

# A large-scale project to deliver interconnected digital mental health assessments and therapy alongside face to face CAMHS services.

## Introduction

There is increasing recognition of the potential role for online mental health services. This poster reports on the first 18 months of a five-year partnership providing an internet-based assessment and therapy service via the Healios online portal to complement the traditional face to face CAMHS service in a large English mental health trust. Healios services are commissioned by the NHS and are free at the point of delivery.

## Objectives

This poster provides an initial analysis of the interconnected digital assessments and therapy delivered via the Healios online portal.

## Method

An audit of referral rates, outcomes and service user satisfaction was undertaken.

## Results

### Referrals

- 655 C&YP aged 5-18 (mean 12 years) & their families were referred. 96% were accepted and 4% were declined.

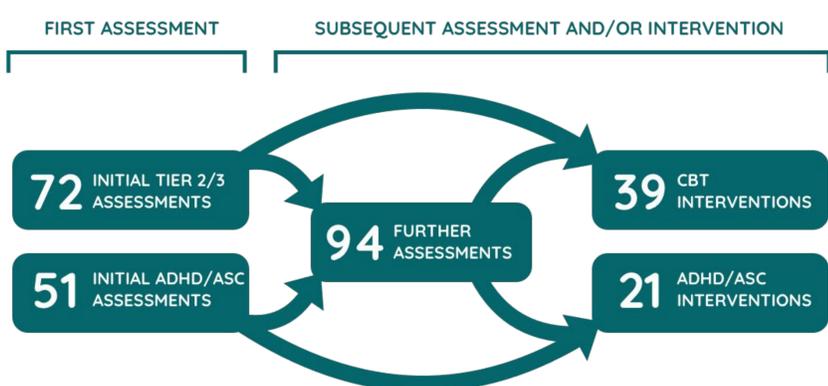
### Service lines (assessments and interventions)

- The 630 accepted C&YP were allocated to receive a total of 788 services (main contract 405; waiting list 383)
- 501 C&YP received 1 service; 85 received 2; 35 received 3; and 3 received 4 services (see Fig.1 for details)
- Assessments provided: 124 ASC (Autism Spectrum Conditions); 107 Tier 3 & 91 ADHD.
- Interventions provided: 401 CBT, 49 ASC & 16 ADHD post diagnostic interventions.

### Service Evaluation Experience and Outcomes

- 51% of sessions took place from 4pm onwards; most popular time 5-6pm.
- 92% of the 70 parents who completed the ESQ said that "The times of the sessions fitted in well with my/my child's day."
- Session Rating Scales (N=1,549) average total rating of 36 out of 40; achieving the CORC target.
- Goal Achievement average improvement of 3.5 points (3.6-7.1) on the 0-10 scale; NHSE 'reliable improvement'.
- 97% of 70 parents & 88% of 65 CYP who completed the FFT would recommend this service to family or friends

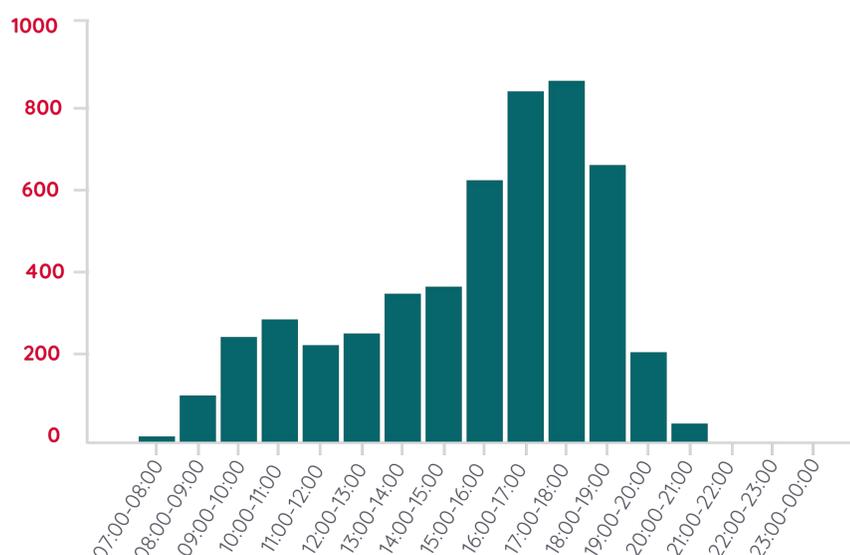
**Figure 1: Pathways for Multiple Referrals**



## Discussion

Some families did not wish to accept the earliest appointment offered to them (due to other commitments) but the majority opted for appointments at 4pm onwards, with most popular range between 3pm-7pm to fit around lifestyle issues and not needing to take the child out of school. This should be considered in future NHS service redesign initiatives.

**Figure 2: Distribution of sessions by time of day**



## Conclusions

Feedback from children & young people and families indicates that online mental health services effectively complement NHS mental health services. They are the treatment of choice for many young people and are valued by C&YP and their families. When required, C&YP/Parents like to receive multiple services online.

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