National Assembly for Wales

Children, Young People and Education Committee

CAM 28

Inquiry into Child and Adolescent Mental Health Services (CAMHS)

Evidence from : Prospects for Young People

I make this response on behalf of Prospects for Young People but have also consulted with a number of other residential child care providers in Wales who are part of the Care Forum Wales – Looked After Children Network. In addition I have also passed this on to our Clinical partners 'Changing Minds' who provide clinical psychological support to our organisation who I understand, will make a response through the British Psychological Society which I hope will add further to the other responses you receive.

Our response is ordered in accordance with the areas identified in the letter of Ann Jones, AM, Committee Chair dated 24 January 2014.

• Availability of early intervention services

Overall it is felt that this has improved over recent years. In the past there had been issues characterised by long waiting lists; an unclear eligibility criteria and a limited level engagement with the residential child care sector. There had also been issues with the provision of services for children/young people who were placed out of area.

However, recent experience over the last 18 months/2 years has been positive with regular consultancy offered to young people as well as staff teams who have also received valuable support through consultation and training which has increased the level of effectiveness in the work they undertake with children and young people.

Access to community specialist CAMHS after 2 and above

Our experience has again been positive with other professionals e.g. FACTS teams, working together with CAMHS to assess a young person's mental health needs and if this assessment subsequently identified a further or on-going need for additional support which have been made available promptly supported by a good level of communication.

• The extent to which CAMHS are embedded with broader health and social care services

Again this appears to have improved with a greater sense of CAMHS working in an integrated way with other services within the context of health and social services as reflected in regular Multi-Disciplinary Meetings taking place. As such providers feel there is a good sense of working together with the CAHMS service being aware of any specific therapeutic programmes being supported by the provider. These

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meetings include social services; us as the service provider/placement for the young person; CAMHS and the Youth Offending Service (where applicable).

• Whether CAMHS is given sufficient priority within broader mental health and Social Care Services.

From our experience in terms of service delivery sufficient priority is given to CAMHS taking a lead and providing weekly therapy sessions to young people.

Whether there is significant regional variety in access to CAMHS across Wales.

Other providers across Wales report a generally improved level of service and accessibility to these services. However, it is evident that if providers can develop good and strong working relationships with the service local to them this can improve access and reduce potential delays and waiting times.

• The effectiveness of the arrangements for children and young people with mental health problems who need emergency services.

CAMHS have been particularly responsive to children and young people in crisis e.g. admitted to hospital following an overdose or an instance of self harming. There is a willingness to follow up on issues even if a child/young person has not previously had any involvement with the service. Follow up appointments are made quickly with good timescales for meetings with CAHMS staff including psychiatrist. This is considered to be effective and an approach that can inform and influence further and on-going work.

• The extent which current provision of CAMHS is promoting Safeguarding, Children's Rights and engagement of children and young people.

Again, our experience suggests that CAMHS does contribute to safeguarding and the promotion of children rights. CAMHS have been proactive in supporting a young person who originally agreed to attend sessions, but later changed her mind, by visiting her "at home" (i.e. the placement) to reassure her and support her engagement. Young people are seen as being central to the service provided.

Any Other Key Issues

Resources have been made available for children/young people to meet their assessed needs. Overall the picture is much improved and reflects a greater sense of working together and I get the sense that the service is valued. However, many providers will also supplement what may be available from the service by engaging their own therapists and psychologists.

Stephen Elliott

Co-Director/Chair Care Forum – Looked After Children Network