



Oifig an Stiúirthóra Náisiúnta Cúnta
Oibríochtaí Meabhairshláinte

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Deputy Colm Burke.
Dail Eireann,
Leinster House,
Kildare Street,
Dublin 2.

23rd February 2024

PQ Number: 56629/23

PQ Question: To ask the Minister for Health if he will investigate professional misconduct within CAMHS in a timely manner in order that the trust of parents and children may be restored; and if he will make a statement on the matter. -Colm Burke

Dear Deputy Burke,

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.

I wish to assure the Deputy that all allegations of professional misconduct within the health service, including Child and Adolescent Mental Health Services are taken seriously by the HSE and investigated in a timely manner. Mandatory training and various policies, procedures, protocols and guidelines are in place in order to build trust and confidence with our staff and our service users.

The CAMHS Operational Guideline (COG) (2019) aims to streamline particular processes according to best practice and to provide consistency in the service delivery of CAMHS throughout the country. The COG aims to:

- Build on the existing good practice already in place in CAMHS
- Provide an Operational Guideline that CAMHS teams can adhere to
- Ensure that legislative and regulatory requirements are met
- Ensure that all employees and management are clear on their roles and responsibilities
- Ensure that children, adolescents and their parent(s) are clear on the service provided by CAMHS
- Ensure that referral agents and other agencies involved in the provision of care to children and adolescents are clear on the service provided by CAMHS
- Provide a framework for audit and evaluation

Chapter 3 of the COG, sets out the Clinical Governance Structures in relation to HSE Mental Health Services. Clinical governance is a framework through which healthcare teams are held accountable for the quality, safety and satisfaction of service users when delivering care. Clinical governance involves having the necessary structures, processes, standards, and oversight in place to ensure that safe, person-centered and effective services are delivered.

The Chief Officer in each CHO devolves day-to-day operational management responsibilities for Mental Health Services, including CAMHS, to the CHO Mental Health Management Teams. In each



CHO, the Chief Officer works in partnership with the Head of Service – Mental Health, the Executive Clinical Director/Clinical Director, the Director of Nursing, and the Health and Social Care Professional Leads to ensure that clinical governance structures are in place. This means that clear lines of accountability, responsibility and authority to oversee quality and safety are identified within the service.

Each CAMHS team has clear accountability structures in place to achieve the delivery of high-quality, safe and reliable services (*Best Practice Guidance for Mental Health Services: Supporting you to meet Regulatory Requirements and towards Continuous Quality Improvement, 2017*), and all staff should be informed of this as part of their induction process. There is a clear management structure which includes corporate and clinical governance responsibilities and reporting relationships. The Consultant Psychiatrist is the Clinical Lead on the team. Each member of the CAMHS team also has a Professional and management reporting relationship through their discipline-specific line management structure.

In addition each member of a CAMHS team has the professional responsibility to carry out clinical work with children and adolescents within their scope of practice, as defined by their professional and regulatory bodies such as the Medical Council, the Health and Social Care Professionals Council (CORU), the Nursing and Midwifery Board of Ireland (NMBI) and the Psychological Society of Ireland (PSI). Each individual CAMHS team member knows their responsibility, level of authority and to whom they are accountable. Each individual CAMHS team member seeks to demonstrate how the principles of quality and safety can be applied in their diverse practice to pursue improved outcomes for children and adolescents and their families. This is best achieved in a culture of trust, openness, respect and caring.

In addition to the above, there are also a significant number of additional HSE National Policies, Procedures, Protocols, Guidelines and Clinical Guidelines in place and Mandatory training for staff. These include:

HSE Open Disclosure Policy

Open Disclosure training is mandatory for all staff working in the HSE and HSE funded services. Open disclosure means that HSE staff will communicate in an open, honest, timely and transparent manner if:

- something goes wrong with a persons care
- if a person experiences harm as a result of that care
- if harm may have occurred as a result of that care

This means that all staff in the HSE are obliged to keep patients/service users fully informed of the facts in relation to what has happened.

HSE Trust in Care Policy

This policy is about upholding the Dignity and Welfare of Patient/Clients and the Procedure for Managing Allegations of Abuse against Staff Members. The health service is committed to promoting the well-being of patients/clients and providing a caring environment where they are treated with dignity and respect. Health service employers are also highly committed to their staff and to providing them with the necessary supervision, support and training to enable them to provide the highest standards of care. The aim of this Policy is two-fold:

(i) Preventative: to outline the importance of the proper operation of human resource policies in



communicating and maintaining high standards of care amongst health service staff;

(ii) Procedural: to ensure proper procedures for reporting suspicions or complaints of abuse and for managing allegations of abuse against health service staff in accordance with natural justice.

It is acknowledged that health care and social care agencies have a duty of care to their patients/clients that goes beyond their duty as employers and this policy must therefore be accompanied by other safe care policies and statutory guidelines, such as Children First, National Guidance for the Protection and Welfare of Children 2017.

Performance Achievement Process

Performance Achievement (PA) processes are in place in the HSE. PA enables staff to have clear roles, definitions, responsibilities, expectations and goals. This process enables more confidence in the job and facilitates more engagement between management and staff resulting in increased support and development. It also provides a mechanism whereby employees can flag any issues within the service and individual performance can be assessed.

Further information can be found by consulting with the following sources:

<https://assets.hse.ie/media/documents/ncr/camhs-operational-guideline-2019.pdf>

<https://www2.healthservice.hse.ie/organisation/gps-incident-management/open-disclosure/>

<https://www.hse.ie/eng/about/who/qid/resourcespublications/clingov.html>

<https://www2.healthservice.hse.ie/organisation/national-pppgs/>

<https://www.hse.ie/eng/staff/resources/hrppg/trust-in-care.html>

To further re-iterate, I wish to advise that Deputy that all allegations of professional misconduct within CAMHS are taken seriously and addressed in a timely manner.

I trust this information is of assistance to you.

Yours sincerely,

A handwritten signature in black ink that reads 'Sarah Hennessy'.

Sarah Hennessy
General Manager
Child and Youth Mental Health Services