

Event report

SDS Masterclass - Transitions

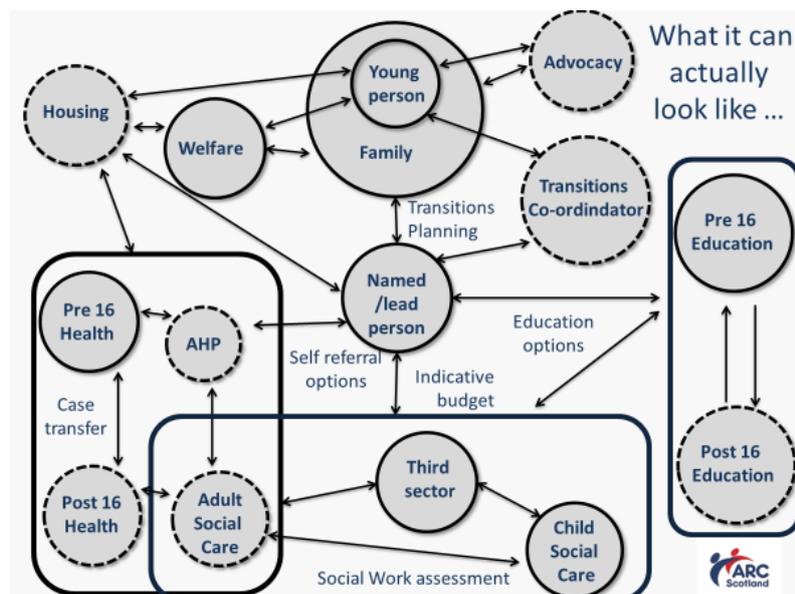
12 September 2018, Scottish Youth Theatre, Glasgow

Introduction

The Health and Social Care Alliance Scotland (the ALLIANCE) and MECOPP (the Minority Ethnic Carers of People Project) partnered to deliver the 'Self-directed Support (SDS) Masterclass Series' in 2018-19.

The ALLIANCE hosted the second Masterclass, which focused on the experiences of young people who access social care, transitioning between child and adult services. This event report outlines the main themes that were raised by speakers and delegates.

Scott Richardson-Read – Scottish Transitions Forum



Scott outlined the principles of a good transition and emphasised that accountability for SDS requires a cultural shift.

- It's not just a new way of providing assessment for social work, it is a new approach to achieving young people's outcomes.
- All services around the young person have a role to play in embedding and supporting the Self-Directed Support approach.

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- We are all accountable for keeping the young person's outcomes at the heart of any planning across all services – education, health and social care must work together to make this a reality for everyone.
- SDS, when effective, can help empower young people and families to meet future transitions with resilience and optimism.

Ryan and Julie Cuzen – Personal Experience of SDS Transitions

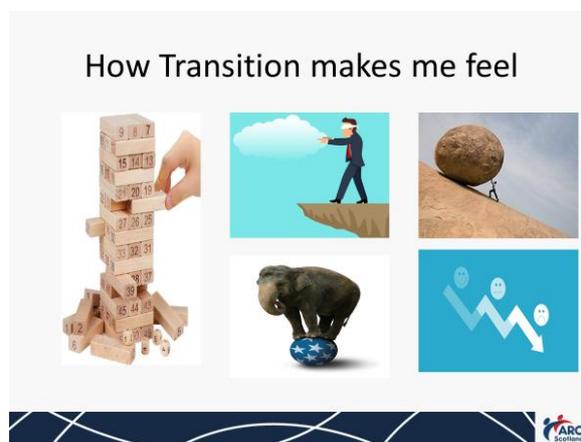
To begin, Julie, Ryan's mother, outlined her frustrations with the transitions process, focussing on the lack of timely planning and preparation for Ryan's transition. She expressed concern that as a family they suffered and struggled due to the lack of support for Ryan. Even with Advocacy it took almost two years to have SDS in place. As Ryan is a young man with autism, Julie also commented on the barriers to recruiting, training and managing staff through SDS.

The Kung Fu activities Ryan takes part in at the moment with the help of ILF Transition Fund are made possible because the support from Ryan's SDS. The SDS support help to get him to training and the Transition Fund pays for the activity, both have a very individual role to play, one cannot work without the other. They each allow Ryan to access a community where he feels safe and included and he gets to socialise as he learns new skills.

Ryan went on to discuss how it made him feel to go through transition, likening it to a Jenga block (all Ryan's slides in the presentation were put together by him) whereby the pieces of his life were removed without appropriate alternatives in place. This led to feelings of being a hindrance on his family, feeling as though his life didn't matter because the support he needed, which had been agreed and he was told he would get, wasn't there.

However, since receiving SDS, Ryan has begun to build his independence, through arranging appropriate support to help him learn basic skills. Also, being able to learn new skills such as, socialising with his peers with the help of his support of both SDS and ILF Transition Fund.

Ryan spoke about the challenges he still faces in transition, how it is ongoing, and he continues to need help and support. However, with the help of all the people he's been working with he is progressing and grateful.



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Willie Rutherglen – Parental Experience of SDS Transitions

Willie reflected on his experience of going through transition with his son, who is deaf and has autism. While he acknowledged that his family's experience could be considered 'textbook', in that they have been through the appropriate steps, the demands placed on them by SDS have been overwhelming. Willie specifically highlighted the amount of bureaucracy, or 'red tape', required to manage his son's support. His comments were generally pointed at Option 1 of SDS, Direct Payments, in which he also voiced frustration about the difficulties in recruiting Personal Assistants who have the skills and experience necessary to support his son, including BSL.

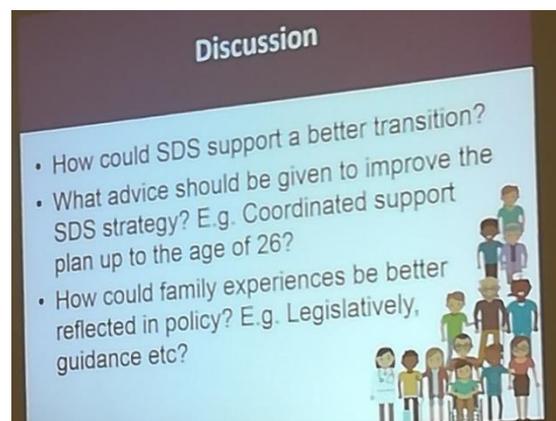
Some memorable quotes from Willie include:

- "SDS is a process built to frustrate."
- "Young people are at a loose end."
- "Choices are set by Local Authorities."

Participant Discussion

Around tables, participants were asked to think of ideas that could inform the Scottish Government's strategies on SDS and on transitions. Examples of participants' proposed ideas include:

- Holistic and coordinated support; there should be a central contact person to support families through transitions who should be able to speak to all services, while sharing information with others.
- All young people should have access to a transitions plan that begins early, at age 14, and continues until the young person reaches 26.
- There should be universally followed guidance on SDS transitions across all Local Authorities.
- Involving families: getting young people involved who have been through the transitions procedure.
- Parents' and carers' views should be listened to and their experiences included in guidance discussions.



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Resources

ALLIANCE – Personal Experiences of SDS: <https://www.alliance-scotland.org.uk/wp-content/uploads/2017/10/ALLIANCE-SDS-Personal-Experiences-of-SDS-Report-2017.pdf>

ALLIANCE – Getting it Right for Every Child: <https://www.alliance-scotland.org.uk/policy-into-practice/getting-to-know-getting-it-right-for-every-child/resources/>

ALLIANCE – Experiences of Transitions to Adult Years and Adult Services (Summary and Report): <https://www.alliance-scotland.org.uk/blog/news/experiences-of-transitions-to-adult-years-and-adult-services-new-report/>

ALLIANCE – Involving children, young people, parents and carers in planning to meet children’s wellbeing needs:

www.alliance-scotland.org.uk/blog/resources/involving-children-young-people-parents-and-carers-in-planning-to-meet-childrens-wellbeing-needs/

Scottish Transitions Forum – Principles of a Good Transition 3:

http://scottishtransitions.org.uk/blank/wp-content/uploads/2017/01/complete-POGT3_A4-version.pdf

For more information

Contact:

Colin Young, Senior Policy and Outcomes Officer

E: colin.young@alliance-scotland.org.uk

Ronnie Hill, Associate Director, Children and Young People

E: ronnie.hill@alliance-scotland.org.uk

T: 0141 404 0231

W: <http://www.alliance-scotland.org.uk/>

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About the ALLIANCE

The Health and Social Care Alliance Scotland (the ALLIANCE) is the national third sector intermediary for a range of health and social care organisations. It brings together over 2,500 members, including a large network of national and local third sector organisations, associates in the statutory and private sectors and individuals.

Our vision is for a Scotland where people of all ages who are disabled or living with long term conditions, and unpaid carers, have a strong voice and enjoy their right to live well, as equal and active citizens, free from discrimination, with support and services that put them at the centre.

The ALLIANCE has three core aims; we seek to:

- Ensure people are at the centre, that their voices, expertise and rights drive policy and sit at the heart of design, delivery and improvement of support and services.
- Support transformational change, towards approaches that work with individual and community assets, helping people to stay well, supporting human rights, self management, co-production and independent living.
- Champion and support the third sector as a vital strategic and delivery partner and foster better cross-sector understanding and partnership.

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Appendix – Table Discussion Notes

Table 1.

1 – How?

- Integrate
- Include
- Assessment
- Transition social worker
- Lifetime social work
- Need for schools and social work to work together
- Universally followed guidance across authority
- Training – universal at early stage
- Bridge and transition protected
- “Child” support budget decided and in place

2 – Advice

- More linked with organisations and support
- “Lifetime support”
- Relationships and “Life time social work”
- Transition worker has overview of SDS. Has the power to make changes.

Table 2.

Advice to improve SDS strategy

- Fill the gaps
- Fill the gaps in the evidence
- Start the process earlier
- A needs assessed plan
- Terminology:
 - o Easier to understand
 - o Same across all local authorities
- Make the process quicker
- Guidelines

Support a better transition

- Offer support no matter where they’re going
- Continuity
- Provide more information
- More transitions coordinators/Social Workers
- Widen eligibility criteria
- Outreach

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Reflecting family experiences in policy

- Case studies
- Having families involved in writing policies
- Getting young people involved who have been through the transitions procedure
- Arbitration tribunal and appeals

Table 3.

- Coordinated approach!
- Transition work/teams
- What transition?
 - o Adult / school
 - o Health service
- Holistic approach – individual not blanket approach
- There should be Framework constancy
- Life transition. There are key times.
- Good foundations

Table 4.

1.

- Transparency of process
- Clarity of SDS
- Social work involvement in SDS process
- Option of independent advocacy
- Language and acronyms – simplify
- Support though SDS
- Support though recruitment of PAS
- Listen
- Early planning for transitions – early intervention
- Clarity of role of assessing need for SDS
- Definition of 'critical needs' – universal

2.

- Early awareness of SDS
- Involvement in support plan
- Awareness of 'invisible illness'
- Key point of contact across LA's – transitions coordinator
- Early intervention of adult social worker
 - o Different budgets from CYP social worker – repeating assessments

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3.

- Parent and carers listened to
- Co-production process/approach
- Importance of adequately funded third sector orgs to support families

Table 5.

- Agreed definition of transition
 - o ARC definition a good starting point
- Agreed age – 14 – 26 proposal for this
- Must start in sufficient time to consider change
 - o 14-year olds entitled to this choice
- Education health care plan vs coordinated support plan
 - o Must encompass all are of life
 - o Entitled to this
- More coordinated engagement between all professionals who should be involved e.g. school and college staff
- Common communication and shared vocabulary
- Human rights based approach
 - o Training for social work teams and other professionals
- Needs – based approaches – flexibility over criteria required to prevent families reaching crisis
 - o Appropriate and timely support and interventions
- Consideration to what resources are available e.g. access to PA's
- Honesty about choices/transparency
- Areas of best practice: how can this be shared and replicated?
- Timescales must match: discussions with young persons and families
 - o Expected budget
 - o Accessing support
- Holistic support and coordinated: contact person to support this or should people be able to speak to all services, with info shared / common language / connections
- Parents and carers views listened to / experiences included in guidance discussions
- MDT meetings etc: need to be parent / carer / young person led
- Ensure third sector input to help give voice and provide experience