

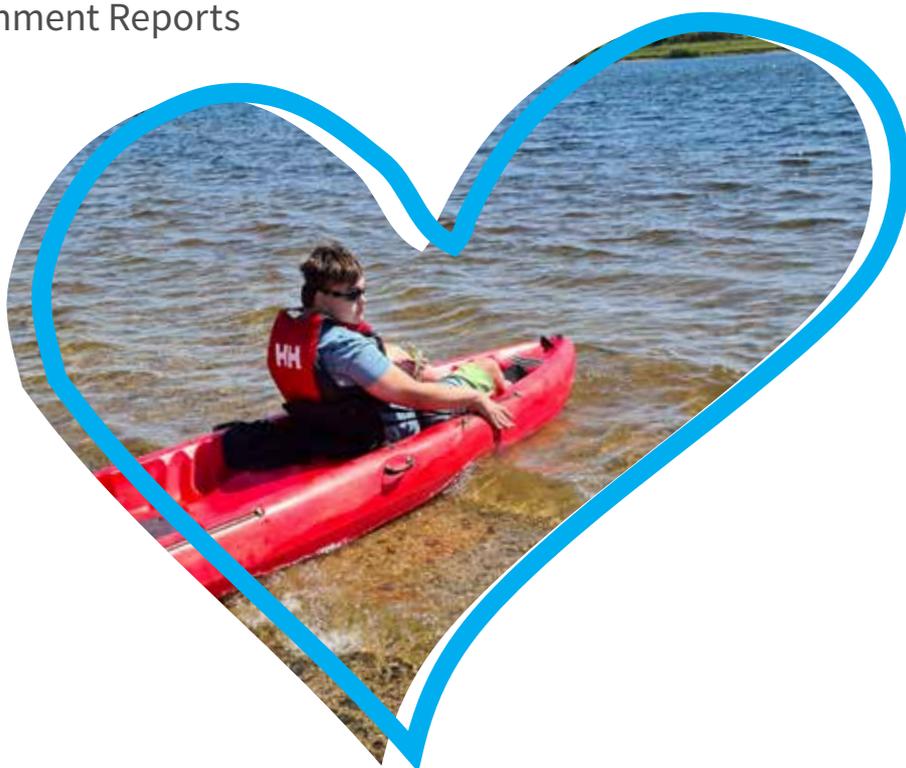
# Cornwall Multi-Agency Transition Protocol

For Young People moving from  
Children's to Adults Services



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# Foreword

Any time of change can create anxiety and uncertainty about the future, but it also provides opportunities and excitement about what is possible. Our Vision for young people in Cornwall is that “anything and everything is possible”.

This protocol is for young people aged between 14 - 25 who have Special Educational Needs and Disabilities (SEND), for their parents and carers, and the professionals who provide support.

The Special Educational Needs and Disabilities (SEND) Code of Practice 2015 states that the “vision for children with special needs and disabilities is the same as for all children and young people – that they achieve well in their early years, at school and in college, and lead happy and fulfilled lives”. In Cornwall we are committed to ensuring that this vision is a reality for those young people who are preparing for adulthood (in transition). Our ambition is that all young people, feel supported to be the people they want to be.

Support will include:

- Understanding the options available to them, and early person-centred planning;
- access to timely information;
- local options for appropriate education, training and employment with training;
- and, where appropriate, a clear and fully coordinated move into adult services.

Every young person’s preparation to move into adulthood will be different; they will have different personal circumstances and different aspirations. Preparing for adulthood happens over time and is not a single event, but any transition planning will have the young person at the centre.

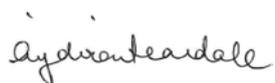
## Signatories to the Protocol



**Cllr Sally Hawken**  
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# Who is this Protocol for?

Preparing for Adulthood is important for every young person therefore it is essential that everyone involved in supporting young people with Special Educational Needs and Disabilities (SEND) to prepare for adulthood is clear about the specific roles and responsibilities of the key agencies. The definition of SEND from the current Code of Practice is included in the Appendices (page 19).

In developing this Multi-Agency Protocol all relevant national legislation, guidance, local policies and strategies have been considered. For people who wish to have a more in depth look at the duties and requirements placed on various agencies with regards to Preparing for Adulthood, please see [Chapter 8 of the SEND Code of Practice January 2015<sup>1</sup>](#), as this provides comprehensive details.

The principles and practice described in this protocol apply to all professionals from health, education, social care, and all relevant partner agencies who may be involved in supporting young people with SEND as they prepare for adulthood. In particular, this protocol is designed to support those young people who will benefit from a multi-agency approach as they move from children's to adult services across education, health and social care services.

The young people who will benefit most from this protocol are likely to have an education, health and care (EHC) plan. They are likely to, have eligible social care and support needs, or be at risk of developing them as an adult, as described by the Care Act 2014, that is that they are likely to require support in adult life to achieve economic independence, or may be at risk, or vulnerability as an adult. They may have long-term medical and palliative care needs, life-limiting or long-term conditions, and/or complex health needs. They will reside in Cornwall, or plan to move into Cornwall.

Some aspects of Preparing for Adulthood planning will apply to all young people but not all will need to access every element of the support described.

## Principles

**These principles underpin all of our work. They can be found in the Children and Families Act 2014, the Care Act 2014, the SEND Code of Practice 2015, and Moving on Well (DoH, 2008).**

- **Young people are at the centre of their plans about their future; the focus is on their well-being, needs, goals and aspirations, so all planning will be person-centred.**
- **Young people (and their parents and carers) will be able to participate in decision making throughout.**
- **All agencies will work together, in a holistic, supportive, flexible, inclusive and collaborative way.**
- **The right information, at the right time will be provided to support decision-making.**

<sup>1</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

# Raising aspirations in Cornwall

Agencies across Cornwall will work together to help children and young people to realise their ambitions in relation to:

- higher education and/or employment – including exploring different employment options, such as supported internships, help from supported employment agencies, and promoting work experience opportunities
- independent living – enabling people to have choice and control over their lives and the support they receive, their accommodation and living arrangements, including supported living
- participating in society – including having friends and supportive relationships, and participating in, and contributing to, the local community
- being as healthy as possible in adult life.

## Information

Information about Preparing for Adulthood can be found on the [Local Offer](#)<sup>2</sup>, and from a variety of sources including information events provided by education, health and social care and through voluntary and independent sector providers.

Please speak to your school or college, allocated worker / lead professional, or key worker, to find out more information.

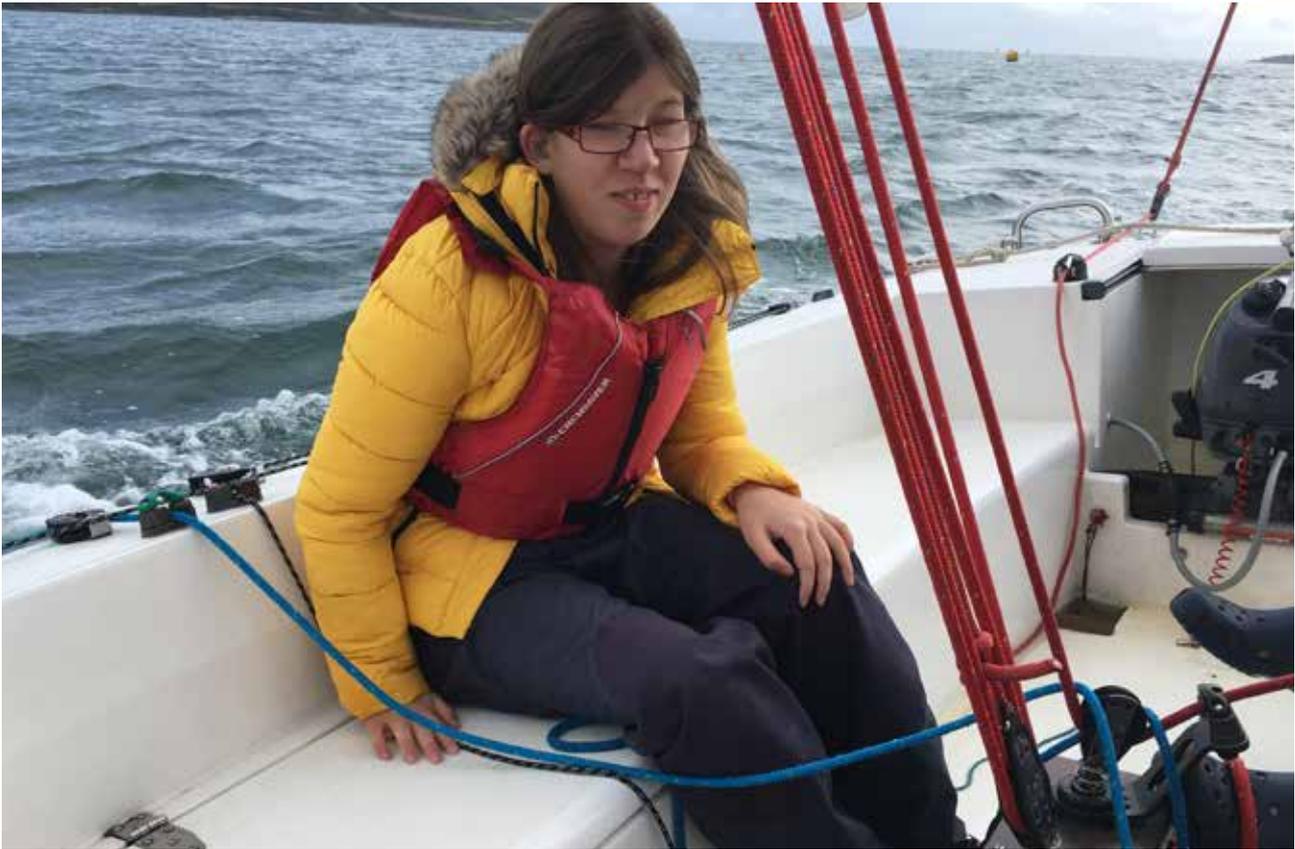


## Preparation for the Year 9 Review (Age 13-14)

Although it can seem daunting to begin to discuss plans for adulthood when a young person is 13 or 14, sometimes it is necessary to ensure that preparation is thorough and plans to meet complex needs are in place in a timely way for a young person to experience a positive transition. The Code of Practice notes that being supported towards greater independence and employability can be life-transforming for children and young people with SEND. The Code stresses that this support should be thought about from when a child is very young, to raise aspirations and to build progressively on a child's strengths.

As young people progress from primary and into secondary school the outcomes in their plan will have an increasing focus on longer-term aspirations and goals. Young people will benefit from support in making and communicating choices, and ideally will be given opportunities to try out these skills throughout their time at school, as well as at home, before they are asked to start making decisions about work, further education, and where they want to live.

<sup>2</sup> [www.supportincornwall.org.uk/localoffer](http://www.supportincornwall.org.uk/localoffer)



## Education, Health and Care Plan reviews

Each year a young person's school, or education setting, will schedule a review of their EHC plan. From Year 9 this includes a particular focus on Preparing for Adulthood, including employment, independent living and participation in society, and outcomes are set accordingly. Education provision for Year 12 should be named on the EHCP by the end of March in Year 11; in order to meet these timescales reviews will be scheduled in the summer term of Year 10. Where the Local Authority has agreed a provider with the young person and their family, and the provider has been consulted and agreed that they can meet their needs, a representative of that school will be invited to the review meeting.

## Mental capacity

Young people who are aged 16 and over have the right to participate in decisions about their future. Annexe 1 of the [SEND Code of Practice](#)<sup>3</sup> gives a brief overview of the application of the Mental Capacity Act 2005, which applies from 16 years of age. The basic assumption is that a young person can make a decision, unless they have been assessed as lacking capacity to make a specific decision. If it is found that the young person does not have capacity to make a particular decision, then a "Best Interests Meeting" may be held. Any decision that is then made should be made in the person's best interests and achieved in a way that is less restrictive of a young person's rights and freedom of action. The person who makes the decision depends on the decision to be made, but everyone relevant who knows the young person should be involved. If people do not agree with the decision, then this is recorded, and in some cases, the decision or plan, may be referred to Court for them to decide.

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<sup>3</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

# Case work, assessment, and the transfer from Children and Family Services to Adult Social Care or Continuing Health Care

The transition between local authority social care services is based on age. Timely referrals are made so that adult workers have time to get to know the young person and complete assessments to ensure that adult service provision is in place ready to follow on from that provided through children's services.

For children with complex needs at 16 years of age if a child is in receipt of support from Children's Social Care Services and is considered to be likely to have care and support needs when they reach 18 years of age, Children's Services will make a referral to Adult Social Care. Adult Social Care will then begin to work alongside Children's Services to offer advice and guidance and to jointly plan.

The Adult Social Care practitioner will complete a **Needs Assessment** which will determine eligible social care needs. The assessment is strengths based with a focus on promoting independence and connecting them with their local community. The aim is to complete an assessment of eligible social care needs by 17 years and agree the **Support Plan** the young person can expect to receive when they reach 18 years. At this point the statutory responsibility transfers from Children's Services to Adult Social Care.

They will also offer a Carer's and / or a Young Carer's Assessment as necessary, for carers of the young people that they are working with. A financial assessment will be undertaken to establish the financial contribution that a young adult will be expected to contribute to the cost of their care. It will also check that they are maximising their income through benefit entitlement. This is different to services provided by Children's Social Care, which are not means-tested and where there is no financial assessment.

If a child has been assessed as eligible for Children's Continuing Care, Adult Continuing Healthcare Teams will work closely with Children's Continuing Care Team (and Adult Social Care if appropriate) to ensure a smooth transition/ transfer of the existing package. In order to facilitate this, internal notification of the children over 14 will be regularly provided to Adult Continuing Healthcare representatives at Children Continuing Care Panel.

Where a young person has complex health needs which may extend beyond the lawful limits of the Local Authority but is not receiving Children's Continuing Care, a referral will be made for Adult Continuing Health Care.



## Young people not known to Children and Families Service

Under the Care Act 2014 young people do not have to be in receipt of support from Children's Services prior to them making a referral to Adult Services. A referral can be made by phone (online):

T: **0300 1234 131**

[www.cornwall.gov.uk/health-and-social-care/adult-social-care/](http://www.cornwall.gov.uk/health-and-social-care/adult-social-care/)

These referrals can be made from their 17th birthday onwards.

## Local area discussions

Local area meetings between Children's and Adults managers are regularly held to highlight those young people approaching transition. This allows for timely planning for individuals and provides information for commissioning officers with regards to future service and accommodation needs.



## Careers guidance

Maintained schools must ensure that pupils from Year 8 until Year 14 are provided with independent careers guidance. Academies are also subject to this duty through their funding agreements. Further Education (FE) colleges also have equivalent requirements in their funding agreements; their duty applies for all students up to and including age 18 and will apply to 19 to 25-year olds with an EHCP.

In Cornwall, for young people with an EHCP, the Careers South West (CSW) Group are currently contracted to provide advisors for independent support and guidance at EHCP reviews from Year 9.

Their Career Development Consultants offer support to young people and their parent/carers to look at post 16 options including further education, foundation learning, apprenticeships, personalised learning pathways and independent specialist provision with the young person and their parents and carers.

## Employment

Young People will be provided with careers support through their school and from CSW Group staff where they are likely to be making a transition to another educational placement after Year 11. CSW Group will also provide support if a young person is not in education, employment or training. Independent, high quality and impartial Careers Information, Advice and Guidance will also be provided by the provider. They will also provide this for those with SEND but no plan.

# Process and responsibilities

<b>Year 8</b> (Age 12-13)	
<b>PfA key Outcomes</b>	By the end of Year 8 the young person and their family will understand what will happen in relation to Preparing for Adulthood from Year 9 onwards. They will have information about the process and start to think about longer term outcomes and aspirations for the future, and certainly post-school plans.
<b>Education</b> (school, college, specialist provision)	At the end of the Year 8 EHCP review, the chair of the meeting will ask if there are any additional people who should be invited to the Year 9 review.  From Year 8 schools will provide young people with Independent Advice and Guidance to support exploration of options and decision-making regarding continuing education, training and employment.  Schools will continue to review and maintain Individual Health Care Plans annually, and will consider with the young person and their family whether sharing it in other settings would be useful.
<b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)	Cornwall Council staff will identify which young people will benefit from information and support from the Preparing for Adulthood processes and ensure that they are included in the Local Area Discussions as appropriate.
<b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)	Key health professionals working with a young person (such as Paediatrician, CAMHS worker, Specialist Nurse, etc.) will ensure that the young person and their family are aware of any services which may transfer to 'adult based care' from age 16, and start transition planning.  Cornwall's local offer will be kept updated by all Healthcare providers.
<b>Family and Young person</b>	The young person and their family will discuss future aspirations for all areas of life, not just education, and start to explore all of the available information.  The young person and their parent/carer will consider who else they may wish to invite to be part of the Year 9 Preparing for Adulthood EHCP review and ask that they are added to the invite list.  Parents can contact SENDIASS for independent support and advice at any point in the SEND process.

# Year 9

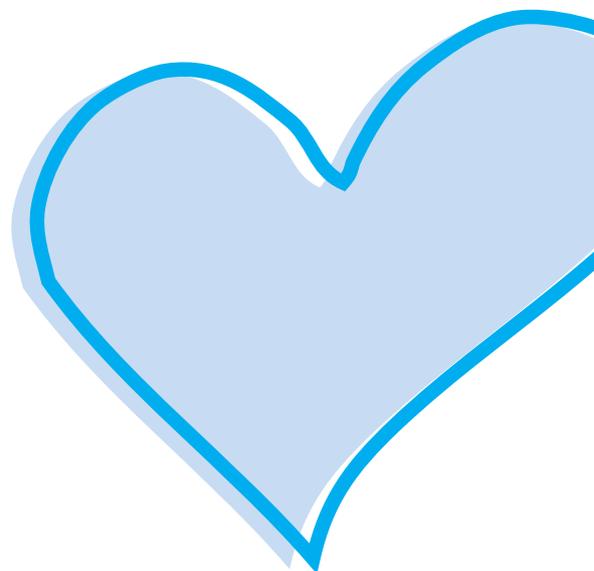
(Age 13-14)

<p><b>PfA key Outcomes</b></p>	<p>Preparation for the Year 9 Preparing for Adulthood EHCP review will have a greater focus on future long-term aspirations and outcomes.</p> <p>The Year 9 EHCP review, and all subsequent reviews, will have a particular focus on Preparing for Adulthood and this will be reflected in the outcomes recorded.</p> <p>As part of the EHCP review, long-term Preparing for Adulthood outcomes will be identified so people can begin to explore which services might be able to meet those identified needs.</p> <p>As part of the EHCP review, people will begin to discuss what independence might look like for the young person, and the young person will be encouraged to make choices and take control where possible, but still receive support if and/or when needed.</p>
<p><b>Education</b> (school, college, specialist provision)</p>	<p>Curriculum based activities will support preparation for the Year 9 review, and raise aspirations including for employment.</p> <p>Schools will provide young people with Independent Advice and Guidance to support exploration of options and decision-making regarding continuing education, training and employment.</p> <p>School will invite people to the EHCP review and this may include a CSW Group officer.</p> <p>Schools will continue to review and maintain Individual Health Care Plans annually, and will consider with the young person and their family whether sharing it in other settings would be useful.</p>
<p><b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)</p>	<p>Independent, high quality and impartial Careers Information, Advice and Guidance will be provided through CSW Group for young people with an EHCP where they are likely to be making a transition to another educational placement after Year 11.</p>
<p><b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)</p>	<p>Where necessary, a Health Care Plan will be initiated, if not already in place. It should consider:</p> <ul style="list-style-type: none"> <li>● Acute hospital admissions</li> <li>● Managing acute conditions</li> <li>● Pathway planning to adult care</li> <li>● Transfer to different services as appropriate.</li> </ul>
<p><b>Family and Young person</b></p>	<p>The young person and their family will have a clearer understanding of future options.</p> <p>Where they have been assessed as eligible to receive them, the young person and their family will consider how direct payments might be used to practice independence.</p> <p>The young person and their family will consider the friendship and support networks that are important to the young person and will continue to be so in the future, and how they might be supported.</p> <p>The young person will engage with the review of their Individual Health Care Plan, if they have one, and take on aspects of self-care as appropriate to their age and ability to do so.</p>

# Year 10

(Age 14-15)

<b>PfA key Outcomes</b>	<p>The young person and their family will have a clear picture by the end of Year 10 of any changes that are due to happen across health, education or social care provision during Year 11.</p>
<b>Education</b> (school, college, specialist provision)	<p>School will coordinate the EHCP Transition review in the summer term and CSW group may attend.</p> <p>Schools should broaden students' employment horizons using a wide range of approaches, such as taster opportunities, work experience, role models and inspiring speakers.</p> <p>College's will support young people and their families to explore specific courses etc (for example through taster days).</p>
<b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)	<p>Independent, high quality and impartial Careers Information, Advice and Guidance will be provided through CSW Group for young people with an EHCP where they are likely to be making a transition to another educational placement after Year 11.</p>
<b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)	<p>The Health Care Plan will be reviewed and updated, including clear transition plans for young people who will transfer to adult based services at age 16.</p> <p>Information should be shared with the young person's GP so that they are aware of the Health Action Plan and other preparing for adulthood plans, including the EHCP.</p>
<b>Family and Young person</b>	<p>From Year 10 the young person and their family will visit possible future options to support decision making (such as colleges, Skills Show, Post-16 Drop in events, other providers' open days, and social activities/clubs).</p> <p>The young person will make arrangements to visit other Further Education provision if they wish to speak to them about specific support that might be available.</p>



# Year 11

(Age 15-16)

<p><b>PfA key Outcomes</b></p>	<p>The EHCP will be reviewed and PfA outcomes updated.</p> <p>Post-16 destinations will be identified so that providers can be consulted and any additional support or funding discussed.</p> <p>Consideration will be given to future housing needs and local options and processes and actions to meet these needs recorded in the EHCP.</p>
<p><b>Education</b> (school, college, specialist provision)</p>	<p>School will have scheduled the EHCP review for the summer term in Year 10 and the plan will be finalised by March of this year, to better facilitate any transitions at year-end.</p> <p>The young person will have had the opportunity to learn about employment through a variety of experiences.</p> <p>Schools and colleges (or other relevant provision) will facilitate a clear and well communicated transition if the young person is moving to a different provision in the next academic year, by sharing information and arranging visits etc. as necessary for the individual.</p> <p>Contingency plans should be made in case plans change (for example because of exam results or illness).</p>
<p><b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)</p>	<p>Independent, high quality and impartial Careers Information, Advice and Guidance will be provided through the careers advisors bought in by schools. Independent, high quality and impartial Careers Information, Advice and Guidance will be provided through CSW Group for all young people with an EHCP where they are likely to be making a transition to another educational placement after Year 11.</p> <p>SEN casework officer will ensure that the EHCP plan is issued by March 31st naming the preferred post-16 provision.</p> <p>Children’s social care staff will ensure that a referral is made to adult social care as an action of the first care plan review following a young person’s 16th birthday, where the young person is considered likely to have eligible social care needs post 18 years. A Social Care Practitioner will be allocated by Adult Social Care and they will shadow Children’s Social Care staff at relevant meetings and reviews.</p> <p>Professionals should work with young people, parents and carers to identify young people who share friendships/interests and who may benefit from joint planning at some stage in the future, and approach the young people, their families and other relevant professionals to discuss options. The local area discussions will support this process.</p> <p>Transition Social Care Workers will consider short breaks provision for those young people who are likely to need access to a similar service post-18. They will also consider future accommodation needs and ensure that commissioners are aware of these future needs.</p> <p>Allocated Adult services workers will shadow Children’s Social Care staff to all relevant meetings and reviews.</p>

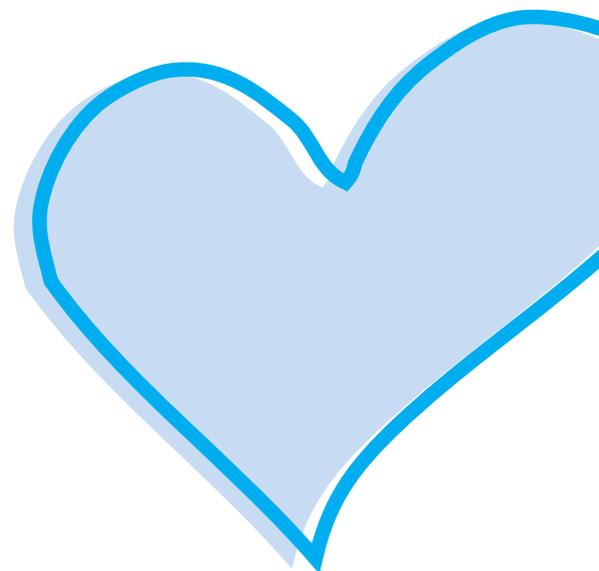
<p><b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)</p>	<p>Health Action Plan reviewed and updated.</p> <p>Each service accessed by the young person will ensure that they and their family know when they will be discharged or transferred, and who their key contacts will be in the future.</p> <p>CAMHS will notify the appropriate adult mental health service for any young people and young carers who may meet the criteria for care and support as an adult, and agree a timetable for referral and / or transfer.</p> <p>Children's Continuing care nurses will attend the reviews of those young people who are already known through Children's Continuing Care team, as part of the combined EHCP, CIN, MDT and Children's Continuing Care annual review process.</p> <p>Information gathered at this stage will be documented on the patient records to inform planning and assessment for adult CHC eligibility assessment at age 17 years, in order that assessments and decisions are made by 18 years; funding for those young people identified as eligible will commence from their 18th birthday. Children's continuing care will end on the young person's 18th birthday (or before if they are assessed as no longer eligible for children's continuing care). Eligibility for children's continuing care and adult CHC are different and eligibility for one does not determine eligibility for the other.</p>
<p><b>Family and Young person</b></p>	<p>Access information and advice about benefits and the impact of any changes at age 16.</p> <p>Make plans and arrangements as to how the young person will keep in touch with friends once they leave school/college. Joint use of direct payments could be considered.</p> <p>Young people and their families will need to gain an understanding of the Mental Capacity Act and how this will impact on the decision making process once a young person is 16.</p> <p>The young person will make arrangements to visit Higher or Further Education provision if they wish to speak to them about specific support that might be available.</p>

# Year 12

(Age 16-17)

<p><b>PfA key Outcomes</b></p>	<p>Everyone involved will be aware of the Mental Capacity Act and ensure that the young person has appropriate support to make their own informed decisions as far as possible.</p> <p>Young people with complex needs who are considering applying to university will begin the process of contacting/visiting early to ensure that the level of support they need would be available.</p> <p>Young people and their families will know who is responsible for each aspect of their on-going healthcare.</p>
<p><b>Education</b> (school, college, specialist provision)</p>	<p>All need to consider mental capacity act assessments if young people are unable to make some/all decisions for themselves.</p> <p>Advice and information will be available to students who are considering higher education, including direction to appropriate resources for support as well as UCAS application.</p> <p>There will be an EHCP review led by the school, college, or Independent Service Provider that the young person is attending.</p>
<p><b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)</p>	<p>All need to consider mental capacity act assessments if young people are unable to make some/all decisions for themselves.</p> <p>Independent, high quality and impartial Careers Information, Advice and Guidance will be provided by CSW Group young people with EHCP where they are likely to be making a transition to another educational placement after this academic year. CSW Group will also provide support if a young person is not in education, employment or training. Independent, high quality and impartial Careers Information, Advice and Guidance will also be provided by the provider for those with SEND but no plan.</p> <p>Designated local authority officers will ensure timely decision-making about future placements for any specialist provision, including ISP and FE college including supported internships and apprenticeships.</p> <p>Cornwall Council staff will consider Looked After young people and make a referral to Adult Services if the young person is likely to be eligible for care and support when they are 18, supported by consultation through local area discussions.</p> <p>Children’s Social Care staff will liaise closely with specialist providers and ISPs for those young people who were placed before age 19 and will be returning home, as well as cooperating with other local authorities where the young person is indicating that they wish to continue to live out of county when they have completed their course.</p>

<p><b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)</p>	<p>A Mental Capacity Act assessment will be considered if a young person is unable to make some/all decisions for themselves.</p> <p>Health Care Plans will be reviewed and updated. The plan will be in place to support transition to primary care and adult-based services, and the young person and their family will know which service is responsible for each/all aspects of their healthcare. Consideration may also need to be made regarding the transition to hospital inpatient provision once the young person no longer has direct access to the children's ward; consideration may need to be made for a referral to the appropriate hospital liaison nurse for support.</p> <p>Where GPs participate in the provision of the annual health check for people with a learning disability, eligible young people should be identified and have this included in their Health Care plan.</p> <p>At age 17 NHS adult continuing health care will request that the local authority allocate a social care practitioner to joint assess all young people who have been referred and met the criteria on the checklist for a full assessment, and share the results including any indicative personal budget. If the young person is known to Childrens' Social Care they will engage with the assessment. If not, Adult Services will action the request.</p> <p>If appropriate once an adult CHC assessment is completed and eligibility from the young person's 18th birthday has been confirmed adult CHC nurses need to be invited to all meetings regarding the young person (including transition meetings, EHCP, LAC, CIN, MDT's etc).</p> <p>Where the GP will be the lead health contact for a young person aged 18 and over, the GP should be informed of the young person's EHCP review and the process should the GP wish to contribute or provide additional information to support the review.</p>
<p><b>Family and Young person</b></p>	<p>All need to consider mental capacity act assessments if young people are unable to make some/all decisions for themselves.</p> <p>The carer will gain an understanding of what support they might receive as a family carer once their young person turns 18.</p>



# Year 13/14

(Age 17-19)

<p><b>PfA key Outcomes</b></p>	<p>Young people with SEND who are considering higher education will explore their options as soon as possible to ensure that they have the right support in place at the beginning of their course.</p> <p>Young people will know what options might be available for them when they leave school at 19, and have definite plans in place in the term before they are due to leave their current setting.</p> <p>There will be clear expectations of the outcomes to be achieved if young people move to an ISP, and an outline plan of what needs to happen when they return to the local area.</p> <p>Case management for young people who are fully Adult CHC funded will be clearly agreed between Cornwall Council and Adult Continuing Health Care. For those young people jointly funded between the two the local authority will take the lead with contribution from the allocated CHC nurse; the level of input from adult CHC will be identified between the LA and adult CHC on a case by case basis.</p>
<p><b>Education</b> (school, college, specialist provision)</p>	<p>There will be an EHCP review, led by the school, college, or ISP provision that the young person is attending, usually scheduled in the autumn term to better facilitate any transitions at year-end.</p> <p>The EHCP will be ceased when a young person moves into higher education. Alternative arrangements are available to support these students. School or college will provide advice and information to students who are considering higher education, including direction to appropriate resources for support as well as UCAS application.</p>
<p><b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)</p>	<p>Independent, high quality and impartial Careers Information, Advice and Guidance will be provided through CSW Group for young people with an EHCP where they are likely to be making a transition to another educational placement after this academic year. CSW Group will also provide support if a young person is not in education, employment or training. Independent, high quality and impartial Careers Information, Advice and Guidance will also be provided by the provider for those with SEND but no plan.</p> <p>Cornwall Council staff will maintain close liaison with specialist residential providers and ISPs for those young people who were placed before 19 and will be returning home, as well as cooperation with other local authorities where the young person is indicating that they wish to continue to live out of county when they have completed their course.</p> <p>SEN Case Officers will ensure that PfA outcomes and EHCP plans have sufficient information for FE colleges and other provision to make decisions on whether or not they are able to meet identified need when they are consulted about providing a place.</p> <p>Adult social care staff will complete a Strength Based Needs assessment for all young people who are considered likely to need care and support as an adult, when it is an appropriate time to do so (this is likely to be sometime between 17th and 18th birthdays for most, but not all, young people). They will also complete a request for service from a Financial Assessment Officer at the appropriate time.</p>

	<p>Childrens' social care staff will liaise closely with the relevant Adult Social Care practitioner to identify short breaks services for young people who need to access them post-18 and coordinate appropriate transition where necessary.</p> <p>If the young person meets the criteria on the adult CHC checklist a referral to adult CHC should be made by social care workers at 17 years and 3 months so eligibility from their 18th birthday can be established in a timely way.</p> <p>Plans will be made as to how social care support will be maintained for young people accessing higher education, including consideration of whether this should be provided by the home local authority or by the authority in the area a student is moving to.</p> <p>Cornwall Council will pass a copy of a young person's EHCP to the relevant DSA assessor when they are asked to do so by the young person. They will also pass a copy of the EHCP to the relevant higher education institution when they are asked to do so by the young person.</p> <p>Where it has not been possible to gain a final decision on what, if any, adult services might be provided from age 18, services provided by Children's Services will continue until such time as a decision has been made.</p>
<p><b>Health</b> (NHS Providers including: primary care, universal, specialist children's services. NHS Commissioners including: CCGs, NHS England)</p>	<p>Where the GP is the lead health contact for a young person aged 18 or over, the GP should be informed of the young person's EHCP review and the process should the GP wish to contribute or provide additional information to support the review.</p> <p>Designated transition CHC nursing professionals will negotiate with the local authority on a case by case basis to ensure that case management transfers between the organisations happen at the best time for the young person.</p> <p>CAMHS will ensure that referrals are made to the appropriate adult mental health service for any young people and young carers who may meet the criteria for care and support as an adult. CAMHS transition takes place at 17 years 6 months.</p>
<p><b>Family and Young person</b></p>	<p>If considering university, contact will be made as early as possible with potential destinations, and arrangements made for a Disabled Student Allowance assessment to ascertain the level of support available.</p> <p>These plans will also be discussed with the Local Authority early, especially if direct payments are likely to be used to provide some or all of the care and support needed at university.</p>

# Age 19 onwards

<p><b>PfA key Outcomes</b></p>	<p>Outcomes will be reviewed at the EHCP review, which will be ceased when the outcomes have been achieved.</p> <p>The young person will be ‘settled’ and have a clear plan to support their transition into adulthood, and where appropriate adult services such as those delivered through HAS.</p> <p>The young person will have completed their education pathway achieving a qualification, employment or appropriate care and support.</p> <p>The young person, where appropriate, will be able to travel independently to their workplace or community-based activities.</p>
<p><b>Education</b> (school, college, specialist provision)</p>	<p>EHCP review will be arranged by college or ISP provision.</p> <p>The education provider will ensure access to independent advice and guidance through CSW Group is available to young people with an EHCP up to the age of 25, to help support them make decisions about what they want to do in the future.</p>
<p><b>Local Authority</b> (social care, SEN caseworkers, public health practitioners)</p>	<p>Case Work officers will consider through the EHCP review whether identified outcomes have been met and whether or not the plan should be ceased. They will inform the young person and their parents/ carers family.</p> <p>There will be a formal referral to supported employment providers, where appropriate, for vocational assessment and support to enable the young person to secure paid employment or further training, following the end of their education/training.</p> <p>Commissioners will have plans in place to support a wide range of aspirations for independence.</p>
<p><b>Health</b> (NHS Providers including: primary care, universal, specialist children’s services. NHS Commissioners including: CCGs, NHS England)</p>	<p>Where the GP is the lead health contact for a young person aged 18 or over, the GP should be informed of the young person’s EHCP review and the process should the GP wish to contribute or provide additional information to support the review.</p>
<p><b>Family and Young person</b></p>	<p>If social care needs continue the young person and their family will have a clear understanding of who will be their social care worker in the Adult team.</p> <p>The young person and their family will have agreed a long term plan to ensure the person has maximum independence and support where appropriate.</p>

# Appendices

## i) Definition of Special Educational Needs and Disability

From the SEND Code of practice, 2015:

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions

For children aged two or more, special educational provision is educational or training provision that is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind.

Post-16 institutions often use the term learning difficulties and disabilities (LDD). The term SEN is used in the Code across the 0-25 age range but includes LDD.

Disabled children and young people:

Many children and young people who have SEN may have a disability under the Equality Act 2010 – that is ‘...a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities’. This definition provides a relatively low threshold and includes more children than many realise: ‘long-term’ is defined as ‘a year or more’ and ‘substantial’ is defined as ‘more than minor or trivial’. This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN. Where a disabled child or young person requires special educational provision they will also be covered by the SEN definition.



## ii) Statutory framework

The Strategic Preparing for Adulthood Protocol reflects the requirements, philosophy and strategies laid out in the following legislation, guidance and reports:

### a) Legislation

- **The Children and Families Act 2014, Part 3** sets out duties for planning, commissioning and reviewing provision, the Local Offer and the duties requiring different agencies to work together; these apply to all children with SEN or disabilities. There is a clear emphasis on early and more coordinated preparation for adulthood.
- **The Care Act 2014** The Care Act enshrines in law the individual wellbeing principle for care and support. It is the single unifying principle around which adult social care will in future be organised. It emphasises outcome focussed, person- centred practice when considering assessment planning and support as well as co-production and multi-agency approaches to planning and commissioning. The Care Act 2014 states that there is a duty to promote well-being including control of the individual over day to day life, participation in work, education, training and recreation, social and economic well-being, domestic, family and personal relationships, suitability of living accommodation and the individual's contribution to society. It also promotes a pathways approach by ensuring that assessments are offered before people reach a crisis point.
- **The Apprenticeships, Skills, Children and Learning Act 2009 (ASCL Act 2009):** sets out the duties of Local Authorities, agencies and other organisations with regard to provision of learning opportunities for young people aged 16-19, including those with a learning difficulty assessment (as described in Section 139A of the Learning and Skills Act 2000) and for young people up to age 25 where a learning difficulty assessment is in place or arrangements have (or are required to have) been made for such an assessment. These duties passed to Local Authorities on 1 April 2010 following the cessation of the Learning and Skills Council (LSC).
- **Education and Skills Act, 2008:** Intended to increase participation in learning for young people and adults.
- **UN Convention on the Rights of Persons with Disabilities, 2006:** Article 7 states that disabled children and young people should have access to the same rights and freedoms as all children and the right to express their views on all issues which affect them.
- **Education and Inspection Act, 2006:** Section 6 places a duty on LA's to improve the well-being of young people aged 13-19 (and up to age 25 for those with learning difficulties) by providing access to sufficient educational and recreational leisure-time activities and facilities.
- **Childcare Act, 2006:** LA's are required to secure sufficient childcare for working parents and provide a better parental information service.
- **NHS Act, 2006:** Section 242 places a duty on Health Authorities, PCT's, NHS Trusts and NHS Foundation Trusts to involve and consult persons receiving health services in relation to their planning and provision.
- **Mental Capacity Act 2005:** aims to protect people with an impairment of their mind or brain, whether as a result of an illness, or external factors such as alcohol or drug use.
- **Disability Discrimination Act, 2005:** Sets a definition of disability and places duties on all providers of services to the public to make services accessible, making reasonable adjustments, where required. The 2005 Act widens the definition of disability [from the 1995 Act] and places a new duty on public bodies, including schools, to positively promote disability equality and not discriminate.
- **The Children Act, 2004:**
- **Health and Social Care Act, 2001:** Section 57 covers direct payments and extended their use to disabled young people aged 16 and 17.

- **The Special Educational Needs and Disability Act, 2001:** Makes it illegal to treat a disabled person less favourably than a non-disabled person for reasons related to their disability, without justification. Requires institutions to make reasonable adjustments so that a disabled student is not placed at a substantial disadvantage.
- **The Learning and Skills Act, 2000:** Placed a duty on the Secretary of State, through Section 140 of the Act, to make arrangements for the assessment of disabled young people when they are undertaking or likely to undertake post-16 education or training or higher education.
- **The Children (Leaving Care) Act, 2000:** Provides an entitlement to an assessment, a Pathway Plan and a personal adviser for each looked after and former looked after young person.
- **The Education Act 1996:** The transition review process which forms the main monitoring and planning tool for most young people with special educational needs was built on this act and the guidance in the SEN Code of Practice 2001.
- **NHS and Community Care Act, 1990:** LA's are required to publish and keep under review a plan for the provision of Community Care services in their area. Local Authorities also have a duty to assess individuals' need for services where they appear to be needed.
- **UN Convention on the Rights of the Child, 1989:** Article 23 focuses on disabled children and young people, recognising their right to dignity, independence and participation within their community.
- **The Children Act 1989:** Provides the framework for social care services for children and young people.
- **Disabled Persons (Services, Consultation and Representation) Act 1986:** Designed to improve the co-ordination and effectiveness of resources and services for disabled people and those with mental illness. (Now superseded by other legislation and guidance).
- **Chronically Sick and Disabled Persons Act 1970:** local authorities were given a duty to assess the individual needs of everyone who fell within section 29 of the National Assistance Act. The Chronically Sick and Disabled Persons Act set out provisions to improve access and support for people with disabilities. Under this, local authorities were given a duty to assist with: practical support in the home; provision of meals at home or elsewhere such as community centres; provision or assistance to obtain radio, TV, library or other recreational services; provision of recreational and educational activities outside the home; provision of services or help in accessing travel to and from the home to participate in these activities; arranging home adaptations to meet people's needs.

## b) Guidance and Government Reports

- **SEN Code of Practice, 2015:** Describes the annual review process from Year 9 and the place of Preparing for Adulthood within that process. The Code also outlines the statutory assessment process to identify special educational needs and disabilities for young people who will probably need more than SEN Support (previously School Action and School Action plus).
- **Supporting pupils at school with medical conditions (2014):** statutory guidance from the Department for Education.
- **Working Together to Safeguard Children (2018):** Statutory guidance from the Department for Education which sets out what is expected of organisations and individuals to safeguard and promote the welfare of children.
- **National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care, November 2012 (Revised):** sets out the process and timeframe to establish eligibility for NHS Adult continuing healthcare funding; states that NHS adult CHC should be appropriately represented at all meetings where transition planning is taking place for young people who are likely to be eligible for CHC funding at age 18, and that an assessment and indicative budget should be completed when a young person is 17. Childrens is 2016.



- **Transition: moving on well, 2008:** Multi-disciplinary guides for health professionals with responsibility for the transition process.
- **Our health, our care, our say:** Making it happen, 2006: Central role for Directors of Adult Care Services in ensuring successful transition to adult services for disabled young people.
- **Youth Matters, 2006:** sets out plans for ‘Youth Opportunity Funds’ in each local area, and the government’s plans for the future of Information, Advice and Guidance (IAG).
- **Learning for Living and Work, 2006:** Improving Education Opportunities for People with Learning Difficulties and /or Disabilities.
- **Promoting Disability Equality in Schools and Early Years Settings, 2006:** Guidance on how the Disability Equality Duty can be implemented by schools and early years settings.
- **Best practice guidance on the role of Director of Adult Social Services, 2006:** Every LA has a Director of Adult Social Services post. Responsibilities include a specific role in developing support and working with partner agencies to make transition to adult services successful.
- **The Mental Capacity Act Code of Practice:** Protecting the vulnerable (2005).
- **Improving the Life Chances of Disabled People, 2005:** considers what can be done to improve opportunities for all disabled people and sets out a 20 year vision. Transition to adulthood is highlighted as a key area.
- **Removing Barriers to Achievement, 2004:** The Government’s strategy for SEN which includes a commitment to improve the quality of transition planning.
- **National Service Framework for Children, Young People and Maternity Services, 2004:** Quality Standards for Transition are set out in NICE guidance [NG43](24.02.16) Transition from children’s to adult’s services for young people using health or social care services - [www.nice.org.uk/guidance/ng43](http://www.nice.org.uk/guidance/ng43)  
The Royal College of Paediatrics and Clinical Health set out their standards in Transition to Adult Services, (18.03.20) [www.rcpch.ac.uk/resources/transition-adult-services](http://www.rcpch.ac.uk/resources/transition-adult-services)
- **Working Together:** Giving Children and Young People a Say, 2004: Statutory guidance for LA’s, governing bodies and schools to promote and encourage the participation of pupils in decisions which affect them.

### iii) Glossary of terms

<b>ASC</b>	<b>Adult Social Care</b> responsible for undertaking statutory social care assessments and casework with adults.
<b>ASC/ASD</b>	<b>Autistic Spectrum Condition or Disorder</b>
<b>Annual review</b>	A yearly meeting to review the Education, Health and Care Plan (or Statement until they are phased out).
<b>Benefit Assessment Officer</b>	<p>When the Transition Needs Assessment is completed and the level of care services you need has been agreed between you and your care co-ordinator, they will ask a benefits and assessments officer to visit you to complete a financial assessment. You will be told which documents you will need to provide. The officer will also make sure that you are receiving all the welfare benefits you are entitled to.</p> <p>The benefits and assessments officer will explain the four-step assessment process, which includes working out your weekly income and taking into account general living and housing costs, plus any extra costs linked to your disability, for example excessive heating costs. From this information, your assessable income will be worked out and compared with the cost of providing care. If the officer has all the information he or she needs, you will be told the maximum weekly amount you could be expected to pay at the time of the assessment.</p>
<b>CAMHS</b>	<b>Child and Adolescent Mental Health Service</b>
<b>Case Work Officer</b>	A Case Work Officer is the authorised officer responsible for the writing and issuing of Education, Health and Care Plans or Support Plans across the whole age range 0-25 in line with the statutory requirements and timelines laid out in the SEN Code of Practice, Children and Families Act and all associated regulations and ensure that all Plans meet the requirements of Local Authority agreed guidelines/principles. They will also liaise with everyone involved to decide when a plan should be ceased.
<b>CCG</b>	<b>Clinical Commissioning Group</b> , responsible for the commissioning of health services across a given area.
<b>CEIAG</b>	<b>Careers Education, Information, Advice and Guidance.</b> All schools have a duty to provide this to young people aged 13 and over, and all education providers must provide this for all young people with an EHCP up to the age of 25. It should help young people to identify suitable education and offer careers advice.
<b>CHC</b>	<b>Continuing Health Care</b> There are different eligibility assessments for children and adults to access CHC funding.
<b>Children’s Rights Advocates</b>	Children’s Rights Advocates are responsible for chairing the reviews for Children in Care.
<b>CIC</b>	<b>Child in Care</b> as defined by the Children Act 1989.
<b>CIN</b>	<b>Child in Need</b> as defined by the Children Act 1989.
<b>CNA</b>	<b>Child Needs Assessment</b> is the assessment undertaken to provide a projection of what level of care and support will be available to a young person when they turn 18. In Cornwall this is referred to as a Strengths Based Needs Assessment.
<b>CSW Group</b>	<b>CSW Group</b> offer independent advice and guidance to young people with an EHCP across Cornwall.

<b>CV</b>	<b>Curriculum Vitae.</b> A document used to list qualifications, skills and achievements when applying for jobs.
<b>DCTS</b>	<b>Disabled Children and Therapy Service</b> responsible for undertaking statutory social care assessments and casework with disabled children and young people.
<b>Direct Payment</b>	<b>Direct Payments</b> provide payments to disabled people or carers to allow them to purchase services to meet their assessed need.
<b>DSA</b>	<p><b>Disabled Students Allowances</b> are grants to help meet the extra course costs students at university can face as a direct result of a disability or specific learning difficulty. They are aimed at helping people with disabilities to study on an equal basis with other students.</p> <p>Eligible full-time, part-time and postgraduate students can apply for Disabled Students' Allowances.</p> <p>The amount you get doesn't depend on your household income. Disabled Students' Allowances are paid on top of the standard student finance package, and don't have to be paid back. Assessments for this allowance are undertaken by a DSA Assessor in a designated assessment centre.</p>
<b>DST CHC checklist</b>	The NHS <b>Continuing Healthcare checklist</b> is a <b>decision support tool</b> to help practitioners identify people who need a full assessment for NHS Continuing Healthcare.
<b>EHCP</b>	<b>Education, Health and Care Plan</b> , the document which was phased in to replace SEN Statements from September 2014.
<b>Emergency Health Care Plan</b>	<p>An Emergency Health Care Plan makes communication easier in the event of a healthcare emergency. The plan should include a brief summary of the individual's diagnosis/es and their understanding of it.</p> <p>The plan should include a list of regular and 'when necessary' medications, and indications for any rescue medications for emergency use.</p>
<b>FE</b>	<p><b>Further Education</b> includes any study after secondary education that's not part of higher education (that is, not taken as part of an undergraduate or graduate degree).</p> <p>Courses range from basic English and maths to Higher National Diplomas (HNDs). FE also includes technical level qualifications and applied general qualifications, which replace diplomas and vocational qualifications.</p>
<b>HAP</b> – also referred to as a Health Care Plan	<p><b>Health Action Plan</b> It has been recommended by the Government that a Health Action Plan be developed for people with learning disabilities. This holds information about the person's health needs, the professionals who support those needs, and their various appointments. The plan is based on a full health check. A person with a learning disability can get a Health Action Plan through a health facilitator to support them to develop it, act on it and keep it under review.</p> <p>The health facilitator could be anyone supporting a person with a learning disability, including a member of the family, a support worker or a member of the Community Learning Disability Team. The Health Action Plan should cover the full range of services and supports the person might need, including medication taken, dentistry, eye care, speech therapy, occupational therapy or physiotherapy.</p>
<b>HE</b>	<b>Higher Education</b> refers to study at undergraduate, graduate, and post-graduate levels, usually at a university.

<b>IHCP</b>	An <b>Individual Health Care Plan</b> is produced by schools to support a young person’s medical and physical needs. Once developed it can be shared in other settings if the young person and their family agree it would be beneficial to do so.
<b>ISP</b>	<b>Independent Specialist Providers</b> provide both day and residential educational programmes to learners with complex learning difficulties and/ or disabilities who require a high level of expertise and support in making their transition to adult life.
<b>LA</b>	A <b>Local Authority</b> is a local council. Local councils are made up of councillors (members) who are voted for by the public in local elections and paid council staff (officers) who deliver services.
<b>LAC</b>	<b>Looked After Child</b> , as defined by Section 22 of the Children Act 1989.
<b>Local Offer</b>	A Local Offer gives children and young people with special educational needs or disabilities, and their families, information about what support services the local authority thinks should be available in their local area.
<b>MCA</b>	<b>Mental Capacity Act 2005</b> which sets out principles for Mental Capacity Assessments.
<b>Mediation</b>	<p>Every LA must commission a mediation service that is specifically linked to the EHC process (disagreement resolution can be used at any time) and that is factual, unbiased, informal, non-legalistic, accessible, and voluntary.</p> <p>Even if you do not use mediation, you will need a Mediation Certificate before going to Tribunal.</p> <p>Parents and young people can go to Mediation over health or care elements of an EHC Plan but if the health or care provision is intended to educate or train it should be considered as special education provision and therefore can be appealed to the Tribunal.</p> <p><a href="http://www.cornwall.gov.uk/education-and-learning/schools-and-colleges/special-educational-needs-file/education-health-and-care-needs-assessments-and-planning/mediation-and-rights-of-appeal/">www.cornwall.gov.uk/education-and-learning/schools-and-colleges/special-educational-needs-file/education-health-and-care-needs-assessments-and-planning/mediation-and-rights-of-appeal/</a></p>
<b>Personal Budget</b>	<p>A personal budget is a sum of money made available for children and young people who require additional support over and above what is available to most children and young people through local services.</p> <p>Personal Budget resources may come from education, health or social care which families can use to support their disabled child or young person’s assessed needs.</p> <p>More information is available on the Local Offer.</p>
<b>Personalisation</b>	<p>Personalisation is an adult social care approach described by the Department of Health as meaning that “every person who receives support, whether provided by statutory services or funded by themselves, will have choice and control over the shape of that support in all care settings”.</p> <p>The aim is that services are tailored to the needs of every individual, rather than delivered in a one-size-fits-all fashion.</p>

<b>PfA</b>	<p><b>Preparing for Adulthood</b> has previously been referred to as transition, but moving forward planning with young people should be more holistic and not just focus on the transfer between services.</p> <p>It also encompasses the provision of improved information and advice on care and support for families, investment in preventive services to reduce or delay people’s need for care and the promotion of independence and self-reliance among individuals and communities.</p>
<b>SENCo</b>	A <b>special educational needs coordinator</b> is a teacher who is responsible for special educational needs at school. All schools have a SENCo and they work with other teachers and with parents to make sure that pupils with special educational needs get the right support and help they need at school.
<b>SEND</b>	<b>Special Educational Needs and Disabilities</b>
<b>SENDIASS</b>	<b>Special Educational Needs Disability Information and Advice Support Service:</b> provides confidential and impartial information, advice and support to parents and carers of children who have special educational needs, learning difficulties or disabilities. The team of SENDIASS co-ordinators are qualified and experienced in special educational needs, and are based at the locations across the county.
<b>SMART targets</b>	Targets should be: <b>S</b> pecific, <b>M</b> easurable, <b>A</b> chievable, <b>R</b> ealistic and <b>T</b> ime limited.



## Contact us

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