Crisis responses for children and young people: A mixed methods systematic review of effectiveness, experiences and service organisation (CAMH-Crisis)

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Department of Health and Social Care disclaimer

- The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health and Social Care
Background

- In 2020 one in six children aged 5-19 in England had a probable diagnosable mental disorder

- Increasing numbers of CYP are seeking help, or having help sought on their behalf, during mental health crises

- Crisis care for CYP is a UK and international policy priority

- Options for CYP in crisis include clinical services (e.g., child and adolescent mental health teams, crisis teams, emergency departments) and non-clinical alternatives (e.g., school counseling, youth services, internet-based counseling)
Background

- Growing investment in community crisis teams aiming to deliver care in proximity to individuals' homes and minimise the necessity for hospitalization

- Different forms of crisis support from health, education, social care and third sector are available for CYP

- However, little is known about how these different services are organised or experienced, whether they are effective, or how they are integrated within their local system contexts
Aims & Objectives

We aimed to investigate the evidence underpinning crisis responses for children and young people aged 5 to 25 years

Specific objectives were to:

◦ Investigate the organisation of crisis services across education, health, social care and the third sector

◦ Investigate the experiences and perceptions of young people, families and staff with regards using and working in these services

◦ Determine the effectiveness of current models of mental health crisis support for children and young people

◦ Determine the goals of crisis interventions
Defining ‘crisis’

Building on the definition used in the Cochrane review of crisis services for adults, we defined a crisis response for CYP as:

The provision of a service in response to extreme psychosocial distress, which for children and young people may be provided in any location such as an emergency department, a specialist or non-specialist community service, a school, a college, a university, a youth group, or via a crisis support line

This may also include inpatient hospital services
Methods

- EPPI Centre methods
- The protocol for this project is registered with PROSPERO
- English language international evidence from 1995 to 2021
- Comprehensive searches were conducted across 17 databases, and supplementary searching was undertaken to identify UK only grey literature
- A separate analysis was conducted for each objective
- Confidence in research findings was assessed using the GRADE and GRADE-CERQual approaches where appropriate
Results of database searching

- 58,025 records retrieved
- 22,857 after duplicates removed
- 22,621 irrelevant records removed on title and abstract
- 236 full text articles screened

138 reports were used to inform this evidence synthesis

- 48 reports covering 42 primary research studies
- 36 reports covering 39 descriptive accounts of the organisation services
- 54 UK only policy, guidelines and other non-research material
Organisation of crisis services

We found crisis services organised in these three ways:

- **Triage/assessment approaches**
  - include responses to CYP presenting in times of crisis to EDs, educational settings, telephone triage and to out-of-hours psychiatric emergency services

- **Digitally mediated support approaches**
  - are facilitated through telephone and/or text-based responses or online technology

- **Intervention approaches and models**
  - range from treatment that is started in the ED then moved to outpatient services, inpatient care through hospitals or residential treatment centres, home-based programmes
Experiences of crisis services

Four themes were identified:

- Barriers and facilitators to seeking and accessing appropriate support
- What CYP want from crisis services
- Children’s, young people’s, and families’ experiences of crisis services
- Service provision

27 synthesis findings were generated, of which only 2 were judged as having a high degree of confidence using the CERQual approach:

- These were centred around the need for different forms of support and pathways to services
- Included support via telephone (via a direct line, with out of hours availability and staffed by trained counsellors) as well as via text and email
Effectiveness of current models

- The majority of this evidence was of moderate to very low quality
- A significant number of studies were located within emergency departments
- The international evidence showed that such approaches are effective and acceptable for CYP experiencing crisis
- School, community, and home-based crisis programmes may also lead to positive outcomes for CYP
Goals of crisis intervention

Seven distinct goals of crisis services were described across the included literature:

1. to keep children and young people in their home environment as an alternative to admission
2. to assess need and to plan
3. to improve children and young people’s and/or their families engagement with community treatment
4. to link children and young people and/or their families to additional mental health services as necessary
5. to provide peer support
6. to stabilise and manage the present crisis, over the immediate period,
7. to train and/or supervise staff
Conclusions

- CYP and families do not always know how to access services, and may then find themselves not eligible.
- Text, phone and online crisis provision are welcomed.
- CYP would like access to peers or age-appropriate out-of-hours services.
- Attendance at an emergency department was the default service given the lack of alternatives and this is experienced as stressful.
- There is evidence that care in emergency departments is effective, but this is not policy preference in the UK.
Publications


What’s next

Crisis care for children and young people with mental health problems: national mapping, models of delivery, sustainability and experience (CAMH-Crisis2)

This project aims to explore the types of mental health crisis services currently available to children and young people up to the age of 25 in England and Wales, and to examine how they are organised, perceived and integrated within other local care systems.

Survey link:

CAMH-Crisis2 is funded by the National Institute for Health and Care Research (NIHR) Health and Social Care Delivery Research programme (project number 151811)
Thank you for listening

If you have any questions or comments on this presentation please contact us directly and we will respond as soon as we can

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