

Experiences & Perceptions of Young Adults with SEND Transitioning between Social Care Services

**The Transition from Children's
Social Care to Adult Social Care**

About Healthwatch Gateshead

Healthwatch Gateshead is one of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act, 2012.

Healthwatch Gateshead is an independent not-for-profit organisation. We are the local champion for everyone using health and social care services in the borough.

- We help people find out about local health and social care services.
- We listen to what people think of services and feed that back to those planning and running services, and the government, to help them understand what people want.

We help children, young people and adults to have a say about social care and health services in Gateshead. This includes every part of the community, including people who sometimes struggle to be heard. We work to make sure that those who plan and run social care and health services listen to the people using their services and use this information to make services better.

Healthwatch Gateshead is part of Tell Us North CIC (company no. 10394966)

Healthwatch Gateshead would like to thank everyone who generously gave their time and expertise to assist with this report.

Author: Healthwatch Gateshead

Publication date: November 2024

© Tell Us North 2024

Contents

Executive Summary	4
Introduction.....	5
Methodology.....	7
Results and Discussion.....	10
Experience	10
Assessment.....	12
Service Provision	13
Respite Provision	15
Opportunities.....	16
Relationship with Transitions Team Worker	17
Parent/Carer and Family Involvement.....	19
Parent/Carer Feedback.....	19
Key Themes.....	22
Conclusion and Recommendations.....	25
Limitations	26
Response Statement.....	28
Appendices.....	30

Executive Summary

The aim of this research was to explore the experiences of young people aged 16-25 with special educational needs and disabilities (SEND) in Gateshead as they transition from Children's Social Care to Adult Social Care services. The study examined participants' interactions with the Transitions Team within Adult Social Care, the quality of service delivery, opportunities for developing independent living skills, the involvement of parents, carers, and families in the assessment process, and the degree of support young people feel in achieving their goals during this transition.

Healthwatch Gateshead conducted surveys with a group of participants through home visits, using a mixed methods approach for data analysis. This included both quantitative (statistical) and qualitative (thematic) data to present the findings. The analysis provided percentages of participants and responses to questions, along with feedback from respondents and their parents and carers.

Overall, the majority of participants had positive experiences and perceptions regarding their transition to Adult Social Care, expressing that they felt supported by their support workers. However, a small portion of participants, parents, and carers suggested improvements in the provision of information, care, services, and respite.

The research highlighted the need to consider the individual differences of young people with SEND and to deliver effective communication to provide more tailored and person-centred or family-focused support. Healthwatch Gateshead has made several recommendations for potential improvements to enhance the relationships and outcomes between the Transitions Team, service users, and their parents and carers.

Introduction

Our Healthwatch Gateshead report from November 2022, looking at Special Educational Needs and Disabilities (SEND) services, and the experiences of children, young people and their families, pointed out several issues, such as poor communication between service users, carers, and providers.¹ Parents and carers worry that there is not enough support for young people with special needs, limiting their opportunities after they turn 16. Some parents and carers also struggle because English is not their first language, making it harder for them to understand the information available. Additionally, the report found that only 38% of surveyed parents felt that services met their children's needs; the rest were either unhappy or not accounted for. Many frustrations were due to difficulty accessing services and long waiting times.

The Gateshead Local Area Partnership SEND inspection report from May 2023 also found that some young people face long waiting times for support. When they turn 18 and switch to adult services, the support they receive often decreases, making it difficult for them to get the help they need. The report highlighted a lack of strategic planning by leaders for the future education, health, and care needs of children and young people with complex needs.² This often results in delays in receiving necessary specialist provisions. There is also a lack of oversight on young people moving through the service, making it hard to evaluate how well these services are working.

Furthermore, relevant research shows that children with SEND are much more likely to have mental health problems compared to children without SEND (Emerson and Hatton, 2007).³ These young people also face extra difficulties when moving from school to further education or work. For instance, they are more likely to become NEET (not in education, employment, or training) than other young people, (Aston et al., 2005;

¹ Healthwatch Gateshead Report (2022). Special Education Needs and Disabilities Services. Available [here](#).

² Area SEND inspection of Gateshead Local Area Partnership (2023). Available [here](#).

³ Mental health of children and adolescents with intellectual disabilities in Britain (2007). Available [here](#).

Bajorek et al., 2006).^{4,5} Additionally, many studies have found that young people with SEND often feel lonelier and struggle more with social interaction (Bossaert et al., 2011).⁶

However, we still do not fully understand all the problems these young people face. To truly help, it is essential their needs are understood, and they are listened to. This is especially important as they move from children's social care to adult social care (ASC) services. This research aims to dig deeper into the experiences of those transitioning to adult social care and are therefore aged between 16-25 years. It will look at their interactions with the Transitions Team and support workers within Gateshead ASC, the availability of services and respite provision, opportunities to develop independent living skills, and the role of parents and carers. The goal is to see how well these young people felt supported during their transition between social care services, and how well they were enabled in achieving their goals during it.

In summary, there is a critical need to understand the transition experiences of young people with SEND to improve support systems and ensure these individuals can achieve their full potential. This research will provide valuable insights into the challenges faced and identify areas for improvement in service provision during this pivotal stage of their lives.

⁴ Post-16 Transitions: a Longitudinal Study of Young People with Special Educational Needs (2005). Available [here](#).

⁵ Supporting young people with chronic conditions from education to employment (2006). Available [here](#).

⁶ The attitudes of Belgian adolescents towards peers with disabilities (2011). Available [here](#).

Methodology

Gateshead Council's Transitions Team, part of the Integrated Adult and Social Care Services, created survey questions with input from Healthwatch Gateshead. These surveys aimed to gather feedback from young people with SEND, aged 16-25, about their experiences and views of transitioning from children's social care to adult social care. The survey focused on the services provided, opportunities available, and the involvement of parents, carers, and families during the transition from children's social care to adult social care services.

Prior to the project being developed, participants were initially provided with the opportunity to participate. A total of 16 participants indicated they would like to be involved, thus were provided to Healthwatch Gateshead by the Transitions Team via a Data Sharing Agreement. The engagement and data collection was undertaken within a 6-week time period, between 15th April 2024, and 24th May 2024.

Healthwatch Gateshead's Engagement and Involvement Officers (EIO) contacted each of the participants or their parents/carers to find out more about each of them to adapt the method of communication and engagement to ensure delivery was appropriate. EIOs spent on average between 20-40 minutes discussing the nature of the call and having in-depth informal conversations. Questions were asked about any needs or triggers for participants, and what has previously worked well when staff have attempted to engage, what their interests are, and if there is anything EIOs should avoid. Each participant had different needs and communication abilities, so EIOs developed a personal profile with a general overview for each participant, to refer back to when conducting surveys.

Resources were created to align with the questions in the survey. EIOs used existing resources such as smiley faces and other pictorials to identify emotions such as 'happy, fine, sad' etc. to help participants with communication difficulties. The staff also printed out pictures of places and objects associated with independence such as, money, supermarkets, jobs, education. All of these resources were used in the surveys where

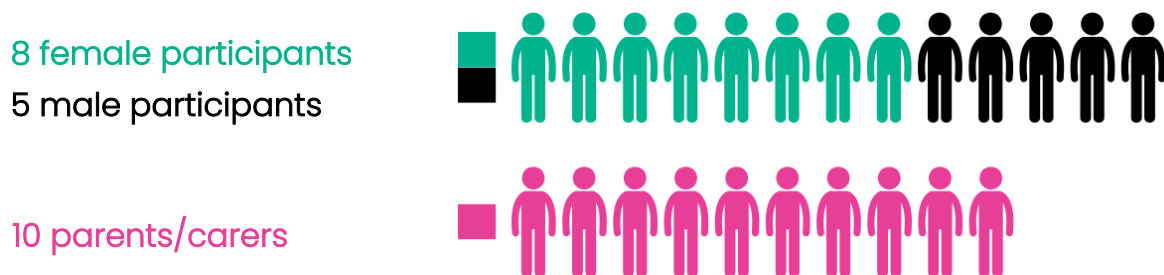
participants had reduced intellectual abilities, or if they had communication difficulties.

EIOs took into consideration the interests of participants and used this information as a conversation starter before the surveys took place. Examples include knowing the hobbies and interests of participants such as playing on a PS5, football etc. One participant loved Peppa Pig and Thomas the Tank Engine and so the staff brought figurines in from home.

With the exception of one participant who participated via telephone, and another who had arranged to meet the EIOs at a local café accompanied by a friend, the remaining participants chose to participate from the comfort of their own homes. Staff asked the participants what their individual preference was prior to arranging meetings.

Other physical adjustments were put into place for some face-to-face visits. One participant required a BSL interpreter and lived in a supported living accommodation, so EIOs liaised with management of the accommodation provider to ensure a family member with this skill set was present. Another participant relied on lip reading so staff ensured they were sat in a suitable place and ensured they were speaking clear.

Figure 1: Survey Contributor Demographics



Out of the 16 participants provided, only 13 were able to partake in the survey, 8 of whom were female, and 5 who were male. **These participants were aged between 17 and 23 years.** One of the participants required a BSL (British Sign Language) interpreter, and so her mother interpreted her responses for her throughout the survey. Additionally, 10 parents/carers were able to provide further feedback and comments also.

The data analysis used a mixed methods approach whereby Healthwatch Gateshead were able to extract quantitative (statistical) data and qualitative (thematic) data to help present findings.

Disclaimers:

1. Research objectives and survey questions can be found in the [Appendices](#) for an in-depth understanding of what this report researched.
2. Not all respondents answered all questions. Some analysis included within the report does not include the full 13 respondents in the percentages calculated and only include those that answered that particular question (a proportion of the total). This will be highlighted on each question when this is the case.

Results and Discussion

Survey questions have been sorted into the following categories:

- Experience
- Assessment
- Service provision
- Respite provision
- Opportunities
- Relationship with Transitions Team worker
- Parent/carer and family involvement

Healthwatch Gateshead's Engagement Team also recorded the views of participants' parents/carers to provide additional information.

Using the feedback collected from respondents and their parents/carers, three key themes were identified which will be discussed in more depth. The key themes are listed below:

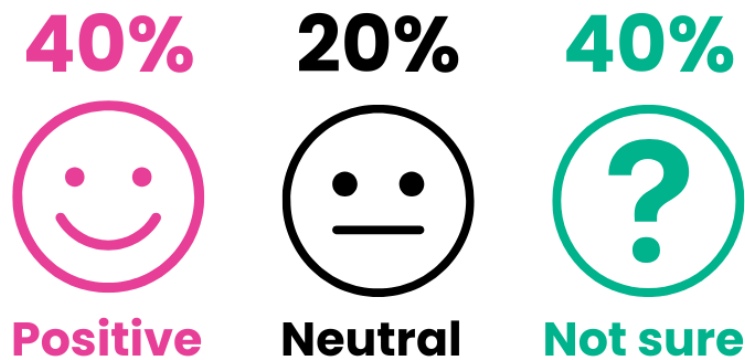
- Individual Differences
- The Importance of Communication – Effective and Ineffective
- Adopting Tailored Approaches – Person-Centred and Family Focus:

Where applicable, quotes provided by participants will be outlined.

Experience

Participants were asked about their experience transitioning from children's social care to adult social care in Gateshead. Of those who responded, 40% (n=4) reported a generally positive experience, describing it as "good." 20% (n=2) gave vague responses, describing their experience as "ok" or "interesting." Additionally, 40% (n=4) either could not recall much about their experience or were unaware of the transition process.

Figure 2: Participants' general sentiment towards the experience of transitioning from children's social care to adult social care



*(Three respondents did not answer this question. Percentages are calculated and shown for 10 respondents that provided answers).

Interestingly, two respondents mentioned having less favourable experiences in children's social care. One respondent mentioned that they did not have a social worker until the transition period. Despite earlier challenges, the respondents expressed positive sentiments about the support they received after transitioning to adult social care.

"Good but not good in children social care."

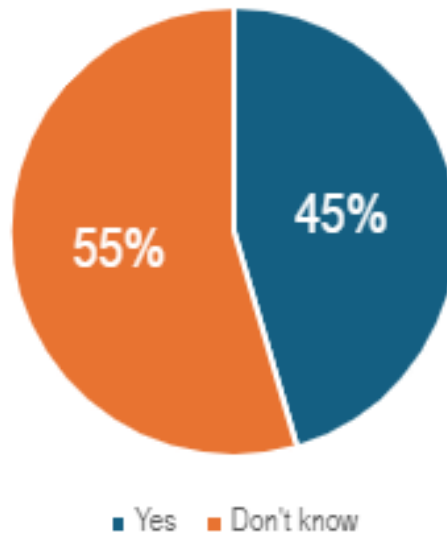
"She had no social worker allocated till she was going through Transition, and she had 2 social workers with the same name. For ease J1 was during the transition stages and now J2, her adult social worker.

This was good as we were provided with lots of relevant information. College (Percy Hedley) was used for all discussion as she is familiar with the set up (does not like unfamiliar places as it takes her a while to adjust)."

Assessment

Figure 3: Pie chart showing proportion of participants indicating assessment was conducted at an adequate time.

'Was an assessment of your adult care needs done at the right time?'



Answer – Yes: 55%

Answer – Don't know: 45%

Less than half of the respondents (45%, n=5) indicated that their assessments were carried out at the right time, while 55% (n=6) were unsure if their assessment was conducted at the appropriate time. None indicated that their assessment was conducted at an inadequate time.

*(Two respondents did not answer this question. Percentages are calculated and shown for 11 respondents).

When asked if the assessment prepared them for the transition to adult social care, 67% of respondents (n=6) indicated that it did, while 33% (n=3) were unsure. Those who felt prepared noted that they received support from their support workers during the assessment and felt they gained independence during their transition.

*(Four respondents did not answer this question. Percentages are calculated and shown for 9 respondents).

"The assessment was good as my support worker sorted many things for me from money, to planning my links with Carers' Trust."

"The assessment was done at the right time, and I was excited moving out of a children's home to adults."

"The Assessment was done last year and helped me a little on moving from being dependent to being independent. It helped a little."

Service Provision

Participants were asked to share their thoughts on the services provided by adult social care. All but one participant provided an answer to this question, (n=12). **Most responses (75%, n=9) highlighted positive sentiments regarding the help they received from their support workers**, in particular. However, one respondent noted that while their current support worker is helpful, their previous one was not.

"They did not help very much. The new one has helped me a lot and here I am in this house. He listens and understands my needs."

"My support worker has helped as she sorted my trips through Carer's Trust-regular Saturday outings to various places such as Seaham, Bishop Auckland. She made sure that transport is arranged so I get picked up and dropped every Saturday (Mum works Saturdays). Carer's Trust is exceptionally good. I also go to Bright Side – which is Day Care Centre. She also sorted my payments."

"They have helped as they have fought for my rights. I had bad experience at Gateshead College and got moved to Newcastle – this was through my Social Worker, who helped a lot."

Three respondents (25%) however expressed challenges and issues. One respondent commented that the support and services provided by adult social care are "useless". Another respondent felt there were barriers in accessing the right support as their care has been facilitated online over

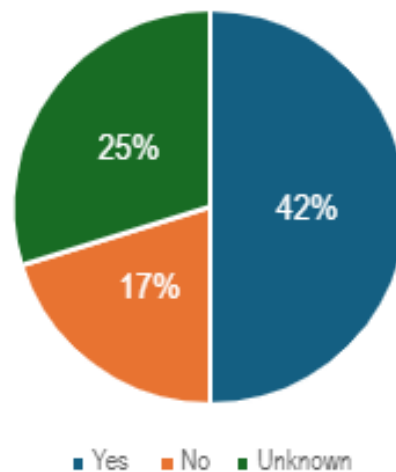
Zoom, despite her preference for face-to-face communication and support. The third participant who disclosed challenges indicated that they now have a deaf advocate for support, suggesting that previously accessing services may have been a difficulty initially.

When participants were asked if there was a missing service or a service that did not meet their needs, three respondents expressed dissatisfaction with the information they received, or the lack thereof. One respondent reiterated that the information was "useless." Another stated they were never sure what services were available and that no one had ever sat down with them to discuss their wants and needs. The third respondent mentioned difficulties with a "My Home" form, which was rejected because it had been filled out by her partner, requiring her to complete it again—a process she found frustrating. These responses suggest a significant lack of communication; if participants had received more detailed guidance, they would be better informed about their options and more capable of making decisions.

Respite Provision

Figure 4: Pie chart showing proportion of participants indicating provision of respite or short breaks during their care.

'In relation to respite and short breaks, were these offered to you (if required)?'



Answer – Yes: 42%

Answer – No: 17%

Answer – Unknown: 25%

Almost half of the participants (42%, n=5) answered "yes" to being offered respite or short breaks. A quarter of the responses (25%, n=3) did not address the question, as participants detailed hobbies and activities instead, indicating a possible misunderstanding of the question. Two respondents (17%, n=2) mentioned that they were not offered any respite or short breaks.

**(3 Respondents did not answer this question. Percentages are calculated and shown for 10 respondents).*

Of those who answered "yes," one respondent specified that she was offered respite and short breaks but chose not to take them. Additionally, two respondents noted that they were offered these services during their

time with children's social care but have not been offered any since transitioning to adult social care.

Furthermore, participants were asked what services they would like to be see made available to themselves and other young adults. Only two respondents were able to suggest that they would like to see more facilities with sensory rooms and perhaps more respite and short break opportunities with young people of similar ages, or perhaps people they know. 11 respondents did not provide an answer to this question, suggesting the provision of respite and short breaks need to be communicated better to the young adults so that they may understand what services they can access.

Opportunities

Based on previous responses, independence has emerged as a significant and growing requirement for the respondents. They specified that receiving adequate support from their support workers has enabled them to gain independence, which they found encouraging and important. When asked about opportunities to develop independence in areas such as money management, education and training, employment, and travel training, respondents were also queried about the suitability of these opportunities and if there were any other opportunities they would have liked but were not offered.

A large majority of respondents (n=9,90%) reported receiving sufficient support for employment opportunities, money management, decision making, and gaining independence, including the ability to live on their own. Only one respondent (10%) indicated that they did not have any opportunities to develop these skills. Those who reported having opportunities to develop independence attributed their support to Newcastle or Gateshead College, which helped them find employment, work experience, and further education through a skills learning course via the Transitions Team.

*(Three respondents did not answer this question. Percentages are calculated and shown for 10 respondents).

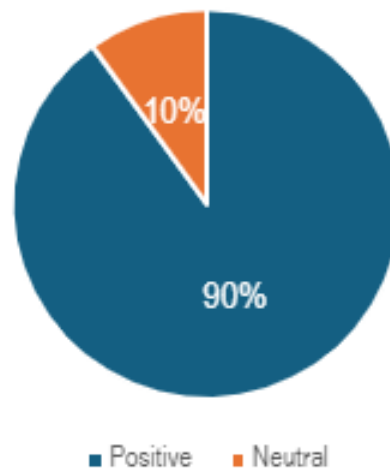
Respondents provided mixed responses regarding the suitability of the opportunities. Some answered "no" and mentioned they *"didn't like it [Dryden College]"*, while others answered "yes." One respondent stated they opted for another vocation and *"decided to go into hairdressing"* after leaving school. Another respondent is still studying at college, but their parent feels that preparing them for employment will be challenging, as they need the opportunity to meet others.

When asked if there were any opportunities participants would like to have had but were not offered, only one respondent indicated a desire to learn more about independence and independent living. This response underscores the growing need for young adults with SEND to develop these crucial skills.

Relationship with Transitions Team Worker

Figure 5: Pie chart showing proportion of participants indicating sentiments associated with their relationships with their support workers.

'How would you describe your relationship with your transitions team worker? Positive, Negative or Neutral?'



Answer – Positive: 90%
 Answer – Negative: 0%
 Answer – Neutral: 10%

Overall, 90% of participants stated that their relationship with their support workers in the Transitions Team was largely “positive”, (n=9). Only one indicated her relationship with her support worker was “neutral”, (10%). No participants indicated negative relationships with their support workers.

*(Three respondents did not answer this question. Percentages are calculated and shown for 10 respondents).



“Support worker was fantastic and really supportive.”

“Incredibly good especially with support worker’s involvement as she has organised everything including having a nurse attending for my anxiety.”

“Staff can lift my mood some days which is pretty hard to do.”



When asked if they felt supported by their support worker to achieve their goals and preferred outcomes, 63% (n=5) of respondents indicated that they did, while 37% (n=3) did not. Three respondents did not provide an answer to this question.

Participants were also asked what they think has gone well and what could be improved. Four respondents mentioned that either nothing needs to be improved, or they were unsure as to what improvements they would like to see. The respondents also provided the following statements to explain what they think has gone well:



“Assessment was adapted for me.”

“Getting my own home.”

“Volunteering and support from carers and my support worker.”

“I was very hesitant to go back to college as I was too nervous. They helped me feel more confident.”



Parent/Carer and Family Involvement

When participants were asked whether they thought the people important to them (parent/carer/family member) were included in the assessment and planning of their adult social care support, 90% (n=10) indicated that they were. Only one respondent (10%) answered "no," specifying that this was due to a personal preference, as they did not want their parents to be involved. Overall, it appears that those significant to the participants were generally included in the assessment and planning of their adult social care.

*(Two respondents did not answer this question. Percentages are calculated and shown for 11 respondents).

Parent/Carer Feedback

Healthwatch Gateshead provided an opportunity for the parents and carers of the participants to share their views and feedback on the support and information available during their children's transition between services. A total of 10 responses were received.

Most parents and carers echoed similar sentiments to the participants, highlighting that the support provided by the Transitions Team workers was **very positive and sufficient**. They felt included in the assessment and planning of their children's care, which facilitated good care. They also mentioned that the team helped with education and employment opportunities, assisted living options that fostered independence, respite and short break provisions, and opportunities to expand on hobbies and interests. Accordingly, the majority of parents and carers corroborated the positive responses provided by the participants throughout the survey.

Figure 6: Areas in which parents/carers felt supported



However, a couple of parents provided feedback detailing challenges and issues their children faced during the transition from children's social care to adult social care. One parent mentioned that her daughter did not have a support worker until the transition to adult social care, and they have been waiting for over a year to meet the new support worker, which raises concerns. Similarly, another parent reported that her son does not yet have a support worker assigned and did not meet his previous support worker in person. She also noted that her son was not offered any support for money management or employability.

The parents and carers of two respondents provided very different views of the 'post-17' transition, which highlight individualistic requirements, thus the need to consider this when making decisions about a young person's care.



"The period pre-18 was positive, and we had an excellent social worker whom I still am in touch with as she helps. From 18+, we had little contact."



"Hardly any support pre-seventeen, and I was not aware of what is available for my daughter. During the transition stages (post-eighteen)-when my daughter was 17 years old, she had a great support worker, and she has help us established links."



Parents and carers also provided suggestions for improvements in the care of their children. One parent specified that she would like the Transitions Team to ensure her son receives support to improve his social and communication skills, as this is the biggest barrier to him accessing services and gaining independence. **She also emphasised the need for consistency among staff**, allowing her son to build a relationship with his support worker and thus be encouraged to engage and interact more. Additionally, she requested that **staff communicate with families about their children's**

interests and offer appropriate services, as she felt she had to actively search for available services herself.

Another parent disclosed that she **would like to see better coordination between social support services**, as her son faced challenges with housing due to delays in getting the property ready, which impacted his health. A third parent explained that she needs more support from her daughter's support workers in providing information on rehousing due to ongoing issues. Her daughter loves to play and engage in activities, but the family is unaware of what is currently available in the area, so they would appreciate more help and support in this regard.

This feedback highlights that while many experiences were positive, significant areas need improvement to ensure consistent and comprehensive support for all transitioning individuals. Additionally, there is a need to enhance the provision of information for parents to better support their children during the transition.

Figure 7: Areas which parents/carers felt needed improvement



Key Themes

Individual Differences:

Overall, the responses from participants highlight the necessity of considering individual differences and specific needs to provide suitable care and support. **For young people with SEND, these individual differences are significantly diverse and unique to each person, thus the need to address their requirements may be more pronounced** when offering help and social support during the transition from children's to adult services.

From the collected survey responses, one participant explained that their assessment was conducted over Zoom, which they found difficult, preferring a face-to-face setting. Conducting the assessment in person would likely remove communication barriers, offering a more tailored approach for this participant.

Additionally, only one participant specified that their assessment was adapted to align with their needs as they were provided visual aids to prompt responses. The other respondents did not specify this information; therefore, it was not recorded. This raises the question about whether all other participants were offered similar support in having their assessments adapted if needed. It suggests, firstly, an individual's specific and unique abilities and requirements was possibly overlooked, and secondly, a lack of communication between service users and service providers.

The Importance of Communication – Effective and Ineffective:

Responses indicated both effective and ineffective communication when conveying information to young people and their parents. Some respondents felt that information was well communicated, while others did not. The quality of communication varied depending on the nature of the issue and the specifics of the information provided.

Understanding and comprehension varied among participants when asked questions about their care, with some unable to recall details about their experiences, highlighting individual differences. Notably, some participants were unaware of any transition or could not remember being in children's

services or having a support worker. There was also a lack of communication regarding available services; one participant expressed that nobody offered to sit down and discuss their wants and needs, or to explain "what is independent living other than living away from my parents?"

Another respondent faced issues completing a form related to her home. Due to its complexity, her partner filled it out, but the form was rejected because the respondent did not complete it. The participant was unaware of this requirement, leading to frustration. Effective communication could have prevented this situation by ensuring she understood the requirements from the start.

Two participants mentioned they were not offered respite breaks, while others stated they received such opportunities at venues like the Alan Shearer Centre or the Grove House. This discrepancy indicates an inconsistency in the communication of available services and opportunities to service users.

Despite these issues, positive sentiments were also shared by respondents and their parents and carers. Participants appreciated the support from their new social workers, who they felt "listen and understand needs" and "provided us with lots of relevant information."

Overall, **there is a need to communicate all relevant and necessary information simply and effectively across the board.** This approach can help dispel any miscommunication or misunderstanding regarding the guidance and support being offered.

Adopting Tailored Approaches – Person-Centred and Family Focus:

Feedback suggests a need for support through clear communication, information sharing, and planning that involves input from young people with SEND, and potentially more engagement with their parents or carers.

As mentioned previously, there were varying levels of individual differences between participants, and so having assessments adapted for them for example, would ensure the individual is at the centre of their care.

Consequently, encompassing a person-centred approach would help young people with SEND understand what the transitions process entails, which again will decrease the likelihood of missing information and communication, such as the unawareness of assessments being completed, knowing if it was completed at the right time, or knowing if they were provided with support workers, respite opportunities and opportunities to develop independence.

The parents of one participant explained that their daughter was unable to join any community groups due to her medical conditions. They also shared that she could not sit in her own garden due to discrimination and feeling unsafe. The parents would like support in accessing information and finding community groups for their daughter or requesting additional support at home and assistance with housing.

Conclusion and Recommendations

Overall, responses convey mostly positive outcomes and sentiments about participants' experiences transitioning from children's social care to adult social care, their relationships with support workers in the Transitions Team, and the support they have received. However, a notable proportion of responses to nearly all questions indicated uncertainty and vagueness when recalling their experiences and whether they were offered the necessary information and support. This variability is reflected in the quantitative data, showing that some participants could answer questions clearly, while others could not.

In summary, effective communication is crucial for understanding the unique needs and requirements of young people with SEND, enabling the development of tailored, person-specific approaches. The key themes identified are closely interlinked; when individual differences are not fully understood or supported, effective communication is hindered, making it challenging to provide appropriate solutions or develop strategies to support individuals.

Healthwatch Gateshead were able to propose the following recommendations:

- Conduct assessments in person whenever possible to reduce communication barriers and tailor the assessment process to each individual's preferences and needs. Or provide alternative options such as hybrid assessments (combining in-person and virtual) to accommodate different preferences.
- In addition to the above, ensure that all assessments are adapted to meet the specific needs of individuals with SEND. This includes providing necessary adjustments such as simplified language, visual aids, or the presence of support persons during assessments.
- Develop standardised communication protocols to ensure consistent and clear information delivery to all young people with SEND and their families. This can be done by organising regular information sessions

for young people with SEND and their families to explain available services, the transition process, and what to expect.

- Provide written summaries of key points discussed during assessments and meetings to ensure participants have a reference to review later, so that they do not forget key details of their care and provisions.
- Provide additional support to family and carers, perhaps by doing more work with them, to recognise the crucial role they play and incorporate their insights and concerns into the transition plans. Additionally, provide families with resources and support to help them navigate the transition process and access community services.
- Improve good practice between services, by facilitating connections with community groups and resources that can cater to the needs of young people with SEND and offer support in finding and accessing these opportunities.
- Establish regular feedback processes to gather input from young people with SEND and their families about their experiences with assessments, communication, and support services. Use this feedback to continuously improve service delivery and address any identified gaps or issues.

Limitations

Firstly, the sample size of 16 participants is quite small, which limits how the findings of this research can be applied to a larger population of young people with SEND.

Secondly, the questions asked were often difficult for participants to answer, as they could not recall their experiences, or responded with “don’t know” for most responses. Firstly, this highlights the difficulty in understanding the nature of the questions asked, and secondly, demonstrates the inconsistency in reporting figures and percentages for some responses. Consequently, the questions designed should be appropriate to

participants as some had reduced intellectual abilities and could not understand what was being asked.

Furthermore, while efforts were made to adapt communication methods and engage participants effectively to enable them to answer, the extent to which participants felt truly engaged and represented can vary. For instance, adaptations like using smiley faces and pictorials may help with communication but might not capture the full complexity of participants' experiences or preferences. Therefore, the Gateshead Council's Transitions Team should have provided more supporting information related to participants' preferences or needs so Healthwatch Gateshead could carry out engagement effectively. This information was not provided. For example, many participants could not remember much about their past care and experiences; parents and carers had to prompt their memories by mentioning the names of certain workers who had helped. In future, it could be beneficial for staff and participants to be provided with key details such as the names of their support workers and, if possible, photographs, specifically for those who may have reduced intellectual abilities.

It must be noted, however, that while personalising engagement methods and resources is crucial, the resources available (e.g. time, staff, materials) may not always be enough to accommodate all participants fully, potentially affecting the consistency and quality of engagement across the cohort.

Response Statement

The following statement has been provided by partners at Gateshead Council's Adult Social Care Team within the Integrated Adults and Social Care Services. This is intended to address, acknowledge, and engage with the research findings that have been presented by Healthwatch Gateshead:

"We would firstly like to thank all participants who have contributed and to Healthwatch for completing this work. We are pleased to read the positive experiences shared, particularly in terms of the relationships with transitions workers and those relating to service provision, supported employment opportunities, decision making and gaining independence including the support participants have received to live on their own. Additionally, that a high percentage of participants felt the people important to them are included in the assessment and planning of their care, in line with their wishes. A further positive note is that of parents and carers who share a similar view.

We recognise that not all have reported similar positive experiences, and we aim to use this feedback and the recommendations to explore how we can develop the transitions offer in Gateshead further. This will help the team to shape the current offer to ensure it best meets the needs of young people in Gateshead as they transition to Adult Social Care. The timeliness of information shared by the team is something that was recognised as an area of development in the SEND inspection. Following this, we have updated our process and now share support plans much earlier than previous. Whilst we recognise no participants indicated that their assessments were conducted at an inadequate time, this is an area we have strengthened over the last 12 months to better support young people and their families as they prepare for post 18 social care support.

Effective communication is something the team strives to achieve. We use a range of communication methods and accessible information options such as easy read documents, visual aids, interpreting services, assistive technology and a variety of ways of maintaining contact with the team. The Local Offer information and general adult social care information is

available online with an option to translate. There is acknowledgment that the move to a new ICT system has impacted on this recently and again this is one of the team's priority areas to further develop moving forward. We recognise this has not been positive for all participants. Whilst we always aim to provide face to face assessment, there was a period during Covid where restrictions imposed resulted in a need for alternative communication methods such as Zoom for a short period. This did have a negative impact on how assessments and interventions were undertaken. Since restrictions have been lifted, we have returned to offering face to face assessment for all unless requested otherwise.

There is recognition of available service provision within local voluntary, community and social enterprise (VCSE). The use of direct payments can support young people to have more control and flexibility over how they receive their care and support and enables them to access such services. This is an area the team are working to expand on further, to understand the local offer beyond commissioned services within the VCSE market particularly for young adults. The offer of respite provision is based on assessed need. We are grateful for the feedback on the type of respite facilities participants would like to see. Again, this is a key priority the team are exploring.

In addition to this research, the team actively seek and undertake engagement opportunities. This has included meeting with the SEND youth forum, regular attendance at the Parent Carer Forum and Autism Hub and attendance at various Education Provisions and the recent SEND Futures Event. This allows us to share knowledge and raise awareness of the transitions offer in Gateshead. Such opportunities also provide the opportunity to gain feedback from young people and their families to support continuous service development. This is something the team will continue to do going forward."

Appendices

Survey Questions:

Experience:

1. What is your experience moving from children's social care to adult social care in Gateshead? **(a)**

Assessment:

2. Was an assessment of your adult care needs done at the right time?
(c)
Can you explain your answer?
3. Did you feel this assessment prepared you for moving into the adult social care service? **(c)**

Service Provision:

4. How have you found the services that Adult Social Care have provided to you? **(c)**
5. Is there any service that you think is missing or a service that you felt didn't meet your needs? **(c)**

Respite Provision:

6. In relation to respite and short breaks, where these offered to you (if required)? **(c)**
7. What type of respite or short break service would you want to see made available for you and/or other young adults? **(c)**

Opportunities:

8. Have you had opportunities to develop your independence, if so, can you give any examples? (money management, employability, travel training etc). **(d)**
9. What opportunities were you offered by the Transitions team to support you to get a job or continue with your education/training? **(d)**
10. If offered were these opportunities suitable for you? **(d)**
11. Are there opportunities that you would like to have had but weren't offered to you? **(d)**

Relationship with Transitions Team/Worker:

12. How would you describe your relationship with your transitions team worker?

Can you explain the reason for this answer? **(b)**

13. Do you feel your transitions worker has supported you to achieve your goals/preferred outcomes? **(f)**

14. What do you think has gone well? **(f)**

15. What do you think could be improved? **(f)**

Involvement of Family and Carers:

16. Do you think those important to you have been included in the assessment and planning of your adult social care support (e.g. parent/carer/family member)?

Can you explain the reason for your answer? **(e)**

Research Objectives – what the questions aim to identify:

- a)** To assess the experiences and perceptions of young people with special educational needs and disabilities in Gateshead as they transition from children's social care services to adult social care services.
- b)** To explore the communication and relationship dynamics between young people and the transitions team during the transition process.
- c)** To evaluate the quality and appropriateness of social care service provision to meet the unique needs of young people in the 16–25 age group.
- d)** To examine the opportunities provided for young people to develop independent living skills during the transition.
- e)** To investigate the inclusion of parents, carers, and families in the assessment and planning process for young people's transition to adult social care services.
- f)** To understand how young people perceive the level of support they receive in achieving their desired outcomes and aspirations during the transition.

Healthwatch Gateshead
c/o Tell Us North CIC
Milburn House, Suite E11 Floor E
19 Dean Street
Newcastle upon Tyne
NE1 1LE

Website: www.healthwatchgateshead.co.uk

Phone: 08000 385 116

Email: info@healthwatchgateshead.co.uk