

**8 June 2015****Agenda Item: 10****REPORT OF THE SERVICE DIRECTOR, CHILDREN'S SOCIAL CARE****COUNTY CAMHS LOOKED AFTER AND ADOPTION TEAM - SERVICE  
PROVISION AND DEVELOPMENTS 2014/15****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**

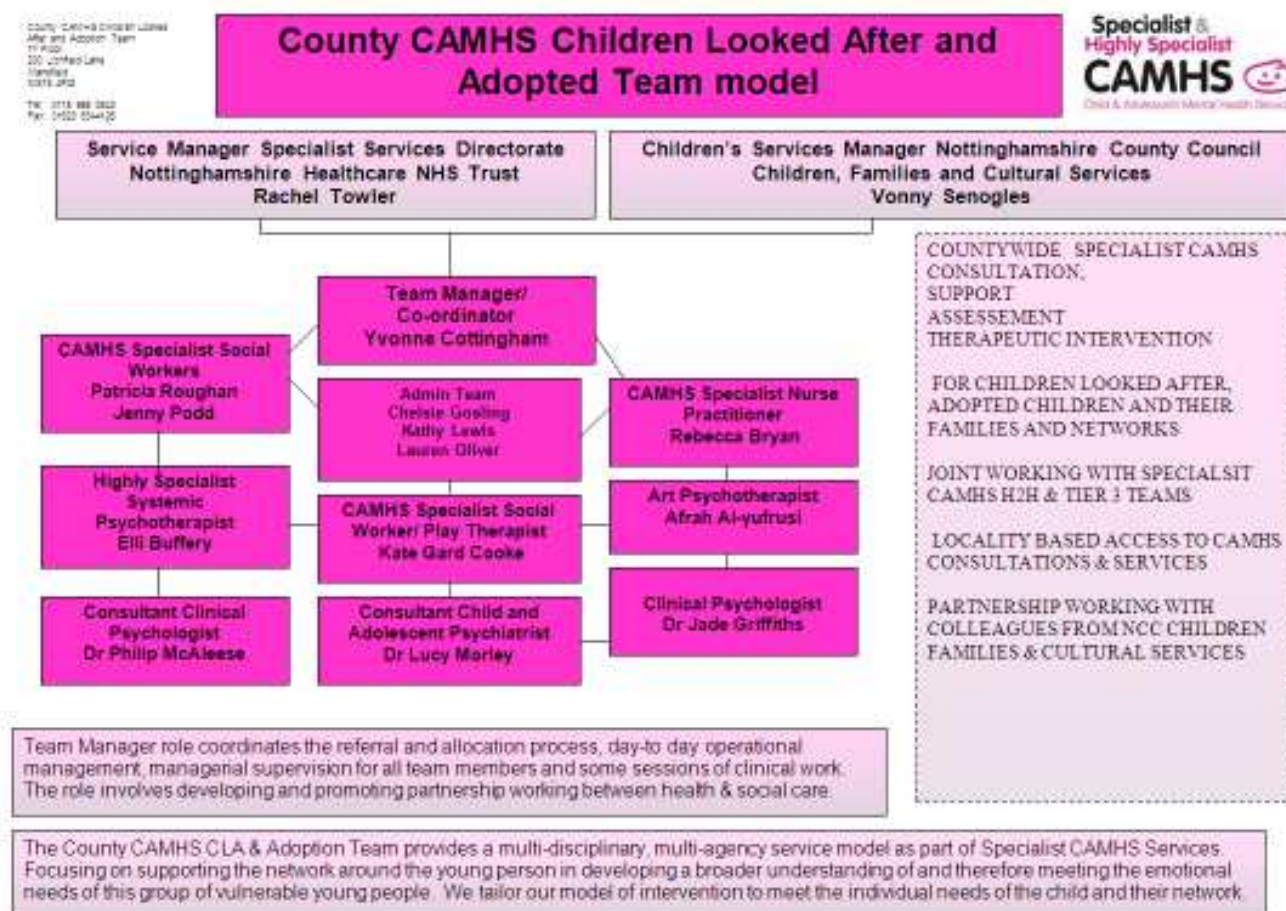
2. The County CAMHS Children Looked After & Adoption team was established in 2001, restructured in 2007, and has developed into the service currently offered. The Child and Adolescent Mental Health Service (CAMHS) provides a service for children aged 0 - 18 years, where there are concerns about their 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.

## Referral Data CAMHS Children Looked After and Adoption Team

8. Between 01/07/14 & 31/12/14 the CAMHS CLA team received **102 referrals**
- Between 01/01/15 & 01/04/15 the CAMHS CLA team received **148 referrals**
- The number of open cases to the team on 30/04/15 **319 open cases**

Based on 01/01/15 – 01/04/15 data, the average waiting time for the initial CAMHS consultation with a social worker was 36 days (5 weeks).

Following the initial CAMHS consultation, young people/foster carers are generally seen within 2 weeks for treatment / follow up.

Referrals are risk assessed and any urgent self-harm referrals are seen as per the self-harm protocol – the service offers a follow-up community appointment within 7 days.

## Duration of Treatment

9. Audit shows that the average duration of treatment is 406 days (58 weeks) when considering this data there is a need to be aware that there are a number of cases that due to clinical need and complexity are open to the team long term.

## Interventions

10. The model of intervention is tailored to meet the individual needs of the child and their network, based on the evidence base: NICE (National Institute for Health and Care Excellence) guidelines; the views and skills of the client and their family/foster carers; and practice based evidence. 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'.
11. 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. 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.

## Skills training for wider LAC workforce

### Foster Care

12. In 2013-14 CAMHS CLA and Adoption Team 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 in that period received positive evaluation from the participants. From discussion and feedback received from foster

carers and their supervising social workers we arranged to meet with our colleagues in the fostering service to discuss various options around how to enable this to be offered as an ongoing intervention for all Nottinghamshire County Council foster carers. The outcome of this is the CAMHS CLA team now deliver a 10 week 'Nurturing attachments' therapeutic group for foster carers within their localities; this also includes supervising social workers and specialist family support workers. The group sessions are two and half hours long and usually run in blocks of 5 weeks with a break to coincide with school holidays.

13. It is planned to run the groups as a rolling programme within localities with named CAMHS workers with the aim of developing a closer working relationship between the fostering service and CAMHS, and in support of the LAC strategy action point of recruiting more local authority foster carers and developing their knowledge and expertise. Groups have now taken place in Bassetlaw, South Nottinghamshire, Ashfield and Mansfield; the next group is planned to take place in Newark.

### **Residential Care**

14. The 10 week 'nurturing attachments' therapeutic group is also being offered to the staff teams in our mainstream residential units. Again the aim of the group is to support the residential staff team to increase their understanding of how to meet the unmet emotional needs of the young people they are caring for.

### **Qualitative Feedback**

15. Listed below is feedback from carers who have recently participated in the CAMHS CLA Nurturing attachments therapeutic group:

*The 10 week CAMHS course has been invaluable to me, to get down to understand lots of behaviours I have been dealing with for nearly a year and to suddenly click and help me to see the reasons has been amazing. The course was tailored to fit my particular child which meant that my reflection could be particularly focussed, and the application of what I learnt was bespoke and relevant.*

*Feeling I am on the right track and with the support and understanding of the rest of the group has been a really great experience. Dealing with other peoples experiences and the group experience understanding the reasons for behaviour in depth and it is consistent with other carers' children's experiences.*

*To help assist my child on a deeper level, although still challenging is so helpful, it can't be underestimated.*

*I have thoroughly enjoyed and relished the course and would like to know more if any other training or courses become available. As a group we agreed that we found the course really interesting and relevant to all our children, we can't praise it enough'*

*My CAMHS worker has been supportive, empathetic and amazing over the last 10 months and I would have struggled a lot more without her. I get the sense with my CAMHS worker that she is "in the hole" with me and always cares and wants the best outcomes for me and my child.*

*I would recommend CAMHS to anybody, and am a true believer.*

*I recently attended a “how to manage difficult behaviour” course which to me now was just surface level and I did struggle to agree with it totally but now know the true meaning of “why and reasons” for the behaviours. Any more training would be relished and thanks to all the team involved.*

## **Summary**

16. 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 children’s ‘hidden needs’ and subsequently noticed a reduction in their children’s difficulties, particularly their emotional difficulties. This group programme will be further evaluated using Parenting Stress Index, Strengths & Difficulties Questionnaires, Carer Questionnaires to provide more detailed data.

## **Residential Care Block Purchase**

17. The Service Manager for CAMHS and Residential Services chairs the matching panel process that has been initiated for children’s residential placements. Panel members include a member of the Placements team, registered managers from our mainstream residential homes, team manager of CAMHS CLA team and the relevant personnel from our partners involved in the residential block purchase. The aim of the matching panel is to ensure that the presenting difficulties and placement needs of young people are shared and considered by ourselves and our partners prior to a placement being agreed.

## **Other Options Considered**

18. This report is for noting only.

## **Reason/s for Recommendation/s**

19. This report is for noting only.

## **Statutory and Policy Implications**

20. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working 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.

**Steve Edwards**  
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**For any enquiries about this report please contact:**

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## **Constitutional Comments**

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

## **Financial Comments (SS 13/05/14)**

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

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

CAMHS operational guidance – ref para 3.6 re self-harm

## **Electoral Division(s) and Member(s) Affected**

All.

C0635