



National Director, Community Operations
Dr. Steevens Hospital, Dublin 8, DO8 W2A8
Tel: 01 6352596 Email: communityoperations@hse.ie

Stiúrthóir Náisiúnta, Oibríochtaí Pobail
Ospidéal Dr. Steevens' Baile Atha Cliath 8, DO8 W2A8
T 01 6352596 R: communityoperations@hse.ie

17th November 2021

Deputy Bernard J. Durkan,
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

PQ 51273/21 - To ask the Minister for Health the degree to which children's health issues have continued to receive appropriate attention throughout the Covid-19 pandemic; if particular or specific action is required to address any issues arising or any backlog which has occurred as a result of Covid-19; and if he will make a statement on the matter

Clarification: "Childrens health issues referred to in the PQ include for example CAMHS, occupational therapy and psychology services".

-Bernard J. Durkan

Dear Deputy Durkan,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for response.

A key priority for Community Services is to ensure timely access to services for all. Waiting lists have been focus of the National Service Planning process and funding has been awarded to address the waiting list issues in Community Services. A Project Group has been established to oversee the design and implementation of initiatives to address backlogs within service constraints. There are 2 initiatives underway which are i) people waiting for orthodontic treatment with an initial focus on those people waiting for over 4 years and ii) children waiting for primary care psychology with an initial focus on children waiting for more than 12 months. In addition to these two initiatives, a number of other initiatives are in early design phase, one of which is for CAMHS services with an initial focus on children who have been waiting for support for longer than 12 months.

Further information in relation to the specific examples referenced in your question is detailed below:

Occupational Therapy

The HSE is committed to delivering efficient high quality occupational therapy services to all eligible service users. In 2020 a total of 310,153 patients were seen by HSE Occupational Therapy services.

New ways of working to address children's needs in a more timely manner were already under development prior to Covid-19 as part of a waitlist initiative e.g. Parent Training Groups. These new pathways will continue to

be rolled out. In addition, services are using tele-health systems to provide services, where appropriate in lieu of face to face interventions.

Building upon the experience from earlier waves of the pandemic, Community Services has developed a prioritisation framework to support local decisions to be made on service prioritisation. This approach will ensure that services focus on identifying and supporting patients who have the greatest need and enabling staff deployment where necessary.

Psychology in Primary Care

Primary Care psychology has long established roles in caring for children with mild-to moderate mental health needs or signposting those who need specialist services. In line with the National Access Policy, it provides an increasing level of service to those with non-complex disabilities or as yet undiagnosed/unrecognised disabilities.

In consideration of the children and young people waiting over 12 months to access Primary Care psychology services, Primary Care Operations and the Department of Health has provided additional funding to year end to decrease the numbers of children and young people waiting over 12 months to access psychology services.

Measures that are being implemented include: overtime/increased hours; the use of private capacity; arrangement of initial screening and/or once-off brief therapeutic appointments to supply clients with support/information; reprioritisation of clients etc. Since the commencement of these additional measures, significant progress has been made in the areas with an approximate reduction of 850 children or young people from the waiting lists to date.

Community Child and Adolescent Mental Health Service (CAMHS)

Currently, CAMHS teams are meeting referral demands. CAMHS targets were met or exceeded in 2020 in the domains as per table below.

	2020 Target	Outturn 2020	Outturn 2019	+/-
% of accepted referrals / re-referrals offered first appointment within 12 weeks by Child and Adolescent Community Mental Health Teams	78%	79.2%	78.4%	+1%
% of accepted referrals / re-referrals offered first appointment and seen within 12 weeks by Child and Adolescent Community Mental Health Teams	72%	74.5%	72.2%	+3.2%
%. of new (including re-referred) child/adolescent referrals offered appointment and DNA in the current month	<10%	6.6%	8.5%	-1.9%
% of urgent referrals to Child and Adolescent Mental Health Teams responded to within three working days	80%	89%	76.3%	+12.7%
No. of child / adolescent referrals (including referred) received by mental health services	18,128	17,358	18,831	-7.8%

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 affect 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. During the pandemic, CAMHS referral teams continued to meet weekly to review all referrals and to assess the risk to the young person.

Initiatives are underway to increase capacity in Primary Care Psychology Services across the HSE. This has included the funding and recruitment by Mental Health of an additional 120 additional Psychology Assistants to work in Primary Care in recent years. In addition, the recent establishment of the CAMHS Eating Disorder Teams in the Community to help those presenting with Eating Disorders.

CAMHS Waiting times

A renewed focus on improving capacity and throughput is in place in this area and some improvements are being shown. Waiting lists across the CHO's, whereby 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.

The table below provides data on the waiting list for Community CAMHS as at September 2021. Please be advised that due to the cyber-attack on HSE systems, this data is subject to ongoing review and validation. Waiting list data collected nationally does not capture data on age range

	Total	<= 12 weeks No.	> 12 <= 26 weeks No	>26 <=39 weeks No	>39 <=52 Weeks No	>52 Weeks No
National Total	2,948	1,318	787	390	258	195
CHO 1	294	175	60	27	27	5
CHO 2	79	49	30	0	0	0
CHO 3	364	104	92	40	48	80
CHO 4	583	160	152	121	97	53
CHO 5	246	115	74	41	10	6
CHO 6	441	305	98	24	5	9
CHO 7	270	164	61	26	10	9
CHO 8	396	152	116	57	39	32
CHO 9	275	94	104	54	22	1

CAMHS Inpatient Services

There were 322 children admitted to CAMHS in-patient units during 2020. Every effort was and continues to be made to prioritise urgent referrals so that young people with high risk presentations are seen as soon as possible. This is often within 24 to 48 hours.

Currently, there are 72 Inpatient CAMHS beds available in four units across the country.

- Merlin Park, Galway – 20
- Eist Linn, Cork – 16
- Linn Dara, Dublin - 24
- St Vincent's, Fairview – 12

These beds are available for use by all CHO's. A further 20 beds will be provided at the new Children's Hospital, which will include 8 Specialist Eating Disorder Beds. 10 additional Forensic CAMHS beds will be provided in the new National Forensic Facility currently under construction in Portrane, which will bring the total number of beds to 102. During the pandemic weekly monitoring of the activity and wait list for in-patient services continued, with on-going engagement with the in-patient units and CHO areas as appropriate.

Digital / Telehealth

The use of video enabled care within mental health services, grew significantly in response to COVID-19 as a method of maintaining accessibility to services, while limiting risk to service users and healthcare staff. HSE National Mental Health Services continue to work in partnership with our NGO partners, which include Jigsaw, Bodywhys, and Foroige, to provide digital services and supports as appropriate to young people as part of its ongoing response to the pandemic

The COVID 19 global pandemic has had a significant impact on all health services across the HSE. It remains too early to establish the exact extent and impact on Children's Health Services overall.

I trust this information is of assistance to you.

Yours sincerely,



Yvonne O'Neill,
National Director,
Community Operations