



# **Transitions Task Group: Final Report**

**People's Scrutiny Committee**

**10 January 2012**

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# Preface

**Councillors Vanessa Newcombe and Philip Sanders  
Joint Chairs, Transitions Task Group  
People's Scrutiny Committee**



In presenting this report, we would like to thank everyone who took part and all those who willingly gave up their time to give us the benefit of their knowledge and experience. We hope that, having read the report, you feel your time was well spent – without you, there would have been no report and we are most grateful for your help.

In particular, the Task Group would like to thank the young people who contributed to the review. The willingness of these young people to share their hugely personal experiences provided a detailed insight into the difficulties young people can face in transition, and very much underpins the members' findings and recommendations.

Councillors Newcombe and Sanders  
Joint Chairs

# Introduction

The Task Group — Councillors Newcombe and Sanders (Chairs), Boyle, Lee, Spence, Taylor, and Mrs Wilson (Primary Governor Representative) — would like to place on record its gratitude to the witnesses who contributed to the review. In submitting its recommendations, the Group has sought to ensure that its findings are supported with evidence and information to substantiate its proposals.

This study into transitions links directly to the priority of the Council's Strategic Plan 2006–2011 that: *'Devon's children should have the best possible start in life and gain the knowledge and skills they need to lead happy, healthy and fulfilling lives'*. One of the objectives under this remit is to support parents, families and carers to help children and young people enjoy learning, aim for excellence and achieve to the best of their ability.

Time and resources necessitate that this review provides a snapshot approach to highlight significant issues relating to transitions. The list of witnesses to the review does not pretend to be exhaustive but hopes to provide insight into the central themes affecting transitions at the present time.

The Task Group's terms of reference were:

1. To examine the transition stages from children's to adult services of children and young people known to and in receipt of a service outside education to include:
  - Children in Care
  - Young Carers
  - Child and Adolescent Mental Health Services / Adult Mental Health Services
  - Physical / learning disabilities
2. To gain an understanding of the cost implications for care services which are associated with transitions.
3. To review the County Council's strategy for transitions.
4. To examine how services are commissioned.
5. To examine the input of schools and FE colleges in preparing young people for transitions.
6. To make detailed recommendations to improve the experience of transitions for children and young people to the People's Scrutiny Committee on the findings of the Task Group.

N.B. during the review process, it was agreed that young offenders be included within the scope of the review.

It should also be noted that the use of 'parent' rather than 'parent / carer' in the report has been done simply as shorthand, and does not in any way seek to undermine the valuable role of carers in the County.

# Context

In July 2007, the then Community Services Overview/Scrutiny Committee published the *Transition Between Children's and Adult Services At Age 18: Final Report*. Members agreed a series of recommendations, which were accepted by Cabinet and their progress subsequently tracked by scrutiny.

In 2008, the *Integrated Commissioning Strategy for Transitions of Young People with Additional Needs 2008-11* was written. The strategy was to define the delivery framework for transitions for the Devon Children and Young People's Plan and was led by the Devon Children's Trust Partnership.

In May 2011, Devon Audit Partnership published its *Internal Audit Report on Children and Young People's Services Transition to Adult Services* and reported the following:

Whilst the Integrated Strategy gave renewed focus to this service area there is a requirement to ensure it continues to have relevance and that all the County Council services and agencies sign up to it and there are suitable operational process in place to support it. Currently we believe that processes need to be strengthened and developed to ensure the organisational objectives are not put at risk.  
(Page 9)

The following areas were identified within the *Internal Audit Report* as requiring improvement:

- To ascertain what progress has been made with the implementation of the *Integrated Commissioning Strategy for Young People with additional needs for 2008 - 2011*.
- To assess and provide assurance as to whether or not policies and protocols are sufficiently robust to support the transition to adult services.
- To identify and assess the governance arrangements and find out which elements work well and which ones require further development.

People's Scrutiny Committee agreed at its meeting on 15 June 2011 that the Transitions Task Group be formed. In setting up the Task Group, members recognised the period of change that the County Council as an organisation was going through. The review took place at a time where significant cuts to budget and the overhaul of the management structure to form the new People's grouping was taking effect. Challenges as well as opportunities were likely to arise as a consequence that would inevitably affect transitions.

# Recommendations

The Task Group's recommendations have been drawn up using the evidence obtained from contributors and background material.

**Recommendation 1 That the People's grouping adopts a 14-25 transitions service across the County.**

*Rationale:*

A move to a 14-25 transitions service will help to ensure continuity of social care work and reduce disputes over funding at 18. It will also create a more consistent approach to transitions across the County, building on the good practice of Transitions Workers who oversee children from 14-25 as they go through their transitions. The situation at present is disparate, where some parts of the County have dedicated Transitions Workers, while others generic social care workers. There should be one coordinated approach in Devon to transitions.

**Recommendation 2 That the actions as identified in the *Internal Audit Report* be implemented.**

*Rationale:*

Officers are working through the *Internal Audit Report* to ensure the recommendations are taken forward. It is vital that People's Scrutiny continues to monitor progress, as there have been issues with the *Integrated Commissioning Strategy for Transitions of Young People with Additional Needs 2008-11* in terms of ownership and responsibility for implementing Devon's key transitions policy.

**Recommendation 3 (i) That there are systems in place to ensure appropriate health input for young people in transition.  
(ii) That the disparity in CAMHS provision across the County be addressed as a matter of urgency.**

*Rationale:*

Work needs to be undertaken to improve pathways through health. Those young people with less specific health conditions, who are on the threshold of services, were identified as being at particular risk of not receiving the health provision they need. Considerable work is also needed in terms of the role of the GP during health transitions. The disparity in provision across the County in CAMHS and AMHS input may be lessening, but young people are still not getting the timely and requisite levels of support they need through the transitions process.

**Recommendation 4 (i) That all parents receive appropriate information, advice and guidance on the transitions process and its implications from the child's 14<sup>th</sup> birthday.  
(ii) That impartial career and Further Education guidance should continue to be available (as is**

**currently provided by Careers South West).**

*Rationale:*

A huge frustration to parents relates to the exchange of information. While Parent Carers Voice have an important role supporting parents, it is vital that schools take increased responsibility. Impartial career and further education guidance is essential, where young people are to be supported towards making decisions about their future.

**Recommendation 5 That primary, secondary and tertiary education establishments should ensure, with legal consultation where necessary, all relevant information is exchanged at each transition.**

*Rationale:*

Schools have a vital role in a young person's transition, therefore it is essential the necessary information on a young person is exchanged as they move schools/colleges to ensure the process is as smooth as possible.

**Recommendation 6 That a wide range of opportunities for education, training and employment are developed including appropriate residential accommodation at Further Education colleges.**

*Rationale:*

There is a need for increased opportunities within the County to ensure young people do have options afforded to them for their future regardless of their disability or needs.

**Recommendation 7 (i) That the annual review policy for Children in Care and children with statements of SEN are strictly adhered to from 14, and these reviews are person centred involving all relevant agencies.  
(ii) That person centred reviews are extended, on an annual basis, to adult services.**

*Rationale:*

Person centred reviews ensure that the young person is fully at the centre of the review process, with actions that make a difference to their life. Members recognise that the person centred approach can be equally helpful within an adult context benefiting those young adults as they reach 18 and beyond.

**Recommendation 8 That personal budgets are brought in from 16 where appropriate.**

*Rationale:*

The Group recognises the positive effects personal budgets have on service users across Devon, and felt their deployment where appropriate to young people from 16 would be a factor in improving transitions.



# Summary

The outcomes for young people can be extremely bleak where transitions have gone wrong. Parents still often use the analogy of falling off a cliff to describe the transition from children's to adult services. Although there have been improvements in transitions since the Community Services Scrutiny Task Group published its report in 2007, there are still significant faults in the system which are preventing Devon's children from having the smooth transition from children's to adult services that is so critical to their future outcomes.

Transition is the crucial time to make sure that young people with additional needs continue to get enough support into adulthood, particularly as there is often a significant difference in the thresholds to services post 18.

It is vital to maximise the use of finances. It must be recognised that there are some extremely complex young people entering adult services at 18. It used to be the case that for those in the care system, they would be in it for life. There was no change or challenge to this model. Now young people are treated as individuals, and they move through their transition, as a young adult in their own right. Young people should be given every opportunity to do all that they can and want in their life. Devon's aspiration for all its young people should be to ensure they receive plentiful opportunities for work, training and independent living.

For children with learning disabilities it is essential that these young people are fully involved in their transition and in the making of decisions about their future. The transitions process should now be central to challenging the belief that this is not a group of young people that can be employed. It is a big change to ensure these young people can make a contribution to the workplace. These young people do however provide considerable untapped skills, and the creative support of professionals can lead to solutions being found that ensure these young people can move towards a life of fulfilment and not one where they are 'warehoused' in residential accommodation.

A smooth transition between children's and adult services is also vital if Devon as a local authority is to fulfil its corporate parenting role in helping to give Children in Care the best possible start in life. Where transitions are not handled well the life chances of a young person can diminish drastically, with significant increased risk of their entering the criminal justice system or being admitted to a secure unit.

# Key Issues

## The System

### Social Care Transitions Planning

Young people who receive children's services may continue to need services when they are adults. This will involve transferring responsibility for assessing needs and providing services from children's to adults' services. The process of transfer is referred to as 'transition'. This can happen from the age of 16 onwards.

It needs to be agreed long before a young person's 18<sup>th</sup> birthday as to who will be picking up the cost of their provision and support post-18. At 14, discussions need to begin to establish the young person's route through the system. Where there is a handover in a system, this will be the area with the greatest risk of gaps, as it has been in terms of young people in transition. Much of the success of transitions is about the ownership of policies and protocols, and trying to ensure they are actually followed.

While it was evident to the Task Group from its interviews with a range of professionals, senior management and service users that transitions working has considerably improved in recent years there is much more that needs to be done. Senior officers reported that adult services had not ever met its targets in the Transitions Protocol, with for instance its involvement in integrated person centred planning from 14. It was not apparent in the Internal Audit Report, nor in the Task Group's investigations as to who has ownership and responsibility for implementing Devon's key policy in terms of transitions in terms of the *Integrated Commissioning Strategy for Transitions of Young People with Additional Needs 2008-11*.

A district' housing officer reported that they had not ever witnessed a smooth or even transition from children's to adult services. Each time the case has been rejected as not meeting the threshold for adult services. As a result of this, a number of young people who are in need of an adult service are not receiving one and districts are forced to look at other agencies to try to fill the gap.

### Social Care Workers

Solid relationships with professionals are important, and where this is fractured then significant problems can arise. The avoidance of change in key worker is crucial and in terms of consistency, and supporting a young person's emotional health and wellbeing. It is also advantageous for the County Council in maintaining a strategic overview of the service user. It was reported to the Task Group that there is more stability now with social workers, but improvements need to be made to avoid changes in social care workers being made for Children in Care at 16 which contradicted County Council policy. There are currently differences of approach in adult and children's social care workers, and work is required to endure a more consistent approach.

The issue of difficulties for adult social care workers working with children and young people, and vice versa was felt to be something of a red herring, as all social workers are trained to the same level. The fundamental skills of adult social work and children's social work are the same, and there is joint training and recruitment. It will be something of a cultural shift, but the cuts in resources necessitate changes in approach.

There is a lot of inconsistency in approaches across the County. There are only dedicated adult transition workers in North and Mid Devon, who are managing clients

directly, which is a different approach to the rest of the County, where in other teams managers are managing referrals. It was also reported to the Task Group that in some parts of the County instead of one named worker, there is now a small group of workers to support young people in transition, which could be a risk. In some parts of the County, there are also transitions mentors, through a contract with Young Devon.

It was reported that one of the reasons the Transitions Protocol is not used is through the lack of transitions workers to follow it, as generic social care workers would not necessarily be aware of the protocol.

### Funding

Children's social care is more expensive than adults. It is a much smaller market, as well as providing a different type of support and care to the adults sector. Assessment processes in adult and children's services are also based on very different criteria. Adult services have not previously accepted children's services assessment of a young person's needs. There have been problems with cases being delayed due to internal disputes over funding at 18 where they do not have a mental health issue or learning disability with an IQ of less than 70. Where funding suddenly stops for an individual due to inter-agency disputes over funding responsibility; it is the young person concerned who remains the loser in these scenarios.

It was reported to the Task Group that high cost packages are put in place by children services at 16/17, which are simply not sustainable as the young person moves into adult services. Examples were cited of young people being sent to expensive out of county provision a year before their 18<sup>th</sup> birthday, and reports of an ethos within children's services that it does not matter what happens at 18 as it is adult services problem to sort out.

There has been a lack of clarity historically in terms of children's health funding and budget. There are issues about the continuing funding of children with complex needs. There has been a rise in the number of children going through transitions and not having an agreement or clarification on their provision post-18.

Pathways are not always clear to the parent / carer and at times this leads to inappropriate decisions and slow reaction times for families in need. With the brokerage system, some parents were reported to feel that their children are being treated as a commodity with a price, and their needs have little to do with it. Funding for young people post-19 has been held centrally but from 2013 this can be used to provide a more person centred approach. Education funding for young people post-19 has been held regionally by the Young Peoples Learning Agency (CYPLA) but from 2012 this can be used to provide a more person centred approach as part of a delegated function to the Local Authority. Previously funding streams forced the County Council to think often in terms of silos than across the board. There is an opportunity to have a more focused strategy on young people moving forward.

### Allocation

Officers reported to the Task Group that for those young people meeting the criteria for adult services, there should not be a funding problem at 18. In the Learning Disability Service, most young people are now allocated at 17, although there are still some that are allocated post-18. Everyone within adult services goes through a resource allocation process to establish their funding. Some people are happy with this process; others complain that there is a lack of choice of providers. There is certainly further work to be undertaken in terms of developing the market.

One of the difficulties is the labels which are used in children's services, are different to those in adult services. There is a perception that Adult services and health have a very precise definition of someone with a learning disability having an IQ of 70 below but we understand from management that this is only one indicator that is used.

Where the needs of a young person are profound and obvious these are well catered for; difficulties arise for those whose needs do not meet the threshold in terms of IQ, mental health etc. and who consequently do not qualify for support from adult services.

It is a significant concern that those young people who do not reach the adult services threshold at 18 are at risk of entering the criminal justice system. There are small groups of young people who have abusive behaviour and may have, or be at risk of sexual offending. Cuts in service will increase the risk of these most vulnerable young people not being picked up.

#### Joint Commissioning Approach

It was not clear that the monitoring process around the quality of all commissioned services has been strong within adult or children's services. It needs to be ensured that services go to the cohort of young people that needs them most. It is essential that the young person remains at the centre of care planning where funding streams change so that continuity is maintained as far as is possible. It is important that there is an alignment of budgets and resources to develop more of a joint commissioning approach across health and social care, particularly in children's services.

#### Personal Budgets and Direct Payments

It was reported to the Task Group that personal budgets and direct payments in Devon have been a success, and have given parents a greater element of control. Personal budgets put the individual at the centre of the process, where services can be more specifically tailored to meet their needs. Parents have commented that personalised learning budgets have helped them to think about different and more creative solutions. Adult services' emphasis on personal budgets is in accordance with a shift in parental expectations as to what their child can do in terms of maximising their potential and moving into FE and employment. A helpful way forward might be to bring personal budgets into children's services at 16 for more than respite care.

It must be recognised that alongside personal budgets there needs to be adequate opportunities and guidance. There also has to be choices available in the market, for direct payments to be truly effective. The shift towards personal budgets and direct payments does instigate a different role for social workers, towards more of a support and enabling function. People are required to provide monitoring returns on their use of personalised budgets as there are rules and protocols to try to ensure it is not being used on inappropriate items.

#### Young Person in Transition Meetings

Young People in Transition (YPIT) meetings are held quarterly across the County by Integrated Children's Services. YPIT meetings include named transitions leads across Devon, and are attended by health, children services, adult services and Careers South West. There have been gaps in certain areas, in particular with CAMHS and AMHS attendance, although this was reported to be improving with Devon Partnership Trust working to try to ensure that CAMHS get young people on the list for YPIT and central planning, as well as making contact with AMHS to try to prevent there being holes in the system in terms of picking young people up in transition.

#### 14-25 Transitions Service

A detailed project plan is being developed relating to a service for 14-25 year olds to include young carers, young offenders and children in care. The project is anticipated to take 6 months and will be completed by the end of the financial year. It is hoped that this project will significantly improve transitions. Although there is a need to remain mindful of moving the problem to when young people reach 24, by the age of

24 hopefully young people are settled in a package of support and resource that will continue so long as they need it. If the age of transition is moved to 25 a considerable number of young people will be more able to be independent than they would have been at 18, and may not need ongoing adult social care involvement. Parent Carer Voice (PCV) also felt that it will be better when the transition process is moved to 25.

## **People Who Use Services**

### Children in Care

Children in Care (CIC) do not have a family infrastructure behind them, so for those young people making the transition to adult services at 18 the County Council has to try to build a world around them that provides support and continuity as they move forward. Some of these young people will be amongst the most vulnerable in the County. A significant percentage of those people in the Criminal Justice System have been, or still are, CIC. Officers reported that recent statistics revealed that in Devon CIC were presently four times more likely than children in the general population to receive a final warning, reprimand or conviction from the police.

The Task Group was advised that the Care Leavers Service is looking to prepare a better offer for care leavers. At 16 a young person comes under the Leaving Care Team which can support young people up to the age of 25 if they are in education. A pathway plan provides CIC with information to help them decide what they want to do and how they want to do it. Young people now have a much clearer framework around their pathway plan.

Young people reported that CIC need to be assertive if they are going to get the support they want through their transition into adult services. A problem is where a young person starts to do well, the support is immediately removed and they go backwards. There are some excellent social care staff, but overall the system itself is extremely frustrating.

Devon Housing Options Partnership advised that the use of a dedicated team to manage CIC post 16 is already resulting in positives for young people. The use of social workers dedicated to this type of work is beneficial and prevents this group of young people being overlooked when more 'pressing' cases involving younger children present themselves. Devon Housing Options Partnership did however report that young people who are already child in need pre 16 receive a poorer service than those identified as a child in need or a child in care post 16.

### Young Carers

Transition from 'young' to 'adult' carer is complex and difficult. It is apparent that the level of support young carers receive at 18 and crucially beforehand is insufficient. At 18 young carers are signposted to adult services and to Devon Carers Link where there is little which is appropriate for them as the needs of carers aged 18-25 are very different from those of the much older carers who predominate in the adult sector. Furthermore, at 18, a young person's caring role has to be balanced with his or her need to make choices about further education, employment and independent living and for some young carers there is a significant need for specialist support at this time. A 14-25 transitions service, would provide young carers with continuity of support and social care worker as they make their transition.

A report of the Support for Carers / Young Carers Joint Task Group was also published on the 10 January 2012 People's Scrutiny Committee agenda.

## Autistic Spectrum Conditions

The setting up of the Autistic Spectrum Conditions Team is a significant step forward in the transitions process for these young people. It helps to keep young people in the area, where once they may have been sent out of county.

## Parents

There is a need to be clear as early as possible as to what the options are, and to give parents an opportunity to plan when a young person moves. Good care planning should begin from 14, in order to remove the cliff edge at 18 or at any age. Work is being undertaken to try to avoid parent and young people's expectations being out of touch with the reality of the offer they are likely to receive at 18. Parents often feel held and supported by the school, so unless their child is provided with an adults package, there may well then be little left for them to feel part of a system which offered some reassurance.

Parents have been asked to leave young people's meetings as soon as they reach 18. There has been a sudden cut off point, which causes considerable upset to parents, who should still be involved in discussions relating to their child. There is a need to have some transitions where young people can stay at school until they are 20, while other young people need a transition to supported living. It needs to be recognised that the transition process is for the whole family, and in doing so there is likely to be a better outcome for the young person. Although there is a need to be very careful, where the wishes of parents can supersede those of the young person; there can be a problem with over protective parents wanting a different thing to their child and blocking what they want to do.

Although it was claimed by officers that relationships with parents are better than ever before, there are still too many tensions with adult services particularly where there are changes to care packages. PCV felt that parents need their own training to help with transition, as they are often extremely confused. The County Council's transition pack at 14 is excellent, but it does not tell parents what actually happens in adult services. At 17 parents need a similar pack with information on personnel, services and support.

There are legal differences between statutory provision before and after 18 that have to be accepted and work needs to be undertaken to ensure families understand any changes to services. The County Council provides streamlined guidance in Year 9 to young people and their parents to help support the transitions process, which has been well received. The transitions to adult services from children's services is just one of a number of significant changes that take effect from age 16 including the Mental Capacity Act. The Act will generally only affect people aged 16 or over and provides a statutory framework to empower and protect people who may lack capacity to make some decisions for themselves. It is essential that as part of the transitions process from 14 that parents are made aware of the Mental Capacity Act and its possible ramifications.

## **Education and Employment**

### Educational Transition

Officers reported that there should not be a problem for young people up to the age of 25 with their educational transition. Educationally the County Council tries to ensure vulnerable groups get the right deal at the right time and that young people are given one transition route post-16, working with health and social care to make sure that the overall package for the young person is right. Previously it has been something of a

postcode lottery as to the transition route, but things are now much better. There needs to be provision in place which is clearly signposted to families.

### Person Centred Planning

It makes a huge difference where there is a person centred approach to the young person, with a formal pathway outlining everyone's roles and responsibilities, whether this is driven by the school or social worker. While it was reported to the Task Group that many schools in Devon undertake excellent person centred reviews (See an example in Appendix 1), it is less common practice in adult services. Person centred plans are supposed to be looked at annually in adult services, but families in some instances are reported to be waiting more than two years to have their plan reviewed. Person centred plans also look holistically at the individual but not always relate to the social care funding available.

### Schools

Officers reported to the Task Group that schools have an important role to fulfil, and overall, mainstream schools in Devon have engaged well with transitions, including those with children with complex SEN. Devon was reported to be doing better than many other local authorities in the country, but there is concern about the distancing of schools from the County Council.

Information, advice and guidance (IAG) will change over the next two years, although at present there is no clear framework of how schools will deliver this. The responsibility for IAGs moves from the County Council to schools with effect from September 2012. It is important that a young person (and their family) at the transition stage receive the correct information to advise of the opportunities and the provision available to them. There is concern that the independent advocate voice will be missing where schools themselves provide advice. Schools with sixth forms will want to keep as many young people as possible, as they are paid per learner.

It was suggested that special schools look at post 19 provision because this would allow some of the most complex young people from falling into inactivity and isolation. There is a need to think about those with severe physical disability who will not be able to work but have good levels of cognition. Currently they are denied this if they do not commence the course by 18.

### Further Education

Officers have talked to all FE principals about transitions for young people with learning difficulties and other vulnerable groups. Work needs to be undertaken with these groups pre 16 to maximise their employability and progression chances. Improvements also need to be made to the pre-assessment process. There is success with this in some schools, but there is not yet a formalised process in place across all schools whom need to successfully move young people from pre 16 in to post either through to a special school or into mainstream FE. There is also an issue where schools are holding on to young people for an extra year. Whilst the best reasons may be at the heart of this, the funding implications and consequences at a later age for the individual can be significant. It is important that young people continue to progress, both personally and educationally. These young people should be tracked closely so that they have an equal chance in their progression to FE, or employability.

The excellent work of a number of FE colleges across Devon was sited in terms of supporting young people in transition such as where there are agreements in place to inform the Care Leaving Team where a young person is struggling with attendance or behaviour issues. There is a clear protocol with FE colleges, to ensure they know of pupils in care, care leavers and the risk factors associated. However, it was reported that overall thresholds are rising in terms of who FE colleges are accepting, and it will

often depend on where the young person is based in Devon as to whether they can access a suitable college course.

#### Careers South West (formerly Connexions)

There are 163,000 young people aged 0-19 in Devon, with a database including 11,500 of these young people with additional needs. At present, a team of Careers South West (CSW) personal advisors go into all secondary and special schools in the County; their time however has been cut from 2 FTEs to around 0.6 FTE per school, as CSW has in the last 12 months lost 50% of its staff. As a result CSW's work is increasingly targeted to those young people identified as being at risk of entering NEET status, learning disabled, children in care, care leavers, young offenders, black and minority ethnic groups, those not in mainstream education and young carers. There is often a considerable group of young people that would benefit from a universal allocation, who do need some support and guidance as to their way forward. Schools can buy in additional support, although far from all are doing so. The Task Group expressed concern that the reduction in CSW provision would make many already vulnerable young people all the more vulnerable as a result.

In Young Devon's recent publication *Transitions Report – A Report on the Experiences of Young People in their Transitions to Further Education* it highlighted the fact that young people do not have one place to get information; a role which Connexions performed previously to some extent. Often there is information available to young people, but the difficulty is in getting to those young people who most need to hear it. It was felt that the reduction in the Careers South West service would have an impact in terms of NEET status, along with the downturn in the employment market.

#### Employment

There are significant difficulties in terms of employment options for all young people in the County given the present economic situation, and these difficulties are compounded for people with learning disabilities. Many families feel that the County Council (and others) lets down a range of young people with learning disabilities who are able and have skills but lack the capacity to complete a full week's work. This is particularly true of those with Autistic Spectrum Conditions and Downs Syndrome. They need an ordered environment and clear boundaries. There needs to be a drive to get these young people into supported employment, working closely with employers, to ensure that they understand what the needs are of the young person they are taking on. Government has announced an increase in funding available for apprenticeships. The main problem in an economic downturn is that employers are not taking on so many apprentices.

NEETs is a strategic concern in terms of access to FE and limited job opportunities for the current cohort of young people. The transitions stage needs to be managed carefully or these young people will become NEET. At anytime there are about 1000 16-18 NEETs in Devon.

## **Health**

#### Health Transitions Overview

Young people who require transitions support have not found input from health easy to access. This was less of an issue for young people with very specific health conditions, but rather those with difficulties relating to social dysfunction, deprivation and hardship. Although there is a quicker and more effective arbitration process now in place to avoid lengthy disagreements where a young person is on the threshold of services, there are issues around health and engagement, and the assessment of young people. There is a need to alter the health stance, to ensure chaotic young people are treated and engaged. Health provision is universal and is focused on



those most able accessing it. It is also very target driven. There was reported often to be a gap between what professionals say is needed and what the person concerned actually needs.

Young Devon has recently published reports (see Bibliography) which were cited by officers as being influential to the future of transitions in the County. The report *Healthcare Transitions*, commissioned by the County Council, Cornwall and Torbay PCT, highlights not making assumptions on how young people should be treated, rather there needs to be a person centred approach to young people.

### CAMHS and AMHS

The Task Group were advised of many issues relating to CAMHS poor engagement in the transitions process, coupled with high thresholds for young people accessing CAMHS provision. Devon Partnership Trust (DPT) recognised that there have been times when CAMHS have been missing at earlier stages of the transitions planning process and transitions have been managed too late. CAMHS leadership are working hard to ensure that better processes are put in place. There is good clinical leadership across the board in AMHS, but this still needs to be replicated in CAMHS. NHS Devon has led a review of the transitions protocol from CAMHS to AMHS following Ofsted completing a full inspection of Children's Safeguarding and Looked after Children's services in July 2009. The inspection resulted in a multi-agency action plan in relation to the transition protocol between CAMHS and AMHS and the development of a joint agency protocol.

There should be overlap between CAMHS and AMHS during the transitions as there is a build towards a new position for the young person concerned. This new position is usually one with reduced support as the young person moves towards more independent living. It is however sometimes difficult to get mental health workers from CAMHS and AMHS together, even though this should happen as routine. CAMHS discussions with young people in transitions start 17. The main reason that they are delayed until this point is that there a number of young people who receive CAMHS input who do not need to be transferred to AMHS. There is a need for an improved strategy for the transition from paediatrics to AMHS, as well as a group of young people who are vulnerable who do not however have a defined mental health need.

### GPs

A significant issue in terms of health transitions is that very often parents are not making the relationships they should with GPs. Parents need to know whom their child is being passed on to from the paediatrician. The paediatrician has a role then in making sure the GP is aware of the child's needs. It can otherwise get to the point of discharge from paediatric care where it becomes apparent that the young person has not seen their GP before, because they have been receiving repeat prescriptions and hospital care, rather than primary care.

## **Other Issues**

### Residential Accommodation

At 18 some young people are being put into residential colleges around the country can be very expensive. It is recognised that there are young people whose needs can only be met by a national provider, but there are instances where parents want their child to leave a mainstream college to go into much more expensive residential accommodation. Adult services are beginning to challenge providers to ensure they provide a breakdown of services as a way of tracking what exactly is being paid for and reducing costs as a result.

There needs to be increased emphasis on providing a skilled environment that focuses on development of young people with SEN. It was reported to the Task Group that sometimes young people's skills are not always utilised or developed fully by residential providers, and young people have to start again when they move into supported living.

#### Supported Lodgings

The County Council provides supported lodgings to approximately 50 young people post-18 as they continue their education. Devon Housing Options Partnership advised that there is a critical need to look at the level of support the current young person's projects and supported lodgings scheme placements can provide. Housing options teams get calls from social workers on a weekly basis begging for somewhere to put their young people.

#### Information Sharing

Good protocols are in place as data sharing on young people in transition is a vital part of the safeguarding agenda. It is important for parents to receive a baseline of information, and it is rare when a young person does not want their family's involvement. Skilled clinicians can usually find a way to protect the most confidential client data, while sharing some information with the family concerned.

The lack of IT compatibility is a significant frustration, as up until two years ago there was not a shared database across CYPS and ACS with information on children aged 14 and upwards. Young people should now be picked up much earlier at 17, than waiting until they reach 18. At the present time, Care First is the only system used by children's and adult services. A database which Connexions created mapping Year 9s onward is now held by the County Council, although some concern was expressed that this data may be out of date.

The Devon & Cornwall Constabulary advised that it would also be helpful if they were made aware of foster care placements from out of the area.

#### Pathfinder on SEN and Disabilities Green Paper

The County Council has been chosen as a pathfinder for the recommendations in the SEN and Disabilities Green Paper. The Green Paper, if it is implemented, will have a significant impact on transitions, allowing more robust planning, and should help to move towards recognising that young people are not suddenly adults at 18, but that they are on a journey to adulthood, which should help to ensure there is no longer this cliff edge at 18. The pathfinder does not offer a considerable amount of money with £75k in first year and £150k in the second; it is however more about a programme of change.

#### Devon & Cornwall Constabulary

The Task Group recognised the excellent work Devon & Cornwall Constabulary have undertaken with Devon Youth Service, and noted their concern as to the impact of budget cuts to very significant youth work being stopped in some of the County's most deprived areas. Feedback has already been received from Youth Intervention Officers indicating issues in areas where youth services have been cut. Devon & Cornwall Constabulary advised that the consequences of this will be felt in the next few years, as where the country is socially and economically struggling there will be a significant impact on policing. This makes the need for smooth transitions more pertinent than ever.

## Transitions from Youth Offending to Probation

The Youth Offending Service (YOS) works with children up until the age of 18 when they become the responsibility of Probation. HMIP is currently undertaking a thematic review of work on this transition nationally. This review is still underway but the indicative findings are not very encouraging as in a number of cases young people have re-offended or breached Court Orders after the transfer to Probation, which tells its own story as to the success of the transition. More support is needed around the transfer to Probation. There needs to be an increase in planning meetings and specification of the information which is going to Probation. It would be helpful if Probation has youth specialists, who provide a single point of contact in each area managing transitions from the YOT. Each of the 3 YOTs in Devon has a seconded Probation Officer who can act as a link to the identified officer within the Probation team.

Young people within the YOT need to be carefully supported on transition, otherwise they can be set up to fail. It would be preferable to keep all 18 year olds within YOT, and transfer those as necessary to Probation at 19. Probation should then also have specialist youth workers in place to aide the transition across. By keeping young people in YOT until their 19th birthday it would allow them to mature more, provide time to have more influence and consequently reduce reoffending.

Thresholds around level of risk differ between the YOS and Probation. Young people flagged up as high risk within YOT may not be seen as such by Probation and this is a significant difference. A young person can move from having a high number of contact hours a week support with YOT to a much reduced level of contact in Probation, when there is the transfer across which is supposed to happen with 4 weeks of their 18th birthday. Some young people are kept on longer by YOT to finish their Court Order, and discussions are entered into on a case by case basis. Those young people that remain in the system tend to be those that are more complex in terms of their multiple needs and/or more persistent offenders. The YOS working with its partner agencies has been very successful in getting those young people at a lower level out of the system i.e. preventing them re-offending.

A fundamental concern is a cohort of young people who are approaching adulthood whose behaviour is just below the level of their entering the CJS. In a sense, this group of young people is invisible, unlike those in the CJS who received intense and coordinated support.

It is estimated that an additional £90,000 will be spent over the next 5 years where transitions do not go well. It is very expensive keeping young people in custody. It costs in the region of £72,000 a year to keep a young person in a Youth Offender Institution, over £250,000 for those in secure training centres. The YISP costs £580,000 for the whole of Devon this year. The Audit Commission estimate the cost of a youth crime to be £5,000. It is difficult to unit cost the YISP interventions as they range in length and intensity, but probably equate to around £1800 each. If it is a priority to improve transitions, it needs to be considered how additional work and support can be resourced.

Councillors Newcombe and Sanders (Chairs)  
Boyle  
Lee  
Spence  
Taylor  
Mrs Wilson (Primary Governor Representative)

Electoral Divisions: All  
Executive Member: Cllr Andrea Davis (Cabinet Member for Children's Health and Well Being)

<b>Local Government Act 1972 List of Background Papers</b>		
Report originated by:	Dan Looker	
Room:	G.32	
Tel No:	01392 382722	
Background Paper	Date	File Reference
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## **Appendix 1:**

### **Person Centred Approach at Ellen Tinkham Special School**

Ellen Tinkham has been working towards a person centred approach over the last 10 years. The school has just over 120 young people aged 3 – 19 with very complex needs. Ellen Tinkham has had 2 consecutive outstanding Ofsted reports, in large part due to the coherence of the person centred way.

Year 9 is the start of the transitions process, with the development of a core promise. The young people are in control of what happens next and where they are going to be. It would be extremely helpful to some of the young people concerned if there was provision for 19-25 year olds to remain at the school, but with a scaffolded structure, ideally supporting paid employment, increasing the time the young person has away from the school. Young people go into a wide range of places and provision post Ellen Tinkham.

Each learner has an individual Transition Learning Budget, which the school allocates out to its students. Its purpose is to ensure that young people at Ellen Tinkham School are fully involved in their transition and in the making of decisions about their future:

- It allows young people to access services and make choices based upon experiences.
- It prepares young people for their Transition to Post School Placements.
- It enables young people to have control.

Ellen Tinkham set out that post-school young people will go into paid employment and a living wage. It is a significant shift challenging the belief that this is not a group of young people that can be employed. It is a big change to ensure these young people can make a contribution to the workplace. These young people do however provide considerable untapped skills. At present 2 young people are now having scaffolded support in employment and hope to continue post Ellen Tinkham. There are big opportunities with vocational learning and moving these young people towards employment. Ellen Tinkham has a member of staff with a dedicated Rural Skills / Social Enterprise role, who links in closely with organisations such as Pluss. There is a need to move away from looking just at what the school can provide, but what the schools and their partners can provide. There should be consideration of carving up jobs in to elements that young people can do. There are young people who will be leaving Ellen Tinkham who would love the opportunity of a job and who would be extremely reliable. There is considerable work to be done in terms of talking to employers. There is a need to get out into the community and open people's eyes to the possibilities that exist. Ellen Tinkham will look at setting a target of 50% of students getting some employment.

Ellen Tinkham employ an administrator as a Progress Chaser, who is a dedicated member of staff relentlessly chasing up on action plans to ensure they are progressed and remain live.

It was reported to the Task Group that here are some schools now that are starting to mirror Ellen Tinkham, but there are a lot that will not even invite the social worker to the review meeting.

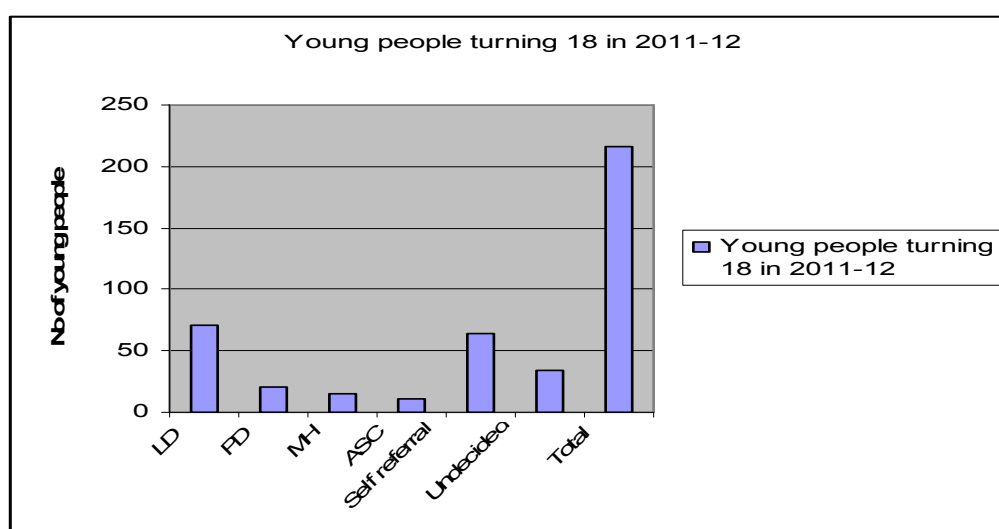
## Appendix 2

### Transitions Data

#### 1) Breakdown of the number of young people in transition

Based on information from Integrated Children's Services the number of young people turning 18 in 2011-12 is **216**.

Learning Disabilities	Physical Disabilities	Mental Health	Autistic Spectrum Condition	Self referral	Undecided	Total
71	21	15	11	64	34	216



Whilst there is a database used to ensure that young people are appropriately allocated to adult services teams this is an operational system rather than a performance management tool and does not hold cumulative information on young people in transition. This is recognised as an issue and will be addressed as part of the SEND Pathfinder (transitions project).

Based on a Careers SW (Connexions) 'snapshot' (July 2011) the numbers of young people in transition yet to be allocated to adult services teams (as they have not yet turned 18) is set out below.

	ADHD	ASC	ADHD/ASC	TOTAL
2010-11		1*		1
2011-12	4	21	4	29
2012-13	8	32	3	43
2013-14		11	1	12
2014-15		3		3
2015-16		1		1
<b>Total</b>	<b>12</b>	<b>69</b>	<b>8</b>	<b>89</b>

\* Young person noted as a Care Leaver

If these young people have an ASC diagnosis and no additional needs, then they would be directly allocated to ACS/ADHD teams by Devon Partnership Trust (DPT).

Transitions to Learning Disability Services.

Source: DCC Finance Services

Based on named clients recorded on CareFirst 6 the number of 18 year olds in receipt of Learning Disability Service is as follows:

<u>CIT Transition in year ended</u>	<u>Number of people</u>
September-11	32
September-10	48
September-09	47
September-08	51
September-07	47
September-06	51
September-05	55
Total	331
Average per year	47

The difference between the figures quoted in section 1 (71) and the above (32) relates to the number of young people who are in education placements. The majority of these young people will have education packages, which may be backed up by small amounts of social care, e.g. holiday respite.

This cohort of young people may transition into adult services up to age 25, but with most being in the service by age 22. This is because whilst a young person may be continuing in education they may not present for services as the family is coping and if they do the full impact and costs of the service package does not become apparent until they finish education.

Transitions to Adult Mental Health Services (including MH ASC clients under 25)

Source: DCC Finance Services

Based on named clients recorded on CareFirst 6 the number of 18 year olds in receipt of Adult Mental Health Services is as follows:

First Adult Service Financial Year	Number
2007-08	3
2008-09	2
2009-10	7
2010-11	<u>8</u>
	<u>20</u>
2011-12	Named individuals expected 32

The significant increase in the number of young people transitioning to adult mental health services has arisen due to the re-badging of young people who would formerly have been

included within Learning Disabilities (ASC) following the establishment of an ASC service within DPT.

#### Transitions to Adult Physical Disability Services

*Source: DCC Finance Services*

Service data is currently captured for the age range 18-64. This is recognised as an issue and will be addressed as part of the SEND Pathfinder (transitions project).

However, based on an extract from CareFirst 6 there are 122 young people aged 18-25 with an average spend of £51K per week or £2.659m per annum.

#### **2) How many young people make the transition from CAMHS to adult mental health services each year?**

*Source: NHS Devon*

Based on health performance data for the financial year 2010-11, a total of 35 young people made the transition from CAMHS to adult mental health services. However, it needs to be noted that many of these young people would be open cases only to CAMHS, i.e. NHS only and would therefore have no obvious County Council funding.

From a County Council perspective, the table under section 1 above shows that of the 35 young people making the transition to adult mental health services in 2010-11, 8 young people had a financial consequence for the Authority.

#### **3) The annual cost of care services associated with transitions?**

##### Transitions to Learning Disability Services.

*Source: DCC Finance Services*

<u>CIT Transition in year ended</u>	<u>Number of people</u>	<u>Current Annual Cost</u>
September-11	32	£416,782
September-10	48	£658,915
September-09	47	£777,534
September-08	51	£908,408
September-07	47	£1,161,602
September-06	51	£1,470,523
September-05	55	£1,506,025
Total	331	£6,899,789
Average per year	47	£985,684

This is the current social care spend incurred in relation to 18 year old receiving a service. Section 2 highlighted the fact that transitions to learning disability services can continue up to the age of 25 due to continuing education packages. Therefore, the full cost of the 71 young people turning 18 in 2011-12 may not be incurred until 2017-18.



### Transitions to Adult Mental Health Services

Source: DCC Finance Services

Financial Year	No new cases	New cost in-year	Total cost in year
2007-08	3	10,437	14,832
2008-09	2	16,410	46,967
2009-10	7	73,277	130,855
2010-11	8	254,729	584,506 (Note 1)
2011-12	3	450	466,819 (Note 2)

#### Notes:

1) Mean average cost of care package = £36,532. (This includes two packages of care at £114K and £207K respectively.)

2) Mean average cost of care package = £33,344

### Transitions to Adult Physical Disability Services

Based on an extract from CareFirst 6 there are 122 young people aged 18-25 with an average spend of £51K per week or £2.659m per annum.

Further detailed work will need to be undertaken to clearly identify health and education expenditure over and above the social care expenditure set out above.

#### **4) The number of complaints that the County Council has had relating to transition each year over the last 3-5 years.**

Source: Customer Services Team (Children and Young People)

The Customer Service Team is not able to interrogate current recording systems to identify examples and data for the specific service requested. The information below has been compiled from a manual trawl of the hardcopy files from April 2009 and is therefore not guaranteed to be an exact record

2011-12	3 complaints (all Care Leavers)
2010-11	7 complaints (1 Children with Special Needs, 6 Care Leavers)
2009-10	5 complaints (2 Children with Special Needs, 3 Care Leavers)

Appendix 3 provides a synopsis of the complaints received.

#### **5) Correlation between personalised budgets and overall satisfaction with services**

See Appendix 1, which is an adult services summary report produced by the Performance Team.

#### **6) Information on the stability of placements for young people in transition.**

This information is not currently collected.

### **NI 62 - Stability of Placements - Number of Placements**

NI 62 measures the percentage of children in care at the year end who had 3 or more separate placements during the previous 12 months. This indicator includes children who move in and out of care during the year, if they are in care on the year-end date. Good performance is typified by a lower percentage. Optimum performance under the PAF framework - Band 5, "very good" - is for outturns less than 16.01%. The next banding is Band 2 - "ask questions about performance", covering outturns between 16.01%<20.0%.

The County Council outturn at 30 June 2011 is **16.3%** of children in care with 3 or more placements in the year. This is a rise (i.e. deterioration) from 15.8% at 31 March 2011 and means a drop from the top performance banding to band 2, "ask questions about performance".

Integrated Children's Services outturns are superior to the Devon average - 2.1% at 30 June 2011 (2 out of 95 CIC). The majority of young people in care with disabilities

Appendix 2 sets out three Case Studies based on young people who were in receipt of services at Residential Provider X..

### **7) Number of young people who go through the transitions process who are in employment at 25.**

This information is not currently collected. However, Adult Services track this data as part of NI146 but their age range is a little different they record 18-30.

*Source: Adult Services*

#### **March 2011 - cohort size 1,954**

90 4.62% working under 16 hours/week  
10 0.49% working over 16 hours/week  
87 4.45% doing voluntary work  
538 27.55% EET\*  
129 6.6% unknown  
1,100 56.3% unemployed or undisclosed

#### **August 2011 - cohort size 2,049**

139 6.79% working under 16 hours/week  
18 0.9% working over 16 hours/week  
591 28.85% EET\*  
68 3.32% unknown  
1,233 60.14% unemployed or undisclosed

\*EET = Employment, Education or Training

**Collated by:**

**Sarah Aggett, Programme Manager, Strategic Commissioning  
6 October 2011**

### Satisfaction levels for people who receive personal budgets/direct payments

All the data in this summary is taken from the results of the Adult Social Care Survey conducted in February 2011.

The extract below is taken from 2011 ASCS survey full report available on the source.

#### 3.2.2.1 3A Overall satisfaction of people who use services with their care and support (overarching measure)

This indicator measures the proportion of people who were extremely or very satisfied with the care and support they received (or very happy with the way staff help them for people with LD), and is taken from question 1.

The value of 3A for Devon is 64.06%.

There have been comparable questions in previous user surveys. In 2010 the % of people who were extremely or very satisfied with the most recent piece of equipment or adaptation was 77.40% and in 2009 the % of people who were extremely or very satisfied with the help they received from home care services in their home was 67.20%. The differences in satisfaction levels reported across the 3 user surveys could be due to the different services that the clients were receiving rather than reflecting a general change in satisfaction levels.

The satisfaction levels for different client groups and people receiving different services from the survey in 2011 is summarised below.

Group	3A
all	64.06%
18-64	60.56%
65+	66.54%
PD 18-64	70.21%
MH 18-64	43.40%
LD 18-64	64.47%
OP 65+	66.54%
in residential care	66.67%
in nursing care	50.00%
Living at home	63.67%
<b>Service</b>	
meals	51.43%
professional support	57.45%
day care	65.17%
personal budgets	65.63%
home care	67.54%
equipment	67.74%
direct payments	80.65%

Highest satisfaction levels are for people receiving direct payments and people age 18-64 with physical disabilities. Lowest levels of satisfaction are for people age 18-64 with mental health problems, people receiving meals and people in nursing care. The nursing care sample is very small (12) and may be too small act on.

**Actions:** The low levels of satisfaction for people receiving meals and adults with mental health needs are concerning. Follow up actions need to be taken to investigate the causes and rectify them, possibly using some of the respondents who volunteered for follow up work

It can be seen from the figures above that overall satisfaction levels are lower for age 18-64 (60.56%) than for 65+ (66.54%). However satisfaction levels are increased significantly when services are received via personal budget/direct payment as the table below illustrates -

age 18-64	extremely/very satisfied	all	%
Receiving Direct payments and/or personal budget	33	43	76.74%
Receiving Direct payments	23	28	82.14%
Receiving Personal Budget with no Direct Payments	10	15	66.67%
No personal budget/direct payment	76	137	55.47%
All 18-64	109	180	60.56%

The highest increase in satisfaction levels is when part or all of services are purchased using a Direct Payment.

There were only 19 respondents to the survey who are aged 18-24 which is too small a sample to draw conclusions, but once again indicates that using Direct Payments/Personal Budgets to manage services increases satisfaction levels.

age 18-24	extremely/very satisfied	Grand Total	%
Receiving Direct payments and/or personal budget	7	9	77.78%
Receiving Direct payments	6	8	75.00%
Receiving Personal Budget with no Direct Payments	1	1	100.00%
No personal budget/direct payment	7	10	70.00%
All 18-64	14	19	73.68%

## Appendix 3

### Devon Transitions Protocol for Young People with Special Needs

#### Transitions Stages

Year 8 12-13 years	
What should happen?	Who should do it?
<ul style="list-style-type: none"><li>• You should receive an Information Pack about Transition.</li><li>• Connexions, Health &amp; Social Services to be informed of statemented young people, including primary reason for SEN</li><li>• Connexions to be informed of young people on School Action and School Action Plus</li><li>• Preparation for year 9 Transition Review meeting is carried out. Good practice for these to be integrated with other statutory reviews (with permission of family)</li></ul>	<ul style="list-style-type: none"><li>• LEA – County Special Education Team (CSET)</li><li>• School</li><li>• Young person and family</li><li>• School</li><li>• Connexions</li><li>• JAT team member as appropriate</li><li>• Key worker if identified</li></ul>

Year 9 13-14 years	
What should happen?	Who should do it?
<ul style="list-style-type: none"> <li>• Arrangements will be made to hold a Transition Review meeting.</li>   <li>• Transition Review takes place. (Good practice for these to be integrated with other statutory reviews with permission of young person and family)</li>   <li>• Transition Plan drawn up.</li>   <li>• Procedure for ascertaining whether or not a child is disabled (under Section 5 of the 1986 Disabled Persons Act) will be carried out.</li>   <li>• Relevant adult services team to be informed where there is a strong possibility of significant input/funding packages from age 18</li>   <li>• Arrangements will be made to deliver what is in the Transition Plan</li> </ul>	<ul style="list-style-type: none"> <li>• School should consult parents as to other professionals involved and send out appropriate invitations. Minimum 2 months notice.</li> <li>• CSET will do this for young people educated other than at school</li>   <li>• Attended by: <ul style="list-style-type: none"> <li>○ Young person</li> <li>○ Parent/Carer</li> <li>○ School representative(s)</li> <li>○ JAT team member as appropriate</li> <li>○ Existing key worker if already identified</li> <li>○ Connexions personal adviser</li> <li>○ Other invitees identified by parents</li> </ul> </li>   <li>• Headteacher (if pupil at mainstream school) in consultation with Connexions service</li> <li>• LEA (if pupil attending non-maintained special school, independent school or being educated otherwise than at school.</li> <li>• The LEA for children who have statements of SEN.</li>   <li>• JAT or Care Manager/Practice Manager within District Social Services</li>   <li>• Named key worker identified to oversee delivery of Transition Plan</li> </ul>

Year 10 14-15 years	
What should happen?	Who should do it?
<ul style="list-style-type: none"> <li>• Arrangements will be made to hold an Annual Review meeting. Good practice for these to be integrated with other statutory reviews (with permission of young person and family)</li> <li>• Preparation for year 10 Review meeting is carried out.</li> <li>• Annual review of Transition Plan takes place, to include: <ul style="list-style-type: none"> <li>○ check on progress</li> <li>○ consideration of appropriate post-16 opportunities/options available</li> <li>○ benefit checks</li> <li>○ review of health needs</li> </ul> </li> <li>• Relevant adult services team informed where strong possibility of significant input/funding packages from age 18</li> </ul>	<ul style="list-style-type: none"> <li>• School. If integrated review, time allocation needs to reflect this</li> <li>• CSET for pupils educated out of school/non-maintained/independent schools</li> <li>• All involved</li> <li>• School</li> <li>• Connexions link PA</li> <li>• Other agencies/Organisations as appropriate</li> <li>• Finance and Benefits (FAB) team – keyworker to signpost</li> <li>• Health</li> <li>• JAT key-worker or Care Manager/Practice Manager within District Social Services</li> </ul>

Year 11 15-16 years	
What should happen?	Who should do it?
<ul style="list-style-type: none"> <li>• For children who do not have a statement of SEN: discussion should take place between parents and representatives from the agencies to decide if the child should have a formal Transition Plan drawn up.</li> <li>• For children who already have a Transition Plan and are part of the formal Transition process: Information to be given to parents/professionals prior to the Review meeting about: <ul style="list-style-type: none"> <li>○ The nature of the review</li> <li>○ longer term options</li> <li>○ funding arrangements</li> <li>○ purpose and process</li> <li>○ eligibility/Fair Access to Care (FAC)</li> <li>○ legal responsibilities</li> <li>○ direct payments and possible service options</li> </ul> </li> <li>• Preparation for year 11 Review will be carried out.</li> <li>• Preparatory work for assessment under the Learning &amp; Skills Act section 140 for any pupil planning to leave school at end of year 11 for further education / training / employment with training. Assessment must identify support needs and provision required to meet these.</li> <li>• Relevant agencies informed of annual review dates including the post-16 provider, if already identified. Good practice to integrate with other statutory reviews (with permission of young person and family)</li> </ul>	<ul style="list-style-type: none"> <li>• Parents and representatives from the agencies.</li> <li>• Key worker to co-ordinate the provision of information by the various agencies.</li> <li>• All involved</li> <li>• Connexions PA</li> <li>• School. If integrated review, time allocation needs to reflect this</li> <li>• CSET for pupils educated out of school/non-maintained/independent school</li> </ul>



<ul style="list-style-type: none"> <li>• Annual review of Transition Plan takes place, to include as appropriate: <ul style="list-style-type: none"> <li>○ check on progress</li> <li>○ choices – applications or funding applications</li> <li>○ transition to college/employment/day services</li> <li>○ benefit check (if not completed)</li> <li>○ consideration of long-term</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• School</li> <li>• Connexions PA</li> <li>• Keyworker/Connexions PA/Other agencies/organisations as appropriate</li> <li>• FAB Team/Welfare Rights</li> </ul>
<p style="text-align: center;">independence/housing</p>	<ul style="list-style-type: none"> <li>• Keyworker</li> </ul>
<ul style="list-style-type: none"> <li>• Core information and possible future needs passed on to adult services</li> <li>• If it appears that a young person might be eligible for adult services, then a "pre-referral" should be made to the appropriate adult services team so that they may consider appointing a shadow care manager</li> <li>• If leaving school, Section 140 assessment as above completed and passed on to post-16 provider and other relevant agencies with consent of young person and parents as appropriate.</li> <li>• Agree who co-ordinates next review on case-by-case basis.</li> <li>• Agree likelihood of future joint involvement/Connexions only support</li> </ul>	<ul style="list-style-type: none"> <li>• JAT Practice Manager (or equivalent)</li> <li>• Keyworker or JAT Practice Manager</li> <li>• Connexions PA</li> <li>• If the young person leaves school, key worker (in consultation with parents) is responsible for informing other agencies named in the Transition Plan of : <ul style="list-style-type: none"> <li>○ The new post-16 learning provider, and</li> <li>○ The co-ordinator of the next review.</li> </ul> </li> <li>• Connexions/JAT/Adult Team</li> </ul>

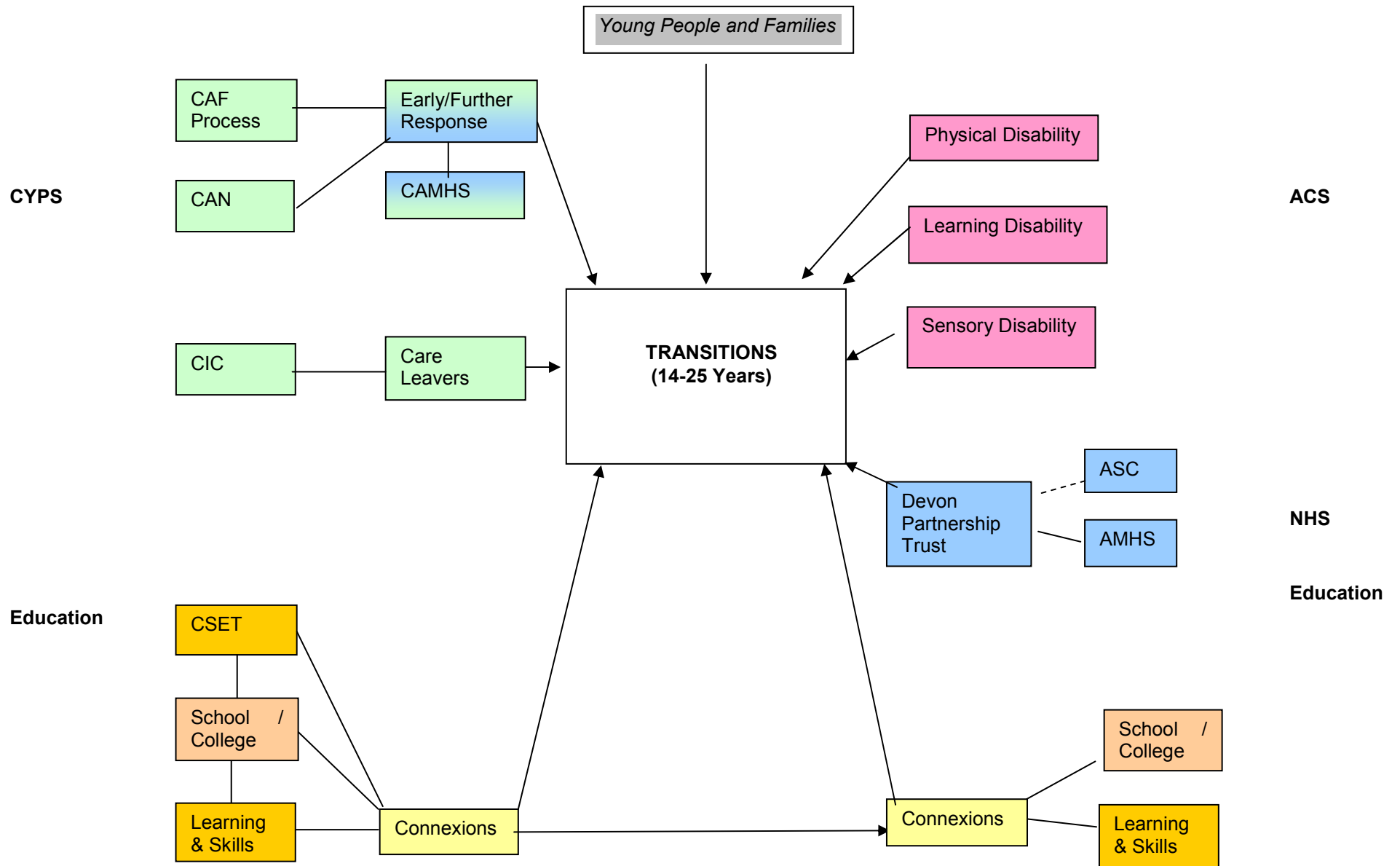
Year 12 16-17 years	
What should happen?	Who should do it?
<ul style="list-style-type: none"> <li>• Parents/professionals are informed of review. Information to be provided to parents and professionals prior to review:               <ul style="list-style-type: none"> <li>○ nature of review</li> <li>○ longer term options</li> <li>○ funding arrangement</li> <li>○ purpose and process</li> <li>○ eligibility/FAC</li> <li>○ legal responsibilities</li> <li>○ direct payments and possible service options</li> </ul> </li> <li>• Annual review meeting takes place to include:               <ul style="list-style-type: none"> <li>○ a review of progress</li> <li>○ for those identified as needing Adult Services, confirmation of who is the allocated "shadow" care manager</li> <li>○ identification of support for a move to college/training/employment</li> <li>○ benefits check if appropriate</li> <li>○ discussion of the longer involvement of Connexions</li> <li>○ confirmation of who is responsible for co-ordinating year 13 review</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Co-ordinator as agreed in Year 11 Transition Review meeting.</li> <li>• Keyworker</li>   <li>• All involved.</li> <li>• Appropriate Adult Team</li>   <li>• Welfare Rights and FAB Team if appropriate</li> </ul>

Year 13 17-18 years Final review for Phase 1	
What should happen?	Who should do it?
<ul style="list-style-type: none"> <li>• Review of Transition Plan – preparation, attendance, co-ordination and follow-up as before</li> <li>• Issues to be flagged up:               <ul style="list-style-type: none"> <li>○ review of progress to date</li> <li>○ finalise any arrangements for transfer to adult social care and/or health care</li> <li>○ decide if joint agency involvement will continue</li> <li>○ consider if a move into Phase 2 of the Transition process is appropriate.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• All involved</li> </ul>

#### Closure of Protocol

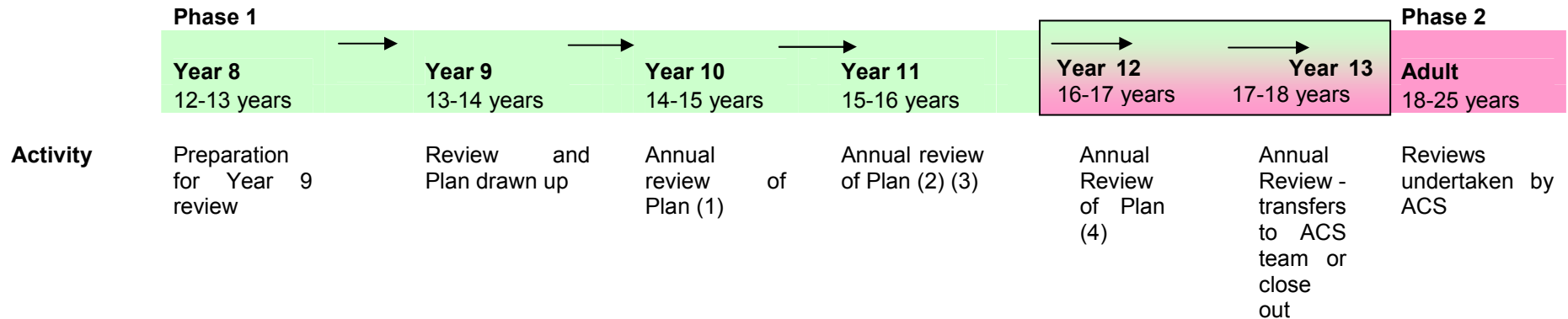
There should be continuing inter-agency reviews on an annual basis until the young person is settled in post16 education or training.

**Appendix 4 Transition to Adult Services - Interested Parties**



## Appendix 5

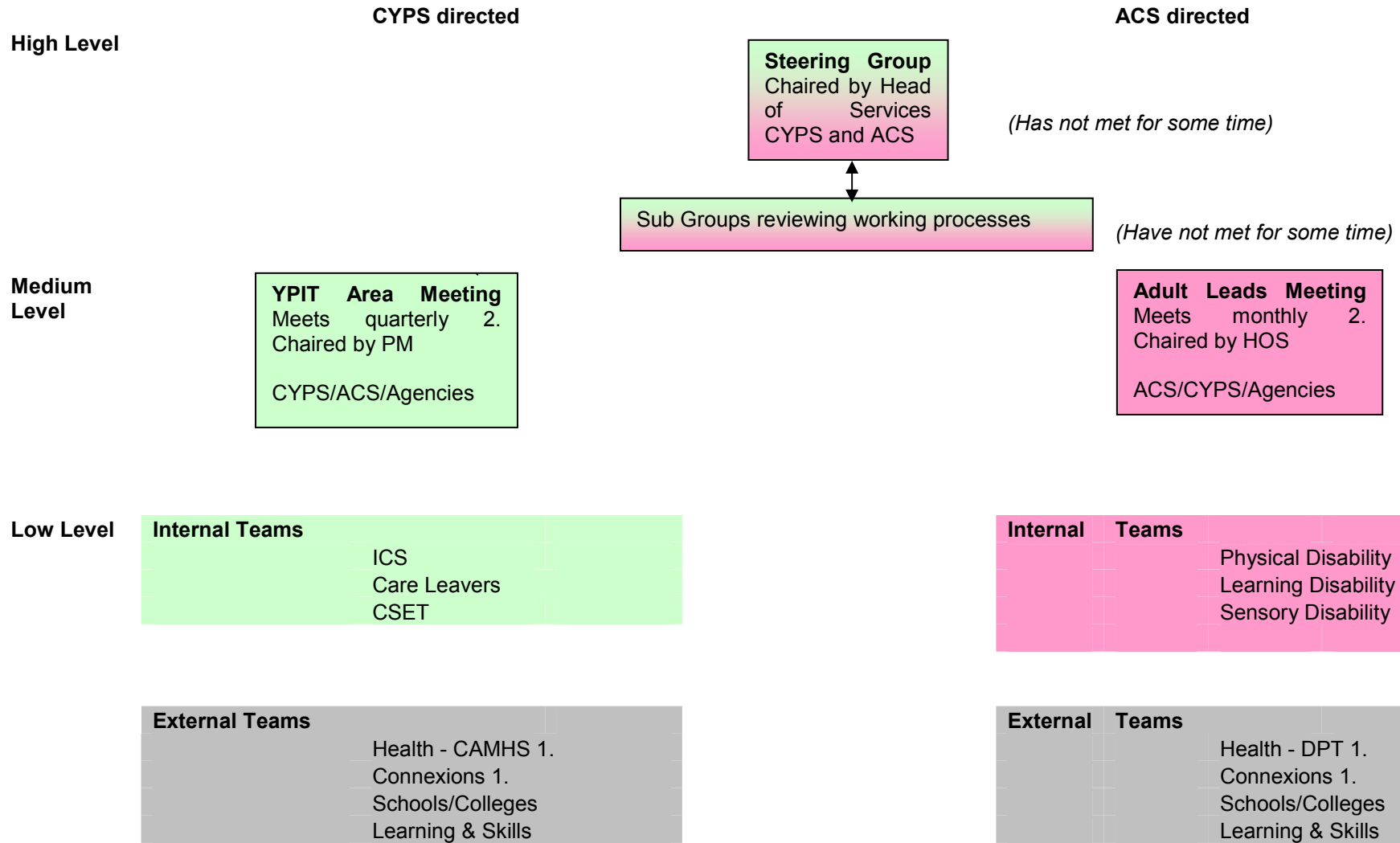
### Current Timelines - Transitions (Source Protocols)- High Level



1. **ACS should be advised if support required post 18. - Normally by way of YPIT list. ACS can be advised via School or College.**
2. **Learning and Skills involvement - YPLA funding may be assessed at this point post 16 by Connexions.**
3. **If likely to move to ACS then pre-referral needs to be undertaken.**
4. **Shadow key worker from ACS appointed if appropriate. This is the key time for ACS involvement prior to 18.**

**Appendix 5 Current Governance Arrangements**

**Appendix 8**



1. Reps from these agencies attend YPIT and Adult Leads
2. Use same spreadsheet as created by CYPS

## Appendix 7

### Task Group Activities

- A2.1 The first meeting of the Task Group took place on **4 July 2011**. The aim of this initial scoping meeting was to determine the focus for the investigation, gauge members' viewpoints and plan the next steps for the review.
- A2.2 On **27 July 2011**, the Task Group met with **Strategic Director People and** Head of Integrated Children's Services and Adult Care Management, People to further the scope the review.
- A2.3 On **5 September 2011** the Task Group received evidence from the Head of Social Care Commissioning, People; Operations Manager Care Leavers Service, People and a parent.
- A2.4 On **8 September 2011** the Task Group received evidence from the Head of Outcomes - Children with Additional Needs, People; Chief Executive, Young Devon; Workforce Development and Advocacy Manager, Young Devon and the Acting Local Services Delivery Manager for Devon, Careers South West.
- A2.5 On **19 September 2011** the Task Group received evidence from Head of 14+ Learning & Skills Strategic Team, People; Physical and Sensory Learning Disability, Programme Manager, People; Commander, Devon BCU, Devon and Cornwall Constabulary and the Youth Issues Manager, Devon and Cornwall Constabulary.
- A2.6 On **4 October 2011** the Task Group received evidence from Head of Ellen Tinkham Special School / FE teacher (with responsibility for transition); Head of Youth Offending Service; Head of Child & Adult Protection, People; Consultant Paediatrician, RD&E NHS Foundation Trust; Senior Youth Support Worker – Democracy, People and 3 young people from Children in Care Council.
- A2.7 On **13 October 2011** the Task Group received evidence from County Chair, Parent Carer Voice; Assistant Director - Learning Disability, People; Social Worker, People; Director of Operations, Devon Partnership NHS Trust and the Co-Managing Partner Adult Services Directorate, Devon Partnership NHS Trust.
- A2.8 On **16 November 2011** the Task Group discussed its findings and possible recommendations.

## Appendix 8

### Contributors / Representations to the Review

Witnesses to the review (in the order that they appeared before the Task Group)

<b>Witness</b>	<b>Position</b>	<b>Organisation</b>
Jennie Stephens	Strategic Director, People	Devon County Council
Sally Slade	Head of Integrated Children's Services and Adult Care Management, People	Devon County Council
Tim Golby	Head of Social Care Commissioning, People	Devon County Council
Margaret Ladbury	Chair, Parent Transition Group	Parent
Ian Stewart-Watson	Operations Manager Care Leavers Service, People	Devon County Council
John Shaw	Head of Outcomes - Children with Additional Needs, People	Devon County Council
Tim Tod	Chief Executive	Young Devon
Kate Sandel	Workforce Development and Advocacy Manager	Young Devon
Sue Wearne	Acting Local Services Delivery Manager for Devon	Careers South West
John Peart	Head of 14+ Learning & Skills Strategic Team, People	Devon County Council
Beryl Perrin	Physical and Sensory Learning Disability, Programme Manager, People	Devon County Council
Chief Superintendent Steve Swani	Commander, Devon BCU	Devon and Cornwall Constabulary
Sergeant Andy McClenaghan	Youth Issues Manager	Devon and Cornwall Constabulary
Jacqui Warne	Headteacher	Ellen Tinkham Special School
Emma Kenshole	FE teacher (with	Ellen Tinkham Special School



	responsibility for transition)	
Sue McGrath	Head of Youth Offending Service, People	Devon County Council
Rory McCallum	Head of Child & Adult Protection, People	Devon County Council
Dr Ron Smith	Consultant Paediatrician	RD&E NHS Foundation Trust
Liz Prangle	Senior Youth Support Worker–Democracy, People	Devon County Council
3 young people	Children in Care Council	
Jeannette Kemlo	County Chair	Parent Carer Voice
Carolyn Elliott	Assistant Director - Learning Disability, People	Devon County Council
Linda Bond	Social Worker, People	
Liz Davenport	Director of Operations	Devon Partnership NHS Trust
Tom Miller	Co-Managing Partner Adult Services Directorate	Devon Partnership NHS Trust

Written representations to the review (in the order that they were received)

<b>Witness</b>	<b>Position</b>	<b>Organisation</b>
Sarah O'Shea	Head of Safeguarding, Tutoring, Equality & Well-being	Exeter College
Devon Housing Options Partnership		

## Appendix 9

### Bibliography

- Devon Transitions Protocol for young people with special needs (Devon Learning Disability Partnership Board, Devon Children's Trust, Connexions, Youth Offending Team Chief Officers' Group, 2004)
- Getting it right for children and young people: overcoming cultural barriers in the NHS so as to meet their needs (Professor Sir Ian Kennedy, 2010)
- Healthcare Transitions: Into the unknown - A consultation with young people with long term health conditions and/or disabling conditions. (Young Devon, 2011)
- Integrated Commissioning Strategy for Transitions of Young People with Additional Needs in Devon 2008-2011(Devon County Council, 2008)
- Internal Audit Draft Report – Transition to Adult Services (Devon Audit Partnership, 2011)
- Making the cut: Planning transitions for care leavers in an age of austerity (National Care Advisory Service, 2011)
- Planning mental health services for young adults – improving transition (National Mental Health Development Unit and National CAMHS Support Service, 2011)
- Seen and Heard – Supporting vulnerable children in the youth justice system (Prison Reform Trust, 2010)
- Services for people with a learning disability (Health & Adults Services Scrutiny, Devon County Council, 2010)
- SEN and Disability Green Paper - Support and Aspiration: A New Approach To Special Educational Needs And Disability (Department for Education, 2011)
- Transition between children's and adult services at age 18: Final report (Community Services Scrutiny, Devon County Council, 2007)
- Transitions Report: A Report on the Experiences of Young People in their Transition to Further Education (Young Devon, 2011)