

The Child and Adolescent Mental Health Services (CAMHS) Review

Case study I

The new CAMHS Youth Service

Georgie is 14 years of age and has a background of severe trauma and suffers from anxiety. Georgie also has physical health problems and has been bullied at school, which has led to her refusing to attend, and she is becoming increasingly socially isolated from friends and family. One night, Georgie self-harms and attempts to overdose, and is discovered by her mother. She discloses to her mother that she has been thinking about suicide for several weeks.

Under the current system:

Georgie is admitted to the paediatric ward where she is assessed as having Post Traumatic Stress Disorder (PTSD).

Georgie was discharged home after two days with an appointment made with a new private psychologist. Given Georgie will need regular and consistent support, her discharge plan outlined that she should be followed up by Child and Adolescent Mental Health Services (CAMHS) if she was not able to have regular appointments with her new psychologist.

In the new CAMHS Youth Service:

Georgie is considered to be a young person with severe and complex problems needing a team approach to her care. She is allocated a CAMHS worker who begins assertive care with her at home instead of in hospital. Georgie has a safety plan developed and she is also referred to the After-Care Suicide Response Service.

The CAMHS Youth team work with Georgie and her school to develop a transition plan for her return, and her GP to develop a plan to address her physical health issues, including diet and lifestyle choices.

Georgie's mum is supported by the CAMHS outreach team to build her capacity to manage Georgie's mood swings, suicidality and anxiety.