CHESHIRE EAST
BOROUGH COUNCIL

Cheshire East
Council

MEMORANDUM OF UNDERSTANDING – YOUNG CARERS

1.Joint Statement of Intent

The cross government Strategy for Carers launched in 2008 sets out a clear and challenging vision for young carers. It is that:

"children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive; to enjoy positive childhoods and to achieve against all the ***Every Child Matters*** *outcomes."* [p.123]

The vision's overriding priority is prevention: ensuring young carers are actively protected from excessive or inappropriate caring and parenting roles are supported. This vision has been central to preparing and the anticipated operation of this joint Memorandum of Understanding. This memorandum builds on the positive joint work that takes place now. It sets out our shared understanding of the issues. This is based on a shared set of aims about how we can deliver better integrated support for families with care needs that ensures better protection from harm and improved outcomes for young carers. It is our joint intention to ensure that all children are better supported not to undertake inappropriate caring by the provision of effective care and support for siblings and parents who need it. We will strive to achieve this within the resources available to us and the national and local policies and priorities that guide us.

2. Key Aims and Outcomes

Our main aim is to promote and improve the health and well-being of young carers and their families by preventing and protecting children and young people from undertaking excessive and inappropriate caring roles and responsibilities and preventing the continuation of inappropriate caring. This will be grounded in effective use of supportive practice guidance such as the ***Key Principles of Practice*** and within the outcome frameworks provided by ***Putting People First*** and ***Every Child Matters***. Where a parent or another family member has care or welfare needs arising from physical or mental illness, substance misuse, or disability we will work together and with our partners in health and carers organisations to ensure that:

- there are no "wrong doors" and that young carers are identified, assessed and their families are supported in ways that prevent inappropriate caring and support parenting roles regardless of which service is contacted first;

- risks to independence, safety and welfare are responded to in line with ***"Think family"*** concepts and guidance on ***"Working Together to Safeguard Children"***;
- earlier, better integrated and effective responses to young carers and their families are available using "***whole family pathway***" approaches and during transition to adulthood;
- children are protected from undertaking excessive or inappropriate caring roles; further inappropriate caring is prevented; emotional support is available where needed; and parents feel supported in their parenting role;
- no care or support package for a parent or sibling relies on excessive or inappropriate caring being undertaken by a young carer to make it sustainable;
- young carers are helped to achieve their potential; and, to have the same access to education, career choices and broader opportunities as their peers; and,
- there is better recognition and greater participation of young carers and their families in shaping what we do and in the development and delivery of responses that promote greater choice and control and prevent further inappropriate caring.

3. Young Carers: A Shared Understanding

We are agreed that the term "young carer" should be taken to include children and young people under 18 who provide regular and ongoing care and emotional support to a family member who is physically or mentally ill, disabled or misuses substances.
The term does not apply to the everyday and occasional help around the home that may often be expected of or given by children in families. The key features for us are that the caring responsibilities persist over time and are important in maintaining the health, safety or day to day well-being of the person cared for and/ or the wider family.
We will continue to work together to develop a shared and more detailed understanding of the different types and levels of caring in our area. Our main focus, however, will be to ensure we
develop better ways of identifying where caring by children risks becoming excessive and/or inappropriate and putting in place the support that prevents this happening.
The central issues for us are those of recognition, adverse impact and support, including emotional support. Our approach relies on the premise, within a whole family approach, that:

"a young carer becomes vulnerable when the level of care-giving and responsibility to the person in need of care becomes excessive or inappropriate for that child, risking impacting on his or her emotional or physical well being or educational achievement and life chances"

4. Having a Multi-Agency Strategy

We will work together to ensure that, within the overall framework of our Local Strategic Partnership and Children's Trust, there is a specific multi-agency strategy to meet the needs of young carers. We will ensure this strategy interfaces clearly

with both current and future local Children and Young People's Plans and planning frameworks for Adult Social Care.
The strategy will be developed in collaboration with key partners in health and local support projects for carers and families. It will embrace the views of young carers and their families and reflect the vision that is part of the national strategy. The resulting local strategy will be kept under review and progress shared with local people, young carers, families and partners.

5. Promoting Early Identification

It is our shared intention to review local practice and where appropriate to refine it to ensure that it:

- promotes positive images of adults living with long term conditions or disabilities that encourage families to seek information and assistance and identify those children with caring responsibilities;
- provides appropriate and accessible information for families about services that support parenting capacity, independence and well being;
- enables access to self directed support; including direct payments to meet the needs of parents where appropriate;
- reaches out to families to offer support that avoids inappropriate forms of caring developing or continuing;
- reflects principles of partnership working with communities, in particular, the need for sensitivity to cultural needs;
- supports schools in their key role of identifying children with additional support needs and early intervention and support of young carers.
- supports the ***National Healthy Schools Programme***; the ability of the local NHS and PCTs in identifying young carers; and ensures that young carers have the same access to health provision, education and career opportunities as their peers;
- recognises the existence of "hard to reach" groups or families and creates opportunities to meet their needs;
- recognises that care needs can vary significantly and that local processes offer emergency advice and support where usual care arrangements risk breaking down; and,
- engages with local young carers' projects on early support and whole family working.

Support delivered effectively and early for the person requiring care and support that takes account of the needs of dependent children in the family should, in many cases, be sufficient to protect young carers. Almost inevitably, however, there will be some families whose support needs come to light late and when caring by the child is deeply entrenched. In such cases, it may well be necessary to consider the unmet care or parental support needs of the person cared for and determine what tailored support young carers require immediately and in the longer term, to improve their situation and to reduce the pressures on them.

6. Assessment

We are agreed that the key to ensuring better support and outcomes for young carers is effective assessment. As Statutory Directors we will ensure that when a referral is made about a parent with a disability, dependency or illness, agencies consider whether there is a child in the family who is providing personal care or practical help. In doing so, practitioners will also be expected to consider, within a ***whole family approach***, the impact of the disability or illness on each child within the family; including whether any of them are or could be providing some form of care or not. We expect action would be taken to assess:

- What additional services may be needed to ensure care needs are met and to prevent a child taking on or continuing to hold inappropriate caring responsibilities.
- Whether the parent needs support in his or her parenting role or in developing parenting capacity.
- What can be offered to help the whole family or to maximise the broader support which others in the family are able to provide.
- Whether the impact on the child indicates that it would be appropriate to undertake an assessment under the ***Framework for Assessment of Children in Need and their Families***] or under the Carers and Disabled Children Act 2000
- Whether there are additional needs falling within the ***Common Assessment Framework for Children [CAF]*** [updated 2009].

We expect appropriate use of the ***"Think Family"*** toolkit and protocol and, where consistent with the aims of this Memorandum of Understanding, that we embed this and ensure that:

- The primary responsibility for responding to the needs of young carers derives from the person in need of care and support. This means that whichever service identifies there is a young carer in the family, whether it is children's or adults' social services or PCT led, is responsible for assessing the needs of that young carer within that family context.
- Practitioners will seek advice and support where necessary from colleagues, whether it is children's or adults' social services or a partner agency, to support discharge of our joint and separate responsibilities towards young carers and their families.
- Practitioners will be aware of the prejudices and stereotypes that may exist around cultures, and disability, or about adults who misuse drugs/alcohol or have mental health needs and in terms of their parenting capacity and competence.
- Practitioners will reach their conclusions on the basis of the evidence of their observation of both parents and children; including any young carers.

Joint assessment by adult, child and family and health staff will be expected where this is appropriate. We also expect that relevant staff from local agencies will be available to provide specialist advice and support as needed. Finally, we are clear that staff should never ignore any aspect of a situation that indicates there are concerns about children's safety and they require protection from harm.

7. Safeguarding

We accept a joint responsibility to work in partnership with others to identify and respond to any young carers who are suffering, or likely to suffer, significant harm and to protect them from this harm. We will ensure discharge of our responsibilities in ways that focus on working together, early intervention and prevention; reflect practice guidance; do not stigmatize families or risk increasing the number of hidden young carers; and do not discourage young carers and their families from seeking information and advice, or an assessment and provision of services. We will:

- State clearly the responsibilities of staff under local safeguarding children procedures to make referrals where children are considered to be suffering or likely to suffer significant harm and emphasise the principle that safeguarding is everyone's business.
- Ensure staff in all sectors have undertaken appropriate training in recognising harm, reporting concerns about a child's welfare and safety and confirming referrals they have made to children's social care within 48 hours.
- Ensure staff across all sectors have undertaken appropriate training in relation to mental health and substance misuse issues.
- Make sure our arrangements for young carers and their families reflect any requirements of local multi-agency and single agency policies for safeguarding children and seek inclusion as necessary.
- Ensure awareness of safeguarding adults' policy and practice; the ability to recognise and respond to safeguarding adults' concerns; and promote confidence and consistency in using local multi-agency procedures by staff in across all agencies.

8. Schools and Young Carers

Your Child, your schools, our future emphasised the importance of early intervention as one of the founding pillars of all schools. The intention is that all children and young people who have additional support needs can be identified early on. Consistent with this and our joint approach, schools will be encouraged and supported to:

- Have a named staff member with lead responsibility for young carers and to recognise this role within continuing professional development.
- Have in place a policy to encourage practice that identifies and supports young carers such as adapting school arrangements if needed, provision for personal tutors and private discussions and access to local young carers' projects.
- Promote open communication with families that supports parenting capacity and encourages the sharing of information.
- Raise awareness about young carers and promote understanding of the caring issues that will touch all families at some point; linking with other agencies as appropriate
- Ensure school policies such as those for enrolment, attendance, bullying, behaviour and keeping safe afford recognition to young carers.

- Ensure Caldicott principles on confidentiality and information sharing are understood and followed.
- Ensure the provision of personalised and effective school-based support that incorporates the principles of awareness, inclusion, understanding and support for young carers to achieve their full potential.
- Incorporate into individual pupil plans recognition and support for the positive aspects of the young carer's role, as well as providing the supports necessary to enable young carers to attend and enjoy school.
- Include positive messages and images about people with disabilities; including, mental ill health within the wider school curriculum.
- Consider and where reasonably practicable take action to remove barriers to physical access and communication and promote inclusion.
- Be sensitive to cultural and religious needs.
- Take advantage of guidance and support in relation to young carers which is available as part of the ***21st Century Schools*** and ***National Healthy Schools Programme***.
- Consider scope for school staff to adopt lead professional roles within the ***CAF*** process.

9. Health of Young Carers

Consistent with our wider responsibilities under the ***National Service Framework for Children, Young People and Maternity Services*** to develop co-ordinated approaches for all children and young people, in partnership with health, we will explore the scope for more integrated working in relation to young carers that will:

- Promote and sustain healthy cooking, eating and fluid intakes
- Encourage regular exercise and doing about 60 minutes of physical activity each day
- Ensure good oral health
- Raise awareness and reduce risks of substance misuse (alcohol, volatile substances and illicit drugs) and smoking and support young carers interested in giving up.
- Raise awareness of personal stress and how this may be managed
- Highlight the role of doctors and other health professional in identifying or supporting young carers in primary healthcare settings and as part of hospital discharge processes.
- Ensure child and adolescent mental health services support the emotional well being of young carers who are seriously troubled by their caring role
- Provide breaks and activities to enhance mental health and social networks
- Enable young people to assess risks about lifting and handling and provide information, advice and support to remove or reduce risk of injury as necessary.
- Ensure safe procedures exist for the holding and control of medication at all times.

10. Information, Advice & Advocacy

Together with our partners, we will work towards a position where, if not already in place, information and advocacy services are available to all young carers and their families offering:

☐ Information
☐ Advice
☐ Advocacy
☐ Representation
☐ Support; including peer support through local young carers' projects.

We will encourage local use of the following core principles, which were developed originally by the Department of Health , for use when people act as advocates for young carers:

- Advocates should be the young carer's person of choice and can be informal, peer as well as professional advocates.
- Advocates should work for the best interests of the young carer
- Advocates should value and respect young carers as individuals and challenge all types of unlawful discrimination.
- Advocates should work to make sure that young carers understand what is happening to them, can make their views known and, where possible, exercise appropriate choices when decisions are being made.
- Advocates should help young carers to raise issues and concerns about things they are unhappy about. This includes making complaints under the Children Act 1989.
- Advocates should be familiar with requirements regarding the safeguarding of children and know what to do if they become aware of abuse or neglect or risk of it occurring.

As Statutory Directors we accept there are challenges inherent in this commitment. We recognise that from time to time tensions may arise between young carers and those whom they support. We will work to find ways of resolving them. We will commit to meet with young carers not less than once a year to find out what has gone well, what has not and what might make a difference in future. Opportunities for Elected Member involvement will be identified. We will explore the scope for having a designated Elected Member[s] who would champion the interests and concerns of young carers, and to meet with them at regular intervals consistent with the constitutional arrangements of our Council.

11. Equalities & Diversity

This Memorandum of Understanding applies in all situations irrespective of age, disability, gender, race, cultural or religious beliefs and sexual orientation. It is an underpinning principle within the protocol that, as with abuse or neglect, inappropriate caring responsibilities, cannot be condoned on religious or cultural grounds. We will ensure that appropriate people are readily available to provide advice on such matters.

12. Language Barriers

When considering translation services we will consult with families as to who could fill this role appropriately. Where possible bi-lingual advocates will be used and account taken of any relevant factors around gender or locality. We are agreed it is not good practice to expect young carers to interpret for their families, particularly when it involves someone with an illness and will discourage this. We expect interpreters to be used.

13. Information Sharing

We are agreed that effective and timely information sharing between our own agencies and with our partners is critical to the provision of early intervention and preventative work; to support transitions; and, for safeguarding and promoting the welfare of young carers. Earlier national guidance on information sharing from 2004 issued as part of ***Every Child Matters*** was replaced by new cross government guidance in 2008 [15]. Within the framework of existing local information sharing protocols, our aim is to ensure there should be specific recognition of the position of young carers. This will cover their identification and support. Local arrangements for information sharing under this protocol will be consistent with national
guidance. We will expect practitioners to follow the seven "golden rules" that are in place:

☐ Understand Data Protection legislation is not a barrier to sharing information
☐ Be open and honest
☐ Seek advice when necessary
☐ Share with consent where appropriate
☐ Consider the child's safety and welfare
☐ Gather and keep information that is necessary, proportionate, relevant, accurate, timely
and secure.
☐ Keep a record of information shared.

14. Young Carers: Related Themes and Issues

There are a number of other issues that may apply to the circumstances of some young carers. We will ensure these inform the need for joint working and shared understandings/processes between adult social care, children's services and partners within health. They are:

☐ Transitions to adulthood
☐ Parents with mental health needs
☐ Parents who misuse substances (alcohol, prescribed or illicit drugs)
☐ Parents with a learning disability
☐ Refugee Young Carers

We accept that this listing is not definitive. We will continue to work together on these and other identified issues. Our local arrangements will ensure these and other relevant issues are kept under review and that up to date information is available to all staff. This may include the preparation and dissemination of further information to support joint and separate effective action and good practice in these areas. We will ensure that any additions are consistent with the considerable body of national guidance and best practice materials that are available and which staff are expected to follow.

15. Audit and Assurance

We expect the adoption and operation of the memorandum to be consistent with the ***Good Governance Standard for Public Services***. To this end, we will put in place arrangements for periodic audit and the provision of reasonable assurance to the Council, partners, young carers, their families and the community on how it works in specific areas or as a whole. These audit arrangements will be located within wider Council processes for the management of risk and provision of reasonable assurance. The information arising from these audits will be used to inform performance priorities for development and delivery of the key processes and outcomes that the memorandum has been designed to help secure.

16. Funding responsibilities

The internal allocations of funding by the Council should not become a barrier to timely and appropriate support. We recognise that disputes about where funding responsibility lies can be deeply damaging to families: they were one of the concerns voiced by families and young carers in the Carers Review national consultations. We will act to ensure that staff have a clear understanding of joint and separate responsibilities to support parenting roles, respond to needs and reduce the need for inappropriate caring by young carers. The following general principles apply to the expected whole family and joint approach to meeting needs:

- Adult social care is responsible for commissioning care and support services for adults to reduce or prevent inappropriate caring responsibilities by young carers.
- Children's social care is responsible for commissioning services to respond to specific needs of the child or young person; including, those relating to the impact of their caring role on them
- Shared responsibility exists between us for commissioning services that would support or sustain adults in their parenting role having regard to the individual circumstances.

17. Resolving Disagreements

Young carers have identified that difficulties in adult and children's social care services working together are a source of concern to them and require resolution. We believe that if the holistic, family centred approach we support is to be followed, then significant disagreements between adult and children's services should be the exception. Almost inevitably, however, there may be occasions when professional staff encounter difficulties in relation to assessment, service provision or funding responsibilities.

Two potential areas are:

- Disagreements about whether the need relates to the young carer or the adult or sibling who is supported by him or her; and/or,
- Disagreements about respective responsibilities or thresholds for adults or children.

We intend to reduce the risk of disagreements by:

- ensuring that staff are appropriately trained and supported in understanding and in the exercising of joint and separate responsibilities towards young carers and those whom they support;
- being as clear as we can about our joint and separate responsibilities;
- ensuring young carers and parents have access to information and advocacy services to support them in the exercise of their rights; and,
- ensuring that effective arrangements for consultation, communication and feedback to young carers and those they support are available and acted upon.

There are a number of mechanisms that could be used to resolve disagreements. We have noted the SCIE guidance of 2005 [17]. This suggests the designation of a senior lead for young carers with responsibility *to "...resolve promptly disputes between adults' and children's services."* We accept that how local issues are resolved is a matter for us as the Statutory Directors to determine within the context of our corporate responsibilities within the Council.

The following principles will inform action and decision-making should disputes arise:

- Disagreements about funding responsibilities must not get in the way of responding in a timely manner to situations where it is evident that inappropriate caring responsibilities are being undertaken.
- Disagreements about funding must not be allowed to become a problem for the young carer or the person supported and not be argued about in front of them.
- Disagreements about responsibilities must not leave the needs of family members unmet because they seem to fall between internal administrative boundaries.
- Dispute resolution procedures relating to the joint and separate responsibilities of Statutory Directors for young carers and the people they support will be put in place.
- Statutory Directors have final operational responsibility for ensuring that any disagreements about funding are resolved in a reasoned, timely and appropriate manner with better outcomes for young carers being a primary consideration.

18. Commencement, Publication, Variation and Review

The commencement date for this memorandum of understanding is **1st April 2011**. The review date is **31 March 2015** and thereafter every three years or as agreed between us. Variations may be agreed to reflect changing legislative, policy and local requirements and evidence of what works best for young carers. This document falls within the Council's Publication Scheme. It will be placed on the Council's web site and with partners as part of our commitment to work together on these issues.

Statutory Director
Children's Services

Statutory Director
Adult Social Services