
Improving Adolescent and Young Adult Care in Queensland

Initiative Type

System Improvement

Status

Plan

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10 May 2021

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<https://test.clinicalexcellence.qld.gov.au/improvement-exchange/improving-adolescent-and-young-adult-care-queensland>

Summary

The Improving Adolescent and Young Adult Care in Queensland project was initiated by Queensland Child and Youth Clinical network (QCYCN) following a 2020 Clinical Senate enquiry into adolescents and young adults (AYA) health and care, held with clinical and consumer experts from across Australia. This work identified several priority areas to improve care and outcomes for young people.

This project has convened an expert workgroup to guide the work, which comprises multidisciplinary clinical and consumer experts and representation from several other adult-focussed clinical networks. Project priorities in the short and medium term include:

- the establishment of an AYA sub-network of QCYCN to ensure ongoing visibility of this work
- improving youth empowerment and engagement
- the development of a statewide, consensus based position statement for AYA care
- commencing a statewide, co-designed strategy to improve AYA care
- improving statewide collaboration and information and resource sharing
- health professional education and training in evidence based, AYA care.

Key dates

Feb 2021

Jun 2021

Implementation sites

Statewide.

Partnerships

General Medicine Clinical Network, Diabetes Clinical Network, Mater Young Adult Health Centre, Health Consumers Queensland and 10 Hospital and Health Services

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Aim

Identify the priority areas in need of improvement to optimise the care and outcomes for adolescents and young adults (AYAs) in Queensland. This is being done in alignment with AYA Clinical Senate enquiry outcomes from 2020, through state-wide, cross sector collaboration between multidisciplinary clinical and consumer experts and several clinical networks. It is being led by an expert workgroup that comprises the AYA Sub-network of the Queensland Child and Youth Clinical Network (QCYCN).

Benefits

To improve developmentally appropriate, holistic health care for young people currently treated across a variety of paediatric and adult, tertiary, community and primary care settings and across metropolitan, regional and remote locations throughout Queensland. This work aims to improve care and outcomes for AYAs and better support health professionals in work with young people and their families.

Background

Adolescents and Young Adults (AYAs) comprise 13% of the population in Queensland (ABS Census Data, 2016). Young people experience a unique profile of physical and mental ill health and have specific needs when interfacing with the health system. Advances in healthcare and technology, increasing survivorship and rising rates of chronic disease in paediatric years are resulting in an increasing proportion of this population entering adulthood with complex, co-morbid chronic health conditions and disability. Supporting positive transition between paediatric and adult healthcare is also particularly challenging for young people, families and health professionals alike.

Solutions Implemented

The workgroup and sub-network have been established and the priority areas identified. These are now under development.

Evaluation and Results

Each initiative within this project will be subject to its own evaluation process and criteria, but will be evaluated using the following means:

- patient and consumer feedback with the use of surveys, interviews and patient reported outcomes and experience measures where applicable
- clinician feedback with the use of surveys and interviews
- evaluation of the strength and impact of improved collaboration
- evidence of efficacy in terms of service development and improvement within health services across the state.

Lessons Learnt

Establishing strong, broad, meaningful stakeholder engagement and buy-in from the beginning with all parties (both clinical and consumer) is crucial to ensure meaningful priorities are identified. This also offers a solid foundation for the work moving forward, cross-site relevance and meaningful translation into practice and care.

References

COAG Health Council. (2015). Healthy, Safe and Thriving: National Strategic Framework for Child and Youth Health. Every Woman Every Child. (2017). *Technical guidance for prioritizing adolescent health*. Geneva, Switzerland: The World Health Organisation Institute of Medicine and National Research Council. (2011). *Child and adolescent health and health care quality: Measuring what matters* (<https://doi.org/10.17226/13084> Ed.). Washington, DC. Patton, G. C., Sawyer, S. M., Santelli, J. S., Ross, D. A., Afifi, R., Allen, N. B., . . . Viner, R. M. (2016). Our future: A Lancet commission on adolescent health and wellbeing. *The Lancet*, 387(10036), 2423-2478. doi:10.1016/S0140-6736(16)00579-1 Ross, D. A., Hinton, R., Melles-Brewer, M., Engel, D., Zeck, W., Fagan, L., . . . Mohan, A. (2020). Adolescent well-being: A definition and conceptual framework. *Journal of adolescent health*, 67(4), 472-476. doi:10.1016/j.jadohealth.2020.06.042 Royal Australian College of Physicians. (2008). *Routine adolescent health psychosocial assessment - position statement*. Sydney: Royal Australian College of Physicians. Sacks, D., & Westwood, M. (2003). An approach to interviewing adolescents. *Paediatrics and Child Health*, 8(9), 554-556. doi:10.1093/pch/8.9.554 Sawyer, S. M., Afifi, R. A., Bearinger, L. H., Blakemore, S. J., Dick, B., Ezech, A. C., & Patton, G. C. (2012). Adolescence: A foundation for future health. *The Lancet*, 379(9826),

1630-1640. doi:10.1016/s0140-6736(12)60072-5 Sawyer, S. M., Ambresin, A. E., Bennett, K., Hearps, S. J. C., Romaniuk, H., & Patton, G. C. (2011). *Towards an adolescent friendly children's hospital*. Melbourne: The Centre for Adolescent Health, The Royal Children's Hospital. Sawyer, S. M., Ambresin, A. E., Bennett, K. E., & Patton, G. C. (2014). A measurement framework for quality health care for adolescents in hospital. *Journal of adolescent health*, 55(1), 484-490. Sawyer, S. M., Azzopardi, P. S., Wickremarathne, D., & Patton, G. C. (2018). The age of adolescence. *The Lancet Child and Adolescent Health*, 2(3). doi:10.1016/S2352-4642(18)30022-1 Sawyer, S. M., & Patton, G. (2011). Why adolescent health matters. *Health*, 1(1), 110-127. World Health Organization. (2012). *Making health services adolescent friendly*. Geneva, Switzerland: World Health Organisation. World Health Organization. (2015a). *Core competencies in adolescent health and development for primary care providers: Including a tool to assess the adolescent health and development component in pre-service education of health-care providers*. Geneva, Switzerland: The World Health Organisation. World Health Organization. (2015b). *Global standards for quality health-care services for adolescents*. Geneva, Switzerland: World Health Organisation. World Health Organization. (2017). *Adolescent responsive health systems*. Geneva, Switzerland: World Health Organisation. World Health Organization. (2019). *Adolescent health and development*. Geneva: World Health Organisation.

Further Reading

< a href="https://clinicalexcellence.qld.gov.au/priority-areas/clinician-engagement/queensland-clinical-senate/meetings/adolescent-young-adult-care"> Clinical Senate meeting outcomes (2020): AYA Care - Doing Better