Bi-Borough Preparing for Adulthood Protocol
Royal Borough of Kensington & Chelsea and Westminster City Council
Contents
1. BACKGROUND AND INTRODUCTION.........................................................................................3
  1.2. Purpose..................................................................................................................................3
  1.3. Partnership .............................................................................................................................4
2. OVERVIEW..................................................................................................................................4
  2.1. Who is this Protocol for?..........................................................................................................4
  2.2. Preparing for Adulthood Summary. .......................................................................................4
  2.3. Bi Borough Procedures ...........................................................................................................4
3. Protocol Summary.........................................................................................................................5
  3.1. Summary of what will happen from Year 9...............................................................................5
  3.2. Summary of what will happen in Year 11................................................................................6
  3.3. Summary of What Will Happen by a Young Person’s 18th Birthday……………………………7
  3.4. Social Care Responsibilities.....................................................................................................8
  3.5. Educational Responsibilities....................................................................................................13
  3.6. Referrals from schools or other external agencies.................................................................16
  3.7. Siblings....................................................................................................................................17
  3.8. Young Person’s Tracking Meeting. ........................................................................................17
  3.9. Funding for education health and care. ...................................................................................17
APPENDIX 1. SEND LOCAL AREA GOVERNANCE........................................................................18
APPENDIX 2. Terms of reference for Preparing for Adulthood Tracking Meetings........................19
1. BACKGROUND AND INTRODUCTION

This Protocol supports the vision and principles in the Joint Commissioning Plans for Children and Young People with Special Educational Needs and Disabilities aged 0 - 25 published in April 2018 in Westminster and Kensington and Chelsea.

Our vision for all children and young people is that they achieve well in early years, at school and at college, are supported to prepare for adulthood, and lead happy and fulfilled lives. This means:

- having the opportunity to attend local good quality education settings with seamless transitions
- having good emotional health and wellbeing
- having access to short breaks or respite that is fun and helps to develop independence whilst giving parents/carers planned breaks from their caring duties
- having support close to home, family and friends which develops the skills necessary for independence, in learning, in work and in everyday life being able to access high-quality health services which promote good health, prevent illness and manage long-term conditions in community settings where possible
- having access to support to get and keep hold of a job
- being able to choose where to live and support to live as independently as possible
- having positive relationships and social networks
- having a healthy lifestyle and where required their health needs identified and met
- having accessible services that support young people experiencing difficulties with substance misuse or criminality and divert young people from further harmful activities
- being safe from hate crime and discrimination
- living in a society where people understand, respect and accommodate differences.


1.2. Purpose.

This protocol aims to support young disabled people and people with special educational needs to achieve good outcomes related to education, health, social inclusion, employment and fulfilling occupation, education, and independence.

The Protocol provides guidance to the workforce across education and social care as they support young people and their families to plan for the transition from childhood to adult life and acts as a guide for young people and parents about what they can expect.

The Protocol has been developed alongside colleagues in Health Services to support a coordinated approach to preparing for adulthood.

1.3. Partnership

Practitioners and clinicians from health and social care contributed to the detail of the protocol and associated standard operating procedures.

2. OVERVIEW.

2.1. Who is this Protocol for?

This protocol describes support available for people who children and young people who have special educational needs and disabilities (specifically, pupils with an Education, Health and Care Plan) as defined in the SEND Code of practice\(^2\) as a young person who:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

For those young people who have a ‘likely need’\(^3\) for support in adulthood to live a full life, to get and stay healthy and to be as independent as they can be there will be extra help to make sure plans are in place.

2.2. Preparing for Adulthood Summary.

The summary offers an outline of support from Year 9 and what progress needs to be made annually.

2.3. Bi Borough Procedures

This part of the protocol explains what steps will be taken by social care and educational staff to support young people to prepare for adulthood.

Each step in the process is accompanied by references to relevant statute and guidance.

\(^2\) SEN Code of Practice, Introduction, paragraph XIV

\(^3\) Likely need is defined at Paragraph 16.6 of the Care Act Guidance
3. **Protocol Summary.**

3.1. **Summary of what will happen from Year 9.**

**Identifying**
- SEN staff will provide Adult and Children's Social Care with a list of all children and young people with an Education Health and Care Plan
- Families and young people are advised how to self refer for support.

**Informing**
- All young people with an Education, Health and Care Plan will have access to a Preparing for Adulthood Information Pack which informs people about what support is available.
- Named workers in schools, SEN, social care and health will be able to provide information and listen to children, young people and families about preparing for adulthood.

**Assessing and Planning**
- All young people with an EHCP and their families will be supported to think about preparing for adulthood at their annual review in Year 9. Their Preparing for Adulthood Outcomes will be recorded in the review.
- Those people with a likely need for support in adulthood will be added to a list of people whose needs will be monitored at preparing for adulthood ‘tracking meetings’ (See Appendix 2).

**Checking**
- All young people with an EHCP will have their Preparing for Adulthood Outcomes reviewed annually from Year 9.

**Working Together**
- The right people attending annual reviews. Reviews of health, social care and education are co-ordinated.
- The right people attending the tracking meeting and the right people are identified by all agencies.
- Staff in education, social care, health and public services are aware of their roles and understand others roles.
3.2. Summary of what will happen in Year 11.

**Identifying**
- Young people with an Education, Health and Care Plan who still have a likely need for support in adulthood will be allocated a named worker to undertake an assessment and develop a support plan if required. This will include identifying people who may need health support.

**Informing**
- All young people with an Education, Health and Care Plan will have access to a Preparing for Adulthood Information Pack which informs people about what support is available.
- Named workers in schools, SEN, Social Care and Health will continue to provide information and listen to children, young people and families about preparing for adulthood.
- This is a good time to think about visiting some of the services and opportunities available in adulthood.

**Assessing and Planning**
- All young people with an Education, Health and Care Plan and their families will develop the Preparing for Adulthood Outcomes as they learn more about what they want and what options are available.
- Those people with a likely need for support in adulthood will be allocated a worker who will develop an assessment and support plan with young people and their families.

**Checking**
- All young people with an Education, Health and Care Plan will have their Preparing for Adulthood Outcomes reviewed annually from Year 9.
- Tracking meetings will check that those people who need support and care are getting an assessment of their needs in adulthood and an indicative support plan.

**Working Together**
- The right people attending annual reviews. Reviews of health, social care and education are co-ordinated.
- The right people attending the tracking meeting and the right people are identified by all agencies.
- Staff in education, social care, health and public services are aware of their roles and understand others roles.
### Summary of What Will Happen by a Young Person’s 18th Birthday

| Identifying                          | • Young people and families are clear about whether they will receive ongoing support in education through an Education, Health and Care Plan.  
|• Those people who have health and care needs as adults will be clear about where the support is coming from. |
| Informing                           | • All People with a continuing Education, Health and Care Plan are clear about their future plans.  
|• Named workers in schools, SEN, social care and health will be able to provide information to and listen to children, young people and families about what support they can access and how they can access in adulthood.  
|• Young people and families are clear about the way their social care and health needs will be met. |
| Assessing and Planning              | • Preparing for Adulthood Outcomes are considered each year in the Education, Health and Care Plan Review.  
|• On 18th birthday social care assessment, review and support planning will formally become the responsibility of adult services. Some looked after children will continue to receive support from leaving care teams until they are 25. |
| Checking                            | • Those young people with Education, Health and Care Plans in adulthood will continue to have reviews to check they are getting the support they need.  
|• Tracking meetings will check that plans are in place for those people who need support and care in adulthood. |
| Working Together                    | • The right people attending annual reviews. Reviews of health, social care and education are co-ordinated.  
|• Staff in education, social care, health and public services are aware of their roles and understand others roles. |
### 3.4. Social Care Responsibilities.

<table>
<thead>
<tr>
<th>Age (School Year)</th>
<th>Responsible Professional</th>
<th>Action</th>
<th>Timescale</th>
<th>Young person and/ or parent carer</th>
<th>Statutory regulations, guidance and procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>13/14 (9)</td>
<td>INFORMING</td>
<td></td>
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<tr>
<td></td>
<td>Allocated Worker Disabled Children’s Team (DCT) or Short Breaks Service.</td>
<td>Ensure that the child and their family have access to the Preparing for Adulthood Information Pack.</td>
<td>In advance of the Year 9 Review.</td>
<td>Begin to think about what is hoped for in adulthood and the support required to achieve it. Understand what help and support they are entitled to.</td>
<td>Care Act Guidance Chapter 3 SEND Code of Practice Chapter 4</td>
</tr>
<tr>
<td>13/14 (9)</td>
<td>ASSESSING AND PLANNING</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Allocated Worker Disabled Children’s Team (DCT) or Short Breaks Service.</td>
<td>Talk and listen to the child and family to help them understand options and develop aspirations for the future. Ensure that the Child Needs Assessment and/ or EHCP includes preparing for adulthood outcomes.</td>
<td>In advance of Year 9 review.</td>
<td>Ask questions of and seek advice from named workers and information services. Think about getting and staying safe, healthy and as independent as possible. Begin to think about what support is needed to be as independent and as included in</td>
<td>SEND Code of Practice 8.62 Care Act Guidance 16.11</td>
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<tr>
<td>Age (School Year)</td>
<td>Responsible Professional</td>
<td>Action</td>
<td>Timescale</td>
<td>Young person and/ or parent carer</td>
<td>Statutory regulations, guidance and procedures</td>
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<tr>
<td>13/ 14 (9)</td>
<td><strong>IDENTIFYING</strong></td>
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<td></td>
<td>Allocated worker in DCT and/ or Short Breaks Team / DCT or Short Breaks Team Manager</td>
<td>Notify ASC for those with likely need for support in adulthood.</td>
<td>Within 4 weeks of the Year 9 Review Meeting.</td>
<td>Consider self-referral if they feel that they have a likely need for support in adulthood that has not been noted. Consider consent to be the subject of a referral.</td>
<td>SEND Code of Practice 8.54 Care Act Guidance definition of likely need is at 16.6</td>
</tr>
<tr>
<td>13/ 14 (9)</td>
<td><strong>IDENTIFYING</strong></td>
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<tr>
<td></td>
<td>Allocated worker in DCT and/ or Short Breaks Team / DCT or Short Breaks Team Manager</td>
<td>Identify young people with likely needs for NHS adult Continuing Healthcare and notify the relevant CCG when such a young person turns 14.</td>
<td>Within 4 weeks of the Year 9 Review Meeting.</td>
<td>Get support and advice about how to access support to get and stay healthy and the different ways of getting health and social care support. Consider consent for personal information to be shared.</td>
<td>NHS National Framework for Children and Young People’s Continuing Care section 117 National Framework for CHC and FNC effective from October 2018 Section 339</td>
</tr>
<tr>
<td>13/ 14 (9)</td>
<td><strong>IDENTIFYING</strong></td>
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<td></td>
<td>Transition Allocated Worker or Manager</td>
<td>ASC receive and acknowledge referral</td>
<td>Within 24 hrs of receiving referral documents</td>
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<tr>
<td>Age (School Year)</td>
<td>Responsible Professional</td>
<td>Action</td>
<td>Timescale</td>
<td>Young person and/or parent carer</td>
<td>Statutory regulations, guidance and procedures</td>
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<tr>
<td>13/14 (9)</td>
<td>Transition Allocated Worker or Manager</td>
<td>Record referral in Mosaic Transition – Preparing for Adulthood episode and add to Young Person’s Tracking Meeting List. Notify Complex Team Heads of Service or Adult Mental Health Services if the person is likely to require support from their services in adulthood.</td>
<td>Within 2 weeks of confirming receipt of referral</td>
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<tr>
<td>13/14 (9) UNTIL 25th BIRTHDAY</td>
<td>Allocated worker in DCT and/or Short Breaks Team / DCT or Short Breaks Team Manager or in appropriate worker/manager adult services once over 18 years old.</td>
<td>Hold or attend annual review of the support and care provided to the young person and family and ensure that the preparing for adulthood outcome is discussed and if necessary reviewed.</td>
<td>At least annually.</td>
<td></td>
<td>A lot can change during the period between the 14th and 25th birthday. It is OK to develop new ideas, hopes and goals. Check that plans and reviews are still making plans that are relevant.</td>
</tr>
<tr>
<td>Age (School Year)</td>
<td>Responsible Professional</td>
<td>Action</td>
<td>Timescale</td>
<td>Young person and/ or parent carer</td>
<td>Statutory regulations, guidance and procedures</td>
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</table>
| 15/ 16 (11)      | Allocated transition worker. | Complete indicative core assessment and support plan for those with a ‘likely need’ for social care support in adulthood. Commence appropriate funding approval process depending on the type and level of need. | When the assessment is likely to be of ‘significant benefit’ to the young person. The aim is to ensure that necessary support is in place by the young person’s 18th birthday or at the appropriate point when educational or children’s services cease. | Get as much information as you can about options and the different ways in which support and care are provided in adulthood. Check that the plan includes help to meet or take steps towards key outcomes:  
  - Getting and staying healthy  
  - Getting and staying independent  
  - Getting a job and/ or having meaningful activities.  
  - Getting and staying included in community life and having | SEND Code of Practice 8.57, 8.63  
Care Act Guidance definitions of likely need and significant benefit at 16.6  
Care act Guidance 16.49 |
<table>
<thead>
<tr>
<th>Age (School Year)</th>
<th>Responsible Professional</th>
<th>Action</th>
<th>Timescale</th>
<th>Young person and/or parent carer</th>
<th>Statutory regulations, guidance and procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>15/16 (11)</strong></td>
<td>Allocated transition worker</td>
<td>Make a formal referral for adult NHS CHC screening at 16 if appropriate following completion of needs assessment.</td>
<td>Within four weeks of Year 11 Review</td>
<td>Get support and advice about how to access support to get and stay healthy. Consider consent to be the subject of a referral.</td>
<td>good social connections and support. Help, where relevant, to continue education.</td>
</tr>
<tr>
<td><strong>17/18 (13)</strong></td>
<td>Allocated worker in Children’s Social Care and Adult Services</td>
<td>On 18th birthday assessment, review and support planning will formally transfer to adult services. Children’s social care planning processes will normally cease at this point.</td>
<td></td>
<td></td>
<td>NHS National Framework for Children and Young People’s Continuing Care section 116. National Framework for CHC and FNC effective from October 2018 Section 340.R</td>
</tr>
<tr>
<td>Age (School Year)</td>
<td>Responsible Professional</td>
<td>Action</td>
<td>Timescale</td>
<td>Young person and/ or parent carer</td>
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<tr>
<td>TYPE OF SUPPORT</td>
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<tr>
<td>13/14 (9)</td>
<td>Sen Manager/Data Manager</td>
<td>Ensure a current list of all pupils with EHC Plans is available to Children and Adult</td>
<td>Sept of each academic year.</td>
<td>Consider consent for sharing information.</td>
<td>Supports Continuity of provision (SEND Code 8.65) and supports the duty to co-operate and</td>
</tr>
<tr>
<td>13/14 (9)</td>
<td>School / College or EHC Assessment and Review Coordinator/ SEN Manager</td>
<td>Ensure that the young person with an education health and care plan and their family have access to the Preparing for Adulthood Information Pack and are aware of their right to a community care assessment.</td>
<td>In advance of the Year 9 Review.</td>
<td>Begin to think about what is hoped for in adulthood and the support required to achieve it. Understand what help and support is available.</td>
<td>Care Act Guidance Chapter 3 SEND Code of Practice Chapter 4 and 8.26</td>
</tr>
</tbody>
</table>

3.5. **Educational Responsibilities**

Some looked after children will continue to receive support from their leaving care worker until they are 25.
<table>
<thead>
<tr>
<th>13/14 (9)</th>
<th><strong>ASSESSING AND PLANNING.</strong></th>
<th>School / College or EHC Assessment and Review Coordinator/SEN Manager</th>
<th>Schedule annual review and notify Local Authority of date. Where a child is already known to social care and/or in receipt of health support then the allocated worker(s) should be invited.</th>
<th>Sept of Year 9 intake.</th>
<th>Consider consent for sharing information.</th>
<th>Work with partners (SEND Code 8.3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>From Age 13/14 (year 9) to age 25.</td>
<td>EHC Assessment and Review Coordinator/SEN Manager</td>
<td>Talk and listen to the child and family to help them understand</td>
<td>From Year 9 Review onwards</td>
<td>Check that the plan includes help to meet or take steps</td>
<td>SEND Code of Practice 8.62, 8.9</td>
<td></td>
</tr>
</tbody>
</table>
| **ASSESSING PLANNING** | **CHECKING** | **options and develop aspirations for the future. Ensure that the EHCP includes preparing for adulthood outcomes** | **towards key outcomes:**  
- Getting and staying healthy  
- Getting and staying independent  
- Getting a job and/or having meaningful activities.  
- Getting and staying included in community life and having good social connections and support. A lot can change during the period between the 14th and 25th birthday. It is OK to develop new ideas, hopes | **Local EHCP Review Guidance** |
<table>
<thead>
<tr>
<th><strong>13/ 14 (9)</strong></th>
<th><strong>IDENTIFYING</strong></th>
<th><strong>CHECKING</strong></th>
<th><strong>Care Act Guidance</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>School/ college or EHC</strong></td>
<td><strong>Make referral to ASC</strong> (include proof of consent, EHCP and last review documentation) if there is deemed to be a likely need.</td>
<td><strong>Makes a decision on the Annual review whether it proposes to keep or amend the EHC Plan or cease to maintain.</strong></td>
<td><strong>definition of likely need is at 16.6</strong></td>
</tr>
<tr>
<td><strong>Assessment and Review Coordinator</strong></td>
<td><strong>Within 10 days of the Annual Review Meeting.</strong></td>
<td><strong>Within 4 weeks of the review</strong></td>
<td><strong>SEND Code of Practice 8.62, 8.9</strong></td>
</tr>
<tr>
<td><strong>From Age 13/ 14 (9) to age 25.</strong></td>
<td><strong>Consider consent for the referral.</strong></td>
<td><strong>Be aware of how to appeal any decision to cease to maintain an EHCP.</strong></td>
<td><strong>Local EHCP Plan Review Guidance.</strong></td>
</tr>
</tbody>
</table>

3.6. **Referrals from schools or other external agencies**

Where a young person is not known to the Disabled Children’s Team and the young person is aged 16 to 18, schools and other external agencies must use the standard referral procedures to Children’s Services.

Where a young person is 18 and over and is not known to the Transition team/workers, schools and other external agencies must use the standard referral procedure into Adult Social Care, that is, through the Information and Advice Services for Children and Adults.
3.7. **Siblings**

Where a young person is in transition and they have a sibling who is either a child in need, disabled or in care, the relevant Children’s Services team is responsible for working with the sibling. The Transition team/worker is responsible for working with the young adult in transition only.

If the Transition worker identifies that a sibling may require an assessment of need, they refer the sibling to the relevant team.

3.8. **Young Person’s Tracking Meeting.**

These meetings are held to check that those children and young people who have a likely need for support in adulthood are getting timely and appropriate support. The Terms of Reference for these meetings are at Appendix 2.

3.9. **Funding for education health and care.**

Young people and parents of children who have EHC plans have the right to request a Personal Budget, which may contain elements of education, social care and health funding\(^4\).

Where young people and families require support in adulthood this will be funded through the appropriate agency, usually either the Borough or the NHS. Most decisions relating to allocation of funding for packages of care and support will go through an authorisation process that will differ depending on the agency and the type and level of need. The allocated worker will be able to explain the process that is relevant.

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\(^4\) SEND Code of Practice 3.38.
APPENDIX 1. SEND LOCAL AREA GOVERNANCE

SEND Local Area Governance

SEND Programme Workstreams
APPENDIX 2. Terms of reference for Preparing for Adulthood Tracking Meetings.

‘Disabled Children and Young People’s (14-25) Tracking Meeting’
Westminster City Council and Royal Borough of Kensington and Chelsea. Terms of Reference.

<table>
<thead>
<tr>
<th>Version, Date and Author</th>
<th>Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 31st May 2018. First Draft, Nick Fripp adapted from original TOR.</td>
<td>Amendments to take into account WCC TOR.</td>
</tr>
<tr>
<td>2. 15th June. Nick Fripp</td>
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</tr>
</tbody>
</table>

1. **Introduction and Purpose.**

The Disabled Children and Young People’s Tracking Meetings exist to identify and ensure appropriate support is being provided to those young people who are deemed likely to require health and/or social care and related support in adulthood.

These Terms of Reference are designed to carry out statutory duties in relation to Preparing for Adulthood primarily drawn from the Children and Families Act\(^5\), Care Act\(^6\) and SEN Code of Practice\(^7\). The Terms of Reference are also aligned with NICE Guidance\(^8\).

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\(^8\) [https://www.nice.org.uk/guidance/ng43](https://www.nice.org.uk/guidance/ng43)
2. **Membership**

<table>
<thead>
<tr>
<th><strong>Core Members</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Learning Disability Team Lead for Transition</td>
</tr>
<tr>
<td>Adult Learning Disability Team Clinical Representative</td>
</tr>
<tr>
<td>Disabled Children’s Team Representative</td>
</tr>
<tr>
<td>SEN Representative</td>
</tr>
<tr>
<td>Children’s Community Nursing Representative</td>
</tr>
</tbody>
</table>

**Associate Members (Core Members to invite these and others as appropriate)**

| **CAMHS Representative**                                                      |
| **School Nursing Representative**                                             |
| **LAC/ Leaving Care Team Representative**                                     |

Commissioners in adult and children’s services, housing and other relevant public services.

| **Complex Care Team Representative**                                          |

3. **Frequency, Venue and Timings of meetings**

- Frequency: Every two months
- Time: 2 hours
- Venue: to be decided by the individual Boroughs.

Venue and dates to be agreed and sent out to attendees 12 months in advance.
4. **Agenda and Chairing:**

Chairing: rotates between Disabled Children’s Team and the Transition Service.

Administration support is provided by the Adult Learning Disability Teams

Agenda (for circulation to attendees at least 2 days prior to meeting):

- Welcome, introductions and apologies
- Service updates from attendees.
- Agreeing action in relation to any children/young people whose support or lack of it is a matter for concern.
- Feedback on actions agreed at last meeting
- AOB

5. **Aims of the Group:**

- To identify and track the progress of referrals for all young people in transition deemed to have a likely need\(^9\) for health and/or social care services in adulthood.

- To ensure that all decisions are compliant with relevant legislation and the local transition protocol and that data recording, use and sharing is compliant with relevant data protection rules.

- To identify any concerns in relation to managed risk and to escalate action as appropriate.

\(^9\) Care Act Guidance Defines Likely Need at 16.6
To identify strategic, service development and resource issues which can inform strategy and commissioning.

To ensure all relevant agencies are represented and working together.

To feed into and plan local transition events for parents and young people. Supporting referral to relevant Service Panels or the Bi-Borough Joint Funding Panel

6. **Expectations of attendees:**

   - That Key Agencies commit to attending the meeting or send a representative.
   - That those attendees prepare information in advance and contribute to setting the agenda.
   - That those agencies ensure attendees have access to and share key information and data.

7. **Data:**

   The tracking meetings have three key sources of information.

   - SEN service will maintain lists of people with EHC plans.
For those people deemed to have a likely need for health and or social care support in adulthood a ‘Transition Episode’ will be completed in the Mosaic Case Management System. This records a range of data that will support planning for individuals and also strategic and commissioning plans.

Information about those people with a transition episode will be collated in the following areas:

- Likely need for support in adulthood
- Potential cost of support in adulthood
- Whether an indicative assessment and support plan have been created for those likely to require support in adulthood has been finished by the 17th birthday.
- Named professionals involved in supporting the young person and family to prepare for adulthood.

SEND and related Joint Strategic Needs analyses provide underpinning information.