Preparing for Adulthood for Young People with Disabilities and/or Learning Difficulties

Guide for Practitioners in Social Care, Health and Education Services
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OUR VISION

We recognise that the period of transition to adult life can be a very unsettling time with young people and their families facing the challenge of understanding, navigating and working with the education, social care and health systems. At the same time they are making choices about the future which will have a profound effect on their lives.

The vision we have for preparing for adulthood is that all young people with learning difficulties and/or disabilities, aged 14-25, experience transition to adulthood as a positive and exciting time where they can explore possibilities and plan for their future lives. We can assist young people in reaching their full potential as an adult, by ensuring the transition process will be driven by the young person and their family, and not by the agencies surrounding them.
1. INTRODUCTION

Preparing for adulthood is a very important period of time where a young person with learning difficulties and/or disabilities is helped to prepare for adult life. The transition phase starts from age 14 (Year 9) and continues for several years sometimes up to age 25.

During this time, children’s services practitioners with their colleagues in adults’ services will work together with the family to understand the young person’s needs and how those needs can be met by when they reach the age of 18.

The pathway is complex and there will be times when practitioners need support. This handbook is designed to provide summary information, guidance and advice on best practice for all the practitioners involved with young people during transition. It is each individual worker’s responsibility to ensure that they have read the handbook to draw on resources where a case requires it.

Legal and policy context

The previous Government’s Aiming High for Disabled Children (AHDC) programme included Transition Support as one if it’s five work streams and outlined that access to an adviser or keyworker, advocacy support and person centred planning from the age of 14 will help young people through this period.

The Children and Families Act 2014 has created a new ‘birth-to-25 years’ Education, Health and Care Plan (EHC) for children and young people with special educational needs, and offers families the possibility of personal budgets so that they have more control over the type of support they get. The Children and Families Act requires local authorities to involve children, young people and parents as equal partners to review and develop care for those with special educational needs. Local authorities will also publish information about what relevant support can be offered locally.

The Care Act 2014 gives young people and carers of children a legal right to request an assessment before they turn 18. This is to help them to plan for the adult care and support services they may need. The Act says that if a child, young carer or an adult caring for a disabled child (or ‘child’s carer’) are likely to have needs when they, or the child they care for, turns 18, the local authority can assess them if it considers there is ‘significant benefit’ in doing so. This is regardless of whether the person currently receives children’s services. The Act states that information should be given at the point of assessment about whether the young person or child’s carer is likely to be eligible for public care and support. The person should receive advice and information about what can be done to meet eligible needs, as well as what they can do to stay well, and prevent or delay the development of needs. If the local authority does not accept a person’s request for an assessment, it must explain why in writing. It must also provide information and advice about what the person can do to prevent or delay the development of care and support needs.

The Care Act and the Special Educational Needs provisions in the Children and Families Act require that there is cooperation within and between local authorities to ensure that the necessary people cooperate, that the right information and advice are available and that assessments can be carried out jointly. The two acts have the same emphasis on outcomes, personalisation, and the integration of services, which is why it is essential that planning implementation is joined up.
**Children and young people in transition in Tower Hamlets**

The table below gives an indication of the number of young people with disabilities in Tower Hamlets who are preparing for adulthood. The table includes the number of young people supported by Children with Disabilities Team in Children’s Social Care, and the number of young people eligible for the Community Learning Disability Service in Adult’s Social Care.

<table>
<thead>
<tr>
<th>Year</th>
<th>Young Person with an allocated social worker in the Children With Disabilities Team</th>
<th>Young People Looked After in the Children with Disabilities Team</th>
<th>Eligible for Community Learning Disability Service (CLDS) (either social worker or NHS practitioner allocated) aged 16, 17 and 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>79 young people aged 14 and above</td>
<td>13 young people aged 14 and above</td>
<td>43 assessed as eligible and 16 waiting to be assessed</td>
</tr>
<tr>
<td>2013</td>
<td>86 young people aged 14 and above</td>
<td>9 young people aged 14 and above</td>
<td>30 young people assessed with 24 young people being eligible</td>
</tr>
<tr>
<td>2012</td>
<td>97 young people aged 14 and above</td>
<td>10 young people aged 14 and above</td>
<td>33 young people assessed with 24 young people being eligible</td>
</tr>
<tr>
<td>2011</td>
<td>93 young people aged 14 and above</td>
<td>7 young people aged 14 and above</td>
<td>46 young people assessed with 41 young people being eligible</td>
</tr>
</tbody>
</table>
2. OUTCOMES OF EFFECTIVE PREPARATION FOR ADULTHOOD

The national Getting a Life programme ran from April 2008 to the end of March 2011, as part of the Valuing People Now employment work. It was set up to show what needs to happen so that young people with a severe learning disability achieve paid employment and full lives when they leave education. The programme set out very simply and clearly the outcomes from a successful transition. These are the outcomes we are aiming for in Tower Hamlets.

Our transition process is person-centred which means that the focus of the process is the young person’s needs, wishes and aspirations. It is a transparent process with young people and their families provided with accessible information at the right time about assessments, educational provision, services available and funding arrangements in order to maximise their involvement in planning and decision-making.
3. STAKEHOLDERS IN PREPARING FOR ADULTHOOD

Although the particular stakeholders involved in a young person’s transition will vary depending on the young person and their needs, many of the following people are likely to be key stakeholders in most cases:

- The young person
- The young person’s family
- The young person’s peers
- The SENCO at the young person’s school
- Children’s Services Transition Social Worker and/or their allocated social worker from the Children with Disabilities Team, Children’s Social Care Social worker from the Transition Team in Community Learning Disability Service (CLDS), in Adults’ Social Care or social worker from the Longer Term Support Team in Adults’ Social Care for a young person with a physical disability
- Careers Adviser from the Careers Service
- Educational Psychologist
- Advisory Teacher from the Support for Learning Service
- Health professionals involved with the young person
- Leaving Care Team (for young people who have been Looked After)
- Special Education Needs (SEN) Section (for young people with a EHC plan of SEN)
- Parents Advice Centre
- Voluntary agencies involved with the young person, in particular their short breaks provider; the local employment support provider; or providers of information, advice and advocacy support.

Information on these services is available in the Directory of Services and Short Break Statement for Disabled Children and Young People, available on the Tower Hamlets Council internet in the health and Social Care section, by following the link to the pages on disabilities.
4.1 Lead practitioner

With so many stakeholders involved it is essential that their input to the process is coordinated. This means that all young people need to have a Lead Practitioner/Lead Professional to coordinate their support and act as a key point of contact. In some cases, the young person’s allocated social worker or their Transition Social Worker in Children’s Social Care will take on this role, and at age 18 pass on this responsibility to a new Lead Practitioner in the Community Learning Disability Service or Longer Term Support Team. Alternatively, the Lead Practitioner until the young person is age 18 may be their Careers Advisor in the Careers Service.

A Lead Practitioner acts as a single point of contact for the child, young person and/or family. This means this person should be someone that the family can trust, who is able to engage and support them in making choices and in navigating their way through the support systems and in effecting change.

Having a Lead Practitioner benefits the young person and their family by reducing the number of times they have to repeat information to different practitioners and by ensuring that there is one person who will coordinate the delivery of actions agreed by the practitioners involved.

The idea for a Lead Practitioner came directly from feedback from families who said they found liaising with lots of different people confusing, time wasting, impersonal and demoralising. Having a Lead Practitioner contributes to effective and integrated action and reduces the likelihood of a child or young person’s needs or safety being overlooked.

The lead practitioner should work with the other stakeholders to:

- promote person-centred transition planning
- identify options for future education and training and, if appropriate, their care arrangements
- ensure the Continuing Care screening tool is completed prior to transition (which is the responsibility of Adults’ Services)
- seek agreement for funding of ongoing care packages (if they are required) prior to transition to Adults’ Services
- attend school reviews, pathway reviews and case conferences.

The role of Lead Practitioner is allocated for a time limited intervention linked to the action plan and can change over time as the needs of the child or young person change.

Acting as Lead Practitioner for a particular case may involve the individual practitioner in some additional work but the system as a whole benefits. Coordinating efforts and activity in this way prevents duplication and wasted effort and gives better services to families.

It is responsibility of the other stakeholders involved in the ‘Team Around the Child/Young Person’ to engage with and support the Lead Practitioner in meeting the needs of the young person by inputting into assessment, planning and advice to the young person and their family as needed.

For more information on the Lead Practitioner go to page 21 of the Family Wellbeing Model, available at: www.childrenandfamiliestrust.co.uk/family-wellbeing-model.
4.2 Professional responsibility

Working in this multi-agency and multi-disciplinary context can be challenging. Individual practitioners must take responsibility for their own actions as professionals working in a multi-agency context. Each practitioner working with young people in transition in Tower Hamlets has personal professional responsibility for ensuring outcomes for individual young people. It follows therefore that s/he must take responsibility for being well-informed and having professional knowledge about transition to adult life of young people with SEN, learning difficulties and/or disabilities and services and support available in Tower Hamlets. Practitioners are responsible for identifying their own professional development needs and opportunities and for taking part in professional development.

4.3 Resolution of disagreements between services

It is inevitable that despite positive attitudes and close working relationships, there will occasionally be differences in opinion between services about the best way to help a family.

Where a Lead Practitioner is in place, the Lead Practitioner should be given primacy in resolving any differences related to the support a family needs. Other professionals should respect the role the Lead Practitioner has taken on and work with their proposals for supporting the family wherever possible.

Where there are disputes that cannot be overcome in this way – including disputes about who is to act as lead professional the following process should be followed:

1. Resolution should first be attempted between the relevant practitioners, who should remember at all times that the needs of the young person and their family should come before the needs of the service.

2. In the event that practitioners cannot agree, their immediate line managers should be involved. They should work with practitioners to resolve the dispute. They should also, subsequently, look into why there was a problem resolving the issue in the first place and if necessary address any structural issues, or offer any helpful training or advice, that would prevent a similar dispute arising in the future.

3. Thereafter the issue should be taken through the line management structure of each agency and ultimately to the senior directors in those agencies, if the dispute cannot be resolved in any other way.

4.4 Information sharing: The Year 9 Meeting

An Annual Information Meeting is arranged to plan support for the current cohort of young people in transition. This meeting takes place during the Autumn Term each year. The purpose of the meeting is to identify, for each young person in transition, who their lead team is that will be in putting into their Transition Plan. If the young person is known to the Children with Disabilities Team in Children’s Social Care, the Lead Practitioner will be the young person’s Social Worker and/or the Children’s Social Care Transition Worker. In all cases, including those where there is a lead in Children’s Social Care, a lead will also need to be identified from the Careers Service or from Community Learning Disability Service (CLDS), to input into the young person’s Annual Reviews and support the planning process for services and support for the young person once they reach 18.
Attendees at the meeting include representatives from:

- CLDS, Adult’s Social Care (and the meeting is chaired by the Transitions Team Leader or the Service Manager from this team)
- Children with Disabilities Team, Children’s Social Care
- Careers Service
- Educational Psychology
- Adult Psychology
- Adults Longer Term Support Team (for physical disability)
- Advisory Teachers from the Support for Learning Service
- Child and Adolescent Mental Health Services (CAMHs)
- Adult Mental Health.

The meeting is arranged and minuted by the administrative support in CLDS.

Data from a wide range of sources is shared and analysed to determine numbers of young people, understand levels of need and learn from monitoring and evaluation.

Data sources include:

- Social Care data from Framework
- data from the SEN Section on children with statements of SEN
- Careers service tracking data.

It is important that information relating to children and young people who are home schooled, is included as part of the transition planning process overseen in this meeting.

4.5 Operational group for overseeing of preparing for adulthood

This group, referred to as the ‘virtual’ transition team and the transition steering group, meets bi-monthly, and is chaired by the Transitions Team Leader from the CLDS. Core members (who attend regularly) include:

- CLDS Transitions Team Manager (Chair) and Senior Practitioner
- Children with Disabilities Transitions Team Manager and Social Worker
- Children’s and Adolescent’s Mental Health Service (CAMHS)
- Educational Psychology Senior Practitioner
- Careers Service - Lead Adviser SEN
- Leaving Care Services Team Manager, Children’s Social Care
- The Tower Project (Supported Employment Provider)
- Tower Hamlets College Foundation Learning Manager
- Barts and the London Children’s Health Services Lead Clinician
- Bangladeshi Parents Advisers.

Associate members (who may attend the group as and when appropriate and may include anyone who has an involvement in the transitions process) including representatives from:

- Community Health Services, Barts Health
- DWP Disabilities Employment Advisory Service
- Life Long Learning, Idea Store
- First Response Team, Adult’s Social Care
- Idea Store Learning
- Looked After Children, Children’s Social Care
- Longer Term Support, Adult’s Social Care
- SENCO lead
- Integrated Youth Service
- Schools and Colleges

The purpose of this group is to offer support and consultation to any professional working with young people in transition.

This includes:

- offering professional consultation and advice to practitioners working with
young people in transition
developing transition practice
raising awareness of person-centred
approaches in transition within their
primary team/organisation
identifying training needed across the
transition network and contributing to
the development of training.

The group reports to the Transitions
Strategy Group and Learning Disabilities
Partnership Board.

4.6 Preparing for Adulthood
Strategy Group

The Strategy Group is chaired by the
Service Head, Adult Social Care. This group
is responsible for overseeing the strategic
action plan for improving transitions. The
group meets bi-monthly.

Members include:
- Service Head Adult Social Care, LBTH (Chair)
- Service Manager, Integrated Service for Disabled Children, LBTH
- Joint Service Manager, Learning Disabilities, LBTH
- Strategic Commissioning Manager, Adult’s Commissioning, LBTH
- Children with Disabilities Commissioning Manager, Children’s Commissioning, LBTH
- Representative from the Tower Hamlets Clinical Commissioning Group or North and East London Commissioning Support Unit
- Service Manager, Careers, LBTH
- General Manager, East London Foundation Trust (CAMHs)
- Children’s, Families & Young Persons Integrated Manager, Barts Health
- Service Manager, Youth and Community Learning, LBTH
- Manager, Parents Advice Centre, LBTH
- Principal Educational Psychologist, LBTH
- Head Teacher representing LBTH schools
- Team Manager, Children with Disabilities Team, Children’s Social Care, LBTH
- Transitions Manager, Community Learning Disability Service
- Transitions Team, Adult’s Social Care, LBTH

This strategic group reports to the partnership Learning Disabilities Board and to the Preparing for Adulthood sub-group of the Children and Families Partnership.

4.7 Multi-agency preparing
for adulthood protocols
and pathways

Policies and protocols set out the
principles, practice and processes to be
followed. Pathways illustrate the process as
a flow chart diagram. A number of pathways
which are relevant for children with
disabilities are available in the Directory of
Services and Short Break Statement for
Disabled Children and Young People,
available on the Tower Hamlets internet. These include pathways for:

- Assessment and access to services for an additional need
- Direct Payments
- Short breaks self-referrals
- Autistic Spectrum Disorders
- Vision impairment
- Deaf/ partially hearing
- Transitions for disabled young people moving from Children’s to Adult Services. This pathway sets out the journey for transition from Children’s to Adult Services, from the family’s perspective.

In Tower Hamlets we want to be sure that we involve young people at all stages as we develop and improve services and help individual young people prepare for adult life.
TRANSITION PATHWAY FOR DISABLED YOUNG PEOPLE MOVING FROM CHILDREN’S TO ADULT SERVICES

Referral made after Year 9 meeting by lead professional (Education, CWDT, Careers, CSC, and CCNT/Health) to CLDS / Physical Disabilities Longer Term Teams.
Parents should be part of this process including a person centered plan with the young person that should be updated each year. CLDS then, on behalf of the Adults Services, add this referral information to the tracking list in preparation for joint working at 16 years of age. Careers Service also attends the Annual Reviews from Year 9.
If your child is Looked After in foster care or residential care then a CLDS worker will attend a yearly review from 16 (aiming to attend earlier from 14 onwards).

At age 16
If the assessment by Adult Social Care finds that the young person does not meet the FACS criteria and will therefore not be eligible for Adult’s Social Care services once they are 18, advice will be given about the reasons for this and the family will be sign-posted and advised on other Adult services that can be accessed.
If the young person is known to CWDT or receiving a care package of support then a joint assessment will be undertaken between CLDS and CWDT. If your child has complex health needs then CCNT will be consulted as part of this process. If the young person is not known to CWDT then a Single assessment for eligibility will be undertaken by a CLDS Worker.

Age 16 -19: Education and Beyond. Autumn term of Year 11 is the deadline for applications for post 19 education placements.
When the young person is ready to leave school, generally between the ages of 16-19, an assessment is completed by the Careers Service (alongside the current school) and will consider the young person’s future education plans, options around apprenticeships and work experience. This should centre on the young person’s views and wishes.

Age 16 to age 18: Eligible for Adult Transition
If the young person is assessed as meeting the FACS criteria by 17.5 years of age, CLDS/ Physical Disabilities Longer Term Teams will inform the family and the young person what support will be provided by CLDS post-18. Children’s Social Care will also continue to work with the young person until their 18th birthday.

Age 16 to age 18: Not Eligible for Adult Transitions and receiving a service from CWDT
A transitions social worker in Children’s Social Care can be allocated to Support the family and young person to identify resources and support that may assist beyond 18 if the family and young person think this will be helpful.

Age 18:
On the young person’s 18th birthday, Adults Services will provide the agreed financial support and ensure that the agreed transition plan is put in place. The lead professional identified will continue to support the young person until all identified needs have been met and/or there is a natural finish to the lead professional’s involvement with the young adult.

Age 18 -25: Education and Beyond. Autumn term of Year 14 is the deadline for applications for young people in specialist schools

CLDS Manager may sit on CWDT Funding Panel when children (14 +) are presented to panel to ensure continuity of decision making.
CLDS Service Manager sits on Joint Funding Panel to ensure joint decision making regarding Residential School Placements.

We are reviewing this regularly to see what is working
This is the start for earlier joined up working between children’s and adults
5. PARTICIPATION OF YOUNG PEOPLE AND THEIR FAMILIES

In Tower Hamlets we want to be sure that we involve young people at all stages as we develop and improve services and help individual young people prepare for adult life.

5.1 Participation in preparing for adulthood service development

To help in planning and developing services the Children with Disabilities Team in Children’s Social Care and the Support for Learning Service run a Fun Day for primary and secondary school children. The event for secondary school age includes young people spending a day taking part in fun activities and sharing with us their ideas about their futures plus feedback on the way support is provided.

We are also developing the way in which we routinely capture the feedback and views of young people as they leave Children’s Services, so that we can learn from their experiences and find ways to improve things.

Involving parents and carers in service development is also a priority. This is done through consultation with our parents’ forum, Parent and Carers of Children with Special Educational Needs (PACSEN). This is a forum for all parents and carers of children with SEN and/or disabilities in Tower Hamlets. The Forum meets regularly with professionals from education, social care and health services to discuss children and young people’s needs and how to improve services. There is a steering group of elected parents who meet monthly to plan future events and report back to the full Forum quarterly. Forum members attend regional and national workshops on topics such as short breaks and transition, and plan to produce a termly newsletter distributed through schools. As well as the strategic work of the Forum there are regular events for families with speakers on issues such as welfare reform and sex and relationships, as well as trips and fun days. A support group is run every Friday 11.00am to 1.00pm in PACSEN’s self-contained space at the Parents Advice Centre (PAC), 30 Greatorex Street, E1 5NP. All parents are welcome. Further information is available on the Forum’s website www.pacsen.org.uk where a chat room for parents is being developed.
5.2 Participation in planning for adult life

On an individual level, young people are at the heart of planning during transition. In Tower Hamlets we use a person-centred model of planning. The aim of this approach is to offer a more personalised and outcomes-focused way of identifying and meeting a young person’s additional support needs.

On a national level, disabled children from Generate UK and 1 Voice worked with the Council for Disabled Children (CDC) and Participation Works to produce a poster on what disabled people want. This was part of their ‘Making Ourselves Heard’ project. This poster shows, in young people’s own words, what we can all do to ensure that disabled young people are able to realise their citizenship rights to participate in all decisions and issues that affect them. The poster is available on the Participation Works website.

**Top Tips for Participation**

**what disabled young people want**

- **Respect us**
  - "Trust us – we need to trust you."
  - "If you give us respect – we’ll give you respect."

- **Involve us from the start**
  - "You can find out what’s best for us by involving us."
  - "Don’t guess what we want."

- **Listen to us**
  - "If you don’t listen to what we want – how can you give us what we want?"
  - "Listen to me, no one else. Listen to me. It’s my body. Listen to me, it’s my life, listen to me."

- **Make it fun!**
  - "We’re teenagers, we’re young, we want to learn."

- **Involve all of us**
  - "Don’t judge a book by its cover – we can all make choices."
  - "I may not have speech, but I have a voice – I can give my opinions, I can even argue."

- **Make sure we get something out of it**
  - "Participation is a great way to help us learn how to make decisions and understand the choices we may face in the future."
  - "Gives us new skills."
  - "Empower us."

- **Give us time**
  - "I know what I want to say – give me time."
  - "Give me time to get my message ready."
  - "Help us make decisions by giving us our time – enough time."

- **Support us to make our own decisions**
  - "I want more choice."
  - "If you listen to us you can help us get a positive outcome."

**Making Ourselves Heard**

Council for Disabled Children, NCB
8 Wakley Street, London EC1V 7QE
Tel 020 7843 6000
Fax 020 7843 6313
Email vwright@ncb.org.uk
www.ncb.org.uk/cdc
Charity registration no. 258825

Produced in partnership with young people from Generate UK and 1Voice
WORDS OF WISDOM

Young person’s perspective:

“We want to be part of the world and not stuck behind closed doors”.

“Don’t prejudice what we can or can’t do. Don’t put a ceiling on what we can achieve. It’s okay for us to try things that might not work – just like anyone else”.

Parent’s perspective:

“We don’t have those meetings anymore where no one knows who’s doing what. It’s brought everyone together”.

“We are all so used to just being told ‘no’ or ‘that’s not possible’. It was amazing to sit down with someone who asked my daughter what she likes and what she’s interested in. They got to know her and then we worked out a plan for support together. It’s been fantastic – I’ve never seen her so well and happy”.

Practitioner’s perspective:

“Start by removing barriers that might prevent disabled people from accessing universal services and making reasonable adjustments to promote equal access”.

“We couldn’t have done any of this without our parents and carers. They have been amazing. They have kept us grounded and given us valuable insight into what life is like for them and their families. We need to do more to work with young people themselves”.

“Be aware of the different language that parents and professionals use. ‘When I go to the pub I am having a night out. If my son goes to the pub he is ‘accessing the community’. When I shout or swear I’m angry about something. When my son does this he’s ‘displaying challenging behaviour’.”
6. EFFECTIVE PREPARING FOR ADULTHOOD PLANNING

The Tower Hamlets Partnership is committed to offering a person-centred, transparent and timely transition service for young people with SEN or continuing support needs.

For the transition process to be truly person-centred, young people must have access to information that helps them understand what happens at transition, how to participate in the planning process and how to make informed decisions about their future.

By ‘transparent’ we mean that at all stages of transition young people and their families will be made aware of the process, options for support that are available, decision-making processes and funding arrangements.

By ‘timely’ we mean that all young people with SEN or continuing support needs will have the opportunity to attend a transition planning meeting by the time of their 14th birthday (during Year 9), where appropriate combined with the SEN Annual Review.

6.1 Key elements of preparing for adulthood planning

Planning for transition needs to be based on:

- the wishes, hopes and aspirations of the young person
- a clear understanding of the young person’s needs gained by speaking to the young person and their family and from appropriate professional assessment
- the young person’s views as to how their need can best be met and their preferences for the way support is provided
- health and safety including freedom from harm, abuse and neglect
- autonomy and freedom to make choices
- the ability to manage personal and other daily routines
- involvement in work, family and wider community life.

6.2 Opening the front door to Adult Social Care

The Transitions Team in the Community Learning Disability Service (CLDS) is developing so that the service can start working with all young people with learning disabilities from age 14. It will take some time to get to this position due to the need to build up the resources in this team. They are now expected to be working with young people from age 16, in order to better plan with young people and their families for the support they need as they enter adulthood. This earlier involvement from CLDS will include earlier assessments about whether the young person meets the eligibility criteria for Adult Social Care. By aiming to work with the young person, their family and colleagues in Children’s Services from when the young person is aged 14, the service will input into the planning for those children who do not meet the eligibility for continuing support from CLDS, by signposting to and advising on other relevant services.

Eligibility for Adult Social Care is based on the national ‘Fair Access to Care Services’ (FACS) rules. All councils must use these rules so that everyone, no matter where they live, is treated in the same way. They also make sure that the people who are in most need receive services. According to the rules, eligibility for services depends on the level of risk to the young person’s independence in four areas:

- health and safety including freedom from harm, abuse and neglect
- autonomy and freedom to make choices
- the ability to manage personal and other daily routines
- involvement in work, family and wider community life.
Needs are categorised into one of four bands – critical, substantial, moderate or low. Councils are not able to help everyone who asks for support. They set a level of need that is the minimum requirement for people to receive services and in Tower Hamlets, the level is ‘substantial’. An example of this would be if the young person is unable to carry out most personal and domestic routines. Further information is available on the Council website in the section on Health and Social Care, by following the links to:


Where a young person meets the FACS criteria, they will receive a service from the Community Learning Disability Service (CLDS) if they have a learning disability which includes the presence of:

- a significantly reduced ability to understand new or complex information and to learn new skills (impaired intelligence), with
- a reduced ability to cope independently (impaired social functioning);
- which both started before adulthood, with a lasting effect on development.

This definition encompasses people with a broad range of disabilities. The presence of a low intelligence quotient, for example an IQ below 70, is not of itself a sufficient reason for deciding whether an individual should be provided with additional health and social care support. An assessment of social functioning and communication skills should also be taken into account when determining need. Many people with learning disabilities also have physical and/or sensory impairments. The definition covers adults with autism who also have learning disabilities, but not those with a higher level autistic spectrum disorder who may be of average or even above average intelligence.

There are some young people who will be eligible for a CLDS service but not for FACS. For example when there are health needs and adaptations are required, speech and language, counselling, equipment needs, etc. CLDS will signpost to appropriate services that would meet these needs.

There are some young people who will meet the FACS criteria but who will not be eligible for a service from CLDS, for example young people with physical disabilities. These young people will be eligible for services from the Longer Term Support Team in Adult Social Care.

If the Transitions planning process identifies that the young person doesn’t meet the eligibility criteria for any support from FACS services in Adult Social Care once they are 18, information and support will be given for accessing alternative universal services. CLDS is developing a document for families with information on services that are available for young people who do not meet the FACS eligibility criteria for Adult Social Care. This will be provided when families are informed that the young person is not eligible for Adult’s Social Care.

Longer term, a new Tower Hamlets Autism Strategy is in place which includes work to develop a new Diagnostic Intervention Service which will improve services for adults with autism who don’t have a Learning Disability.
6.3 Person Centred Approach to Preparing for Adulthood Planning

The lead practitioner (which could be Children’s Services social worker, the careers adviser, or the lead school professional) works with the young person and their network – including the school, Careers Service, where appropriate health services, the practitioner from CLDS and other stakeholders - to develop a person-centred preparing for adulthood plan. The Plan should address the following:

- What the young person enjoys, where they feel they have strengths, and what their support needs are
- What is working well in their life and anything the young person would like to change
- What is important to the young person at the present time
- What is important to the young person in relation to their future - their hopes and aspirations
- A plan for education, training or employment
- How the young person will stay safe
- How the young person’s health will be maintained and how their health needs will be met
- The young person’s communication needs
- Who is involved in supporting transition planning for the young person (with contact details)
- When the plan will be reviewed.

Schools are responsible for arranging an EHC Review for pupils with a statement of special educational needs. It is important that the reviews are appropriately timed to ensure there is enough time to set up the Transition Plan to next step provision.

The EHC plan in Year 9 and any subsequent reviews until the young person leaves school must include the drawing up and subsequent review of a Transition Plan.

The Transition Plan should draw together information from a range of individuals within and beyond school in order to plan coherently for the young person’s transition to adult life. Transition plans when first drawn up in Year 9 are not simply about post-school arrangements; they should also plan for on-going school provision, under the statement of SEN as overseen by the local authority. Full detail of the statutory requirements for transition planning is contained in the SEN Code of Practice (2001) available on the Department for Education website.

Schools in Tower Hamlets have been encouraged to develop person-centred reviews and most special schools have received training to support the development of person-centred approaches. However, at present not all schools do this. Where the Transition Plan developed by the school is insufficiently personalised, the young person’s Lead Practitioner should work with the young person and their family to develop a more personal plan.
Key principles of person-centred planning are:

- The young person is at the centre
- Family members and friends are partners in planning
- The plan helps build the person’s place in the community and helps the community to welcome them. It is not just about services; it reflects what is possible, not just what is available.
- The plan results in ongoing listening, learning and action.
- Putting the plan into action helps the person to achieve what they want out of life.

A copy of the EHC Plan (which includes a transition plan) should be:

- given to the young person and their family
- placed in the young person’s case file for all relevant services, including Adult’s Social Care, Children’s Social Care and SEN
- sent to the school

There is further detail about person-centred planning at:

- [www.transitionsupportprogramme.org.uk/pdf/NTST_Person_Centred_Approaches.pdf](http://www.transitionsupportprogramme.org.uk/pdf/NTST_Person_Centred_Approaches.pdf)
- [www.helensandersonassociatesco.uk/reading-room/how/person-centred-planning.aspx](http://www.helensandersonassociatesco.uk/reading-room/how/person-centred-planning.aspx)
- [www.circlesnetwork.org.uk/index.asp?sl=0z128z143&parent_id=143](http://www.circlesnetwork.org.uk/index.asp?sl=0z128z143&parent_id=143)

### 6.4 Assessments

At the individual level a range of assessments can contribute to transition planning, including the following:

- Common Assessment Framework
- LBTH Assessment Framework
- Carer’s Assessment
- EHCP (Education, Health, and Care Plans) and reviews
- Educational Psychologist’s assessment
- Multi-agency assessment under The Children (Leaving Care) Act 2000
- Assessment and planning of support 16+/post school
- Care Planning Assessment (NHS and Community Care Act, 1990)
- Fair Access to Care
- Mental Health Assessment.

In Tower Hamlets the Careers Service will attend EHC Plan meetings from year 9. The Careers Service worker will advise and support the young person in preparing for adulthood and post 16 education, training and higher education.

Further information is available at: [www.transitionsupportprogramme.org.uk/resources/guidance.aspx](http://www.transitionsupportprogramme.org.uk/resources/guidance.aspx)

There is also more detail in the section below on further education.
6.5 Decision-making: the role of Panels

There are a range of panels in Tower Hamlets where decisions are made on a child or young person’s access to services and where managers from a range of services aim to coordinate service provision and ensure efficient and fair use of resources.

There are particular integrated panels which are relevant for young people in transition, because they make decisions about both eligibility and the funding of services for the young person into adulthood. Relevant panels include:

- The Joint Commissioning Panel, for decisions on residential placements jointly funded between education, social care and health. The role of this panel includes critically assessing requests for post 16 residential college placements and it therefore incorporates the Independent Specialist Providers (ISP) Panel, which is explained in more detail in the section on further education, below.

- The Learning Disabilities Panel, for decisions on community based person-centered support plans; supported living; residential college placements; long-term residential placements; nursing placements; residential or nursing respite. The panel meets weekly to discuss submitted cases. As community based support plans and any form of nursing placement may have an element of health funding the CHC Manager for Tower Hamlets attends the panel to discuss these cases. These cases are also discussed at the NHS Continuing Healthcare Eligibility Panel and NHS Funding Panel for final ratification.

- The Combined Adults Panel has the same remit and structure as the Learning Disabilities’ Panel, but is in relation to decisions for people with physical disabilities and older people rather than people with learning disabilities.

- The NHS Continuing Healthcare Eligibility Panel meets on a weekly basis to discuss and ratify the recommendations of all submitted Decision Support Tools. The central Continuing Healthcare Team is responsible for quality control of the submitted Decision Support Tools. The panel will ratify multi-disciplinary team decisions for fully-funded continuing healthcare; funded nursing care (for nursing placements) and joint health and social care funding, where appropriate – in these cases a joint care plan identifying health and social care needs is requested for submission to both the NHS Funding Panel and Combined Adults Panel or Learning Disabilities Panel.

Due to budget accountability and governance requirements, sometimes the same case will need to be discussed at all three panels, with decision making of one panel having an impact on the decisions made in the others.

Decisions in relation to the care and support the child receives from Children’s Services, before they reach the age of 18, are made by Integrated Service for Disabled Children Funding Panel. Decisions that need to be made by this panel include decisions relating to personal care; specialist short breaks where an assessment is required; accessing the Disabled Children Outreach Service (DCOS); and nursing care package reviews.

There is also a Safeguarding Risk Management Panel which exists to give overview and scrutiny from a multi-agency perspective of cases involving vulnerable
It is important that Panel discussions on the future service provision for a young person include a practitioner who knows the family and who brings forward the voice of the parent and the young person. Where a lead practitioner is preparing a case to present at a panel meeting, it is important that sufficient information is presented to the Panel so that they have a clear understanding of the case, which clearly show the views and wishes of the young person and the views of their parent/carer.

The period during which a young person’s case is being taken to Panel meetings can be a very stressful time for the young person and their parent or carer. The decisions being made by the Panel will have a huge impact on the young person’s future. It’s therefore very important that the family understand the process, is kept informed of the progress of the decision-making (for example, if there are delays or more information is being sought) and that decisions made by the Panel are promptly and clearly communicated to the family. Lead practitioners should explain to families the process of decision-making via the various Panels and what the different outcomes of these decisions might be. Information on the discussions that have taken place in a panel meeting on access to services for the young person must be communicated in writing to the family, in order to make processes clearer for families and to ensure that the decision-making process of transparent. It’s also important that the family know who their lead practitioner is during this time, so they know who they can contact with questions or with new information.

For cases known to the Children with Disabilities Team in Children’s Social Care, the allocated social worker will use the template letter on Frameworki to communicate information on Panels, and the outcome of meetings, to families.

6.6 Information, advice and guidance

Planning for the future should be based on the wishes and goals of individual disabled young people. This could mean the young person being supported to choose what s/he wants to do next rather than having to choose from existing local options. Whatever choices disabled young people make about their future, having good access to support and information about possible options is essential, including ensuring that this information is a method of communication that suits their needs. Professionals working with disabled young people need to be able to respond to their questions about post-16 options and be able to signpost them to sources of more detailed information that will help inform their choices. This includes providing information about educational qualifications, courses and training available within Tower Hamlets and elsewhere in London.

6.7 Advocacy

Some young people and their families feel they need support to participate in planning the services they need. The Adults Services Information, Advice and Advocacy Service includes advocacy around the transition process for young people form the age of 14. This service is delivered by a consortium of agencies, and referrals are made to Real, who will triage cases to the most appropriate agency. Referrals can be made through ‘Real Answers’ on 020 7001 2177 or by emailing Real.Answers@real.org.uk.
Disabled young people must have the chance to live a fulfilled life with the same opportunities offered to them as their non-disabled peers. To do this young people need to be aware of and have access to services such as leisure, housing and transport. The national Getting A Life Project developed a useful range of ‘Pathways to Getting a Life’ to support transition planning. These illustrate planning for employment, housing, health and developing friendships and relationships. More information is available at www.gettingalife.org.uk/index.html
7.1 Further education

The Local Authority Careers Service is the key stakeholder in relation to information, advice and guidance on further education, employment and training options.

For some young people, continuing their education with a specialist provider may be appropriate. Those supporting young people in transition need to ensure that they understand the process for accessing specialist provision.

All local authorities have a duty to secure enough suitable education and training, from SEN schools to further education provision at Independent Specialist Providers (ISPs), to meet the reasonable needs of 16-19 year olds as well as those aged 19-25 who are subject to an EHCP plan and this is deemed appropriate.

Learners with learning difficulties and/or disabilities (LLDD) subject to EHC Plans will typically have a Transition Careers Advisers from the Careers Service. These plans are a result of the creation of a person-centred plan which considers each individual’s needs, their short and longer term goals and holistic needs, such as independent living and health goals. By the time learners are aged 16, they will receive careers guidance to look at appropriate transition arrangements which take account of their learning difficulty and identify provision post-16 which best meets the needs, targets and goals outlined on each learner’s plan.

Guiding principles for the Independent Specialist Providers (ISP) placement process:

- The London Borough of Tower Hamlets expects that for the majority of young people with special educational needs post-16 education and training will be delivered in a mainstream setting. Mainstream post-16 further education providers, e.g. FE colleges, are allocated additional learning support (ALS) funding, which is designed to enable them to respond flexibly to meet the individual, specific learning support requirements of young people with additional needs who access their provision.

- The local authority supports the principle that young people’s education and training needs are best met where they are able to continue to live in their local area and access local mainstream provision and existing links and support networks. It does not support the principle that independent living skills can only be delivered to young people with learning difficulties and/or disabilities in a residential setting or as part of a residential ‘24 hour curriculum’. Therefore the local authority expects local provision within the borough or the wider local area to make appropriate adaptations to include students with LLDD. However it is anticipated that the authority will continue to receive requests for post-16 placements at ISPs.

- In considering these requests, the local authority views the subject preferences expressed by the learner within their transition plans and person-centred review as central to the process. Furthermore, it will need to be satisfied that the proposed placement will best meet the educational and training needs of the young person.
While Tower Hamlets Council tries to take account of the wishes of learners, their families and/or carers, it does not have a legal duty to fund the ISP of their choice. This is particularly the case if it is satisfied that the ISP of choice does not meet the educational needs of the learner or if adequate alternative provision can be secured locally. The Council is required to take into account value for money considerations when making ISP placement decisions. The Council will not confirm funding and commissioning decisions until the full costs and affordability of a placement has been considered in the light of the overall budget available. The total costs of the placement include the additional social and health care costs that might be needed. A provisional placement decision may however be made in the context of budgetary indications.

In addition, Tower Hamlets Council will not consider funding a placement at an ISP not listed by the Education Funding Agency (formally the Young People’s Learning Agency) in Annex 3 of its publication Placement Information: Learners with Learning Difficulties and/or Disabilities 2011/12 and subsequent versions of the document. Similarly, the local authority is not in a position to fund ISP placements not approved by the YPLA and that are based outside England; this includes the majority of establishments in Wales, Scotland or Northern Ireland.

Once it has been identified that a learner will be requesting a placement at an ISP, the process will be as follows:

a) Identifying appropriate provision

1. The multi-agency teams, working with the learner, will provide evidence that the young person and their parent(s) have considered all potentially appropriate post-16 options available, including mainstream opportunities already in place within the local area.

2. The evidence in support of an application must be up-to-date, appropriate to the request being made and demonstrate the match between the placement, the assessed education and training needs and the learner’s realistic aspirations and long-term goals.

3. The documentation listed below would be the source of such evidence:

- An EHC plan that demonstrates that a range of mainstream and specialist options have been fully considered and, if relevant, why local provision is unsuitable and cannot meet the learner’s needs.
- Educational assessments undertaken by local providers with the participation of the learner in situ, where appropriate and practicable, which establish that each such provider cannot put in place an appropriate package of support to meet the learner’s education, medical or therapy needs and demonstrates why specialist support budgets cannot be used to resource this support.
- A relevant and up-to-date social care report.
- A relevant and up-to-date medical and psychological report (if required)
- An up-to-date speech and language therapy report and an occupational therapy report (if required)
- The most recent school report
information detailing educational progress at school for the last three years including ‘P level’ reports
- The annual or latest version of the learner’s transition plan
- A report on the likely cost of the placement being requested and any other further relevant details on the placement provider.

This list is not exhaustive and Tower Hamlets Council may seek additional, relevant and up-to-date information depending on the particular circumstances of the learner. In addition to this evidence, parents can write a supporting statement in support of the application for a placement at an ISP. Once all evidence for each request has been collected, it will be presented to the local authority’s ISP funding panel which meets to consider each case.

b) ISP funding panel
The purpose of the funding panel is to evaluate and make impartial decisions about applications to place young people in ISPs. In making decisions, the panel will consider the suitability and appropriateness of the ISP in meeting the needs and interests of the young people and in enabling them to progress in learning and prepare for adulthood through attaining realistic and achievable goals.

The panel will be chaired by the Borough’s Children’s Placement Team Manager and its decisions are signed off by the Principal Educational Psychologist who is the lead for children with special educational needs (SEN). The panel consists of professionals from Children’s and Adults Services Directorates who will provide advice and opinion within their fields of expertise.

This includes:
- Principal Educational Psychologist
- Head of Service , SEN
- Adult Learning Disabilities Manager
- Integrated Manager for Disabled Children
- Team Manager, Children with Disabilities Team
- East London Foundation NHS Trust CAMHS representative
- Representative from the Careers Service attend to present on specific cases.

The panel meets every month from January to April and more frequently if required. Whenever possible, papers will be available in advance of each meeting. There will be a structured agenda that will be circulated in advance. Decisions of the meeting will be noted by the administrator and will be circulated prior to the next meeting. Outcomes will be shared by the Chair with young people, their parents/carers and their Personal Advisors within 10 working days of each panel meeting.

Annual funding decisions
Tower Hamlets Council will not agree to commit to fund ‘standardised’ three year programmes. Where applications are made for funding for independent specialist provision, the panel will expect to see personalised programmes detailing how the ISP will support the transition of the young person to achieve their intended vocational, employment and independent living outcomes. Where applications are received for standard three year programmes, the panel can only make an annual funding decision. If the funding panel agrees to fund a placement, then any subsequent year’s funding will need to be reconsidered by the funding panel each year.

The criteria for the continuation of funding at the placement are that:
- The planned programme continues to meet the learner’s educational needs
- Satisfactory progress has been made by the learner against the targets and outcomes as stated within the learner’s individual learning plan;
- The evidence for which must be submitted by the ISP in the form of a written progress report
 Requests to extend placements

Tower Hamlets Council would only expect to receive a request to extend the duration of an originally agreed placement in exceptional circumstances, for example if a learner requires extra time to complete a programme of study because very significant and unexpected medical or behavioural issues have delayed progress towards achieving their individual learning aims. The Borough would require supporting evidence to consider a placement extension, which would include written justification from the ISP and from the learner’s social or transition worker which confirms that significant issues have impinged on a learner’s progress. In addition, it should clarify that the learner’s expected learning aims are still appropriate, together with the revised date by which they will be achieved.

Tower Hamlets Council will not consider extension requests based solely on the need for further transition planning for the learner. Transition planning must be integrated throughout the learner’s programme.

Any extension requests and associated evidence should be forwarded to Tower Hamlets Council no later than the end of the spring term of the learner’s existing placement. Tower Hamlets Council will require evidence that there has been thorough consideration of other local mainstream education options for the learner.

c) Appealing against the funding decision

The learner, parent/carer(s) will receive a letter reporting the funding panel’s decision within 10 working days of the panel meeting. If they wish to appeal against the panel’s decision, the following process will be followed:

Stage 1: The learner/parent(s)/carer writes a letter of appeal within 10 working days of receiving notification of the panel’s decision.

Stage 2: The letter should address the specific reasons for rejecting the application outlined in the funding letter decision and should refer to and include additional evidence that the panel has not previously seen.

Stage 3: The appeals letter and additional evidence must be sent to the chair of the ISP funding panel, the Principal Educational Psychologist.

Stage 4: The appeal is heard at the Joint Transitions Appeal Board which includes representatives from Children’s and Adults’ Services; parents’ representatives; and an ISP commissioning officer from another borough.

Stage 5: The Chair of the Board makes a recommendation and decision.

Stage 6: The appeal decision is communicated to the learner in writing within 10 working days.
7.2 Employment and training

Adult’s Services commissions the Tower Project to provide an employment support service for disabled people and people with health conditions. Tower Project is a specialist service for residents of Tower Hamlets who consider themselves to have a disability or long term health condition. The employment support service offers information, advice and guidance on finding work, keeping a job, developing skills and making adjustments for work. Specialist Employment and Training Advisors, qualified in Information, Advice and Guidance offer a person-centred approach based on the individual.

The service also offers access to work funding, free skills development training, life coaching and vocational rehabilitation services. Paid work, work placements and volunteering opportunities are available and awareness training and job brokerage is also offered to employers.

In considering options for young disabled people, alternatives to work and education should be considered where this is more appropriate for the individual to realise their aspirations. Options such as accessing community activities, resources and facilities or voluntary work opportunities can provide positive alternatives and enable a young person to have a more appropriate range of experiences.

7.3 Health services

The Department of Health 2006 guidance includes the following principles:

- Many children and young people now survive into adult life with complex conditions that previously would have been lethal in infancy. These conditions often affect many bodily systems and many aspects of their lives.
- Poorly planned transition from young people’s to adult-oriented health services can be associated with increased risk of non-adherence to treatment and loss to follow-up, which can have serious consequences. There are measurable adverse consequences in terms of morbidity and mortality as well as in social and educational outcomes.
- Well planned transition improves clinical, educational and social outcomes for young people.
- Successful transition planning and programmes are crucially dependent on collaboration between children’s and adult services.
- Transition should be viewed as a process and not as a single event.
- Staff working with young people should balance the need of the young person for privacy and confidentiality, and their wish to take increasing responsibility for their own health care, with the need for their parents to have sufficient information to provide the support that these young people often require.
- There are several models for good transition and there is no clear evidence that one is superior. Different approaches may be needed for different types of conditions according to their prevalence and the ways in which specialist health care is organised.
- Implementing improved transition involves: recognition of the importance
Adequate consultation with professionals and users; flexibility in the timing of transition; a period of preparation for the young person and family; information transfer; monitoring of attendance until the young person is established in the appropriate adult oriented service.

Professionals may need to consider further development of their knowledge and skills in working with young people, including: the biology and psychology of adolescence; communication and consultation strategies; multi-disciplinary and multi-agency teamwork; and an understanding of the relevant individual conditions and disorders and their evolution and consequences in adult life.

Young people with complex disability present particular problems because often there is no equivalent adult service able or willing to take on their long term health care and medical supervision. The need to develop a holistic approach for these young people is emphasised but it is also important for individual specialties to ensure access to quality health care for people with complex disability.

NHS Tower Hamlets Clinical Commissioning Group recognise as best practice that future entitlement to adult NHS continuing healthcare should be clarified at as early a stage as possible in the transition planning process, especially when the young person’s needs are likely to remain at a similar level until adulthood. Professionals responsible for children’s transition into adult NHS continuing healthcare, should assess young people in transition to identify those young people who are eligible for NHS continuing healthcare. The completed assessment (decision support tool) should be sent to the CHS continuing health care team for presentation to the eligibility panel. If accepted as eligible, a care package can be agreed and negotiated following the CHC process for Tower Hamlets. A referral should be made when a young person reaches the age of 16 through the general referral process to CLDS or Physical Disability team. At the age of 17, the health checklist will be completed by the lead health professional (Community Nursing Team or Special School Nurse) as a formal referral for the Adult’s continuing health care assessment with an agreed plan identified by 17.5 years of age. Adult continuing health care is not able to commence before the age of 18.

Health service professionals should be involved in planning for transition at a level appropriate to the young person’s health needs. For young people with learning disabilities, health and social care services are delivered holistically via the Transition Team, Community Learning Disability Service. Other Health services that might be involved include:

- The young person’s GP
- Child and Adolescent Mental Health (details on the transition process for mental health services is available in the Protocol on Transition from Child and Adolescent Mental Health Services to Adult Mental Health Services)
- Multidisciplinary Locality based Community Health Teams
- Central Community Health Team including specialist Neuro rehab
- Tower Hamlets Contraception and Sexual Health Service
- Community Children’s Nursing Team
- Therapists

Early planning ensures there are no avoidable delays in planning care from adult services.
7.4 Housing

Most disabled young people, like their non-disabled peers, will want to explore the possibility of living more independently as they reach adulthood. The three following types of accommodation-based housing options and services are available to support adults with learning disabilities in Tower Hamlets.

Supported Housing Services
Service users will have their own Tenancy Agreement in a designated property that is either a self-contained flat or shared house. Levels of staffing can be flexible and differs across services. If individuals require more support than the service provider can offer, their social workers can support them to access additional support.

All referrals for accommodation-based supported housing services should be made by the Tower Hamlets Community Learning Disability Service.

Supported Housing services are generally available to people who:
- are aged 18 or over;
- have a demonstrable need for a level of support that cannot be provided by a floating support service in the borough;
- have a local connection with the borough, through residence, family, employment and/or another special reason, such as established support links with local services or in exceptional circumstances the need to relocate due to fear of violence;
- have had a referral accepted for Supported Living by the Team Manager of the Community Learning Disability Service.

for more information about services and referrals.

Residential Care
All placements into Registered Care services both in and out of borough will be made by Social Workers in the Community Learning Disability service. Residential Care services are monitored by the councils Access to Resources Team.

Independent living in own home, with floating support if required
If an individual wishes to access a council or housing association property in Tower Hamlets, they should register with Tower Hamlets Homeseekers and bid through the Choice Based Lettings system. More information can be found at: www.thhs.org.uk/Data/ASPPages/1/2.aspx

A number of priority places have been reserved for people with Learning Disabilities, which means they may access a property significantly quicker due to reduced bidding time for people allocated a priority place. All nominations to the quota will need to be made via the Community Learning Disability Service.

A condition of using the priority nomination is that the individual will agree to initially receive a floating support service. The Supporting People Team commissions and monitors Look Ahead Support and Care to provide a flexible “Generic” Floating Support Team that can work with people with learning disabilities who live in their own homes in the borough. Look Ahead can be contacted via: floatingsupportreferrals@lookahead.org.uk or on 020 3222 4027.
7.5 Leisure and short breaks

All children and young people are entitled to take part in leisure and sporting activities provided by universal providers in Tower Hamlets. All children with disabilities and their parents/carers are entitled to a short break. Short breaks enable disabled children and young people to do many of the activities non-disabled children take for granted. They help them have fun, try new activities, gain independence and make friends. Short breaks are one of the services most commonly requested by parents of disabled children. These services also offer parents and carers the much-needed break that they deserve from their usual caring responsibilities.

Specialist short breaks are available for children and young people in the following categories:

A. Children and young people with Autistic Spectrum Disorder (ASD) and severe learning difficulties or behaviour which is challenging. This group also includes children and young people whose challenging behaviour is associated with other impairments such as severe learning disabilities.

B. Children and young people with complex health needs including those with physical and/or learning disabilities, those who require palliative care (continuing care) and those with associated sensory impairments. Complex health needs includes children and young people with profound and multiple learning difficulties and complex and severe medical needs who may also have an additional physical and/or sensory impairment.

Details of all short breaks available (both universal and specialist) are in the Directory of Services and Short Break Statement for Children and Young People with Disabilities, available on the Tower Hamlets Council website.

The short break service the family were using may no longer be available to the family once the young person turns 19. Transition planning will need to help the family prepare for this change. The specialist short break provider has a role to play in helping to prepare the young person for the changes that will happen when they are 19. For example, young people who attend an overnight short break at Discovery House or Discovery Home, which is a specialist short break service for children and young people, are often taken to visit Hotel in the Park, the respite service which they can access after they turn 19, by their support workers at Discovery House or Home. Short break providers also have an important role to play in helping to prepare young people for independent living, for example by developing their skills in cooking and shopping.

The young person and their parent or carer should be informed of what is available in regards to short breaks/ respite that once the young person is 18. Information on universal, preventative and day opportunities for adults is available in the Adult’s Services Community Catalogue, available on the Council website.

In some cases, children and young people will have been accessing their short break with a Direct Payment. This payment can be used to employ a Personal Assistant for the child or young person, to take them out to access activities in the community. Direct Payments are paid to parents of disabled children up to the age of 18. From age 16, young people can choose to have payment made to them, in their own right. This will be something to consider as part of transition planning: if the young person continues to
be eligible for Direct Payments once they are 18, they may be able to keep the same Personal Assistant into adulthood. Where a young person previously received a short break by accessing one of the commissioned services, for example a holiday scheme or a befriending service, part of transition planning will need to consider the change from accessing this short break, potentially to moving to Direct Payments once the young person is 18.

7.6 Travel/Transport

The Tower Hamlets Independent Travel Training (ITT) programme is an innovative project that provides intensive training and support for students aged 11-19 with SEN to enable them to achieve a higher degree of personal freedom, confidence and independence. The outcome for students undertaking the training is that they will be able to travel to school or college independently by either walking or using public transport. This may not be realistic for some students and in these circumstances realistic goals are set to ensure that there are positive outcomes and a sense of achievement for all students.

The ITT Team takes referrals from primary schools and secondary schools where a student does not currently use home to school transport but may need Independent Travel Training to enable them to undertake the journey to their new secondary school or college.

It’s important to consider the travel support requirements of all young people as part of their transition planning. If the young person has achieved independence through travelling independently to school, it’s important to maintain and further develop this by supporting independence as they start to access new or different services in adulthood. The ITT Team can work subsequently with a young person they previously supported, to support them with new journeys and help to set new goals appropriate to their changing circumstances as they move into adulthood.
8. RESOURCES

Preparing for Adulthood Website
www.preparingforadulthood.org.uk/resources

Children’s Personalisation Network
www.councilfordisabledchildren.org.uk/personalisation

Circles of Friends
www.learningdisabilities.org.uk/publications/building-community

Community Catalysts
www.communitycatalysts.co.uk

Excellence Gateway
www.excellencegateway.org.uk

Getting a Life
www.gettingalife.org.uk/resources.html

Housing and Support Alliance
www.housingandsupport.org.uk

Inclusion Web
www.ndti.org.uk/what-we-do/community-inclusion/the-inclusion-web

Key Working
www.preparingforadulthood.org.uk/media/277774/waht_is_key_working

Market Development
www.thinklocalactpersonal.org.uk/Browse/commissionng/developing

Mental Health Transitions Guidelines
www.scie.org.uk/children/transition/index.asp

Mott MacDonald Pathfinder Support
www.sendpathfinder.co.uk

Moving on Well

Transition Information Network
www.transitioninfonetwork.org.uk

Transition Support Programme
www.transitionsupportprogramme.org.uk

Transition Task Force: for young people with life-limiting conditions
www.togetherforshortlives.org.uk/professionals/projects/the_transition_taskforce

In Control
www.in-control.org.uk/childrenandyoungpeople

Person Centred Transition
www.preparingforadulthood.org.uk

Personal Budgets and Supported Employment
www.bild.org.uk/our-services/books/practical-support-for-better-lives/personalisation-and-supported-employment

Personal Health Budgets Learning Network
www.personalhealthbudgets.dh.gov.uk

Personalising Education Person-Centred Approaches in Schools
www.helenandersonassociates.co.uk/media/63974/personalisingeducation.pdf

Project Search
Securing Independent Careers Guidance

Think Local Act Personal
www.thinklocalactpersonal.org.uk

Transitions to Adulthood in Health Services
www.chimat.org.uk/transitions

Working Together for Change in Schools
www.preparingforadulthood.org.uk/resources

Young People with Life-Limiting Conditions Transition to Adulthood
www.mariecurie.org.uk/en-gb/Commissioners-and-referrers/Partnership-and-innovations/Young-People-and-Transition/?Tab=1