

## Families for Reform of CAMHS: Reforms Sought

<b>Reform 1</b>	<b>Annual ring-fenced funding for CAMHS which takes into account the commitments made by Government and the HSE over the last decade and the funding required to ensure a safe, effective and child-centred service going forward.</b>
<b>Reform 2</b>	<b>Address the clinical and administrative staffing shortage in CAMHS</b>
<b>2(i)</b>	Adequate funding and greater transparency and streamlining/decentralisation of the approval system to fill vacant clinical posts.
<b>2(ii)</b>	Consideration and identification of other models to deliver a mental health service for children based on international best practice and implementation of same.
<b>2(iii)</b>	Increase the availability and quality of Primary Care and Social Care services to decrease the strain on CAMHS service and better facilitate early intervention before CAMHS intervention is required.
<b>2(iv)</b>	Set benchmarks for CAMHS staffing nationally and develop clear action plans on how these targets will be met and maintained.
<b>2(v)</b>	Ensure a practice manager and team coordinator for each CAMHS team.
<b>2(vi)</b>	Ensure CAMHS teams are fully staffed from an administrative perspective so that clinical staff can focus fully on their clinical duties.
<b>Reform 3</b>	<b>Remedy issues preventing access to CAMH Services (including lengthy waiting lists and lack of consistency around acceptance of referrals to the service)</b>
<b>3(i)</b>	The increase of staffing and resources, in line with those recommended in <a href="#">A Vision for Change</a> to tackle lengthy waitlists and provide timely support to children experiencing mental health issues
<b>3(ii)</b>	Early consultation with families on the impact that centralising CAMHS supports would result in for them
<b>3(iii)</b>	Greater transparency around the CAMHS criteria for acceptance of referrals to the service and consistent application nationally
<b>Reform 4</b>	<b>Integrate the children's mental health services with other children's services</b>
<b>4(i)</b>	Proper links and joined up working between services with a clear move away from the current 'pass the buck' approach.
<b>4(ii)</b>	Allocation of a key worker who acts as a single point of contact for each child and family to help them navigate the system and coordinate across services. [See also Reform 8]
<b>Reform 5</b>	<b>End the practice of discrimination against autistic children in the provision of mental health services</b>
<b>5(i)</b>	An end to the systemic discrimination against autistic children in the provision of mental health services and greater recognition of the prevalence of mental health issues amongst autistic children.
<b>5(ii)</b>	An end to the refusal of assessments for mental health issues for autistic children without ever meeting them.

<b>5(iii)</b>	Greater training for CAMHS staff on supporting autistic children
<b>Reform 6</b>	<b>Increase availability of supports and the type of supports offered to promote a child-centred approach to recovery</b>
<b>6(i)</b>	Therapeutic supports and proactive intervention for our children based on their individual needs available consistently across the country
<b>6(ii)</b>	An end of the practice of discharging (or threatening to discharge) children whose families decide not to use medication or take part in a parenting course
<b>6(iii)</b>	Proper provision of eating disorder services and gender & sexuality services
<b>6(iv)</b>	Delivery of the commitment to provide out-of-hours mental health treatment for children
<b>Reform 7</b>	<b>Increase the number of CAMHS-ID teams and ensure a clear referral path to access them</b>
<b>7(i)</b>	The provision of the full 16 CAMHS-ID teams across the country to implement the CAMHS-ID model
<b>7(ii)</b>	A clear referral pathway for CAMHS-ID.
<b>Reform 8</b>	<b>Appoint a key worker and provide a clear Care Plan to every child under the remit of CAMHS</b>
<b>8(i)</b>	The appointment of a key worker for each child who fulfils the functions set out in the CAMHS Operational Guidelines and who coordinates with other Childrens Services.
<b>8(ii)</b>	The development of an Individual Care Plan for each child which is developed with the family and communicated to parents so that they are aware of next steps and how their child is being supported.
<b>8(iii)</b>	Consideration of creating a new point of contact for families whose role it would be to assess the overall needs of the child and work to identify the relevant supports and coordinate services on their behalf.
<b>Reform 9</b>	<b>Substantially improve the communication and provision of information between CAMHS and families under their remit</b>
<b>9(i)</b>	Proactive and responsive communication between CAMHS and families about the care of their child.
<b>9(ii)</b>	The provision to families of a list of services offered by their local CAMHS team and a “Whose Who” of the team looking after their child.
<b>9(iii)</b>	The provision of a short booklet or a copy of the CAMHS Operational Guidelines to each family to ensure that they are aware of the structures of CAMHS and the services that they should expect.
<b>9(iv)</b>	The provision of information to families in relation to relevant supports that might be of help to that family.
<b>Reform 10</b>	<b>Ensure the introduction of a transparent, accessible and safe review and complaints process</b>
<b>10(i)</b>	Children and their families being listened to and having a voice in decisions involving their care
<b>10(ii)</b>	Opportunity for early and regular feedback
<b>10(iii)</b>	The provision of information to all families about how to submit feedback or a complaint and the process involved
<b>10(iv)</b>	The development of a transparent, accessible and safe complaints process.