

# Scottish Needs Assessment Programme

CHILD AND ADOLESCENT MENTAL HEALTH GROUP



QUESTIONNAIRE for NHS HEALTH COMMISSIONERS

Respondent number

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**OVERVIEW**

1. What is the designation of the person with lead responsibility for commissioning child and adolescent mental health (CAMH) services?

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2. We have a note of population and age groups for each Board area. But we would like to know about:

2a. Where people live? Please give percentages of total population in each setting.

Urban (pop.> 200,000)	%
Large town (pop. 50,000 - 200,000)	%
Small town (pop. < 50,000)	%
Rural	%
Islands	%

2b. The ethnic backgrounds of the population in your Board area (using 1991 census data)

Black						%
↳ if known	Caribbean		African		other	
Chinese						%
Pakistani						%
Indian						%
Bangladeshi						%
White						%
Other						%

2c. The profile of deprivation in your Board area (in terms of Carstairs' categories)

1	%	2	%	3	%	4	%
5	%	6	%	7	%		

3. What was your Board's 2000/2001 (to nearest thousand pounds):

Expenditure on CAMHS?	£
Expenditure on mental health (excluding CAMHS)?	£
Expenditure on child health (excluding CAMHS)?	£
TOTAL expenditure by the Board	£

3a. What proportion of your CAMHS expenditure for 2000/2001 was on a project/non-recurring basis?

%
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3b. What do you see as the advantages and disadvantages of project type funding?

4. We want to establish how Health Boards make decisions about CAMH expenditure. What arrangements does your Board make -

4a. for prioritising overall expenditure?

4b. for deciding priorities within child health?

4c. for deciding priorities within mental health?

4d. for deciding priorities within child and adolescent mental health?

5. Does your Board have a specific, formal plan (strategy) for child and adolescent mental health?

Yes		In development		No	
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**If yes, please continue on question 5, otherwise move on to question 6**

5a. How long has this plan been in place? \_\_\_\_\_ years

5b. When was it last reviewed? \_\_\_\_\_

## 6. Are your child and adolescent mental health planning arrangements

Part of mental health strategy		Part of child health strategy		"Standalone"	
Other (please specify)					

## 6a. What arrangement, in your view, is most appropriate for commissioning CAMH services?

Part of mental health strategy		Part of child health strategy		"Standalone"	
Other (please specify)					

## 6b. Comments

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## 7. If your CAMH plans specify an age range, what is it? \_\_\_\_\_ to \_\_\_\_\_ years

## 7a. Comments about age range

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## 8. Which of the following are in place? (Please tick all that apply)

Implementation plan		Written service agreements	
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## 9. Which of the following is included in your CAMH plans? (Please tick all that apply)

Mental health promotion		Prevention of mental health problems	
Early intervention		Mental health care and treatment	

## 10. Who participates in your CAMH commissioning arrangements? (Tick all that apply)

Health trust manager(s)		Health board public health professional	
Health trust clinician(s)		Health Board planning officer	
Local authority - social work		Children/young people who have used local services	
Local authority - education		Other children or young people	
Paediatric practitioner(s)		Parents or carers of service users	
Primary care practitioner(s)		Health promotion officer	
Local health council		Reporter to the Children's Hearing	
Voluntary organisation(s)		Others (please state)	

11. Please describe any part played by young people or carers in your commissioning arrangements.

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12. What information about the mental health needs of children and young people is used in your commissioning process? (Please tick all that apply)

Local information on factors which increase risk of mental health problems	
Local information on factors which are protective of mental health	
Local needs assessment	
National studies indicating levels of need e.g. Office of National Statistics survey	
Locally held data about local service activity	
Nationally collected data about service activity, e.g. data from ISD	
National studies of CAMH services, e.g. Parry-Jones 1995 survey	
Other (please describe)	

**Please send a copy of any published local needs assessment**

13. Do you have evidence of any *changing* patterns in relation to:

	Falling	Rising	No evidence
CAMH risk factors?			
CAMH protective factors?			
Overall rates of CAMH problems?			
Attention deficit hyperactivity disorder?			
Autistic spectrum disorder?			
Eating disorders?			
Deliberate self harm?			

13a. Please comment on any changes noted

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13b. Please tell us about any arrangements for monitoring changing need

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14. The SNAP process uses the notion of "promotion, prevention and care" when talking about approaches to CAMH. How would you rate the development of these activities in your Board area?

	Absent	Basic	Good
Mental health promotion			
Prevention of mental health problems			
Early identification of mental health problems			
Early intervention			
Assessment of mental health problems			
Treatment of mental health problems			

- 14a. Please add any comments you would like to make

15. Some reports suggest that mental health **services** available vary according to the kind of difficulties children and young people experience. How would you rate local provision for those

	Absent	Basic	Good
with a learning disability <b>and</b> a mental health problem?			
with difficult to treat eating disorders (e.g. requiring inpatient service)?			
who have disorders which fall within the "autistic spectrum"?			
with attention deficit hyperactivity disorder?			
looked after and accommodated by the local authority?			
who are involved in offending behaviour <b>and</b> have a significant mental health difficulty (i.e. a forensic service)?			
who have significant problems with drug misuse?			
who have significant problems with alcohol misuse?			
whose parent(s) have a severe mental health problem?			

- 15a. Comments

16. What information do you gather on the activities of CAMHS (tick all that apply)?

Numbers referred		Numbers attending		Default rates	
Source of referral		Waiting numbers		Waiting times	
Numbers offered a service		Number of attendances		Consultation activities	
Outcome measures		Other (please describe)			

17. How often are there waiting lists for CAMH services in your area?

Always		Usually		Sometimes		Seldom	
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17a. What data does your Health Board collect about waiting lists?

**Special issues in CAMH planning and commissioning**

18. Are you familiar with the model of CAMHS, described in the HAS report\* "Together We Stand"?

Yes		No		Not sure	
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18a. If "yes", what use do you make of the HAS model?

None		Reference only		Provides strategic framework	
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18b. The HAS model of CAMHS appears to be widely quoted and used across Scotland. There is, however, variety in the ways in which this model is understood and applied. Please describe briefly your understanding of the various tiers in this model.

Tier 1	
Tier 2	
Tier 3	
Tier 4	

18c. Please add comments on any strengths or weaknesses of the HAS model

\* Health Advisory Service (1995) *Together We Stand - The Commissioning of Child and Adolescent Mental Health Services*. London, HMSO.

19. We are interested in the relative strengths and weaknesses of the different "tiers" of NHS based CAMHS. Please rate your local arrangements below:

	Absent	Basic	Good
Tier 1			
Tier 2			
Tier 3			
Tier 4			

19a. We would welcome any comments about particular strengths or weaknesses.

19b. Please comment on any local issues, which you believe to have a particular bearing on the delivery of CAMH activities or services in your area.

20. Have you included any NHS based tier 4 services in your plans for CAMHS?

Yes		No	
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20a. If yes, please describe briefly

21. Have you planned any service in collaboration with another Board (e.g. consortium commissioning)?

Yes		No	
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21a. If yes, please describe briefly

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22. Do your CAMH plans make any mention of managed care (or "clinical") networks?

Yes		No	
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22a. If yes, please describe briefly

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22b. Are there local CAMH services which might be suitable for a managed care network?

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23. Have you identified any groups of children or young people at risk of "exclusion" from CAMH services?

Yes		No	
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23a. If yes, please describe briefly

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23b. Have you specified any initiatives to counter such exclusion?

Yes		No	
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23c. If yes, please describe briefly

24. Have you commissioned any CAMH activities or services jointly (i.e. in partnership with another local agency)?

Yes		No	
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24a. Please describe any services which you commission jointly.

**Please send us a description of joint commissioning initiatives which are working well.**

25. Do your CAMH plans explicitly address:

	Yes	No
workforce (also known as "manpower") planning?		
research?		
training of CAMH service staff?		

25a. Where you have answered "yes", please describe briefly

26. Are there local authority social workers working in your local CAMHS?

Yes		No	
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26a. If yes, please comment on the strengths and weaknesses in this arrangement:

27. Are there any other comments you would like to make, about CAMH or the SNAP report

If you would be willing to be contacted about this questionnaire, please put your details below

Name	
Address	
Phone no.	Email

**Please remember to send us any needs assessment material or reports of successful joint commissioning**

**THANK YOU FOR COMPLETING THIS QUESTIONNAIRE**