

Policy for referrals to Children and Adolescents with Neurodevelopmental Disorders and Learning Disabilities (CAMHS- LD)

1. Introduction

- 1.1 It is essential that there is continuity of care for young people with LD where a number of services are often involved in their care. The aim of this transition policy is to help smooth this transition process for those known to child mental health services with learning disabilities.
- 1.2 This policy outlines the arrangements for 16-18 year olds currently seen and newly referred to the Service for Children and Adolescents with Neurodevelopmental Disorders and Learning Disabilities (CAMHS- LD) in Haringey. It will outline:
- assessment and monitoring
 - transition and transfer into Haringey Learning Disabilities Partnership, the combined team for people with learning disabilities
- 1.3 The aim of the policy is to ensure that young people receive the appropriate care and assessment from the services best equipped to provide the service required
- 1.4 There were a number of agencies who were consulted in the development of the policy
- Haringey Teaching Primary Care Trust
 - Children, Young People & Family Services
 - The Children's Disabled Team Haringey
 - Special Schools in Haringey
 - Generic CAMHS in Haringey
 - Adolescent Outreach Team Haringey
 - The Transition Team Haringey
 - The Combined Team for People with Learning Disabilities Haringey (CTLD)
 - CAMHS-LD Child mental health service for children with severe learning disabilities and mental health issues

2. New referrals 16-17 years 3 months to scan

- 2.1 For any new referral received and accepted by CAMHS-LD service between the ages of 16 years, and 17 years 3 months (in or out of full time education) a copy of the referral will also be sent to the CTLD on a Haringey CAMHS referral form by the team manager of the CAMHS –LD service.
- 2.2 A joint assessment between the CAMHS-LD Team and CTLD will be arranged. The CAMHS-LD service will continue to retain clinical responsibility.

- 2.3 Depending on the nature of the case, the CAMHS-LD service may also involve the Early Intervention Psychosis team (EIP), Antenna or the Adolescent Outreach Team (AOT). This arrangement will be made on a case by case basis. The CAMHS-LD service will continue to retain clinical responsibility.
- 2.4 For a new referral 17 yrs 3 months or older, in the majority of cases a referral should be made directly to the Combined Adult LD service. This is due to the nature and complexity of the cases referred.
- 2.5 The majority of young people with learning disabilities will be identified by the age of 14 as requiring a transition social worker at aged 16.
- 2.6 It is expected that the majority of referrals will come from Haringey residents seen by Child Health, the 4 Special schools in Haringey, Tree House and the LD Sixth Form.
- 2.7 If the young person attends a special school in Haringey, the CDC paediatricians will continue to provide annual medicals up to 19 years old. The young person's GP or adult physician will manage any acute medical issues.

3. Open cases to CAMHS-LD Team: 16-18 years old requiring transfer to adult services.

- 3.1 The CAMHS-LD team will have already assessed and be in the process of treating young people with learning disabilities and mental health problems/challenging behaviours who require ongoing mental health and therapeutic involvement as adults. Where appropriate they will continue with the therapeutic work and facilitate transfer to adult services.
- 3.2 At the age of 14, at the age 14 SEN panel, children requiring a transitional Social worker are identified (the adult combined team social work lead is part of this panel) and plans will be made to allocate a Social worker by the age of 16 from the adult combined team.
- 3.3 At the age of 17 years and 3 months, for the appropriate young people with LD and mental health issues /challenging behaviours, CAMHS-LD will make a referral to CTLD, if they meet the eligibility referral criteria.
- 3.4 For young people with severe mental illness and learning disability, transfer of care will need to take place within the CPA framework A CPA meeting hosted at a venue chosen by the young person will take place when the young person reaches 17 years and 6 months. The CPA meeting will be arranged by the care co-ordinator. This meeting will only take place if attended by representatives from CAMHS-LD, CTLD Mental health and Social Care. The CTLD will have identified a suitable care coordinator who should attend this meeting. The date for the transfer of care to be held around the time of the young person's 18th birthday will be agreed and set at this meeting.
- 3.5 When the young person reaches the age of 17 years 9 months, the final stage of the handover meeting will commence. This will entail joint working between CAMHS-LD

and the Combined Team clinicians, with the responsibilities agreed at the CPA meeting, coordinated by CAMHS-LD care coordinator held at the age of 17 years and 6 months.

- 3.6 Depending on the needs between the age of 18-19 years (if the young person is still in full time education for example), the scheduled transfer of care will take place around the young person's 18th birthday when they become the full responsibility of the Adult Combined LD team. The case will then be closed to CAMHS-LD.
- 3.7 If the young person attends a special school in Haringey, the CDC paediatricians will continue to provide annual medicals up to 19 years old. The young person's GP or adult physician will manage any acute medical issues.

4. Young People 16-17 yrs 3 months old with Learning Disabilities not known to CAMHS-LD/AOT/Generic CAMHS/EIP

- 4.1 Please follow agreed protocol of the CTLD. A referral can be made for psychological or psychiatric input via the transition team, to the CTLD.
- 4.2 There will be a subgroup of more able young people who are known to Child Health, the specials schools in Haringey, the AOT, EIP or generic CAMHS who are not known to the CAMHS-LD team.
- 4.3 If mental health input is needed, and the young person does not meet the referral criteria for SCAN, the young person should be referred to CAMHS or the AOT. From September 2008, the Single Point of Entry referrals system will identify the most appropriate service.

5. Emergency psychiatric provision for 16-18 year olds

- 5.1 **Mild LD:** For young people that cannot be held in the community due to a deteriorating mental health, and are verbal, they may be eligible for admission to New Beginnings Inpatient Unit, Edgware Hospital, Barnet. The duty CAMHS doctor would make such as referral if there are mental health issues leading to deterioration. If the issues surrounding deterioration are due to difficulties with social care then the duty social worker for should make an assessment and consider emergency respite.
- 5.2 **Severe LD:** For more severely learning disabled young people, admission to an NHS LD inpatient unit if a bed is available could be considered. An independent provider may be sought as an alternative, with agreement and in consultation with the Commissioners.
- 5.3 **A and E; ERC:** Young people over 16 years old, with a learning disability, presenting in an emergency (St Ann's Hospital ERC or North Middlesex Hospital) should be seen by the Adult Psychiatry duty doctor. There is no Specialist Consultant Psychiatrist in LD cover out of hours for Child or Adult Psychiatry. For 16-18 year olds, the duty doctor can contact the on call Consultant Child Psychiatrist via the North Middlesex switchboard to provide telephone advice. If in the rare event the young person is

admitted to a St Ann's Hospital bed the on call Adult Psychiatrist assumes Medical Responsibility.

5.4 Special nursing 1:1 should be sought for any young person with an LD admitted to an acute ward.

6. Arbitration/ Dispute resolution

6.1 In the event of a dispute about transferring care, a meeting will be called involving all relevant parties within 2 working weeks and an agreement reached as to the best and most appropriate course of action.

6.2 The Assistant Directors from the Adult LD and CAMHS LD services will act as arbitrators in such a dispute.

7. Inpatient transition

7.1 Transferring patients between services requires careful planning to ensure a smooth transition of care. This is to ensure that the young person and their family, as well as staff are clear of their change in roles and responsibilities.

7.2 Whilst the young person is an inpatient:

- Their inpatient care-coordinator will facilitate CPA meetings with community services every 3 months;
- When the young person is 17.6 years, a CPA meeting will need to be co-ordinated by the inpatient service to co-ordinate transfer to adult LD inpatient/community services.
- This meeting will take place in the inpatient unit and will only take place if attended by representatives from CAMHS-LD, Adult LD Mental health, Transitional Social worker and the inpatient unit.
- All care information including Risk Assessments and Care Plans should be discussed at the transfer meeting.
- The date for the transfer of care is to be held around the time of the young person's 18th birthday and will be agreed and set at this meeting.

7.3 When the young person reaches the age of 17 years 9 months, the final stage of the handover meeting will commence. This will entail joint working between the inpatient unit, CAMHS-LD and the Combined Team clinicians, with the responsibilities agreed at the CPA meeting held at the age of 17 years and 6 months.

7.4 The scheduled transfer of care will take place by the young person's 18th birthday when they become the full responsibility of the Adult Combined LD team. The case will be closed to CAMHS-LD. The young person may need to be transferred to an appropriate adult LD inpatient service or residential setting. This will be discussed at the joint CPA meeting at 17 years 6 months and 17 years 9 months.

7.5 For those young people that meet the criteria for CPA, consideration should be given to a graduated handover from CAMHS care coordinator to Adult LD Care coordinator.

7.6 Throughout the inpatient stay and during the discharge planning it is essential that CAMHS-LD, the Combined Team, Social Care and the commissioners of Adult LD services are involved in the planning process.

8. Conclusion

8.1 The aim of these procedures outlined are to ensure that 16-18 year olds with severe learning disabilities and mental health issues whom are seen by or referred to the CAMHS-LD service receive continuity of care upon reaching adulthood where possible,

8.2 These procedures depend upon services working together, reaching agreements about future care and planning together the smooth transition of care.

9. Review

9.1 This policy will be reviewed annually by Haringey Learning Disabilities Partnership with partners.