

**CAMHS to Adult Transition**

**HASCAS TOOLS FOR TRANSITION**

**Self Assessment Checklist**



Making a positive difference



Department  
of Health

**HASCAS**  
Health and Social Care Advisory Service

# CAMHS to Adult Transition Self Assessment Checklist

## Self assessment checklist for CAMHS to Adult services transition.<sup>1</sup>

### Introduction

HASCAS Tools for Transition are designed to be helpful in providing context, focus and practical solutions. They can be used for individuals or groups, practitioners or managers, providers or commissioners and ideally a combination of all.

This tool is designed for services to assess the extent to which their provision for 16-17 year olds, specifically those in transition, meets the standards of good practice required to promote continuity of care, identified and described in Forbes *et al* (2001).

### Why a self assessment checklist?

This is the third Tool for Transition, following the *Literature review for informed practice* and *The Bookcase: annotated bibliography*. The first two tools provide a framework and context, based on available literature, in which local staff and stakeholders can think about ways to provide more age appropriate services for adolescents and address the issues in transition to adult services.

The checklist is designed to help service staff focus their thinking by assessing where they are and helping to identify areas for improvement and change.

### How to complete this self assessment.

The checklist mirrors the findings of the research report, in which the aspects found to promote continuity are categorised as:

- Client factors
  - Young people components
  - Parent and carer components
- Service factors
  - Structural components
  - Process components
  - Outcome components

When completing the checklist you should start by checking that you have access to those individuals and groups who hold the appropriate knowledge. It is also recommended that you read the research report, following the hyperlink provided below.

The checklist is presented as a table in which column one describes the aspect of care being self-assessed. Column two provides suggested indicators to assist in your assessment. The page number of the report on which further detail can be found for that item is given in the third column.

### Using the table

Simply insert a tick, question mark, or cross in column four, to indicate that the aspect of service is adequate and satisfactory, in development, or not adequate or satisfactory.

In the final column you can add explanatory text to help in future action planning for improvements.
--

---

<sup>1</sup> Adapted from: Forbes, A., While, A., Ullman, R., Lewis, S., Mathes, L., & Griffiths, P. (2001) *A multi-method review to identify components of practice which may promote continuity in the transition from child to adult care for young people with chronic illness or disability*. National Co-ordinating Centre for NHS Service Delivery and Organisation R & D (NCCSDO)  
<http://www.sdo.lshtm.ac.uk/files/project/11-final-report.pdf>

CAMHS to Adult Transition  
Self Assessment Checklist

**Client factors**

<b>Young people components</b>	<b>Page</b>	<b>Suggested indicators</b>	<b>✓? x</b>	<b>Comments/evidence</b>
Flexible service provision	50	Timing of outpatient clinics, particularly availability of Saturday or out-of-hours clinics, to reduce the amount of time missed from school, work or leisure activities. Encouraging the young person to take some responsibility for their own care arrangements where possible.		
Development of skills of self-management/ self-determination	52	Assessment of life skills, helping the (transition) worker to identify areas of strength and need. May be individual or group work, or linked to formal employment and educational programmes.		
Support for psychosocial development	53	Recognition of the complexities of the young person's world, such as the competing pressures of family life, peers, relationships, the media and education. Attention given to these forces, providing psychological support to ensure they are addressed.		
Involvement of young people	54	Involvement of young people in organising and planning services to ensure that services address the issues of the young people who are using the service through the transition.		
Peer involvement	55	Encouragement of young people to provide information, run advisory groups, help design posters/leaflets with suitable language/illustrations, and ensure services are age-appropriate and reflect youth culture.		

CAMHS to Adult Transition  
Self Assessment Checklist

Support for changed relationships with parents/carers	56	Help for young people in taking a greater responsibility for their illness or disability, as far as they are able, acknowledging that continuity in care is about managing/encouraging personal growth. Assistance to redefine the relationship of the young person with their parents, through individual work, or some level of family therapy.		
Provision of choice	57	Provision of choices to young people, reflecting the opportunities of the wider peer group and acknowledging wider elements of continuity such as encouraging personal growth, responsibility and empowerment.		
Provision of information	57	Information available as verbal explanations, videos, leaflets, introduction to support groups and networks, peer support, web sites, and a telephone help-line. Includes: • details of what to expect • the information which they will need to safely manage their condition • details of any support which they may expect to receive a clear understanding of their role and responsibilities in their care • a knowledge of any potential challenges and hazards.		
Focus upon the young person's strengths for future development.	58	Assessments identify strengths/ abilities/supports. The transition plan builds on these and identifies sources of support to develop a positive transition programme.		

CAMHS to Adult Transition  
Self Assessment Checklist

<b>Parent and carer components</b>	<b>Page</b>	<b>Suggested indicators</b>	<b>✓? x</b>	<b>Comments/evidence</b>
Support for adjustment to changed relationships with young people	59	Provision of support for the family enabling them to adjust and, in turn, encourage and support the young person through this time of change.		
Parental involvement in service planning	60	Promotion of a family-centred approach and involvement of parents in organising and planning services to ensure that services address the issues of the young people.		
Family-centred approach	60			
Provision of information	61	Information available as verbal explanations, videos, leaflets, introduction to support groups and networks, peer support, web sites, and a telephone help-line. Includes: <ul style="list-style-type: none"> <li>• details of what to expect</li> <li>• the information which they will need to safely manage their condition</li> <li>• details of any support which they may expect to receive a clear understanding of their role and responsibilities in their care</li> <li>• a knowledge of any potential challenges and hazards.</li> </ul>		

CAMHS to Adult Transition  
Self Assessment Checklist

**Service factors**

<b>Structural components</b>	<b>Page</b>	<b>Suggested indicators</b>	<b>✓? x</b>	<b>Comments/evidence</b>
Transitional worker(s)	31	Planning of transitional care includes: • connection between child and adult provision, • multilevelled co-ordination -at the micro level this comprises identifying co-ordinated packages of care and at the macro level it comprises facilitating greater cooperation and liaison between departments and agencies • advocacy, ensuring that young people are properly represented in the transition process, helping them realise their needs and maximises their potential, • outreach work - meeting young people where they are.		
Transitional team(s)	33			
Professional continuing education	35	Availability and promotion of transition training for staff.		
Information for professionals	36	Provision of a central resource detailing the availability of services (including informal networks such as support groups and even materials such as leaflets or videos for young people) to enable the professional to identify and refer or provide the appropriate resources.		
Use of existing continuous services	37	The contribution of continuous services such as primary care is maximised.		

CAMHS to Adult Transition  
Self Assessment Checklist

Intra-organisation liaison and agreements	37	Co-operation and collaboration between agencies includes working together as a team, with joint responsibilities and shared decision making. This is reflected and supported by the service level agreement.		
Organisational planning frameworks	39			
Fostering equity and accessibility	40	Potential inequalities are identified and young people from different cultural backgrounds, or with health problems or disabilities, are not further disadvantaged through service arrangements.		

Process components	Page		✓? x	Comments/evidence
Preparation for transition	41	Provision of early preparation (at least one year before transfer), includes • a visit to the adult clinic or care setting prior to transfer • adult care arrangements established prior to discharge • involvement of the family in preparation for transition • provision of information, preferably written, about what to expect during and after transfer to adult-based care, • opportunity to discuss worries with the children's service provider • opportunity to see the children's service provider (i.e. without parents present) • a period of contact with children's service provider following transfer to adult-based care.		
Active management of transition	42			
Case management	43	Multi-agency provision is coordinated by case management, through transition worker or team.		

CAMHS to Adult Transition  
Self Assessment Checklist

Accountability for the process	44	Clear lines of accountability in managing the transitional process ensuring goals are met and that services fulfil their obligations.		
Strong therapeutic relationships	44	Provision of one-to-one working that facilitates the development of a therapeutic relationship based on trust		
Advocacy	45	Availability of an advocate who works with the young person to ensure their views are put forward and that they support any decisions made. Advocates may be professionals, representatives from voluntary organisations or a family members or friends.		
Joint management of care	46	Shared responsibility of care between child and adult services. This may involve sharing expertise, joint assessments, pooling resources or shared provision.		
Flexibility regarding point of transfer	47	Flexibility in the entry and exit criteria to child, transitional and adult services reflects a recognition that chronological age in itself is not sufficient to determine the most appropriate timing of transition, which is instead based upon other considerations including emotional maturity and health status.		

CAMHS to Adult Transition  
Self Assessment Checklist

Specific communication systems	48	Documentation includes important clinical or care details, records of needs assessment, goals set, plans of action, summaries of child-based care, and inter-agency agreements. These records form the basis of information sharing between the services involved in the transition and provide a way of monitoring progress or potential decline following the transition.		
Regular audit of service provision	49	Regular auditing of services in relation to their management of the transition highlight shortcomings in the care transition and how they can be addressed.		

Outcome components	Page		✓? x	Comments/evidence
Disorder-specific outcomes collected/recorded	49	Outcomes audited include: <ul style="list-style-type: none"> <li>• Clinical/care outcomes improved or maintained</li> <li>• Young person/family satisfaction with their experience of care</li> </ul>		
Generic outcomes eg user satisfaction collected	49	<ul style="list-style-type: none"> <li>• Young person/family knowledge about their condition improves or declines.</li> <li>• Young person is able to adopt adult roles.</li> <li>• Young person becomes self-determining in the management of their condition.</li> </ul>		