





# Moving from Children's to Adults Services

### **Transition pathways**



# Education<sup>•</sup> Transitions Pathway

#### **AGE 14** (YEAR 9)

**EHCP will be amended in year 9,** in collaboration with the PFA team and Next Steps Advisors for specialist careers guidance, to incorporate the PFA outcomes (list). Other professionals will also prioritise this transitional year to update the advice contributing to the plan.

The **PfA Team** flag up young people who are likely to need/be eligible for support from Adult Social Care as adults, and they are placed on the tracker (N.B. see Richmond Social Care Pathway for more information). Regular tracking meetings take place between the PfA Team and Adult Social Care on a regular basis.

#### **AGE 15** (YEAR 10)

The net steps team will work with the school SENCO and Schools Career guidance Officers to to **support any developing action plans.** For those who are Educated Other than at School will be offered alternative arrangements.

Achieving for Children (AfC) careers advisors may attend the EHCP review for some learners. All Year 10 learners are signposted to further information on Next Steps.

#### AGE 16 (YEAR 11)

The PFA team will amend the EHC plans, for those moving between settings. Next Steps Careers Guidance will be offered to those who has been identified by their SENCOs or PFA Coordinator as needing additional support.

Year 11s might also find the Next Steps booklet useful.

**NB:** see the Richmond Social Care Pathway for more information.

In the autumn young people are asked for their post-16 education placement choices. AfC then "consult" with the relevant education placement. Funding applications for college places are **referred to AfC's Post-16 High Needs Funding Panel** - the PfA team attend this along with social care and health when appropriate.

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# Education<sup>•</sup> Transitions Pathway

#### **AGE 17** (YEAR 12)

The annual review will be used as a mechanism to facilitate joint planning with the family, particularly around **preparation for adulthood and transition to adult services.** Link to annual review guidance (year 9+).

If the YPs placement is at risk of breaking down, please contact the PFA team to discuss next steps.

#### **AGE 18** (YEAR 13)

**The annual review** will be used as a mechanism to facilitate joint planning with the family, particularly around preparation for adulthood and transition to adult services.

#### **Annual Review Guidance**

For those moving between provisions, e.g. vocational pathways, college, university, at the end of year 13, the **PFA team will liaise with the family to identify next steps** and amend/cease the plan as appropriate.

#### **AGE 19+** (YEAR 14+)

Support, including employability programmes and mentoring, is available to **post-19 learners transitioning** from school/college into work or further education. The vocational pathways coordinator can support young people to find jobs, apprenticeships etc.

The annual review will be used as a mechanism to facilitate joint planning with the family, particularly around preparation for adulthood and transition to adult services. There will be a particular focus on destination planning and identifying the steps to get there. Link to annual review guidance (year 9+)

For those moving between provisions, e.g. vocational pathways, college, university and employment, at the end of year 14, the PFA team will liaise with the family to identify next steps and amend/ cease the plan as appropriate .

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### Social Care<sup>•</sup> Transitions Pathway

#### **AGE 14** (YEAR 9)

Young people likely to need support as adults are flagged up by **Achieving for Children** (AfC), usually the Special Educational Needs Preparing for Adulthood Team (PfA), Children Looked After Team (CLA), Children With Disabilities Team (CWD), and Family Support Team (FST), and placed on the tracker at the regular tracking meetings.

#### **AGE 15** (YEAR 10)

**Tracking meetings continue** between AfC and Adult Social Care on a regular basis. Young people can be flagged and added at any point.

#### **AGE 16** (YEAR 11)

**Referrals,** in which information on diagnosis and support needs are contained, are made to Adult Social Care. This is logged on the tracker.

**N.B.** It may be appropriate for some people with complex needs to be referred at an earlier stage, this will be decided at the tracking meetings.

#### **AGE 17** (YEAR 12)

**Young people are allocated** to a transitions social worker in Adult Social Care in order to complete the Care Act Assessment.

**N.B.** It may be appropriate for some people with complex needs to be assessed at an earlier stage. This will be decided at the tracking meetings.

Young people with a learning, physical, or sensory disability are **assessed by the Learning Disability Transition Team (LDTT)**. Those with mental health needs are assessed directly by the Adult Mental Health Team.

A Care and Support Plan taking into account the young person's strengths, abilties and wishes and a funding application will be submitted to the Preparing for Adulthood Panel.

A mental capacity assessment will also be completed if there are concerns that the young person lacks capacity to make decisions about their care and support.

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### Social Care<sup>•</sup> Transitions Pathway

#### AGE 18 (YEAR 13)

New adult care and support package will be in place on the young person's 18th birthday, taking into account the young person's own strengths and abilities and their wishes for the future.

If there is a delay in the transition to the PfA Team, support from Children's Services should continue to ensure continuity. If the pathway is followed, this should not be necessary.

Once the care package is in place, young people with a physical or sensory disability will **transfer to the adult locality team;** those with a learning disability will remain with that team.

The transitions social workers can support young people with referrals to appropriate health services, e.g. Your Healthcare.

#### **AGE 25**

The young person's care and support plan will be kept under review to ensure the person is supported to live as independently as possible.

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MOVING FROM CHILDREN'S TO ADULTS SERVICES TRANSITION PROTOCOL

## Children Looked After Transitions Pathway

#### **AGE 14** (YEAR 9)

Young people likely to need support as adults are flagged up to **Adult Social Care** at the regular tracking meetings.

Permanency Planning meetings start from the point that a child/young person becomes looked after and continue until a permanency plan is achieved (before age 18).

**AGE 15** (YEAR 10)

All looked after young people, including those in the **Permanency Team (PT)**, are given information about the Leaving Care Team (LCT).

A Pathway Plan is completed with the young person by the allocated social worker.

#### **AGE 16** (YEAR 11)

Young people transfer to the LCT, organised at weekly transfer and allocation meetings. If a young person is in foster care then they (and their carer) should be given a copy of the Staying Put Policy and the Independent Living Skills Checklist.

Permanency Planning meetings continue and focus on the staying put arrangements, which includes Shared Lives. If the young person is not in foster care then permanency planning meetings will focus on gaining independent living skills in a residential or semi-independent home.

#### **AGE 17** (YEAR 12)

Between ages 16-18 young people are entitled to a **Pathway Plan** which is part of the six monthly CLA review process.

By age 17 and six months

A Personal Adviser (PA) is identified, who should attend the final CLA review.

#### **AGE 18** (YEAR 13)

Young person transfers to a PA who supports an application for Universal Credit 28 days prior to the 18th birthday.

#### **AGE 19+** (YEAR 14+)

After 18 and six months, **Pathway Plan reviews** will focus on independence and how the young person can step down into less supported accommodation in a manner that is appropriate for their care needs.

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# Health Transitions Pathway

#### **AGE 14** (YEAR 9)

Young people with complex health needs

are flagged up on the tracker as likely to need/be eligible for **adult Continuing Healthcare (CHC).** 

The **Clinical Commissioning Group (CCG)** and the Adult Learning Disability Transition Team (LDTT) meet every three months to track these young people.

If there is a delay in the transition to the PfA Team, support from Children's Services should continue to ensure continuity. If the pathway is followed, this should not be necessary.

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#### **AGE 15** (YEAR 10)

**Quarterly meetings** continue between the LDTT and CCG to track those with complex health needs and to ensure the needs are understood.

#### **AGE 16** (YEAR 11)

The relevant young people on the tracker are referred/ screened using the CHC Checklist.

**Child and Adolescent Mental Health Service (CAMHS)** and Children with Disabilities Team (or other relevant AfC Teams) will contribute to this process for the relevant young people as appropriate.

#### **AGE 17** (YEAR 12)

**Children with complex needs** who are receiving continuing care are referred to CHC by specialist health colleagues from the Children with Disabilities Team to assess eligibility and to ensure a seamless transfer of care for when they turn 18.

The Transitions Coordinator from CAMHS supports young people prior to turning 18 to ensure they will get the correct support from adults services.

For young people requiring ongoing support, whether due to mental health needs, a learning disability, an eating disorder or a personality disorder then a **CAMHS Care Coordinator** will begin discussions with the relevant adults team when the young person turns 17 and make referrals as needed. Referrals will include information on current medication, relevant health assessments, Education Health & Care Plans, risk assessments, and key contacts in the network.

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# Health Transitions Pathway

#### AGE 17 (YEAR 12) CONTINUED

Once referred and accepted young people will be allocated a lead healthcare professional from adult services to help facilitate the transition.

Active transition planning should start when the young person is 17 and 6 months. This should be agreed by CAMHS and the relevant Adult Social Care team. Young people supported for their learning disability will typically be referred to the appropriate learning disability service.

Some young people supported by CAMHS may not meet the criteria for adult services in such cases CAMHS may explore referrals to other organisations/ agencies, this work will take place when the young person is 17 and 6 months.

When young people are 17+ have first episode psychosis requiring a Care Programme Approach (CPA) to support their recovery, CAMHS may arrange handover of treatments to the adult early intervention service.

Young people who are in-patient on a CAMHS ward may need to **transition to an adult ward** when they turn 18, preparation for this should begin as early as possible in line with CPA policy. The relevant adult ward and/or community team will be invited to arrange transition.

#### **AGE 18** (YEAR 13)

**Your Healthcare (YHC)** Adult LD service and CHC will provide assessment and signposting as per needs.

YHC Adult LD Service – Referrals are accepted from any source including self-referrals and professional referrals.

**YHC enable and support access** to mainstream health services as well as providing specialist health interventions where necessary.

After assessment, a range of short-term interventions may be suggested to help people recover their skills and confidence after an episode of poor health, admission to hospital, or sudden deterioration in daily functioning.

MOVING FROM CHILDREN'S TO ADULTS SERVICES TRANSITION PROTOCOL

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### Transport Transitions Pathway

#### **AGE 14** (YEAR 9)

Young people likely to need transport support are flagged up on the transport tracker by **Achieving for Children (AfC)**.

**Travel training is available from AfC** to those with the potential to achieve independence. Travel training support is provided by Balance.

We expect young people to travel independently when they have the skills to do so and will support those who don't to develop them wherever possible.

#### AGE 15 (YEAR 10)

**Referrals to Balance** may still occur, and ongoing support with independent travel training can be provided to young people already referred to Balance.

We expect young people to travel independently when they have the skills to do so and will support those who don't to develop them wherever possible.

#### AGE 16 (YEAR 11)

A review is conducted of all young people in Year 11 and they will be asked to re-apply for travel support from AfC for Year 12. This is the opportunity to assess whether transport needs have changed based on independence and plans post-Year 11. This decision will be based on AfC's post-16 policy.

Young people with significant

**SEND** may continue to receive some form of travel assistance post-16, this will be based on AfC's post-16 policy. Travel assistance may take a different form than provided previously.

For those with significant SEND,

travel assistance provided by AfC may continue for the duration of their school or college placement.

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### Transport Transitions Pathway

#### AGE 17 (YEAR 12)

For those with significant SEND, **travel** assistance provided by AfC may continue for the duration of their school or college placement.

#### **AGE 18** (YEAR 13)

Young people eligible for support from Adult Social Care, who have had a change of placement and have moved on to college, may be able to get **travel support as part of their care package**, assuming they cannot do so independently. For more information, please see the Social Care Pathway. The aim will be to ensure young people can travel independently when they have the skills to do so and will support those who don't to develop them wherever possible.

#### **AGE 19+** (YEAR 14+)

For those with significant SEND, **travel assistance provided by AfC** may continue for the duration of their school or college placement.

Young people receiving support from Adult Social Care may be able to get travel support to go to college and access the community. There will be a continued effort to work with young people to make independent travel achievable.



