

Oifig an Stiúrthóra Náisiúnta Cúnta Oibríochtaí Meabhairshláinte

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Deputy Róisín Shorthall. Dail Eireann, Leinster House, Kildare Street, Dublin 2.

29th February 2024

PQ Number: 45901/23

PQ Question: To ask the Minister for Health the steps being taken to enhance the coordination and governance of community based child and health services and establish a continuum of care, particularly given the number of HSE funded service providers; and if he will make a statement on the matter. –Róisín Shorthall

Dear Deputy Shorthall,

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.

The mental health of children and young people is a key priority for the HSE. In the development of youth mental health services, it is crucial that we prioritise the promotion of good mental health, intervene early when problems arise, and ensure clear pathways to community-based mental health services for those who require extra supports.

Child and Adolescent Mental Health Services (CAMHS) are specialist mental health services for children and young people who have a moderate to severe mental health disorder. For these children and young people, it is particularly important to have access to integrated and person-centred supports provided by a multidisciplinary team of skilled professionals.

In February 2022, the Inspector of Mental Health Services announced the decision to carry out a review of the provision of CAMHS in accordance with the Mental Health Act 2001. The HSE fully engaged in the review process, which has contributed to our ongoing work to improve services for the children, young people and families who need the support of CAMHS. Following publication of an Interim Report in January 2023, the MHC published a Final Report on 26th July 2023 outlining 49 recommendations. The report makes systemic findings and conclusions, as well as highlighting concerns about the specific care provided to some children. The HSE engaged with the Inspector of Mental Health Services in the course of this review and when specific concerns were identified, the HSE immediately put in place targeted action plans to address them.

Over the past decade the HSE has prioritised and invested in child and youth mental health service improvement, including in CAMHS. Despite these enhancements, the HSE acknowledges that service deficits remain, including access, capacity, and consistency in quality of services provided. The



Maskey Report and the national audits of CAMHS provisions arising from it, together with the Mental Health Commission's (MHC's) Report on CAMHS provision, highlighted the need for continued service improvement in child and youth mental health services.

In terms of enhancing co-ordination and governance within CAMHS, the National Child and Youth Mental Health Office was established in September 2023 with the recruitment of a dedicated Assistant National Director (A.N.D.) for Child and Youth Mental Health and a National Clinical Lead for Child and Youth Mental Health. This office will provide leadership, operational oversight, governance and delegated management of all service delivery and improvement in youth mental health services in Ireland. The A.N.D. reports to the HSE National Director for Community Operations and the National Clinical Lead for Child and Youth Mental Health reports to the National Clinical Advisor Group Lead for Mental Health. They will be supported by a dedicated team for which funding has been provided. As part of the establishment of the new Child and Youth Mental Health office, a comprehensive strategy for Child and Youth Mental Health will be developed and quarterly progress reports will be provided to the HSE Board.

In addition a National Oversight Group (NOG) was established following the publication of the Maskey Report in January 2022. The group is co-chaired by the HSE's CEO and COO and oversees the CAMHS service improvement with regular reports provided to the HSE board committees.

As part of the HSE's implementation of the MHC's 49 recommendations, there are a number of recommendations specifically related to enhancing the coordination and governance of community based child and health services. These are grouped under the following recommendation categories:

- 1. Primary Recommendations
- 2. Governance
- 3. Risk Management
- 4. Clinical Governance
- 5. Staffing of CAMHS
- 6. Access to CAMHS
- 7. Integration of Children's Mental Health Services
- 8. Vulnerable Children
- 9. Involvement of Young People and Their Families in CAMHS

Each of the 49 recommendations identified are at various stages of implementation, with the majority of them "In progress". Some key recommendations include:

Clinical Governance

Rec 20. The HSE must apply the HSE Principles of Good Clinical Governance in CAMHS. Adherence to these principles by CAMHS in each CHO must be monitored by the HSE, leading to reports that are published on the HSE website.

Rec 21. As a matter of urgency, the care and treatment provided in CAMHS should be standardised across and within CHOs, so that each child/young person has the same opportunity to access the most appropriate evidence-based treatment according to their need.

Rec 22. Team/clinical coordinators must be funded for each CAMHS Team so that the core processes of referral, assessment and care planning, review and discharge are carried out consistently across CAMHS and that arrangements for staff supervision and continuous professional development are put in place.



Rec 23. Clinical audit must become a part of the function of CAMHS Teams. This should be supported and overseen by senior management. Regular forums for sharing information and learning from clinical audits across teams in CHOs should be facilitated.

Integration of Children's Mental Health Services

Rec 39. All children and young people's mental health services should be fully integrated so that children can move seamlessly between services in a timely manner according to their needs.

Rec 40. The HSE must ensure that the mental health services for children are a continuum of services and resource these services so they can provide timely interventions whether children/young people have mild, moderate or severe mental illness.

Rec 41. A single-point-of-contact triage system within each CHO should be developed for all referrals to CAMHS, with the ability to prioritise assessments with CDNTs and Primary Care should this be required. This will result in the timely onward referral to the appropriate services and prevent children and young people sitting on waiting lists for CAMHS services for which they do not meet the criteria.

In order to enhance the co-ordination and governance of community based CAMHS and establish a continuum of care it is vital that children, young people and their parents/guardians are involved at every level of CAMHS service planning process.

Further detail on the MHC's final recommendations can be found here: <u>https://www.mhcirl.ie/sites/default/files/2023-07/CAMHS%20Recommendations.pdf</u>

I trust this information is of assistance to you.

Yours Sincerely,

Paul Braham Senior Operations Manager (Area DON) National Mental Health Services