ROTHERHAM BOROUGH COUNCIL

Meeting:-	Children, Young People and Families Partnership				
Date:-	Wednesday 24 September 2014				
Title:-	Young Carers				

4. Summary

Many Young People within Rotherham are helping to care for a parent or sibling. The person being cared for may have mental health difficulties, a physical, sensory or learning impairment, a long term illness or they may have difficulties relating to substance misuse.

This report outlines how in Rotherham we directly supported young carers in 2013/14.

5. Recommendations

The Children, Young People and Families Partnership is asked to note the report.

6. Proposals and Details

The commissioned Barnardo's Young Carers Service has provided a successful, statutory Young Carers service for the past 7 years on behalf of Rotherham MBC for young carers aged 8 – 18 years. The person cared for will usually be a family member such as a parent, grandparent, sibling, or someone very close to the family. The person or people they care for will have a serious or long term illness, disability or mental health problems, including alcohol and substance misuse; many young carers also help to care for younger siblings.

Through a process of assessment planning and review the service seeks to minimise any negative impact of the caring role thus enhancing the opportunities for young carers to achieve their full potential. This includes taking appropriate action when the caring role is such that it poses significant safeguarding concerns. The service maintains a whole family approach whilst retaining a specific focus on the young carer.

Service support is delivered through assessed need for individual work; time limited focused group work, family work, mediation, advocacy and signposting.

During the year the service has re-established the Rotherham Young Carers Committee and has been working in partnership with UKYP to introduce a local Young Carers Card to enhance support for young carers in their place of education.

Outcomes in 2013/14

For many of the young carers and families supported- the process of achieving improved outcomes can be erratic. This is reflected in the "no change" and the deteriorating scores.

Change within the family has been a major factor in decreasing scores; be that change in the severity of illness of family circumstance. The service has seen a huge increase in deprivation with families regularly presenting with issues of food, fuel poverty and debt. The service distributes food vouchers to young carers' families during these difficult times and works in partnership with agencies to find solutions to their hardship.

Outcomes Assessment Score Summary for Rotherham Young Carers (cases worked with between April 1st 2013	Number of outcomes with an	Percentage of outcomes with an	Number of outcomes with no	Percentage of outcomes with no	Number of outcomes with a	Percentage of outcomes with a	Number of cases with more than one
and March 31st 2014)	improved	improved	change in	change in	degraded	degraded	assessment
Barnardo's Outcome	score	score (%)	score	score (%)	score	score (%)	score
Rotherham Young Carers - File	121		46		10		
Room							
1.2.04 Increased resilience	25	56	16	36	4	9	45
1.2.25 Reduced impact of caring	25	78	6	19	1	3	32
2.2.02 Free from bullying	2	67	1	33	0	0	3
2.2.03 Reduced	3	100	0	0	0	0	
victimisation/discrimination							3
4.1.04 Positive/improved family	11	55	7	35	2	10	20

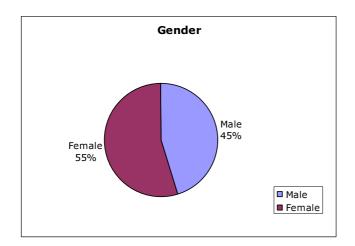
relationships							
4.1.17 Understanding of parent/child illness or disability	20	80	4	16	1	4	25
5.2.01 Satisfactory school/college attendance	4	80	1	20	0	0	5
6.1.06 Enjoy activities/short breaks	17	77	5	23	0	0	22
6.1.10 Access to/use of inclusive resources in community	10	63	4	25	2	13	16
7.1.01 Contribute to planning and decision making	1	100	0	0	0	0	1
7.1.05 Views & opinions voiced and acted on	1	33	2	67	0	0	3
9.5.03 Full receipt of entitlements/grants	2	100	0	0	0	0	2

<u>Outputs</u>

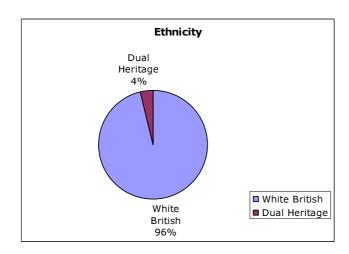
<u>Monitoring Information – Output Statistics</u>

Rotherham Young Carers	Quarter	Quarter	Quarter	Quarter	Totals
Service 2013/14	1	2	3	4	2013/14
Numbers of existing	61	51	30	34	176
Young Carers on books					
Number of new referrals	10		7	28	45
this quarter					
TOTAL SUPPORTED	71	51	37	62	221
Number of Breaks for	282	254	241	179	956
Young Carers provided					
per quarter (provide					
breakdown below)					
One to Ones	116	74	80	70	340
Family Support	21	11	43	43	118
Outings (Breaks = YC benefiting. i.e. 2 outings for 10 YC = 20 breaks)	24	49	32	0	105
Residential		23			23
Family Activity		4			4
Group Work (Breaks = YC benefiting. I.e. 3 group sessions of 6+7+7 attending = 20 breaks)	66	48	49	32	195
Young Carers Committee	18	12	12	9	51

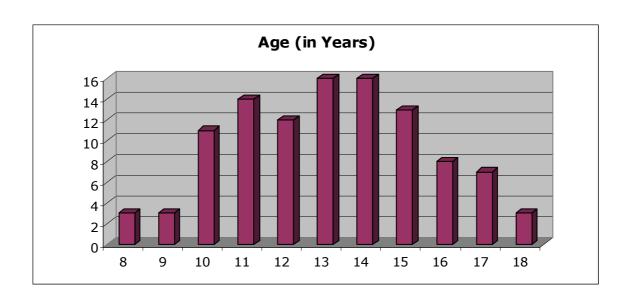
Multi Agency Meetings (TAC, CIN, CORE GROUP, CASE CONF)	26	21	11	13	71
Signposting, advocacy or mediation	8	6	7	10	31
Multi agency work to promote good practice	3	6	7	2	18
	Figures	Below	not	included	in totals
Number of awareness sessions promoting the service	3	6	7	2	18

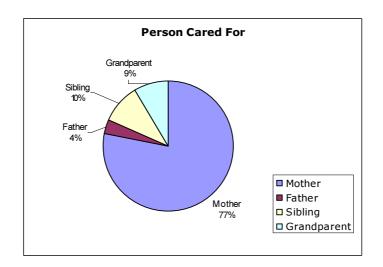


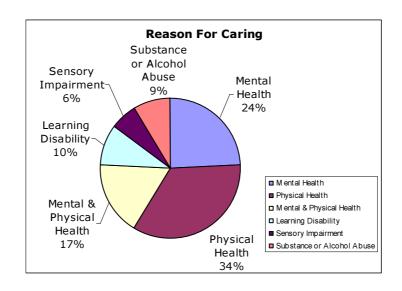
Male – 48 Female – 58

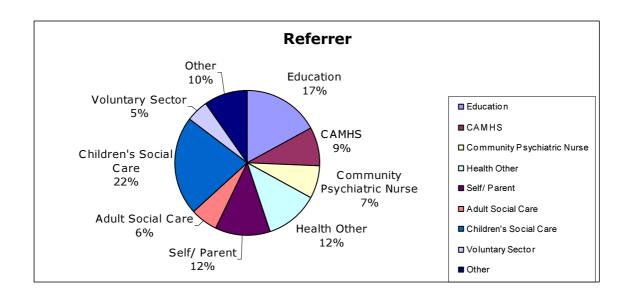


106 young people and their families received a service









Case studies

Girl (X) age 10

X currently lives with mum who has several physical health problems and is often hospitalised, father is alcohol dependant and also suffers with some physical health problems; there are four younger siblings.

Background:

X was referred to the service by a children and families social worker in July 2012. At the time of referral the children were at 'Child in Need' level. The family has been very reluctant to accept support from outside agencies, including Rotherham Young Carers. Contact was finally made and work started in November 2012 however we did try and make contact with the family on several occasions from August 2012. The children were made subject to a Child Protection Plan in October 2013. Dad was also imprisoned for breaching his probation and attempted burglary in December 2013 leaving mum to deal with all the children alone over Christmas. This also increased X's caring responsibilities.

Responsibilities:

X took on the responsibility for most of the household cleaning and looking after younger siblings. X is also socially isolated due to her responsibilities.

Impact on X

X was very reluctant to talk about her home life and as a result it was hard to assess what impact her home life had on her as a young person. She was very guarded about what she said and the majority of the time she would say that everything was fine at home. X was socially isolated.

Work with RYC

As X was socially isolated we used social activities to help us build a trusting relationship with X and made it the main focus of the work we offered her. In addition we gave emotional support on a monthly one to one basis, although X remained reluctant to talk about home. The majority of focussed work with X was done through group work as she really enjoyed the sessions. X attended 12 group sessions throughout the time she worked with us. X attended 6 social activities, one of which was a two night residential to Kingswood. X did start to build trust with the service and a noticeable difference was seen in her confidence. X was also referred to the local youth service, who have agreed to early contact as X is not yet 11. School also agreed to fund some after school clubs and X now attends at least one after school club a week. X's grandmother now contributes respite at least once a week. There has also been an improvement in X's attendance at school.

X's confidence grew more and more over time and is now at a position where she personally no longer needs support from RYC. The family has also now agreed to work with a family support worker which will continue to improve the family situation even further.

Rotherham Young Carers (RYC)

Boy age 14

X was referred to the service by Wales High School due to the emotional impact of his parent's separation and his mother's mental and physical health.

Responsibilities

X is worried about leaving mum when he is at school which has a considerable emotional impact on X. These worries X has are impacted by hearing mum cry. X will say that he is ill so that he does not have to attend school, limiting his educational successes and opportunities to socialise and progress.

Work done by RYC

X was offered one to one sessions on a number of different topics that X wanted to discuss. The sessions included; identifying his worries which were; mum's health, home, dad's pending surgery on his back, being bullied again, X's organisation skills, mum's depression and mum generally. Another session was based on creating a poster to help X to remember things he needed to do.

One to one sessions were delivered based on mental health and an information leaflet written by other young carers was given to X to help him realise that other young people are in a similar situation. Work was also completed on physical health, his dad and also ways to manage his anger. X was put on the list for the residential trip.

The work the service completed around mum's mental and physical health has provided X with the confidence and reassurance to attend school and consider activities after school.

X was given the opportunity to attend an activity at Clifton Park however; he was at his dad's. X was also given information on air cadets to take part in after school, which dad bought the uniform for and X was attending with a friend.

An in-house grant application was completed whilst X was with the service for the installation and the use of Rothercare Community Alarm Service for a year to reassure X that mum will be ok when he is not at home, therefore increasing his school attendance and social opportunities. X does have a good support system at home so he has someone to talk to on a daily basis if any worries reoccur before they become unmanageable. X was seeing MIND and the school nurse in school however; X does not meet their criteria. X is also working with a social worker.

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