Identification Practice of Young Carers in England – Review, Tips and Tools
Executive Summary
We would like to thank the many people who have been involved in this project:

• The young carers who generously gave up their time to take part.
• The staff and practitioners who shared their experiences of providing support.
• The Carers Trust team including Anna Morris, Adem Ruggiero-Cakir and Liz Roberts
• The NatCen team comprising: Malen Davies, Berenice Scandone, Helen Burr ridge, Tanya Basi, Phoebe Averill, Adam Gilbert and Fatima Husain.

Who is this resource for?

Identification Practice of Young Carers in England – Review, Tips and Tools is primarily aimed to be a guide for local government.

The Children and Families Act 2014\(^1\) places a duty on local authorities to take 'reasonable steps' to identify young carers in their area who have support needs. This resource sets out these duties and shows how local government can work with education, health and social care partners to take the steps necessary to increase identification of young carers.

This resource will also be useful to leaders, commissioners and professionals in health, education, voluntary and young carer services. In the full report, we have drawn out sections which may be of relevance to particular sectors.
Background

The Department of Health and Social Care commissioned Carers Trust, in collaboration with the National Centre for Social Research (NatCen), to conduct a review into best practice in identifying young carers in England.

The Carers Action Plan was published in June 2018, setting out a cross-government programme of targeted work to support carers between 2018 and 2020. The Plan includes a series of commitments which seek to improve the identification of young carers, enable them to get early access to support services and so that safeguarding arrangements can be put in place quickly where necessary.

This project and its outcomes are intended to support joint working between the statutory and voluntary sectors, and wider communities, as part of developing carer-friendly communities, to achieve better identification and support of young carers. This Review, Tips and Tools evidences and shares best practice in identifying young carers.

About Carers Trust

Carers Trust is a major charity for, with and about carers. We work to improve support, services and recognition for anyone living with the challenges of caring, unpaid, for a family member or friend who is ill, frail, disabled or has mental health or addiction problems.

We do this with a UK wide network of quality assured independent partners and through the provision of grants to help carers get the extra help they need to live their own lives. With these locally based Network Partners we are able to support carers in their homes through the provision of replacement care, and in the community with information, advice, emotional support, hands on practical help and access to much needed breaks. We offer specialist services for carers of people of all ages and conditions and a range of individually tailored support and group activities.

Our vision is that unpaid carers count and can access the help they need to live their lives.

About NatCen

NatCen is Britain’s largest independent social research agency. We have over 50 years’ experience of listening to the public and making sure their voice is heard.

The research we do helps government and charities make the right decisions about the big issues and we’re passionate about ensuring its widest possible impact on the world around us.

Our reputation for delivering relevant and robust research is down to our policy sector specialists, survey methodologists, data analysts and expert quantitative and qualitative researchers.
Why young carers need identification and support

Working Together to Safeguard Children\(^3\) defines young carers as ‘a person under 18 who provides or intends to provide care for another person (of any age, except generally where that care is provided for payment, pursuant to a contract or as voluntary work)’. Estimates of their number in England range from approximately 166,000\(^4\) to more than 800,000\(^5\). This significant variance highlights the challenges around the identification of young carers.

Children can undertake caring responsibilities from a very young age which can have significant implications\(^6\). These responsibilities can include tasks such as cooking and household chores, administering medication, washing and helping with toileting needs or being there to listen and help calm a situation. Evidence shows that having a caring role can impact negatively on a child’s physical and mental wellbeing, social relations, education and employment prospects. Identification, and more importantly early or timely identification, is a crucial first step in ensuring young carers receive the support they need before a child becomes vulnerable. Research on young carers demonstrates the multiple, intersecting and compounding disadvantages they experience as a result of their caring role:

- **Education**: At GCSE level young carers perform the equivalent to nine grades lower than their peers who are not carers, that is the difference between nine Cs and nine Ds\(^7\). 27% of young carers of secondary school age experience educational difficulties or miss school, rising to 40% when caring for someone who misuses drugs or alcohol\(^8\). On average young carers miss or cut short 48 school days a year\(^9\).

- **Health**: The 2011 Census showed that young carers providing 50+ hours of care a week were up to five times more likely to report their general health as ‘Not good’\(^10\). The 2017 GP Patient Survey found that 45% of young adult carers in England reported suffering from depression or anxiety compared with 31% of young people not in a caring role\(^11\).

- **Socialisation**: A quarter of young carers said they were bullied at school because of their caring role\(^12\). 23% of young carers said their caring role has made it harder for them to form friendships\(^13\). More than 80% of young carers felt that their caring role affected their opportunity to take part in leisure activities\(^14\).

Early identification is the crucial first step to support which means a young carer and their family can receive appropriate help before a child becomes vulnerable.
Method

This study involved research with key stakeholders and practitioners that young carers and their families are likely to encounter and who have a role to play in supporting and identifying them. Namely, children’s and adult social services, GPs and hospitals, schools, and voluntary and community sector services such as young carer services. This was with the intent to:

- Explore the main drivers, barriers and enablers to timely identification.
- Provide in-depth insight into ‘what works’ in timely identification of young carers.
- Highlight, where possible, the challenges faced by seldom heard young carers.
- Identify ways in which local agencies and organisations can work together to identify and provide appropriate support to young carers.

In total, 35 interviews were conducted with stakeholders across young carer services in The Carers Trust Network and other voluntary and community sector organisations, schools, healthcare and social services, and local authorities. Deeper analysis of practice was explored through five case studies. Supplementing these findings, an online survey of young carer services was distributed to Carers Trust Network Partners and via national partners including The Children’s Society and Barnardo’s, securing 51 responses. An online survey of local government was distributed to all Directors of Children’s Social Services and via the Association of Directors for Adult Social Services, leading to 39 complete or partially completed responses. Additional contextual information came via a Carers Trust conference for local government attended by 70 local authority representatives and a Carers Trust young carer services conference attended by 95 service managers and practitioners.

Summary of findings

The Children and Families Act 2014 and Care Act 2014 gave new rights to assessment for young carers, required local government to take a whole family approach and take reasonable steps to ensure all young carers with needs for support are identified. Since these laws were enacted, it is evident that practice has evolved in some areas to create effective multi-agency relationships across social care, health, education and the voluntary services which allow young carers to be identified early on. However, these examples of effective and good practice are patchy and inconsistent, which means young carers living in neighbouring boroughs could have vastly different experiences of identification and support. The disparity in
identification and support across the country means a young carer could be identified in a primary school and slip through the net when they move onto a secondary school. They could be identified in one medical practice but not by another in the same town. Or a young carer could be seen by an adult social worker conducting a care needs assessment but not be connected to wider support provided by colleagues in children’s social services within the same organisation.

**Common barriers**

There are common issues which are presenting as barriers to identification across the sectors. Although each of them separately prevents the identification of young carers, it is evident when exploring the root causes that they are all interconnected and interdependent.

At the root of these barriers was the view that ongoing financial pressures were creating instability and shifting focus away from early intervention and prevention. Without adequate funding to implement the Care Act 2014 and Children and Families Act 2014, local government and the partners it commissions are failing to realise the transformational approaches set out in the legislation and guidance. The review particularly highlighted the following issues:

**Unclear roles and responsibilities:** Professionals and practitioners from across children’s and adult social services, education and health may be unclear whether it is their responsibility to identify young carers. If they do not see it as part of their core responsibilities, or they view it as someone else’s responsibility, identifying young carers is deprioritised for other more pressing and immediate duties.

**Capacity issues:** Professionals and practitioners across these sectors reported increasing capacity issues, which in turn is creating time pressures. These time pressures are evident in short medical appointments when the focus is on the patient and not the wider family, in assessments of people with care needs where a child could be identified, or in schools where the focus is on curriculum and learning. The findings suggest that there may be opportunities where young carers could be identified but are not because the practitioners are heavily constrained by capacity issues and are narrowing the focus of their responsibility to ensure they meet their core brief and targets.

**Ineffective systems:** In working together protocols and in technology, systems are preventing effective referrals of young carers so that a potentially identified child or young person ultimately goes unidentified or unsupported. Common feedback and issues conveyed through the research focused on breakdowns in communication, uncertainty about where information goes and how referred children and young people are ultimately supported.
In many cases the identification, assessment and support for young carers is sitting outside of other, more integrated pathways to support. This also means that children who are being assessed and supported elsewhere in the system are not also being identified as a young carer. This might seem fine if the young person and their family are already being supported. However, the experiences of a young carer and the emotional and physical toll of caring on a child needs a specific set of responses which acknowledges their role, respects their input and generates the right kind of support for their family.

**Knowledge and skills gap:** Feedback suggests this was in the form of both a lack of awareness of young carers but also a lack of confidence on what to do if you come across a child who is caring. As an adult social worker, a GP or teacher, understanding what a young carer is, how to identify them and what steps to take is of paramount importance.

**Misunderstood, vague or non-existent duties:** The duties in the Children and Families Act 2014 and Care Act 2014 are clear. However, wider duties for health and education around co-operation were considered to be vague and it was unclear how this translated to the work of the local GP or teacher, making it more difficult to lever conversations or activity around identifying young carers. Respondents specifically felt that the lack of a duty to identify young carers in schools was a real barrier to identification, which means they will continue to go under the radar in local communities.

**Financial constraints:** Often considered to be the root cause of the barriers to identification, financial constraints were creating pressures across all sectors. These were leading to uncertainty, increased staff turnover, lack of historical knowledge or expertise, increased targets and limiting deadlines and in turn creating a narrowing of focus and prioritisation of limited resources.

**Common enablers**

The research unveiled strong cases where acknowledging young carers as a priority, securing commitment from relevant partners and transforming services to ensure they were identified and routed through to support was making a vast difference. As with the barriers, the enablers, while all separate factors, are also interconnected and it would be hard to achieve one enabling area without taking steps to deliver them all.

**Senior strategic leadership:** Commitment at a senior management level is essential to embedding change and creating a whole systems approach to identifying young carers within organisations and across agencies. Where this was in operation, young carers were being integrated into wider mechanisms for identification and wider pathways to support. This could be through using Section 157 and 175 safeguarding returns as a way for schools to demonstrate how they were identifying and supporting young carers. Other examples included, connecting GPs to a link social worker,
or including young carer pledges in every commissioned contract for health commissioners. To be effective, these require senior oversight, commitment and review.

**Transformed services and systems:** To achieve effective identification at an early stage, systems need to be in place which support communication, referral, case management and review. For any one agency to only hold part of the picture is not to be able to truly identify the needs of the family or be connected to their evolving needs. Technology, partnership agreements, protocols and clear roles and responsibilities are the best way to increase efficiency, reduce duplication and avoid young carers slipping through the net. Areas where young carers were being integrated into wider pathways such as Early Help were taking steps to ensure children with caring responsibilities could be flagged across all families in need. Authorities and services creating young carers leads were in a stronger position to keep awareness high and communication active across partners.

**Upskilling the workforce:** Highlighted as an issue across all sectors, the need to ensure professionals are trained and receive the right information on an ongoing basis was viewed as an enabler and believed to be of paramount importance. This needs to focus on how to identify young carers in a timely way but also where the connections or communication channels between services lie so that information can be shared more easily.

**Key recommendations**

This review into the identification practice of young carers has reiterated the importance of the Children and Families Act 2014 and Care Act 2014 – particularly whole system and whole family approaches. For these to be effective, they require commitment from multiple agencies and a fundamental change in organisational culture. Young carer services are trying to identify and support young carers, often on very limited resources, supplementing any statutory funding they receive through fundraising activity. Without senior statutory leadership and integration into wider identification and support mechanisms, the voluntary sector is struggling to ensure young carers are appropriately prioritised in local strategies and funding policy. This needs to be met by a national response which promotes transformational change and emphasises young carers as a priority both locally and nationally.

**Oversight and scrutiny**

**National:** Mentioned during the research was the need for recognition of young carers within the Ofsted Education Inspection Framework, implemented in September 2019. The DfE has reinforced its view that the revised framework has been designed to be clear that schools should understand the needs of all pupils and that an exhaustive list of vulnerable
pupils is not possible. We recommend that Ofsted should ask every school about the identification and support that they are providing young carers as a hidden and vulnerable group of children and young people. By a similar token, Ofsted should be asking about the identification and support of young carers in its inspections of children’s social services. The Care Quality Commission (CQC) monitoring of GP practices should explicitly ask how young carers are being registered, identified and supported. Oversight of young carers needs to be strengthened to ensure this vulnerable group of children become better recognised and understood so that their needs are addressed in local planning and provision.

It was viewed that central government should be doing considerably more to ensure that the duties which came into force as a result of the Children and Families Act 2014 and Care Act 2014 are being implemented. This includes creating more robust data collection mechanisms which capture how young carers are being identified across key partners, how they are being assessed and how they are being supported. This data must be monitored so that progress can be tracked.

Local: Carers strategies must incorporate young carers and plan for their identification and support. Led by senior management, a carers strategy should set clear expectations and secure commitment from key agencies to establish multi-agency pathways to support, working together protocols and mechanisms for communication and evolving delivery. This strategy will have limited success if it does not have senior engagement, active commitment and regular review. Another potential lever is local authority cabinet members, scrutiny committees and senior officers who can have an important role in the overview of commissioning practices and implementation of legal duties.

Leadership

National: Respondents felt that very little would improve without policy levers to drive change. There should be stronger identification duties, particularly in schools, and policies which drive senior commitment across health, social care and education to form effective multi-agency pathways which ensure early identification and support of young carers and young adult carers.

Local: Senior and documented buy-in from health, social care and education leaders should exist in a core set of commitments which aid the identification of young carers. Where possible, this should include a young carer brief within an organisation’s infrastructure will support continuity, despite staff turnover, and overcome the key barrier of not knowing the right person to approach.
Transformation and investment

National: It was clear that the sector was struggling to deliver services for young carers on the available funding. Respondents felt that only with increased funding, or policy which prioritised funding for young carers, would there be the stability they needed to provide the full range of activities required to achieve effective early identification of young carers. Local government should be adequately funded to meet its duties in the Care Act 2014 and Children and Families Act 2014.

Local: While it is undeniably the case that financial cuts have created a constrained environment, it is not a justifiable reason for local planning and commissioning to deprioritise the needs of young carers and their families. Local discourse readily explains away failures for these vulnerable children on the basis that there is no money, instead of considering how its available resources can work better for these children and young people. Local government must transform its services so that young carers are integrated into wider local authority provision and not viewed in isolation. Transformation must consider how organisations can work together and embed that practice. Professionals need to understand their core responsibilities and how they contribute to the whole, and technology must support communication. Investment can avoid larger scale long-term expenditure on crisis and poor outcomes.

Workforce development

National: For young carers to be routinely identified, acknowledged and understood in the same way other vulnerable children are, young carers ultimately need to be included in pre-registration and mandatory training for children’s and adult social workers, health professionals and teachers.

Right now, the focus needs to be on communicating the available tools and resources with the sector and investing in activity which gives them the confidence to identify and support young carers instead of spending limited resources on creating new but similar materials.

Local: Organisations should incorporate training on young carer identification and support into induction and ongoing professional development.
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