

Closing the Gap

Shared Decision Making in CAMHS

Project Information Pack

When I feel part of the decisions made in my care, I am more inclined to engage in treatment and less likely to become resentful and fight against them. Even when I don't get what I want, I appreciate being a part of the decision.

Young person with experience of CAMHS service use

WHAT THIS PROJECT IS ABOUT

The CAMHS Evidence Based Practice Unit (EBPU), CAMHS Outcome Research Consortium (CORC) and YoungMinds collaboration is looking for enthusiastic CAMHS teams to work with them on a major new two year quality improvement initiative to promote best outcomes for children and young people in CAMHS.

This is an opportunity for CAMHS services to become involved in a ground-breaking initiative that will test and implement working more closely and collaboratively with children and young people. The focus will be on making use of shared decision making in front-line practice, when the child or young person is the primary person a practitioner is working with. Our aim is to transform the CAMHS experience from one of service user passivity to a situation in which treatment is genuinely agreed in collaboration between children and young people, and their practitioners.

Projects will be launched with four selected teams across England in September 2011, and will run for up to two years. This initiative is funded by the Health Foundation (appendix 1), with support input from Berkshire Consulting and the Office for Public Management (OPM).

WHO THIS INITIATIVE IS FOR

- CAMHS teams providing services within the broadest definition of Child and Adolescent Mental Health Services (CAMHS), i.e., all services provided by all sectors whose main remit is to meet the mental health needs of children and young people
 - * You can be working in any sector e.g. NHS, voluntary sector or independent sector
 - * You can be working with children and young people in any context e.g. the community, in inpatient or outpatient clinics, or in schools
 - * You can be working with young people of any age group, from any community, and with or without learning disabilities, so long as the primary contact is the child or young person
 - * You can be working anywhere in England
- Services interested in applying to join this initiative should put forward proposed project teams of between 4-8 individuals. This can include whoever you feel is most appropriate, but you may want to consider the following groups in terms of their involvement either in the core team or wider networks: front line practitioners, service managers, administrative staff, service users or advocates for service users

WHAT WE MEAN BY SHARED DECISION MAKING

'Shared Decision Making' is an explicit approach that aims to empower children and young people to play an active part in decisions about their care. It focuses on the detail within individual relationships between young service users and their practitioners, and in particular encompasses the following steps:

1. From first contact there is shared exploration of key problems and treatment choices between children, young people and their practitioners
2. Children and young people and their practitioners review options together
3. Information and options are presented in age appropriate ways
4. Conversations around choices are encouraged
5. Decisions are made by children and young people in collaboration with their practitioners and others as relevant, and reviewed and reconsidered as necessary
6. Practitioners, children and young people and others as appropriate review progress and outcomes, for example by using an appropriate progress monitoring tool, and make decisions together in the light of this

OUR VISION

This 'Closing the Gap: Shared Decision Making in CAMHS' initiative seeks to improve quality in terms of effectiveness, efficiency and person-centeredness – specifically resulting in lower drop-out rates, more positive outcomes compared to baseline data, faster improvement, more use of effective interventions, and better satisfaction among those using the services. For supplementary detail on original rationale behind this initiative, please refer to appendix 2 (non-essential reading).

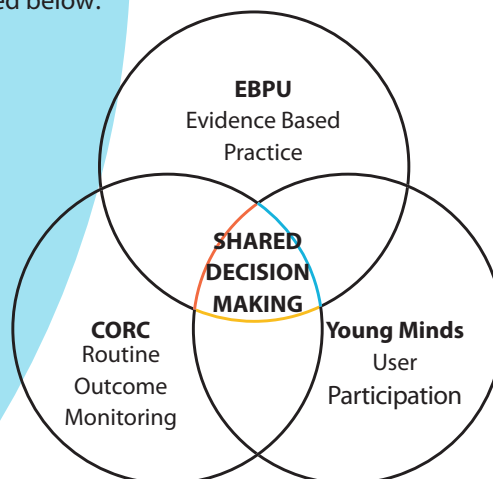
We want to make shared decision making a reality and not a tick box exercise. We are still developing ideas about what this might mean in practical terms, and are keen to work with selected CAMHS services to develop a more articulated model and learn together about definitions and implementation. However, our current thoughts on how every-day practice may transform for project teams include:

- Concentrating on the detail of the interaction between individual practitioner and the child or young person, to help make shared decision making a reality
- Talking with young service users in different ways, empowering them to play an active role during consultations
- Increased ability to share the evidence base with young service users, drawing on a range of information modalities, e.g., different booklets and websites, to help them make informed decisions about their treatment choices
- Increased practitioner confidence in talking about interventions that may not be readily available at their services
- Experimenting with a range of tools that support ongoing review of a young service user's progress in relation to a specific episode of care, in collaboration with them
- Capturing and sharing key learning more widely between all project teams selected to participate in this initiative

Our initiative also aims for shared decision making between the central project team and project sites. We aim to learn together and from each other.

HOW THIS INITIATIVE FITS INTO THE CAMHS LANDSCAPE

'Shared Decision Making in CAMHS' brings together elements of evidence based practice, user participation, and routine outcome monitoring, with shared decision making at the very heart of practice. These principles have been brought together through collaboration between our organisations, as illustrated below:



Our initiative is also aligned with and is consistent with principles from:

- Department of Health's 'You're Welcome' quality criteria for making services more young person friendly http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_073586
- Choice And Partnership Approach (CAPA) <http://www.camhsnetwork.co.uk>
- IAPT (Increasing Access to Psychological Therapies) for Children and Young People <http://www.iapt.nhs.uk/news/meeting-under-18s-specific-needs> (as per published emerging thinking)

However CAMHS services do not need to be specifically using these approaches (or be considering to apply to use them) to be eligible to apply to join our project.

WHAT SUPPORT YOU WILL RECEIVE

CAMHS teams selected to take part in this initiative will receive ongoing on-the-ground help and support from the central project team throughout their involvement in the project (2011-2013), to test and implement sustainable changes that directly benefit service-users and front-line staff. Teams will also be offered a range of training modules, materials and approaches from which to choose from as they see fit, in support of individual project endeavours.

Support to sites will include:

- **Guidance and support** from one of our improvement facilitators, including commitment to coming in to your place of work at times that suit you to minimise the administrative burden of this project and disruption to your routine clinics
- Access to the wider central project team through **phone and email consultations**
- **Training modules** - in current models of quality improvement, shared decision making, and routine outcome monitoring and how to use these to support effective practice
- A range of **materials and approaches** – including (to list but a few!): interactive web materials, hard-copy booklets, role play opportunities, and input from young people about their experiences
- The opportunity to participate in **action learning sets**, at your place of work, to help develop and reinforce best practice (once every other month)
- The opportunity to become **part of a network** of other project teams across England
- The opportunity to **become potential trainers** of others in this approach

WHAT WE WILL NEED YOU TO COMMIT TO

If you are selected to be a project site, you will only be required to make the following four commitments; that your team will:

1. Trial ways of sharing decision making with children and young people
2. Share your learning on this by means of interviews with the central project team and OPM, and action learning set attendance (see below)
3. Attend a limited number of project related events, to include as a minimum: project launch day and half day action learning sets (will be held every other month, i.e., 10 across 2011-2013). These will be arranged in negotiation with you and at times and locations to suit you are not all members of the team need to attend all of these events
4. Agree to give the central project team access to any improvement data (as agreed upfront) for the purposes of this project, and identify someone within your team who will support this process, if required

HOW WE WILL SELECT TEAMS TO BE INVOLVED

The selection process for interested teams will be based upon information supplied in completed application forms, and interviews for all those short-listed.

Applications will be considered by the steering group for the project and short listed against the following criteria:

1. Ability of team to function as a learning group
2. Motivation and capacity to implement shared decision making
3. Motivation and capacity to use progress monitoring (routine outcome monitoring) as part of shared decision making
4. Motivation and capacity to share learning with others
5. Ability to meaningfully engage with service users
6. Support from management within the wider organisation

We will also judge applications based on the ability of your team to contribute to spread of services across England and in terms of populations served and types of provision offered. You do not need to be doing 'shared decision making' currently.

APPLICATION PROCESS

If you are interested in applying to be one of our project sites, please discuss your application with the local management team within your wider organisation.

Completed application forms should be returned by email to Jasmine Hoffman, Project Manager for this project (jasmine.hoffman@annafreud.org), by 10am on Friday 1st July 2011. All interested teams will be notified of the outcome of their application on Friday 8th July 2011.

For those teams that are short-listed for interview, we propose holding these at your place at work on fixed dates between 15th July and 22nd July 2011, as detailed in the next section. Final selected project teams will be notified on Friday 5th August 2011.

KEY DATES FOR YOUR DIARY

Please take note of the following key dates for the application process and project launch. There will be some opportunity on the application form to let us know your availability to attend fixed events, including applicant interviews and the project launch and learning day.

Closing date for applications from interested CAMHS teams	10am, Friday 1st July 2011
Teams notified of the outcome of their applications	Friday 8th July 2011
Selection of dates that interviews will be held, arranged in collaboration with the central project team	15th, 18th, 19th, 21st and 22nd July 2011
Final selected services notified of outcome	Friday 5th August 2011
Project Launch and Learning event	Thursday, 15 September 2011

KEY CONTACT PERSON

If you have any further questions, do not hesitate to email Jasmine.hoffman@annafreud.org, who will be more than happy to assist with your enquiry.

