The Highland Council

Education Children and Adult Services Committee

18 May 2016

Transitions Update

Report by Director of Care and Learning

Summary

This report provides an update on the management of transitions and developments involving NHS Highland and The Highland Council.

1. Background

- 1.1 Highland Council provides care and support to young people up to the age of 18, and beyond for young people entitled to aftercare support. Between the ages of 14 and 18, NHS Highland staff will become involved in the planning for young people who will have future care needs that require to be met by NHS Highland. NHS Highland is responsible for providing this support from the age of 18.
- 1.2 For services to successfully support young people to achieve the best outcomes into adulthood, the Highland Council and NHS Highland require to have trusting and open relationships, promote continuity in care planning through the transition period, maintaining a clear focus on the welbeing of the young person throughout the process. A positive transition is pivotal to the young person having the best opportunity to achieve their potential.
- 1.3 Since 2014, the Chief Executives of The Highland Council and NHS Highland have co-chaired six monthly meetings on transitions, with the aim of improving the process, to ensure it is achieved as seamlessly as possible. These meetings have focused both organisations on the process and led to the reinvigoration of Transition Pathways which aim to support staff to understand their roles and responsibilities.
- 1.4 Revised Transition Pathways were piloted between 1 October 2015 and 31 March 2016, involving the clear handover of lead professional responsibilities, as set out above.
- 1.5 The pilot provided clarity around roles and responsibilities rather than the previous variety of agreements based on different needs and ages that had previously existed. This does not mean that people with key relationships will no longer play a significant role in the lives of young people it means that there is clarity about the co-ordinating role, case management and financial responsibilities
- 1.6 The Transition Improvement Group, comprising of staff from the Highland Council, NHS Highland, Third and Independent Sector and young people's representative groups, continues to meet monthly and has monitored the pilot

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and analysed areas of improvement as well as ongoing concerns. Indeed, both organisations believe that further improvements can continue to be made to the transitions process which will be addressed in the improvement plan.

1.7 Based on the experience of the pilot, and particularly the clarity it has provided for young people and families, it has been agreed to continue the new arrangements into 2016/17.

2. Transition Scoping

- 2.1 One of the improvements to transition arrangements that has been discussed on a number of occasions over the past 15 years is the establishment of a dedicated health and social care transitions team. Such a team would assume case management responsibilities during childhood (perhaps around 14 years of age) and pass these on to adult services, once the major transitions issues had been addressed (perhaps around 25 years of age).
- 2.2 This was most recently considered again during the discussions about integration in 2012 but it was decided to allow the ages and stages process to continue at that time.
- 2.3 As a result of the pilot, and further discussions with communication with staff and young people and their representatives, the Transition Improvement Group believes that it is worth giving further consideration to this matter, scoping out the possible benefits and challenges. It is important to note that this wouldn't be through the creation of a new resource but would involve the reconfiguration and reformulation of existing resources with the aim of maximising the support to the benefit of young people and families.
- 2.4 NHS Highland currently has a vacant Project Manager post which the Chief Executive has agreed could be used to create a one year secondment opportunity dedicated to undertake this scoping, recognising the considerable dedicated time and careful consideration that this will involve.
- 2.5 This will include consultation with young people, families, carers, Members, the Highland CHAMPS Board, young people who are Self-directed Support Advisors and frontline staff.
- 2.6 It is intended the Project Manager will lead and chair a short term Transition Advisory Group, comprising of young people and their representatives. The Transition Advisory Group will report to the Transition Improvement Group which currently reports to the Chief Executives Joint Transition meeting as well as through the Highland Council and NHS Highland Strategic Committees.
- 2.7 It is intended that there will be updates provided to Members and that a final report will be available in early 2017, including findings, options and proposals.

3. Implications

3.1 **Resources**

3.1.1 It is envisaged that the new transitions arrangements at age 18 will be cost neutral but both Directors of Finance are having further discussions about this.

3.1.2 Any joint transitions team would need to be resources from existing staff teams and resources. It is envisaged that this would be a joint team, bringing together the two lead agencies, but this would require to be considered as part of the scoping work.

3.2 Legal and Risk

3.2.1 The options for any new transitions team would need to ensure that both organisations would continue to fulfil their statutory responsibilities.

3.3 Equalities

3.2.1 This work is intended to ensure that all young people fulfil their potential, as far as possible addressing inequalities.

3.4 Rural

3.4.1 It is possible that a joint and combined team could better ensure delivery to more rural communities.

3.5 **Climate Change/Carbon Clever and Gaelic**

3.6 There are no implications

4. Recommendation

- 4.1 Members are asked to note the contents of this report and to support the scoping of options regarding a joint health and care transitions team.
- **Designation:** Director of Care and Learning

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