

SERVICE SPECIFICATION

Service	Young Carers' Service in Lancashire
Commissioner Lead	Children and Families Commissioning (LCC)
Initial Funding Period	1 st April 2027 – 31 st March 2029 with the option to extend for any period of time up to a maximum date of 31 st March 2031

1. Purpose

1.1 Service Aims

To ensure the Authority fulfils its statutory duty in relation to the Children and Families Act (2014) and the Care Act (2014).

To provide a child focused and targeted service which promotes and protects the physical and mental wellbeing of Young Carers across the county, working in partnership with other agencies to provide a whole family approach.

1.2 Evidence Base

The Provider must comply with all legislation relating to the Service, including any subsequent updates and amendments. It is the responsibility of the Provider to keep up to date with any such developments.

In addition to the legislation outlined in the Contract Terms & Conditions, the Service is underpinned by the following key pieces of legislation, guidance, strategies, and plans:

- i. Children and Families Act 2014
- ii. Care Act 2014
- iii. Care and Support Regulations and Statutory Guidance issued under the Care Act 2014
- iv. The Young Carers (Needs Assessments) Regulation 2015
- v. Working Together to Safeguard Children 2026
- vi. Mental Health Act 1983 and 2007 and Mental Capacity Act 2005
- vii. The Health and Social Care Act 2001, 2008, 2012
- viii. Health and Care Act 2022
- ix. The Carers (Recognition and Services) Act 1995
- x. Children and Social Work Act 2017
- xi. Children's Social Care National Framework
- xii. Counter-Terrorism and Security Act 2015 and Counter-Terrorism and Border Security Act 2019
- xiii. The National Carers Action Plan
- xiv. The Care Act and Whole-Family Approaches 2015
- xv. No wrong doors: working together to support young carers and their families – A Memorandum of Understanding (and supporting guidance)
- xvi. Lancashire Family Safeguarding Model
- xvii. Children and Family Wellbeing Service Strategy and Service offer
- xviii. The Common Assessment Framework and the Continuum of Need
- xix. Lancashire Children and Young People's Plan
- xx. Lancashire Corporate Strategy
- xxi. Lancashire Carers Strategy
- xxii. Lancashire Young Carers Strategy and Action Plan

- xxiii. Lancashire Health and Wellbeing Strategy and Health and Social Care Network
- xxiv. Lancashire Children and Young People's Participation Strategy
- xxv. Lancashire Children's Social Care Procedures Manual
- xxvi. Pan Lancashire Policy and Procedures for Safeguarding Children Manual

The Counter Terrorism and Security Act places a duty on specified authorities, including local authorities, schools, HE and FE colleges, health, probation and the Police to have “due regard to the need to prevent people from being drawn into terrorism”.

Prevent aims to stop people becoming terrorists or supporting terrorism. It is considered “the only long-term solution” to the threat from terrorism.

In providing services to the Authority, the Provider will ensure that staff have awareness of the Prevent Duty and follow the procedures for concerns as outlined by the Lancashire Children's Safeguarding Assurance Partnerships.

The Provider will ensure that all their policies and procedures take account of the need to safeguard and promote the welfare of children and vulnerable adults. This shall include:

- A robust safeguarding policy in line with Lancashire Children's Safeguarding Assurance Partnerships guidance
- Working to Lancashire's Children Missing Policy and procedures should a child be missing from home
- Arrangements in place to reduce the risk of child sexual exploitation and radicalisation.

The Provider will have staff that have appropriate safeguarding and safe practice training consistent with their role and function and adhere to safeguarding guidance and policy, both the Provider and any additional requirements associated with working as part of the Service.

The Provider will ensure that information is shared efficiently and effectively with the Authority in respect of issues that may affect the safety and welfare of children and vulnerable adults. This shall include:

- Records, including images relating to children stored securely and safely
- Secure emails and appropriate encryption for sharing sensitive information.

The Provider will comply with policy and guidance relating to confidentiality and information sharing, recognising that they are working as part of an integrated service to meet the needs of the children and adults within the family.

The Provider will be familiar with and deliver services that comply with the Safeguarding policies and practice procedures of Lancashire, including but not exclusively:

<http://www.lancshiresafeguarding.org.uk/resources/key-guidance-policy-documents.aspx>

<https://lancshirescsc.trixonline.co.uk/contents/contents>

The Provider will have in place a Whistle Blowing Policy, which is made known to all staff and volunteers. It must contain a clear duty to report to an appropriate authority any circumstances or occurrence which is considered likely to significantly harm the safety, rights or welfare of children.

As part of the Equality Act 2010, the Authority is committed to providing services that are fair and accessible for everyone. As the Public Sector Equality Duty is non-delegable, the Authority also has a responsibility to ensure that its partners, companies and organisations that are commissioned to provide

services on its behalf take the same positive approach to equality and pay due regard to equality as set out below.

In line with the Equality Act's (specific duties) Regulations 2011, the Authority aims to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality between everybody
- Foster good relations between communities, tackling prejudice and promoting understanding
- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low

The Provider must deliver services in line with the above Authority equality objectives.

The Provider must consider the cultural, ethnic, religious, linguistic, and gender needs of families and children. Access to interpreters may be required for families and children whose first language is not English or have a sensory impairment. The Provider shall take into account a range of needs and support for families and children to integrate as fully as possible into local community networks, facilities and services as appropriate.

The Provider must keep and maintain equality monitoring for all service users against all the protected characteristics.

The Provider will work with the Authority to ensure compliance with the legislation, regulations and guidance, ensuring monitoring of standards and continuous improvement.

1.3 General Overview

A Young Carer is defined, in law, as a person under 18 who provides or intends to provide care for another person. This includes providing practical or emotional support which is not under or by virtue of a contract, or as voluntary work.

The term Young Carer should be taken to include Children under the age of 18 who provide regular and ongoing care and emotional support to a family member who is physically ill, disabled or misuses substances.

This 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 are that the caring responsibilities persist over time and are important in maintaining the health, safety or day to day wellbeing of the person cared for and / or the wider family.

Young Carers can also be 'children in need' under the Children's Act 1989, depending upon whether or not social care services consider the child's caring role prevents them from having a reasonable social life and achieving full school attendance. Young Carers may be within all stages of the Continuum of Need (CoN) and require support from universal up to and including statutory levels.

Young adult carers are usually defined as those carers aged 16-24 and therefore covers the transitional phase between the Children and Families Act and Care Act responsibilities.

1.4 Objectives

Young Carers should be identified, assessed and their families supported regardless of which service is contacted in the first place. The Authority and the Provider will work with partners to fulfil the duties set out in law, working across systems, taking a whole family approach to providing support. The specific objectives of the Service are to:

- i. Ensure Young Carers in Lancashire are identified and receive a carer's assessment under the statutory duty of the authority. The presence of a Young Carer in the family should always constitute an appearance of need and should trigger either an assessment or the offer of an assessment to the person needing care.
- ii. Assessments should ascertain why a child is caring and what needs to change in order to prevent them from undertaking excessive or inappropriate caring responsibilities which could impact adversely on their wellbeing, education, or social development.
- iii. Provide Young Carers transition assessments, undertaken from 14-17 years old (Care Act Young Carer's Assessment), if the young carer is likely to have needs after they become 18.
- iv. Consideration must be given to whether a Young Carer is a 'child in need' under the Children Act 1989. The assessment must establish if they are unlikely to achieve or maintain a reasonable standard of health or development without the provision of services.
- v. Embed a whole family approach where services are based on knowledge of the individual, the family and the community and involve families as partners in planning to build capacity and resilience.
- vi. Provide a proactive and responsive Service to Young Carers.
- vii. Embed effective pathways which clearly identify the routes in and out of the Service, stepping down or up in a timely manner.
- viii. Develop tailored information and support to Young Carers, including support to access a range of universal and targeted support services.
- ix. Reduce isolation and stigma, increase choice and access to multi-agency support for Young Carers and their families.
- x. Advance professionals understanding of Young Carers issues and raise awareness of the role of the Young Carers Service.
- xi. Obtain the views of Young Carers and their families about their needs and service requirements, to assist in future service planning and delivery.
- xii. Provide a Service that reflects the diversity of Lancashire's population and is sensitive to cultural and linguistic needs.
- xiii. Effectively influence and contribute to the implementation of local policies and practice relating to the service including the Carers Strategy and Young Carers Strategy for Lancashire.
- xiv. Work alongside the other agencies and services within Lancashire to achieve outcomes for Young Carers and their families (sharing good practice, contributing to the standardising of documentation and awareness of new policies and initiatives).
- xv. Where appropriate, source additional funding to improve the outcomes of Young Carers in Lancashire.

- xvi. The Authority will continually review models of best practice, including legislative changes. The Provider will be required to work collaboratively with the Authority to implement any new approaches.

1.5 Expected Outcomes

Outcomes relating to Young Carers should be aligned to national and local best practice, should be personalised and include four key areas; Health and Wellbeing; Education, Employment and Training; Social Space, Friendship and Leisure; and Transitions. Young Carers should also achieve the outcomes identified by the Lancashire Children's Partnership. Specifically, the expected high-level outcomes of this Service are:

- i. Young Carers and their family's needs are understood across all services which enables them to access an appropriate range of support which meets their needs and enables them to achieve positive outcomes in the key areas.
- ii. Young Carers receive child focused services which recognise the needs of the wider family, and work in partnership to ensure their needs are met.
- iii. Local policies and practice are influenced and implemented to ensure Children are protected in caring inappropriately at levels that impact on their own development.
- iv. Young Carers have improved self-esteem and confidence.
- v. A reduction in the sense of isolation experienced by many Young Carers, and their families, and a reduction in the stigma that Young Carers often feel, particularly when caring for a parent(s) with mental health or substance misuse.
- vi. Young Carers have improved family relationships.
- vii. Young Carers emotional and physical well-being is safeguarded by supporting their developmental needs.
- viii. Young Carers coping mechanisms and resilience is enhanced.
- ix. Young Carers are supported at key transitional stages throughout their childhood (primary to secondary school, secondary to further education, training, or workplace), specifically supported from children's to adult services.
- x. Children inform service development and design.

2. Scope

2.1 Service Description

The Provider will ensure Young Carers are identified and have access to an assessment or re-assessment that fulfils the statutory duties of the Authority.

The Provider will be creative, innovative, and accessible in order to reach hidden Young Carers. These children are often defined as those who live with parent/carers with mental health and/or substance misuse, those living in rural areas, from ethnic minority communities, LGBT, Roma, Gypsy, and traveller

communities; service (army etc.) families or those out of education. Similarly, adolescent young carers and young adult carers can be hidden.

The Provider will promote the rights of Young Carers through the provision, protection and participation of those children who continue to be negatively affected by a caring role within their family.

Assessed children will have access to support, tailored information and advice and targeted group activities which focus on the child but also take a 'whole family' approach working with other agencies, including VCFS early help providers, schools, further education establishments and health and social care.

The level of service provided will be dependent on the assessment of needs within the family, their motivation to engage and will take into account other support and services already involved.

The Service will include the provision of:

- i. Information, representation, support, and advocacy to Young Carers.
- ii. Group and one to one intervention that is age appropriate – addressing the needs and wants of Young Carers and Young Adult Carers.
- iii. Appropriate use of technology, such as video conferencing or other social platforms, to broaden the Service reach so that more Young Carers across the county can be identified, supported and represented.
- iv. Training and awareness raising about Young Carers including sharing referral routes and step up / down pathways.
- v. Partnership working, including whole family approaches, to advocate for the whole family at both policy and service level, as well as at an individual level. Identifying care needs of Young Carers, parenting needs; and reduce or prevent levels of inappropriate care by the child/children. This will include focusing on transitions between, Schools, Early Help Assessments and support and other Social Care processes.
- vi. Effective pathways to other support services where required, including to universal provision and other complementary early help provisions.

For avoidance of doubt, face to face intervention must be the priority and should not be substituted for alternative engagement platforms. The use of technology should allow for greater Service access for a higher number of Young Carers. This is likely to be for those assessed as having a lower level of caring responsibilities or age-related group participation activities whereby geographical location could be a barrier to engagement. Consideration must be given to accessibility and equity in provision. The development of these activities must be in agreement with the Authority.

2.2 Service User criteria

The Service applies to all children, within Lancashire County Council geographical boundaries (which excludes Blackburn with Darwen and Blackpool), aged 18 years old and under who are undertaking a caring role within the family.

Those children accessing the Service up to the age of 18 that require additional support for the transition into adult services may be supported by the Provider up to the age of 25, as agreed between the Provider and Authority.

2.3 Whole System Relationships

The Provider will seek to embed its work within the whole system, by developing good working relationships with partners through the use of the Early Help Assessment Framework (or updated processes); and participation in 'Team Around the Child/Family' (TAC/F) meetings, including implementing step down / up processes. The Provider will work within the whole system of provision to ensure that Young Carers gain support from all relevant services, where appropriate.

The Provider will enable Young Carers and their families to access support, to meet their needs, by advocating on their behalf and raising awareness. The diagram below identifies some of the key agencies that have a role to play in meeting the needs of Young Carers and their families.



2.4 Governance and Relevant networks

Lancashire's Policy, Commissioning and Children's Health Service will oversee and provide strategic direction, support and challenge to the Provider. The Policy, Commissioning and Children's Health Service is accountable and will provide regular reports to:

- I. Lancashire Children's Social Care Management Team
- II. Lancashire Education and Children's Services Senior Management Team

The Provider may be asked to attend, contribute and / or report to the relevant networks as required. These networks include, but not exclusive to:

- i. Children's Safeguarding Assurance Partnership.
- ii. Carers Strategy Groups.

- iii. Children and Family Wellbeing Service, in particular, locality manager / team meetings and service champions.
- iv. Lancashire Participation Network
- v. Public Health.

2.5 Social Value

'Social Value' is the additional economic, social, and environmental benefits that can be created when a public service purchases a service from an outside organisation, above and beyond the value of the service itself. Social Value must support the LCC's priorities:

- To prepare for the future
- To support the most vulnerable
- To boost the Lancashire economy, both creating and protecting jobs

The service will work in partnership with local communities to build community capacity, utilise asset-based approaches, identify and make best use of resources and community assets to achieve maximum value and improvement in outcomes.

For reference, LCC's Social Value Policy is available here:

<https://www.lancashire.gov.uk/search/?q=social+value>

3. Service Delivery

3.1 Service model

The Provider will ensure that all work with children and families is designed and delivered in line with evidence of what works. This work will focus on the whole family, build upon their strengths and assets and will enable families to develop social connections in their community.

The Provider will adopt a flexible working approach to delivery to ensure the Service has participation at its core, is child focused and delivered to meet the needs of individual Young Carers.

The Service will be delivered across Lancashire with centralised strategic direction, publicity materials, monitoring systems and referral and assessment processes, to ensure Young Carers living across Lancashire receive a consistent service. Publicity materials must be in line with the Authority and Health marketing policies. The Provider should seek agreement for marketing or publicity content or activity.

The Provider should establish clear pathways to localised services that support the Authority's priorities including health, wellbeing, prevention and early help provision and Children's Social Care.

Where additional funding is available from partners the Provider must develop and deliver services in line with the funding allocation. This must be demonstrated clearly through performance measures and not be in duplication of the core funded activities, as outlined in the Contract.

The model of service delivery will be through a mixture of both direct interventions working in partnership with Young Carers and their families, and indirect interventions which champion the needs of Young Carers and their families, thus enabling partner organisations to fulfil their roles. The Provider will agree with the Authority what tools will be used to measure outcomes, but it should incorporate:

- i. Multidimensional Assessment of Caring Activities (MACA)
- ii. Positive and Negative Outcomes of Caring (PANOC)
- iii. Outcome Star.

The development of national and local policy, guidance and best practice as well as the requirements set out in The Young Carers (Needs Assessments) (England) Regulations must be considered in the service model.

The level of service provided will be dependent on the assessment of needs within the family, their motivation to engage and will take into account other support and services already involved. It is expected the Provider will:

- i. Deliver locally whilst support functions are centrally coordinated. This will include a standard assessment process that fulfils statutory duties, prioritisation aligned to the Continuum of Need, and a database containing Young Carers referral and progress information.
- ii. Shift the focus from dealing with the consequences of difficulties in Young Carers' lives, to preventing things from going wrong in the first place. The Provider will use the Lancashire Continuum of Need to ensure that children receive the appropriate level of support for their identified needs. The Provider will ensure that Young Carers are assessed, taking account of the whole family, and receive an Early Help Assessment (or equivalent), acting as lead professional where appropriate. The Provider must also support and enable Social Care colleagues, from both Adults and Children's Services, to take account of the whole family when assessments take place.
- iii. Provide experiences and interventions which enhance the mental health and social networks of Young Carers and reflect the intended outcomes of the Service.
- iv. Provide 1:1 and group support and ensure that Young Carers have a child or young person led plan which is reviewed regularly.
- v. Utilise available technologies to enhance Young Carers awareness and accessibility to the Service, contributing to measurable improvements to individual outcomes.
- vi. Develop systems which measure outcomes achieved by Young Carers as a result of intervention from the service.
- vii. Provide information to Young Carers regarding the full range of services available to them. This should include making referrals and signposting.
- viii. Work in partnership with agencies and services across Lancashire to achieve the best outcomes for Young Carers and their families.
- ix. Publicise details of any events and other activities or opportunities for children, as appropriate.
- x. Provide information/data which will inform the Authority about Young Carer preferences which have been identified via consultation with Young Carers.
- xi. Facilitate and maintain a Young Carers Forum which is representative of Young Carers across Lancashire. Young Carers should also be supported to be represented on the Lancashire Youth Council Executive.
- xii. Play a key role in delivering the outcomes of the Carers Strategy and Young Carers Strategy for Lancashire.

- xiii. Play an active part in developing transition planning processes and pathways for Young Carers to ensure that the transition from one service to another takes place at the right time and pace for the young person.
- xiv. Advocate on behalf of Young Carers so their individual needs and issues are addressed.
- xv. Ensure that Young Carers, Young Adult Carers, their parents or any other people of significance to them are consulted and have an opportunity to participate in any decision-making process affecting them.
- xvi. Work with existing providers of advocacy, including Lancashire Children's Rights, Advocacy and Independent Visitors Service and adult advocacy services. Advocates will be well matched to the individual needs, culture and ethnicity of the Young Carer who, wherever possible, has some choice in his/her advocate.
- xvii. Work in partnership to ensure Young Carers have access to the same opportunities and services that other children have, including universal and targeted services, such as counselling provision.
- xviii. Offer training to the workforce to raise awareness of Young Carers.
- xix. Research and develop routes for self-referrals and awareness raising e.g. telephone help lines, text servicing and interactive websites.
- xx. Research and work in partnership to develop improved referral pathways from key services, particularly: education (use of champions), early help, health (community health services), mental health, drug and alcohol and social care services.

The Provider must work in collaboration with the adult carers service to ensure that transitional arrangements, the support offer and the measurement of impact are aligned to the needs of Young Adult Carers. This should include clear referral and handover pathways, shared planning where appropriate, and regular joint review arrangements, including meetings held at least quarterly, to discuss individual and strategic transition arrangements, identify barriers, and ensure support remains coordinated, timely and outcome focused.

Where a Young Carer is identified as a Child in Need or is subject to Child Protection arrangements, the Provider must work in close collaboration with Children's Social Care to ensure a coordinated, whole family response. This must include appropriate information sharing, attendance and active contribution to statutory meetings where required, and alignment of Young Carer assessments, support plans and interventions with the child's statutory plan. The Provider must contribute to agreed actions and interventions within the plan, ensuring that the impact of caring responsibilities is understood, risks are appropriately managed, and support is coordinated with social care and wider partner agencies.

3.2 Staffing Requirements

The Provider will be expected to design a staffing structure which will enable the outcomes of the Service Specification to be achieved. The Provider will employ staff who have the capacity to build and form relationships with Young Carers and provide the targeted support they and their families require.

As standard the Provider must ensure:

- i. An experienced operational manager in its employment to provide regular professional support and supervision for the entire workforce.

- ii. The operational manager will conduct appraisals / reviews of performance following any probation period and, in any event, at least bi-annual. Feedback from children and families must feed into appraisals / reviews of performance for each member of the workforce.
- iii. 100% of the workforce has the relevant level, for their role, of safeguarding training as identified by the Lancashire's Children's Safeguarding Assurance Partnership (CSAP). Information on the relevant level of training for roles can be found using the following link: <https://www.lancshiresafeguarding.org.uk/>
- iv. At the start of Service delivery 100% of the workforce undertaking statutory assessments, reviews and planning with families are appropriately trained and competent. Further information can be found: <http://www.lancshiresafeguarding.org.uk/resources/assessment-and-referral.aspx>
- v. 100% of the workforce are sufficiently trained in referring to Children's Social Care (CSC) children who they feel are at risk of significant harm where those statutory services are not already in place. Further information can be found: <https://lancashirecsc.trixonline.co.uk/contents/contents>
- vi. 100% of the workforce have the necessary interpersonal skills to work with challenging and difficult families.
- vii. Relevant training for the entire workforce is refreshed annually.

The Provider must maintain a record of the recruitment and vetting checks that have been carried out on those working for the Service, which includes, but is not limited to:

- i. Identity checks.
- ii. Disclosure and Barring Service (DBS) Disclosures, including the level of the Disclosure, the unique reference number, and the outcome of the check including whether the individual is barred (in line with eligibility to obtain such checks).
- iii. checks to confirm qualifications which are a requirement.
- iv. at least two references, preferably one from a current employer and, where possible, a statement from each referee as to their opinion of the person's suitability to work with young people.
- v. checks to confirm the right to work in the UK.
- vi. where the person has lived outside of the UK, further checks as are considered appropriate where obtaining a DBS Disclosure is not sufficient to establish suitability to work with families and children. Further information and guidance on obtaining criminal records checks overseas can be found here: <https://www.gov.uk/government/publications/criminal-records-checks-for-overseas-applicants/guidance-on-the-application-process-for-criminal-records-checks-overseas>

The Provider must ensure that anyone working on their behalf, that require the use of a vehicle for the provision of its Services, holds a full driving licence and that all vehicles used to transport family members are appropriately insured, roadworthy and otherwise comply with current relevant legislation.

The Provider must carry out a full risk assessment on any staff member who receives penalty points for a motoring offence or is involved in an accident. This should include checking the circumstances of the incident, ensuring the vehicle is roadworthy and ensuring it does not adversely affect securing suitable insurance in order to carry out their duties relating to the delivery of the Service.

4. Service location and hours of operation

4.1 Geographic coverage/boundaries

The Provider will support children and their families across Lancashire within Lancashire County Council's geographical boundaries.

4.2 Location(s) of Service Delivery

The Provider will ensure that children across Lancashire have equitable access to the Service and as such should utilise a number of children accessible venues across Lancashire.

4.3 Accessibility of Service Delivery

The Provider will ensure that all support provided is easily accessible from a child and family perspective. It is expected that services are inclusive and culturally sensitive: building links with those groups who support minority groups locally. Special consideration will be given to reach out to specific groups to ensure inclusive working practice; black and minority groups; refugees and asylum seekers; children in families where there is parental drug and alcohol misuse; and families living in rural areas with limited transport or direct access to drop in or community services.

The Provider will therefore be expected to provide a breakdown of service users by these categories as part of the quarterly review process. To ensure referral pathways are developed and embedded, the Provider will be required to provide a breakdown of referring agency by location.

4.4 Days/Hours of operation

The Provider must be flexible to meet the needs of children. Individual support and group interventions must be available to children when required, including times outside of school hours and at weekends. In addition, the Service should be available to perform and/or support promotional activities at events which may occur outside traditional office hours.

4.5 Referral criteria and sources

Young Carers are children who look after someone in their family who has an illness, a disability, mental health or substance misuse difficulties that result in the need to take on practical and/or emotional caring responsibilities that would normally be expected of an adult.

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 impact on his or her own emotional or physical wellbeing or educational achievement and life chances.

Young Carers undertaking significant caring responsibilities are considered to be at a high level (level 3 / edge of care) on the Lancashire Continuum of Need. Therefore, it is expected that the majority of Young Carers requiring ongoing support from the Provider will have an Early Help assessment in place. Where required, the Provider will be expected to support Children's Social Care cases including Children in Need (CiN) and those stepping down from social care.

Referrals will be accepted from a range of sources, including but not exclusively; parents/carers, self-referrals and professionals, including but not exclusive; drug and alcohol services, mental health services, education, social services, GPs and adult services. Where required, the Provider will work in partnership with Early Help Services in order to develop and establish clear referral pathways into the Service.

4.6 Response time and prioritisation

The Provider will manage and prioritise a fair and equitable system across the County which takes into account the diverse needs of all Young Carers.

Where an inappropriate referral is received, that doesn't meet the criteria for the Service, the Provider will signpost to the most appropriate service that will meet their need. Following assessment, this may include a referral to specialist or therapeutic interventions.

One to one support should be prioritised to those assessed as having the greatest need, in terms of impact from their caring role.

5. Participation of Service Users

The Provider should demonstrate that:

- The Authority is committed to children and young people being empowered; participating in the services they receive and the communities in which they live.
- The Provider will treat Young Carers and their families as partners, not simply recipients of the Services. They should be actively involved in the planning, delivery, and evaluation of support.
- The Provider will demonstrate how it actively involves Young Carers and their families in assessments, planning and review of progress.
- The Authority's Participation Strategy sets out its priorities in how we ensure that children and young people's views, wishes and feelings are taken into account.
- Participation should align to these priorities.
<https://www.lancashire.gov.uk/media/938423/children-and-young-people-s-participation-strategy.pdf>
- The Provider will promote Young Carer involvement and empowerment in the development of policies and the Services, including an action plan that is developed and regularly reviewed and evaluated, with the input of Young Carers.
- The Provider will consult with Young Carers on all significant proposals that affect the Services and take Young Carer views into account.
- The Provider will demonstrate that Young Carers and families report a consistently high satisfaction level of the services they receive
- The Provider will ensure that where required, Young Carers receive training and support to participate in policy development, service planning and delivery, monitoring and evaluation.
- The Provider will encourage and support Young Carers to attend participation groups, where available.

6. Quality and Outcomes Performance Standards

ACTIVITIES

What must be reported	Target	How this will be reported	How often reported
How much did we do?			
1. Number of children referred, assessed and supported by the service broken down by; age, gender, ethnicity, district, main referral reason (i.e. parental drug and alcohol misuse etc) and level of assessed need. This should also include categories for refugees, asylum seekers and families living in rural areas with limited access to services.	N/A	By provider, service report.	Quarterly
2. Number of children receiving a Young Carers Assessment by the Service	100%	By provider, service report.	Quarterly
3. Number and percentage of cases open, closed and waiting in reporting period, including a breakdown on reasons for closure i.e. referred to Early Help services.	N/A	By provider, service report.	Quarterly
4. Average and longest waiting time from referral to: <ul style="list-style-type: none"> • assessment and • start of support. 	<20 working days	By provider, service report.	Quarterly
5. Number and percentage of new referrals received in period by referring source, broken down by; referring agency and district location.	N/A	By provider, service report.	Quarterly
6. Number and percentage of carers receiving support, broken down by; one to one, group work and accessing support via video conferencing or other online platforms such as MS Teams or similar.	N/A	By provider, service report.	Quarterly
7. Number and type of training delivered to young carers e.g. first aid, cooking, budgeting.	>1 per quarter	By provider, service report.	Quarterly
8. Number of reassessments and reviews completed in period.	>25 reviews per quarter	By provider, service report.	Quarterly
9. Number and percentage open cases who; have an Early Help assessment on referral, Early Help Assessment opened by provider, assessed by children's social care or adults social care, provider acting as a lead professional.	N/A	By provider, service report.	Quarterly

6. Quality and Outcomes Performance Standards

ACTIVITIES

What must be reported	Target	How this will be reported	How often reported
10. Number of transition plans in place and number of Young Carers accessing young adult carer support upon transition to adult services, including the number receiving transitional support from the Service post 18.	N/A	By provider, service report.	Quarterly
11. Number of meetings held with adult carers services to review transitional planning.	4 per year	By provider, service report.	Quarterly
12. Number of children receiving an adult services transitional carers assessment	100%	By provider, service report.	Quarterly
13. Number of Young Carers participating in the Young Carers Forum.	>10 per quarter	By provider, service report.	Quarterly
14. Number of Young Carers Forum meetings held.	Minimum of 6 per year	By provider, service report.	Quarterly
15. Number and type of awareness raising events delivered as well as the number of staff training attended. Including regular attendance at the Children's and Adults Social Care Academy.	Events >25 per quarter Training >5 per quarter	By provider, service report.	Quarterly
16. Individual referral tracker to include the performance requirements in Section 6. Requirements are inclusive of: age, gender, ethnicity, district, main referral reason (i.e. parental drug and alcohol misuse etc), level of assessed need, referral source, support received, transition plan, distance travelled. This should include an LCC/NHS URN (if known)	N/A	By provider, service report.	Quarterly
17. Number and percentage of children referred, assessed and supported by the service broken down by; age, gender, ethnicity, district, main referral reason (i.e. parental drug and alcohol misuse etc) and level of assessed need. This should also include categories for refugees, asylum seekers and families living in rural areas with limited access to services.	N/A	By provider, end of year service report.	End of year
How well did we do it?			

6. Quality and Outcomes Performance Standards

ACTIVITIES

What must be reported	Target	How this will be reported	How often reported
18. Number and percentage of Young Carers with an improvement in assessed need/distance travelled (using appropriate tools).	>70% with measured improvement	By provider, service report.	Quarterly
19. Evidence of the development of an effective assessment and outcomes tool which incorporates; Multidimensional Assessment of Caring Activities (MACA), Positive and Negative Outcomes of Caring (PANOC) and Outcome Star.	N/A	By provider, service report.	Quarterly
20. Evidence of effective signposting to partner organisations, including evidence of effective safeguarding procedures.	N/A	By provider, service report.	Quarterly
21. Percentage of Young Carers and/or families who feedback positively about the support services they have received.	>70%	By provider, end of year service report.	End of year
22. Evidence of development and progression of Hear by Right planning tool or Investors in Children planning tool (or other appropriate tool which evidences that participation is at the heart of the service).	N/A	By provider, service report.	Quarterly
23. Evidence of Children, families and communities' views taken into account in the design and delivery of the service.	N/A	By provider, end of year service report.	End of year
24. Number of complaints / compliments received.	N/A	By provider	Quarterly
25. Evidence that an agreed action plan is being implemented to demonstrate delivery against the Section 6 requirements.	N/A	By provider, service report	Service start and annual review.
What difference did we make?			
26. Evidence of impact through the provision of one or more case studies giving details of support provided, outcomes achieved and feedback from the Children and family.	N/A	By provider, service report.	Quarterly
27. Percentage of Young Carers with improved distance travelled across all areas (using appropriate outcome tool e.g. PANOC, MACA, Outcome Star)	>70% with measured improvement	By provider, service report.	End of Year
28. Improved identification of Young Carers across the county.	N/A	By provider, service report.	End of Year

6. Quality and Outcomes Performance Standards

ACTIVITIES

What must be reported	Target	How this will be reported	How often reported
29. Additional funding secured and evidence of impact delivered.	N/A	By provider, service report.	Quarterly

7. Service Monitoring Arrangements

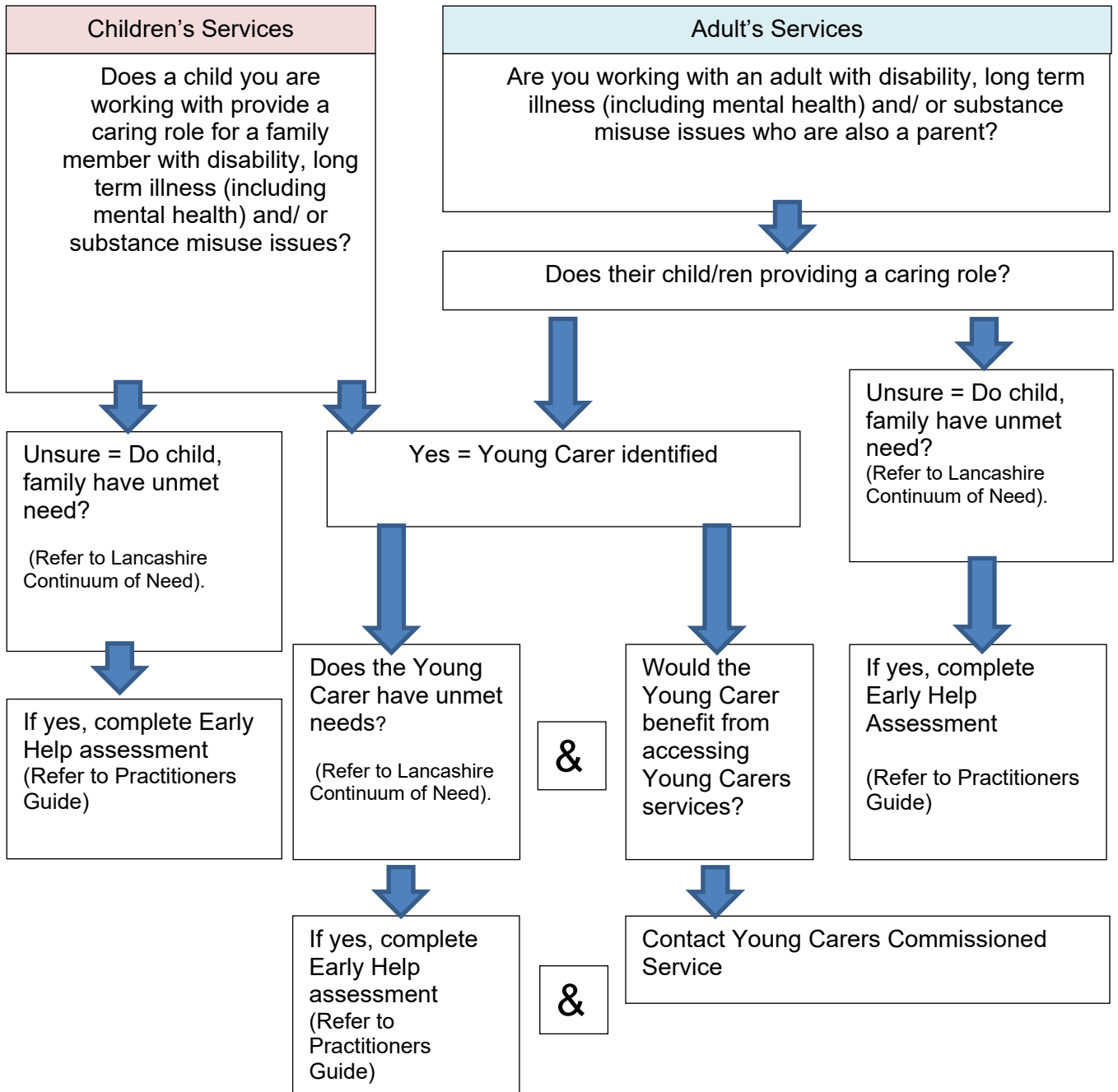
The Provider will be required to produce **quarterly** financial and performance reports, including the quality and performance outcome standards in Section 6, one week prior to the **quarterly** review meetings. **Quarterly** review meetings will be used to ensure success is celebrated and to resolve any barriers to service delivery.

The Provider will be required to submit a minimum of one case study per quarter as well as family assessments and support plans upon request.

The Authority may share performance information and case studies with partners to help promote evidence based joint commissioning approaches.

The Provider will be required to demonstrate how conformity to Lancashire Safeguarding Children Procedures has been achieved.

Appendix 1 - Young Carers Pathway: Identification, Assessment and Support



Information on the Early Help Process can be found at www.lancashire.gov.uk

If you are concerned that a Young Carer is suffering, or likely to suffer significant harm then safeguarding procedures must be followed.

Young carers support pathway Lancashire

Working well with children and families

Level 1 – Universal support

Universal services identify emerging or hidden caring roles
Strengths-based conversations and early support
Schools, health, early years, community and youth services
Referrals into Lancashire Young Carers Service from universal services or families

Level 2 – Additional support

Lancashire Young Carers Service provides direct support
Young Carers assessment completed
Emotional, wellbeing and practical support
Referrals from families, schools, health and voluntary agencies
Requests made to Early Help if needs escalate
Targeted Emotional Support Service for Young People

Level 3 – Targeted

Early Help Plan via Child & Family Wellbeing Service
Young Carers Lead Professional coordinates support
Lancashire Young Carers Service continues carer specific support
Targeted Emotional Support Service for Young People
Family Group Conference
Targeted Youth Support Service
Referrals into service from Early Help
Requests to Children's Social Care if safeguarding concerns escalate

Level 4 – Statutory/Intensive support

Statutory intervention led by Children's Social Care
Child in Need / Child Protection assessment and planning
Lancashire Young Carers Service continues alongside statutory plans
Referrals between Children's Social Care and Young Carers Service
Targeted Emotional Support Service for young people
Family Group Conference
SPACEHUB