TRANSITION PROTOCOL – YOUNG PEOPLE WITH DISABILITIES

Introduction

The purpose of this protocol is to set out the agreed responsibilities of each group of professionals involved in the transition to adulthood process for young disabled people 14+ and to ensure involvement of all relevant agencies including the local authority, health, further education sector, and voluntary sector.

A definition of transition

Transition to adulthood is the process by which young disabled people aged 13-25 years receive the support they need to lead the life they outlined in their person centred plan.

The SEN Code of Practice describes this as the process which:

“draws together information from a range of individuals within and beyond the school in order to plan coherently with the young person for their transition to adult life”

The SEN Code of Practice states that a “transition plan must be prepared for all young people with a statement of special educational needs following the year 9 annual review. The aim of transition planning is to help the young person prepare for a successful transition to adult life”

(SEN Code of Practice – SEN toolkit Section 10)

Purpose of the protocol

This protocol is written for all Waltham Forest professionals working with 13-25 year olds who have a learning disability, physical and/or sensory impairment and/or an associated mental health need.

This protocol is intended to be a working document, which will inform the practice of those working with disabled young people going through the transition process. It highlights areas of good practice in line with current legislation.

The protocol will be of most interest / relevance to professionals working in the following services:
Social care including children with disabilities and leaving care and adult social care services;
SEN / LDD Services;
Children’s and adults finance;
Learning Disability Services;
Teachers working with disabled young people in schools
Waltham Forest Careers Service;
Health services professionals, including mental health;
College staff;
Staff working in related areas within the voluntary sector.

Good Practice
1. **Transition to Adulthood – Background**

   There are six established key prerequisites for successful transition planning:

   1). **There is a commitment**

   Children and young people with complex needs are given explicit priority by senior managers in children’s, and adult’s health and social care services and council members. This means priority for care management, service delivery and for capacity to ensure that services are provided in time.

   Commissioning, housing, schools, colleges and other services are required to prioritise their involvement in transition planning.

   2). **Young People and Families are fully involved in the process**

   Young people and their families are fully engaged in transition planning from Year 9.

   Young people and their families are also involved in strategic planning for transition.

   3). **Effective Strategic Planning and Commissioning**

   The planning and commissioning of Adult Social Services are informed by an analysis of transition needs of the cohort of young people from 14 onwards receiving support from Children’s Service and who will be requiring services from Adult Health and Social Care within five years.

   Strategies are underpinned by good financial planning.

   The range and quality of services commissioned and outcomes for young people are systematically monitored.

   4). **There is a multi-agency approach with good protocol systems and processes**

   All relevant transition services are actively engaged and giving support from 14 years onwards to young people and their families that focuses on transition planning.

   5). **There is a co-ordinated person-centred planning process**

   Person centred planning methods and processes are used to create integrated transition plans. Direct payments are promoted.

   The focus is on achieving outcomes, improving and supporting independence, and providing normal life opportunities.

   6). **Monitoring**

   There is regular follow-up to see that the plan remains appropriate and is
delivering outcomes the person sought.

2. Procedure

a). This good practice procedure:
   - demonstrates a commitment to joint working for children with complex needs
   - supports strategic planning and commissioning
   - is an incremental approach to multi-agency working/helping to understand the complexities of the transition processes

b). The day-to-day operational practices are described within this policy to minimise communication breakdown. Any difficulties arising will be discussed at the quarterly transition strategy meetings.

In addition monthly meetings have been identified with managers from children’s and adult services to ensure that there is close monitoring of individuals going through the transition process.

This agreement applies to:-

- Social workers within Children with Disabilities Team.
- Social worker within Adults with Learning Disabilities Team.
- Social worker within Leaving Care Team working with disabled children.
- Social workers in other Adult Service Team working with disabled young people
- Workers in the Careers Service
- Workers in SEN Team
- Health staff – eg therapy services, nursing and mental health

PROCESS 1: APPLIES TO CHILDREN SUPPORTED BY PARENTS WHO MAY/MAY NOT ACCESS SHORT BREAKS

STEP 1 INITIAL INFORMATION

The children with disabilities social care team give the transition worker a list of names of all children known to the team by year group from 13 years of age (year 9) to 18/19 years.

To be actioned by: Children with Disabilities Team (CWDT) Manager each quarter.

Named workers for each child will be identified within the transition team.

To be actioned by: The lead transition manager

If a family of a child are receiving short breaks as part of the support package the allocation of such resource will be based on assessment of level of needs.

To be actioned by: Care manager within the CWDT

STEP 2 PREPARATION FOR TRANSITION REVIEWS

SEN team send a list to all schools of children who are due to have an annual review this will highlight young people who require a person centred transition review in year 9.

SEN team send a list to the careers service of all year 9 young people who should
have a transition review at the beginning of each September. This will be shared as part of the bi-monthly Data Tracking meeting that has representation from the transition leads in adult care services, children’s services, SEN, careers, health and commissioning.

**To be actioned by: SEN Team Manager**

The children's transition worker with the finance workers in education and social care will provide information to the Data Tracking meeting on the level/type of resource provided by the children with disabilities team and education to the children and young people.

**To be actioned by: Children’s finance team**

**STEP 3 TRANSITION REVIEW**

A careers’ PA will attend the year 9 person centred transition reviews and where appropriate a transition worker will also attend. The transition plan will be shared with the transition workers in children and adult services.

These meetings may be held at a range of venues etc. The workers attending the meetings will request copies of the transition plan to be forwarded to them.

**To be actioned by: Careers Team Manager**

**STEP 4 TRANSITION PLAN**

Transition planning should be participative, holistic, supportive, evolving, inclusive, collaborative.

(SEN Code of Practice, 2001)

Person centred transition planning materials should be used. These have been developed to ensure that the above principles are followed.

If children with disabilities workers are not able to attend the review – the careers’ PA will send copies of the transition plan, to the worker.

**To be actioned by: Careers PAs**

**STEP 5 REVIEW OF TRANSITION PLAN**

Schools will send the SEN team the list of annual reviews each September and the SEN team manager will forward the transition review dates to careers, the transition team and the chair of the individual tracking meeting.

**To be actioned by: SEN Team Manager**

The transition workers/careers’ PA will have dates of the review meetings annually to ensure attendance and there is an update of the transition plan for each individual, this will be shared as part of the individual tracking meeting and will set priorities for attendance at school reviews.

**To be actioned by: Chair of individual tracking meeting**

Copies of the updated plan will be forwarded to the transition team manager who will ensure that they are given to the case worker in the relevant teams.

**To be actioned by: Transition Team Manager**

At year 11 parents of young people who are ‘transitioning’ will be invited to an information-giving session jointly run by children and adult services. Adult services will provide information to families of the range of services available to meet the needs.
This will ensure that families are aware of, the changes in entitlement to services once the person leaves school such the fair access to care eligibility criteria and the personalisation of services.

Whilst it will be targeted to families at year 11, other families may also join the information sessions if so desired.  
To be actioned by: Lead Manager for Transitions in Children & Adults Services

STEP 6 LEAVING SCHOOL

If a child should leave school, prior to the general leaving age for special school, the transition worker is notified and monitors these young people on the main transition list.  
To be actioned by: SEN officer and the chair of the individual tracking group

If there is likely to be an increase in the level of support required as a result of the person leaving the data tracking group is informed, this will ensure that any increases or changes in the projections relating to the level of cost and service provision can be taken in to account.  
To be actioned by: the young person's case worker who informs children's finance, who will then inform the data tracking group.

If a 'new' referral is identified, education, and the children with disabilities team will inform the transition workers in adult services. The children with disabilities team will need to carry out an assessment of the eligibility to receive services and will work jointly with the transition worker to ensure a clear transition plan is developed.  
To be actioned by: Children with disabilities team

STEP 7 IMPLEMENTING THE POST-SCHOOL SERVICE

By 17 years, an adult worker will be allocated who will work with the post 16 services, the children with disability service and careers to ensure that plans are in place prior to the person transferring. Careers will have identified post 16 educational options. Local education, employment and training options will be considered first.  
To be actioned by: Careers PA

If an out of borough educational placement is considered a joint decision between children and adult services will be made.  
To be actioned by: the individual tracking group and the specialist placements panel.

Any additional educational support and social care funding will be identified and fed in to the finance and data tracking meetings. Approval from adult social care will be needed.  
To be actioned by: the Case Manager following the decision made by the Chair of the Approval Validation Panel

If the children with disability team or leaving care team are involved with a young person, the allocated worker will summarise information they have on the needs of the young person at an early stage and share with their colleagues in adult services.
To be actioned by: Children with Disabilities and Leaving Care Team Managers

The adult team will then take this information into account within their assessment. The adult team will then be able to identify the level of support required from adult services and process with the personalisation assessment.  

To be actioned by: Adult Transition Team Manager

Information relating to future demands for adult services will be fed in to the financial planning process, ensuring that any projections are based on early and clear assessments of needs, it is acknowledge that there may be a change in the costing once an adult assessment has been carried out.  

To be actioned by: Data tracking group based on information from the Service Manager Adults and the responsible finance officer

YOUNG PEOPLE WITH A DISABILITY WITH SUBSTANCIAL HEALTH NEEDS

Children services will inform adult services of the young people who are receiving continuing care funding. An adult continuing health care screening assessment will be completed prior to the person transferring to adult services and a full continuing care assessment will be completed if someone is likely to meet the eligibility criteria for health funding.  

To be actioned by: allocated worker within the relevant responsible adult team.

Any projections relating to people likely to be entitled to continuing health care will be flagged with the health organisation.  

To be actioned by: Service Managers in the relevant adult teams

All young people with a learning disability will be entitled a health action plan as part of their transition plan.  

To be actioned by: the allocated transition worker

PROCESS 2: APPLIES TO CHILDREN WHO ARE ‘LOOKED AFTER’, (SECTION 20 OF THE CHILDRENS ACT 1989) WHO MEET THE CHILDREN WITH DISABILITIES TEAM CRITERIA

STEP 1 INITIAL INFORMATION

Adult social care will be notified of all of the ‘looked after’ children who are between the age of 13 to 16 years.  

To be actioned by: Looked After Children’s Team Manager

Case Management of ‘looked after’ children will be undertaken by the children’s services.  

To be actioned by: the looked after team or the children with disability team.

The transition worker will work with the allocated children’s worker to undertake transition planning, this may involve the children with disability team and/or the looked after team. Whilst the young person remains ‘looked after’, the transition pathway will be updated on a six monthly basis by the case holder in partnership with the allocated transition worker, and reviewed by the ‘looked after’ children independent reviewing team until the young person is 18 years old. The transition worker will be required to attend LAC reviews for young people aged 16-18 years.

It is crucial that safeguarding issues are highlighted and recorded to ensure that
information is transferred to the adult services.

To be actioned by: the children’s case worker

The transition worker should attend educational reviews for these young people.

Short breaks for these young people should be based on clear assessments of needs and should be clear with families that the provision of respite once the young person becomes 18 years could differ

To be actioned by: allocated worker within children’s social care

TRANSITION DUTIES FOR CARE LEAVERS

All care leavers with a disability who are subject to the provision and support of the Leaving Care Act 2000 will continue to be case managed by the 16 plus leaving care team. However the transition worker will have a responsibility to give advice and information relating to resources and support available to help the young person through the transition process. Dates of transfer of responsibility to adult services must be flagged up in the data and individual tracking meetings.

DUTY TO CARERS

Carers of young people with a disability will be offered a carers’ assessment/reassessment of their needs at the same time as the community care assessment for adult services is carried out, this is offered under the terms of the Carers Act.

To be actioned by: jointly by the allocated workers in children and adults social care

STEPS 2 - 7

The steps in the process are the same until the young person reaches 16 years.

Once 17 years of age, the leaving care team will also involve the adult social worker when allocated to provide continuity of care for the young person.

PROCESS 3: CHILDREN WITH A DISABILITY WHO ARE LOOKED AFTER AND WHOSE SOCIAL WORK NEEDS ARE NOT MET BY THE CHILDREN WITH DISABILITIES TEAM

STEP 1 INITIAL INFORMATION

The social worker notifies the data tracking group of young people known to them aged 13 – 17 years who are not known to the children with disabilities team but are in receipt of a social care service

To be actioned by: LAC and Community Safeguarding Team Managers

These children will have PEP reviews which are reviewed regularly.

To be actioned by: allocated social worker

STEP 2 PREPARATION FOR TRANSITION REVIEWS

The dates of the review meetings for these young people will be included in the list sent to Careers and shared as part of the bi-monthly data tracking meetings

To be actioned by: SEN Team Manager
The social worker for the child will provide information to the transition worker on the level/type of resource provided by the social care team to the children and young people prior to the 14 plus annual review. (Appendix 1)

The transition worker will ensure that this information is kept up to date and communicated through the main spreadsheet.

**To be actioned by: Transition worker via the data tracking team**

Information regarding parental status is essential to include to ensure that the right people obtain the right information to enable all to attend at appropriate times.

**To be actioned by: Allocated children’s social worker**

**STEP 3 TRANSITION REVIEW**

The transition worker, allocated children’s social worker and careers’ PA will attend transition review meetings. If the transition worker is unable to attend (It is recognised that this may not always be possible) the careers’ PA will ensure they are sent a copy of the transition plan.

The workers attending the meetings will request copies of the transition plan to be forwarded to them.

**To be actioned by: Careers Team Manager**

**STEP 4 TRANSITION PLAN**

The principles of any plan should be centred around the individual and should promote the principles of personalisation. It should take in to account the use of universal services and the eligibility for statutory services (FACS)

Signposting to universal services if a young person does not meet FACS eligibility needs to be carried out prior to transition.

**To be actioned by: Allocated children’s social worker with support from the transition worker**

Person centred materials have been developed which are a tool to ensure that the above principles are followed.

If children’s social workers are not able to attend the review – the transition worker/careers’ PA will send copies of the transition plan, to the worker

**STEP 5 REVIEW OF TRANSITION PLAN**

The transition worker adults and children’s social worker have dates of the review meetings annually to ensure attendance and update of the transition plan.

If attendance is difficult, copies of the updated plan will be forwarded to the social workers as necessary by the Careers PA.

At Year 11 – Parents/carers of young people who are ‘transitioning’ will be invited to an information-giving session. Adult services will provide information to families of the range of services available to meet the needs. This will be targeted to the families whose child is 16 years + and will take place as a minimum once per year. This will ensure that families are aware of the changes in entitlement to services.

Whilst it will be targeted to families at year 11, other families may also join the information if so desired.
To be actioned by: Lead Manager for Transitions in Children & Adults Services

STEP 6 LEAVING SCHOOL

If a child should leave school, prior to the general leaving age for that school, the data tracking group chair is notified and monitors these young people on a database.

To be actioned by: Allocated children’s social worker

If a ‘new’ referral is identified, social workers will inform the chair of the data tracking group. The adult social workers will need to carry out an assessment of the eligibility to receive services/carers assessment as required – FACS assessment.

STEP 7 At 17 years, the social worker from children’s’ services will meet with the adult social worker and summarise information for their colleagues in adult services identifying the needs of the child. (Appendix 2)

The adult team will then take this information into account when accessing the eligibility of the young person for services.

This summary of provision is provided before the 17th Birthday.

STEP 8 At 18 years of age the young person will transition to the adult team. The leaving care team will continue to be involved.

NB Information relating to safeguarding must be shared and recorded by children’s services at all stages during the transition process.
<table>
<thead>
<tr>
<th>Name</th>
<th>DOB</th>
<th>Year Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>School</td>
<td></td>
<td>Anticipated leaving date</td>
</tr>
<tr>
<td>Description of Disability</td>
<td>See attached matrix for disability from CWD</td>
<td></td>
</tr>
<tr>
<td>Date of last Annual Review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information on current level of resource provided</td>
<td>Direct payments</td>
<td>Childminding</td>
</tr>
<tr>
<td></td>
<td>Short breaks</td>
<td>Sessional support</td>
</tr>
<tr>
<td></td>
<td>HAMARA/MENCAP</td>
<td></td>
</tr>
<tr>
<td>Voice of the young person</td>
<td>Known information from the young person re transition</td>
<td></td>
</tr>
<tr>
<td>Preferred method of communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Voice of the family</td>
<td>Known information from the families re transition</td>
<td></td>
</tr>
<tr>
<td>---------------------</td>
<td>--------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Information provided to the family with regard to transition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual circumstances to be taken into account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transition Worker</td>
<td>Agreed lead professional between health and social care for the child</td>
<td></td>
</tr>
</tbody>
</table>
**THE NEEDS OF THE CHILD**

**Possible examples**

- Opportunities to have a short break from parents who are frequently challenged by the behaviour of their child and need time out to create a positive environment when the young person resides with them.

- Opportunities to have a short break from parents who are tired by the demands of providing full time nursing care

- Opportunities to go out in the community to enable family members to give quality time to all family members

- Opportunities to meet with elderly family relatives

- Opportunities to be with a group of peers with similar interests

- Opportunities to have access to a separate bedroom to remove self from demands of interaction

- Opportunities to be with others who are able to use the same communication systems