Transitional safeguarding: Transforming how adolescents and young adults are safeguarded

Abstract:

This paper argues for a transformation in the protection and safeguarding needs of young people during their transition between childhood and adulthood. In order to explore with local authorities how they would address some of these challenges, the authors facilitated four national workshops with principal social workers, senior and middle managers (n=88) from approximately one third of Local Authorities in England (n=52) from both Children and Adult social services. Participants discussed enablers and barriers to local and regional approaches to transitional safeguarding at practice, managerial, strategic and multi-agency levels. Findings from the workshops showed many examples of commitment to improvement and change, despite funding constraints and system barriers. No single local authority had a coherent and comprehensive approach to transitional safeguarding. Although some partnerships had started to lead innovation, it was still too early to demonstrate any effective impact throughout all systems, including whether outcomes for young people had improved. Participants also emphasised that young people should be involved as key stakeholders in developing appropriate responses. The system changes required to improve transitional safeguarding practice are complex and involve a re-configuration of the 'risk' vs 'rights' paradigms that permeate societal responses to the protection of young people.

Key words:

adult safeguarding, adolescent, children's safeguarding, emerging adulthood, transition, transitional safeguarding, young people

Introduction:

This paper presents the results of four national workshops that explored how participants could develop their approaches to transitional safeguarding work across Children's and Adult social services in England. Transitional safeguarding is a term used to describe, '*an approach to safeguarding adolescents and young adults fluidly across developmental stages which builds on the best available evidence, learns from both children's and adult safeguarding practice and which prepares young people for their adult lives'* (Holmes and Smale, 2018). Currently young people under 18 are subject to child protection processes defined by the Children Act 1989 in England, whilst young people in England over 18 receive a different safeguarding response, underpinned by the Care Act 2014. Neither child protection nor adult safeguarding are designed to meet the developmental needs of young people. This highlights the need for change.

In this paper we define 'young people', using the United Nations description of 'youth', as those aged from 15-24 (UN, 2020), recognising this is a cultural, social and organisational construct. The term 'adolescent' is used only when quoting the work of others, referring to a young person aged between 13-19. A young adult is aged 25+. In the UK there are legal definitions of childhood (0-17 years) and adulthood (18 years+).

We begin by presenting an overview of the literature that argues for the safeguarding of young people to be reconsidered in light of their developmental needs, alongside acknowledging specific harms and risks this group experience. We explore the literature on 'transitions' to illustrate a number of ongoing vulnerabilities for young people. We then highlight the particular groups of young people who may have transitional safeguarding needs. We present information gathered at four national workshops, using a sector-led improvement approach. This is the principal model used to drive improvement in Adult Social Care (Manthorpe et al., 2014; Local Government Association, 2012). Each Council is 'responsible for their own performance and improvement and for leading the delivery of improved outcomes for people in their area' (LGA 2012, p4). Participants identified key

strengths, weaknesses, opportunities and threats that they faced in relation to safeguarding young people. We discuss what system changes are needed to promote and support innovation in this area.

Literature review:

Safeguarding practices in Children's and Adult social services in England have different histories. Both have developed in accordance with different legislative, policy and conceptual frameworks. In addition, these interface with other policies and legislative frameworks that offer contradictory understandings of childhood/adulthood. For example, the Mental Capacity Act 2005 applies to young people from the age of 16, whereas policies of child sexual exploitation (CSE) and child criminal exploitation (CCE) assert that someone under 18 years cannot consent to their exploitation. The proposed Domestic Abuse Bill defines domestic abuse as occurring to anyone over 16 years old in a relationship.

Cooper and Whittaker (2014, p251) contend that, '*child protection policy and practice in Britain is an uneasy settlement between reactions to child deaths, the pendulum swings of family policy and government ideology, and obstinately ambivalent attitudes towards children and childhood in the wider society'*. Much of the practice promoted in children's safeguarding is described as risk averse (Munro, 2019). The current child protection system in England has developed in the main to protect young children from intra-familial abuse (Corby et al., 2012). Arguably, these interventions do not work for young people, who often face extra-familial harm (Gorin and Jobe, 2013; Firmin et al., 2019). The Department for Education acknowledged this gap in 2014 when they launched the adolescent strand of the Innovation Programme (Department for Education, 2014).

The current adult safeguarding system developed with a focus on protecting older people (Institute of Public Care, 2013). Scandals concerning abuse of adults in institutional settings have prompted a focus on quality of care and safeguarding issues (Norrie et al., 2014). Adult

safeguarding is concerned with people with care and support needs who are unable to protect themselves from abuse or neglect because of those care and support needs (Department of Health, 2020). The care and support criteria are particularly problematic because many young people do not have special educational needs or disabilities (SEND), or mental health difficulties diagnosed before they are 18. Young people affected by criminal exploitation may not have identifiable care and support needs; concerns about their 'behaviours' overshadows their possible needs, which further compounds their vulnerability. 'Making Safeguarding Personal' (MSP), '*is an approach to adult safeguarding practice that prioritises the needs and outcomes identified by the person being supported'* (Cooper et al., 2018) and is underpinned by a risk-enabling approach. This has complex implications where a young person is facing a high degree of coercion and control and may not be able to make informed choices about their safeguarding needs, but does not lack capacity in the formal sense (Holmes and Smale, 2018). In these circumstances, the High Court's inherent jurisdiction can be an important potential safeguard for adults.

Neither safeguarding system is specifically designed with developmental needs of young peoplein mind. Existing approaches do not reflect emerging evidence that adolescence continues after the age of 18 (Sawyer et al., 2018). There is debate about the terminology used to define adolescence and adulthood and the associated age ranges (House of Commons Justice Committee, 2016). It is suggested that this period between 18 and 24 years should be considered a separate life phase for the young person (Rosenfeld and Nicodemus, 2003).

A number of studies examining brain development and its effects on behaviour show some elements of brain growth have a continued effect on regulation, social relationships and executive functioning well into young adulthood i.e. early 20s (Sawyer et al, 2018). However, reductive interpretation of these studies to define capabilities of adolescents should be avoided (Moshman, 1999). Holmes and Smale (2018) highlight that adolescent behaviour and harmful experiences are often wrongly viewed by practitioners as 'lifestyle choices'; this

is underpinned by the idea that young people freely choose to engage in activities viewed as 'risky' and 'harmful'. Often in these circumstances, services treat adolescents as having the same agency as adults (Beckett, Holmes and Walker, 2017). However, young people have poorer outcomes than younger adolescents or older adults when it comes to risk taking activities and the availability of care and support services (Neinstein and Irwin, 2013). Many parts of the wider system (SEND, care-leavers, young carers) have *already* sought and arguably achieved (in part) a more fluid and transitional approach towards service provision for this age-group. Safeguarding is notable in retaining a binary notion of child/adulthood, despite the evidence that risk and harms respect no such boundary.

One innovative area of practice in child protection, which directly affects the safeguarding of young people, is Contextual Safeguarding, developed by Dr Carlene Firmin and colleagues. This recognises the extra-familial dynamics of risks for young people. It provides a framework to support local agencies working together, often in new partnership arrangements, to address issues that may present because of contextual safeguarding risks in schools, parks, community areas and online. '*It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships*.' (contextualsafeguarding.org.uk, 2019). Importantly, harm and the effects of harm do not end when a young person turns 18. Therefore the response to harm, taking into account adolescent development and the external risks that young people can experience means that safeguarding services need to be fluid across arbitrary boundaries such as age. This can include: county lines (drug trafficking out of cities into provincial and rural areas using young people as mules and dealers (National Crime Agency, 2020)); cuckooing (drug dealers taking over a property belonging to a vulnerable person (National Crime Agency, 2020)); child sexual exploitation; child criminal exploitation; modern slavery; and the role of social media in these activities. However, because of the notable differences in the

children's and adults' safeguarding systems, including thresholds / eligibility criteria*, y*oung people at 18 years entering adulthood can experience a 'cliff-edge' in terms of continuity of safeguarding support offered (Holmes and Smale, 2018).

Despite some excellent practice and innovative services, for many involved in safeguarding young people, there remains a sense of trying to fit square pegs into round holes. Holmes and Smale (2018) argue that expanding or creating new categories in the current system is unlikely to enhance effective prevention and intervention for a number of reasons. Firstly, it does not by itself increase resources and effectiveness. In the context of resource pressures, this could in fact lead to negative unintended consequences – for example, prioritising young people at the expense of younger children. Secondly, child protection is still seen as the dominant framework for addressing these risks, yet this approach is less effective in reducing adolescent risks and harms. This is in part because the child protection system typically relies on mechanisms which can alienate young people – for instance, routes to participation such as attending child protection meetings are intimidating (Jobe and Gorin, 2013) and may inadvertently lead to young people feeling stigmatized by their risks and problems. Child protection processes also focus on assessing and changing a parent's behaviour, which is at odds with the nature of extra-familial harm, where parents may be doing their best but have no influence. This can lead to blame and stigma (Scott and McNeish, 2017). Additionally, consent is not required from young people under 18 to initiate a safeguarding response, and decisions can be made in their 'best interest' without their involvement. However, it is considered ideal that an adult's consent is sought before making a safeguarding referral unless they are found to lack capacity (Department of Health, 2020). Finally, when considering young people's development, Rees and Stein (1999) suggest that adolescent agency in relation to risks makes adolescents 'imperfect victims' and makes addressing those risks (and their impact) a complex business. Warrington (2016) and Lefevre et al (2019) recommend integrating participatory practice into safeguarding work with young people, especially when they have experienced exploitative coercive contexts.

So which young people are we referring to? Some young people have care and support needs as they are in transition from adolescence to adulthood, but that is not the same thing as transitional safeguarding needs, although there can be some overlap. A number of young people are already known to social services, health and education services (e.g. looked after children, or young people with health and education needs) and are likely to have some transitional arrangements made for them when they turn 18. For example those who are leaving care can continue to receive support until they are 25. Other young people who have physical or learning disabilities, may be eligible for adult social care services; as they are supported in the transition to adulthood, any safeguarding needs would be addressed. There is an existing literature that acknowledges and explores vulnerabilities of these groups (Osgood et al., 2005). Young people who experience chronic illness are one of the groups that do less well as they transition to adulthood (Neinstein 2013; Neinstein and Irwin 2013). Moore Hepburn et al., (2015) showed that during the period of time young people transition from paediatric to adult health care services, there is a higher risk of poor clinical outcomes and low service user satisfaction. They concluded that coordination across the different care providers was essential for successful transition outcomes, and this was also dependent on coherent interfaces between the different systems. Additionally young people who receive Child and Adolescent Mental Health Services (CAMHS), may not continue to receive mental health support as they get older due to the different eligibility criteria for adult mental health services (Singh et al., 2010).

There are young people who are known to Youth Justice services, with some cross-over to young people involved in county lines, sexual and criminal exploitation, and modern slavery. For many of these young people, safeguarding services are most likely to stop at age 18, as very few will be eligible for statutory adult social care or safeguarding services (Department of Health, 2020). Given the circumstances that some young people have faced and continue to face, Holmes and Smale (2018) argue that this isn't the best time for local authority and health services to cease, or for a debate to occur about whether over-18s meet 'eligibility

criteria' and have 'care and support needs'. This is particularly pertinent when there are safeguarding risks. Further, the binary construct of 'victim/perpetrator' does not capture the complexities of risk, criminality and vulnerability for those experiencing sexual exploitation, or involved in criminal exploitation, especially after young people turn 18, when they may be seen as 'perpetrator' rather than 'victim'.

Finally, although some young people are known to statutory services, there are others who are unknown or on the periphery. For example, young people who are subject to modern slavery, may not come to the notice of services until they are adults. However, there has been a growing emphasis on reporting young victims of modern slavery through the National Referral Mechanism (Home Office, 2016). Another group of young people on the periphery are those facing homelessness (Neinstein, 2013). Safeguarding adults who experience multiple exclusion homelessness is a challenge and transitions have been identified as a specific vulnerability for this group (Preston-Shoot, 2020).

In summary, a different safeguarding response is required that meets the needs of young people. A transitional safeguarding approach should take into account their developmental stages, extra-familial risks in young people's lives including 'place' and 'space', and use a risk enabling approach that can prepare and support young people with their adult lives.

Research in Practice (RiP) is a national voluntary sector membership organisation that supports evidence-informed innovation and professional development in both the children's and adults' social services sector. RiP's membership includes 71% of Children's and 33% of Adult social service departments in England. Recognising the gaps in safeguarding service provision for young people, RiP organised four national workshops for practice leaders within their membership to review practice for this group and explore gaps. The rest of this paper presents the results of this work.

Methodology:

There is a developing literature about workshops as a research tool to gather data. The workshop is a common activity in higher education and work-based environments for teaching and learning. It originates from the work of Osborn (1948), who described it principally as an approach to aid group problem-solving. Ørngreen and Levinsen (2017) explore its use as research methodology (p72), and suggest that where this occurs, workshops fulfil two purposes. Firstly, participants meet their own expectations as a result of attendance; secondly, the workshop can meet a research purpose utilising data generated during the workshop. This is a useful method where the topic is 'emerging' or 'unpredictable' (Ørngreen and Levinsen 2017, p73), as is the case with transitional safeguarding.

There are a number of limitations in using workshops as a research method. Having a facilitator who is also a researcher can create inherent contradictions that challenge their role. This includes gathering data to ensure reliability and validity at the same time as facilitating discussions that focus on participants' needs. Ørngreen and Levinsen (2017) use the work of Darsø (2001) to highlight the different scopes and influences of the researcher. The four participation modes outlined by Biggs et al., (1995, cited in Ørngreen and Levinsen 2017) are helpful in exploring the relationship between the interactions between participants and facilitators/researchers: contractual, consultative, collaborative and collegiate. In this research, the three latter modes were utilised.

Four national workshops were held during the summer and autumn of 2019. Participants were middle and senior managers with a specific remit for developing and leading safeguarding practice in Adult and Children's services in Local Authorities in England. The facilitators were independent academics with senior social care management experience (one from Children's services and one from Adults services).

Participants were asked to attend in pairs from their local area, one each from Adult and Children's social services. Participants attended from 52 out of a total of 152 Local Authorities in England. There were 33 matched pairs of Children and Adult services representatives and the remaining 19 Local Authorities were represented by either someone

from Adults or Children's social services. Participants were informed that the workshop was part of a scoping exercise. To ensure transparency and meet ethical requirements, participants were asked to sign a consent form indicating that the facilitators might use information generated during the workshop for research purposes, including publication. Individuals or places of work would not be identifiable. Consent was not compulsory for attendance at the workshop (this was made clear to participants when they registered as well as when they attended); however all participants gave consent. The workshops were held in Birmingham, London, Bristol and Manchester to encourage maximum attendance and were free of charge.

The aims of the workshops were to: explore key challenges and opportunities in safeguarding young people across the transition 'gap'; share relevant practice experiences; and consider what system changes might be needed to promote innovation in participants' local areas.

The workshop facilitators presented information covering the context for transitional safeguarding, including the legal frameworks and different approaches to safeguarding children and adults that currently dominate practice. Participants worked in different small groups, including working in pairs with their colleague from the same local authority. Participants took part in activities which explored strengths, weaknesses, opportunities and threats to organisations (SWOT analysis) in pursuing a transitional safeguarding approach in their workplaces. This type of analysis is commonly used in organisations as a tool for planning purposes (Helms and Nixon, 2010), it has meaning for the participants and was used as a vehicle to summarise the enablers and barriers for transitional safeguarding in local authorities. Enablers included strengths in their current practice, and opportunities for development or improvement. Barriers included areas or weakness in current practice throughout structures and systems, as well as threats identified that would impact on the ability to develop transitional safeguarding services. These data were collated under four domains: These represented the four layers of the whole system context that were common

to all participants. Groups recorded their observations and these were collected and transcribed by the facilitators and formed the core data for analysis.

To analyse the data, the authors used reflexive thematic analysis as it provided the flexibility for a rich and detailed examination of the collected data (Braun and Clarke, 2006). Emergent themes were extracted from the data by Author 1, with Author 2 checking the results. These were placed in tables, with source data and shared with Author 3 for comment. This final stage led to a compilation of summary points on each of the themes. We used inductive and critical realist approaches (CRA), concentrating on the content of the data and the 'reported reality' evident from these data (Braun and Clarke 2013). Critical engagement with participants' knowledge and experience are essential to CRA (Fletcher, 2016), and these are integrated throughout the discussion of the results. Ethical approval was obtained from the Social Work Ethics Committee at the University of East Anglia.

Results:

The SWOT analysis enabled participants to consider the strengths and shortcomings of safeguarding practices across their own services, listen to the differences in services in other localities and consider the kinds of broader changes which could be introduced across the entire system to improve practice in this area. There was a clear commitment to improvement and change, despite funding constraints and system barriers. No single local authority had a coherent and comprehensive approach to transitional safeguarding. This section presents and explores the main crosscutting themes.

Innovation across service boundaries

Participants provided examples of local good practice working across organisational boundaries. Transitions teams for young people with special educational needs, physical or learning disabilities (SEND) were the most common examples of joint working already existing, which included relevant partner agencies. Some multi-agency partnerships reported

starting to lead innovation in this area. Participants reported that these were effective where professional and personal relationships and culture supported joint working at all levels in organisations.

The findings from the four workshops also highlighted many examples of innovation. Joint posts, planning/strategies and services across the child/adult boundary were all seen as opportunities to improve safeguarding services for young people. This included planning and developing 'all-age' services, with joint approaches seen as a means of clarifying pathways for young people in need of transitional safeguarding support. The development of joint services could further address the incompatibility of 'thresholds' for young people who did not meet exclusive criteria for accessing the services they needed.

Work to support this was taking place at a strategic level. Participants mentioned the role that Safeguarding Adults Boards (SAB), Safeguarding Children's Partnerships (SCP) and Community Safety Partnerships (CSP) had in working strategically. Participants' examples of early steps to innovate at this level included: shared chairing arrangements, shared work groups or shared objectives between SABs, SCPs and CSPs. This setting of a clear vision across different service areas and having 'a 'listening' senior management open to change' were seen as managerial strengths and necessary enablers to facilitate improvement in transitional safeguarding approaches to working with young people. However, it was still too early to demonstrate an effective comprehensive impact throughout all systems following implementation, including whether outcomes for young people had improved.

Improving the safeguarding knowledge and skills of children and adult social workers across service boundaries

Workforce development was seen as a tool for enabling improvement in transitional safeguarding, to assist in improving understanding of roles, remits and responsibilities between Children's and Adult services. Participants identified the tensions between children and adults statutory and policy frameworks, inspection and regulation regimes and the

competing demands on budgets, as blocks and barriers. Participants thought these could be addressed through the introduction of new joint and shared approaches, which training and development activities could then support to cascade to all staff and managers. Participants emphasised that sharing skills and knowledge across Children's and Adult services were essential, such as adult social workers supporting their Children's colleagues in developing skills to undertake the Mental Capacity Act (2005) assessments for 16/17 year olds or developing risk-enablement approaches for safeguarding young people. The role of Principal Social Workers (PSWs) in workforce development was critical to improving practice across services.

Engagement with young people

Engagement with young people who used services was considered essential at all levels, particularly enabling decisions about their own care, involvement in service design and evaluation, and creation of policy and strategy. This should then inform system-wide changes in service delivery. Whilst examples of innovation were provided in operational day-to-day practice at an individual level, these were limited at the managerial, multiagency and strategic levels. Capacity to meaningfully engage with service users in commissioning, service design, service evaluation and strategic development was identified as a weakness.

Other issues raised included different agency attitudes toward risk and risk enablement toward young people. For example, Health services use Fraser guidelines to aid decision-making with young people, whilst local authorities use age as the determining factor.

Conflicting priorities

Recognition of conflicting priorities at all levels was seen as a challenge for the transitional safeguarding agenda moving forward. Financial pressures, accentuated by competing priorities, whether locally or nationally driven, meant that resources for innovation and change were scarce. This also limited the potential for providing or commissioning different services or extending the remit of current services to meet different needs, e.g. safeguarding

young adults without recognised ‘care and support’ needs (Department of Health, 2020). Workforce and workload pressures, linked to the impact of financial austerity, were seen to limit creativity and potential expansion of roles and remits to meet the safeguarding needs of a broader group of young people. Minimalist approaches to undertaking statutory duties and defensive practices were reported as common across services and agencies, which affected participants’ confidence about whether changes in this area would actually happen without stronger external drivers.

Challenges

Communication between and across services was described as both a barrier and an enabler, depending on whether it was poor or worked well. This extended to the communication tools (IT) across systems (multi-agency) or within the local authority; access to information through IT systems was considered critical to supporting joint working. When IT systems blocked communication between Adult and Children’s services (a common frustration), this reinforced silo working. Participants saw strategic leadership and support as an essential part in challenging and overcoming these barriers and creating better opportunities for joint working and innovation across local services.

Although there were commonalities within discussions, participants acknowledged that local factors determined by geography and location meant that each authority’s response to the issues raised by adopting a transitional safeguarding approach would be different. This accentuated the need for considerable flexibility at a local level regarding the way transitional safeguarding was developed and applied.

Discussion: Reimagining safeguarding with young people

The system changes required to improve safeguarding practice with young people are complex and deeply engrained. Participants evidently understood the problem and wanted to do better and to innovate where possible, but recognised a number of barriers. Overcoming

these requires strong leadership responses across organisational boundaries. This is challenging. For example, some 'pairs' from local authorities had not even met each other until the day of the training. This makes a conversation between different parts of the same organisation more challenging, but not impossible, and illustrates in a microcosm the problems that exist more broadly within and between organisations. The following discussion explores transitional safeguarding as an 'emergent system'. It looks at how Children and Adults services can learn from each other, making the case for supporting 'whole system' change.

Transitional Safeguarding as an 'emergent system'

Adult and Children's social services approach safeguarding in different ways due to their legal and policy frameworks, driving different safeguarding cultures. There is relevant learning from how local authority social services work with young people transitioning from one service to another. In SEND provision and work with care leavers, historic poor management of the transition process has been marred by disjointed support (Dunsmuir et al., 2020). However, service models used for both these transitions are usually, but not always, located in and/or led by Children's services, which impacts on the service design and interface with Adult services. In this area the legal and policy guidance for SEND service delivery facilitates and requires a joined up approach.

Dunsmuir et al., (2020) highlight a difference between 'designed' and 'emergent' systems; with the former related to work undertaken within set institutional structures, whereas emergent systems refer to dynamic practices between different organisational partners. A community of practice model (Lave and Wenger, 1991), which is a model of learning principally designed for the workplace that values informal learning rather than mechanistic processes, is an example of this. Dunsmuir et al., report that there are differences between communities of practice created through informal networks to further develop a particular

area of practice and formal groups required to innovate together through organisational senior managerial expectation (Wenger and Snyder, 2000). The latter should not be underestimated as a vehicle for change once some of the resistances to change often observed in clashes in cultural norms and structures (such as IT) are overcome. The transitional safeguarding workshops captured the 'emergent' conversations in this area of change.

Learning from children's safeguarding:

However, safeguarding across the Children/Adult services gap presents additional challenges as the statutory and policy frameworks do not have any overarching coherence. (Holmes and Smale, 2018) suggest that whole system change is necessary to address the transitional safeguarding needs of young people, rather than creating a separate safeguarding response for young people, which would add further boundaries. If a safeguarding service for this group of young people was to be designed from scratch, Holmes and Allen (2021) suggests that as well as being participative and evidence informed, it would need to be contextual, developmental and relational. This emphasises the importance of working collaboratively across service boundaries to focus on the young person's risks and needs. How this is done would be different in each locality, depending on local circumstances and needs.

Firmin's work on Contextual Safeguarding has shown how taking into account the developmental changes in adolescence can lead to innovation in redesigning safeguarding services for adolescents, focusing on 'place' and 'space' in ways that recognise life span development and the extra-familial safeguarding risks for this population group (Firmin, 2017). Since geographical spaces vary and how young people use them differs, the relative risks will also change. For example, a park may be a safe or dangerous place for a young person, depending on a range of factors, such as whether there are gangs operating within a particular area. With many youth provision closing, free wifi at fast food outlets has meant

that these spaces are used differently by young people, including becoming recruiting grounds for criminal exploitation.

A number of the Children's services participants at the transitional safeguarding workshops were involved in implementing the Contextual Safeguarding model in their local authorities, as funded pilot sites. Although this model does invite partnerships with many community organisations, which can include Adult social services, the 'gap' at 18 years-of-age still remains. Further work is needed for adult safeguarding to learn from the contextual safeguarding work.

Participants reported examples of innovative work being developed across the 18 years-of-age 'boundary' regarding CCE and CSE services. However, these projects often received additional government funding, such as the expansion of the Sexual Exploitation Hub in 2015. This was developed following Newcastle's 'Operation Sanctuary', a police investigation into the grooming of girls and young women in the city (Rogers, 2018). In 2018, Newcastle's CSP and SAB published a joint thematic serious case review about the sexual exploitation of children and adults with care and support needs. It identified a lack of guidance around safeguarding young adults, particularly the availability of legal options to protect adult victims of exploitation who did not lack capacity under the Mental Capacity Act 2005, but were subject to coercion (Spicer, 2018).

Learning from adult safeguarding

Whilst many of the principles underlying safeguarding practice in Children's and Adult social services are the same, there are some differences.

(insert table 1 here)

These differences are critical when considering how best to safeguard young people. Firstly, the adult safeguarding principle of **empowerment** is central to personalisation in adult social care, and provides people with choice and control in their lives, and key to risk enablement (Department of Health, 2020). Secondly, **proportionality** is key to issues of risk

management and central to the application of the Mental Capacity Act 2005. For children as well as adults, intervention should only be as much as is necessary to achieve a safeguarding goal. Thirdly, **accountability** exists at strategic levels across both children and adult partnerships (Children and Social Work Act 2017; Care and Support Statutory Guidance 2020) but not at a practice level in Children's services. As reflected in the conversations between Children's and Adult social services at the workshops, participants recognised that developing a transitional safeguarding approach involved improving their understanding of these differences. Developing a safeguarding response for young people that better reflected the six key principles from adult safeguarding, adopting a 'making safeguarding personal for young people' approach, might provide the necessary link from one safeguarding system to another. This would draw on the safeguarding expertise of Adult services colleagues, alongside the adolescent development knowledge of Children's services colleagues.

The biggest challenge is to involve young people as key stakeholders in developing appropriate safeguarding responses. This is both at the individual practice level and at service design level. At the practice level, responses should be personalised and outcome focused, in keeping with Making Safeguarding Personal (Lawson, 2017). Secondly, involvement of young people in services redesign was also recognised as a critical factor by participants and there is evidence to show the value of this for child safeguarding services and young people themselves (Cossar et al, 2011; Jobe and Gorin 2012, Warrington, 2016). There is learning from both adults and children's services which should inform engagement with young people in developing local transitional safeguarding approaches.

Sector-led improvement supporting whole systems change

The workshops used a sector-led improvement paradigm (Local Government Association et al., 2012) to support participants to think about transitional safeguarding in the context of their own local authority settings. Although there is a similar framework of regional improvement partnerships in Children's services (ADCS, 2019), the Ofsted inspection and

regulation model also influences how children's safeguarding develops. Adult safeguarding is not regulated in terms of a local authority function. The Care Quality Commission (CQC) includes safeguarding in its inspection of services as a ‘key line of enquiry’ across Adult Social Care providers (Care Quality Commission, 2020), but local authority safeguarding services are not subject to inspection. The sector-led improvement method of supporting change in local authority settings is different to a centrally driven top-down approach to implementing public policy because it recognises that the kind of systems-based change needed will be different for each local authority. This enables authorities to learn from each other, particularly from examples of good practice. This does not mean these will be duplicated exactly in each authority; rather it enables managers to have discussions with others across the sector and think through how to achieve positive change in their particular local authority (Local Government Association et al., 2014). This model, used in the workshops, can support the system changes necessary for further developing and embedding a transitional safeguarding approach that will address the current cliff-edge between children and adult safeguarding.

Conclusion

The aims of the four national workshops were to explore key challenges and opportunities in safeguarding young people across the transition ‘gap’, share relevant practice experiences and consider what system changes might be needed to promote innovation in participants’ local areas. The workshops have contributed to the emerging evidence-base in this area of practice, particularly how to meet the safeguarding needs of young people in a way that reflects the dynamic process of transition. Transitional safeguarding provides a language to describe a complex area of practice concerned with the specific safeguarding needs of young people, which meets their developmental needs. The current cliff-edge at 18 means

that they are not always supported effectively. This results in unmet needs and often costlier later intervention, as those young people where support ends at 18, are too often located within criminal justice, homeless, substance misusing and/or mental health populations. Findings from the workshops showed many examples of commitment to improvement and change, despite funding constraints and system barriers. No one local authority had a comprehensive approach to transitional safeguarding embedded throughout. Some partnerships had started to lead innovation, but it was still too early to demonstrate any effective impact throughout all systems, including whether outcomes for young people had improved.

There are no instant or quick solutions to address this on a local, national or international level, even though these circumstances look to apply across the board. However, every local area has its own pressures and priorities and will approach transitional safeguarding differently: a whole systems approach will therefore vary in each locality. These system changes are complex, because they involve a re-thinking and re-configuration of the 'risk' vs 'rights' and 'child/adult' paradigms that permeate societal responses to the protection of young people. These challenges require leadership from both Adult and Children's services senior management to achieve lasting and effective change. The findings from these workshops suggest that practice leaders are vital and willing allies in this journey, and may offer untapped resources in supporting system transformation. Learning across the boundaries is essential as is engaging with young people to shape these changes.

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