b) Adult social workers should, where relevant, think of service users as parents and consider the impact of an adult’s condition on the children within a family. The Commission recommends the importance of the whole family approach and recommends that young carers’ views are included in assessments of disabled parents and the family’s wider needs.

**Recommendation Thirteen**

National research about young adult carers (aged 16 – 25 years) has shown that carers in this age group have traditionally fallen between two stools, namely young carers’ projects which support those under 18 and adult services which typically support middle aged and elderly carers. This age group is particularly important as the report points out that: “The decisions
made at this age, including education and employment, are some of the most important and far-reaching decisions taken at any time of life. Yet disadvantaged young adults, including young adult carers, are often least equipped with the skills required."  

The Commission recommends that the needs of young adult carers (aged 16 – 25 years) are considered when planning and commissioning support services for carers. The Commission also recommends that adult and children’s services work together to ensure the transition to adult carer services is a smooth positive experience for young adult carers.

**Recommendation Fourteen**

Hackney Carers Helpline is run by the Hackney Contact Centre and provides immediate one to one advice to adult carers or signposts them to further support. It is promoted on all publications in the borough related to adult carers as well as through specific leaflets. This helpline should be utilised to also provide advice to young carers in the borough and signpost them to relevant support services.

(a) The Commission recommends the Hackney Carers Helpline should be utilised to also provide advice to young carers in the borough and signpost them to relevant support. The staff who currently run this helpline have received extensive training on adult carers but only minimal training on young carers, therefore further training on young carers should be arranged so that they can provide the necessary support and advice.

(b) The Commission recommends an information card is provided to relevant services that will come into contact with young carers with the contact details of Hackney Young Carers Project as well as the Hackney Carers Helpline phone number. This card can be distributed to young carers, or suspected young carers, by for example GP’s so that these young people know there is a number they can ring to receive advice and talk through their situation, and be signposted to further support.

**Health Services**

**Recommendation Fifteen**

Information produced by the Children’s Society as part of their Include Project to help healthcare professionals who come into contact with young carers and their families states that “health professionals are likely to be the first people that a family turns to for help with an illness or disability.”

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5 S. Becker & F. Becker (2008), *Young Adult Carers in the UK: experiences, needs and services for carers 16 – 24*
Whether health professionals work in a hospital or the community, with adults or children, they may be the only person who is able to ask the right questions to find out that a child is taking on caring responsibilities. Timely intervention could prevent a child undertaking inappropriate levels of care.\(^6\)

Parents told the Commission that there is a lack of awareness of young carers amongst the health professionals they come into contact with and they often have to explain to healthcare staff what a young carer is and what this means within their family.

(a) The Commission recommends that awareness is raised of young carers amongst all healthcare staff through training and information materials. Information material should include:
   - identification of young carers
   - referral pathways for support
   - information about services for young carers, such as Hackney Young Carers Project
   - ways of adapting services to support young carers, for example clearly explaining any medical problems to children and answering any questions, and involving young carers in discussions about medication where necessary.

(b) The Commission also recommends that there is a wider display of information materials on young carers in healthcare settings, for example on notice boards in GP surgeries, so that families and young carers know there is support available.

**Recommendation Sixteen**

A summary of research carried out looking at the health and wellbeing of young carers notes possible effects of caring responsibilities including tiredness, experiencing some physical problems as a result of lifting parents with physical disabilities, substantial numbers reporting stress, anxiety, low self-esteem and depression, and substantial numbers of young carers reporting mental health and related problems, such as eating problems, difficulty in sleeping, and self harm.\(^7\)

(a) The Commission recommends that an annual invite for a health and wellbeing check for young carers by their GPs is established. Most young people will not usually go to a GP unless something is seriously wrong so the annual health and wellbeing check will give young carers an opportunity to talk and have their health checked, and they can be referred onto further support if necessary.

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The Commission heard of an example of a young carer who was ill and tried to book a GP appointment but was told she could only attend with her mother (the person who she cared for) but it was not possible for her mother to attend the appointment with her. The surgery was not flexible and said under 16’s must be accompanied by a parent/carer therefore the young carer was not able to see a GP. The Commission believes that there should be more flexibility for young carers, for example in this situation the young carer could have attended the GP appointment and the mother could be included in the consultation via telephone.

(b) The Commission recommends that young carer status should be identified on GP patient records so surgeries can offer more flexibility, for example around appointments if a parent is unable to accompany a young carer then the surgery could arrange to include them in the consultation via telephone.
3. **FINANCIAL COMMENTS**

3.1. The majority of recommendations contained within this report do not require any additional Council resources. The exceptions are recommendation 12 and 13 which require investment in training and the production of information materials. The level of investment will depend on the number of staff trained, the method of delivery and the type and scale of the information produced. There is no growth in Children and Young People’s (CYPS) 2012/13 budgets for these items and, if implemented, resources would need to be diverted from elsewhere within CYPS.

3.2. The Commission recommends (recommendation 5) that services for young carers continue to be a significant priority for funding. CYPS budget proposals for 2012/13 include £100,000 in respect of young carers, the same level as the current year.

4. **LEGAL COMMENTS**

4.1. The recommendations that are contained within this report fall within the published strategy of the Department of Health guidance which is entitled ‘Recognised, valued and supported: next steps for the Carers Strategy’ (November 2010). Whilst this strategy has been developed to consider both adult and children carers it identifies the actions that the Government will take over the next four years to support its priorities to ensure the best possible outcomes for carers and those they support, including:

1. supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset both in designing local care provision and in planning individual care packages
2. enabling those with caring responsibilities to fulfil their educational and employment potential
3. personalised support both for carers and those they support, enabling them to have a family and community life
4. supporting carers to remain mentally and physically well

4.2 The Commission’s recommendations are designed to ensure that young carers receive the support and assistance that they need and the recommendations assist a multi-agency engagement with that process.

4.3 There are no immediate legal implications for the Council which arise from the report and recommendations.
5. FINDINGS

5.1 Background Information

5.1.1 For the purpose of this review the Commission used the following definition of young carers:

“Children and young people who have caring responsibilities (often referred to as ‘young carers’) are young people aged under 18, whose lives are in some way restricted because of the need to take on inappropriate or excessive responsibilities for the care of a person who is ill, has a disability, is experiencing mental illness or is affected by substance misuse.” (Carers UK)

5.1.2 The 2001 Census estimated that there are at least 175,000 young people in the UK under 18 years of age who have caring responsibilities, including 13,000 children and young people caring for more than 50 hours per week. This is widely accepted to be a vast underestimate. Research conducted for the BBC in 2010 among over 4,000 schoolchildren, showed that one in 12 had moderate or high levels of caring responsibilities, equating to some 700,000 young carers in the UK – four times the number identified in the 2001 Census.\(^8\)

5.1.3 The 2001 Census estimated that there are 18,000 carers in Hackney, of which 5% (900) are under 18 and therefore young carers. Again, this figure is widely acknowledged by all agencies to be a considerable underestimate of the true number of young carers in the borough. The Census relied on asking adults to define their child’s caring responsibility, and they may have been reluctant to do this, particularly if it may stigmatise the adult, for example if they have mental health problems, misuse drugs or alcohol, or have HIV/AIDS. There is no accurate figure for the number of young carers in Hackney, but the Commission heard that it may be three or four times higher than the 2001 Census figure.

What do young carers do?

5.1.4 Nationally, most young carers (81%) care for a parent, often a single parent and 58% of care recipients are mothers because single parents are more likely to be mothers than fathers. A quarter look after a disabled sibling, often when parents reach breaking point.

5.1.5 The tasks undertaken by young carers can vary according to the nature of the illness or disability, the level and frequency of need for care and the structure of the family as a whole.

5.1.6 A young carer may undertake some or all of the following:

\(^8\) BBC News (November 2010) *Number of child carers four times previous estimate* [http://www.bbc.co.uk/news/education-11757907](http://www.bbc.co.uk/news/education-11757907)
Appendix A

- Practical tasks, such as cooking, housework and shopping.
- Physical care, such as lifting, helping a parent on stairs or with physiotherapy.
- Personal care, such as dressing, washing, helping with toileting needs.
- Managing the family budget, collecting benefits and prescriptions.
- Administering medication.
- Looking after or "parenting" younger siblings.
- Emotional support.
- Interpreting, due to a hearing or speech impairment or because English is not the family’s first language.

5.1.7 Some young carers may undertake high levels of care, whereas for others it may be frequent low levels of care. Either can impact heavily on a child or young person.

The impacts of caring

‘I miss out on things because I’m a young carer and feel like an outcast. People talk about ‘you should have been there’ and I just want to shout shut up at them.’

(A young carer)

5.1.8 A young carer’s personal and physical development, physical and emotional health, as well as social opportunities can all be affected by the family situation and their caring role. Young carers learn practical and caring skills at an early age and are wrongly seen as ‘copers’. However, it is important to remember that they are ordinary young people with the same emotional needs as others their age.

- A young carer’s physical health is often severely affected by caring through the night, repeatedly lifting a heavy adult, poor diet and lack of sleep.
- Stress, tiredness and mental ill-health are common for young carers.
- Many experience traumatic life changes such as bereavement, family break-up, losing income and housing, or seeing the effects of an illness or addiction on their loved one.
- Inappropriate caring roles during childhood can impact later in life, affecting a young carer during the transition to adulthood or in adulthood itself. This can include long-term impacts on physical or emotional health, further education and/or career opportunities.

5.1.9 The impacts of being a young carer are great and have an impact on the school life of children and young people:

- 27% of young carers aged 11-16 experience educational difficulties or miss school because of their caring responsibilities; this rises to 40% where there is parental mental health problems/substance misuse. Many young carers leave school without qualifications and have trouble entering the job market.
• The Princess Royal Trust for Carers surveyed young carers in 2010 and found 1/4 of young people struggle with the stress of juggling school work and caring responsibilities.
• 68% of young carers are bullied in school.9

5.1.10 The careers of young carers can be shaped by their caring experience. Well-meaning mentors may expect and encourage them to go into caring professions on the assumption that they have necessarily become good carers because of their experiences as young people. They may also be aware that their studies have been adversely affected by being a young carer, and that entry to some caring jobs makes fewer academic demands than other jobs. Clearly some young carers do develop a real desire to enter caring work as adults. But they need to be encouraged to consider other career paths before opting almost by default for a continuation of their young carer role.

National context

5.1.11 Many young carers still remain unidentified and unsupported, especially those with some of the most significant caring roles (particularly those caring for parental mental ill health and substance misuse). Generally adults’ services still do not recognise the impact of the parent’s illness or disability on their children. Children’s services often do not identify young carers before their caring role is causing significant damage to their wellbeing. Services are still struggling to work together at both strategic and practitioner level and practitioners lack the knowledge and skills to work with young carers and families effectively.

5.1.12 Young carers’ services are suffering significantly from cuts in funding. Action for Children recently identified that 86% of their young carers’ services had had a decrease in their funding. Young carers’ services are increasingly being asked to do more for less and that funding is being issued on a short term basis which makes planning difficult.

5.1.13 The Government’s updated Carers Strategy in 2010 highlighted that more should be done to identify and support young carers and that services should be more ‘carer aware’. The strategy sets out the following commitments to young carers:
• Supporting those with caring responsibilities to identify themselves as carers at an early stage
• Enabling those with caring responsibilities to fulfil their educational and employment potential
• Providing personalised support both for carers and those they support
• Supporting carers to remain mentally and physically well10

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10 Department for Health (November 2010) Recognised, valued and supported: next steps for the Carers Strategy
5.1.14 As part of the previous government’s “Think Family” agenda the Department for Children, Schools and Families provided funding to eighteen local authorities to develop systems and support to address the needs of families with young carers (Family Pathfinder work). The report of this work explores some of the positive outcomes linked to taking a family focused approach and showcases good practice developed in this field. This work is now being extended by the “Families with Multiple Problems” agenda. The whole family approach encourages services to work together to prevent individuals from being viewed in isolation, thereby helping to reduce inappropriate caring roles in the long term and empowers families, providing parents with the support they need to parent.

5.1.15 The National Young Carers Coalition was established in 2008 to campaign on behalf of children who care for family members. It is designed to force the issues affecting young carers and their families higher up the political agenda and raise awareness among professionals and the public of their needs. The National Young Carers Coalition includes: The Princess Royal Trust for Carers, The Children’s Society, Action for Children, Family Action, Crossroads Care, Barnado’s, Disabled Parents Network, and YMCA Fairthorne Group.

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11Department for Education (2011), Improving support for young carers - family focused approaches
https://www.education.gov.uk/publications/RSG/AllPublications/Page1/DFE-RR084
5.2 Co-ordination of support across the borough

5.2.1 The Commission believes there needs to be a greater focus on supporting young carers at a strategic level in relevant organisations in the borough including the Council, The Learning Trust, Homerton University Hospital NHS Foundation Trust, East London NHS Foundation Trust and NHS East London and the City. It was apparent to the Commission that there are currently no clear leads within any of these organisations regarding young carers and therefore young carers’ issues often get overlooked. The importance of having a named lead for young carers in relevant agencies is emphasised by national organisations such as The Princess Royal Trust for Carers and The Children’s Society. This will help ensure support for young carers is recognised and coordinated within each organisation and there is a clear contact point for young carers’ issues.

5.2.2 The Commission felt there is a lack of leadership regarding the issue of young carers within the Council, with confusion about which officer was the lead for young carers within Children and Young People’s Services. Currently responsibility for young carers sits with the Children’s Social Care division, but the Commission questions whether this is the most appropriate area for this responsibility. Members heard throughout the review that only a very small number of young carers meet the criteria for interventions through children’s social care, for example because of safeguarding concerns, therefore another area of the directorate, for example Young Hackney, may be a more appropriate area to lead on work to support young carers.

Recommendation One

The importance of having a named lead for young carers in relevant agencies is emphasised by national organisations such as The Princess Royal Trust for Carers and The Children’s Society. This will help ensure support for young carers is recognised and coordinated within each organisation and there is a clear contact point for young carers’ issues.

The Commission recommends that every organisation that comes into contact with young carers in Hackney has a named lead for young carers – at a minimum this should include the Council, The Learning Trust, Homerton University Hospital NHS Foundation Trust, East London NHS Foundation Trust and NHS East London and the City. This person needs to have a passion for improving support for young carers but also be at an appropriate level to drive the young carer agenda forward in the organisation.

5.2.3 To improve support for young carers in Hackney, there needs to be a multi-agency approach. This is not an issue that can be improved through one organisation alone; young carers and their families come into contact with a range of public agencies and these organisations need to work together to
provide better support. There needs to be a coordinated approach to identifying young carers and providing support to them across the borough and the Commission believes a multi-agency steering group is the most appropriate place for these important discussions.

5.2.4 It was clear during this review that there is very little communication between local agencies about young carers and the Commission wants to see a multi-agency steering group established to discuss coordinating support for young carers across a range of services. Parents of young carers also complained about the lack of communication between different services they come into contact with. Bringing the named leads for young carers in different organisations together, as well as other relevant service representatives, will help share approaches to providing support and coordinate resources to provide a better service to these families.

5.2.5 The Commission feels the following service areas need to be involved in a multi-agency steering group:
- Children’s Social Care
- Adult Social Care
- Young Hackney
- Children’s/Adult’s commissioning
- The Learning Trust/Hackney Learning Trust
- Hackney DAAT
- Young carers service
- NHS East London and the City / Clinical Commissioning Group representative
- Homerton University Hospital NHS Foundation Trust
- East London NHS Foundation Trust (Adult Mental Health and CAMHS)

5.2.6 There is national guidance produced by The Princess Royal Trust for Carers and the Children’s Society about the organisations and roles that it is recommended should sit on a young carers multi-agency steering group and we suggest this guidance as well as the list above be used as a starting point when considering the roles that should be represented on the group.

5.2.7 Part of the work of the multi-agency steering group should be breaking down barriers between adult and children’s services. The Head of Hackney DAAT (Drug and Alcohol Action Team) suggested that whilst the DAAT has to work within the remit of its funding to focus on adult substance misusers, more broadly, championing a jointly commissioned, integrated multi-agency service to work with families that are affected by substance misuse would inevitably lead to both better treatment outcomes for the parents and safeguard children more comprehensively from the damaging consequences of parental substance misuse. This is an example of a topic that needs to be discussed between adult and children’s services and the multi-agency steering group is the place for such discussions. The steering

Appendix A

group should be a way of sharing good practice between services and developing a common approach to support for young carers.

5.2.8 The multi-agency steering group should be accountable to another body and the group needs to discuss and agree appropriate reporting lines. As an example, in Sunderland accountability for the Young Carers Multi Agency Partnership is dual. It is accountable to the Adult Partnership Board, which is a multi-agency strategic partnership led by the Council, with a remit for social care which has now extended to health as well, and is a reference group for the new Health and Wellbeing Board. (The Adult Board is the body accountable to the Health and Wellbeing Board for the Sunderland Carers’ Strategy.) The partnership is also accountable to the Children’s Trust Board which is now the other reference group for their Health and Wellbeing Board. The responsibility for this arrangement is to focus on young carers as children.

**Recommendation Two**

From the evidence heard during the review, there appears to be a lack of communication between services in Hackney about providing support to young carers. There needs to be a coordinated approach to identifying young carers and providing support to them across the borough and a multi-agency steering group is the most appropriate place for these important discussions.

The Commission recommends that a young carers multi-agency steering group is established, made up of the named leads from each organisation. This group will be responsible for creating a joined up approach to working with young carers in Hackney and to discuss coordinating support for young carers across services.

There is national guidance produced by The Princess Royal Trust for Carers and the Children’s Society\(^{13}\) about the organisations and roles that it is recommended should sit on a young carers multi-agency steering group and we suggest this, along with the list on page 24, is used as a starting point when considering the roles that should be represented on the group.

5.2.9 The recently refreshed Hackney Carers’ Strategy (2011-14) states:

“This strategy is for carers aged over 18 years looking after Hackney residents. A young carers strategy will be prepared in early 2012 by partners including Hackney Ark.”\(^{14}\)

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\(^{13}\) The Princess Royal Trust for Carers and The Children’s Society, *Recommendations for a Multi-Agency Steering Group for Young Carers and their Families* - [http://www.youngcarer.com/pdfs/Steering%20Group%20Reccs%204th.pdf](http://www.youngcarer.com/pdfs/Steering%20Group%20Reccs%204th.pdf)

5.2.10 The previous Hackney Carers’ Strategy published in 2007 included a detailed Young Carers Strategy that contains a ‘multi-agency cross-cutting vision for improving outcomes for young carers in Hackney’ and an action plan detailing how this would be achieved. However it was acknowledged during this review by the Council and partner agencies that many of the actions from this 2007 strategy were not met for example:

- All agencies commit to improving data collection on the number of young carers and information related to their needs and regularly monitor and review the support given.
- Young carers ‘identification and emergency’ cards, for use in a variety of settings, including schools, pharmacies and GP surgeries, will be developed.
- All agencies will raise awareness through strategies to profile the needs of young carers and identify the training needs of specific staff. This will be supported by information packages available in an assortment of media, including web sites.

5.2.11 Although many of them were not met, the Commission believes that many of the priorities identified in Hackney’s Young Carer Strategy five years ago are still important and needed. Some of the recommendations of this review echo the priorities that were included in the Young Carer Strategy five years ago that have not been met.

5.2.12 The Commission recognises there is a need for a strategy or delivery plan to coordinate work around young carers in the borough to ensure young carers and families receive joined up support. This action plan needs to be realistic and achievable, while also aiming to provide the best possible level of support to young carers in the borough, and where possible, preventing young people taking on caring responsibilities within a family. The Commission believes the recommendations contained within this report provide a good basis for a new young carers delivery plan for the borough. It is crucial that the delivery plan is agreed by all organisations on the multi-agency steering group and is not just a Council document, and the group should be responsible for implementing and monitoring the plan. The Commission was concerned that there was a lack of awareness of the 2007 Young Carers Strategy and therefore hopes to see the new delivery plan as an active document that will help shape future work around young carers and encourage joined up working between different services.

**Recommendation Three**

The recently refreshed Hackney Carers Strategy for 2011 – 14 states that a young carers strategy will be prepared in early 2012. The Commission

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16 A recent example of a young carer strategy based on the model joint Memorandum of Understanding “*Working Together to support Young Carers*” published in December 2009 by ADASS (Association of Directors of Adult Social Services) and ADCS (Association of Directors of Children’s Services) is Peterborough’s Young Carers Strategy - [http://www.peterborough.gov.uk/pdf/Children_young_carers_strategy_finalJune11.pdf](http://www.peterborough.gov.uk/pdf/Children_young_carers_strategy_finalJune11.pdf)
believes this needs to be a multi-agency strategy and delivery plan to provide a real focus for support for young carers in Hackney.

The Commission recommends there should be a Hackney Young Carers Delivery Plan. This should be agreed by all organisations on the multi-agency steering group and the group should be responsible for implementing and monitoring the delivery plan.

It is requested that a report outlining progress against the actions in the delivery plan will be presented to the Children and Young People Scrutiny Commission on an annual basis.

5.2.13 One of the key difficulties in considering services for young carers in Hackney is there is no accurate figure for the number of young carers in the borough. The 2001 Census estimated that there are 900 young carers but this figure is widely acknowledged by all agencies to be a considerable underestimate of the true number of young carers in the borough. To properly plan support for young carers in the borough, services need to work together to try to quantify the issue.

5.2.14 There is currently no central coordination point for information about young carers from different agencies in the borough and the Commission believes that the responsibility for knowing the scale of the issue lies with the Council. The Commission heard that carers are a key priority for the adult social care service and it is one of the key performance indicators monitored, and there is a small amount of data about young carers within this. However the service is not able to easily provide data about young carers as this information is not recorded in a consistent way that makes it easy to extract from the monitoring system, as with information about adult carers. Commission members also heard from a GP that she often encounters families where she suspects a child is taking on caring responsibilities but in these cases she seldom does anything or contacts any other service, unless she has safeguarding concerns about the child. The Commission wants to see a team or service within the Council identified that will collect this data and all social agencies, especially schools, GPs, hospitals, adult social services and adult mental health teams, should be aware of their responsibility to identify and report cases of young caring to this team.

5.2.15 Hackney schools should take measures to actively identify young carers on roll and should report them to the nominated team within the Council. The Commission also encourages the relevant team to take steps to ensure that they are informed about the young carer needs of the 20% of Hackney children being educated out of borough.

5.2.16 There is no ‘typical’ young carer – children and young people take on varying levels of caring responsibilities, both in terms of the time they spend on these responsibilities and what they cover (for example domestic activity, personal care, household management or emotional care). The
Commission believes it would also be useful for the data to be available tabulated in terms of the rough level of caring responsibilities (light, medium, heavy) to give a more accurate picture of the young carer situation in the borough.

**Recommendation Four**

There is no accurate figure for the number of young carers in Hackney and no central coordination point for this information from different agencies. It is universally acknowledged that the majority of young carers are hidden therefore as we are encouraging better identification of young carers in all settings, there should be a central place for this information from different agencies to be collated to allow for better future planning of services.

The Commission recommends the Council and multi-agency steering group should consider how to compile accurate data on the number of young carers in Hackney. The relevant team or service within the Council that will collect this data needs to be identified and all social agencies, especially schools, GPs, hospitals, adult social services and adult mental health teams, should be aware of their responsibility to identify and report cases of young caring to this team. This data should be available tabulated in terms of the rough level of caring responsibilities (light, medium, heavy).¹⁷

This will allow evidence-based decisions to be made regarding funding for services for young carers and will help define the future priorities for the multi-agency steering group.

5.3 Young Carers Service

5.3.1 The Council currently commissions Hackney Young Carers Project, run by the national charity Action for Children, to provide a specific support service to young carers in the borough. This is acknowledged as the main way young carers are currently supported in Hackney. Hackney Young Carers Project is a support service for young people aged 5 to 18 who help to care for someone in their family (for example a parent, grandparent or sibling) who may have a serious physical illness, disability, mental health issue, or substance misuse problem. The project is based in Dalston and started in 1997.

5.3.2 The project supports young carers in a number of ways including through advice and advocacy (for example with school-related issues), emotional support (for example through counselling at a Wellbeing Group), short breaks and fun activities and trips. The project aims to offer young carers and their families a tailor-made service, for example, helping them with any school/college transitions and planning for the future; supporting them in understanding the condition of the person they care for (for example by arranging a consultation with a medical professional) and addressing the needs of the whole family more widely (for example referring them for housing or benefits advice).

5.3.3 All of the activities are arranged in consultation with the young carers and their families. Over the summer holidays the project ran an ‘Employability Scheme’ for young carers aged 16+ (accredited at level 2 in Employability and Personal Development) with modules on job searching, interview practice, team working as well as work experience placements. In addition, the project had a busy summer scheme with over twenty events including a BBQ (attended by 100 young people and family members and catered for by their own young carer cooking crew), trips to Southend & Woburn Safari Park. The project runs regular clubs and activities throughout the year.

5.3.4 The project also works to raise awareness of young carer issues in the borough and provides training and advice sessions, for example training to teachers and assemblies and information for notice boards in schools.

5.3.5 The project’s annual funding from Hackney Council was reduced from £135,144 in 2010/11 to £100,000 for 2011/12. On the strength of a firm contract with the Council, the project has been successful in fundraising for additional funding in recent years from private companies and charitable foundations. The project provides quarterly update reports to the Council’s commissioning team showing the activities it has provided during that period and including a breakdown (by age, ethnicity, family type, referral source and other information) of the young carers the project is currently supporting.18

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18 An example of one of these quarterly reports is available here - http://mginternet.hackney.gov.uk/documents/s18226/For%20Item%209%20-%20Hackney_Young_Carers_Project_-_Quarterly_report_April_-_June_2011.pdf
5.3.6 The project’s contract with the Council states that they will maintain a caseload of approximately 140 young carers as an average over the contract term. The last two quarterly reports have shown the project is supporting over this number (153 during April – June, and 157 during July – September) and the latest report states that “new referrals are on the increase again”. The Commission received a data breakdown in September 2011 of the young carers using the service (163 young carers), and further updated information for January 2012 (171 young carers). This information is included below.

**Data breakdown of young carers using Hackney Young Carers Project**  
(January 2012)

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>90</td>
<td>81</td>
<td>171</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of young carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>8</td>
<td>10</td>
</tr>
<tr>
<td>9</td>
<td>11</td>
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<tr>
<td>10</td>
<td>15</td>
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<tr>
<td>11</td>
<td>15</td>
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<td>15</td>
<td>27</td>
</tr>
<tr>
<td>16</td>
<td>17</td>
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<tr>
<td>17</td>
<td>7</td>
</tr>
<tr>
<td>18</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnic background</th>
<th>Number of young carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black - Caribbean</td>
<td>55</td>
</tr>
<tr>
<td>Black - African</td>
<td>32</td>
</tr>
<tr>
<td>Black - Other</td>
<td>3</td>
</tr>
<tr>
<td>White - British</td>
<td>26</td>
</tr>
<tr>
<td>White - Other</td>
<td>14</td>
</tr>
<tr>
<td>Asian - Bangladeshi</td>
<td>6</td>
</tr>
<tr>
<td>Asian - Indian</td>
<td>5</td>
</tr>
<tr>
<td>Asian - Pakistani</td>
<td>3</td>
</tr>
<tr>
<td>Chinese or other background</td>
<td>5 (3%)</td>
</tr>
<tr>
<td>Mixed – White and Black Caribbean</td>
<td>9</td>
</tr>
<tr>
<td>Mixed – White and</td>
<td>2</td>
</tr>
</tbody>
</table>


(Compared with the Hackney demographic data from 2001 Census which indicated 40% White British, 15% Other White, 30% Black/Black British, 9.4% Asian/Asian British)

**Ward breakdown of young carers using Hackney Young Carers Project**  
(January 2012)

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number/ Percentage of Young Carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brownswood</td>
<td>11 7%</td>
</tr>
<tr>
<td>Cazenove</td>
<td>2 1%</td>
</tr>
<tr>
<td>Chatham</td>
<td>8 4%</td>
</tr>
<tr>
<td>Clissold</td>
<td>9 5%</td>
</tr>
<tr>
<td>Dalston</td>
<td>8 4%</td>
</tr>
<tr>
<td>De Beauvoir</td>
<td>9 5%</td>
</tr>
<tr>
<td>Hackney Central</td>
<td>21 12%</td>
</tr>
<tr>
<td>Hackney Downs</td>
<td>14 9%</td>
</tr>
<tr>
<td>Haggerston</td>
<td>3 2%</td>
</tr>
<tr>
<td>Hoxton</td>
<td>3 2%</td>
</tr>
<tr>
<td>King’s Park</td>
<td>14 9%</td>
</tr>
<tr>
<td>Leabridge</td>
<td>14 9%</td>
</tr>
<tr>
<td>Lordship</td>
<td>7 4%</td>
</tr>
<tr>
<td>New River</td>
<td>6 3%</td>
</tr>
<tr>
<td>Queensbridge</td>
<td>6 3%</td>
</tr>
<tr>
<td>Springfield</td>
<td>11 7%</td>
</tr>
<tr>
<td>Stoke Newington</td>
<td>11 7%</td>
</tr>
<tr>
<td>Victoria</td>
<td>6 3%</td>
</tr>
<tr>
<td>Wick</td>
<td>8 4%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>171</strong></td>
</tr>
</tbody>
</table>

**Condition of the person being cared for**  
(by young carers using Hackney Young Carers Project – January 2012)

<table>
<thead>
<tr>
<th>Relative being cared for</th>
<th>Condition or person being cared for</th>
<th>Number of young carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent</td>
<td>Has a mental health problem</td>
<td>43</td>
</tr>
<tr>
<td></td>
<td>Is frail and/or has limited mobility</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Has a learning disability</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Has a long term illness, is recovering from illness, or is terminally ill</td>
<td>94</td>
</tr>
<tr>
<td></td>
<td>Has a physical disability</td>
<td>2</td>
</tr>
</tbody>
</table>
Appendix A

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance misuse</td>
<td>7</td>
</tr>
<tr>
<td>Sibling</td>
<td></td>
</tr>
<tr>
<td>Has a learning disability</td>
<td>12</td>
</tr>
<tr>
<td>Has a mental health problem</td>
<td>0</td>
</tr>
<tr>
<td>Has problems related to substance abuse/addiction</td>
<td>0</td>
</tr>
<tr>
<td>Is frail and/or has limited mobility</td>
<td>0</td>
</tr>
<tr>
<td>Has a physical disability</td>
<td>0</td>
</tr>
<tr>
<td>Has a long term illness, is recovering from illness, or is terminally ill</td>
<td>0</td>
</tr>
<tr>
<td>Grandparent</td>
<td></td>
</tr>
<tr>
<td>Has a learning disability</td>
<td>0</td>
</tr>
<tr>
<td>Has a mental health problem</td>
<td>0</td>
</tr>
<tr>
<td>Is frail and/or has limited mobility</td>
<td>5</td>
</tr>
<tr>
<td>Diabetes</td>
<td>1</td>
</tr>
<tr>
<td>Long term illness</td>
<td>1</td>
</tr>
<tr>
<td>Aunt</td>
<td></td>
</tr>
<tr>
<td>Has a learning disability</td>
<td>1</td>
</tr>
<tr>
<td>Substance misuse</td>
<td>3</td>
</tr>
</tbody>
</table>

Note
The table above shows a higher figure than the total number of young carers because some family members being cared for have multiple conditions.

5.3.7 Overall approximately 75% of the project’s referrals come from statutory organisations, mainly Hackney’s Children & Young People Services (including the Children with Disabilities Team/Hackney Ark) and schools (especially Baden Powell, Jubilee, De Beauvoir, Colvestone, Mulberry and Millfields primary schools, Stoke Newington Secondary School and Petchey Academy). Voluntary sector referrals to the project come from agencies such as City and Hackney Carers Centre, Sickle Cell Centre, TLC Stroke Project, Hackney Family Backup, Asian Women’s Advisory Service, and Body and Soul.

5.3.8 At least half of all of the home situations of the young carers that use the project involve mental health problems of a family member as a reason for their caring responsibilities. In these situations there is the issue of a young carer being able to understand what is happening to their family member as this situation can be complete chaos for a child. The Commission learnt that this is a key part of the initial assessment the project carries out when a young carer is referred to them and they ask whether the young person understands their family member’s condition and whether they have someone to talk to about the situation and their feelings.

5.3.9 All new referrals are assessed during a home visit using various assessment tools, including MACA (Multidimensional Assessment of Caring Activities) and PANOC (Positive and Negative Outcomes of Caring). When a young carer is referred to the project, a worker goes to their home and assesses the situation with their family. They ask questions about what the young carer knows about the family member’s condition who they care for, school,
friends, their interests and housing and benefits for the whole family. They are then allocated a priority level – for further details see page 33.
## 5.3.10 Eligibility Criteria for Services and Payments by Hackney Young Carers Project

<table>
<thead>
<tr>
<th>First Priority</th>
<th>Second Priority</th>
<th>Third Priority</th>
</tr>
</thead>
<tbody>
<tr>
<td>In considering applications for services/payments, highest priority is given to young people who are:</td>
<td>Second priority will be given to young people who are:</td>
<td>Third priority will be given to young people who are:</td>
</tr>
<tr>
<td>- Shortly to be bereaved (i.e. within the next 12 months) or recently bereaved (i.e. in the last 3 months)</td>
<td>- Giving a lower level of physical, practical, personal care</td>
<td>- Caring but have other support either formally or informally (e.g. through the extended family)</td>
</tr>
<tr>
<td>- Experiencing their own health problems, or experiencing deteriorating physical and/or emotional development as a result of their caring responsibility</td>
<td>- Giving lower level of support to family member with illness caused by drug/alcohol misuse or mental health or with a learning disability</td>
<td>- Carers with low caring responsibilities (though these may increase)</td>
</tr>
<tr>
<td>- Giving a high level of support to a family member who has an illness caused by drug/alcohol misuse or mental health problems</td>
<td>- Giving a high level of physical, practical and personal care or are caring for more than one person</td>
<td>- Sibling carers with good parental support</td>
</tr>
<tr>
<td>- Giving a high level of physical, practical and personal care or are caring for more than one person</td>
<td>- Young carers and have special needs themselves</td>
<td>- In receipt of social work support or other external support and services (e.g. through school, health services) either themselves or the person cared for</td>
</tr>
<tr>
<td>- Living in a lone parent family</td>
<td></td>
<td>- Have received substantial input/allocation from HYC (e.g. a family holiday) in the past</td>
</tr>
</tbody>
</table>
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*How does the Young Carers Project help?*

‘I like it because it gives me more space and a chance to get out of home.’

‘It helps because it has lots of activities like sailing, kickboxing, music workshops, and trips to other places so you get to do things you wouldn’t do otherwise and you get to make new friends.’

(Comments from young carers in response to this question)

5.3.11 There is a need for specific support services for young carers as they provide the expertise and knowledge that statutory services will not have or be able to provide. Young carer projects would be better if they were not under the pressures they currently are because statutory services are not providing the support to young carers that they should.

‘It lets us do things we don’t usually do or struggle to do in our family. It lets us stop thinking and concentrate on what we want to do for a bit.’

(A young carer, talking about Hackney Young Carers Project)

5.3.12 The Commission feels strongly that there is a need for young carers to meet others who are in the same situation as they are and to have time away from their caring responsibilities to be able to relax and enjoy themselves.

5.3.13 The Commission encourages young carers to access mainstream youth services in the borough but recognises that these are often not geared up to meet young carers' needs, for example a young carer may not be able to attend a drama class regularly enough because of their other responsibilities and therefore would be asked to leave, or they may have childcare responsibilities and they cannot take their younger siblings with them to activities. Specific services for young carers recognise these restrictions and are able to provide the required flexibility.

‘My children are very successful academically because of the project and the support they provide is crucial.’

(A parent of a young carer)

5.3.14 The project provides homework clubs and academic support to young carers, and this has proved valuable with many of the young carers and parents commenting that they would not have achieved the academic results they have without the support provided by Hackney Young Carers Project. Commission Members heard from a 17 year old young carer who has been attending the project for at least eleven years. She has received academic support for many years through the project and achieved high grades in her GCSE examinations. She told the Commission that she wanted to apply to Oxford University and she had the grades to do this, but the university has now changed the grades required and she feels that although her grades are very good, she cannot put the effort in to achieve even higher grades as she has important responsibilities at home. Therefore her caring responsibilities are having an impact on her achieving what she wants to.
‘Without Hackney Young Carers Project I don’t know what would have happened. They helped me so much when a doctor told me I wouldn’t walk or see again. They helped my children with homework and school and without the project my children wouldn’t have passed their exams. The teachers were surprised about the grades my children have got and I tell them it is because of the project (the teachers don’t know anything about it). The project works with children and parents and has given all of us counselling. They have given me the push to improve my health and take on more roles myself. I know that Hackney Young Carers Project is 100% behind me.’

(Comments from a parent of a young carer)

‘My son was getting angry at school because of my illness and the teachers didn’t understand why. The teachers talked to me and referred us to social care. Eventually we were referred to the Young Carers Project. They take him to the theatre, play football, he goes to the cooking club and they’ve given him a bicycle to use at home. The project helps him to be a child and I don’t know what would have happened to him without it.’

(Comments from a parent of a young carer)

5.3.15 Some young carers come to the project with very specific issues. The Commission was told of an example of a young carer that was referred to the project and had dropped out of school just before his GCSE’s. The project needed to support him to gain the necessary skills and then move back into education, training or work.

5.3.16 The parents the Commission spoke to all talked very highly of Hackney Young Carers Project and how much the project has helped them and their children. Commission Members heard how the project has provided a wide variety of support to families including:

- Taking children to and from school
- Helping children with their homework
- Feeding children at the project
- Paid for transport to hospital
- Talked to children about their fears and reassured them about medical conditions
- Trained children in first aid
- Counselling (for children and parents)
- Provide Christmas presents for children
- Help young carers understand the situation at home and help with coping mechanisms
- Interview and employment training for young carers
- Apply for funding for cookers, washing machines for families etc.
- Laptops and bicycles for children to use at home

5.3.17 The Commission recognises that many families rely on Hackney Young Carers Project to provide a wide variety of support, and for these families the
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project is vital. Many of the parents the Commission spoke to suggested the project should be given more funding so it can help more families. In particular, a number of the parents suggested that funding for adult social care should be reduced and this funding should be redirected to support Hackney Young Carers Project. These parents all complained about social care services and felt the project helps their families far more than social workers do.

Comments from parents about Hackney Young Carers Project:

'I want to see the project helped more so they can support more young carers.'

'If this project wasn't here I don't know what I'd do, it's a godsend.'

'There needs to be more funding for the Young Carers Project and less for social workers. Social workers waste time and money whereas the project actually helps family.'

'The Young Carers Project applied for funding for us for a new cooker and washing machine. I know that everything that goes wrong in our house, the project has an answer to. Social workers can't help so I don't bother with them now.'

'I think funding for social services should be reduced and this should be given to the Young Carers Project instead. They help us and our children trust them, they don't trust social workers.'

'You can't depend on social services, but you can depend on the Young Carers Project.'

5.3.18 The project appears to carry out intensive family support work as well as supporting individual young carers, in the absence of this support coming from anywhere else. The Commission recognises the project is carrying out an important role with this work but believes that young carer services should be concentrating on supporting the young carer themselves in a way that statutory services cannot, and this should be the primary focus of specific young carer services. Young carers should be given the opportunity to take part in fun activities away from their caring responsibilities and meet and spend time with other young carers who can relate to their situations, and this should be the main focus of these services.

5.3.19 Specific services such as Young Carer Projects are excellent value for money and national research has found that for every £1 invested in a young carers’ service, the saving to society is £6.72.19 The Council’s funding for Hackney Young Carers Project was reduced from £135,144 in 2010/11 to £100,000 for 2011/12, therefore the project has already seen a cut of 26% to its funding with an expectation from the Council that there would be no impact on the service delivered. The recommendations contained within this

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3.8

report aim to increase awareness of young carers in statutory services and therefore increase the identification of young people with caring responsibilities. Therefore it is likely that there will be more referrals to Hackney Young Carers Project as a result of this review and the project will have more young carers to support than presently.

5.3.20 Although there are no accurate figures for the number of young carers in Hackney, the Commission acknowledges that there are far more young carers in the borough than are currently being supported by this project. Young carers need to be provided with support in statutory settings, such as schools, as Hackney Young Carers Project does not have the capacity or resources to provide the level of support it currently does to an increased number of young carers. Alternative models of support should be investigated such as making best use of the Council's Young Hackney service to reach as many young carers as possible, and complementing the service provided by Hackney Young Carers Project.

5.3.21 As part of the evidence gathering for this review, with the assistance of Hackney Young Carers Project, the Commission organised a focus group for the parents of young carers to hear their views about the family’s experiences and the support they and their children receive. After the session many of the parents commented on how useful it had been talking to other parents in a similar situation to their own and were exchanging phone numbers to keep in touch with each other. The Commission recognises this is not part of the remit of Hackney Young Carers Project, but suggests that it would be good if a forum for these parents could continue in some form.

Recommendation Five

The Council currently commissions Hackney Young Carers Project to provide a specific support service to young carers in the borough. This is acknowledged as the main way young carers are currently supported in Hackney. The Commission has been consistently impressed by the excellent service provided by the project and the high esteem it is held in by the young carers it supports and their families. The project's annual funding was cut from £135,000 to £100,000 for 2011/12. The project's contract for this period states that they will maintain a caseload of approximately 140 young carers as an average over the contract term. The last two quarterly reports have shown the project is supporting over this number (153 during April – June 2011, and 157 during July – September 2011, and they are currently supporting 171 in January 2012) and the latest report states that “new referrals are on the increase again”. However the Commission acknowledges that there are far more young carers in the borough than are currently being supported by this project.

Many of the other recommendations of this review focus on increasing awareness of young carers and therefore improving their identification and referrals onto further support such as Hackney Young Carers Project,
therefore it is expected that more young carers will be referred onto young carer services as a result of this review.

It is important that funding for services for young carers continues and that services reach as many young carers as possible. Specific services such as Young Carer Projects are excellent value for money and national research has found that for every £1 invested in a young carers’ service, the saving to society is £6.72.\textsuperscript{20}

\textbf{The Commission recommends that services for young carers continue to be a significant priority for funding.}

\textbf{Once the recommendations from this review have an effect on support for young carers provided through mainstream services, any significant changes to dedicated services for young carers in the future need to show clearly that what they are replacing is as good as or better than the current level of support provided.}

\textsuperscript{20} Crossroads Caring for Carers and The Princess Royal Trust for Carers (2008), \textit{Economic Evaluation of Young Carers Interventions} -\url{http://static.carers.org/files/finalfinal3-4040.pdf}
5.4 **Education**

‘The basic thing is to look at schools – they are the ones that need to change and could really help make young carers’ lives easier.’

(A parent of a young carer)

5.4.1 A constant message heard during this review is schools in the borough need to do more to support young carers. A young person’s experience at school is critical for their future development and future lives. When young carers fail to meet their potential at school they are at risk of not engaging in further education, employment or training and are at risk of poverty later in life. All of the young carers the Commission spoke to felt that awareness needs to be raised amongst both teachers and pupils about young people with caring responsibilities, and schools need to offer more flexibility and support to young carers to help them achieve their full potential.

5.4.2 National research highlights that 27% of young carers of secondary school age experience educational difficulties or miss school, and where pupils are caring for someone who misuses drugs or alcohol, 40% have educational difficulties. One in five young carers miss school because of caring responsibilities.\(^{21}\) A recent survey by The Princess Royal Trust for Carers found that 68% of young carers experience bullying at school and 39% said that nobody in their school was aware of their caring role\(^ {22}\). Very few of the young carers the Commission spoke to in Hackney had told an adult at their school that they were a young carer.

5.4.3 Research on the key educational difficulties for young carers have identified a range of issues such as low attainment, high absence rates, lateness, difficulties with joining extra curricular activities, restricted peer networks, social isolation, difficulties with homework/coursework completion and anger/behavioural issues. Such impacts can seriously affect a pupil’s future wellbeing and life chances; many young carers do not achieve their full potential. Ofsted highlighted that young carers are one group who are more likely to fall into the category of not being in education, employment or training (NEET).\(^ {23}\) The Audit Commission also found young people who were carers to be more than twice as likely as their peers to be NEET.\(^ {24}\)

5.4.4 These findings from national research were supported by the evidence gathered in this review from talking to young carers and their parents. In the experiences of the young carers the Commission spoke to during the review, primary schools had often been more helpful than secondary schools, however it is at secondary school where young carers really need schools to be more flexible and understanding to help them balance their studies with their caring responsibilities at home.

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\(^{21}\) Dearden, C. and Becker, S. (2004), *Young Carers in the UK: The 2004 Report*

\(^{22}\) The Princess Royal Trust for Carers (2010), *Supporting Young Carers - A Schools Resource Survey*

\(^{23}\) Ofsted (2010), *Reducing the numbers of young people not in education, employment or training: what works and why*

\(^{24}\) Audit Commission (2010), *Against the Odds*
Raising awareness amongst staff and school governors

5.4.5 Many young carers are still ‘hidden’ at school. Although the 2001 Census identified 175,000 young carers aged 5-18 in the UK, research carried out by the BBC in 2010 indicated as many as 700,000 young carers and estimated that 8% of secondary school pupils had moderate or high levels of care responsibilities. In light of these figures, many schools clearly underestimate the number of their pupils who are young carers. However some schools such as De Beauvoir Primary School do a lot of work around identifying and supporting young carers at the school. De Beauvoir Primary School estimates there are 50 plus young carers at the school and as many as a quarter of pupils at the school are young carers.

‘I told my child’s primary school that they are a young carer but it’s made no difference at all.’
(A parent of a young carer)

5.4.6 The Commission was concerned to hear from some young carers and the parents of young carers that although teachers at their schools know they are a young carer, they do not feel this has made a difference to the support or understanding from the school. This could be because of the lack of awareness of young carers amongst teaching staff and the impact it can have on these young people’s lives and their education.

5.4.7 The Commission believes that awareness needs to be raised of young carers in schools and appointing a lead teacher for young carers in every school in the borough will help raise the profile of young carer issues and the additional flexible support they may need. Guidance about this role can be found in The Princess Royal Trust for Carers and the Children’s Society’s document School Lead for Young Carers and their Families – An exemplar job description.25 The main responsibilities for a nominated lead teacher for young carers are described in the recommendation below.

Case Study – De Beauvoir Primary School

De Beauvoir Primary School is proud of their work to support young carers within the school. They estimate that there are 50 plus young carers at the school and as many as a quarter of their pupils are young carers. There is a positive inclusion ethos at the school and children can come and talk to all of the teachers about their home situations and how it might be affecting their schoolwork. Teachers also use group work so children can talk to each other about their concerns.

The school has worked with Hackney Young Carers Project to provide training about young carers to all staff at the school and staff from the school have also attended the Learning Trust’s training on young carers.

25 The Princess Royal Trust for Carers and the Children’s Society (2009), School Lead for Young Carers and their Families – An exemplar job description
The school thinks it is important to pass on information to secondary schools so that a young carer’s next school are aware of their situation when they move from Year 6 to Year 7.

5.4.8 Extensive national guidance has been produced for schools and teachers about young carers and how to provide support to this group of pupils, for example by The Princess Royal Trust for Carers and the Children’s Society.26 Schools should be encouraged to use these guidance documents to help their staff think more about young carer issues. The Learning Trust should also use existing communication channels such as headteacher forums and newsletters to raise awareness of young carers in the borough and provide examples of best practice in supporting young carers in schools. Other local authorities such as Manchester City Council have prepared guidance documents for teachers about young carers to help them in identification and providing support to this often overlooked group of pupils.27

5.4.9 It may be useful for schools to introduce a Young Carers Policy to focus work around supporting young carers and provide a clear outline of what the school will provide. An exemplar school policy produced by The Princess Royal Trust for Carers is included below:28

Exemplar School Policy

At __________ we believe that all children and young people have the right to an education, regardless of what is happening at home.

When a young person looks after someone in their family who has a serious illness, disability or substance misuse problem, he or she may need a little extra support to help him or her get the most out of school. Our Young Carers Policy says how we will help any pupil who helps to look after someone at home.

Our school:

- Has a member of staff with special responsibility for young carers and lets all new pupils know who they are and what they can do to help.
- Runs a PSHE lesson on the challenges faced by young carers during year ____.

27 Manchester City Council’s guidance to teachers - http://www.manchester.gov.uk/info/300/young_carers-support_and_advice/5175/young_carers
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- Can put young carers in touch with the local Young Carers Service. We can also put families in touch with other support services.
- Is accessible to parents who have mobility and communication difficulties and involves them in parents’ evenings.
- Respects your right to privacy and will only share information about you and your family with people who need to know to help you.
- Will consider alternatives if a young carer is unable to attend out of school activities e.g. detention, sports coaching, concerts, due to their caring role
- Allows young carers to telephone home during breaks and lunchtimes.
- Can give parents advice about how to get their children into school where transport is a problem.

5.4.10 The Commission encourages more training for teaching staff to raise awareness of young carer issues in schools. Teachers need to be made aware of the possible impact caring responsibilities may have on pupils’ behaviour or performance, and how they can identify and support these pupils. The Learning Trust has previously run training sessions for teachers on young carers but was unable to provide information about the number of teachers that have attended these training sessions, or how many of these sessions they have run in recent years. This training was not delivered in 2011 and all non-mandatory training is now part of the traded services offer to schools in the borough. However the need for schools to be aware of and consider the risks to and the needs of young carers is emphasised in the Nominated Safeguarding Children’s Advisors’ (NSCA) training which is a mandatory requirement for all schools and is refreshed at least every two years for every NCSA. A rolling programme of this training is provided. There are records of all schools attending the Learning Trust’s training but schools can choose to deliver the training with alternative providers.

5.4.11 The Commission encourages a school’s nominated lead teacher for young carers to attend training on young carers so that they can they pass this training on to the other teachers in a school and be properly able to provide advice about support for young carers to other staff. Any training that is provided to teachers should be developed with the young carers service and young carers in the borough to ensure it addresses the points that most matter to young carers when they are at school.

Recommendation Six

The Commission agrees with The Children’s Society and The Princess Royal Trust for Carers that “significant, positive and lasting changes can be made to the lives of young carers and their families if every school designates a committed and well informed School Lead for Young Carers.
who has the ability to inspire, lead and support all staff, governors, pupils and parents to recognise and meet the needs of young carers”.\textsuperscript{29}

The Commission recommends there is a nominated lead teacher for young carers in every Hackney school.

The lead teacher should:

- be responsible for raising awareness of young carers within the school
- attend training on young carers and cascade this training to other teachers and support staff in the school
- be able to provide advice to other school staff about young carers and providing flexible support to these pupils because of their caring responsibilities
- be an approachable and known contact point for young carers to speak to about their home situation and any additional support they may need
- make contact with Hackney Young Carers Project so the project knows who to contact regarding young carers in each school in the borough

5.4.12 There was concern amongst some members of the Commission after informal conversations with some headteachers and governors in the borough that some schools and governing bodies might not acknowledge that there are many, or indeed any, young carers at their school. Young carers can often be deeply hidden but according to estimates based on recent research, 1 in 12 secondary school pupils are a young carer, therefore statistically all schools in Hackney include young carers amongst their pupils.\textsuperscript{30} The Commission feels it is important to use the experiences of real young carers in the borough to open the eyes of school governors to young carer issues and show how flexible support measures can have a real impact on their lives and education. The young carers that attended one of the Commission’s formal meetings spoke eloquently and passionately about their experiences at school, their home situations and the wider support they have received, as well as their suggestions for how support for young carers, especially in schools, could be improved.

5.4.13 As it would be difficult to facilitate awareness raising sessions for each governing body in the borough, the Commission believes that a session should be run at a Hackney School Governors Association (HASGA) meeting as this body has governor representatives from many schools in the borough, and young carers from Hackney Young Carers Project should be invited to talk about their experiences of being a young carer and their school life. These governors can then spread what they have learnt to

\textsuperscript{29} The Princess Royal Trust for Carers and the Children’s Society (2009), School Lead for Young Carers and their Families – An exemplar job description

\textsuperscript{30} BBC News (November 2010) Number of child carers ‘four times previous estimate’ http://www.bbc.co.uk/news/education-11757907
governing bodies around the borough, and subsequent information sessions could be organised for teachers and governors at specific schools.

**Recommendation Seven**

The Commission recognises the importance of school governing bodies in managing the progress of a school and making a significant contribution to the leadership and management of a school. The Commission believes that more school governors need to be made aware of the challenges many young people face in school because of their caring responsibilities, and how providing flexible support can help them achieve their potential.

The Commission recommends that school governing bodies appoint a lead governor for young carers to help promote young carer awareness and support within schools. The Commission also suggests an awareness raising session about young carers could be included in a future HASGA (Hackney School Governors Association) meeting. This session could include young carers talking about the problems they have in school and what would help them.

5.4.14 The Princess Royal Trust for Carers proposes that schools should consider using a proportion of the Pupil Premium to improve the life chances of pupils who are young carers and who are likely to constitute a significant number of those pupils identified through the free school meals indicator.

5.4.15 There is currently no data available for the percentage of young carers who are on free school meals. This would be difficult to arrive at since many young carers are not known to schools in the first place. However, although not all young carers come from low-income families, the links between poverty and disability strongly suggest that many young carers will be picked up by the free school meal indicator and so would benefit from the Pupil Premium. In research\(^{31}\) into the circumstances of over 1000 young carers, only 4% of the adult family members looked after by young carers were in employment, indicating that many are likely to be on low incomes.

5.4.16 A short paper produced by The Princess Royal Trust for Carers highlights how investing some of the Pupil Premium to support young carers is "low cost, cost effective and targeted at an appropriate pupil group". It suggests that by using a small proportion of the Pupil Premium to support young carers, schools can mitigate some of the inequalities and barriers that young carers face, raise pupil attainment and improve the life chances for this significant and vulnerable group. The paper suggests the following low cost solutions which can be implemented by schools, using the Pupil Premium, to support young carers’ needs in a preventative way:

- A school lead with responsibility for young carers

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\(^{31}\) Dearden, C. and Becker, S. (2004), *Young Carers in the UK: The 2004 Report*
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- Staff and governor training
- Development of school literature and website
- Coordinating a weekly support group for young carers

5.4.17 In the Commission’s previous review of Achievement at Key Stage 2, one of the recommendations aimed to ensure schools use Pupil Premium funding to narrow the gap between the disadvantaged children the funding is designed to support and their peers. The Commission encourages schools in the borough to consider using Pupil Premium funding to raise awareness of and support young carer needs.

Raising awareness amongst pupils

5.4.18 All of the young carers the Commission spoke to were very keen that there should be more information available in schools about young carers and the support available to them. They suggested that awareness should be raised of young carer issues like awareness is raised of bullying: through assemblies, workshops and themed days or weeks.

‘If a new young carer starts at my school there is no way they would know about this project as there are no posters or information about it anywhere. They won’t know there’s a group to help them and will think they’re alone.’

(A young carer talking about the lack of information available at schools, in particular about Hackney Young Carers Project)

5.4.19 Hackney Young Carers Project sends a mail-out with a newsletter, posters and information about Hackney Young Carers Project to every school in the borough every term but none of the young carers have ever seen posters displayed at their schools. All of the young carers thought there should be posters, leaflets and other information available at their schools about support for young carers as well as a phone number on a card to ring for advice. After participating in the focus group and speaking to the Commission about increasing awareness of young carers in schools, one of the young carers, with the support of a worker from Hackney Young Carers Project, was inspired to produce a notice board about young carers to display at her school with information about the support available.

“You feel like an outsider and no one knows or understands what you’re going through. You keep your life a secret otherwise people will tease you, even though you should tell everyone so they understand.”

(A young carer talking about school)

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5.4.20 Some of the young carers suggested they could go to other schools to talk about their experiences as a young carer so that other young people understand more about what it is like to have caring responsibilities within your family. They would feel more comfortable talking about their experiences in workshops or assemblies to pupils who are not their immediate peers at their own schools. As well as raising awareness amongst all pupils of the routines and day to day lives of young people with caring responsibilities, this will also help more young people to self-identify as young carers as they will be able to relate to the experiences the young carers would talk about. The research by Hackney Youth Parliament as well as comments from some of the young carers highlighted that many young people with caring responsibilities might not necessarily self-identify themselves as ‘young carers’, and therefore by talking more about these issues in schools and the support available to young carers they may be more likely to come forward to talk to teachers or their peers about their home situations.

5.4.21 A few of the young carers Members heard from suggested that there needs to be more education generally in schools about the issues that might lead to young people taking on caring responsibilities such as disability or mental illness as young people do not understand these issues. Young carers often felt that it should not be their job to have to explain these issues to their peers as they should have some understanding of them to start with. This can make it more difficult for young carers to talk to their peers about their home situation. Some young carers commented that they want to tell people about their situation but pupils need to be taught basic information first, for example about what autism means, and teachers should take the time to teach about differences in families and home lives. They fear they will be teased or people will start rumours if they talk about their home situation before other pupils understand more about the facts of illnesses or disabilities.

5.4.22 In the research carried out by Hackney Youth Parliament (HYP) that contributed to this review, the HYP members were interested in whether young people realise they are a young carer. Through interviews with young people in the borough they asked questions about young people’s tasks at home and whether they care for anyone in the household, before asking whether a young person considered themselves a ‘young carer’. 25% of the males and 17% of the females questioned considered themselves to be a young carer (out of a small sample of 77 young people that took part in the research). Hackney Youth Parliament recommend more work is done to raise awareness of young carers and information should be provided on PSHE days in all Hackney schools by young carers. HYP believe that this will help more young people to self-identify as young carers and access support as they might not recognise that their caring responsibilities are more than what other young people have to do, or that other young people have similar home situations to them, or that there is support available to them.

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34 The report of Hackney Youth Parliament’s research into young carers is available in Appendix One.
Recommendation Eight

The young carers the Commission spoke to during this review all suggested that schools need to help in raising awareness of young people with caring responsibilities amongst other pupils, as well as doing more to discuss the reasons behind caring responsibilities including disability, mental health and substance misuse problems.

(a) The Commission recommends schools work to raise awareness amongst pupils of young carers for example through assemblies, PSHE lessons, or days to raise awareness of young carers as with anti-bullying days. Young carers suggested that they could go into other schools to talk about their experiences so that other young people understand more about what it is like to have caring responsibilities.

Hackney Young Carers Project regularly sends information and posters about the project to every school in the borough but this is rarely displayed in schools as none of the young carers the Commission spoke to, who attend a wide variety of schools across the borough, said they had ever seen any information about young carers or the support available displayed at their schools.

(b) The Commission also recommends that schools should display posters about young carers with the contact details for Hackney Young Carers Project and the phone number for Hackney Carers Helpline. These posters should also include the name of the lead teacher for young carers at that school and how they can contact them so young carers know there is someone at the school they can talk to.

Offering more flexibility at schools

‘I'm late for school a lot because my mum’s carer doesn’t turn up on time and I get detention if I'm late more than twice in one week. My mum has called my school to explain it to them but I still get given detention. They don't care.’

(A young carer)

5.4.23 All of the young carers talked about problems with homework deadlines, school punctuality and the inflexibility of teachers around these issues even if they do know they are a young carer. The Commission was concerned to hear this has led to reluctance amongst some young carers to tell other teachers as telling one teacher at their school about their caring responsibilities had made no difference, and for example they are still being given detention for being late as they have to take their younger brother to school every morning.
‘I’m late nearly every day as I have to take my 7 year old brother to school and he often doesn’t want to go. I’ve talked to my Head of Year and he knows I’m a young carer but he never says anything to help. Then they give me detention after school even though I ask for lunchtime detention because I need to pick my brother up from school. They just don’t listen.’

(A young carer)

‘I wish school would let us explain why we’re late but they never want to know. They don’t care about our lives before the school day starts.’

(A young carer)

‘I have so many other things to do during the week that I only really have time to do my homework at the weekends but teachers don’t seem to understand that or really care.’

(A young carer)

5.4.24 Many young carers complained about the inflexibility of homework deadlines to allow them to balance their studies with their caring responsibilities. They wanted teachers to be more flexible so they can complete their homework at the weekend as many do not have time during the week because of their other commitments. All of the young carers were determined to not get behind in their studies but were finding balancing school and home life difficult and felt that if teachers were more understanding to their situation it would make their lives a lot easier. Young carers also talked about wanting to be able to ring home during the school day to check their family member was ok but complained that they are not allowed to at their schools as phones are banned.

5.4.25 Some of the parents of young carers had told teachers at their children’s schools about their home situation and asked for more flexibility so their children can complete their homework at the weekends, but complained that the teachers ‘did not care’ and nothing changed. It is a big step for a young person or parent to tell a school about being a young carer and Commission members were disappointed to hear that some schools are not responding positively to this information and working with the families to provide flexible support for young carers where necessary.

5.4.26 It may be helpful for schools to introduce a young carers card scheme and this will help young people identify themselves and access facilities such as a phone or an early lunch pass without having to explain their personal circumstances.35 A young carers card scheme has been introduced in Kirklees and it was also suggested by young carers in Swindon and they were involved in designing the cards to be used in schools (further information is available in Appendix Two).36

36 Further information about the young carers card scheme in Kirklees is available - http://www.kirklees.gov.uk/community/youngKMC/youngcarers.pdf
Case Study – Bridge Academy

Bridge Academy has introduced a number of flexible measures to help young carers at the school including:

- Adjusting the timetable for young carers and if necessary, reducing their class timetable – instead a young carer may work one to one and sit with the Student Support Manager if they need quiet time away from their class. The Student Support Managers (there is one Student Support Manager for each year group at the school) talk to the young carer to pinpoint the lessons they are having problems with.
- Informing class tutors of a young carer’s status, but not all teachers
- Young carers can go to their Student Support Manager’s office in breaks and lunchtime to use phones to ring home
- Flexibility around punctuality for young carers
- Student Support Manager offices are open and young carers can come and talk at any time

Following a meeting with the Chair of the Commission as part of this review, Bridge Academy has introduced further measures to support young carers and raise awareness:

- They have added a tick box for young carers on their transition forms to ensure that the information is gathered from primary schools for when pupils begin in year 7.
- An awareness assembly on young carers as an annual event.
- The academy’s next ‘drop down day’ (when all pupils are taken off the normal timetable once every half term to focus on PSHE topics) on 1st February will be based around the topic of young carers and they were very interested in young carers from other schools coming in to share their experiences.
- After a discussion about ‘hidden’ young carers, they agreed to display the posters and information sent to them by Hackney Young Carers Project – previously Student Support Managers had been going through this information with individual pupils that they were aware were young carers.

Recommendation Ten

The Commission heard many times during this review about how schools could help young carers more by being more understanding about their additional responsibilities and by raising awareness about young carers. Young carers listed problems with homework deadlines, punctuality, after school detentions, and access to phones during school time and complained
about the inflexibility of teachers around these issues even if they know they are a young carer.

The Commission recommends that schools consider flexible measures to support young carers, for example flexibility around homework to take into account a pupil’s caring responsibilities, understanding if they have problems with punctuality as they might have to take younger siblings to school, and allowing access to a phone during school hours if young carers are worried about a relative at home. Measures such as these can all make a huge difference to young carers at school and help them in attending regularly and not falling behind.

Transfer from primary to secondary school

5.4.27 When moving from primary to secondary school, the location of a new school may be a major consideration for families with young carers. Young carers may be responsible for taking younger siblings to and from school and therefore it is helpful if their secondary school is close to their secondary school to reduce the risk of them being late to school themselves. A young carer’s home responsibilities in the morning may make it difficult for them to leave home early enough to reach a further-away school on time. It may also be necessary to keep the distance between their home and their school as short as possible so their journey time home after school is short and they can get home to be with their family member if needed.

5.4.28 The school admissions service run by the Learning Trust is responsible for co-ordinating the admissions process for children starting school for the first time as well as the primary to secondary transfer process. The Commission wants the service to consider how young carers’ needs can be taken account of in the transfer to secondary school.

5.4.29 The move from primary school to a much bigger secondary school is often difficult for pupils and it is important that primary schools pass on information about young carers when they transfer to their new secondary school. This will ensure that secondary schools understand the young carer’s home situation and additional responsibilities and can put any necessary support in place when they start at their new secondary school. Secondary schools gather information from primary schools about their new pupils before they start in Year 7, either in face to face meetings with staff from a primary school or using some form of transition form. Primary schools pass on information about any additional support needs pupils may have and a pupil’s status as a young carer may be discussed but sometimes this may get overlooked. The Commission recommends that secondary schools include a tick box about young carer status on the transition forms they use for gathering information so that information about young carers is always passed on when they transfer to secondary school.
**Recommendation Nine**

When moving from primary to secondary school, the location of a new school may be a major consideration for families with young carers, because of the distance from home to school, or siblings’ schools if they are responsible for taking younger siblings to and from school.

(a) The Commission recommends the school admissions service be asked to consider how young carers’ needs can be taken account of in the transfer to secondary school.

It is important that primary schools pass on information about young carers onto secondary schools when they transfer to their new school. This will ensure that secondary schools understand the young carer’s home situation and additional responsibilities and can put any necessary support in place when they start at their new secondary school.

(b) The Commission recommends that secondary schools include a tick box about young carer status on the transition forms they use for gathering information from primary schools about pupils beginning in Year 7 so that information about young carers is passed on when they transfer to secondary school.

**Sharing good practice with other schools**

5.4.30 The Commission was very interested to hear about an initiative recently introduced in Swindon to assess schools against set criteria for support provided to pupils who are young carers. Schools in the area can achieve bronze, silver or gold awards depending on the level of support they provide. The awards scheme began in 2010/11 and is run by the local Young Carers Project (Swindon Young Carers) and additional funding for the initiative is provided through the project’s industry partner Zurich. The scheme provides a good way to engage with schools and make them understand the importance of supporting young carers in the area.

5.4.31 Schools commit to providing better support to young carers and are accountable to the awards scheme if their compliance to the standards slips. Young carers are asked to report back on the school they attend, so they have the power to directly influence whether their school receives or keeps the award. Primary and secondary schools are given a recognised way of demonstrating the support they provide to young carers.

5.4.32 Almost all schools in the area are now beginning to engage with the standards, and all now acknowledge that some of their pupils may be young carers and recognise these pupils as vulnerable. The Young Carers’ Development Worker developed a set of standards in consultation with
young carers. She visits schools to explain what they need to do to achieve the standards, and how they can achieve the award. She works closely with schools to ensure the standards and policies are embedded. However, the emphasis is on the school taking the work forward and the young carers’ service acts only as facilitators. The young carers’ service will assess what level the school is currently working at, and will help them reach an action plan for moving on to a higher level.

5.4.33 Overall the initiative has focussed schools in Swindon on providing better support to young carers and has shared expertise from the Young Carers Project with the schools, as well as offering the opportunity to share best practice between schools in the area. Young carers have been involved throughout and have been involved in developing the standards for the award categories, writing a piece for the website, designing ID cards that young carers can use to quickly and easily identify themselves in schools when needed, and ongoing evaluation of schools working towards the standards.

5.4.34 Further information about how this scheme works in Swindon is available in Appendix Two.

5.4.35 A borough-wide recognition scheme for the work being done in schools to support young carers was discussed in the meeting with representatives from Bridge Academy and they thought the idea sounded very good and they were interested in participating in such a scheme.

5.4.36 With the envisaged reduced role of local authorities in schools there is an increasing importance on schools learning from each other and sharing best practice. The Commission believes that a borough-wide recognition scheme for the work being done in schools to support young carers would raise the profile of this often overlooked group of pupils and share good practice between schools.

Recommendation Eleven

Innovative approaches need to be taken to encourage schools to recognise the additional needs of young carers and provide appropriate support for this group of pupils. A borough-wide recognition scheme for the work being done in schools to support young carers would raise the profile of this often overlooked group of pupils and share good practice between schools. This scheme could be modelled on the one introduced in Swindon in 2010/11, and further information about how this scheme works in Swindon is available in Appendix Two.

The Commission recommends an award scheme (bronze to gold) is introduced for schools for the work they do to support young carers, similar to the scheme introduced in Swindon. This would provide recognition for this work and would be a way of schools sharing good practice with other schools.
5.5 **Adult Social Care and Children’s Social Care**

5.5.1 A recurring theme during this review was the lack of communication and coordination between services for adults and services for children and young people. There needs to be an increased awareness of young carers across both of these services so that support can be provided to families to reduce or prevent children and young people taking on inappropriate caring responsibilities.

5.5.2 The Commission feels that there needs to be increased awareness of service users, for example disabled parents, as parents (where relevant) and consideration of an adult’s condition on the children within a family. We heard from representatives from the Council’s Adult Social Care division who said the service is proud of identifying carers at the outset of providing support and that adult social workers take into consideration the family as a unit during assessments. However the Commission is concerned that this approach has not filtered down to nor been embraced by all adult social care staff and the focus is still too much on the adult they are supporting and not enough consideration is given to the implications of their illness or disability on the wider family unit and in particular the children within a family that may be taking on caring responsibilities. The parents the Commission spoke to during this review were very critical of social workers, in particular adult social workers, and said they do not consider the role their children play in caring for them or offer the support their family needs. Many suggested that funding for social work should be reduced and the funding be given instead to young carer services which are far better at addressing their family’s needs.

‘Adult social workers are bad enough when dealing with adult carers but just don’t care or acknowledge young carers within a family and don’t see it as their job to help. We heard about the Young Carers Project and were told by the adult social worker that we could self refer so we did. They didn’t even encourage us or point us in the right direction for help and didn’t even bother to make the referral, we had to do it ourselves.’

(A parent of a young carer)

5.5.3 Awareness should be raised of young carers amongst staff in adult and children’s social care through training and distribution of information materials. All staff should be trained to identify young carers and know how to refer them onto relevant support. Training could take the form of briefings at team meetings where young carers’ issues and the impact of an adult’s illness or disability on the whole family are considered, and guidance given about identification of young carers and referral pathways for further support.

5.5.4 The Commission strongly supports the development of a whole family approach to offering co-ordinated assessments and services to support the person with care needs and their family as well as the young carer. As part of the Family Pathfinder work, the previous Government provided funding to eighteen local authorities to develop systems and support to address the
needs of families with young carers. The report of this work explores some of the positive outcomes linked to taking a family focused approach and showcases good practice developed in this field. Adult social workers should be more active in their role in considering and supporting the whole family and there needs to be more coordination with support offered through children's services. Adult social workers should also include young carers' views in assessments of disabled parents and the family’s wider needs. The Whole Family Pathway is a useful online resource directing practitioners to support for young carers and their families.

5.5.5 The Princess Royal Trust for Carers encourages that families need to be supported to use individual budgets to prevent or reduce inappropriate caring roles for children and young people. The Commission agrees with this proposal.

5.5.6 Hackney Carers Strategy (2007 – 2010) included a comprehensive Young Carers Strategy prepared by a representative from Children’s Services. However the Commission heard that activity related to young carers slowed down in Children’s Services from 2008-9. A multi-agency Carers Partnership Board was established in 2007, but attendance on this board from Children's Services has decreased in the last year. It was acknowledged by officers during this review that there has not been enough focus on young carer issues in recent years in Children’s Services, and not enough joined up working with adult services around this topic. There have been problems with previous attempts at joint working between adult and children’s services such as a Young Carer conference in 2009 – 10 that failed to take place. The Commission wants to see much stronger joint working and communication between adult’s and children’s services.

5.5.7 An updated Hackney Carers’ Strategy for 2011-2014 has recently been published. This strategy was prepared by Adult Services and does not include young carers, only applying to adult carers in the borough. The Commission is concerned that there were difficulties in engaging Children’s Services in the preparation of the updated Carers Strategy. The Commission feels strongly that there should be more coordination of adult carer and young carer work / support services across the Council.

Memorandum of Understanding

5.5.8 A model Memorandum of Understanding between Statutory Directors for Children’s Services and Adult Social Services on Working Together to Support Young Carers was produced by the Association of Directors for

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37 Department for Education (2011), Improving support for young carers - family focused approaches
https://www.education.gov.uk/publications/RSG/AllPublications/Page1/DFE-RR084

38 The Children’s Society, Whole Family Pathway – A resource for practitioners -


40 London Borough of Hackney, Hackney Carers’ Strategy 2012– 2014:
http://mginternet.hackney.gov.uk/documents/s20674/Hackney_Carers_Strategy_Appendix%201.pdf
Adult Social Services (ADASS) and Association of Directors of Children Services (ADCS) in December 2009. The Commission was told that the Hackney version of the joint agreement is focused on pulling out the key ways of working from the model Memorandum of Understanding and was prepared jointly by representatives from Adult and Children’s Services. Hackney’s version of the agreement is included as Appendix Three. This agreement was signed by senior managers from adult and children’s services in June 2011.

5.5.9 The Commission is concerned that this joint agreement has not been promoted within the relevant services and staff are unaware of its existence. A key suggested recommendation from external providers of evidence for this review, such as Hackney Young Carers Project and the Chair of the National Young Carers Coalition, was that the Memorandum of Understanding needs to be adopted and implemented in Hackney (which signals commitment and understanding at a strategic level). Commission Members were surprised to learn that although a Hackney version of this agreement has been produced and signed up to by senior managers in adult and children’s services, no further work appears to have taken place in promoting this agreement and the partnership working it supports. This agreement needs to be embedded in the work of adult and children’s services.

5.5.10 The Commission is also disappointed that the detailed model Memorandum of Understanding published by ADASS and ADCS has not been fully adopted by the Council. The Hackney version of the agreement is only one page long (included as Appendix Three, whereas the national model agreement is far more comprehensive and covers many areas related to young carers, such as information sharing, language barriers, funding responsibilities, safeguarding, health and education. In addition, the first paragraph of the model protocol clearly states that the ‘overriding priority is prevention: ensuring young carers are actively protected from excessive or inappropriate caring’ and preventing children from being in the situation where they become a young carer. The Commission believes this focus on ‘prevention’ does not come across in Hackney’s version of the agreement.

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Recommendation Twelve

There appears to be a lack of awareness of young carers amongst social workers in the borough. In particular the parents the Commission spoke to complained about adult social workers and said they do not consider the role their children play in caring for them or offer the support their family needs. There were also complaints about the lack of communication between adult and children’s services.

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(a) The Commission recommends that awareness is raised of young carers amongst staff in adult and children’s social care, through training and distribution of information materials. All staff should be trained to identify young carers and know how to refer them onto relevant support.

(b) Adult social workers should, where relevant, think of service users as parents and consider the impact of an adult’s condition on the children within a family. The Commission recommends the importance of the whole family approach and recommends that young carers’ views are included in assessments of disabled parents and the family’s wider needs.

Young Adult Carers

5.5.11 It is only recently that the specific needs of young adults in their late teens and their twenties have been recognised. A pioneering report, Young Adult Carers in the UK: experiences, needs and services for carers 16 – 24, was produced by Saul Becker and Fiona Becker at the University of Nottingham and published by the Princess Royal Trust for Carers in 2008. According to this report, there are approximately 230,000 young adult carers (aged 18 – 24) in the UK, which means that 1 in 20 people in this age group are caring for someone. Carers in this age group have traditionally fallen between two stools, namely young carers’ projects which support those under 18 and adult services which typically support middle aged and elderly carers. The research discovered that few carers in this age group take advantage of the services provided for adult carers, and many of them are unaware of support available for themselves and the person they are caring for. The report highlights that:

“The decisions made at this age, including education and employment, are some of the most important and far-reaching decisions taken at any time of life. Yet disadvantaged young adults, including young adult carers, are often least equipped with the skills required.”\textsuperscript{42}

5.5.12 The Young Adult Carers Project at City and Hackney Carers Centre is one of the very few which have been set up anywhere in the UK, aiming to give young adult carers the support they need to ensure that they do not miss out on vital opportunities which could affect their future prospects and their overall wellbeing.

5.5.13 The Young Adult Carers Project at City and Hackney Carers Centre provides practical and emotional support for young adults between the ages of 16 – 28 who are caring for a relative or friend with a long-term illness or disability. The specific objectives of the project are to:

\textsuperscript{42} S. Becker & F. Becker (2008), Young Adult Carers in the UK: experiences, needs and services for carers 16 – 24
Appendix A

- provide advice, information and emotional support to young adult carers on both an individual and group basis
- assist young adult carers into education, work and leisure
- engage young adult carers previously registered at the Carers Centre but not actively involved
- reach out and identify other young adult carers and receive referrals from other local agencies
- provide documented evidence of innovative ways to engage young adult carers from socially and ethnically diverse backgrounds.

5.5.14 The project has been running since May 2009 and is funded by a special one-off grant from the Princess Royal Trust for Carers. A total of £65,735 was awarded for a three year project; this funding runs out at the end of March 2012. There is one part-time project worker who works two days per week.

5.5.15 The project in Hackney also specifically set out to meet the needs of young adult carers from the very diverse ethnic and cultural groups represented locally. The research undertaken by Saul and Fiona Becker, while valuable in itself, was limited by the fact that most of the young adult carers they spoke to were from a white UK background. There appears to be an assumption within the research that all young adult carers are single, have no children of their own, are living at home with their family of origin, and aspire to higher education and paid work. City and Hackney Carers Centre have found that within this borough there is much greater diversity of personal circumstances amongst this group of carers. For example, some young women carers are full-time home-makers who are married and caring for disabled children of their own or perhaps for a parent-in-law, and are not intending to look for paid work outside the family.

5.5.16 The Young Adult Carers Project also found that there were a substantial number of carers in their mid-to-late twenties who had not had any targeted support throughout their adult life, who had missed out on earlier education and job opportunities and valued the extra support the project could now offer. For this reason, City and Hackney Carers Centre extended the upper age limit for the project from 25 years to 28 years.

**The young adult carers**

In October 2011 there were 109 young adult carers on the register for the project, of whom 82 are female and 27 male. The ethnic breakdown is as follows:

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black African</td>
<td>15</td>
</tr>
<tr>
<td>White British</td>
<td>14</td>
</tr>
<tr>
<td>Black Caribbean</td>
<td>19</td>
</tr>
<tr>
<td>Turkish</td>
<td>23</td>
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<tr>
<td>Other Black</td>
<td>1</td>
</tr>
<tr>
<td>Other White</td>
<td>1</td>
</tr>
<tr>
<td>Bangladeshi</td>
<td>11</td>
</tr>
<tr>
<td>Mixed background</td>
<td>6</td>
</tr>
</tbody>
</table>
Indian 9
Pakistani 1
Other South Asian 1
Other Ethnic groups 8

The age breakdown is as follows:

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of young adult carers</th>
</tr>
</thead>
<tbody>
<tr>
<td>16 – 17</td>
<td>3</td>
</tr>
<tr>
<td>18 – 21</td>
<td>33</td>
</tr>
<tr>
<td>22 – 25</td>
<td>39</td>
</tr>
<tr>
<td>26 – 28</td>
<td>34</td>
</tr>
</tbody>
</table>

5.5.17 The carers are looking after relatives with a variety of debilitating conditions. A very high number of young adult carers are looking after a parent (usually a single mother) with a long-term mental health condition. Many are caring for relatives with complex conditions, for example both a physical disability such as arthritis or diabetes and a mental health condition. A substantial number of the young adult carers also suffer from ill health themselves (for example asthma or epilepsy) and many are being treated for depression. Some have been caring for a parent ever since they were young children and in many cases this has disrupted their education and put them at a disadvantage in terms of the job market.43

5.5.18 The Commission was interested in the support provided to young adult carers by the project at City and Hackney Carers Centre and in particular the transition period for young carers as they move to adult carer services. It also seems that many of the young adult carers the project is in contact with did not receive adequate support when they were young carers and therefore have missed out on educational, training and life opportunities, and are now in greater need of support. This highlighted to the Commission the importance of providing support to young carers through schools and other agencies at an earlier age to reduce or prevent them taking on caring responsibilities and ensuring they have access to the same opportunities as their peers.

5.5.19 Home circumstances, whatever they may be, inevitably have a lasting impact on the life of a young person. Having caring responsibilities at an age when one’s peers are, literally, care-free is always likely to be a life-shaping experience. It would be facile to suggest that the impact of being a young carer could ever, or should ever, be completely mitigated. Moreover many of the young carers we have met do not wish to walk away from what they prize-worthily see as their family responsibilities. But they would like to feel that the contribution they make to the lives of their families is recognised and valued by society; they want to be able to enjoy their childhood and

43 Further information about the Young Adult Carers Project at City and Hackney Carers Centre, including case studies of young adult carers using the project, is available here - http://mginternet.hackney.gov.uk/documents/s18576/For%20Item%209%20-%20Submission_from_Young_Adult_Carers_Project.pdf
adolescence; and they do not want to feel that their life choices have been
unduly limited by their role as young carers. The Commission takes the view
that these aspirations are entirely legitimate, and that the community as a
whole and through its social agencies ought to satisfy them.

5.5.20 The Commission is pleased that there is a commitment to young carers
approaching adulthood in the refreshed Hackney Carers Strategy 2011-14.
The strategy commits to: ‘Young carers approaching adulthood experience a
positive transition to adult services for themselves and their cared for’. The
commitment includes information about how this will happen, how this will be
measured and when it will be completed by.  

5.5.21 The Commission recognises that the support needs of a young adult carer
(aged 16 – 25 years) may be very different to the support needs of an 80
year old who is caring for their partner. The Commission supports
consideration being given to the needs of young adult carers when planning
and commissioning support services for carers.

Recommendation Thirteen

National research about young adult carers (aged 16 – 25 years) has shown
that carers in this age group have traditionally fallen between two stools,
namely young carers’ projects which support those under 18 and adult
services which typically support middle aged and elderly carers. This age
group is particularly important as the report points out that: “The decisions
made at this age, including education and employment, are some of the
most important and far-reaching decisions taken at any time of life. Yet
disadvantaged young adults, including young adult carers, are often least
equipped with the skills required.”

The Commission recommends that the needs of young adult carers
(aged 16 – 25 years) are considered when planning and commissioning
support services for carers. The Commission also recommends that
adult and children’s services work together to ensure the transition to
adult carer services is a smooth positive experience for young adult
carers.

Hackney Carers Helpline

‘Every school in Hackney should have pamphlets about being a young
carer and a card with a number on it for you to ring if you need to speak
to someone and they can link you to the Young Carers Project.’
(A young carer)

44 Further details are available in the refreshed Hackney Carers Strategy 2011-14:
http://mginternet.hackney.gov.uk/documents/s20674/Hackney_Carers_Strategy_Appendix%201.pdf
45 S. Becker & F. Becker (2008), Young Adult Carers in the UK: experiences, needs and services for carers 16 – 24
5.5.22 Hackney Carers Helpline (020 8356 5054) is run by the Council’s Contact Centre on behalf of the carers support team in adult social care. The helpline has been running for a couple of years and provides immediate one to one advice to adult carers or signposts them to further support. It is promoted on all publications in the borough related to adult carers as well as through specific leaflets. The Commission believes this helpline should be utilised to also provide advice to young carers in the borough and signpost them to relevant support services.

5.5.23 The staff who currently run this helpline have received extensive training on adult carers but only minimal training on young carers, therefore further training on young carers should be arranged so that they can provide the necessary support and advice. A mystery shopping exercise is due to be carried out using carers in the next few months to assess the quality of the advice given through Hackney Carers Helpline, and to identify any training needs of the staff that run the helpline. The Commission suggests that a mystery shopping exercise should also be carried out using young carers to identify the training needs of the helpline staff regarding advice provided to young carers.

5.5.24 There is a fear amongst some services about involving social services in a family’s situation, and the Commission was told by a GP representative that she had considered what she would say and offer next time she was in the situation where she suspected a child was carrying out caring responsibilities in the family. She suggested it would be useful to be able to give children and young people a card with a phone number they can ring for them to talk through their situation. The Commission agrees that it would be helpful to provide an information card to relevant services to distribute to suspected young carers and this card should include the number for Hackney Carers Helpline.

Recommendation Fourteen

Hackney Carers Helpline is run by the Hackney Contact Centre and provides immediate one to one advice to adult carers or signposts them to further support. It is promoted on all publications in the borough related to adult carers as well as through specific leaflets. This helpline should be utilised to also provide advice to young carers in the borough and signpost them to relevant support services.

(a) The Commission recommends the Hackney Carers Helpline should be utilised to also provide advice to young carers in the borough and signpost them to relevant support. The staff who currently run this helpline have received extensive training on adult carers but only minimal training on young carers, therefore further training on young carers should be arranged so that they can provide the necessary support and advice.
(b) The Commission recommends an information card is provided to relevant services that will come into contact with young carers with the contact details of Hackney Young Carers Project as well as the Hackney Carers Helpline phone number. This card can be distributed to young carers, or suspected young carers, by for example GP’s so that these young people know there is a number they can ring to receive advice and talk through their situation, and be signposted to further support.
5.6 **Health Services**

5.6.1 Health professionals, in particular GP’s, play an important role in identifying young carers and signposting them to further support. Information produced by the Children’s Society as part of their Include Project to help healthcare professionals who come into contact with young carers and their families states that “health professionals are likely to be the first people that a family turns to for help with an illness or disability.”

Whether health professionals work in a hospital or the community, with adults or children, they may be the only person who is able to ask the right questions to find out that a child is taking on caring responsibilities. The Commission is concerned that not enough consideration is given by health professionals to the role of children within a family taking on caring responsibilities because of a family member’s disability or illness.

_Raising awareness and identification of young carers_

‘My doctor knows my daughter is a young carer. I’ve told the school and the hospital as well but I’ve had to explain to them what a young carer is and what it means as there is not much awareness of it – they reply ‘what is a young carer?’ They should know more.’

(A parent of a young carer)

5.6.2 Health professionals should play a key role in identifying young carers when they come into contact with families. Health professionals have a responsibility and are in a key position to identify these vulnerable families and mobilise support services. Awareness needs to be raised of young carers amongst healthcare professionals through training and information materials.

_Do GP’s ask who is caring for you at home?_

‘No they never ask.’

‘No, the doctors don’t know or care what happens at home.’

‘GP’s just refer you on to specialists and give you medication. They just refer you onto someone else, they don’t ever ask about your children.’

‘GP’s don’t know as they don’t bother to ask.’

(Comments from parents of young carers in response to this question posed by Commission members)

5.6.3 The Commission heard concerns from parents that GP’s do not consider their care arrangements at home and therefore do not ask about the

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implications of their illness or disability on their children. There was concern amongst the Commission that some of the parents commented that they have to explain to healthcare professionals, such as GP’s or hospital staff, what a young carer is.

5.6.4 There is already an increasing awareness of adult carers amongst healthcare professionals but this needs to be expanded to also include young carers. Any training or awareness raising activities for staff should also highlight identification of young carers and the impact caring responsibilities can have on young people in terms of their life opportunities and health. Overall carer awareness training should include information about identification of adult and young carers, how to provide flexible support, and how to refer adult and young carers onto further support.

5.6.5 A lot of work has been done in making all healthcare staff aware of safeguarding children procedures and the need to contact children’s social care if necessary. However, the Commission believes there is confusion amongst health professionals about what to do in a situation where they suspect a young person has caring responsibilities within a family and does not meet children’s social care criteria. The Commission heard from a GP representative that she often comes across families where the parents do not speak English and their child is interpreting for them, or families where a parent has mental health or alcohol abuse problems and she suspects the child is taking on caring responsibilities. In these cases she often does not do anything or contact any other service as she does not know what to do. She told the Commission that suspects she could do more to help, and believes there is a big unmet need regarding support for young carers in the borough. The Commission was interested to hear this view and feels that more information needs to be provided to health professionals so they understand young carers’ issues, are able to identify young carers, and can refer them on to further support, for example through young carer services such as Hackney Young Carers Project.

5.6.6 A guidance document has been produced by the Children’s Society as part of their Include Project to help healthcare professionals who come into contact with young carers and their families: Supporting young carers and their families – Information for health care professionals. This helpful document includes background information about young carers for healthcare professionals, as well as information about identification and offering support once a need is identified. The guidance document also includes a list of ten things that healthcare professionals can do including:

- If a patient is discharged from hospital do not assume there is an adult at home to care for them. Ask the right questions.

- Use the notice board in your waiting area to promote sources of support for young carers and their families.

- When prescribing medication consider whether a young carer may be administering it and, if appropriate, offer training.
- Have a list of useful websites/leaflets that contain age appropriate information about disability and illness.

- Ensure that young carers know how to contact a doctor in an emergency.47

5.6.7 A number of these suggestions echo views heard by the Commission during this review about how healthcare staff can better support young carers.

‘It’s really annoying, they don’t talk to you directly and I need to know about my Nan’s medication.’

(A young carer when talking about their experiences with medical staff)

‘The doctors mainly just talk to my mum, even if I’m in the room, they feel they don’t have to explain it differently for me.’

(A young carer when talking about their experiences with medical staff)

5.6.8 The guidance document also highlights the need for medical staff to provide information about health issues or disability and suggests that they encourage their client to explain their health condition to their children or allow them to do so, in an accessible and appropriate way.

5.6.9 Some of the questions that trouble young people include:

- Can I catch it? Will it happen to me?
- What caused it? Why us? Is it my fault?
- Can I do anything to make it better?
- Will the person I look after get worse or die?
- What should I do in an emergency?

5.6.10 A doctor from CHYPS Plus (City and Hackney Young People’s Service) attends Hackney Young Carers Project to hold discussions with small groups of young carers to talk about any issues they may have or answer medical questions. There is also an anonymous post box for young carers at the project to post any questions and then the doctor answers them in the group. The Commission heard that a recent question in the group was from a young carer whose mother had cancer and they said they used the same spoons as their mother and asked whether they will also catch cancer. The Commission believes it is important that there is a space for young people to ask questions such as this and have someone to talk to. It is vital that young carers are able to have these conversations and ask these questions to their GP and GP’s can respond in an accessible and age appropriate way to reassure these young people and help them understand the illness or other problems involved.

Recommendation Fifteen

Information produced by the Children’s Society as part of their Include Project to help healthcare professionals who come into contact with young carers and their families states that “health professionals are likely to be the first people that a family turns to for help with an illness or disability.” Whether health professionals work in a hospital or the community, with adults or children, they may be the only person who is able to ask the right questions to find out that a child is taking on caring responsibilities. Timely intervention could prevent a child undertaking inappropriate levels of care.48

Parents told the Commission that there is a lack of awareness of young carers amongst the health professionals they come into contact with and they often have to explain to healthcare staff what a young carer is and what this means within their family.

(a) The Commission recommends that awareness is raised of young carers amongst all healthcare staff through training and information materials. Information material should include:

- identification of young carers
- referral pathways for support
- information about services for young carers, such as Hackney Young Carers Project
- ways of adapting services to support young carers, for example clearly explaining any medical problems to children and answering any questions, and involving young carers in discussions about medication where necessary.

(b) The Commission also recommends that there is a wider display of information materials on young carers in healthcare settings, for example on notice boards in GP surgeries, so that families and young carers know there is support available.

Support for health and wellbeing needs of young carers

5.6.11 A summary of research carried out looking at the health and wellbeing of young carers notes possible effects of caring responsibilities including:

- tiredness
- physical problems as a result of lifting parents with physical disabilities
- substantial numbers reporting stress, anxiety, low self-esteem and depression

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Appendix A

- substantial numbers of young carers reporting mental health and related problems, such as eating problems, difficulty in sleeping, and self harm.\textsuperscript{49}

5.6.12 The Commission is interested in recent research published in December 2011 that studied the impact and effectiveness of 25 multi-agency projects funded by the Department of Health, set up to explore new ways of supporting carers. Six of the chosen sites piloted annual health checks for carers to help them stay well. In the six Health Checks sites, the new approaches developed were guided by the aims for carers’ health and well-being set out in the 2008 National Carers’ Strategy and the specification in the prospectus for Health Checks site bids. ‘Health checks’ or ‘health and well-being checks’ generally involved an examination of the carer’s physical health and an exploration of broader well-being factors relevant to each individual carer. Three of the health check sites targeted young carers and young adult carers through extensive work with schools, colleges, universities, and youth centres. Initial difficulties, such as a lack of knowledge of carers among school staff, were overcome by raising awareness and building relationships between the site and school staff. In the Devon site, work was carried out with young carers to design a health day at a local sports centre where health checks were delivered, and the site staff reported that this was well received.

5.6.13 Most survey respondents accessing the Health Checks sites had seen a healthcare professional in the past six months, but the new emphasis on wellbeing and the more holistic approach taken in the programme was widely welcomed. The research showed that the health checks offered had a positive impact on a large minority of those supported. A quarter said that how they looked after their health and the amount of exercise they took had improved. Most had been signposted to additional services, though the responses of a few suggested care needed to be taken to ensure that other support for carers was appropriate.\textsuperscript{50}

5.6.14 Following evidence heard during this review and supported by this research, the Commission supports establishing an annual invite for a health and wellbeing check for young carers by their GP’s. It is clear that these young people will not usually go to see a GP unless something is seriously wrong, so these annual checks will give young carers an opportunity to talk about their situation and wellbeing and have their health checked, and GP’s can refer them onto further support if necessary.

5.6.15 The Commission is also concerned by the mental health needs of young carers. Young carers will only have contact with CAMHS (Child and Adolescent Mental Health Services) if they are identified as having mental health difficulties through the wider systemic framework before being

\textsuperscript{49} SCIE research briefing: The health and wellbeing of young carers - http://www.scie.org.uk/publications/briefings/briefing11/index.asp#

referred to the CAMHS service for support. At least half of all of the home situations of the young carers that use Hackney Young Carers Project involve mental health difficulties of a family member as a reason for their caring responsibilities. The Commission heard that children with one or more parent with mental health problems is at greater risk of experiencing mental health problems themselves. As described above, young carers can also suffer from high levels of stress, anxiety, low self-esteem and depression and research has shown substantial numbers of young carers reporting mental health and related problems, such as eating problems, difficulty in sleeping, and self harm. The Commission believes giving young carers an opportunity to talk in confidence about their situation with a GP through an annual health and wellbeing check will help identify any potential mental health difficulties earlier, so these young people can be referred onto the necessary support.

5.6.16 Research suggests a substantial number of ‘hidden’ young carers, some 250,000 – 350,000 children nationally, are living with substance misuse in their families and 920,000 children are living with one or both parents with an alcohol problem (National Association for Children of Alcoholics).

5.6.17 Hackney DAAT (Drug and Alcohol Action Team) has no reliable figures for the number of young carers affected by parental substance misuse. Figures for 2010/2011 (Adult Treatment Data) show that of 1827 adults that accessed specialist treatment, 35% had a child and 10% had a child still living with them. This would give a baseline figure of 183 families where a child may be a carer / affected by parental substance misuse. In 2011/12, current records indicate that there are 219 adult clients in drug and alcohol treatment in Hackney that report being a carer either all or some of the time. That is approximately 10% of the entire Hackney drug and alcohol treatment population. It should be noted that there may be more than 1 child in each family unit where the parent/carer is accessing adult treatment services support.

5.6.18 The disparity between the estimated number of young carers identified through Adult Drug and Alcohol provision and the young carers service is undoubtedly due to the shame, stigma and guilt that children and young people feel about parental substance misuse; their fears that seeking any support may lead to the break up of the family; poor supportive assessment processes and the fact that services are focused on the individual presenting with a substance misuse problem rather than those indirectly affected.

5.6.19 The Commission heard that young carers are at risk themselves from turning to alcohol or drugs to manage the difficulties in their lives and Hackney DAAT advocates more joined up work to support generic young carers. An annual health and wellbeing check for young carers may pick up early risk signs and allow young carers to talk about their situation in confidence, and be referred onto specialist support if required.

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51 Home Office (2003), Hidden Harm
Flexibility of services

5.6.20 The home situations of young carers may make it more difficult for them to access services such as GP appointments. The Commission heard of an example of a young carer who was ill and tried to book a GP appointment but was told she could only attend with her mother (the person who she cared for), however it was not possible for her mother to attend the appointment with her. The surgery was not flexible and said under 16’s must be accompanied by a parent/carer therefore the young carer was not able to see a GP. The Commission believes that there should be more flexibility for young carers and better use made of technology. For example in this situation the young carer could have attended the GP appointment and the mother could be included in the consultation via a telephone/teleconference.

5.6.21 It could be useful for GP surgeries to keep a family tree showing family relationships in their patient records. This may help in identifying whether a child in a family might be taking on caring responsibilities if a parent or sibling is ill, has a disability, is experiencing mental illness or is affected by substance misuse.

Recommendation Sixteen

A summary of research carried out looking at the health and wellbeing of young carers notes possible effects of caring responsibilities including tiredness, experiencing some physical problems as a result of lifting parents with physical disabilities, substantial numbers reporting stress, anxiety, low self-esteem and depression, and substantial numbers of young carers reporting mental health and related problems, such as eating problems, difficulty in sleeping, and self harm.52

(a) The Commission recommends that an annual invite for a health and wellbeing check for young carers by their GPs is established. Most young people will not usually go to a GP unless something is seriously wrong so the annual health and wellbeing check will give young carers an opportunity to talk and have their health checked, and they can be referred onto further support if necessary.

The Commission heard of an example of a young carer who was ill and tried to book a GP appointment but was told she could only attend with her mother (the person who she cared for) but it was not possible for her mother to attend the appointment with her. The surgery was not flexible and said under 16’s must be accompanied by a parent/carer therefore the young carer was not able to see a GP. The Commission believes that there should

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52 SCIE research briefing: The health and wellbeing of young carers - http://www.scie.org.uk/publications/briefings/briefing11/index.asp#
be more flexibility for young carers, for example in this situation the young carer could have attended the GP appointment and the mother could be included in the consultation via telephone.

(b) The Commission recommends that young carer status should be identified on GP patient records so surgeries can offer more flexibility, for example around appointments if a parent is unable to accompany a young carer then the surgery could arrange to include them in the consultation via telephone.

6. CONCLUSION

6.1. More needs to be done to identify young carers in the borough and to provide adequate support to them once they have been identified by services. A range of services come into contact with young carers and their families and it is clear from this review that there needs to be better joint working and communication between these organisations to provide co-ordinated support where needed. Awareness needs to be raised of young carers amongst staff in all organisations: schools, healthcare providers, adult social care, children’s social care and drug and alcohol services. Staff should understand how to identify young carers, how to provide flexible support and how to refer them onto further support if necessary.

6.2. It is clear that with the continuing financial pressures on public services, it will be increasingly important for young carers to receive the support they need through universal services, and currently key universal services in Hackney, such as schools, do not do enough to support young carers. Some schools in the borough do provide additional support to young carers and the Commission wants to see other schools learning from the good practice at these schools.
7. CONTRIBUTORS, MEETINGS AND SITE VISITS

Meetings of the Commission

The following people gave evidence at Commission meetings or attended to contribute to the discussion panels.

13th July 201153

Mark Stancer, Head of Service – Children in Need, Children’s Social Care, London Borough of Hackney

15th September 201154

Ilona Sarulakis, Head of Adult Services, Adult Social Care, London Borough of Hackney
Michelle Brown, Carers Lead, London Borough of Hackney
Mark Stancer, Head of Service – Children in Need, Children’s Social Care, London Borough of Hackney
Toni Dawodu, Head of Integrated Services for Disabled Children, London Borough of Hackney
Marcia Smikle, Head of Nursing - Children and Families, Homerton University Hospital NHS Foundation Trust
Dr. Glenda Ericksen, Consultant - Child and Adolescent Psychiatry, East London NHS Foundation Trust
Dr. Deborah Colvin, GP representative and Chair of City and Hackney Local Medical Committee
Dr. Diana Wills, Paediatrician, Homerton University Hospital NHS Foundation Trust (CHYPS Plus)
Vera Beining, Hackney Young Carers Project, Action for Children
Gavin Davies, Hackney Young Carers Project, Action for Children

5th October 201155

Four young carers from Hackney Young Carers Project
Elaine Peers, Head of Attendance, Exclusions and Education Safeguarding, The Learning Trust
Vijay Bhanaut, Headteacher, De Beauvoir Primary School
Tania Spain, Deputy Headteacher, De Beauvoir Primary School

53 Meeting agenda and papers: http://mginternet.hackney.gov.uk/ieListDocuments.aspx?CId=121&MId=1617
54 Meeting agenda and papers: http://mginternet.hackney.gov.uk/ieListDocuments.aspx?CId=121&MId=1618
55 Meeting agenda and papers: http://mginternet.hackney.gov.uk/ieListDocuments.aspx?CId=121&MId=1620
Malcolm Shaw, Assistant Headteacher and SENCO, De Beauvoir Primary School
Judith Denyer, Connexions (Prospects Services Ltd.)
Paul Olaitan, Head of Young Hackney – Safer and Thriving, London Borough of Hackney
Vera Beining, Hackney Young Carers Project, Action for Children
Matt Fox, Hackney Young Carers Project, Action for Children
Caroline Bullen, Hackney Young Carers Project, Action for Children
Lucy Whitman, City and Hackney Carers Centre

2nd November 2011

Danni Manzi, Policy and Development Manager (Young Carers), The Princess Royal Trust for Carers and also Chair of the National Young Carers Coalition
Laurence Wrenne, Hackney DAAT Support Service Manager, London Borough of Hackney
Toni Dawodu, Head of Integrated Services for Disabled Children, London Borough of Hackney
Vera Beining, Hackney Young Carers Project, Action for Children

Site Visits
The Commission made the following site visits for this review:

27th September 2011  Focus group with young carers at Hackney Young Carers Project

17th October 2011  Focus group with family members of young carers

17th November 2011  Visit to Bridge Academy to talk about the support they provide to young carers

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8. MEMBERS OF THE SCRUTINY COMMISSION

Elected Members:

- Councillor Icoz (Chair)
- Councillor Bramble (Vice Chair)
- Councillor Aussenberg
- Councillor De Botton
- Councillor Jacobson
- Councillor Jones
- Councillor Kennedy
- Councillor N Mulready
- Councillor Russell
- Councillor Siddiqui
- Councillor Stevens
- Councillor Taylor

Co-optees:

- Ralph Bergmann JP
- Vera Edwards
- Mehria Fazli
- Mary Ludlow
- Traycie McCain
- Lisa Neidich
- Razaq Salau
- Mahmoudat Sanni-Oba
- Shuja Shaikh
- Rev. David Silvester
- Yoldas Yildiz

Overview and Scrutiny Officer: Deborah Ennis ☎ 020 8356 3441
Legal by Comments: Dawn Carter-McDonald (Team Leader – Legal Services) ☎ 020 8356 4817
Financial by Comments: Jackie Moylan (Assistant Director of Finance – CYPS and LHRR) ☎ 020 8356 3032
9. **BIBLIOGRAPHY**

The following documents have been relied upon in the preparation of this report or were presented to the Scrutiny Commission as part of the investigation.

- ADASS and ADCS (2009) *Working Together to Support Young Carers – A Model Local Memorandum of Understanding between Statutory Directors for Children’s Services and Adult Social Services*


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- Children and Young People Scrutiny Commission, *Minutes of the meeting on 13th July 2011*, LB Hackney

- Children and Young People Scrutiny Commission, *Minutes of the meeting on 15th September 2011*, LB Hackney

- Children and Young People Scrutiny Commission, *Minutes of the meeting on 5th October 2011*, LB Hackney

- Children and Young People Scrutiny Commission, *Minutes of the meeting on 2nd November 2011*, LB Hackney

- Children and Young People Scrutiny Commission, *Notes of site visit to Hackney Young Carers Project (27th September 2011)*

- Children and Young People Scrutiny Commission, *Notes of discussion with family members of young carers (17th October 2011)*

- Department for Education (2011) *Improving support for young carers - family focused approaches*

- Department for Health (November 2010) *Recognised, valued and supported: next steps for the Carers Strategy*

- Department for Health (June 2008) *Carers at the heart of 21st century families and communities: a caring system on your side, a life of your own*

- London Borough of Hackney, *Hackney Carers’ Strategy 2007-10*

- London Borough of Hackney, *Hackney Carers’ Strategy 2011-14*

10. APPENDICES

Appendix One: Hackney Youth Parliament report on Young Carers  (attached separately)

Appendix Two: Further information about the Young Carers Standards Award for schools in Swindon  (attached separately)

Appendix Three: Working together to support Young Carers – Reference Guide (Hackney’s version of the model Memorandum of Understanding)  (attached separately)