

National Child and Adolescent Mental Health Service Mapping Exercise 2007: TEAM CASELOAD SHEET

Service name

Team name

Introduction

This questionnaire is to help with the completion of team questionnaire. It is a paper version of the questions asked on the CAMHS mapping website.

Caseload data is collected at the level of teams.

Each active case should be recorded once, irrespective of how often the child is seen or the case considered during the measurement period. This measure is not designed to be a measure of staff workload.

To avoid double counting, where cases are co-worked by different members of the team they should only be counted once.

Similarly, the duration of treatment is how long the team has seen the particular case. If a member of the team has seen a case for one month, but before that the child or young person were seen for six months by another member of the team, the duration of treatment would be seven months.



PLEASE NOTE:

The following questions are about caseload. You can record the total number of cases in the boxes, or you can keep a tally of each case and total them at the end of the month.

Caseload Questions

Caseload data is measured at the level of teams and should include all those cases worked with in the sample period by teams that are included in the mapping. Please read carefully the following definitions.

A 'case' is one child, or one young person, or one child or young person and their family for whom a referral has been received and with whom a CAMHS has been **actively working** within the measurement period. Where two or more siblings have sufficient individual problems to warrant separate referral, they should be counted as separate cases."

Active work includes any of the following activities relating to specific cases: assessment, treatment, case management, case support and health promotion.

Team caseload is defined as the number of cases worked with during the reference period. Each active case should be recorded once, irrespective of how often the child is seen or the case considered during the measurement period. This measure is not designed to be a measure of staff workload.

Data Collection Periods:

- Generic, targeted and dedicated worker teams data collection period is 1st to 30th November 2007.
- Tier 4 team data collection period is 1st June to 30th November 2007.

Please read the final page of the questionnaire for further guidance and definitions on collecting caseload data



Caseload by patch

Local teams are asked to report caseload by patches. A patch is one and only one PCT area, and one and only one social services area. The team has been assigned patches by the Head of Service for the mapping exercise, please ask if you are uncertain what area your team covers. Input cases by these patches and then add any additional cases to an 'external patch'

For teams who are working in a wider than local area catchment area – a team that serves an SHA area, a number of SHAs, or provides a national service – please just enter the total number of cases seen.

Please note that if more than one member of the team is working with a case, the case should only be counted by one member of the team.

Please note, you are not required to report the number of consultations in caseload by patch. The number of cases identified in response to duration of treatment, age, gender, ethnicity, primary presentation and referral source should equate to the total number of cases identified in caseload by patch.

| Patch (PCT for local teams or total for wider than local teams): | Cases seen: |
|------------------------------------------------------------------|-------------|
| | |
| | |
| | |
| | |
| External Patch | |
| Total | |

Number of consultations

In addition to caseload by patch, please report the number of consultations the team carried out in the sample period.

For the purposes of the CAMHS mapping, a consultation requires a specialist CAMHS clinician to provide clinical advice or information for which they can be held accountable. This will usually infer that a record of the consultation will be recorded by at least one party.

Please note, The record of the consultation may be kept by the CAMHS professional, but may equally be kept by the person outside of CAMHS who has asked for the clinical advice or information.

Please note, The consultation should only be counted if it is carried out with regard to someone outside the current team caseload. This could be a consultation regarding someone receiving another CAMH service, or someone outside CAMHS.

Please note, you are not required to enter any further information regarding the case characteristics of consultations. The number of cases identified in response to duration of treatment, age, gender, ethnicity, primary presentation and referral source should equate to the total number of cases identified in caseload by patch.

| | |
|-------------------------|--|
| Number of consultations | |
|-------------------------|--|

Duration of treatment so far

This is measured from the point at which the case was accepted by a team member; in other words at the end of the waiting time.

Please note that if more than one member of the team is working with a case, the case should only be counted once.

| Duration of treatment | Number of cases |
|--------------------------|-----------------|
| <=4 weeks | |
| >4 weeks but <=13 weeks | |
| >13 weeks but <=26 weeks | |
| >26 weeks but <=52 weeks | |
| > 1 year | |
| Total | |

New cases first seen

The duration of the wait is the interval between the date of acceptance of a referral and the date on which the case is first seen. In the case of Did Not Attends (DNA) or cancellations, the wait is from the most recent DNA or cancellation. Please note that if more than one member of the team is working with a case, the case should only be counted once.

| Duration of wait | Number of cases |
|--------------------------|-----------------|
| <=4 weeks | |
| >4 weeks but <=13 weeks | |
| >13 weeks but <=26 weeks | |
| >26 weeks | |
| Total | |

Cases waiting to see the team at the end of the data collection period

Provide the total number of cases waiting to see the team at the end of the data collection period and the duration of their wait to date.

These are the cases which the referral has been received by the team but have yet to be seen. The duration of the wait is from date of acceptance of the referral until the end of the sample period (30th November 2007). In the case of Did Not Attend (DNA) or cancellations, the wait is from the most recent DNA or cancellation.

| Duration of wait | Number of cases |
|--------------------------|-----------------|
| <=4 weeks | |
| >4 weeks but <=13 weeks | |
| >13 weeks but <=26 weeks | |
| >26 weeks | |
| Total | |

Ethnic profile

Provide the ethnic profile of the team caseload worked with in sample period.

If the ethnicity is not known, the young person, or the child's principal carer, should be asked to identify the ethnicity of the child by asking which ethnic group listed best describes him or her. The choice of whether the child/young person or parent should answer depends on whether the child/young person is competent to do so.

Note: The total cases identified here should be the same as the total number of cases identified in the initial caseload question. That is, the total number of cases worked with in the sample period.

| | Male | Female |
|----------------------------------------------------|------|--------|
| White: British | | |
| White: Irish | | |
| White: Any other white background | | |
| Mixed: Mixed white and black Caribbean | | |
| Mixed: Mixed white and black African | | |
| Mixed: Mixed white and Asian | | |
| Mixed: Any other mixed background | | |
| Asian or Asian British: Indian | | |
| Asian or Asian British: Pakistani | | |
| Asian or Asian British: Bangladeshi | | |
| Asian or Asian British: Any other Asian background | | |
| Black or Black British: Caribbean | | |
| Black or Black British: African | | |
| Black or Black British: Any other black background | | |
| Other Ethnic Groups: Chinese | | |
| Other Ethnic Groups: Any other ethnic group | | |
| Not stated | | |
| Total | | |

Age/Gender profile

Provide the age and gender profile of the team caseload worked with in the sample period.

Note: The total cases identified here should be the same as the total number of cases identified in the initial caseload question. That is, the total number of cases worked with in the sample period.

Note: If the case age changes during the sample period, report the age of the case when first worked with in the sample period.

| | Male | Female | Total |
|-------|------|--------|-------|
| 0-4 | | | |
| 5-9 | | | |
| 10-14 | | | |
| 15 | | | |
| 16-18 | | | |
| 19-25 | | | |
| Total | | | |

Presenting problems

Enter the presenting disorders/problems of all cases worked with during the sample period. In recognition of high levels of co-morbidity in children and young people referred to specialist CAMHS teams, you may record more than one presenting disorder or problem for each case.

Please note that if more than one member of the team is working with a case, the case should only be counted once.

| | Number of cases | Normally accepted * |
|-------------------------------------------------|-----------------|---------------------|
| Hyperkinetic disorders / problems ¹ | | |
| Emotional disorders / problems ² | | |
| Conduct disorders / problems ³ | | |
| Eating disorders / problems ⁴ | | |
| Psychotic disorders / problems ⁵ | | |
| Deliberate self harm ⁶ | | |
| Substance abuse ⁷ | | |
| Habit disorders / problems ⁸ | | |
| Autistic spectrum disorders / problems | | |
| Developmental disorders / problems ⁹ | | |
| Other | | |
| Total | | |

1. Includes ADHD and other attention disorders

2. Includes anxiety, depression, phobias, obsessional compulsive disorder, post traumatic stress disorder

3. Includes anti social behaviour, stealing, defiance, fire-setting and aggression

- 4. Includes pre school eating problems, anorexia nervosa and bulimic nervosa
- 5. Includes schizophrenia, manic depressive disorder or drug-induced psychosis
- 6. Includes lacerations and drug and alcohol overdose
- 7. Refers to drug and alcohol misuse
- 8. Includes tics, sleeping problems and soiling
- 9. Refers to delay in acquiring certain skills such as speech, bladder control and social ability

*Place an X against any types of disorder you would not normally accept for treatment.

Special Characteristics

How many cases within the direct caseload were:

| Characteristic | Number of cases seen |
|----------------------------------------------------------------|----------------------|
| Children currently 'looked after' by their local authority | |
| Children in contact with youth offending services in last year | |
| Children with a mental disorder and learning disability | |



Referral sources

Please note that if more than one member of the team is working with a case, the case should only be counted once.

| | |
|-------------------------------------------|--|
| Primary health care | |
| Education ¹ | |
| Social Services | |
| Youth Justice ² | |
| Child Health ³ | |
| Learning disability service | |
| Adult mental health services ⁴ | |
| Voluntary or independent sector | |
| Self referral | |
| Internal referral ⁵ | |
| Other Trust | |
| Total | |

1. Education - includes all schools, educational psychologists, education welfare officers and learning support teachers.
2. Youth Justice - includes youth offending teams, probation services, legal services and courts.
3. Child Health - includes acute and community paediatricians district nurses and school nurses.
4. Adult mental health services - includes community and inpatient adult mental health services.
5. Internal referral - refers to referrals received from another member of the CAMH service e.g. from a tier 2 team member to a tier 3 team member.

Team questionnaire guidance on recording caseload and case characteristic data

It is essential to follow the guidance in the dialogue box on the first page of this questionnaire. To repeat:

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Similarly, the duration of treatment is how long the team has seen the particular case. If a member of the team has seen a case for one month, but before that they were seen for six months by another member of the team, the duration of treatment would be seven months.

Key Caseload Definitions:

A '**case**' is one child, or one young person, or one child or young person and their family for whom a referral has been received and with whom a CAMHS has been **actively working** within the measurement period. Where two or more siblings have sufficient individual problems to warrant separate referral, they should be counted as separate cases."

Active work includes any of the following activities relating to specific cases: assessment, treatment, case management, case support and health promotion.

Team caseload is defined as the number of cases worked with during the reference period. Each active case should be recorded once irrespective of how often the child is seen or the case considered during the measurement period. This measure is not designed to be a measure of staff workload.

In addition to caseload by patch, please report separately the number of consultations the team carried out in the sample period.

Consultation: For the purposes of the CAMHS mapping, a consultation requires a specialist CAMHS clinician to provide clinical advice or information for which they can be held accountable. This will usually infer that a record of the consultation will be recorded by at least one party.

No further details about the individual characteristics of consultation cases are needed.

Data Collection Periods:

- *Generic, targeted and dedicated worker teams data collection period is 1st to 30th November 2007.*
- *Tier 4 team data collection period is 1st June to 30th November 2007.*

Reporting cases in local teams:

If you work in a 'local team' you are asked to report caseload by patches. A patch is one and only one PCT area, and one and only one SSA area. The team has been assigned patches by the Head of Service for the mapping exercise, please ask if you are uncertain what area your team covers. Input cases by these patches and then add any additional cases to an 'external patch'

Reporting cases in wider than local teams and national teams:

For teams who are working in a wider than local area catchment area – a team that serves an SHA area, a number of SHAs, or provides a national service – please just enter the total number of cases seen.

Note: If you are uncertain of the catchment area assigned to your team in the mapping exercise please check with the person who distributed the questionnaire.

Case characteristics:

You are asked to report on five case characteristics: 1) Age, 2) Gender, 3) Ethnicity, 4) Primary Presenting Disorder, and 5) Referral Source of you total caseload in the sample period. The total number of cases you identify in each of five case characteristics questions should be the same as the total number of cases you identified in the original caseload question. New cases and cases waiting (if reported here) refer to a subset of your total caseload or future intake and are unlikely to be the same number as your total caseload.