

**BIRMINGHAM CITY COUNCIL**

**PUBLIC REPORT**

**Report to:** CABINET

**Report of:** Corporate Director for Adult Social Care and Health  
and Corporate Director for Children and Young People

**Date of Decision:** 26 June 2018

**SUBJECT:** TRANSITION PROJECT - PREPARATION FOR  
ADULTHOOD

**Key Decision:** Yes Relevant Forward Plan Ref: 005141/2018

**If not in the Forward Plan:** Chief Executive approved   
(please "X" box) O&S Chair approved

**Relevant Cabinet Member(s):-** Cllr Paulette Hamilton - Health & Social Care  
**Relevant Executive Member:** Cllr Kate Booth – Children’s Wellbeing

**Relevant O&S Chair:** Cllr Rob Pocock - Health and Social Care  
Cllr Mohammed Aikhlaq – Children’s Social Care

**Wards affected:** All

**1. Purpose of report:**

1.1 To seek approval of the recommendations 2.1, 2.2 and 2.3 in relation to the Transition Project and the subsequent implementation of the Transition Strategy, 2018 to 2021, for Birmingham, which will underpin the ‘Whole of Life Disability Strategy’ and the ‘Strategy for SEND and Inclusion 2017-2020’, as agreed by Cabinet in December 2017.

**2. Decision(s) recommended:**

That Cabinet:-

2.1 Approves the recommendations in relation to the Transition Project, commissioned by the Council following the agreement of the ‘Whole of Life Disability Strategy’ and the ‘Strategy for SEND and Inclusion 2017-2020’ by Cabinet in December 2017.

2.2 Approves the Transition Strategy, 2018-2021, (as contained in **Appendix 1** to this report), which will support the delivery of the ‘Whole of Life Disability Strategy’ and the Strategy for SEND and Inclusion 2017-2020 and will be effective from the date of the decision.

2.3 Approves the establishment of a Members' Working Group to be led by the Cabinet Member for Health and Social Care, Councillor Hamilton, to oversee the delivery of this Project

2.4 Note that approval of the recommendations in this report will mean:

- A shared vision and three year strategy across Children and Young People's Services and Adult Social Care and Health who are in transition, with an initial focus on children and young people with a disability and their families.
- A clear and effective pathway for children and young people who are in transition, which is focused on improving outcomes for the young person and enhancing life chances linked to opportunities in relation to education, employment, health and community engagement.
- An overarching Information and Data Sharing Protocol, which allows services to share high level information in the form of a performance dashboard to enable a single, shared understanding of the needs of young people and associated costs who are in transition. This will improve service planning, financial forecasts and joint commissioning.
- An aligned, shared financial plan with shared risks and benefits based on an agreed alignment of current funding linked to commissioned services, which support children and young people in transition.
- A practice and behavioural shift based on strengths based approach, which will focus on outcomes for young people and will subsequently deliver potential savings across the system – although it is too early to quantify any savings.
- Joint commissioning and aligned investment to support children and young people who are in transition and preparing for adulthood.
- A multi-disciplinary transition team focussed on strength based practice and personal budgets, which will test the longer term feasibility of a new service model that will ultimately support children and young people aged 0 to 25 with disabilities.

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### **3. Consultation:**

#### **3.1 Internal:**

3.1.1 The Adult Social Care and Health Directorate (DLT), the Children and Young People Directorate, Public Health and the Corporate Management Team have been consulted on an ongoing basis and have had the opportunity to inform the

co-production of the recommendations, associated Transition Strategy and supporting documents.

- 3.1.2 Officers from City Finance, Legal & Governance, Human Resources and Corporate Procurement Services have been consulted in relation to the development of the recommendations and in the preparation of this report.
  - 3.1.3 A Transition Project Group was established to oversee the progress of the work and to invite feedback in relation to the recommendations, consisting of performance, finance and commissioning leads, together with respective service leads from Adult Social Care and the Children and Young People's Services Directorate.
  - 3.1.4 An extensive programme of individual meetings was held with key service representatives from Adult Social Care and the Children and Young People's Services Directorate, which informed the development of the Transition Strategy and supporting documents.
  - 3.1.5 A Transition Delivery Group was established to focus immediately on a defined cohort, 14 to 17 testing a collective strengths based approach to practice to support improved outcomes and delivery of savings linked to personal budgets.
- 3.2 External:
- 3.2.1 The Executive Team from the Children's Trust have been consulted and are in agreement with the recommendations in relation to the Transition Project and the Transition Strategy, 2018 to 2021.
  - 3.2.2 A number of external Partnership Boards have been consulted which has subsequently informed the recommendations in this report, including the Autism Partnership Board, Health, the Voluntary and Community Sector, Parent/Carer and the Chair of the Adult's Safeguarding Board.
  - 3.2.3 The Project Group for Transition also consisted of lead officers from Birmingham's Children's Trust, the Clinical Commissioning Group and Health, including finance, performance and commissioning, who had the opportunity to inform and develop the recommendations.
  - 3.2.4 A schedule of individual meetings was held with key service representatives from Health and the Clinical Commissioning Group, which helped triangulate the findings of the project and align strategic intentions across the system.
  - 3.2.5 A joint commissioning forum was held with lead commissioners from the Clinical Commissioning Group, Adult Social Care and Health, Children and Young People's Services Directorate, and Birmingham Children's Trust to inform the shared commissioning opportunities linked to transition.
  - 3.2.6 The Delivery Group for Transition also consists of lead officers from the Council, Birmingham Children's Trust, Health and Housing.

#### **4. Compliance Issues:**

##### **4.1 Are the recommended decisions consistent with the Council's policies, plans and strategies?**

4.1.1 The recommendations of this report are consistent with the Council's Vision and Forward Plan, 2018, and support the three priorities of:

- Children - A great city to grow up in
- Health - A great city to grow old in
- Jobs and Skills - A great city to succeed in

4.1.2 Children, Priority 1 includes:

- 'An environment where our children and young people are able to realise their full potential through great education and training'
- 'Our children and young people are confident about their own sense of identity'
- 'Families are more resilient and better able to provide stability, support, love and nurture for their children'
- 'Our children and young people have access to all the city has to offer'

4.1.3 Health, Priority 2 includes:

- 'Promoting independence of all of our citizens'
- 'Joining up health and social care services so that citizens have the best possible experience of care tailored to their needs'
- 'Preventing, reducing and delaying dependency and maximising the resilience and independence of citizens, their families and the community'

4.1.4 Jobs and Skills, Priority 3 includes:

- 'Birmingham residents will be trained and up-skilled appropriately to enable them to take advantage of sustainable employment'

4.1.5 The recommendations support the 'Whole of Life Strategy' as agreed by Cabinet in December 2017 (key decision 004432/2017 refers) and is also consistent with the approved Vision and Strategy for Adult Social Care Services.

4.1.6 The recommendations support and are consistent with the Birmingham's Strategy for SEND and Inclusion 2017-2020 as agreed by Cabinet in December 2017 (key decision 004335/2017 refers) which outlined a number of key objectives:

- To develop joint commissioning to ensure resources are used fairly and effectively to provide maximum impact on outcomes.

- To provide services that ensure the needs of children and young people who have special educational needs and disabilities and their families are at the heart of all that we do.
- All mainstream provision will be welcoming, inclusive and accessible.
- To develop flexible pathways to enable children and young people to access the right provision and services to meet their individual needs at different stages. This will deliver the best outcomes, including education, employment and training as young people move into adulthood.

## 4.2 Financial Implications

4.2.1 The Council and partners in Birmingham are facing considerable change, together with shrinking resources, increasing demand and challenging financial savings. The proposals in this report have the potential to deliver cost reductions by a change in practice and the early identification and support of children with a disability together with a person centred approach, which will empower rather than create dependency on expensive longer term services through transition and into adulthood. This management of demand will be further strengthened by robust joint commissioning which will reduce duplication and increase efficiencies.

4.2.2 The budgets and resources which support children and young people with a disability, are currently split across children's and adult services, which does restrict the ability of partners across the whole system to work in a seamless efficient way that is driven by good practice and better outcomes for people, rather than financial boundaries. The approval of this report does not commit the Council or Birmingham Children's Trust to additional costs in relation to service delivery, but rather recognises the need to maximise shared resources more effectively.

4.2.3 The recommendations in this report identify budgets across partners that relate to service provision for children and young people in transition with a disability, which will be maximised by applying a partnership approach to support the shift in operational practice and behaviours, which will be reflected in the proposed new service model. Those services are:

- Individual Placements for children and young people with special educational needs and children with a disability
- ICES (Integrated Community Equipment Service)
- Short Breaks/Respite Services
- Enablement
- Information and Advice
- Advocacy

4.2.4 The estimated aligned spend of this service provision is estimated to be £ 22.8m in 2018/19 (see **Appendix 2**). The implementation phase will develop an aligned, shared overall financial plan and aligned budget to deliver the plan (see **Appendix 4**), build a joint commissioning approach and provide strong governance. Through this governance a clear plan will set out how savings and risks will be shared across partners to ensure services remain stable and

become more efficient and effective. It has to be noted that the Education element is Dedicated Schools Grant and ring-fenced and as such any savings will remain within the Dedicated Schools Grant

4.2.5 The cost of the new Team based on the realignment of current resources attributed to the support of transition from across the whole system is anticipated to be cost neutral at this stage. This is dependent on the ability and willingness of partners to work on a whole system basis and move posts to the most appropriate part of the system that supports effective transition for children and young people.

#### 4.3 Legal Implications

4.3.1 The recommendations in the report support the delivery of the Council's duties under the Children Act, 1989 and the Children and Families Act, 2014, with the aim of ensuring that there is effective integration between education, health and social care provision, including having regard to preparation for adulthood. In particular, they are consistent with the requirements in the SEND Code of Practice, 2015, to ensure that "the transition to adult care and support is well planned, is integrated with the annual reviews of Education, Health and Care (EHC) plans and reflects existing special educational and health provision that is in place to help the young person prepare for adulthood" (para 8.59).

4.3.2 The recommendations comply with the requirements of the Care Act, 2014 to promote the integration of care and support with health and to co-operate with key partners to promote wellbeing and improve the quality of care and support.

#### 4.4.1 Public Sector Equality Duty (see separate guidance note)

4.4.2 An Equality Analysis has been completed as outlined in **Appendix 3**.

4.4.3 The proposals in this report are focused on improving the life chances and services for children and young people with a disability and their families and in so doing improve the council's delivery of the equality agenda.

### 5. **Relevant background/chronology of key events:**

5.1.1 In December, 2017, the Whole of Life Strategy and the Strategy for SEND and Inclusion 2017-2020 were agreed by full Cabinet, both of which outlined key intentions to improve services for children and young people with a disability, aged 0 to 25, in Birmingham.

5.1.2 In January, 2018, the Corporate Directors for Adult Social Care and Health and Children and Young People's Services, together with the Chief Executive of Birmingham's Children's Trust commissioned a Transition Project, the purpose of which was to determine the feasibility of a whole system approach to transition.

5.1.3 The Transition Project has concluded overall that there is a shared ambition across the system to improve the transition for the wider groups of vulnerable children and young people who are at risk. However, in light of the Birmingham context, which is currently subject to considerable strategic change, the

proposal is that the initial focus is in relation to children and young people with a disability to ensure all improvements are incrementally phased and sustainable. The detail of the implementation approach is outlined in the Transition Delivery Plan, which is attached as **Appendix 4**.

5.1.4 The Transition Project, in addition to strategic direction, vision and ambition, was asked to focus on three specific opportunities to determine their feasibility within the Birmingham context, namely:

- Data being brought together to enable a single shared understanding of the needs of children and young people in transition to improve service planning, financial forecasting and commissioning.
- An integrated Transition Team by drawing together resources from across children's, adults and health services.
- A review of support services across children's, adults and health services, with recommendations for either directly delivered or commissioned services to support children and young people in transition.

5.1.5 The key issues, findings and proposals from these three areas follow:

## 5.2 Data Sharing

5.2.1 In relation to the sharing of data the Transition Project concluded that this was feasible but that it should be implemented on a phased basis to reflect the current issues that were found which evidenced that performance reporting based on shared data and associated costs was not aligned. The collaboration in relation to data sharing between education, health and social care services to provide support and planning for transition and preparation for adulthood is essential.

5.2.2 The work demonstrated that there are definite 'known cohorts' of children and young people as defined by the Children and Families Act, 2014, and the Care Act, 2014, but that these are being managed currently within the confines of each service. This lack of data sharing has had direct implications for the transparency of performance and financial costs but more importantly for the customer journey and the experience of the child, young person and families as they encounter the system. There is no 'whole system' approach to data and information.

5.2.3 The respective finance teams are actively trying to engage all of the prevailing systems issues to track the transition cases and associated costs and information has been provided in relation to the incoming cohorts, which has then been collected by Adult Social Care finance. However, in children's social care, doing this is problematic and the systems are not currently linked.

5.2.4 The lack of a link between financial information and child level data means effective financial planning is extremely challenging and that financial forecasts are based on broad assumptions. It is clear that opportunities to achieve value for money and reduce costs are systematically missed.

5.2.5 Children's Services and Adult Social Care currently use Care First as their case management and reporting system. A replacement, 'Eclipse', is due for

implementation in Birmingham's Children's Trust by July 2018 and in Adult Social Care within the Council by late 2018. A separate education case management system is in use for SEND, which will remain. A financial module is being considered. The integration to the education systems or health have not been included in the technology implementation but the ability of the system to be able to receive and send data to any system should give flexibility and allow for the development of more dynamic, less manual performance information reporting once systems have resolved any immediate teething issues.

5.2.6 The Birmingham Guiding Principles for Transition as outlined in the Transition Strategy set out an expectation that professionals actively and appropriately share information, knowledge and experience. The intention is that the sharing of transition data and financial activity across children's, adult's, education and health should be supported by an Overarching Information Sharing Protocol, which is attached as **Appendix 5** and will be brought together to enable a shared understanding of children and young people with additional needs. This will be achieved by the development of a performance dashboard which will capture collectively agreed performance indicators across education and social care and done in such a way as to enable the tracking of activity and costs.

5.2.7 The proposed Performance Dashboard is attached to this main report as **Appendix 6**. This will be the Performance Management Framework for Transition and is built on the four outcomes set out in Birmingham's vision and strategy for transition. The four outcomes will be used as the basis to select impactful performance measures to improve transition outcomes for children and young people and their families:

- Independent living and housing
- Employment/ Education/Training
- A healthy life
- Friendships, relationships, community connection

### 5.3 Integrated Transition Team

5.3.1 The Transition Project concluded that the development of an integrated Transition Team is feasible, but that it again should be phased, with an initial focus on disability, 14 to 17, but with an overall ambition to move to 0-25, based on the reconfiguration of current resources which currently sit separately within children's services and adult social care and health. It is proposed that a realignment of these existing resources should be progressed and tested to inform a longer term service model, which ultimately works fluidly beyond organisational boundaries.

5.3.2 The current transition pathways are broken, which is further compounded by a lack of cohesion and continuity in relation to practice, culture and workforce. This means children and young people in transition do not receive support earlier enough or in a consistent way, which offers little time for effective planning. There is a collective need to change the culture across the whole system in relation to disabilities and to maximise the potential of each child and young person to live fulfilling lives, independence in adulthood and in work

where possible. The approach to the realignment of resources means that current staffing, expertise and knowledge is maximised more fully from the onset of a young life as they transition to adulthood.

- 5.3.3 The approach will be initially based on two phases. Phase 1 will focus on the realignment of current resources to support children and young people with a disability from the age of 14 to 17. This will be followed by a focus on 18 to 25, which will allow staff and teams to work more closely together on an incremental basis to share knowledge, improve continuity and to encourage managers and partners to work together to increase scrutiny and challenge.
- 5.3.4 Further to the testing of this approach and a subsequent evaluation it is recommended that consideration is given to the merging of the two phases to inform a single 0 to 25 Children and Young People with a Disability Service delivery model which is progressive and child and person centred in year 2.
- 5.3.5 The incremental building of a new service model and integrated team based on the realignment of current resources does need to be built on the learning of a small operational pilot, which was held between Adult Social Care and Children's Services, which in spite of a considerably different strategic and operational landscape may still have some relevance and might benefit any future initiatives.

#### 5.4 Service Review

- 5.4.1 The high level review of services that are internally provided and externally commissioned to support children and young people with a disability in transition evidenced concerns in relation to commissioning across the whole system. It concluded that further joint work was required by partners to fully understand the readiness, quality and efficiencies of the market to inform longer term commissioning intentions and a joint Transition Commissioning Strategy.
- 5.4.2 The Transition Project found that whole system commissioning lacks governance, strategic direction and is disconnected from social care, which means that strategic planning is poor and operational relationships are not in place to inform commissioning priorities. There is limited joint commissioning, with partners often operating in silo's, which means that there is duplication, limited evidence based outcomes and market management to support the promotion of independence and a seamless journey for children and young people transitioning to adulthood.
- 5.4.3 The potential for commissioning to shape services and the market as a whole to support the improvement and consolidation of services, particularly in relation to personalisation, is extremely limited. However, there are potential joint commissioning opportunities, which can be pursued by partners, which will quickly start the shift in current commissioning practice and behaviours and improve outcomes for children and young people with a disability, such as, the establishment of a Framework Agreement for independent support placements , the joint re-shaping of the short breaks service and the consideration of extending the age range supported by the Council's enablement team from 18 to 25 to 14 to 25.

5.4.4 In addition to the quick wins there will be a comprehensive joint market review of services which support children and young people in transition. This will inform the quality and efficiencies of the current service and shape the aligned shared financial plan and subsequent investment in future service provision. It is recommended that a joint commissioning approach with all partners, including public health and the voluntary and community sector is established to apply a programme management approach to this review, which has both pace and grip.

## 5.5 The Delivery Plan

5.5.1 The proposals have informed a Delivery Plan, which is attached as **Appendix 4** to this report, which details the actions required against each specific opportunity to ensure the ambition for transition becomes a reality in Birmingham.

5.5.2 The approach adopted in the initial phase of the Transition Project in relation to information gathering meant that the high level findings were sufficiently triangulated to enable the work to move forward to the next phase, which has focused on facilitating the conditions for change in preparation for the implementation phase of the project by the Council, post June, 2018.

5.5.3 The preparation to support the move to graduated implementation has been the development of:

- A Transition Strategy
- A Transition Protocol
- A Transition Performance Dashboard
- An Overarching Information Sharing Protocol
- A Personal Budget Policy which is whole system
- A Delivery Plan
- A Delivery Group

5.5.4 The initial phase for the implementation as outlined in the Delivery Plan is set out for delivery in Year 1, but future years are reliant on strong, co-ordinated, whole system leadership to drive improvements and alignment of the transition work as linked to the Strategy for SEND and Inclusion 2017-2020, the Whole Life Disability Strategy and the wider Sustainable Transformation Plan in Birmingham.

5.5.5 An essential element of this is the communication and involvement of staff, young people and their parent/carers and partners in understanding the nature of the change and what will be required of them. This will be dependent on an effective Communication and Engagement Plan and strong governance which will drive the implementation of the Delivery Plan based on a collaborative approach. The proposed governance is outlined in **Appendix 7** of this report.

**6. Evaluation of alternative option(s):**

- 6.1 The Transition Project has included wide representation from stakeholders and it has considered the range of options for delivering statutory duties in an effective way.
- 6.2 If the proposed Strategy is not approved and implemented there will be a risk of failing to meet legal duties and not maximising available resources effectively to improve children and young people’s life chances as they transition from childhood to adulthood.

**7. Reasons for Decision(s):**

- 7.1 To improve outcomes and the life chances of children and young people with disabilities and their families when transitioning from childhood to adulthood.
- 7.2 To adopt a whole system Transition Strategy in line with the Strategy for SEND and Inclusion 2017-2020 and the Whole of Life Disability Strategy
- 7.3 To enable partners to plan effectively together for the future demand on services within the wider context of strategic change in Birmingham, increasing financial pressures and shrinking resources.
- 7.4 To reshape the approach to joint commissioning to enable better outcomes for children, young people and their families and to ensure value for money for the Council and its partners.

**Signatures**

**Date**

Councillor Paulette Hamilton Cabinet Member for Health & Social Care	.....	.....
Councillor Kate Booth Cabinet Member for Children’s Wellbeing	.....	.....
Professor Graeme Betts Corporate Director Adult Social Care & Health	.....	.....
Colin Diamond Corporate Director Children & Young People	.....	.....

**List of Background Documents used to compile this Report:**

Whole of Life Disability Strategy  
Strategy for SEND and Inclusion 2017-2020

**List of Appendices accompanying this Report (if any):**

1. Transition Strategy 2018-2021
2. Financial Breakdown
3. Equality Analysis
4. Transition Delivery Plan 2018-2021
5. Overarching Information Sharing Protocol
6. Proposed Performance Dashboard
7. Proposed Governance

**Report v5**

**Date: 13/06/18**