

SERVICE SPECIFICATION

Service Specification No.	To be agreed
Service	Transitions Service: 15-25 years
Commissioner Lead	Michael Bennett
Provider Lead	Geoff Watts/ Jo Banks
Period	To be agreed
Date of Review	To be agreed

1. Population Needs

National/local context and evidence base

To date there are no specifically commissioned service for young people and young adults (15-25 years) with serious mental health problems. Services are delivered by two providers who deliver a CAMHS and Early Intervention in psychosis service. The Transition service has a number of benefits:

- Strengthening the competence of the service to support young people with the more serious mental health problems and over a more relevant age range.
- Reducing duplication and fragmentation, e.g. the service for Early Onset Psychosis is currently provided by SSSFT and in many cases overlaps with CAMHS.
- Providing consistency through transition (cited by Parents as a key problem) managing the emphasis from current practice which relies on clinic based appointments, to a more user centred approach with outreach and support in home and community settings
- Facilitating greater developmental opportunities for CAMHS clinicians who are currently isolated from Adult Mental Health expertise.
- Facilitating expertise for supporting other colleagues and partners, e.g. Health Visitors

Establish a single point of access with each council, e.g. Family Connects in Telford and Wrekin/First Contact Point in Shropshire has advantages of:

- Improving partnership working in each LA/PCT area
- Allowing deployment of shared definitions of who does what within 4 tiers of need
- Facilitating speedy progression of referrals to the 'right service, right place, right time, whether that be a Children's Centre, Speech, or medical appointment
- Ensuring consistency of triage and screening arrangements
- Using resources more efficiently by streamlining processes

The principles of the new provision were identified are:

- Prevention and Early Intervention
- Single point of Access and seamless pathway
- Holistic Approach
- Effective transition across each developmental stage
- Clinical Effectiveness
- Delivers Change quickly

- Value for money

2. Scope

Aims and objectives of service

Aims:

The aim of the service is to meet the mental health needs of young people and adults between the ages of 15 and 25 by offering specialist mental health services through a multi-disciplinary approach. The service aims to bring together the Tier 2 and 3 CAMHS services and aspects of the Early intervention in Psychosis team, CMHT and psychological therapies and address all transitions between the two age groups.

The service will meet the statutory requirements of young people and ensure effective age - appropriate interventions are provided.

The Transition service will work flexibly to meet the range of mental health needs for individuals between 15 and 25 years across current Tier 2 and Tier 3 boundaries to meet individuals needs, including supporting those within the Placement Stability team / Looked After Children/ Children in Need.

Objectives:

The objectives of the service relate to those indicated within the National Service Framework for Children, Young People and Maternity Services Standard 9 and Policy Implementation Guidance for Early intervention in Psychosis, NHS Plan and national mental health strategy 'No Health Without Mental Health'.

To work within a bio-psycho-social approach that is delivered intensively and sensitively during the episode of intervention and treatment and provided in the least restrictive and stigmatising environments, that emphasises choice and promotes recovery.

All staff working directly with young people and young adults has sufficient knowledge, training and support to promote the psychological well-being of young people and young adults and their families and to identify early indicators of difficulty. Also, arrangements are in place to ensure that specialist multi-disciplinary teams are of sufficient size and have an appropriate skill-mix, training and support to function effectively.

Protocols for referral, support and early intervention are agreed between all agencies and evidence of effective multi agency working arrangements is demonstrable. Early identification and preventive interventions will mitigate against poor longer term social, psychological and mental health outcomes for people.

Reduce the length of time young people remain undiagnosed and not receiving appropriate interventions and treatment, providing early interventions and emphasise need for social as well as symptomatic recovery.

Provide a range of interventions to young people and young adults and their families who are experiencing a mental health problem including a first episode of psychosis, embracing diagnostic uncertainty, managing At Risk Mental States (ARMS) neurotic and psychotic symptoms/experiences. The needs of young people and young adults with complex, severe and

persistent behavioural, psychosocial and mental health needs are met through a multi-agency approach.

Ensure the services and interventions provided for each young person and young adult and family is orientated to culture, age and gender.

An approach with an emphasis upon developing meaningful and sustained engagement based on an assertive outreach principle - in which failure to engage should not automatically lead to case closure. Provide sustained and intensive evidence based interventions, particularly in the early phase of a person's psychosis or other mental health need.

Increase stability in the lives of people, facilitate development and provide opportunity for personal fulfilment. Provide a user centred service i.e. seamless service available that effectively integrates child, adolescent and adult mental health services and works in partnership with primary care, education, social services, youth and other services with an emphasis on normal social roles and individuals developmental needs, particularly in education, training and employment

Children and adolescent mental health (CAMH) professionals provide a balance of evidence based indirect and direct services including but not limited to; individual and family work for example: Cognitive Behavioural Therapy, Behaviour Therapy, Family therapy, Systemic therapy, Psychotherapy, Play therapy and post-abuse therapy

Specialist adult professionals (EIP, CMHT and/ or psychological therapies practitioners provide a range of evidence based interventions in line with Policy Implementation, evidence-based and/ or NICE guidance. This will include motivational interviewing, CBT, coping strategy enhancement as well as medical interventions.

The Transition service will be flexible where young people and young adults and their families are seen in order to improve access to high levels of the Transition service. There will be close collaboration and working with the Councils Transitions and Early Intervention teams.

Young people and young adults are able to receive urgent mental health care when required, leading to a specialist mental health assessment where necessary within 24 hours or the next working day. This may include utilising the Reaching Out Service or CR/HT where appropriate.

The Transition service will meet the needs of young people and young adults 15-25 years where appropriate ensuring the best use of resources, clinical expertise and transition.

All young people and young adults with both a learning disability and a mental health disorder have access to appropriate Transition service interventions.

Young people and young adults who require admission to hospital for mental health care have access to related care in an environment suited to their age and development. This will mean liaison with the NHS Commissioning Board for Tier 4 beds for under 18 years or admission to the Redwood Centre

When young people and young adults are discharged from in-patient services into the community and when young people are transferred from child to adult services, their continuation of care is ensured by use of the 'care programme approach'.

To provide support to families including involving in assessment, care planning and reviews of individuals care.

Key Principles

The patient experience will be underpinned by young people and young adults remaining central to the service. Key principles to support this include:

- Young people and young adults and their carers will receive high quality, safe, accessible, equitable, and timely Mental Health services;
- Services will be responsive and based on the views and needs of young people, young adults and their carers;
- Problems will be addressed at the lowest tier of service;
- Promotion of Mental Health well-being and the prevention of Mental Health problems will be fundamental to the service;
- Services will take into account best available evidence of effectiveness and efficiency, deliver the best possible outcomes and will be delivered by a competent and skilled workforce;
- Practice will be holistic, including key partner agencies in the assessment and planning of services.

What the Transition service will do

- Advice giving - information and signposting
- Consultation - supporting other clinicians
- Opinion-giving - assessments and clinical opinion to responsible teams
- Shared Care - including with 5-15 service, Placement Stability team/ Looked After Children team, primary care, CMHT
- Care responsibility - care manage and provide interventions
- Clinical interventions, diagnosis (eg of ADHD, ASD, functional and psychotic disorders)

Service description/care pathway

The service will operate flexibly from 9am - 5pm for referrals requiring transition assessment in line with current contract.

Referrals will be processed through a single point of access.

Referrals will be acknowledged within 48 hours of receipt of referral

Individuals will be allocated to team members with the most appropriate skills to meet individuals needs.

Individuals will be discharged thoughtfully, when Recovery is evident or transferred to other specialist teams (eg CMHT) when clinically appropriate eg after 3 years for EIP service model and maintained within specific care clusters.

The Transition will provide an 'out of hours' service and respond to urgent need of those known to service. The Transition team will also work closely with the Reaching Out Service, RAID and CR/HT to ensure individuals needs met within community settings wherever possible.

Assessments will include appropriate standardised assessment tools.

The Transition service will ensure joint planning / solutions with Council services

Referrals will be accepted through the single point of referral. This may include a CAF, triage and/ or multi-disciplinary assessment.

Referrals will be received in a standardised way, to be determined.

Response times

- Priority 1/ Emergency: same day. These individuals will include, but are not limited to the following presentations: psychosis, severe depression, serious suicidal attempts, and eating disorders with sustained rapid weight loss and a BMI under 16)
- Priority 2 (acute and severe risk) within 3 days
- Priority 3 (medium risk) within 7 days
- Priority 4 (low risk) within 20 days (4 weeks from referral to assessment and a further 7 weeks to commencing treatment.)

- All referrals will be acknowledged via letter to the referrer within 48 hours of receipt
- All referrals will be date registered upon receipt
- All referrals will be screened and prioritised as either priority 1,2, or 3 cases
- Priority 1 cases out of office hours will be dealt with by the on call services including the Reaching Out Service, CR/HT and on-call psychiatrist.

Population covered

Telford and Wrekin and Shropshire Council boundaries and those with a GP within the geographical boundaries.

Any acceptance and exclusion criteria

Inclusion criteria:

All individuals between 15 and 25 with a mental health need

Individuals who meet Current Tier 2 and tier 3 CAMHS criteria including Looked After Children/ Children in Need

Individuals with a first episode of psychosis

Individuals of Telford and Shropshire in a placement

Autistic Spectrum Conditions

Behavioural Conditions that have not been resolved by other interventions

Exclusion criteria:

Interdependencies with other services

Family Connect/ First Contact Service (Single Point of Access)

Council Transition team and Early Intervention Services

5-15 years service

Placement Stability team/ LAC team

CAMHS Learning Disability Team

Reaching Out Team

CR/HT
Community Mental Health Team
School services eg Education

3. Applicable Service Standards

Applicable national standards eg NICE, Royal College

Applicable local standards

The Transition service will be fully conversant with local Safe Guarding procedures for Children and Adults.

Service evaluation will be through customer feed back via 'listening to you' and via the review / monitoring process.

4. Key Service Outcomes

HoNOSCA (Health of the Nation Outcome Scales for Child and Adolescent Mental Health) improvements

Adult related Outcome scales improvements

CQUIN for Care Planning achieved

CQUIN for Carer Feedback achieved

Service User Feedback

Carer Feedback

Reductions in admissions to SATH for DSH

Reduction in Tier 4 admissions

Reductions in length of admission

Reduced re-admissions

Improved age appropriate interventions

Increased social inclusion: training, opportunities for volunteering, employment, permanent accommodation

Wider range of evidence-based interventions used

Reductions on placement breakdowns of Looked After Children/ Children in Need

Reductions in Out of County Placements

Meeting current performance indicators for CAMHS, EIP, CMHTs, Psychological therapies

5. Location of Provider Premises

The service will be delivered within locations to be agreed within Telford and Shropshire

6. Individual Service User Placement