

Clinical - Children's Health
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08 February 2019

[REDACTED]

[REDACTED]

Dear [REDACTED]

Official Information Act (1982) Request

I write in response to your Official Information Act request, initially received 21 December, and clarified on 14 January. You requested the following information:

Please provide a link to or copy (if the DHB has them) of

a) Your DHB's current core policy document on facilitating education access for inpatient and outpatient children and young clients (including tertiary age) and/or

b) Your DHB's current core policy document on the transition and monitoring of transition from paediatric to adult services. I am aware that at least one DHB has a formal transition process and joint management document for each patient.

c) Your DHB's current core policy document on transitions and/or co-management between

a) Genetic and paediatric services

b) Paediatric and other specialist services and

c) Genetic and adult services.

Hopefully these are already documented and my thanks to those who have done key work in these areas.

Please also

- **Advise me if you do not have a written policy on any/each of the above, and**
- **If these situations are covered in a general DHB policy, and please send a link/copy of these policies.**

The CM Health Kidz First and Women's Health Division advises the following:

a) Your DHB's current core policy document on facilitating education access for inpatient and outpatient children and young clients (including tertiary age):

CM Health has had an overarching policy in place (**attached**) since 1998, and last updated in April 2018. This policy applies to all children (0 – up to 18th birthday), receiving hospital based or outpatient services.

The DHB has no written policy for the provision of DHB-provided Play Services. We do provide a comprehensive Play Service for children and young people while they are in hospital. The Early Childhood Education elements of this service operate under the Ministry of Education: “*Licensing Criteria for Hospital based Education and Care Service 2008*” and the *He Pou Tataki: How ERO reviews hospital based education and care service*.

For primary, intermediate and secondary school aged children who have an extended hospital stay; school services are provided and operated under the Northern Health School mandate (under the Ministry of Education as funder).

Both these services (play services and Northern Health School) have links to the community, and will as part of their programmes transition children back into early childhood centres and/or schools.

b) Your DHB's current core policy document on the transition and monitoring of transition from paediatric to adult services. I am aware that at least one DHB has a formal transition process and joint management document for each patient.

CM Health does not have an overarching policy for transitioning young people from paediatric to adult services, as all specialties have different processes and age criteria (depending on the speciality).

For most medical and surgical specialities, the transition is done from clinician to clinician, and with close involvement of the young person and their parent/ caregiver about the transition process. This tends to be a more facilitated and joined-up process for children with chronic illness/ disability. This is due to the paediatricians having known the child/ young person and their family for many years, and other services such as school, Needs Assessment and Service Coordination (NASC) agency and Primary Care/ community services may also be closely involved in the process.

CM Health also has a specialist Adolescent Health Community and Outpatient service (Centre for Youth Health), which provides specialist clinical outpatient services to people with more complex needs, and is available for consultation and advice in transitioning young people from paediatric to adult health services.

There is more information on our website about DHB Health services for youth

- <https://countiesmanukau.health.nz/our-services/youth-health-services/>

c) Your DHB's current core policy document on transitions and/or co-management between
a) Genetic and paediatric services
b) Paediatric and other specialist services and
c) Genetic and adult services.

CM Health does not have a further specific policy on this process for young people.

In the metro Auckland region, all Genetic Services are provided regionally by the Auckland District Health Board. Standard clinical referral documentation and clinical liaison practices between secondary and tertiary health services are used for the co-management and/or transitioning of patients requiring these genetic services.

For other specialist services, in some cases there will be national arrangements/ protocols existing for shared care agreements, such as for child with cancer. As noted in section (b), standard clinical referral and liaison practice occurs between DHB secondary services and specialist (including regional tertiary) services are used for the co-management and/or transitioning of any patients (adults and children).

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District Health Boards are guided by the Ministry of Health *National Service Coverage Schedule (SCS)*, as part of the Crown Funding Agreement we have with Government. This is publicly available and includes a section "Summary schedule: health and support services for children and young people"

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,



Fepulea'i Margie Apa
Chief Executive