



south ayrshire
health & social care
partnership

Young People in Transition Protocol 2022-2026



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Introduction

Providing effective supports for people with learning disabilities that seek to address their personal outcomes is a priority for the South Ayrshire Health and Social Care Partnership. In line with the **Young People in Transition Protocol 2022-2026** we are committed to supporting people to live their lives they want within their local communities along with their families and friends.

A key part of all our lives as we grow and develop is managing transitions at different life stages. Some transitions just happen and others require to be planned to manage the expectations of the next stage. There is a large body of evidence to suggest that suggests young people transitioning to adulthood can be particularly problematic for many people with additional support needs. ([Principles of Good Transitions, Scottish Transitions Forum](#))

In South Ayrshire we will provide support to young people and their families to plan ahead for the transition of leaving school and entering a new phase in their life. We will achieve this by working in partnership with young people and their families with the focus on building confidence and resilience. Our aim is to provide consistent information from key agencies including social work, health and education to ensure they are all working in partnership to support young people and their families to plan for transition. All professions have a role to play to ensure young people with additional support needs and their families achieve their ambitions and positive outcomes. The approach to transition will be focused on identifying positive outcomes building and at the same time building on the existing strengths and abilities of the young person.

Purpose of this document

The purpose of this Transition Protocol is to provide key information to young people and their families to support with transition planning. It will promote best practice by embedding the [Getting it right for every child](#) (GIRFEC) principles and adopting the [Association for Real Change](#) (ARC) Principles for transition as an overarching framework. This protocol can be used as a point of reference for young people, their families and professional staff to ensure there is a consistent approach throughout the transition process. It will also include a range of links to further sources of information to ensure young people and their families are prepared to successfully plan for the future. Transition should be seen as a process as opposed to a single event and we are committed to working in partnership with young people and their families to achieve the best possible outcomes as they move into adult life.

Getting it right for every child (GIRFEC)

Every young person in Scotland is on a journey, experiencing change as they make the transition from childhood through adolescence and into adulthood. As they progress, some have temporary difficulties and some may have longer term challenges that require planning to overcome.

The GIRFEC Principles provide an engagement framework that ensures the focus remains on achieving positive outcomes.

The GIRFEC principles are as follows:

- **Safe** ... protected from abuse, neglect or harm
- **Healthy** ... experiencing the highest standards of physical and mental health, and supported to make healthy safe choices
- **Achieving** ... receiving support and guidance in their learning – boosting their skills, confidence and self-esteem
- **Nurtured** ... having a nurturing and stimulating place to live and grow
- **Active** ... offered opportunities to take part in a wide range of activities – helping them to build a fulfilling and happy future
- **Respected** ... to be given a voice and involved in the decisions that affect their well-being
- **Responsible** ... taking an active role within their schools and communities
- **Included** ... receiving help and guidance to overcome social, educational, physical and economic inequalities; accepted as full members of the communities in which they live and learn

GIRFEC is the national approach in Scotland and puts the rights and wellbeing of children and young people at the heart of service delivery.

Association for Real Change Principles (ARC Scotland)

The Scottish Transitions Forum works in partnership with the Association for Real Change (ARC Scotland) to improve practice and policy in health and social care for the benefit of people with learning disabilities or additional support needs. Working in partnership with families, they have designed their approach around seven core principles intended to provide structure to supporting young people with additional needs who are making the transition to young adult life.

When we developed the **Young People in Transition Protocol 2022-2026** we committed to adopting the ARC principles to inform the transition planning process.

The Association for Real Change Principles (ARC Scotland) are as follows:

Principle 1: Planning and decision making should be carried out in a person-centred way

The wishes of children and young people should be at the centre of any decisions made about their health or social care support. This follows the belief that young people and those who care for them are best placed to know what they need when they are provided they have access to the right information and support.

Assessments and plans for young people in transition must follow person-centred principles. Not all young people may want or need a person-centred plan in its fullest sense and other planning approaches should be available. Leading up to the transition stage young people and their families must have their rights respected and be provided with the relevant information and support in order to make an informed choice of what is right for them.

Principle 2: Support should be co-ordinated across all services

During transitions, young people with additional support needs will come into contact with many practitioners from health, education, welfare, housing, social care and other services. Effective co-ordination of transition planning and support at a local level is therefore critical, particularly for those with learning disabilities or multiple and complex needs.

Principle 3: Planning should start early and continue up to age 25

Care planning into adulthood should provide reassurance to children and young people that plans and systems are in place to avoid rushed or abrupt transitions. Evidence suggests that transitions planning in some local authority can start too late. Many carers and professionals report this as being a significant contributing factor to unsatisfactory and ineffective transitions. Young people, parents, carers, and professionals need to be made aware at an early stage of what supports are available.

Principle 4: Young people should get the support they need

Many Scottish Transitions Forum members tell us they are concerned about inequities and inconsistencies in the application of the eligibility criteria across and between local authorities and from child to adult services. Where eligibility criteria are in place, they should be implemented consistently and fairly, and the reasons for decisions should be clearly communicated to allow realistic and early planning to take place.

Without some support, even a little, many young people with additional support needs may fail to achieve their potential.

Many young people will benefit from extra help to consider options, including those outwith those usually provided by health and social care partnerships. Not all young people with additional support needs are eligible for support but regardless of whether they are eligible for funded services, they should still be helped to engage with their community in ways that allow them to be included and valued.

Principle 5: Young people, parents and carers must have access to the information they need

Young people, parents and carers should have access to information stating what support they are entitled to and what they can expect during the transition process. The right to information is included in many different legislative areas.

It is best practice that young people should be able to make informed choices about the support they receive. There are many approaches which can help improve information provision including asset mapping and local transitions forums.

Information should be inclusive of different communication needs it is a requirement to provide information in ways that are inclusive of the different communication needs of young people, parents and carers. This approach is fundamental when working with the deaf, deaf blind and blind communities or others with communication support needs.

Principle 6: Families and carers need support

Young people's relationships with their family can be complex, particularly where parents or carers have an ongoing role in providing personal assistance and where disability related allowances or benefits are an important contribution to the household income. The needs and roles of family members and carers are also likely to change as the young person they care for grows up.

Parents and carers are usually central to the continuing care of young people with additional support needs and are the people most likely to provide guidance and support during transitions.

Many parents and carers feel they must fight for support and can experience 'burn out' as they deal with the many new challenges associated with transitions. Too often, parents and carers describe their experience of supporting a child through transition as like 'falling off a cliff' or a 'black hole'.

Advocacy should be available at the start and throughout transitions. It is best practice for advocacy to be made available to all young people in transition and their parents and carers, particularly if they have concerns about having their voices heard.

The offer of advocacy should be made at the start of transition, age 14, and be available to at least age 25. This is especially relevant for those who are looked after, care-experienced, and those when a Guardianship Order is being considered.

Principle 7: A continued focus on transitions across Scotland

The Scottish Transitions Forum is working collectively to promote the Principles of Good Transitions and improve practice across Scotland

The Scottish Transitions Forum will continue to actively engage with our members, Scottish Government, professional bodies, young people, parents and carers, and other national organisations to promote and support the implementation of the

Principles of Good Transitions 3 into planning and practice as detailed in the delivery plan, and evaluate its effectiveness for improving joined-up working across Scotland.

Fair Access to Services – Eligibility

Social care is not a universal service and access to social care is subject to eligibility criteria and targeted towards individuals with the greatest level of need. The purpose of an eligibility criteria is to manage the finite resources available and to be able to demonstrate fairness, consistency and transparency in both the decision making process and the subsequent allocation of resources.

Application of eligibility begins with an assessment of your needs. The assessment is carried out by social work staff with input from health and education and other relevant stakeholders. The assessment involves discussing your care needs with you and your family and with your permission sharing relevant information with others who may be involved in your care. Adopting a broad approach to assessment means the information will be gathered only once. The person who assesses your care needs will explain the process in detail and keep you informed throughout with regards to timescales etc.

Assessment is a process (not necessarily a single event) during which the relevant information about your circumstances is gathered. This includes information about your activities of daily living, your health and wellbeing and how you access your community. It also includes a financial review of your circumstances in order to maximise your income. In adult social work services, you may be asked to pay for, or make a contribution to, the cost of services you receive.

The eligibility criteria to access social work services contain four levels.

1. Critical needs - unable to meet vital or most personal care needs causing major harm or major risk to independence
2. Substantial needs - unable to undertake many aspects of personal care causing significant risk of harm or significant risk to independence
3. Moderate need - unable to undertake some aspects of personal care indicating some risk to independence
4. Low needs - difficulty undertaking one or two aspects of work/learning/education responsibilities, indicating low risk to independence.

In South Ayrshire the allocation of social work resources is currently prioritised to those with critical needs. Individuals with lower levels of need ('moderate' or 'low') will receive advice and guidance and this could include signposting to a range of other community support services.

Further information about eligibility can be found by accessing the [Fair Access to Community Care Services](#) and can also be provided at the assessment stage.

Self-Directed Support

Self-Directed Support (SDS) is the core legislation under which social care is delivered to individuals who have eligible care needs across Scotland. The main principle of SDS is to provide individuals who require social care support with more choice and control over their lives and how their support is delivered.

When the assessment of your needs is complete you will be informed if you have eligible needs. At this stage the assessor will provide information about SDS and discuss the four options available. This will enable you to make an informed choice about how you want to receive your support.

The four SDS options are:

Option 1: Direct Payment

A payment is made to you equivalent to the cost of the traditional level of service you are eligible to receive. The payment is made directly into a bank account or to a third party on your behalf. You can use this payment to purchase services or employ a personal assistant to meet the outcomes as set out in your support plan. A simple guide to Option 1 can be accessed [here](#).

Option 2: Individual Service Fund

You can identify a service to provide your support and work closely with them to ensure the support is flexible and meets your agreed outcomes. The Local Authority or the provider holds the budget but you have choice and control around how the service is delivered.

Option 3: Direct Service

The local authority selects a support provider and arranges the service to be delivered to meet your outcomes.

Option 4: A Combination

You can have a mix of options one to three. For example, you can have some of your care needs delivered via (option 3) and use some of it to employ a personal assistant (Option 1) for perhaps social support.

In South Ayrshire, our vision for SDS is to provide choice, control and flexibility for individuals and their carers who have eligible social care needs.

This means choice around how your care is provided and control over when it is provided with the focus on improving your quality of life.

Further information on SDS can be found [here](#) with additional links at the end of this document.

The Role of Social Work in Transition

South Ayrshire Health and Social Care Partnership provide services to both children and adults. Both the childcare and adult care service teams work together and both adopt the principles laid out in this protocol.

Social work involvement is not mandatory and many young people will not require formal social work intervention. Where social work intervention is not required, this document provides useful information and key links to further information and opportunities to support young people and their families.

When the young person at school is approaching the transition phase, the process will be discussed with them and their family and key information including this protocol will be provided. Transition planning will commence at the age of 14 and will involve input from education, health, childcare and adult services. The timescale and input at the planning stage will vary depending on the young person's circumstances and the complexity of their needs.

The initial transition planning will involve a multi-disciplinary approach involving the young person, their family/Guardian, children's services, adults services, education and health. Adopting a joint working approach as early as possible will ensure young people and their families are well informed about the support they may receive during and after the transition to adult care services.

Social workers from childcare and adult services will regularly attend forums (school and parent forums) to offer information and advice on issues such as:

- The transition process;
- Adult care services;
- Information about local care providers;
- Self-Directed Support (SDS);
- Charging Policy;
- Adult Support & Protection (ASP);
- Power of Attorney
- Adults with Incapacity- Guardianship orders;
- Carers Act;
- Further education
- Employment opportunities
- Changes in benefits
- Any other general information you require;

When young people transfer to adult services they will have a fully comprehensive Adult Assessment of Need and an existing support plan in place. Over an agreed period of time, the adult care Social Worker will develop a working relationship with the young person and their family.

The Adult Assessment has similarities to the childcare assessment and covers areas such as health and wellbeing and access to employment and social opportunities in the local community. The views of family members and or primary carers will also be included within the assessment along with input from any other services involved.

Adult services use an outcomes framework called Talking Points to gather information from the young person and their family/carer to inform the assessment. [Talking Points](#) is a series of outcomes that have been designed to keep the person at the centre of the assessment process by focusing on things that are important to them. It also identifies strengths and personal goals for the future (Outcomes) and these are recorded in a support plan. Included in the support plan is the existing skills and preferences of the individual and its purpose is a combination of promoting independence and promoting positive risk taking.

The Adult Assessment covers the following key areas:

- What is working well?
- What are the young person's strengths?
- What is important to them?
- What do they want to do in the future?
- What informal support systems do they have in place?
- What support do they need?
- What ideas do they have about how to have a good quality of life?
- What needs to be in place to be safe?
- What ability or capacity is in place to make choices and decisions?

Service Provision

The Social Worker will use the information gained through assessment to develop a care/support plan in partnership with the young person and their family. This will include selecting an appropriate SDS option and determining how formal support should be delivered and by whom.

This may include for example

- a specialist learning disability provider
- a building based service
- a respite/short breaks provider
- a personal assistant

Once a support plan is in place, all social work services are subject to ongoing monitoring and review. The purpose of monitoring and review is to ensure the outcomes agreed in the support plan are being achieved.

It also ensures that any significant changes in the presenting circumstances are dealt with along with any other issues or concerns.

A review will take place annually, in complex situations or where a care package is unsettled, monitoring and review will take place more frequently. If required, the Social

Worker/Care Manager will make changes to the support plan to ensure it is meeting the young person's needs.

The Role of Health in Transition

As with the wider population, health issues are overseen by General Practitioners. It is recognised that people with a learning disability may have additional needs not easily met by generic services and may require support from specialist learning disability health team.

In South Ayrshire there is a team of specialist health Practitioners that have a long history, experience and training in supporting adults with a learning disability. Our primary goal is to support and enable good health and well-being. The health team consist of Psychiatrists, Psychologists, Nursing, Occupational Therapists, Physiotherapists, Dietetics with input from Speech and Language Therapists.

Not all young people will require input from every specialist health practitioner. Involvement of specific professions will be based on a person centred approach and assessment of individual health needs. We have an open referral system which means we accept referrals from anyone involved in the young person's life including self-referrals.

Traditionally we would become involved during the transition phase 6 months prior to leaving school. However, complexity of need may require an earlier engagement. We would bridge the transition gap from leaving child health services and entering into adult specialist learning disability team.

The role of the 'Specialist Learning Disability Team' would encompass:

- assessing the likely and potential impact on future health needs of the young person and identify interventions and strategies to minimise health issues.
- supporting a young person and their families, carers to manage and understand how to access adult services.
- Following assessment of needs a person centred approach will be implemented to address any unmet health needs.
- ensuring an understanding of the professional roles of the core health team. The health team would work collaboratively with other appropriate agencies to ensure that health needs and shared, when required, and it is incorporated into a young person's broader transition plan.

The young person together with the relevant health professionals should identify strengths and needs in all key areas of their life – general health and wellbeing, aids and equipment, advocacy, social skills should be identified, which may include:

- physical health and wellbeing, e.g. nutrition, vision and hearing, dental care and oral health;
- physical fitness and coordination, e.g. mobility and postural management;
- neurological health and wellbeing, e.g. epilepsy;
- communication; easy read social stories, communication aids.
- medical management, including medication;
- personal care, e.g. personal hygiene, continence and sexual health, health promotion and risk management;
- emotional or mental health needs/psychosocial support, spiritual wellbeing and interpersonal/social skills;
- psychological assessment and intervention;
- independence needs, e.g. equipment, environmental adaptations and housing;
- Community participation/leisure, self-advocacy and independent healthy lifestyle.

Parents and carers may also need support as the young person takes on more independence and new challenges.

The Role of Education in Transition

Education has a key role in the transition planning process to adulthood for young people with additional support needs. The lead professional in Education will regularly liaise throughout the school year with other services to support young people and their families.

Education also contribute to the assessment and transition process and help young people and their families' access relevant information to navigate the process.

The role of Education will include carrying out the following actions as required:

- Allocations and referrals will be made to social work and health services and any other relevant agencies
- Co-ordinate and arrange annual school review meetings to plan ahead for transitions
- Provide transition information including this document at the appropriate age & stage
- Contribute to both childcare and adult assessments
- Liaise and work with Social Work and Health on an ongoing basis
- Organise and chair multi-agency meetings in preparation for the young people leaving school
- Contribute to the person centred assessment process by gathering views on transition from young people in appropriate ways
- Provide ongoing advice, information and support to parents to keep them informed of the transition process.
- Liaise with any post school provision and provide assistance to training service providers

- Liaise with Skills Development Scotland and work with young people and their families regarding college and applications. Introduce and familiarise young people to college
- Prepare all young people for transition with planned visits, skills development and community knowledge as appropriate
- Contribute to reports for guardianship applications/reviews and personal independence Payment applications and enquires when necessary

The above list is not exhaustive it highlights some of the involvement Education has as part of a multi-disciplinary approach to support young people and their families at the transition stage.

FINAL

Transition Timeline

Social workers from childcare and adult services will regularly attend forums (to offer information and advice on transition such as:

- The transition process;
- Adult care services;
- Information about local care providers;
- Self-Directed Support (SDS);
- Charging Policy;
- Adult Support & Protection (ASP);
- Power of Attorney
- Adults with Incapacity- Guardianship orders;
- Carers Act;
- Changes to benefits
- Further education
- Employment opportunities

When the young person reaches their 14th birthday and may require future social work support it is time to begin discussions in relation to the transition.

At this stage the school will provide the young person and their family with transition information including this document.

In complex situations a multi-agency meeting will take place and the transition process will be discussed as the young person approaches leaving school. The purpose of this early discussion is to inform families of the transition process.

When the young person leaves school and their care and support is transferred to adult social care services. The adult care Social Worker/care manager will develop a working relationship with the young person and their family.

The Adult Assessment will cover areas such as health and wellbeing and access to employment and social opportunities in the local community. The views of family members and or primary carers will also be included within the assessment along with input from both Education and Health.

Following assessment, an outcome focused support plan will be put in place. This will be subject to ongoing monitoring and review to ensure the outcomes agreed in the support plan are being achieved. As the transition phase progresses, any significant changes in the presenting circumstances will be dealt with by adult social services along with any other issues or concerns.

Appendix 1 – Policy Context

Adult Learning Disability Strategy 2017-2023

The currently Adult Learning Disability Strategy is being refreshed with the updated strategy due to be published mid-2022. The Strategy has been developed with support and assistance from the Scottish Commission for Learning Disability and covers the period 2022-27. The content has been informed by engagement with service users, families and carers and with professionals, managers and staff from organisations from across the sectors currently engaged in supporting people with a learning disability.

The Strategy has been designed to ensure that organisations operating in South Ayrshire are able to meet the principles set out in the National Strategy for Learning Disability - "The Keys to Life". The Health and Social Care Partnership has agreed local outcomes in keeping with the national approach and an Implementation Plan to deliver against these outcomes.

Fair Access to Community Care Services – archive.south-ayrshire.gov.uk/self-directed-support/

The Keys to Life (2019 – 2021) – Improving quality of life for people with Learning Disabilities – keystolife.info/

The Scottish Government published a new national strategy for learning disability, Keys to Life Learning Disability Strategy, in June 2013 and an updated implementation plan and framework was recently published for the period 2019-2021. The 10 year strategy makes more than 50 recommendations, the majority of which relate to health. The strategy aims to address the health inequalities facing people with learning disabilities. It has a strong focus on improving health outcomes in the widest sense including prevention, health improvement activities and equal access to health services. The strategy aspires to improve the life choices and quality of life of people with learning disabilities by ensuring they are included in every aspect of community life as equal citizens and that the voice of every person with learning disabilities is heard and respected.

The Keys to Life implementation framework and priorities for 2019-2021 identifies four strategic outcomes;

1. A Healthy Life: People with learning disabilities enjoy the highest attainable standard of living, health and family life;
2. Choice and Control: People with learning disabilities are treated with dignity and respect, and protected from neglect, exploitation and abuse;
3. Independence: people with learning disabilities are able to live independently in the community with equal access to all aspects of society; and
4. Active Citizenship: People with learning disabilities are able to participate in all aspects of community and society.

Appendix 2 – Useful Links and Information

SDS INFORMATION

Adults with Incapacity – What is – A Guardianship Order – www.publicguardian-scotland.gov.uk – Telephone: 01324 678300

Adults with Incapacity – What is – A Power of Attorney – www.publicguardian-scotland.gov.uk – Telephone: 01324678300

Civil Legal Aid – Info for Applicants - www.slab.org.uk - Telephone: 0131 226 7061

Information on Adult Protection Process – www.south-ayrshire.gov.uk/adultprotection - Telephone: Ayr South 01292 281993; Ayr North 01292 281993; Prestwick 01292 470099; Troon 01292 319272; Maybole/Girvan 01655 883293

Adult Support & Protection Information Leaflet – www.south-ayrshire.gov.uk/adultprotection - Telephone 0300 123 0900; Out of Hours 0800 328 7758

Self-Directed Support Leaflet – www.south-ayrshire.gov.uk/self-directed-support/ Telephone: 03001230900

Self-Directed Support: a guide for carers - www.gov.scot/Publications/2014/07/5455

...In Control – Self Directed Support – www.in-control.org.uk/factsheets

Self-Directed Support – Changing the way support is delivered (Social Work Scotland) – www.socialworkscotland.org

A Simple Guide Self-Directed Support – Option 1 – www.ailn.org – 01294 475685

South Ayrshire Council Charging Policy – www.south-ayrshire.gov.uk/self-directed-support/

Consent – it's your decision – www.hris.org.uk – Telephone (helpline): 0800 224488

A new type of benefits money called Personal Independence Payment – www.disabilityrightsuk.org – Telephone: 0800 9172222

Citizens Advice Scotland – www.cas.org.uk – Telephone: 03454 04 05 06

The Scottish Child Law Centre – www.sclc.org.uk – Telephone: 0131 6676333 (Freephone for people under 18 – 08003288970)

ADVOCACY

Advocacy in South Ayrshire, Circles Network, 27/29 Crown Street, Ayr KA8 8AG

www.circlesnetwork.org.uk – Telephone: 01292 264396

HEALTH INFORMATION

The Community Learning Disability Teams Leaflet, Patient Services Manager, Arrol Park Resource Centre, Doonfoot Road, Ayr KA7 4DW
www.south-ayrshire.gov.uk Telephone: 01292 610558

Learning Disability Hospital Liaison Service in Ayrshire – www.nhsaaa.net – Telephone: Liaison Nurse East Ayrshire 01563 578574; Liaison Nurse North Ayrshire 01294 323560; Liaison Nurse South Ayrshire 01292 614910

HOUSING PROVIDERS

Affinity, Scotland Divisional Office, 37 George Street, Ayr KA8 0AH
www.affinitytrust.org/what-we-do/supported-living/ - Telephone: 01292 292922

Blackwood, 160 Dundee Street, Edinburgh EH11 1DQ
www.blackwoodgroup.org.uk – Telephone 0131 317 7227

Cornerstone, Glasgow Office, Kirkhaven business Centre, 120 Sydney Street, Glasgow G31 1JF
www.Cornerstone.org.uk - Telephone: 0141 550 7580

Hansel, Broadmeadows, Symington KA1 5PU
www.hansel.org.uk – Telephone: 01563 830340

Lifeways, Unit 2i, Munro Business Park, Munro Place, Kilmarnock KA1 2NP
www.lifeways.co.uk – Telephone: 01563 535777

RSL's operational in South Ayrshire:

- **Ayrshire Housing, 119 Main Street, Ayr KA8 8BX**
www.ayrshirehousing.org.uk – Telephone: 01292 880120
- **Blackwood Housing Association. 1 Belses Gardens, Cardonald, Glasgow G52 2DY**
www.mbha.org.uk – Telephone: 0141 883 4477
- **Blue Triangle Housing (Glasgow) Housing Association, Chalmers Court, 36 Charlotte Street, Ayr KA7 1EA**

www.btha.org.uk/mail/contact.php - Telephone: 01292 284821

- **Hanover Housing Association, West Area Office, Hanover (Scotland) Housing Association Ltd., Pavilion 5 (Ground Floor), Watermark Business Park, 345 Govan Road, Glasgow GG51 2SE**
www.hsha.org.uk – Telephone: 0141 553 6300
- **Link Housing, Link Group, Link House, 2c New Mart Road, Edinburgh EH14 1RL**
www.linkhousing.org.uk – Telephone: 03451 400 100
- **West of Scotland Housing Association, Cowlairs office, 252 Keppochhill Road, Springburn, Glasgow G21 1HG**
www.westscot.co.uk – Telephone: 0844 892 0321
- **Trust Housing Association Ltd, 1st Floor, Pavilion 5, Watermark Business Park, 345 Govan Road, Glasgow G51 2SE**
www.trustha.org.uk – Telephone: 0131 444 1200

South Ayrshire Housing Options Guide: Ayrshire Housing, Housing Options Team, 80/88 Kyle Street, Ayr KA7 1RZ
www.south-ayrshire.gov.uk/housing - Telephone: 0300 123 0900

West of Scotland Housing Association, Cowlairs Office, 252 Keppochhill Road, Springburn, Glasgow G21 1HG
www.westscot.co.uk – Telephone: 0141 558 6336

PROVIDERS

Turning Point Scotland
www.turningpointscotland.com Telephone: 01292 886 589 | 01292 671396

Hansel
www.hansel.org.uk – Telephone: 01563 831451

Quarriers
jean.houston@quarriers.org.uk Telephone: 01465712515 | 07964081526

Key
gillian.loudon@key.org.uk Telephone 07385398507

Partners for Inclusion
michele.munro@partnersforinclusion.org Telephone: 01563 825555 | 07717793976

Blackwood Homes and Care

HelenKiltie@blackwoodgroup.org.uk Telephone: 01292 619749 | 07976617126

RESPIRE SERVICES

South Ayrshire Council Chalmers Road, 26 Chalmers Road, Ayr KA7 2RQ
www.south-ayrshire.gov.uk Telephone (Enquiry & Information Team) 0300 123 9000

Hansel Alliance

Colin.Kilbride@hansel.org.uk Telephone: 01563830340

TECHNOLOGY ENABLED SUPPORTS

South Ayrshire Telecare

Telecare@south-ayrshire.gov.uk Telephone 0300 123 9000
diane.thomson@south-ayrshire.gov.uk Telephone 0300 123 9000

Scottish Government Technology Enabled Care (TEC) Programme

ann.murray@aapct.scot.nhs.uk Telephone: 07833 095399

Digital Office for Scottish Local Government

thomas.ozers@digitaloffice.scot Telephone: 07905215924
telecare.digitaloffice.scot@DigTelecareScot

EMPLOYMENT AND EDUCATION

Ayrshire College, Ayr Campus, Inclusive Learning, Dam Park, Ayr KA8 0EU
www.ayrshire.ac.uk Telephone: 01292 293 553

Job Centre Plus Telephone: 0800 055 6688 | 08456043719

SOCIAL AND LEISURE

Dm2ayrshire, West Kirk, 84 Portland Street, Kilmarnock KA3 1AA

www.dm2ayrshire.org – Telephone: 01563 825 515 / 07753497865

Access for Sport – <http://saats.co.uk>

- **Links:** www.ayrshiresportsability.org.uk / www.acerr.org / www.sayrsportsc.co.uk

TRANSPORT/TRAVEL FORMS

South Ayrshire Council, Disability Resource Centre, Burns House, Burns Statue Square, Ayr KA7 1UT OR 181 Whitletts Road, Ayr KA8 OJQ or 17-19 Knockcushan Street, Girvan KA26 9AG
www.mygov.scot/apply-blue-badge - Telephone: 0300 123 0900

SOCIAL WORK HELP IN EMERGENCY SITUATIONS

Ayrshire Out of Hours: 0800 328 7758

USEFUL WEBSITES

YouTube:

DVD – AILN – Ayrshire Self-Directed Support Stories

Care Inspectorate:

www.careinspectorate.com

Scottish Public Services Ombudsman

www.spsso.org.uk

The Scottish Personal Assistant Employers' Network

www.spaen.co.uk

Self-Directed Support Scotland

www.sdsscotland.org.uk

Supported Decision Making
Decisions about Technology
Working with Independent Advocates
Money Matters
Consenting Adults

www.mwcscot.org.uk

Carers Trust Scotland

www.carers.org

Carers Scotland

www.carersuk.org/scotland

Coalition of Carers in Scotland

www.carersnet.org/

Crossroad Caring Scotland

www.crossroads-scotland.co.uk/

Minority Ethnic Carers of Older People Project

www.mecopp.org.uk/

Shared Care Scotland

www.sharedcarescotland.org.uk

Meeting of	COG <input type="checkbox"/>	APC <input type="checkbox"/>	CPC <input type="checkbox"/>	SWGB <input checked="" type="checkbox"/>
Held on	17th March 2022			
Agenda Item				
Title	Transitions Documents			
Summary:	<p>The purpose of this report is to provide SWGB with a policy and working document for Social Work Services in relation to transition.</p>			
Presented by	Sandra Rae/Jackie Hamilton			
Action required:	<p>SWGB are asked to approve the documents.</p>			

South Ayrshire Health and Social Care Partnership

REPORT

Implications checklist – check box if applicable and include detail in report									
Financial	<input type="checkbox"/>	HR	<input type="checkbox"/>	Legal	<input type="checkbox"/>	Equalities	<input type="checkbox"/>	Sustainability	<input type="checkbox"/>
Policy	<input type="checkbox"/>	ICT	<input type="checkbox"/>						

SOUTH AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP SWGB

17th March 2022

Report by Sandra Rae/Jackie Hamilton

Social Work Services – Transition Documents

1. PURPOSE OF REPORT

1.1 The purpose of this report is to provide SWGB with updated transition documents across Adult and Children services.

2. RECOMMENDATION

2.1 SWGB are asked to approve both attached documents .

3. BACKGROUND INFORMATION

3.1 The management of Social Work services is complex. The governance of practice in relation to providing a smooth transition from Children and Family Services to Adult services can feel detached at times. This was feedback we received from a variety of consultations from parents and young people. There was an already established transition policy however during Covid, this was not used as robustly for a variety of reasons not least being in a pandemic for almost two years. Services and families were in lockdown and schools were also closed for long periods.

3.2 The transition policy had been in place since 2018 and required to be updated. It has now been updated, alongside this is a social work practitioner guide(Moving On) to support the smooth transfer of young people across to Adult services.

3.3 There is a senior practitioner (adult services) specifically for transition work alongside a practitioner from adult services. The senior practitioner post is for 24 months to support the work and bringing the service forward. This will ensure there is a single focus and vision, bringing all disciplines together to achieve our main objective which are smooth, integrated services for all.

4 REPORT

4.1 The updated transition policy 2022-2026 will be shared with families as well as all practitioners and discussed through all the various stages of transition.

4.2 Following a period of engagement has been undertaken by the professional management structures. This engagement was designed to ensure the

proposed audit schedule was proportionate and most importantly, deliverable within the operational context. There will be a data return on auditing work for each SWGB to provide oversight of practice.

- 4.3 The audit schedule outlines a range of actions and case types for audit across the management structures. Underpinning the audit schedule are two key tasks firstly an annual coordinated survey of service users every December and an annual report from Senior Managers on auditing activity.

5 STRATEGIC CONTEXT

- 5.1 This action links to the new HSCP strategic plan

6 RESOURCE IMPLICATIONS

6.1 Financial Implications

- 6.1.1 None

6.2 Human Resource Implications

- 6.2.1 None

6.3 Legal Implications

- 6.3.1 None

7 CONSULTATION AND PARTNERSHIP WORKING

- 7.1 Extensive discussion has taken place with key stakeholders in seeking to draw together the audit schedule.

8. Risk Assessment

- 8.1 The introduction of the audit schedule mitigates a current risk in terms of oversight of the quality of practice.

9. EQUALITIES IMPLICATIONS

- 9.1 A equality impact assessment was completed.

10. SUSTAINABILITY IMPLICATIONS

- 10.1 None

REPORT AUTHOR AND PERSON TO CONTACT

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BACKGROUND PAPERS