

9 June 2014**Agenda Item: 9****REPORT OF SERVICE DIRECTOR, CHILDREN'S SOCIAL CARE****COUNTY CAMHS LOOKED AFTER AND ADOPTION TEAM - SERVICE
PROVISION AND DEVELOPMENTS 2013/14****Purpose of the Report**

1. To provide an update on the work and service developments of the County CAMHS Looked After and Adoption team.

Information and Advice**Introduction**

2. The County CAMHS Children Looked After & Adoption team was established in 2001, restructured in 2007, and has developed into the service currently offered. The Child and Adolescent Mental Health Service (CAMHS) provides a service for children aged 0 - 18 years, where there are concerns about their emotional well being or mental health.
3. The County Children Looked After Team and Adoption Team is jointly commissioned by Nottinghamshire County Council and Nottinghamshire NHS Trust. The team is based within the Specialist CAMHS Service, Specialist Service Directorate, Nottinghamshire Healthcare NHS Trust.

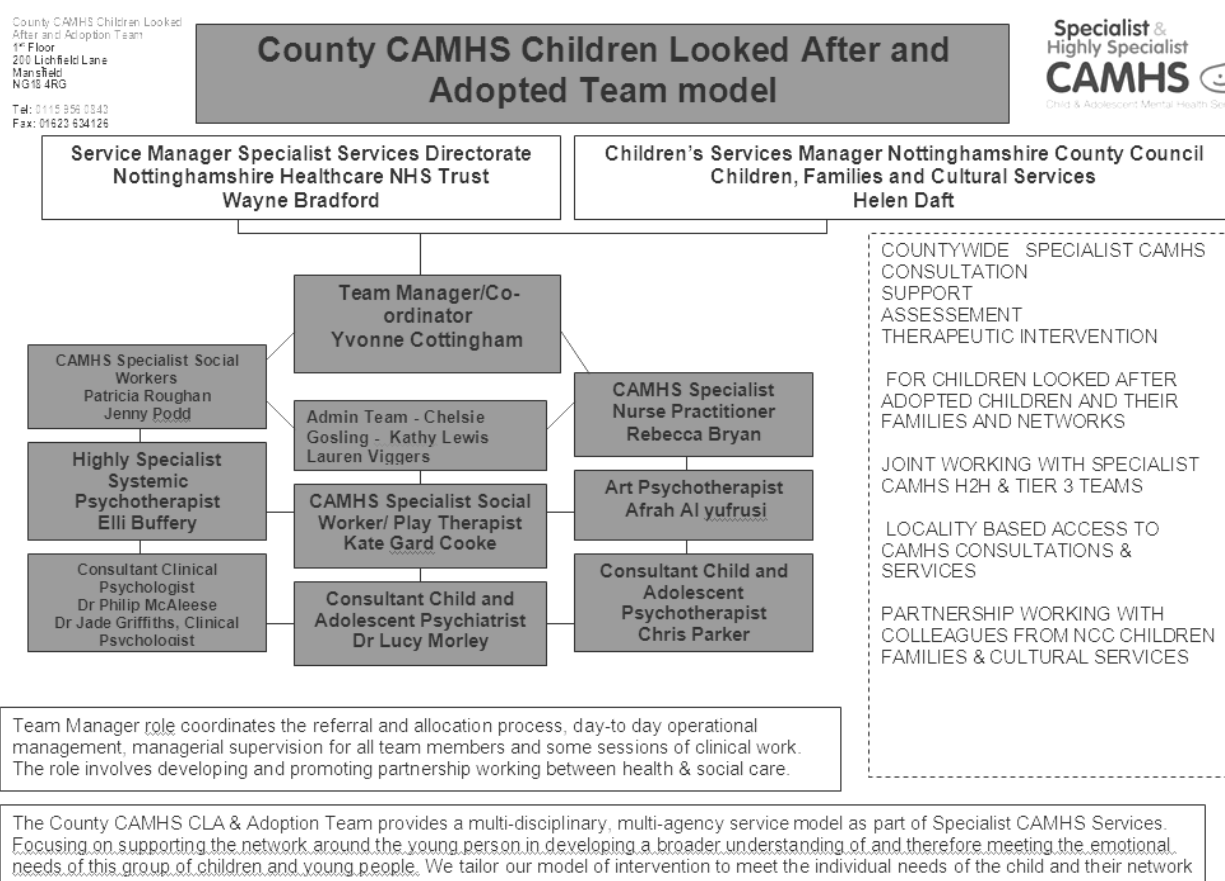
Aims of the service

4. The team is commissioned to specifically work with children and young people who are looked after and living away from their birth parents, in the care of Nottinghamshire Children's Services. These children and young people may be living with foster carers or living in residential care. The team also offers specialist consultation and support to children/young people who have been adopted, and their families.
5. It is a multi-disciplinary, multi-agency team whose purpose is to assess the mental health needs and promote the psychological wellbeing of:
 - young people within Nottinghamshire who are living with foster carers or living in residential care.

- young people who have been adopted, and their families, or for whom adoption is being explored / planned.
- young people who are looked after or adopted and placed in Nottinghamshire by other local authorities/Health Trusts.

Team structure

6. As illustrated in the Team Model below, the team is multi-agency; it is made up of professionals, some of whom are employed by Nottinghamshire NHS Trust and others by Nottinghamshire County Council. The team is multi-disciplinary, made up of professionals who have undertaken different types of training, including: Clinical Psychology, Specialist Social Worker, Specialist Nurse Practitioner, Psychiatry, Child & Adolescent Psychotherapy, Systemic Family Therapy, Play Therapy, Art Psychotherapy. The team is supported by an administration team and led by a Team Manager Coordinator.



Service Provision:

Referral Pathway to access a service from CAMHS CLA & Adoption team

7. An initial CAMHS consultation with the young person's social worker is the referral pathway to accessing a service from the CAMHS CLA and Adoption team. The child/young person's social worker is asked to complete a consultation request form and book into an initial consultation appointment,

where the social worker will usually meet with two members of the team. Following the consultation the CAMHS clinicians will provide a written record of the consultation detailing the ongoing CAMHS plan. This information is also shared with the child/young person's GP and the Designated Nurse for Children in Care.

Number of Referrals to the team for past six months

8. The number of referrals is as shown below:

Month	No. of Referrals
September 2013	17
October 2013	40
November 2013	24
December 2013	24
January 2014	36
February 2014	29
March 2014	18
Total	188

9. There are currently 261 cases open to the team.

Access

10. To ensure ease of access to the service, regular initial CAMHS consultations are offered for social workers at the following countywide venues:
- Through Care Team
Weekly consultations (12 per month)
Venue - Bevercoates, Welbeck House, Ollerton
 - Adoption Service & Permanency Team
Fortnightly consultations (8 per month)
Venue - Chadburn House, Mansfield
 - Nottinghamshire County Council Children's 3 mainstream Residential Homes within the County (Lyndene, Westview and Oakhurst). We have recently reviewed the monthly consultation sessions at each home to bring them in line with the CAMHS service offered to the Fostering and Adoption Service. There are now monthly one hour consultation sessions focusing on an individual young person. These take place with the young person's key worker at the residential home, the young person's social worker and as and when appropriate the young person may also choose to attend.
 - Other Initial CAMHS Consultations
Venue - St John's Street, Mansfield or Thorneywood, Nottingham

11. Examples of the referrals for these initial consultations are:

- GP or Community Paediatric referrals for adoptive families not currently receiving social worker support - to access a service from the team these families receive a standard letter and consultation request form to complete and are asked to contact the administration team to arrange an appointment.
- Referrals for children young people who are looked after or adopted and placed in Nottinghamshire by other local authorities and health trusts - the social worker for the child/young person will receive a standard letter and consultation request forms advising them of how to access a service. In line with Responsible Commissioner Guidelines there is a charge for a CAMHS service from this team.
- For looked after and adopted children/young people from Nottinghamshire who are placed outside of Nottinghamshire, we offer consultation to the social worker. However in cases where direct work with the young person is indicated their social worker will need to make a referral to the local CAMHS team in the area where the child/young person is placed. If required the CAMHS Children Looked After and Adoption Team can support the social worker with this.
- Strength and Difficulty Questionnaire (SDQs) - the CAMHS Children Looked After and Adoption Team has incorporated this questionnaire into their referral process and has been liaising with colleagues in Nottinghamshire County Council's Looked After Children Strategy Group to determine routine collection of the SDQ data, which enables joint monitoring processes to regularly 'score' the emotional health of each child in care. This data highlights those children and young people who would benefit from CAMHS involvement and allows interagency checks to identify existing service provision or indeed gaps in service.
- Urgent Referrals - to access support for a child/young person following an episode of self harm, the young person will need to attend their local hospital Accident and Emergency Department to be assessed by the on call team. A follow up appointment will be offered based on the assessment of the on call team.

Follow up and ongoing consultations

12. Following the initial consultation with the social worker, further consultations are arranged and would usually include the foster carers for the children/young people, education staff and/or other relevant people from the child/young person's network.
13. Dependent on where the child/young person is in the adoption process, the child/young person's network can vary for adoptive families.

14. The consultation model offers the network around the child a space to reflect on the complex issues they are dealing with and it provides the opportunity for a shared understanding of the powerful emotions and experiences of the young person. It provides the opportunity for containing anxieties in the network generated around the child. It offers an alternative to therapy for a child who may not be in a secure long term placement, but where some form of intervention is needed to help the child reach this goal and improve their long term prospects.
15. Consultation can function to encourage all members of the network to remain fully engaged in improving the quality of life of the young person, rather than handing over responsibility for providing a 'cure' to 'experts'. The consultation model of working with Looked after Children continues to be a NICE/SCIE quality standard recommendation as follows:

"a consultancy service could be designed and delivered by in-house experts, external advisers or child and adolescent mental health services. This can contribute to children's needs being met and placements being more effectively supported. The approach should be based on the concept of reflective practice and how to manage conflicting views in the team."

(QS31 Health & well being of looked after children and young people issued April 2013 NICE)

Ongoing work

16. We tailor our model of intervention to meet the individual needs of the child and their network, based on: the evidence base; NICE guidelines; the views and skills of the client and their family/foster carers; and practice based evidence.
17. Beginning with the initial assessment and plan of intervention formulated at the Initial CAMHS consultation, there is an ongoing process of individualised psychological formulation and intervention, reviewed with the network via the consultation process. This process may identify and agree the need for additional interventions with the young person and their network.
18. Alongside ongoing consultation the following additional integrative interventions may be introduced: fostering attachments; therapeutic parenting or attachment focused family based interventions such as Theraplay; Dyadic Developmental Psychotherapy or Systemic Psychotherapy.
19. The team can also provide specific diagnostic assessment, as well as the prescribing and reviewing of medication. Individual play therapy, art therapy and psychotherapy are also offered when assessed as appropriate to meet the formulated need.

Theraplay

20. All members of the team have completed Theraplay training and two members of the team are currently working towards accreditation in Theraplay. They

are working closely with social work colleagues within Children's Services; the Adoption Service; and colleagues in Targeted Support Services. This involves a process of joint working and monthly peer consultation and supervision.

Dyadic Developmental Psychotherapy (DDP)

21. All members of the team have completed Level 1 training in DDP and some are working towards therapist accreditation. One member of the team has achieved Accredited Therapist status. The team has developed the Nottinghamshire Special Interest Group for DDP, which links with the National DDP Special Interest Groups facilitated by the DDP UK based Accredited Consultants. DDP is an 'attachment' focused 'family' based intervention.

Fostering Attachments Group

22. The CAMHS CLA and Adoption Team has developed and provided an 18 week therapeutic group for foster carers. The aim of the group is to support foster carers to increase their understanding of how to meet the unmet emotional needs of the young people they are caring for. The four groups completed so far have received positive evaluation from the participants, as illustrated in the feedback below. From discussion and feedback received from foster carers and supervising social workers we are looking at reviewing the group. We are planning to meet to discuss various options with our colleagues in the fostering service around how to enable this to be offered as an ongoing intervention for all Nottinghamshire County Council foster carers

Qualitative Feedback

Positive aspects of the group

23. **Group Dynamics** – carers found talking and listening to other carers useful as it reminded them that they are not alone in struggling with the children they care for. Carers also reported that listening to (successful and unsuccessful) ideas and strategies of other carers gave them ideas as to how they might approach their children. It also helped some carers to appreciate that they have quite a lot of knowledge around attachment and are good carers.

Suggestions for future groups

24. **To be offered to new carers** - carers that had been caring for children for years commented that they would have liked to have attended the course much earlier in their fostering career as they could see how some of the knowledge and skills they were developing would have been beneficial to children they have looked after in the past.

Summary

25. Overall foster carers particularly valued the in-depth content and reflective nature of the group and reported a reduction in levels of stress. Feedback

would suggest that as carers gained a greater understanding of the impact of their children's early experiences on their attachment behaviours, their perception of their children's presentation and difficulties altered. Foster carers seemed more aware of, and able to meet their child's 'hidden needs' and subsequently noticed a reduction in their children's difficulties, particularly their emotional difficulties.

Foster Carers Induction Training

26. Alongside our colleagues in the fostering service, education, health and youth services, we attend the foster carers' induction programme, which runs twice a year. This enables new foster carers to gain an understanding of the range of services available for children who are looked after within Nottinghamshire.

Residential Staff Training Group

27. The team has developed a six week training course for residential staff from our three mainstream residential homes. The focus has been on: understanding the shifting context of residential care; key concepts of attachment theory; Kim Goldings 'House Model' PACE model; effects of trauma and neglect on a child's development; and developmental stage of adolescence.

Community of Interest for Children in Care

28. In partnership with colleagues in the Children in Care Health team, we have been successful in initiating a Community of Interest for Children in Care with the aim of establishing a network of people with a shared vision for improving the physical and mental health needs of Children in Care. We have hosted two events, one in September 2013 and one in March 2014, where colleagues from the Foster Carers Liaison Advice Group (FLAG) and the Virtual School both gave presentations regarding their input within the network of children in care. Both events have been well received.

Other Options Considered

29. This report is for noting only.

Reason/s for Recommendation/s

30. This report is for noting only.

Statutory and Policy Implications

31. This report has been compiled after consideration of implications in respect of finance, public sector equality duty opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the

environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) That the update on the work and service developments of the County CAMHS Looked After and Adoption team be noted.

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Constitutional Comments

32. As this report is for noting only, no Constitutional Comments are required.

Financial Comments (KLA 23/05/14)

33. There are no financial implications arising directly from this report.

Background Papers and Published Documents

None.

Electoral Division(s) and Member(s) Affected

All.

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