

Preparation for Adulthood (PFA) Information Pack



Preparing for Adulthood...

More information and links to useful resources can be found on the Preparing for Adulthood website: <http://devon.cc/sendpfa>

You may wish to look at our Preparing for Adulthood Independence Toolkit. The toolkit covers a range of areas, including money management, health, friends and more, with the aim to support independence and the transition into adulthood. To download our Independence Toolkit, please visit our website.

If you have any questions about Preparing for Adulthood, please get in touch! Call us on 01392 381291 or email: preparingforadulthood@devon.gov.uk

Adult Social Care Eligibility

The Care Act 2014 and its statutory guidance and regulations create new national eligibility criteria which has replaced Fair Access to Care Services.

The new eligibility criteria

1. The new national eligibility criteria ensure that all local authorities meet the same minimum level of needs. If an adult meets the three elements of the criteria detailed below and is ordinarily resident in Devon, we have a duty to ensure their needs are met;
 - I. The adult's needs arise from or are related to a physical or mental impairment or illness;
 - II. As a result of the needs, they are unable to achieve two or more specified outcomes;
 - III. As a consequence there is, or is likely to be, a significant impact on their well-being.
2. The Care Act does not require that individuals have a formal diagnosis of a physical or mental impairment or illness. Instead, local authorities must make a judgement based on the assessment process. However, assessors will need to be assured that an individual's needs are not caused by circumstantial factors, but by a physical or mental impairment.

For more information about The National Eligibility Criteria for Adult Social Care, and the specified outcomes, see Devon's Adult Social Care policy page;

 <https://new.devon.gov.uk/care-and-health/adults/policies-and-procedures/>

Paying for care

Most people have to pay something towards the cost of their care and support services depending on the outcome of a financial assessment. This is a proportionate and fair assessment of your financial circumstances which won't charge you more than you can afford to pay.

An upper capital limit and a lower capital limit exist to determine how much you will have to contribute to the cost of your care and support.

If you (the person receiving care and support) have savings and investments over the upper capital limit you have to pay the full cost of any care services you receive. **The upper capital limit is £23, 250.**

If the level of your savings and investments is below the lower capital limit you are not required to contribute from these savings and investments, instead, you will only contribute from your income. **The lower capital limit is £14,250.**

Savings and investments between the lower and upper capital limits will have a tariff income applied of £1 per week for every £250 (or part of).

If you choose not to give us details about your finances you will have to pay the full cost of any care services you receive.

In some circumstances you will not need to have a financial assessment and you won't have to pay towards your care and support.





For more information about paying for care, and the circumstances you will not have to contribute towards your care and support services, please see Devon's Adult Social Care Paying for care page;






 <https://new.devon.gov.uk/care-and-health/adults/paying-for-care/>



Fair and Affordable Care Policy



Fair and Affordable Care Policy

	<p>Devon County Council must make sure that all of your eligible social care needs are met. We don't have to meet them by funding staff to support you.</p>
	<p>We can also meet ineligible social care needs but only if we choose to but this probably won't happen very often.</p>
	<p>We have to tell you in writing which of your needs we will be supporting you with.</p>
	<p>We have to give you information about how you can help yourself with any other needs that you have and stop them getting worse.</p>

	<p>We will agree outcomes with you for each of the needs that we say will be met or funded by Devon County Council</p>
	<p>We will talk to you about the best way to get those outcomes. You need to tell us what you think will be the best way and why.</p>
	<p>If Devon County Council is going to spend money to help you meet the outcome it will be done in a way that is best value to Devon County Council.</p>
	<p>This is because we must use our money in a way that is fair for all of the people in Devon who have adult social care needs</p>
	<p>If you want a care and support plan that is more money than the most affordable plan, we will talk to you about how this could happen</p>
	<p>You might be able to put some of your own or your family's money towards the cost of your care so you can choose who supports you and for how long.</p>

	<p>You may need to look for a different organisation to support you or for a different place to live.</p>
	<p>If you have any concerns about how this may affect your support, you need to discuss these with your care manager</p>

For more information about Devon's Fair and Affordable Care policy see;

 <https://new.devon.gov.uk/care-and-health/adults/policies-and-procedures/>

Mental Capacity Act 2005 (MCA)

The following information is copied from a department of health booklet; the full version can be accessed here:

 http://www.easyhealth.org.uk/sites/default/files/mental_capacity_act_0.pdf

Mental Capacity Act 2005 • A Summary

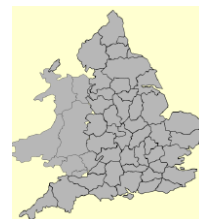
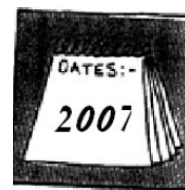
Mental capacity means being able to make your own decisions.

The Mental Capacity Act 2005 helps people to make their own decisions.

The Mental Capacity Act started in 2007. It affects people in England and Wales. The Act affects people who are 16 years or older. It also protects people who cannot make their own decisions about some things, for example people with learning disabilities or mental health problems. This is called “lacking capacity”.

The Act tells people:

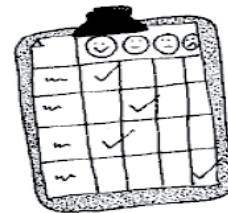
- what to do to help someone make their own decisions about something
- how to work out if someone can make their own decisions about something
- what to do if someone cannot make decisions about something sometimes.



Mental Capacity Act - The Big Ideas

This is a list of the 5 most important things people must do and think about when using the Act. These are:

1. Start off by thinking that everyone can make their own decisions.
2. Give the person all the support they can to help them make decisions.
3. No-one should be stopped from making a decision just because someone else thinks it is wrong or bad.
4. Anytime someone does something or decides for someone who lacks capacity, it must be in the person's best interests - there is a checklist for this.
5. When they do something or decide something for another person, they must try to limit the person's own freedom and rights as little as possible.



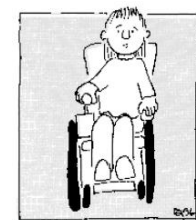
Assessing Capacity

No one can assume you lack capacity because of;

- how old you are
- how you look
- how you behave



If someone needs to make a decision for you, they must be sure that you cannot make the decision yourself.



No-one can assume that you cannot make the decision yourself just because:

- you have a disability
- you cannot make more complicated decisions
- you have not been able to make decisions like that in the past



Best Interests

If someone has to make a decision for you because you cannot make it yourself, they must decide what is in your best interests.



To work out what is in your best interests they must listen to what you want, ask people who know you and make sure you are involved.



No one can decide what is in your best interests just because of:

- how old you are
- how you look
- how you behave.



What sorts of things are not covered by the Act?

There are some decisions that can never be made under the Act by another person for someone who lacks capacity.



Decisions that cannot be made on behalf of someone else include:



- whether to get married or make a civil partnership



- whether to have sex



- placing a child for adoption



- voting at an election

Deprivation of Liberty Safeguards (DoLS)

The Human Rights convention says that every person has the right to liberty. Liberty means being free to do the things you want to do and live where you want to live. Deprivation of liberty means to take someone's freedom away.

The Mental Capacity Act is a law about making decisions and what to do when people cannot make some decisions for themselves. The Deprivation of Liberty Safeguards are part of the Mental Capacity Act 2005.

Why do we need Deprivation of Liberty Safeguards?

A few years ago, someone with a learning disability was taken to a mental health hospital because of the way he was behaving. His carers said he should come home but the hospital said he should stay. He wasn't made to stay under the Mental Health Act but was kept in hospital because staff believed it was in his best interests. He could not talk but he was clearly unhappy, so this went to court. This case was called the *Bournewood* case. Because of this case, new rules were made to protect people who may need to be deprived of their liberty in hospitals or in care homes in their best interests.

Safeguards are rules to keep you safe. If your liberty is taken away, the safeguards make sure that that is the right thing to do for you. They also make sure that your liberty is not taken away for longer than is needed.

Who does Deprivation of Liberty Safeguards apply to?

The Deprivation of Liberty Safeguards are for:

- people living in England or Wales
- people who are 18 years old or older
- people who have a mental disorder such as dementia (a sort of mental illness) or a learning disability (it does not include mental health problems because of alcohol or drugs)
- people who live in a care home or are staying in hospital, who are lacking capacity to agree to be there. (The people need to be there to get the treatment or care that will protect them from harm in their best interests.)

When is it ok to deprive someone of their liberty?

The law says that it is only ok for 3 reasons.

1. It is in someone's best interests. This means depriving you of your liberty is the best thing to do for you.
2. To stop you getting hurt.
3. It is the best thing to do to stop things from getting bad.

What happens if you are being deprived of your liberty?

This is so serious that the law says that every effort must be made not to do it.

Deprivation of liberty is the very last thing Health and Social Care services should think about doing. They must do everything they can before deciding that this is the best thing to do. This means that they should only take someone's liberty away if it is the only way they can help them.

The Code of Practice tells the people involved what to do. It says that the people who are caring for or treating you are called the managing authority. If the managing authority thinks they need to deprive you of your liberty, they must make sure they are not breaking the law.

The managing authority must write to something called the supervisory body (your local council or health trust) to tell them that they think you need Deprivation of Liberty Safeguards.

The supervisory body must decide if you need Deprivation of Liberty Safeguards. They will do this by arranging at least 2 people to check how you are being treated or cared for. These people are called assessors.

One assessor is called the Best Interests Assessor. The Best Interests Assessor will be a person who does not work with you. The Best Interests Assessor will write a report to tell the supervisory body if you need a Deprivation of Liberty Safeguards Authorisation and for how long this should be. The Deprivation of Liberty Safeguards should be for as short a time as possible and never for longer than a year.

Information copied from SCIE and Department of Health Deprivation of Liberty Safeguards Easy Reads. The full documents can be found online;

 [https://www.thh.nhs.uk/documents/ Patients/PatientLeaflets/general/DOLS_whatknow-EasyRead-DoH.pdf](https://www.thh.nhs.uk/documents/Patients/PatientLeaflets/general/DOLS_whatknow-EasyRead-DoH.pdf)

 <https://www.scie.org.uk/files/mca/directory/20150120-DoLS-easy-read-DH.pdf?res=true>

Deprivation of Liberty in the Community

The Human Rights Act 1998 states that all people “have the right to personal liberty”. This means that people are free to live where they choose and make decisions about their own lives without interference from others.

However this act also allows people to be lawfully deprived of their liberty if they are of ‘unsound mind’ and a proper process is followed to authorise the deprivation.

Due to the complexities of some of the people support is provided to, it may at times be necessary to deprive someone of their liberty without their consent in order to maintain their safety. To deprive someone of their liberty lawfully in a community setting (i.e. not in hospital or a care home) an application must be made to the Court of Protection. This is to safeguard individuals against being deprived of their liberty unnecessarily or in a manner which is more restrictive than is required.

Mental Capacity Act 2005

The Mental Capacity Act 2005 was introduced to help determine when a person is of ‘unsound mind’ and unable to make their own decisions. It was also designed to protect their rights.

This law ensures that people who lack the capacity to consent to their care and treatment are given every opportunity to be involved before a decision is made on their behalf. It also ensures that decisions made on their behalf must be in their best interest.

What is a Deprivation of Liberty?

Sometimes the amount of restraint, restriction and level of control and supervision a person requires can take away a person’s freedom and can mean that they are being deprived of their liberty.

A deprivation of Liberty can occur when **all** of the following factors apply:

- A person lacks the capacity to consent to their care, support and /or treatment arrangements
- The State (e.g. NHS or Local Authority) is responsible for paying for, arranging or providing their care, support and /or treatment.
- The care, support and /or treatment a person needs means they are not free to leave and that they are under continuous supervision and control.

The Court of Protection

The Court of Protection is used when it is necessary to deprive a person who lacks capacity to consent to their own care and treatment of their liberty, in order to keep themselves safe and free from harm.

Who does the Court of Protection process apply to?

This legislation relates to any Adults receiving care in the community aged 16 years or over.

This includes:

- Shared lives
- Supported living
- Care at home


Deprivation of Liberty in the Community does not apply to adults living in residential homes or hospitals. These cases are authorised by the Local Authority rather than the Court of Protection.

Information copied from Nottinghamshire Local Authority website;

 <http://www.nottinghamshire.gov.uk/media/127674/deprivationoflibertyincommunity20171121.pdf>

Useful links;

Devon's information about Deprivation of Liberty Safeguards and Deprivation of Liberty in the Community can be found here;

 <https://new.devon.gov.uk/care-and-health/adults/managing-someone-elses-affairs/mental-capacity-act-the-process-for-professionals/deprivation-of-liberty/>

Court Appointed Deputy (Deputyship)

You can apply to become someone's deputy if they have been assessed by a professional as 'lacking mental capacity'. This means they can't make a decision for themselves at the time it needs to be made. They may still be able to make decisions for themselves at other times.

As a deputy, you'll be authorised by the Court of Protection to make decisions on their behalf.

The Court of Protection prefers a deputy to be a close family member as they are more likely to have the person's best interests at heart, however anyone can be considered e.g. a friend, neighbour or professional.

There are 2 types of deputy;

- **Property and financial affairs deputy**
You'll do things like pay the person's bills or organise their pension.
- **Personal welfare deputy**
You'll make decisions about medical treatment and how someone is looked after.

You can apply to be just one type of deputy or both. If you're appointed, you'll get a court order saying what you can and can't do.

When you become a deputy, you must send an annual report to the Office of the Public Guardian (OPG) each year explaining the decisions you've made.

How to apply

To apply you need to send the application forms to the Court of Protection and pay the application fee. The forms you need can be found on the government website www.gov.uk/become-deputy along with information regarding supporting evidence and what you can and can't do as a deputy. You can obtain legal advice to help you if needed.

Lasting Power of Attorney (LPA)

A Lasting Power of Attorney allows a person to appoint others to manage their affairs. It differs from deputyship in that the person must have capacity to understand what it means and make the decision to hand over control of their affairs to someone else, either now or in the future.

As with deputyship, the attorney must act in the person's best interests, they must keep the person's money and property separate from their own and they must keep accurate accounts for all actions and transactions made on the person's behalf.

Helpful websites

 <http://www.housingandsupport.org.uk/deputyship-and-lasting-power-of-attorney>

 <https://barcankirby.co.uk/legal-services/court-of-protection/downloads-factsheets/>

 www.publicguardian.gov.uk

 www.gov.uk/power-of-attorney

 www.citizensadvice.org.uk/family/looking-after-people/managing-affairs-for-someone-else/

Advocacy

Advocacy means getting support from another person to help you express your views and wishes, and help you stand up for your rights. Someone who helps you in this way is called your advocate.

What does an advocate do?

The role of an advocate depends on your situation and the support you want. But they are there to support your choices.

An advocate can:

- listen to your views and concerns
- help you explore your options and rights (without pressuring you)
- provide information to help you make informed decisions
- help you contact relevant people, or contact them on your behalf
- accompany you and support you in meetings or appointments.

An advocate will not:

- give you their personal opinion
- solve problems and make decisions for you
- make judgements about you.

The support of an advocate is often particularly useful in meetings when you might not feel confident in expressing yourself. They can:

- support you to ask all the questions you want to ask
- make sure all the points you want covered are included in the meeting
- explain your options to you without giving their opinion
- help keep you safe during the meeting – for example, if you find the meeting upsetting, your advocate can ask for a break until you feel able to continue.

Who can be my advocate?

There are different kinds of advocate you could approach. For example:


- You can access a professional advocacy service through some organisations and charities. They are independent of the NHS and social services.
- Your friends, family, or carers can act as an advocate for you.

Do I have a legal right to an advocate?

In some situations you might be legally entitled to get the support of an advocate. This is called 'statutory advocacy'. There are three types of statutory advocates in England and Wales. These are:

- Independent Mental Health Advocates (IMHAs). These are specially trained advocates who can support certain patients under the Mental Health Act 1983.
- Independent Mental Capacity Advocates (IMCAs). These are specially trained advocates who can support certain people under the Mental Capacity Act 2005.
- Social care advocates. These can support certain people under the Care Act 2014 (in England).

Information copied from Mind;

 <https://www.mind.org.uk/information-support/guides-to-support-and-services/advocacy/what-is-advocacy/>

Useful links;

 <http://www.devonadvocacy.org.uk/>

Technology Enabled Care & Assistive Technology

Technology enabled care can be used to support and maximise people's independence, have more control over their own lives and be able to access their communities.

Independent Living Centre

The Independent Living Centre is a free and impartial service where trained NHS occupational therapists can:

- assess your needs
- help you find the best equipment
- show you how the equipment works and help you to try it out
- explain how you can get equipment to keep you independent
- direct you to other services that might help you.

They don't sell equipment but can work with you to look at your needs and find the best solutions. If you identify equipment that meets your needs they will talk to you about where you can buy it, either locally or online, or you can request an assessment to establish whether you are eligible for statutory support.

Minor adaptations and equipment

Minor adaptations and equipment refers to small works or pieces of equipment such as grab rails, walking frames, trolleys and raised toilet seats which help millions of people to remain independent.

Following an assessment of your needs, you will either be provided with information and advice to source and purchase equipment that might assist you or, if eligible, you might be given a prescription to exchange for a piece or pieces of equipment.


You can exchange your prescription at any accredited shop in Devon. You'll get a list of these shops when you get a prescription or you can use Pinpoint Devon to search for shops in your area. You can also ask for paper copies from Care Direct on 0345 1551 007.

Major adaptations


These could include a stair lift, wide doorway, adapting bathrooms or kitchens. The work may be funded through a Disabled Facilities Grant administered through your local district council, or provided on the recommendation of an occupational therapist (OT).

Useful contacts for technology enabled care and assistive technology:

Independent Living Centre

 <https://new.devon.gov.uk/care-and-health/adults/help-to-stay-living-at-home/ilc/>


 Devon House, Brunel Industrial Estate, Newton Abbot TQ12 4PB

 01392 380181

 ilc-exeter@devon.gov.uk

Assisted technology via Devon County Council

 <https://new.devon.gov.uk/care-and-health/adults/assistive-technologies/>

 <https://new.devon.gov.uk/care-and-health/adults/help-to-stay-living-at-home/ilc>

 <https://new.devon.gov.uk/care-and-health/adults/assistive-techno>

Devon County Council Provider; Millbrook Healthcare

 <http://www.millbrook-healthcare.co.uk/contact-us/service-centre-locations/community-equipment-service/dilis/>

Independent equipment providers

OTStores


 <https://www.otstores.co.uk/>

Able2:

 <http://www.able2.eu/>

Continuing Health Care (CHC)

The following information is taken from an NHS easy read continuing healthcare guide. The original can be found here:

 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/328377/NHS_CHC_easy_read.pdf

What is Continuing Healthcare?



NHS Continuing Healthcare pays for help and care.

Most people have their help and care paid for by social services (the council).

People who need a lot of help because of their health may get Continuing Healthcare.

You might have help with some or all of these things:



- A place to live – home!



- Help at home



- Help with travelling

- Help with a job or other things to do in the day

- Help to do things that are fun, like seeing friends or going to see a play



- Help to look after someone else (being a carer)

Who can get NHS Continuing Healthcare?



NHS Continuing Healthcare is for people who need a lot of help because of their health.

Some people need help because they have difficulty with things like:



- Breathing
- Eating and drinking
- Taking medicines
- Moving about
- Memory and thinking.



Who will help you find out about NHS Continuing Healthcare?

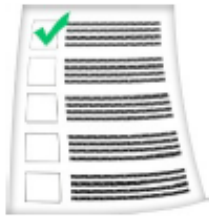
You or your family can ask about NHS Continuing Healthcare. You can ask:



- Your social worker
- Your family doctor
- A nurse or another health worker

What will happen at each step?

Step 1: Checklist



A social care worker or a health worker like a nurse will come and see you.

This might be part of your usual review meeting.

You can have a member of your family, a friend or advocate to help you.

You can ask about having an advocate if you do not have one.

The worker will ask if it is OK to ask you questions.

They will ask about your health and the help you need.

You can show them your person centred plan and other plans.



They will want to talk to your family or other people who support you. This will check if this is OK.



They may talk to other people who know you, like your doctor, nurse, social worker or other staff from the community team.



They will want to look at the information people keep about you.

They will fill in a form called a **Checklist**. You can ask for a copy.



They will ask if you have any questions.

Step 2



They will use the **Checklist** to decide if you do or do not go on to Step 2.

Step 2: The big assessment

If you go on from Step 1, this is what happens next.



A health worker like a nurse will come and see you.

They might bring someone else with them like a social worker or another health worker.

They might come more than once.



They can come and see you at home or somewhere else if you prefer.

You can have someone with you – like a member of your family, a friend or advocate.

The health worker will ask you if it is OK to ask you more questions.



They will ask more questions about your health and the help you need.

You can show them your person centred plan and other plans.



They will want to talk to your family and other people who support you. They will check if this is OK.

They will ask if it is OK to talk to other people who know you, like your doctor, nurse, social worker or other staff from the community team.



They will want to look at the information people keep about you.

The health worker might get everyone together for a big meeting.



They will fill in a big form called the **Decision Support Tool**.

They will ask if you have any questions.

Step 3: Agreeing what is written about you



When the health worker has collected all the information they need they will write about what they have seen and heard.



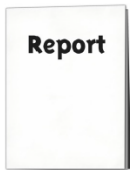
They will ask you and your family or advocate if you agree with what they have said.

If you do not agree you can say so. They will write down what you say about why you disagree.

Step 4: Decision about the money



The health worker will go to your local **NHS Clinical Commissioning Group**. In your area this might be called the “panel”. The health worker will ask them to decide if you will get **NHS Continuing Healthcare**.



They will use all the information the health worker collected about you.

They will tell you what they decide.



If the **NHS Clinical Commissioning Group** says ‘No’ and you are not happy with that you can say so. You can ask them to look at all the information again.



If you do not get **NHS Continuing Healthcare** sometimes the NHS will agree with social services (the council) that they will pay together for the help you need. This is called joint funding.

If the **NHS Clinical Commissioning Group** says ‘Yes’ they will choose someone to work with you.



They might be called:

- A Case Manager
- A Care Manager
- A Community Nurse

The NHS Clinical Commissioning Group for your area is the group that decides about most health services in your area. They decide how to spend NHS money.

Transport – Post 16

Devon County Council does not provide a universal Post-16 assisted travel scheme. It expects that you and your parents will consider how you are going to get to and from college prior to applying and accepting a place.

Transport will only be considered for students aged 16 - under 19 years of age on 1st September, who are attending their **nearest appropriate*** establishment and if they are living over 3 miles away.

Up to date information can be found at:

 <https://new.devon.gov.uk/educationandfamilies/guide/post-16-transport>

You will need to explore all options available to get you to and from college. This could be walking, cycling, car share, public transport, vacant seat scheme, private taxi etc.


Where **public transport** is available, you need to approach the operator direct to purchase tickets.

Contact Traveline, on 0871 200 22 33 or visit www.travelinesw.com, for information on the public bus or rail services in your area.

Where there is public transport, but you are unable to use it, you may be able to access Independent Travel Training. Devon County Council Travel Trainers have limited availability and, in the majority of Post 16 cases, they will carry out an assessment and then leave the travel details with parents/carers to enable them to carry out the travel training.

Where there is no public transport available, you should speak to the educational establishment direct as some 6th forms/colleges have their own transport schemes. If you need **financial assistance**, you should approach the establishment direct to apply to their bursary fund.

Where none of the above is an option, you will need to look into your **own transport options** and availability to see what transport you can provide yourselves with the possible assistance of friends and family members. If you do not have access to a vehicle and family/friends are unable to help, you can apply for a **vacant seat** on a pre-existing DCC contract route. Application forms for a Vacant Seat are available online;

 <https://new.devon.gov.uk/educationandfamilies/guide/post-16-transport/post16-opt>

If you are unable to use a contract vehicle, or no vacant seat is available, and you have explored all other options, you may request an **Assessment of Need**. There may be a request for evidence of medical, financial or any other relevant information. If transport is refused after an Assessment of Need, you will be given the opportunity to request that your case is heard by a panel of Senior Officers. This is the first stage in a 2-stage appeal process.

If you are 19 years of age before the 1st September, it is likely you will no longer be entitled to transport. If transport is refused for this reason, we will write to you and advise you further.

***Nearest appropriate:** The designated 6th form of the school they were attending at secondary school age, if no 6th form the nearest appropriate FE college. For some SEN pupils the nearest appropriate may be a specialist provision and named in the EHC plan as the only establishment that can meet the young persons needs.

Useful Links

Adult Social Care

For more information about Adult Social Care services in Devon see;

 <https://new.devon.gov.uk/care-and-health/adults/>

Devon Carers

Devon Carers is an information and support service run by eight organisations working together to improve the quality of services for all carers in Devon. It can provide help and support for parents and carers. Access the site here:

 <http://www.devoncarers.org.uk/>

Devon Information, Advice & Support (DIAS)

Our dedicated team offer legally based and easily accessible impartial and confidential information and advice about special educational needs and disabilities (SEND). We support parents, carers and young people with SEND.

 <https://www.devonias.org.uk/>

How to make a comment, compliment or complaint

We welcome your comments, complaints and compliments to help us improve our services and put things right if they go wrong. For feedback about a service you, or an adult you know, is receiving:

 <https://new.devon.gov.uk/care-and-health/adults/contact/>

National Preparation for Adulthood

For the national Preparation for Adulthood website see;

 <https://www.preparingforadulthood.org.uk/>

Pinpoint

Pinpoint is an internet search site that allows people to search for local services and charities that offer help. There is a page for young people and links to a wide range of support, from advice and guidance with money matters to staying safe. Access the site here:

 <https://www.pinpointdevon.co.uk/young-adults/>

SEND Local Offer Website

Devon's special educational needs and disabilities (SEND) Local Offer website contains up to date information on a range of topics, including education, health and social care services and support, for children and young people with SEND from birth to 25. It can be accessed here:


 <https://new.devon.gov.uk/send>

Useful Contacts


Care Direct

 0345 155 1007


Multi-Agency Safeguarding team (MASH)

 0345 155 1071

Preparation for Adulthood team


 01392 381291

 preparingforadulthood@devon.gov.uk

 Nichols Centre, 89 Polsloe Road, Exeter, EX1 2HN

 <http://devon.cc/sendpfa>

Single Point of Access (SPOA)

 03300 245 321

Early Help Information



Early Help

Find out how to get you and your family the help you need



What is Early Help?

Early Help is the extra support your family can get if you need it. It may be that you want to prevent a problem, or change things for your family before the problem becomes more serious.

It is not a specific service or team, it's an approach that brings together people from a range of services and teams who will work together with your whole family to help improve the situation for everyone.

It can offer support to families from pre-birth to adolescents with all sorts of issues from parenting, employment and school attendance to emotional wellbeing or anti-social behaviour.

"I was experiencing mental health difficulties, my husband was misusing drugs and my two year old had developmental delays. Early Help meant we could all get the support we needed as a whole family."

"My teenage daughter was out of control and getting into all sorts of trouble. I felt lost, but the support both of us received through Early Help got us back on track."

Why would I need Early Help?

When one person in your family has a problem it often affects everyone else too.

You may be worrying about someone's physical or mental health, a disability or special need, being a carer, domestic abuse, alcohol or drug misuse, harmful behaviour or involvement in crime.

It could be your child, a young person or another adult, but if the whole family is supported as soon as possible to help cope with their difficulties it's more likely that things will improve and everyone will be happier.



How does Early Help work?

By identifying and building on your strengths as a family we can help and support you to find long term solutions to your issues, as well as developing your skills to help you manage any future challenges.

You will have one main point of contact. This could be someone you already have a good relationship with such as a youth worker or health visitor. They will be known as your lead worker and they will help you access the services you need quickly and easily.

The information you and your family provide will only be shared with the people who need to know about it, and only with your permission. You and your family will be central to drawing up your goals, and we won't make any decisions without your involvement.

What happens next?

STEP 1 Getting help

You can ask for an Early Help Assessment yourself, or someone your family is already in contact with (such as a teacher or someone at your child's nursery, a health visitor, your GP or a support worker) may suggest one for you. Completing one is a bit like writing a 'to-do' list and putting a plan in place to achieve it. It's the only assessment you'll have to complete.

STEP 2 Listening to you

Your lead worker will meet with you and your family and try to understand the views, needs, strengths and difficulties of everyone as well as how you work together as a family. This family-led approach means you can identify your goals and decide your actions together with the people who will be supporting you to achieve them.

STEP 3 Your family's plan

Your family's plan of support will say who is going to do what and when, including the things you and your family can do to help yourselves.

STEP 4 Review

Your plan will be regularly reviewed to make sure it is working or if anything needs to change. Support will continue until your family feels resilient enough to manage your issues on your own.

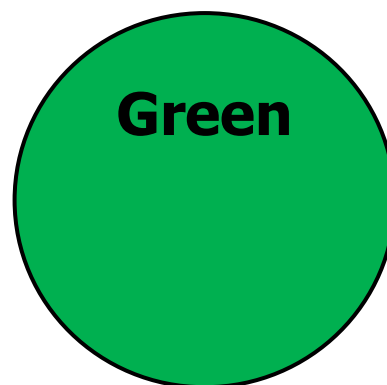
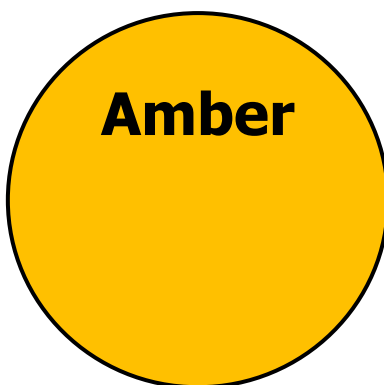
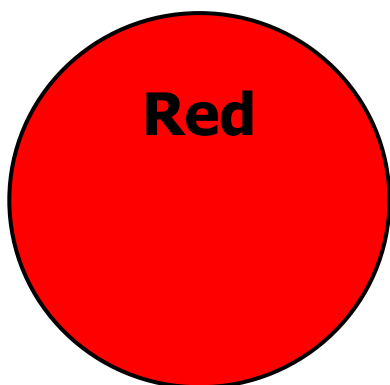
How do I find out more?

- Talk to someone you are already in contact with, for example a teacher, youth worker, health visitor or your GP.
- Search on **Pinpoint Devon**. It has details of thousands of community services and groups available in Devon: www.pinpointdevon.co.uk
- Visit www.devonchildrenandfamiliespartnership.org.uk/early-help
- Call our Customer Service Centre on **0345 155 1015**. They are open Monday to Friday 8am–8pm and Saturdays 9am–1pm
- Email rightforchildren@devon.gov.uk
- If you have been allocated a lead worker, their details are:

Name:

Telephone number:

Email address:



Hospital Passport for people with Learning Disabilities

Please take this Hospital Passport if you have to go into hospital.

This Hospital Passport gives staff looking after you important information about you. Please ask staff to read it.

You can contact the Learning Disability Liaison Team when you are coming into the Hospital.



Telephone:



Email:

This Hospital Passport was developed by the Learning Disability Liaison Team within Plymouth Hospitals NHS Trust. This is based on the original work created by the Gloucester Partnership NHS Trust.

RED

Things you **MUST** know about me



Name: _____ NHS No: _____
Likes to be known as: _____



Address: _____ Tel No: _____



Date of birth: _____ GP: _____



Next of Kin: _____ Tel No: _____
Relationship: _____



Care Provider: _____ Tel No: _____

Key worker/Main carer: _____ Tel No: _____



Social worker: _____ Tel No: _____

Who I would like you to contact first: _____ Tel No: _____

Religion/Religious requests: None practiced



Allergies: _____



Current medical conditions: _____



Current medication (please bring marl sheet / px sheet): _____

End of Life plan in place: _____



How I may react if I am anxious or find the situation challenging: _____



My preferred communication method to help me understand is:
Speaking / Signing / Pictures / **Third Party** / Other: _____

Amber

Things you **NEED** know about me



For my safety – e.g. bed rails, people to support me, what I understand?



Level of support – e.g. who needs to stay with me and how often?



If I am anxious it helps if you...



Pain – e.g. how you know I am in pain and what helps.



Seeing/Hearing – e.g. glasses, hearing aids?



How I take medication:



Eating (swallowing) – e.g. dentures, food cut up, choking, eating aids, help with feeding.



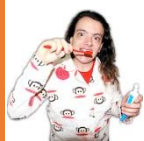
Drinking (swallowing) – e.g. Small amounts, choking, what I like to drink, what I drink from.



How I get around.



Going to the toilet – e.g. independent, pads, catheter, aids needed.



Personal care – e.g. dressing, washing, etc.



Sleeping – e.g. sleep pattern, sleep routine, sleep system, posture?

Green

Things you **SHOULD** know about me

Think about – what upsets you, what makes you happy, things you like to do such as watching TV, reading and listening to music. How do you want people to talk to you (don't shout). Food likes, dislikes, physical touch, special needs, routines, things that keep you safe.



Things I like



Things I DO NOT like

