

**Manchester City Council  
Report for Information**

**Report to:** Health Scrutiny Committee – 4 December 2018

**Subject:** Young people moving in to adult services

**Report of:** Strategic Director of Children and Education Services  
Executive Director of Nursing and Safeguarding, Manchester  
Health and Care Commissioning  
Director of Population Health and Wellbeing

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**Summary**

This report provides an overview of work that is being done and work that is planned to improve the experience and outcomes of those young people moving from children and young people services to adult services and to improve the experience for their families and carers too.

**Recommendations**

The Health Scrutiny Committee is asked to:

- i) Consider the content of this report, the challenges that face children and young people in transition and the planning to improve their experiences and outcomes;
  - ii) Identify if there is a specific area the Committee would wish to look at in more detail; and
  - iii) Seek a progress report in 6 months that takes account of Committee members findings and planning.
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**Wards Affected:** All

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**Alignment to the Our Manchester Strategy Outcomes (if applicable):**

<b>Manchester Strategy outcomes</b>	<b>Summary of how this report aligns to the OMS</b>
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	Young people should receive a good education preparing them for adulthood with further training or employment outcomes as the outcome at the end of this.
A highly skilled city: world class and home grown talent sustaining the city's economic success	Preparing young people for adulthood and ensuring they have the skills and support needed to contribute in meaningful ways will support home grown talent, address inequality issues and demonstrates a commitment to supporting the

	future workforce; people feel valued when they are given the skills and confidence to be as independent as possible.
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	The city, private, public, voluntary organisations and communities recognise the importance of supporting young people to develop into the adults they can and want to be.
A liveable and low carbon city: a destination of choice to live, visit, work	
A connected city: world class infrastructure and connectivity to drive growth	

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**Background documents (available for public inspection):**

None

## **1.0 Introduction**

- 1.1 This report sets out a broad overview of the experiences and challenges facing young people as they move into adults services. Following on from this report, the committee may choose to request a more detailed report to look at a specific service area in more detail, potentially in conjunction with the Children and Young People's Scrutiny Committee.
- 1.2 There can be many challenges for children and young people moving from bespoke services to adult services and it is important that this is managed appropriately. This report provides an overview of the following services in the city:
  - Services for children and young people with and without disabilities;
  - Child and Adolescent Mental Health Services (CAMHS);
  - Young people's specialist substance misuse services; and
  - Reproductive and sexual health services for young people.

## **2.0 Services for children and young people**

- 2.1 Transition processes and practice have been completed via the Transition Planning Team (TPT) for young people with disabilities for some years. Specific teams and roles were created in Manchester circa 2010 following lengthy consultation and redesign. This brought together children and adult social workers under the same management, based in the same team. The cultural change for both sides was immense and eventually the children's practitioners, who had made up part of the team in the redesign, moved on. The transition planning team staff and budget sat, and continues to sit, within adult social care.
- 2.2 The social care aspects of transition are challenging. With the implementation of the Care Act 2014 the eligibility for care act assessments increased. This means that where transition had been an offer for those with learning, physical, sensory or multiple disabilities was now an offer that was available to all of those in transition from children's to adults services.
- 2.3 The Care Act 2014, and the changes this brought about, has become more imbedded. This is in relation to the skill set, knowledge and colleague relationships of those working in this area, within the city. There is now, more than ever, a recognition that transition planning is about the 'system' pulling together to ensure the young people of Manchester get the best opportunities to be the people they can and want to be as adults.
- 2.4 The current statement of purpose agreed between adults and children's social care is reflected in the statutory duties for 'looked after' children/care leavers and defines transition as:

"The transition planning team (TPT) will offer assessment, support and ongoing social care support (where needed) to those eligible, relevant or former relevant young people (and their carers) who are going through the

transition from child to adult; particularly within the context of the SEND reforms, NICE guidance and legislative requirements. Needs assessments, Pathway Plans and arrangements for Personal Advisers will be put in place prior to referral to the TPT, which should take place no later than 16 years and 3 months.”

### **3.0 The 4 +1 Review relating to social care**

3.1 A 4+1 review is a person centred tool that can be used to review different situations from an individual person’s good week to a service’s business plan / progress. The headings for a 4+1 review are What have we tried, what have we learned, what are we pleased about, what are we concerned about and what next. The bullet points below provide a summary review of activity under these broad headings to summarise the progress, challenges and planning to date;

#### **What we have tried and what we are pleased about:**

- The social workers are gaining in skills and knowledgeable; this is in terms of the support needs of the changing group of young people and in terms of service provision and then also legal frameworks.
- Positive working relationship with the Children with Disabilities team (CwD).
- Relationships with SEN schools are being re-established.
- Parent / carer forum relationships are established.
- Relationships with colleagues in Mental health are positive and are building.
- A system approach to learning has completed 1 part of a 2 part brown paper exercise (were the transition from child to adult has been tracked) for 2 young people who have enduring mental health (one also has autism) and transition.
- Education - Levels of those on work based internship programmes is increasing and are successful.

#### **What we are concerned about:**

- Referrals made into the Transition social care team, some are not always picked up in a timely way - this causes pressure for the CwD, or other referrers, and is not the offer for young people and their families / carers that we aspire to.
- Referrals and knowledge of the transition team in children's social care early help, permanence and localities is increasing but more awareness raising is needed.
- Children’s social care and schools understanding of their role in capacity building to support young people in preparing for adulthood needs to be embedded (Mental Capacity Act (MCA) 2005 affects those 16 and over)
- The step down of young people who are able to manage more independently is not always followed through as it could or should be, this is about practitioner skill, positive risk taking and capacity in the team to complete this level of complex case work.

### **What have we learnt the gaps are:**

- Support for those with low level mental health, which includes those who get support as children and young people but who are not eligible to be supported in the adult offer.
- Children and Adolescent Mental Health services (CAMHS) and Adult Mental Health Services (AMHS) - differences in terms of who is eligible for support - this affects those in transition.
- CAMHS and the adult Learning disability health assessments - can differ - which affects which way young people and families can be signposted and supported.
- MCA knowledge within schools and children's social care needs further training and embedding.
- Drug and alcohol support, signposting for those in transition. Service provision for those in transition is limited.
- A number of young people are Not in Education, employment or training (NEET)
- Autism - The diagnostic pathway has a lengthy waiting list; autism knowledge within the 'system' workforce needs improving; commissioning for a service provision that is about social care and building social networks, self resilience that is accessible and value for money is needed.
- Clear pathway for vulnerable and exploited young people who will need a continuing offer of support from Adults Services including trauma informed support.

### **Knowing what we know now, what next:**

- Contact and meeting being arranged with colleagues in the complex safeguarding hub to discuss the pathway into transition planning team
- Part 2 of brown paper exercise to be completed.
- People First (learning disability self advocates group) Consultation on what good transition should look like to be collated.
- 3 workshops with the parent / carer groups to be organised for the new year where transition will be the focus - looking at what parent / carers are worried about, and what for them, good transition for their young person would like.
- Young people's consultation to be planned
- System wide meeting to be arranged
- Discussion on a model of transition across the system, 'preparation for adulthood' and a role overseeing this to be explored further.
- conference in Children's Service in January 2019 to raise awareness and continually strengthen partnership arrangements.
- align commissioning activity and specifications to ensure a positive experience and 'smooth' transition.

## **4.0 Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services (AMHS) and Complex Placements**

4.1 As part of the work around the delivery of the National Transition of Commissioning for Quality and Innovation (CQUIN) the two main providers

(Manchester University NHS Foundation Trust and Greater Manchester Mental Health NHS Foundation Trust) and Manchester Health and Care Commissioning (MHCC) have worked together to deliver the following:

- A review of the local transition protocol that has incorporated the Greater Manchester agreed standards;
- Agreement that all adult services who receive a referral for a young person will not ask them to opt in but maintain a flexible approach in how they access a service;
- An audit of transition cases during 2017/18 and 2018/19.

4.2 It has been recognised that there remain issues on individual cases who are transitioning from our CAMHS teams into adult mental health services as the language used and thresholds worked to are very different. A monthly group has been established where it is expected that those cases that CAMHS would like to transition into adult mental health services are discussed between the two services.

4.3 Terms of reference have been drafted and the group has met twice and a small number of cases have been discussed with a view that adult services will assess and agree a care pathway for the patient. This work will also be supported by workshops looking at the following pathways and agreeing access for young people:

- Attention Deficit Hyperactivity Disorder (ADHD)
- Community mental health teams
- Eating disorders

4.4 In addition, those children and young people with complex needs, who are currently in receipt of a specialist joint funded placement from education, health and care provide an additional challenge. The complexity of the arrangements and the variety of stakeholders involved adds to this and as a partnership we are currently developing a robust system to ensure the appropriate continuity of care for this group of young people.

## **5.0 Young People's Specialist Substance Misuse Services**

5.1 The Eclipse service is a prevention oriented, outcome focussed and person centred substance misuse service for young people across the city of Manchester. From June 2017, the Eclipse Service has been delivered by Change, Grow, Live (CGL), a specialist substance misuse service commissioned to deliver integrated community based alcohol and substance misuse support for adults. The service is commissioned by the Population Health and Wellbeing Team at MHCC.

5.2 The Eclipse Service is for young people who are using or at increased risk of using any substance. The service provides education and advice to young people and professionals and targeted support to prevent drug or alcohol misuse and early interventions to avoid any escalation of risk and harm when such problems first arise. The service employs assertive outreach and

motivational techniques to work with young people and families who may be reluctant to enter treatment. A peripatetic model operates citywide where young people and their families can receive support in the community, at a location/venue most convenient and comfortable for them. This includes home visits, schools or other facilities frequented by young people.

- 5.3 For those that do enter treatment, a comprehensive assessment which appraises all risk and protective factors is undertaken and actively seeks to involve parents/carers and other professionals involved with the young person (where appropriate). Specialist treatment/interventions such as psychosocial interventions are delivered, under-pinned by a young person led care plan involving family members and professionals. Specialist treatment and support is age appropriate to promote the safeguarding and welfare of children and young people.
- 5.4 Originally commissioned as a service to support the needs of young people aged 19 years and under, the integration of the Eclipse service into the wider integrated adult drug and alcohol service has afforded the opportunity to develop the approach to supporting young adults who may require treatment beyond the age of 18 (and a move into adult treatment services) or people up to and including the age of 24 accessing the service for the first time. Specialist services must deliver age-appropriate interventions and promote the safeguarding and welfare of children and young people however it is good practice that services are based on developmental need rather than age. It is recognised that the needs of 18-24 year olds are different to those of under 18s (as is the legislative framework) however pathways to treatment in adult settings may not always be appropriate for the individual.
- 5.5 CGL have recently undertaken a wide scale re-model of their integrated drug and alcohol service in order to better respond to the needs of the Manchester landscape and population. This has included the development and recruitment of a Young Adult Worker post, a position dedicated to working directly with young adults aged between 18 – 24 years old.
- 5.6 The implementation of the Young Adult Worker post ensures there is a joined up and cohesive approach between young person and adult specialist substance misuse services. The aim is to ensure that young adults at different development stages who may be exposed to heightened health and wellbeing risks receive age appropriate care and support and that where there is a need to support young adults into a specialist adult substance misuse service, that this is a gradual and purposeful process.
- 5.7 Entering adult services can often coincide with other key transitions into adulthood, which can add complexity - a comprehensive care and treatment plan can provide consistency in service, reduce the likelihood of the young person to disengage with services and help prepare a person's understanding of any differences they can expect moving forward.
- 5.8 The Young Adult Worker will ensure support is consistent with NICE Guidance in respect of young people who may require support from an adult service and

in doing so will ensure this support is strengths based, person-centred and developmentally appropriate. In doing so, the Young Adult Worker will take into account the person's: -

- Maturity cognitive abilities
- Psychological status
- needs in respect of long-term conditions
- social and personal circumstances
- Caring responsibilities communication needs.

5.9 Relative to the above, consideration needs to be made on the most appropriate support for anybody accessing support between the ages of 18 and 24 years. Each person can vary in their needs, capabilities, ability to give and understand consent, of the risks posed, and in their independent living. The service will ensure that each person is fully assessed by a worker competent in understanding and managing the differences presenting, and in ensuring that the person is offered the safest, most appropriate, place based support. This is to safeguard the person requiring input; but also relative to other young people/adults accessing services and their access and risk. This is not a one off process; but a fluid and dynamic assessment at every contact to ensure that support is appropriate, constructive, safe and fully informed.

## **6.0 Reproductive and sexual health services for young people**

6.1 The Population Health and Wellbeing Team at MHCC commission two organisations to provide dedicated young people's sexual health services.

6.2 Manchester University Hospital NHS Trust (MFT) provide the Northern Integrated Sexual and Reproductive Health Service for women and men of all ages. However, as part of this they operate Fresh Clinics (Fresh is the brand name) for young women and men aged 25 and under. Fresh Clinics offer routine methods of contraception and screening and treatment of common sexually transmitted infections. Fresh also provide an education outreach service mainly focused on young people up to the age of 19 years.

6.3 Brook is a contraception and sexual health service for women and men aged 19 and under and will also provide a service for young adults aged up to 25 who have been referred due to particular vulnerabilities or with special educational needs and disabilities. Brook is based on Lever Street in the city centre. Brook offers routine and intermediate services including:

- Information, advice and guidance about sexual and reproductive health issues
- Provision of long-acting methods of contraception including the contraceptive implant and the intrauterine device
- Provision of routine methods of contraception including the contraceptive pill
- Provision of emergency hormonal contraception
- HIV testing and counselling
- Screening and treatment of chlamydia



- Screening and treatment of other common sexually transmitted infections
- Provision of free condoms and lubricants
- Provision of pregnancy testing, counselling and referral.

6.4 Both Brook and Fresh support and encourage young people to access all age services. This is because of the specialist nature of some sexual health testing and treatments, which are only available in an all age clinic. However, in such situations young people will be supported in a number of ways such as ensuring fast track appointments or by additional outreach and educational support.

## **7.0 Conclusion**

7.1 There has been sustained progress in the work around and understanding of the transition for young people from child to adult. This has been a system wide recognition of the breadth of young people this can affect and the wide range of partners across the system who can positively impact on this experience for young people.

7.2 There is more work to do.