Making transitions work in local areas: CB-NSG workshop write-up

Taylor Anderson (Forward Together Project Manager) and Polly Somervell (Forward Together Family Carer Project Worker) facilitated a discussion on the issues faced by young people with learning disabilities, their families, and professionals during transitions from children's to adult services. This discussion built on learning from the Forward Together Project's work in three local areas: the Black Country, Kent and Medway, and Manchester and Salford. Attendees shared experiences of issues during transition and examples of local good practice that could be built upon, and identified actions that should be taken to address these within local areas.

Issues faced by young people with learning disabilities, their families, and professionals during transition from children's to adult services

Insufficiency of available services

Attendees highlighted that the support available to young people and their families when they move to adult services is generally less comprehensive than the support available from children's services. The discontinuation of services that young people with learning disabilities had been receiving, in many cases without a direct replacement from adult services, causes significant stress and can result in unmet need. There is also no national standard for what support should be available during and following transition, creating a 'postcode lottery'.

Example: School-based Personal Assistants During childhood, personal assistants (PAs) are often based at schools and provide support to children and young people who attend the school that they are connected to. Once the young person leaves school, they are unable to receive support from the same PA (who will have developed a relationship with them and their family as well as the skills needed to support the young person). Attendees highlighted that families struggle to find skilled PAs who are able to support their relative when they have left school.

Poor communication and coordination between children's and adult services

Attendees identified problems with communication and coordination between children's and adult services, which prevent early and comprehensive planning. Named social workers or transition coordinators were highlighted as a useful mechanism for 'flagging' young people who are due to transition to adult services in advance of this transition (enabling the development of person-centred plans for their transition and support in adulthood), but many young people do not have someone carrying out this

role. This can lead to adult services not being aware that a young person is due to transition, with their transition consequently being rushed or unsuitable.

Poor communication and coordination between education, health and social care

Similar to the issues with communication and coordination between children's and adult services, attendees highlighted disjointed communication and working between education, health and social care services, as well as other services such as housing. For young people with learning disabilities whose behaviour challenges, many of whom have complex needs spanning health, education and social care, a lack of communication and coordination between the different services can lead to gaps in support.

Young people not meaningfully involved in transition

Although young people's views and wishes for the future, and what is important for them, are meant to be reflected in their Education, Health and Care Plan, this frequently does not occur, particularly for young people with severe or profound learning disabilities. Attendees highlighted the need for better mechanisms for ensuring the views of young people for their future are heard and reflected in transition planning.

Insufficient support for families

Attendees flagged that families are often not given sufficient information about the transition process or what is, or should be, available to their relative in adulthood. This prevents families from being involved in transition planning, and also means that they do not know who to hold accountable if legal duties or their relative's rights are not being upheld. The process of trying to navigate transition without sufficient information or support can cause significant stress and trauma for families.

This is compounded by the use of a 'child protection lens' for assessing families of disabled children, even when no child protection concerns have been raised. Because there is only one process for social care assessments for children, regardless of whether their need for social care is disability-related or related to child safeguarding issues, families who ask for social care support for their child report intrusive and inappropriate assessments and feeling blamed for their child's needs. Attendees highlighted that these experiences[1] can cause a lack of trust in social workers, which makes collaborative transition planning more challenging.

[1] This is known as 'systems-generated trauma'; for more information, read 'Broken' (CBF, 2020) and 'Systems Generated Trauma' (Cerebra and University of Leeds, 2025)

Local good practice examples

Joint transition service

In Dudley, the transition service straddles children's and adult services. This means that there is better communication and coordination between children's and adult services, facilitating earlier and better planning.

Talbot House 'THRIVE' service

Talbot House in Manchester is a charity that supports parents and unpaid carers of children and adults with learning disabilities. Their 'THRIVE' transition service provides support to the young person and their family, including help to identify options for education, jobs, day services, and independent living. This help to navigate the process of transition reduces stress for the family and can help create a smoother and more person-centred transition.

Coordinators and keyworkers

Several examples of roles either carrying out this function, or similar functions that could be used as a model, were identified:

- In Blackburn with Darwen, SEND coordinators have a navigation role during transition
- All children and young people (up to age 25) with learning disabilities and/or who are autistic who are either in hospital, or are at risk of being admitted to hospital, are entitled to a keyworker – as well as the standard keyworker offer, the Black Country are piloting an 'all-age keyworker' service, which can offer guidance and sign-posting
- Kids piloted an 'Early Years SEND navigator' in Birmingham – while aimed at under-5s, the concept of a practitioner providing a single point of contact could be duplicated in relation to transition

Early identification

Medway have developed a tool to identify young people who are approaching transition and are known to social care, which triggers a conversation about planning – while this currently only happens when the young person turns 17, the aim in future is to have this at an earlier age, e.g., 14, to enable earlier planning.

Regular meetings also happen now between children's and adult social care teams to review upcoming cases that will be moving between teams for strategic planning for the needs of the young people coming up into adult services.

Information for families and practitioners

Medway have created guidance for social workers on what a good transition looks like, which includes a checklist outlining what needs to happen and what the social worker needs to think about. Alongside this, they have developed a visual version to share with families.

Actions that local areas should take to improve transition

- Provide good quality information and advice for young people, families and professionals/practitioners
- Provide a navigator/coordinator (similar to Connexions Personal Advisors) to support young people with learning disabilities during transition
    - Attendees had differing views on whether this role should be embedded in existing services, e.g., education or social care, or independent of these (to ensure that advice is independent and unbiased)
- Ensure that there is a clearly explained handover pathway

Actions which should be taken at a national level to support transitions in local areas

- Introduce a statutory duty on social care to feed into the EHCP annual review (while there is a legal requirement to begin planning for adulthood during the year 9 EHCP review, there is no legal duty on health and social care to feed into this)
- Ensure all young people have a 'passport' which they can carry across from children's to adult services (building on the hospital passport model)