

# **Cwm Taf Morgannwg Safeguarding Board: Principles & Approach to Transition**

**“Preparing young people to succeed in  
adulthood”**

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## 1. Introduction

This guidance provides a framework to inform, structure and encourage the continual improvement of support for young people with additional needs between the ages of 14 and 25 who are making the transition to young adult life. It sets out the approach and principles expected by all agencies and services within the Cwm Taf Morgannwg Safeguarding Board area. Whilst each agency or service area must have its own detailed protocol for the transition process and, given the diversity of services involved and the legislative frameworks within which they operate, there cannot be one protocol that fits all. Therefore the Safeguarding Board expects that all agencies delivering services to young people approaching adulthood will adopt the approach set out in this document.

Young people with additional support needs hope for the same things as other young people: to have a voice and a social life, and to be involved as active, valued citizens. Unfortunately, many young people with additional support needs do not get the support they require to achieve this and they and their families are left feeling unsupported and abandoned. It is important that work continues to be done to address this.

One of the first steps to achieving a shared approach to transitions is the development of a definition of the term 'transition' that is relevant and meaningful to all areas. The definition Cwm Taf Morgannwg Safeguarding Board offers is:

***'Transition is the period when young people develop from children to young adults. This is not a single event, such as leaving school, but a growing-up process that unfolds over several years and involves significant emotional, physical, intellectual and physiological changes. During this period, young people progressively assume greater autonomy in many different areas of their lives and are required to adjust to different experiences, expectations, processes, places and routines. Transitions also impact on the family or on those who care for the young person/young adult.'***

Adolescence and the move to becoming a young adult are increasingly being recognised as a distinct developmental phase, much as children under five or older people are well-established with care needs adapted appropriately. Yet young people often do not have the same recognition of any specific requirements when it comes to the provision of services. There is a general lack of provision for, and knowledge of, the specific needs of the young adulthood developmental phase.

There are few services that provide continuity across the transition stage from young person to young adult, so, usually, at some point the young person has to move from a service that is provided for under 18s to one that is provided for adults. Good transition recognises the symbiotic relationship between the system, services, the multiple simultaneous pathways across Education, Health, Social Care, offender and other services and the impact they have on the outcomes for the young person and their family.

Good transition plans for adulthood mean that everyone working with the young person operates in a joined up way, in true partnership, to provide the young person with the best opportunity to achieve their aspirations and outcomes in their lifetime.

Good transition starts with the young person at the centre of the planning process and focuses on their aspirations for adult life, identifying the support and the continued learning required to achieve their outcomes. Where involved, family are key people in supporting the achievement and identifying any particular needs that need targeted support.

Good transition is coordinated, with a nominated lead worker coordinating the different parts of the process for the young person, so that the young person and their family have a single plan which is person centred and includes all of their key contacts, their role and any actions due to be undertaken. When the young person is 16 or 17 years old this may include representatives across both children and adult services depending on their individual circumstances.

The most recent and relevant guidance on Transitions that professionals and agencies can currently draw on is that developed by NICE. NICE guidelines (2016) state that at a system and organisational level the overarching principle must be to involve young people and their families in service design, delivery and evaluation by:

- co-producing transition policies and strategies with them
- planning, co-producing and piloting materials and tools
- asking them if the services helped them achieve agreed outcomes
- feeding back to them about the effect their involvement has had.

From a Personal Planning Perspective the guidelines focus on a strengths-based approach that should be person-centered, rather than based on a pre-determined service offer or assumptions based on their condition or circumstances, delivered by:

- The young person being an equal partner in the process and taking full account of their views and needs
- involving the young person and their family or carers, primary care practitioners and colleagues in education, as equal partners
- the young person being supported to make decisions and build their confidence to manage their own care and support
- fully involving the young person in terms of the way it is planned, implemented and reviewed
- Focusing on opportunities and outcomes, including:
  - education and employment
  - community participation
  - health and wellbeing, including emotional health
  - independent living and housing options
  - Progression planning and review

In developing the Process, health, social care, children's and adults' services must work together in an integrated way to ensure a smooth and gradual transition for young people.

**Table 1: Benchmarking Criteria**

| The level                          | Benchmarking Criteria: Good Looks Like  |
|------------------------------------|---|
| Good Transition for the SYSTEM is: | <ul style="list-style-type: none"> <li>■ A shared approach to the delivery of outcomes</li> <li>■ The system works together and holds itself to account as a whole</li> </ul> |

|   |   |
|---|---|
|   | <ul style="list-style-type: none"> <li>■ Reduction of silos</li> <li>■ Greater outcomes and better use of resources</li> <li>■ Economies of scale</li> <li>■ Building a foundation for integrated approaches</li> <li>■ Pathways are aligned and focused around the achievement of the system outcomes and principles.</li> </ul>   |
| Good Transition for ORGANISATIONS is:                   | <ul style="list-style-type: none"> <li>■ Increased productivity</li> <li>■ Greater collaborative working, greater sharing of functions and minimising duplication</li> <li>■ More efficient and effective</li> <li>■ Can demonstrate better outcomes</li> </ul>   |
| Good Transition for the WORKFORCE is:                   | <ul style="list-style-type: none"> <li>■ Greater satisfaction in the knowledge they are working with partners who are all working to the same objectives.</li> <li>■ Increased trust in the system</li> <li>■ Working to their values in supporting the young person and their family to have improved outcomes</li> <li>■ A reduction in complaints, sickness</li> <li>■ An increase in job satisfaction and sense of well-being</li> </ul>  |
| Good Transition for the YOUNG PERSON & their FAMILY is: | <p>Person centred: The young person’s words and aspirations for life / adulthood. From which support can be applied within a</p> <p>Single partnership plan: inclusive of risks and contingencies that all involved contribute their assessment and actions</p> <p>Transparent and coordinated so the young person can contact one named person whilst remaining inclusive of all the people involved, their role and purpose with contact details across education, social care, health, housing where appropriate, children, adult and mainstream services such as G.P and targeted services such as advocacy and the universal / community offer such as leisure</p> |

and employment. Also includes the family and friends involved and what they also provide informally, which can include, laughs, trips to the cinema, a foot massage, love.

All of which seeks to meet the outcomes and is reviewed and updated by the named person with the person and the family engaged throughout unless otherwise evidenced and documented.

The impact for the young person is that they are valued and respected as are their family. They are equal partners to the planning process that is person centred, centred on the needs and aspirations of the young person. There is less risk of confusion and frustration and the system promotes a better environment for achievement and satisfaction. More young people therefore, receive the support they need and are less likely to fall through the gaps between services and pathways.

Cwm Taf Morgannwg Safeguarding Board supports the following six principles of transition which should be adopted into agency protocols to ensure young people are supported into adulthood.

### **The Seven Principles of Good Transitions**

1. Planning and decision making should be carried out in a person-centred way
2. Support should be co-ordinated across all services
3. Planning should start early and continue up to age 25
4. All young people should get the support they need
5. Young people, parents and carers must have access to the information they need
6. Families and carers need support

## 7. A continued focus on transitions

### **Principal One:**

#### **Planning and decision making should be carried out in a person-centred way**

This means:

- Young people should be at the centre of their transition planning
  - It is essential to capture the young person's voice at every part of the transition process
- A shared understanding and commitment to person-centred approaches across all services.
  - All services should ensure that staff are aware of Person Centred Planning (PCP) approaches
- Young people should have a single portable plan
  - Young people should have be able to access their own transition plan in a format that they understand

#### **Young people should be at the centre of their transition planning**

The wishes of children and young people should be at the centre of any decisions made about their health or social care support. This will ensure that their wellbeing needs are met. Young people and those who care for them are best placed to know what they need, provided they have access to the right information and support at the right time for them. The Additional Learning Needs and Education Tribunal (Wales) Act 2018 places a duty to involve children, their parents/carers and young people, take into account their 'views, wishes and feelings' and support meaningful collaboration. The Social Services and Well Being Act 2015 focuses upon the "Wellbeing Duty" and states that a

"A person exercising functions under this Act must seek to promote the well-being of people who need care and support and carers who need support"

The ethos of the SSWBA focuses upon prevention rather than crisis intervention, and both acts promote working in collaboration, being strength based and outcome focused.

Working in a person centred way and providing information at the right time will support young people through the transition process.

Rights based approaches can lead to informed choice and positive outcomes for young people and should focus upon the following:

- Ensuring young people's right to say what they think should happen
- Being in control of their own lives and making their own decisions
- Having their opinions considered.

For young people who leaving care, detailed key responsibilities are set out in Part 6 of the Social Services and Well Being Act. This is to ensure that young people are provided with the support they need to make a successful transition to adulthood and a move towards more independent living. Care leavers should expect the same level of care and support that others would expect from a parents or carers.

A recent child practice review from Mid and West Wales Safeguarding Children Board undertook consultation with young people to understand their experience of leaving care and found that young people

“Spoke of their absolute fear of leaving care and being cut adrift and the need for carers to remember to parent them, as they would their own children, to care and care enough to challenge them”

Local authorities responsible for Children's care and support along with partner agencies should make sure that young people are provided with the opportunities they need to come to terms with taking on the responsibilities of adulthood. As corporate parents we must take the following principles into account

"Is this good enough for my child ?

Does this provide a second chance if things don't go as expected ?

Is this tailored to the child's individual needs, particularly if they are more vulnerable than other children? "

When a child turns 16 the local authority must prepare a pathway plan to support the young person with the transition to adulthood and should encompass the transition principles as outlined within this document.

**A shared understanding and commitment to person-centred approaches across all services.**

There is evidence that person-centred approaches provide a way to improve outcomes for young people in transition and have been used successfully for many years. Person-centred planning, in its truest sense, explores a young person's aspirations and is not limited by eligibility or entitlement. To achieve the best outcomes for young people, it is good practice for the assessment process to be separated from budget considerations; however, planning within the assessment needs to consider the reality of limited resources. Assessment used during transitions need to be holistic and explore the personal outcomes of the young person regardless of whether they will be met with support from statutory or universal services, these should be done in conjunction with all agencies involved and should avoid ongoing and unnecessary assessments.

Effective assessments should be valuable experiences, building a better understanding of someone's situation, identify the most appropriate approach to addressing their particular circumstances and how they will be able to achieve their personal outcomes. This should be done jointly between children and adult services avoiding the need for report assessment process which are not essential.

**As part of the PCP approach one person should support and facilitate the co-ordination of the planning process and subsequent reviews.** Offering young people the choice of having a person-centred plan supports the duties laid out in a range of legislation by:

- Providing a mechanism to support the information-gathering stage that schools must complete at least a year before the young person is due to leave school
- Supporting outcome planning, If gaps are identified during the PCP process this should be fed back into commissioning procedure. This should be done via

Local authority Improvement and strategic Plans to enable and inform future commissioning of services and health and social care collaborations. This will serve to provide a mechanism to explore indicative budgets.

Not all young people may want a person-centred plan in its fullest sense and other planning approaches should be available. However, they must have their rights respected and be provided with the relevant information and support to make an informed choice of what is right for them.

### **Young people should have a single portable plan**

Where there is no shared planning process in place, professionals will often make separate plans for different but overlapping aspects of the young person's life. This means that young people, parents and carers have to tell their stories multiple times to different professionals. This is frustrating for those involved, involves a duplication of work and is inconsistent with person-centred approaches.

The Additional Learning Needs and Education Tribunal (Wales) Act 2018 will replace the current Special Educational Needs (SEN) framework with a reformed system based on Additional Learning Needs (ALN).

The Act makes provision for universal, statutory Individual Development Plans for all children and young people with ALN. This will bring an end to the current distinction between school led interventions and local authority issued statements and integrates the separate legislative arrangements that exist for pupils in schools and post-16 students in colleges. The Act also seeks to improve collaboration between local authorities and health boards, as well as establishing a fairer and more transparent system with greater emphasis on disagreement avoidance and dispute resolution. The Act places a duty to involve children, their parents/carers and young people, take into account their 'views, wishes and feelings' and support meaningful collaboration.

The Additional Learning Needs and Education Tribunal (Wales) Bill was unanimously passed by the National Assembly for Wales on 12 December 2017 and subsequently became an Act on 24 January 2018 following Royal Assent.

The Act will be supported by regulations and a new ALN Code, both of which will be revised and then consulted on in Autumn 2018. They will then be laid before the National Assembly for Wales and published, it is anticipated that both will be in place by the end of 2019 following Assembly scrutiny.

The SSWBA states that local authorities must provide and keep under review, care and support plans for children and adults. Some needs may be able to be met without a formal care and support plan. However a care and support plan will be needed if personal outcomes cannot be achieved.

The care and support plan must be developed in partnership with the individual to ensure there is an agreed understanding of how the needs will be met and personal outcomes achieved. This is essential when planning for adulthood and it is recommended that this plan for transition is portable into adult services. Adult services will continue to update as outcomes for individuals change as they continue to progress.

This can be referred to as the **“Transition Care and Support Plan”** and should include the following.

- Why a child or young person needs support
- The type of support a young person needs, how long support will be required and who should provide it
- Wellbeing concerns and outcomes including support in adult hood
- Who is responsible for delivering the plan
- All plans relevant to the planning process, including the Co-ordinated Support Plan or other educational plans
- Views of the young person and their carers.

By undertaking transition planning in this way will ensure that young people and their carers have an identified transition plan which is updated with their personal and wellbeing outcomes as they progress to adulthood.

## **Principle Two:**

### **Support should be coordinated across all services**

This means:

- Every service should be consulting with young people to ensure they feel services are coordinated in a way that supports them
  - Consultation should begin at an early stage to ensure services adapt and change to demand and need

- Every service should be part of a co-ordinated approach to transitions in its local authority area
  - Every service should include an understanding of all aspects of transitions in its learning and development
- Every young person's experience of transition should be evaluated and those evaluations acted upon
  - Young people should have the opportunity to discuss their experience of transition in order to learn and apply to future practice

In short transitions should be focused on the needs of the young person and be efficient and effective.

During transition, young people with additional support needs may come into contact with numerous services. For some young people there can be a daunting array of services involved with them, some of which may be universal and some needs/risk led. These can include:

- Education/Careers
- Health (both physical health and emotional and mental health well being)
- Housing
- Criminal Justice

The Youth Justice Board identify the following

**“The transition process must be acknowledged as a critical period of heightened risk and must not focus on one organisation relinquishing responsibility of a young person. Instead the transition process must be seen as a critical time in a young person's journey...where extra effort, early planning and accurate assessment is required to cater for individual needs of the young person and to manage any risk”**

*(Youth Justice Board Youth to Adult Transitions Framework)*

Effective coordination of transition planning is therefore essential if we are to ensure that a young person's needs and risks are met in a way which provides a seamless transition from child to adult services.

### **Best Practice**

Current best practice suggests that the way in which this can be achieved for each Local Authority is for the development of an approach which allows an overarching strategic group to ensure effective coordination amongst agencies and operationally the identification of a transitions coordinator for individual young people who would bring together the right people for that young person. This person could be from any of the services working with a young person.

### **Operationally this approach will ensure:**

- The young person is treated as an individual and as an equal partner in developing their transition plan
- The young person receives continuity of care and support
- The young person can be supported through advocacy/mentoring
- The young person's family can be part of the process if the young person desires this
- The young person's transition can be implemented in the context of the young person's development, maturity and ability

### **Strategically this approach will ensure:**

- A commitment to the safeguarding of young people as they approach adulthood
- A Local Authority and Multi Agency wide commitment to the principles of effective transition planning
- Promotion of the principles of effective transition planning
- The efficient and effective operation of transition planning and implementation across the Local Authority Area
- The sharing of best and innovative practice across the area and more widely

- A consistent and robust evaluation of transition processes which reflects both the voices of the young people and the professionals working with them
- That the policies and processes documents of individual agencies all have regard for the principle of a coordinated approach and the requirements expected of them with regard to the principles of that approach

**The process of evaluation will enable us to:**

- Improve the transition process by allowing young people to give us their views
- Ensure that any issues arising are discussed, assessed and acted upon as required
- Allow for analysis aimed at improving services
- Allow us to inform best practice and contribute to research
- Ensure that we are giving young people the best opportunity for a successful transition to adulthood by measuring our commitment to the principles of a coordinated approach

**Principle Three**

**Planning should start early and continue up to age 25**

This means:

- Planning should be available from age 14 and be proportionate to need
  - This should initially be instigated and coordinated through an education based approach
- Children’s plans and assessments should be adopted by adult services
  - Assessments should be transferable between both children and adult services avoiding the need for unnecessary re-assessments
- Transitions planning and support should continue to age 25.

- All professionals involved in the care planning of children's transition into adulthood should continue to review at regular intervals up to the age of 25yrs and where care and support needs are established.

### **Planning should be available from age 14 and be proportionate to need**

Early intervention in transitions is promoted in the NICE Transitions guidelines (NG.1.2)<sup>3</sup>. This approach also supports the United Nations Charter for the Rights of the Child articles 2,3,12 and 28. Care planning into adulthood should provide reassurance to children and young people that plans and systems are in place to avoid rushed or abrupt transitions

The SSWBA promotes early intervention and portability of assessments which should ensure a smooth transition into adulthood.

Evidence suggests that transitions planning in some local authority areas starts too late. Many carers and professionals report this as being a significant contributing factor to unsatisfactory and ineffective transitions. Local authorities should have their own Transition arrangements which ensure early decision making and support for young people and their families.

### **Best practice**

It is best practice to start transition planning early and will be monitored via the overarching strategic group for transition. This can include interventions such as:

- Identifying relevant partners for joined-up planning
- Managing the expectations of adult health and social care services
- Considering person-centred planning opportunities
- Explaining outcome-led assessments
- Focusing on specific health problems and self-management
- Exploring employment and training needs and opportunities
- Providing information about benefit changes
- Discussing what choices and resources are available as the transition process continues.

Young people, parents, carers, and professionals need to be made aware at an early stage of what supports are available. Social work services should provide an indicative budget for young people who meet eligibility criteria no later than one year before they are due to leave school. This will ensure that adult services are able to plan effectively without drift and delay.

The experience of many young people leaving care is that early planning leads to an expectation that their transition is imminent, which inadvertently causes anxiety. It should be made clear in the early stages that early planning does not mean an early leaving date. There should be clarity about what the early planning process involves for all professionals, parents, carers and young people. This is especially important in terms of how it relates to Part 6 of SSWBA

It should be expected that the outcomes that young people wish to achieve will change over the transitions period. Plans begun at an early date should therefore be regularly reviewed and updated by those involved in the planning process, their carers and their support team. This is detailed in the Child's Pathway Plan as identified in Part 6 in the SSWBA

The establishment of local transitions forums or co-ordinators (see Principle 2) should improve the capacity of local authorities to begin planning in a timely manner.

### **Children's plans and assessments should be adopted by adult services**

The SSWBA ensures the portability of assessments and thus this principle should be adopted for transition arrangements. Within children services the focus of assessments are on well-being outcomes tailored to the individual and thus more easily transferable through to adult services. These well-being outcomes of individuals should be regularly reviewed and adapted according to changes to the individual's circumstances.

### **Transition planning and support should continue to age 25**

Post-16 transitions are often treated as a leaving-school event rather than an ongoing process lasting several years. This means that subsequent transitions, for example, leaving further education are often unsupported. Many young people and their parents and carers find these later transitions particularly challenging and are often unsure where to turn to for support.

Children and young people have a right to education and further education plays an important role in supporting many young people's personal and career development. However, research has found there is an impact when funding changes for people with additional support needs in schools and colleges. Welsh government have produced guidance on further education provision for young people with learning difficulties. This can be accessed with the following link; [gov.wales/educationandskills](http://gov.wales/educationandskills) its premise focuses on the following

- Considerations that the Welsh Government will apply when deciding whether to fund specialist placements, which duration to fund, whether to fund changes
- Programmes of study that have already commenced, and whether to fund additional programmes of study
- Considerations regarding the Welsh Government's monitoring of any agreed placements
- An overview of the timescales within which the Welsh Government and other interested parties seek to act.

Some young people with additional support needs, particularly those with learning disabilities, may be referred to post school college courses in order to maintain the level of provision of the universal services they had when they were children. This could be as a result of a reduction in services across health and social care and social work services and perceived lack of other suitable options.

Where young people choose to attend further education, it is important that they receive the support they need while in college and to make the transition successfully once they complete their course, or choose to leave

For many young people and their families this is a more critical transition point than when they leave school. All the Principles of Good Transitions should

continue to apply and transitions pathways should include support for post-further education transitions, even though the underpinning legislation may be different. The continued support could range from low-level to intensive support which will be done via continued assessment via the allocated worker.

## **Principle Four**

### **All young people should get the support they need**

This means:

- Eligibility criteria should be applied as per the Social Services and Well-being Wales act
  - An early decision should be made to ensure that young people and their families are informed at an early stage of Adult Social Services support
- Support should be available for those who do not meet eligibility criteria
  - Young people and their families should be provided with information and advice at an early stage on other avenues of support via the third sector or primary care services.
- An improved understanding of the number of young people who require support and levels of unmet need. Planning and decision-making for services should be done in partnership with young people and their carer
  - Understanding of young people's needs will ensure that agencies are able to work in partnership to plan effectively areas of service development.

The Children's Commissioner for Wales recently commissioned a review of young people's experience of transition into adult hood and its links to the

Welsh Government's Improving Lives programme full details of this report can be found here <https://www.childcomwales.org.uk/wp-content/uploads/2018/07/Dont-Hold-Back.pdf> this report should be reviewed in conjunction with the principles of transition.

The report focuses upon individual's experiences of transition and makes recommendations for future practice which should inform agencies transition policies and procedures. Key Messages are detailed within the report; however the following is pertinent for agencies to consider:

**'The main challenge of transition remains to be one of different service structures between children and adult sector, different care approaches, different eligibility criteria and sectoral fragmentation in the adult provision. At the same time as young people experience biological changes, gain maturity and assertiveness, services in adult tertiary providers, such as mental health trusts, the NHS and local social services operate differently to those in the children's sector. This often leads to a delay in transition from children to adult sector altogether or a ceasing of service.'**

"Don't Hold Back" transition to adulthood for young people with Learning Disabilities July 2018 Welsh Government

### **Eligibility criteria should be applied as per the Social Services and Well-Being Wales Act**

The National Eligibility Criteria as set out in the Social Services and Well-being (Wales) Act 2014 Part 4 Code of Practice (Meeting Needs) outlines how practitioners apply the process for determining eligibility. This should be followed at the start of the transition process. Should young people not meet the eligibility criteria for support from the local authority in adulthood, this should be discussed with them and their families outlining the reasons why and provide information and advice as to other avenues of support.

Should there be a dispute regarding eligibility from Young people, their families or professionals this initially should be directed to team managers responsible for the assessment process to review and agree a resolution. Should it be unable

to be resolved then this should be escalated to the overarching strategic group who will review decision making.

### **Support should be available for those who do not meet eligibility criteria**

It is essential that young people and their families receive information and advice on other avenues of support in adult hood therefore the overarching strategic group should ensure that partner agencies have up to date information on their services for example health in relation to primary health services and education on further education support. By working in partnership with young people and their families will also ensure that agencies are informed effectively of the strategic direction for service development and support.

### **Principle five**

### **Young people, parents and carers must have access to the information they need**

This means:

- Information and Advice services should clearly state what young people are entitled to during transitions
  - Information and advice services should be equipped to provide such information on transition, this will include the following
    - Show what support is available
    - Be inclusive of different communication needs
    - Use common and agreed language

### **Information should clearly state what young people are entitled to during transitions**

Young people, parents and carers should have access to information stating what support they are entitled to and what they can expect during the transition process. The right to information is included in many different legislative areas and young people and their families should be provided with a range of information to support them through the transition process.

The overarching strategic group should develop accessible information in a range of ways and formats and the information provided should include the options that are available to young people, parents and carers who may be dissatisfied with transition planning or outcome. This will include the escalation process for raising concern about the assessment process to agencies complaints process. Young people should be supported to access advocacy services to support them through this process.

Young people and their families have a right to complain and this can be achieved through many avenues in relation to specialist education establishments. The Welsh Government will endeavour to act in accordance with the policy “Securing provision for young people with learning difficulties at specialist further education establishments”

Where a young person and/or their parent/carer believe the Welsh Government has not made a reasonable decision in line with this policy and/or the law, they can appeal to the Welsh Government to review the decision made.

An appeal can be submitted on a decision made by the Welsh Government in regards to:

- an application for funding
- a request for change(s) within an agreed programme of study
- a request to fund an extension to an agreed programme of study
- a request to undertake or update a section 140 assessment

In making an appeal, the young person and/or parent/carer must set out the decision being appealed and the reasons for that appeal, i.e. why the decision is wrong. This should be submitted in writing along with any evidence that supports the appeal. Receiving an appeal in writing is particularly important as supporting reasons and evidence can be complicated and detailed. Advice and support is available from Careers Wales should the young person and/or parent/carer wish to consider an appeal.

### **Information should show what support is available**

Asset mapping has been developed in some local authority areas to increase young people's awareness of the options available. This should be developed in partnership with support agencies, local and national government and other statutory services to ensure all options are included.

Another approach to information provision could be the development of leaflets outlining support available within the local community and the range of services available when Leaving School or College provision.

Given the importance of adopting joined up and person-centred approaches to supporting transitions, advocacy and information providers should consider broadening their scope to cover all matters that may affect people in transitions, rather than addressing specific areas of need.

### **Information should be inclusive of different communication needs**

It is a requirement to provide information in ways that are inclusive of the different communication needs of young people, parents and carers. This may include British Sign Language alternative audio and video formats, assistive technologies, board maker, easy read and Talking Mats. This approach is fundamental when working with the deaf, deafblind and blind communities or others with communication support needs.

### **Information should use common and agreed language**

The lack of an agreed and common language is one of the most fundamental challenges to achieving a shared understanding of transitions and more joined-up approaches. It is good practice to ensure that all information is, as far as possible, free from professional jargon.

There should be clear definitions of the terms that are shared and agreed across all professional sectors. For example, 'transition', 'key worker', 'transitions coordinator', 'learning disability', 'disability', 'learning difficulty', 'outcome', 'positive destination' and 'person-centred' can have different meanings depending on the professional background of the person using them. This leads to confusion among young people, parents, carers and professionals.

## **Principle 6**

### **Families and carers need support**

This means:

- Family wellbeing needs to be supported
  - Ongoing communication with the family should be established from the outset and reviewed as young people progress into adulthood
  - Families need to be supported to understand the different legislative requirements when young people reach 18yrs.
  
- Advocacy should be available at the start and throughout transitions
  - The active offer of advocacy should be provided at the start of the transition period.

### **Family wellbeing needs to be supported**

Young people's relationships with their family can be complex, particularly where parents or carers have an ongoing role in providing personal assistance and where disability related allowances or benefits are an important contribution to the household income. The needs and roles of family members and carers are also likely to change as the young person they care for grows up. Parents and carers are usually central to the continuing care of young people with additional support needs and are the people most likely to provide guidance and support during transitions.

This role may present considerable challenges. Many parents and carers feel they must fight for support and can experience 'burn out' as they deal with the many new challenges associated with transitions. Too often, parents and carers describe their experience of supporting a child through transition as like 'falling off a cliff' or a 'black hole'<sup>1</sup>.

The SSWBA implemented in 2015, extends and enhances the rights of carers. This aims to provide better and more consistent support to carers so that they can continue to care, if they so wish, in good health and to have a life alongside caring. Likewise, young carers should have a childhood like their non-carer

peers. Carer's assessments will be replaced by Care and Support Plans specifically for carers and will identify personal outcomes and any support needs.

### **Best practice**

Peer support networks are highly valued. However, networks developed while children are at school can be difficult to maintain after they leave. The ability of parents and carers to establish and maintain peer support should be considered in the development of support packages for young people.

The strategies below have been developed to help alleviate stress on families and carers during transitions:

- Encouraging positive expectations and working with doubts about community and social life post-16
- Clear communication and transparency about the transitions process at all times
- Talking about transition in positive and creative ways and as a time to celebrate moving into young adulthood
- Preparing parents and carers for the planning process by providing early information sessions from age 14. If information is timely and accurate, parents and carers will have a better chance to engage with the transitions process
- Supporting parents and carers to understand and acknowledge that those they care for have their own choices to make as they move into adulthood and support all involved to make informed choices
- Increasing the availability of peer support networks
- Offering training in stress management techniques such as relaxation exercises and meditation
- Using appropriate short break and respite services
- Supporting carers to build resilience, self-efficacy, and self-esteem
- Ensuring parents have continued access to a single point of contact
- Ensuring that parents receive information and are supported to complete carer's assessments and consider relevant legal processes such as Guardianship Orders.

### **Advocacy should be available at the start and throughout transitions**

It is best practice for advocacy to be made available to all young people in transition and their parents and carers, and should be actively offered at point of transition particularly if they have concerns about having their voices heard. The Social Services and Well-being (Wales) Act 2014 Part 10 Code of Practice (Advocacy) sets out the requirements for local authorities to:-

- a) ensure that access to advocacy services and support is available to enable individuals to engage and participate when local authorities are exercising statutory duties in relation to them and
- b) to arrange an independent professional advocate to facilitate the involvement of individuals in certain circumstances.

Advocacy should not only be available when difficult decisions must be made. The code sets out particular circumstances and periods of change or transition which will be significant to the individual and when their needs for advocacy may be heightened.

These include but not exclusively:-

- when making decisions that will have a significant impact on their day to day life including:
  - a) Assessment, care and support planning, reviews
  - b) Safeguarding
  - c) Accessing information, advice and assistance
  - d) Where they are going to live
  - e) The assessment of or changes to informal care and support arrangements and
  - f) Moving from receiving care and support via a care and support plan, or support plan if they are a carer, to receiving care and support from preventative wellbeing support in the community..

### **Best Practice**

The offer of advocacy should be made at the start of transition, age 14, and be available to at least age 25. This is especially relevant for those who are looked after, care-experienced, and those being considered for a Guardianship Order.

## **Principle 7**

### **A continued focus on transitions across Cwm Taf**

This means:

- Professionals working across Cwm Taf work collectively to promote the Principles of Good Transitions and improve practice across the area
- A continued focus on transitions within policy and legislative developments
- Learning good practice from project-funded work and embedding this into sustainable longer-term strategies

All professionals working across Cwm Taf should ensure that they fully understand the principals of transition and how these are applied within policies and procedures. A training programme should be developed to support this and rolled out across Cwm Taf involving multi agency partners and a lead agency appointed to support the continual development and review of the principles. Engagement events should be held with young people to share the principles and involve them in the continued development of the transition agenda.

### **References and Further reading**

Legislation:

Social Services Well Being (Wales) Act 2014

Well –Being Of Future Generations Act 2015

The Additional Learning Needs Bill 2017

The National Institute for Health and Care Excellence (NICE) transitions guidelines 2016

Further Reading:

Youth to adult transition principles and guidance (Wales) Youth Justice Board

Cymru National Offender Management Service (NOMS) in Wales

YOT Managers Cymru June 2015

Don't Hold Back Transitions to adulthood for young people with learning disabilities" Welsh Government July 2018

Principles of Good Transitions Scottish Transitions Forum 2017