

MINDING THE GAP(MTG)

A Transition Protocol for Child and Adolescent Mental Health Services and Adult Mental Health Services in Camden

This protocol is designed to improve the service user experience of transition between Child and Adolescent Mental Health Services (CAMHS) and Adult Mental Health Services (AMHS) and to support the work of professionals' responsible for the transition process. It applies to young people from the age of 17 years and above and to transitions from CAMHS to:

- Camden and Islington NHS FT Adult Services,
- The Tavistock Adolescent and Young Adults Service
- The Brandon Centre.

Transitions have often been unsuccessful, partly because they are inherently difficult, but also due to poor communication between AMHS and CAMHS and the absence of for a clear transitions protocol. This protocol adheres to several key principles:

- The young person (YP) must be fully engaged with the transition decision and implementation of the transition process
- CAMHS will not discharge YP into AMHS unless transition has been agreed with the receiving service and the YP.
- AMHS will not send a referral back to CAMHS but will bring the case to the MTG meeting to discuss possible management plans and alternative solutions within AMHS I.E. a 'no-bounce' policy.

The Protocol

1. At least 6 months before a young person reaches the age of 18, the CAMHS team engages in discussion with the young person (YP) about their future care and possible referral to AMHS.
2. If the YP wishes to be referred and gives consent, then the CAMHS team arranges to present the referral at Camden MTG meeting.
3. If the referral pathway is clear, then the MTG meeting will recommend that the CAMHS team make the referral to the relevant service and to copy the MTG team into the referral.
4. The CAMHS team will forward (with YP consent) the relevant information to the receiving AMHS team (i.e. referral letter and key documents).
5. The AMHS team will meet with the CAMHS team (relevant members of the respective team) to discuss the referral. This could take place directly between the teams or via the MTG meeting if there is some uncertainty about the outcome of the referral.

6. If both parties agree that a referral is appropriate then a further meeting is arranged between CAMHS, AMHS team and the YP to discuss the proposed referral and treatment plan. If it is agreed that the referral will go ahead then the three parties will agree the following plan:
 - When the transfer of care will happen
 - Over what period of time the transfer process will take place
 - What the YP can expect during the period of transfer of care
 - Whether a phase of parallel care is required, during which the YP may be seen by workers from both CAMHS and AMHS team (eg.3-9 months). If this is agreed as part of the plan then the CAMHS and AMHS team workers will meet together with the YP at regular intervals to monitor progress and satisfaction with their care.
 - When the plan has been agreed the Transition Plan document will be completed and signed by the YP and the relevant CAMHS and AMHS team workers and all parties will keep a copy.

7. When the transition has been completed the AMHS team will ask for early feedback from the YP about their experience of the AMHS (to avoid unexpected drop-out)
 - If the YP appears at risk of falling out of services then the AMHS team might consider a further joint meeting with the YP and CAMHS / bringing the case to the MTG meeting

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