**Care Pathways in CAMHS**

Care Pathways provide a framework and guide to inform the care and intervention offered to children, young people and families within CAMH services from referral through to discharge.

Care pathways are a resource for referrers, young people, families and service providers to allow an understanding and awareness of what should be expected at any point during the journey of care and provide a further opportunity for collaborative practice. In clinical practice and by service design, many young people and their families will receive sufficient support from only very brief clinical interventions or a single consultation which may not proceed beyond the assessment and formulation stage.

Care pathways within CAMHS ensure that:

- assessment, care planning and care delivery are centred on the child or young person and positive outcome focused
- care and treatment is in line with the available evidence base
- effective case partnerships are developed and sustained between services, agencies, children, young people and their parents / carers
- relevant and useful information is shared appropriately and in a timely manner with children, young people, parents / carers, professionals, services and agencies
- variation to planned care is captured, analysed with supporting narrative and acted upon where appropriate

The development and application of care pathways to underpin service provision and through the outcome data associated with these, Trust Boards, partners and services will be able to demonstrate and deliver robust and responsive CAMH services.

Care pathways promote systems and processes which are:

- fully embedded in a culture that supports the delivery of care, centred on the child or young person
- are safe and effective
- can be applied across services and throughout specialist CAMHS

All Services should have a Service Care Pathway which is made available for service users, their families and carers and to referrers; this should describe the patient journey from the point of referral or access into the service, the initial screening and/or assessment process, any further assessment, intervention or review process and discharge. There may be parallel or linked pathways for

- emergency access (including out of hours)
- urgent and routine access
- specialist teams including primary mental health workers
- in-patient care

Although care pathways for specific problems or interventions provide detailed information and guidance regarding the care and management of young people and families accessing CAMH services,
clinical judgement remains paramount. The experience and knowledge of the CAMH practitioner will always have a bearing on any decisions made with the young person and family regarding the most appropriate treatment or intervention option. Care pathways aim to retain clinical judgement while enhancing clinical outcomes.

Care pathways will normally be built on clinical effectiveness evidence, particularly NICE guidelines. However, many children and young people accessing CAMH services will not have a definitive diagnosis; it is in the emerging nature of young people’s difficulties that such a definitive diagnosis may not be readily available or appropriate. Intervention and the identification of an appropriate care pathway should be guided by a case formulation, (that is, a conceptualisation or account of the presenting difficulties based on an assessment and, drawing together information about the cause and nature of those difficulties). Consequently, interventions may focus on the young person’s context – their family or environment. Modular care pathways, rather than the standard linear pathways as are commonly used in general medicine, allow increased flexibility. A case formulation can draw together such care pathways on the basis of a child or young person’s often complex situation and changing emotional and mental health needs.

The model enables the range of different disciplines in CAMHS to work together to provide packages of care tailored to the needs of the child, young person and family. Care Pathways also facilitate the identification of specific roles with a focus and appropriate training to deliver the pathway most effectively and efficiently.

The use of care pathways enables close monitoring of case progression through the use of routine outcome measuring to ensure that the intervention is facilitating collaborative progression towards the agreed goals of intervention.

There is a growing body of evidence in children’s mental healthcare that using routine outcome monitoring, with adherence to an evidence-based pathway, improves clinical outcomes, results in fewer appointments and reduced recourse to medication and inpatient admission.

The Care Pathway model should be underpinned by training in the relevant evidence based interventions and rigorous supervision in order to ensure appropriate case formulation and assignment to a care pathway and to review and amend interventions as required. There will be occasions when case formulation and review may suggest departure from the indicated clinical care pathway; the basis for this should be part of the clinical record as well as being reflected in collaborative practice.

The use of care pathways will be supported by recording systems which will enable full information to be available to inform stakeholders as to what the service provides, for whom and how effectively.