# Transition arrangements from Children's to Adult Life

**Final Report and Recommendations** 



Report of People Scrutiny Committee in depth scrutiny project 2015/16

## **Foreword**

The People Scrutiny Committee decided that the in-depth scrutiny project for 2015/16 would be on the transition arrangements from children's to adult services. The project team, of which I am Chairman, decided that the specific focus of the review would investigate whether the transition (process) arrangements between children's and adult services are effective in Southend (are they appropriate & clear) and to investigate whether there are different ways of providing services for people with lifelong disabilities by looking at the whole lifetime.

The outcome we all want to achieve is for there to be effective, coordinated planning placing the young person at the centre of decision making. The transition from one service to another should be seamless and keep the young person at the centre of decision-making.

I would like to thank my colleagues on the project team and all those who contributed to the scrutiny event. A special word needs to be made about the 2 young people and their parents we met as part of the review. They are truly inspirational and particularly helped focus our thoughts on our recommendations.

Finally, following comments on the report at the Scrutiny Committee on 12<sup>th</sup> April, the title of the project has been changes to 'Transition arrangements from Children's to Adult Life' as we felt that this better reflected our focus and ambition.



Councillor Nigel Folkard
Chairman of the in depth scrutiny project

## 1. Objectives and Recommendations

Members of the People Scrutiny Committee undertook an in depth project Led by the cross party project team members, the project has aimed:-

- (i) To investigate whether the transition (process) arrangements between children's and adults' services are effective in Southend (appropriate & clear) and to investigate whether there are different ways of providing services for people with lifelong disabilities by looking at the whole lifetime;
- (ii) To make appropriate recommendations for improved outcomes for young people at transition stage.

A copy of the project plan is included as **Annex 1 to the report.** A brief glossary is also included as **Annex 2 to the report.** 

### Our recommendations

Cabinet is asked to agree the following recommendations:-

- 1. Need to ensure that the Transition Protocol is a live and meaningful document and the membership of the operational group has representation from key personnel / agencies.
- 2. That the interface with health partners (SEPT, NELFT, Hospital, CCG etc.) is further developed, moving to a model of care that encompasses all age groups without any gaps.
- 3. The Department for People should ensure that all agencies working with the transition of young people, are involved in the production of an information pack / directory around "Transitions and moving from children's to adult services easy guide for service users and carers" to cover all agencies; clarity on transition age (use preparing for adults term instead); services and support available; details of where to go for support and what should be provided (managing expectations too). The views / comments of parents, carers and young people will be taken into account in this work.
- Employment and training welcome the making it work scheme recognise challenges in current economic climate and that further work be undertaken about how apply criteria for service (examine criteria, ensure not excluding people arbitrarily).
- 5. Consider further how best to support those young people with a diagnosis of autism or Asperger's and in particular how the Council will take the lead in supporting the implementation of the Autism Strategy. Alongside this, we recognise that there are a number of young people with other, complex needs and physical disabilities who will be transitioning to adult services.

## 2. Background to the report

## Children in Transition – Key points

The following pieces of legislation which relate to children in transition in England, namely:

- (a) Care Act 2014;
- (b) Children Act 1989;
- (c) Children Act 2004;
- (d) Children and Families Act 2014; and
- (e) Equality Act 2010.

Each statute is supported by regulations and guidance or a code of practice. It is the guidance and code of practice which puts the flesh on the bones of each statute<sup>1</sup>.

The key points in the legislation relating to children in transition are:

- Section 25 of the Children's and Families Act 2014 places a duty on local authorities to ensure integration between educational and training provision, health and social care provision, where this would promote wellbeing and improve the quality of provision for disabled young people and those with SEN.
- The Care Act 2014 says "services at transition should be aimed at moving a
  person into work / adult life in such a way as to promote their independence and
  so reduce their long term needs for care and support".
- Under the Children and Families Act 2014, a child who has special educational needs or a disability is entitled to an education, health and care plan (EHC plan).
   This can extend beyond childhood to a maximum age of 25 if it is believed that the young person needs a longer period to complete his education.
- The purpose of the EHC plan is for the child to have one plan from as early as birth up to 25 which encompasses his educational, health and social care needs involving a number of professionals from a number of agencies.
- Local authorities must publish a Local Offer, setting out in one place information about provision they expect to be available across, education, health and social care for children and young people in their area who have SEN or are disabled, including those who do not have Education, Health and Care (EHC) plans. Local authorities must set out in their Local Offer the support available to help children and young people with SEN or disabilities move into adulthood.

## Effective, coordinated planning placing the young person at the centre of decision making

Both the Care and Support Statutory Guidance and the SEN Code of Practice advocate that local authority's Children's and Adult services departments should devise a process by which they can work together to ensure that the young person

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<sup>&</sup>lt;sup>1</sup> These are:- (a) The Care and Support Statutory Guidance 2014 (supporting the Care Act); (b) The SEN Code of Practice January 2015 (supporting the Children and Families Act 2014; (c) Working Together guidance (supporting the Children Act 1989 and the Children Act 2004); (d) The Children Act guidance and regulations Volume 3: Planning transition to adulthood for care leavers (supporting the Children Act); (e) The Special Educational Needs and Disability Regulations 2014 (Part 4).

receives the services he is entitled to under all three pieces of legislation listed above and that the transition from one service to another should be seamless and keep the young person at the centre of decision-making.

The Care Act makes it clear that a local authority must carry out its care and support responsibilities with the aim of joining-up services provided by other agencies such as Health.

Both the Guidance and the Code of Practice referred to above advocate that assessments should take place at the best time for the young person and possibly two or more assessments or reviews (across the three pieces of legislation) should take place at the same time if appropriate to limit the amount of intrusion in the young person's life. The SEN Code states that preparation for adulthood should start at a young person's Year 9 review at the age of 13-14. However discussions about longer term goals should start early, ideally well before Year 9 at school, as being supported towards greater independence and employability can be life transforming for children and young people with SEND.

## Managing the process at Southend

At the Council, the lead for transition is the Community Learning Disability Team in Adult Social Care, in the Department for People. The service is responsible for the assessment and care management of all adults with a Learning Disability from the age of 18 onwards.

The Team includes social work staff, a Shared Lives Team, an employment team called Making It Work and admin support. Additionally the team is co-located with South Essex Partnership Trust (SEPT) health staff that includes community nursing, speech and language therapy, occupational therapy and behaviour therapy.

## Transition Protocol and Operational Group

The Transition Protocol identifies key stages and the roles and responsibilities of all the agencies and council departments involved. It is currently being revised and involving all essential people. A further workshop will be convened, and a revised Protocol will be presented to senior managers, for agreement and sign off.

The Operational Group is functioning well and is to be revised in line with the work above accordingly and any adjustments made and recorded appropriately.

## Information on number of young people in transition

At any one time the number of young people involved in the transition process will be variable. As a snapshot, at the time of the scrutiny review the numbers in transition were as follows:-

- Number of children in transition open to Children with Disabilities (CWD) 53
- The number of Looked After Children in Transition (14-18yrs) 5 (3 are in Residential placements) (2 are 16+)
- Numbers in residential placements 24

- Number of children anticipated moving to adult services between the ages of 14 and 18 - there are 135 young people ages between 14 and 18 that may require adult services.
- Number of children and young people in receipt of Education, Health & Care Plan – there are 364 young people in receipt of Education, Health and Care Plans (and Statements of special education need) between school Years 9 and 13.
- Budget in 2014/15 £450k growth for transitions and in 2015 /16 £635k.
   This funding is added to LD budgets and spent as they transition from children's to adults.

## 3. Methods

The Committee was supported by a project team comprising:-

- Councillor Nigel Folkard, Chairman, Councillors Brian Ayling, Mary Betson (until December 2015), Steve Buckley, Alan Crystall (from 11<sup>th</sup> December 2015), Meg Davidson, Lawrence Davies, Caroline Endersby and Kevin Robinson.
- ♣ Councillor Lesley Salter (Chairman of People Scrutiny Committee).
- Officer support was provided by Sharon Houlden, John O'Loughlin, Fiona Abbott and Olivia Allen.

## **Evidence base**

The project team met on four occasions and considered a range of information and evidence, as set out in pages 6 – 10.

## Briefing / information considered by project team during review

- (i) LGA document on Transitions ('Must know on adult social care 10 Transitions'):-
  - Need for early planning
  - Responsibilities of a corporate parent
  - Transition pack
- (ii) The relevant legislation relating to children in transition in England
- (iii) Information on 'making it work' scheme
- (iv) Local statistical information
- (v) Reviewed anonymised Education, Health & Care Plans. This demonstrated the type of adult services that young people and their families are choosing.
- (vi) Young people in transition (Local Authority is lead partner).

## Witness session held on Wednesday 24th February 2016

The questions were sent to the witnesses in advance and are set out in **Table 1**.

Table 1

Question for:-		Question
STATUTORY AGENCIES	1	Can you outline & explain how transition planning is carried out in the authority / your organisation?
ALL	2	How are views of young people in transition, their families and carers sought and do they inform planning?
ALL	3	How are the responsibilities for young people leaving care in the transition clear and effectively undertaken?
ALL	4	Are there good working relationships in place with relevant partners?
ALL	5	Is there a clear (effective) strategy towards support for young people with mental health problems, disabilities, NEETs, in criminal justice system, at transition stage?
Executive Councillor for Health & Adult Social Care / HWB representative	6	Can you outline the role of the HWB to ensure that all partners take integrated approach to transition?
ALL	7	What resources are available in your organisation / across the partnership to support transition? Are there opportunities for pooling?
HEALTHWATCH SOUTHEND	8	Role of Healthwatch - views of young people in transition, their families & carers about the transition process. How do Healthwatch galvanise information from services users / families
ALL	9	How do you measure the outcomes for young people at transition stage and how do you use this information to improve services?
ALL	10	Do you have views on how the transition process can be improved?

The list of witnesses is outlined in **Table 2**. The project team would like to formally thank the witnesses for giving up their time to attend and for sharing their insights.

Table 2

Name	Representing
Session 1	
Councillor James Moyies	Executive Councillor for Health & Adult Social Care
Councillor Anne Jones	Executive Councillor for Children & Learning
Session 2	
Margaret Wall	Complex Case and Transitions Manager, Department
	for People
Matt Harding	Team Manager, Community Team for People with
	Learning Disabilities, Department for People
Elsa Moore	Commissioning Officer, DACT, Department for People
Marie Henderson	Service Manager, YPDAT, Department for People
Tom Dowler	Data, Performance & Information Manager, Department
	for People
Patrick Cahillane	Team Manager, CWD, Department for People

Sharon Coleman	Family Care Worker, CWD, Department for People
Marnie Bowling	Employment Co-ordinator, Department for People
Session 3	
Dr Naina Emcy	Consultant & Clinical lead – Paediatrics, Southend
	Hospital
Linda Dowse	NHS Southend CCG
Caroline McCarron	NHS Southend CCG
Ross Gerrie	NHS Southend CCG
Debbie Angel	Southend Adult Community College
Kate Salleh	Southend Adult Community College Westcliff Centre
Session 4	
John Cooke	Healthwatch Southend Manager
Jane Neale	Chair SAFE South

In advance of the witness session, each witness was asked to provide some brief information about them / their organisation (a 'pen picture') and what they see as the main issues.

The following project team members attended the witness session day on 24<sup>th</sup> February – Councillor Nigel Folkard (Chairman), Councillor Brian Ayling, Councillor Steve Buckley, Councillor Alan Crystall, Councillor Meg Davidson, Councillor Lawrence Davies and Councillor Kevin Robinson.

Apologies for absence were received from – Councillor Caroline Endersby, Councillor Lesley Salter, Andrew Newcombe – DwP, Sarah Hines – Southend Hospital, Sharon Hall – NELFT, Alison Semmence – SAVS, Ken Sanderson – MIND, Matt King – Trust Links and Andrea Walter – SAFE.

The following items formed the paperwork for the meeting:-

- Information from Trust Links
- Information from Adult Learning Disability Team and Transition
- Information on 'Making it Work' employment
- Information on Transition Care Planning South Essex Partnership
- Information from SAFE
- Information on protocol between young people's and adult substance misuse services in Southend
- Information from Drug and Alcohol Team

The following <u>main themes</u> emerged during the event, which was organised into 4 sessions:-

### Pointers of what was discussed at Session 1

- The role of the Health & Wellbeing Board.
- The role of NELFT emotional wellbeing service.
- Education, Health & Care Plans (EHCP).
- Multi agency planning process and starting point.
- Role as Members as Corporate Parents.

### Pointers of what was discussed at Session 2

Eligibility for NHS continuing healthcare.

- The Team forecasts the likely costs associated with each year group of young people transitioning to adult services. This is notoriously difficult to predict accurately due to the possibility of circumstances changing significantly (e.g. families no longer being able to support the young person).
- Whilst the transition social worker takes the lead role in the social care assessment and provision of services, the transition worker will work closely with a range of stakeholders including service providers, wider family and health professionals.
- When support planning the transition social worker considers the individuals strengths and assets (i.e. family and community support) in advance of providing services. If mainstream (non cost services) can meet eligible needs then these should be exhausted before funding services.
- Role of operational transition group.
- Gaps in services for people with Autism who appear to have high functioning autism and meeting the requirements of Autism Act 2009.
- Key role of IT in tracking progress of individuals.
- Scope to work more closely with health and join up case management between health & social care.
- Strengthening links with adult mental health services.
- The 'Making it work' programme for young people aged 18/19 upwards.
- Financial challenges.
- The links with schools, colleges and employers.

## Pointers of what was discussed at Session 3

- Differences between health and social care in terms of eligibility, practice and funding.
- 'Transforming Care' national programme.
- Services are working together to prepare for adult life rather than adult services.
- Development of a single point of referral help.

## Pointers of what was discussed at Session 4

- Work and role of SAFE outlined.
- Gaps in service between ages of 16 18 were highlighted.
- Healthwatch Southend event 2 years ago on Asperger's 70 + people attended. Potent points made, relevant to transition.
- On-going training is a key issue.

## Meeting with services users on Tuesday 1st March 2016

Three Members from the project team met with 2 young people and their parents on 1<sup>st</sup> March and the key points to emerge were:-

- Support from the Transition Worker in particular was mentioned and is very much appreciated (e.g. the transport). Her support helped make the transition smooth, straight forward and simple (but time consuming process).
- There was a concern mentioned about moving from a named person to a 'duty social worker' in the future.

 There also seems to be an issue now about accessing health services (e.g. OT) as an 'adult'. It is very different now (tougher and more time consuming) and are in mainstream / adult services.

## 4. Our conclusions / recommendations

Transition has always been a big focus for Department for People, as recognise the significant consequences for the young adult and their family of getting it right.

Proud of our multi agency approach and of the commitment of staff and partners in making the transition process work.

Transition is not a single stage process rather it is made up of a number of significant changes in a young person's life and can occur over a lengthy period of time. The first stage is generally when the young person turns 18 – this will often result in a replication of services already provided. The second stage is when the young person leaves school and commences college. The third stage is the completion of college and exit from education. All are significant events in a young person's life and require significant planning and support to ensure positive outcomes.

It is vital that structures and services are in place to support young people who are going through the process, allowing them to achieve their full potential and lead fulfilling lives and help prepare them for adult life. Successful transition planning is dependent on collaboration between children's and adult services across all agencies.

The project team welcomed that whole process sits in one department in the organisation.

Welcomed that across the range of services, there are staff dedicated to the work of preparing young people for adulthood, with the right skill set to provide the necessary support, working closely with a range of stakeholders including service providers, wider family and health professionals and support the work to build capacity into the system.

The transition (process) arrangements between children's and adult services are effective in Southend, and seek to support people with lifelong disabilities by looking at the whole lifetime, but there are a number of recommendations which we think could improve this.

## Our recommendations

Cabinet is asked to agree the following recommendations:-

1. Need to ensure that the Transition Protocol is a live and meaningful document and the membership of the operational group has representation from key personnel / agencies.

- 2. That the interface with health partners (SEPT, NELFT, Hospital, CCG etc.) is further developed, moving to a model of care that encompasses all age groups without any gaps.
- 3. The Department for People should ensure that all agencies working with the transition of young people, are involved in the production of an information pack / directory around "Transitions and moving from children's to adult services easy guide for service users and carers" to cover all agencies; clarity on transition age (use preparing for adults term instead); services and support available; details of where to go for support and what should be provided (managing expectations too). The views / comments of parents, carers and young people will be taken into account in this work.
- 4. Employment and training welcome the making it work scheme recognise challenges in current economic climate and that further work be undertaken about how apply criteria for service (examine criteria, ensure not excluding people arbitrarily).
- 5. Consider further how best to support those young people with a diagnosis of autism or Asperger's and in particular how the Council will take the lead in supporting the implementation of the Autism Strategy. Alongside this, we recognise that there are a number of young people with other, complex needs and physical disabilities who will be transitioning to adult services.

## AGREED PROJECT PLAN

## PEOPLE SCRUTINY COMMITTEE IN-DEPTH STUDY 2015/16

## TOPIC: TRANSITION ARRANGEMENTS FROM CHILDREN'S TO ADULT SERVICES

### FRAMEWORK FOR SCRUTINY / SCOPE OF PROJECT:

- (i)To investigate whether the transition (process) arrangements between children's and adults' services are effective in Southend (appropriate & clear) and to investigate whether there are different ways of providing services for people with lifelong disabilities by looking at the whole lifetime;
- (ii)To make appropriate recommendations for improved outcomes for young people at transition stage.

**Method:** Through project team meetings and witness session – on Wednesday 24<sup>th</sup> February 2016 (& 'focus group' with service user). (At these sessions, evidence will be taken in public - unless local government access to information rules requires private consideration of information).

Target date: April 2016

#### **MEMBERSHIP:**

Councillor Folkard (Chairman), Councillors Ayling, Betson (until December), Buckley, Crystall (from 11<sup>th</sup> December), Davidson, Davies, Endersby & Robinson Also - Councillor Salter (Chairman of People Scrutiny Committee)

**Officer / partner support** – Sharon Houlden, John O'Loughlin and Fiona Abbott (Project Coordinator).

### **SOURCES OF EVIDENCE**

The main evidence base will be:

- Legislation Care Act 2014, Children & Families Act 2014, Children Act 1989, Mental Capacity Act, Statutory responsibilities, national guidance and research documentation
- Evidence from key stakeholders

### **POTENTIAL WITNESSES:**

- Executive Councillor for Children & Learning
- Executive Councillor for Health & Adult Social Care
- Health & Wellbeing Board representative
- Council officers:

Ian McFee (Group Manager SEN)

Matt Harding (Team Manager, Community Team for People with Learning Disabilities )

Glyn Halksworth (Strategy Manager, Drug & Alcohol Commissioning Team) -

Complex Needs Panel

Finance representative

Alison Crowe (Service Manager for Children with Disabilities)

Health partners

Dr Naina Emcy - clinical lead for paediatrics

LD liaison team at Hospital – LD Liaison Nurse – Sarah Hines SEPT

GP / NHS Southend CCG

- CAMHS provider (NELFT)
- Making it Work scheme (Employment support service) Marnie Bowling
- Healthwatch Southend John Cooke
- SAVS Alison Semmence
- Trust Links Matt King
- Jobcentre Plus
- Head Teacher from Special School
- Principal, Adult Community College
- Representative from SAFE
- 'Focus Group' with service user / users

## Issues to explore / questions to cover:

- (a) How transition planning is carried out in the authority (when early enough)?
- (b) How are views of young people in transition, their families and carers sought and do they inform planning?
- (c) Responsibilities for young people leaving care (clear / effectively undertaken)?
- (d) Are there good working relationships in place with relevant partners and an effective strategy towards support for young people with mental health problems, disabilities, NEETs, in criminal justice system, at transition stage?
- (e) Leadership role of HWB to ensure that all partners take integrated approach to transition?
- (f) Resources resources across partnership pooling / opportunities for pooling?
- (g) Role of Healthwatch views of young people in transition, their families & carers about the transition process. How do Healthwatch galvanise information from services users / families
- (h) How measure outcomes for young people at transition stage and how use this information to improve services?

(Source – 'Must know on adult social care 10 – *Transitions*'. LGA, November 2014)

Scrutiny process is structured to add value and is supportive of the challenges already set to be delivered, but has limited resources, which need to be focused on providing the front line service and the priority outcomes for the Council.

### **RECOMMENDATIONS:**

To make appropriate recommendations to the Council.

## **Brief Glossary**

Special Educational Needs (SEN)

Education, Health & Care Plans (EHCP)

South Essex Partnership Trust (SEPT)

North East London Foundation Trust (NELFT) (emotional wellbeing service)

NHS Southend Clinical Commissioning Group (CCG)

Department for People – Department in the Local Authority, with responsibility for adult social care, children's services and other functions.

Community Team for Children with Disabilities (CWD)

Drug & Alcohol Commissioning Team (DACT)

Young Persons Drug & Alcohol (YPDAT)

Occupational Therapy (OT)

Heath & Wellbeing Board (HWB)

Not in Education, Welfare or Training (NEET)

Supporting Asperger's and (High Functioning Autistic) families in Essex (SAFE)

Department for Work & Pensions (DWP)

Southend Association of Voluntary Services (SAVS)

Mental health charity (MIND)

## **Contact Details**

For further information about this report please contact:

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