

Coborn Adolescent Unit – PICU 1 year admission data

Dr Rafik Refaat

Associate Clinical Director, Consultant Child & Adolescent Psychiatrist

Dr Sophia Ulhaq

Consultant Child & Adolescent Psychiatrist

Introduction

- Coborn Centre for Adolescent Mental Health - 12 bed Acute, up to 9 Day Service places, 4 PICU beds
- Expansion in December 2017- total of 16 PICU beds for London Region
- Demand Regionally and Nationally
- OOA admissions and private admissions
- Regional London PICU for London young people

PICU Spec

Nationally commissioned and Delivered Regionally

Service provision:

- For management for **short term** behaviour disturbance which cannot be contained in a general adolescent inpatient service
- Behaviour includes **serious risk** of suicide, absconding with significant threat to safety, aggression or vulnerability due to agitation or sexual disinhibition
- Risk of harm to self and others in the context of a **mental disorder**

Timelines

- No longer than **6 weeks**. Exceptional circumstances max 8 weeks
- Admissions likely to last longer than 6 weeks – alternative to be actively considered eg low/medium secure forensic psychiatric hospital or other community placement
- Risk of delayed discharges to be communicated to commissioners and NHS England Case Managers

PICU Spec

INCLUSION CRITERIA

- All three of the following must apply
- Young person is **aged 13 to 18 years**
- Young person subject to **detention under part II of MHA**
- Behavioural disturbance that requires intensive, specialist risk management and treatment intervention
- Includes young people with Mild - Moderate Intellectual Disability and Autism Spectrum Disorders
- N.B. Co-morbid substance misuse in addition to a primary mental disorder

PICU Spec

EXCLUSION CRITERIA

- Longer term behavioural disturbance requiring care in low secure or residential setting
- National Forensic Mental Health Service for Young People [NFMHSfYP] who will undertake a gate keeping assessment in the first instance:
 - YP Presenting with high risk of grave danger to the general public
 - Those charged/convicted of violent/sexual offenses under Schedule 15 of Criminal Justice Act 2003
 - Fire setting NOT in the context of an acute mental illness

PICU Spec

Points of referral

- Community CAMHS and Youth Justice Diversion Schemes following assessment by Community CAMHS Consultant
- Specialist Residential Settings eg secure children's homes following assessment by Community CAMHS Consultant
- General adolescent inpatient units and low secure adolescent inpatient services

PICU Spec

CPA meetings

- Initial CPA to be held within 5 working days
- Review Goals of Admission
- Likely duration of stay on PICU
- Confirmation of step down/step up bed OR placement post discharge
- If no rationale for on-going PICU admission then discharge/transfer to be arranged within 5 working days
- CPA meetings will take place at week three and week six
- Risk of delayed discharges to be communicated to commissioners and NHS England Case Managers

- Review of PICU data 1 year on

1 year on....



Methodology

Inclusion criteria

- All direct admissions from 1st December 2017 to 24th January 2019 are included (420 days / 13 months, 24 days)

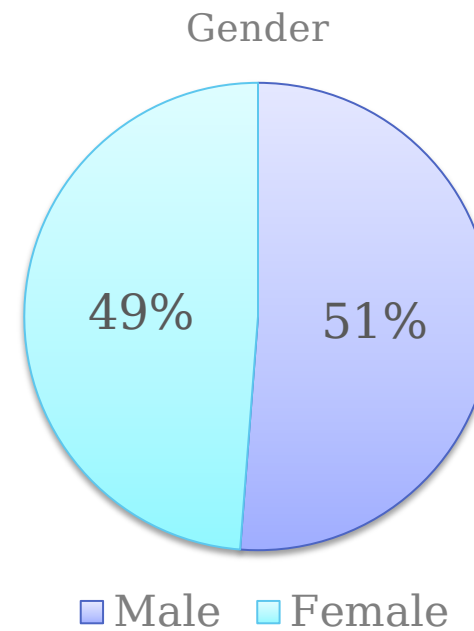
Exclusion criteria

- Patients who were still in-patients at the time of the data collection
- Patients transferred from the Coborn Acute provision / Day Service to the PICU

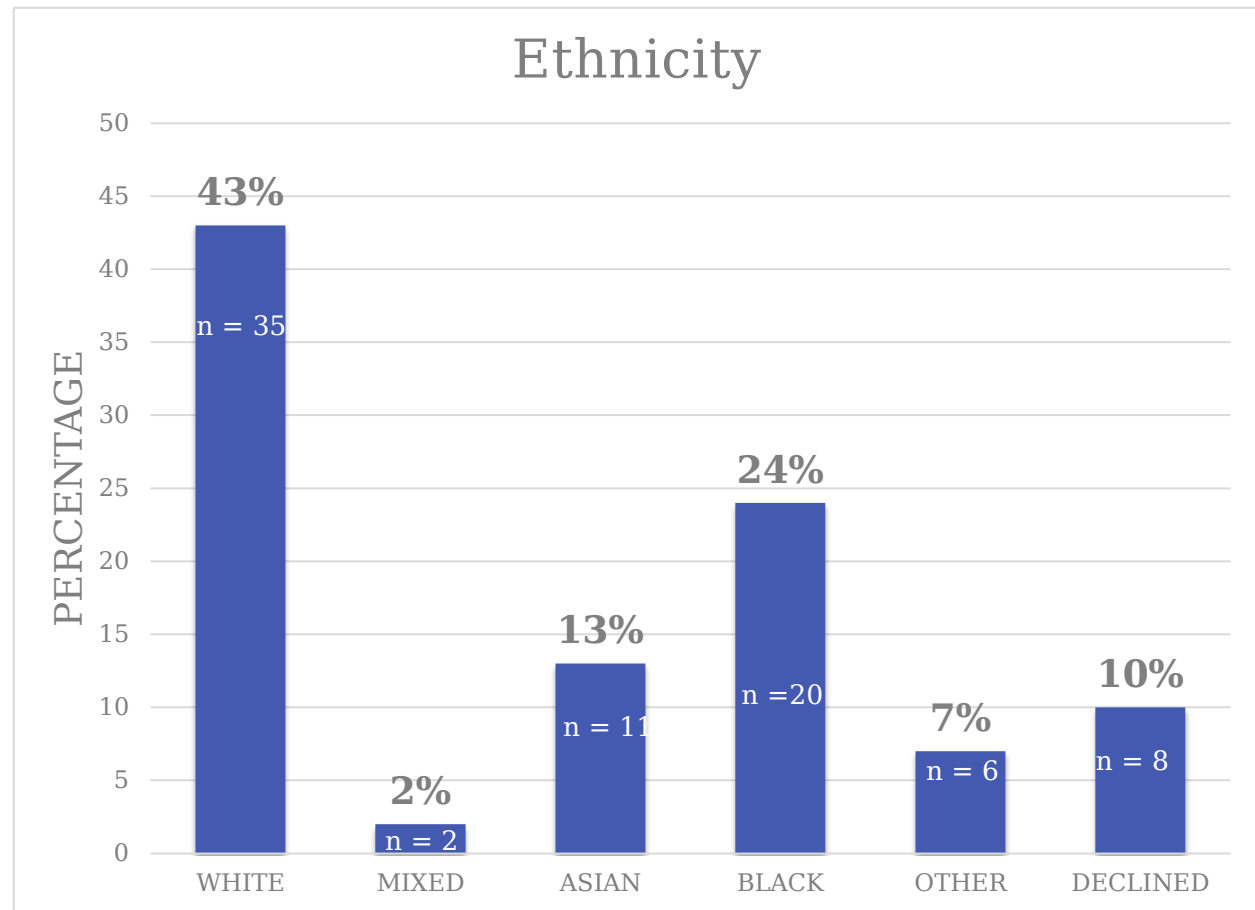
Patient demographics

- **Total no. of patients = 82**

	Youngest	Oldest	Average
Age at admission	12.12	18.03	16.4

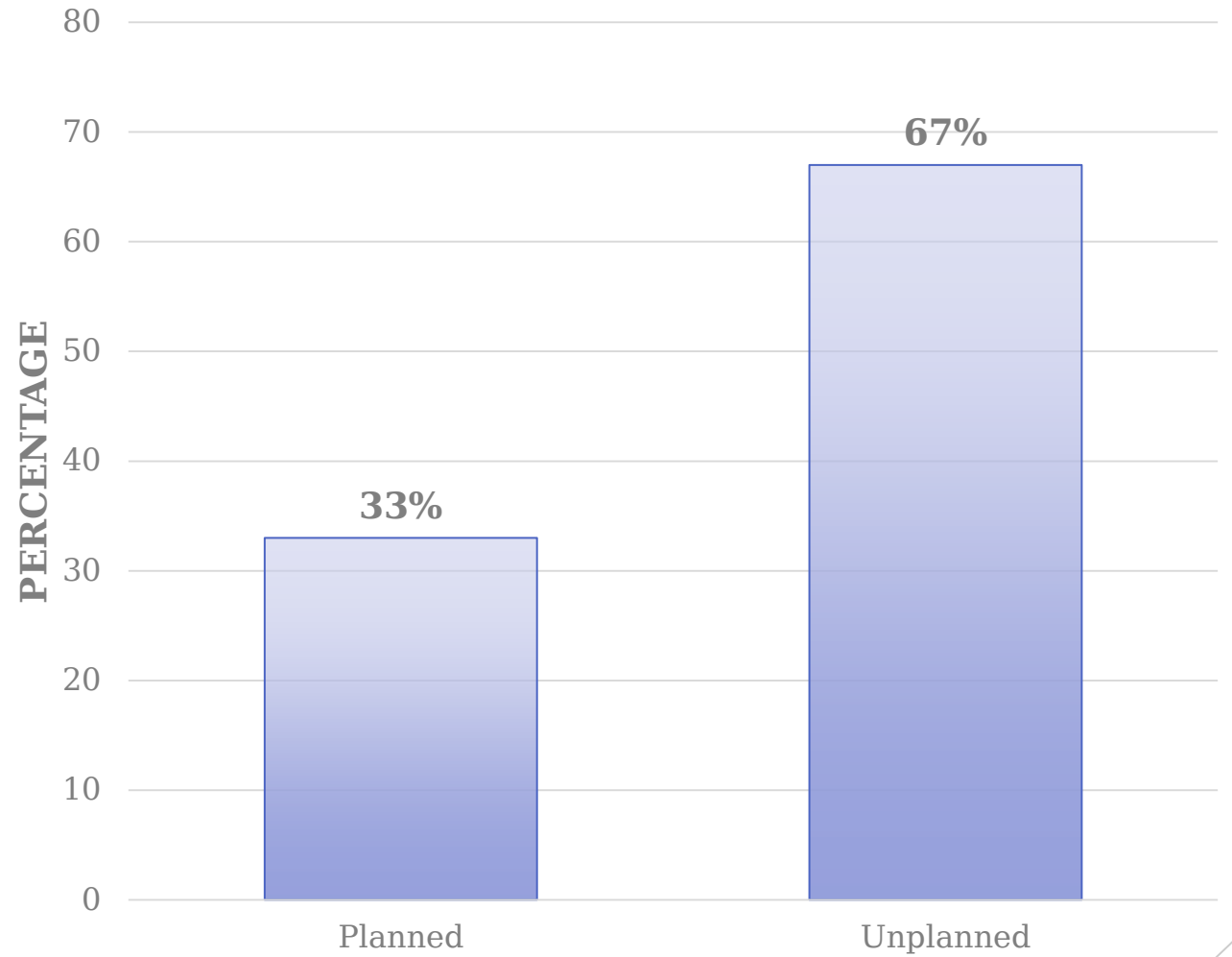


Patient demographics



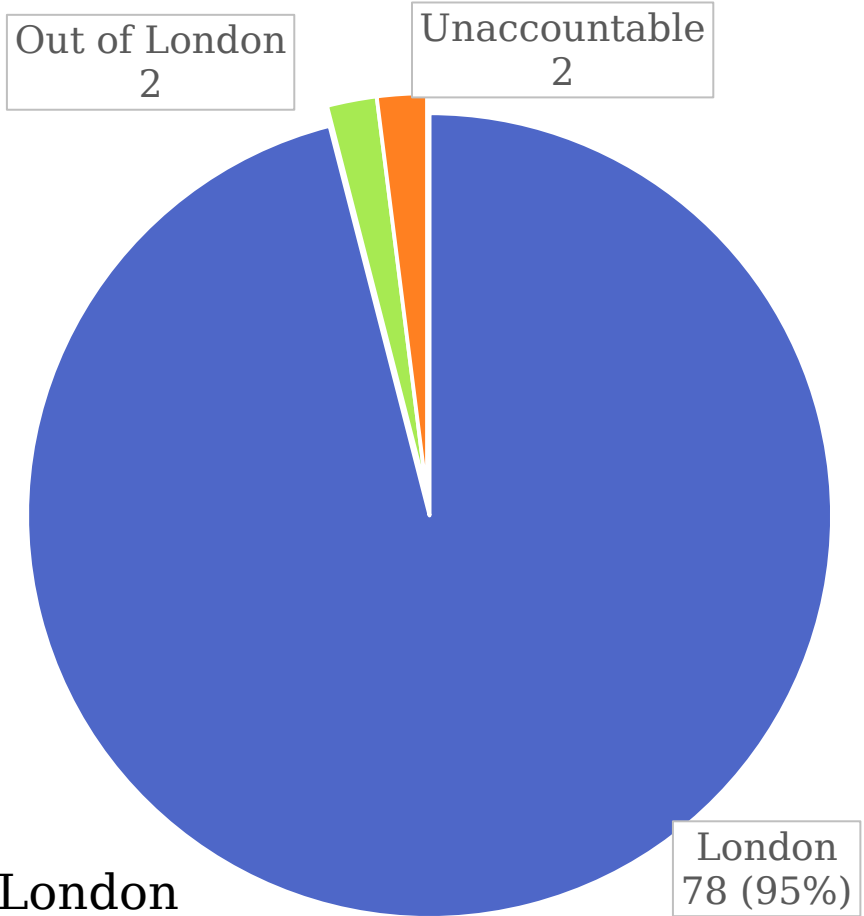
Source of admission

Planned vs unplanned admissions



Source of admission

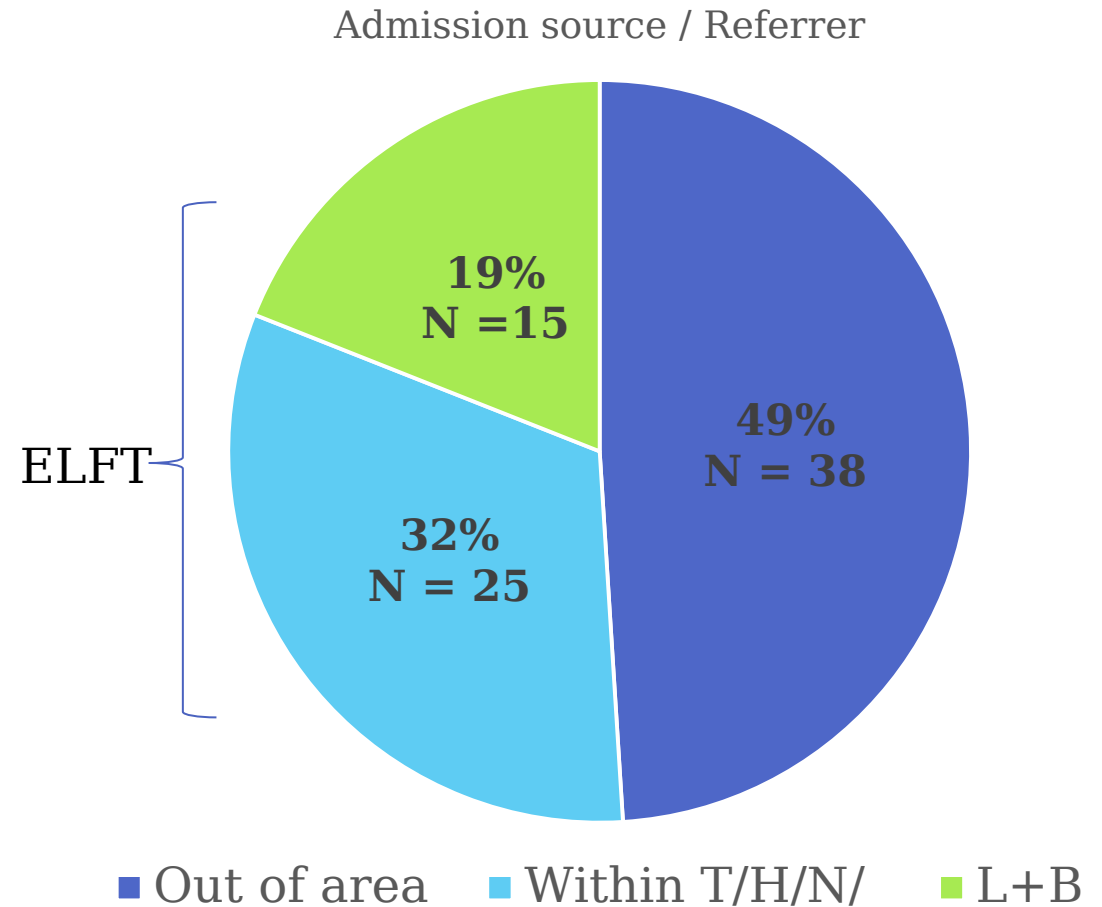
London region Vs outside London



- Two young people were referred from outside of London
- Of the 2 unaccountable young people, 1 was an undocumented migrant and the other was visiting from Italy

■ London ■ Out of London ■ Unaccountable

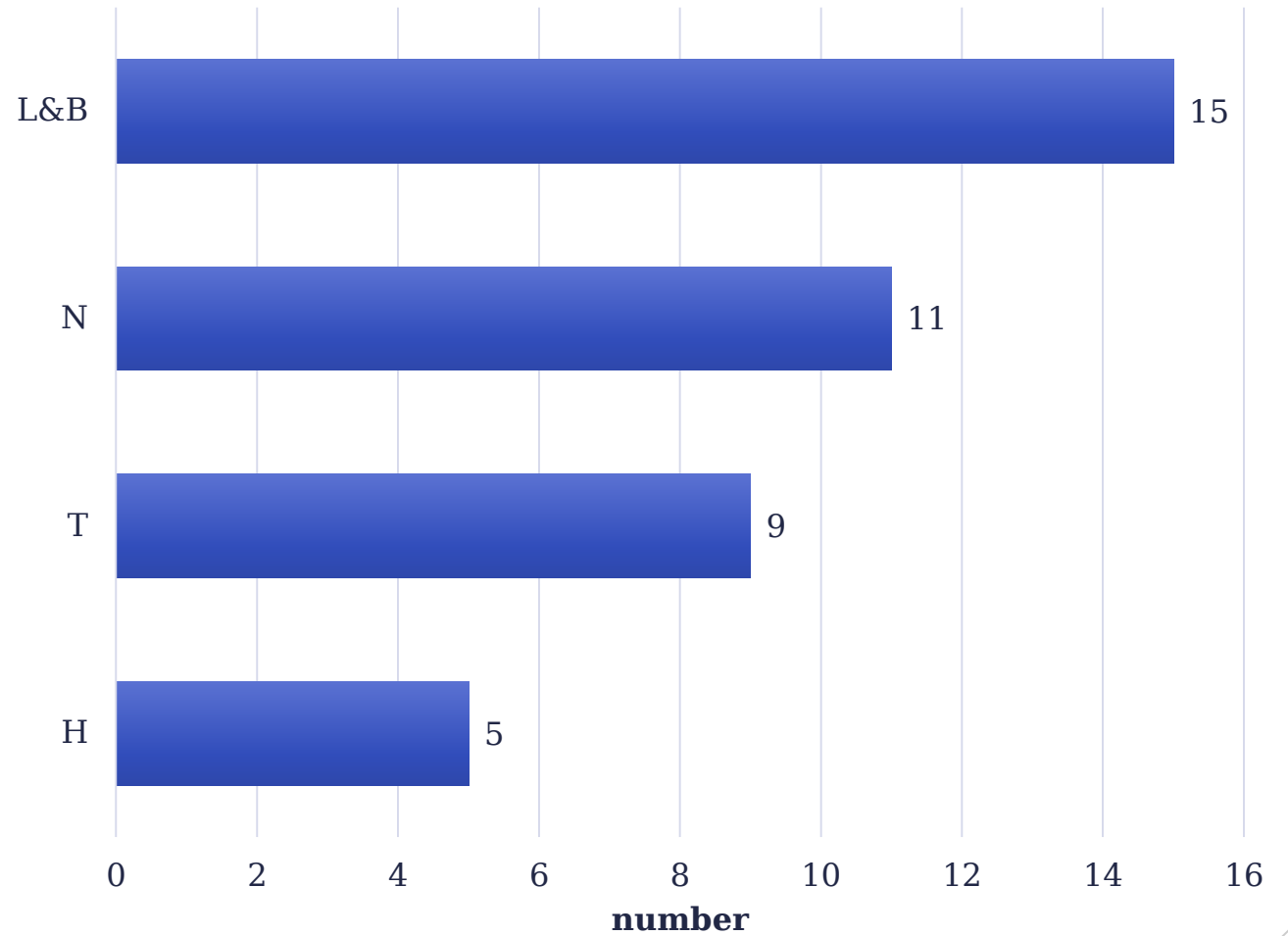
Source of admission



Of the 95% (78) London patients, half were from the local ELFT boroughs (Tower Hamlets, Hackney, Newham, Luton and Bedfordshire)

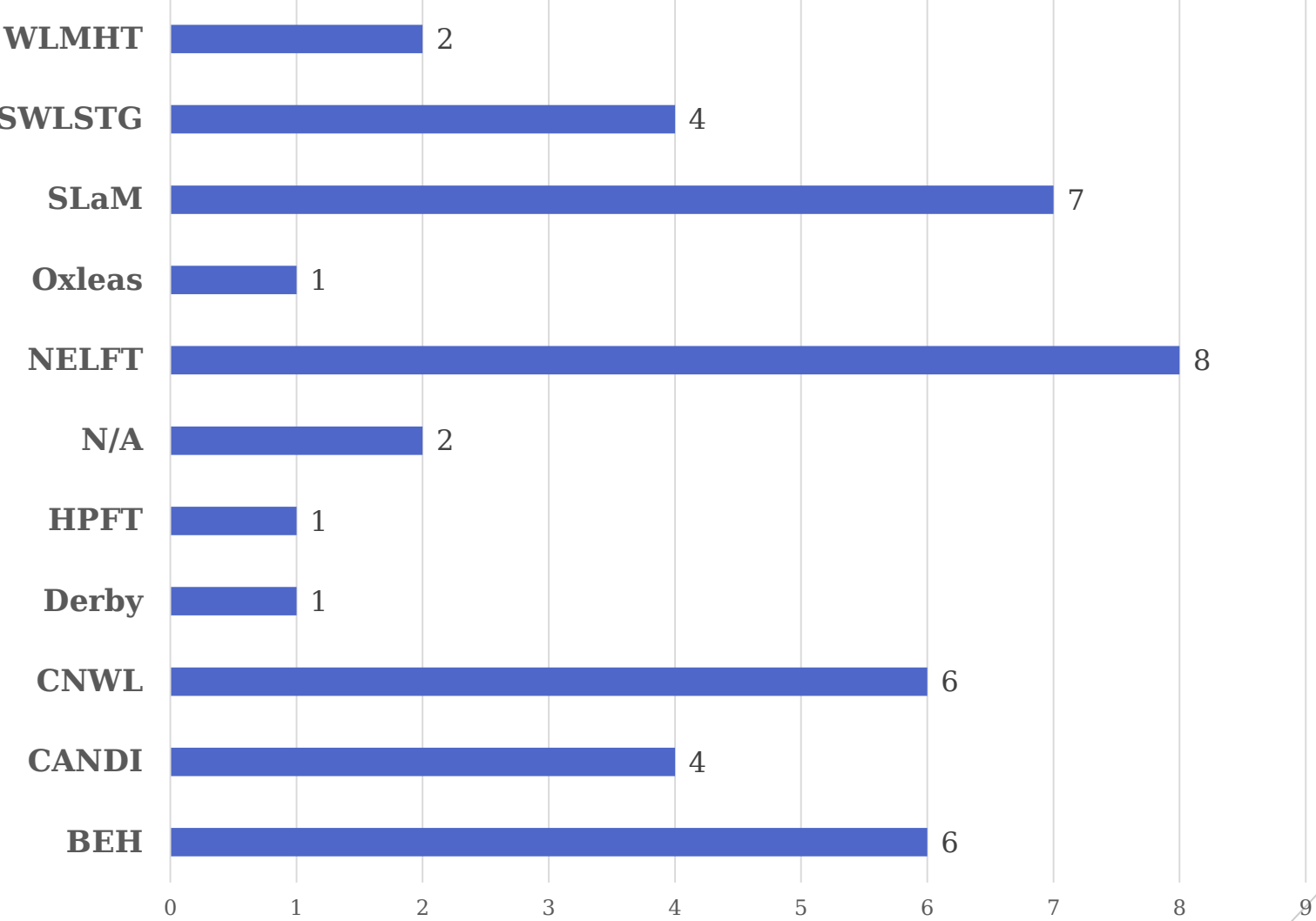
Admissions
from within
ELFT

Admissions from within ELFT



Out of area admissions

Out of area admissions



Outcomes

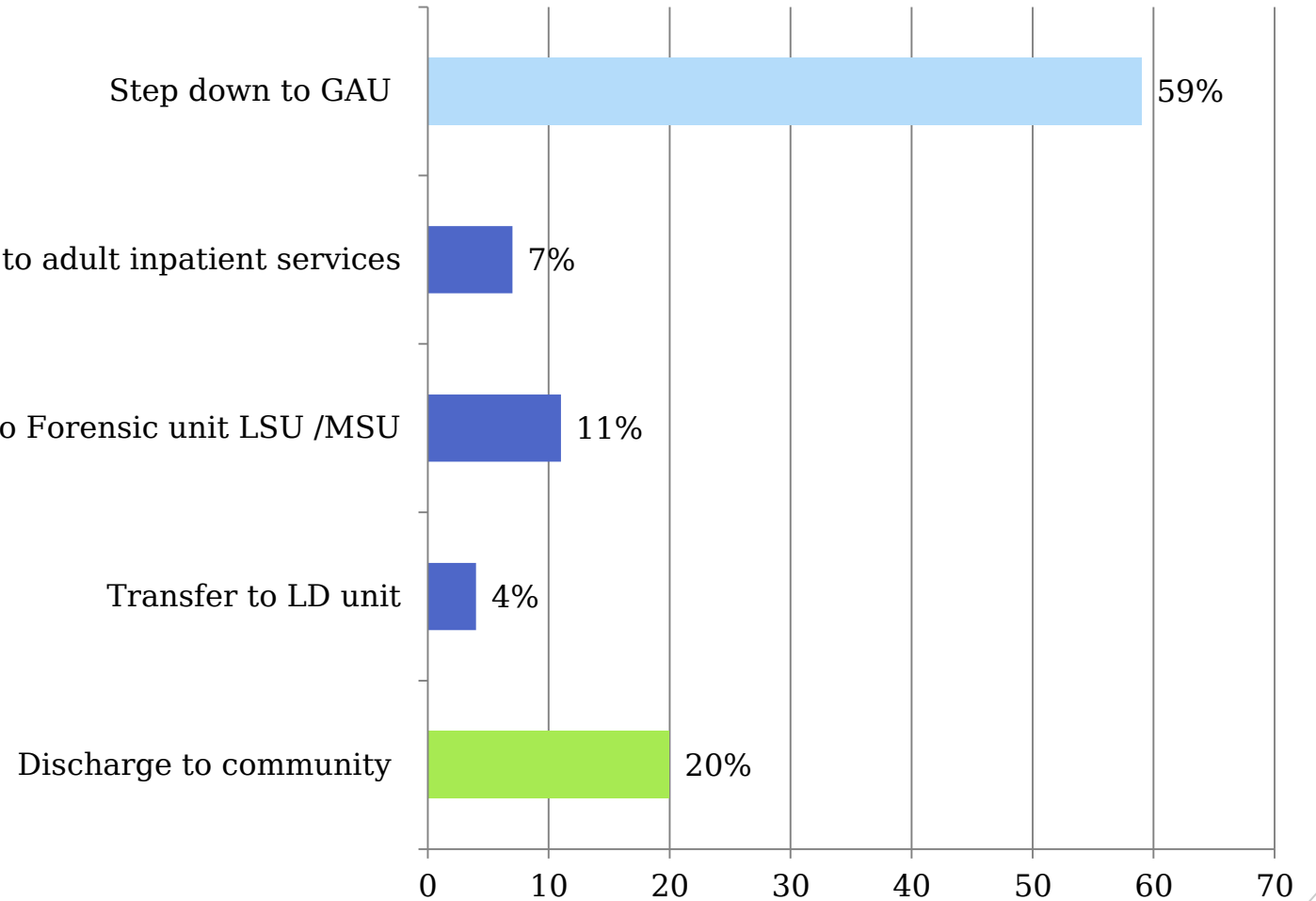
	Length of stay on PICU (Days)
Average	41
Shortest	2
Longest	228

67% (55) young people stayed less than 6 weeks

9% (7) young people stayed for between 6 - 8 weeks

24% (20) young people stayed longer than 8 weeks

Discharge destination



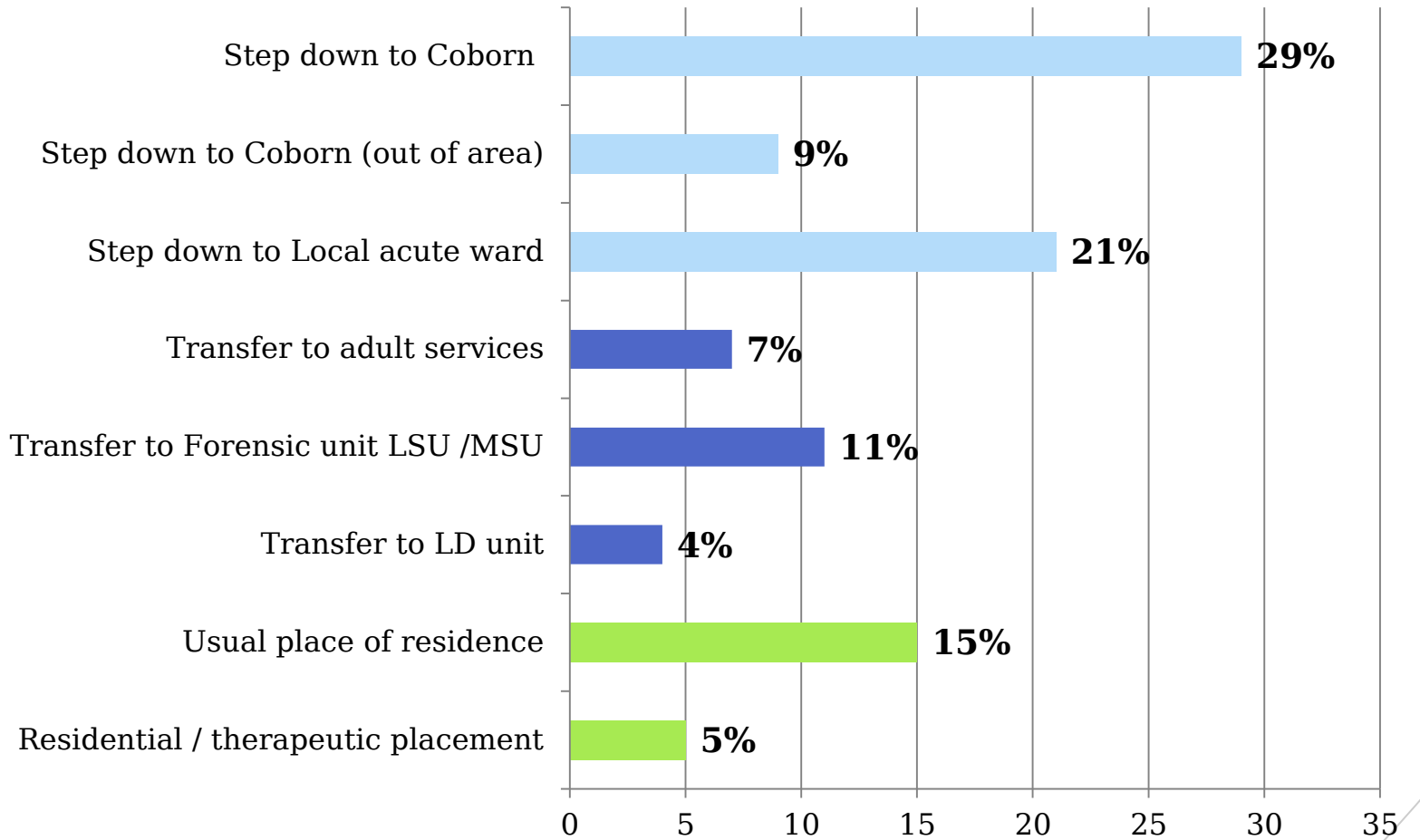
Discharge
destination

The majority of young people were stepped down to a general adolescent unit 59% (n = 48)

20% (n = 16) of young people were discharged to the community

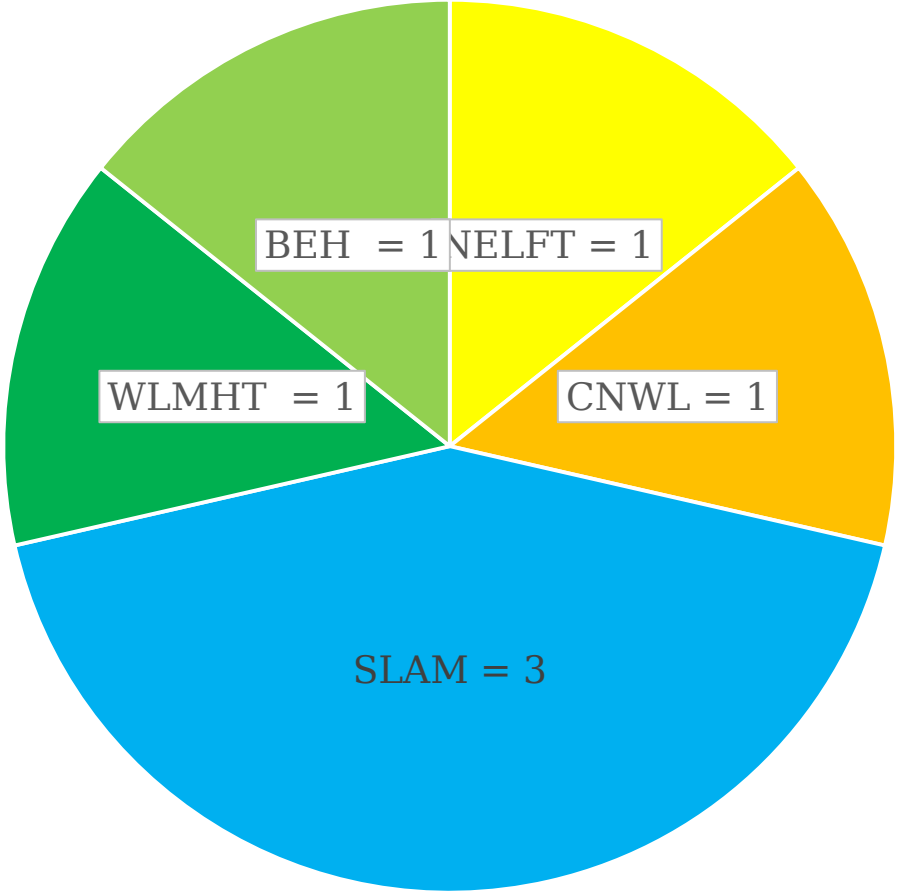
Discharge destination

Discharge destination



Out of area step down to Coborn Acute ward

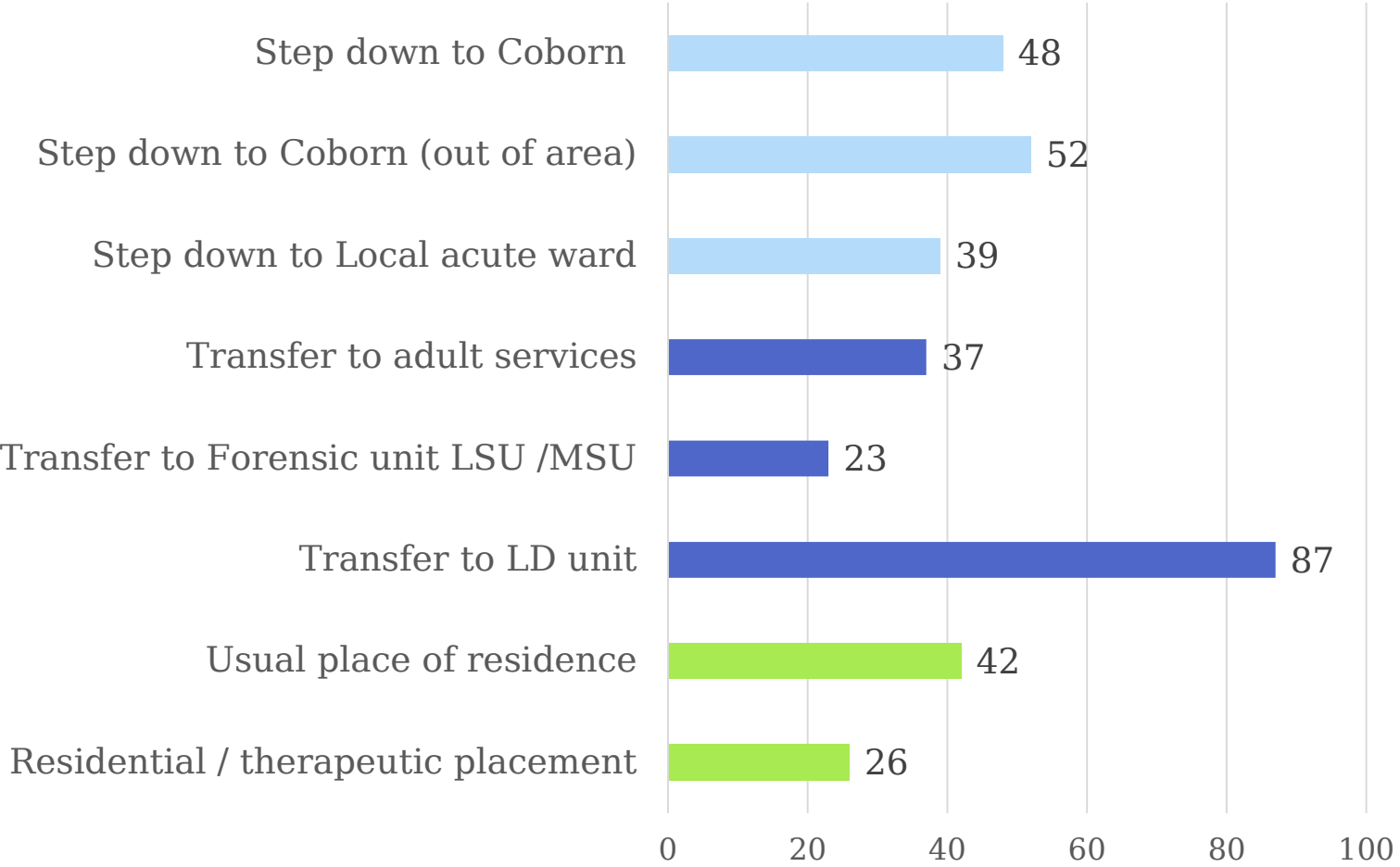
Coborn step down (out of area).



- WLMHT
- BEH
- SLAM
- NELFT
- CNWL

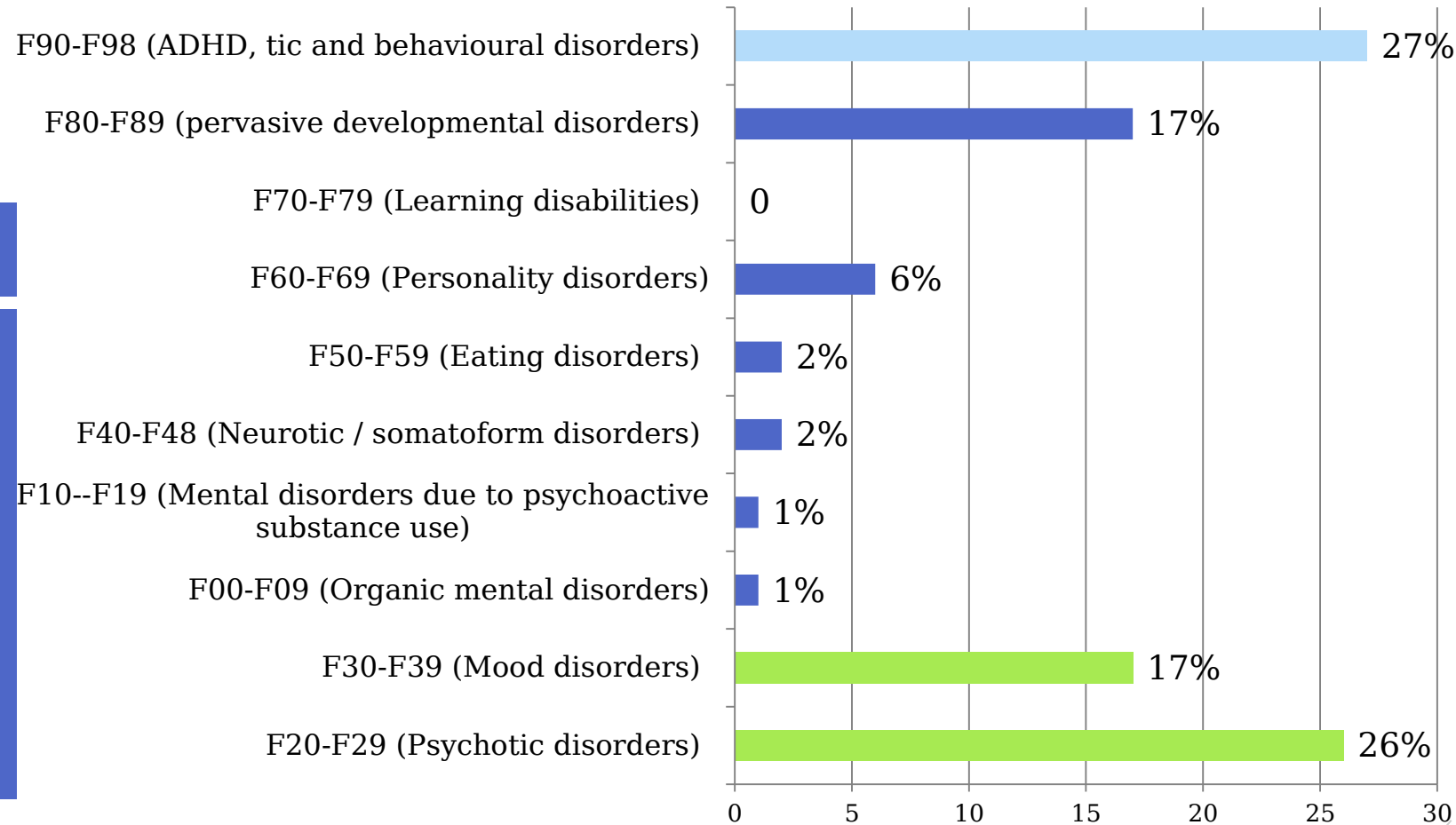
Time to discharge

Average length of stay (days)



Young people discharged to Learning Disabilities units on average stayed longer than 8 weeks

Primary Diagnosis at discharge



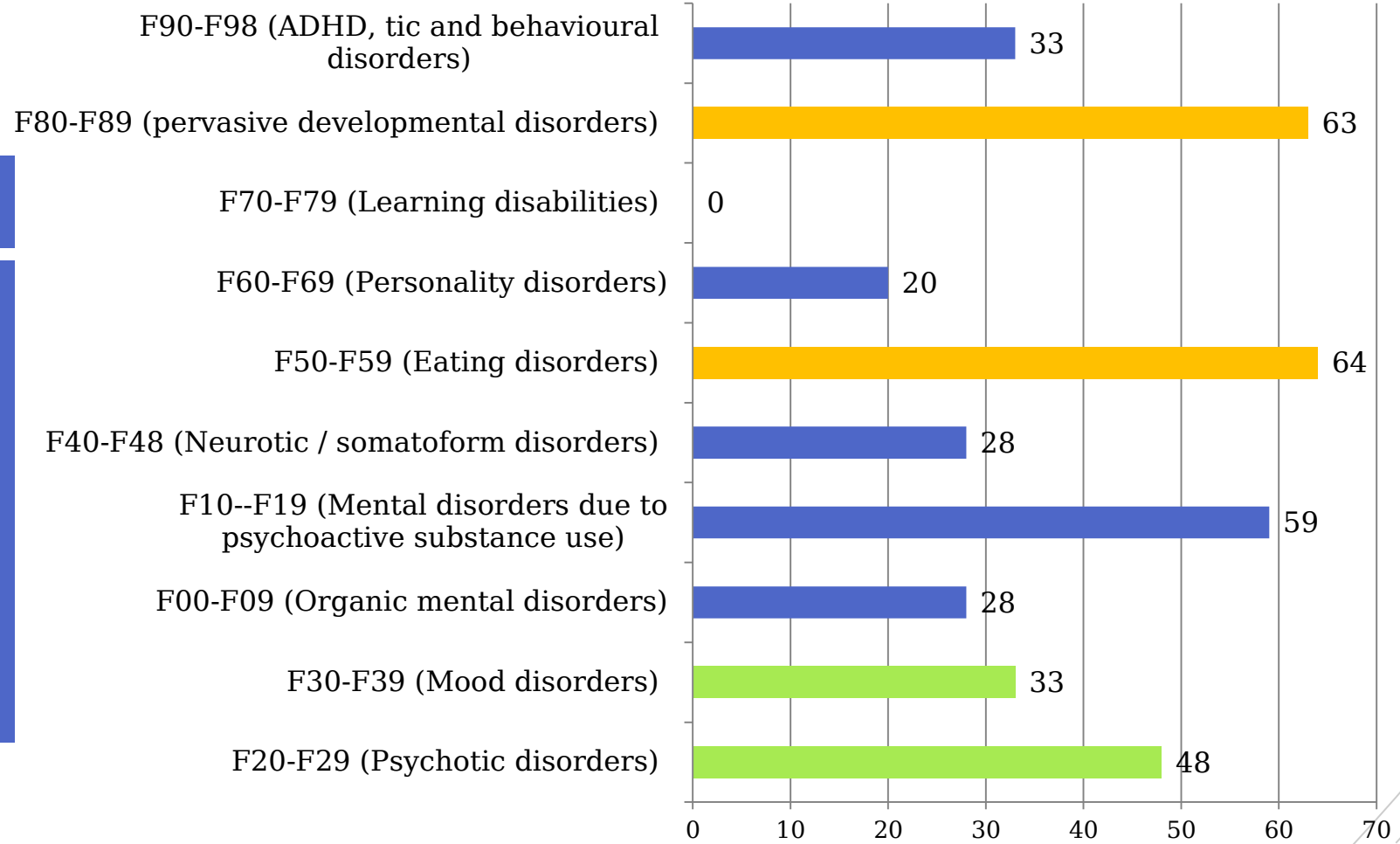
Primary Diagnosis at discharge

Major mental disorders (mood and psychotic disorders) made up 43% (n = 35) of the sample.

Young people with ADHD, emotional and behavioral disorders e.g. conduct disorder made up the largest group 27% (n = 22)

Primary diagnosis vs length of stay

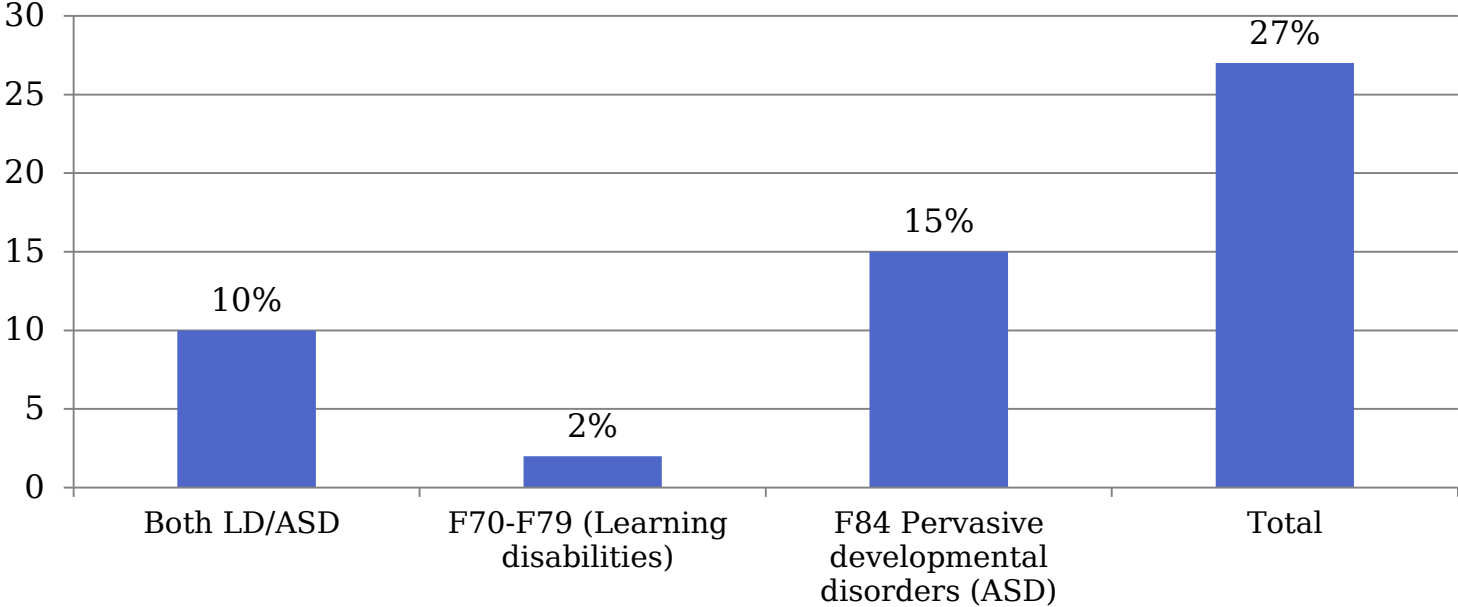
Average length of stay PICU (days)



Young people with Autism Spectrum Disorder (n=14) and Eating Disorders (n=2) on average stayed longer than 8 weeks

ASD / LD group

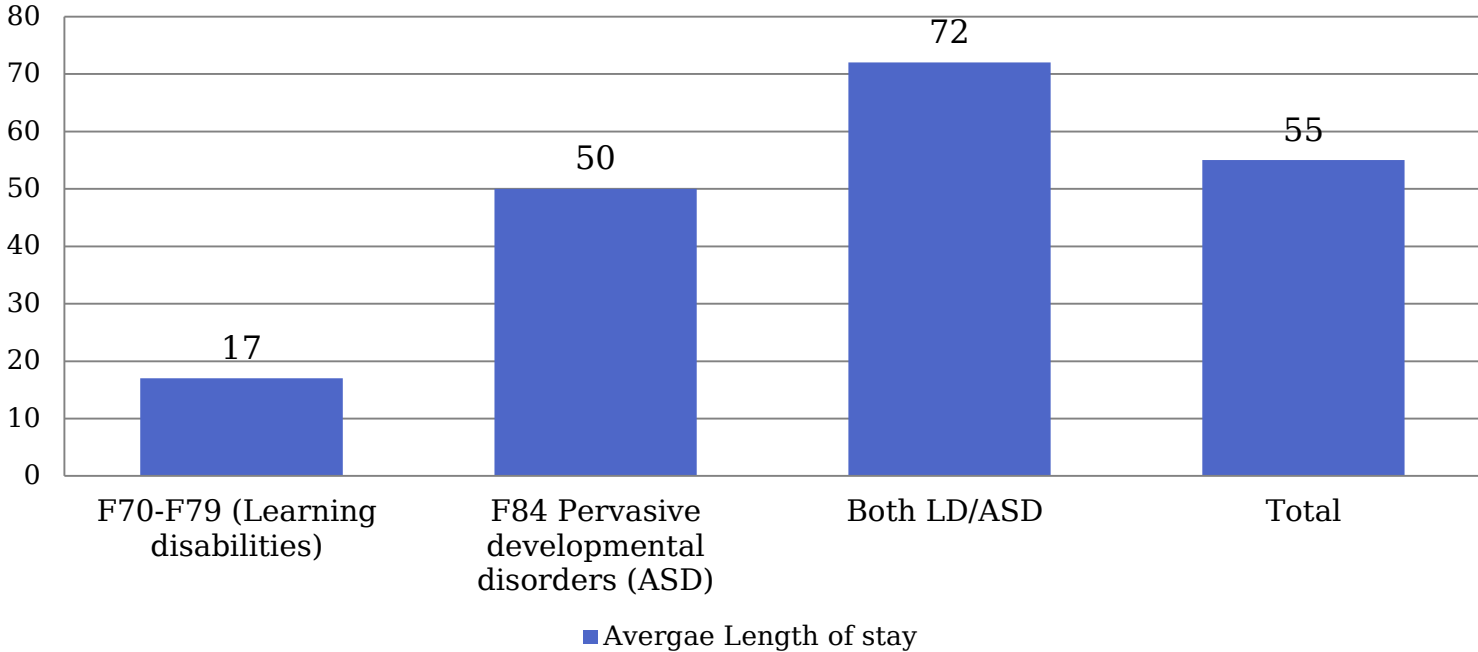
ASD and LD diagnosis



- 27% (22) of young people had a diagnosis of **either** LD or ASD
- 10% (8) had a diagnosis of **both** LD and ASD
- 15 % (12) had a diagnosis of ASD
- 2.5% (2) had a diagnosis of LD

Length of stay
of the ASD / LD
group

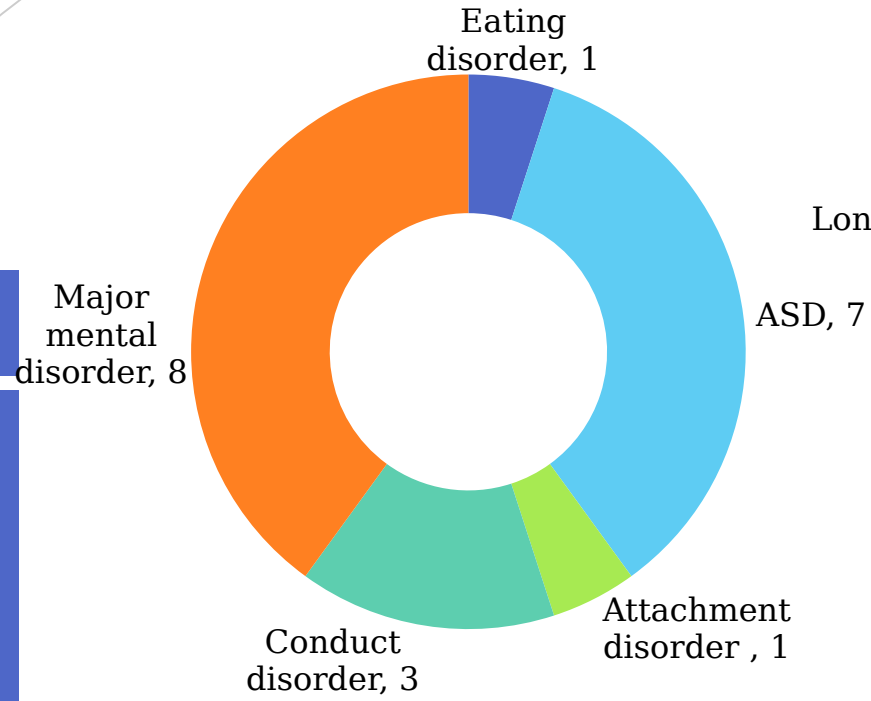
Average length of stay (Days)



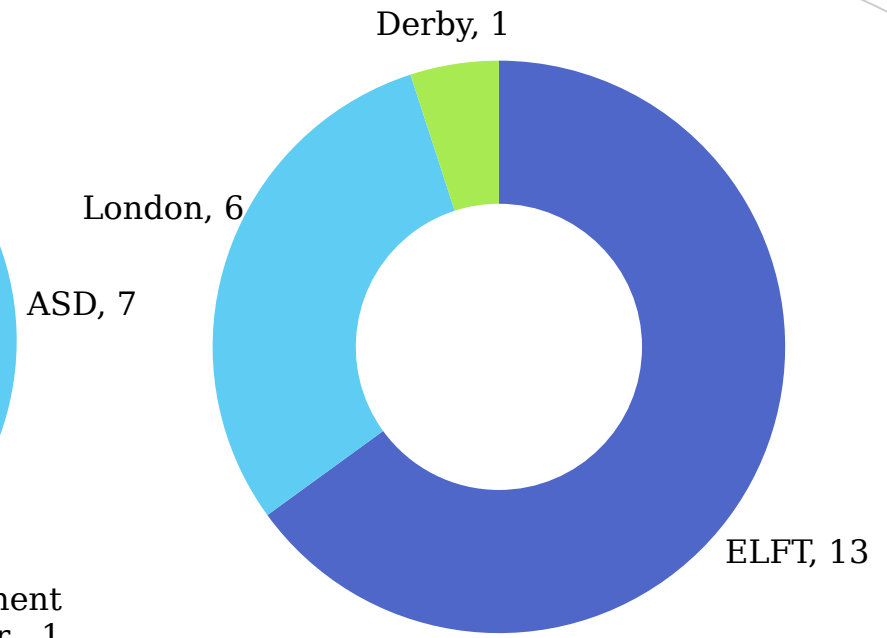
- Young people with LD and ASD were admitted to the PICU for an average of 3 weeks and 7 weeks respectively
- Young people with a diagnosis of both LD and ASD stayed on average longer than 10 weeks on the PICU

Extended admission profile

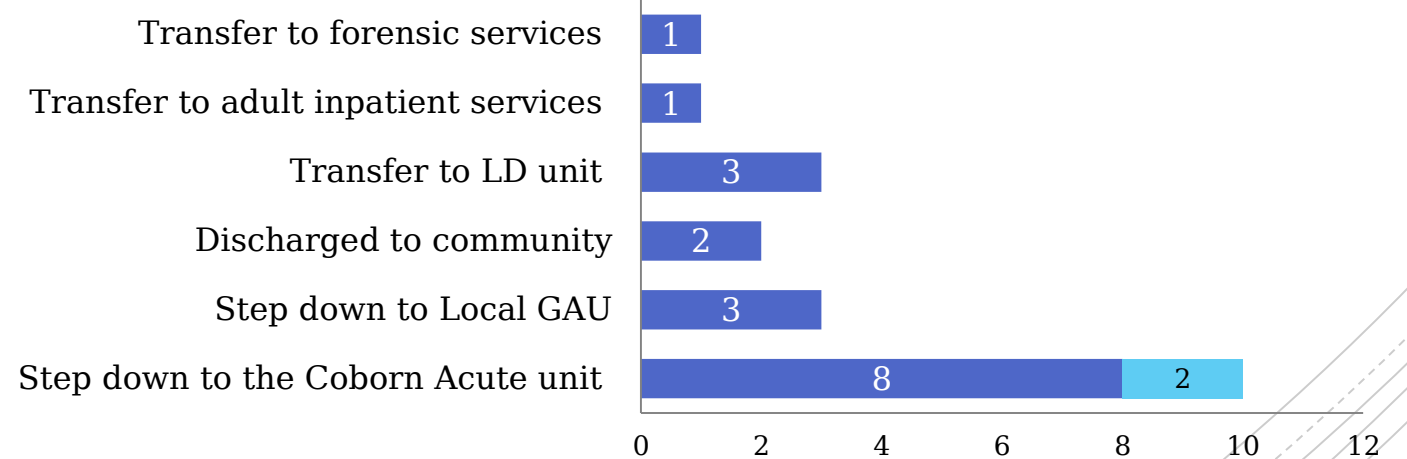
Primary diagnosis



Source of admission



Discharge destination



Challenges

- Discharge care plans and reintegration to community
- Length of stay (Neurodevelopmental Disorders and Personality Disorder)
- Step down
- Social Care cases
- Geographical distance
- Role of Criminal Justice