

Connecting Care National Collaborative Youth to Adult Mental Health

Specialist Mental Health Service Canterbury District Health Board



District Health Board

Te Poari Hauora ō Waitaha





Defining the Problem

- Transition from youth to adult mental health services can be a time of heightened risk
- Uncertainty and variability at a time when support should be at it's most robust.
- Strong indications that young people are not adequately prepared to make the transition.
- Actual and perceived differences in approaches, culture between CAF and Adult services – a sharp culture change





Aim

A clear transition pathway from specialist youth to specialist adult mental health care which optimises consumer and family engagement and continuity of care pre, during and post transition.

Goals:

- An improved consumer and family experience of the transition process.
- Enhanced preparedness/readiness for transition
- Increased collaborative working and continuity of care between CAF and Adult Teams
- Measurable outcomes



Emerging Themes

- Experience of consumers and their familywhānau of the transition from youth to adult.
- Preparedness/readiness to transition
- Continuity and collaboration between youth teams and adult teams

"What does a good transition look like"?



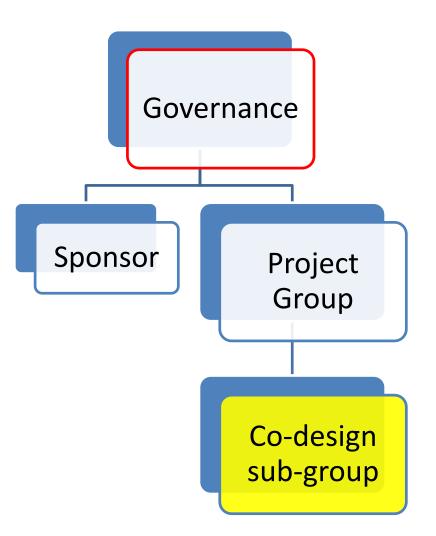
Project team

- Service Manager, Child, Adolescent & Family Mental Health Service
- **Consumer Advisor**, Child, Adolescent & Family Mental Health Service
- **Psychologist**, Adult Community Mental Health Service
- **Psychologist**, Child, Adolescent & Family Mental Health Service
- Case Managers (x2), Child, Adolescent & Family Mental Health Service
- Case Managers (x2), Adult Community Mental Health Service
- Coordinating Family Advisor.
- **NGO Partners:** Emerge Aotearoa & Stepping Stone Trust
- Nurse Coordinator Quality & Patient Safety
- Sponsor Director of Nursing





Project Structure





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- Nurse Coordinator Quality & Patient Safety
- **Sponsor** Director of Nursing
- Governance Group Membership TBC



Voice of the Customer

Hearing the voices of...

Consumers

Family-Whanau

Clinicians

NGO SUPPORTS





Baseline Data

All CAF discharges from July 2015 to June 2018: Number of Contacts – Last 6 Months CAF case – First 6 months Adult Case

Total number of discharges	955
Number which have not returned to services	761 (79.69%)
Number with a transition plan document	472 (49.42%)
Number with a subsequent adult case	194 (20.31%)
Number with an overlapping adult case <u>or</u> new adult case < 1 month from discharge	49 (5.13%)
Number of this group with a transition plan document	27
Number with a new adult case >1 month post discharge from CAF	145 (15.18%)
Number of this group with a transition plan document	81
Number with a 'crisis contact' within the first four contacts post discharge	91



Elevator Pitch

Messaging for Consumers and Families:

"Hello, my name is and I am (role). I am part of a small team who want to better understand the experiences of young people when they reach the point where their mental health care and treatment will transfer from the specialist youth team to a specialist adult team. We believe that this change can be a challenging experience for the young person and their family-whanau – particularly if they have helpful longstanding relationships with the youth team.

We want to work closely together with young people and their families to hear and better understand their experiences of these transfers and find ways that we can provide some really good support going forward. Would you be willing to help us in this work by sharing some of your experiences and answering a few questions that we have prepared"?



Elevator Pitch

Messaging for staff/providers:

Young people who are receiving ongoing support from a youth community mental health team may eventually reach a point where their care and treatment will transfer from the specialist youth team to a specialist adult team. There is strong evidence that this change can be a challenging and potentially destabilising experience for the young person and their family-whanau – particularly if they have wellestablished relationships with members of the youth team. We have started a project which aims to ensure that our mental health teams work closely together with young people and their families before, during and after transfer of care to ensure that the young person's recovery is not negatively affected, delayed or interrupted by this process. To do this, we first need to hear and better understand the experiences of those who understand and/or have gone through this transition. Your thoughts and feedback will really help us to build our understanding and find ways that we can improve the support we provide to young people and their families in the future.



Developing the questions (1) Consumers & Family-Whānau

Theme: Experience of consumers and their family-whānau of the transition from youth to adult

How did you first become aware that (your/your family A member's) care and treatment would move from the CAF n team to the adult team?

Add 'How did that make you feel?' as appropriate.

- Then what happened? ...
- Then what happened? ...

How would you describe the overall experience of moving from the youth to the adult team?

What, if anything, would you change about the transfer of your care from youth to adult services?





Developing the questions (2) Staff & Providers

Theme: Experience of consumers and their family-whānau of the transition from youth to adult

CAF staff	From your experience, how do consumers and families first	Add 'How do
only	become aware that their care and treatment will move from	you feel
	the CAF team to the adult team?	about this?'
		as

appropriate.

- Then what happens?..
 - Then what happens?...

From your experience, what would indicate to you that a transition to adult services has been successful or unsuccessful?

What, if anything, would you change about our current processes and approaches to this transition?



Developing the questions (3) Consumers & Family-Whānau

Theme: Preparedness/Readiness to transition

Can you tell me how involved you felt in the planning and decision making for the transfer of your care to adult services?

What worked well?

What did not work so well?

How ready and prepared did you feel for the move from CAF to adult services overall?

What would have made things better?

Add 'How did that make you feel?' as appropriate.



Developing the questions (4) Staff & Providers

Theme: Preparedness/Readiness to transition

From your experience, do you feel that services do enough to adequately prepare young people to move to adult services?	Add 'How do you feel about this?'
From your experience, what specific factors help prepare a young person and their family/whanau for transition to adult services?	as appropriate.
From your experience, what factors can hinder a successful transition to adult services?	
Are you aware of examples from your own experience were this process did or did not work well?	



Developing the questions (5) Consumers & Family-Whānau

Theme: Continuity and collaboration between youth teams and adult teams

- What were your first impressions of adult services? Add
 What was different from the youth service? that
- What was similar?
- How did it compare to your expectations?
- What would have made that better for you?
- When you moved to adult services, was there anything you missed about CAF? If so, what and why?

Add 'How did that make you feel?' as appropriate.



Developing the questions (6) Staff & Providers

Theme: Continuity and collaboration between youth teams and adult teams

From your experience of supporting a young person (and
their family-whanau) to transition from CAF service,Vhow would you describe their firstpimpressions/experiences of the adult service?d

From your experience, what do you understand as being the key similarities and differences between CAF and Adult services? Work to understand the actual and perceived differences in the approaches, culture, treatment modalities etc. between CAF and adult.



Information Sheet

Connecting Care Project

Transitions from specialist youth to specialist adult mental health care

About this project...

We at CDHB Specialist Mental Health Service want to better understand the experiences of young people when they reach the point where their mental health care and treatment transfers from a specialist youth team to a specialist adult team.

We believe that this change can be a challenging experience for the young person and their family-whanau.

We want to work closely with young people and their families to hear and better understand their experiences of these transfers to help us find ways that we can make sure young people whose care transfers to adult services continue to receive the care and support they need.

We would like to capture as much feedback as possible on:

- Personal experiences of making this transition
- Perceptions on the similarities and differences between child/youth services and adult services.
- How to better prepare young people and their families for the move to adult services

Can you help..?

If you have any experiences, thoughts or suggestions that you would like to share on this topic we would love to hear from you. Please contact Liam McKenny, project lead...

Phone:

Email

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Liam.mckenny@cdhb.health.nz

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Consent Form

Canterbury DHB

District Health Board

'Connecting Care'

A collaborative project aiming to improve the journey from specialist youth mental health support to specialist adult mental health support.

CONSENT FORM FOR

PARTICIPANTS

I have read the Information Sheet concerning this project and understand what it is about. All my questions have been answered to my satisfaction. I understand that I am free to request further information at any stage.

l know that: -

- 1. My participation in the project is entirely voluntary
- 2. I am free to withdraw from the project at any time without any disadvantage
- Personal identifying information e.g. hand written notes, audio-recordings will be destroyed at the conclusion of the project
- 4. The general line of questioning includes questions related to your experience / your family member's experience of transitioning from specialist youth mental health support to specialist adult mental health support. The project will use predetermined questions and, depending how the interview develops, open questioning may be used to further explore any emerging issues. If the line of questioning develops in such a way that I feel hesitant or uncomfortable I can decline to answer any particular question(s) and/or may withdraw from the project without any disadvantage of any kind.
- The outcomes of the project will be available from the Canterbury District Health Board and the Healthy Quality and Safety Commission. Every attempt will be made to preserve my anonymity.

(Signature of participant) (Printed Name) his initiative has been approved by Canterbury District H ealth Service in conjunction with the Healthy and Quali you have any concerns about the conduct of the facilita ontact the Customer Service Coordinator on 03-339116 ustomerServicesSMHS@cdhb.health.nz. Any issues you nd investigated and you will be informed of the outcom	ty Safety Commission. ators of this initiative you may 0 or via raise will be treated in confidence
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See overleaf for declaration



What we still need to work out...

- Koha
- Strategies for engaging youth
- Strategies for engaging family-whanau
- Collating and interpreting data



Thoughts, Suggestions, Ideas???

