

Ceannasaí Náisiúnta Oibríochtaí Meabhairshláinte Ospidéal Naomh Lómáin, Baile Phámar Baile Átha Cliath 20. R: PQReps.NatMHOPS@hse.ie

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Deputy Pa Daly, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

21st November 2022

PQ Number: 54681/22

PQ Question: To ask the Minister for Health his views on the clinical governance structures in place

for CAMHS; and if he will make a statement on the matter - Pa Daly

Dear Deputy Daly,

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.

As per the CAMHS Operational Guideline 2019, Section 3.2 outlines clinical governance structures in CAMHS Teams.

- **3.2.1** Each CAMHS team has clear accountability structures in place to achieve the delivery of high-quality, safe and reliable services (Best Practice Guidance for Mental Health Services: (Supporting you to meet Regulatory Requirements and towards Continuous Quality Improvement, 2017), and all staff should be informed of this as part of their induction process.
- **3.2.2** There is a clear management structure which includes corporate and clinical governance responsibilities and reporting relationships.
- **3.2.3** The Consultant Psychiatrist is the Clinical Lead on the team. Each member of the CAMHS team also has a professional and management reporting relationship through their discipline-specific line management structure



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3.2.4 Each member of a CAMHS team has the professional responsibility to carry out clinical work with children and adolescents within their scope of practice, as defined by their professional and regulatory bodies such as the Medical Council, the Health and Social Care Professionals Council (CORU), the Nursing and Midwifery Board of Ireland (NMBI) and the Psychological Society of Ireland (PSI).

- **3.2.5** Each individual CAMHS team member knows their responsibility, level of authority and to whom they are accountable.
- **3.2.6** Each individual CAMHS team member seeks to demonstrate how the principles of quality and safety can be applied in their diverse practice to pursue improved outcomes for children and adolescents and their families. This is best achieved in a culture of trust, openness, respect and caring.
- **3.2.7** Clinical governance is covered in detail in the HSE publication, An Initiative of the Quality and Patient Safety Division: Sharing our Learning, 2014

Further information can be found at the following links:

https://www.hse.ie/eng/services/list/4/mental-health-services/camhs/operational-guideline/camhs-operational-guideline-2019.pdf

https://www.hse.ie/eng/about/who/qid/staff-engagement/resourceslinks/sharingourlearningfinal.pdf

The Report on the Look-Back Review into Child and Adolescent Mental Health Services (CAMHS) in South Kerry, also referred to as the 'Maskey Report', was published on the 26th January, 2022. The Maskey Report contains 35 recommendations covering a broad range of areas such as re-establishing trust in CAMHS, governance of the service, delivery of clinical services, improved clinical practice and the use of information and communication technology to support the delivery of services. In order to provide assurance to those who use CAMHS, the HSE's National Oversight Group commissioned a number of national audits in relation to CAMHS. This body of work includes an audit of compliance with the CAMHS Operational Guideline (2019) to include the design of a bespoke audit framework, a gap analysis of adherence to the COG, any regional or other factors impacting same, and conclusions on the requirement for targeted service improvement. A procurement process was undertaken and the successful provider has commenced on the 29th August 2022. This audit will be completed within 6 months of the start date.

I trust this information is of assistance to you.

Yours sincerely,



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