



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte
Ospidéal Naomh Lómáin Baile Phámar Baile Átha Cliath20.
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**7th April 2021,
Deputy Hourigan,
Dail Eireann,
Dublin 2.**

PQ

Number: 16786/21

PQ Question: To ask the Minister for Health his plans to address the delays in access to mental health services for children and young persons; and if he will make a statement on the matter. -Neasa Hourigan

Dear Deputy Hourigan,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

CAMHS provide specialist mental health service to those aged up to 18 years, who have reached the threshold for a diagnosis of moderate to severe mental health disorder that require the input of a multi-disciplinary mental health teams, such as moderate to severe anxiety disorders, moderate to severe depression, Bi Polar Affective disorder, Psychosis, moderate to severe eating disorders, self-harm that require the input of a multi-disciplinary mental health team.

Waiting lists vary according to Community Healthcare Organisation where although some areas have relatively short waiting lists regrettably waiting times are longer in other counties. Factors such as availability of specialist CAMHS clinicians, current vacancies and difficulties in recruiting in an international context can impact on waiting times in various areas. CAMHS wait lists are also impacted by capacities in other parts of the system - where young people may not receive early intervention and thus their needs escalate necessitating referrals to CAMHS.

In CAMHS there are two types of referral; an urgent referral and a routine referral. Every effort is made to prioritise urgent referrals so that young people with high risk presentations are seen as soon as possible and this is often within 24 to 48 hours. Severity of presenting symptoms affects waiting times - where waiting times for those with high risk presentations are shorter. This may impact on wait times for cases that are considered, by a clinician, to be less severe. CAMHS referral teams meet weekly to review all referrals and to assess the risk to the young person.



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The reasons for differences around the country relate to availability of specialist CAMHS clinicians, current vacancies and difficulties in recruiting in an international context. CAMHS wait lists are also related to capacities in other parts of the system where young people may not receive early intervention and thus their needs escalate necessitating referrals to CAMHS.

Waiting times for young people to be seen by Child and Adolescent Mental Health Services continue to be an issue in a number of CHO's. A renewed focus on improving capacity and throughput is in place in this area and some improvement is being shown.

	Total	<= 12 weeks No.	> 12 <= 26 weeks No	>26 <=39 weeks No	>39 <=52 Weeks No	>52 Weeks No
National Total	2,496	1,254	589	187	162	304
CHO 1	363	172	81	30	17	63
CHO 2	41	36	5	0	0	0
CHO 3	232	78	44	28	23	59
CHO 4	448	190	121	32	24	81
CHO 5	88	50	25	6	7	0
CHO 6	336	221	56	28	16	15
CHO 7	248	177	42	11	10	8
CHO 8	452	235	101	28	35	53
CHO 9	288	95	114	24	30	25

During the pandemic several additional services were offered to young people online. These include a free crisis textline, access to free digital counselling and extended online services from NGO providers. These additional interventions have proven to be effective for those accessing support for mild mental health illnesses such as anxiety and mild depression.

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,



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A handwritten signature in black ink, appearing to read 'T. O'Brien'.

Thomas O'Brien
General Manager Mental Health Services