



Mental health services struggle to perform well in cases of young patients transitioning away from a Child and Adolescent Mental Health Service (CAMHS). In the past few years there have been several calls from policy-makers, academics, services and service users' communities to improve the process of healthcare service transitions (HST) for young people. Service users criticise the lack of arrangements and poor information sharing, often report feelings of being 'dumped, cut off and abandoned' and may leave medical supervision altogether. The aim of this CLAHRC research project is to understand the process of moving from one mental health service to another; the study focused particularly on young mental health service users "transitioning away" from the Child/Adolescent Mental Health Services of Cambridgeshire and Peterborough.

Policy context

CAMHS offer psychological and psychiatric treatment to young people with moderate to severe mental health difficulties up to age 18, at which point patients either face discharge, transfer to GP care or transition to Adult Mental Health Services (AMHS) or another appropriate service. The National Service Framework for Children, Young People and Maternity Services recommends that CAMHS sees all children up to their 18th birthday.¹ However there are regional variations to this policy, and Cambridgeshire and Peterborough NHS Trust (CPFT) starts the transition process on or nearing a patient's 17th birthday.² NICE guidelines state that 'the precise timing of arrangements may vary locally, but should usually be completed by the time the young person reaches 18 years old'.³

The research

The aim of this project has been to understand the HST process in the context of the Cambridgeshire and Peterborough mental health services, identify its limitations and strengths, and develop PCT-specific suggestions for improvement.

The design was a qualitative study of service providers' and service users' perspectives on healthcare service user transitions in the area of Cambridgeshire and Peterborough.

Findings

The study found that to achieve a successful healthcare service transition in mental health, a deep understanding of the mental health services involved is required by GPs, service providers and clinical managers, as well as a thorough knowledge of the options that are available to the service user. An increased involvement of all stakeholders (including the service user and their carers) in the decision-making process is essential.



Impact

As a result of this research, an improved transition protocol was produced and will be disseminated by the Cambridgeshire County Council; it will be used both within the NHS and by services outside the NHS. In addition, a transitions map of available options to clients post-discharge identified in this study, will be used by the CCC transitions team to update and educate GPs on how to manage young people through this difficult period.

Research partners

This was a collaborative project between the CLAHRC and the Cambridgeshire County Council transitions team. We would like to acknowledge the contribution of CAMHS-AMHS service providers and service users who co-designed parts of the study, such as the research focus and some of research questions.

References

1. Department of Health (2004). National Service Framework for Children, Young People and Maternity Services: Core Standards.
2. CPFT (2006). Transition Protocol: Child and Adolescent Mental Health Services to Adult Mental Health Services.
3. National Institute for Health and Clinical Excellence (2010). Implementation Advice for NICE clinical guidelines for transition from Child and Adolescent Mental Health Services to Adult Mental Health Services.