



18 October 2018

Information Rights & Compliance Team
99 Waverley Road
St Albans
Hertfordshire
AL3 5TL

Tel: 01727 804954
Email: Hpft.foi@nhs.net

Our Ref: FOI 2922

Thank you for your request concerning Tier 2, 3 and 4 CAMHS referrals and waiting times.

Your request has been considered and processed in accordance with the requirements of the Freedom of Information (FOI) Act 2000.

I would like to make a request under the Freedom of Information Act.

- 1. Please could you provide a copy of your threshold criteria/protocol/guidelines for access to community (Tier 2), specialist community (Tier 3) and inpatient (Tier 4) (whichever is applicable) CAMHS in your area, including any specific service thresholds for certain conditions such as eating disorders?

We do not provide Tier 2 services.

Please see attached our Referral Criteria for Specialist Tier 3 CAMHS.

We do not have referral criteria for Tier 4. Admissions would be based on a clinical need and risk of the young person.

However, we do have exclusion criteria for Tier 4:

- Older than 18 years or younger than 12 years of age.
• Does not live in Hertfordshire, unless a looked after child outside of county.
• Moderate to Severe Learning Disability
• Drug and Alcohol dependant as the sole difficulty

- 2. For each of the last five years since 2013/14, how many children and young people have been referred to community (Tier 2), specialist community (Tier 3) and inpatient (Tier 4) (whichever is applicable) CAMHS in your area?

Table with 3 columns: Financial Year, Tier 3 - Community Number of referrals into SPA or CAMHS where service user is under 18, Tier 4 - Inpatient Number of admissions. Rows for years 2013/14 to 2017/18.

- 3. Has there been a rise in the rate of referrals over the last five years since 2013/14?

Please see above.



4. What percentage of referrals to CAMHS services have been rejected or deemed inappropriate in the last financial year for which figures are available?

Please tick the reasons for refusal:

- a. Condition not serious enough to meet threshold for access to service
- b. Duration of condition not long enough (please state if you have a specific time limit)
- c. Condition or situation not suitable for CAMHS service intervention (eg child does not have a diagnosable mental health condition)
- d. Service lacks capacity to support the patient at this time
- e. Existence of co-morbidity which excludes support from your service (eg substance misuse)
- f. Young person above 18
- g. Other (please state)

We do not refuse referrals. If we do not provide the appropriate service we would always ensure they are signposted to the appropriate service from initial contact with our Single Point of Access.

5. Do you wish to make any further comments on the issue of referral to children's mental health services?

No.

6. What is your maximum waiting time in days for CAMHS from a) referral to first appointment and b) referral to start of treatment in 2017/18 or the most recent financial year available?

	Maximum Waiting Time in Days
Referral to assessment	148
Referral to Treatment	264

7. What is your median waiting time in days for CAMHS from a) referral to first appointment and b) referral to start of treatment in 2017/18 or the most recent financial year available?

	Median Waiting Time in Days
Referral to assessment	22
Referral to Treatment	20

8. If you collect the above information in weeks please could you state whether your measure of a week is equivalent to seven days? If you collect the information in months please could you state the number of days in each month?

Not applicable.

9. What is your procedure regarding referrals to specialist CAMHS who are rejected or deemed inappropriate? Please select all that apply:

- a. No action taken once referral is rejected or deemed inappropriate
- b. Inform referrer that young person was not accepted into treatment
- c. Signpost young person/parent/carer/young person's school/young person's GP to another service that is more appropriate

- d. Contact signposted agency on behalf of the young person/parent/carer ✓
- e. Follow-up with young person/parent/carer/school/GP about whether the young person is accessing the signposted service or another service
- f. Other (please specify)

10. Do you wish to make any further comments on the issue of rejected referrals to children's mental health services?

No.

Should you require further clarification, please do not hesitate to contact me.

Please find enclosed an information sheet regarding copyright protection and the Trust's complaints procedure in the event that you are not satisfied with the response.

Yours sincerely

Sue Smith

Sue Smith
Information Rights Officer

Enc: Copyright Protection and Complaints Procedure Information Leaflet.

If you would like to complete a short survey in relation to your Freedom of Information request please scan the QR code below or click [here](#).

