

11 September 2017**Agenda Item: 5****REPORT OF THE SERVICE DIRECTOR, MID NOTTINGHAMSHIRE AND THE
SERVICE DIRECTOR, NORTH NOTTINGHAMSHIRE AND DIRECT SERVICES****UPDATE ON TRANSITIONS PROCESS FOR CHILDREN AND ADULTS WITH
DISABILITIES****Purpose of the Report**

1. To invite the Committee to comment on the development of appropriate performance measures with a focus on working with young people at age 14 years.
2. To seek Committee approval to proceed with Phase I of plans to explore and implement options for greater alignment of services and interventions across Children's and Adults' services for children and young people aged 0-25 years.

Information and Advice**Background and Context**

3. On 9th January 2017 the Adult Social Care and Health (ASCH) Committee approved the establishment of the following posts in the Countywide Transitions Team:
 - 1 permanent FTE Advanced Social Work Practitioner (ASWP) Hay Band C.
 - 2 permanent FTE Community Care Officers (CCOs) (Scale 5).
4. The Countywide Transitions Team works with young people from the age of 14 years who have a permanent and substantial learning or physical disability, young people with significant mental ill health, as well as young people with neurological conditions, which now includes Attention Deficit and Hyperactivity Disorder (ADHD) and Asperger's syndrome. They primarily work to plan for the future, with young people who require social care support that cannot be accessed through universal mainstream services or the targeted support service, which is a multidisciplinary service for young people aged 8-18 years living in Nottinghamshire who are vulnerable, but not at immediate risk of harm.
5. The additional posts outlined in **paragraph 3** above are now in place. The 2017/18 establishment budget, including these posts, is £514,000. This additional capacity allows the team to engage with disabled young people and their parents / carers in a more timely fashion, whilst ensuring that 'new ways of working' are maximised. It also allows the Team Manager to focus on the early identification of young people who will be eligible for adult services. This will ensure better planning and 'lead-in' times for commissioning complex packages.

6. The additional capacity also ensures that the Notts Enabling Service (NES), which has 2 post holders attached to the Transitions Team (1 Promoting Independence Worker [PIW] and 1 Community Independence Worker [CIW]), is fully utilised. NES is a countywide team of community independence, promoting independence and co-production workers that work with service users and operational staff with the aim of preventing, reducing or delaying the need for long-term support, by working to increase people's independence and to decrease people's reliance on paid support by identifying alternative resources in the community. CIWs help to source universal services for service users or co-produce new resources and PIWs support service users to develop, maintain and improve their daily living skills via short term (up to three months) enablement.

Timely strategic identification of young people likely to be eligible for adult services

7. Processes have been put in place to support the early identification of young people with disabilities who are likely to be eligible for adult services. These will involve the Transitions Team Manager, or Advanced Social Work Practitioner, in regular meetings with colleagues from Children's services and the County's Clinical Commissioning Groups, which will enable the exchange of detailed information on children and young people aged 14-17 years with disabilities and health care needs.
8. Other regular meetings to support the identification process will include the Looked After Residential Panel (as it relates to children aged 14-17 years). This will enable early identification of young people who may require accommodation based care and who might not be known to the Children's Disability Service.

Timely intervention with young people and their parents / carers from age 14 years

9. The Transitions Team will offer a clinic once a year at the Year 9 parents' evening / events for each of the 11 special schools. Outcomes will be the provision of information, advice and guidance about the Preparation for Adulthood Pathway. This includes a considerable amount of information via Notts Help Yourself, the interactive pathway and the Council's Local Offer.
10. The aim of the team is that an additional 20 young people aged 14 years, with the most complex needs, will have early interventions and their care co-ordinated, with 80% of accepted referrals allocated within 28 days of the target date.
11. The team wants to ensure that all staff members are using Think Pads to ensure flexible and productive working and to embrace new ways of communicating with young people, e.g. using their WiKis (a support planning tool that can provide an interactive and person-centred way of recording and sharing information about a person's care and support needs. It can be used by anyone involved in providing care, to help alleviate carer concerns).

Maximising independence

12. The team will have a target to ensure that 100% of all accepted referrals are considered for the Notts Enabling Service and / or co-production. Co-production is based on the concept of a genuine equal partnership between social care professionals and service users (and their carers), with each party contributing their own skills and knowledge

towards the shared goal of improving services. This includes being involved in all aspects of service planning, development, delivery and evaluation.

13. It will also be expected that all accepted referrals are considered to see if Continuing Health Care (CHC) is eligible for all or part of their care and support package to be funded by Health. CHC is care that is free care outside of a hospital that is arranged and funded by the NHS. It is awarded depending on whether a person's primary need is a health need.
14. In addition to this, 100% of all accepted referrals will be considered for employment / apprenticeship / internship opportunities. Outcome will be the widening of employability.

Reporting

15. All the team's targets and intended outcomes will be reported to the Group Manager, Younger Adults, twice per year in January and July. This is to fit with the academic year cycle.

Improving Transitions between Children's and Adults' Services

16. The above measures will help facilitate wider joint proposals developed between colleagues in Children's (Integrated Children's Disability Service [ICDS] and the Children's Disability Team [CDS]) and Adults' Services (Countywide Transitions Team) that seek to explore and implement further options for greater alignment of services and interventions across both services, with the aim of:
 - sharing information at an earlier stage on individuals requiring support into adulthood, especially those with complex needs, and ensuring a smooth transition for the individual
 - maximising young people's independence and life chances through inspiring a culture of enablement and progression
 - identifying more cost-effective care solutions, and
 - prioritising support to service users where it will have most impact.
17. Other areas of exploration include aligning the enablement offer (i.e. targeted short term support to prevent or delay a person requiring longer-term support) across Children's and Adults' services - to ensure that it is coherent and consistent. This will build on joint working relationships already established between the Early Support Team within the ICDS and NES, being delivered within Adult Social Care and Health.
18. The potential to align the criteria and processes for short breaks will be explored so that there is less of a difference during the transition period, as will the potential to align the Direct Payment and Personal Budgets process and criteria across Children's and Adults' services.
19. The proposals for greater alignment of services and interventions across both services will also consider the potential to align information, advice and signposting across the system to support those young people with lower level needs. The work will also consider extending the use of customer services, clinics and information events to maximise reach

and reduce the need for one to one meetings and assessments, wherever possible. This will build on successful joint work / events already taking place across both departments.

20. The services will explore the use of Assistive Technology (AT), including using AT earlier when the service user is still in Children's Services; and the benefits of embedding a commissioning and assessment culture based on a model of progression across both Children's and Adults' services as a means of helping individuals to achieve their potential and aspirations, whilst maximising the cost effectiveness of support.
21. The promotion of independent travel training will build on an existing project being delivered in Children's Services and Adult Social Care. Work will also focus on the promotion and alignment of employment support across Children's and Adults' services, utilising the services of the iWorks Team and the Employment Hub (which sit within Adult Social Care) within Employability Plans developed by ICDS.
22. The above would be taken forwards in two phases:

Phase I

23. This would involve the development of a framework to facilitate further improvements to the joint working across both departments in delivering a Preparing for Adulthood service. Whilst the age range that each team serves will not change from existing arrangements (0-18 years for CDT, 0-25 years for ICDS, and 14-25 years for the Transitions Team), the priority focus of the framework will be those service users aged 16-21 years going through transition, as this is where most casework / cost applies.
24. Within this age range, those individuals in Independent Non-Maintained school placements and Looked After Children placements will be prioritised. It is anticipated that those service users with lower presenting support needs would be sign-posted to external support available from universal service provision.
25. Mechanisms for facilitating an effective integrated service would include:
 - development of Terms of Reference for regular joint management team meetings between Transitions, ICDS and CDS Team Managers. This will set a formal basis and framework for agreeing priority cases so that information can be shared at an early stage of the transitions journey, and actions / outcomes jointly agreed
 - sharing five year forecasting data across the teams, to help prepare for future Transitions cases.
 - in addition to delivering joint clinics / information events for service users, delivering joint training sessions for staff working across ICDS, CDS and Transitions Teams.
26. This phase would also involve seeking an independent view on whether there are any further longer-term implementation options for improving the transitions process between Children's and Adults' Services.

Phase II

27. This will involve implementation of any agreed longer-term recommendations stemming from independent scrutiny of the transitions process during Phase I, also informed by lessons learned from delivery of the integrated framework in the interim. These would be

brought to Adult Social Care and Public Health Committee for consideration and approval at an appropriate point in the future.

Other Options Considered

28. The options for greater alignment of services and interventions across Children's and Adults' services outlined in **paragraphs 17-21** above have stemmed from joint discussion between colleagues working in both services. The outcome of the independent review will determine if there are any further longer-term implementation options for improving the transitions process between Children's and Adults' services.

Reason/s for Recommendation/s

29. The update on the development of appropriate performance measures with a focus on working with young people at 14 years was requested by the Committee at its meeting on 9 January 2017.
30. The request to proceed with plans to explore options for greater alignment of services and interventions across Children's and Adults' services for children and young people aged 0-25 years is recommended as:
- there is an increasing trend of more children requiring support with more complex needs who are living longer and who will require ongoing support when adults. This is putting pressure on both Children's and Adults' services and budgets, including those working on supporting the Transition cohort.
 - currently, the provision of support to the Transitions cohort sits across two departments. This means there is a risk of non-alignment of service delivery, targeting and strategy development.
 - a joint Local Area Inspection of Nottinghamshire's Special Educational Needs and Disability (SEND) arrangements in 2016, carried out by Ofsted and the Care Quality Commission, identified that the local area needs to have a greater focus on preparing young people for adulthood. This work needs to be done at a time of increasing demand for services, and significant financial challenge. The Inspectors noted that a transition protocol had been produced to address concerns and anxieties about the move between children's and adult services, but that further work was needed before this was fully implemented. A multi-agency SEND Action Plan was established to consolidate the work of the various SEND improvement streams across the local area, and a SEND Accountability Board has been established to oversee the development, monitoring and implementation of the Plan. Please refer to the background papers for further detail.
 - The Care Act 2014 and the Children and Families Act 2014 have enhanced the focus on Preparing for Adulthood and widened the criteria for both transition assessment and access to Education Health and Care Plans.

Statutory and Policy Implications

31. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working and where such

implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

32. Indicative cost avoidance savings of £0.220m over 2017/18 to 2020/21 are anticipated to stem from greater alignment of services and interventions across Children's and Adults' services in relation to the Transitions cohort. In the main, it is anticipated this will be achieved through: interventions of the Community Independence Worker and Promoting Independence Worker in the Notts Enabling Service focussed on Transitions cases; and the use of Assistive Technology earlier, when the service user is still in Children's Services.
33. The lessons learned from delivery of the integrated framework and recommendations from the independent review in Phase I will test and confirm any revisions required to the savings target / profile for Phase II.
34. Delivery of the measures outlined in **paragraphs 17-21** will be supported by existing operational staffing resource working in relevant Children's and Adults' services, together with additional temporary staff approved to support delivery of any interdependent projects (e.g. NES, AT), plus Programmes and Project Team support. The NES service will be evaluated in October 2017 and if the projected benefits of this new approach are confirmed as being achieved, then Committee approval will be requested to continue this service
35. The learning and recommendations from Phase I will inform any changes to existing staff resource proposed during Phase II, including potential redeployment of some existing staff to areas of greatest return on investment, additional resource requirements, and any structural changes required. This would be considered as part of a further report that will be brought to the Committee at an appropriate time in the future, in order to seek approval to proceed with any Phase II recommendations (and approval of any associated additional resource requirements).
36. The cost of the independent view will be covered by Improved Better Care Funding and ASCH earmarked reserves.

Public Sector Equality Duty implications

37. An Equality Impact Assessment has been undertaken to consider the impact of the areas of further exploration outlined in **paragraphs 17-21** above. This has concluded that whilst there will be positive and neutral impacts from these, there could also be some potential or perceived negative impacts for the protected characteristics of age and disability as:
 - some will no longer require support or be eligible for support, or may only be eligible for short-term support.
 - the responsibility for meeting non-eligible needs and providing support beyond when it needs to be delivered by the Council will become the responsibility for the individual or their carers.
 - for those that are eligible (and existing service users), the level and type of support will vary, and may not be their first choice of service.

38. These will be mitigated by:

- the Council's assessment and review process, and subsequent support planning process, which will ensure that any changes to care packages are informed by service users' current needs, and that the real cost of needs are met. Services will only be removed or reduced if individuals have been assessed as no longer requiring them.
- as part of the review process, carers will be asked if they are willing / able to provide care, and their response to this will be factored into the support planning process.
- over the longer-term, any impact on service users as a result of any reduction in the type or level of support provided will be managed through the care management and reviewing process. Therefore, if outcomes are different to predicted, this will be picked up when care packages are reviewed at their next scheduled review.
- the Council's Adult Social Care Strategy provides a framework within which officers can make decisions. The Department's complaints procedure describes escalation procedures, as required.
- the local adult multi-agency safeguarding procedures should provide a system for alerts to be raised where people may be at risk of significant harm. Safeguarding procedures do not rely on people being in receipt of services if they are in need of protection from significant harm. This should prevent people 'falling through the net' of support if it is needed.
- separate work is being undertaken with voluntary and community organisations to invest in a range of information, advice and support services to carers.
- if a request is received to assess an individual for care and support needs, this would be completed.

Implications for Service Users

39. The areas of further exploration outlined in **paragraphs 17-21** above will impact on young people/ young adults (and their families) who:

- have a permanent and substantial learning or physical disability.
- have significant mental ill health.
- have neurological conditions, including those with ADHD and Asperger's syndrome.
- are over the age of 14 years and have an Education Health and Care Plan.

40. As outlined above, the priority focus will be those service users aged 16-21 years going through transition and, of these, those individuals in Independent Non-Maintained school placements and Looked After Children placements will be prioritised. The manner in which they will be affected will be dependent on the options that are developed and implemented. However, anticipated positive changes will be:

- a. improved and earlier planning for the move from Children's to Adults' services for young people and their families.
- b. eligible young people aged 12/13 years may have earlier engagement than they might otherwise have done from the Transitions Team, e.g. through the use of clinics in special schools and information fairs.
- c. increased independence, and hence quality of life, for some service users and their families through implementation of the progression model.

Ways of Working Implications

41. The delivery of Phase I should have no Ways of Working implications (as outlined in **paragraph 34** above) as it will be done by existing staffing arrangements. Any Ways of Working Implications stemming from the learning and independent review recommendations from Phase I will be considered as part of a further report that will be brought to the Committee at an appropriate time in the future, in order to seek approval to proceed with any Phase II recommendations.

RECOMMENDATION/S

That Committee:

- 1) comments on the update on the development of appropriate performance measures with a focus on working with young people at age 14 years.
- 2) approves the proposal to proceed with Phase I, as outlined from **paragraph 23** of the report.

Sue Batty
Service Director - Mid Nottinghamshire

Ainsley Macdonnell
Service Director - North Nottinghamshire & Direct Services

For any enquiries about this report please contact:

Paul Johnson
Group Manager, Younger Adults - Bassetlaw and Newark
T: 0115 8546220
E: paul.johnson@nottsc.gov.uk

Constitutional Comments (LM 10/08/17)

42. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Public Health Committee.

Financial Comments (CT 30/08/17)

43. The financial implications are contained within paragraphs 32 to 36 of this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- Report to Adult Social Care and Health Committee, 9 January 2017. *Strategic Update and Reconfiguration of the Countywide Transitions Team.*
- Report to Children and Young People's Committee, 19 September 2016. [Joint Local Area Special Educational Needs and Disability \(SEND\) Inspection in Nottinghamshire.](#)

- Equality Impact Assessment.

Electoral Division(s) and Member(s) Affected

All.

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