** PROCEDURE **

YOU SHOULD ENSURE THAT:

- You read, understand and, where appropriate, act on this information
- All people in your workplace who need to know see this procedure
- This document, if printed off Intralink, is properly filed in a place to which all staff members in the workplace have access
- You are aware that only the version of the policy found on Intralink is guaranteed to be the most recent issue

Procedure Number: 51/07/CF

Title: CHILDREN WITH DISABILITIES - TRANSITION FROM CHILDHOOD TO ADULTHOOD

Date of Issue: 31/12/2007

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Sector: Children’s Social Care

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Procedures Cancelled: N/A

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Designation: Head of Safeguarding
Purpose
To make explicit a model of planning and review for young people with disabilities and to support them in the move from childhood to adulthood.

To address some of the difficulties encountered by young disabled people when they face moving from adolescence to adulthood, and to ensure the smooth transfer of responsibility from children's to adult services.

Scope
The policy relates to young disabled people between the ages of 14 to 25 who meet the eligibility criteria for CSC.

The policy will be adopted and operated by all managers and workers in both CSC and ASC.

This policy has been broadly agreed with Portsmouth City PCT and PCC Children, Families and Learning Directorate (CFL).

The policy will provide guidance on transitional arrangements for young people with complex or significant disabilities and will lead to inter-agency protocols.

Policy
This procedure is issued to ensure that procedures are clear and readily available in a standard format, thus assisting all staff within both CSC and ASC supporting a policy whereby staff have clear responsibilities and lines of accountability. This policy should be read in conjunction with the Transition Protocol (See Appendix 1)

References to legal, central Government and other external documents
- Children Act 1989 & 2004
- Carers & Disabled Children’s Act 2000
- National Assistance Act 1948
- The Chronically Sick and Disabled Persons Act 1970
- NHS and Community Care Act 1990
- Human Rights Act 1999
- Education Act 1996
- Learning and Skills Act 2000
- Disabled Persons (Services, Consultation and Representation) Act 1986
- Data Protection Act 1998
- ‘Valuing People’ White paper 2001
- Changing for Choice – The Social Services Department Service Plans for Adult with Learning Disabilities
- The Code of Practice – 1993
- Positive Partnerships
• Quality Protects Management Action Plan

• SSI Report 1994 Services to Disabled Children and their families, which among its recommendations included the following:
  • More Systematic approach to planning
  • Co-ordinated multi-agency planning Structure
  • Co-ordinated approach to information

• SSI Report 1995 Growing up and Moving On which recommended:
  • Cross-agency arrangements to collect, collate and share information
  • Clear procedures that ensure a smooth transfer from children's to adult services
  • Collaborative working between all agencies to assess the young person's needs
  • Involvement of the young people and their representatives

• SSI Report 1997 – Moving On Towards Independence, which whilst it had a major focus on housing issues gave the following key messages:
  • A link worker to co-ordinate the agencies during the transition process
  • Access to Community Care needs assessment
  • Understanding the respective roles of schools, colleges, careers etc
  • Information about FE opportunities
  • Collaborative working between all agencies

• Valuing People: A New Strategy for Learning Disability in the 21st Century 2001, DOH – Key principles within the report includes: rights; independence; choice; inclusion. One of the key objectives is to ensure community of care and support and equality of opportunity for young people and their families.

• Education (Special Educational Needs) (England) (Consolidation) Regulations - SI 2001/3455 substantially amended by SI 2006/3346

• Care Matters: Time for Change White Paper, 2007, DfES

• Special Educational Needs Code of Practice, 2001, DfES

• SEN Toolkit - Section 10: Transition Planning, 2001, DfES


• Future Positive - A Resource Guide for People Working with Disabled Care Leavers, 2006, DfES
Portsmouth City Council references etc

- Inter-agency Transition Protocol
- Children and Young Peoples Plan
- CSC Eligibility Criteria
- Children and Young Person’s Plan – Priority 3
- Portsmouth 8: Outcomes for Portsmouth children and young people
- Portsmouth Corporate Priorities
- Adult Services Commissioning Plan
- The Education Department's Policy Statement

Definitions/Abbreviations

- PCC - Portsmouth City Council
- ASC - Adults’ Social Care
- CSC - Children’s Social Care
- ECM - Every Child Matters

Delegation

The following definition is the legal framework within which local authorities work with disabled children. It comes from the Children Act 1989, and is based on a definition of disability from the 1933 National Assistance Act. The terminology used at the time is no longer appropriate and is based on a medical model of disability not used in this authority. The subsequent definition ‘social model of disability’ is the one adopted and pertinent to this policy. Refer to Procedure paragraph 1.1

A child or young person is disabled if he or she is blind, deaf or dumb or suffers from a mental disorder of any kind or is substantially and permanently handicapped by illness, injury or congenital deformity or disability. Par 33 17 (1) Children Act 1989.

Authority to vary procedure

Head of Safeguarding.
CHILDREN WITH DISABILITIES - TRANSITION FROM
CHILDHOOD TO ADULTHOOD

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1 Introduction

1.1 Social model of disability

The Social model of disability is based on the premise of a positive attitude to disability and centres on the young person's ability rather than disability. The definition of this is about the disadvantage or restriction of activity caused by a contemporary social organisation which takes little or no account of people who have impairments; and thus excludes them from participation in the mainstream of social activity. (UPIAS, 1976)

Children with disabilities are children first and as such are entitled to the same services and provisions as any other children.

Children with disabilities are children in need, for whom Social Services Departments should assess their needs and provide services to safeguard and promote their welfare. There is a continuing need for disability awareness training for all staff and service providers to prevent discrimination and oppression.

The collaboration between agencies and the co-ordination of services are of paramount importance to disabled young people as they leave childhood and legally become adults. This transition process is likely to be more difficult and last longer for young people with disabilities. It is crucial that all agencies work together to ensure that young people with disabilities get the services they are assessed as needing in order to make the successful transition into adulthood.

1.2 Key Principles, Aims and Objectives

- To acknowledge that transition can be a very difficult period for the young person and their family.
- To ensure a streamlined process that is clearly understood and leads to more effective outcomes for the young person and his/her family.
- To ensure access to information, so that young people and parents are clear about their rights and responsibilities, the processes involved and the options available.
- To provide an identified link worker for the young person and his/her carers.
- To ensure communication between the agencies involved.
- To ensure that there are arrangements for the planning of services to meet future need.
- To set a framework that maximises a young person's potential for independence.
- To ensure appropriate recording and dissemination of Assessments and Plans in accordance with SWIFT/ICS requirements.
1.3 ECM and Portsmouth 8 outcomes

1.3.1 We aim to ensure that children with disabilities gain maximum life chance benefits from educational opportunities, health and social care, while living with their families or other appropriate settings in the community where their assessed needs are adequately met and reviewed.

BY:

- Developing a mechanism to forward plan future demands on services, in partnership with ASC.

- Ensuring that parents and children with disabilities receive reliable, comprehensive and culturally appropriate information about services on a multi-agency basis from statutory and voluntary sectors.

- Maximising the number of children with disabilities and/or special educational needs who receive good quality, co-ordinated care and education in inclusive settings in their own communities.

1.3.2 As young people with disabilities move into adulthood, we aim to ensure continuity of care and support for the young person and their family, and to provide equality of opportunity in order to enable as many disabled young people as possible to participate in education, training or employment.

BY:

- Ensuring that all agencies work in partnership to provide a full service to the young people by identifying them, deploying sufficient staff with the right competencies and co-ordinating delivery of appropriate supports and opportunities.

- Ensuring effective links are in place within and between services for children and adults in both health and social care.

2. Eligibility criteria

The eligibility criteria for CSC are set out in a separate policy document which can be found on Intralink.

The criteria are designed to assist with the assessment of need, the planning and targeting of resources to those young people most in need of services. It focuses specifically on young people, aged 14 to 25 years, with severe learning and/or profound physical disabilities or sensory impairment, chronic health needs, and/or serious or severe mental health problems.

The above young people would meet the eligibility criteria for accessing ASC.

3. Transition

The time between a young person completing their education and moving towards more independent life is seen as the transition period.

The requirement under the Education Act 2001 Code of Practice, that a transition plan must be produced in the year following a young persons fourteenth birthday means that it is necessary to develop a multi-agency response to that young persons needs.
There are certain issues for all young people of this age as they move towards adulthood. Successful arrangements for transition will need to address issues of:

- Personal Development
- Self Advocacy
- Development of a positive self-image
- Awareness of the implications of any long-term health problems or disability
- Growth of personal autonomy and the acquisitions of independent living skills
- Careers education guidance
- Housing
- Leisure activities
- Transport
- Aids equipment and adaptations

It is good practice to take the young person’s views into account and record them. It is essential that an ‘advocate’ express the views of the young person if he/she is unable to express their views directly.

The CSC and ASC continues to have a key role in contributing to the transition plans through the annual education reviews until the young person leaves full time education.

4. Information for service planning

The CSC and ASC and/or other agencies involved in working with young people with disabilities must compile information, which will enable these young people to make informed choices. Account must also be taken of the young person's need to have information about local resources and services, and this information should be provided in a variety of formats. It is essential to involve young people and their carers in the assessment and service planning. Young people must be encouraged to contribute to their own transition plans and make positive decisions about their future. They must be given the opportunity to express their hopes and aspirations, and how these can be met.

During this process it is likely that the young person would be receiving a variety of services, even if the situation were seen as ‘inactive’ regarding allocation. This can include short breaks, voluntary sector services, the use of volunteers and outreach etc. The above services may contribute to the transition process. It is important that due consideration is given to information collected from all parties involved in working with the young person.

The transition process should also include an offer of a further carer's assessment to recognise their changing role of parents in the young person's life.
PCC is committed to the principles of Best Value and will work with service users and providers in the development of high quality and cost effective services for young people with disabilities.

5. **Process**
Transition planning for children with special educational needs formally commences at Year 9 (age 14 years). The Code of Practice on Special Educational Needs requires that the Education Department consult with CSC and other agencies, including relevant voluntary organisations.

The Special Educational Needs team focuses mainly on the educational transition arrangements for young people aged 14 to 19 years, while CSC and others are concerned with a wider age group and broader needs, typically from 14 to 25 years. Whilst separate transition policies have been developed for education and CSC, the Inter-agency Transitional Protocol clearly sets out the respective responsibilities of all agencies involved with young people in the transition from childhood to adulthood.

It is important that agreements are reached on the following:

- An integrated assessment, planning and review process (including time scales)
- the nominated key worker
- funding arrangements for out of City placements.

6. **Assessment and care planning**
Although the Special Educational Needs team notifies CSC about every young person who has a Statement of Special Educational Needs, many of these young people will not require help from CSC. In these situations, it would be appropriate for the Connexions service to take the lead in planning for transition.

In the case of young people with complex and significant disabilities, CSC will work jointly with agencies to develop a transition plan and to review that plan on an annual basis. Care planning for individual young people with profound health care needs may most appropriately be lead by Health.

6.1 **Assessment**
6.1.1 Assessment and care planning must be carried out in full partnership with young people and their families, with their wishes and feelings taken into account. Where the wishes and feelings of young people and their family conflict, the rights of young person to develop skills and to gain new experiences, with due regard to minimising and managing risks, will be the first consideration.

6.1.2 Assessment and care planning can be a form of intrusion. Irrespective of which agency takes the lead, they will ensure that:

- work is conducted in collaboration with young people and their families,
- use is made of existing assessments wherever possible
- agreement is obtained before new assessments are conducted
services from different agencies are planned and reviewed together, in a single process to avoid duplication.

6.1.3 The assessment process will address all the needs of the young person, paying particular attention to the strengths and potential of that young person and the barriers they may encounter when striving to achieve the normal objectives of moving into adulthood (i.e. employment, independence, relationships and accommodation). Needs arising from race, language, culture and religion also need to be considered and addressed.

6.1.4 As with all young people any assessment will need to address issues of risk, vulnerability and maturity.

6.2 Care planning

6.2.1 To address the needs identified in the multi-agency assessment, an inter-agency care plan will be developed. The planning process will involve the young person, parents and carers. Separate guidance is available on pathway plans.

6.2.2 Co-ordinated planning between CSC, ASC, the Primary Care Trust, Education, Connexions, and the Learning and Skills Council is essential to manage boundary responsibilities.

6.2.3 Agreements will be reached with the assistance of Connexions and Employment Services over employment and training opportunities. Local housing providers and health services must contribute to plans for independent accommodation. Agencies need to agree the equipment, adaptations and support that may be necessary to enable young person to access a service.

7. Funding

7.1 Funding for care packages must be achievable and realistic, and only agreed with the consent of the relevant budget holders. CSC Children Act budgets may be available, as well as limited aftercare funds. Young disabled people have entitlement to Disabled Living Allowance in their own right from age 16, and to community care monies at 18 years old. It may be appropriate for a young person to receive Direct Payments to purchase services for themselves.

7.2 Those involved in assessment and care planning for young people must establish the source of funding from Health, CSC, ASC, Education, LSC or voluntary organisations for any proposed services that will continue to be funded once the young person reaches the age of 18.

7.3 CSC need to ensure that transition plans are resourced using the 'standard financial rates' used in the adult sector and where possible a care management process is used. There will be necessary exceptions to this but these will have been identified beforehand through discussion between CSC and ASC.

7.4 Any aids or adaptations that have been identified by an assessment as being required by the young person before they reach adulthood will be funded by CSC.
8. **Reviews**
All transition plans for young people will be subject to inter-agency reviews held at least annually. Young people, their parents and carers will be supported to play a full part in reviews.

Where disabled young people are looked after, reviews will meet the criteria for looked after children reviews.

Co-operation with the Special Educational Needs team to contribute appropriately to annual reviews for young people with a Statement of Special Educational Needs will ensure young people and parents are not left unsupported. The process will diminish the need for crisis intervention and unplanned expenditure.

ASC team managers will be notified of a young person's reviews from year 9 (age 14) and informed in writing of the outcome. The team manager will be invited to contribute if there is a possibility of a future application for resources provided by ASC. The Service Managers of both CSC and ASC will ensure that team managers work co-operatively to ensure that the transition to adult services meets the needs of individual young people and their families.

9. **Autonomy**
In all assessment and care planning, clear objectives, which are geared to developing a young person's personal autonomy, will be included. Use will be made of advocacy and interpreting schemes where appropriate for young people.

Portsmouth City Council will take steps to ensure that buildings are made more easily accessible to people with disabilities.

Direct payment procedure ensures that the direct payments process is sensitive to transition arrangements, allowing continuity of payment, introduction or withdrawal dependant on the same criteria. Further information can be found in the separate policy for Direct Payments.

Applications to Portsmouth City Council for independent housing for 16/17 year olds will be considered.

10. **Community presence**
Where an out of city placement for a child is being considered, the issue of their return into the community will be actively considered at each review.

Young people will be encouraged to pursue further education opportunities with the Learning and Skills Council via the Connexions service.

11. **Service Monitoring**
The Register for Children with Disabilities will be used to seek feedback from young people about the services they receive and the needs they feel they have. The Senior Manager for Specialist Services’ Management Team will annually review services for this user group.

Complaints will be monitored to establish the frequency and nature of complaints from young disabled people and their carers.
APPENDIX 1

TRANSITION PROTOCOL: Key stages of transition from Children’s Social Care to Adult Social Care

At 14 years:
On a previously unknown case, the Intervention and Assessment team receives information about a young person with care needs that continue from Education.

Following this initial assessment, the young person may need a core assessment, involving other agencies as appropriate. If this is the case then the case will be transferred to the Children with Disabilities Team (CWDT) who will co-ordinate and undertake this assessment.

Where a child or young person already has an allocated worker and the relevant assessments have been undertaken the team manager for CWDT will pass information to ASC to ensure long term identification of young people needing transition services are identified, through regular bi-monthly meetings.

At 16 years:
CSC will notify the respective team in ASC of young people who have high level, or complex needs. The team managers will discuss each referral individually, and agree a joint plan for managing the care of that young person until they are 18 years of age.

A care manager from ASC will be nominated to work alongside the worker from CSC during this period. This could mean attendance at meetings such as reviews, or providing information about adult services. A copy of all reviews will be sent to the nominated care manager whether or not they attended.

At 18 years:
The care manager from ASC will take full case responsibility for the young person at an appropriate juncture around their 18th birthday. If the young person is to remain in full time education, the worker from CSC will continue until the end of that academic year. The agreed date for the transfer of the case from CSC to ASC will be made explicit in writing for each young person, their carers, and all relevant agencies as appropriate.

Throughout this process:
No decision will be taken to commit resources into adulthood without the agreement of the respective team manager in ASC.

Generally:
In order to ensure the smooth implementation of the Transition policy, the key personnel and contributors from CSC and ASC will meet every two months in order to monitor and review the progress of individual cases. These meetings will consider all young people open to the Children with Disabilities team, and will divide them into three cohort groups that represent the beginning, middle and end stages of the transition from childhood to adulthood.