



*Children and Adolescent Mental Health Service:
A report from Sefton's Overview & Scrutiny Committee
(Children's Services)*

INTRODUCTION

The Council, in partnership with Sefton PCT, has responsibility for the Children and Adolescent Mental Health Service (CAMHS) across the Borough and commissions the delivery of the service from Alder Hey Children's Hospital. The Overview and Scrutiny Committee (Children's Services) made a decision to review the service as a result of receiving a presentation from a clinician from Alder Hey Children's Hospital who revealed the following factors: inconsistent provision of service across the borough (with inconsistent and fragmented support); unacceptable waiting times / support provided too late in a crisis; discrepancies with regards funding.

We want to help children and young people feel confident, make friends, form trusting relationships with adults, enjoy their own company and deal with the setbacks that everyone faces from time to time – the Council commissions a vital service. Most mental health problems have their roots in childhood, and many serious chronic mental illnesses appear before the age of 25. Approximately 75% of adults with mental health problems first experienced mental health problems in childhood. So it is a time when young people need more help and support, not less.

It is estimated that by 2026 the cost of mental health services will increase by 45% to about £32 billion. Service costs are not the only economic consideration. It has been estimated that the total cost to society of mental health problems in England is more than £77 billion a year, which is double previous estimates. These figures look set to rise if nothing is done, therefore investing in services and support for children and young people not only reduces misery and loneliness but saves millions in future costs to the criminal justice system, NHS, education and social care costs. The children and young people now are our future adults, invest to save.

HOW WE APPROACHED THE REVIEW

We felt that improving the mental health and psychological well being of all those children and young people who live within the Borough should be at the heart of the review. We listened to the people who used the service, as well as those who provided the service. We also listened to the views of those who were responsible for commissioning the service, and those involved in the new G.P Consortia and other relevant clinicians. We also received a lot of background information (including statistics) concerning the provision of the service.

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We gathered a lot of information about the service using national and local data and background reports. We examined the performance reports that were available, and posed questions to those involved with the commissioning process. We held interviews with those who provide the service, and examined the provision of Tier 1 – 4 services in detail. We realised that the services provided within each of these tiers needed to be considered individually.

We wanted to hear from those parents / guardians of service users and gather their views of the service they had received. We invited the parents / guardians identified by the provider of the service (abiding by strict data protection rules) to attend a group meeting with the Members of the Working Group where they were able to share their experiences of the service. For those parents / guardians who couldn't attend the meeting, but wanted to submit their views for consideration, we accepted written statements and offered home visits to help encourage involvement in the review.

We also met with the new GP Consortia in both the north and south of the borough to gather the views of the professional involved in the service.

WHAT WE HAVE FOUND OUT

We felt that the word “mental health” was unhelpful in the promotion of a positive service for children and young people as there remains an historic “stigma” associated with the term. Statistics show that over half of all adults with mental health problems were diagnosed in childhood but less than half were treated appropriately at the time. We wanted to find out what was stopping young people getting the help they need. We accept that the answer is likely to be complex and vary from person to person, but we feel that one key reason why young people don't access services is the stigma associated with having a mental health problem.

Our G.P's have an important role to play in the promotion of Mental Health Services. Often they are an important first “port of call” for parents and carers concerned about their children. It became apparent from interviewing expert witnesses that G.Ps often made inappropriate referrals as a safeguarding measure. The number of inappropriate referrals within Sefton is high and in North Sefton from April 2010 there have been 109 cases (1/3rd of referrals) that fit within that category. Those patients take up capacity that would be best used for those referrals which are appropriate.

We also felt that whilst the effect of inappropriate referrals needs to be considered it is also important to understand that the evidence also indicated that G.Ps did not consistently recognise the signs of mental health problems, particularly lower-level problems which were likely to be more responsive to early intervention. We felt that this was a worrying factor as the recognition was more likely when the child or young person had developed a more severe problem. We found that the information available for parents, carers, children and young people is not necessarily clear, and would benefit from some improvement.

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We also found that that service users had some concerns about the production of 'statements' for their children. One parent / guardian stated that she had attempted on three occasions to receive a statement for her child and had been refused, when the child met all the criteria. We feel that it is absolutely crucial to that child's education to receive a statement that would ensure that appropriate support would then be made available to that child. We also noted that a statement ensures that funding for that child is transferred from school to school.

After the family, schools are the most important organisation in the lives of the vast majority of children and young people and we feel that children and young people need schools to be more aware of mental health issues. We need to ensure that those people working in the schools have the confidence to support help and recognise issues before they arise.

We realise that young people go through multiple transitions as they move from childhood into adulthood. They are moving from school to college or the workforce, from being dependent to more independent living and if young people are in contact with services, they are also likely to be making the transition from children's services to adult services.

We are concerned about the transition period that young people can go through as they reach a certain age. Young people who need help and support from mental health services can find themselves with no help and support at a time when they really need it. When they reach 16 they can find themselves without any support from Alder Hey because the provider (Alder Hey) of CAMHS often ends at that age and they are too young or not considered ill enough for AMHS which start at the age of 18. In Sefton 16 – 18 year olds are able to access services through Merseycare and a specialist 16 – 18 year old service. However we feel that there are some concerns about the provision of these services.

We feel that the transition process should places the young person at the centre of the service planning and provision to ensure there is a focus on young people's self esteem and self confidence. We feel that the professionals from CAMHS should liaise with, and integrate their service with those from the AMHS to ensure that young people's views and needs are met accordingly. Witnesses stated that some children and young people found appointments to be too clinical based, which result in a negative way and non-attendance at appointments, although expert witnesses supported clinical based appointments so that more appointments could be carried out throughout a working day. We feel that the service and professionals should be located within settings which are comfortable and approachable for teenagers and young adults and where young people are and not just where clinics are based. We also felt that home visits should be offered across the borough (currently they are only offered in the south of the borough), in order that hard to reach groups have access to the service and to ensure that appointments are kept.

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Evidence received from families highlighted the need for a specialist service local to Sefton. We felt that a child requiring this level of specialist care (normally provided in Chester), who may already be feeling isolated with intricate issues and being approximately 80 miles round trip away from their families, would exasperate those issues. We asked the expert witnesses about sufficiency of beds and if it was felt, in their expertise, that the demand was being met. We were perplexed to receive a contradiction in answers given and agreed that further work should be undertaken to identify if there were sufficient beds to meet demand.

It is clear to us that the CAMHS provision should be a seamless Borough Wide service with genuine interaction between North and South. The evidence received from key witnesses identified a worrying gap in service provision across the Borough.

The service in the North has experienced longer appointment waiting times to that in the South. Expert witnesses from Alder Hey reported that the team in the North of Sefton had carried a number of staff vacancies, which had been difficult to recruit to and so had an impact on capacity within the service. Alder Hey has been addressing the issue of reducing the length of waiting times across the Borough over the past six months. There are plans for Alder Hey to move to a Mental Health Acute Trust, which is a positive sign. We need to ensure that the Council, in partnership with Sefton PCT, have the structures in place that will result in compliance of the contract.

RECOMMENDATIONS FOR THE FUTURE

Our recommendations have been presented to the decision makers within the Council, and those within NHS Sefton.

- 1 We recommend that the Council, in partnership with the PCT, re-brand the CAMH Service and change the title to the “Children and Young People’s Emotional and Wellbeing Service”.
- 2 We recommend that the Council, in partnership with the PCT, define clear and consistent pathways for those who work with Children and Young People (i.e. Teachers, Youth Workers and the 3rd sector working in that field) in order that they may identify and refer an incident (which is deemed to be one of a mental health nature) to an appropriate professional.
- 3 We recommend that the Provider make available appropriate training to those professionals, especially GPs, who are required to make referrals in relations to CAMHS, ensuring appropriate referrals proceed into the system.

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- 4 We recommend that the Commissioners raise awareness and provide appropriate sign posting for parents, carers, children and young people in order that they may be well informed of the services available, including how to access those services out of hours.
- 5 We recommend that the Council review the statementing policy with regard to CAHMS.
- 6 We recommend that the Council urges schools, through SENCO Teachers and School Governors with SEN's responsibility, to ensure that, where appropriate, a young person accessing CAMHS (Tier 2, 3 and 4) be known and supported by the school.
- 7 We recommend that the Council ensures that a strategy is in place to ensure that the transition from CAMHS to Adult Mental Health Service is seamless and smooth.
- 8 We recommend that the Commissioners with responsibility for the service should ensure that the CAMH service received from Alder Hey Children's NHS Foundation Trust include offering Home Visits across the Borough.
- 9 We recommend that the Lead Commissioner ensures that the provider complies with the contract across the Borough and reports at six monthly intervals to the Overview and Scrutiny Committee (Children's Services).
- 10 We recommend that the Commissioners investigate the sufficiency of beds for Tier 4.
- 11 We recommend that the Council considers re-instating, when funding becomes available, the funding that has recently been reduced for children with mental health issues.
- 12 We recommend that the Overview and Scrutiny Committee (Children's Services) receives regular information monitoring the effects that budget reduction has on the CAMH Service as a whole.
- 13 We recommend that the Overview and Scrutiny Committee (Children's Services) carry out a Mini-Review (Working Group) examining in more detail the contents of the separate specification, once it has been developed.
- 14 We recommend that the Council monitors the CAMH Service ensuring that the provision is a seamless borough-wide service with a genuine interaction between North and South, with equality for all residents and consistent provision of service, as required of Alder Hey Children's Hospital.