

Joint Health, Social Care and Education Transitions Strategy 2019-2022

About the strategy

This Joint Health, Social Care and Education Transitions Strategy has been written to help ensure that the staff working to support young people as they transition into adulthood are clear about the work which needs to be done to make sure young people have a good experience as they leave children's services and become adults. The strategy also provides information for young people, their parents/carers and any other people supporting young people (e.g. school staff) to understand what is being done in Leicester City to support young people as they transition into adulthood. Alongside the full strategy document, summaries targeted at a 'non-professional audience' are available.

The Joint Health, Social Care and Education Transitions Strategy outlines what our ambitions and aims are for making improvements to our support during the period of transition, details what we know about the young people who might need support when they transition and provides an overview of actions which need to be taken in order to improve the lives of young people and their families as they undergo transition to adulthood. The strategy will help make sure that all the important teams which support young people work well together. This is a working document and will adapt and change over its lifespan to reflect improvements and changes which have been made and any changes in the national and local picture. The strategy will be reviewed and updated by the Transitions Board on an annual basis.

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Summaries:

[Easy read summary](#)

[Overall summary](#)

Cohort specific summaries:

[Looked After Children summary](#)

[Young people with SEND summary](#)

[Adult services summary](#)

Introduction

For young people who receive support from children's health and social care services these services often end when they turn 18 and they become 'adults' (though some services continue until age 25). Some of these young people will then go on to receive support from adult health and social care services, but these are often different to the services young people had received before. Some young people will not receive adult services at all. This period of change as a young person enters adulthood is known as '**transition**'.

During the period of '**transition**' a young person will begin to get ready for leaving children's services and becoming an adult. There are four key areas which a young person should prepare for, these are:

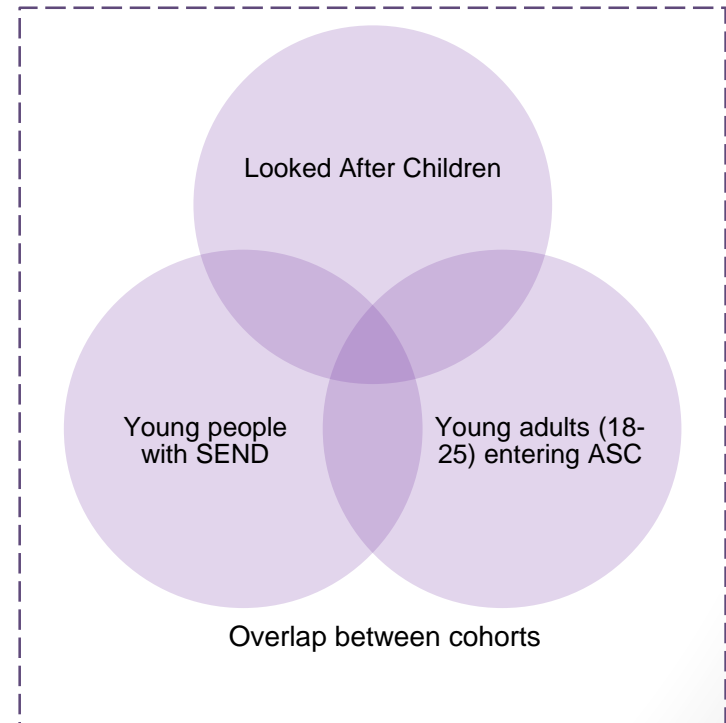
- Education and/or employment
- Independent living
- Friends, relationships and community
- Good health

Health and care professionals in Leicester agree that it is important to support young people with additional needs as they 'transition' into adulthood. Three cohorts of young people have been identified as particularly likely to need support.

These cohorts are:

- Young people who are looked after by the council
- Young people with Special Educational Needs and/or Disabilities (SEND)
- Young adults (18-25) with care needs who will receive support from Adult Social Care

Though three clear cohorts have been identified, it is recognised that there are overlaps between these groups (see diagram), for example a young person might be looked after and have a disability, and work will be mindful of this.



Ambition and aims

To support the ambition that 'young people with additional care and support needs are supported to be independent in adult life and achieve positive outcomes in terms of employment; independent living; friends, relationships & community; and good health' three key aims have been identified:

Integrated service

Young people with additional needs are supported by key agencies working in partnership. A robust framework for partnership working and information sharing ensures that relevant care and health partners understand their roles in the transition process and effectively use joint planning.

Effective planning

Young people with additional needs are at the centre of a transition planning process which starts at age 14 at the latest and allows for effective forward planning. This allows for services and budgets to be planned for the projected support needs of young people moving into adulthood.

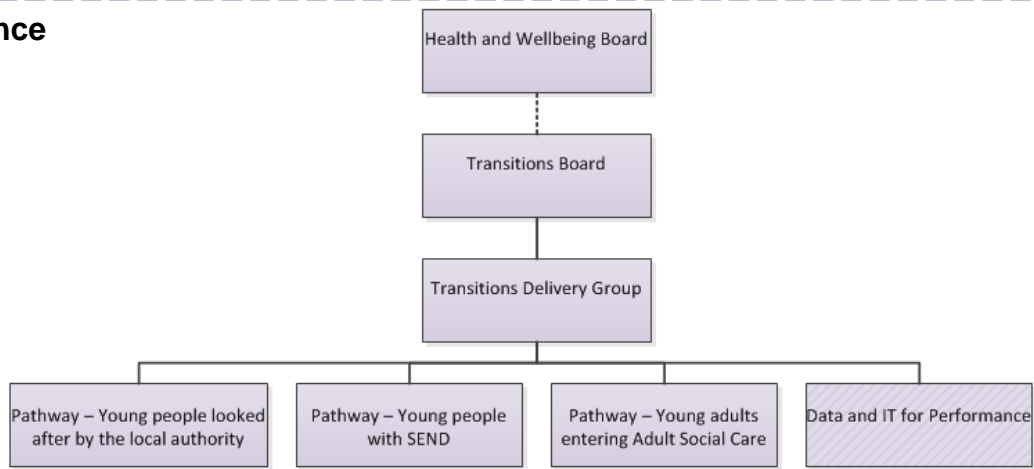
Informed choices

Young people with additional needs are given the support, encouragement and tools to make choices and take control of their lives. Their families and support networks have access to information and advice to ensure that all decision making is informed.

Note that in this context 'young people' can refer to people up to age 25 (who consider themselves to be and are considered to be adults)

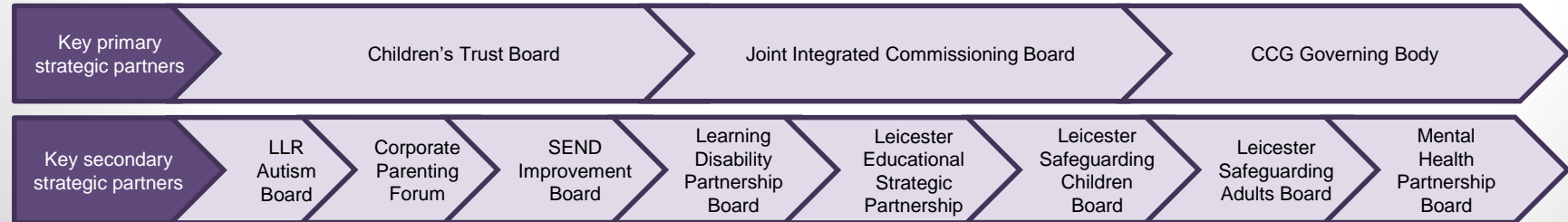
Governance

Transitions Governance



To support the delivery of actions outlined in the Joint Health, Social Care and Education Transitions Strategy and the underpinning delivery plan, three working groups will bring together relevant partners to address aspects of the transitions pathway relevant to each of the three identified cohorts. Additionally, a further working group will develop processes and procedures in the use of information and IT to a) support the transition of children and young people to adult services, and b) establish a performance framework that enables monitoring and quality assurance of the processes and supports the understanding of the impact of services individually and collectively to improve outcomes for service users. These work streams will be overseen by the Transitions Delivery Group, which brings together representatives from social care, education and health, and has responsibility for ensuring that work between the working groups is joined up and for monitoring risks and issues. The Transitions Delivery Group is accountable to the Transitions Board, the role of which is to provide scrutiny and challenge to the Transitions Delivery Group and offer assurance, while also ensuring that service user experience is the driver for improvements. The Transitions Board is to be accountable to the Health and Wellbeing Board. Additionally, the Transitions Board has a number of strategic partners across Leicester and more widely and will report in as appropriate.

Strategic Partners



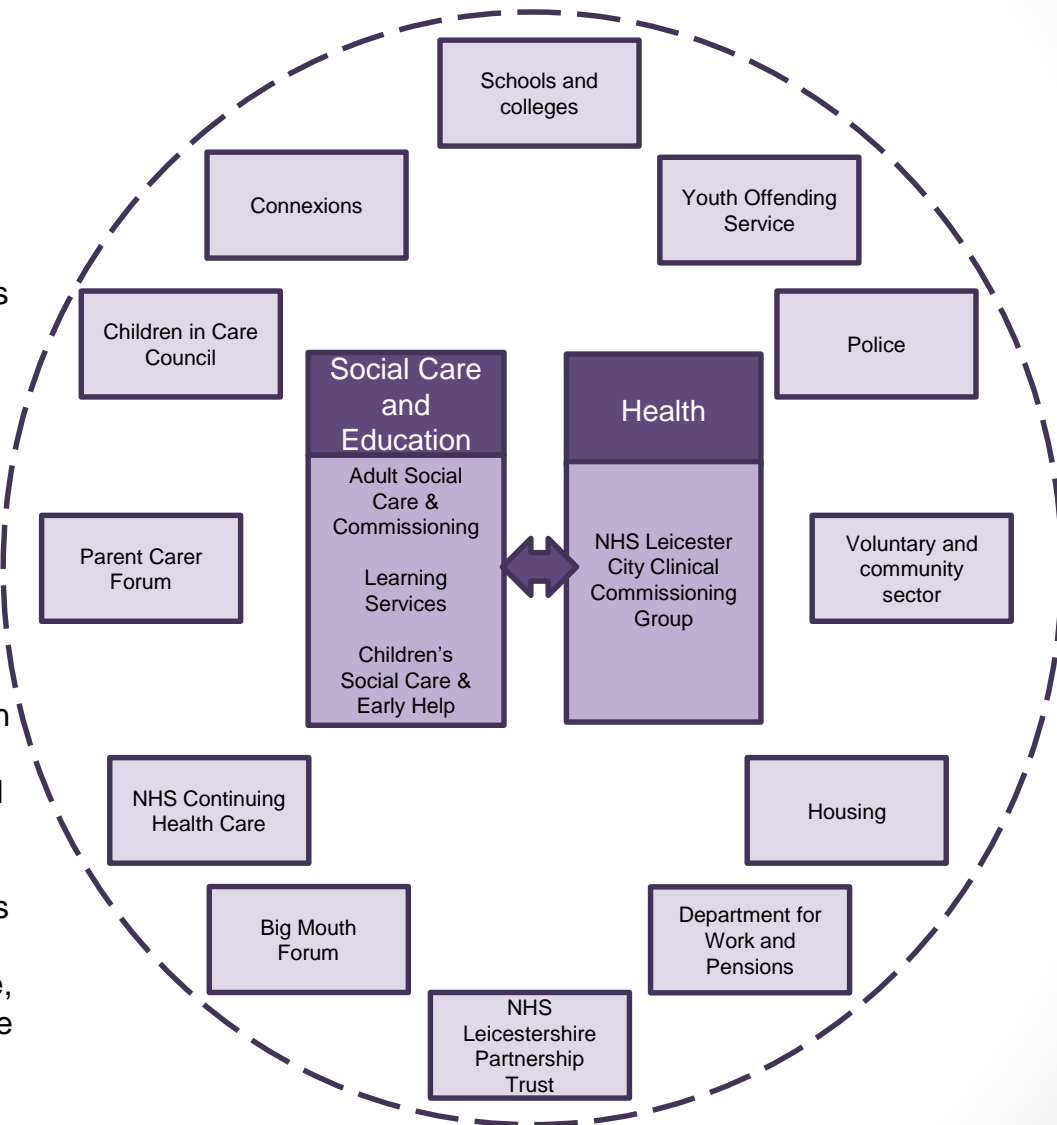
Partners

The governance and oversight of Leicester's Joint Health, Social Care and Education Transitions Strategy recognises that the delivery of our offer is not the responsibility of a single agency but is owned by all partners that work with children, young people and families.

To support the ambitions and aims laid out in this strategy a number of partners will be required to work in partnership. We ask that partners:

- Contribute towards achieving the aims,
- Accept challenges to their own service delivery practice by taking into consideration wider partnership needs,
- Work with mutual trust and combine expertise,
- Instil culture and practice of joint working.

While it is imperative that focus is given to the development of an effective relationship between the Social Care and Education department at Leicester City Council and Leicester City Clinical Commissioning Group, there are a number of other partners who will need to engage with the work in order to enable success. These partners include, but are not limited to, schools and colleges, the Youth Offending Service, the police, the voluntary and community sector, housing, the Department for Work and Pensions, the Big Mouth Forum, Leicestershire Partnership Trust (NHS), Continuing Health Care (NHS), the Parent Carer Forum, the Children in Care Council and Connexions.



Cohort 1: Looked After Children

Statutory responsibilities

Every 16 or 17 year old who has been looked after by a local authority for a period of 13 weeks or more since the age of 14 becomes entitled to leaving care provision and the local authority must make this support available until a care leaver turns 25. The support provided should focus on preparing the young person for life, ensuring they have the skills to support themselves and ultimately thrive. From age 16 looked after children should have a 'Pathway Plan' which outlines the services and support to be provided to help them reach their goals and achieve independence. The Pathway Plan should also ensure that arrangements are in place to enable children leaving care to continue to obtain the healthcare they need. To support this, the planning process should include a health perspective; the LAC Nursing Service should attend the pathway planning meetings and provide a summary of the child's health information which is obtained during regular review health assessments.

The local authority must also ensure that care leavers can access a personal advisor until they turn 25. The personal advisor is responsible for ensuring the young person is provided with the correct level of support. The personal advisor should provide advice, coordinate the provision of services and keep in touch with the young person.

Local picture

In Leicester there is an upward trend in the number of looked after children and this is rising more rapidly than comparable authorities. At the end of May 2018 there were 689 looked after children. The most prevalent reason for children being taken into care is neglect and abuse. Ofsted have recognised the complexity of the looked after children cohort, citing complexities such as mental health needs, risk of sexual exploitation, being in custody and recently becoming parents.

The LAC Nursing Service (NHS Leicestershire Partnership Trust) provides support to looked after children in Leicester until age 18. The service has identified a number of specific vulnerable groups including: young people at risk of child sexual exploitation, those in semi-supported living, unaccompanied asylum seeker children and high risk young people (including those misusing drugs and alcohol and those who are pregnant).

Key drivers

[Ofsted \(2017\)](#): "Joint transition planning to adult services between the 16-plus team, the disabled children's service and the transition team requires improvement. Managers across teams acknowledge that the process starts too late for some care leavers, often in their mid-17th year, giving them little time to prepare for and explore options about their future needs and aspirations".



Cohort 2: Young people with SEND

Statutory responsibilities

The local area has to identify and assess the special educational needs of children and young people. If a young person is assessed as requiring more support than their school can give them then a local authority must give them an Education, Health and Care (EHC) plan. This plan should identify the young person's educational, health and social needs and set out the additional support needed to meet their needs. A local area may continue to maintain an EHC plan until the end of the school year during which a young person turns 25 and must not stop an EHCP just because a young person is aged 19 or over.

Local picture

Young people with SEND may need extra support and adjustments to meet a particular need. 14.8% of the school population in Leicester has specialist education need and there are currently approximately 1800 young people aged 0-25 with EHC plans. Of those young people with statutory plans (EHC plans) approximately 50% are educated in specialist provision. In recent years there are increasing numbers of young people with a primary need of Autistic Spectrum Disorder; Social, Emotional & Mental Health; or Speech, Language and Communication Needs.

Key drivers

[Ofsted \(2017\)](#): Preparation into adulthood for some care leavers and disabled children is not happening early enough, so they cannot prepare for their future learning or employment opportunities until very late. There is a need to ensure that the transition arrangements from children's social care to adult services for young disabled children who have additional needs are both timely and effective.

[Ofsted \(2018\)](#): There is a lack of joint commissioning of services to support young peoples' health needs post-19. As a result, there are delays in the identification of young people's needs when they reach adulthood.

[ASCOF \(2017\)](#): Compared to other local authorities, Leicester City has a very low number of young people with learning disabilities in paid employment.

Peer review of SEND services: Reviewers commented that special schools report concerns over the local area's ability to effectively prepare young people with SEND for adulthood.

Self-Evaluation Framework: Leicester City Council's Self Evaluation recognises the need to improve transition arrangements between children and adult services as a key area for development.



Cohort 3: Adult services

Statutory responsibilities

If a child is likely to have social care needs when they turn 18 the local authority should complete an assessment of their needs. On the basis of this assessment, local authorities must suggest whether the young person is likely to have eligible needs for support from adult social care and advise on what can be done to meet eligible needs/what can be done to prevent or delay the development of additional needs. The local authority must continue to provide a young person with children's services until they reach a conclusion about their situation as an adult so that there is no gap in provision.

There are clear criteria set out in the Care Act (2014) which determine whether a young person is eligible for adult social care. Just because a young person has received support from children's services this does not mean they will be eligible for adult social care. A person is deemed to have eligible needs if they meet all of the following: i) they have care and support needs as a result of a physical or a mental condition, ii) because of those needs they cannot achieve two or more of the outcomes specified, iii) as a result there is a significant impact on their wellbeing.

People with complex primary health needs may be eligible for Continuing Care funding where needs cannot be met by specialist or universal services alone. Continuing Care is organised differently for children and young people than for adults so upon turning 18 young people have to be reassessed under the adult framework. This can impact the amount of funding that health will contribute, which in turn impacts the level of support families can expect from Adult Social Care.

Local picture

On average the transitions team currently assesses just over 40 young people per year, of whom approximately 80% are found to be eligible for support. The majority of young people who access adult social care through the transitions team have a primary support reason of learning disability. Not all young adults (18-30) make contact with adult social care through the transitions team; approximately 375 young people receive assessments from adult social care per year. Of these people just over 75% are found to be eligible for support. While learning disability remains the primary support reason for the majority of cases, mental health support and physical support are much more prevalent for young people who do not access the transitions team and are later referred to adult social care.

Key drivers

Making improvements to transitions is referred to explicitly in the [Adult Social Care strategic priorities](#), noting that "We [Adult Social Care] will continue the work with children's social care, education (SEN) and health partners to improve our support for young people and their families in transition into adulthood".

Key local
policies/strategies

Accommodation
Strategy

[Learning Disability
Strategy](#)

[Mental Health
Strategy](#)

[Autism
Strategy](#)

Carers Strategy

Key national
legislation/guidance

[Care Act 2014](#)

[NICE Guidelines](#)

[Transforming
Care](#)

[Mental Health
Act 1983](#)

[Mental Capacity Act
2005](#)

Key priorities (Page 1 of 3)

On the basis of what we know about each cohort, a number of key priorities have been identified which will help achieve the ambition and aims outlined in the strategy, these priorities are outlined in summary below and continued on pages 10 and 11. In order to demonstrate the relevance and significance of each action in the context of the strategy, the high level outline explicitly links each action with the aims it supports. This high level summary is underpinned by a detailed delivery plan which breaks down each priority into the supporting actions and identifies the person responsible, the deadline, necessary resources, critical messages and a quality measure for each action.

Aims		Integrated service	Effective planning	Informed choices
Cohort	Action			Link to aims
Young people looked after by the local authority	1.	Publish an accessible and comprehensive care leaver offer for children looked after and care leavers signposting young people and their support networks to key resources and information sources which will enable them to prepare for adulthood and independent living.		✓
	2.	Provide a programme of training and development for staff working with looked after children and care leavers to ensure that there is a reciprocal understanding of policy and practice in the Looked After Children and Transitions service areas.	✓	✓
	3.	Determine a 'roadmap' which clearly outlines the key processes in the period of transition from age 14, identifies the ages and stages at which these happen and notes the key roles and responsibilities for all those supporting the process.	✓	✓
	4.	Review the pathway planning process to support earlier identification of young people at risk of poor outcomes in adulthood.		✓
	5.	Collate and use data about looked after children and care leavers in order to effectively inform future commissioning.		✓

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
1. Publish the care leaver offer		
	2. Provide programme of training	
	3. Determine transitions roadmap	4. Amend process for earlier identification
		5. Data informed commissioning

Key priorities (Page 2 of 3)

Aims		Integrated service	Effective planning	Informed choices
Cohort	Action	Link to aims		
Young people with SEND	6. Determine a set of clear and concise definitions relating to need, eligibility and other key elements of the transitions process in order to underpin a common understanding of transitions processes and support planning between social care, education and health for young people with SEND.	✓	✓	
	7. Delineate the transitions process as it is at the moment for young people with SEND to ensure there is clarity on the existing process and to shape a baseline on which improvements can be made.		✓	✓
	8. Establish a regular programme of meetings between all professionals supporting young people with SEND (aged 14-25) to encourage information and intelligence sharing and facilitate discussion of cases in order to develop knowledge and understanding between relevant service areas.	✓	✓	✓
	9. Develop a system to inform the Transitions team of young people with SEND who they should be aware of and are likely to need involvement with in the future in order to inform planning and commissioning of adult social care.	✓	✓	
	10. Create individual 'road maps' centred on a young person's particular needs which outline all possible routes/outcomes for a young person from age 14, with reference to the probability of following each route so that young people and their support networks understand what the future might look like.		✓	✓

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
6. Determine set of definitions	7. Outline transitions process 'as is'	9. Gather intelligence for commissioning
	8. Information sharing and case discussions	10. Create individualised road maps

Key priorities (Page 3 of 3)

Aims	Integrated service	Effective planning	Informed choices
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Cohort	Action	Link to aims		
Young adults entering adult services	11. Engage with schools, colleges, parents, carers and young people in a timely and appropriate manner to ensure they have realistic expectations for independence and adulthood (relating particularly to finance and relationships).		✓	✓
	12. Communicate the legal landscape changes which occur once a young person turns 18 to schools, colleges, parents, carers and young people and make clear the implications this might have for young people's care.		✓	✓
	13. Complete an in-depth analysis of a sample of transitions case studies to identify good practice and any improvements required during the transitions process.		✓	
	14. Map and publicise a pathway which outlines access for young people to Adult Social Care support services and makes clear what is available from each service.		✓	✓
	15. Support effective joint working between Adult Social Care, Children's Services, health practitioners and staff in education settings.	✓	✓	
	16. Support young carers in line with the carers strategy as appropriate.			
	17. Outline a clear pathway for the transitions referral process set against a timeline.	✓	✓	✓
	18. Streamline IT systems to support the better use of data to inform future commissioning and the work of the Transitions team.		✓	

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
11. Engagement – independence and adulthood		
12. Engagement – legal changes		17. Improved pathway for transitions referrals
13. Analysis to identify good practice and improvements required		18. Streamline IT
	14. Outline support services	
	15. Support effective joint working	
	16. Support the carers strategy	

Useful links

National legislation and guidance

- [Care Act 2014](#)
- [Children \(Leaving Care\) Act 2000](#)
- [Children Act 1989](#)
- [Children and Families Act 2014](#)
- [Children and Social Work Act 2017](#)
- [Equality Act 2010](#)
- [Heath and Social Care Act 2012](#)
- [Homelessness Act 2002](#)
- [Homelessness Reduction Act 2017](#)
- [Mental Capacity Act 2005](#)
- [Mental Health Act 1983](#)
- [National Health Service Act 2006](#)
- [NICE Guidelines: Transition from children's to adults' services](#)
- [SEND code of practice: 0 to 25 years](#)
- [The Care Leavers \(England\) Regulations 2010](#)
- [Transforming Care for people with learning disabilities](#)

Local strategies and policies

- [Autism Strategy 2014 - 2019](#)
- [Corporate Parenting Strategy 2014 - 2016](#)
- [Homelessness Strategy 2018-2023](#)
- [Learning Disabilities Strategy 2015 - 2019](#)
- [Leicester City Council Adult Social Care strategic purposes and priorities](#)
- [Leicester's strategy for supporting children and young people with Special Educational Needs and Disabilities \(SEND\) 2017-2022](#)
- [Mental Health Strategy 2015 - 2019](#)
- [SEND Self Evaluation April 2018](#)

Ofsted feedback

- [Ofsted report – Inspection of services for children in need of help and protection, children looked after and care leavers July 2017](#)
- [Ofsted report – LA SEND inspection report April 2018](#)