

> Head of Operations, Mental Health Service St Loman's Hospital, Palmerstown, Dublin 20. Email: PQReps.NatMHOPS@hse.ie

Deputy Richard Bruton.
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

21st September 2022

PQ Number: 42933/22

PQ Question: To ask the Minister for Health the progress that has been made to reduce waiting times in the Children and Adolescent Mental Health Service in each of the CHO areas; if new approaches are deemed necessary; the progress that has been made to date in the audit of CAMHS following the Maskey Report, the progress of the review being undertaken by the Mental Health Commission; and if he will make a statement on the matter. - Richard Bruton

Dear Deputy Bruton,

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.

## **Community CAMHS**

Community CAMHS refers to child and adolescent mental health services that are delivered in outpatient and day hospital settings, with the majority of CAMHS interventions being delivered in the community, close to people's homes. CAMHS community mental health teams (CMHTs) provide clinical assessment, formulation, diagnosis and multi-disciplinary interventions to children and adolescents based on their identified needs. They are also responsible for providing advice, information and support to parents in order to help them to support children and adolescents with moderate to severe mental disorders at home.

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.



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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.

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. Approval has recently been secured for Community Services to drawn down Access to Care funding in line with the published Department of Health Waiting List Action Plan for a CAMHS waiting list initiative. This phased initiative is seeking to remove an additional 1,300 children and young people from waiting lists before the end of 2022. €3.8 million was allocated to CAMHS from the €20 million Community Services waiting list budget allocation.

## **Progress update following the Maskey Report**

By way of update, 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 26<sup>th</sup> January, 2022.

Following this the HSE stood up a National Oversight Group to oversee, monitor and report on the implementation of the Maskey Report. The National Oversight Group is jointly chaired by the Chief Operations Officer and Chief Clinical Officer and provides regular progress reports to the HSE Board's Safety and Quality Committee.

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 prescribing practice, compliance with the HSE CAMHS Operational Guidelines and research on service user and key stakeholders experiences of CAMHS.



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## National CAMHS Audit(s)

- i. Independently chaired by Dr Collette Halpin, an expert team has been established to conduct an audit of prescribing practice in CAMHS. Membership of the expert group also includes Dr Imelda Whyte, nominated by the College of Psychiatry, and Dr Suzanne McCarthy, Senior Lecturer in Clinical Pharmacy Practice, UCC. The expert team is administratively supported by the HSEs National Centre for Clinical Audit and Community Operations. A pilot has been completed with four CHO areas and a series of webinars have been conducted. Analysis of the Pilot data has commenced and is near completion. The national audit commenced in all CAMHS teams on the 14<sup>th</sup> July 2022, with a high response rate to date. It is anticipated that full data analysis will commence on 19th September 2022 and the Expert Team expects to report on the findings in Q4 2022.
- ii. An audit of compliance with the CAMHS Operational Guideline (2019) has also been commissioned 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 29<sup>th</sup> August 2022. This audit will be completed within 6 months of the start date.
- iii. UCC has been engaged as an academic partner to conduct qualitative research into CAMHS experiences. This research will involve a qualitative study of CAMHS experiences in order to determine the lived experience of service users, families and carers, staff, referrers and other key stakeholders interacting with the CAMHS service. The research methodology for this audit strand requires ethical approval and this process is well underway. It is expected the research will be completed within six months from confirmation of ethical approval.

Alongside these independent audits a number of internal HSE work streams are being established to take responsibility for the implementation of the outstanding recommendations. The Maskey implementation team is working very closely with the Implementation Group for Sharing the Vision, to ensure that we are adopting a truly systemic approach to changes within CAMHS and are avoiding duplication.

## Progress of the review being undertaken by the Mental Health Commission

This is a matter for the Mental Health Commission to respond to.

I trust this information is of assistance to you.

Yours sincerely,



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**National Mental Health Services**