

7 Minute Briefing: Getting More Help



Culture Change – When to Stop Treatment

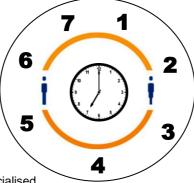
- Staff acknowledging the need to address endings to improve capacity and efficiency in the system and discussing 'endings' from the beginning
- Improve processes for signposting and engaging with 'risk support' to improve practitioner confidence that there is other support available.

Context

The children, young people and families who would benefit from extensive long-term treatment. Some conditions such as psychosis, eating disorders, emerging personality disorders and complex neurodevelopmental needs are likely to require this input.

In Practice

- Establishing a common language across sectors
- Importance of evidence based practice
- Need for high quality outcomes which help to build an evidence base
- Need for more defined interventions rather than open ended treatment
- Better communication across agencies



Provision

Input could involve specialised health workers but more procedurally defined interventions can be provided by less highly trained practitioners from the cross-sector children's workforce than may be needed for the decision making required for Getting Advice and Signposting.

Need

CYP and families who would benefit from extensive longtreatment including inpatient care, but may also include extensive outpatient provision. Some may be currently allocated to this grouping who are not benefiting from intervention and might appropriately be reallocated to Getting Risk Support.

Data

This group makes up 5% of children, young people and their families receiving input, but accounted for 39% of appointments.*

Resource

The THRIVE Framework may result in an average number of outpatient appointments of around 30. However, it is recognised that, for some CYP, individual agreements with commissioners will be needed to arrange payment as the range of costs within the group can be so wide.

Wolpert, M., Harris, R., Hodges, S., Fuggle, P., James, R., Wiener, A., Munk, S. (2019). THRIVE Framework for system change. London: CAMHS Press.

*based on the payment systems project (Wolpert et al., 2015).







