

Sub Committee
on
Mental Health

OPENING STATEMENT

Mr Damien McCallion
Chief Operations Officer

14th February 2023



Good morning Chairman and members. Thank you for the invitation to meet with the Sub Committee on Mental Health to discuss the Interim Report on provision of child and adolescent mental health services (CAMHS), which was recently published by the Mental Health Commission (MHC). I am joined by my colleague(s):

- Mr Jim Ryan, Head of Mental Health Operations
- Dr Amir Niazi, National Clinical Advisor and Group Lead for Mental Health
- Dr Amanda Burke, Child & Adolescent Consultant Psychologist and Executive Clinical Director for Galway Roscommon Mental Health Services

Our mental health is influenced by many different factors. While the continued enhancement of specialist mental health services is important, the mental health of our young people depends on a broad public health approach that builds on collaboration across the health services, the education sector, statutory and voluntary bodies, and within our communities.

The age of onset of mental health difficulties typically falls around the late teenage years and early twenties, and adverse early childhood experiences can be a significant predictor of serious mental health difficulties in later life. In the development of youth mental health services, it is therefore critical that we prioritise the promotion of good mental health, intervene early when problems develop, and ensure clear pathways to community-based mental health services for those who need extra supports.

CAMHS is a specialist mental health service for the approximately 2% of 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 multi-disciplinary team of skilled professionals. I acknowledge that there are service deficits, both in terms of access, capacity and consistency in the quality of services we provide. On behalf of the HSE, I wish to apologise to any child or young person who has not received the standard of care they should expect.

Our CAMHS teams receive nearly 22,000 referrals every year and deliver close to 225,000 appointments for children and young people who need support. CAMHS is challenged by a growth in demand for services, coupled with the impact of ongoing staff retention and recruitment difficulties. Between 2019 and 2022, referrals into CAMHS have increased by 16%, while the total number of appointments seen has increased by 10% in that same period. As of end December 2022, there were 4,293 children and young people waiting to be seen, which represents an increase of 21% compared to the year before.

We continue to manage capacity proactively through waiting list initiatives, specifically targeting areas with particular challenges and those waiting longest. In the period from June up to end of December 2022, 758 additional cases have been seen and taken off the CAMHS waiting list, with the intention to continue this initiative in 2023. Every effort is made to prioritise urgent cases so that the referrals of young people with high risk presentations are addressed as soon as possible. This is often within 24 to 48 hours and in 2022, 92.7% of all urgent cases were seen within three working days and 63% of all referrals were offered appointments and seen within 12 weeks. The severity of presenting symptoms as well as an assessment of risk is always taken into account in terms of waiting times.

However we recognise that some people are still waiting too long for access to services, either in primary care or in CAMHS services. We have seen significant increases in demand for all our youth mental health services further adding to the waiting list in some areas.

There has been a significant investment in youth mental health services and CAMHS over a number of years to meet increased demand and to improve services for children and young people with mental health difficulties.

Within the past six years, €22.6m of development funding has been directed to enhance CAMHS services, bringing the total funding to approximately €137m. Since 2013, an additional 18 CAMHS teams have been established and close to 325 additional Whole Time Equivalent (WTE) posts added to our workforce. There are currently 73 multi-disciplinary CAMHS teams in place providing important assessment and treatment services. Alongside these targeted enhancements of capacity in our CAMHS teams, we have invested in telehealth, eating disorder teams and in-patient care. Importantly, we have also invested in services such as Jigsaw and Primary Care Psychology for children and young people with mild to moderate mental health difficulties who do not need to access the specialist mental health services that CAMHS provide. Launched in 2019, the CAMHS Operational Guideline (COG) is another central output from this service improvement journey and is the standard against which we hold teams to account.

The Interim Report into CAMHS was published by the MHC on the 23rd of January this year. Alongside the national audits arising from the Maskey Report, it is a welcome contribution to our ongoing work to improve services.

The Interim Report is based on the Inspector of Mental Health Services' review of CAMHS provision in five of our nine Community Healthcare Organisations (CHOs). Arising from the review, the MHC has raised both general concerns about the provision of CAMHS, and specific concerns regarding a number of children and young people within the care of CAMHS teams in CHOs 3, 4, 5 and 7. I can reassure the Committee that the HSE has taken, and will continue to take, all concerns very seriously, and that any concerns regarding children and young people in our care were promptly and comprehensively addressed.

Of the specific cases referenced by the MHC, there are no children or young people not being followed up, and there are currently no active relevant concerns in regard to these cases. If any parents or young people have concerns about the care they are receiving, they should in the first instance contact their CAMHS team and key worker, or they can contact HSE's information line by calling 1800 700 700.

The HSE has immediately commenced implementation of the MHC recommendation that was for the HSE, which was a clinical review of open cases not seen in the last six months by their CAMHS teams and also of those who have been prescribed neuroleptic medication. This review is now underway in teams across the country and will provide assurance that these children and young people are receiving appropriate care, reflective of both their current and future needs. Those impacted by this review, will be contacted directly by the relevant CAMHS team, and this process is targeted for completion by end of May this year.

Building on ongoing initiatives, the HSE will now move to consolidate and expand our overall youth mental health improvement programme.

This programme will further build capacity within our CAMHS teams, in tandem with a continued focus on early intervention and ‘upstream’ youth mental health services. It will also prioritise the need for a fit for purpose IT infrastructure, modern premises, and support CAMHS teams to operate on the basis of a shared governance model where each clinician work to the full scope of their practice. In all aspects we will have a focus on innovation and on fully utilising telehealth technologies to optimise access to care.

The improvement of mental health supports for our young people will need a coordinated response involving all aspects of the service, directed by national mental health policy, and supported by multi-annual investment. Within the HSE, the programme will be led by an Assistant National Director and a Clinical Lead for youth mental health. Both roles have been advertised and are currently in recruitment.

Youth mental health will continue to be a key priority for the HSE and will be guided by the *Sharing the Vision Implementation Plan 2022 – 2024*. Published in March 2022, this implementation plan provides a three-year roadmap for the continued development of mental health services. The HSE’s work to deliver *Sharing the Vision* will be driven by a strong outcomes focus and a commitment to report on progress in an open way through, among other things, the online publication of quarterly status reports.

The HSE will continue to collaborate fully with the MHC to ensure the timely completion of its review of CAMHS provision.

It is welcome that the Interim Report highlights that many young people and their families have received excellent care and treatment, and the final report will provide an opportunity for the MHC to highlight good practice so learning can be shared throughout the service. At the same time I acknowledge that there are deficits in current service provision, including with regard to access, capacity and consistency in the quality of services we provide for children and their families.

We are however not waiting for the final report. We continue to make investment and work, in all our Community Healthcare Organisations, to implement improvements in our youth mental health services for children and their families.

This concludes my Opening Statement.

Thank you.