

Preparing

for Adulthood

Moving from Children's to Adult Services

What does it mean to me and my family?





This guide is here to help you as a family look at each stage of preparing for the transition into adult services. It is important to remember that moving into adulthood looks different for every young person and so there should never be a 'one-size fits all' approach to planning this. The transitions pathways you will see below give you a birds-eye view of what should happen at each stage of the transition planning process.

For many years it has been recognised by services across the health, education and social care systems that the earlier transition planning begins the smoother the journey will be for the young person and their family. Therefore, families are encouraged to begin conversations about what they would like for the future at an early age and sharing these with Professionals (where appropriate) along the way. Supported by information that has already been shared with them, Professionals should begin actively working with young people and their families to formally plan the young person's transition into adulthood from the age of 14.

Our main aim as parents, carers, family members and Professionals is to ensure that young people are able to become as independent as possible when they move into adulthood. Many young

people are able to do a lot of this thinking themselves and will enjoy considering and planning what they want to do next in their lives. Other young people will need additional support from family and Professionals to help develop this plan and make sure the transition into adulthood meets the needs and wishes of the young person.

If your child has additional needs, that mean they will likely require some extra support when they become an adult, it can be quite daunting to start thinking about what's out there that may be suitable for them to access. A good place to start is taking a look at **Your Circle** and seeing what is available locally to you and your child. **Your Circle** includes information on independently run community groups, weekly support sessions, Local Authority funded services, information on accessing employment and lots more.

Education Transition Pathway

Age 14 (Year 9)

Schools and colleges should provide students with independent careers advice (all year 8-13 pupils) and offer opportunities for taster sessions, work experience, mentoring and inspirational speakers/role models to help young people make informed decisions about their future aspirations. Parents and young person can find out more about what post-16 provision is available locally here: www.gloucestershire.gov.uk/education-and-learning/post-16/future-me and through the Gloucestershire Local Offer.

If your child has an EHC plan, their School will arrange the Annual Review of this, bringing together the young person, their parents, their EHC Co-ordinator and other professionals who may be involved in the young person's care, to ensure the Plan continues to meet the young person's needs. The EHCP Annual Review template will change from Year 9 and will incorporate Preparing for Adulthood (PfA) outcomes. PfA outcomes is a term used for the 4 key areas which are important to everyone as they grow up, these are: Education, training and employment, independent living, having friends and being part of your community and keeping healthy. Therefore, from Year 9 onwards the EHCP Review will take a particular focus on these outcomes and ensuring that appropriate support and provision is in place to enable the young person to prepare for adulthood.

There should also be a review of support in school for those with additional needs but no EHC Plan. This review may take place with the School SENCo and possibly also a Careers Adviser and/or Pastoral Lead.

If a young person has complex needs and is likely to be eligible for care services as an adult the Adult Social Care, Transitions Team will work closely with Schools and the Local Authority Education Team, to support their preparation for adulthood. Young people with the most complex needs will be raised with the Transition Team at a younger age so earlier planning can take place.



Age 15 (Year 10)

The educational setting will continue to provide careers guidance, information and advice. Preparing for adulthood is an ongoing process, and so the PfA outcomes identified in the Year 9 EHCP Review will be revisited. The Year 10 Annual Review is an opportunity for the young person to review their thoughts and views from last year and consider how they feel now. The annual review takes place every year with the young person until they leave an educational setting. Throughout the young person's transition, the annual review will help to ensure that the child's needs are identified, and relevant services put in place.

Support should continue to be reviewed for young people with additional needs but no EHC Plan. This review may take place with the School SENCo and possibly also a Careers Adviser and/or Pastoral Lead.

If the young person is likely to have a change of environment post-16 e.g. move from school to college, consider what might be needed for a smooth transition. In some complex cases e.g. where it may be requested the young person move to a post-16 residential setting, this will be discussed and reviewed by multi-agency professionals (e.g. Adult Social Care, Children's Social Worker and Healthcare Professionals), who will propose and agree a plan.

The Transition Team may be considered to work with young people who have a number of additional needs when going into adulthood. A Transition Team worker may attend the EHCP review to offer support and guidance on planning for the future.

Resources Available:

Local Offer • National Careers Advice • Gloucestershire 'What's Next?'

Age 16 (Year 11)

Jointly with the young person, the family decide the preferred post-16 option. Schools will offer advice and guidance to help young people decide what they want to do after they leave School. Young people will need to apply to their preferred college/sixth form/apprenticeship provision to secure their place for post-16.

At the Year 11 EHCP Annual Review, the previous plans are reviewed, and new outcomes are recorded on Preparing for Adulthood section as agreed by the young person and their family. These should reflect the young person's aspirations and plans.

If the young person has an EHCP it is expected that their preferred post-16 provision is shared prior to the review, so that the EHCP Co-ordinator can begin preparing details on the available options before the annual review date. The EHCP Service will identify placements that are able to deliver the provision outlined in the EHCP, which will support the young person to meet their outcomes. The EHCP Service will also consult with parents for their preference, to ensure the young person and their family are involved in this decision. Once the EHCP Co-ordinator has received responses and views from family, they will work jointly with Children's Social Care, Health Teams and the Transitions Team within Adult Social Care (where appropriate) to identify a placement which will meet the young person's needs. This process is completed by 31st March, at which point the young person will receive an amended EHCP naming their post- 16 provision.

If moving on from school to a post-16 placement all appropriate professionals/ organisations should be involved in this planning, this may include: Healthcare Professionals, Advocate, Adult Social Care Worker, Children's Social Worker.

If you think your child will need additional support in making the transition to post 16 education, you can refer to the [Transition Chat programme](#).

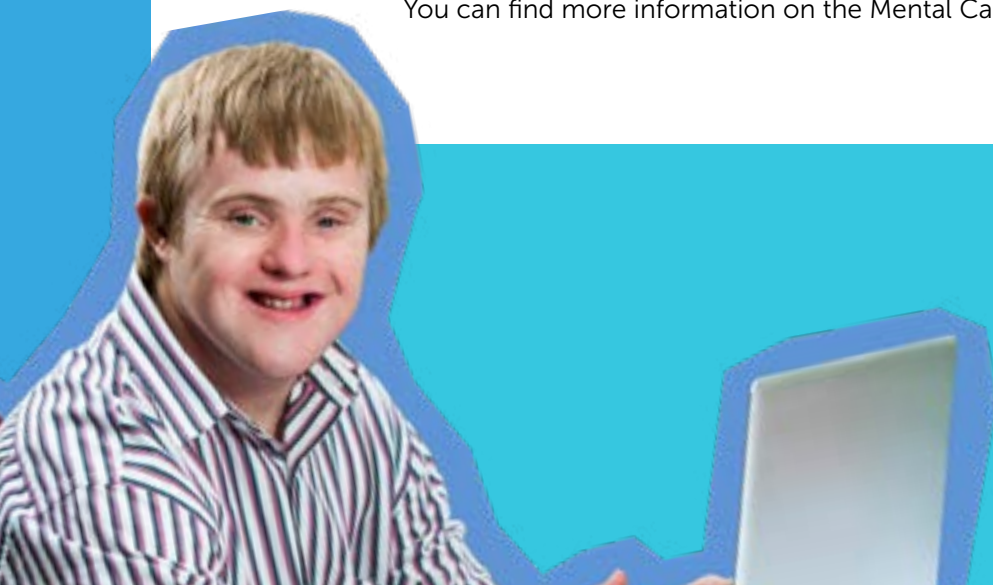
If the young person is not known to Children's Social Care and the young person has complex needs, the EHCP Co-ordinator will ensure that the Transitions Team are made aware of the young person.

Young people preparing to make their own decision:

When a young person reaches 16 they have the right to make their own decisions, wherever possible, in line with the Mental Capacity Act 2005. The young person's family should always support them in this process. This can feel like a significant change for families but beginning to make decisions about their own life is an important part of a young person becoming independent. Young people should be able to engage in the decision-making process with their education provider and, where they have an EHC plan, with the Local Authority and other agencies to share their views on where they want to go next.

For young people with disabilities they may need additional support with decision making. The Mental Capacity Act 2005 ensures that there are safe and regulated processes to support young people in making decisions as they get older, and having a trusted individual in place to make decisions in their 'best interest' if they are unable to do this themselves.

You can find more information on the Mental Capacity Act 2005 [here](#).



Age 17 (Year 12)

The young person's education setting jointly with health, education and social care professionals allocated to the young person, if applicable, should discuss potential post 18 options with the young person and their family. These conversations should take place regularly with plans, agreements and decisions being reflected in the annual review. Information should be shared between professionals to avoid duplication for the young person and their family.

All students aged 16 to 19 should follow a study programme that allows them to prepare for adulthood, stretches them and supports their progression into what they are looking to do next e.g. work or further study. For students who have an EHCP, this will remain in place until the special educational provision specified in the Plan is no longer required, as the Preparing for Adulthood Outcomes specified in the plan have been achieved, this can be up to the age of 25.

Young people with an EHC plan can undertake Supported Internships or Traineeships which aim to prepare them for employment or apprenticeships. In Gloucestershire the Forwards Team are available to support young people and their families to identify these options:
www.gloucestershire.gov.uk/forwards

Age 18 (Year 13)



The annual review should be used as facilitation for joint planning with the family, and professionals working with the young person, around preparation for adulthood and transition to adult services, if appropriate.

Personalised planning is in place which will consider:

- The content of any future study programme and how it will enable educational outcomes to be achieved
- Which professionals need to be involved in future planning

For young people leaving their current provision the EHCP Co-ordinator will liaise with the family to identify next steps for the young person. This will involve either amending or ceasing the EHC plan, dependent on what is most appropriate.

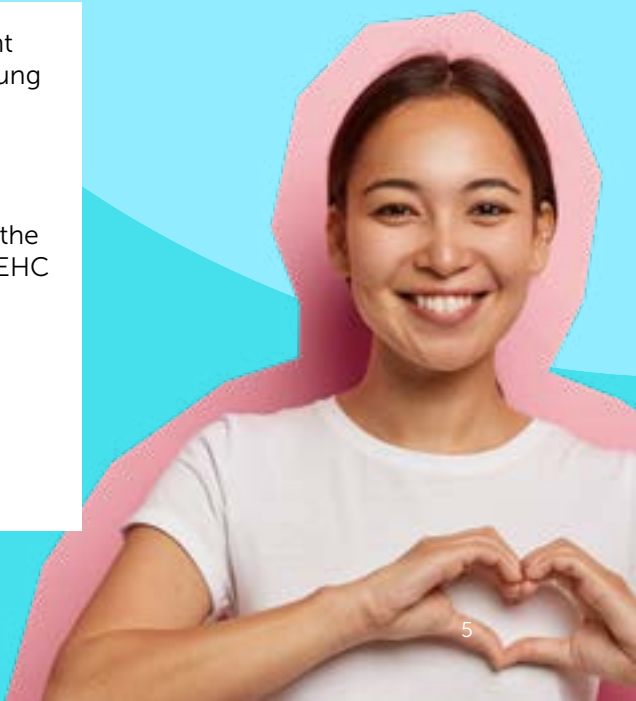
Age 19 onwards



The annual review will continue to be used for encouraging joint planning with the family, and professionals working with the young person, around preparation for adulthood and transition to adult services.

For young people leaving their current provision the EHCP Co-ordinator will liaise with the family to identify next steps for the young person. This will involve either amending or ceasing the EHC plan, dependent on what is most appropriate.

The EHCP Co-ordinator will ensure that all relevant services are actively involved in the annual review process. If the EHC plan is ceased, there will be sufficient exit plan arrangements are in place to secure appropriate provision and outcomes for the young person.



Social Care Transitions Pathway

Age 14 (Year 9)

Young people likely to need social care support as adults should be flagged on the transition tracker and discussed regularly at the Operational Transition Group. The purpose of having a regular review is to ensure that all steps to the young person's preparation to adulthood are completed in a timely way.

Children's Social Workers, will work with the Adult Social Care Transition Team and the EHCP Team to identify young people with EHCPs who are likely to require support from adult support services.

From age 14, young people with a learning disability are entitled to a free Annual Health Check with their GP, if they are on their GP LD Register.



Age 15 (Year 10)

Young people flagged on the transition tracker, as likely to require social care support in adulthood will continue to be reviewed by the Operational Transition Group. Regular reviews of these young people enable services to ensure that all steps to the young person's preparation to adulthood are completed in a timely way, if they are likely to go on to receive Adult Social Care support.

Children's Social Workers, will work with the Adult Social Care Transition Team and the EHCP Team to identify young people with EHCPs who are likely to require support from adult support services.

Age 17 (Year 12)

The Transitions Team use a conversational model to establish whether a Care Act assessment of a young person is appropriate. Using the conversational model the allocated Transitions Team Worker will discuss with the young person and their family, the young person's strengths, abilities and wishes. If the young person is eligible for Adult Social Care a care and support plan will be developed. Some young people and their families will need to pay a contribution towards their care package, this is a means tested process and is dependent upon the benefits the young person (or their family) are in receipt of.

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. 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 Operational Transition Group.



Age 16 (Year 11)

Adult Social Care Transitions Team may begin to attend EHCP reviews for young people identified on the Transitions Tracker from age 16, the Team also attend the Operational Transition Group. Any young people with SEND and complex needs who have not been identified on the Transition Tracker previously but likely need Social Care support in adulthood should be raised at the Operational Transition Meetings for discussion by Professionals. N.B. if the system is working correctly this should not happen.

Young people who do not require ongoing support from Adult Social Care but have been Children in Care or have additional Health Care Needs should follow the pathways on the pages below.



Age 18 (Year 13)

If the young person is open to Children's Social Care (including the Disabled Children and Young People's Service) the case will transfer across to the Transition Team when the young person turns 18.

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

The adult care and support package starts on the young person's 18 birthday, taking into account the young person's strengths, abilities and wishes and this is reviewed after six weeks and annually thereafter.

Children in Care Transition Pathway

Age 14 (Year 9)

The Children's Permanency Team or DCYPS (dependent on which Team the young person is open to) identify young people who are likely to need support from Adult Social Care (typically those with a disability or mental illness) and they are placed on the Transitions Tracker and will be discussed at the Transitions Operational Group.

Independent Reviewing Officer (IRO) also helps to identify young people with care and support needs.

From age 14, young people with a learning disability are entitled to a free Annual Health Check with their GP, if they are on their GP LD Register.



Age 15 (Year 10)

Young people are supported by their Social Worker to think about what they want for their future.



Age 16 (Year 11)

The first Pathway Plan should be completed before the young person turns 16 and three months. The young person's case will be presented to the 16+ Panel (an internal meeting to review transition plans for Children in Care) for the first time during the year the young person turns 16. The Panel will ensure that the plan is appropriate and reflects the young person's wishes.

A Leaving Care Worker can be allocated from the age of 16, this is someone who will support the young person until they 25. Once the Leaving Care Worker has been allocated, the first joint visit takes place between them and the current Social Worker. Dates of Child Looked After (CLA) Reviews and Personal Education Plan (PEP) meetings are shared.

Young people likely to require Adult Social Care support, should already be on the Transition Tracker, in keeping with the Social Care Pathway. The Transitions Team will begin attending EHCP reviews and be involved in Transition Planning conversations.



Age 17 (Year 12)

Young people's transition plans are presented at the 16+ Panel on a yearly basis, to track the transition planning. Pathway Plans are reviewed, and actions are agreed. Post 18 accommodation plans should be developing, including Staying Put arrangements.

For young people known to the Adult Social Care, Transition Team, they will assess whether the young person meets Care Act Eligibility and will begin making necessary plans from age 17 and a half. If the young person is eligible for Adult Social Care a care and support plan will be developed. Some young people and their families will need to pay a contribution towards their care package, this is a means tested process and is dependent upon the benefits the young person (or their family) is in receipt of.



Age 18 (Year 13)

Social Care Managers will review Transition Plans and ensure that everything is in place prior to the young person turning 18. Young person will transfer to the Leaving Care Team for ongoing support.

The care package will commence for young people eligible for support from Adult Social Care under the Care Act.



Age 19-25

Leaving Care Workers continue to support the young person as much or as little as they need until the age of 25. The Leaving Care Team support the Young People to be as independent as possible.

Resources Available:
Care Leavers Offer

Healthcare Transition Pathway

Age 14 (Year 9)

Young people with long term health conditions generally have their care overseen by paediatric services in NHS Gloucestershire Hospital NHS Foundation Trust (GHNHSFT) and may also receive support from services in Gloucestershire Health and Care NHS Foundation Trust (GHCNHSFT) for example, Speech and Language Therapy or Physiotherapy. Young people will be seen regularly and monitored by the appropriate service. The young person's GP will also regularly review the young person's health and wellbeing.

Where young people are eligible for Children's Continuing Care, they will be highlighted to the Adult Continuing Healthcare (CHC) Team, for awareness. An update is sent on a monthly basis to Adult CHC. These young people will be on the Transition Tracker.

From age 14, young people with a learning disability are entitled to a free Annual Health Check with their GP, if they are on the GP LD Register.

Age 15 (Year 10)



Where there is a long term health condition the young person will continue to be regularly seen and monitored by the Paediatric Service and their GP.

As a young person gets older they will start to manage more of their condition by themselves, taking on more responsibility of things like managing their medication and booking their appointments.

Age 16 (Year 11)



In some cases, young people will move from paediatric services to adult services within GHNHSFT at the age on 16. Each speciality is slightly different however the young person will always be offered the opportunity to meet their new adult care team with a Professional that has been part of their team in Paediatrics.

Once a young person is aware of who will be taking over their care in adulthood, it can be helpful to book an appointment with them when they are feeling well to identify the concerns and share how things feel when they are unwell.

If the young person has a complex health condition and/or is neurodisabled then their pathway into adult services may be very different and will be individual to their specific needs. The young person's specialist team in Paediatrics will inform them and their family of who will be managing their care in adulthood and putting a plan in place to support that transition.

The relevant young people on the transition tracker are screened using the CHC Checklist. Child and Adolescent Mental Health Service (CAMHS) Learning Disability (LD) Team will contribute to this process for the relevant young people.



Young people preparing to make their own decision:

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For young people with disabilities they may need additional support with decision making. The Mental Capacity Act 2005 ensures that there are safe and regulated processes to support young people in making decisions as they get older, and having a trusted individual in place to make decisions in their 'best interest' if they are unable to do this themselves. You can find more information on the Mental Capacity Act 2005 [here](#).

Age 17 (Year 12)

Where the young person has a long-term health condition, if they haven't already moved, the Specialist Paediatric service will refer them to the appropriate adult counterpart when the young person is 17 and a half, where appropriate. In many cases, health conditions will be managed by the GP once a young person reaches adulthood and so information from the paediatric service is transferred to them. Although the GP is looking after the young person overall there may be times when they need to attend hospital or see a specialist service. The GP can access these services and can also ask for Advice and Guidance from specialists in the hospital if they need to.

Once a young person is aware of who will be taking over their care in adulthood, it can be helpful to book an appointment with them when they are feeling well to identify the concerns and share how things feel when they are unwell. If a young person is in hospital for any reason prior to their 18th birthday, their healthcare team should work flexibly with them to ensure you are on the most suitable ward to meet their needs e.g. whether that is the Paediatric Unit or an Adult ward.

Young people with a positive CHC Checklist will have a full assessment to determine eligibility in principle (because they will not yet be 18). For those eligible, needs will be assessed, and care commissioned in time for their 18th birthday. The young person's lead professional will support Adult CHC prior to turning 18 to ensure they will get the correct support from adult services.

For young people requiring ongoing support, whether due to mental health needs, a learning disability, an eating disorder etc. a CAMHS (LD) Nurse/Coordinator will begin discussions with the relevant adult's team when the young person is 17 and makes referrals as needed. Referrals will include information on current medication relevant health assessments, EHCPs, risk assessments, and key contacts. 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.

Young people supported by the CAMHS LD Team will typically be referred to the appropriate learning disability service, usually the Community Learning Disabilities Team. Some young people supported by CAMHS may not meet the criteria for adult service, in such cases CAMHS may explore referrals to other organisations/agencies, this work will take place when the young person is 17 years and 6 months.

Age 18 (Year 13)



Young people with long term conditions will move across to the appropriate Adult Service to manage this. Where the young person's health condition will be managed by their GP, the GP will schedule regular (usually annual) reviews. These reviews will monitor things like: general health and wellbeing, medication and supporting the young person to manage their condition, similarly to the specialist GHNHSFT services.

When CAMHS are providing time limited intervention this may continue beyond the 18th birthday in agreement with the relevant adult health team. In this instance, CAMHS and the relevant adult service will co-work for a limited period and this will be reviewed at the CPA. Once the adult team takes over care coordination, advice can still be sought from CAMHS.

At 18, if the young person is eligible for Adult CHC a package will have been put in place for them to coincide with their 18th birthday, this will have been developed jointly with the young person, their family and professionals working with the young person.



Transport Transition Pathway

Age 14 (Year 9)

We encourage young people to travel independently when they have the skills and capability to do so. Young people who don't have these skills will be supported to develop them by their Education setting. Young people in receipt of support from SEN Travel Enablement Team will be considered for independent travel training. Personal Travel Allowance remains available to young people and their families.



Age 15 (Year 10)

Independent travel training will continue to be considered for the young people to support them to develop the skills they need to travel independently wherever possible.



Age 16 (Year 11)

The young person will begin post-16 preparation for either sixth form or college, with the expectation that young people will either engage with independent travel training or will be able to access a Personal Travel Allowance (PTA).



Young people with significant SEN may be considered for ongoing transport support.

Age 17 (Year 12)

The SEN Travel Enablement Team will give a year's notice to inform young people that travel assistance will end when they leave school.



Age 18 (Year 13)

Travel support to school from the SEN Travel Enablement Team will cease at the end of Year 13. Dependent on the young person's medical needs, they may also be eligible for the Healthcare Travel Costs Scheme through the NHS. This provides refunds for travel costs to things like specialist hospital appointments or when visiting hospital for tests. More information on the scheme can be found here: www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/

The **Enablement Team** can offer travel training and training in managing money to young adults to help encourage their independence.

Resources Available:

Transport Assistance for SEN Pupils

Post-16 SEN Transport Assistance Application Form



Contacts



Gloucestershire Parent Carer Forum

A friendly Forum of Parent Carers. Join other Parent Carers for regular meet ups (online and in person), a friendly Facebook support group, free training, and opportunities to share your experiences.

The Parent Carer Forum is a voice for those with lived experience of being a Parent Carer (This means parents and/or carers of children with any disability, condition, impairment or additional need).

Who to contact

Tel: 07494 704564

Email: info@gloparentcarerforum.org.uk

Web: <https://gloparentcarerforum.org.uk/>

Facebook page: [https://](https://www.facebook.com/groups/gloparentcarerforumdiscussiongroup)

www.facebook.com/groups/gloparentcarerforumdiscussiongroup



SENDIASS Gloucestershire

SENDIASS Gloucestershire (<https://sendiassglos.org.uk/>) provides **free, confidential, impartial advice and support** on matters relating to children and young people with special educational needs and disabilities (SEND). The service is offered to parents and carers of children and young people aged between 0 and 25 years old.

The SENDIASS advisors can:

- Provide information and advice on matters such as support, starting or changing schools, attendance, bullying, home to school transport, exclusions
- Help to explain reports written by professionals
- Explain the Education, Health and Care Needs Assessment process SENDIASS has a freephone telephone helpline **0800 158 3603** which is available Monday to Friday 9.00 am - 5.00 pm all year round. Callers who are using a mobile phone can dial **01452 427566** or **01452 427567** as an alternative.



Children and Families Help Desk

The role of the Children and Families' Helpdesk is to direct families to the appropriate support they need, such as from early help or children's social care services.

Tel: 01452 426565

Email: childrenshelpdesk@gloucestershire.gov.uk



Adult Help Desk

The role of adult social care at the county council is to make sure adults (aged 18 or over) and their carers (including young carers) who need care or support in their daily lives can get the help and advice they need to live as independently as possible. Care and support can be a mixture of practical, financial, and emotional support for people who need extra help to manage their lives and be independent.

You can submit an enquiry online using the button below:

<https://forms.gloucestershire.gov.uk/AdultSocialCareEnquiry>

You can expect to receive a response to your enquiry during office hours: Monday to Friday, 8am to 5pm (excluding Bank Holidays).

Tel: 01452 426868

Email: socialcare.enq@gloucestershire.gov.uk



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www.gloucestershire.gov.uk

