Aaleigha is a 17-year-and-11-month-old young person with complex needs, including significant learning disabilities, Attention Deficit Hyperactivity Disorder (ADHD), and intermittent mental health difficulties, including episodes of psychosis. In addition, she experiences enuresis, which can further impacts her daily living and care requirements.

Aaleigha has been supported by Children's Services since 2008. During this time, she attended a specialist educational setting while living at home with her mother. In 2020, her needs increased, and she transitioned into a specialised residential placement in Kent. In 2023, she moved to her current placement, where her support needs continue to be met. As Aaleigha approached adulthood, it became evident that she would require ongoing structured support to manage activities of daily living, access education or meaningful activity, and develop independence. As a result, a transition plan was developed to guide her move from Children's Services into Adult Social Care and to ensure continuity of care beyond the age of 18.

The transition process began when Aaleigha was 14 years old, allowing sufficient time for planning and preparation in line with good practice. A multi-agency approach was adopted, involving her children's social worker, an adult services social worker, placement staff, and relevant health professionals. The transition process commenced when Aaleigha reached the age of 16, whereby the adult social worker attended all meetings. Then, on reaching the age of 17, a comprehensive needs assessment was initiated to determine her eligibility for adult services and to identify the level and type of support she would require moving forward. As part of this process, Aaleigha was gradually introduced to adult services to promote familiarity and to reduce anxiety. This included meeting her social worker in advance to help build trust and develop a sense of continuity. Joint visits were arranged between practitioners from Children's Services and Adult Services to ensure consistency in care and to provide reassurance during the transition.

Despite this careful planning, several challenges arose throughout the transition period. There were delays in the involvement of adult health professionals, particularly in relation to mental health services, despite Aaleigha having been known to children's mental health services for a significant period. These delays impacted the timely finalisation of her adult support package, resulting in a degree of uncertainty for both

Aaleigha and her carers. The transition also led to increased anxiety for Aaleigha, particularly in relation to meeting new professionals and adjusting to a new social worker after having developed a strong and trusted relationship with her previous worker over a two-year period. Although these challenges were significant, regular communication between Children's Services and Adult Services ensured that there were no gaps in Aaleigha's support. The coordination between professionals helped maintain stability and continuity during what was a potentially unsettling time for her.

To further support this transition, a short overlap between Children's and Adult Services has been arranged. This overlap will hopefully allow for a smoother handover of responsibilities and ensured that Aaleigha continues to receive consistent support without disruption. The collaborative approach taken by professionals will hopefully help to mitigate risks and maintain a person-centred focus throughout the process, ensuring that Aaleigha's needs and wellbeing remained central.

This case highlights the importance of early and proactive transition planning for young people with complex needs. It demonstrates the value of effective multi-agency collaboration and clear communication between services in ensuring continuity of care. It also reinforces the importance of maintaining a person-centred approach, recognising the emotional impact that transitions can have, particularly for individuals who may find change challenging. Furthermore, the case illustrates that a gradual and well-supported transition, rather than a sudden transfer of services, can significantly improve outcomes and reduce anxiety. While delays in health service involvement presented challenges, the overall process reflects a coordinated and thoughtful approach to supporting Aaleigha as she moves into adulthood.