

# Report of the Assistant Director (Children's Specialist Services) to the Meeting of the Corporate Parenting Panel to be held on 10 September 2014.

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**Subject:** Child and Adolescent Mental Health Services (CAMHS) to Looked After Children

# **Summary statement:**

This paper has been requested by the Corporate Parenting Panel to update the November 2013 report in relation to the help available for Looked After Children to support their emotional wellbeing.

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## 1. Summary

1.1 This paper has been requested by the Corporate Parenting Panel to update the November 2013 report in relation to the help available for Looked After Children to support their emotional wellbeing.

#### 2. Background

- 2.1 The paper tabled in November 2013 gave a context of good mental health for children and young people being everyone's business with the district's Healthy Minds Strategy.
- 2.2 The information shared was in relation to listening to the views of the children and young people and the staff within the children's homes as well as looking to the overall view of support to Looked After Children in the Bradford District.
- 2.3 The services that continues to provide Child & Adolescent Mental Health Service (CAMHS) and behaviour support to 'Looked After Children' is now being regularly reviewed at discussed as part of a number of forums and service delivery is changing as a result of these consultations.
- 2.4 The numbers of children and young people coming in to the care system is not decreasing and the severity of need and complexity of young people's behaviour remains high and challenging.
- 2.5 Children and young people who enter the care system have, in the main, been subject to prolonged and intense factors that will have destabilised their ability to function. To consider the needs of this small group of children, within the mass of the needs of the many, services must start as soon as possible to identify and support them in universal settings, such as schools, before they enter the care system.
- 2.6 How services identify and support these young people within universal services who might then become Looked After children is critical. Some children on entry to the care system already have therapy in place and this is maintained as fully as possible whilst in the care setting.
- 2.7 Young people in care are often not stable enough to begin therapies, whereby behaviour would deteriorate even further on introduction of a therapeutic approach, there is a need to develop a 'therapy ready' approach ensuring that workers and young people are moving towards positive interventions at every step of interaction.
- 2.8 Our CAMHS service has a very clear criteria in relation to the services it provides, in relation to diagnosed groups presenting persistent and significant, eating disorders, mood swings, self harm, suicide risk .
- 2.9 Those with clearer identified needs such as self harm, suicide risks are managed well with options for a more secure environment should this be necessary. There needs to be thought given to a more local solution to 'secure' as often the transition back to Bradford can be impeded by the distance and makes rehabilitation difficult.
- 2.10 Concerns were raised via counsellor visits from children homes staff not being satisfied with the services they received from CAMHS in relation to consultation

and access to training to cover the afore mentioned points and as a result the following action has taken place.

#### 2.11 Consultation to children's homes

The consultation model to the children's homes has been re-established in relation to the needs of the children and young people and the staff that are caring for them. The model is one of reflection which works well for mature staff groups who can understand that this model is to assist staff (who often know the children and young people best) to work through their difficulties together.

The feedback from the homes varies and is summarised below:

#### **Positives**

- The sessions are delivered monthly for disabilities and very successful.
- They offer opportunity for staff to be listened to explore the staff feelings regarding behaviours and practice.
- Confirmation of practice which is positive for staff.
- Staff seem to be relaxed and able to share their own feeling and analysis and use this to support their work.
- Sessions enable staff to look at how staff manage their feelings.
- Used the session to explore issues with individual young people.
- Staff feel the support has benefitted their service delivery.
- Sessions challenged approaches and encouraged staff to explore own practice.
- Utilise the sessions to look at individual young people, impact of dynamic changes.
- The sessions are valued and staff would like to extend the service delivered.

#### **Areas for Improvement**

- Team consultation not effective would be more effective if there were regular professional meetings with CAMHS.
- Lack of awareness of the service delivery by both CAMHS & Residential which impacts on perceptions of practice.
- Mixed views of consultation sessions with staff feel the sessions are unhelpful.
- Staff reluctant to engage but will explore issues.
- Staff feel there is stigma attached to consultation sessions which can inhibit engagement in sessions.

- Staff can feel the sessions are challenging (personally) with staff being apprehensive that sessions are to analysis staff and this can be a barrier to staff utilising the sessions.
- Consultation sessions lack direction / focus leading to general discussion with no meaningful outcomes.
- A preference for more practical strategies to better support young people.
- Requests for training within the sessions.
- No consultation session at one Unit for over a year due to the CAMHS consultants being related/ linked to a young person in the home – conflict of interests.

Each of these responses will be shared with our CAMHS colleagues so that we can continue to work to support the staff teams to work to provide the best possible care within the children's homes.

In addition to this, focused work has taken place on:

#### 2.12 Consultation to LAC social workers

- CAMHS are currently working on a training package which will include play therapy to children home staff.
- Staff are being trained in order for them to roll out the model of support for working with difficult teenagers.
- Look at the use of video and the introduction of a programme to address interpersonal and parenting.

## 2.13 Adoption and Fostering

The adoption model has been working well and this model now needs replicating in Fostering. Meetings have started to take place with CAMHS representatives and the new manager of Fostering to look at a tiered model of interventions.

#### 3. Actions

- 3.1 To ensure universal services have a consistent and appropriate model for ensuring emotional well being at the earliest possible point in a child's life, as this has been proved to be the most effective time for interventions. This will link into the early help strategy and ensuring services are responsive to needs in relation to emotional well being and behaviour.
- 3.2 Work within school has been undertaken in the form of 'Tic Tac's' in some schools to identify and support students who are struggling with their emotional well being, This is being undertaken jointly by the commissioners in Health and Children's Services.
- 3.3 This is an effective model but not all schools deliver this model of support and agreements need to be made to ensure that all schools have an agreed mechanism for the identification, support and risk management of children who have mental health difficulties. This is also part of the commissioning process

looking at the role of TAMHS, primary mental health workers in delivering evidence based practise within schools for early help.

- 3.4 Other universal settings must provide training and support to staff to ensure they too are able to identify and support children's emotional well being. Training is being reviewed in light of pathways of support for attachment, parenting and behaviour.
- 3.5 Resilience of child, their family and community is key to ensuring good mental health and also identifying those children and young people at an earlier stage in their life who might need greater support. A model of resilience building is being supported through the early help agenda in early years and childcare services
- 3.6 Children and young people who enter the care system have, in the main, been subject to prolonged and intense factors that will have destabilised their ability to function. To consider the needs of this small group of children, with in the mass of the needs of the many, services must start as soon as possible to identify and support them in universal settings before they enter the care system. The LAC be healthy team have been working with us to look at re focusing their remit on assessing children and young people as they enter the care system as to the type of intervention they will need and provide a pathway of interventions.
- 3.7 We have been reviewing the consultation offered to social workers to try to expand and support them wider than the CAMHS agreement to include education psychology staff and behaviour teams staff, this will be delivered via a trusted adult model.

## 4. Options

- 4.1 For Children's Specialist Services to work closely with CAMHS to improve the consultation service, taking into consideration the views of staff and the Children in Care Council.
- 4.2 To continue to identify a transparent model of support to all LAC services including; children homes, fostering, adoption and to those children who may be at risk of entering the care system due to behaviour, attachment or parenting issues.

#### 5. Financial and Resource Appraisal

5.1 To continue to work with allocated budgets and partnership working to enhance effectiveness and efficiency of service provision.

#### 6. Legal Appraisal

6.1 All Preventative Services fulfil the Local Authorities duty under section 17 Children Act 1989, to safeguard and promote the welfare of children in need, and, so far as is consistent with that duty, to promote their upbringing by their families.

## 7. Other Implications

None.

## 7.1 Equal Rights

None all services work within equal rights legislation

## 7.2 Sustainability implications

That the service continues to work in partnership to make best use of resources in times of austerity.

# 7.3 Community safety implications

The Healthy Minds Strategy encompasses principles of mental health being everyone business and in order to maintain emotional well being for our LAC children it is essential that we have a range of options and start with early help principles as soon as possible

# 7.4 Human Rights Act

All Services work within Human Rights legislation

## 7.5 **Trade Unions**

None.

#### 7.6 Not for Publication Documents

None.

## 8. Recommendations

8.1 The report is noted and CAMHS service continues to work in partnership with LAC children and young people so they achieve their full potential.

## 9. Appendices

None.

## 10. Background Documents

10.1 Previous report submitted November 2013, with Appendices.