

# National Assembly for Wales

## Children, Young People and Education Committee

### CAM 58

#### Inquiry into Child and Adolescent Mental Health Services (CAMHS)

#### Evidence from : The Team Around the Family (TAF) Team

The Team Around the Family (TAF) Team, which operates in Caerphilly County Borough, would like to submit the following response to the inquiry. The team would be happy discuss the response with the committee.

The Caerphilly TAF is about coordinating support from a range of agencies, to support families to make positive changes to their lives and prevent them from needing statutory intervention (i.e. Children's Services).

TAF works with families where;

- There are children/young people in the household between the ages of 0 and 25 years old
- They have a range of additional needs that would benefit from support from 2 or more agencies (i.e. need for coordination of support); and
- They do not meet the threshold for statutory intervention (i.e. Children's Services)
- The family have consented to support, and to the sharing of information across agencies.

#### **1 The availability of early intervention services for children and adolescents with mental health problems.**

1.1 The TAF team coordinates support from a range of agencies which operate within Caerphilly County Borough, this includes identifying early intervention support for children and young people with mental health problems.

1.2 The TAF team feel that there are a good range of agencies in the County Borough which are able to support children and young people, these include school nurses, school counsellors, CRUSE, Education Welfare Officers, Behaviour Support Workers, Education Psychologists, Parenting Support, Substance Misuse Services, Domestic Abuse Support, Advocacy, Youth Service, AFC Family Intervention Team.

1.3 Although there are a range of services available, some services have extensive waiting lists (e.g. AFC Family Intervention Team), and others may not realise the skills that they have and the important contribution that they make to the mental health and wellbeing of children and young people.

1.4 More of a focus should be put on referrers to gather information from early intervention services about families before they make a referral to CAMHS.

**2 Access to community specialist CAMHS at tier 2 and above for children and adolescents with mental health problems, including access to psychological therapies**

2.1 Based on our experience of working with families who are open to CAMHS, there is a common view that communication between CAMHS professionals and families could be improved.

2.2 Families do not always know what to expect from CAMHS services, and as a result are sometimes disappointed with the support they receive. This may be attributable to their high expectations of the service, which are then increased because of the length of time that they wait for support. Improving referring professionals understanding of CAMHS support so that they can clearly explain to families, by only referring those where their needs cannot be met elsewhere could reduce these high expectations.

2.3 Parents do not always feel that they are given appropriate information or signposted to appropriate support to help them manage their child's condition once they receive a diagnosis.

2.4 The Primary Mental Health Service provides a valuable resource in the county borough, however waiting lists are long. The team are able to offer sound advice to professionals working with families, and can help to alleviate their anxieties. The service also links to the Team Around the Family model and has been able to offer valuable advice to families and professionals, which has prevented the need for referrals to CAMHS. However this is dependent on capacity of the team.

2.5 It is a view of the TAF team that increasing capacity with the PMHT to allow them to work more closely with the Team Around the Family would help to alleviate pressures on CAMHS services and would mean that families get appropriate advice at the time when they need it the most.

**3. The extent to which CAMHS are embedded within broader health and social care services.**

3.1 The TAF team have links with staff with the CAMHS Service, and are able to obtain basic information from CAMHS professionals in respect of their involvement with families that are open to TAF and CAMHS. These working relationships, and information sharing could be improved so that TAF plans complement the work of the CAMHS team and vice versa.

**4. Whether CAMHS is given sufficient priority within broader mental health and social care services, including the allocation of resources to CAMHS.**

4.1 The TAF team feel that CAMHS, particularly PMHT, are not given sufficient priority. This is based on anecdotal information that there approximately 47 Mental health Nurses across Gwent for adults and 5 for Children.

**5. Whether there is significant regional variation in access to CAMHS across Wales**

5.1 Not known

**6. The effectiveness of the arrangements for children and young people with mental health problems who need emergency services**

6.1 Based on the TAF teams limited experience of this, those children who have presented at Accident and Emergency have had access to a CAMHS worker.

**7. The extent to which the current provision of CAMHS is promoting safeguarding, children's rights, and the engagement of children and young people**

7.1 Not known