Camden's Children and Learning Directorate uses relational practice as the foundation for all our work. Our integrative relational practice framework is based on our values, and to designed to help achieve the Directorates purpose: to work with children, families and communities to make a positive, lasting difference to their futures, so they have the best start in life.

We recognise the impact of structural inequalities on the lives of the children and families we work with and as a service we will embrace inclusive, antidiscriminatory and anti-racist practice based on our values and our mission to champion social justice.

Our practice framework centres on honest and compassionate relationships with those we serve and with each other. It is an expectation that all Directorate policies and procedures are implemented in line with our practice framework, and that any actions within policies and procedures reflect its ethics, values and practice expectations.

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1 Introduction

Camden recognises the need to ensure that young carers are protected from excessive and inappropriate caring responsibilities so that they can pursue their interests, learn and develop and achieve good outcomes in the same way as their peers without being held back by their caring role.

Camden's strategy for the support of young carers is based on a whole family approach, in which the needs of the whole family are assessed and services provided to ensure that young carers are not taking on an excessive caring role.

2 Purpose of protocol

Camden is committed to implementing a whole family approach to care provision based on a high level of joint working between Children, Schools and Families and Adult Social Care. This protocol sets out how both services will work together to ensure that the needs of young carers in the borough are met.

The protocol provides the framework for:

- joint working between the services
- the early identification and assessment of young carers
- pathways for referring young carers on to appropriate support services.

The aim of the protocol is to ensure that:

- families receive the right package of care and support to meet their needs based on assessment of the whole family and taking into account the young carer's ability to meet the needs of the adult needing care;
- young carers are protected from excessive or inappropriate caring responsibilities with regards to their age and understanding;
- young carers are able to achieve good outcomes and realise their potential in the same way as their peers;
- young carers are fully involved in deciding on the right care packages for their family;
- there is a smooth transition to adult services for young carers.

3 Legal framework

Camden and Islington have agreed a joint Young Carers Strategy based on the Memorandum of Understanding drawn up by the Association of Directors of Social Services (ADASS) and the Association of Directors of Children's Services (ADCS). Camden and Islington strategy for young carers - 2012 to 2015.pdf

The strategy aims to ensure that the boroughs work together to provide support to young carers that is based on the needs of all family members and recognises the young carer's right to thrive and achieve good outcomes. This protocol supports the implementation of the strategy.

The Care Act 2014 places a duty on local authorities to:

- assess the needs and provide care and support for adults with disabilities or illness that promotes their independence and wellbeing and enables them to live as well as possible **and**
- assess the needs and provide support to the people who care for them, including young carers.

The **Children and Families Act 2014** and the **Young Carers Regulations 2015** places a duty on local authorities to:

- identify, assess and support any child who is a young carer or carry out an assessment of any young carer on request
- consider whether the young carer is a "child in need"
- align assessment processes so that there is a "whole family" approach to assessing the needs of the young carer and the adult for whom they provide care
- provide any necessary support to the adult to ensure the young carer is protected from excessive and inappropriate caring responsibilities.

Under the statutory guidance **Working together to safeguard children 2015** young carers are one of a group of children who are identified as potentially in need of support from early help services in order to achieve good outcomes.

Where the young carer is assessed as a child in need under the **Children Act 1989** due to the impact of their caring responsibilities, the local has a duty to provide services and support to help that child reach a reasonable standard of development.

4 Roles and responsibilities

Adult Social Care (ASC) is responsible for discharging Camden's duties under the Care Act 2014 by delivering social care services for adults in the borough including carrying out assessments of need for the adult and their carer and providing packages of care to support the adult. As part of this assessment, the needs of any young carer will be identified and addressed including, where appropriate, a referral made to the young carer's project. Where an adult is in need of care or services and assessment shows that this is impacting on their parental capacity, the ASC social worker will need to consider a referral to CSSW for a further assessment of the young carer's needs.

Children's Safeguarding and Social Work (CSSW) is responsible for discharging Camden's duty under the Children Act 1989 by delivering social care services for children in the borough who are assessed as being at level 3 and 4 of Camden's eligibility criteria (see appendix 1).

Early help services (EHS) are responsible for delivering early help and support to children at level 2 of Camden's eligibility criteria (see appendix 1).

CSSW and EHS will provide services for children to meet any needs arising as a result of the impact of their caring role.

As part of this protocol:

- **all services** will assess adults and the children and young people involved in their care appropriately and provide an integrated package of care that meets the needs of the whole family;
- all workers will be able to:
 - understand the issues faced by young carers and Camden's duty to assess and meet their needs
 - identify children and young people who are carrying out a caring role
 - assess the needs of young carers and understand the impact of this on their wellbeing
 - identify support packages to reduce their caring responsibilities
 - make appropriate referrals to ASC, early help services and CSSW on behalf of the child and their parents
 - liaise with co-workers to deliver integrated packages of care and support where services are jointly working with a family
 - ensure the young carer's voice is heard within the process and that their wishes and feelings are ascertained.

All staff have a general safeguarding duty to children and young people and must take appropriate action to safeguard and promote their welfare.

5 Meeting the needs of young carers

Young carers are those children under the age of 18 who provide support, care and assistance for parents or other family members, including direct care and taking on responsibility for household tasks or caring for younger siblings.

Although many young carers are proud of their caring status, there is a risk that caring responsibilities may have a negative impact on their health and wellbeing, education and social development. In some cases, children and young people may not be aware of their status as a young carer.

Government policy recognises that young carers are a group of children and young people who are likely to have some unmet needs requiring support and preventative services from early help services. It is important that where a child or young person is recognised as a young carer that they are referred on to an appropriate early help service such as the young carers project in order to receive support.

Many young carers in Camden will already be known to council services. In the majority of cases, there will be no concerns about parenting or the young carer's welfare. However, there may be some cases where the child or young person's caring responsibilities are such that their caring role is negatively impacting on their health and development and they may be assessed as a child in need.

In some cases, parenting capacity may be affected by the parent's own issues, such as mental ill health, substance misuse or the presence of domestic violence. This may lead to concerns about the parent's ability to safeguard and promote the young carer's welfare and where this may lead to concerns about significant harm, a child protection response may be appropriate.

These cases may reach the threshold for a statutory social work service and a referral to CSSW should be made without delay. For full details on thresholds for intervention and service provision, please see appendices 1 and 2.

6 Identifying young carers

The council has a duty to ensure that workers coming into contact with children are able to identify a young carer and ensure they are offered an assessment. There are a number of ways in which a young carer may become known to Camden, but it is essential that whichever service identifies the young carer, appropriate action is taken to either assess their needs or refer them on for assessment. ASC are likely to come into contact with young carers during assessment of adult service users. It is essential that when carrying out assessments under the Care Act 2014 ASC social workers make enquiries and record information about all children living in the household or visiting the household and who are involved in providing care and support to the adult. This includes personal care and support with housework or looking after younger siblings.

Parents have a right to refuse assessment but ASC has a duty to carry out an assessment where the ASC social worker believes:

- the adult lacks mental capacity to make a decision on assessment and carrying out an assessment would be in their best interests **or**
- the adult is experiencing or at risk of experiencing abuse or neglect.

In either of these circumstances, the ASC social worker should also make a referral to the MASH team on behalf of the young carer.

If ASC does not carry out an assessment following a refusal, the social worker should ensure the family is given any relevant information leaflets so that they are able to request an assessment at a later date if they wish to. The social worker should also provide information on any community support the adult could access.

Where the adult is assessed as ineligible for services but children are still expected to carry out excessive or inappropriate caring tasks, or the family's situation is such that the adult relies on help from children in order to parent effectively, the ASC social worker will make a referral to the early help service or CSSW on the child's behalf in order to get support for the child and family.

Many agencies, particularly schools may refer children to an appropriate early help service such as the young carer's project having identified them as young carers. These children will then be subject to a CAF assessment in order to identify their needs.

Children referred to CSSW due to safeguarding concerns may be identified as young carers during the course of working with the family and it is essential that the child and family assessment considers the impact of being a young carer on the child's development.

Where young carers are identified by workers in children's services, it is essential that the worker notifies ASC to ensure that the child is assessed as part of the whole family assessment under the Care Act so that ASC can put in any resources to reduce the family's reliance on the young carer.

7 Framework of assessment for young carers

7.1 Principles of assessment

- Whenever a child is identified as a young carer, the service that has first contact with the family will take appropriate action to ensure the assessment process is begun.
- Where appropriate, assessment for support and services will be based on a whole family approach where the needs of the whole family, including the young carer, are explored in a combined assessment.
- The safety and welfare of young carers will be prioritised by both services at all times in line with the general duty to safeguard and promote the welfare of children. If it is thought that a combined assessment may not safeguard and promote the child's welfare, a referral will be made for a separate assessment of the child to be carried out.
- The level of assessment will be proportionate to the needs of the family with escalation to more in-depth assessments taking place only when considered necessary and where the threshold for that assessment has been met.

7.2 Levels of assessment

There are 3 tiers of assessment for young carers depending on the level and complexity of their needs, and assessment will be carried out at the lowest level of intervention depending on the needs of the child and the family. All assessments will include a young carer's assessment as required by the regulations.

- Level 1: Whole family assessments under the Care Act 2014 will be carried out by ASC social workers. This assessment will look at how reliant the family are on the young carer's contribution and what packages of care can be put in place to reduce the young carer's levels of caring and help support parents in their parenting role.
- Level 2: If it is thought that the young carer has other needs or that their caring role is impacting on their general development, the young carer will be referred to an appropriate early help service such as the young carers project for intervention including *a CAF assessment* to look at what early help can be offered to the family.

• Level 3: If there are safeguarding concerns or the level of caring is such that it is having a detrimental effect on the child's development, or the young carer is also caring for another child, the case must be referred to CSSW for a *child and family assessment*. This assessment will determine the level of the child's needs and what statutory intervention will be required to meet these needs, for example child in need or child protection procedures.

All workers carrying out assessments of young carers may seek advice from Family Action workers who have expertise in the assessment of young carers. In complex cases, the young carers' assessment may be carried out jointly with Family Action.

7.3 Format of assessments

All assessments involving young carers should determine the level, nature and type of care provided and whether these are appropriate given the age and understanding of the young carer. Taking into account the young carer's age (and gender where relevant) excessive and inappropriate caring responsibilities include:

- personal care, including bathing and toileting
- strenuous tasks such as lifting
- administering medication
- maintaining the family budget
- providing emotional support to an adult
- providing support to an adult with substance misuse issues
- taking on caring responsibilities for younger siblings.

The assessment should then consider the impact of the caring responsibilities on the following:

- the young carer's education, including their attendance and attainment, their wishes for their future and the extent to which they are able to take up education, training and employment opportunities;
- their physical health and mental and emotional wellbeing;
- their social development and opportunities for play, out-of-home activities and socialisation with peers;
- their relationship with their family, including the adult they care for and any siblings they look after;
- their views on being a young carer, including any differences of opinion between the young carer and their family regarding levels of caring.

The assessment should also consider the sustainability of the young carer continuing in their role over time, and reviews should include getting the views of young carers on whether they wish to continue in or reduce their role.

7.4 Carrying out a young carer's assessment

There is an expectation that the young carer is seen by the social worker as part of the assessment and that they have an opportunity to give their views and wishes. ASC social workers particularly need to ensure that the child's voice is heard during whole family assessments.

In some circumstances, it is recommended that the young carer is seen alone, for example where there are concerns that parents are minimising the level or nature of care provided or there appears to be differences in opinion between the young carer and the adult about whether the level of care is excessive.

It is important that young carers and their families understand the nature of the assessment and its likely outcome; parents and children may misunderstand the reasons for the assessment and may fail to engage fully because they fear the child may be removed from the family. Workers carrying out young carer assessments should provide young carers and their families with a copy of relevant information leaflets.

It is recommended that services carrying out assessments of young carers use the young carer assessment questionnaire available on Framework i as this helps workers to identify the key tasks that indicate a child or young person is a young carer and helps to establish the level and nature of their caring role and the extent to which they are relied on by the family.

When working with families, social workers should be aware that parents may fearful of disclosing the full extent of the child's caring responsibilities for fear that the council may judge them to be inadequate parents and that their child may be removed from their care. Social workers should reassure parents that Camden will always work to support families so that they can stay together.

If ASC social workers are unsure as to whether the child or young person is carrying out a caring role, for example if parents are not co-operating or appear to be hiding the child's role, social workers can explore the possibility of carrying out a joint home visit with Family Action in order to help the social worker explore the child's caring role and its impact on them.

8 Providing services

Services for young carers will aim to achieve the following:

- Reducing the family's reliance on the young carer so that they do not have to carry out excessive or inappropriate care; these services will be identified and provided by ASC and will be designed to ensure the package of care for the adult will reduce young carer's level of responsibility.
- Safeguarding and promoting the welfare of the young carer; these services will be identified and provided by early help services or CSSW and will be designed to meet the assessed needs of the young carer so that the impact of their caring role on their development is reduced and outcomes for the young carer improved.

In some cases, services may agree joint funding or service provision for services designed to implement whole family approaches where both services are working with a family. These may be services aimed at building parental capacity and supporting the parenting role.

ASC services

As part of the assessment process, Adult Social Care will identify the extent of the young carer's caring role and which elements of that role are inappropriate.

- The inappropriate elements of the caring role will be factored into the care and support planning process to ensure that these caring needs are no longer met by the young carer but are met as part of the plan.
- Where ongoing needs are identified for the young carer an appropriate referral to early help services or CSSW will occur.

Information and advice will be provided to all young carers identified as part of Adult Social Care's work with an adult and their family.

Early help services

Early help services (known as the *early help offer*) will be offered to all young carers in line with Camden's threshold and eligibility criteria, and will be based on the needs identified in the CAF assessment.

All young carers receiving an early help service will have an identified network of professionals working with them known as the Team around the Child (TAC) with multi-agency work co-ordinated by a lead professional who will be the main point of contact for ASC social workers. The child will have a CAF delivery plan detailing actions and services to support them to achieve good outcomes.

Early help in Camden is delivered by a wide range of organisations

- Most young carers will be referred to Family Action, a borough-wide service for young carers that offers assessment, advocacy and support for young carers.
- Older young carers may be offered a service from the Integrated Youth Support Service.
- Where there are issues around school attendance, the Children, Schools and Families guidance on children missing from education will apply. The Monitoring and Inclusion Officer will work with the school and the family and young person to support their attendance. Link
- Where it would be helpful, families may be offered a Family Group Conference to help them explore potential support for the young carer from the extended family and friends network.

CSSW services

CSSW will provide a statutory social work service where the young carer:

- is assessed as being a child in need and needs services in order to reach or maintain a reasonable standard of development or
- is thought to be suffering or at risk of significant harm, defined as ill-treatment or impairment of health and development or the impact of seeing the illtreatment of another person, and there is a duty to intervene under child protection procedures.

The child will have an allocated worker and within 2 weeks of assessment, a child in need plan will be agreed at a child in need professionals meeting detailing services and interventions aimed to improve outcomes for the young carer.

Where there are child protection concerns, an initial child protection case conference will be held to decide if the child needs to be subject to a child protection plan in order to keep them safe and meet their needs.

The child's social worker will be the lead professional who will co-ordinate the work of the professional network to ensure multi-agency working.

9 Review of services

ASC

Care and Support plans are reviewed in line with the Care Act 2014 regulations and guidance.

- A 'light touch' review is held 6-8 weeks after the plan is put in place to ensure it is working as anticipated.
- A scheduled review is held, the date of which is set at the planning stage, to take place within 12 months of the initial planning stage.
- Unplanned reviews may be held when the individual's needs change or issues arise.
- Reviews may also be held where an individual requests that their plan is reviewed.

Children's services

- The early help CAF delivery plan is reviewed at a TAC meeting; timescales for reviews are dictated by the needs of the individual case.
- The CSSW child in need plan is reviewed at a Child in Need review meeting on a 6 monthly basis. Child protection plans are reviewed at 3 months and then every 6 months at a review child protection case conference.

Reviews are attended by the child's professional network and a revised plan agreed. It is an expectation that ASC social workers working with the young carer's family attends the review or provide a report, particularly if there have been any changes to the adult's needs and the packages of care provided by ASC.

10 Referral on to other services

It is essential that services are aware of how to initiate the assessment process for young carers and/or escalate concerns about the impact of caring on a young carer by making appropriate referrals for a more in-depth assessment.

• ASC social workers will refer the case to the appropriate early help service using an e-CAF referral record and attach a copy of Care Act assessment. The early help service will carry out a CAF referral incorporating a young carer's assessment.

- Where further early help services are required, a referral will be made to the early help e-CAF team.
- ASC or the early help service will refer directly to CSSW via the MASH team using an e-CAF referral record where there is thought to be safeguarding concerns and the child may be a child in need.
- Where an early help service or CSSW social workers identify that a child they work with may be a young carer, they will contact ASC to find out if the family is known and whether the young carer was included in any assessment of the adult.
- Where a Care Act assessment has already been carried out but it is thought that the package of care does not reduce the young carer's role enough, or it is thought that parents were not truthful during assessment regarding the child's role, the early help service or CSSW may challenge the assessment and request that it is repeated.
- ASC may be requested to carry out a re-assessment of the family if it is thought that there is a fluctuating need.

11 Transitions

The Care Act has placed a focus on young carers in transition to ensure that they are able to access a transition assessment prior to becoming 18 years of age. This will focus on ensuring that young carers are able to consider their caring role alongside their own aspirations for the future and to make sure that young carers know what services and support would be available to them should they continue to provide care post 18 years.

All young carers who are aged 16 and who are likely to remain in their caring role beyond the age of 18 will be entitled to a transition assessment. The purpose of this assessment is to ensure that the young carer continues to receive the right support for their caring role and that they are able to take up any opportunities for further education, training and employment without their caring role impinging on this.

A service to support young adult carers aged 18-25 years is provided by Camden Carers Service. The service works with young people to provide individual support and advice around issues such as housing, accessing education and employment and managing their aspirations with their caring role. For some young people this may mean that they cease to provide care and for others, it is about finding a balance between the caring role and their ambitions to pursue the future of their choice.

The Young Adult Care service will offer support to young adult carers at a lower age limit which will be reviewed to ensure transitional support aligns with the Care Act 2014. The service works alongside the Young Carers project to support transition from young carer services to adult carer services at 18 years of age.

12 Confidentiality and information sharing

Good information sharing is essential to multi-agency working and joint service delivery, but workers should be aware that there are limits to information sharing. Much of the information gathered in the course of working with families is confidential, in particular personal and sensitive information about mental health or substance misuse may only be shared with the express consent of the service user.

Information may only be shared without consent only when:

- where the child has suffered harm and there are real concerns that seeking consent will place the child at risk of further harm
- where seeking consent may prejudice the investigation of a crime
- where it would not be reasonably practicable to seek consent taking into account all the circumstances known to the social worker at the time (for example it would cause undue delay in acting)
- where disclosure has been ordered by the court.

It is essential that ASC and Children, Schools and Families share the following information in order to support multi-agency working:

- details of families each service works with where there is a young carer
- the outcome of any assessment carried out and agreed plan of intervention
- details of any packages of care or services to be provided or actions and interventions to be carried out by services
- any safeguarding or child protection concerns.

All workers should:

- only share information with the consent of families unless there are concerns that a child is at risk of significant harm
- only share information for the purpose of implementing this protocol
- only share relevant and proportionate information on a "need to know" basis
- ensure any information that is shared is accurate
- keep a record of what information was shared, with whom, when and why.

13 Training

It is an expectation that each service will ensure workers attend Camden's joint young carers training; this training has been designed for multi-agency delivery and aims to raise awareness of the issues faced by young carers and enable them to identify young carers and carry out young carers assessments.

All ASC social workers will receive specific training around their responsibilities under the Care Act 2014. ASC social workers should also receive training in the use of the e-CAF referral system and Camden Safeguarding Children Board safeguarding training at the appropriate level.

Where possible, training will be delivered in a multi-agency setting in order to share knowledge, improve awareness of each service's role and contribute to a better understanding of the issues faced by young carers. In particular, training will be focussed on child development in order to help practitioners make sound judgements on the impact of caring on the child.

Managers are responsible for ensuring that staff are able to take up training opportunities and have received the necessary training to carry out their tasks under this protocol.

14 Recording and management information

Each service will record information about families and young carers they work with within the relevant workflow on the Framework i system. Standards of recording should meet the required standard as set out by each service.

At a minimum, case records should contain the following information:

- the family composition, including the names and ages of all children living in the household
- details of assessment of the whole family and/or the individual young carer
- details of any referrals made to other services on behalf of the young carer
- details of joint working between ASC and Children, Schools and Families.

Early help services should ensure that there is a CAF assessment and action plan on the file, and that there is a record of reviews carried out by the Team around the Child. CSSW should ensure there is a child and family assessment and CIN/CP plan on the file and that there is a record of CIN/CP reviews carried out in line with statutory requirements. The implementation and operation of this protocol will be monitored to ensure quality of service delivery and standards of practice and ensure that the aims of the protocol are being met. To achieve this, both services will agree a set of performance management data.

ASC, CSSW and early help services will collect and collate information about young carers known to each service including:

- the child's name and personal details
- how they were identified as a young carer
- which agencies are involved with the family
- what assessments were carried out with regard to the young carer
- what referrals to other services have been made on the child's behalf.

A joint annual report on the implementation of this protocol, service delivery and outcomes for young carers in Camden written by ASC and Children, Schools and Families will be presented to the Young Carers Strategy Group.

15 Resolving differences of professional opinion

All services involved in the delivery of services for young carers need to be aware of areas of potential disagreement and be prepared to challenge where it is thought that the young carer's best interests are not being met and this protocol is not being fully implemented. For example, services should be prepared to challenge each other regarding the quality of assessments or levels of service provided.

In the event of a dispute or disagreement arising between services, in the first instance the matter should be discussed between the respective line managers. If the differences cannot be resolved at this level within a reasonable timescale, then the matter should be escalated to the relevant senior officers in each service for a solution to be found.

If this is not possible, the matter should be referred to the Director of Children's Services and the Director for Adult Social Care for a decision. Any disputes involving cases where there is a possible risk to a child should be referred to the Child Protection Coordinator based in the Quality Assurance Unit of CSSW. Any disagreements or differences should be recorded on the case file, including the views of the other party.

16 Review of this protocol

This document will be reviewed annually by the Young Carer's Strategy Group.

Appendix 1: Indicators of need for young carers

Level of need	Outcome of young carer's assessment	Agency response
Level 1: young carers whose needs can be met through whole family support provided by ASC	Low level needs scoring under 10; The child does not carry out or caring role or the role involves low level tasks that do not negatively impact on their physical and emotional health and wellbeing and/or their education and social development	ASC carries out carers assessment as part of the Care Act assessment and puts in package of care
Level 2: young carers with low levels of need relating to their development requiring support from early help services to achieve good outcomes	Moderate needs scoring 10-13; Young carer carries out caring tasks that are not excessive and are appropriate to their age but which may have a negative impact on their physical and emotional health and wellbeing and/or their education and social development	ASC refers the young carer to Camden's Early Help service by e-CAF referral; the Early Help service
Level 3: young carers who require statutory social work intervention where the impact of caring makes them a child in need or at risk of harm	High level needs scoring 14+; Young carers carrying out excessive or inappropriate tasks such as taking on responsibility for household tasks and budgeting, personal care of an adult or looking after younger siblings	ASC refers the young carer to CSSW by e-CAF referral for a social work service; CSSW carry out a child and family assessment and

Appendix 2: Thresholds criteria for children's services in Camden

	Level of need	Indicators	Responses
Universal	Level 1: Universal: children whose needs are being met through universal services. This includes children with additional needs which can be met through a single universal service.	 Children in good physical health whose general development is age appropriate and who are making good progress academically. Children living in stable families where parents are able to meet all the child's needs. Children who need some support and who would benefit from additional universal services to improve outcomes. 	All children should receive universal services such as health care and education, as well as early years and Integrated Youth Support Services. Professionals working with families should check if children are in receipt of universal services and take appropriate action where this is not the case or consider whether to step up to early help intervention.
Early help	Level 2: Low level needs or vulnerable to poor outcomes: Children whose needs cannot be met from one service and where there are a number of factors preventing the child from achieving their potential. Two or more of the indicators listed here need to be present.	 Children with mild disabilities or health issues. Children with special educational needs. Children who are out of school or have regular unauthorised absences. Young carers. Children showing signs of engaging in antisocial or criminal behaviour. Children growing up in difficult family circumstances where there are low levels of substance misuse, adult mental health difficulties or domestic violence. Families affected by parental ill health, custody, homelessness, poverty, immigration or other problems. Children showing early signs of developmental delay. Families affected by social isolation, discrimination or harassment. Children who may be being radicalised by people outside of their immediate family. 	Professionals should talk to the family about carrying out a CAF assessment in order to identify appropriate services that could improve outcomes for the child. Where more than one agency is involved, a lead professional should be identified and the Team Around the Child should meet to devise an action plan that meets the child's additional needs. Where the CAF indicates that thresholds have been met for a child in need service, a step up referral should be made to CSSW. Where there are concerns that a child may be being radicalised, professionals should discuss the matter with Camden's Prevent Co-ordinator or the Police Prevent Engagement Officer for advice on a possible referral to the Channel Panel.

Child in need	 Level 3: Complex needs: Children who have more complex and enduring needs requiring a statutory social work service. Parents may lack insight and may not engage with services to address problems. For youth offending cases, children who are involved in low level criminal activity and who have entered the criminal justice system. 	 Children with lifelong disabilities. Children whose growth and development is being impaired by the quality of care received. Children exhibiting high levels of behavioural difficulties and risk-taking behaviour or who are out of parental control. Pregnant women whose lifestyle may be affecting the development of the unborn child. Parents experiencing difficulties in parenting capacity due to substance misuse, physical disability, learning difficulties, domestic or family violence or mental health problems. Children with high levels of emotional difficulties who may need a service from CAMHS. Children who may be being radicalised by their parents or siblings. 	Professionals should talk to the family about making a CAF referral to CSSW for a child in need service. CSSW will carry out a child and family assessment and convene a child in need meeting to devise the child's CIN plan. The allocated social worker will be the child's lead professional. Where there are concerns that a child may be being radicalised, professionals should discuss the matter with Camden's Prevent Co-ordinator or the Police Prevent Engagement Officer for advice on a possible referral to the Channel Panel.
Child protection	 Level 4: Acute needs; Children may be suffering significant harm, in need of a safe home and/or a legal order to safeguard and promote their welfare. Parents face difficulties that affect parenting capacity and may not engage with services. For youth offending cases, children who are involved in serious criminal activity, eg gangs, and who may be remanded into care or receive a custodial sentence. 	 Children requiring accommodation because there is no-one who is able to care for them. Children whom it is suspected are being physically, emotionally or sexually abused or neglected or living with high levels of domestic violence. Children who may be at risk due to trafficking, sexual exploitation, forced marriage or FGM. Unborn babies where a pre-birth assessment has shown them to be at serious risk of significant harm Children who are deeply emeshed in the extremist narrative and/or at imminent risk of carrying out violent acts or leaving the UK following radicalisation. 	Professionals must make a referral to CSSW. If the matter is urgent, professionals can make a child protection referral to the MASH by telephone and follow up with a written referral within 48 hours. CSSW will carry out a child and family assessment and take appropriate action needed to safeguard the child under statutory child protection procedures. The allocated social worker will be the lead professional for the child. Where there are high levels of concern around radicalisation the Police must be informed.

Appendix 3

Young carers resources in Camden

Services from the London Borough of Camden

Early help e-CAF team 020 7974 8832/8791

Integrated Youth Support Services 020 7974 4163

Multi-agency Safeguarding Hub (MASH) team 020 7974 3317

Families in Focus 020 7974 4355/7212

Voluntary sector services

Family Action

The Exchange Watkinson Road N7 8DE 020 7272 6933

Crossroads Young Carer's Project

6-8 York Mews NW5 2UJ 020 7485 7416

Camden children's centres

Thomas Coram Children's Centre Mecklenburgh Square WC1N 2NY 020 7520 0385

Hampden Children's Centre 80 Polygon Road NW1 1HQ 020 7974 2841

Edith Neville Children's Centre Edith Neville Primary School 174 Ossulston Street NW1 1DN 020 7387 7158

Kidstime

Vadnie Bish House 33-43 Caversham Road NW5 2DR 020 7974 3165

Camden Carers Service

293-299 Kentish Town Road NW5 2TJ 020 7974 8950/895

Corams Fields Children's Centre Corams Fields 93 Guildford Street WC1N 1DN 020 7837 6611

Regent's Park Children's Centre Regents Park Nursery Augustus Street NW1 3TJ 020 7974 4753

1A Children's Centre 1A Rosebery Avenue EC1R 4SR 020 7974 7024 Agar Children's Centre Wrotham Road NW1 9SU 020 7974 4789

Brecknock Primary School Children's Centre Brecknock Primary School York Way N7 9QE 020 7485 6334

Harmood Children's Centre 1 Forge Place NW1 8DQ 020 7974 8961

Gospel Oak Children's Centre Gospel Oak Nursery Lismore Circus NW5 4QD 020 7974 3484 Konstam Children's Centre 75 Chester Road N19 5DH 020 7974 3721/020 272 3594

Langtry Children's Centre 11-29 Langtry Road NW8 0AJ 020 7624 0963

Kilburn Grange Children's Centre 1 Palmerston Road NW6 2JL 020 7974 5089

Sidings Community Centre Children's Centre Sidings Community Centre 150 Brassey Road NW6 2BA 020 7624 0588

School nurses

Sally Lydamore, service manager: 020 317 5859

Zaphira Kastrinaki: (La Sainte Union, Eleanor Palmer, Town, St Albans)

Suzanne Batten: (Christ Church (NW3), Parliament Hill School, St Josephs)

Carly Townsend: (Acland Burghley, Carlton, Primrose Hill)

Beverley Haynes: (St Pauls, St Patricks, Fleet, Netley, St Aloysius)

Rose Thomas: (Rosary, Gospel Oak, William Ellis, Hawley, St Dominic's)

Toyin Diyan: (Emmanuel, St Mary's Kilburn, St Eugene, New End, Edith Neville)

Shena Patel: (Brecknock, Torriano, Christopher Hatton, Argyle, Richard Cobden)

Anne Bunko: (St Mary's and St Pancras, Regent High, Christ Church NW1)

Samantha Elliot: (Haverstock, St Luke's, Holy Trinity NW3, Abacus Belsize)

Doreen Donaldson: (Our Lady's, St Michael's, Rhyl)

Natalie Emmett: (Holy Trinity and St Silas, Brookfield, Hampstead Parochial, St George's)

Aminata Mannah: (Camden School for Girls, Kingsgate)

Sivalakshmy: (Maria Fidelis, Fitzjohns)

Web-based resources

Babble.carers.org <u>Share - Chat - Support | Babble</u> On-line support for young carers

Carers Trust <u>What is a young carer? | Carers Trust |</u> <u>Action, help and advice for carers</u>

Barnardos Young carers I Barnardo's works with young carers The Children's Society Welcome | Include Programme

Young minds Young carers

Royal College of Psychiatrists Caring for young carers

Appendix 4 Young carers pathway

