# Transition from paediatric to adult epilepsy services: A patient centred approach

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## Introduction

Epilepsy affects 0.5% to 1% of children and is one of the most frequent neurologic conditions in childhood.<sup>1</sup> Although remission can be achieved during childhood, in 40-50% of cases, young adults continue to have seizures, requiring their care transferred to adult services. NICE quality standard (QS) cover diagnosing, treating and managing epilepsy both in children and young people (QS27) and adults (QS26).<sup>2,3</sup> Both quality standards include an agreed transition plan into the adult service. "Transition from children to adult services for young people using health or social care services" offers a detailed guidance on this process. (QS140)<sup>4</sup> This is an audit of our Epilepsy Transition Service against quality standards for Transition Services QS140.

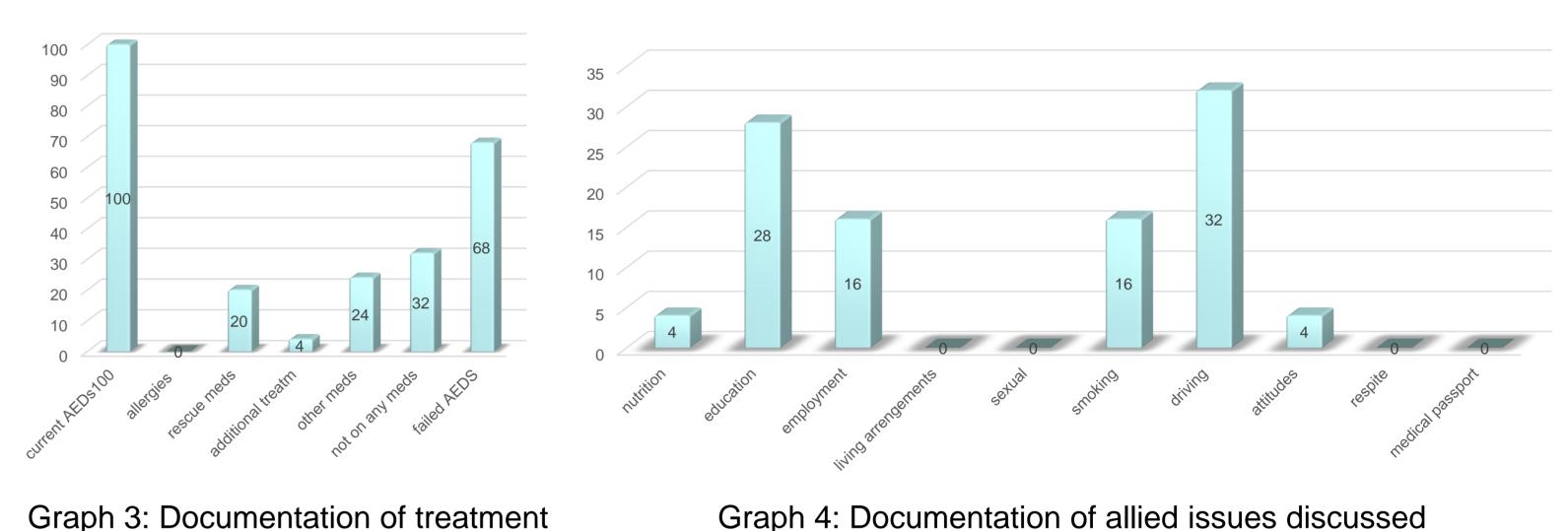
% patients

Graph 1: Epilepsy syndrome

Graph 2: Aetiology of epilepsy

#### Methods:

- ✓ We retrospectively analysed the clinical notes of the patients seen in the Epilepsy Transition Clinics (ETCs) at the Atkinson Morley Regional Neuroscience Centre St George's University Hospitals NHS Foundation Trust, between June 2015 and September 2017.
- ✓ We collected data on patient demographics, diagnosis and comorbidities.
- ✓ We also collected data on management, relevant clinical topics discussed during consultation as well as other significant issues, such as education, sexual health/contraception. employment, **Patients** driving, and parents/caregivers were asked to fill in an anonymised feedback form.



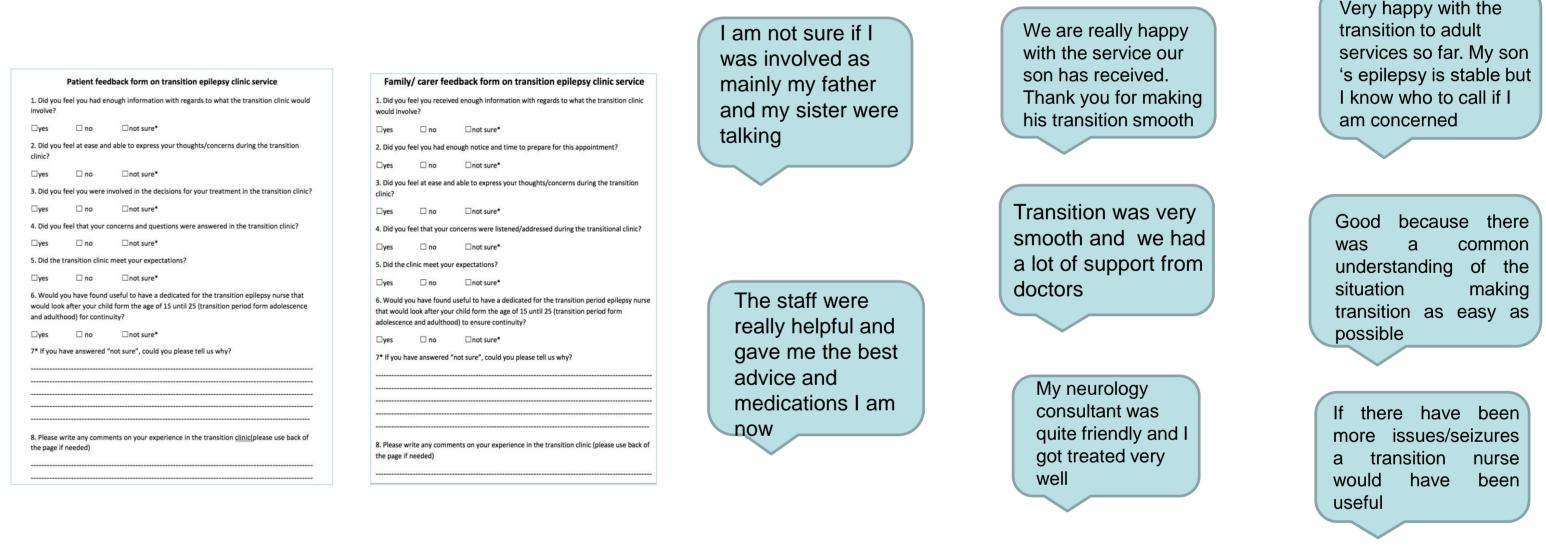
Graph 4: Documentation of allied issues discussed

### Results:

A total of 25 patients were identified, 19 males and 6 females, with a mean age of 17 years. Patient background epilepsy diagnosis and comorbidities are shown in graphs 1&2

In the ETC, a consultant pediatrician with a special interest in epilepsy and a consultant epileptologist were always present. An epilepsy nurse was present in half of the clinics and a learning disability nurse in 16%.

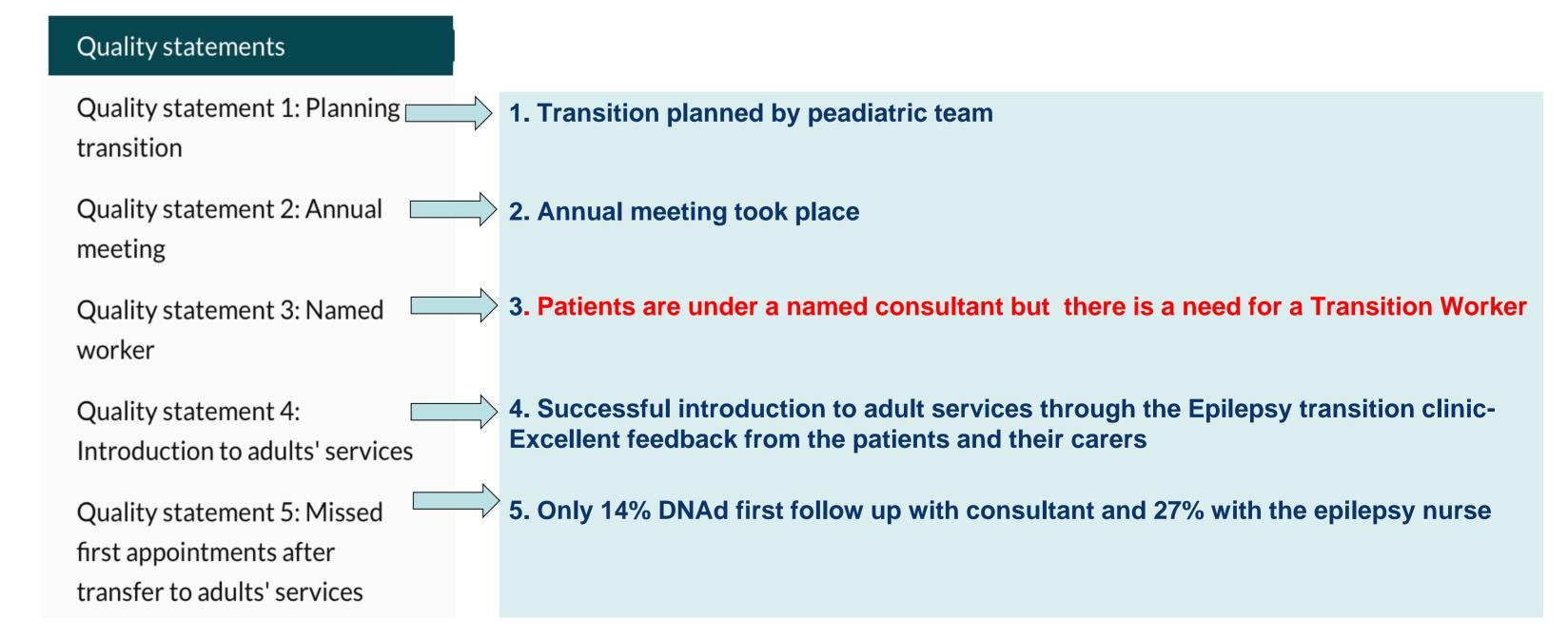
- Documentation
- ✓ Current antiepileptic drugs (AEDs) were documented in all cases and failed AEDs in 88%.
- ✓ Investigations were documented only if they were performed.
- ✓ Relevant topics were discussed in the majority of cases (clinical and) background information 68% and 64% respectively).
- ✓ Most allied issues, such as driving, smoking, were discussed only in patients where it was felt appropriate. However, no patients received consultation on sexual health and contraception during the ETC. (Graph 4)
- ii) Transition planning and feedback
- ✓ All patients had planned transition and clinic review held by the peadiatric team prior to transition.
- ✓ ETCs in our department received excellent feedback form patients and their parents/caregivers. All patients and caregivers felt they had received enough information during the clinical appointment, their concerns were heard and addressed and the clinic met their expectation.
- ✓ Only 14% did not attend the first follow up with the adult epileptologist and 27% with the adult epilepsy nurse.
- ✓ There is no Transition key worker in our service to coordinate care and support. during transition and 56% of patients and parents/caregivers would have found a "transition nurse" very useful.



Patient and carer feedback forms

Patient and carer feedback

# Quality standard [QS140] & Our Transition from children's to adults' services



#### Discussion:

Ensuring a smooth transition process is crucial for health and social related outcomes and engaging young people with adult services. Our practice meets most of the NICE quality statements and patients and parents/caregivers have a good experience of our services.

- ✓ To improve our documentation, we designed the "Referral Proforma for transition clinic" where all appropriate clinical and social information filled in by the peadiatrician is available to the adult neurologist prior to the ETC.
- ✓ The paediatric epilepsy team has also created an information leaflet on the epilepsy transition process as part of the preparation of patients to this journey.
- ✓ The next step to improve our service would be to identify a "transition nurse" as the key worker and source of support prior, during and after their transition period.