

May 2022



# Sort the Switch

The experiences of young people moving from Specialist Child and Adolescent Mental Health Services to Adult Mental Health Services in Wales

## Executive Summary



**Suggested citation:**

Mind Cymru (2022) *Sort the Switch: The experiences of young people moving from Specialist Child and Adolescent Mental Health Services to Adult Mental Health Services in Wales*. Cardiff: Mind Cymru. Available at [www.mind.org.uk](http://www.mind.org.uk)

# About this research

# Our objectives

- To hear from young people about their experiences of moving from Specialist Child and Adolescent Mental Health Services (SCAMHS) to Adult Mental Health Services (AMHS) in Wales between 2017-2021.
- To identify the 'pain points' in the process of moving from SCAMHS to AMHS for young people, identifying which are most common and impactful.
- To co-produce recommendations for decision makers in Wales with young people on how to improve this experience.
- To identify the focus of Mind Cymru's campaign for young people moving from SCAMHS to AMHS.

# Our approach

## Sign up form

- We created a sign-up form hosted online on the survey platform Qualtrics.
- The sign-up form was shared amongst our network of local Minds in Wales, as well as key partners working with young people. It was also shared on our social media platforms.
- We had a total of 33 responses.
- 16 young people expressed interest in speaking to us further.

## Interviews with young people

- We spoke to 8 young people through semi-structured interviews in November 2021. The full sample can be found on page 18 of our full report.
- Interviews were conducted over Zoom and on the phone.
- Young people had to have moved from SCAMHS to AMHS, tried to move or be in the process of moving in Wales between 2017-2021.
- A sampling matrix was used to ensure diversity across location in Wales, gender, ethnicity and sexual orientation.
- Interviews were professionally transcribed.

## Identifying themes

- Data was initially analysed thematically using the Framework Approach to identify emerging themes.
- Transcripts were read by all analysts independently so they could code them and check if the emerging themes were accurate.
- Regular meetings were held to discuss and amend the themes.
- Finally, a concise thematic structure was developed.

# Key findings

# Overview of themes

Overarching themes

themes

Poor information offered, including on the rights of young people

Inconsistent use and follow through of care and treatment plans

High thresholds for SCAMHS and AMHS referrals to be accepted

Feeling abandoned/cut-off from SCAMHS

Age still dominates decision-making process for moving from SCAMHS to AMHS

Sub-themes

Lack of information on what moving on from SCAMHS meant and would look like and the different professionals involved

No care and treatment plan in place

Thresholds are different for SCAMHS and AMHS

Not enough interaction with AMHS before moving

No offer of advocacy support when clear need

Where used, care and treatment plans are not person-centered

Proof of being unwell sought

Lack of interim support whilst moving from SCAMHS to AMHS

Poor signposting upon discharge

Proof of still being unwell to continue receiving support

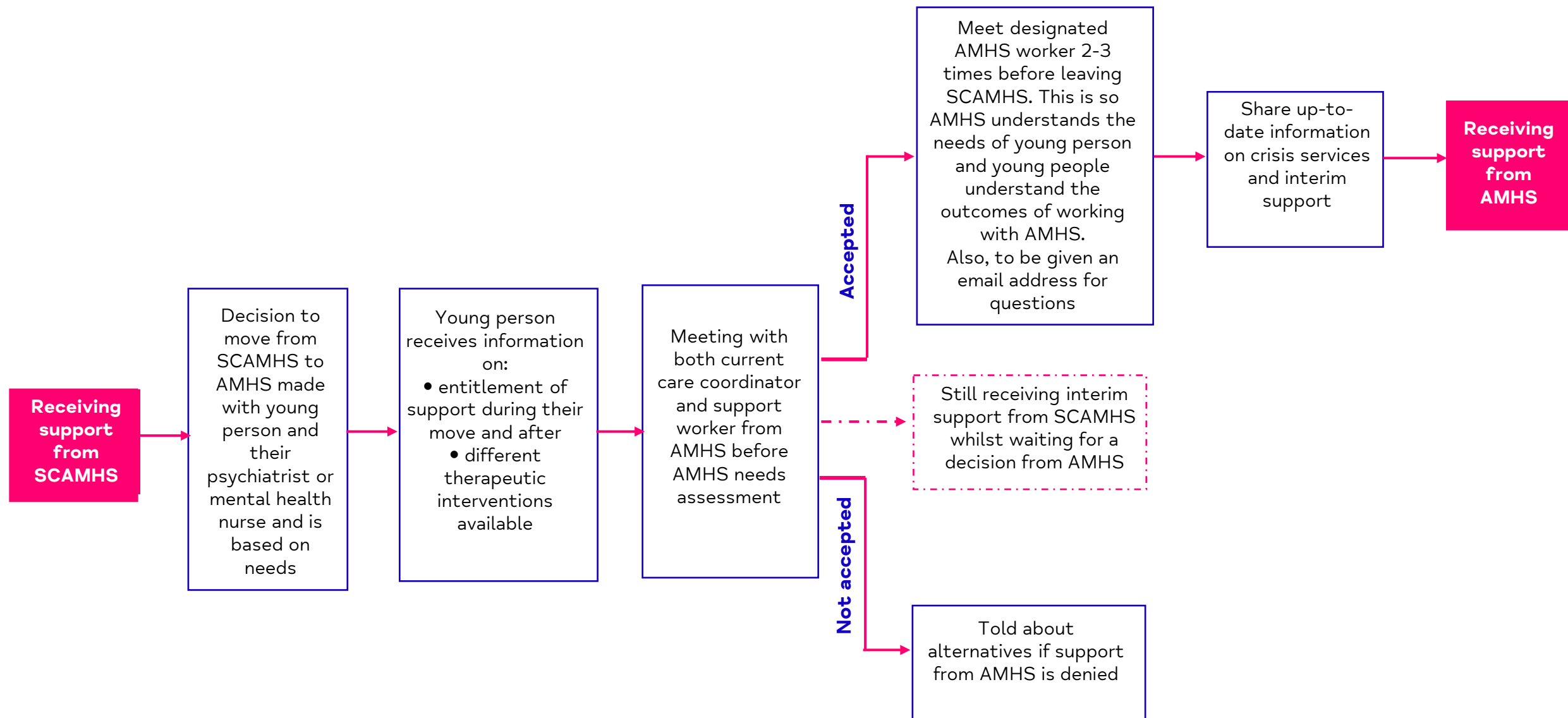
Poor communication between different mental health service staff and between different statutory agencies

Theme running throughout

# Conclusion

- Overall, the young people we spoke to told us that change needs to happen in the following areas:
  - a) The **information** giving process to young people
  - b) The **care and treatment plan** developing process
  - c) The **criteria for acceptance** into SCAMHS and AMHS
  - d) The **support offer** to young people when there is a **gap** between SCAMHS and AMHS
  - e) The **decision-making process** for moving from SCAMHS to AMHS
- Seeking **proof of being unwell** and **proof of still being unwell** to continue receiving support are indicators of a system which isn't currently meeting the needs of young people. This is how the process and system of moving from SCAMHS to AMHS is **making young people feel**. Achieving **positive change** in the areas mentioned by young people within this report has the **potential to avoid continuing this significant impact**.

# An 'ideal' move for young people

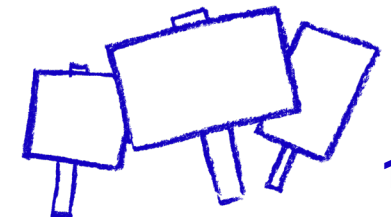




# Recommendations

# Overarching recommendation:

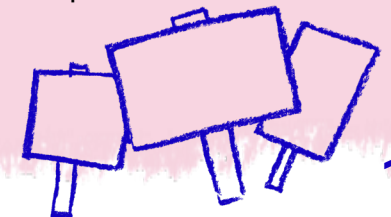
- Given its non-statutory status, it is vital that **Welsh Government and Local Health Boards** improve their ability to monitor and demonstrate that all principles and aspects of the Care Transitions Guidance are fully implemented. This is particularly important when ensuring that the process of moving from SCAMHS to AMHS for young people is based on their needs, and not on their age.



# Underpinning recommendations

- **Right to be heard and taken seriously:**

- **Welsh Government and NHS Wales** should ensure that the current Care Transitions Guidance is amended to better reflect the importance of the voice of young people being listened to and heard. An explicit reference to Article 12 of the UNCRC should be included, alongside how this can and will be achieved in practice.
- **Welsh Government** should immediately ensure that:
  - a. As a matter of urgency, local transition workers guarantee that the voices of young people are sought, listened to, and inform both their own care pathway and service improvement locally.
  - b. Each local transition protocol includes a participation strategy and platforms/opportunities for young people's voices to be heard are developed immediately.
  - c. Local Health Boards use processes currently available to them to enable the sharing of good practice on involving and listening to young people and ensure the workforce is supported to achieve real change.
- **Welsh Government** should also work to ensure that:
  - a. Local Health Boards are required to audit and monitor the level of involvement of young people, both in their individual care journeys and in service improvement processes. SCAMHS and AMHS should regularly collect patient satisfaction surveys and use these to improve service planning and delivery. Young people should also form part of service review measures and contribute to co-designing service improvements.
  - b. Local Health Boards develop appropriate systems to ensure learning is implemented. A reporting requirement should be secured to achieve this under any revised national strategy for mental health in Wales.



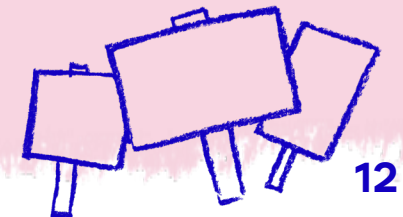
# Underpinning recommendations

- **Right to be heard and the role of Advocacy:**

- **Welsh Government** should explore all avenues to extend the right to advocacy to young people receiving secondary care mental health services, with clear and urgent timescales for delivery. For example, Welsh Government could consider extending Part 4 of the Mental Health (Wales) Measure 2010 to ensure that young people moving from SCAMHS to AMHS can access support from an advocate. Welsh Government should commit to comprehensively resourcing this expansion.

- **Right to Information:**

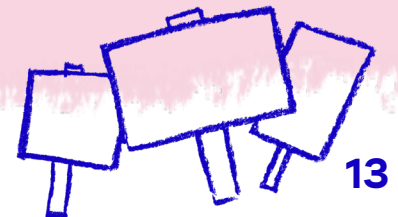
- **Local Health Boards** should urgently audit the information available to young people on moving from SCAMHS to AMHS in their area.
- **Local Health Boards** should ensure that the information available to young people on moving from SCAMHS to AMHS in their area is always co-produced and reflects what information young people say they want and need.
- **Local Health Boards** should better enable transparency and accountability by ensuring that their local transition protocol is known and understood by young people and their families/carers, and is made available and accessible upon request.
- **Welsh Government** should better enable transparency and accountability by ensuring that the results of any co-review of the current guidance are communicated to young people and their families/carers to ensure a good understanding of national service requirements.



# Underpinning recommendations

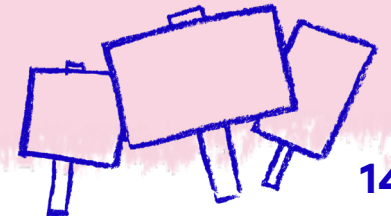
- **Right to good health and healthcare:** (support on discharge)
- **Local Health Boards**, alongside all relevant partners, should ensure that a comprehensive, needs-led package of support is guaranteed for any young person discharged from SCAMHS. Built around their care and treatment plan (CTP), this should be developed, with the young person, to identify the best options available to them through good discharge planning.
- **Local Health Boards** must ensure that all care and treatment plans for young people are fully co-produced, understood and include information, tailored to the particular needs of the individual, on where and how to access support when required. The care and treatment planning process should effectively prepare young people for discharge and assure them that they remain fully supported by the wider mental health system, whenever they need it.
- **Right to good health and healthcare:** (High thresholds from SCAMHS and AMHS)
- **Local Health Boards** should ensure that thresholds for accessing both SCAMHS and AMHS are known and well understood amongst young people and their families/carers.
- **Welsh Government and NHS Wales** must look at how thresholds align between SCAMHS and AMHS to ensure young people with continuing mental health support needs don't fall through any arbitrary service gap.
- **Welsh Government and NHS Wales** must urgently bring forward proposals for a mental health service that supports children, adolescents, and young adults up to the age of 25
- **Welsh Government, alongside all relevant partners**, should ensure that the principles of a 'no wrong door' approach<sup>6</sup> are extended to young people aged 18 and over, moving from SCAMHS to AMHS.

<sup>6</sup> Children's Commissioner for Wales (2020) *No Wrong Door: bringing services together to meet children's needs*. Available at: <https://www.childcomwales.org.uk/publications/no-wrong-door-bringing-services-together-to-meet-childrens-needs/>



# Underpinning recommendations

- **Right to good health and healthcare:** (Feeling abandoned/cut-off from SCAMHS)
- **Welsh Government and Local Health Boards** should ensure that no young person assessed as in need of AMHS is discharged from SCAMHS before this support is actively in place.
- **Local Health Boards and NHS Wales** should work at pace to ensure that the period of joint working expected of both SCAMHS and AMHS is clearly enforced and guaranteed for every young person.
- **Local Health Boards** should ensure that young people moving from SCAMHS to AMHS are not negatively impacted by the existence of AMHS waiting lists, but instead receive continued support from SCAMHS and are fast tracked, as appropriate.
- **Right to a Care and Treatment Plan:**
- **Welsh Government with Local Health Boards** must review local compliance with Part 2 of the Measure in its application amongst young people in receipt of SCAMHS. This should support local capacity through exploring compliance by case numbers per care co-ordinator to identify gaps, areas for improvement, and ensure that the necessary actions are undertaken to guarantee full compliance.
- **Welsh Government** should action at pace, the specific recommendation set out within the Duty to Review Final Report to improve the accessibility and applicability of CTPs to all service user groups.
- **Welsh Government with Local Health Boards** should provide suitable training on how to co-produce a SMART CTP and ensure mechanisms to monitor its application in practice are in place.



# If you need support:

## **Mind's Information Hub for Young People**

When you're living with a mental health problem, or supporting someone who is, having access to the right information is vital.

<https://www.mind.org.uk/information-support/for-children-and-young-people/>

## **Mind's Information on Moving to Adult Services**

Mind's guide on what to expect when moving from child to adult mental health services, and what to do if things don't go the way they should:

<https://www.mind.org.uk/information-support/for-children-and-young-people/moving-to-adult-services/>

**For any questions or further detail  
on the findings, please contact  
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