

# National Assembly for Wales

## Children, Young People and Education Committee

### CAM 27

#### Inquiry into Child and Adolescent Mental Health Services (CAMHS)

#### Evidence from : Torfaen Flying Start Service

The following response is a group response from the multi-disciplinary Torfaen Flying Start Service which consists on midwives, health visitors, nursery nurses, a speech and language therapist and a clinical psychologist. The service provides support for families of children under 4 years of age within specific disadvantaged areas in Torfaen. Given the service's focus on early intervention in the early years, and the related significant evidence supporting the long term financial, social and well-being outcomes of such services, I shall focus on the first two areas of work addressed in the enquiry.

#### **1. The availability of early intervention services for children and adolescents with mental health problems:**

In this response I refer to early intervention services in the sense of services offered within the early formative years of a child's life which are so critical to all aspects of later development.

Within Gwent there are no early intervention services within CAMHS and referrals tend not to be accepted until children are at least 6 years of age. This is in part due to a lack of understanding and skills in relation to working with under 5's. There is also an expectation that any emotional or behavioural difficulties experienced by pre-school children will be addressed by health visitors. While health visitors are able to offer advice and support for more straightforward childhood difficulties they do not have the therapeutic training or skills to support some of the complex attachment related difficulties which children of this age often present with.

There are Flying Start services within several areas in Gwent which provide enhanced support to children in the most disadvantaged areas, however these services are only available to specific populations and Flying Start is not available in all areas. Monmouthshire and Torfaen Flying Start services both employ professionals skilled and experienced in working with children and families experiencing emotional and behavioural difficulties (2 days psychotherapist in Monmouthshire, 2.5 days clinical psychologist in Torfaen). These services are considered invaluable for supporting Flying Start children and families with mental health difficulties but the service is stretched and there is no equivalent service available at a specialist Tier 2 level or in non-flying start areas. Other Flying Start areas within Gwent do not employ any specialist child and family mental health workers.

Monmouthshire also offer a valuable and innovative early intervention service for 0-3's based on a Watch, Wait and Wonder approach which has been evidenced to be effective in working with this age group.

Primary Care Mental Health Workers within Gwent do not work with children under 5 years of age and professionals within Torfaen Flying Start had a very limited knowledge of the referral criteria or interventions provided by this service. They were unaware of changes which have resulted in these services as a result of the Mental Health Measure.



## 2. Access to community specialist CAMHS at tier 2 and above for children and adolescents with mental health problems, including access to psychological therapies:

On consultation with professionals within Torfaen Flying Start I was disappointed but not surprised to hear that they no longer attempted to refer children with severe emotional or behavioural difficulties to tier 2 CAMHS as referrals for under 5's have so routinely been rejected in the past. They would refer these families to the clinical psychologist within the team. Given the limited clinical psychology resource much of this resource is focused on service development, training, upskilling the workforce and consultation. The limited amount of available direct clinical work is insufficient to meet the needs of these children. Health Visitors reported that generic health visiting colleagues have similar difficulties referring children under 5 with complex difficulties to Tier 2 CAMHS and have no equivalent clinical psychology service available so those children under generic health visiting have no access to any specialist mental health interventions. CAMHS will generally not accept referrals for these children until they are at least 6 years of age by which time problems are likely to have become entrenched and severe.

The Speech and Language Therapist based within Flying Start shared the opinion that she would not refer children under 5 to CAMHS as she was aware they would not be seen. Within her generic role in Community Child Speech and Language Therapy Service working with school aged children she had the following experiences of CAMHS:

- Referral criteria and process is unclear and inconsistent
- Long waiting list means that services are not available when they are needed
- Unlikely to refer directly to CAMHS unless in exceptional circumstances and only if children are over 7/8 years old.
- Pollards Well has been a useful diagnostic resource for those children who are query ASD
- When children have been known to specialist SLT service and CAMHS, there has been minimal liaison between services (SLT often not made aware that the child is known to CAMHS).

Together for Mental Health emphasises the importance of early intervention and the Allen Report (<https://www.gov.uk/government/publications/early-intervention-smart-investment-massive-savings>) and The Wave report ('Conception to age 2 : The age of opportunity', <http://www.wavetrust.org/key-publications/reports/conception-to-age-2>) evidence the long term benefits of working with children in the early years both in terms of effectiveness and cost efficiency of services and long term outcomes for individual children and society as a whole. I have attached a thorough summary of the rationale and evidence base for early intervention services authored by Robin Balbernie, clinical director of Parent Infant Partnership UK.

Several areas within the UK have recognised the social and economic benefits of investing in early intervention and have developed specialised early intervention services for under 5s. Such services have attachment relationships at their core as this is the foundation for all subsequent emotional, behavioural and cognitive development. Where such services exist there have been significant positive outcomes for individual families and in terms of reducing strain on generic CAMHS services. I feel that a similar service in the Gwent area would need to be developed outwith specialist CAMHS as it does not currently have the necessary motivation, understanding or skills to work with this population. The Parent Infant Partnership UK (<http://www.pipuk.org.uk/SetupaPIP/HowtasetupaPIP.aspx>) are currently offering matched funding to implement the development of specialised early intervention services and I believe such services would be invaluable to the emotional and mental health of children within Wales

as well as offering wider social and financial benefits. Certainly within Gwent we have a small but dedicated and motivated number of professionals who are working to improve delivery of early intervention services to children within Wales.

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