



CITY OF YORK

Safeguarding
Adults Board



Practice guidance for professionals and agencies

Transitional safeguarding protocol

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This information has been adapted from guidance developed by Northumberland Children and Adults Safeguarding Partnership with thanks and acknowledgment.

Sometimes you just have to do something because it's the right thing to do.

'Fran Leddra, Chief Social Worker for Adults'

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1. Introduction

This protocol sets out the arrangements for young people aged 17 years and above, whose circumstances may mean that Safeguarding Adults procedures would apply when they are 18. This relates to young people who would meet the definition of an 'adult at risk' when they turn 18.

This guidance promotes robust and effective transitional arrangements, and timely referrals between Children's and Adult Services in the City of York. It recognises that harm is likely to continue post 18, and that abusers target vulnerability irrespective of age.

Information sharing between services in a proportionate and timely way is key to ensuring that young people approaching 18 receive access to guidance, information and advice they will need as adults.

The young person should be fully involved in decision about information sharing. It is important to note that transition into adulthood is a partnership and not only a social care issue. Multi agency partners need to be involved and support this work.

The purpose of this protocol is to:

- Provide clear referral guidance to follow in those situations where it may not be clear which Safeguarding Procedures (Adults or Children's) apply.
- Ensure effective and timely safeguarding referrals are made between Children's and Adult services.
- Develop and improve joint working practices across all services.

This protocol is aligned with the Care Act (2014) duties around promoting Wellbeing and Prevention. These principles are at the core of effective transitional safeguarding arrangements as they focus on identifying and addressing needs and risks at an earlier stage before a crisis point is reached. It is also in line with wider local child and adult safeguarding policies, procedures and guidance.

2. Transitional Safeguarding

Transitional Safeguarding is “an approach to safeguarding adolescents and young adults fluidly across developmental stages which builds on the best available evidence, learns from both children’s and adult safeguarding practice and which prepares young people for their adult lives”.¹

Transition to adulthood can be a particularly challenging and vulnerable time for some young people. Learning from Safeguarding Adult Reviews (SARs) and Serious Case Reviews has highlighted how ineffective transitional planning can contribute to young adults ‘slipping through the net’ or facing a ‘cliff edge’, often with tragic consequences.²

Recent Reviews have identified a number of common themes such as exploitation, alcohol and substance use, and no identified care and support needs under the Care Act.

Please see [Madeline \(Croydon, 2022\)](#), [Kate \(Cumbria 2022\)](#), and [Molly \(Teeswide, 2022\)](#) for further details.

Young people experiencing, or who have experienced abuse or harm may often require ongoing support beyond the age of 18, as harm and its effects do not stop at this age.

This may be because the harm continues into adulthood or because they need support to recover from the impact of harm and/or trauma. Research has demonstrated that unresolved trauma can increase risks later in adulthood. It is also evidenced that not responding to harm in early adulthood may lead to more extensive support being required later in life.

There are several reasons why a transitional safeguarding approach is needed. It is recognised that adolescents may experience a range of distinct risks and harms, which may require a distinctive safeguarding response, and this may be experienced differently by young people at different times.

It is also acknowledged that Children’s and Adults’ safeguarding systems are conceptually and procedurally different, and are governed by different statutory frameworks, which can make the transition to

1 Bridging the Gap: Transitional Safeguarding and the role of social work with adults. DHSC, Research in Practice, LGA, BASW, ADASS, NWG. 3 June 2021

2 Holmes D & Smale E. (2018). Transitional safeguarding - adolescence to adulthood: Strategic Briefing (2018). Dartington: Research in Practice

adulthood difficult for young people facing ongoing risk. This can be exacerbated by the notable differences between thresholds and the eligibility criteria of Children's and Adults' safeguarding. There needs to be a common culture and understanding across children's and adults, which includes the use of language.

In recent years, the complexities of safeguarding children and adults have become more challenging, with an increased focus on criminal and sexual exploitation, requiring services to adapt in how they safeguard young people and adults.

Key to this is aligning safeguarding systems and services for children and adults, to ensure they are more fluid and responsive to the changing needs of adolescents and young adults. Understanding adolescence as a distinct development phase, and recognising the impact of trauma, are fundamental to supporting transitions.

There is a need for close collaboration between Safeguarding Children and Adults Boards, and for very early communication with and involvement from Adults Services.

Creative, collaborative, and sometime courageous thinking is what makes the difference.

'Bridging the gap'

This protocol is based on the principles outlined in a 'transitional safeguarding and the role of social work' briefing published in June 2021.

This national briefing focuses on sexual and criminal exploitation and draws upon best practice, research and knowledge from local areas, and provides key information to improve adult social work professional knowledge and skills in working with young people transitioning to adulthood.

NICE guidance³ also sets out some overarching principles to consider when supporting young people through any transition from children's to adult's services.

³ Transition from children's to adults' services for young people using health or social care services. NICE guideline (NG43) 24 February 2016

2.1 Contextual Safeguarding

Abuse can take many forms and includes physical abuse, domestic abuse, sexual abuse, psychological abuse, financial or material abuse, modern slavery, discriminatory abuse, neglect or acts of omission, self-neglect, and organisational abuse.

Contextual Safeguarding is an approach to understanding and responding to young people's experiences of significant harm outside the home, for example with peers, in neighbourhoods.

Contextual safeguarding needs to underpin our approach to transitional safeguarding to understand the harm young people are at risk of. Young people can be targeted within their local community, via on-line grooming and exploitation or from a different area or region. Young people from marginalised and disadvantaged communities may also be less visible due to their age, and experience more difficulties in asking for and accessing support.

Gaining trust from the young person, proactive engagement, offering a sense of non-judgement and safety, and collating information between agencies is key to effective contextual safeguarding responses. This includes a recognition that the assessment of, and intervention in these spaces is a critical part of safeguarding practices.

2.2 Trauma informed approach

It is important to understand the impact of previous experiences, trauma, abuse, which will vary depending on the individual, however, may lead to a need for support.

A flexible and holistic approach needs to be offered to young adults who may have experienced trauma and be at risk of harm, using the principles of Making Safeguarding Personal, and professional curiosity. It should be recognised that it may take significant time and effort to create relationships which enable the young person to engage. To build these relationships young people need to be offered the following principles of trauma-informed support: safety, choice, collaboration, trust, empowerment.

3. Key legislation

3.1 Care Act (2014)

The Care Act outlines the eligibility criteria which defines whether an adult has care and support needs, which can include practical, financial, and emotional support. It also emphasises the importance of preventing and delaying need as well as reducing needs that already exist. A key focus is the importance of effective interventions at the right time.

In accordance with the Care Act, local authorities have a legal duty to undertake a safeguarding enquiry (or cause others to do so) when an adult aged 18:

- a) has needs for care and support (whether or not those needs are being met); and
- b) is experiencing abuse or at risk of abuse or neglect; and
- c) as a result of those needs is unable to protect themselves against the abuse or neglect, or risk of it

The Statutory Guidance also states that people “should not limit their view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual case should always be considered”. Abuse could be physical, financial, emotional, sexual or neglect. It also includes domestic abuse, organisational abuse, modern slavery, discriminatory and self-neglect.

Under Safeguarding Adult Procedures, an adult requiring a safeguarding response does not need to meet the adult social care eligibility threshold.

Those who self-fund their care and those receiving individual budgets or direct payments, also have the right to be safeguarded/protected under the Safeguarding Adult Procedures.

3.2 Mental Capacity Act

The Mental Capacity Act (2005) applies to all people aged 16 and over who are unable to make some, or all decisions themselves. If there are concerns in relation to a young person’s mental capacity from age 16 onwards, then a mental capacity assessment should be undertaken. All staff working with people over 16 have a legal duty to have regard to the MCA code of practice.

In accordance with the MCA, a person must be presumed to have capacity unless proved otherwise and should not be treated as

incapable of making a decision unless all practicable steps have been taken to help them.

It is important to recognise that mental capacity can be affected by a number of factors, including previous trauma, the abusive situation the person is in, and by any threats or coercion.

A mental capacity assessment must be carried out whenever:

- a) There are doubts about the ability of any person from the age of 16 to make a particular decision at a particular time; and
- b) There is a belief that the reason the person may be unable to make their own decision is because of, an impairment of, or a disturbance in the functioning of the mind or brain.

In accordance with the Act, mental capacity is both, decision and time specific. This means that the principles of the Act must be applied each time a decision needs to be made. Where there is a concern about mental capacity, this must be recorded.

Capacity and consent also need to be considered in the context of control and coercion, which is central to all forms of exploitation.

If a young person is assessed as lacking capacity, then decisions can be made on their behalf using the principle that the decision made must be in the young person's Best Interests as set out in the Act.

Executive functioning may also need to be considered within the assessment: executive functioning and self-regulation skills are the mental processes that help us to plan, focus attention, remember instructions, and juggle several tasks successfully.

An example of this, is a person saying they understand a decision, they appear to understand but repeatedly do not execute their stated intentions.

The MCA and the Care Act work together to promote the empowerment, safety and wellbeing of adults with care and support needs.

Both pieces of legislation should enable individuals to maintain their independence and exercise as much control as possible over their lives and any care and support they receive including any support provided relating to safeguarding.

4. Making Safeguarding Personal

Making Safeguarding Personal (MSP) is a person-centred and rights-based approach to safeguarding adults, which is incorporated in the Care Act guidance. It is a strengths-based approach, which recognises the person has rights to live their life, which need to be balanced with their right to, and need for safety. It is based on the person being supported, as the expert in their own life, and also emphasises the importance of empowerment and partnership working alongside the adult.

The aim of MSP is to ensure that safeguarding support is person-led, focused on and defined by the outcomes the person would like to achieve. A person experiencing abuse or neglect may have difficult decisions to make and as such may need time to consider the risks involved and outcomes they want. Therefore, identifying risks and making options clear and understandable is central to empowering and safeguarding adults.

In practical terms it is about putting the person at the centre of the safeguarding enquiry and ensuring a personalised approach that gives them the opportunity to say what they want to happen at all stages of the safeguarding process. This is a key principle to be adopted across the Transitional Safeguarding pathway.

5. Preparation for Adulthood pathway - young people transitioning from Children's to Adult Social Care

This Transitional Safeguarding protocol relates to young people aged 17 years and above where Safeguarding Adults procedures may apply when they are 18. However, this approach is fully aligned with, and is included in the Preparation for Adulthood pathway and policy relating to children and young people aged 14 to 25 years old who are receiving a package of support from the City of York Council.

The Preparation for Adulthood policy sets out the roles and responsibilities, legislation, eligibility and service frameworks for young people, children with disabilities, care experienced children and their families.

A person centred and partnership approach to planning is key to ensure education, health and social care services work together, to provide the support young people need to transition from child to adult as seamlessly as possible.

[Preparation for Adulthood pathway](#)

6. Protocol

If there are significant immediate concerns about the safety of a child or young person (aged under 18), you should contact the police on 999.

If you believe the situation is urgent but does not require the police, please contact the MASH on **01904 551900** to discuss your concerns.

For non-urgent concerns, referral to MASH should take place by completing a referral form which can be found here; [Safer Children York](#).

Children's Social Care can work with young people under a number of frameworks;

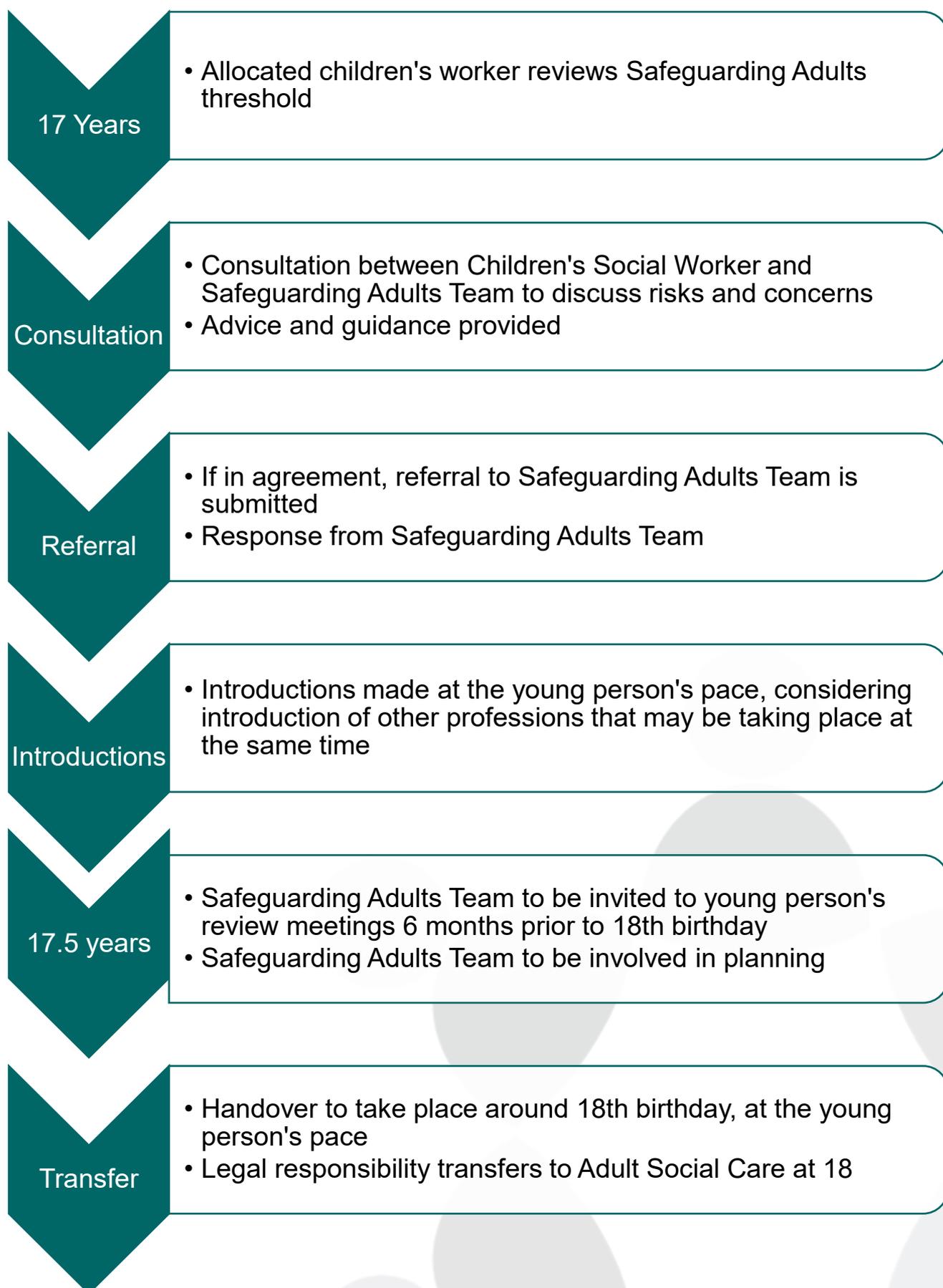
- Assessment
- Child in Need – s17
- Child Protection – s47
- Children in Care

Further details can be found here;

<https://yorkchildcare.proceduresonline.com/chapters/contents.html>

- If the young person is subject to any of the above processes and is aged 17.5 years or over, the Safeguarding Adults team should be invited to the meeting. The Safeguarding Adults team will attend or identify an alternative Adult Social Care representative to attend any future meetings, up to the age of 18, to consider the transition process from Children's social care to Adult services.
- The (Local Authority) Safeguarding Adults Team Manager has the responsibility to make the decision to implement the Safeguarding Adults procedures or not, once the young person reaches 18. If this is proposed at a meeting held under Safeguarding Children's procedures, then the Safeguarding Adults Team Manager must have attended and agreed with this proposal.
- A Safeguarding Adults (Section 42) Enquiry will be the forum for collaboration and early joint working to share information, from the age of 18. This will be coordinated by the LA Safeguarding Adults team and overseen by the Team Manager or Senior Practitioner. It will be essential that services who are working with (or that did work with) the young person attend this initial Safeguarding Adults meeting/discussion. Consideration will need to be given to how the young person will be involved in the meeting or discussion, and whether they will need any support.
- From this point onwards, Safeguarding Adult's procedures will continue as per the multi-agency policy and procedures.

6.1 Transitional Safeguarding Process



7. Further guidance

- In accordance with the Care Act (2014) where someone is aged 18 years and over and a safeguarding concern is raised, this must be dealt with as a matter of law under Safeguarding Adults procedures. For example, where a 19-year-old receiving a service from a children's/young people's service is identified as being at risk of harm. A Safeguarding Adults referral must be raised, and multi-agency procedures followed. It would not be appropriate for this to be dealt with under Safeguarding Children procedures.
- The process outlined above sets out good practice guidelines to ensure timely referral and involvement from Adult Services. However, it is important to note that learning from SARs, SCRs and research has highlighted the inflexibility of current Children's and Adult safeguarding systems, and the markedly different approaches and thresholds for access to services. Therefore, there may be a need to apply some discretion and adapt our systems and responses depending upon the needs and circumstances of the young person. The key to this is early communication and negotiation between Children's and Adult Services to ensure young people receive a flexible and coordinated response to their needs and avoid experiencing a "cliff-edge" support.
- Where a young person is at risk of or is being exploited, transition planning should start as soon as possible. This is particularly important for young people who may have limited eligibility for adult services or may face other challenges such as moving from one Local Authority area to another. Consideration should be given as to how information should be shared effectively with other relevant professionals to ensure the young person experiences a seamless transition that supports them to reduce their risk of exploitation.
- Joint working, including joint visits between Children's and Adult Social Care should commence prior to the young person's 18th birthday, to reduce the risk of disengagement. It is recognised that some young people may decline further interventions once they turn 18.

8. Other Multi-Agency processes and forums

8.1 Young people who may pose a risk to others

Where there is a concern about a young person who is aged 17 years and above posing a risk to others, information should be shared appropriately with professionals and agencies who may work with the young person when they reach adulthood. Multi-agency forums where these issues may be discussed include:

- Multi-Agency Public Protection Arrangements (MAPPA) considers offenders assessed as posing a high or very high risk of causing serious harm and where the risk posed requires management at a senior level through a multi-agency collaboration.
- Multi-Agency Risk Assessment Conference (MARAC). MARAC considers high risks victims of domestic violence, and includes perpetrators aged 16 and over.
- Channel Procedures – Channel is a process to identify a person who would benefit from early intervention and support away from the threat of radicalisation. The focus is on identifying those at risk, assessing the nature and extent of the risks, and identifying the most appropriate support plan. This includes children and adults.
- Safeguarding Adults or Children’s procedures. Where the risk posed is to other children or adults at risk. This includes where the child or adult may pose a risk to themselves e.g., self-neglect.

8.2 Multi-Agency Child Exploitation Meeting (MACEM)

The Multi-agency child exploitation and missing (MACEM) meetings are a process to enable partner agencies to share information where there are concerns that a child or young person (CYP) is at risk of, is being exploited, or is frequently missing from home or care. Exploitation includes criminal exploitation, sexual exploitation and modern slavery /human trafficking. This protocol is specifically aimed at children who are coming to the attention of agencies where screening has identified that a minimum threshold of ‘emerging concerns’ is met. The purpose of the MACEM meetings is to target multi-agency resources by sharing information on identified children by agreeing/reviewing case actions and sharing local intelligence. The aim is to improve the identification and tracking of actions regarding children and young people who agencies are concerned about. The meetings will not case hold. Cases are identified at the weekly Risk and Assessment Management Meetings.

8.3 Risk Assessment Meeting

The multi-agency Risk Assessment Meeting (RAM) has been established to assess and review children open to the City of York Council's Children's Service where there is; a risk of Child Sexual Exploitation/Child Criminal Exploitation (CSE/CCE); or Trafficking has been identified; and/or where there are concerns about children or young people who have been missing from home, care or education. The RAM will also consider children and young people, who are in the care of other Local Authorities and are placed in the City of York Council area. The RAM is a multi-agency tactical approach to risk managing the sharing of information about, and safeguarding of, children and young people who are vulnerable to any form of exploitation (CVE). The RAM is designed to provide a weekly operational, integrated and proactive response and planning to CVE and missing from home.

9. Transitional Safeguarding good practice model

Shared culture, vision, language, understanding of roles and responsibilities

Prevention, person centred approach, focus on outcomes

Professional Curiosity, MSP, family approach, strength based, trauma informed

Clear understanding and application of MCA for 16+

Explore non-engagement and repeated patterns

Recognise impact of trauma and adverse experiences

Legal literacy to ensure all legal options are explored

Collaborative and multi-agency risk assessment/planning and team around the person

Timely and appropriate information sharing

Multi-agency training and learning from serious cases

Understanding communication and language of young person

10. Further information

- Further information about Safeguarding Adults can be found in the Joint Multi-Agency Safeguarding Adults Policy and procedures.
- This is a collaborative protocol which outlines the transition arrangements supported and overseen by the City of York Safeguarding Adults Board and Safeguarding Children Partnership. This should be read in conjunction with any specific protocols and procedures relevant to the circumstances.

Reading

- Local Government Association 'Transitional Safeguarding Resources' <https://www.local.gov.uk/our-support/partners-care-and-health/safeguarding-resources/transitional-safeguarding-resources>
- Holmes, D. and Smale, E. (2018) 'Mind the Gap: Transitional Safeguarding – Adolescence to Adulthood.' <https://www.researchinpractice.org.uk/all/publications/2018/august/transitional-safeguarding-adolescence-to-adulthood-strategic-briefing-2018>
- 'Bridging the Gap: Transitional Safeguarding and the role of social work with adults. DHSC, Research in Practice, LGA, BASW, ADASS, NWG. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/990426/dhsc_transitional_safeguarding_report_bridging_the_gap_web.pdf
- NICE guidelines 'Transition from children's to adults' services for young people using health or social care services' <https://www.nice.org.uk/guidance/ng43/chapter/recommendations>
- Local Government Association 'Making Safeguarding Personal toolkit' <https://www.local.gov.uk/msp-toolkit>
- Transitional Safeguarding 7-minute briefing – CYC SAB (link to be added once endorsed)

11. CYC Children's Services structure

Team name	Description of role
Multi-Agency Safeguarding Hub (MASH)	MASH triages all contacts to Children's Social Care and Targeted Family Support at an early help level. Practitioners from Social Care, Early Help, Police and Health (which includes a direct link to CAMHS) are co-located in the MASH and come together twice daily to screen contacts.
Referral and Assessment	Three teams working on a duty rota, who are allocated children via MASH. Primary role is to assess the immediate need and put in place support and deliver interventions either under s17 Child in Need or s47 Child Protection. Social workers will work with families up until first court hearing, initial child protection conference, 12 weeks under child in need plan or step across to Early Help.
Safeguarding and Child Protection	Safeguarding Interventions service supports children who are subject to longer term interventions through Child in Need, Child Protection, pre-proceedings and care proceedings, working to ensure timely and proportionate statutory responses with the child's voice and permanence at the heart of the decision making.
Exploitation	The City of York has Children's Social Care has a specialist Children Missing and Exploitation Team. The aim of the team is to identify children most at risk of exploitation in the city and provide support and intervention to reduce the risk of harm/exploitation, with a strong ethos of direct work and engagement with young people, their families and working within their networks. The team work closely, alongside Police, Health, Education, Youth Justice Service colleagues and the community safeguarding partnership.

12. Glossary of terms

Term	Definition
Adult at risk	A person aged 18 or over who is in need of care and support, regardless of whether they are receiving this, and because of those needs are unable to protect themselves against abuse or neglect.
Adolescence	A transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood. Adolescence is usually associated with the teenage years, but its physical, psychological or cultural expressions may begin earlier and end later.
Adult Safeguarding	Protecting a person's right to live in safety, free from abuse and neglect.
Advocacy	Support for people who have difficulty expressing their concerns and the outcomes they want during the safeguarding process.
Best interests	The Mental Capacity Act 2005 states that if a person lacks mental capacity to make a particular decision, then whoever is making that decision or taking any action on that person's behalf must do so in the person's best interest.
Care and support needs	The support a person needs to achieve key outcomes in their daily life as relating to wellbeing, quality of life and safety. The Care Act introduced a national eligibility threshold for adults with care and support needs which consists of three criteria, all of which must be met for a person's needs to be eligible.
Consent	Voluntary and continuing permission of the person to an intervention based on an adequate knowledge of the purpose, nature, likely effects and risks of that intervention, including the likelihood of its success and any alternatives to it.
Section 42 Enquiry	Action taken or instigated by the local authority in response to a concern that an adult with needs for care and support may be at risk of or experiencing abuse or neglect and due to those care and support needs is unable to protect themselves. An enquiry could range from a conversation with the adult, or if they lack capacity, or have substantial difficulty in understanding the enquiry their representative or advocate, right through to a much more formal multi-agency plan or course of action. This is referred to as a section 42 enquiry.

Term	Definition
Making Safeguarding personal	Describes a person-centred and rights-based approach to adult safeguarding, which is incorporated into the Care Act 2014 guidance. It is a strengths-based approach, in which the person is understood to have rights to live their life, which need to be balanced with their right to / need for safety. It locates the person being supported as the expert in their own life and emphasises the importance of empowerment and partnership working alongside the adult.
Mental capacity	Refers to a person's ability to make their own choices and decisions. Under the Mental Capacity Act 2005, someone's capacity is judged according to the specific decision to be made, so a person may have sufficient capacity to make some decisions but not others.
Professional curiosity	Refers to the capacity and communication skill to explore and understand what is happening rather than making assumptions or accepting things at face value, to seek reasons and explanations for actions or behaviour.
Relational safeguarding	Refers to person-centred and trauma-informed practice which recognises that meaningful relationships are an important aspect of any therapeutic support. It requires a capacity building and empowering approach, so that young people are supported to build resilience and exercise positive control in their lives.
Safeguarding Adults Board (SAB)	Each local authority must have a SAB to assure itself that local safeguarding arrangements and partners act to help and protect adults at risk. SABs will oversee and lead adult safeguarding and will be interested in all matters that contribute to the prevention of abuse and neglect.
Safeguarding Adults Review	A statutory review undertaken by the Local Safeguarding Adults Board when an individual with care and support needs dies or suffers serious harm as a result of abuse or neglect and there is a concern that the local authority and partner agencies could have worked more effectively to protect the adult. The process aims to identify learning to improve future practice and partnership working.
Strength Based Approach	Promotes a person-centred working and 'no decision about me without me'. It recognises people as experts in their own lives focusing support on achieving the outcomes identified by the adult and using their strengths, skills and assets to achieve these.

Term	Definition
Wellbeing	The Care Act 2014 creates a legal duty to promote a person's wellbeing. This applies to several areas of life including personal dignity; physical and mental health and emotional wellbeing; protection from abuse and neglect; control by the individual over their day-to-day life; participation in work, education, training or recreation; social and economic wellbeing; domestic, family and personal domains; suitability of living accommodation and an individual's contribution to society. There is no hierarchy in the areas of wellbeing listed as all are seen as equally important.

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