



# Contents

Introduction	<b>1</b>
Terminology	<b>2</b>
Why do we need this protocol?	<b>5</b>
Wellbeing and Prevention duties	<b>7</b>
Who is this protocol for?	<b>10</b>
Existing pathways into adult support	<b>12</b>
Existing services for vulnerable or high risk adolescents	<b>15</b>
Existing Services for vulnerable young adults	<b>16</b>
Existing protocols (Links are in the titles)	<b>18</b>
Existing panels (overseeing vulnerable and high risk adolescents and adults)	<b>19</b>
Proposed panel to bridge the gap	<b>21</b>
Vulnerable Adolescents Supported into Adulthood (VASA) Panel	<b>21</b>
Partnership commitment - services to bridge the gap	<b>22</b>
Appendix A - referral flowchart for VASA panel	<b>23</b>
Appendix B - VASA panel terms of reference	<b>24</b>
Appendix C - Tiers of support for 18 - 25 year olds	<b>29</b>
Appendix D - Resources for practitioners	<b>30</b>
Appendix E - Care Act 2014 specifications of need	<b>32</b>

*Part of adulthood is searching for the people who  
understand you — Hanya Yanagihara*

## Introduction

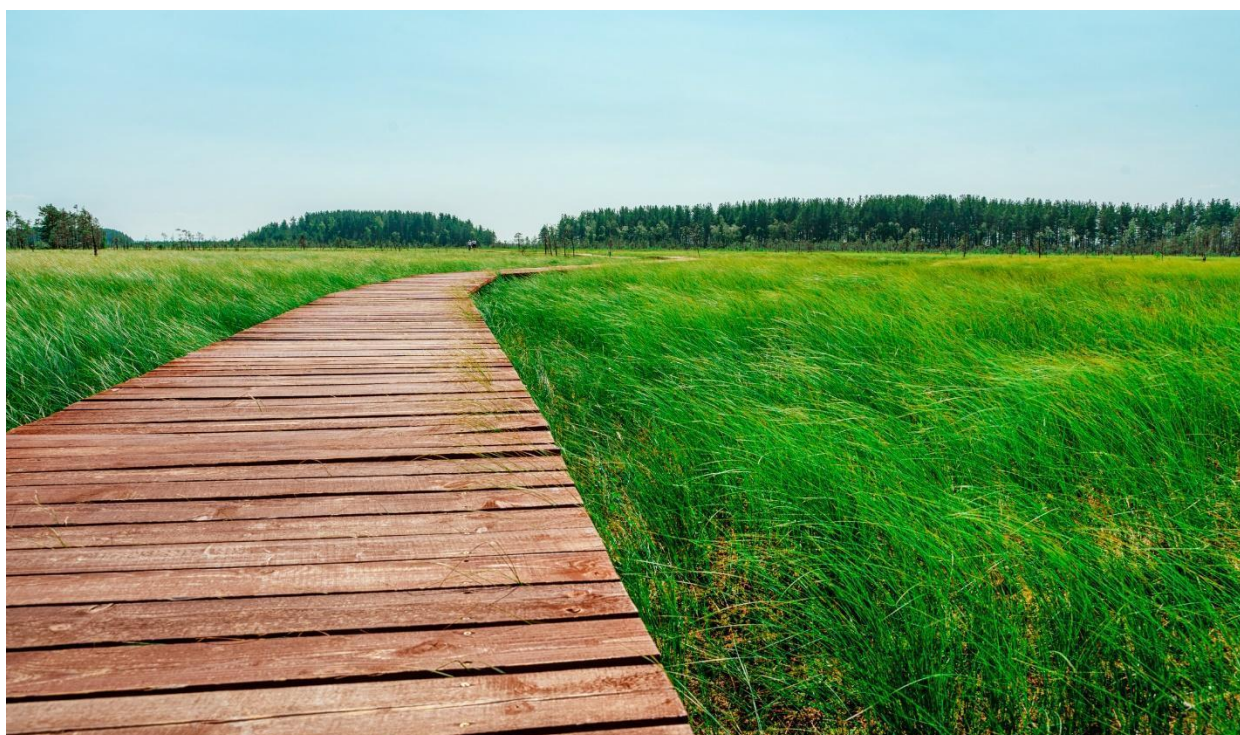
The Vulnerable Children and Adolescents sub-group of the Kingston and Richmond Safeguarding Children's Partnership requested a task and finish group to explore the services available to young people who are transitioning into adulthood soon after or when they are still being overseen by the Multi-agency Risk, Vulnerability and Exploitation (MARVE) panel (now MACE and Pre-MACE), which oversees children at medium to high risk of sexual or criminal exploitation, serious youth violence and harmful sexual behaviour.

The task and finish group met four times between May and October 2021, carrying out a SWOT analysis of the strengths, weaknesses, opportunities and threats of services working with young people transitioning to adulthood. It was recognised that while there was an array of services available to young people under the age of 18 years there was a noticeable reduction in services or an increase in thresholds for specialist services.

The group identified a number of needs for young people transitioning into adulthood where there are ongoing risks of exploitation or harm, particularly if they have experienced poor education pathways, mental health, family breakdown, or criminal justice processes.

The task and finish group acknowledged that while there are several panels overseeing different groups of vulnerable adults, there was not one fit-for-purpose to support those with ongoing risk of exploitation or harm, as per the MACE protocol. Therefore, this protocol was developed, which outlines the context for this protocol, the existing services and panels, and the commitment from the partnership to extend services to vulnerable adults.

This protocol includes a referral pathway and Terms of Reference for the Vulnerable Adolescents Supported into Adulthood (VASA) Panel (Appendix A & B) that will oversee the referrals from partners who are concerned about young adults with continued significant risk and whereby a problem solving approach can be applied alongside the additional resources available and signpost to resources for practitioners (Appendix C & D)



# Terminology

## Adolescence

The World Health Organisation (WHO) defines adolescents as **those people between 10 and 19 years of age**. The great majority of adolescents are, therefore, included in the age-based definition of 'child', adopted by the Convention on the Rights of the Child, as a person under the age of 18 years. However, research has also recognised that socially the age of adolescence could stretch to as far as **24 years**. The following is taken directly from the description of a Lancet article 'the age of adolescence' (Sawyer et al, 2018)<sup>1</sup>

'Adolescence is the phase of life stretching between childhood and adulthood, and its definition has long posed a conundrum. Adolescence encompasses elements of biological growth and major social role transitions, both of which have changed in the past century ...

Arguably, the transition period from childhood to adulthood now occupies a greater portion of the life course than ever before ... an expanded and more inclusive definition of adolescence is essential for developmentally appropriate framing of laws, social policies, and service systems.

Rather than age 10 to 19 years, a definition of 10 to 24 years corresponds more closely to adolescent growth and popular understandings of this life phase and would facilitate extended investments across a broader range of settings.'

## Vulnerable

Young people may be vulnerable due to having special education needs or being a child in care. Any young person that is at risk of exploitation or violence, as per the MACE threshold,<sup>2</sup> should be considered as vulnerable for the purposes of this protocol. The impact of adversity and trauma on an adolescent can increase their vulnerability. While any child can be exploited, 'the impact of prior maltreatment can lead to adolescents acting in ways that inadvertently increase risk to themselves (and in vicious spirals)<sup>3</sup>.

However, it is also important to recognise the rapid development process that occurs during adolescence, fundamentally shaped by social interactions and relationships, which offers a window of opportunity for relationship based interventions<sup>4</sup>. Therefore, focusing on their strengths and potential development is crucial<sup>5</sup>.

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<sup>1</sup> Sawyer, Susan M ; Azzopardi, Peter S ; Wickremarathne, Dakshitha ; Patton, George C England The lancet child & adolescent health, 2018-03, Vol.2 (3), p.223-228

<sup>2</sup> For definitions of the areas of risk overseen by the MACE and Pre-MACE panels (child exploitation, gangs, serious youth violence, harmful sexual behaviour) please refer to the [Terms of Reference #to be included](#)

<sup>3</sup> Hanson and Holmes (2014) [https://www.basw.co.uk/system/files/resources/basw\\_24144-4\\_0.pdf](https://www.basw.co.uk/system/files/resources/basw_24144-4_0.pdf)

<sup>4</sup> Ibid

<sup>5</sup> <https://www.bbc.co.uk/news/health-42732442>





## Adult at risk

The London Multi-Agency Adult Safeguarding Policy states an Adult at Risk is, and adult safeguarding duties will apply to, a person aged 18 or over who is in need of care and support (whether or not those needs are being met), who is experiencing or at risk of abuse or neglect, and because of those needs is unable to protect themselves against the abuse or neglect or the risk of it. See Appendix E for Care Act 2014 Requirements for Safeguarding.

The Richmond and Wandsworth Multi-agency Risk Assessment Framework<sup>6</sup> also states:

An adult will be 'at risk' under this framework where they are unable or unwilling to provide adequate care for themselves and:

- is unable to obtain necessary care to meet their needs Is unable to make reasonable or informed decisions because of a mental impairment
- is unable to protect themselves adequately against potential exploitation or abuse
- has refused essential services without which their health and safety needs cannot be met but do not have the insight to recognise this

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<sup>6</sup> [https://www.sabrichmondandwandsworth.org.uk/media/1355/multi\\_agency\\_risk\\_assessment\\_framework.pdf](https://www.sabrichmondandwandsworth.org.uk/media/1355/multi_agency_risk_assessment_framework.pdf)

## Transition

It is recognised that there are many points of transition in a child or adolescent's life, when they move schools or move homes or come into care or return home to family after being in care, start employment or significant relationships.

Also, [Current Transition Pathways](#) for those moving from Children's to Adult's Service are already in place. This protocol is focused on the transition into adulthood, when a young person is turning 18 years old and presents an ongoing risk of exploitation or harm, particularly where they do not meet the criteria for existing pathways.

## Transitional Safeguarding

Is the term used to describe the support and flexibility that is required for young people who are entering adulthood and are still vulnerable to exploitation, risk and harm.

## Support

Vulnerable young adults may transition into adulthood with the oversight of MACE to ensure there are pathways of support but they may then present with needs in regard to exploitation or violence after they have turned 18 years old. This protocol seeks to identify pathways of support for those aged 18 to 25 years who need support again, perhaps after a significant life event or incident, so as to be supported successfully into adulthood.

*What makes you vulnerable, makes you beautiful*  
**Brene Brown**

## Why do we need this protocol?

This protocol is aimed at addressing the gap in support, oversight and transition planning for young people who experience sexual or criminal exploitation or harm and do not have access to adult services through current transition pathways into Social Care, Health or Education.

The Research in Practice [Mind the Gap](#) paper highlights that “learning from safeguarding adults reviews (SARs) demonstrates the ways in which poor transitional planning can contribute to young adults ‘slipping through the net’, sometimes with tragic consequences”.

The subsequent [Transitional Safeguarding guidance](#) outlines the importance of recognising the ongoing vulnerability and safeguarding needs of young adults who have been exploited. Chief social workers have highlighted that ‘[exploitation does not stop at 18](#)’.

Hanson and Holmes (2014) in their briefing, [That Difficult Age](#), also refer to research and longitudinal studies that indicate that adolescent maltreatment has a more global negative impact into adulthood than maltreatment limited to childhood experiences. Furthermore, only adolescent maltreatment (compared to childhood-limited maltreatment) was “significantly associated with early adulthood offending, problem alcohol use and risky sex ... and on early adulthood suicidal thinking and problem drug use” (p11).

The [Pan-London Child Exploitation Protocol](#) has a clear focus on children under the age of 18 years but states that each Multi Agency Child Exploitation (MACE) Panel must: ensure it has the capacity and ability to safeguard and signpost children transitioning into adulthood between ages 18 to 25. Exploitation can affect vulnerable adults equally and it is important there is an effective and robust referral process. There must be a strong relationship between CSC and Adult Social Care so that those who provide the appropriate services and support for these young adults are given the right information and opportunities to implement suitable safeguarding plans.

The [London Multi-agency Adult Safeguarding policy and procedure](#) states that Section 2 of the Care Act **requires Local Authorities to ensure the provision of preventative services** (services that help prevent or delay the development of care and support needs or reduce care and support needs). Stating that organisations should take a broad community approach to establishing safeguarding arrangements, working together on prevention strategies. There is a specific section on Transition (p24), stating that there should be robust joint working arrangements between children’s and adults’ services for young people who meet the criteria for adult safeguarding and these need to be identified and arranged without delay.



The following has been taken directly from the [Mind the Gap](#) briefing as it clearly summarises the reasons for this protocol.

The Mind the Gap briefing argues for a more fluid and transitional safeguarding approach for the following reasons.

- Adolescents may experience a range of risks and harms, and so may require a distinctive safeguarding response.
- Harm, and its effects, do not stop at the age of 18.
- Many of the environmental and structural factors that increase a child's vulnerability persist into adulthood, resulting in unmet needs and costly later interventions.
- The children's and adults' safeguarding systems are arguably conceptually and procedurally different, and governed by different statutory frameworks, which can make the transition to adulthood harder for young people facing ongoing risk.
- Young people entering adulthood can experience a 'cliff-edge' in terms of support.

Therefore, this protocol aims to identify pathways of support for young people following recent oversight from the MACE (or similar) panel and where they continue to present or return to services with significant concerns of exploitation or harm and to ensure we are providing the services they need to maintain their independence, wellbeing and choice.

*Light precedes every transition. Whether at the end of a tunnel, through a crack in the door or the flash of an idea, it is always there, heralding a new beginning –*  
**Theresa Tsalaky**

# Wellbeing and Prevention duties

## **Aims of adult safeguarding, which support this protocol**

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Stop abuse or neglect wherever possible
- Safeguard adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult
- Address what has caused the abuse or neglect

## **Duty to identify children in need of transition early**

Existing pathways often recommend identification for adult services at age 14 years. This includes **all** children in need under the Children Act 1989, but also:

- young people with degenerative conditions
- young people (for example with autism) whose needs have been largely met by their educational institution, but who once they leave, will require their needs to be met in some other way
- young people detained in the youth justice system who will move to the adult custodial estate
- young carers whose parents have needs below the local authority's eligibility threshold but may nevertheless require advice or support to fulfil their potential, for example a child with deaf parents who is undertaking communication support
- young people and young carers receiving Children and Adolescent Mental Health Services (CAMHS) may also require care and support as adults even if they did not receive children's services from the local authority

Where someone is over 18 but still receiving children's services and a safeguarding issue is raised, the matter should be dealt with as a matter of course by the adult safeguarding team, involving children's safeguarding and relevant partners.

Part 1 of the Care Act 2014 outlines a duty to promote the wellbeing of individuals when carrying out its functions of the act.

Wellbeing relates to all of the following aspects:

- personal dignity (including treatment of the individual with respect)
- physical and mental health and emotional wellbeing
- protection from abuse and neglect
- control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided;
- participation in work, education, training or recreation
- social and economic wellbeing
- domestic, family and personal relationships
- suitability of living accommodation
- the individual's contribution to society

Whenever a local authority carries out any care and support functions relating to an individual, it must act to promote wellbeing – and it should consider all of the aspects above in looking at how to meet a person's needs and support them to achieve their desired outcomes.

However, in individual cases, it is likely that some aspects of wellbeing will be more relevant to the person than others. For example, for some people the ability to engage in work or education will be a more important outcome than for others, and in these cases 'promoting their wellbeing' effectively may mean taking particular consideration of this aspect.

'Local authorities should adopt a flexible approach that allows for a focus on which aspects of wellbeing matter most to the individual concerned.

The duty to promote wellbeing applies equally to those who, for a variety of reasons, may be difficult to engage.'



## Principles of adult safeguarding

In addition to the duty to promote wellbeing, there are a number of key principles and standards which local authorities must have regard to.

The most salient have additional information provided:

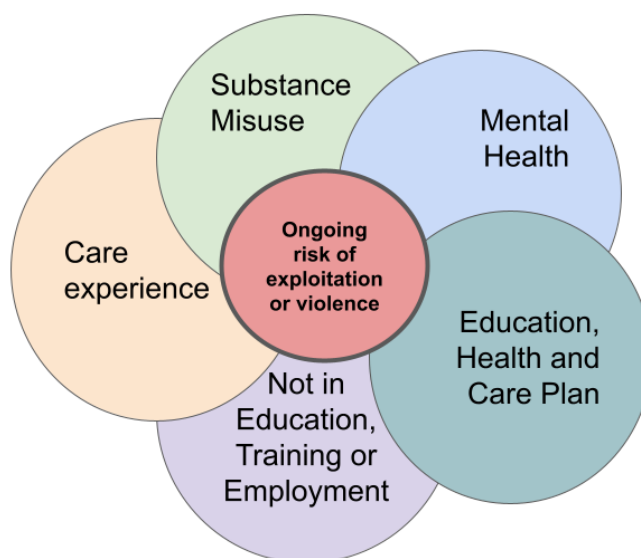
- **The importance of beginning with the assumption that the individual is best-placed to judge the individual's wellbeing.**
- **The individual's views, wishes, feelings and beliefs.**
- **The importance of preventing or delaying the development of needs for care and support and the importance of reducing needs that already exist.**

At every interaction with a person, a local authority should consider whether or how the person's needs could be reduced or other needs could be delayed from arising. Effective interventions at the right time can stop needs from escalating, and help people maintain their independence for longer (as per chapter 2 on prevention).

- **The need to ensure that decisions are made having regard to all the individual's circumstances** (and are not based only on their age or appearance, any condition they have, or any aspect of their behaviour which might lead others to make unjustified assumptions about their wellbeing). Local authorities should not make judgments based on preconceptions about the person's circumstances, but should in every case work to understand their individual needs and goals.
- **The importance of the individual participating as fully as possible.**
- **The importance of achieving a balance between the individual's wellbeing and that of any friends or relatives who are involved in caring for the individual.**
- **The need to protect people from abuse and neglect.** In any activity which a local authority undertakes, it should consider how to ensure that the person is and remains protected from abuse or neglect. This is not confined only to safeguarding issues, but should be a general principle applied in every case including with those who self-neglect.
- **The need to ensure that any restriction on the individual's rights or freedom of action that is involved in the exercise of the function is kept to the minimum necessary.**

## Who is this protocol for?

This protocol is aimed at young adults who present with an ongoing risk of exploitation or violence as per the MACE Terms of Reference. They may present with other vulnerabilities as outlined below and it is recognised that there will be young people who present with these vulnerabilities but do not have an ongoing risk of exploitation or violence, which would be addressed through existing pathways to services, which are outlined in the following section.



### Case Study 1

This young person is about to turn 18 years old. They have difficulties with speech and language that has impacted on their education pathway. Although they have an education, health and care plan (EHCP), they have been out of full time education since Year 9. Their friends have been involved with the Youth Justice System and some have been significantly exploited into organised crime. As a result they were identified for MARVE.

Through direct work by the social worker and intervention services, the young person has recently disclosed involvement with organised groups, but a lack of understanding of how to remove themselves. At 18 years they will no longer be allocated to adolescent safeguarding and soon will be too old for a specialist provision where they attend a music group, which was the first thing they had consistently engaged with and committed to since being out of education.



## Case Study 2

This young person will be 18 years old in six months and is assessed as being at significant risk of sexual exploitation. They and their parents are refusing voluntary accommodation as part of the safety plan. The young person is thought to be regularly missing and being taken to different locations for the purpose of organised sexual abuse, but is not being reported missing and the police have been unable to locate them in these locations.

Due to their age, there are no legal measures available to enable care or protection, other than professionals maintaining their ongoing involvement and developing an intensive relationship through a local specialist service. By age 18 years, this young person would not have a social worker or oversight from MARVE or child protection processes. The specialist service that could be available after their 18th birthday relies on voluntary engagement and they would not have access to partnership support or oversight while working with them.

*Change is situational. Transition, on the other hand, is psychological. It is not those events, but rather the inner reorientation or self-redefinition that you have to go through in order to incorporate any of those changes into your life.*

*– William Bridges*

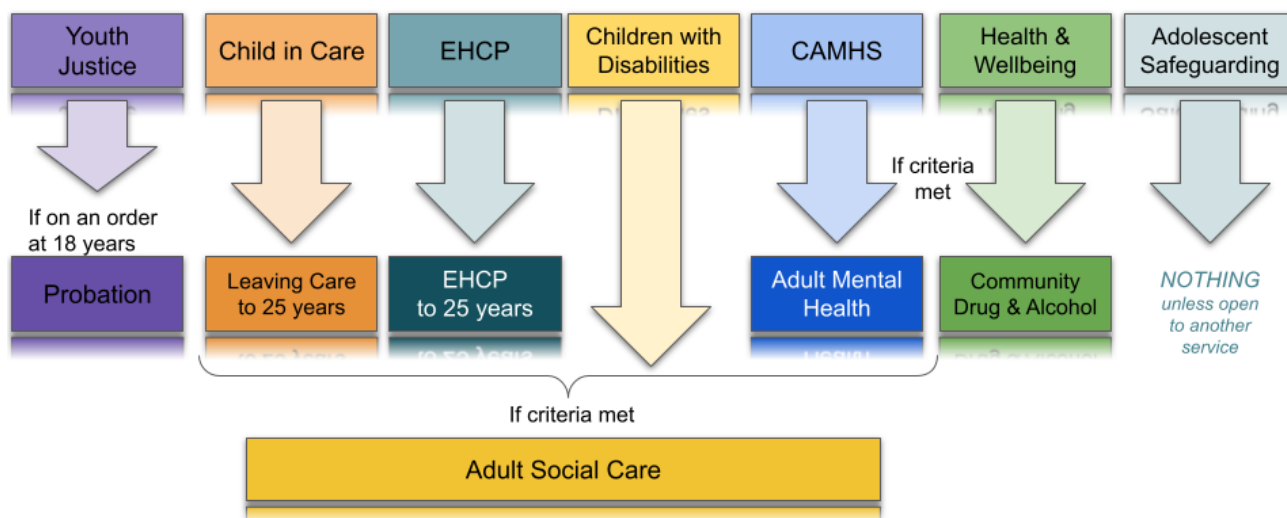
## Existing pathways into adult support

Young people open to children's services and turning 18 years old may have a range of transitions into adult services already, as per [existing pathways](#) (an Achieving for Children (AfC) and Richmond Council document, but relevant to all boroughs). However, these are criteria based and it is recognised that adult services have higher thresholds compared to children's services and therefore several young people are unable to access specialist adult services as they transition from children's services. Furthermore, even if a young person was to receive ongoing support from those services, they may not have the provision or expertise for those at risk of exploitation or serious violence.

As outlined in the [Mind the Gap briefing](#), "young people can feel ill-equipped for the change in practice culture they experience if they remain in contact with services as they become an adult". This can feel like a cliff edge.



## Adult Social Care



The criteria for Adult Social Care is dependent on the Care Act. The eligibility is as follows:

- the adult's needs arise from or are related to a **physical or mental impairment or illness**
- as a result of the adult's needs, the adult is unable to achieve two or more of the specified outcomes (which are described in the requirements)
- as a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing

An adult's needs are only eligible where they meet **all three** of these conditions. Young people transitioning from the Children with Disabilities team will often meet these criteria. Those with an EHCP, mental health diagnosis and/or care experience also. However we still have a prevention duty as a local authority.

## Probation Service

The service works with all adults who have a court order or custodial sentence, they manage the conditions of the court order and manage the risk presented by the individual.

Information about the experience of a young adult in the criminal justice system, including prison, can be found here: [www.doingtime.co.uk](http://www.doingtime.co.uk)

## Adult Drug and Alcohol Service

- Richmond's service is delivered by the [Richmond Community Drug and Alcohol Service](#)
- Kingston's service is delivered by the [Kingston Wellbeing Service](#)

## Leaving Care Service

This is delivered by Achieving for Children and provides a continuum of support from when the child entered care. Each young person is allocated a personal adviser whose role is to ensure the young person has a pathway plan that outlines the areas of support for their independent living, education and health needs. Every local authority Leaving Care Service must outline [their pledge](#) to care-experienced adults. The Leaving Care Service commissions Crying Sons to deliver specialist interventions for young people leaving custody and/or at risk of serious youth violence.

## Education, health and care plan (EHCP)

The support for young adults will be dependent on the needs identified in the EHCP, but can include a named education provider, support for health needs and additional support for the young person's care needs. The plan is coordinated by the SEND team, but delivered by Education, Health and Care services. Every local authority must provide a detailed [Local Offer](#) for those with special education needs.

*Nobody can go back and start a new beginning, but anyone can start today and make a new ending.*

**– Maria Robinson**

## Existing services for vulnerable or high risk adolescents

Many of these services are outlined in the Youth Safety Strategy<sup>7</sup>

### Project X

Project X is located in the Targeted Youth Support Service. The focus of the team is prevention and early intervention and they also offer supplementary support alongside specialist services for young people most vulnerable to exploitation or harm. This includes those at risk of criminal exploitation and who have been victims of serious youth violence and robberies.

The team works with statutory partners, youth services and schools to divert children from the criminal justice system. Project X has a number of strands to their work.

- Engage X - will see children at the point of arrest and within police custody, seeking to engage children at 'teachable, reachable moments' and before offending behaviour becomes entrenched
- Exercise and Fitness to improve mental health and anxiety (gym sessions, boxing and martial arts, team sports)
- Xpress Yourself through music (lyric writing and interpretation, vocal recording and music videos)
- Gourmet X - online and face to face cooking sessions
- Xcast - podcast series to discuss current issues and the impact on children and their community
- Xperience shared, to deter and educate other children
- Xtend a hand with restorative work and direct work with victims
- X marks the spot - detached work in the community
- Family Dynamix - working with parents and bringing families together
- Xplained - a new Tier 2 Substance Misuse Service

### Phoenix Project - child sexual exploitation

Based within the Health and Wellbeing team, in the Targeted Youth Service, The Phoenix Project was developed by AfC in April 2016 in response to Kingston's and Richmond's LSCB strategy towards a coordinated approach in addressing child sexual exploitation. The project's aim is to provide direct intervention for children at risk of child sexual exploitation or who are being sexually exploited and to provide a personalised one-to-one support package that responds to the needs identified. Children need to be allocated to a social worker and be identified as medium to high risk as per the MACE Terms of Reference.

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<sup>7</sup><https://kr.afcinfo.org.uk/pages/young-people/information-and-advice/about-the-youth-service/youth-safety-strategy-2021-25>



## Existing Services for vulnerable young adults

### Crying Sons

Crying Sons offers targeted dynamic support around the addiction of gang activity and local or county line drug dealing, peer-on-peer grooming and sexual exploitation. The service can provide targeted work to young people leaving custody and works closely with the leaving care team and can work up to 25 years (if open to the leaving care service).

### Rescue and Response

Rescue and Response is a pan-London **county lines** project created to support children up to the age of 25 who are on the cusp, are currently or have been criminally exploited in the context of county lines. The project has three main providers (St Giles, Abianda and Safer London). The provision of support includes one-to-one support for children exploited from London, help to manage risk and safeguarding, support to move away from criminal exploitation, family support, help to build network analysis through pan-London intelligence gathering and an out of hour's phone number for professionals operated by St Giles Trust to support with rescuing children in the counties.

### Kingston's early intervention domestic violence worker

Refuge's Early Intervention Service supports young women aged 11 to 21, who are affected by, or at risk of, any form of gender-based violence. We provide specialist support to young women who have experienced emotional and physical abuse, rape, sexual violence, forced marriage, so-called 'honour'-based violence, human trafficking, modern slavery, female genital mutilation (FGM) and child sexual exploitation (CSE).

We believe that educating and empowering young women and girls is essential to challenging gender-based violence, and building a future where it is no longer tolerated or ignored. For more information, contact Refuge's early intervention worker on 07741 119912, or the Kingston Domestic Violence Hub on 020 8547 6046 or at [kingstondvhub@refuge.org.uk](mailto:kingstondvhub@refuge.org.uk).

### Criminal and substance misuse

Funding has been made available to local authorities to deliver services to vulnerable adults who are involved in the criminal justice system and present with substance misuse concerns or drug possession. The aim is to target the cycle of offending that can be escalated due to substance use or possession. Part of the project will include engagement with the Youth Justice Team to support transitions of vulnerable adults with these concerns.

## **Way2Work program**

Way2Work is Achieving for Children's apprenticeship provider. The overall mission of Way2Work is to provide the best quality apprenticeship training and skills for all learners and employers, by delivering a fulfilling experience that helps people to realise their full potential, achieve their career aspirations and for businesses to develop a skilled workforce. Way2Work recruits young people into apprenticeships in business administration, customer service, early years and teaching assistant roles. Young people can apply for Way2Work's apprenticeship from age 16+. Current vacancies are displayed on the Way2Work website <http://www.way2work.org.uk>.

## **Employability and engagement programmes for NEET young people**

Young people aged 16 to 24 who are not accessing employment, education or training (NEET) are able to access support to seek and prepare for employment and training through a re-engagement programme. These programmes are led by the Education Business Partnership Team. The offers vary depending on the individual's requirements and goals, but may include face-to-face workshops, work experience, one to one support to identify and apply for opportunities and access to online training. To refer a young person or for more information on the programmes available email [KREBP@achievingforchildren.org.uk](mailto:KREBP@achievingforchildren.org.uk).

## **Achieving for Children's Youth Service**

Achieving for Children's Youth Service in Kingston and Richmond can provide safe spaces and activities for young people up to age 25, which include music, fitness, art and support groups. The Youth Services delivers direct youth work which can be seen as informal and non-formal learning opportunities that supports wider learning, development and participation in society. This is underpinned by the five pillars of youth work: empowering, educative, participative, inclusive and expressive.

Effective youth work takes place in a wide range of settings: youth clubs and youth centres, uniformed and voluntary youth organisations, youth counselling units, outreach and detached projects, youth cafes, youth arts groups, youth action and participation groups, drug and alcohol projects – wherever young people are.

Achieving for Children offers universal and targeted support with an open door policy for all young people. Target cohorts include LGBTQ+, young people with additional needs, girls groups.

## Existing protocols (Links are in the titles)

### **National Referral Mechanism**

This guidance outlines the process for referring an adult who has been identified as a potential victim of modern slavery. It includes the terminology and referral form and areas of support available to adults.

### **Richmond and Wandsworth Transitions Protocol**

Richmond and Wandsworth councils, in collaboration with Achieving for Children, Richmond and Wandsworth Adult Social Care and Public Health, have developed a transitions protocol for those transitioning from children's into adult's services where they have learning difficulties, disabilities, mental health issues, and additional needs. The protocol outlines the roles and responsibilities of all of the agencies involved in the transition in regard to education, social care, children in care, health and transport.

### **Richmond and Wandsworth Minding the Gap**

A Transitions Framework has been developed for those with mental health needs. It aims to clarify the roles of each agency involved in supporting young people with mental health needs to transition from Children to Adult Services Support in Richmond and Wandsworth.

### **Joint protocol for transition from Youth Offending Teams to the National Probation Service**

This outlines the respective operational procedures and responsibilities for Youth Offending Teams (YOT) and the National Probation Service (NPS) in England, to support effective management of case transfer of supervision from the YOT to adult probation services.

### **Probation Service Management of Young Adults**

This outlines the additional considerations to be taken by Probation for those aged 18 - 25 years, to ensure maturity and vulnerability is taken into account and their needs are met.

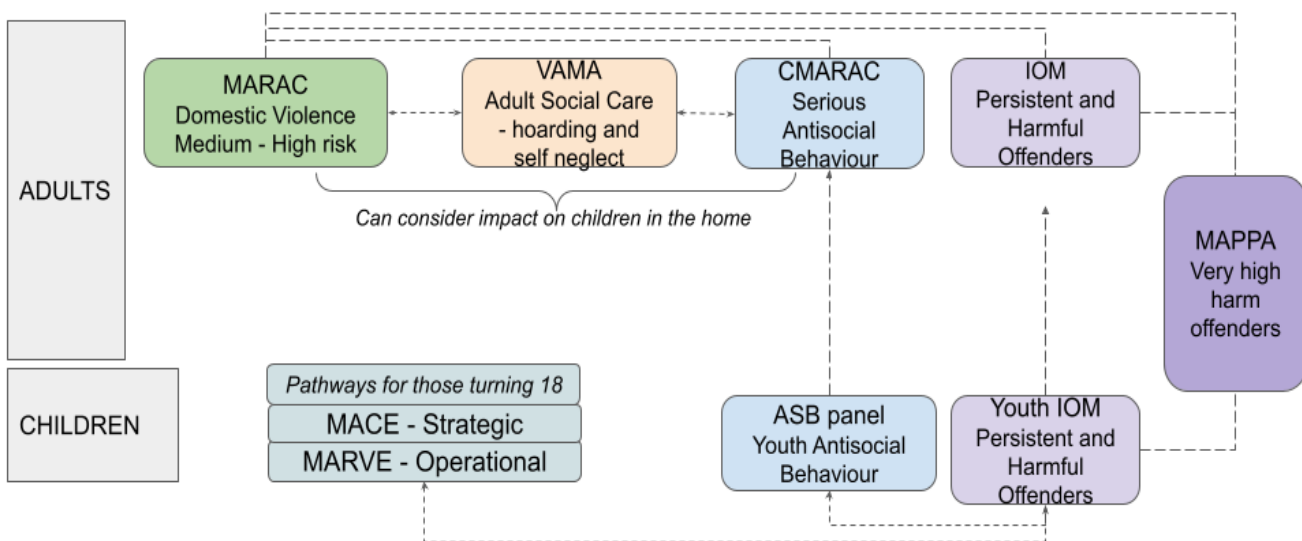
### **London Associate Directors of Adult Safeguarding Policy**

This group has developed a policy and procedures document that outlines the best practice and principles to better safeguard adults at risk of abuse throughout London.

*How wonderful it is that nobody need wait a single moment before starting to improve the world*

*Anne Frank*

## Existing panels (overseeing vulnerable and high risk adolescents and adults)



The panels outlined above cover the areas of exploitation, violence, abuse, adult social care and public protection. Additional panels oversee the needs of children and young people, including the education panels.

### Multi-agency Child Exploitation (MACE) Panel

Oversees children at risk of sexual or criminal exploitation, serious youth violence or gangs and harmful sexual behaviour. The MACE oversees the themes and strategic problem solving for themes that arise from the operational Pre-MACE (which will continue as the current MARVE panel). See the [MACE Terms of Reference](#) on the KRSCP website.

### Youth Integrated Offender Management and Integrated Offender Management Panels (YIOM and IOM)

The IOM panel has the engagement of all relevant partners and provides a platform for discussions and assignment of actions to all partners, designed to reduce re-offending. Effective IOM panel work relies on the engagement and meaningful contributions from all these partner agencies, especially for higher priority cases of prolific offenders. [Government guidance on the IOM](#).

### Multi-agency Risk Assessment Conference (MARAC) Panel (Kingston and Richmond)

The MARAC is a monthly risk management meeting where professionals share information on high risk cases of domestic violence and abuse and put in place a risk management plan.

[Richmond MARAC operating protocol](#)

[Kingston's MARAC process and referral form](#)

## Community MARAC Panel (Kingston and Richmond)

Both Kingston and Richmond have a community MARAC panel that is a monthly multi-agency meeting where information is shared, and action plans developed to manage and resolve complex, high risk cases of anti-social behaviour (ASB).

The primary focus of the community MARAC is to safeguard victims and witnesses and prevent further victimisation. Relevant information is shared about victims, witnesses and those causing risk or harm.

## Vulnerable Adults Multi-agency (VAMA) Panel (Kingston and Richmond)

Oversees adults at risk of hoarding, fire risk or neglect. See the Richmond [VAMA protocol](#) and [KVAMA referral form](#).



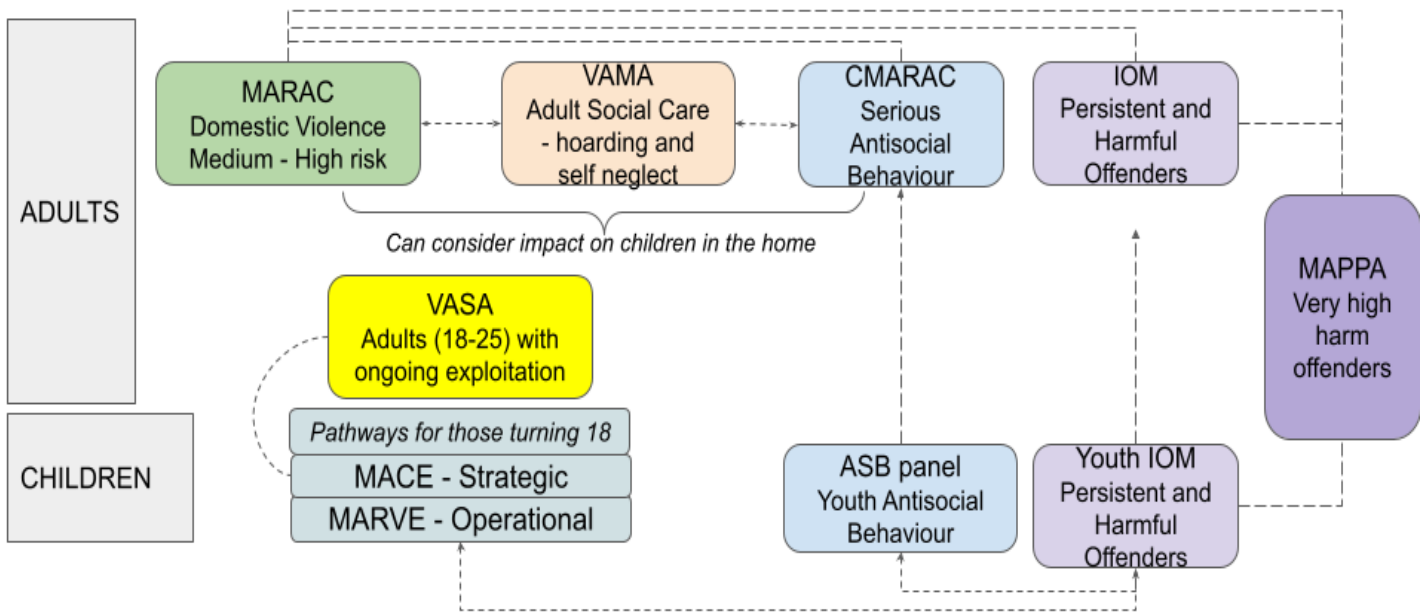
*Never tell a young person that anything cannot be done*  
**GM Trevelyan**



# Proposed panel to bridge the gap

## Vulnerable Adolescents Supported into Adulthood (VASA) Panel

While all existing panels provide oversight of young adults that present with risks or vulnerabilities relevant to this protocol, none of them provide the oversight necessary to ensure there is a coordinated response and services available to adolescents transitioning into adulthood or those aged 18 - 25 years with a number of complex needs in regard to exploitation or harm.



While the MACE Protocol has a requirement of the partnership to ensure there are clear pathways available to vulnerable 18 - 25 year olds the administration of the MACE, which is held in Achieving for Children’s Social Care Service, is unable to receive referrals or record data on adults not open to the Leaving Care Team.

Therefore it has been agreed by the task and finish group to develop an independent panel that will sit either before or after the MACE, thereby using much of the same membership. The administration will be supported by community safety who hold a remit in regard to all ages and in regard to violence and exploitation.

The panel will be known as the (Vulnerable Adolescents Supported into Adulthood Panel (VASA Panel) and the Terms of Reference are available in [Appendix B](#)

## Partnership commitment - services to bridge the gap

The following services will provide additional avenues of support to vulnerable and high risk young people beyond 18 years.

- **Project X:** will be able to offer group work to older young people, particularly those who are identified as Young XPerts and vulnerable adults who can be engaged in detached or group work to divert them from ongoing exploitation.
- **Phoenix Project:** where the young person was open to MARVE and there is ongoing risk of sexual exploitation, the child sexual exploitation worker can continue to work with the young person.
- **Youth Service targeted work:** the Youth Service team led by the Heatham House lead youth worker will provide a safe space for young people to be referred to. Hosted on site at Heatham House in the format of a closed youth club session, it will deliver themes identified by young people, and can include career advice support alongside, sexual health, risky behaviour, life skills. Days and times to be confirmed.
- **Kingston's early intervention domestic violence worker:** works with young adult victims of domestic violence up to 21 years and this will be extended to 25 years.
- **Transitions worker:** funding has been secured by Kingston's and Richmond's Community Safety leads for a dedicated transitions worker that can engage with the young people identified as requiring ongoing support and coordination of support.
- **Crying Sons:** Community Safety has also secured funding to extend the specialist services from Crying Sons. The aim is to have a partnership match funding agreement to enable a dedicated worker for this extension.
- **CCG - Health support for care experienced young adults:** this is currently in the development and business case phase to bridge the gap of unmet need.

### Services that will continue to provide post 18 support:

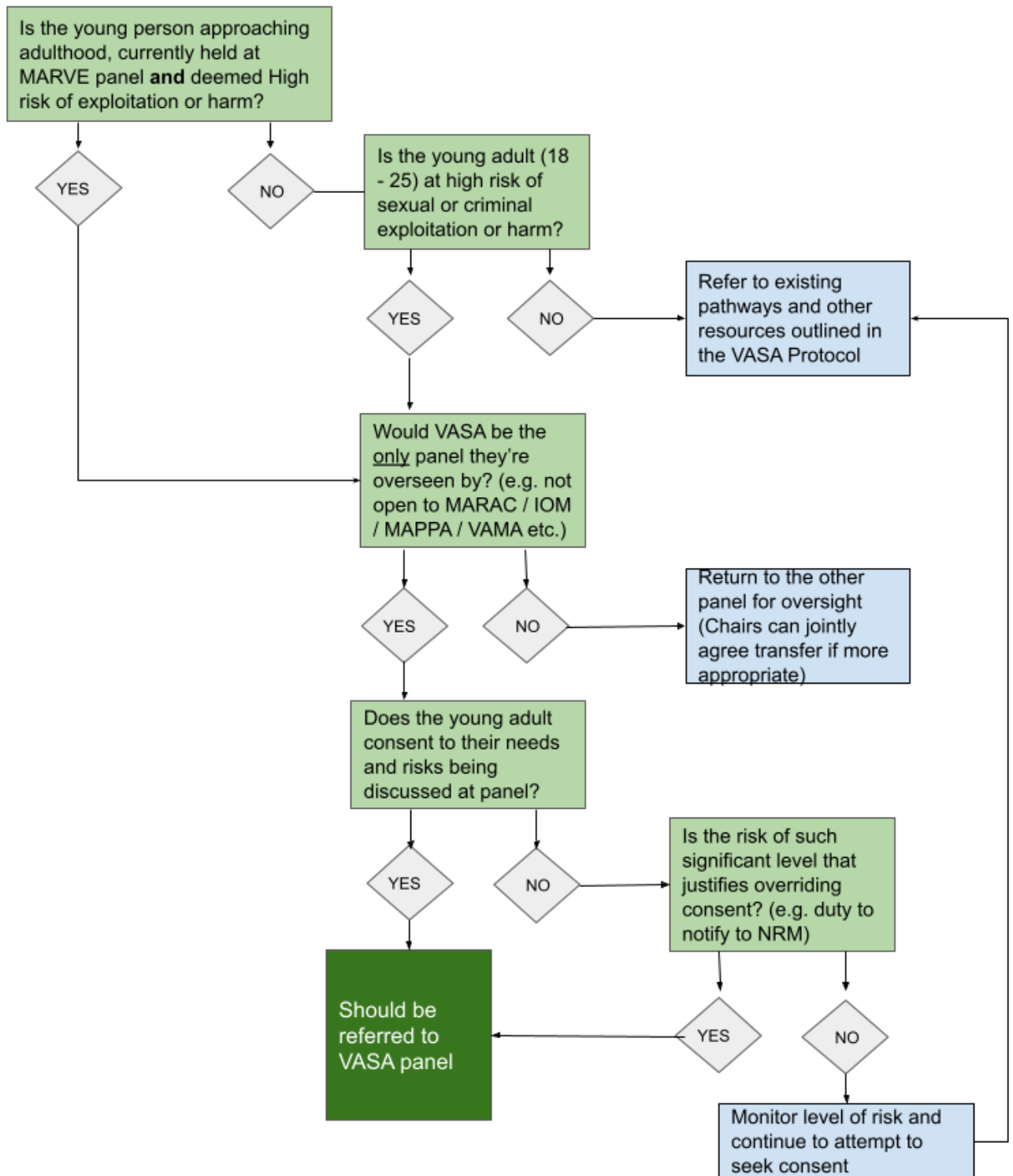
- Rescue and Response remains available across London for young people at risk of criminal exploitation or found in county lines locations.
- Way2Work apprenticeships and post-16 NEET support in Achieving for Children.
- Substance misuse support for those in the criminal justice system.

While the above services are able to stretch (or continue) to support vulnerable adolescents into adulthood, the level of need for this group will likely become increasingly apparent as the panel hears from referrals and understands trends. The governance of the protocol and panel will provide an avenue for reviewing the demand, capacity and impact.

*Goodness is the only investment that never fails*

*Henry David Thoreau*

# Appendix A - referral flowchart for VASA panel



# Appendix B - VASA panel terms of reference

Kingston and Richmond vulnerable adolescents supported into Adulthood Panel (VASA Panel) Terms of Reference (TOR)

## Introduction

The VASA panel is a partnership approach between organisations in the Kingston and Richmond boroughs to consider cases of young adults who remain at high risk of contextual harm despite previous intervention efforts, at the point of transition into adulthood or up to 25 years.

### 1. Purpose of the panel

To provide advice, guidance and signposting for eligible young people

- High risk, complex young adults that have been heard at the Multi-agency Risk Vulnerability and Exploitation (MARVE) panel and have transitioned to adulthood and there are ongoing risks present in regard to violence or exploitation.
  - Adults between 18 to 25 where there is significant risk of exploitation and harm identified
  - Who are not heard on any other panel (for example, MARAC, CMARAC, VAMA, MAPPA, IOM) and
    - consent to the referral for the panel
    - present with significant risk that necessitates the need to share information and seek additional support without consent (such as duty to refer to NRM identified)
- [See Appendix A referral flowchart](#)

To review the current safety plan in place and advise on any additional options from the partnership to support this.

To ensure the referrer is put in contact with the correct agencies.

For each organisation to provide advice where appropriate and to take responsibility on decision making tasks associated with their particular role.

To sign post to additional resources committed by the partnership as part of the VASA protocol.

To review the demand for these services from this cohort to inform commissioning protocols, and report on themes and feedback to the adults and children's partnerships via appropriate forums.

## 2. Objectives

To promote independence, well-being, health and dignity of adults at risk.

To prevent abuse and exploitation by robust multi-agency intervention.

To bring the powers to bear of all relevant partners, sometimes in circumstances where a response may not normally be triggered.

To manage, reduce or remove risk by sharing responsibility and maximising a co-ordinated multi agency approach.

To adhere to the following safeguarding principles adopted from the Kingston and Richmond Adult Safeguarding Boards.

- **Empowerment:** Adults are encouraged to make their own decisions and are provided with support and information.
- **Protection:** Adults are offered ways to protect themselves, and there is a coordinated response to adult safeguarding.
- **Prevention:** Strategies are developed to prevent abuse and neglect that promotes resilience and self-determination.
- **Proportionate:** A proportionate and least intrusive response is made, which is balanced with the level of risk.
- **Partnerships:** Local solutions through services working together within their communities.
- **Accountability:** Accountability and transparency in delivering a safeguarding response.

## 3. Membership

Agency	Members job role
Police	Public Protection (co-chair) Neighbourhoods
Community Safety Partnership	Kingston Head of Community Safety (co-chair) Richmond Head of Community Safety
Achieving for Children - Strategic Lead for the Youth Justice Service and Adolescent Safeguarding	Associate Director for Early Help
Kingston Council Adult Social Care department	Corporate Head of Service - Safeguarding Corporate Head of Service - Mental Health



Richmond Council Adult Social Care Department	Corporate Head of Service - Safeguarding Corporate Head of Service - Mental Health
Contextual Safeguarding Lead / chair of MARVE	Achieving for Children, Contextual Safeguarding Lead
Leaving Care Services	Achieving for Children, Head of Leaving Care
Targeted Youth Support (post 18)	Achieving for Children, Head of TYS
Community Health	Your HealthCare - Safeguarding Lead
Housing	Corporate Head of Service - Housing and Community, Kingston and Richmond
South West London and St Georges Commissioning Group	Lead for vulnerable adults
Mental Health Trust	Corporate Head of Service
Department of Work and Pensions	Transitions lead - tbc
Way2Work	Assistant Manager - Education services
Delivery providers	Project X manager Crying Sons lead Kingston Early Intervention Worker Community Safety Transitions worker Youth Service transitions lead

If a senior representative is unable to attend they must send an appropriate replacement who is able to fully contribute to the discussions had.

The following agencies and professionals may be invited to attend the panel, if they are involved with a particular young person and can provide contributions to the work.

- Voluntary and community sector agencies
- Probation services
- SW London CCG
- Adult education
- Leaving care placement providers

## 4. Member responsibilities

All panel members are responsible for:

- attending each meeting or ensuring that a well-briefed deputy is in attendance
- bringing to the panel any information, involvement, actions or case work carried out with an adult, including relevant information from an allocated professional working directly with the person referred (if applicable)
- committing their agency to actions and arranging for these to be carried through post-panel
- referring cases to the panel and making colleagues in their organisation aware of the panel referral process
- oversee completion of agreed actions prior to the next meeting

## 5. Referral process

For criteria please see above or Appendix A [flowchart](#)

Any partner can make a referral to the panel where the situation has already been considered within partner agencies risk assessment processes and there remains a significant risk.

All referrals should be made on the referral form and emailed to: **#ecins page**

Where possible, referrals will need to be received at least ten working days before the panel sits. Deadline for referrals is five working days prior to the day of the panel meeting to allow screening of the referral and accept or decline the referral.

All referrals will be reviewed by the community safety transitions worker to ensure it is appropriate for the panel and not already heard at another panel and that there is sufficient information on the referral form to enable partners to adequately prepare for the meeting.

## 6. Meeting form

The panel will consider any referral made on the prescribed referral form. The referring person or agency will be invited to attend the meeting to present their referral. The panel will confirm sign posting options or whether the matter needs to be held at a different panel

## 7. Meeting administration and frequency

The panel will be chaired by the police and Head of Community Safety (Kingston) or appropriate delegate.

The MACE administrator will be responsible for arranging meeting bookings and circulation of minutes and agendas.

The panel will meet regularly on a monthly basis or at least eight times a year, aligned with MACE panel dates and will follow after that meeting. With the agreement of the chair, it will be possible to convene special meetings for considering an urgent case to receive support from the delivery partners.

## 8. Governance

The Panel will be accountable to the Kington Community Safety Partnership and Richmond Community Safety Partnership

The chairperson is responsible for preparing these reports.

The Adult Safeguarding Boards in each borough and Kingston and Richmond Safeguarding Children's Partnership will be cited on the reports.

Auditing arrangements will take place annually via learning review sessions with panel members. Feedback from this will be shared to the relevant boards.

## 9. Managing disputes

In case of disputes about provision of services or eligibility, in the first instance, each agency will escalate to their senior leaders in a timely manner, depending on the needs of the young person. If resolution is not reached in a satisfactory manner, notification should be made to the chairs of the panel who can outline gaps in service within their reports to the governance boards.

## 10. Information sharing

The panel will follow the guidance of the London Multi-agency Safeguarding Data Sharing Agreement for Safeguarding and Promoting the Welfare of Children<sup>8</sup>.

The panel will also follow the principles of the SCIE safeguarding adults practice guidance<sup>9</sup>.

Information sharing and data protection is not a barrier to ensuring cases are discussed in this environment.

When a case is referred to the panel, it is bound by the referring agencies information sharing and data protection policy.

Referral and discussion at this panel is purely on a need to know basis and is kept confidential within the remit of this panel.

Referral management and information is kept securely within councils and eCINS information sharing policy.

Transfer of cases between VASA, CMARAC and VAMA will be facilitated via panel chairs.

## 11. Review

These terms of reference were agreed April 2022, to be reviewed annually.

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<sup>8</sup>[https://media.inzu.net/f9e1fab6a6c10d044839fb1bee0a4704/mysite/articles/982/For\\_Info\\_Final\\_London\\_MAS\\_DSA\\_Jan21.pdf](https://media.inzu.net/f9e1fab6a6c10d044839fb1bee0a4704/mysite/articles/982/For_Info_Final_London_MAS_DSA_Jan21.pdf)

<sup>9</sup> <https://www.scie.org.uk/safeguarding/adults/practice/sharing-information>

## Appendix C - Tiers of support for 18 - 25 year olds

This diagram indicates the level of risk or vulnerability that should be considered before referring into the different pathways of support.

The additional services are not to bypass any of the existing pathways for Social Care, Health and Education. Please ensure that young people who need to transition to adult services are identified early and have good planning and links as soon as required.

This diagram is to show that the services for 18 - 25 year olds are in addition to existing pathways and Adult services can utilise these too.

If capacity becomes an issue this will be raised with the governance boards.

		Crying Sons - high violence / exploitation	VASA Transitions worker		
(K) Early Intervention Worker (DV)		Project X Young XPerts (CCE risk)	Rescue and Response (County Lines)	Criminal Substance Misuse project	
Youth Service Project		Way2Work		Employability & NEET	
Adult Social Care	Leaving Care	<a href="#">Existing pathways for Social Care, Health, Education</a>		Drug & Alcohol Services (Kingston) (Richmond)	Probation

## Appendix D - Resources for practitioners

### **National Referral Mechanism**

Victims may not be aware that they are being trafficked or exploited, and may have consented to elements of their exploitation, or accepted their situation. If you think that modern slavery has taken place, the case should be referred to the NRM so that the Single Competent Authority (SCA) can fully consider the case. You do not need to be certain that someone is a victim.

### **Recognising adult abuse exploitation and neglect**

A helpful summary of the flags to look out for in regard to various areas of vulnerability

### **Effective interventions with young people and vulnerable adults around debt bondage**

A common element of exploitation is to entrap those being exploited through debt - either perceived or actual. This brief blog by the National Working Group with advice from St Giles gives some helpful tips when someone you work with is bound by a debt.

### **Disruption Options for perpetrators of child and adult victims of exploitation**

Outlines criminal, civil and partnership disruption options

### **Transitional safeguarding - seven minute learning summary**

This comes from Norfolk Safeguarding Board and provides an outline of what transitional safeguarding is, why it's important and how it works in children's and adult's services. At the end of the summary are links to Mind the Gap and Bridging the Gap.

### **Bridging the Gap: transitional safeguarding and the role of social work with adults**

This guidance draws on evidence from research and knowledge from local areas in order to describe what transitional safeguarding is, why it is needed and how the contribution of adult social work is key to developing and embedding a more transitional approach to safeguarding young people into adulthood.

### **The difference between complex, contextual and transitional safeguarding**

A brief outline of each of these approaches and frameworks and how they align or differ.

### **Supporting the participation of children and young people experiencing extra vulnerabilities**

This toolkit is aimed at those who are developing services for young people with mental health needs but the principles and guidance are relevant to all services when considering the development of services.

## **The child exploitation disruption toolkit**

This is aimed at supporting and disrupting exploitation of children but has some helpful tools for young adults. It is important to recognise that support and diversion are just one part of an effective response to exploitation. Disrupting the sources of harm is key and supporting police colleagues in using a variety of disruption tools and legal orders may be essential.

## **The Innovate Project**

Offer videos and briefings about transitional safeguarding, which is a developing field that requires system change. It is the current focus of the work, but will likely develop tools for those working with adolescents 15 to 25 who continue to present with ongoing risk of exploitation or harm and therefore is a helpful place to revisit.

## **Wider support needs**

- The [Leaving Care Local Offer](#) has links that are helpful to all vulnerable young adults, including [opportunities](#) for young people to access arts and culture.
- The [SEND Local Offer](#) also has a range of support

## **Support for mental health (taken from Emotional Health Service link)**

- [Samaritans Mental Health line](#)
- [SAM self-help app for the mind](#) (free - with links to paid and free services)
- [What's Up mental health app](#) for depression, anxiety, anger, stress, etc (free)
- [Calm Harm manages self-harm](#)

## **Support into education training and employment**

- The [WayUp game](#) to consider future options
- [AfC's apprenticeships, employment and skills](#)
- [Way2Work](#)
- [JobCentre Plus](#)
- [National Careers Service](#)
- [Access to Work](#) if you have a disability or health condition
- [Care to Learn](#) - childcare for parents under 20 years who are learning

## **Support for setting up home**

- [Home Truths app](#)
- [Kingston Community Furniture](#)
- [Kingston Freecycle](#)
- [Richmond Furniture Scheme](#)
- [Richmond Freecycle](#)

## Appendix E - Care Act 2014 specifications of need

### Safeguarding eligibility

- The adult's needs arise from or are related to a **physical or mental impairment or illness**.
- As a result of the adult's needs the adult is unable to achieve two or more of the specified outcomes (which are described in the requirements below).
- As a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing.

An adult's needs are only eligible where they meet all **three** of these conditions.

The second condition that authorities must consider is whether the adult is 'unable' to achieve two or more of the outcomes set out in the regulations. Authorities must also be aware that the regulations provide that 'being unable' to achieve an outcome includes any of the following circumstances.

- **Where the adult is unable to achieve the outcome without help.** This would include where an adult would be unable to do so even when help is provided. It also includes where the adult may need prompting for example, some adults may be physically able to wash but need reminding of the importance of personal hygiene.
- **Where the adult is able to achieve the outcome without help, but doing so causes the adult significant pain, distress or anxiety.** For example, an older person with severe arthritis may be able to prepare a meal, but doing so will leave them in severe pain and unable to eat the meal.
- **Where the adult is able to achieve the outcome without help,** but doing so endangers or is likely to endanger the health or safety of the adult, or of others. For example, if the health or safety of another member of the family, including any child, could be endangered when an adult attempts to complete a task or an activity without relevant support.
- **Where the adult is able to achieve the outcome without help,** but takes significantly longer than would normally be expected. For example, an adult with a physical disability is able to dress themselves in the morning, but it takes them a long time to do this, leaves them exhausted and prevents them from achieving other outcomes

### The eligibility requirements

- **Managing and maintaining nutrition**  
Local authorities should consider whether the adult has access to food and drink to maintain nutrition, and that the adult is able to prepare and consume the food and drink.



- **Maintaining personal hygiene**  
Local authorities should, for example, consider the adult's ability to wash themselves and launder their clothes.
- **Managing toilet needs**  
Local authorities should consider the adult's ability to access and use a toilet and manage their toilet needs.
- **Being appropriately clothed**  
Local authorities should consider the adult's ability to dress themselves and to be appropriately dressed, for instance in relation to the weather to maintain their health.
- **Being able to make use of the home safely**  
Local authorities should consider the adult's ability to move around the home safely, which could for example include getting up steps, using kitchen facilities or accessing the bathroom. This should also include the immediate environment around the home such as access to the property, for example steps leading up to the home
- **Maintaining a habitable home environment**  
Local authorities should consider whether the condition of the adult's home is sufficiently clean and maintained to be safe. A habitable home is safe and has essential amenities. An adult may require support to sustain their occupancy of the home and to maintain amenities, such as water, electricity and gas.
- **Developing and maintaining family or other personal relationships**  
Local authorities should consider whether the adult is lonely or isolated, either because their needs prevent them from maintaining the personal relationships they have or because their needs prevent them from developing new relationships.
- **Accessing and engaging in work, training, education or volunteering**  
Local authorities should consider whether the adult has an opportunity to apply themselves and contribute to society through work, training, education or volunteering, subject to their own wishes in this regard. This includes the physical access to any facility and support with the participation in the relevant activity.
- **Making use of necessary facilities or services in the local community including public transport and recreational facilities or services**  
Local authorities should consider the adult's ability to get around in the community safely and consider their ability to use such facilities as public transport, shops or recreational facilities when considering the impact on their wellbeing. Local authorities do not have responsibility for the provision of NHS services such as patient transport, however they should consider needs for support when the adult is attending healthcare appointments.
- **Carrying out any caring responsibilities the adult has for a child**  
Local authorities should consider any parenting or other caring responsibilities the person has. The adult may for example be a step-parent with caring responsibilities for their spouse's children.