



CAMHS Annual Report 2024



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Minister for Children and Families Foreword

I am pleased to present the 2024 CAMHS Annual Report. As Minister for Children and Families, I remain committed to ensuring that Children and Young People in Jersey are supported to enjoy the best mental health and wellbeing.

I note the continued high numbers of referrals to CAMHS, and the significant number of children and young people open to the service. Despite the volume of referrals, I am encouraged by efforts to ensure prompt waiting times for assessment and treatment, and I am reassured by the NHS benchmarking data that shows Jersey CAMHS to be one of the quickest services in terms of delivery of mental health assessments.

We are aware of the high numbers of referrals for neurodevelopmental assessments in recent years, which has proved a real challenge to address. We have added an extra £400,000 of Government Plan investment to support this pressured area and I know the service is working hard to increase capacity of assessments, and to keep waiting times for assessment to a minimum.

Despite, the significant clinical demands I am also encouraged by the continued service development, positive recruitment, and efforts to conclude implementation of the Children and Young People's Emotional Wellbeing and Mental Health Strategy 2022-2025. The second inspection by the Jersey Care Commission / Royal College of Psychiatrists in November 2024, demonstrates continued improvement in the performance of the service which is very encouraging.

Our focus will shortly turn to the development of the next Mental Health Strategy 2026-2029. As a society we have made significant strides in understanding the importance of mental wellbeing, yet there is much work still to be done in Jersey. As we embark on this continued journey, let us be reminded that mental health is not a destination, but a continued process of care, compassion and support.

I hope, as an island, we continue to work collectively to create an environment where every child and young person feels empowered to seek help, share their experiences, and know they are not alone. Together, we will continue to work hard to build a healthier, more resilient future for all.

Connétable Richard Vibert



Introduction

This is the third Annual Report by the Child and Adolescent Mental Health Service (CAMHS).

There was further CAMHS focus in 2024 on concluding the implementation of the [Children and Young People's Emotional Wellbeing and Mental Health Strategy 2022-2025](#). The service has now successfully implemented all key targets set out in the strategy.

The six CAMHS services introduced during the strategy continue to evolve and improve capacity to support children, young people and families in Jersey. The six services include:

- Duty and Assessment Service
- Early Intervention Service
- Neurodevelopmental Service
- Specialist CAMHS Mental Health Service
- CAMHS Children Looked After
- Quality and Assurance Service

All services have service managers in place and positive levels of recruitment to key posts.

During 2024, the number of referrals decreased from 1351, in 2023, to 1145. Waiting times for the Mental Health referrals continued to be prompt with initial assessments of non-urgent referrals completed in 31 days in 2024.

In 2024, CAMHS received 534 referrals for neurodevelopmental assessments. In 2023 and 2024 this totals 1449 referrals for diagnostic neurodevelopmental assessments – an unprecedented level of demand. This significant increase in demand meant that the Neurodevelopmental Service did not meet the historical target of completing assessments within 13 weeks; instead, the average waiting time in 2024 was 55 weeks. Additional capacity to manage demand was created with a further £400k Government Plan funding given to commission private contractors to undertake additional diagnostic assessments. This additional investment continues into 2025.

In November 2024, the NHS benchmarking report was published and highlighted key statistics comparing Jersey CAMHS (2023 data) and NHS service submissions across the UK. Key findings revealed that Jersey has a similar rate of referrals to the UK average, but our mean waiting time from referral to first appointment is much lower, with Jersey CAMHS completing initial assessments for routine referrals in four weeks of receipt of referral, and UK CAMHS offering a first appointment in 11 weeks. This confirms that Jersey CAMHS is one of the quickest services to access, across the UK, for mental health assessment.

The NHS Benchmarking Report also indicated that the 2023 referral acceptance rate was higher in Jersey at 90% (UK mean 78%), and that we have a higher caseload per 100,000 population (more than double) than the UK average. Although published in

2024, the data referenced from the NHS Benchmarking Report is from 2023. All other data referenced is 2024 data.

At the end of 2024, the CAMHS caseload had risen to a significant and challenging level of 1949 children and young people.

CAMHS was inspected by The Jersey Care Commission (JCC) in conjunction with The Royal College of Psychiatrists (RCPsych) for the second time in November 2024. The report was published on March 6th, 2025, and indicates further positive progress.

During 2024, governance of the CAMHS service was further enhanced. The Terms of Reference for the Children's Governance Oversight Group (CGOG) were updated. The CGOG is responsible for the leadership and implementation of the joint governance, risk, and the quality assurance framework detailed in the Memorandum of Understanding (MOU) between Health and Care Jersey (HCJ) and Children, Young People, Education and Skills (CYPES), for the CAMHS Service. The MOU was additionally updated and ratified in May 2024. The MOU was updated to clarify the Quality and Safety Service's working relationship with CAMHS and describe the oversight of areas of involvement such as serious incident reviews, inquests, audits and policy development.

CGOG also continues to maintain a joint Risk Register of identified risks, rating and mitigation relevant to the governance and oversight of these services, and review this on a regular basis. This ensures escalation of significant issues and risks to the appropriate oversight group within both HCJ and CYPES.

Other notable improvements in 2024 were further enhancements to inpatient care and support. Orchard Ward opened with a dedicated space for young people requiring inpatient mental health support. A Standard Operating Procedure for Orchard Ward was ratified in June 2024 and described the support received by young people. There was also a new policy ratified in February 2024 - Clinical Management of Children and Young People with a Mental Health Disorder in an Acute Hospital Setting – which provided information and guidance for hospital staff who may have contact with, or be providing care for, children and young people with a mental health disorder.

In summary, CAMHS continues to be an extremely busy and in-demand service. The statistical performance compared with UK data is pleasing, and progress described in JCC inspection reports also shows a clearly improving and evolving service.

Darren Bowring, Associate Director Mental Health and Wellbeing (CYPES)

Key headlines of 2024

1145 total referrals to CAMHS

289 referrals for ADHD Assessments

245 referrals for Autism Assessments

31 days for an initial assessment to be completed after a general mental health referral

55 weeks for a Neuro-developmental assessment

Team expanded to include 75 staff members

Service inspected by RCPsych/JCC for the second time

Key CAMHS developments, as listed in the Children and Young People's Emotional Wellbeing and Mental Health Strategy 2022-2025, all implemented

The vision for CAMHS

Our Purpose

The aim of CAMHS is to provide timely, high-quality assessment and treatment of mental health difficulties and / or neurodevelopmental assessments in children and young people, as well as additional support and advice for their families.

The service aims to provide a comprehensive assessment, treatment, and therapeutic service for a range of mental health and neurodevelopmental conditions.

It also offers a range of proactive consultation, liaison, and teaching provisions with the aim of promoting positive mental wellbeing for children and young people and their families in Jersey.

Our Principles

CAMHS is a key contributor to the [Children and Young People's Emotional Wellbeing and Mental Health Strategy 2022-2025](#). The aim of the strategy is to ensure that all Jersey's children and young people are happy, thriving and able to enjoy the best mental health and wellbeing. The strategy has four priorities:

1. Everybody promotes good wellbeing, mental health and resilience.
2. It's easy for children and young people to find out who can help and what support is available.
3. Children and young people get the right help and support, at the right time and in the right place.
4. We listen to children and young people about what helps, and this helps us improve the quality of our services.

The strategy, and the work of CAMHS, is based around the Thrive model - a whole system mental health framework which identifies the sort of support children and young people may need.

How we work

- CAMHS works collaboratively with, and alongside, children, young people, and their families.
- We work to a systemic family-based model: we know that mental health problems impact on the whole family, so the whole family will be considered in the support offered, and in the treatment plan.
- Children Looked After, with a mental health difficulty, will be prioritised for CAMHS with a dedicated service manager responsible for this area.

- We aim to promote neurodiversity by offering diagnostic assessments and advising on environments and support that allows all neurodivergent children and young people to thrive.
- We are guided by the [Children and Young People's Emotional Wellbeing and Mental Health strategy 2022-2025](#), which was produced in partnership with several agencies, stakeholders, children, young people and their families.
- We aim to set goals and objectives together with the child / young person and their family at the initial meeting and review against these in our journey together.
- We are a person-led service.
- We encourage and listen to feedback from people who use our service.
- Our referral pathways, policies and procedures will always be co-produced with children/ young people, families, and partner agencies.
- We will have a young person actively involved in all staff recruitment interviews.
- We will regularly update and work collaboratively with children and young people's groups including Youthful Minds and Jersey Youth Parliament.
- We are committed to working in partnership with other agencies when there is an added benefit to the child, young person and family.
- We deliver services courteously and in a manner that is free from discrimination and prejudice.
- We will provide staff with high-quality training, supervision and support (including wellbeing support) to promote the skills of the service and its impact on service users.



2024 Goals – How did we do?

Service Area	2024 Goals	How did we do - Summary
Overall	<ul style="list-style-type: none"> • Work with colleagues in HCJ to conclude the final two recommendations from the 2022 C&AG Review Report. • Implement the recommendations from the JCC / RCPsych Inspection 2023. • Identify and plan where CAMHS will be located once the lease for Liberte House ends in September 2026. • Continue to work collaboratively with children / young people's groups (Youthful Minds / Youth Parliament), parent groups, and colleagues in other services such as Health, Education and Social Care. • Review service offers for the individual Health and Wellbeing Services, clarify thresholds and service delivery, clarify interactions between services and update the Operational Policy accordingly. • Make an application, and develop guidelines, for the shared prescribing of ADHD Medications to GPs. • Continue to update the CYPES estate to ensure disability, accessibility and safeguarding requirements are addressed. • Identify policies and protocols which need reviewing, updating or introducing from Law at Work Audit and JCC / RCPsych report. • Continue to work with Adult Mental Health on the development of a pathway and finance for a Doctorate in Clinical Psychology between Government of Jersey and University of Southampton, with the aim of a first cohort in Autumn 2025. • The results of the next Children and Young Person Survey will not be available until late 2024. This valuable data will be assessed and will inform goals for 2025. 	<ul style="list-style-type: none"> • All C&AG recommendations from 2022 are fully implemented. • All improvements set out in the 2023 JCC / RCPsych inspection report were fully implemented. • A new building has been identified for CAMHS to move to in 2026 and architect plans in place for required adaptations. • CAMHS staff continue to work with children and young people's groups. In November 2024, CAMHS and Youthful Minds were asked to present at the National Quality Network for Community CAMHS conference to share our joint work. • Service offers were clarified and the Operational Policy updated in 2024. • In 2024, CAMHS, alongside Adult Mental Health, submitted a proposal to the Pharmaceutical Benefits Advisor Committee (PBAC) for consideration of shared prescribing. In July 2024, PBAC gave agreement in principle. They would not approve though whilst ADHD medication remained in short supply. By approving, local pharmacies would be in competition with the hospital pharmacy for limited medication, ensuring an uncoordinated management of limited supplies. The Minister for Social Security also noted this decision would have a significant financial impact. CAMHS and Adult Mental Health supported the development of shared prescribing guidelines for GP's. • The new CAMHS building, identified for 2026, will have excellent disability access and connection to travel links. • A number of new policies and protocols were introduced during 2024. • Adverts for Trainee Clinical Psychologists have been published, and interviews are shortly taking place with Southampton University. Two trainees will begin the Doctorate in Clinical Psychology training programme in autumn 2025, marking Jersey's first initiative to support local individuals in accessing this training on the island. • The Children and Young People Survey results will soon be published in 2025 and will help to inform further development of services and support required.
Duty and Assessment	<ul style="list-style-type: none"> • Maintain positive waiting times for initial assessments within the 36-day target. 	<ul style="list-style-type: none"> • The Duty and Assessment team has continued to maintain positive waiting times for initial assessments, under the 36-day target, at 31 days for 2024.

	<ul style="list-style-type: none"> • Consult with unions and staff before moving towards a 08:00 – 20:00 duty service, seven days per week. This will provide a CAMHS emergency response to children and family during these extended hours. • Recruit to the Health Care Assistant (HCA) posts. • Review agency nursing posts and recruit to substantive positions where appropriate and possible. • Pilot the new pathway for neurodevelopmental referrals within the Children & Families Hub, with the goal of implementing a multi-agency approach at the point of referral to provide wrap-around support for the child and family. 	<ul style="list-style-type: none"> • The consultation was completed and approved by unions. All permanent staff were consulted as well as agency staff. The service has had a soft launch and is operating from 9am to 5pm, seven days a week, throughout February and March 2025. From April 2025, the service will extend its hours to 8am to 8pm, seven days a week. • The Duty and Assessment team has now successfully recruited two out of six HCA posts, with further recruitment currently occurring. • We have recruited two senior specialist nurses into permanent posts and are actively recruiting for grade 5 nurse practitioner posts. • The new process has recently been introduced, and the Hub is focussed on supporting the new structure and ensuring referral criteria are being followed for all neurodevelopmental referrals.
Early Intervention	<ul style="list-style-type: none"> • Consolidate and promote the Early Intervention offer. • Use school-based consultation more effectively and more widely in attempt to reduce referrals to Specialist CAMHS. • Promote better partnership working, including closer work with school Special Educational Needs Coordinators (SENCOs), Mind Jersey and other Government colleagues. • Standardise a more targeted 1-1 therapeutic support offer. • Develop and deliver an increased training offer for professionals, and for parents and carers. Liaise with Early Help to agree and publicise training offers. • Increase Parent Infant Psychotherapy (PIP) offer to include training and consultation. • Improve family mental health through the Family Support Worker program by introducing nature-based therapy as part of the support offered. Work in partnership with Education to promote cultures of kindness and compassion, to reduce bullying, and to improve mental health for children, young people, families and staff. • Work to develop support for children, young people and families who may have a family member at Orchard Ward. 	<ul style="list-style-type: none"> • The team has created short-term interventions for direct 1-1 support for children and young people, along with groups programmes offered in schools, within CAMHS, and for parents. These include standardised, skills-based, short-term interventions using CBT/CFT/SFT/ACT/DBT. A Therapeutic Play offer is now also available through the Early Intervention pathway. Early Intervention also offer Non-Violent Resistance training and coaching; a nature based therapeutic offer; decider skills in nature / with movement; a creativity programme for whole families; and the relax kid's programme. Training in the Mellow programme will expand the availability of Mellow courses for parents of children and teenagers. The programme will begin in mid-2025 with an online course specifically designed for teenagers, especially for those not accessing school. • All schools have a CAMHS Early Intervention Mental Health Practitioner allocated. These practitioners support schools through consultations for individual children as well as wider school issues. Courses/ workshops and training can also be offered depending on need. Each practitioner currently has eight schools they consult with. 2024 saw 164 hours of consultation discussing 423 children. A pilot consultation with a GP surgery was also undertaken, with training and mental health discussions taking place. • The Early Intervention team has been working alongside schools including SENCOs, Mental Health leads and Education Welfare Officer teams, including the Polish school, and Mount Hope Seventh-day Adventist (SDA) community to promote better mental health for all. • The team has offered various trainings to school staff, social care staff, GPs, youth service staff, and a day of reflective practice was delivered to family partnership workers in partnership with their family therapist. Early Intervention has also developed multi-agency training through the Safeguarding Partnership Board.

		<ul style="list-style-type: none"> • Early Intervention has inputted into the Inclusion Review and delivered sessions at the Inclusion Launch in partnership with the Social, Emotional & Mental Health Inclusion team (SEMHit) and Educational Psychology on creating cultures of belonging. • The Parent Infant Psychotherapy (PIP) pathway offered training and is working on a consultation process for 2025. • Nature-based 1-1/group and parent sessions have been offered in partnership with Ocean Culture Life, Amanda Bond, Nature base, and also Mind Jersey where Decider Skills for families now also includes a nature-based element. • In 2024, 158 hours of courses were delivered by EI with 229 participants taking part. • 74 hours were spent in classes across the Island delivering sessions on The River of Wellbeing, Befriending Anxiety, Body Positivity, Storytelling in Nature, and Regulating Emotions. A transition retreat was also facilitated alongside CAMHS family days, and sessions at the beach and at Crabbe. • A Day of Kindness training was delivered to 65 professions to promote Creating Cultures of Kindness and Compassion. All participants and all schools (primary, secondary and tertiary establishments) received resources to support schools alongside a class session. • The team was trained in Seasons for Growth - a programme to support loss and change - in order to begin to develop an offer for families where children may have parents experiencing poor mental health.
Specialist CAMHS	<ul style="list-style-type: none"> • Finalise, ratify and publish the Transition Policy between CAMHS and Adult Mental Health. • Undertake a formal consultation with partner agencies and young people / families on the Eating Disorder Service. Update documentation including the service pathway, approach and service offer. Develop Eating Disorder Awareness training for Education, Social Care and HCJ staff. • Conclude recruitment of Health Care Assistants, Family Support Workers, and final posts, e.g. Dietician. • We are currently recruiting participants again for the compassion-focussed skills group. Our aim is to run at least one group per school term. This year we will also be offering a workshop session to schoolteachers about the group and the principles of compassion. We will also work with partner agencies to try to further increase compassion-focussed interventions 	<ul style="list-style-type: none"> • The Transition policy is developed in draft and will be completed in 2025. • The formal consultation has not been completed with partner agencies due to service pressures in the Specialist service area and the need to focus on engagement with the JCC inspection. However, we have spent time focussed on the development of the MDT, improving clinical outcomes, customer satisfaction, offering debrief and, more informally, how we work with our partner agencies. We would hope to include a formal consultation on Eating Disorders as part of the new mental health strategy in 2025. • We have recruited one new Family support Worker and two Health Care Assistants. We are in the final stages of recruitment for a Family Therapist and two newly qualified Nurse Practitioners. We continue to receive specialist dietician input from a private consultant. • Our Compassion-focussed skills groups continue to run and impact. • The key audits for case notes and minimum data were undertaken as part of the JCC evidence submission for the 2024 inspection. An audit on the prescribing of antipsychotic medications with children and young people was completed in November 2024 and the action plan is currently being implemented.

	<p>with young people and those working with them.</p> <ul style="list-style-type: none"> • We have started to develop a compassion-focussed group for parents and aim to run it in 2024. The focus of this group will be to share compassion-focussed approaches, how compassion can support us in our parenting, and practice skills to support parents to increase their own and their child's self-compassion. Parenting is extremely stressful, and parents themselves can get caught in self-critical patterns. These patterns can further increase the levels of stress that parents are under and can increase levels of distress in their parenting. • To undertake a number of key audits during 2024 – to include quality of case note entries (including narrative / style of entry / completion of all aspects) and medication audits. 	
CAMHS Children Looked After	<ul style="list-style-type: none"> • Funding in place in 2024 to recruit a psychologist and systemic family therapist for CAMHS Children Looked After. • Work with the Associate Director of CSC to clarify the offer to children who are looked after. • Development of a CAMHS Attachment Pathway. • Develop and deliver training programmes on attachment and other relevant mental health training for foster carers, adopters, and social workers. • Be a key part of the working group to design and deliver the therapeutic children's homes plan. 	<ul style="list-style-type: none"> • The advert for the CAMHS Looked After Psychologist post failed to attract any applicants to date, however the Service Manager and Family Therapist posts were successfully recruited. The Psychologist post will be actively pursued in 2025. • The new CAMHS Service Manager for Children Looked After started in post in November 2024 and the family therapist is due to be onboarded in April 2025. • Introductions were made and relationships developed with the Assistant Director of Children's Services, Heads of Service for Children Looked After (CLA) and Fostering and Adoption (F&A) within Children's Services to better understand their perspective and reflect on their desired outcomes and 'best hopes' for the new CAMHS service. • Similarly, meetings were held and relationships developed with the Team Lead of the School Nurses Team, the Virtual School Head, and the Manager of the CLA Social Work team. • The views and hopes of our partners and service users have been heard and will be used to inform a discussion paper on the way forward. This will be presented in March 2025 where an agreement on the new service will be made and Service Level Agreements between CAMHS CLA and Children's Services will be signed off. • Additionally, CAMHS CLA Service successfully responded to a request from the Director of Children's Services to plan and deliver a bespoke attachment, trauma-informed and compassion-focussed workshop to residential care staff to empower them with the knowledge and skills to make sense of, and appropriately respond to, some difficult and

		<p>challenging behaviours. The training was delivered over two full days and over 75% of participants evaluated the content, delivery and usefulness of the training as 5 out of 5 / excellent.</p>
<p>Quality and Assurance</p>	<ul style="list-style-type: none"> • Continue to support the JCC inspection process and action the relevant recommendations following the publication of their report. • Consolidate the required regular reporting and auditing needed to improve service quality, and ensure processes are being followed to monitor this. • Focus on improving staff wellbeing through a wide range of initiatives by creating a CAMHS staff wellbeing committee. • Continue to collect service user and parent/carer feedback and action the relevant recommendations/areas for improvement, whilst also reinforcing the positive aspects of service delivery to staff. • Liaise with the data officer to inform us on the teams' performances (using key performance tools) against set goals. • The new CAMHS website to go live in 2024. • Continue engaging with the Child Outcomes Research Consortium (CORC) to embed minimum data sets and deliver relevant training to staff to support the collecting of relevant data. • Oversee staff survey results and resulting actions; staff supervision; staff mandatory and additional training; connect compliance; and managing attendance data. • Support the review and development of key service policies. • Work with Health & Safety (H&S) to ensure the implementation of robust service risk assessments and protocols. • Work with the administration team to increase the speed of written communication and to develop systems to mitigate potential data breaches. 	<ul style="list-style-type: none"> • CAMHS was inspected in November 2024. The Quality and Assurance (Q&A) team was an integral part of preparing submissions for this process; and contributed to service development outcomes. • A new post of Business Support Lead was introduced and recruited in 2024 to support the increased demands on key information resulting from the regulation of the service and JCC inspections. • A CAMHS staff wellbeing committee was created in February 2024 and focussed on social connection, mental health and wellbeing, and workplace wellbeing. Numerous initiatives and events took place in 2024 to promote staff wellbeing. • Service user feedback continues to be collected through the Government's feedback system and Experience of Service Questionnaire. A 'you said we did' process follows all feedback. • The Q&A team works closely with the Informatics team to inform and advise on key performance tools and results. Service dashboards have been developed which provide rich outcome and productivity data to monitor service performance. • The CAMHS website went live in November 2024. The content will continue to be improved during 2025. • Minimum data sets are embedded and there have been meetings with CORC throughout 2024. Support from CORC will continue moving forward. • Supervision is recorded by staff and rates of this are monitored and reviewed to ensure that staff are being supported, and that safe clinical practice is occurring. Appraisal data is monitored through the Connect system. We also oversee staff training to ensure high standards of care and that all mandatory training is completed. This oversight ensures CAMHS staff are skilled and prepared to deliver quality mental health care for young people. • The Q&A team has actively supported the development of several new service policies over the past 12 months and will continue to do so. • The Q&A team has worked closely with H&S and engaged in a full H&S audit. Work is ongoing in this area. • Administrative processes have been reviewed. We work closely with CYPES governance to ensure that we are following the relevant data protection laws and regulations, in addition to appropriately reporting and following up on any possible data breaches.

2024 Key Service Summaries

Duty and Assessment Service

- The services provided by the Duty and Assessment team includes triaging of all CAMHS referrals in the Children and Family Hub, initial mental health assessments and support, crisis intervention, and hospital liaison.
- In January 2024, a new service manager was successfully appointed.
- One of the priorities for the Duty and Assessment team was the co-ordination and execution of arranging the consultation for the pathway to extend our service hours to 8am – 8pm, 7 days a week.
- The consultation closed for all permanent staff at the end of November 2024 and was approved by all unions. The Duty and Assessment team will be fully operating as an 8am to 8pm, seven days a week service from April 2025.
- The team continues to offer Initial Mental Health Assessments to ensure all young people are seen within the assigned timeframe of the referral.
- We continue to support the emergency departments, as well as Robin Ward, and offer a crisis response to hospital presentations for mental health issues and have prioritised strengthening our relationships and processes with these services.

Early Intervention Service

- The team has worked hard to ensure a standardised offer of support for not only children and young people receiving 1-1 support, but also for the wider family, including support through groups and parent-based courses.
- The CAMHS Early Intervention Mental Health Practitioners pride themselves on the relationships built within schools. The consultation service that they deliver enables schools to discuss the individual needs of children, with parental consent, alongside wider school need and to collaboratively problem solve potential solutions. Consultation is also offered to other professionals as requested.
- The team has driven a nature-based approach to promote the outdoors as essential for supporting positive mental health. The team's aim is to embed positive mental health skills in child friendly and diverse ways that meet the individual needs of children, young people and their families.
- The development of a play therapy offer has allowed some of our youngest children to access developmentally appropriate support by exploring difficult experiences through play and creativity.
- The team has developed their training offer and will continue to develop the way in which this can be delivered across the Island in order to build capacity and resources in the wider community.
- The team continues to work within the community and build relationships with key stakeholders who support children, ensuring that mental health is recognised as everyone's responsibility.
- Family Support Workers offer to develop positive mental health within families.

- Connections with the Polish school and Mount Hope Seventh Day Adventist community have been built to develop greater awareness of mental health for diverse communities in Jersey.

Neurodevelopmental Service

- In 2024, the Neurodevelopmental (ND) Service redesigned the ADHD referral pathway to ensure better intervention support at point of referral.
- Diagnostic capacity for ADHD assessments was increased by training four CAMHS nurses to be able to deliver assessments.
- A multi-agency weekly ND Allocations meeting was introduced involving partners from other agencies to ensure holistic and robust oversight to support plans for every referral.
- ADHD clinics were introduced at Gorey and First Tower to reduce travel for families who lived on those sides of the island.
- Additional information packs were developed, including the 'Do I have ADHD?' and 'Am I Autistic?' information packs.
- The New Forest Parenting Programme teens course and Teen Life course were piloted.
- Neurofocus parents' monthly sessions were introduced.
- ND Siblings courses were introduced in partnership with the Youth Service.
- Further recruitment took place with two additional neurodevelopmental nurses starting in Spring 2025.
- Update sessions for School SENCOs and Social Workers were introduced.
- A behaviour analyst was recruited to deliver Positive Behaviour Support assessments and interventions.
- The ND Service took part in the development of the island-wide Neuro Inclusive Strategy.

Specialist CAMHS Service

- CAMHS experienced, therapeutic staff were recruited to reduce waiting times for therapy and provide young people with a greater choice of therapists. In January 2024, CAMHS employed an additional Consultant Psychologist to support children with severe and enduring physical health conditions. We also employed two additional health care assistants and one family support worker.
- The paediatric psychology pathway within CAMHS has been operational since January 2024. It was established following the publication of the Children and Young People's Emotional Wellbeing and Mental Health Strategy, which identified that young people with long term or complex health needs can be particularly vulnerable to emotional difficulties. The pathway is staffed by a Consultant Clinical Psychologist, 23 hours a week. The pathway offers specialist support to children, young people and families where there are emotional or behavioural difficulties related to a diagnosed long-term physical

health condition (or a significant acute illness or injury), it's impact or treatment. To date, there have been 50 referrals to the service. These referrals have originated from a range of sources including paediatrics, schools, GPs and the voluntary sector. Young people accessing the service have presented with a range of physical health conditions including diabetes, epilepsy, autoimmune disorders, degenerative conditions and cardiac issues. The reasons for referral have been wide ranging including: adjustment to a diagnosis; symptom management; support with medication concordance; preparation for medical procedures; anxiety and depression. We are delighted to now be offering specialist support to young islanders and their families when they are experiencing emotional difficulties linked to physical health conditions, and we are excited to continue to develop the support we offer.

- Specialist CAMHS continues to offer groups to develop resilience and coping skills in children and young people. Young people at secondary age currently have access to two different styles of groups to support them in developing their emotional regulation skills – the DBT group and Compassionate Mind group.
- The process for transitions from CAMHS to Adult Mental Health Services continues to be a strong focus and we continue to hold monthly meetings. All young people open to CAMHS aged 17.5 years are discussed at these meetings and work is done with them to agree transition plans.
- Within 2024, we focussed on increasing the availability and range of compassion-based interventions within Specialist CAMHS.
- Within our Eating Disorder team, we provided meal support training to health care assistants and support staff in CAMHS. We aim to train more staff in 2025 in order to provide meal support at school, home and the ward environments.

Specific support for Children in Care

- We recruited a new Service Manager who commenced employment in November 2024.
- An audit of children who are looked after and who were receiving support from CAMHS was completed in 2024. Significantly, the process to co-construct a new service to best meet the needs of the children and families we work with was initiated. This involved 'hearing the voice of the child' by meeting with many children who are looked after and, where possible, their parents.
- The new service manager visited children, young people and staff in residential homes; and engaged with professionals in other parts of the support network.

Quality Assurance Service

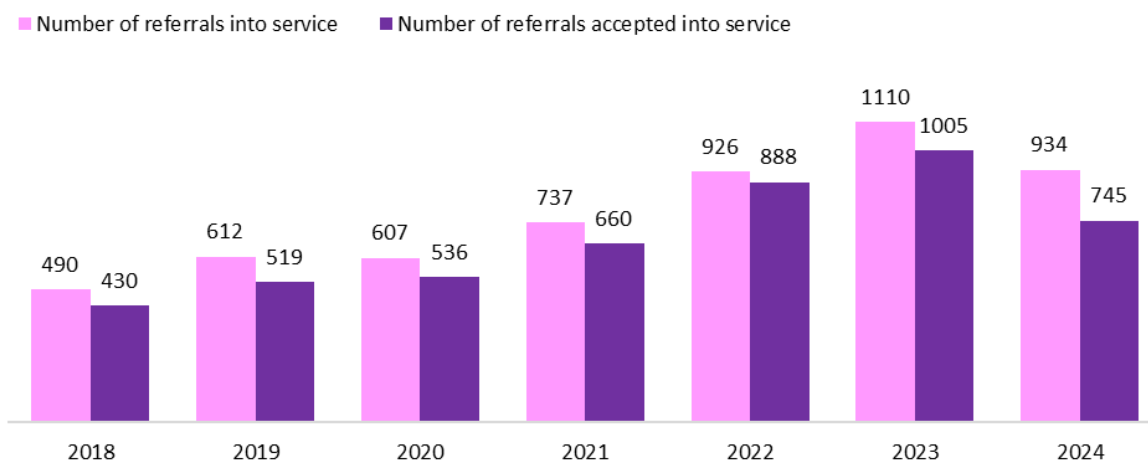
- The team is actively engaged in quality assurance and improvement initiatives. Adhering to Quality Network for Community CAMHS (QNCC) and JCC standards, we ensure that our service meets regulatory requirements. Our team participates in regular inspections by the JCC and is involved in QNCC reviews.

Additionally, we network nationally with the Royal College of Psychiatrists and the QNCC's member trusts to learn from their services and apply these insights to our own development. We value meaningful collaboration and participation, working with groups like Youthful Minds to incorporate young people's views and suggestions into our service development. In line with this, we have produced collaborative documents, including working together agreements and information packs.

- In 2024, we introduced a new system for recording all clinical and nonclinical contacts, leading to improved data accuracy and management. This enhancement allows for better reporting and analysis, improved auditing and accountability, and easier tracking of contact outcomes. We can also monitor those who did not attend their appointments. Our collaboration with Child Outcomes Research Consortium (CORC) continues to assess the utility and clinical impact of our outcome measures.
- Significant progress has been made with our clinical dashboards. Since its introduction last year, the duty dashboard has become our sole source for reporting and managing referrals. The Experience of Service Questionnaire (ESQ) dashboard visually captures data from the ESQs completed by young people, parents, and carers. This tool records the number of respondents, their demographic data, and the qualitative and quantitative data collected by the questionnaire. We have also developed a clinical management dashboard to help clinicians manage their minimum data and case management while providing management oversight.
- The Neurodevelopmental Service dashboard displays referral numbers, assessments, and waiting times for ADHD and Autism referrals, allowing for quick and easy access to this data. Improvements in data collection and quality for this service will continue into 2025.
- In 2024, we refined our reporting processes for CAMHS staff, simplifying and separating the reporting of health and safety issues and data breaches under the governance oversight of both CYPES and Health. This initiative resulted in clear reporting guidelines.
- The team monitors all supervision to ensure staff are supported and that clinical practice remains safe. We also oversee staff training and development, providing regular reports on training progress to leadership. This oversight helps identify and address any gaps, ensuring CAMHS staff are skilled and prepared to deliver quality mental health care for young people, aligned with our best practice framework.
- The Quality and Assurance team oversees all feedback about CAMHS, including complaints, compliments, suggestions, and ESQ responses. We use all feedback to learn about customers' experiences and continually strive to improve our services. Our learnings are displayed on our 'You Said, We Did' board in reception, and we have initiated a quarterly audit of feedback to share insights and changes.

2024 Key Service Data

Referrals



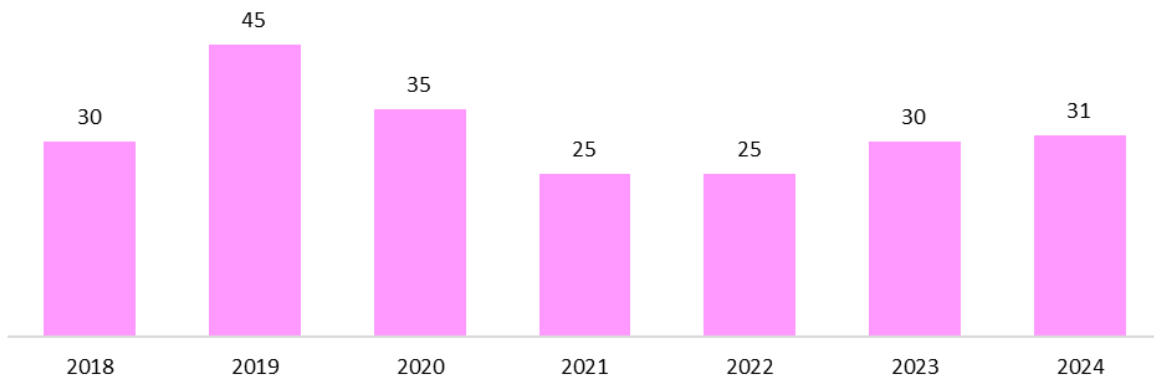
In total, CAMHS received 1145 referrals in 2024, with 934 new referrals. There were 211 referrals received for clients that were already open to CAMHS. This may have been the result of presentations at hospital, or requests for additional assessments, such as neurodevelopmental assessments.

The Neurodevelopmental Service received 534 referrals: 289 referrals for ADHD assessments and 245 for Autism assessments. These figures have reduced since 2023 when there was a total of 915 referrals for neurodevelopmental assessments. The significant identification of children and young people with neurodivergent features in recent years, means that referrals for assessment should now have been made for a large number of those of school age.

CAMHS has an acceptance rate of referrals of 80% in 2024, compared to an average 78% in the UK, according to the most recent NHS benchmarking data.

Jersey's re-referral rate was 17% in 2024. This is the percentage of referrals that were accepted into CAMHS in 2024 within 12 months of being discharged from the service (excluding those discharged from Early Intervention). In 2023, there were changes in the way referrals were recorded and classified which makes comparisons with previous years difficult. Our 2024 figure is in line with the 2024 NHS Benchmarking figure of 15%.

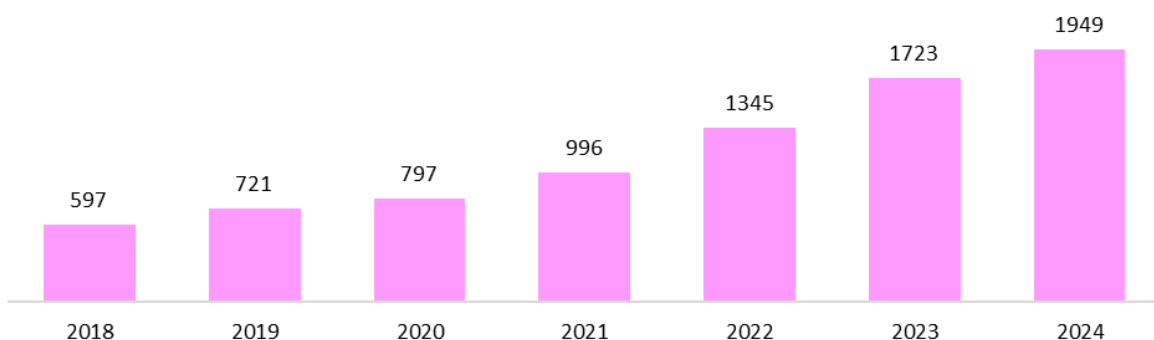
Average waiting time from referral (routine only) to assessments (days)



The CAMHS target for the completion of routine referrals is 36 days from the date the referral was received. Despite the significant volume of referrals, initial assessments of routine referrals were completed on average in 2024 in 31 days.

Of neurodevelopmental diagnostic assessments completed in 2024, the average waiting time from referral to assessment was nearly 13 months.

Number of young people open to CAMHS (end of year)



In line with the increase in referrals, the caseload figures increased significantly between 2022 and 2024. Of this, a significant number of children and young people are open to the service because the service is dispensing ADHD medication and/or treatment.

Inpatient Data

A change in recording and reporting practices in inpatient data means we do not have a full year of data for 2024. However, we can report on the last three quarters of the 2024. In this period (Apr-Dec) there were 60 discharges of CAMHS patients from Robin Ward and a total of 143 bed nights occupied by CAMHS patients on Robin Ward in this time.

In the whole of 2024, there was a total of six admissions to Orchard Ward.

Service Feedback

Service users can provide complaints, compliments, suggestions and comments using the Government of Jersey's Customer Feedback Management System (CFMS).

In 2024, CAMHS received 22 complaints and 57 compliments through this system.

Compliment Trends Overview:

- Attitude and Behaviour – e.g., feeling understood, easy to speak to, patient, consistent and making a difference.
- Accessing Service – e.g., adjusting appointment times, and work schedules, being seen a lot faster than expected.

Complaint Trends Overview:

- Consistency of Information/Communication issues: e.g., phone calls not being documented accurately or returned in a timely manner.
- Accessing Service, e.g., the transition process was delayed or appointments cancelled.
- Mistakes were made, e.g., a letter being sent to the wrong person involved in the young person's care.

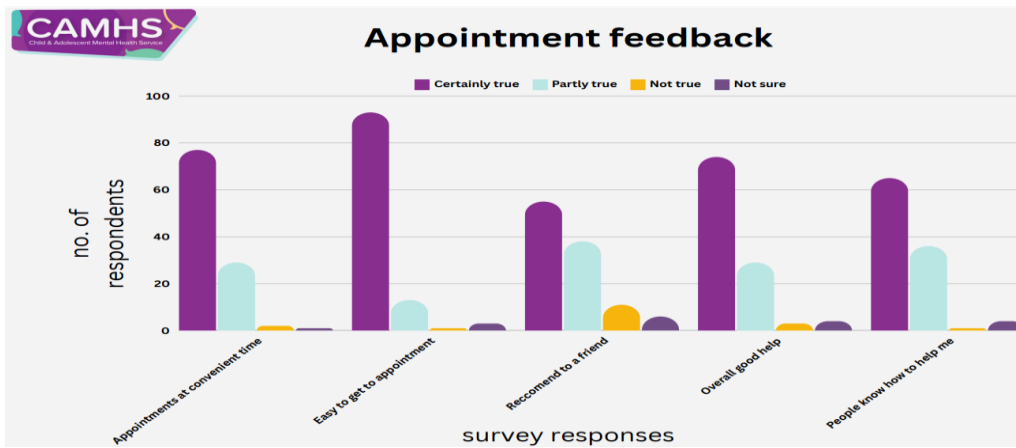
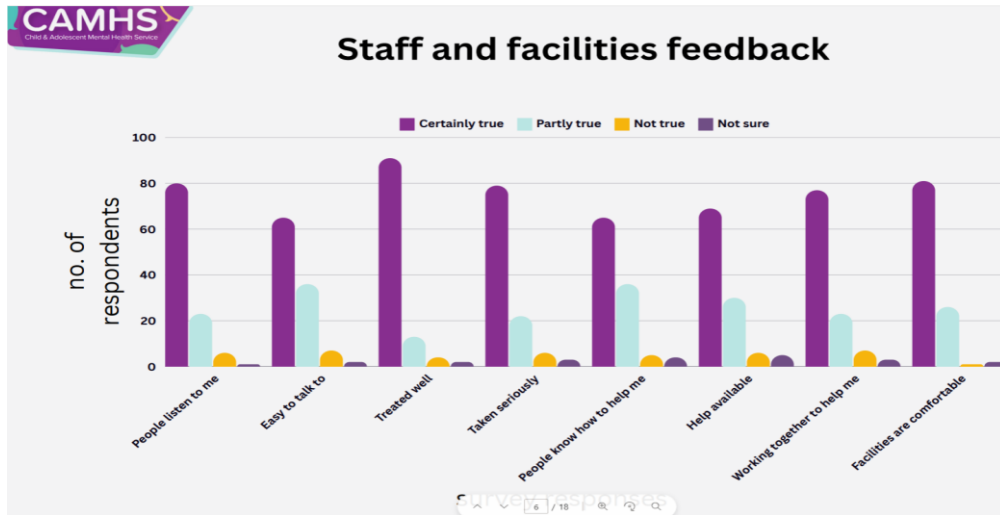
Experience of Service Questionnaire

In 2023, CAMHS introduced the ESQ. This gathered feedback from children, young people, and parents / carers about their experiences with CAMHS. In 2024, there were 218 responses (97 from parents / carers and 121 from children and young people), an increase from 181 in 2023. In each of the categories, responses are overwhelmingly positive.

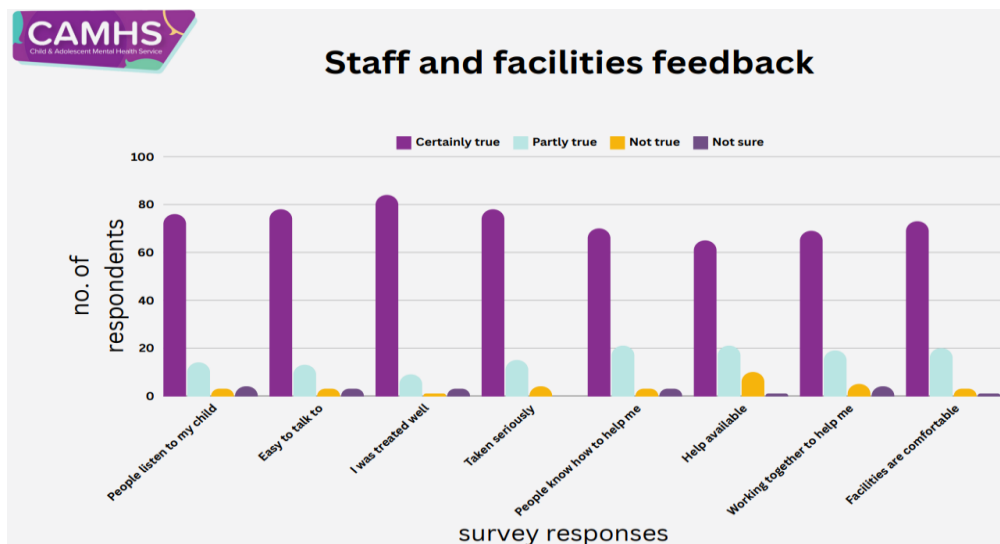
9-11 year olds

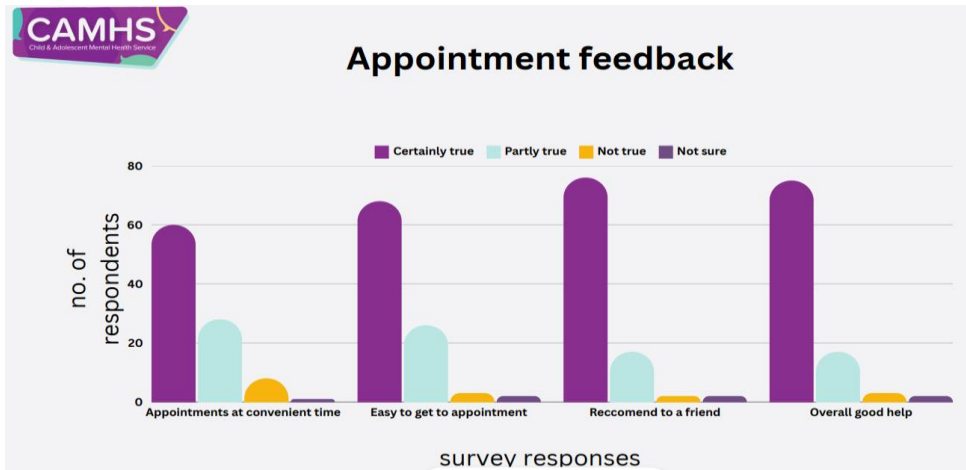


12–18-yearolds



Parents/Carers





What was good about your child's care?

I was listened to and helped

Kind helpful approachable practitioner

I felt understood

All staff were good listeners were good at giving advice for coping

We could not have got through the last couple of years without CAMHS involvement

Decisions were discussed and made together. We were asked and listened to

Safe and responsible care

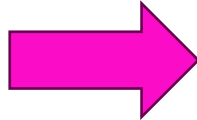
We were always seen by the same person who we felt comfortable with

You are saying

We are doing

That we could improve our waiting area and rooms... this includes:

The lights being too bright.
The rooms being too hot/cold.
The walls needing painting.
The rooms needing fidget toys.
Not liking the radio/news playing



Since hearing this feedback, we are now:

- Looking into how we can change some of our lighting in the rooms.
- Now only playing music instead of the radio or news.
- Painting some of the walls around our waiting areas.
- Re-decorating most of our rooms.
- Adding fidget toys and games.
- Dedicating two of our staff to consider how to make this a nicer environment for everybody

That we could be more inclusive... this includes:

- Having more support for hidden differences and disabilities.
- Making others aware of their needs and ensuring this is respected.
- Understanding that English is not everybody's first language and helping with this.

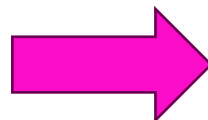


Since hearing this feedback, we now:

- Have posters around our waiting area with information on hidden differences & information on respecting these.
- Provide sunflower lanyards for free upon request.
- Provide sign language & other language interpreters during sessions upon request.
- Have a hearing induction loop which can be used for those with hearing aids or cochlear implants

That we could improve your experience whilst you wait... this includes:

- Having shorter waiting times for assessments and therapy.
- Offering more support whilst you are waiting.



Since hearing this feedback, we want you to know:

- If you are waiting for a neuro assessment (e.g. autism, ADHD or FASD), our team are working extremely hard to keep the assessment waiting time as short as possible whilst keeping up with the growing number of referrals! Please check out our neuro support pack for all the support available to you whilst you wait!
- We try to make sure that you are offered support or signposted to where you can get this whilst you wait for therapy. Please feel free to ask if you want to find out more!

Staff feedback

In 2024, staff feedback was gathered through the annual inspection conducted by the JCC and the government-wide Be-Heard Survey. Additionally, we hold monthly full team meetings that encourage open discussions. All managers maintain an on-site presence with an open-door policy, ensuring staff can approach and discuss any concerns at any time.

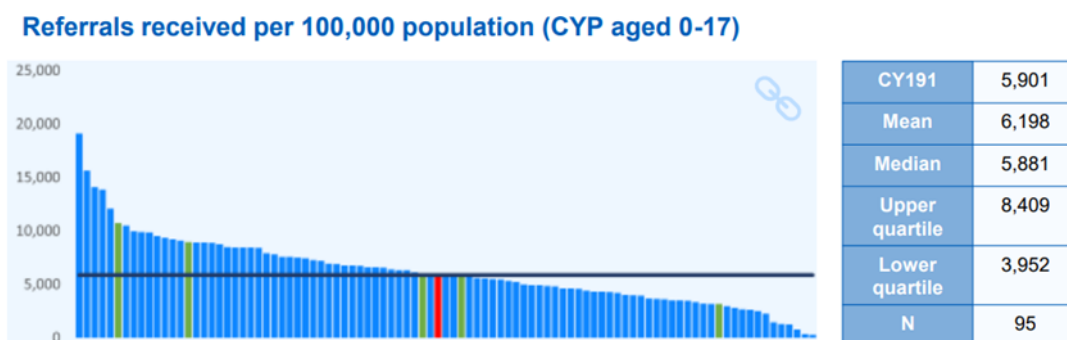
In 2024, the service further committed to prioritising staff wellbeing. A CAMHS Wellbeing Committee was established, which has been actively involved in engaging with staff to ensure wellbeing issues are addressed and initiatives that promote wellbeing are introduced. The committee has organised numerous social events and regular 'Bring and Share' lunches, and delivered wellbeing workshops focusing on mindfulness, breathwork, and yoga. We also held a family and staff wellbeing session at Crabbe.

Regular social events are planned to provide team members with opportunities to socialise and build connections, especially following the rapid expansion of our team. Furthermore, we support staff personal growth and development by prioritising career development and training opportunities.

NHS Benchmarking Report 2024

The NHS benchmarking report was published in November 2024. There were 105 submissions from 75 mental health provider organisations across the UK to the 2024 NHS Benchmarking Report (based on 2023 data). Jersey is referred to as CY191 throughout the report.

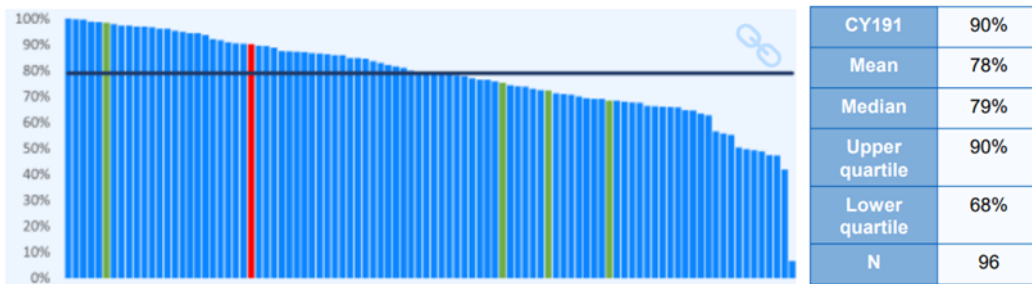
The number of referrals to CAMHS – 5901 per 100,000 people was very similar to the national average of 6198.



What is different is that Jersey CAMHS accept on average 90% of referrals (in 2023) compared to the average of 78% of other services. Our rate in 2024 has dropped to

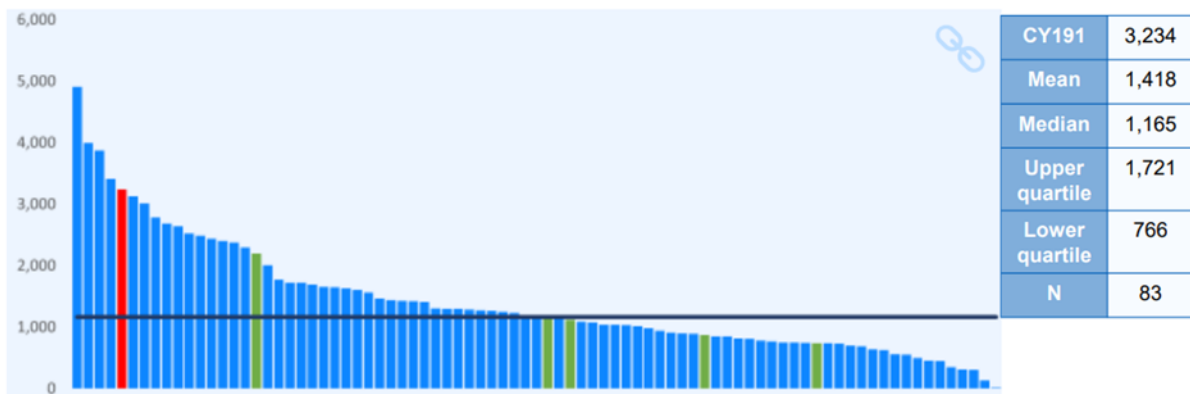
80% which is more in line with UK average, due to local investment and signposting to early intervention and universal services.

Referral acceptance rate (CYP aged 0-17)



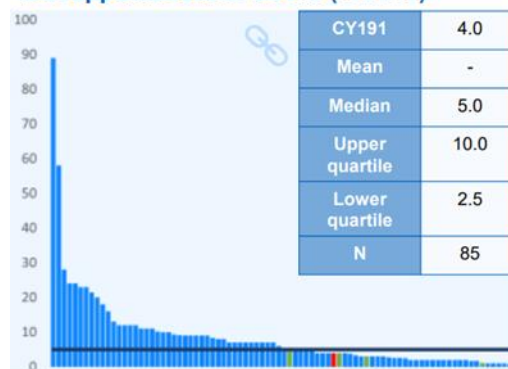
Jersey has a higher number of children and young people on its case load – over double - (Per 100,000 people) than most UK services.

Patients on caseload on 31st March 2024 per 100,000 population



Despite this higher acceptance rate and caseload, Jersey CAMHS does extremely well to be one of the quickest services to access within the NHS benchmarking report, completing initial assessments in four weeks.

Median waiting time from referral to first appointment in weeks (routine)



Jersey Care Commission / Royal College of Psychiatrists Inspection Report 2024

The Jersey Child and Adolescent Mental Health Service (CAMHS) was inspected for a second time on November 27th and 28th 2024. The Jersey Care Commission (JCC) conducted this inspection, evaluating the service against the established standards for CAMHS. The Commission once again engaged the Royal College of Psychiatrists (RCPsych) and their Quality Network for Community CAMHS (QNCC) to support the inspection with an external review team of five inspectors, alongside two Regulation Officers from the Commission.

In terms of service standards, CAMHS met 81.7% of all standards, with 13.5% partly met, and just 4.8% not met. The report stated, “CAMHS has made significant changes and improvements to their service following feedback provided at last year’s inspection. This shows a dedication to quality improvement and a commitment to providing a high-quality service for young people and their families.”

There were just two improvements noted – one was to improve collaboration in care planning and add physical health assessments / lifestyle advice to these. The second was to continue work to advocate for shared prescribing of ADHD medication with GP’s.

The published report is available on the JC website: [RPT_CAMHS_20241128.pdf](#)

Budget and Recruitment

Children’s Health and Wellbeing Budget and Expenditure	2024 Budget	2024 Expenditure	2023 Expenditure
Duty and Assessment	1,492,000	1,244,528	1,330,779
Specialist CAMHS (including LAC)	2,295,000	1,980,669	2,774,009
Early intervention	795,000	856,476	633,135
Quality Assurance	614,000	590,692	312,891
Neurodevelopment	1,367,612	1,294,368	153,988
Total	6,563,612	5,966,734	5,204,802

Goals for 2025

Service Area	Goals
Overall Service	<ul style="list-style-type: none"> • To ensure that children and young people are involved in their care planning; where appropriate accessible care plans are developed; clinicians document evidence of involving children and young people in the care planning process, with all Care Plans in date and regularly reviewed in a collaborative manner. • CAMHS will recruit to all vacant and agency-covered posts, now that the consultation for change to hours has concluded. • Commence the first local staff on the Doctorate in Clinical Psychology in 2025 through Southampton University. • The wellbeing committee to continue to address wellbeing issues and provide wellbeing initiatives. • The lease for Liberte House ends September 2026. Work will take place to identify and develop a new building for CAMHS, with planning being developed for the move. • New Children and Young People's Emotional Wellbeing and Mental Health Strategy 2026-2029. In quarter 1 2025 there will be a review of implementation of the 2022-2025 strategy. A project lead will be identified to lead the 2026-2029 strategy development and commence engagement with stakeholders and research.
Duty and Assessment	<ul style="list-style-type: none"> • In Quarter 1, 2025, the CAMHS Duty and Assessment Service will move to 9am-5pm seven days per week The aim will be to move to 8am – 8pm service from April 2025. • Recruit to vacant HCA and nurse practitioners' posts.
Neurodevelopmental	<ul style="list-style-type: none"> • Relaunch neurodevelopmental referral pathways to ensure early development of intervention plans, and ensure all data is in place to allocate for prompt diagnostic assessments. • Increase and detail internal monthly capacity for diagnostic assessments in 2025 and focus on reducing waiting times for ADHD and Autism assessments to under six months. • There will be a continued additional £400k Government Plan funding to support additional diagnostic assessments through private providers in 2025.
Early Intervention	<ul style="list-style-type: none"> • To develop an offer for supporting children whose parents may be experiencing significant mental health needs and create relationships to work together with other agencies in order to achieve this. • To provide consultation to schools to develop intervention plans for young people where neurodiverse features are identified. • To organise and deliver training days every half term to support parents and professionals to better understand and support children's mental health. • To work with other agencies to train staff and increase capacity to develop Non-Violent Resistance training and coaching. • To work with the play strategy working group to prioritise play as an opportunity to have better mental health

	<ul style="list-style-type: none"> • To offer more opportunities for families to come together and learn how the outdoors, play and connection promotes better mental health. • To continue to work with the Polish school and develop their capacity to support mental health within the Polish community and develop greater links with other diverse communities in Jersey.
Specialist CAMHS	<ul style="list-style-type: none"> • Implement the Action Plan from the 2024 anti-psychotic audit including and ensuring full compliance with physical health checks, monitoring, ensuring any prescribing for behavioural reasons is monitored for impact (reduction) and psycho-social interventions are included. • Recruit to the two vacant psychiatry positions. • Continue to support efforts for shared prescribing, attending GP meetings, and events to support agreement. • Ensure the CAMHS clinical leadership team focus in 2025 on reviewing the staff clinical skill matrix; guiding and developing staff in clinical skills; ensuring 2025 training initiatives meet service needs; advising senior management on and implementing key therapeutic approaches across services. • Social prescribing is an approach that offers support to people to connect with activities groups and services in their local area; link workers help to motivate people to engage in valued activities. This approach has been used widely in adult services in the UK with promising results and initiatives to offer this to young people are starting to be developed and embedded within UK services for young people. We have started a project to develop partnerships on the island and to develop a model of social prescribing that will fit for the young people in Jersey. We are very excited to take a lead on advancing this initiative and will be continually evaluating the impact of our pilot project. Further updates will be shared as the project progresses.
CAMHS Children Looked After	<ul style="list-style-type: none"> • Recruit to final clinical post. • Work with social care colleagues to establish the multi-disciplinary service.
Quality and Assurance	<ul style="list-style-type: none"> • Introducing a standardised approach to internal referrals, waiting list management, and allocation. This process will be implemented across CAMHS, ensuring standardisation. • A Quality Assurance Framework is in the process of being developed and will be completed in 2025. This framework will integrate a range of measures to safeguard and enhance the quality of mental health services for children and their families. By focusing on clinical outcomes, patient safety, staff development, and stakeholder engagement, the framework will bring together the work that is currently being completed and support the delivery of compassionate, effective, and consistent care. • To continue auditing the feedback we receive each quarter and share the learnings and changes with the team and with senior management. • A skills audit is complete which will now support a training needs analysis to ensure that staff are accessing the right level of training and any skills gaps across the service are addressed.

	<ul style="list-style-type: none">• Continue to digitalise our training database to provide an enhanced level of oversight of training development.• Work with digitalisation regarding the proposed new database for case records. To explore whether this can host a text messaging service to allow appointment reminders to be sent to young people and families.
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Data Appendix

	2018	2019	2020	2021	2022	2023	2024	NHS Benchmark 23/24
Number of referrals into service	490	612	607	737	926	1110	934	
Number of referrals accepted	430	519	536	660	888	1005	745	
Acceptance rate	88%	85%	88%	90%	96%	91%	80%	78%
Number of referrals for ADHD Assessment			50	191	328	534	289	
Number of referrals for Autism assessment		60	80	140	246	381	245	
Caseload at end of period	597	721	797	996	1345	1723	1949	
Number of ADHD Assessments				133	171	230	201	
Number ASD Assessments		34	59	114	173	248	224	
Waiting time for routine referrals to assessment (weeks)	4	6	5	4	4	4	4	11
Waiting time for Neuro developmental referrals to assessment (weeks)				28	27	38	55	
Discharges from Robin Ward where main speciality= CAMHS	37	32	54	68	34			
Average length of stay (including leave) of CAMHS patients discharged from Robin Ward in time period	8.3	7.9	13.2	6.4	2.5			
Total bed nights occupied by CAMHS patients on Robin Ward	307	253	809	336	85			
Admissions < 18 years to Orchard House	14	7	*	12	*	*	6	
ED Attendances for self-harm under 18 years old	42	33	47	66	68			
Number of complaints received			0	11	19	13	22	
Number of compliments received			3	14	43	55	57	

*numbers 5 or less suppressed.