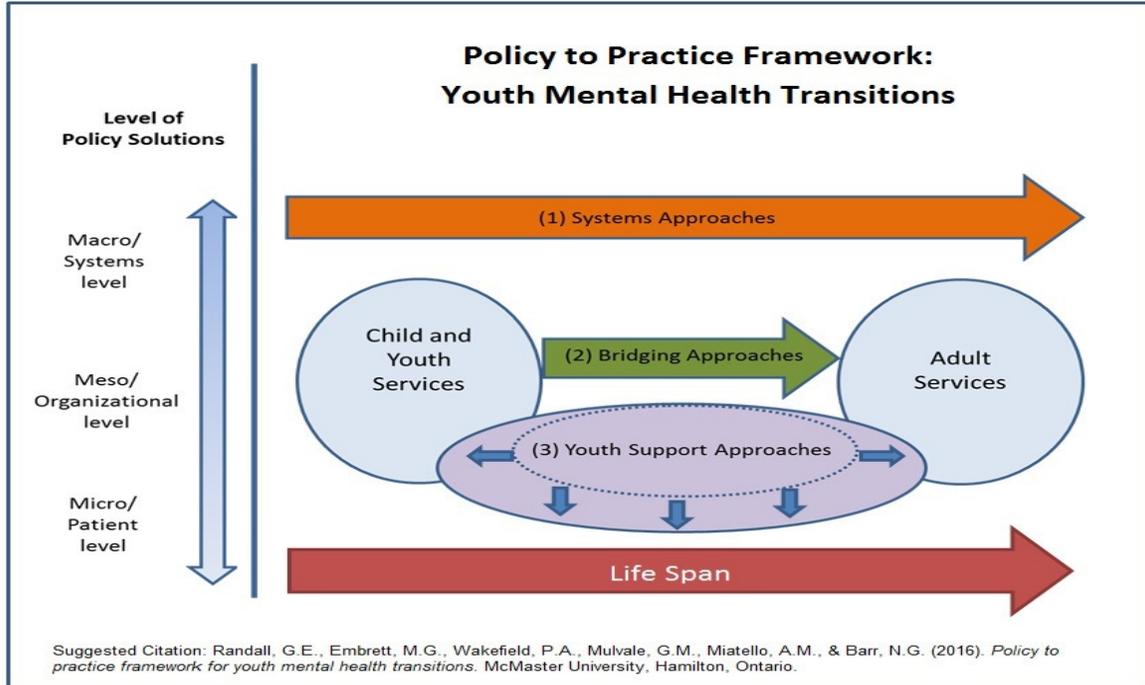


Policy to Practice Framework: Youth Mental Health Transitions

The framework depicts the characteristic approaches to enhancing continuity of care across the life span and identifies where the primary policy change/s (macro, meso, micro) must occur for a particular approach to be effectively implemented. The purpose of the figure is to clarify the current landscape of approaches and the associated policy level that can best support adoption of a given approach within a particular context.



(1) The **Systems Approaches** overcomes barriers and gaps in services through the development of **macro policies** that create systems without silos between child and youth and adult mental health services.

- a) **Holistic approach:** This idealistic approach integrates all health and other social services to meet multiple needs of individuals and supports social determinants of health.
- b) **Mental health integrated approach:** This version of the Systems Approach provides coordinated care, regardless of age, but only across mental health services.

(2) The **Bridging System Approaches** largely addresses barriers and gaps in services between child and adult services through **meso / organizational level policy**. These approaches acknowledge the gap between child and adult mental health services and focus on meeting the needs of transition-aged youth by helping to bridge the gap, and facilitate the transition of youth from child to adult services with minimal disruption.

- c) **Passive support approaches:** In this more traditional approach, youth are provided with information or referrals from their child and youth provider to adult services/programs without additional follow-up. There is typically little two-way communication between child and adult services aside from sharing youth files.
- d) **Transition facilitation approaches:** These approaches provide youth and families with assistance in connecting with alternative adult services, but don't provide services themselves. These approaches can be considered one step above referral. For example, a navigator or care coordinator actively works with the youth and family in trying to find suitable care in adult services, without providing any further services.
- e) **Transition service approaches:** These approaches provide temporary services to facilitate the transition process and may also provide services to help the youth prepare for treatment in adult services.
- f) **Community collaboration models:** In this approach, representatives of different organizations routinely meet to identify and overcome barriers to transitions. The collaboration efforts are often driven by individuals and may lose momentum as those individuals leave their organizations.

(3) The **Youth Support Approaches (YSA)** primarily overcome barriers and gaps in services through **micro / patient level policy**. YSA approaches feature services that are largely independent of child and adult services with a primary goal of trying to fill the gap in order to meet youth needs, rather than bridge across or integrate services.

- g) **Collaborative program approaches:** This approach features programs that coordinate the delivery of clinical and/or developmental services, without actually providing services to transition-aged youth. They may also coordinate other services in order to provide care to the youth. The specific services are not provided as part of the program itself, but are networked.
- h) **Treatment program approaches:** Programs using this approach provide a range of stand-alone clinical and/or developmental services to transition-aged youth independently from other services.