

Report of the Director of Health & Well Being to the meeting of Health and Social Care Overview and Scrutiny Committee to be held on 16 November 2017

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Subject:

A Progress Report from 27 October 2016 on the development of the integrated transitions service for young people with disabilities in Bradford.

Summary statement:

This report informs members of the progress of the project plan to develop an integrated service for 14-25 year old disabled young people and their families in Bradford

On 26th October 2016 members resolved –

- (1) That the progress made, and moves towards cultural change as part of the development of an integrated transition service for young people, be welcomed.
- (2) That a further report on the integrated transition service for young people be presented to the Health and Social Care Overview and Scrutiny Committee in 12 months, to include benchmarking information and appropriate indicators to demonstrate progress.

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Portfolio:

Health & Wellbeing

Overview & Scrutiny Area:

Adult & Social Care

1. SUMMARY

- 1.1. This report outlines progress to provide young people with disabilities and their families with improved information and support into adulthood and independence. It also describes the work done so far. Historically at a local and national level families have described their experience as one of fragmented services delivered by a number of organisations and with a lack of planning and co-ordination.
- 1.2 The present work has its origins the implementation of the Children & Families Act 2014. A key aspect of the Act was the objective of integrating assessment and provision of support via a single education health and care plan(EHC) for each child whose needs were eligible and subject to continuing eligibility an entitlement to an EHC up to age 25. The 14 to 25 offer was described within a framework of objectives set out as preparation for adulthood. The guidelines state that preparation for adulthood should begin within the EHC from academic Year 9 when students reach 14 and the integration of 14-25 services supports continuity of planning and support during this period as well as providing greater opportunity for a single professional to co-ordinate planning at this critical time of change.
- 1.3 The leadership of this transferred to Adult & Community Services in November 2015 when officers agreed A&CS would lead the development and bring together social care support to young disabled people from 14 up to 25. A project team with representation from the Clinical Commissioning Groups (CCG's), Local Authority (Children's and Adult Services), Bradford District Care Foundation Trust (BDCFT), Airedale Hospital Foundation Trust (AHfT) and Bradford Teaching Hospital Foundation Trust (BTHfT) is working together to deliver a more integrated approach with improved outcomes.

2. BACKGROUND

- 2.1. The challenges had been summarised well and often and are set out well in DoH guidance, "***A transition guide for all services - key information for professionals about the transition process for disabled young people***"; DoH; 2007. The guidance stated that transition from childhood to adulthood is difficult to get right because:
 - The process must be individual to the needs and aspirations of each young person.
 - It is a fluid process, spread out over a number of years.
 - Local options for disabled young people are often limited and support can be patchy and inconsistent.
 - These challenges are compounded by young people's moves from one service to another at different ages across social care, health and education services.
 - Each of these transitions is likely to occur independently of each other, which

means that disabled young people and their families may repeatedly have to deal with new agencies and professionals, retelling their story each time.

- Eligibility criteria are set by social care services to manage their limited resources and different eligibility criteria often apply when they move on to adult services.
- The process of bringing a group of appropriate people together to plan, agree and implement a local strategic transition protocol is in itself a challenging piece of work.

2.2. **Outcomes – Preparing for Adulthood.**The Preparing for Adulthood (PfA) programme was funded by the Department for Education as part of the delivery of the SEN and disability reforms

It aims to identify and deliver the necessary activities required to support young people with SEND into adulthood and identified four PfA life outcomes. These are:

- Higher education and or employment – this includes exploring different employment Paid employment (including self-employment)
- Good health
- Independent living (choice and control over your life and support and good housing options)
- Community inclusion

2.3. Elected members will appreciate a major challenge for the development of a transitions service is the cross boundary working and inter-dependency between the different services. The service is led by the Department of Health & Well Being, is located with staff from Children's Services and has strong links with health services and schools. Work has been progressing since 2014, initially under the direction of the programme to implement the SEND reforms of the Child & Family Act and guidance about transition planning/preparation for adulthood from both the Department for Education and Department for Health. and now also contributes to both the Journey to Excellence programme in Children's and the Transforming Care programme in Adults.

2.4. The care market is being developed to provide better choice, quality and value through the new commissioning frameworks for care services, the development of technology to keep people safe and independent, the online market place using the Connect for Support platform and the self-care developments to strengthen prevention. A provider event was held on 24th October, this was attended by 43 providers including new providers to this district. We will follow this up with more in-depth events discuss what we require from providers when supporting people with complex needs.

2.5. There are strong links with the Transforming Care Programme that is operating in parallel with this project. This is an all age change programme focusing on improving services for people with learning disabilities and/or autism, who display

behaviour that challenges, including those with a mental health condition. This will drive system-wide change and enable more people to live in the community, with the right support, and close to home. As part of Bradford's transforming care plan we are developing Core and Cluster housing models, working with our existing and new support providers to create a responsive market place with flexible clinical support. We are holding Care and Treatment Reviews (CTR's) for both people admitted to an Assessment and Treatment Unit to ensure a timely discharge plan is in place and for people who are at risk of admission to avoid where possible unnecessary admissions. The Transition Team are gaining knowledge and experience in CTR and CTER (Education). The team have now co-ordinated several CT(E)Rs, which have resulted in positive multi-disciplinary working to prevent young people being admitted to hospital.

- 2.6. The programme endorses the view that children, young people and adults with a learning disability and/or autism have the right to the same opportunities as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their own community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives.

3. REPORT ISSUES –

The service develops against the background of the dual demands of transformation and financial constraint common to all local agencies. Transitions operates within the Transformation & Change Programme of the Department of Health & Well Being, and has significant contributions to make to the joint response to the NHS England Transformation Programme for learning disability & autism and the continuing programme to deliver the SEND reforms reporting to the SEND & Behaviour Board.

3.1. Promoting Independence and Choice

A consistent element of the development of the service is the promotion of independence and choice. The Council's 'Home First – Our vision for wellbeing' published in January 2017 sets out our current ambition for this. To offer good information and advice and to build on people's natural networks of support. Where people have long term support needs to build on people's strengths and their own priorities rather than overly focusing on deficits and disability. Professionals are being encouraged to move away from traditional practice which at times resulted in a dependency culture with people being over protected and denied opportunities to take positive risks and maximise their independence and quality of life. Workforce development is supporting staff with the cultural changes needed to make this a reality.

3.2. Personal Budgets

Personal budgets are well established in the form of direct payments in adult and children's social care but take up has not been high and following work done with

'In Control' children's service have now launched a resource allocation system for children with disabilities and this is being rolled out to existing service users as well as being the default for new assessments. Personal health budgets have been piloted within continuing health care and it is understood there are plans to extend these. To extend take up adults have been preparing to launch another method of delivery in the form of Individual Service Funds where an intermediary can take on some of the more onerous aspects of a direct payment managing funds on behalf of individuals and allowing them to direct their own support and make changes in how they meet the agreed outcomes without having to refer back to the Council. The resource allocation system for adults will shortly be re-launched giving people a more reliable indicative budget to plan support with. Personal Health Budgets (PHB) are offered to people in receipt of continuing health care funding. There is now a lead within the CCG supporting the wider roll out of PHB and personal budgets across the LA and the CCG.

3.3. Decision Making and Panels.

Funding for individual plans is currently drawn from four sources, education, either adult or children's social care depending on age and the local CCG's again with two separate continuing health care frameworks for young people and for adults. Work continues to streamline decision making and make a co-ordinated decision about support plan and how that is resourced. A Joint Resource Panel (JRP) now finalises funding decisions and contribution to Education Health and Care (EHCP) plans and placements for Children and Young people up to the age of 18. Representatives from Children and Adults Social Care, Health/CHC and Education make joint decisions. We plan to include decisions to support EHCP's to for young people up to the age of 25.

3.4. Continuing Health Care.

Two Continuing Health Care frameworks represent a challenge as the framework for children is quite different to that for adults. There has to be a review of eligibility at 18 with a significant potential for changes in funding. Joint training with the CCG on the CHC framework has taken place in October 2017 and further days are planned in January 2018. This will support better joint working between health and social care staff, ensure young people's entitlement to this is maximised. Staff in the 14-25 team are better able to help people plan for and understand the changes as they develop their understanding of both frameworks. We will also be doing joint training on the Children's framework in 2018. There have also been discussions at a strategic level about pooling budgets to help manage the process in a more integrated way.

3.5. Education Health and Care Plans.

The Council is tasked with completing the migration of existing special needs statements to EHC's and whilst this is due to be completed by April 2018 there has also been a significant increase in new requests for an assessment under the new framework. It is also reviewing the experience so far of the new approach and how well it is achieving the aims of integrating planning and

support. There is potential to take the ambitions of a single plan for young people further as a result of this. A very recent SEND peer challenge has made recommendations that will support taking this forward. The Transition Team are engaging with Education to ensure the EHCP becomes a more comprehensive document with appropriate social care information included in young people's EHCP's. A recent audit identified improvements that could be made here.

We are currently waiting for feedback from the recent SEND Peer Challenge.

3.6. **Integration.**

Whilst this report focuses on the integration of the work of the children with complex health and adult social care transitions teams, the ambition is to develop from the current collaborative working in the hub at Margaret McMillan Towers a greater degree of integration in planning and delivering support to young people. Over half of the disabled young people seeking support as young adults will not receive support from children's social care. Often their needs have been met with support from family and their educational provision. There are several areas where more integrated ways of working have developed over the past 12 months.

In April the Transitions Service Manager took up post and the co-located social work staff from children's and adults were formally integrated into a single service under one management and the co-located Children's Complex Disability Team changed to work with the 0-14 age group. This allows continuity of support to young people from staff who are becoming increasingly knowledgeable about the worlds of children's and adult services. They are able to provide better advice and support to families at a key stage in life.

Increasing capacity in the team and integration have led to tangible benefits for young people who are engaged in planning for moving on from school and or children's social care much earlier. In the past young people often reached 18 before receiving any advice or assessment about eligibility for adult provision. Two years ago planning began with the annual review at 17 and subsequently extended to joint visits at 16. Since April this year the Transitions Team are supporting young people from 14 and where appropriate attending year nine school reviews. The Transitions Team have link workers with the special schools and FE Colleges, they visit and have regular contact with the SENCO's in these settings. We would like to provide a similar service to mainstream schools but we are not able to resource this, we are considering alternative solutions. The reestablishment of area SENCO meetings are an opportunity to forge stronger links with mainstream secondary schools in the district as it has proved difficult to maintain good communication across the secondary sector in the way that has been achieved with special schools and FE colleges.

3.7. **Outcomes – Preparing for Adulthood.**

From November 2017 there will be one duty/contact system for Transition's 14 to

25. They will work closely with Children's and Adults access points and agenda's for Early Intervention and Prevention models. The team are currently building up their knowledge and expertise across Children and Adults pathways and services so they are able to provide good advice and information, which will support young people and their carers whenever possible to self-service. This is supported by the continuing development of websites 'Local Offer' and 'Connect to Support'.

The Transitions Project Group, a multi-agency group are currently working on a joint multi agency protocol which will underpin a district wide approach to supporting young people with disabilities across Bradford. The Transitions Team have established good links with voluntary and independent sector providers who support young people. There is also a link worker from Children's 'Through Care' service based with the Transitions Team which helps with co-ordination of support for looked after children leaving care.

3.8. User Engagement and Co-production.

Co-production and User Engagement is an area of continuing development. The Parents Forum have continued to be heavily involved in the SEND reforms including the Transition's Project plans. They are also involved with the Professional's Preparing for Adulthood (PfA) event in December 2017. There is a multi-agency "Preparation for Adulthood" Event taking place on the 6th December 2017 which includes School and FE Education sectors, Public Health, Health Services including CAMHS/MH and Children and Adults Social Care. This is a preliminary to an event specifically aimed at YP and Parents/Carers is being planned for 2018; YP and parents will be involved in the planning and implementing of this. There are partnership boards for Autism, LD, Physical Disabilities/Sensory Needs and TCP all of which have service user representation. There are advocacy groups for young people and adults with disabilities that support individuals and groups to express their view and influence change. Children's social care also use View Point, an electronic survey that Children and Young People can use confidentially to report any concerns they have about their care and ideas they might have for different ways of being supported. The Local Offer website is interactive and provides feedback from families that is responded to by partners.

3.9. Further Progress on the development of the transitions (preparing for adulthood team14-25) service –

Transitions is broader than learning disability and so the work on the autism strategy is important in supporting the service as it features significantly in the needs of the young people supported. The recent SEND peer challenge has noted that further work is needed to ensure mental health services are alignment with the development of transition planning. This will be picked up with the recently appointed joint commissioner for mental health services.

The Transitions team are involved with several initiatives for new ways of working which support the Children and Adults agenda's for Early Intervention/Home First

etc. supporting people to be as independent as possible and less reliant on social care. The team are involved with the NDTI work on Reimagining Day's and Community Led Support. The team are about to become an early implementation site for using creative conversations to support best outcomes for YP and devising more streamlined/user friendly assessment/supporting planning documentation. This project will also include trialing new ways of working with young people leaving school and college to access employment. The team are also keen to further explore technical solutions that can enable YP to be self-sufficient in managing their own care/support needs e.g. My Health Tools, Brain In Hand type apps etc.

- 3.10 The CCG's fund transition nurses based within local care trusts to support young people as their health services change from the familiar arrangements of childhood into GP led adult health provision. This helps to ensure information is shared and care transfer planned so that support is provided with greater continuity. They also support the co-ordination of health support with that of education and social care. There are bi-monthly transitions meeting with operational managers from the different services. There are still some difficulties with this as each area of health are working with different age groups. Some are 16 to 21, others 17 to 19 or 17 to 22.
- 3.11 Information systems and shared records remains an area of challenge. The Transitions Team have all undertaken training on adult and children's record systems, SystemOne and LCS. We have established a new data group, that includes data performance officer's from Education, Children and Adult social care, we are currently working on creating a Transitions Dashboard which will give an overview of current activity and outcomes of the Transitions Team and also support medium and longer term future planning. The plan is to use the key Preparation for Adulthood principles. As stated previously this has a complexity about it due to all the services using different IT systems and there has been a significant reduction due to financial constraints in the performance team and the expertise and resource to support with this.
- 3.12 The Transitions Team has an on-going training and development plan. The team have all completed new IT system training, workers from Children's and Adults have completed presentations to the team covering key areas of policy and procedures from their initial service area. Several members of the team have attended Mental Capacity Act and Human Rights training. The team have also completed Children's Signs of Safety training and Adult Safeguarding briefings. We have established a buddy system so each team member has a buddy worker from their opposite area of expertise. The team have also established "Champion's" roles within the team, this role entails establishing contacts with relevant providers, keeping up to date with research, attending appropriate courses' and feeding information back in team meetings etc. there are currently 18 champion's within the team covering areas such as Autism, Parent/Carer's, School leaver's, Employment, accommodation and communication.

3.13 The Local Offer website and supporting alternative media will support public access to information for young people and their families. This will co-ordinate with the Connect for Support site which provides access to service provision for adults and is designed to become a market place for providers and customers with the goal of not only providing information but an on line market place for obtained support using a personal budget. Information about the new Transitions Team has been updated for The Local Offer and an initial meeting has taken place with JH to consider how this information is included on Connect to Support.

4. FINANCIAL & RESOURCE APPRAISAL

There are no financial proposals in this progress report for appraisal although a copy has been shared.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

The programme maintains a risk log for the change programme but there are no significant risks to highlight at this point.

6. LEGAL APPRAISAL

Copy supplied – no comments received.

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

The changes being made are designed to improve access to support for all and those who are disadvantaged are over represented in the user group.

7.2 SUSTAINABILITY IMPLICATIONS

None.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

None

7.4 COMMUNITY SAFETY IMPLICATIONS

None

7.5 HUMAN RIGHTS ACT

None

7.6 TRADE UNION

Consultation has taken place with Unions on the plans for reconfiguring the workforce. There are no reductions in jobs but some posts transfer between children's and adult services.

7.7 WARD IMPLICATIONS

All wards, as it is a District wide service.

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

This is a progress report.

10. RECOMMENDATIONS

That the Committee notes the progress made and the continuing plans for the development of an integrated transition service for young people.

11. APPENDICES

11.1 Transitions Team Data Information September 2017

11.2 Transitions Team Case Examples

12. BACKGROUND DOCUMENTS

None.