

National Assembly for Wales

Children, Young People and Education Committee

CAM 16

Inquiry into Child and Adolescent Mental Health Services (CAMHS)

Evidence from : The National Deaf Children's Society

1. About Us

The National Deaf Children's Society (NDCS) is the national charity dedicated to creating a world without barriers for deaf children and young people. We represent the interests and campaign for the rights of all deaf children and young people from birth until they reach independence. **Please note** that in referring to "deaf" we refer to all levels of hearing loss, including mild, moderate, severe, profound, and temporary hearing loss.

2. Response

2.1. NDCS Cymru welcomes the opportunity to contribute to the Children and Young People's Committee Inquiry into CAMHS. Being deaf in a hearing orientated society can present a number of challenges. As a result, research demonstrates that deaf children are 60% more likely to experience mental health problems than other children.¹ Generic CAMHS should have a good understanding of childhood deafness and be accessible to deaf children. However, research has indicated that generic CAMHS lack the expertise and skills in deafness to fully and effectively support and communicate directly with deaf children².

2.2. The Welsh Government's 2010 action plan entitled *Breaking the Barriers: Meeting the Challenges Better Support for Children and Young People with Emotional Well-being and Mental Health Needs - An Action Plan for Wales* required the establishment of a specialist care pathway for deaf children and young people.

*"Access to services and expertise for deaf children to be improved. Benchmarking of services is taking place and scoping of need is being conducted. Care Pathways will be developed by December 2010."*³

¹ Department of Health and National Institute of Mental Health (2005). *Towards Equity and Access*.

² Beresford, B., Greco, V., Clarke, S., and Sutherland, H. (2008) An evaluation of specialist mental health services for deaf children, Research Works, 2008-02, Social Policy Research Unit, University of York, York.

³ <http://wales.gov.uk/topics/health/publications/health/guidance/actionplan/?lang=en> (page 24, para 10)

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NDCS Cymru Response; February 2014.

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- 2.3. In our response to Together for Mental Health in July 2012 we stated that this action had not yet been fulfilled and expressed our disappointment that this action was not included in the new strategy.⁴
- 2.4. In March 2013 the Welsh Government's second report on *Breaking the Barriers: Meeting the Challenges* action plan states that the care pathway for deaf children had been introduced and implemented across the Local Health Boards during 2012.⁵
- 2.5. NDCS Cymru does not agree with this statement. In the four years since the commitment to provide a specific pathway for deaf children we have seen very little progress.
- 2.6. NDCS Cymru Director, Jayne Dulson, has been in regular contact with Welsh Government Health Ministers over this period, with the most recent meeting in November 2013. After that meeting NDCS Cymru were provided with information about CAMHS provision for deaf children across Wales. From our reading of the responses from the LHBs there is little evidence of a specific pathway for deaf children in Wales.
- Aneurin Bevan LHB states that it accesses the National Children's Deaf Service (sic) in London when required.
 - Cwm Taf, Cardiff & Vale and ABMU also state that they currently access the National Deaf CAHMS service (in London). They also state that "although not formally developed, there is a staff member who can communicate with hearing impaired children and adolescent". Cardiff and Vale UHB in addition state that they do not believe there is a formal arrangement in place between CAMHS, Child Health and Cardiff and Vale partners in education.
 - Hywel Dda LHB says that a Health Board action plan "is being developed and will include service training and delivery plan".
 - Powys Teaching LHB says it works closely with Powys Education service, including with regard to deaf children, but that there was a delay in adjusting training and job plans due to sickness.
 - Betsi Cadwaladr LHB says that CAHMS is working with the lead for the Adult Mental Health virtual deaf service to develop a joint service.
- 2.7. **Not one of the services has clearly identified a care pathway for deaf children in Wales. We believe that this situation is wholly inadequate and we are continuing to lobby the Welsh Government to address the matter.**
- 2.8. NDCS Cymru has identified examples where the mental health needs of deaf children and young people have not been met. For instance, we have recently been involved with the case of a profoundly deaf seven year old boy who was displaying extreme behavioural issues. The child's stepmother contacted NDCS as she felt the

⁴ http://www.ndcs.org.uk/professional_support/our_responses_to_consultations/ndcs_responses_wal.html

⁵ <http://wales.gov.uk/topics/health/publications/health/reports/barrier/?lang=en> (page 18)

child's social worker was not helpful and didn't acknowledge the specific needs of a deaf child. NDCS' specialist in this area, who was formerly a social worker for deaf children, identified the case as one that should be referred to Deaf CAMHS. The child's social worker refused this suggestion as she felt it would be "labelling" the child. Had this child been living in England NDCS could have made a direct referral to Deaf CAMHS. In Wales a deaf child has to be referred to local CAMHS initially. If a referral to specialist Deaf CAMHS is recommended the local CAMHS must seek approval from the Welsh Government to fund an out of country referral.

- 2.9. This case study outlines the issue of social workers failing to identify the needs of deaf children and the problems faced by children who need to access specialised Deaf CAMHS.
- 2.10. In another case that came to our attention a Teacher for the Deaf recognised that a deaf teenager she was teaching needed access to specialist counselling for deaf young people. When told that she would have to refer the child through local CAMHS initially she said, "What's the point? They don't understand his needs and there is nothing they can do for him."
- 2.11. This illustrates the frustration that experienced professionals working with deaf children and young people feel when dealing with CAMHS. This particular teacher felt that there was no point complaining as nothing would be done
- 2.12. Professionals working in generic CAMHS should be aware of specialist CAMHS for deaf children and refer as quickly as possible, as appropriate. We wish to see a named individual in each CAMHS service that is responsible for the needs of deaf children.
- 2.13. We also believe that specialist CAMHS for deaf children should also:
- a) Identify the most effective interventions for deaf children and disseminate this knowledge nationally.
 - b) Develop partnerships locally, regionally and nationally with other agencies that work with deaf children, across health, social care and education.
 - c) Have the necessary expertise to promote deaf friendly strategies for lifelong skills.
 - d) Advise on appropriate care pathways for the minority of deaf children requiring inpatient assessment and treatment.
 - e) Work closely with adult mental health services, where necessary, to ensure a smooth transition of care arrangements into adulthood with continuation of coverage and tailored support.

2.14. The School Nursing Service and the School Based Counselling Service act as a conduit to improve appropriate access to CAMHS. We would, therefore, urge that health professionals, school counsellors and nurses receive basic deaf awareness training. It should be noted that over 90% of deaf children in Wales attend a mainstream school, so it is imperative that these mainstream services are accessible to deaf pupils. NDCS Cymru was commissioned by the Welsh Government to produce a resource for schools on counselling deaf children, which should be available through the WG Education Department

2.15. Deaf awareness amongst health professionals is still an issue that needs to be addressed. Often the GP is the first point of contact for a child or young person with mental health issues. If that child is also deaf it can be difficult for him or her to explain what is troubling them if that GP is not deaf aware. NDCS's Youth Advisory Board has produced the My Life, My Health resource pack for deaf young people and their parents, which includes a leaflet for health professionals on supporting deaf young people at the GP surgery.⁶

2.16. We would also wish to draw to the attention of the committee to the Healthy Minds Resource produced by NDCS, which focuses on helping young deaf people to develop a positive sense of self and emotional health and wellbeing.⁷

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The National Deaf Children's Society

⁶ <http://youngpeople.ndcsbuzz.org.uk/go.php?structureID=cooltopics&ref=N52E7DEE1E81B4>

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http://www.ndcs.org.uk/family_support/positive_parenting_families/emotional_health_and_wellbeing/healthy_minds.html