

## Young Carers Sub-Group Meeting

8<sup>th</sup> May 2012

Members in Attendance: Helen Dunn (Action for Children - Chair), Billy McMillan (Barnardo's), Andrew Hawthorne (HSCB), Anne Godfrey (HSCB), Nicola Topping

Apologies: Rosemary Breslin,

Item	Subject	Action
1.	<b>Introduction</b>	
	Helen Dunn welcomed the members to the meeting.	
2.	<b>Previous Minutes</b>	
	HD noted that there are now three sets of minutes published on the CYPSP website. Once agreed, the minutes for February and May will also be published online.	
3.	<b>Amendments to minutes of meeting 6<sup>th</sup> February 2012</b>	
	Several amendments were made to the minutes of the meeting on 6 <sup>th</sup> February 2012.	DK to make amendments
	BM was not listed on the previous minutes and is to be added.	
	AG asked for the CYPSP logo to be displayed in place of the Action for Children logo.	
	Regarding item four in the previous minutes, BM will make the evaluation available.	
	NT will disseminate information to teachers subject to agreement with colleagues. She also wishes to add that there is nothing on the current recording system to record a pupil as a young carer.	
	BM feels that we need to make attendees at Case Conferences and Gateway Teams aware of what services the young carers project provides.	
4.	<b>Action Plan</b>	
	AH has been working on an action plan for the young carers' AH to update outcomes with HD. This Information is split into qualitative and quantitative. The group then reviewed the action plan with a view to making sure the outcomes were mapped correctly and to add more detail where required.	
5.	<b>Outcome - Healthy</b>	

Item	Subject	Action
	<p>AG asked if there was any quantitative information to gauge the health of young people. HD answered that there was and that this was tied in with how well the services are delivering and how to meet the needs of the service users.</p>	
	<p>AG feels that the emotional and mental health of the young carers is the most important. BM added that the mental strain of being a young carer takes its toll and they often express anxiety and stress. There is also research to suggest this.</p>	
	<p>AG asked how unmet needs can be identified. BM feels this is difficult but stated that there was a formula that would allow the group to work out the deficit between registered young carers and what research suggests.</p>	
	<p>BM also added that identifying young carers in school was often associated with other issues and not just non-attendance.</p>	
	<p>AG asked if there is a way to find out how many young carers are caring for someone with a mental health problem to better inform hidden harm and family work. HD feels that this will be important as the research will help shape services to meet needs – there is a Hidden Harm research and information group looking at baselines and information captured by the Young Carers Services can be adapted to support this and also parental mental health issues.</p>	
	<p>AG feels that explanation is required regarding the Outcome Star assessment tool.</p>	<p>H,D to check copyright with triangle</p>
	<p>AG feels that we will need a bigger service to meet the needs of young carers in Northern Ireland.</p>	
	<p>Due to time constraints, only the qualitative and quantitative information was discussed for the other points on the action plan.</p>	
<p><b>6. Enjoying Learning and Achieving</b></p>	<p>Information on the number of young carers involved in community based youth activities is only available if a child in one of these activities speaks of needs. It was decided this should be moved to quantitative information. AH to move action plan</p>	
	<p>Regarding school attendance, NT stated that EWOs can access attendance information for identified young carers.</p>	
	<p>AG stated that if this is done regularly, it should identify if young carers are being identified through school. BM added that a lot of young carers do not have attendance problems and that they can be identified by other means such as not having homework done or lateness. NT will examine what information it may be possible to collect.</p>	<p>NT to do and AH to look at research on YC educational</p>

Item	Subject	Action
		needs
7.	<b>Outcome – Living in Safety and with Stability</b>	
	<p>BM suggested looking at statistical information for young carers on the AH to look at child protection register as a result of hidden harm. HD added that not stats on every child in a hidden harm situation is a young carer although agreed hidden harm. with AG that there will be a correlation between the two.</p>	
	<p>NT feels that we should consider social, emotional and behavioural difficulties (SEBD) instead of 'behavioural difficulties'</p>	AH to change
8.	<b>Outcome – Experiencing Environmental and Economic Wellbeing</b>	
	<p>AG – Young carers are twice as likely as their peers to be NEET – this figure is taken from those not in employment, education or training.</p>	
	<p>HD asked how we should define poor housing conditions; AG responded that we use the housing executive's definition and measure. It was also felt that this should be moved from the quantitative to qualitative section.</p>	
	<p>Regarding young carers who are receiving benefits, HD asked if we should be collecting information on young carers whose parents are receiving benefits. This is worth noting the education maintenance allowance is about to end and will potentially put more young carers and their families into poverty.</p>	
9.	<b>Outcome – Contributing Positively to Society.</b>	
	<p>AG feels that it is worth noting that young carers contribute to society just by being young carers.</p>	AH to include under quantitative information
	<p>We should include help given to young carers to become recognised for their achievement.</p>	
	<p>All young carers have a right to community activity but are not always freed up to do it. BM feels that young carers need help to lobby and participate.</p>	
	<p>AG and BM – These are the actions that we take also to raise awareness, this helps young carers become more responsible citizens</p>	

Item	Subject	Action
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**10. Outcome – Living in a Society which Respects their Rights.**

BM feels that we should switch from a needs-based approach to a rights-based approach. This should be underpinned by the UN convention on the rights of the child.

AG feels that we need to identify the number of young carers from the BME community in order to let us know if we are reaching them.

BM spoke of high level outcomes; ensuring that rights are upheld, adhered to and supported. The rights of the child is infringed if they are stuck at home all day The young carers service should ensure rights to services and participation.

**11. AOB**

HD stated that there is a need to allow AH to re-draft the action plan. A deadline of 25<sup>th</sup> May was set.

HD and BM to submit a report to the Children and Young Peoples Strategic Partnership on June 11<sup>th</sup>. It was agreed that the completed action plan will be presented as the report.

AG finished by stating that young carers are largely invisible and that education is the best way to get to them. It is therefore important to raise awareness with the education members of the partnership.

BM added that young carers want to feel good in school and for schools to make adjustments and allowances to let them do that.

Date of next meeting: 8<sup>th</sup> June 2012 at 2.00pm in Action for Children