



Deputy Violet-Anne Wynne,
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

02nd February 2024

PQ Number: 4637/24

PQ Question: To ask the Minister for Health the reason the decision was made to exclude children with autism from the CAMHS hub pilot; and if he will make a statement on the matter.-Violet-Anne Wynne.

Dear Deputy Wynne,

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 vision for CAMHS Hubs is to provide intensive brief mental health interventions to support existing CAMHS teams in delivering enhanced responses to children, young people and their families/carers, in times of acute mental health crisis.

Under Phase 1 of the planned programme of work, as referenced in the Model of Care, a CAMHS Hub will provide an additional multi-disciplinary and mental health service for children and young people under 18 years who are attending a CAMHS Community Team, who are presenting in acute mental health crisis and / or are in need of a short period of intensive community treatment. All referrals to the hub are made via existing CAMHS Community Mental Health Teams, where it is determined that the needs of the young person can be met more effectively in the community, through a rapid response and time-bound, intensive brief intervention.

The CAMHS Hub team will compliment and support the work of existing CAMHS Community Mental Health Teams (CMHT), at times where the CAMHS Community Mental Health Team deem that the young person requires an additional intensive brief intervention service to reduce the potential of admission or relapse.

The CAMHS Operational Guidelines currently outlines the types of referrals not suitable for CAMHS (Section 4.5: Types of Referrals not Suitable for CAMHS). The criteria outlined in the CAMHS Hub Model of Care reflects Section 4.5 of the Operational Guidelines, due to the fact that the referral pathway lies directly between the CAMHS Teams and CAMHS Hub in Phase 1.

Section 4.7 of the Model of Care for CAMHS Hubs outlines the Joint Working and Shared Care Process in cases where children and young people may present with additional complex needs and an acute



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mental health crisis. Where the child or young person presents with a moderate to severe mental disorder, it is the role of CAMHS CMHT to provide appropriate multidisciplinary mental health assessment and treatment for the mental disorder. This may involve joint working (as per the Joint Working Protocol, 2021) or shared care with other agencies, including HSE Primary Care, Children's Disability Network Teams, Integrated Children's Services Forum and other agencies supporting children and young people.

When information indicates that there is more than one HSE service that could best meet the child or adolescent's needs, consultation should take place with the other service to determine which is the most appropriate or whether a joint approach to assessment and intervention is indicated.

As the primary role of the CAMHS Hub Team is to provide brief intervention for acute mental health crisis, the CAMHS teams will continue to manage and oversee joint working and shared care for children and young people accessing services, in line with the CAMHS Clinical Operational Guidance. The CAMHS Hub staff will liaise with the CAMHS CMHTs as required in relation to shared care arrangements.

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in blue ink, appearing to be 'Brian J. Higgins', written over a horizontal line.

Brian J. Higgins
Assistant National Director Healthcare Strategy
Disability and Mental Health Services