

Derbyshire Local Area SEND 0-25



Preparing for Adulthood Pathway

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Introduction

The Children and Families Act 2014 introduced a new special educational needs and disabilities (SEND) system. At the heart of the changes is a commitment to ensuring that children, young people and their families are at the centre of decision making in order that they achieve better outcomes.

This document focusses on young people preparing for adulthood – those aged over 13 years and up to 25 years. It sets out how services should work together to support young people with special educational needs and disabilities to prepare for adult life. This process has previously been referred to as **‘Transition’** to adult life and services.

This document replaces the **‘Transition Planning in Derbyshire: Pathways and Person-Centred Approaches’**

‘Transition’ is not a word that young people tend to use when discussing their future; instead they might talk about ‘growing up’ which may include ordinary things like:

- Forming views about their own future
- Increased right to make requests and decisions
- Leaving school
- Starting further education or training
- Having boyfriends/girlfriends
- Leaving home
- Moving on to Higher Education/University
- Travelling
- Getting jobs

From Year 9 (the academic year during which a child/young person becomes aged 14) the SEND reforms require those supporting young people to focus on ordinary life outcomes such as paid employment, independent living, community participation and health and well-being.

Preparing for adulthood means preparing for:

- Higher education and/or employment
- Independent living
- Participation in society
- Being as healthy as possible.

Good preparation for adult life needs to start early and requires services to work collaboratively. High aspirations are crucial to success and discussions about long-term goals should start early and ideally before Year 9 (age 13-14). The focus should be on the young person's strengths and capabilities and the outcomes they want to achieve. Schools and other service providers should start having discussions with young people about long-term goals, ideally before they reach the age of 14. Parents, of course, need to be included in those discussions. It should include consideration of the transition into post-16 education, and essentially, the transition from post-16 education into adult life.

As children get older and become young adults, it is important that they are provided with opportunities to take more control over their lives and become directly involved with choices and they should be supported to make decisions for themselves, wherever possible.

For teenagers, preparation for adult life needs to be a more explicit element of their planning and support. Discussions about their future should focus on what they want to achieve and the best way to support them to achieve. Aspirations and needs will vary and change over time as young people get older and approach adult life.

Principles/Vision

The Children and Families Act 2014 makes clear that local authorities when carrying out the functions in the Act **must** have regard to:

- The views, wishes and feelings of the child or young person, and the child's parents
- The importance of the child or young person, and the child's parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions
- The need to support the child or young person, and the child's parents, in order to facilitate the development of the child or young person and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood.

These principles are designed to support:

- The participation of children, their parents and young people in decision-making
- The early identification of children and young people's needs and early intervention to support them
- Greater choice and control for young people and parents over support

- Collaboration between education, health and social care services to provide support
- High quality provision to meet needs of children and young people with special educational needs
- A focus on inclusive practice and removing barriers to learning
- Successful preparation for adulthood, including independent living and employment

Young people preparing to make their own decisions.

As young people develop and form their own views, they should be more involved in decisions about their own future. After compulsory school age (the end of the academic year in which they turn 16) the right to make requests and decisions under the Children and Families Act 2014 applies to them directly, rather than to their parents. Parents and other family members can continue to support young people in making decisions, or act on their behalf, provided the young person is happy for them to do so.

The specific decisions which apply to young people directly from the end of compulsory school age include:

- the right to request an assessment for an Education Health and Care plan
- the right to make representation about the content of their plan
- the right to request a particular institution is named in their plan
- the right to request a Personal Budget for elements of an EHC plan
- the right to appeal to the First-tier Tribunal (SEN and Disability)

This does not mean that parents are excluded. The local authority, schools, colleges, health services and other agencies should continue to involve parents, particularly when the young person is not yet 18 years. Typically, young people this age will still want support and advice from their parents on decisions that affect them, but the final decision rests with the young person.

Recognising the increasing independence of young people once they reach age 16 and beyond, the local authority has a number of legal responsibilities such as:

- Making sure information, advice and support is available directly to young people; independent of their parents if that is what they want.

- Making sure that all reviews of Education, Health and Care plans for young people from age 13-14 onwards, include a focus on preparing for adulthood.
- Making sure that young people have access to support from an independent skilled supporter if they want or need this.
- Making sure services they provide – such as housing and adult social care – help children and young people prepare for adulthood.
- Carrying out an adult care transition assessment for young people approaching, or aged 18 and over with SEN or disabilities, if they think it will benefit that young person.

The Mental Capacity Act 2005

The right of young people to make a decision is subject to their capacity to do so as set out in the Mental Capacity Act (**MCA**) The underlying principle of the MCA is to ensure those who lack capacity are empowered to make as many decisions for themselves as possible and that any decision made or action taken on their behalf is done so in their best interests.

Careers advice for children and young people

Schools and colleges should ensure that students are provided with independent careers guidance. Schools and colleges should raise the career aspirations of their students with special educational needs and disabilities and broaden their employment horizons. They should use taster opportunities, work experience, mentoring, role models and inspiring speakers to assist young people to make informed decisions.

Preparing for Adulthood reviews

EHC Plans (and statements of SEN where they are still in place) should be used to actively monitor children and young people's progress towards their outcomes and longer term aspirations. They must be reviewed every 12 months as a minimum.

The EHC plan review at Year 9, and every review thereafter, must include a focus on preparing for adulthood. This should include:

- Support to identify appropriate post-16 pathways that will lead to clear outcomes for employment or higher education; training opportunities, support to find a job and help to understand benefits.
- Support to prepare for independent living, including exploring what decisions young people want to make for themselves, discussing where they want to live in the future and what support they will need. Local housing options and support to find accommodation, housing benefits and social care should be explained.
- Support in maintaining good health in adult life, including effective planning with health services for the transition from specialist paediatric services to adult health care. Helping young people understand which health professional may work with them as adults; ensuring those professional understand the young person's learning difficulties and/or disabilities. This should include the production of a Health Action Plan and prompts for annual health checks for young people with Learning Disabilities.
- Support in participating in society, including understanding mobility and transport support, finding out about social and community activities: support to develop and maintain friendships.

All reviews should have a person-centred focus and consider what is working well and what is not working well and what is important to the young person and what is important for the young person as they progress towards adult life.

The review should identify the support needed to achieve aspirations and identify the components of the study programme necessary to prepare them for adult life.

Post 16 Study Programmes

All students aged 16-19 (and, where they have an EHC plan, those aged over 19 and up to age 25) should follow a coherent study programme which provides stretch and progression and enables them to achieve the best possible outcomes in adult life.

Schools and colleges are expected to design study programmes which enable students to progress to a higher level of study than their prior attainment, take rigorous, substantial qualifications, study English and maths, participate in meaningful work experience and non-qualification activity. Students should not be repeating learning they have already successfully completed.

For students not taking qualifications, their study programme should focus on high quality work experience, and on activity which prepares them well for employment, independent living, being healthy and participating in society.

Funding for study programmes is based on a full-time programme that comprises around 600 learning hours across an academic year. This means that study programmes can be delivered across 3 or 4 days each week during term-time. Where a young person has an EHC plan it may be necessary to consider packages of support across education health and care that covers five days each week and includes non-educational activities. Five day packages of support are likely to involve time with different providers and in different settings.

Funding additional support in further education colleges

Many young people with SEND will have their needs met from the college's core funding, also referred to as 'place' funding. If the cost of an individual's support is over and above the core funding additional funding can be paid by the local authority in which the student resides to enable a student to participate in education and learning; this is referred to as top-up funding (sometimes called element 3) and is part of the High Needs Funding system.

High Needs Funding is for:

- pupils or students aged 5 to 18 (inclusive of students who turn 19 on or after 31 August in the academic year in which they study) with high levels of SEN in schools and academies, further education (FE) institutions, specialist post-16 institutions (SPIs) – it is **not** necessary for these pupils or students to have a statement of SEN or EHC plan in order to receive high needs funding.
- those aged 19 to 25 in general Further Education institutions and Specialist Post-16 Institutions (SPIs) who have an EHC plan and require additional support costing over £6,000

High Needs Funding cannot be used to fund students aged over 19 who do not have an EHC plan.

The Skills Funding Agency is responsible for funding adult learning, this includes learning for those aged 19 and over with learning difficulties and/or disabilities who do not have an EHC plan.

Ceasing an EHC plan

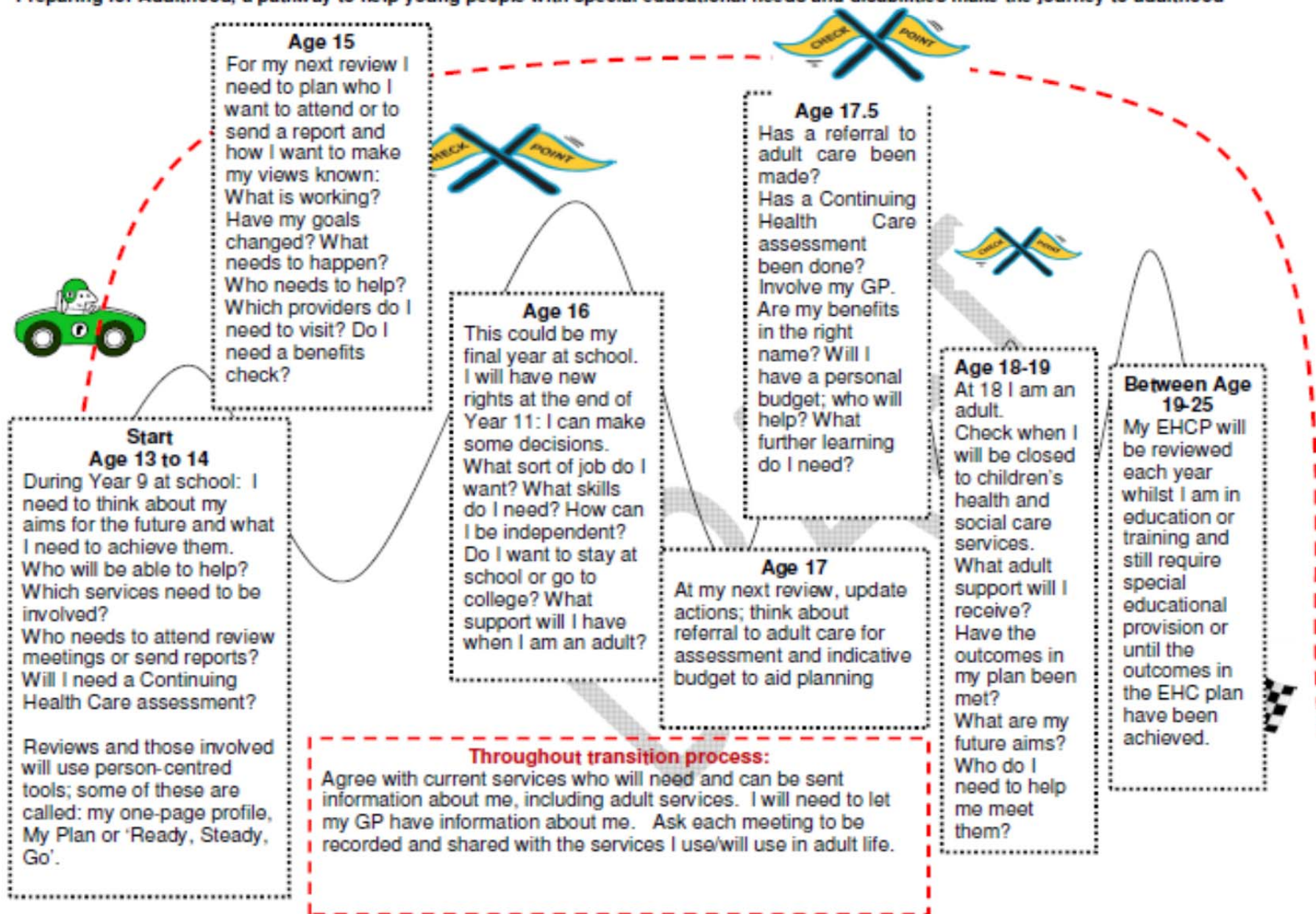
A local authority can cease to maintain an EHC plan if it determines that it is no longer necessary for the plan to be maintained, including: where the child or young person no longer requires the special educational provision specified in the plan, a young person aged over 16 leaves education to take up employment or higher education, a young person aged over 18 no longer wishes to engage in further learning.

The Care Act 2014

Under the Care Act the local authority has a duty to carry out a transition assessment for a young person or carer, in order to help them plan, if they are likely to have needs once they (or the child they care for) turn 18.

If a young person or young carer is likely to have needs when they turn 18, the local authority must assess them when it considers there is a significant benefit to the individual in doing so.

Preparing for Adulthood, a pathway to help young people with special educational needs and disabilities make the journey to adulthood



PREPARING FOR ADULTHOOD PATHWAY

Age / School Year	Actions	Responsibility
<p>Age 14</p> <p>Year 9</p>	<p>During the academic year when young person becomes 14 years of age</p> <p>Information to be provided to young person and parent/carer about the Preparing for Adulthood pathway, support available to make decisions, post-16 choices, services and provision. Identify services that need to become involved, establish preferences and provide any necessary information or signposting.</p> <p>Consider whether the child or young person wants, or would benefit from having, an independent advocate.</p> <p>The planning for and the review should be person-centred. New outcomes should be identified with a focus on preparing for adulthood:</p> <ul style="list-style-type: none"> • Consider if all appropriate professionals/organisations are involved. Identify any new services that may need to become involved. • Agree Lead Professional or key worker to co-ordinate transition and monitor delivery of actions agreed. • Identify information, advice and guidance needs and who will provide this. • Identify and record appropriate communication needs/methods • Consider referral to Adult Care where it appears of significant benefit to be involved at this stage (e.g. complex needs/high cost). • Health Transition Lead to be identified, where appropriate, who can liaise with all key 	<p>School</p> <p>Lead Professional</p> <p>School to convene and invite appropriate members of the multi-disciplinary team.</p> <p>If a child or young person does not attend a school or other institution the SEN section would arrange the</p>

	<p>health professionals. This may be the school nurse or paediatrician or other relevant health professional. Not all young people with SEND will need a health transition lead.</p> <ul style="list-style-type: none"> • Ensure alert to, and information sharing with, the General Practitioner. • For young people with Learning Disabilities: prompt annual health check • Identify any informal Carers involved (including Young Carers) – undertake Carers Assessment as appropriate. • Identify long term aims/goals relating to continuing education, employment, housing, social and community participation and being as healthy as possible. • Identify outcomes that support long term goals. • Determine how the curriculum in key stage 4 will support and enable preparation for post-16 options and support long term goals. <p>School to send review notes to DCC SEN Section.</p>	meeting
Age 15 Year 10	<p>Discussion of Preparing for Adulthood with young person and their family should include:</p> <ul style="list-style-type: none"> • Seeking consent for a referral to Adult Care from the Young Person and Parent/Carer and, where appropriate; referral to be made to Adult Care by Children’s Services or Lead Professional • Advice on the importance of assessment and planning pre-18: continue to revisit this at ongoing reviews if the young person is likely to need support from Adult services. • Adult Care Referral for Transition: this should be made where it is of significant benefit to the young person or carer, if the Young Person is likely to have needs for care or support after turning 18. Consideration should be given to the timeliness of this referral – referrals should allow sufficient time to assess and should be made at a time that will cause the least disruption to the Young Person. <p>Person-centred Annual Review meeting to identify actions/support to enable preparation for</p>	Children’s Services or Lead Professional

	<p>adulthood:</p> <ul style="list-style-type: none"> • Consider whether all appropriate professionals/organisations are involved (including Advocacy) Consider need to include/inform GP • If annual health check for young person with Learning Disabilities has not been completed; identify barriers to this • Identify any informal carers who are involved (including Young Carers) in order to undertake/review Carers Assessment as appropriate. • Agree Lead Professional (this may change as the young person gets older or circumstances change) The Lead professional monitors delivery of actions agreed. • Identify aims, goals and outcomes for the future – this should include post-16 learning options, increasing independence skills, meeting ongoing care and support needs. • Agree actions required to work toward agreed outcomes, plan visits to, or taster sessions with, potential post-16 providers and/or invite to review meeting. <p>Welfare Benefits: First Benefits check to be arranged (around 15.5yrs). This is critical to ensure that the family are in receipt of optimal benefits. Note: Children’s Services may need to apply for National Insurance number if the child/young person is in the care of the authority.</p>	<p>School to convene and invite appropriate members of the multi-disciplinary team.</p> <p>Children’s Services or Lead Professional</p>
<p>Age 16 Year 11</p>	<p>Acknowledge and prepare for the young person approaching the end of compulsory schooling: the young person should be enabled to give independent views and will be of a legal age to consent to medical treatment.</p> <p>Mental Capacity Act (2005) may need to be considered: the Young Person should be assumed to have capacity to make their own decisions unless it appears they are having difficulty in doing so. Where the young person is have difficulty making a specific decision a Mental Capacity Assessment should be undertaken in relation to this specific decision.</p> <p>Person-centred Annual Review meeting to identify actions/support to enable preparation for</p>	<p>All professionals / carers / family</p> <p>School to convene</p>

	<p>adulthood:</p> <ul style="list-style-type: none"> • Consider whether all appropriate professionals/organisations are involved (including Advocacy) Consider need to include/inform GP • Identify any informal carers involved (including Young Carers) – undertake/review Carers Assessment as appropriate. • Agree Lead Professional (this may change as the young person gets older or circumstances change, particularly if leaving school) The Lead professional monitors delivery of actions agreed • Review aims/outcomes, review existing action plans, agree further actions. • Consider ongoing education/post-16 provision • Consider potential for employment/voluntary work • Aids and Adaptations: identify any equipment used that requires ongoing review or maintenance post-18years and confirm arrangements for maintenance contracts; identify any adaptations that are required or in process and implications of this within transition. • Identify and involve Key Adult Professionals required for when the young person becomes 18 years and over (consider Adult Care, Health, Mental Health, Education, and Service Providers). These professionals should be invited to attend Preparing for Adulthood meetings/Annual Reviews. <p>Review requirement for Adult Care Involvement:</p> <ul style="list-style-type: none"> • Make referral if not already done. Consent must be sought from the Young Person (if the Young Person does not have Mental Capacity to make this decision, a best interests decision would need to be made in this respect). If declined, advise on the importance of assessment and planning pre-18. Continue to revisit this at ongoing contact. (Advise that self-referral can be made post-18yrs via Call Derbyshire). • Adult Care Referral for Transition should be made where it would be of significant benefit to the Young Person or Carer to do so, and the Young Person is likely to have needs for care or support after turning 18. Consideration should be given to the timeliness of this referral – referrals should allow sufficient time to assess (reflecting complexity) and should 	<p>and invite appropriate members of the multi-disciplinary team</p> <p>Children's Services or Lead Professional and Adult Care</p>
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	<p>be made at a time that will cause the least disruption to the Young Person.</p> <ul style="list-style-type: none"> • Adult Care to make appropriate introductions (if not done so already) • Where Adult Care worker involved, Children’s Services worker to consult Adult Care worker on any changes to support provision pre-18years to ensure sustainability. <p>Consider whether the young person or any of the young person’s siblings are young carers and should have an assessment under the Care Act.</p> <p>Health:</p> <ul style="list-style-type: none"> • Consider Continuing Healthcare assessment/needs (Adults) - complete and submit Continuing Healthcare Checklist and Nursing Assessment (just prior to age 17) • Gather information to inform Decision Support Tool (DST). • Identify and involve any Key Adult Professionals required for Post-18yrs: appropriate planned introductions and handover. • Consider need to include/inform GP • Prompt annual health check for young people with Learning Disabilities 	<p>Adult Care</p> <p>Adult care Health Lead Lead Professional</p>
<p>Age 17 Year 12</p>	<p>Person-centred Annual Review meeting to identify actions/support to enable preparation for adulthood:</p> <ul style="list-style-type: none"> • Consider whether all appropriate professionals/organisations are involved (including Advocate) Consider need to include/inform GP • Agree Lead Professional: Lead professional monitors delivery of actions agreed • Review aims/outcomes, review existing action plans, agree further actions. • Ensure that appropriate Key Adult Professionals required for post-18years are involved. Agree protocols for handover between Children’s Services Workers and Adult Workers. Children’s Services to consult Adult Care Worker on any changes to support provision pre-18yrs to ensure sustainability. 	<p>Education provider to convene and invite appropriate members of the multi-disciplinary team</p>

<p>Adult Care Assessment:</p> <ul style="list-style-type: none"> • Draw together information for Assessment of Needs and Outcomes • Consider whether any further specialist adult assessment required pre-18yrs to support Adult Care Assessment – e.g. SALT, OT Moving and Handling etc. • Aids and Adaptations: identify any equipment used that requires ongoing review or maintenance post-18years and confirm arrangements for maintenance contracts; identify any adaptations that are required or in process and implications of this within transition. • Provide information to the Young Person/Family about the Adult Care’s self-directed support process • Advice given on Eligibility under the National Eligibility Criteria. • Gather information about current care packages • Consider appropriate funding streams. • Consider accommodation requirements at 18years (placement, supported living, shared lives) and take necessary actions to advance these arrangements. • Consider Universal Offer and Preventative Services • Referral to Brokerage to support identification of services/resources (if appropriate) <p>Identify Informal Carers involved (including Young Carers) – undertake/review Carers Assessment as appropriate and consider any specific transitional arrangements</p> <p>Health:</p> <ul style="list-style-type: none"> • Identify post-18 support available and pathways for accessing these. • Continuing Healthcare (Adults) Assessment – consider whether this is appropriate and agree who is best placed to complete Nursing Assessment and CHC Checklist. • CHC Checklist to be completed by 17.5yrs. <p>(Mental Capacity Act (2005) to be considered in relation to the specific decisions included in the Preparing for Adulthood Pathway)</p>	<p>Adult Care</p> <p>Adult Care</p> <p>Health Transition Lead</p>
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<p>Age 18 Year 13</p>	<p>Acknowledge and prepare the young person for becoming an adult at age 18 years.</p> <p>Person-centred Annual Review meeting to identify actions/support to enable preparation for adulthood:</p> <ul style="list-style-type: none"> • Consider whether young person will need to continue to receive the provisions in the EHC plan. • Consider the content of any future programme of study and how it will enable outcomes in the plan to be achieved. • Consider whether all appropriate professionals/organisations are involved (including Advocate) • Agree Lead Professional – this may change as young person reaches age 18 years: Lead Professional monitors delivery of actions agreed <p>Adult Care:</p> <ul style="list-style-type: none"> • Confirm eligibility under National Eligibility Criteria. • Finalise Assessment of Needs and Outcomes and advise of Indicative Budget (if applicable) • Create Care and Support Plan with Young Person (and their Family/Carer/Advocate as appropriate) <p>Health:</p> <ul style="list-style-type: none"> • Continuing Healthcare (Adults) - if triggered against the Checklist, Decision Support Tool to be completed. Confirm eligibility for Continuing Healthcare and confirm funding arrangements. • Advise on any other funding arrangements through Health Services. • Agree and initiate handover arrangements agreed for Specialist Adult Health Services. • Support handover of therapy services with Young Person, where criteria is met and service identified. 	<p>Education provider to host and invite appropriate members of the multi-disciplinary team</p> <p>Adult Care/Lead Professional</p> <p>Continuing Health Care/ Health Transition Lead</p> <p>Children's Services or Lead Professional, Health Lead</p>
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	<ul style="list-style-type: none"> • Liaise with GP/Community Nursing Teams • Consider need to include/inform GP <p>Finances:</p> <ul style="list-style-type: none"> • Second Benefits check (at 17.5yrs) to be arranged if leaving education at 18yrs or if circumstances have changed (this is critical to ensure that the family are in receipt of optimal benefits) • Consider how Young Person's money will be managed (e.g. deputyship/appointeeship) 	Lead Professional/ Adult Care
Age 19 Year 14	<p>Person-centred Annual Review meeting to identify actions/support to enable preparation for adulthood:</p> <ul style="list-style-type: none"> • Consider whether all appropriate professionals/organisations are involved (including Advocate) • Consider whether any follow-up review or support required from Children's Services • Agree Lead Professional: Lead professional monitors delivery of actions agreed • Review aims/outcomes, review existing action plans, agree further actions. • Identify ongoing professionals involved and agree information sharing protocols/joint assessments or support plans, regularity of review. • Identify other key Transition points in the Young Person's journey – consider actions required to make these transitions as smooth as possible • Consider whether Preparing for Adulthood Pathway still applicable. <p>Adult Care (by 18years)</p> <ul style="list-style-type: none"> • Implement agreed Care and Support Plan and funding arrangements (including agreement of other sources of funding) <p>Health:</p>	<p>Education provider to convene and invite appropriate members of the multi-disciplinary team.</p> <p>Lead Professional</p> <p>Adult Care</p>

	<ul style="list-style-type: none"> • Health Lead invited to attend annual review meetings • Share reports/information with other health professionals as appropriate (with permission from Young Person) <p>Finances:</p> <ul style="list-style-type: none"> • Ensure arrangements in place for managing the Young Person’s money • Second Benefits check required just prior to 19yrs (if Young Person did not leave education at 18yrs). This is critical to ensure that the family unit are in receipt of optimal benefits. 	<p>Health Transition Lead</p> <p>Adult Care</p>
Age 19 - 25	<p>The authority may determine that it is no longer necessary to maintain the EHC plan where the young person no longer requires the special educational provision described in the plan. These circumstances include: a young person entering higher education, a young person aged over 18 leaving education or moving to another local authority area.</p> <p>Where an EHC plan remains in place beyond the age of 19 years:</p> <ul style="list-style-type: none"> • Consider whether special educational provision provided through an EHC plan will be necessary to enable the young person to progress towards agreed outcomes: young people with EHC plans may take longer to achieve their outcomes, however, this does not mean there is automatic entitlement to continued support at age 19 or an expectation that those with an EHC plan should all remain in education until age 25. The local authority can decide to cease an EHC plan if it decides that it is no longer necessary for the EHC plan to be maintained. The young person and parent/carers would be informed. • Consider whether remaining in education would enable the young person to progress and achieve and whether the young person wants to remain in learning. Young people who no longer need to remain in formal learning or training will not require special educational provision to be made for them through an EHC plan. 	<p>Lead Professional to support Education provider to convene and invite appropriate members of the multi-disciplinary team</p>

Person-centred Annual Review meeting to identify actions/support to enable preparation for adulthood:

- Consider whether all appropriate professionals/organisations are involved (including Advocate)
- Agree Lead Professional: Lead professional monitors delivery of actions agreed
- Review aims/outcomes, review existing action plans, agree further actions.
- Identify ongoing professionals involved and agree information sharing protocols/joint assessments or support plans, regularity of review.
- Identify other key Transition points in the Young Person's journey – consider actions required to make these transitions as smooth as possible
- Consider whether Preparing for Adulthood Pathway still applicable.
- Develop exit plan for when EHC plan ceases

Ensure the young person receives clear information about support they can receive, including information about seeking employment, continuing study in adult or higher education, and support for health and social care when their plan ceases.

Glossary of terms

CHC = Continuing Health Care

DST = Decision Support Tool

EHCP = Education Health Care Plan

FE = Further Education

IAG = Information Advice & Guidance

LDD = Learning Difficulties and/or Disabilities

MCA = Mental Capacity Act

OT = Occupational Therapy (or Therapist)

SALT = Speech and Language Therapy (or Therapist)

SEND = Special Educational Needs and Disabilities

SPI = Specialist Post-16 Institution

Preparing for Adulthood Pathway

Reference/Toolkit

The Derbyshire Local Offer; information for children and young people with SEND and their families

<http://localoffer.derbyshire.gov.uk/>

Preparing for Adulthood website; provides a range of information and resources.

<http://preparingforadulthood.org.uk/media/385562/2upload.pfatoolkit.pdf>

'Preparing for Adulthood': a useful benchmarking tool for measuring progress.

<http://www.helensandersonassociates.co.uk/wp-content/uploads/2015/03/ProgressinPreparingforAdulthoodweb-2.pdf>

Tools to enhance local transition pathway and transformation programmes:

<http://www.uhs.nhs.uk/OurServices/Childhealth/TransitiontoadultcareReadySteadyGo/Transitiontoadultcare.aspx>

NICE Guidance: Transitions from children's to adult's services for young people using health or social care services:

<https://www.nice.org.uk/guidance/ng43>

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