

## Oifig an Stiúrthóra Náisiúnta Cúnta Oibríochtaí Meabhairshláinte

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Deputy Violet-Anne Wynne.
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

02<sup>nd</sup> February 2024

PQ Number: 4642/24

PQ Question: To ask the Minister for Health his views on the success or otherwise of the Vision for Change target of establishing 129 CAMHS teams nationwide; 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.

HSE Child and Adolescent Mental Health Services (CAMHS) provide assessment and treatment for young people who are experiencing mental health difficulties. While a broad range of services support the mental health of children and adolescents, the term CAMHS refers to specialist mental health services for young people up to 18 years of age who have reached the threshold for a diagnosis of moderate to severe mental health disorders.

The development of CAMHS in Ireland is directed by the national mental health policies: 'A Vision for Change' (AVfC) (2006) and 'Sharing the Vision: A Mental Health Policy for Everyone' (StV) (2020). Where the predecessor to StV, AVfC was prescriptive on the composition of multi-disciplinary teams and the staffing levels required to serve a given population (one team for every population of 50,000), StV recognises that in line with changes in best practice and to enable future flexibility in terms of service delivery, additional competencies are recommended for multi-disciplinary teams, to complement core skills and competencies. In addition to core skills like psychiatry, social work, clinical psychology and occupational therapy, additional competencies like dietetics, peer support, outreach and job coaching, for example, may be appropriate and required. Rather than be specific on staffing numbers and team composition, a flexible approach can be more responsive to local needs and social circumstances, which in turn empowers local responses and helps achieve recovery-oriented outcomes.

From the period 2011 – August 2023, an additional 19 community CAMHS teams have been established, from 56 in 2011 to 77 teams currently in place. Of the 77 Community CAMHS Teams in operation nationally, there are two specialist Eating Disorders CAMHS teams one serving Cork Kerry Community Healthcare (CHO4) and the other serving Community Healthcare Dublin South, Kildare and West Wicklow (CHO7). A further specialist Eating Disorders CAMHS team for CHO2 is in development. In addition, there are four baseline CAMHS ID teams resourced nationally.



In parallel, staffing has increased across all disciplines in CAMHS since 2011 with an additional 341.7 WTEs (of which 293.1 WTE are clinical staff). Total staffing across CAMHS teams amounts to 806 WTEs currently.

Under StV, we envisage an expansion of mental health service provision overall. This will involve analysis of skill mix requirements which in turn, will require comprehensive workforce planning. To achieve this, the HSE, in conjunction with the Department of Health is developing a Health and Social Care Workforce Planning Strategy and Workforce Planning Projection Model, based on international best practice. In addition, reforms under Sláintecare are centered on having sufficient capacity in the workforce and the appropriate configuration of staff and skill-mix, which are integral to improve service delivery, including that for Mental Health.

I trust this information is of assistance to you.

Yours sincerely,

Sarah Hennessy General Manager

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**Child and Youth Mental Health Office**