

Publication Report



Child & Adolescent Mental Health Services in NHS Scotland

Workforce Information as at 31st March 2015

26th May 2015



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Introduction

This publication is a collaborative piece of work between the Information Services Division (ISD) of NHS National Services Scotland and NHS Education for Scotland (NES).

The publication contains information about the workforce in NHS Scotland Child and Adolescent Mental Health Services (CAMHS) as at 31st March 2015.

The data are sourced from the NES-ISD National CAMHS Workforce Information Database.

Information presented are:

- Data on clinical staff in post in CAMHS including: Medical, Nursing, Psychology, Allied Health Professionals, Social Workers and Teachers.
- Data on vacant posts.
- Data on trainees.
- Data are available by staff group, NHS Board, age, gender, Band and contract type.

The information collected and presented are used by NES, the Scottish Government and NHS Boards to support local, regional and national workforce planning, to support educational training and planning, and to track the Scottish Government's recent investment in expansion of CAMHS workforce and training numbers.

The tables present figures in both Headcount numbers and Whole Time Equivalents (WTE). WTE adjusts headcount staff figures to take account of part-time staff.

Mental health problems in children and young people are increasingly common. The Public Health Institute for Scotland Needs Assessment Report on Child and Adolescent Mental Health (2003), often referred to as the SNAP report, states that about 10% of children and young people 'have mental health problems which are so substantial that they have difficulties with their thoughts, their feelings, their behaviour, their learning, their relationships, on a day-to-day basis'.

Specialist Child and Adolescent Mental Health Services (CAMHS) comprise multidisciplinary teams with expertise in the assessment, care and treatment of children and young people experiencing mental health problems. The wider multidisciplinary and multi-agency team around the child also has a key role in supporting children and young people with any mental health problems they may be experiencing.

The main function of CAMH services is to develop and deliver services for those children and young people (and their parents/carers) who are experiencing the most serious mental health problems. They also have an important role in supporting the mental health capability of the wider network of children's services. CAMH services are usually delivered by teams including psychiatrists, psychologists, nurses, social workers, and others.

Further data tables are available on the [CAMHS workforce pages](#) of the ISD website.

Key points

- In 2009, the Scottish Government committed central funding to expand the CAMHS workforce of NHSScotland. This has resulted in a steady increase in the CAMHS workforce from 764.6 WTE (883 headcount) in 2009 to 980.6 WTE (1136 headcount) as at 31st March 2015.
- The most significant staff increases have been in Psychology (71% since 2009), and Nursing (27% since 2009).
- The headcount has remained relatively stable over the past year. At 31st March 2015 there were 1136 clinical staff (980.6 WTE). Nationally, this represents a staffing level of 18.3 WTE clinical workers per 100,000 of the population of Scotland.
- An additional 61.6 WTE posts throughout NHS Scotland CAMHS were between being advertised and being filled. A further 22.0 WTE posts were approved for recruitment but not yet advertised.

Related publications

Information about CAMHS waiting times can be found here:

<http://www.isdscotland.org/Health-Topics/Waiting-Times/Child-and-Adolescent-Mental-Health/>

The latest publication includes the following key points:

- The Scottish Government set a target for the NHS in Scotland to deliver a maximum wait of 26 weeks from a patient's referral to treatment for specialist CAMH services from March 2013, reducing to 18 weeks from December 2014. The target should be delivered for at least 90% of patients.
- During the quarter ending March 2015, over 4,200 children and young people started treatment at CAMH services in Scotland.
- Of these, 85.2% were seen within 26 weeks and 78.9% were seen within 18 weeks. Half started their treatment within 9 weeks.
- During the quarter ending March 2015, 11 Boards met the 26 week HEAT target and 3 did not, namely NHS Forth Valley, NHS Lothian and NHS Tayside. The 18 week HEAT target was met by 8 Boards while 6 did not meet it, namely NHS Fife, NHS Forth Valley, NHS Grampian, NHS Lothian, NHS Shetland and NHS Tayside.
- Across Scotland 10.7% of patients referred to CAMH services do not attend their first appointment.

Results and Commentary

The information in this report is taken from the NES-ISD National CAMHS Workforce database.

Staff in Post

The total number of CAMHS staff in post on 31st March 2015 was 980.6 whole time equivalent and 1136 headcount (see Table 1).

Figure 1 shows the NHSScotland CAMHS staff as whole time equivalent number September 2006 to March 2015. The whole time equivalent staff has been rising steadily over this time period reflecting the successful expansion of the NES commissioned Doctorate in Clinical Psychology course and high retention rate of course graduates within NHSScotland CAMHS.

Figure 1: WTE of CAMHS staff in NHS Scotland as census dates at 30th September 2006 – 31st March 2015.

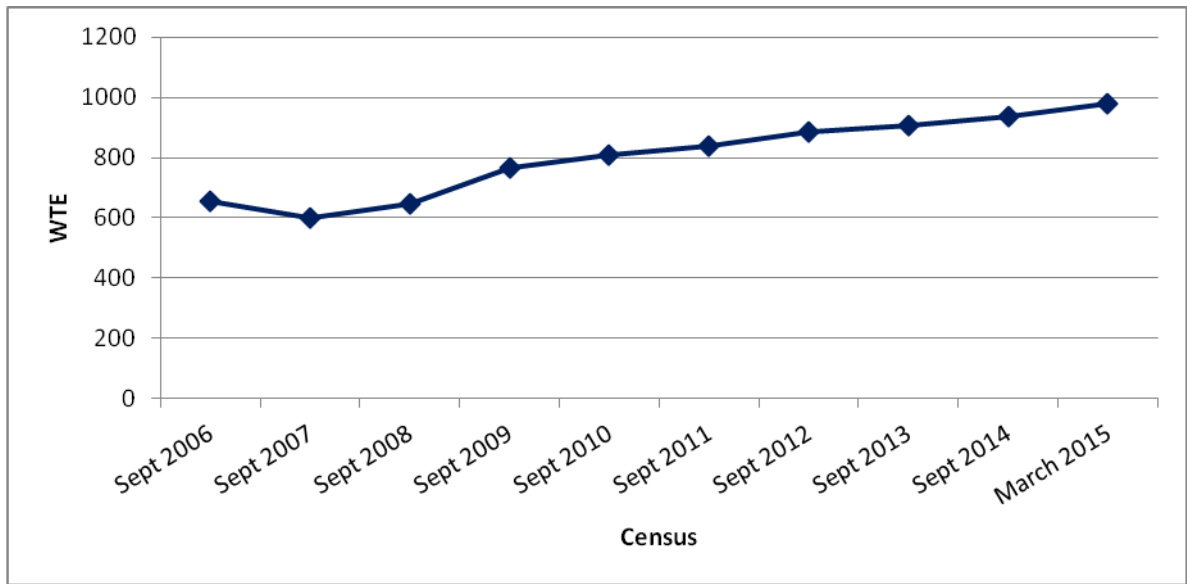


Table 1: NHS Scotland CAMHS workforce by Professional Group as at 31st March 2015 (WTE).

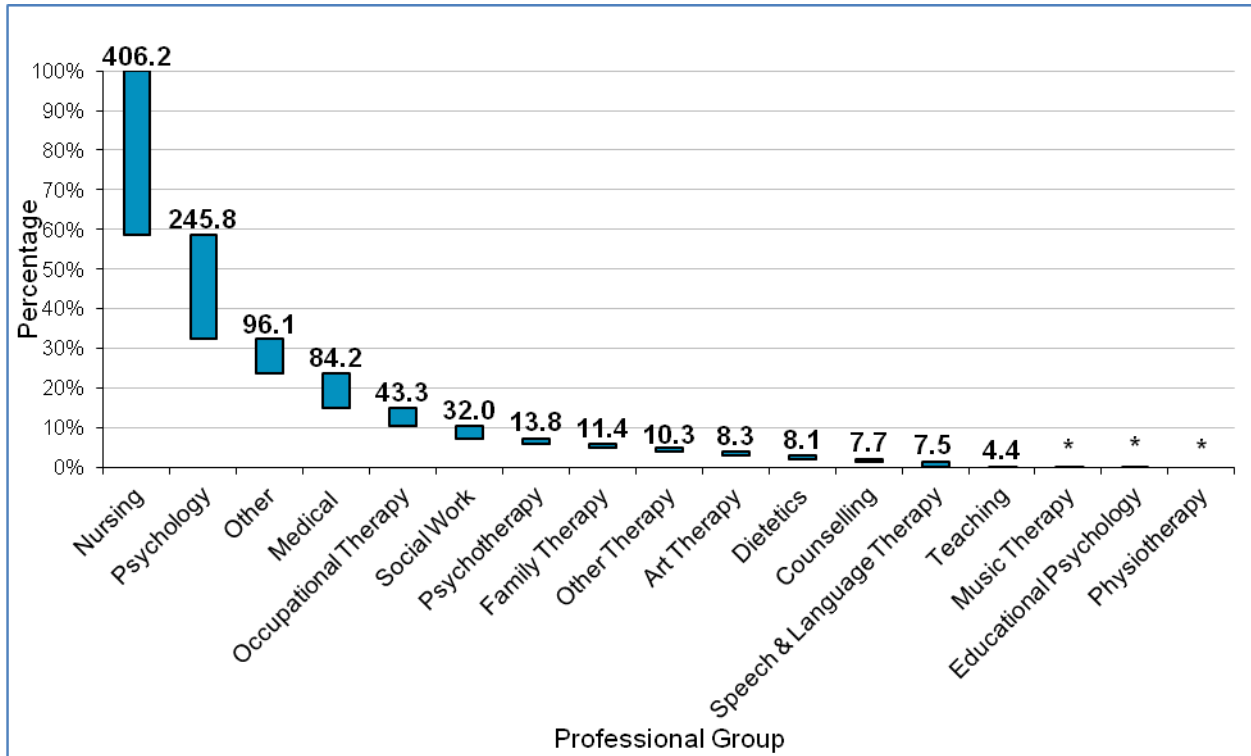
Professional Group	Whole Time Equivalent	Headcount	WTE per 100,000 population
Nursing	406.2	444	7.6
Psychology	245.8	294	4.6
Medical	84.2	106	1.6
Occupational Therapy	43.3	55	0.8
Social Work	32.0	38	0.6
Psychotherapy	13.8	16	0.3
Family Therapy	11.4	14	0.2
Counselling	7.7	9	0.1
Speech & Language Therapy	7.5	12	0.1
Teaching	4.4	10	0.1
Art Therapy	8.3	11	0.2
Dietetics	8.1	9	0.2
Physiotherapy	0.4	1	0.0
Music Therapy	0.6	1	0.0
Educational Psychology	0.5	1	0.0
Other Therapy	10.3	13	0.2
Other ¹	96.1	103	1.8
<i>Healthcare Assistants</i>	47.5	51	0.9
Total: All Groups	980.6	1136	18.3

1. Other Staff include Community Mental Health Workers, Primary Mental Health Workers, Clinical Support Workers, Nursing Assistants and Specialist Health Visitors.

- The current headcount of 1136 clinical staff (980.6 WTE) is an increase of 4.0% (3.6% headcount) in staff in post WTE since 31st December 2014. From 31st March 2014 it is an increase of 6.9% WTE (5.7% headcount).
- Nationally this represents a staffing level of 18.3 WTE clinical workers per 100,000 of the population of Scotland.
- As at 31st March 2015, 38.96 WTE (4%) of the 980.6 WTE total staff in post were on maternity leave.

Figure 2 illustrates the multidisciplinary skill mix within NHS Scotland CAMHS as at 31st March 2015. Nursing account for 41% of all CAMHS staff, Psychology for 25% and Medical for 9%.

Figure 2: NHS Scotland CAMHS workforce as at 31st March 2015 by Professional Group. Expressed as a percentage of total 980.6 WTE.



* less than 1 WTE

Please note: Psychotherapy – this staff group are Child and Adolescent Analytical Psychotherapists.

Staff in NHS Boards

As illustrated in Table 2, the NHS Boards with the largest percentage growth in CAMHS staff between 31st March 2014 and 31st March 2015 were NHS Ayrshire and Arran, NHS Forth Valley and NHS Dumfries and Galloway. NHS Greater Glasgow and Clyde saw the largest decrease in CAMHS staffing numbers between 31st March 2014 and 31st March 2015.

Table 2: All Staff (WTE) employed in NHSScotland CAMHServices as at each census date, by NHS Board.

NHS Board	31 st March 2014	31 st March 2015	WTE Difference from 31 st March 2014 to 31 st March 2015	% Difference from 31 st March 2014 to 31 st March 2015
NHS Ayrshire & Arran	47.7	58.4	10.7	22.4%
NHS Borders	19.2	19.8	0.6	3.2%
NHS Dumfries & Galloway	27.7	33.3	5.6	20.0%
NHS Fife	47.5	45.0	-2.5	-5.3%
NHS Forth Valley	21.4	25.8	4.5	20.9%
NHS Grampian ¹	56.0	55.1	-0.9	-1.6%
NHS Greater Glasgow & Clyde ²	295.0	289.6	-5.4	-1.8%
NHS Highland	39.3	40.5	1.2	3.1%
NHS Lanarkshire	92.0	92.5	0.5	0.5%
NHS Lothian	174.5	208.3	33.7	19.3%
NHS Orkney ¹	2.0	2.0	0.0	0.0%
NHS Shetland	2.7	2.7	0.0	0.0%
NHS Tayside	89.1	104.2	15.1	16.9%
NHS Western Isles ²	3.5	3.5	0.0	0.0%
Total	917.5	980.6	63.1	6.9%

Notes

1. Included in NHS Grampian data are Service Level Agreement locum contracts between NHS Grampian and NHS Orkney: an NHS Grampian psychiatrist and a psychologist 2 days per quarter.
2. Included in NHS Greater Glasgow & Clyde data is an SLA locum contract with NHS Western Isles for one consultant clinical psychologist 2 days per month (0.1 WTE)

Figure 3: NHSScotland CAMHS staff by NHS board as at census dates 31st March 2014 and 31st March 2015.

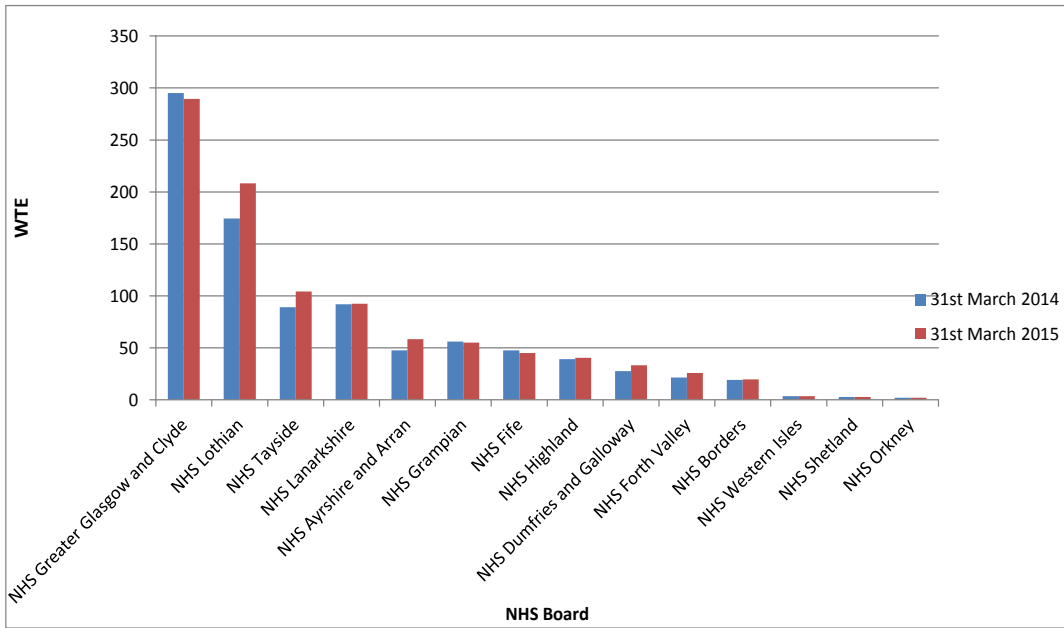


Figure 4: NHSScotland CAMHS staff WTE per 100,000 population by NHS Board as at 31st March 2015.

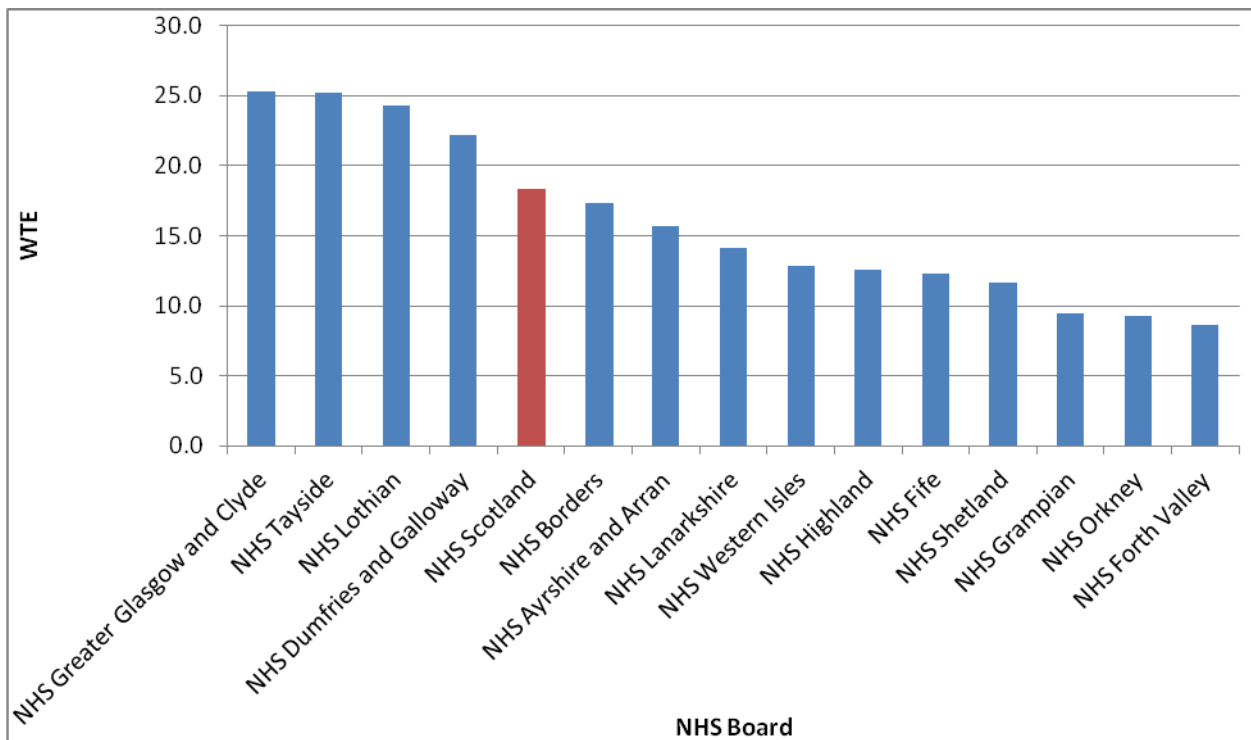


Figure 5: WTE per 100,000 of the population for CAMHS staff in NHSScotland as at 31st March 2015, by NHS Board.

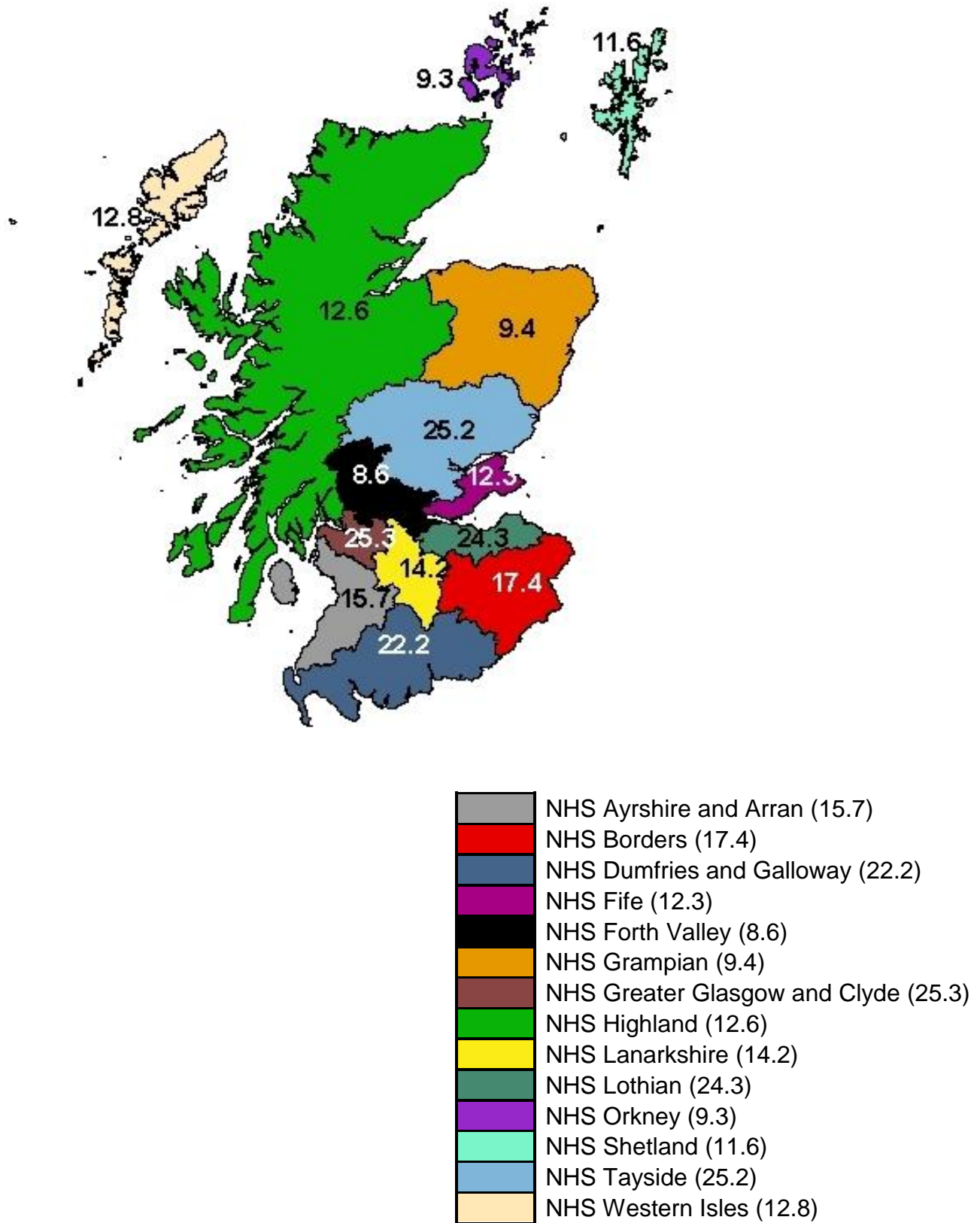
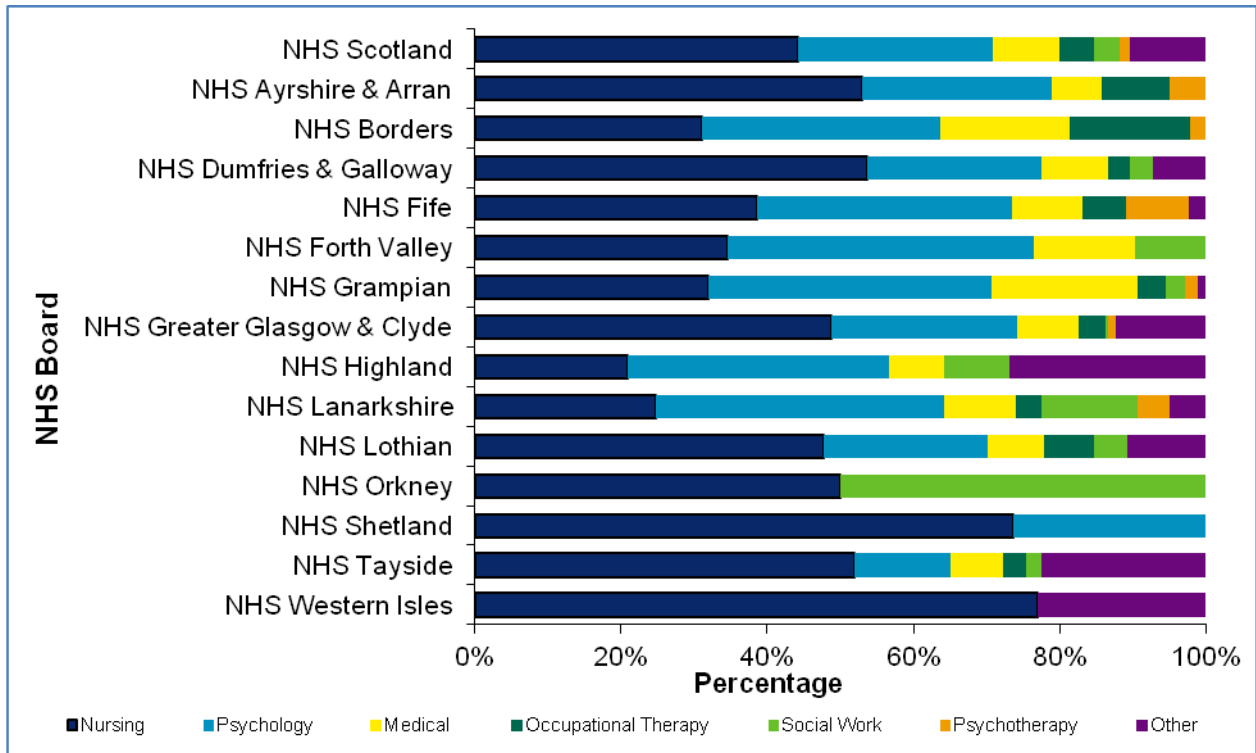


Figure 6: Distribution by percentage of the main Professional Groups within NHS Scotland CAMHS, by NHS Board.



Trends

Of the changes in the CAMHS workforce between 31st March 2014 and 31st March 2015, Psychology has increased by 8.5 WTE, and Nursing has increased by 37.0 WTE as shown in Table 3.

Table 3: NHS Scotland CAMHS workforce Trends by Professional Group, from December 2013 to March 2015 (WTE).

Professional Group	Dec-13	Mar-14	Jun-14	Sep-14	Dec-14	Mar-15	Annual Difference	% Annual Change
Nursing	363.0	369.2	374.4	389.3	390.8	406.2	37.0	10.0%
Psychology	240.0	237.3	238.7	239.1	247.7	245.8	8.5	3.6%
Medical	86.8	84.0	85.5	86.4	82.3	84.2	0.2	0.3%
Occupational Therapy	39.5	42.4	41.1	40.6	42.6	43.3	1.0	2.2%
Social Work	31.8	30.8	31.8	30.0	31.0	32.0	1.2	3.9%
Psychotherapy ¹	10.5	12.5	14.4	12.8	12.3	13.8	1.3	10.6%
Family Therapy	11.0	11.0	11.0	10.5	10.7	11.4	0.4	4.0%
Counselling	8.8	8.7	8.7	8.7	7.7	7.7	-1.0	-11.5%
Speech & Language Therapy	6.1	6.1	6.0	6.5	6.5	7.5	1.4	22.4%
Teaching	4.4	4.4	4.4	4.4	4.4	4.4	-0.0	-0.1%
Art Therapy	9.1	10.1	9.6	8.6	8.4	8.3	-1.9	-18.5%
Dietetics	7.5	6.7	5.9	5.9	6.9	8.1	1.4	20.7%
Physiotherapy	0.4	0.4	0.4	0.4	0.4	0.4	0.0	0.0%
Music Therapy	0.6	0.6	0.6	0.0	0.0	0.6	0.0	0.0%
Educational Psychology	0.5	0.5	0.5	0.5	0.5	0.5	0.0	0.0%
Other Therapy	10.1	8.9	10.0	10.5	9.3	10.3	1.4	15.6%
Other	79.7	84.0	82.6	82.1	80.9	96.1	12.0	14.3%
<i>Healthcare Assistants</i>	44.5	43.8	42.5	44.9	44.1	47.5	3.7	8.4%
Total: All Groups	909.9	917.5	925.4	936.4	942.4	980.6	63.0	6.9%

1. Psychotherapy – this staff group are Child and Adolescent Analytical Psychotherapists.

Vacancy Information

- As at 31st March 2015 an additional 61.6 WTE posts were between being advertised and being filled. A further 22.0 WTE posts were approved for recruitment but not yet advertised.

Table 4: NHS Scotland CAMHS workforce vacancies between being advertised and being filled by Professional Group, as at 31st March 2015.

Professional Group	WTE
Nursing	32.7
Psychology	13.2
Medical	6.7
Occupational Therapy	5.0
Social Work	1.0
Psychotherapy	1.5
Family Therapy	0.0
Counselling	0.0
Speech & Language Therapy	0.0
Teaching	0.0
Art Therapy	0.0
Dietetics	0.0
Physiotherapy	0.0
Music Therapy	0.0
Educational Psychology	0.0
Other Therapy	0.0
Other	0.0
Unspecified Professional Group	1.5
Total: All Professional Groups	61.6

Note: The following NHS Boards/ Services reported no posts were between advertised and being filled as at the 31st March 2015: Argyll and Bute, NHS Borders, NHS Greater Glasgow and Clyde: North, West, West Dunbartonshire, East Renfrewshire, Academic, and Enhanced Nursing, NHS Orkney, NHS Shetland.

We have no information on vacancies from the following services: NHS Greater Glasgow & Clyde: South and East CAMHS, Learning Disabilities, Treatment Foster Care, Eating Disorders and NHS Forth Valley.

In practice many vacancies may arise as a result of the internal movement of staff within a service. This may result in there being no immediate net gain to the workforce in terms of numbers.

Area of Work

Table 5: CAMHS staff employed in NHSScotland as at each census date, by Area of Work.

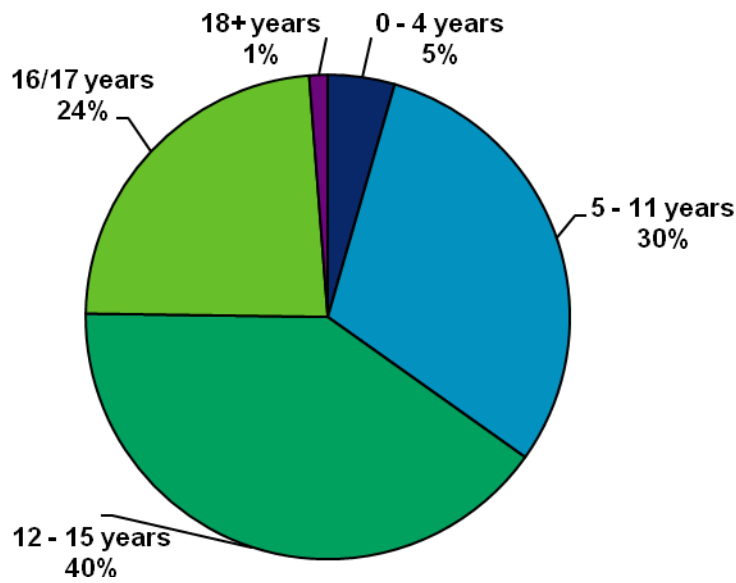
Area of Work	30 th Sept 2013	31 st Dec 2013	31 st Mar 2014	30 th Jun 2014	30 th Sep 2014	31 st Dec 2014	31 st Mar 2015	WTE Difference from 31 st Mar 2014 to 31 st Mar 2015	% Difference from 31 st Mar 2014 to 31 st Mar 2015
Mental Health	780.6	784.1	790.4	796.4	811.9	819.6	858.0	67.6	8.6%
Learning Disabilities	46.0	45.0	44.4	44.6	43.9	41.9	42.5	-1.9	-4.3%
Physical Health	14.1	16.7	16.0	15.9	15.9	15.9	15.3	-0.7	-4.1%
Forensic	6.5	6.5	5.6	6.2	5.1	6.1	6.1	0.5	8.9%
Academic	4.4	4.4	4.1	4.1	4.3	4.3	4.3	0.2	5.6%
Primary Mental health Work	44.4	41.7	45.7	46.6	43.6	42.9	42.7	-3.0	-6.5%
Intensive Outreach	12.6	11.5	11.3	11.6	11.6	11.7	11.7	0.4	3.6%
Total¹	908.5	909.9	917.5	925.4	936.4	942.4	980.7	63.2	6.9%

1. The discrepancy in the Area of Work total is due to the conversion of hours worked to wte.

Target Age

NHS Scotland CAMHS vary in the age of population served. In some areas services are provided up to 16 only; while others offer services up to 18 years. This has significant implications for workforce requirements. For detailed information about the age of the population served in each NHS Board, see Table 8.

Figure 7: Distribution of Target Age of Patients seen by staff within NHS Scotland CAMHS, as a percentage of total 980.6 WTE.



Workforce Age, Band and Contract Type

The following charts illustrate the numerous break downs of CAMHS workforce data that are available from the [Excel tables](#).

Figure 8: Age Profile of the Main Professional Groups within NHS Scotland CAMHS (Headcount).

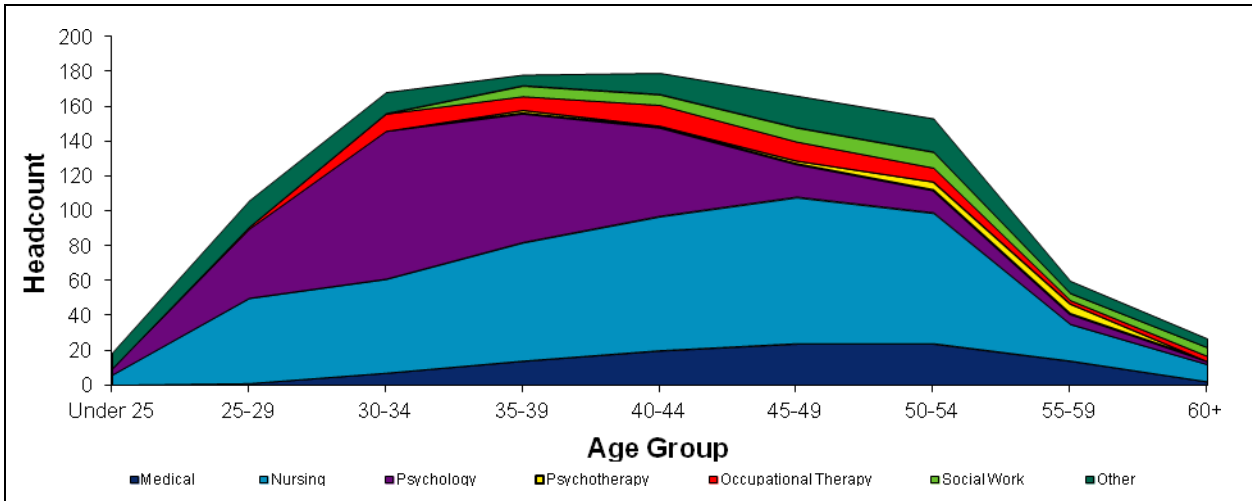


Figure 9: Age Profile of the Main Professional Groups within NHS Scotland CAMHS (Headcount).

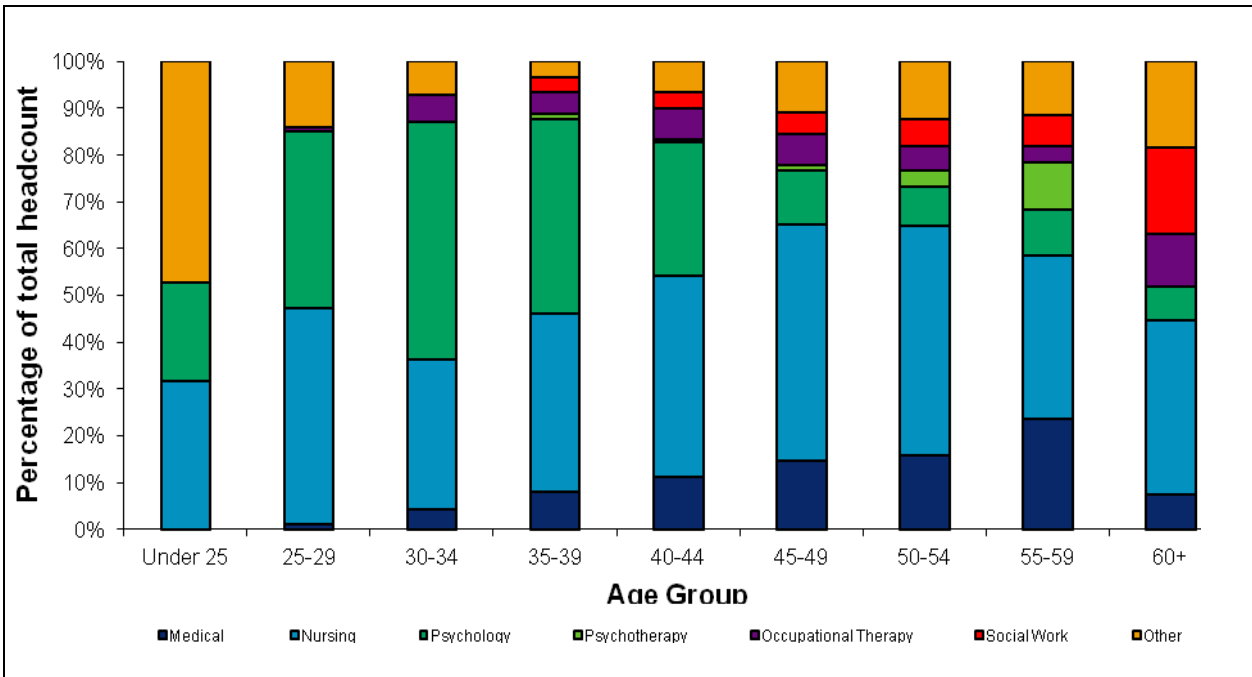


Figure 10: Workforce Tree Plot of Staff within NHS Scotland CAMHS by pay band & professional group, as a percentage of total 980.6 WTE.

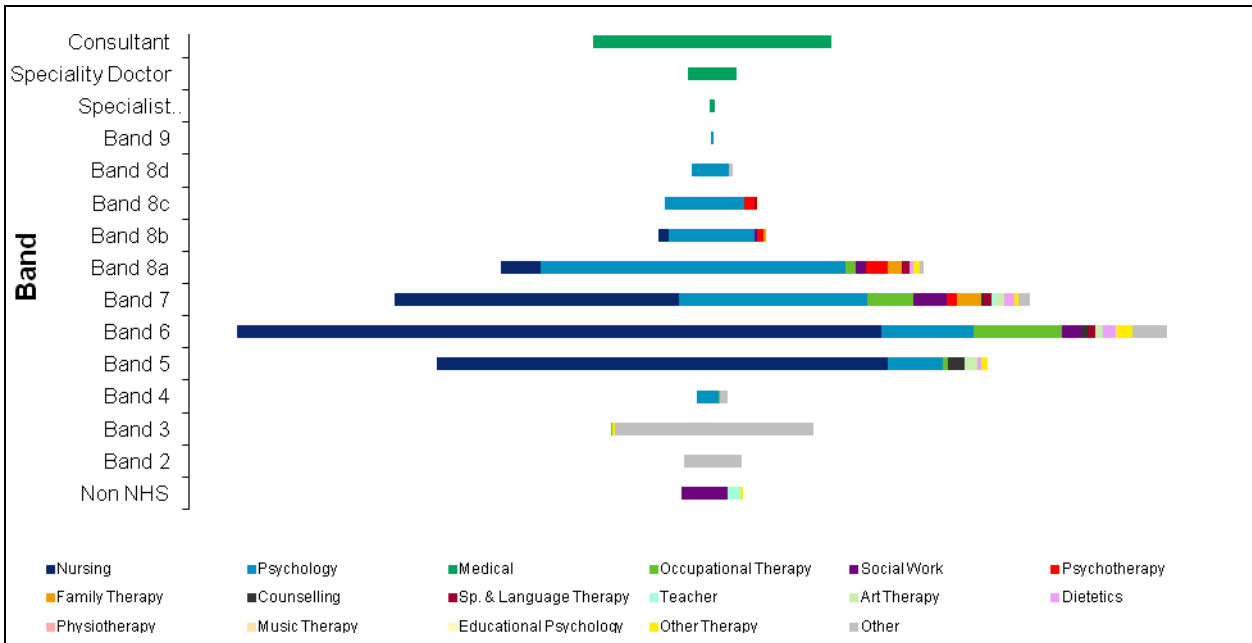
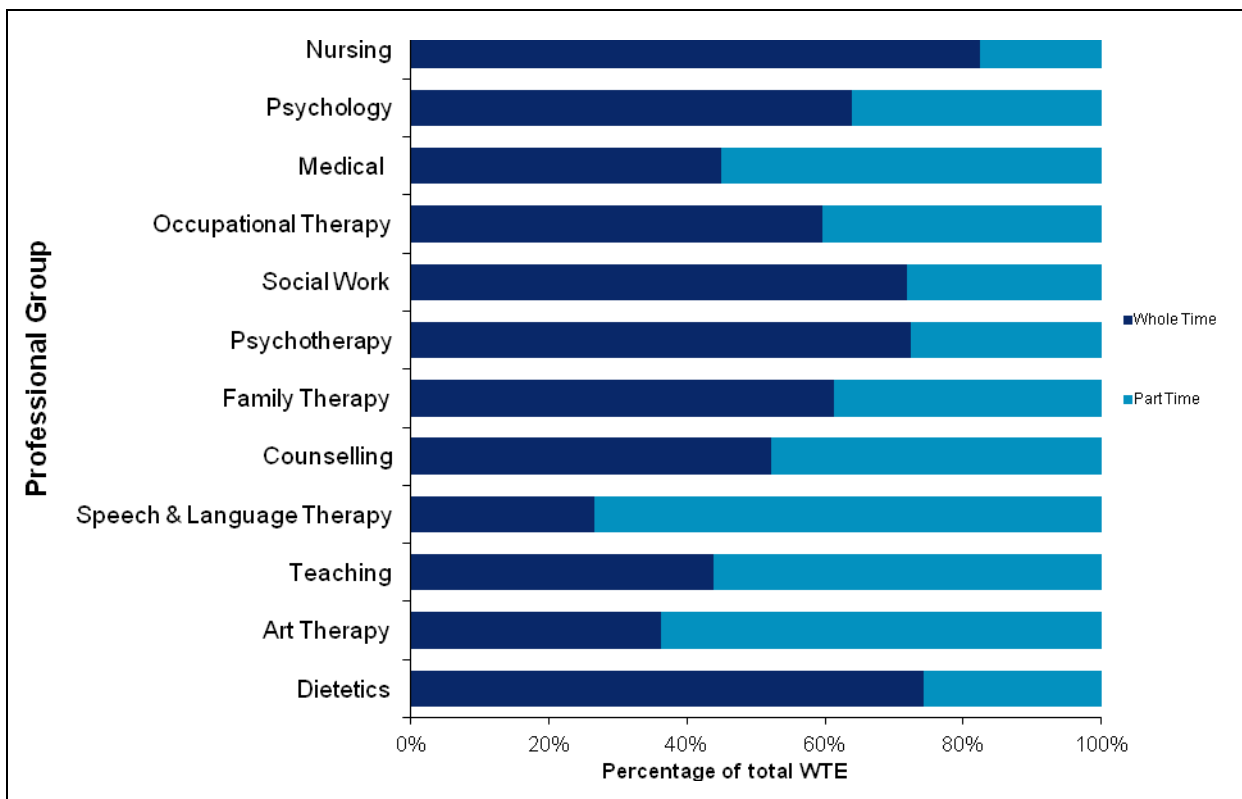


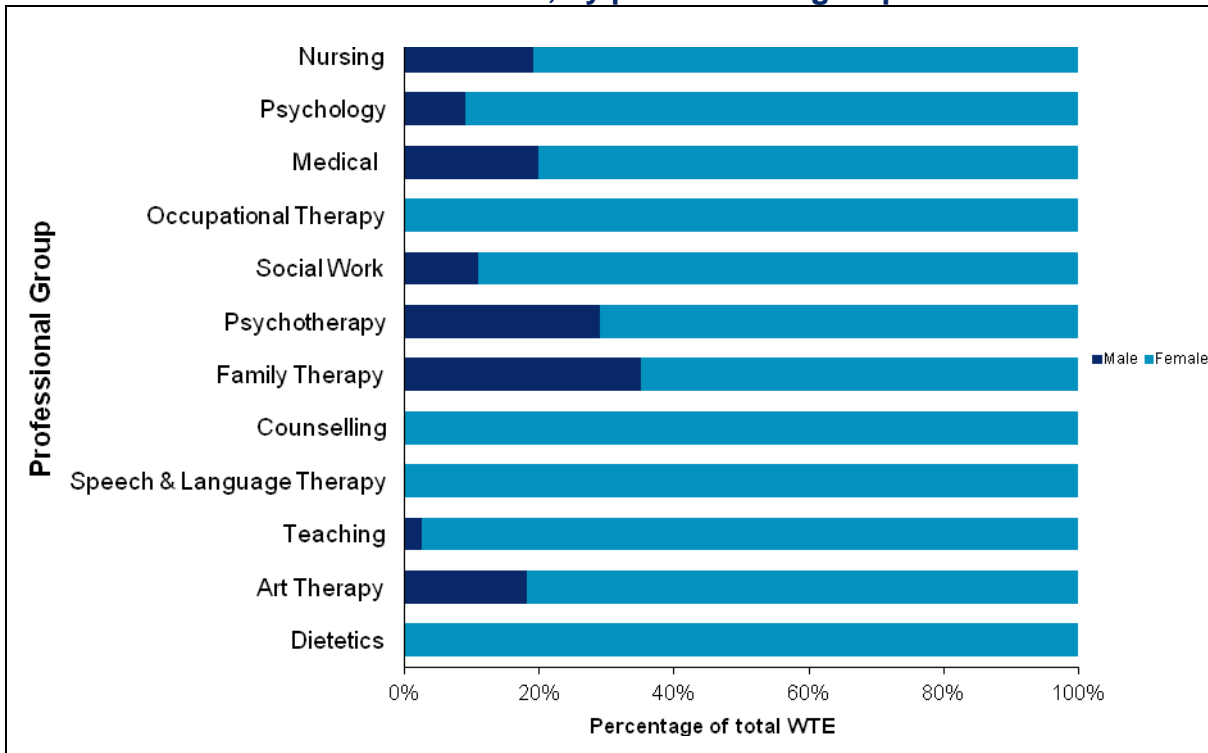
Figure 11: Contract Type of CAMHS Staff within NHS Scotland, as a percentage of total 980.6 WTE, by professional group.



**Physiotherapy, Music Therapy & Education Psychology excluded in the above chart due to being less than 1WTE in total.*

Figure 12 illustrates the gender composition of NHS Scotland CAMHS workforce. As at 31st March 2015 females made up 84% of the staff employed within the service.

Figure 12: Gender Profile of CAMHS Staff within NHS Scotland, as a percentage of total 980.6 WTE, by professional group.



**Physiotherapy, Music Therapy & Education Psychology excluded in the above chart due to being less than 1WTE in total.*

Trainees

- As at 31st March 2015 there were a total of 71 trainees in NHSScotland CAMHS. They included 18 Medical, 33 CAMHS aligned Doctorate in Clinical Psychology, 15 MSc Applied Psychology for Children and Young People and 5 Psychotherapy trainees.

Table 6: NHS Scotland CAMHS Trainees as at 31st March 2015.

	Headcount	WTE
Medical	18	16.6
CAMHS Aligned D Clin Psych	33	33.0
MSc in Applied Psychology for Children & Young People	15	15.0
Psychotherapy	5	5.0
Total Trainees	71	69.6

Additional Information

Changes to recording of staff groups within CAMHS Workforce

It is important to take into account the information in the table below when comparing trends across previous years for the NHS Boards stated. Further explanation is given below.

Table 7: Changes to recording of CAMHS staff groups as at 31st March 2015.

NHS Board	Date Change Implemented	Reason for Change and Impact on the Headcount
NHS Lanarkshire	March 2012	Youth Counsellors now included. Increase of 18
NHS Dumfries and Galloway	April 2012	Substance Misuse Mental Health Workers no longer included. Decrease of 5
NHS Highland	April 2012	CAMHS Primary Mental Health Workers are Highland Council employees, not NHS Scotland. n=11.
NHS Lothian	June 2013	Lothian Paediatric Psychology&Liaison Service (PPALS) workforce are no longer counted under CAMHS. Decrease of 4.
NHS Grampian	March 2013	Health Psychologists previously managed within CAMHS are now managed by Combined Child Health services. Decrease of 5.

NHS Lanarkshire: Additional investment has occurred in NHS Lanarkshire on the back of a planned significant restructure in mental health. Lanarkshire Youth Counselling Service has been brought under the strategic and management control of the CAMH Service in order to align and extend the current service provision to expand the services co-ordinated provision across Tier 2, early intervention services. Youth Counsellors have not previously been recorded in the CAMHS workforce data base but as at March 2012 are now appropriately included with the service re-design and re-organisation. This affects 13.1 WTE staff in Lanarkshire (18 headcount).

NHS Dumfries&Galloway: From 1st April 2012 NHS Dumfries & Galloway CAMHS substance misuse mental health workers (headcount =5) sit within a separate subteam; Child and Adolescent substance service, CASS. Thus a headcount of 5 are no longer included in the data from 1st April 2012.

NHS Highland: NHS Highland is working towards developing an integrated model of health and social care resulting in staff transferring between both organisations. From 1st April 2012, as part of the new Highland Lead Agency structure, CAMHS Primary Mental Health Workers are Highland Council employees, not NHS Scotland.

NHS Lothian: As at 30th June 2013, NHS Lothian CAMHS teaching staff data are not complete. Full data will be available during 2015. From 1st June 2013 some of NHS

Lothian Paediatric Psychology&Liaison Service (PPALS) workforce are no longer counted under CAMHS. This data will be enhanced during 2014.

NHS Grampian: From March 2013 a joint decision has been reached between CAMHS and Combined Child Health Services that 5 Health Psychologists who were previously managed within NHS Grampian CAMHS are now to be managed by NHS Grampian Combined Child Health services. They will therefore not now appear on the CAMHS database.

Age of Service Provision

- NHS Scotland CAMHS vary in the age of population served. In some areas services are provided up to 16 only; while others offer services up to 18 years. This has significant implications for workforce requirements. Please see Table 5 below for details.

Table 8: NHS Scotland CAMHS Service Age Provision as at 31st March 2015 by NHS Board.

NHS Board	Service Age Provision as at 31 st March 2015
Ayrshire & Arran	Up to 18th birthday if still in full time education.
Borders	Up to 18th birthday.
Dumfries & Galloway	Up to 18th birthday, but occasionally beyond. Child Clinical Psychology Service; up to 18th birthday provided in full-time secondary education (not tertiary i.e. not college), up to 16 if not in school.
Fife	Up to 18th birthday.
Forth Valley	Core CAMHS is up to 18th birthday, Learning Disabilities CAMHS is up to 16th birthday.
Grampian	Up to 18th birthday.
Greater Glasgow & Clyde	Up to 18th Birthday across all services.
Highland	Up to 18th birthday if in full-time secondary education otherwise up to age 16 years. Learning Disabilities CAMHS up to 19th birthday provided still in full-time education
Lanarkshire	Tier 3 Child & Family Clinic Teams: up to 16th birthday, up to 18th birthday if referred before 16th birthday or at a point before 18th birthday when it is suitable to discharge them (currently under review). CAMHS Learning Disabilities, Primary Mental Health & CAMHS for Accommodated Young People (CAYP) Teams: up to 18th birthday.
Lothian	Up to 18th Birthday across all areas.
Orkney	Up to 18th birthday.
Shetland	Up to 18th Year if in full time education, and up to 16th Year if not in full time education.
Tayside	Up to 18th birthday provided in full-time secondary education (not tertiary i.e. not college). Learning Disability and Tier 4 services are up to 18years
Western Isles	Up to 18th birthday.

Glossary

Band	Agenda for Change pay band
CAMHS	Child and Adolescent Mental Health Services. Services are provided by teams of clinicians including psychiatrists, mental health nurses, clinical psychologists, child psychotherapists, occupational therapists and other allied health professionals.
NHS GG&C	NHS Greater Glasgow & Clyde
NSS	National Services Scotland
ISD	Information Service Division
NES	NHS Education for Scotland
SLA	Service Level Arrangement
HEAT targets	A set of targets agreed between the Scottish Government and NHS Scotland relating to Health Improvement, Efficiency, Access or Treatment.
WTE	Whole Time Equivalent; adjusts headcount staff to take account of part time staff

List of Tables

Table No.	Name	Time period	File & size
1-11	CAMHS characteristics of the workforce as at 31st March 2015	31 st March 2015	Excel [3,642kb]
1A	Clinical Staff Employed in Scotland CAMHS by Professional Group.	“	-
1B	Trend of Clinical Staff Employed in Scotland CAMHS	“	-
2	Age profile of Clinical Staff employed in Scotland CAMHS by Professional Group (Headcount)	“	-
3	Clinical Staff Employed in Scotland CAMHS by Professional Group, Gender & Contract Type.	“	-
4	Clinical Staff Employed in Scotland CAMHS by Professional Group & Contract Term.	“	-
5	Clinical Staff Employed in Scotland CAMHS by Professional Group & NHS Region & Board	“	-
6	Clinical Staff Employed in Scotland CAMHS by Professional Group & Grade.	“	-
7	Clinical Staff Employed in Scotland CAMHS by Professional Group and Area of Work	“	-
8	Clinical Staff Employed in Scotland CAMHS by Professional Group and Target Age	“	-
9	Clinical Staff Employed in Scotland CAMHS by Declared Ethnic Origin	“	-
10	Posts between being advertised and being filled in the CAMHS Workforce.	“	-
11	Clinical Staff Employed in Scotland CAMHS by Professional Group and Inpatient/Community Working (WTE).	“	-

Please Note: in order to view the tables to full effect, your macro security settings will need to be set to medium. To change macro security settings using Tools, Macro, Security - set security level to Medium and re-open the report.

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Further Information

Further information can be found on the [ISD website](#)

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Appendix

A1 – Background Information

It is estimated that around 10% of children and young people in Scotland have mental health problems that are so significant they impact on their daily lives. [The Scottish Needs Assessment Programme \(SNAP\) Report](#) on Child and Adolescent Mental Health highlighted the importance of Child and Adolescent Mental Health Services (CAMHS) and the need for development of these services within Scotland. In October 2005, the Scottish Executive (Government) published [The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care](#) which set the policy direction and a commitment to developing these services.

The main function of CAMH services is to develop and deliver services for those children and young people (and their parents/carers) who are experiencing the most serious mental health problems. They also have an important role in supporting the mental health capability of the wider network of children's services. CAMH services are usually delivered by teams including psychiatrists, psychologists, nurses, social workers, and others.

Delivery of good quality CAMH services depends on adequate numbers of well trained staff being available for career posts in services across NHS Scotland. In the context of the SNAP report and the emerging shape of the Framework, the Scottish Executive established a CAMH Workforce Group to identify ways in which to build capacity for promotion, prevention, care and treatment within CAMHS. Their report, *The Mental Health of Children and Young People in Scotland: [Getting the Right Workforce, Getting the Workforce Right, A Strategic Review \(2005\)](#)* considered the workforce implications of the Framework and provided a range of proposals about how these might be met.

The Group identified the need for accurate and up to date data about the CAMHS workforce in NHS Scotland, and a web based data collection system was launched in 2005 to capture this information.

The need for expansion and development of the CAMHS workforce has been driven by a series of reports and policy recommendations:

- **Scottish Needs Assessment Programme (SNAP) Report on Child and Adolescent Mental Health (2003)**

This report emphasised that all agencies and organisations have a role in supporting the mental health of children and young people. It highlighted the need to address the whole continuum of mental health - from mental health promotion, through preventing mental illness, to supporting, treating and caring for those children and young people experiencing mental health difficulties of all ranges of complexity and severity.

- **Getting the Workforce Right, Getting the Right Workforce – A Strategic Review of the CAMHS Workforce (2005)**

This work concluded that there is a “significant lack of capacity” in the CAMHS workforce and a need for a substantial expansion if it is to meet the agreed policy objectives. That needs to involve increasing workforce numbers through new investment in posts and improved retention; increased efficiency through training and supervision, better infrastructure and improvements in health in the workplace.

- **The Mental Health of Children and Young People – A Framework for Promotion, Prevention and Care (2006)**

This set out recommendations for implementing the SNAP report. It was designed to be used by local agencies as a planning and audit tool to support their work in identifying goals and milestones for continuous improvement in the delivery of services. The Framework was produced by the Child and Adolescent Mental Health Development Group which was established in 2002 and drew on expertise from the NHS, education, social work and the voluntary sector.

The Framework stated that a phased investment into the CAMHS workforce was needed, with a doubling of the workforce within ten years.

- **CAMHS financial investment (2009)**

Commitment of additional central government funding for CAMHS workforce development (for Tier 4, and for psychology).

From May 2010 the UK Statistics Authority has designated these statistics as National Statistics, signifying compliance with the Code of Practice for Official Statistics. The workforce data was collected and quality checked through engagement with the following organisations and groups: all NHS Scotland CAMHS lead clinicians, CAMHS Workforce Steering Group, Scottish Government CAMHS Core Group and NHS Education for Scotland.

The published staff in post information is used in the first instance by NHS Boards to support local, regional and national workforce planning and reporting. For other uses of the data, see: [Known uses of the CAMHS Workforce Data](#), Word (30KB)

Mental Health Policy and Targets

In addition to the reports and policy cited above, developments in CAMHS mental health care have been driven by the following series of reports and policy recommendations:

The Mental Health Strategy: 2012-2015 (2012) sets the current policy direction and includes a commitment to enhancing the delivery of specialist CAMHS in NHS Scotland. <http://www.gov.scot/Resource/0039/00398762.pdf>

A HEAT target for CAMHS was set in April 2010. The target is that no child or young person will wait longer than 26 weeks from referral to treatment in a specialist CAMHS from March 2013, reducing to 18 weeks from December 2014.

Links to Related Publications

Data on Child and Adolescent Mental Health Services Waiting Times in NHS Scotland are available at:

<http://www.isdscotland.org/Health-Topics/Waiting-Times/Publications/2015-05-26/2015-05-26-CAMHS-Report.pdf>

Data on Psychological Therapies Waiting Times in NHS Scotland are available at:

<http://www.isdscotland.org/Health-Topics/Waiting-Times/Publications/2015-05-26/2015-05-26-WT-PsychTherapies-Report.pdf>

CAMHS Psychology information is also included in the main Psychology publication, available at the following link: <http://www.isdscotland.org/Health-Topics/Workforce/Psychology/>

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	Child and Adolescent Mental Health Services (CAMHS) in NHS Scotland: Characteristics of the Workforce Supply as at 31 st March 2015.
Description	A detailed description of the nature and extent of current CAMHS provision in NHS Scotland as at the 31 st March 2015.
Theme	Health and Social Care
Topic	Health Care Personnel, Finance and Performance
Format	Excel Format
Data source(s)	Child and Adolescent Mental Health Service Workforce Database
Date that data are acquired	Approximately 2 weeks after the census date
Release date	26 th May
Frequency	From 2005-2010 publications were annual, data as at 31 st December. From June 2011 the publication has been released quarterly.
Timeframe of data and timeliness	Data up to 31 st March 2015, normal timeliness for this publication, no delay occurred. Reports data since 2005.
Continuity of data	Data prior to 2007 was presented using Whitley grades. From 2007 onwards, all non medical staff are reported under AfC. The table 'Contract Type & Gender' is a reworking of what was previously 2 separate tables; the data is now only available back to 2008 when previously under the 2 separate tables it was available to 2005.
Revisions statement	N/A
Revisions relevant to this publication	N/A
Concepts and definitions	Please see Welcome Page section of the Excel tables workbook for concepts and definitions
Relevance and key uses of the statistics	Information published is used to support local, regional and national workforce planning. See Known Uses of the CAMHS data for further information. Workforce modelling used in extra funding decision. HEAT Targets: 2009/2010 "NHS Boards to deliver faster access to Child and Adolescent Mental Health Services", see: http://www.scotland.gov.uk/About/Performance/scotPerforms/partnerstories/NHSScotlandperformance/CAMHS18weeks
Accuracy	100% sign off received from CAMHS lead clinicians
Completeness	100% of data returned
Comparability	CAMHS Psychologists can be compared to psychologists providing

	services to an age group of child and/or adolescent in the Psychology Workforce Planning Project: http://www.isdscotland.org/Health-Topics/Workforce/Psychology
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .
Coherence and clarity	All CAMHS tables are accessible via the ISD website at http://www.isdscotland.org/HealthTopics/Workforce/CAMHS/ Data are presented by: Professional group; NHS Board; Ageband; Target Age, contract term, contract type, gender and Agenda for Change bands.
Value type and unit of measurement	Headcount & Whole Time Equivalent (WTE). Numeric.
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	National Statistics
UK Statistics Authority Assessment	Assessed by UK Statistics Authority assessment-report-39---statistics-on-nhs-scotland-workforce.pdf
Last published	24 th February 2015
Next published	25 th August 2015
Date of first publication	2005
Help email	nss.isdwfinfo@nhs.net
Date form completed	05/05/2015

A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access.

Standard Pre-Release Access:

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

A4 – ISD and Official Statistics

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHS Scotland and the Scottish Government and others, responsive to the needs of NHS Scotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

About NES

NES are a Special Health Board, responsible for supporting NHS services delivered to the people of Scotland by developing and delivering education and training for those who work in NHS Scotland.

NES helps to provide better patient care by providing educational solutions for workforce development. This is done by designing, commissioning, quality assuring and where appropriate providing education for NHS Scotland staff.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and

signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.