BIRMINGHAM CITY COUNCIL

RESOURCES OVERVIEW AND SCRUTINY COMMITTEE

THURSDAY, 17 JANUARY 2019 AT 14:00 HOURS IN COMMITTEE ROOM 6, COUNCIL HOUSE, VICTORIA SQUARE, **BIRMINGHAM, B1 1BB**

AGENDA

1 **NOTICE OF RECORDING/WEBCAST**

The Chairman to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2 **APOLOGIES**

To receive any apologies.

3 **DECLARATIONS OF INTERESTS**

Members are reminded that they must declare all relevant pecuniary and non pecuniary interests arising from any business to be discussed at this meeting. If a disclosable pecuniary interest is declared a Member must not speak or take part in that agenda item. Any declarations will be recorded in the minutes of the meeting.

4 **ACTION NOTES**

3 - 8

To confirm the action notes of the meeting held on 13 December 2018.

5 TRANSITION PROJECT: PREPARATION FOR ADULTHOOD 9 - 64

Councillor Paulette Hamilton. Cabinet Member for Health and Social Care. and Graeme Betts, Corporate Director, Adult Social Care and Health, in attendance.

6 **FINANCIAL MONITORING 2018/19**

Clive Heaphy, Corporate Director, Finance and Governance, in attendance.

TO FOLLOW

7 WORK PROGRAMME

65 - 68

To consider the Committee's work programme.

8 REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

To consider any request for call in/councillor call for action/petitions (if received).

9 OTHER URGENT BUSINESS

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chairman are matters of urgency.

10 **DATE OF THE NEXT MEETING**

The next meeting is scheduled to take place on Thursday, 14 February 2019 at 1400 hours in Committee Room 6, Council House.

11 <u>AUTHORITY TO CHAIRMAN AND OFFICERS</u>

Chairman to move:-

'In an urgent situation between meetings, the Chairman jointly with the relevant Chief Officer has authority to act on behalf of the Committee'.

12 **EXCLUSION OF THE PUBLIC**

That in view of the nature of the business to be transacted which includes exempt information of the category indicated the public be now excluded from the meeting:-

Exempt Paragraphs 3 and 4

PRIVATE AGENDA

13 **ACTION NOTES**

Item Description

14 OTHER URGENT BUSINESS (EXEMPT INFORMATION)

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chairman are matters of urgency.

BIRMINGHAM CITY COUNCIL

RESOURCES O&S COMMITTEE – PUBLIC MEETING

1400 hours on Thursday 13th December 2018, Committee Room 2

Present:

Councillor Sir Albert Bore (Chair)

Councillors: Muhammad Afzal, Meirion Jenkins, Josh Jones, Zaheer Khan, Narinder Kaur Kooner, Ewan Mackey and Paul Tilsley

Also Present:

Councillor Brigid Jones, Deputy Leader
Kate Charlton, Solicitor & Chartered MCIPD, City Solicitor and Monitoring Officer
Clive Heaphy, Corporate Director, Finance and Governance
Amanda Simcox, Scrutiny Officer
Emma Williamson, Head of Scrutiny Services

1. NOTICE OF RECORDING/WEBCAST

The Chairman advised the meeting to note that this meeting will be webcast for live and subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2. APOLOGIES

None.

3. **DECLARATIONS OF INTERESTS**

The Deputy Leader declared that her partner is an employee of Birmingham City Council.

4. REQUEST FOR CALL IN - EQUAL PAY STRATEGY 2018

The Committee agreed for the agenda to be varied and for the item to be brought forward.

Cllr Jenkins stated that he would be making a complaint due to matters being in the private report that should be in the public report.

The Chair formally moved that in view of the nature of the business to be transacted which includes exempt information indicated the public be now excluded from the meeting:

Exempt Paragraph 3 and 4.

This was agreed by the Committee and the Committee went into private session.

RESOLVED:-

 The Committee decided not to call in the Executive decision (5 votes to 2) and the Committee came out of private session and continued with the agenda in public.

5. ACTION NOTES

(See document 1)

The action notes of the meeting held on 15th November 2018 were agreed and the Chair had the following matters he wanted to pursue and update Members on:

- On page 2 of the notes, the fourth bullet point refers to adult packages of care and Clive Heaphy had undertook to check the differences. The Chair stated that in month 7 under paragraph 8.1.3 of the report, it is now £1.1m so that addresses which figure the Committee should use.
- Day nurseries: on the bottom of page 2 it was reported that there would be an overspend of £1m in month 5 if the report to Cabinet was not agreed. At month 7 this is listed at £0.5m so that issue is now also clarified.
- On page 3 Clive Heaphy had suggested some trend analysis needed to be included on the waste issues and he confirmed his Team are working on it.
 The Chair welcomed this and thanked him for bringing about changes to the report format that has already happened in month 7.
- On page 4, third open bullet point on HRA it referred to Clive Heaphy acting as a S151 officer. Clive Heaphy stated that initial feedback on the matter had been received and he is awaiting the full report he has requested. The Chair stated that he would keenly look at this report, as he has concerns regarding £818,000 expenditure and his belief that this was used to hire contractors, who sub-contracted over a period of time. It is his contention is that this is not legal and he is taking this matter quite seriously. Clive Heaphy confirmed that he takes this equally as seriously and there will be a full audit report.
- The fourth open bullet point contained a question around capital finance and capital expenditure in the HRA and the discrepancy between forecast spend for 2018/19 and a response was to be provided. Clive Heaphy apologised as this was still outstanding and he would respond to this.
- Under the work programme item it refers to Acivico and this is on today's agenda. However, a decision will need to be taken when the Committee get to this item due it being so late in the afternoon.
- In relation to Adult Social Care & Health Transition Project, there has been an agreement from the Cabinet Member and Corporate Director to attend the January 2019 meeting.
- Under the final bullet point regarding Long Term Financial Planning the Chair expressed some disappointment that the work has not progressed, as it was the Cabinet Member for Finance and Resources and Clive Heaphy that wanted this done. However, the Scrutiny Office has not had the assistance they needed to be able to undertake the work and the Chair is disappointed as the Committee could have added value.

Councillor Tilsley informed Members that at the Audit Committee meeting it
was apparent that there had been a clear breakdown of communication with
all partners regarding Paradise and poor financial control, with all of phase 1
and phase 2 monies having been spent. Clive Heaphy informed Members
that a report to Cabinet is due in January or February 2019 and Scrutiny may
want to be involved after this. Members were keen to be involved if this
added value.

RESOLVED:-

The notes were agreed, with various matters to be followed up.

6. FINANCIAL MONITORING 2018/19 MONTH 7

(See document 2)

Clive Heaphy, Corporate Director, Finance and Governance, attended for this item. Summary of Key Issues:

- There are continuing problems in the Place Directorate and the base budget pressures are increasing and not decreasing.
- The Chair thanked the Corporate Director for the risk and mitigations information that he had provided and this had been passed on to the other Overview and Scrutiny Chairs. In reference to table 4 Summary of Delivery in 18/19 and Future Years, the table needs to translate into the narrative as some of the figures are relatively hard to understand without this.
- S31 grants by CLG were incorrect and the Council has reclaimed this money.
- The Corporate Director will report back on the success of the spending freeze initiative.
- Adult Social Care and Health: paragraph 8.1.6 refers to mitigations and the pressures are being resolved so this does not show in table 4.
- Children and Young People: Travel Assist to be added to the work programme for January or February 2019.
- Place: There is a rise of £1.4m base budget pressures (£4.8m reported in month 6 and this is now £6.2m).
 - With regards to the second bullet point in paragraph 8.3.2 and a virement in year from Policy Contingency to acknowledge the cost of the service – the Chair requested that for the purposes of openness and transparency the pressure should still be shown, but with an acknowledgement that there would be an end of year virement.
 - Other services are working towards a balanced budget or an underspend to offset the Travel Assist budget in Children and Young People Directorate and Waste Services budget pressures in Place Directorate.

- Less use of agency staff would offset the costs of the MOU in the Waste Service.
- Economy: the Council are not maximising the sale of land and properties in a timely manner.
- Corporate: paragraph 8.9.1 refers to the target of £1.2m from Commercialism savings not being met and £0.1m is now being expected to be achieved instead. Members were informed there was a lack of precision on how the target was to be reached.
- There are concerns regarding Centenary Square being over budget (£3.8m) and where this was shown in the report. Members were informed this falls within the enterprise zone budget line.
- Commonwealth Games: £527.88m is the cost of the village. The timetable for finalising the budget for the Games has been deferred by the Government and it was suggested that the Executive of the Council may wish to enlist external support, for instance MPs could ask when the figures will become available. The Corporate Director to take this back.

RESOLVED:-

• The report was discussed and Travel Assist is to be added to the work programme for either January or February 2019.

7. **2019/20 BUDGET**

(See document 3).

Clive Heaphy, Corporate Director, Finance and Governance, attended for this item.

- Under paragraph 3 Summary of Key Issues the 3rd bullet point states that, in future years, there were forecast savings that were not fully deliverable of £8.9m in 2019/20 but the 2019/20 budget consultation states £4m. Therefore, there is a £4.9m gap in 2019/20. The Corporate Director stated that the budget consultation figure is an amalgam of over and under achieved and he undertook to break this down and undertake a reconciliation of the two figures.
- The monitoring report refers to the mitigation to the Enablement Service savings and this is not sustainable in the long term. If this remains unresolved Members were informed that there will be an impact on the 2018/19 and 2019/20 budgets.
- Travel Assist there is a £2.2m (no movement since Month 6) base budget pressure and £1.3m (no movement since Month 6) non-achievement of savings and the Council are currently consulting on £1.718m saving for 2019/20. Members agreed that detailed questions are to be put to the relevant officers when Travel Assist is discussed in January or February 2019.
- The day nurseries budget pressure in the monitoring report should not have an impact next year.
- The Early Years budget pressure is not reflected in the 2019/20 budget consultation.

• SENAR service has a funding shortfall of £1.1m due to grant funding running out. If £0.626 contribution from other partners does not come in then the consultation is looking at other partner incomes as part of the consultation.

RESOLVED:-

• The Corporate Director is to provide a breakdown and reconciliation between the two figures mentioned in the first bullet point.

8. ACIVICO UPDATE

(See document 4).

Clive Heaphy, Corporate Director, Finance and Governance, attended for this item.

The Chair advised that this went to Cabinet on Tuesday and the argument was well presented. However, there will be different perspectives from different Members and some may doubt the conclusions.

The Chair was concerned as it could be perceived that the Cabinet Members were almost being misled and he will draw this to the attention of the Chair of Coordinating O&S Committee.

9. WORK PROGRAMME

(See document 5).

RESOLVED:-

 The Work Programme was noted and Travel Assist to be added as an item for the January or February 2019 committee meeting.

10. DATE OF NEXT MEETING

The next meeting on Thursday, 17th January 2019 at 1400 hours was noted.

11. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

None.

12. OTHER URGENT BUSINESS

None.

13. AUTHORITY TO CHAIRMAN AND OFFICERS

Agreed.

The meeting ended at 1725 hours.

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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.

Lead Contact Officer: Professor Graeme Betts,

Corporate Director Adult Social Care and Health

Telephone No: 0121 303 2992

E-mail address: graeme.betts@birmingham.gov.uk

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 <u>Are the recommended decisions consistent with the Council's policies, plans and strategies?</u>
- 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	<u>Date</u>
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

APPENDIX 1

BIRMINGHAM WORKING TOGETHER

WORKING TOGETHER IN EQUAL PARTNERSHIP TO PREPARE YOUNG PEOPLE WITH ADDITIONAL NEEDS FOR ADULT LIFE

TRANSITION STRATEGY 2018-2021

FEBRUARY, 2018

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1. WELCOME

Welcome to the Birmingham Strategy for Transition

The need for a rich and fulfilling transition from childhood to adulthood feature as key elements of the Children's and Families Act, 2014, the Care Act, 2014 and NICE guidelines 2016.

This shared legislative context across partners in health, social care, education and the wider society is predicated on the concept of 'Equal Responsibility' and partners working collectively and collaboratively together 'as equals' to shape an effective transition life experience pathway which is both person centred and strength based.

Birmingham acknowledges its moral and legal duty to prepare and support children and young people to be resilient who are likely to continue to have additional needs through childhood and into adulthood.

The way that statutory services are configured and operate has meant that some young people and their families have had a negative experience of change in the types and levels of support as they grow older and although there have been improvements, more still needs to be done to ensure young people have better opportunities to be healthy, in employment or education, safe and well connected to their community with strong friendships.

A key part of transition is about how young people and their families are included and prepared and how services are coordinated. The cultural and structural differences between services and partner agencies can make transition more difficult and confusing, such as IT systems, approach to practice and how the services are accessed, organised and managed.

Critical to the success of the Strategy is the important role parents and carers have in their responsibilities to shape the experience of their children and young people. Partners in Birmingham need parents, carers and communities to work with them to build aspirations and resilience.

The effective preparation for adulthood can have a very positive impact in prevention and early intervention by helping manage change and by promoting life chances rather than purely service provision which reaches out to the wider universal expertise of the rich and diverse voluntary and community sector in Birmingham, service providers, housing partners, local business.

The purpose of this Strategy is to set out the case for change and how we plan to respond based on a graduated response through five key priorities over a period of three years from 2018 to 2021. This three year period reflects the current readiness of the whole system to be in a position to realistically respond and deliver on the key improvement challenges required to achieve and embed the key strategic intentions reflected in this Strategy and subsequently improve and transform transition in Birmingham

The Strategy will drive an ambitious programme of work that will be overseen by representatives of accountable partners through a Strategic Transition Board and will transform the way in which we work with children, young people, parent/carers, communities and as professionals together.

This Strategy sets out how all partners as 'Equals' will work together, to not only meet their statutory obligations but to shift the culture and practice of silo working, overcome the

practicalities of structural and system difference, but more importantly work passionately and professionally to realise the best opportunities and life chances for vulnerable young people, enabling them to celebrate their personal ambitions and dreams within the community of their choice.

2. OUR VISION

Our Birmingham Shared Partnership Vision is:

'To put children, young people and families at the centre of planning for a rich and fulfilling life, with equal chances in employment, education, training, health, relationships and community life'

OUR BIRMINGHAM PRINCIPLES:

Our principles are based on the expectation that planning for adulthood should be an ongoing partnership dialogue which takes a person centred approach based on strengths of an individual rather than deficits to planning, practice, realisation of agreed outcomes and review.

The high level principles are:

- Ambitious outcomes for children, young people and families, 'no compromise'
- Excellent choice and control for children, young people and families
- Excellent connection for children, young people and families to their communities
- The right offer of support to children, young people and families at a time when they need it, and in language which is jargon free and in an accessible style
- Allow for young people who are life limited to live their life now, education, friends, hopes and dreams
- Professionals step out of their box and share information, knowledge and experience
- Funding is shared and not hidden
- Support is offered and available informed by the experiences of young people
- Challenge of mistakes is welcomed to inform collective learning and continuous improvement

These high level principles can be consolidated into 4 key themes which will subsequently underpin our transition pathways and inform our 5 key strategic intentions.

PRINCIPLE 1: Effective Planning and Strong Partnership Engagement

Children and young people have a timely, planned, co-ordinated and positive journey from childhood to adulthood with professionals from both adult and children's services working together with the child, young person and family, this will be achieved through:

- A shared transition protocol and pathways
- Clear key working or lead professional arrangements
- Information and data sharing arrangements and procedures
- A person centred outcome based approach to assessment, planning and circles of support

PRINCIPLE 2: The provision of high quality information

Children, young people and their families will have access to high quality, accurate and timely information about the transition process with clear accountability for who does what and when. This will be achieved through:

- A clear Transition Pathway
- Good information and advice services

PRINCIPLE 3: Full participation of children, young people and their families.

This will be achieved through:

- Involvement in the development of the Transition Strategy, Protocol and Pathway
- Clear lines of communication
- Equal partnerships
- Good advocacy support and accessible venues
- Learning and Skills development opportunities
- A shared Personal Budget Policy

PRINCIPLE 4: An array of opportunities for living life

This will be achieved through:

- Strong innovative joint commissioning
- Information for young people and their families even when there is not yet certainty about choice
- Personal Budget Consortium which grows an alternative market offer based on the experience of children, young people and their families

NATIONAL POLICY CONTEXT 3.

The Children and Families Act, 2014, seeks to reform the way support is provided for children and young people with additional needs. The Act places the views, wishes and aspirations of children and young people and their parents at the heart of the system and requires a culture change in the ways in which professionals work with families and with each other. This is set out in the SEND Code of Practice.

- The SEND Code of Practice provides statutory guidance for specific organisations: the following organisations must fulfil their statutory duties in light of the guidance:
- Local Authorities (education, social care and other services)
- The governing bodies of schools (including non-maintained special schools)
- The proprietors of academies (including free schools)
- The management committees of pupil referral units
- Independent schools and independent specialist providers approved under Section 41 of the Children and Families Act 2014
- All early years providers that are funded by the Local Authority

- NHS England
- Clinical Commissioning Groups
- NHS Trusts
- NHS Foundation Trusts
- Local Health and Wellbeing Boards
- Youth Offending Teams and relevant youth custodial establishments

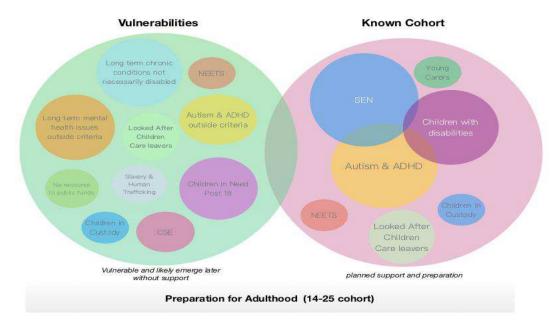
The Care Act, 2014, supports parent carers of disabled children and young people and the transition of young people into work/adult life in such a way as to promote their independence and so reduce their long term needs for care and support.

4. DEFINITIONS - WHO IS INCLUDED?

'The duty to conduct a transition assessment applies when someone is likely to have needs for care and support' (or support as a carer) under the Care Act when they or the person they care for transitions to the adult system'. (Care and support statutory guidance)

The Care Act identifies three groups that should have their own specific transition assessment; children, young carers and a child's carer. The young people who are the focus of this strategy are within the age range of 14 to 25 years who are likely to gain significant benefit from a transition assessment, including:

- Children and young people identified as requiring support through statutory health and social care assessments whose needs will require continuing support from statutory adult services
- Young people with Special Educational Needs and/or Disabilities (SEND), who may be likely to require support in adult life to achieve economic independence
- Young people who may be vulnerable as adults, for example, children and young people in care and care leavers, young people who are subject to safeguarding plans, children and young people who have endured child sexual exploitation, domestic abuse, drugs and alcohol
- Young Carers
- Young people with long term complex medical conditions requiring palliative care, and those with life limiting conditions and complex long term conditions requiring assessment and support. This includes Complex Heath Care, Mental Health and Drugs and Alcohol issues
- Young people in the secure estate including prison, Young Offender Institutions, Secure Children's Homes, Secure Training Centres or other places of detention as well as children and young people in the youth justice system



Whilst this strategy will concentrate on those known cohorts described for whom preparation for adulthood can be planned, there are those young people who clearly have vulnerabilities and are likely to emerge unplanned with needs to universal health services and/or Adult Social Care later. A whole system early intervention and prevention approach is essential to this cohort.

5. OUR FIVE KEY STRATEGIC INTENTIONS - 2018-2021

Central to the delivery of our shared five key strategic intentions over the next three years are the views of children, young people, their parents and carers and practitioners across the whole system. The intentions will further inform our three year Strategy and Delivery Plan.

Achieving these priorities will require all stakeholders to commit to new ways of working as 'equal partners'. All five priorities will receive endorsement and commitment at a senior level across Health, Social Care and Education. The partnership approach will also ensure that elected members understand the arrangements, strengths and aspects of the development of transition based longer term on a life journey approach linked to the developing 'All Age Disability Strategy' across Birmingham.

The five strategic intentions are:

- EARLY IDENTIFICATION, INTERVENTION AND PREVENTION: To develop a
 graduated approach to transition and the preparation for adulthood which is founded
 on early identification, intervention and prevention which will require sound, shared
 data aligned to shared and aligned financial commitments
- **RECLAIM PRACTICE:** To develop a graduated whole system approach to the reclaiming of practice, moving away from traditional silo assessments of 'need' to a conversational model which starts with the person and not with a Service
- **PERSONALISATION AND INNOVATION:** To further develop and embed Personalisation across the whole system
- WORKFORCE DEVELOPMENT: To build a workforce which is resilient, developing
 and improving skills and building capacity based on the concept of the wider sharing
 and realignment of resources across the whole system to support integrated delivery

• JOINT COMMISSIONING: To commission for better outcomes across the whole system by aligning strategies and pooling current resources to effectively manage and shape the market to ensure choice and value for money

These intentions are shown in detail below. The Strategy and these intentions will be implemented on a phased based over a three year period from 2018 to 2021.

5 STRATEGIC INTENTIONS				
EARLY IDENTIFICATION, INTERVENTION AND PREVENTION	RECLAIM PRACTICE	PERSONALISATION AND INNOVATION	WORKFORCE DEVELOPMENT	JOINT COMMISSIONING
Effective tracking of young people age 14-25 with additional needs supported by performance info and costs	Clear and integrated pathway into adulthood starting at Year 9	A Personal Budget policy in place	Workforce development needs mapped against cohorts to inform learning and development	A joint Strategic Transition Group collectively driving a robust approach to market management and shaping for the 14-25 preparation for Adulthood Journey
Clear and integrated pathway into adulthood starting at Year 9, Age 14	Transition support is strength based and focuses on what is positive and possible for the young person	Personal budgets in place for equipment and short breaks for disabled children	A Personal Assistant Offer supporting access, training and support for parents/carers	Shared Partnership Vision and Guiding Principles for Transition and Preparation For Adulthood embedded
Person centred transition Plan developed meeting their individual need at different stages	Transitions Protocol in place to guide practice and smooth transition Practitioners comply with data sharing Protocol and Agreement	High quality, creative and holistic transitions plans supported by Person Centred Planning Tools	'A Week in the Life Of' sessions to promote cross fertilisation of knowledge, skills and experience across adults and children's services	Review services commissioned, both Internal and external supporting children in transition to identify where there is no equivalent adult service
Potential risk or SEN is identified early by universal and jointly commissioned services	Practitioners share data and associated costs to ensure planning is effective and outcomes based but sustainable	Social prescribing in clusters of GPs practices	Understand workforce gaps and strengths to deploy skills and expertise at the right point in transition journey	A three year Joint Transition Market Management Strategy underpinned by aligned or integrated funding to drive up quality and manage escalating costs
The Early Help Offer is understood and accessible to families (Children and Adult Safeguarding Boards support to promote understanding)	A single multi-agency assessment and every young person in transition having access to a Person Centred Transition Plan	Regular Partnership information forums and social media events raising awareness of personalisation	A Partnership Workforce Development Programme, including parents/carers in place developing common understanding and positive relationships	Work with providers to re- design services to ensure they are person centred and empower rather than create dependency
Access to support for families who have children who have additional needs with an emphasis on advocacy, information and advice	Everyone working with young people in transition up to age 25 understand principles of person centred planning and outcomes to be achieved	Personal Budget Consortium in place to shape the market offer	Learning and development activities are co-designed and delivered with external partners (parents/carers, young people, In Control)	Identify and mobilise a unique transition commissioning resource from exiting services to drive commissioning priorities forward
Enablement principles promoting greater independence and life skills embedded in practice and pathways	Key working approach based professionals taking a wider perspective of their involvement and focused on seeking the best possible outcomes for each child	Circles of support and peer mentoring for parents and young people.	Build a workforce offer and infrastructure that starts with early identification of young person in transition, Yr9 age 14 and supports preparation based on the 4 Outcomes	More flexible options offered by technology for young people piloted (texting, skype, social media)
Short Break provision promotes independence and preparation for adulthood	Processes are jointly reviewed and re-designed to ensure they are person centred		Parent/ Carer champions identified and supporting peer support groups and peer mentoring	
			A 'Moving On' Annual Conference and Event	

To ensure the sustainability of the improvement, change and transformation the work programme will focus on identified cohorts in transition linked to each key strategic intention to help build the data, pathways, process and systems on an incremental basis, although in practice they are not mutually exclusive. The cohorts will be:

Year 1

Phase 1 - Identified priority cohort to test approach:

- Children with a disability and autism, age 14 to 17
- Young people with Special Educational Needs and/or disabilities, age 14 to 17, who are likely to need support in adult life

Phase 2 - Identified subsequent cohort to test approach:

- Younger Adults with a disability and autism, age 18 to 25
- Young people with Special Educational Needs and/or disabilities age 18 to 25

Year 2

- Consolidate 14-25 cohort
- Young Carers
- Looked After Children and Care Leavers
- Young people with long term complex medical conditions. This includes for example, complex health care, mental health.

Year 3

- Young people who are on the Edge of Care and who may be vulnerable as adults, for example, those who have endured Child Sexual Exploitation, gang culture, domestic abuse, drugs and alcohol
- Young people who have delayed maturity or cognitive disability
- Young people in the secure estate, including youth offending facilities, secure children's homes; and unaccompanied asylum seeking children.

In Year 1, together as a partnership we will focus on ensuring that the foundations and infrastructure, for whole system change are in place, meaning:

- An agreed Strategy across partners that provides clear leadership and direction for transition and the Preparation for Adulthood.
- An agreed Vision and guiding Principles
- An agreed Transition Protocol with clear roles and responsibilities across partners
- An agreed Transition information sharing protocol across partners
- An agreed Pathway which is clear and effective across partners
- Agreed strengthened governance arrangements
- Agreed Performance Dashboard associated to costs
- Review jointly commissioned services
- Review the workforce

In Year 2, together as a partnership we will focus on the delivery model and preparation for whole system change:

An agreed Joint Market Management Strategy

- An agreed Joint Commissioning Strategy
- An agreed shared Personal Budget Policy and supporting PA workforce and market options
- A pathway for the wider cohorts
- A workforce Development Programme
- Practice improvement across the partners

In Year 3, together as a partnership we will focus on integrated delivery and implementation:

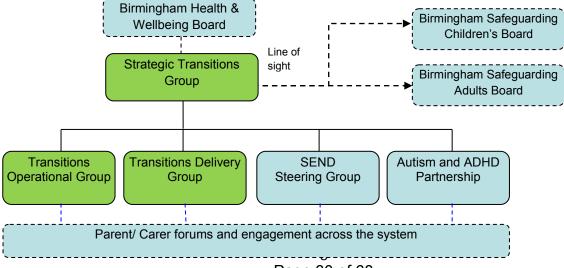
- An aligned partnership model of delivery which is person centred and that mobilises resources across boundaries to support early identification, early intervention and demand management
- An aligned partnership resource which sits at the beginning of the transition journey and moves through with the young person into adulthood with an absolute focus on enablement and preparation for employment
- Pooled Budgets to support the new delivery model and joint commissioning arrangements

A detailed and time-lined Delivery Plan will be developed to support the implementation over the period 2018-21.

6. LEADERSHIP AND GOVERNANCE

The Strategy will require the mobilisation of visible and whole system leadership capacity to drive forward the strategic intentions at pace and with grip. The Strategic Transitions Group will pick up the challenge and will oversee a strengthened existing Transitions Operational Group to maintain grip on 'business as usual' and a new Transitions Delivery Group (task and finish) to drive the programme of change, improvement and so that transformation does not falter. This Governance aims to bring a one view for Transitions across the whole system. To this end other major work-streams will feed into the Strategic Transitions Group, eg SEND in so far as they relate to Transitions to ensure that plans are aligned across the various programmes to avoid duplication. A line of sight on progress for Transitions will also be available to the Health and Wellbeing Board and each respective Children's and Adults Safeguarding Board.

Fig 1 - Governance Arrangements:



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Appendix 2

Preparation for Adulthood - Transition Project – Indicative Financial Envelope 2018/19

	Indicative Financial Envelope - 18/19			
	Children's Trust	Adults Social Care &	Children & Young	TOTAL
		Health	People	
Description of budget head	£000	£000	£000	£000
Children With Disabilities Residential 14+ (incl Complex Care)	2,490			2,490
Fostering 14+	538			538
Residential Respite	173			173
Home Support	518			518
Individual Placements – Adults		15,822		15,822
ICES		124		124
Short Breaks/ Respite Services - Adults		314		314
Enablement		438		438
Information and Advice		209		209
Advocacy		40		40
SENAR Element of joint funded independent special school placements			2,100	2,100
Total	3,720	16,947	2,100	22,767



APPENDIX 3

Equality Analysis

Birmingham City Council Analysis Report

EA Name	Transitions - Preparation For Adulthood	
Directorate	Adult Social Care and Health	
Service Area	Commissioning and Transitions Team	
Туре	New/Proposed Policy	
EA Summary	This EA supports the work in relation to setting a shared Vision and three year Strategy across Health, Social Care for Children's and Adult Services and Education for Children and Young People who are in transition, with an initial focus on children and young people with a disability and their families. This vision will be delivered over the next three years through a combination of; 1) Transition projects which focus upon particular cohorts of vulnerable young people/adults. 2) Joint commissioning and alignment of investment with relevant partners. 3) Establishment of a multi disciplinary team based on the realignment of existing resources to test the longer term feasibility of any new model proposals.	
Reference Number	EA002784	
Task Group Manager	kalvinder.kohli@birmingham.gov.uk	
Task Group Member		
Senior Officer	maria.b.gavin@birmingham.gov.uk	
Quality Control Officer	max.vaughan@birmingham.gov.uk	

Introduction

The report records the information that has been submitted for this equality analysis in the following format.

Initial Assessment

This section identifies the purpose of the Policy and which types of individual it affects. It also identifies which equality strands are affected by either a positive or negative differential impact.

Relevant Protected Characteristics

For each of the identified relevant protected characteristics there are three sections which will have been completed.

- Impact
- Consultation
- Additional Work

If the assessment has raised any issues to be addressed there will also be an action planning section.

The following pages record the answers to the assessment questions with optional comments included by the assessor to clarify or explain any of the answers given or relevant issues.

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1 Activity Type

The activity has been identified as a New/Proposed Policy.

2 Initial Assessment

2.1 Purpose and Link to Strategic Themes

What is the purpose of this Policy and expected outcomes?

To deliver a shared Vision and three year Strategy across Health, Social Care for Children's and Adult Services and Education for Children and Young People who are in transition from children to adult services, with an initial focus on children and young people with a disability and their families.

The outcome of which will be a clear and effective pathway for children and young people who are in transition, which is focused on the young person and enhancing life chances and opportunities in relation to education, employment, health and community engagement. Key functional changes are summarised as follows:

- 1) Data sharing protocols which enable high level information to support performance, shared understanding of needs and actions, service planning and visibility of costs.
- 2) Aligned financial plans and joint investment
- 3) Joint, outcomes based commissioning
- 4) Multi disciplinary team approaches

For each strategy, please decide whether it is going to be significantly aided by the Function.

Children: A Safe And Secure City In Which To Learn And Grow	Yes
---	-----

Comment:

The Transitions Strategy and associated actions to secure delivery of its vision, supports the local authority and Birmingham Children's Trust strategic priorities for children and young people, in delivering appropriately designed and timely interventions that create an environment where our children and young people through their journey of transition to adulthood are able to realise their full potential through great education and training. This will be achieved through specific intervention which enable children and young people to;

- * have confidence about their own sense of identity,
- * access the range of opportunities available to them
- * ensure that parents are able to support their children through the journey of transition and ultimately levels of independence and decision making,

Health: Helping People Become More Physically Active And Well	Yes
---	-----

Comment:

The function and policy will support young people (and their parents/carers) in transition to:

- * access to health, wellbeing and leisure services
- * receive integrated health and social care responses which are timely and tailored
- * maximize their resilience and independence by preventing, reducing and delaying their dependency upon higher cost statutory interventions

Housing: To Meet The Needs Of All Current And Future Citizens	Yes
---	-----

Comment:

Young people in transition will be supported to access a range of local housing solutions which are appropriate to their needs, safe and affordable.

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Jobs And Skills: For An Enterprising, Innovative And Green City	Yes
---	-----

Comment:

Young people will be supported to meet their aspirations as young adults through access into volunteering, training and employment opportunities.

2.2 Individuals affected by the policy

Will the policy have an impact on service users/stakeholders?	Yes
---	-----

Comment:

The project will test a future service model, the main beneficiaries will be young people in transition (service users), Children's Trust, the local authority and health.

Will the policy have an impact on employees?	Yes

Comment:

The transitions model will require a new way of working for staff engaged with young people, across the health and social care system. This will also influence practice of staff in the externally commissioned market.

Will the policy have an impact on wider community?	Yes

Comment:

The intention is to support young people to live a life and home that they choose within their local community.

2.3 Relevance Test

Protected Characteristics	Relevant	Full Assessment Required
Age	Relevant	No
Disability	Relevant	No
Gender	Not Relevant	No
Gender Reassignment	Not Relevant	No
Marriage Civil Partnership	Not Relevant	No
Pregnancy And Maternity	Not Relevant	No
Race	Relevant	No
Religion or Belief	Relevant	No
Sexual Orientation	Not Relevant	No

2.4 Analysis on Initial Assessment

At this stage, a Full Equality Assessment has not been completed in light of the fact that the overarching strategic direction and policy is yet to be formally agreed by Council. However, the practical implementation will incorporate a fully inclusive approach with children and young people informed by their experience which will recognise key characteristics.

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3 Full Assessment

The assessment questions below are completed for all characteristics identified for full assessment in the initial assessment phase.

3.1 Age - Assessment Questions

3.1.1 Age - Relevance

ĺ	Δηρ	Relevant
	Age	Relevant

Comment:

The project will work with young people as they transition into adulthood.

3.1 Disability - Assessment Questions

3.1.1 Disability - Relevance

Disability	Relevant
- ·····,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Comment:

The project will support young people in transition which will include young people with multiple needs including learning, physical and sensory disabilities, autism and secondary presenting needs relating to their mental health and wellbeing.

3.1 Concluding Statement on Full Assessment

The initial assessment has identified that at this stage the level of information required to complete a comprehensive and robust full EA is not available and will only become available as the policy and function develops. Therefore as part of the development of this policy and function further a full EA will be undertaken alongside this work.

4 Review Date

12/08/19

5 Action Plan

There are no relevant issues, so no action plans are currently required.

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TRANSITIONS DELIVERY PLAN

APPENDIX 4

ТНЕМЕ	STRATEGIC INTENTION	Year 1	Year 2	Year 3
GOVERNANCE	To create a compelling vision and guiding principles. A clear direction and plans underpinned by robust governance creating a line of sight, challenge, pace and grip in respect of the improvements required. Also supported by clear operational policies and agreements to facilitate effective Transitions.	In Year 1, together as a partnership we will focus on ensuring that the foundations and infrastructure, for whole system change are in place, meaning: • Agreed governance arrangements, aligning current groups to avoid duplication. Establish a Strategic Transition group and a Transitions Delivery (Task and Finish) Group with clear terms of reference to drive accountability and progress. Strengthen the existing 'business as usual' Transitions Operational Group for the current process whilst models are tested. • An agreed Strategy across partners that provides clear leadership and direction for transition	In Year 2, together as a partnership we will focus on the delivery model and preparation for whole system change: • An agreed Joint Market Management Strategy • An agreed Joint Commissioning Strategy • An agreed shared Personal Budget Policy and supporting PA workforce and market options • A pathway for the wider cohorts • A workforce Development Programme • Practice improvement across the partners	In Year 3, together as a partnership we will focus on integrated delivery and implementation: • An aligned partnership model of delivery which is person centred and that mobilises resources across boundaries to support early identification, early intervention and demand management • An aligned partnership resource which sits at the beginning of the transition journey and moves through with the young person into adulthood with an absolute focus on enablement and preparation for employment • Pooled Budgets to support the new delivery model and joint commissioning arrangements

THEME	STRATEGIC	Year 1	Year 2	Year 3	
	INTENTION				
		 and the Preparation for Adulthood. An agreed Vision and guiding Principles An agreed Transition Protocol with clear roles and responsibilities across partners An agreed Transition information sharing protocol across partners An agreed Pathway which is clear and effective across partners Agreed Performance Dashboard associated to costs Review jointly commissioned services Review the workforce 			
DATA AND INFORMATION	To ensure the sustainability	Identified priority cohort to	Undertake an evaluation of	Identified priority cohort for	
SHARING	of the improvement, change and transformation	test approach – Phase 1: Children with a	Phase 1 and 2 cohort to inform feasibility of a single 0	Year 3: • Young people who are	
	the work programme will	disability and autism,	to 25 Children and Young	on the Edge of Care and	
	focus on identified cohorts	age 14 to 17	People and Young Adults	who may be vulnerable	
	in transition linked to each	Young people with	with a Disability Service	as adults, for example,	
	key strategic intention to	Special Educational	delivery model	those who have	
	help build the data,	Needs and/or		endured Child Sexual	

ТНЕМЕ	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
	pathways, process and systems on an incremental basis, although in practice they are not mutually exclusive.	disabilities, age 14 to 17, who are likely to need support in adult life Identified subsequent cohort to test approach – Phase 2 • Young Adults with a disability and autism, age 18 to 25 • Young people with Special Educational Needs and/or disabilities age 18 to 25	Subsequent priority cohort for Year 2: Young Carers Looked After Children and Care Leavers Young people with long term complex medical conditions. This includes for example, complex health care, mental health	Exploitation, gang culture, domestic abuse, drugs and alcohol Young people who have delayed maturity or cognitive disability Young people in the secure estate, including youth offending facilities, secure children's homes; and unaccompanied asylum seeking children.	

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3
EARLY IDENTIFICATION, INTERVENTION AND PREVENTION	To develop a graduated approach to transition and the preparation for adulthood which is founded on early identification, intervention and prevention which will require sound, shared data aligned to shared and aligned financial	Develop a graduated whole system partnership performance dashboard which identifies and tracks identified cohorts of young people. Grow the dashboard as follows:	Consolidate the performance dashboard 14 to 25 for children with disability and autism dependent on outcome of evaluation of phase 1 & 2 cohorts informing the 0-25 service model.	Develop the final element of the performance dashboard to include Unaccompanied Asylum Seeking Children and young offenders.

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
	commitments	 Phase 1 - from the age of 14 to 17, starting with children with a disability and autism. Phase 2 - from age of 18 to 25 Co-produce a clear and integrated pathway into adulthood that begins in year 9, age 14, that informs a clear framework for multiagency working which will underpin and visualise our Transition Protocol. Develop a person centred Transition Plan which captures career aspirations and starts to plan for the world of work from year 9, age 14. Ensure through our universal services, potential risk or SEN need are identified early. Ensure that through our jointly commissioned 	 Develop the performance dashboard further to include Young Carers, Looked After Children, children who are on the Edge of Care, children who have delayed maturity or cognitive disability. Increase access to support for families who have children and young people with a learning disability, autism and those with challenging behaviour, with an emphasis on advocacy (to promote their own independence), information and advice. Re-design the Short Breaks offer to focus on preparation for adulthood and the promotion of independence. Develop a Voluntary and Community Sector Alliance with all statutory partners to share intelligence, 		

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3
		services, potential risk or SEN need is identified early. In relation to Transitions, Birmingham Safeguarding Children's Board support engagement on the Early Help Offer to ensure it is well understood by professionals and accessible to all families. Ensure that the Birmingham Adults Safeguarding Board is represented at key strategic meetings to ensure that there is a line of sight to the wider young people at risk moving through transition.	knowledge and expertise in relation to 'at risk' children and young people who sit outside service thresholds to inform collective intervention. This should be a key plank of the wider Early Help Strategy.	
RECLAIM PRACTICE	To develop a graduated whole system approach to the reclaiming of practice, moving away from traditional silo assessments of 'need' to a conversational model which starts with the person and not with a	 Develop, implement and review a shared Transition Protocol to guide practice and ensure a smooth and effective transition. Develop a clear integrated and effective pathway into adulthood 	Continue to develop a clear integrated and effective pathway into adulthood that begins in year 9, age 14 for remaining cohorts Young Carers, Looked After Children and Care Leavers, children who	 To develop the keyworker concept as outlined in the Transition Protocol across all partner agencies. To agree and embed a whole system practice

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
	Service	that begins in year 9, age 14 for children with a disability. Initial phase focus of pathway 14 to 17 followed by focus 18 to 25. Develop a single multi agency assessment with every young person in identified cohort in transition having access to a Person Centred Transition Plan. To develop, implement and review a Data Sharing Protocol and Agreement. Complete a joint review of current systems and practice, including young people and their families, to identify where improvements and changes are needed; to determine whether the current approach is person centred and developmentally appropriate. The review will pay particular attention to consulting	are on the Edge of Care, children who have delayed maturity or cognitive disability • Implement improvements and changes identified in the review of current systems and practice. • Continue to build/ improve practice for everyone working with young people in transition up to the age of 25 understands the principles of person centred planning, young people's development and outcomes to be achieved in respect of education and employment, community inclusion, health and wellbeing, independent living and housing options and how to involve families and carers in a supportive and professional way. • Continue to develop the	approach to shift current culture which is based on a conversational style of assessment led by the strengths of the person and not determined by service provision and menus.	

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
		with young people alone when they are over 18, whilst supporting parental involvement, admissions of young people to adult wards, parental visits on adult wards and the management of none attendance at clinics. This will be achieved in Year 1 and 2. • To ensure that everyone working with young people in transition up to the age of 25 understands the principles of person centred planning, young people's development and outcomes to be achieved in respect of education and employment, community inclusion, health and wellbeing, independent living and housing options and how to involve families and carers in a supportive and professional way. This	sharing of data and associated costs across practitioners based on the Data Sharing Protocol and Agreement for remaining cohorts to include Young Carers, Looked After Children, children who are on the Edge of Care, children who have delayed maturity or cognitive disability. Continue to develop the Transitions Operational Group to monitor performance, costs and decision making through the transition process against the new pathways 14 to 17 and 18 to 25 Expand cohorts identified to include Young Carers, Looked After Children, children who are on the Edge of Care, children who have delayed maturity or cognitive disability. To		

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
		will be ongoing from Year 1 to 2 and links to the Workforce Development Intention. To share data and associated costs across practitioners based on the Data Sharing Protocol and Agreement. This will be achieved in Year 1 for children with a disability and in Year 2 and 3 for remaining cohorts.	include Mental Health.		
		 To strengthen the existing Transitions Operational Group to monitor performance, costs and decision making through the transition process for those on current process pathway at 17.5 years. Establish the Transitions Delivery (task and finish) Group to work on identified cohorts in Year 1 (14-17; 18-25) to 			
		inform a model and pathways for children with a disability and			

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3
PERSONALISATION AND INNOVATION	To further develop and embed Personalisation across the whole system	Develop, agree and implement a shared Personal Budget Policy Develop and embed person centred planning tools to deliver high quality creative and holistic transition plans, linking transition planning with personalisation and supported employment. Pilot personal budgets in relation to equipment and short breaks for disabled children	 Pilot social prescribing with a cluster of GP Practices jointly with the CCG'S. Hold partnership information forums and virtual social media events to raise awareness of personalisation among young people, their families, carers, educators and care workers. 	Develop a Personal Budget Consortium with providers to shape the market offer for transition, hosted by the Voluntary and Community Sector. Develop Circles of Support and peer mentoring for parents and young people.
WORKFORCE DEVELOPMENT	To build a workforce which is resilient, developing and improving skills and building capacity based on the concept of the wider sharing and realignment of resources across the whole system to support integrated delivery. Support an organisational cultural change in the way that we listen to and engage with families,	 Realign current resources to inform a pilot to start to test the proof of concept for an integrated team. Analyse the skill gaps and the strengths to be clear about what works to improve outcomes for young people and to deploy skills and expertise at the right point in the transition 	Develop a Partnership Workforce Development Programme, Phase 1, including parent/carers and young people that will work to embed a new culture of operating across universal services, early help and statutory agencies, with the aim of developing a common understanding	 Continue to support a cultural change in the way that we listen to and engage with families, parents and carers and with each other as professionals. Develop the keyworker concept as outlined in the Transition Protocol across all partner agencies

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
	parents and carers and with each other as professionals	journey from childhood to adulthood and where they will have the biggest impact. • Map the workforce development needs for those working with the identified cohorts of young people to inform proportionate learning and development activities. • Develop a 'Week in the Life Of' to promote cross fertilisation of knowledge, skills, expertise and experience across adults and children's services - Ongoing on a rolling basis to inform impact and continuous improvement in practice. • Review the current PA offer to inform improvements in relation to access, training and support for parent/carers. • Identify parent/carer	and positive relationships. Develop a Partnership Workforce Development Programme, Phase 2, which will focus proportionately on areas of the wider workforce to adopt an asset based, person centred planning approach to understand families skills and knowledge, resilience, finances, social networks and involvement in community life. This will support a cultural change in the way that we listen to and engage with families, parents and carers and with each other as professionals and will be achieved in Year 3. Maximise external partners for the codesign and delivery of learning and development activities, including parent/carers,	 Maximise external partners for the codesign and delivery of learning and development activities, including parent/carers, young people, the DFE, In Control. To build a workforce offer and infrastructure that starts at the early identification of the young person in transition, Year 9, age 14 and supports the person to prepare for adulthood based on positive interventions which are focussed on employment, housing, health, engagement with the community and relationships. 	

ТНЕМЕ	STRATEGIC	Year 1	Year 2	Year 3
	INTENTION	champions to develop carers peer support groups and peer mentoring.	young people, the DFE, In Control.	
		 To establish a 'Moving On' Annual Conference and Event. Maximise external partners for the codesign and delivery of learning and development activities, including parent/carers, young people, the DFE, In Control. 		
JOINT COMMISSIONING	To commission for better outcomes across the whole system by aligning strategies and pooling current resources to effectively manage and shape the market to ensure choice and value for money	A joint Strategic Transition Group collectively drive a robust approach to market management and shaping based on the 14 to 25 preparation for adulthood journey. The Group will include children's and young people's services, adult services, voluntary and community sector, public health, housing, health, chamber of commerce and	Continue to re-design services to ensure they are person centred and empower rather than create dependency. This will inform the collective core transition offer which should be further complimented by the Direct Payments and Personal Budget initiatives which will shape different and more creative support solutions in the longer term.	Continue to re-design services to ensure they are person centred and empower rather than create dependency. This will be achieved in Year 3 and will inform the collective core transition offer which should be further complimented by the Direct Payments and Personal Budget initiatives which will shape different and more creative support

RATEGIC Year 1 FENTION	Year 2	Year 3
department of pensions and v supported by s finance colleag data experts. • Embed the shar partnership vising guiding principe transition and support preparation of adulthood. • Review collectives services current commissioned, internally and which support people in transition identify where no equivalent a service to refer people to, or we young people in to transfer to mone service. Esprotocol outling to do in such circumstances partnership with providers. This inform better jubanning and	will be unique transition commissioning resource from exiting services to drive the commissioning priorities forward. ues and red ion and les for the vely the tly both externally, young ition to there is adult ryoung where may need more than stablish a ing what in the will	solutions in the longer term.

THEME	STRATEGIC INTENTION	Year 1	Year 2	Year 3	
		 Develop a three year Joint Transition Market Management Strategy, underpinned by aligned or integrated funding, to drive up quality and manage escalating costs, working with providers to re-design services to ensure they are person centred and empower rather than create dependency. The services in scope will be Advocacy, Information and Advice, Short Breaks, Homecare and Residential Care, Supported Living, Equipment and Adaptations, Family Group Conferencing in the longer term. Pilot more flexible options offered by technology with young people, texting, skype, social media. 			

APPENDIX 5

BIRMINGHAM'S OVERARCHING INFORMATION SHARING PROTOCOL

WORKING TOGETHER IN EQUAL PARTNERSHIP TO PREPARE YOUNG PEOPLE WITH ADDITIONAL NEEDS FOR ADULT LIFE

MARCH, 2018

Contents

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Appendices

Appendix 1 – Transition Partnership Performance Dashboard

1. CONTEXT

Birmingham is committed to supporting young people with additional needs to prepare for adulthood.

The Birmingham Transition Strategy sets out how all partners as 'Equals' will work together, to not only meet their statutory obligations but to shift the culture and practice of silo working, overcome the practicalities of structural and system difference, but more importantly work passionately and professionally to realise the best opportunities and life chances for vulnerable young people, enabling them to celebrate their personal ambitions and dreams within the community of their choice.

Managers and practitioners across children's and adult services, recognise that the structural and cultural differences between their services can make transition more difficult and confusing for young people and their families.

Differences in areas such as IT, Systems, approach to practice and how the services are accessed, organised and commissioned can result in a lack of confidence on the part of young people, their families and practitioners. The appropriate sharing of data is yet another barrier to effective transition and reduced cost, causing delay, poor planning and outcomes for all involved.

We all know that decisions to share information, with whom and when, can have a profound impact on the efficiency and quality of service support to a vulnerable young person. These decisions enable more timely interventions and more effective strategic planning for future demand and improvement in commissioned services.

There can be no justification for failing to share information that will allow action to be taken to protect vulnerable young people and to improve the quality of their lives.

An Information Sharing Protocol is a useful tool with which to manage large scale, regular information sharing, in particular performance data and associated costs. It creates a routine for what will be shared, when and with whom and provides a framework in which this regular sharing can take place with little or no intervention by practitioners.

It is not a useful tool for managing the ad hoc information sharing which all practitioners find necessary. Most importantly, it is not intended to be a substitute for the professional judgement which an experienced practitioner will use in those cases and should not be used to replace that judgement. The lack of an Information Sharing Protocol must never be a reason for not sharing information that could help a practitioner deliver services to a person.

This Protocol complements and supports wider national guidance, professional body guidance and local policies and procedures to improve information sharing in relation to transition across services in Birmingham.

Government Policy places a strong emphasis on the need to share information across organisational boundaries in order to ensure effective coordination of services, specifically in ensuring that there are integrated health and wellbeing services.

Partner agencies arranging services in Birmingham are continually processing information and will often be gathering the same basic information, undertaking similar assessments, producing and implementing plans of action that are appropriate to the agencies perceived response, rather the holistic needs of the individual. As a result, there is often unnecessary

duplication of effort, poor co-ordination and a lack of a coherent approach to the particular issues facing an individual which could be potentially detrimental.

The Health and Social Care Act states that Health and Wellbeing Boards will need to look more widely at issues such as crime reduction along with the wider responsibility of ensuring there are integrated health and wellbeing services.

In these circumstances, it has been recognised that a multi-agency response is the best way of ensuring that service users receive the right support. In order to achieve this it is essential to have in place a framework that will allow the sharing of relevant information between professionals, when it is needed, with a degree of confidence and trust.

2. THE PROTOCOL

This Protocol is an overarching framework for sharing information between partner organisations which provide services to young people from the age of 14 to 25 who are preparing for adulthood and subsequently are moving through a series of assessments and services.

The information shared will relate to the performance, associated costs and outcomes achieved by these services to improve the quality of life outcomes for adults with additional needs. The information will help populate a shared **Transitions Partnership performance Dashboard** can be seen at **APPENDIX 1**

The Protocol provides supporting guidance on how to share information, including arrangements for the monitoring, review and approval of the Protocol. It has the following benefits:

- Helps to promote information sharing and the development of relationships
- Helps to ensure compliance with legislation and guidance
- Raises awareness of the key information sharing issues
- A comprehensive document that is relevant to all information sharing arrangements, allowing service level information protocols to focus on day to day specific information exchanges
- Establishes clear lines of accountability

3. PURPOSE OF THE PROTOCOL

The Protocol enables partner organisations to utilise well established appropriate and transparent information sharing systems and processes to inform the commissioning of future services and to manage escalating costs.

It is a statement of the principles and assurances which govern information sharing by ensuring clarity and consistency in practice and in accordance with the:

Data Protection Legislation: (i) the General Data Protection Regulation(EU) 2016/679)
 (GDPR) the Law Enforcement Directive (LED) and any applicable national
 implementing Laws as amended from time to time (ii) the Data Protection Act 2018
 ((DPA 2018)(subject to Royal Assent) to the extent that it relates to processing of
 personal data and privacy; and (iiii) all applicable Law about the processing of personal
 data and privacy;

- Human Rights Act, 1998
- Common Law Duty of Confidentiality
- Caldicott Principles
- Any other relevant legislation and guidance

Where other protocols and contractual arrangements already exist between organisations, then, if appropriate, this Protocol and associated service level protocols will run concurrently with them and parties can continue to adhere to existing protocols.

If it is a requirement to disclose personal service user information between organisations as part of a funding or contractual arrangement then all parties should be made aware of this as part of the funding and contractual process. It is recommended that all new partnerships entered into should be covered by an appropriate service level information sharing protocol.

LEGAL BASIS

Personal Data	Sensitive Personal Data
Sharing personal information in accordance with this protocol is lawful under the General Data Protection Regulation 2016 –Art 6	Sharing personal information in accordance with this protocol is lawful under the General Data Protection Regulation 2016 art 9
Public Task	Health & Social Care
Legal Obligation	
Vital Interests	Vital Interest

OBJECTIVES OF THE PROTOCOL:

The objectives are:

- Facilitate the lawful and appropriate sharing of information between all organisations and departments in an efficient and effective manner
- To encourage commitment by all partner agencies to work together to develop information sharing arrangements and working practice that will improve outcomes
- To reduce uncertainty as to the legal basis upon which information can be shared and help foster a shared understanding of legal and statutory duties
- To help professionals and organisations to understand when you need to get consent before sharing information and when you can share without consent or knowledge of the service user
- To develop consistency in information sharing

 To help organisations to develop clear service level protocols that set out the basics upon which they share information and of their respective roles and responsibilities which further strengthens the Birmingham Transition Protocol

INFORMATION SHARING PRINCIPLES:

This section sets out the general principles governing the sharing of information. All partners should:

- Facilitate the information exchange whenever such exchange is lawful
- Disclose the minimum amount of relevant information on a need to know basis
- Work together to develop frameworks, procedures and protocols for the sharing of information and to facilitate partnership arrangements

PURPOSE FOR WHICH INFORMATION MAY BE SHARED:

The sharing of information linked to this Protocol is supported when the purpose is:

- To improve well-being through educational, health and social care opportunities
- o appear to have a need or do have an eligible need for care and support for care support people in need
- To prevent health inequalities
- To provide seamless provision of children and young people's services
- To enable service users to access universal and specialist services
- To enable staff to meet statutory duties across organisations
- To improve data integrity and quality
- To manage and plan services
- To inform strategic commissioning
- To develop inter agency strategies
- To performance manage and audit

4. PARTIES TO THE PROTOCOL

The Birmingham Health and Wellbeing Board will own this overarching Information Sharing Protocol on behalf of their respective organisations. The partners included are:

- Birmingham City Council
- Birmingham Children's Trust
- Birmingham NHS Trust
- Birmingham CCG'S
- Voluntary and Community Sector
- Birmingham Safeguarding Boards- Children and Adults

5. STATUTORY POWERS AND DUTIES RELEVANT TO INFORMATION SHARING

The key pieces of legislation that underpin this Protocol and allow the sharing of information are:

- The Children Act, 1989 (Sections 17,27,47)
- The Children Act, 2004 (Sections 10,11)
- The Education Act 1996 (Sections 13, 434)
- The Education Act 2002 (Section 175)
- Learning and Skills Act (Sections 117, 119)
- Education (SEN) Regulations 2001 (Regulation 6 and 18)
- Children(Leaving Care Act) 2000
- Local Government Act 2000 (Part 1, Section 1 and 2)
- The Health Act 1999 (Section 27)
- The Human Rights Act 1998 (Article 8)
- The Data Protection Act 1998 (Sections 29, 35)
- Mental Health act 1983
- The Health and Social Care Act
- The Law of Confidentiality
- Data Protection Legislation: (i) the General Data Protection Regulation(EU) 2016/679)
 (GDPR) the Law Enforcement Directive (LED) and any applicable national
 implementing Laws as amended from time to time (ii) the Data Protection Act 2018
 ((DPA 2018)(subject to Royal Assent) to the extent that it relates to processing of
 personal data and privacy; and (iiii) all applicable Law about the processing of personal
 data and privacy;

Details of the key legislation and guidance affecting the sharing and disclosure of information are set out in HM Government national guidance, 'Information Sharing: Further Guidance on Legal Issues'

The powers and duties, when taken together, create a framework for the sharing of information between different groups of professionals and partner organisations, including the Voluntary and Community Sector, professionals working across service areas and local authority boundaries. Used proactively, they can facilitate the collation and sharing of information in many of the situations where people are most in need of help and targeted services. These situations are not limited to those where risks have materialised or where a service user is at risk of imminent or serious harm. Indeed, it is a responsibility to share information in order to prevent risk.

6. IMPLEMENTATION OF THE PROTOCOL

Partner agencies will be requested to approve and adopt the overarching Protocol formally.

All partners will disseminate the Protocol and ensure that the content is understood.

All partners will ensure the Protocol is available to the public through their Freedom of Information Publication Schemes.

Reviews will be carried out every two years.

7. ADOPTION OF THE PROTOCOL

The parties to the Overarching Information Sharing Protocol agree that the procedures detailed in this document provide a secure framework for the sharing of information between their respective organisations in compliance with their professional responsibilities.

Partner agencies that are party to this Protocol will undertake to:

- Ensure that staff adhere to the Protocol
- Implement and audit compliance with this Protocol within their respective organisations
- Ensure that where these procedures are adopted, no restriction will be placed on the sharing of information, other than those specified within this Protocol
- Ensure that all service level protocols established between partner agencies are consistent with this Protocol

Transitions Preparation for Adulthood – Performance Dashboard

INDEPENDENT LIVING AND HOUSING

FRIENDSHIPS/ RELATIONSHIPS/ COMMUNITY CONNECTION

EDUCATION/ EMPLOYMENT & TRAINING

A HEALTHY LIFE

70 (67%)

No and % of disabled children in transition and preparing for adulthood

10 (16%)

No and % of young people are happy with the outcomes of their transition

800 (30%)

No and % of young people who attend their EHCP Annual Review Meetings

10 (5%)

No and % of young people from the age of 14 who access direct payments

40 (51%)

No and % of disabled children in transition and living in the community

85 (105)

No and % of parents/carers satisfied with the services provided by Birmingham agencies for their children

300 (10%)

No and % of young people with a disability not in education, employment and training

30 (15%)

No and % of young adults who access personal budgets following transition

12 (20%)

No and % of disabled young people who are in transition and live in a residential setting within 10 Miles

72 (10%)

No and % of young people leaving care not in education, employment and training

0 (0%)

No and % of young people in transition with an annual Health check

16 (29%)

No and % of disabled young people who are in transition and live in a residential setting greater than 10 Miles

20 (5%)

No and % of young people coming through transition who are employed for 16 hours per week or more

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Transitions Preparation for Adulthood – Performance Dashboard

INDEPENDENT LIVING AND HOUSING	FRIENDSHIPS/ RELATIONSHIPS/ COMMUNITY CONNECTION	EDUCATION/ EMPLOYMENT & TRAINING
87 (67%) No and % of disabled children in transition and preparing for adulthood	10 (16%) No and % of young people are happy with the outcomes of their transition	800 (30%) No and % of young people who attend their EHCP Annual Review Meetings
40 (51%) No and % of disabled children in transition and living in the community	85 (105) No and % of parents/carers satisfied with the services provided by Birmingham agencies for their children	300 (10%) No and % of young people with a disability not in education, employment and training
12 (20%) No and % of disabled young people who are in transition and live in a residential setting within 10 Miles		72 (10%) No and % of young people leaving care not in education, employment and training
16 (29%)		20 (5%)

A HEALTHY LIFE

10 (5%)

No and % of young people from the age of 14 who access direct payments

30 (15%)

No and % of young adults who access personal budgets following transition

0 (0%)

No and % of young people in transition with an annual Health check

No and % of young people coming through transition who are employed for 16 hours per week or more

NOTE: Figures illustrative only – proposed dashboard

No and % of disabled young people who

are in transition and live in a residential

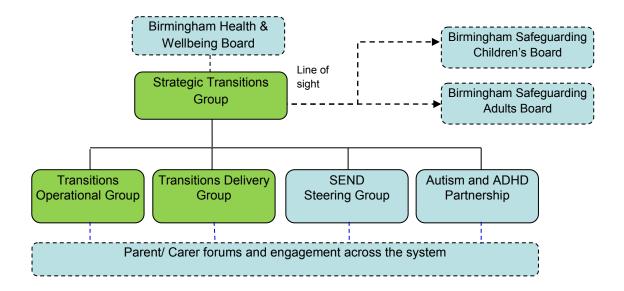
setting greater than 10 Miles

BIRMINGHAM WORKING TOGETHER

WORKING TOGETHER IN EQUAL PARTNERSHIP TO PREPARE YOUNG PEOPLE WITH ADDITIONAL NEEDS FOR ADULT LIFE

Governance – APRIL 2018

The proposed governance is shown and described below. The proposal is relative to where Birmingham is in its current improvement journey with regard to Transitions and as such is for a time limited period until reviewed again in July 2018.



Strategic Transitions Group

This new group will consist of the senior stakeholders and will provide the systems leadership across Children and Adult Social Care and Education and Health - including Birmingham CC Corporate Directors, Children's Trust CEO, senior Health colleagues and the Voluntary and Community Sector. It will work to ensure that plans are aligned across the various programmes in so far as they relate to Transitions to avoid duplication and magnify impact. It will ensure that a line of sight to practice is clear, provide direction on escalated issues and build the relationships and connections necessary for effective partnership working across Transitions. It will feed progress into partners, Adult and Children Safeguarding Boards and the Trust as appropriate and will provide updates periodically to the Health and Wellbeing Board.

Transitions Delivery Group

This group has been established on a 'task and finish' basis to look at a specific cohort of children with disabilities aged 14-17. The work of the Transitions Delivery Group will inform the development of an innovative approach to preparing for adulthood that focuses on

outcomes, strengths based practice and the promotion of independence for the young person. It will identify the current cost baseline information for the initial specific cohort of young people to inform a whole system approach to personal budgets.

Transitions Operational Group

This is an existing group with a strengthened remit to jointly plan and review support and outcomes for children with disabilities preparing for adulthood. Members are from across the health, education and social care system. It will continue to manage the current multiagency process of transition into adulthood which focuses on the young person at 17 ½ years whilst the new model is being developed. Strengthening will also include a more systematic approach to discussing children within the scope of transition based on shared lists of the cohort across agencies. Grip on practice and an outcome focus will be introduced with social work practitioners. Financial Service leads will be in attendance to support forecasting of financial packages.

It will ensure collective learning across the system to inform the new approach to preparation for adulthood.

SEND Steering Group

This is an existing Steering Group responsible for implementation of the SEND Strategy and Inclusion and Improvement Plan. Membership includes senior leaders from across the system. Strengthening of governance in this area relates to ensuring that plans within the SEND programme are aligned in so far as they relate to Transitions to avoid duplication of effort and magnify impact.

Autism and ADHD Partnership

This is an existing Partnership Group. Membership includes practitioners and stakeholders from across the health, social care, education system; voluntary and community sector and parent/carer representation. Strengthening of the governance in this area relates to ensuring that Birmingham's Autism Strategy is aligned in so far it relates to Transitions and ensuring that the needs of this cohort are recognised and articulated in the plans for wider improvement. and system change.

Review of this Governance:

July 2018



Resources O&S Committee: Work Programme 2018/19

Chair Cllr Sir Albert Bore

Deputy Chair Cllr Josh Jones

Committee Members: Cllrs Muhammad Afzal, Meirion Jenkins, Zaheer Khan, Narinder Kaur Kooner,

Ewan Mackey, Paul Tilsley

Committee Support: Scrutiny Team: Emma Williamson (464 6870) and Jayne Power (303 4810)

Committee Manager: Marie Reynolds (464 4104)

1 Meeting Schedule

Date	ltem	Officer contact
21 June 2018	Work Programme Discussion Outcome: to determine the work programme priorities for the year	Emma Williamson/Jayne Power, Scrutiny Office
19 July 2018	Financial Outturn Report 2017/18 Birmingham independent Improvement Panel Stock- take Report Travel Assist	Emma Williamson/Jayne Power, Scrutiny Office
4 September 2018	Annual Audit Findings Report	Clive Heaphy, Corporate Director, Finance and Governance/Jon Lawton, Cabinet Support Officer
20 September 2018 Deadline for reports: 11 September	2018-19 Budget Update	Clive Heaphy, Corporate Director, Finance & Governance
September	Proposed new IT system for Finance and HR	Dawn Hewins, Director of HR / Clive Heaphy, Corporate Director, Finance & Governance
18 October 2018 Deadline for reports: 9 October	Financial Monitoring 2018/19 – Month 5	Clive Heaphy, Corporate Director, Finance & Governance
15 November 2018 Deadline for reports: 6 November	Financial Monitoring 2018/19 – Month 6	Clive Heaphy, Corporate Director, Finance & Governance
	Waste Services	Rob James, Acting Corporate Director, Place



Date	ltem	Officer contact
13 December 2018 Deadline for reports: 4 December	Financial Monitoring 2018/19 – Month 7	Clive Heaphy, Corporate Director, Finance & Governance
December	2019/20 Budget	Clive Heaphy, Corporate Director, Finance & Governance
	Acivico	Clive Heaphy, Corporate Director, Finance & Governance
17 January 2019 Deadline for reports: 8 January	Financial Monitoring 2018/19 – Month 8	Clive Heaphy, Corporate Director, Finance & Governance
	Transition Project	Graeme Betts, Director, Adult Social Care & Health/Suman McCartney, Cabinet Support Officer
14 February 2019 Deadline for reports: 5 February	Financial Monitoring 2018/19 – Month 9	Clive Heaphy, Corporate Director, Finance & Governance
14 March 2019 Deadline for reports: 5 March	Financial Monitoring 2018/19 – Month 10 TBC	Clive Heaphy, Corporate Director, Finance & Governance
	Update on HR & Finance ERP System	Clive Heaphy, Corporate Director, Finance & Governance/Dawn Hewins, Director of HR/Peter Bishop, AD, ICT & Digital Services
11 April 2019 Deadline for reports: 2 April	TBC	

2 Other Meetings

Call in

Petitions

None scheduled

Councillor Call for Action requests

None scheduled



3 Forward Plan for Cabinet Decisions

Leader		
005749/2018	Business Rates Income 2019/20	22 Jan 19
005750/2019	Council Tax Tax-Base for 2019/20	22 Jan 19
005751/2018	Financial Monitoring Report Quarter 3 2018/19	22 Jan 19
006013/2019	Financial Plan 2019+	12 Feb 19

Cabinet Memb	per for Finance and Resources	
005353/2018	Birmingham City Council – A One Council Approach to Commercialisation – Public	22 Jan 19
005791/2018	Fees and Charges – Public	22 Jan 19

Cabinet Member for Clean Streets, Waste and Recycling			
005460/2018	Procurement Strategy to Support Fleet Replacement Strategy for	22 Jan 19	
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