

# TRANSITION PROTOCOL

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## Introduction

Southend City Council (“SCC”) and its partners work extensively to enable all young people, to become as independent, connected, safe, healthy, and confident in adulthood as they can be. When a young person with care and support needs moves towards adulthood it is referred to as ‘Transition’.

The aim of this document is to provide information and guidance to professionals supporting young people who live in Southend through transition to adulthood. This practice guidance reflects the overarching principles that support a ‘good transition’ as outlined in *NICE Guidance 43*<sup>1</sup> and provides both Children and Young People Services (“CYP”) and Adult and Community Services (“ACS”) with an overview of statutory responsibilities and good practice guidance.

Paragraph 16.1 of the *Care and support statutory guidance*<sup>2</sup> states:

*“Effective person-centred transition planning is essential to help young people and their families prepare for adulthood. Transition to adult care and support comes at a time when a lot of change can take place in a young person’s life. It can also mean changes to the care and support they receive from Education, Health and Care Services, or involvement with new agencies such as those who provide support for housing, employment or further education and training.”*

This guidance acknowledges the need to ensure that a young person’s wishes and outcomes are central to all transition planning and that a collaborative and multiagency approach is taken to support effective interventions.

## Legal context

Among the key pieces of legislation that Local Authorities and Health Sector Partners must take note of when planning for a child in transition are:

- **Children Act 1989;**
- **Children Act 2004;**
- **Children and Families Act 2014;**
- **Children (Leaving Care) Act 2000;**
- **Care Act 2014;**
- **Mental Capacity Act 2005;**

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<sup>1</sup> <https://www.nice.org.uk/guidance/ng43>

<sup>2</sup> [Care and support statutory guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/421111/care-and-support-statutory-guidance.pdf)

- **Children and Social Work Act 2017;**
- **Mental Health Act 1983; and**
- **Chronically Sick & Disabled Person's Act 1970.**

Each piece of legislation is supported by Regulations, Statutory Guidance, and/or a Code of Practice.

Transition from childhood to adulthood for those who have needs for care and support takes a variety of pathways and therefore the work completed to support transition requires an awareness of this complexity. Young people requiring transition support primarily come from one of the following backgrounds:

- Young people in need of support and services under the Children Act 1989 who are already known to Children's Services;
- Young people known to Early Help & Family Support Services;
- Young people with degenerative health conditions;
- Young people whose needs have been largely met within an educational institution, but who once they leave, will require their ongoing needs to be met in some other way;
- Young people in receipt of NHS Continuing Health Care;
- Young people who are assessed and entitled to S117 after-care services pursuant to in S117 of the Mental Health Act 1983;
- Young people detained in the Youth Justice System who will move to the Adult Custodial care;
- Young people in alternative education or who are home schooled/educated at home;
- Young carers whose parents have needs that do not fall within the remit of Adult and Community Service eligibility threshold but may nevertheless require advice or support;
- Young people and young carers receiving children and adolescent mental health services via the SET CAMHS may also require care and support as adults even if they did not receive support from their local Children's Services Authority; or
- Those not known to any statutory service who often present to Services at a point of crisis upon reaching adulthood.

### **Care Act 2014 and Children and Families Act 2014**

The transition from Children to Adult Services may not happen on the young person's 18th birthday. The Care and support statutory guidance suggest that turning 18 is not a cut off point for any transition arrangements, as transition may be a staged process progressing beyond a young person's 18<sup>th</sup> birthday. If

the young person has an EHC Plan in place under the Children and Families Act 2014 and they make the move to ACS, the care and support aspects of the EHC Plan will be provided under the Care Act 2014.

The Care Act 2014 places a duty on local authorities to assist with the preparation and transition to adulthood for three groups: children, young carers, and the child's carers. In doing so, there is a duty on local authorities to assess the needs of young persons who are likely to have needs for care and support when they turn 18, their carer's needs and also the needs of young persons who are carers.

The Local Authority must carry out such assessments when it judges it would be of significant benefit to that child, young carer or child carer. The Care Act Guidance says that this will generally be at the point when their needs for care and support as an adult can be predicted reasonably confidently.

For the sake of clarity, this protocol reflects the Care Act Guidance which refers to all three assessments as "**transition assessments**". The Guidance provides that a '**Transition Assessment**' should take place in advance of a young person's 18th birthday to provide the young person, any carers and family with information and advice to prepare for adulthood. In SCC's experience, the time of significant benefit is usually when the young person with likely care and support needs turns 17 but SCC will look at the relevant circumstances of the young person and bring this forward if that would be of significant benefit to the young person.

Under the Children and Families Act 2014, preparation for adulthood must begin at the earliest opportunity, statutory guidance suggests that an ideal time to begin preparations is when a child reaches school year 9 and recommends that at this point transition considerations should be part of regular reviews. SCC advocates that discussions start at Year 9 for those who do not have an EHC Plan and that as suggested the matter of transition forms part of regular reviews.

## **The Flow of Assessments**

**Cohort of young people-** any young person potentially requiring care and support will be known/be supported by any of the following teams:

- 1. Children under Children with Disabilities Team (CWD): Disabled Person's Assessment: For children under the Children with Disabilities Team, at age 14, the DPA assessment informs future planning including transitions into adult services.**

- As part of the ongoing DPA, SCC CWD Team will make a referral to the **Adult Social Care Access Team** ([acessteam@southend.gov.uk](mailto:acessteam@southend.gov.uk)) that a young person has the appearance of need for care and support at the age of 18, at the appropriate age (approx. from age 16).
2. **Children Looked After (CLA): Pathway Plan:** For all other children who are not supported by the CWD Team or without an EHCP, such as children supported by 16+ Team or the Child Protection Teams, it is for these teams to identify these children at the earliest opportunity (pre-17<sup>th</sup> birthday). It is for these teams to identify within the Pathway Plan if these children will have needs for care and support post-18 and to commence transition planning. If a child appears to have needs for care and support in line with the Care Act 2014, then the relevant Children's Services team will refer to the Access Team [acessteam@southend.gov.uk](mailto:acessteam@southend.gov.uk).
- For children with the legal status of Children Looked After (CLA), these needs should be considered as early as possible but definitely by the age of 16 and then all subsequent CLA reviews after this age. The Independent Reviewing Officer (IRO) should capture this referral action within the minutes of the CLA review meetings and will ensure that the action is taken to refer formally to Adult Social Care at this time.
3. **Children in Need/Child Protection:** For children with the legal status of Children in Need or Child Protection who it is thought will have a need for care and support under the Care Act 2014, post-18, referral to Adult Social Care is required at the earliest opportunity but preferably at age 16. SCC Children's Services will undertake a Child and Family Assessment to identify needs for care and support post-18, which will then inform any referral to Adult Social Care: ([acessteam@southend.gov.uk](mailto:acessteam@southend.gov.uk)).

## Process

- **Care Act Assessment which will identify any Transition Assessment needs:**

At Southend City Council, Adult Services will carry out what we call a Care Act assessment, which will include information which will identify and constitute a **'Transition Assessment'**.

Everyone has the right to refuse any assessment, however the relevant Council Department (Children's/Adults) must undertake an assessment regardless, if it suspects that a child or adult with care and support needs is experiencing or at risk of abuse or neglect.

As per chapter 16 of the *Care and Support Statutory Guidance*, the features of a TA are as follows:

"The TA should support the young person (and their family and carer if applicable) to plan for the future, by providing them with information about what they can expect. All TAs must include an assessment of:

- **both the young person and any carer's needs for care and support;**
- **current needs for care and support and how these impact on wellbeing<sup>3</sup>;**
- **whether the child or carer is likely to have needs for care and support after the child in question becomes 18, if so, what those needs are likely to be, and which are likely to be eligible needs; and**
- **the outcomes the young person or carer wishes to achieve in day-to-day life and how care and support (and other matters) can contribute to achieving them.**

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<sup>3</sup> This refers to the needs of the young person at the time the assessment is commenced, so for SCC this will be when the young person reaches the age of 17 years of age.

The TA for young carers or adult carers must also specifically consider whether the carer:

- **is able to care now and after the child in question turns 18,**
- **is willing to care now and will continue to after 18,**
- **works or wishes to do so; and**
- **is or wishes to participate in education, training, or recreation.**

The assessments must include an assessment of the outcomes, views, and wishes that matter to the child or carer in question, and an assessment of their strengths and capabilities.

The young person or carer in question must be involved in the assessment for it to be person centred and reflect their views and wishes.

The assessment must also involve anyone else who the young person or carer wants to involve in the assessment. For example, many young people will want their parents involved in their process.

The TA should be carried out in a reasonable timescale. The Local Authority should inform the young person or carer of an indicative timescale over which the assessment will be conducted and keep them informed.

The TA should consider the immediate short-term outcomes that a young person or carer wants to achieve as well as the medium and longer-term aspirations for their life. Progress towards achieving outcomes should be monitored.

### **Transition Plan (“TP”):**

Having carried out a **transition assessment**, SCC Adult Services must give an indication of which needs are likely to be eligible needs (and which are not likely to be eligible) once the young person in question turns 18, to ensure that the young person or carer understands the care and support they are likely to receive and can plan accordingly.



A **Care Plan** (inclusive of transition needs) should be drafted at a suitable time before the young person turns 18, when it is clear that eligible needs under the Care Act 2014 have been identified and how ASC will meet those needs. This should include practical details of how the young person will actually transition and move from Children's Services to Adult Social Care, for example will move accommodation if relevant, change schools if applicable, or continue with residual service input from Children's Services if applicable, whilst under the care of Adult Services.

It is critical that families are able to understand what support they are likely to receive when the young person or carer is in the adult system, and that the transition period is planned and managed as far in advance as is practical and useful to the individual to ensure that there is not a sudden gap in meeting the young person's or carer's needs.

Where a young person is in receipt of support and services from Children's Services, where applicable, **this support and services should continue** until an assessment of the young person and their carer's care and support needs have been assessed under the Care Act, and a decision has been reached about the provision of support. This ensures that there is **no gap** in provision of care and support when people move from Children's Services to Adult Social Care.

## **Mental Capacity Assessments ("MCA")**

Any Applicable Capacity Assessments should also be carried out if and when required when the young person turns 16 years of age.

## **Provision of Advocacy**

Whilst we encourage young people to lead their own planning for transitions, the need for advocacy should be considered at the outset of all transition cases. Where it is identified that the young person would experience substantial difficulty in understanding the necessary information or in communicating their views, wishes and feelings and if there is nobody else appropriate to act on their behalf, a referral for advocacy support needs to be made.

Our duty to provide advocacy support applies for all young people or carers who meet the criteria, regardless of whether or not they lack mental capacity as defined under the Mental Capacity Act 2005.

## **Consent**

The young person and or carer will be made aware that they will be referred to Adult Social Care prior to referring and they will also be made aware that their capacitated consent must be obtained to engage in all assessments. Where there is doubt that a young person or carer may lack the requisite mental capacity to consent, SCC must undertake a capacity assessment to determine whether or not the young person or carer has capacity. If the outcome of the capacity assessment is that the young person or carer lacks capacity to consent, a Best Interest Meeting will be convened and a best interests decision reached as to whether or not it is in their best interests for the assessment to take place.

## **Carers**

Preparation for adulthood will involve not only assessing how the needs of young people change as they approach adulthood but also how carers', young carers' and other family members' needs might change. If for example a young person is no longer going to be in education the duties of their carer may increase which may not be sustainable. The carer and their ability to continue or adapt to changes in their caring role is a crucial consideration in transition planning. The needs of carers will be considered throughout the Transition Assessment.

Young carers will have their own distinctive transition needs and may also wish to study or gain paid employment once they reach adulthood. Carers First<sup>4</sup> is an organisation that works directly with, and for, thousands of carers, providing personalised information and tailored support in the way that suits them, helping them find balance, and to live their lives to the fullest - today, and for years to come.

## **Cooperation between partners and organisations**

There is a duty under the Care Act 2014 for us to cooperate with relevant partners and that this duty is reciprocal. The duty to cooperate includes an explicit requirement that Children Services/Early Help & Family Support and ACS ensure collaboration and sharing of transition preparations for Adulthood. These plans should also be shared with partners who are actively involved in supporting the Young Person, family, or carers.

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<sup>4</sup> Access to support and services from Carers First in Southend-on-Sea can be accessed here: [Online, Phone & In Person Support for Unpaid Carers - Southend-on-Sea | Carers First](#)

## **After the Young Person turns 18**

At 18 years of age most young people in care are supported by the 16+ Leaving Care Team. All young people supported by the 16+ Leaving Care Team at SCC until the age up to age 25 (if in education/training).

Once the young person turns 18 the Leaving Care Team will provide the young person with a Personal Advisor (“PA”) up to the age of 25 this role provides information and advice. ACS will adopt and be responsible for any primary social care needs or safeguarding of the young person.

## **Safeguarding**

For all young people it is important that as a part of the transition handover, the CYP practitioner makes clear to ASC any safeguarding issues, this involves sharing risk assessments. It is important that ACS are made aware of assessed risk, who poses risks and how this is currently being managed and all the people involved in managing the risk.

For young people who are subject to Care Orders and will have care and support needs post 18, an early referral for legal advice will be required to consider if a Court of Protection or High Court application to extend similar protection afforded by the Care Order is required into adulthood, e.g., where others pose a risk of significant harm and seek the young adult’s return to their care. Court of Protection applications can be made by ASC from the age 18 years of age onwards, and legal protection that is required by a young person before the age of 18 will be the responsibility of Children Services.

Where a person has turned 18 and is still receiving any form of Children Services and a safeguarding matter is raised, it would be the responsibility of Adult Services to manage any safeguarding or Deprivation of Liberty Safeguards/Liberty Protection Safeguards.

## **Contacts**

If you require further support and/or advice please contact:

Xxxxxx

With grateful thanks to Suffolk County Council for the use of this document as a template.

## **Appendix 1**

## **Quick guide to adult eligibility under the Care Act 2014**

### **Eligibility threshold**

The eligibility threshold for adults with care and support needs is set out in the Care and Support (Eligibility Criteria) Regulations 2015 (the 'Eligibility Regulations'). The threshold is based on identifying how a person's needs affect their ability to achieve relevant outcomes, and how this impacts on their wellbeing.

In considering whether an adult with care and support needs has eligible needs, local authorities must consider whether:

1. The adult's needs arise from or are related to a physical or mental impairment or illness
2. AND as a result of those needs the adult is unable to achieve 2 or more of the specified outcomes (which are described in the guidance below)
3. AND as a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing

An adult's needs are only eligible where they meet all 3 of these conditions.

**Being unable to achieve an outcome** includes any of the following circumstances, where the adult:

- Is unable to achieve the outcome without assistance. This would include where an adult would be unable to do so even when assistance is provided. It also includes where the adult may need prompting for example, some adults may be physically able to wash but need reminding of the importance of personal hygiene.
- Is able to achieve the outcome without assistance but doing so causes the adult significant pain, distress or anxiety. For example, an older person with severe arthritis may be able to prepare a meal but doing so will leave them in severe pain and unable to eat the meal.
- Is able to achieve the outcome without assistance but doing so endangers or is likely to endanger the health or safety of the adult,

or of others – for example, if the health or safety of another member of the family, including any child, could be endangered when an adult attempts to complete a task or an activity without relevant support.

- Is able to achieve the outcome without assistance but takes significantly longer than would normally be expected. For example, an adult with a physical disability is able to dress themselves in the morning, but it takes them a long time to do this, leaves them exhausted and prevents them from achieving other outcomes.

### **Specified outcomes**

These are the specified outcomes as outlined in the Care and Support (Eligibility Criteria) Regulations 2015 (the ‘Eligibility Regulations’). They are not in any priority order and are equally important:

- Managing and maintaining nutrition,
- Maintaining personal hygiene,
- Managing toilet needs,
- Being appropriately clothed,
- Being able to make use of the home safely,
- Maintaining a habitable home environment,
- Developing and maintaining family or other personal relationships,
- Accessing and engaging in work, training, education, or volunteering, and
- Making use of necessary facilities or services in the local community including public transport and recreational facilities or services, and
- Carrying out any caring responsibilities the adult has for a child.

### **The ‘wellbeing’ principle**

Promoting ‘wellbeing’ means actively seeking improvements in:

- Personal dignity,
- Physical and mental health and emotional wellbeing,
- Protection from abuse and neglect,
- Control over day-to-day life,
- Participation in work, education, training, or recreation,
- Social and economic wellbeing,
- Domestic, family, and personal relationships,

- Suitability of living accommodation,
- The individual's contribution to society, and

### **Providing information and advice**

Even if a person is not determined to be eligible for formal (funded) care and support, their needs and desired outcomes should be used as a basis to signpost them to information and advice about other informal sources of care and support available locally (e.g., clubs, activities, learning, voluntary/community sector services, through the Local Offer or other universal offerings). Consideration must be given to options that will prevent, reduce or delay any increase in need for care and support



