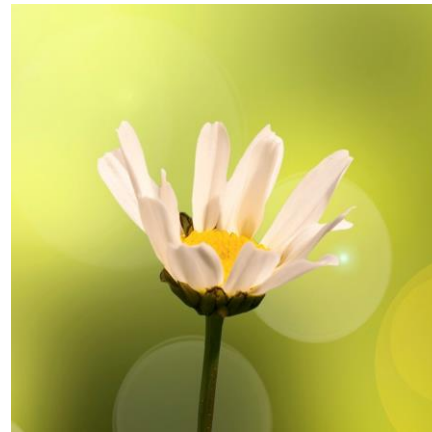
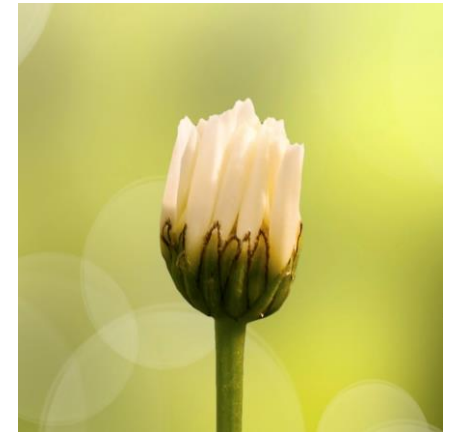
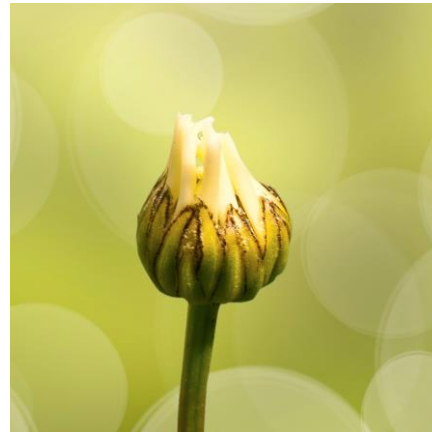


# Conceptual mapping of youth to adult mental health transition programs and strategies: Application of a conceptual framework

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May 10, 2016



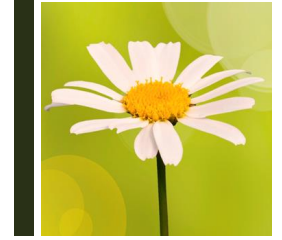
*Youth to Adult Transitions  
in Health Care – The Case of  
Mental Health Services in Ontario*

# Background



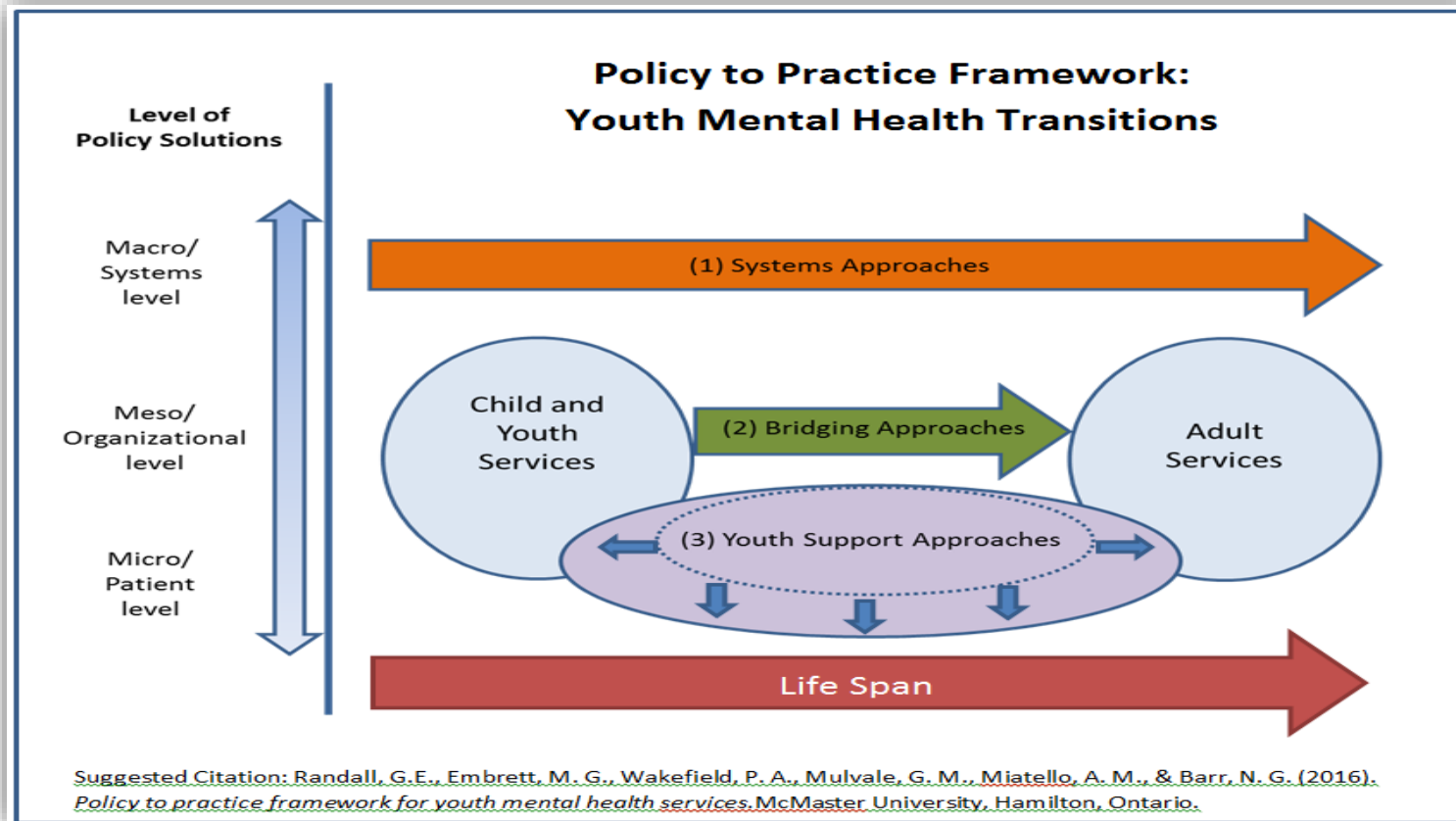
- High performing health systems provide seamless, person-centred, quality care to individuals throughout their care pathway.
- One area of poor performance in health systems is observed when a patient transitions across different services and delivery sites (e.g., shift from child/youth to adult services).
- Youth to adult transitions in mental health are often arduous experiences, with many services frequently reduced or even unavailable, leaving these individuals to “fall through the cracks” of the health system.
- Transition programs have been developed to help address this area of poor performance.

# Study objectives



- Brief review of our transition policy framework
- Identify international programs addressing the issue of transitioning from child/youth to adult mental health services through a modified scoping review
- Classify the programs based on a conceptual framework for youth to adult mental health transitions developed during larger research project

# Conceptual framework



# Methods



- Modified scoping review
  - Defined eligibility criteria
    - A transition program aimed to help youth:
      - Transition into adult care, and/or
      - Transition into adulthood
  - Data sources
    - Found in previously conducted systematic reviews (70)
    - Key opinion leaders (40)
    - Reference chaining (68)
  - Data analysis
    - Classifying transition programs into the model

# Results (1)



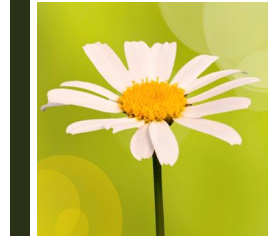
Conceptual Mapping Literature Review						
Source	Initial	Title Review	Abstract Review	Duplicates Check	Full Article Review	Final Articles Included
Literature review articles	70	51	27	16	120	9
70 articles references		200	48			11
SC/expert		40	40			8
SC/expert references		95(76)	22			10
<b>TOTAL</b>	70	291	137	16	120	<b>38</b>

# Results (2)



Conceptual Mapping of Transition Programs		
Approach Category	Sub category	Number of programs identified
<b>Single System Approach</b>		
	Holistic Model	0
	Mental Health Model	(1)
<b>Bridging System Approach</b>		
	Passive Support Model	0
	Transition Facilitation Model	5
	Transition Service Model	4
	Community Organization/Collaboration model	0
<b>Youth Support Approaches</b>		
	Collaborative Program Model	1
	Treatment Program Model	22
<b>TOTAL</b>		<b>33</b>

## *Results (3):* Single system approaches



- Absence of any single system approach
- Program with most similar characteristics:
  - South Verona Community Psychiatric Service
    - H/W: age eligibility



# Results (4) Bridging approaches: Transition facilitation models examples



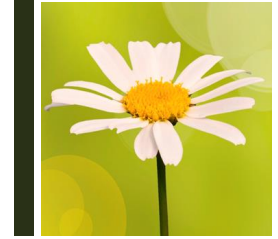
Program	Description	Evaluation	References (examples)
<b>The Transitional Years Mental Health Service, UK</b>	The team works alongside CAMHS, AMHS, young people's services and young people themselves, in identifying and supporting access to age-appropriate services that are tailored to the needs of specific individuals.	88% of referrals of youth to adult care were made (137/156) . Average of 61 days from first referral to assessment by coordinator. Average of 100 days from assessment to AMHS appointment. Once on wait list there was an average wait of 243 days.	Cappelli, Mario. (ND) Evaluation of the Ottawa-Carleton Transitional Youth Program: Transitional Program Based on a Shared Care Management Model. Presentation
<b>The Humber Project, UK</b>	Collaboration between AHMS and CAHMS that developed models for dealing with mental health issues by creating efficient pathways into appropriate care.	N/A	YoungMinds. 2006b. Emerging practice: examples of mental health services for 16-25 year-olds. London: YoungMinds.
<b>IWK hospital</b>	In hospital program aimed at helping youth transition to adult services	N/A	YoungMinds. 2006b. Emerging practice: examples of mental health services for 16-25 year-olds. London: YoungMinds.

# Results (5) Bridging approaches: Transition service models



Program	Description	Evaluation	References
<b>YouthSpace, UK</b>	<p>Designed to improve access to services through two pathways:</p> <p>1) A youth access pathway: provides assessment and formulation to a GP to develop EB intervention/ medication</p> <p>2) Improve transitions from CAHMS to AHMS.</p>	<p>N/A (In Progress)</p>	<p>McGorry, P., Bates, T., &amp; Birchwood, M. (2013). Designing youth mental health services for the 21st century: examples from Australia, Ireland and the UK. <i>The British Journal of Psychiatry</i>, 202(s54), s30-s35.</p>
<b>Good 2 Go Transition Program, Toronto, Sick Kids</b>	<p>Designed to assist youth with a chronic condition in transitioning to adult services (mental health included).</p>	<p>N/A</p>	<p>Mental Health Commission of Canada. (2015). <i>Taking the Next Step Forward: Building a Responsive Mental Health and Addictions System for Emerging Adults</i>, Ottawa, ON: Mental Health</p>

# Results (6) Youth Support models: Collaborative Program Models



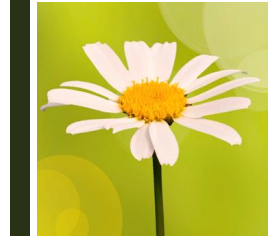
Program	Description	Evaluation	References
<b>Headspace, Australia</b>	<p>An enhanced primary care model that establishes accessible centers that target youth with mental health problems health needs by providing a 'one-stop shop', with close links to locally available specialist, schools, and community-based services.</p>	<p>93% of youth reported they were satisfied with the care they received (men and women).</p>	<p>Cappelli, M., Davidson, S. &amp; Vloet, M.A. (2011). We've got growing up to do: Policy and practice in youth mental health transitions.</p>

# Results (7) Youth Support models: Treatment program approaches



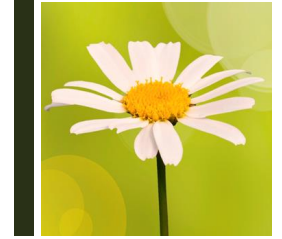
Program	Description	Evaluation	References
Jigsaw, Ireland	Provides network of programs for youth who are experiencing mental health difficulties.	Between 2008-2015 Jigsaw has helped 12,548 youth  High goal achievement levels	McGorry, P., Bates, T., & Birchwood, M. (2013). Designing youth mental health services for the 21st century: examples from Australia, Ireland and the UK. <i>The British Journal of Psychiatry</i> , 202(s54), s30-s35.
Transition to Independence (TIP)	The TIP model is a framework to design a series of supports for youth.	Positive improvements in: 1)Employment 2)Completion of education goals 3)Justice system involvement 4)Use of intensive mental health/substance abuse services 5)Use of public assistance	Harrison et al. (2003)... Karpur, A., Clark, H. B., Caproni, P., & Sterner, H. (2005). Transition to Adult Roles for Students With Emotional/Behavioral Disturbances A Follow-Up Study of Student Exiters From Steps-to-Success. <i>Career Development for Exceptional Individuals</i> , 28(1), 36-46.
Project RENEW (Rehabilitation, Empowerment, Natural Supports, Education, and Work),	A structured school-to-career transition planning and individualized wraparound process for youth with emotional and behavioral challenges.	Improved educational outcomes (increased graduation rates, post-secondary education participation) Increased employment rates Improved functioning in school and in the community	Karpur, A., Clark, H. B., Caproni, P., & Sterner, H. (2005). Transition to Adult Roles for Students With Emotional/Behavioral Disturbances A Follow-Up Study of Student Exiters From Steps-to-Success. <i>Career Development for Exceptional Individuals</i> , 28(1), 36-46.

# Implications



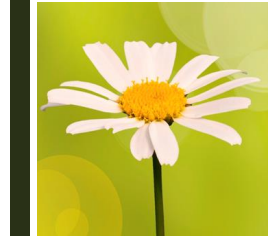
- Many existing health systems do not incorporate effective mechanisms that seamlessly transition youth out of CAMHS or into AMHS.
- Many jurisdictions address this issue by funding external initiatives, rather than incorporating new functions into their existing health system.
  - Evidence of ‘layering’ new policies over existing ones (Hacker 2004), rather than revising current policies that lead to a gap in transition.
  - Disconnect grows between the old system and new system and fragmentation occurs.

# Conclusion



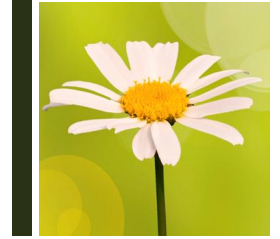
- Many of the programs identified in this review, particularly those in the YSA category, have the primary goal of addressing the needs of the youth in transition through micro level policies
- Rather than revising the current system to eliminate some problems with transitions (i.e., CAMHS to AMHS), these programs deal with the problems after they arise
- SSA is an ideal goal for health systems to strive for, however in lieu of SSA, YSA are more comprehensive than BSA and have more evidence to support their effectiveness

# Acknowledgements



- This project was funded by the Government of Ontario through a Ministry of Health and Long-Term Care Health System Research Fund grant entitled 'Harnessing Evidence and Values for Health System Excellence'
- The views expressed in the presentation are the views of the authors and should not be taken to represent the views of the Government of Ontario

# Questions



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