

## **Suicide risk during the transition of care from child and adolescent to adult mental health services**

### **Study summary**

Moving from child and adolescent into adult mental health services can be a high-risk period for patients. To better understand this risk, we are conducting a mixed methods study of suicide during this transition.

Our main aim is to reduce suicide risk and improve safety for all young people in mental health services. The study will extend across all NHS Trusts/Health Boards and some private providers in England, Scotland, Wales, and Northern Ireland. Specifically, we want to:

- Estimate how many patients under the age of 25 who died by suicide between 2018 and 2022 had moved from child and adolescent into adult mental health services, using existing routinely collected data;
- Highlight sociodemographic and mental health care characteristics within this group that services may wish to prioritise in their suicide prevention and quality improvement efforts;
- Review current clinical management to identify what is working well and what could be strengthened to help reduce suicide risk, and
- Gather feedback from patients, carers and clinicians on their experience of the move from child and adolescent to adult mental health services, to better understand how usual practice could be improved.

To achieve our aims, the study has three parts:

#### **Part one**

We will use existing information held by the National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH) based at the University of Manchester. We will look at a five-year period (2018-2022) to estimate the number and proportion of patients under the age of 25 years who had their care moved from child and adolescent to adult mental health services and died by suicide. In addition, we will identify sociodemographic (i.e., sex, ethnicity, living circumstances) and mental health characteristics (i.e. diagnosis, clinical care history) that may help guide prevention for this group.

#### **Part two**

We will interview mental health professionals who have experienced the death by suicide of a patient whose care was transferred from child and adolescent to adult mental health services. These interviews will help identify good practice and areas of improvement which could help to reduce suicide risk.

#### **Part three**

We will conduct anonymous online surveys with people with lived experience, carers, and clinicians to explore the differences in care and treatment young people experience before, during and after their move from child and adolescent to adult mental health services, and how these differences might affect suicide risk. Participants will need to have moved from child and adolescent to adult mental health services in the last three years and will be asked to reflect on this period and think about any experiences of suicidal thoughts, feelings or intentions during that time.