

How Opening Specialist Camhs Inpatient Units Affected the Flow of Juvenile Admissions to Adult Psychiatric and Paediatric Medical Units in New South Wales, Australia

P. Hazell¹, T. Sprague², K. Feilds³, J. Sharpe⁴

¹Psychiatry, University of Sydney, Concord West, Australia ; ²MH-Kids Mental Health Drug and Alcohol Office, NSW Ministry of Health, North Sydney, Australia ; ³Rivendell Child Adolescent and Family Mental Health Service, Mental Health Services SLHD, Concord West, Australia ; ⁴InforMH Mental Health Drug and Alcohol Office, NSW Ministry of Health, North Sydney, Australia

Introduction: Attitudes, and in some cases legislation, make it decreasingly acceptable to admit people younger than 18 years to adult psychiatric inpatient units. One strategy to reduce the number of under 18s admitted to adult psychiatric units is the commissioning of specialist Child and Adolescent Mental Health (CAMHS) inpatient units.

Objective: Map the flow of admissions to acute adult psychiatric inpatient units and paediatric medical units in the years before and after the opening of specialist CAMHS inpatient units.

Aim: Determine if opening CAMHS inpatient increases or decreases the flow of admissions to acute adult psychiatric inpatient units and paediatric medical units

Method: Analysis of statewide admission data for under 18s to specialist CAMHS inpatient units, acute adult psychiatric inpatient units, and paediatric medical units for the period January 2001 to December 2013 in New South Wales, Australia.

Results: Five of 8 health districts experienced an increase in juvenile admissions to adult units in the year of opening a CAMHS unit. Admissions to related paediatric medical units increased in 3 of 7 health districts. Admissions to adult and paediatric units rose with time but there was no interaction between time and health district type (with/without CAMHS unit).

Conclusions: Opening CAMHS units may temporarily increase the number of juveniles admitted to adult units, but does not influence the flow of patients to non-CAMHS facilities in the longer term. CAMHS units appear to fulfil an additional as opposed to replacement role in the care pathway for young people with mental illness.