

# Transition from Child to Adult Mental Health Services for Young People with Intellectual Disabilities: A South London Two-Borough Audit



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## Background

Young people (YP) with intellectual disabilities (ID) often experience complex neurodevelopmental, mental health, and physical health needs.

Moving to adult services is a recognised period of vulnerability.

Hence, effective care transfer is essential to ensure continuity of care and the safety of YP.

## Aim

- To evaluate the quality of transition for YP to adult mental health learning disability (MHL) services across two neighbouring South London boroughs.
- To recommend specific improvements in current transition practice.

## Methods

Retrospective audit of YP (18–23) transferring to adult MHL services across Borough 1 and 2 (2022 and 2025). Data extracted from referral documents and electronic records.

Ten audit criteria based on NICE NG43 and refined with psychiatrists:

- Standard 1–6:** CAMHS transition processes (CAMHS referrals only)
- Standard 7–10:** Documentation quality and post-transfer follow-up (all referrals)

## Results

### Cohort Demographics

| Characteristics                | Borough 1 (n=30) | Borough 2 (n=22) |
|--------------------------------|------------------|------------------|
| Male (%)                       | 77%              | 77%              |
| Mean age                       | 18.7             | 19.1             |
| Autism (%)                     | 83%              | 83%              |
| Black ethnicity (%)            | 60%              | 73%              |
| <b>Ethnicity missing (%)</b>   | <b>33%</b>       | <b>36%</b>       |
| <b>ID severity missing (%)</b> | <b>70%</b>       | <b>36%</b>       |
| CAMHS referrals (%)            | 47%              | 50%              |
| Prior CAMHS contact (%)        | 93%              | 86%              |

**Table 1: Demographic and referral profile by borough.** Cohorts shared similar demographics, with high rates of missing ethnicity and ID severity data.

### Standard 1–6 (CAMHS only; target 80%)

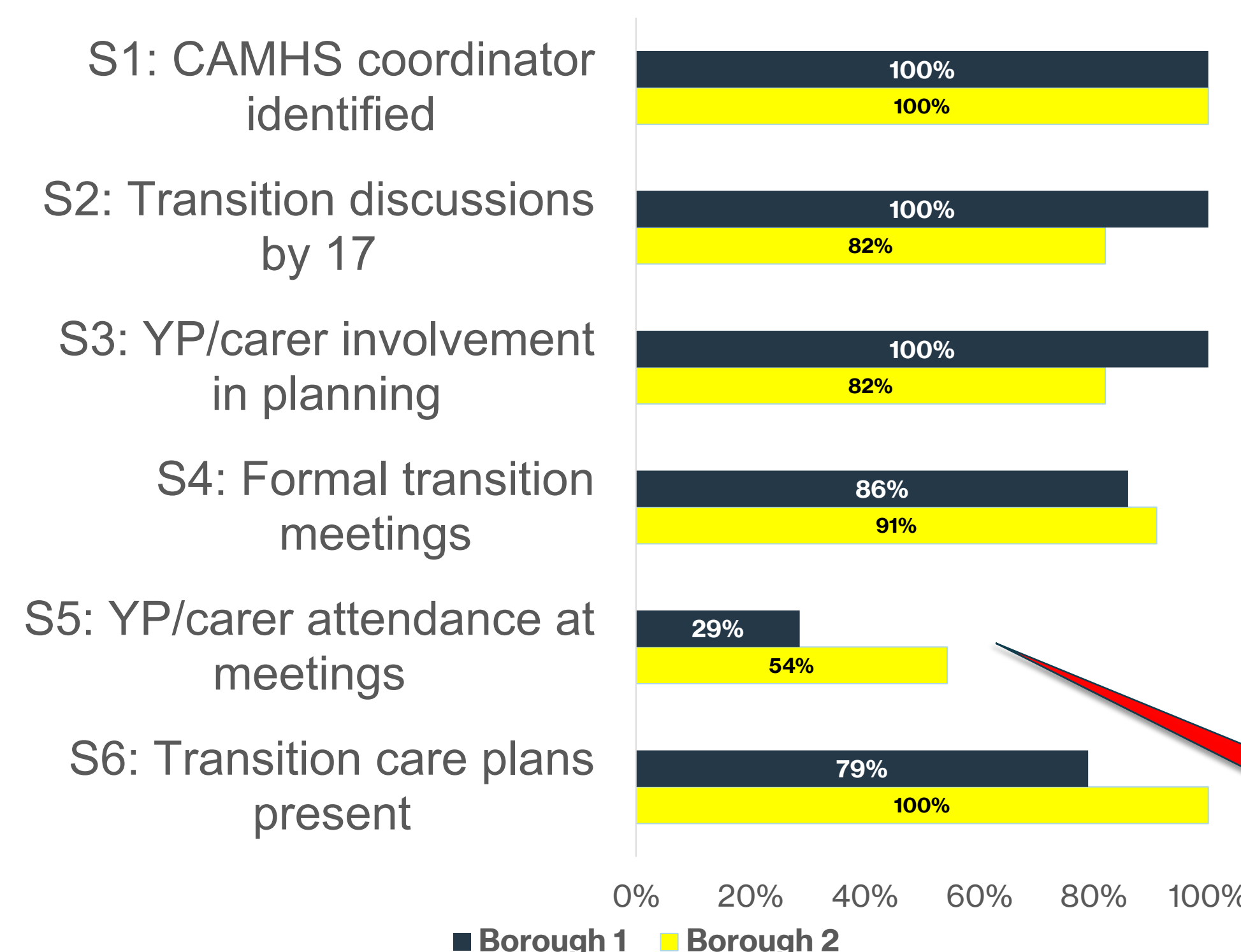


**Figure 1: Borough 1 and 2 compliance across CAMHS-specific transition standards (S1–S6).** Most criteria met targets across boroughs, except attendance at transition meetings (S5).

### Standard 7–10 (All referrals; target 90%)

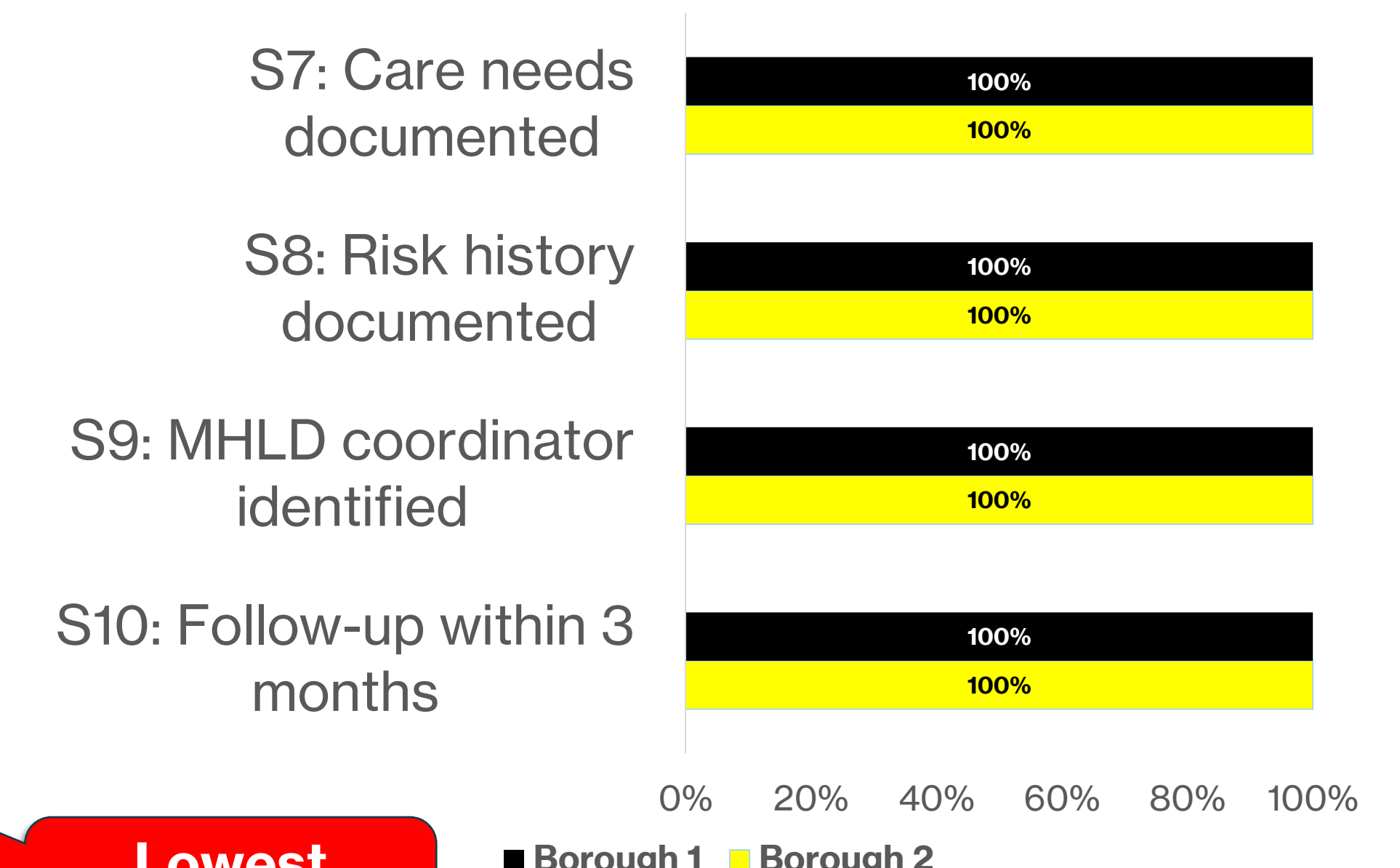


**Figure 2: Borough 1 and 2 compliance across general transition standards (S7–S10).** All criteria were fully met across both boroughs.

## Discussion

- Data & Equity Deficits:** Missing ethnicity and ID severity data obscure health inequalities and hinder personalised care planning.
- Engagement Gap:** Low youth and carer attendance at transition meeting reflects a major barrier to active participation.
- Tailored Care:** High proportions of autistic, ethnic minority men underscore the need for neurodevelopmentally and culturally informed transition pathways.

## Conclusion

- Summary:** **Most transition standards met across services, but baseline documentation and youth/carer participation require urgent action.**
- Next steps & Re-audit plan:**
  - Policy & System:** Mandate referral fields for ethnicity and ID severity.
  - Clinical Practice:** Proactively invite youth and carers with flexible hybrid meeting options.
  - Closing Loop:** Embed culturally and neurodevelopmentally informed care. Re-audit in 12 months.

## Declaration

- Funding & conflict of interest:** None.
- Governance:** Clinical audit approved by SLAM NHS Foundation Trust.
- Acknowledgement:** Dr Ilias Partsenidis and Prof Andre Strydom for their guidance and support.
- Contact:** Dr Min-Ai Lim, SLAM NHS Foundation Trust.

## References

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- Medforth, N., & Boyle, C. (2023). Challenges, complexity, and developments in transition services for young people with disabilities, mental health, and long-term conditions: An integrative review. *Comprehensive Child and Adolescent Nursing*, 46(3), 180–200. <https://doi.org/10.1080/24694193.2023.2245473>