DEVELOPMENT OF CHILD & ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) in ENGLAND

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INTRODUCTORY REMARKS

In England:
• The ‘hot button’ issues are much the same
• The challenges you face are much the same
• The hopes for your system are much the same
• Your vision for the future (focused on the whole system for all children and youth) is much the same

But there is a big difference:
• The services provided are not entirely determined by the ‘providers’ of mental health care
• Services are commissioned separately and in a multi-agency context
DEFINITIONS

CAMHS – Child and Adolescent Mental Health Services

– What are they?
– How are they conceptualised?
– What does a comprehensive CAMHS look like?

Answers to be found in the appendices of the National Service Framework (NSF) for Children, Young People & Maternity Services, Chapter 9.
WHERE HAVE WE COME FROM?

- Surveys of child mental health morbidity: 1996-....
- Targeted financial support for CAMHS since 1998
- The CAMHS innovation projects: 1998-....
- The R & D programme: 1999
- The Public Service Agreement target: 2003-2006
- The CAMHS mapping: 2002, 2003,....
- The National CAMHS Support Service 2002-....
- The National Service Framework for Children, Young People and Maternity: 2004
Epidemiological Research

- Office for National Statistics Surveys
  - Mental health of children in Great Britain
  - Mental health of looked after children
  - Longitudinal survey
  - Repeat national survey 2004 (process underway)
Service Research

- CAMHS Innovation Projects
  - What’s New: Learning from the CAMHS Innovation Projects (Zarrina Kurtz & Cathy James)
  - Summary published and full evaluation to be published soon

- CAMHS in Schools
- CAMHS in Primary Care
- In-patient studies
  - NICAPS
  - CHYPIE
National Child & Adolescent Mental Health Services Mapping Exercise
Glover, Dean, Hartley & Foster

2002 published
2003 ?published
2004 data to be collected November
WEB SITES

• National Child Mental Health Surveys
  – www.statistics.gov.uk

• Innovation Projects
  – www.doh.gov.uk/NSF/Children.htm

• CAMHS Mapping
  – www.dur.ac.uk/service.mapping/camh
CURRENT POLICY CONTEXT

- Public Service Agreement Target – the standard for improving access to a comprehensive CAMHS to be achieved and maintained
- Increased Investment - £300m additional over period 2003-2006
- Every Child Matters – Change for Children
- Child Poverty Review
- Mental Health Bill – Safeguards for children
- National Service Framework for Children
POLICY CONTEXT

• Public Service Agreement Target – the standard for improving access to a comprehensive CAMHS to be achieved and maintained

• Increased Investment

• Every Child Matters – Next Steps

• Child Poverty Review

• Mental Health Bill – Safeguards for children

• National Service Framework for Children
National Service Framework for Children, Young People and Maternity Services

Child and Adolescent Mental Health (CAMHS)

Change for Children - Every Child Matters
NATIONAL SERVICE FRAMEWORK (NSF) FOR CHILDREN

11 STANDARDS

1. Promoting health & well-being, identifying needs and intervening early
2. Supporting parenting
3. Child, young person and family centred services
4. Growing up into adulthood
5. Safeguarding children and young people
6. Children and young people who are ill
7. Hospital standard
8. Disabled children & young people and those with complex needs
9. Mental health and psychological well-being of children and young people
10. Medicines for children and young people
11. Maternity services
NSF for CHILDREN
Mental health and psychological well-being of children and young people: Standard 9

• Vision
• Standard
• Markers of good practice
• Rationale
• Interventions
  – Early years
  – Mental health promotion and early intervention
  – Partnerships with children, young people and their families
  – Access and location of services
  – Improving service equity
  – Partnership working
  – Developing high quality multi-disciplinary teams
  – Planning and commissioning of services
  – Training and development
NSF for CHILDREN

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NSF for CHILDMREN
Standard 9

All children and young people, from birth to their eighteenth birthday, who have mental health problems and disorders have access to timely, integrated, high quality multidisciplinary mental health services to ensure effective assessment, treatment and support, for them, their parents or carers.
NSF for CHILDREN

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- Appendix 1 & 2
NSF for CHI LDREN
Markers of Good Practice

• Mental health promotion
• Direct and indirect care
• Access to urgent care
• 16 & 17 year olds
• Children with a learning disability
• Children with complex needs
• Size of teams
• Appropriate in-patient care
NSF for CHILDREN
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NSF for CHI LDREN

Interventions

Partnership Working (8.1 – 8.3) e.g. -

• Complex child abuse cases
• Behavioural disorders – complex cases
• Children with SEN
• Collaboration with adult mental health services
• Early Intervention teams
• Children of mentally ill parents
• Children within the youth justice system
‘HOT BUTTON’ ISSUES

• Mental health or emotional wellbeing?
• Retaining & sustaining a separate profile for CAMHS
• Defining the scope of CAMHS
• Achieving a shared agenda and understanding of CAMH and the evidence base
• Achieving a balance within services
• Managing expectations & increasing access
• Recruitment & retention
• Developing new ways of working
• Tackling issues related to diversity
• Developing credible & reliable performance indicators
LESSONS LEARNED

- Commission supporting evidence early
- Think ahead – 1, 2, 5 & 10 years
- Tackle workforce & training from the outset
- Retain a hold on the proactive policy agenda
- Develop and position champions & leaders
- Bring key stakeholders with you
- Be realistic and be wary of rhetoric
- Develop an implementation strategy
- Never underestimate the value of Ministerial and Government support
- Don’t relax!
MUST DOs

• Tackle workforce & training
• Develop your champions & leaders
• Ensure sign-up from key stakeholders
• Retain balance in policy development
• Develop an implementation strategy
• Keep up the advocacy!
DON’T -

• Rely on short term project funding
• Spread your energies too widely
• Make new demands on services that have no new resources unless genuine service reconfiguration is possible
• Let other policy imperatives hijack the CAMHS agenda
• Allow yourself to be the solution for other policy initiatives without good reason
• Relax!
WEBSITES

• National Child Mental Health Surveys
  – www.statistics.gov.uk

• Innovation Projects

• CAMHS Mapping
  – www.dur.ac.uk/service.mapping/camh