Transition from children's to adults' services



Consultation on draft guideline – deadline for comments: 5pm on 22nd October 2015 email: Transitionsctoa@nice.org.uk

	Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.
	 We would like to hear your views on these questions: Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.)
	3. What are the key audiences we need to consider in structuring the guideline?4. At what age does transition planning start now?5. How often do review meetings happen at present?6. How should parents be involved in transition planning?
	 7. Will these recommendations result in an impact on cost of services? 8. Which of these recommendations would lead to additional costs? 9. Will any of these recommendations lead to cost savings? See section 3.9 of <u>Developing NICE guidance</u>: how to get involved for suggestions of general points to think about when
	commenting.
Organisation name – Stakeholder or respondent organisation (if you are responding as an individual rather than a	British Association for Community Child Health
registered stakeholder please leave blank):	

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Comment	Document	Page	Line	Comments				
number	(full version, short version or the appendices	number	number					
		Or <u>'general'</u> for comments on the whole document	Or 'general' for comments on the whole document	Insert each comment in a new row. Do not paste other tables into this table, because your comments could get lost – type directly into this table.				
Example 1	Full	16	45	We are concerned that this recommendation may imply that				
Example 2	Full	16	45	Question 1: This recommendation will be a challenging change in practice because				
Example 3	Full	16	45	Question 2: Our trust has had experience of implementing this approach and would be willing to submit its experiences to the NICE shared learning database. Contact				
1	Short	4	14	Health and Social Care professionals are already stretched to their limits due to financial constraints. Additional funding will need to be provided to increase capacity in order for 'named workers' to be made available in supporting transition.				
2	Short	5	30	Current service models between adult and child services are rigidly aligned with age. This will be a major challenge to current service models and culture.				
3	Short	6	3	Transition planning and review in most areas are led by schools and education services. There is often little notice to health and social care professionals, making it difficult to attend such meetings.				
4	Short	8	25	A national model of a standard personal folder would be helpful.				
5	Short	9	24	This could be part of the 'Local Offer'				
6	Short	10	13	Is it realistic to expect GPs to be involved in transition process?				
7	Short	12	3	Good idea but again unrealistic in implementation. If this is a serious proposal, more detailed 'job description' for these roles will need to be developed, with clear accountability arrangements, and will be part of CQC inspection items.				
8	Short	13	1	Who will be responsible for carrying out this gap analysis? Will need to specify.				

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9	Short	14	1	Please give some examples of joint clinics. Also this will probably mean running clinics across different health providers, and there will be management challenges e.g. activities, income, administrative support etc.

Insert extra rows as needed

Checklist for submitting comments

- Use this comment form and submit it as a Word document (not a PDF).
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include page and line number (not section number) of the text each comment is about.
- Combine all comments from your organisation into 1 response. We cannot accept more than 1 response from each organisation.
- Do not paste other tables into this table type directly into the table.
- Underline and highlight any confidential information or other material that you do not wish to be made public.
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Spell out any abbreviations you use
- For copyright reasons, comment forms do not include attachments such as research articles, letters or leaflets (for copyright reasons).
 We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments, but it must be received by the deadline.

You can see any guidance that we have produced on topics related to this guideline by checking NICE Pathways.

Note: We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees.

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