

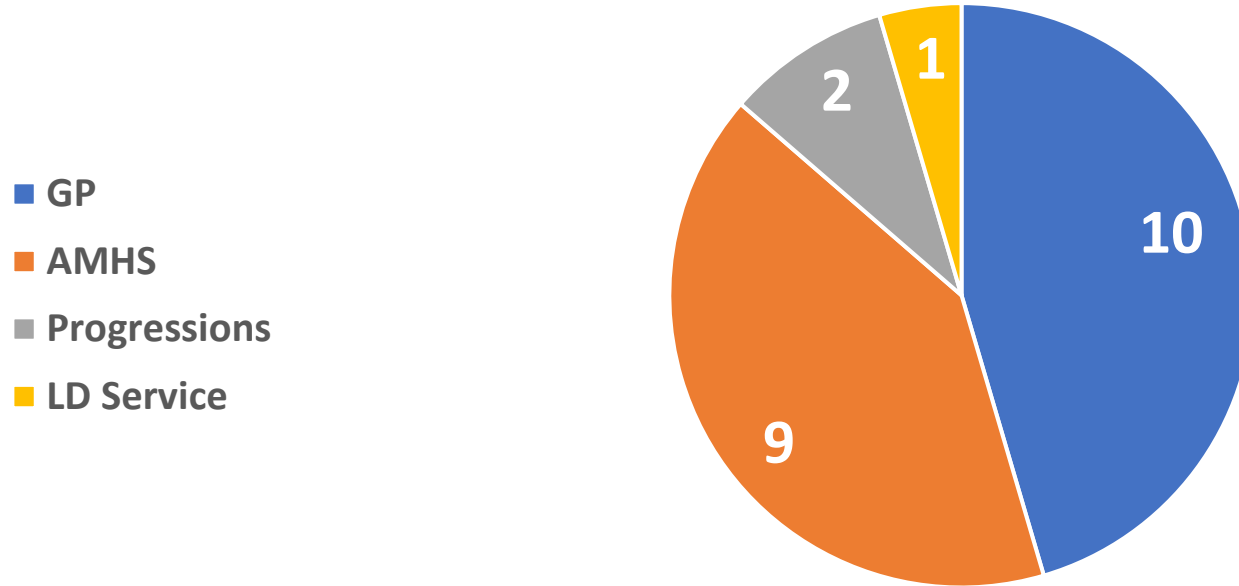


Best care by the best people

# Transition Planning between CAMHs and Adult Mental Health



# Southend CAMHS Transition Discharge Destinations 1 Sept 22 to 31 Aug 23



# NELFT and EPUT Joint Transition Protocol

<p><b>STAGE 1</b> 17yrs +</p>	<p>Cases identified in SETCAMHS MDT as requiring possible transfer to AMHS</p> <p>Review meeting SETCAMHS – care CO/MDT/YP/Family – discuss ongoing need and possible transition to AMHS</p>	<p>Transition process discussed with YP and Family</p> <p>Consent to discuss with AMHS</p>
<p><b>STAGE 2</b> 17yrs to 17.6yrs</p>	<p>Case discussed in Transition Interface meeting between AMHS &amp; SETCAMHS</p>	<p>Meetings held 3monthly with AMHS to flag transition cases and agree joint assessments</p>
<p><b>STAGE 3</b> 17.6YRS – 18yrs</p>	<p>Joint Transition Assessment Meeting</p> <p>Joint Final Transfer Meeting (CPA Transition Meeting)</p>	<ul style="list-style-type: none"> <li>• Joint Assessment with AMHS &amp; SETCAMHS(to involve Young person and as appropriate parents/carers)</li> <li>• AMHS Link worker identified</li> <li>• Joint Care plan agreed by all parties (agreed and signed by YP &amp; family and copy given to them)</li> <li>• Young person &amp; family complete Pre-transition survey.</li> <li>• Agree transfer Meeting date</li> </ul> <p>As per CPA process. To be attended by Young person and Career, as appropriate and appropriate services involved eg) School/College, GP. SW, advocate,</p>
<p><b>STAGE 4</b></p>	<p>Case opened to AMHS</p> <p>Case closed to SETCAMHS</p>	<p>SETCAMHS Pre Transition Audi completed Young person &amp; family complete post transition survey.</p> <p>3-6mths – AMHS Post Transition Audit completed</p>



# Stage 1

## From age 17



- **Cases identified at SETCAMHS MDT as requiring possible referral to adult services**
- **Transition conversations and planning start with young person and begin to develop collaborative transition care plan. Discuss transition process and gain consent to discuss with AMH**
- **Those requiring possible transfer to AMH services are taken to monthly interface meeting between SET CAMHS and AMH**



# Stage 2

## From age 17.5

- **Joint Transition Assessment meeting with AMHS, SET CAMHS, young person and family where appropriate.**
  - **Introduce young person to the identified Adult mental health care co-ordinator/caseworker . Unless, clinically indicated, it is expected that this would be a minimum of one meeting.**
  - **The young person will be given relevant information about what they can expect from AMHS and details of any organisations and or support services that may be of help /support/interest**
- **Joint Transition Assessment meeting with AMHS, SET CAMHS, young person and family where appropriate.**
  - **Introduce young person to the identified Adult mental health care co-ordinator/caseworker . Unless, clinically indicated, it is expected that this would be a minimum of one meeting.**
  - **The young person will be given relevant information about what they can expect from AMHS and details of any organisations and or support services that may be of help /support/interest**



# Stage 2, continued

- **SET CAMHS continues to be lead service for the young person in transition and the service that the young person contacts when support is required in crisis**
- **Joint care plan agreed by all parties, signed and copy given to YP**
- **Final Transition CPA meeting to take place prior to 18<sup>th</sup> Birthday**
- **SET CAMHS will work with young person in preparation of transfer to AMHS in a manner that is underpinned by the principles of recovery.**
- **Where SET CAMHS are providing time-limited interventions, these may continue beyond the young person's 18th birthday in consensus with the Adult Mental health service**



# Stage 3

## From age 18

- Patient is formally closed on SystemOne (EPR) to SET CAMHs.
- Adult LD & MH services are the lead provider/service to the patient and take over the agreed treatment interventions and or prescribing as required and will at this formally open the young person as a patient on the respective AMHS caseload and EPUT Patient information system.
- For young people who are not transferring to adult LD & mental health service but to other services such as Primary Care, LA support, Voluntary sector etc.

Their care will be led and managed by those organisations following a full and effective handover from SET CAMHs.





# Progressions

- **Aim to support young adults who have been receiving a service from the commissioned SETCAMHS service and are preparing to leave.**
- **Work with YP approaching transition age (16-18yrs or up to 25yrs if SEND) and leaving SETCAMHS but do not meet the current threshold for Adult mental health services.**
- **Create a more straight forward, responsive and easy access referral pathway for young adults under 25 years with a mental health need regardless of thresholds for traditional clinical interventions.**
- **Champion on behalf of the young adult to access community services to support resilience and thriving.**





# Progressions - Interventions

- Multi-skilled professionals including mental health clinicians that will work with SET CAMHs to assist in developing a management plan.
- Regular case discussion meetings with professionals from all agencies involved with the young adult to plan for care and needs.
- Up to 12 weeks transition support from a YP Worker, involving initial assessment and intervention
- Up to 8 weeks transition support from a therapist, involving initial assessment and intervention
- Peer mentoring



# Other Services/ Interventions

- **Transition care plans focusing on relapse prevention**
- **Digital Applications**
- **Kooth**
- **MindFresh**
- **Community resources**
- **Trustlinks/ Recovery college.**



# What's going well?



- **Bi-monthly transition meeting with SETCAMHS. Adult Recovery and Wellbeing (AMHS), Adult LD, Adult Crisis team, Progressions, Open reach (substance misuse). – Enables identification of most appropriate service early on.**
- **Involvement of young people in their transition planning.**
- **Identification of AMH Care Coordinator at the start of transition. process so**
- **Young people knowing what to expect.**



# Case Example 1

- *Young person known to SET CAMHs for over 2 years.*
- *Depression, PTSD, self-harm, suicidality and 2x overdoses, history of domestic violence in family, difficulties with emotional regulation.*
- *Completed EMDR, talking therapies and DBT with SET CAMHs.*
- *Active joint transition work commenced at 17.5 which included 2 joint transition meetings with young person, CAMHs and Adult MH care coordinator.*
- *YP able to share what they needed from a MH service with new worker and shared what had been helpful from CAMHS.*
- *Joint attendance at CPA prior to transfer to AMHS.*
- *Joint transition care plan set out clear expectations for Adult services – fortnightly calls and monthly appointments with care coordinator, monthly reviews with Psychiatrist.*



# Case Example 2

- *Open to SETCAMHS 2 years*
- *low mood/depression, anxiety, DSH and suicidality.- started 1:1 therapy*
- *Overdose several days later. And further deterior Medical treatment needed due to Overdose.*
- *Further deterioration in Mental health, self-isolation increasing.*
- *Further information around YP's challenges disclosed, witnessed DV and bullying at school.*
- *Around 8 sessions of 1-1, agreed for Psychiatric assessment. No improvement.*
- *Anti-Depressant started and ongoing 1-1 therapy.*
- *20 + further 1-1's and ongoing Psychiatric reviews.*



# Case Example 2, cont.

- *17.7yrs – transition care plan agreed*
- *YP and CAMHS agreed Progressions most suitable service*
- *Referral made and YP accepted but there was a 4-month delay in allocating worker due to Progressions wait list. YP remained open to SET CAMHs to ensure a safe handover.*
- *Psychiatric reviews and therapy continued whilst waiting and the focus of therapy shifted towards developing a relapse prevention plan, looking at what other resources the child could use.*
- *Joint meeting with Progressions and SET CAMHS took place age 18 yrs. YP agreed with Progressions worker what the new plan would look like.*
- *YP discharged at 18 and 1 months*



# What are the current challenges?

- **Increase in acuity. More complex cases requiring systems approach to transitioning.**
- **More young people being referred into SET CAMHs post 17.5yrs, which makes it harder to identify transition needs early on.**





**Any questions?**

