

Case Manager's Guide to:

Stepping Stone Trust (SST) Youth Mobile Service (YMS)

Objectives of Youth Mobile Service:

The Youth Mobile team is made up of regulated and non-regulated health workers. The service has no statutory powers and is not an emergency response service.

The total resource of YMS is 5 FTE made up of two clinical and three non-clinical staff (which incorporates a 0.4 FTE part-time worker). The team are able to carry a total client case load of 35-40 depending on the mix of acuity levels, geographical locations, and after school-time peak periods.

YMS geographical region guideline is from Ashburton inland to Methven up to Glentui and across to Amberley.

The service users of the YMS will have a minimum of two 1 hour face-to-face visits each week, up to daily as required. Visits to service users are planned events 7 days a week with the exception of public holidays when the service is not operational.

Referrals are accepted from Specialist Mental Health Services (SMHS) teams which are age (14-24) and service appropriate.

The focus of the YMS is one of **short term intensive work** with service users (usually 4-6 weeks up to 6 months). This is often for monitoring during a sub-acute phase of un-wellness, a transition stage/period, and other high stress times, under the guidance and collaboration of a clinically responsible case manager. It could include providing support for whanau around psycho education.

The expectation is that Youth Mobile Staff work in partnership and alongside SMHS clinical case managers but **do not hold clinical responsibility for service users**.

Youth Mobile work is goal focused, strengths based, relapse prevention and reduction driven. The Youth Mobile worker will have community knowledge and networks to connect and refer the service user and whanau to/for ongoing supports and activity as part of the plan with SMHS.

YMS sometimes have small waiting lists and endeavour to be accessible to appropriately assessed service users in a timely manner.

When to consider SST Youth Mobile Services:

- When there is a significant deterioration in mental state, during a sub-acute phase for which intensive support in the community may prevent a hospital admission, transition stages and during times of other stressors for the service user
- On discharge from hospital and where additional support is required for monitoring and transition for a short period of time

- When there are other transitions and stressors for a service user which have the potential to cause a deterioration in the person's mental health
- When respite is not available and the service user is otherwise meeting the above criteria
- When more intensive input and/or greater frequency of visits/support is required

Points of difference from a Youth Community Mental Health Worker (YCMHW) role?

Youth Mobile	Youth CMHW
Skill building & social integration	Skill building & social integration
Hrs 10am-9.30pm Mon-Fri, 10am-6.30pm W/E	Hrs 8.30am-5pm Mon-Fri
More intensive, more brief intervention support (but can be longer term by negotiation)	Less intensive, longer term (up to a year) support
Referral from, & ongoing engagement with, SMHS	Referral from SMHS, as well as Primary & Statutory services (for up to 12 months' post discharge from SMHS).

New Process as of 1st May 2017:

1. SST Youth Services referral form to be completed along with requisite standard SMHS documentation attached (refer Current SST Referral Form for details) and emailed to youthreferrals@stepstone.org.nz
2. SST Referral Coordinator to review with service Clinical Coordinator (CC) who allocates to keyworker who will make contact with case manager
3. An initial meeting with the client & caregiver/s (as appropriate) at their home with the keyworker and CC (or another colleague if CC unavailable) to explain the service, sign off on disclosure & confidentiality forms, and assess environmental risk.
4. A back-to-back meeting required with SMHS & SST immediately followed by a meeting involving the service user and whanau, tasks to be completed at this meeting include:
 - (i) The Youth Mobile Treatment Plan which is then added into SAP by SMHS and includes contingency planning and crisis intervention protocol for after-hours work, including pathways to Crisis Resolution Teams etc.
 - (ii) Estimated time frames for the period SST YMS will be required for, and an **exit plan** developed with the case manager managing the next phase of treatment for the service user.
 - (iii) A 4-6 week review meeting to be scheduled at this appointment.

4-6 Week Review Meetings

At the 4-6week review meetings progress is discussed from the perspectives of the service user/whanau, SST YMS worker and SMHS clinical case management. The goals are evaluated and exit plan discussed and negotiated. Further 4-6week blocks can be negotiated, however there needs to be clear intervention/treatment planning with specific and formulated goals reviewed each occasion. This will also include a detailed exit plan and/or transition plan identifying time frames, referrals, and responsibilities (designating who) for the service user to move from SST Youth Mobile into either other services, activities or supports. There will be a relapse prevention and safety plan made with the service user, their whanau, and the case manager for use after exiting the YMS.



Youth Mobile Service (YMS) Initial Engagement Meeting:

Service User's Name (Client):
Whanau/Support:
Case manager:
SST YMS Worker:

What is working well? What would you like to be different?

Client:
Whanau:
Case Manager:
Youth Mobile:

Together we will work towards:

Focus	Action needed	By who?	When?

What is important for each party to achieve before discharge?

Client:
Whanau:
Case Manager:
Youth Mobile:

Date of next review and/or exit plan meeting:

Client:

Date:

Whanau:

Date:

Case Manager:

Date:

SST Youth Mobile:

Date:

CRITERIA FOR ACCESS TO YOUTH SERVICES

SERVICE	CRITERIA FOR ACCESS	ADDITIONAL NOTES
Youth Residential	<ul style="list-style-type: none"> Is aged between 14-18 Is currently and will remain under SMHS (Specialist Mental Health Services) Clients 18 and over can be offered a place within Youth Residential if: <ol style="list-style-type: none"> The referral has been received through the ROG (Residential Options Group) pathway, and If there are no younger people under 18 on the waiting list for the service 	<ul style="list-style-type: none"> A client's access to Youth Residential ends at the time of discharge from SMHS services
Youth Respite	<ul style="list-style-type: none"> Is aged between 14-18 Is currently under SMHS Has a 'Plan B' for accommodation, if discharge is required 	<ul style="list-style-type: none"> Clients over 17 are able to access Adult Respite Medication Prescribed Chart and Scripts are mandatory Respite slots are Mon/Tue, Wed/Thu, and Fri/Sat/Sun
Youth Mobile	<ul style="list-style-type: none"> Is aged between 14-24 Is currently and will remain under SMHS Requires support at a high level – with the frequency of visits a maximum of daily and a minimum of twice weekly 	<ul style="list-style-type: none"> Team operates 10am-9.30pm weekdays, 10-6.30pm weekends but not public holidays
Youth CMHW (CSW)	<ul style="list-style-type: none"> Is aged between 14-24 Has been under SMHS within the last 12 months 	<ul style="list-style-type: none"> A client can access the Youth CMHW service for up to 12 months following their discharge from SMHS As SST (Stepping Stone Trust) has a contract for 1.5FTE Rural CSW, referrals for rural clients are prioritised on the waiting list and typically picked up as soon as the next worker is available