

Putting NICE guidance into practice

Resource impact report: Transition from children's to adult services for young people using health or social care services (NG43)

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Summary

This report looks at the resource impact of implementing NICE's guideline on [Transition from children's to adult services for young people using health or social care services](#) in England.

Nice does not anticipate any significant costs in implementation. The guideline may however result in the following benefits and savings:

- Reduced risk of young people falling between services and needing care, or treatment, for crisis that could have been avoided.
- Avoid duplication of costs where young people have multiple needs.
- Improved health and care outcomes for young people from effective transition.

Children's and adult services are commissioned by clinical commissioning groups (CCGs), NHS England and local authorities. Providers are NHS hospital trusts, community providers, primary care, social care providers and not-for-profit organisations.

Introduction

- 1.1 The guideline offers best practice advice on transition from children's to adult services that covers both health and social care.
- 1.2 This report discusses the resource impact of implementing our guideline on [transition from children's to adult services for young people using health or social care services](#) in England. It aims to help organisations plan for the financial implications of implementing NICE guidelines.
- 1.3 Children's and adult services are commissioned by clinical commissioning groups (CCGs), NHS England and local authorities. Providers are NHS hospital trusts, community providers, primary care, social care providers and not-for-profit organisations.
- 1.4 We have considered direct costs and savings to the NHS and local authorities, and not those for the individual, the private sector or the not-for-profit sector.
- 1.5 It is anticipated that implementing the recommendations in the guidance will be cost saving, over the long term, to the NHS and Local Authorities. As young people should not fall between services, there is a reduced risk that they will have a crisis and require significant interventions in later life.

2 Background

- 2.1 Young people with ongoing or long-term health or social care needs will usually need to transition into adult services.
- 2.2 There is evidence that the organisation of transition in health and social care is inconsistent. Poorly managed transitions can result in disengagement with services and deterioration in health and the adverse consequences of disrupted social care. This can lead to increased costs for the NHS and local authorities, with worse outcomes for the young person.

2.3 There are particular difficulties for young people where there is not an equivalent adult service for them to transition into. As reported in [Future in Mind](#), young people who receive care from Children and Adolescent Mental Health Services (CAMHS) may find that the support that they had been used to is no longer available. The role of primary care is particularly key for this group.

3 Resource impact

3.1 Implementing the recommendations in this guideline may help young people move successfully from children's to adult services. This is anticipated to be cost saving for the NHS and Local Authorities and should lead to better outcomes for young people transitioning to adult services.

3.2 These savings for health and social care may be achieved by putting in place the following steps:-

- Agree responsibility for funding health and social care across children's and adult services for young people as they go through transition. This will reduce the risk of young people falling between services and prevent duplication of costs.
- Services should be developmentally appropriate and adopt a person centred approach. Evidence suggests that when services adapt to meet the needs of young people and their carers and when young people and their carers are involved, there is better engagement through the transition process.
- Have a single named worker to coordinate care and support during transition, who is aware of the young person's circumstances and condition. The named worker should be one of the people from the group of workers providing care and support, who has been designated to take a coordinating role.

- Ensure that young people know how to independently (if possible) navigate health and social care, particularly adult services. For example, young people with long term conditions such as diabetes may be able to avoid emergency admission if they have clarity on how to access adult services.
- Effective signposting to alternative non-statutory services where statutory services are not available for adults. For example care leavers can end up in unsuitable accommodation or homeless if access to appropriate services is not available.
- Actively involve primary care in the transition process to provide another level of continuity for young people and their carers.

About this resource impact report

This resource impact report accompanies the NICE guideline on [Transition from children's to adult services for young people using health or social care services](#) and should be read in conjunction with it. See [terms and conditions](#) on the NICE website.

This report is written in the following context

This report represents the view of NICE, which was arrived at after careful consideration of the available data and through consulting healthcare and social care practitioners. The report is an implementation tool and focuses on the recommendations that were considered to have a significant impact on national resource use.

Assumptions used in the report are based on assessment of the national average. Local practice may be different from this, and the impact should be estimated locally.

Implementation of the guidance is the responsibility of local commissioners and providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations. Nothing in this resource impact product should be interpreted in a way that would be inconsistent with compliance with those duties.

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