

Moving on safely – A national approach to improve healthcare transition and prepare for adulthood

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NHS England and NHS Improvement

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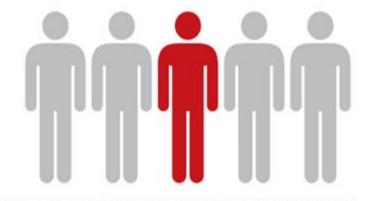


11.7m

young people in the UK aged between 10 and 24

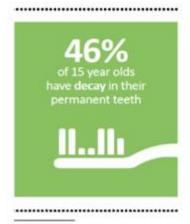
The effects of poor health care in adolescence can last a lifetime

One in five of the population is aged 10-24





The late teens are 'peak age' for health risks, with lifetime implications

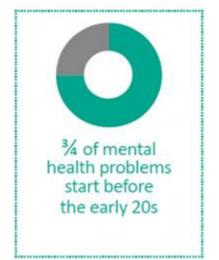


Young people aged

16-20 are the group

most likely to be
diagnosed with asthma

One in five 11-15 year olds are obese in England









The NHS Long Term Plan



National Context – CYP and the LTP

Children and young people account for 25% of emergency department attendances and are the most likely age group to attend A&E unnecessarily. Many attendances could be managed in primary care or community settings.

- Local areas to design and implement models of care that are age appropriate, closer to home and bring together physical and mental health services.
- ➤ Integration of primary and secondary care.

From 2019/20 **clinical networks** will be rolled out to ensure we improve the quality of care for children with long-term conditions such as asthma, epilepsy and diabetes.

Over the next five years, paediatric critical care and surgical services will evolve to meet the changing needs of patients, ensuring that children and young people are able to access high quality services as close to home as possible.

Selectively moving to a '0-25 years' service will improve children's experience of care, outcomes and continuity of care.



- Nice Guidance NG 43
- Nice Standard QS 140
- Transition CQUIN's
- Specialist Service Specifications
- Transition Benchmarks
- You're Welcome Refreshed Standards 2017
- National Service Specific Transition Quality Indicators e.g. diabetes
- Patient experience surveys e.g. Friends and Family
- PALS, complaints and incident reporting system



Aims of the improving healthcare transition Collaborative

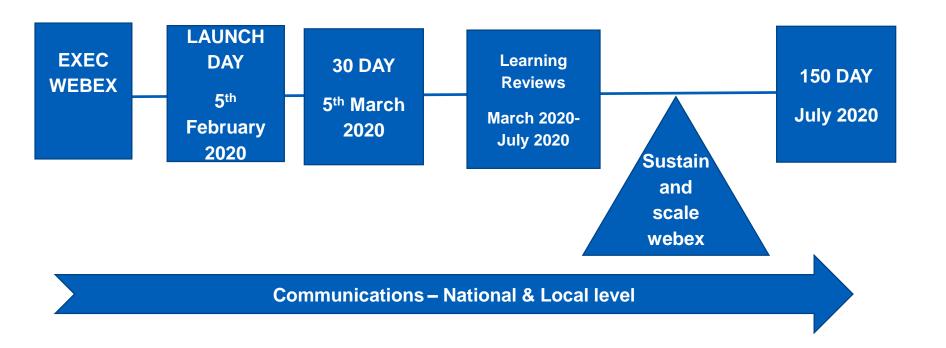
- Improve the experience of all young people and families when moving from children's to an adult service
- Achieve the best possible long term health outcomes for young people with long term conditions
- Provide an uninterrupted, coordinated approach to healthcare across the transition pathway and organisational boundaries
- To drive change within organisational cultures to embrace and embed developmentally appropriate care, understanding and meeting the unique needs of young people
- To affect change and establish best practice transition pathways that are cost effective, safe and sustainable



Steering group members

Name	Role	Contact	Organisation
Angela Horsley	Head of Children, Young People and Transition	angela.horsley@nhs.net	NHSEE/I
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Jade Mitchelmore	Staff Nurse/ research interest in Transition in primary care	jademitchelmore@gmail.com>	
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Programme structure – Cohort 3





In preparation for the programme launch event:

Identify clinical areas to participate in the collaborative (start small, we suggest 2 services or clinics)

Collect baseline data (template to be given to those trusts selected to take part in collaborative)

Map where you are in regard to transition, reviewing policies and procedures – this will be further discussed at the Launch event

Recruit your Improvement team – suggestions below

- •Executive Director (sponsor)
- Clinical Lead / Head of Nursing
- Transition Lead
- Members of the service or clinic multidisciplinary team (MDT) this includes children's and adult staff working together where possible
- Hospital based transition MDT may include Doctor, Nurse Specialist, Physio, OT, Psychologist, Dietician, Pharmacist, Youth Worker, Care Advisor, Social Worker etc.

Identify any potential Barriers/risks/issues and possible solutions

Outline any support you anticipate that you may need

NHS Improvement

What is expected of trust teams?



Attendance at all the collaborative events



Delivery of an Improvement project focusing on improving quality of care, improved patient experience

Develop driver diagram

Undertake process mapping exercise

Conduct PDSAs to test changes

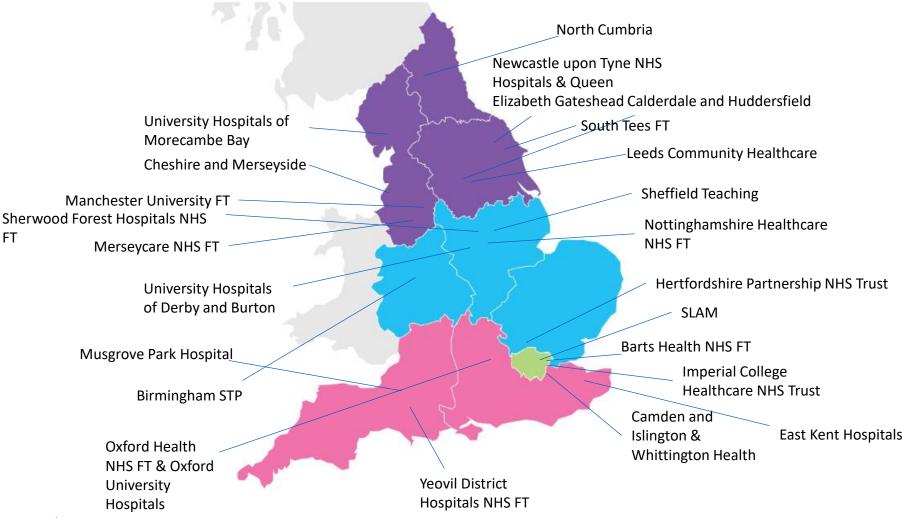
Collect data to measure & monitor change, success' & challenges

Develop communication plan to spread and sustain the improvement work

Sharing success – develop a poster/presentation/video to share the improvements to spread and sustain the work across your organisation. To be shared with the collaborative at the 90 Day event



Map of England- participating trusts - Cohort 1









QI Methodology

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?



Key messages taken away from launch



start small, learn from other and don't be afraid to try

narrow project aim, test process map options

transition and young people matter

need to be clear on what the trusts aim is to be able to focus on this otherwise will be a task that is too large engagement and involvement
of the wider children and
young people service.
Understanding of the diverse
opportunities that are
available

Pinch with pride



Use this time to reflect on your conversations with other trusts

Which ideas would you like to 'pinch'?

Capture these on the t-shirt template on your table (as a trust)

Bring your t-shirt template up to the front and hang them on the washing line

Review what others will be pinching with pride











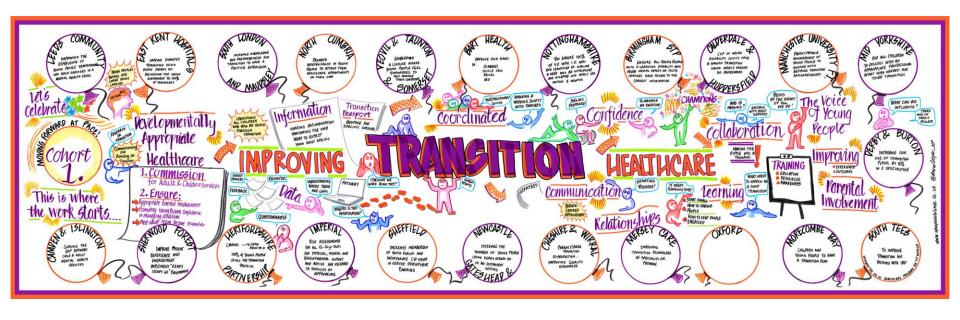
NHS Sustainability Model







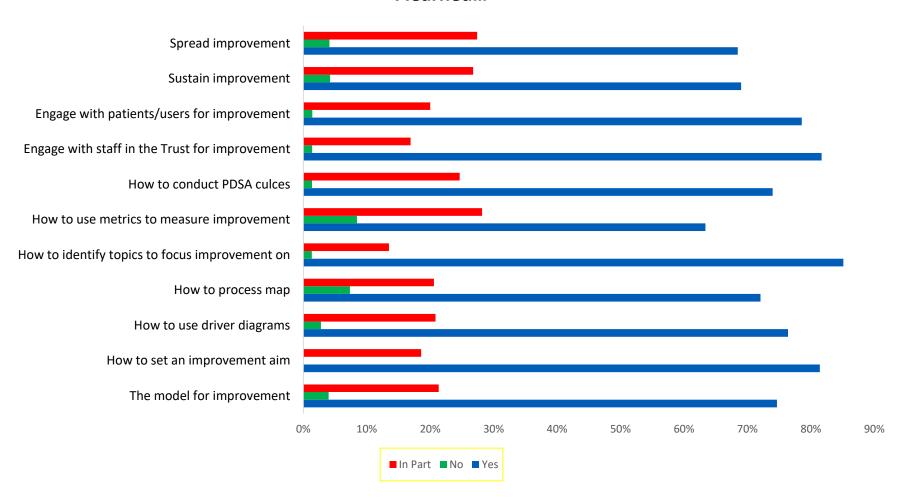






What the team's learned...

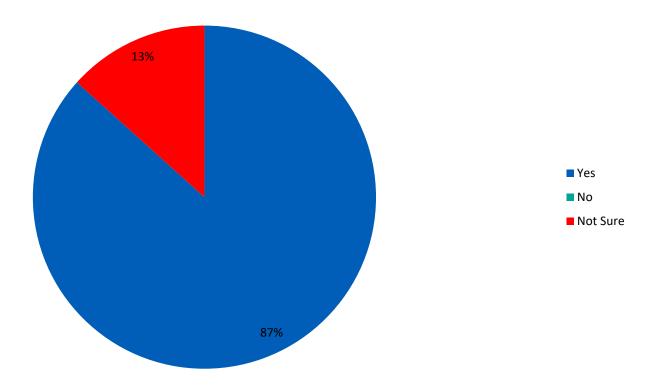
I learned...





Team's were more confident in their improvement skills:

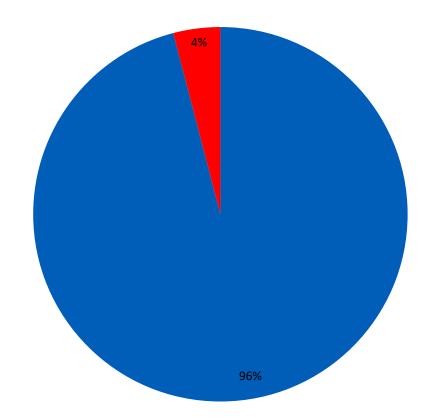
My overall improvement skills have improved since taking part in the Improving Healthcare Transition collaborative...





Team's are confidence that their improvement work can be sustained

Do you feel confident that your improvement will be scaled up and sustained?

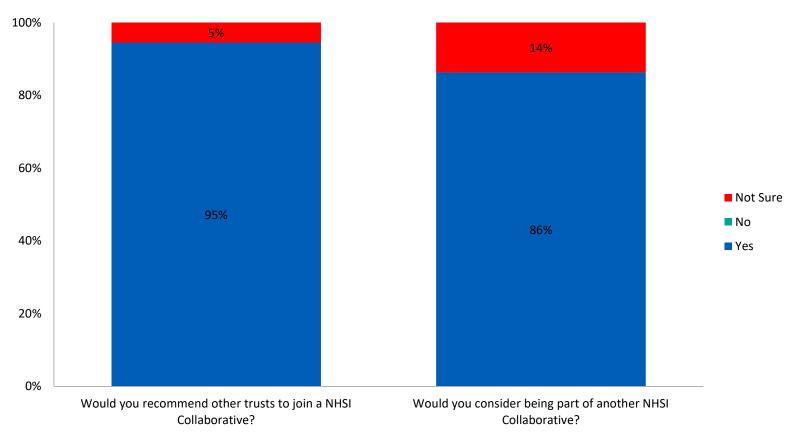






There's an appetite for Future Collaborations

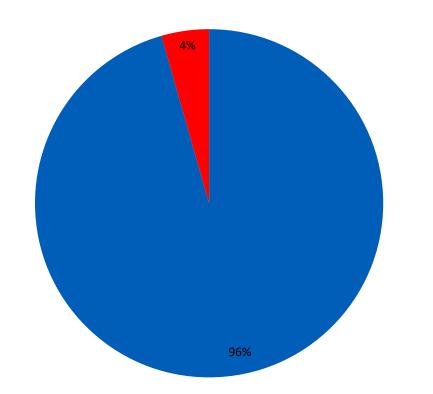
Future collaboration





96% of teams enjoyed taking part!

I have enjoyed taking part in the Improving Healthcare Transition Collaborative...



■ Not Sure

■ Yes ■ No



Safeguarding and **Looked after Children**

Young People who require Critical Care

But what about?

End of Life and Palliative Care

Children with complex needs and SEND







