

Quality Network for Community CAMHS (QNCC) Annual Forum  
#QNCCForum25

**Neurodiversity in Practice: Insights for Community CAMHS**  
Monday 1 December 2025, Royal College of Psychiatrists, 21 Prescot St, London E1 8BB

09.30-10.00	<b>Registration and Refreshments</b>	
10.00 – 10.10	<p><b>Welcome</b>  <b>Carol-Anne Murphy</b>, Nurse Consultant, Mersey Care NHS Foundation Trust  QNCC Advisory Group Chair  <b>Emilola Johnson</b>, Patient Representative, QNCC</p>	
10.10 – 10.35	<p><b>Quality Network for Community CAMHS Project Update</b>  <b>Leyla Ury</b>, Programme Manager, QNCC  <b>Naomi Cross-Stuart</b>, Project Officer, QNCC</p>	
10.35 – 11.20	<p><b>Bridging Pathways for Neurodiverse Children: Integrating Mental Health Treatment and Neurodevelopmental Assessment in Northumberland CYPS</b>  <b>Michelle Bouhleli</b>, Clinical Manager  <b>Alana Kelly</b>, Team Manager  <b>Eve Jones</b>, Clinical Lead  Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust</p>	
11.20-11.35	<b>Break</b>	
11:35-12:20	<p><b>My Role as a Neurodevelopmental Specialist (RMN) in CAMHS, Nottinghamshire</b>  <b>Zoe Lombardi-Cawdron</b>, Neurodevelopmental Specialist Nottinghamshire Healthcare NHS Foundation Trust</p>	<p><b>Evaluating AI Ambient Voice Technology as a Documentation Assistant in Psychiatry</b>  <b>Dr Noah Stanton</b>, Psychiatric Registrar Doctor  <b>Dr Salim Jakhra</b>, Consultant Child Psychiatrist and Medical Lead for AI  <b>Dr Declan Brogan</b>, CT3  Central &amp; North West London NHS Foundation Trust</p>
12:20-12:50	<p><b>National Audit of Eating Disorders Service Mapping 2025: Avoidant/Restrictive Food Intake Disorder (ARFID) Provision Across England</b>  <b>Phillipa Nunn</b>, Programme Manager  <b>Rachel Davies</b>, Deputy Programme Manager  The National Audit of Eating Disorders (NAED)</p>	<p><b>Ensuring Sensory Needs are Met in Children and Young People's Mental Health Service Settings</b>  <b>Louise Davenport</b>, Advanced Clinical Practitioner  Mersey Care NHS Foundation Trust</p>
12:50-13:35	<b>Lunch</b>	
13.35-14.20	<p><b>Neuro:Diverse Quality Improvement: Accessibility, Co-production, and Service User Involvement</b>  <b>Eshan Vadgama</b> Patient Representative, QNCC</p>	
14.20-15.05	<p><b>Working towards an Integrated Neurodevelopmental Service Target Operating Model: Using QI Mapping and Delphi Consensus</b>  <b>Dr Jenny Parker</b> Consultant Child &amp; Adolescent Psychiatrist; Assistant Research Professor North East London Foundation Trust; University of Cambridge  <b>Dr Carrie Williams</b> Consultant Community Paediatrician; Honorary Associate Professor - North East London Foundation Trust; University College London</p>	
15.05-15.20	<b>Break</b>	
15:20-16:05	<p><b>The Role of Occupational Therapy in CAMHS working with Neurodiversity</b>  <b>Charlotte Kempster</b>, Aspiring Consultant Occupational Therapist, Lancashire and South Cumbria Foundation Trust NHS</p>	<p><b>An Online Delivered ADHD Parent Coaching Programme</b>  <b>Dr Priya Nathwani</b>, Consultant Psychiatrist  <b>Joanna Robinson</b>, Clinical Lead  Priory Group</p>
16:05-16:15	<p><b>Close &amp; Evaluation</b>  <b>Carol-Anne Murphy</b>, Nurse Consultant, Mersey Care NHS Foundation Trust  QNCC Advisory Group Chair  <b>Emilola Johnson</b>, Patient Representative, QNCC</p>	
16:15	<b>Close</b>	

## Bridging Pathways for Neurodiverse Children: Integrating Mental Health Treatment and Neurodevelopmental Assessment in Northumberland CYPs

**Michelle Bouhleli** is a Clinical Manager, **Alana Kelly** is a Team Manager and **Eve Jones** is a Clinical at Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust.

This presentation will outline the patient and carer journey through Northumberland CYPs following referral for a neurodevelopmental assessment. It will explore how the team works within the system to shift the focus from diagnosis alone to creating a culture of meaningful support. The session will also highlight the guidance offered to families while on the waiting list and demonstrate how neurodevelopmental and mental health clinicians collaborate to deliver assessment and treatment concurrently. Finally, case studies will be shared to illustrate how this approach works in practice and the key lessons learned.

## My Role as a Neurodevelopmental Specialist (RMN) in CAMHS, Nottinghamshire

**Zoe Lombardi-Cawdron** is a Neurodevelopmental Specialist at Nottinghamshire Healthcare NHS Foundation Trust

Zoe Lombardi-Cawdron will discuss her role as a neurodevelopmental specialist, drawing on her background as a Band 7 Registered Mental Health Nurse (RMN). She works across core community CAMHS teams to improve services and facilitate engagement for young people who are hard to reach. Her responsibilities include representing CAMHS at Dynamic Support Register (DSR) meetings, adapting interventions and engagement strategies to suit young people's processing needs, and ensuring strong networking with external services. Zoe works with complex cases (including joint work), supports practitioner development, and contributes to the autism clinic by participating in the assessment and diagnosis of autism for young people in CAMHS.

This role is considered unique, as most neurodevelopmental specialist positions focus solely on diagnosis and post-diagnostic support. In contrast, Zoe's position is described as rich and diverse, encompassing a broad range of responsibilities.

## Evaluating AI Ambient Voice Technology as a Documentation Assistant in Psychiatry

**Dr Noah Stanton** is a Psychiatric Registrar Doctor, **Dr Salim Jakhra** is a Consultant Child Psychiatrist and Medical Lead for AI and **Dr Declan Brogan** is a CT3 at Brent CAMHS, Central & North West London NHS Foundation Trust.

Central and North West London NHS Foundation Trust (CNWL) has co-developed and implemented Anathem's artificial intelligence ambient voice technology (AI AVT) within its child and adolescent mental health services (CAMHS) outpatient clinics. This innovative approach automates clinical documentation during mental health and neurodevelopmental consultations, significantly reducing administrative burden and allowing both clinicians and patients to focus more fully on the therapeutic interaction.

During the phase 1 proof-of-concept trial, documentation time per encounter was reduced from 27 minutes to just 10 minutes, with marked improvements in clinician satisfaction and patient experience. Phase 2 demonstrated time savings across a wide range of consultation types, including ASD and ADHD assessments—suggesting potential benefits for reducing assessment waiting times.

Currently in phase 3, CNWL has rolled out AVT across all six CAMHS teams. Clinician feedback has been overwhelmingly positive. This session will share insights into the implementation journey, including challenges, successes, and practical advice for other services considering similar innovations.

The team has authored an academic paper currently under peer review with *BJPsych Bulletin*, and is collaborating with the CAMHS Digital Lab on a position paper exploring the clinical, financial, regulatory, technical, and ethical dimensions of using AI AVT in children's mental health and neurodevelopmental settings.

### **National Audit of Eating Disorders Service Mapping 2025: Avoidant/Restrictive Food Intake Disorder (ARFID) Provision Across England**

**Phillipa Nunn** is a Programme Manager and **Rachel Davies** is a Deputy Programme Manager with the National Audit of Eating Disorders (NAED) at the Royal College of Psychiatrists.

Phillipa Nunn and Rachel Davies will be presenting the findings of the first year of The National Audit of Eating Disorders (NAED).

The NAED provides an in-depth look at service provision in England and aims to improve identification and management of eating disorders (EDs), and overall quality of care for people with EDs of all ages.

Despite increasing prevalence and awareness of EDs, service provision in England remains highly variable, and a comprehensive national overview has been lacking. As part of this work, we examined the provision of treatment for ARFID – an ED characterised by avoidance of certain foods or types of foods, restricted intake in terms of overall amount eaten, or both. Studies show that ARFID occurs more frequently among people with autism. However, current NICE guidelines for ED treatment do not include ARFID, resulting in variable treatment access across England.

Data were collected from NHS-funded and non-NHS ED services caring for NHS patients in England via team level surveys distributed between January and March 2025. The surveys captured information on a range of factors, including EDs treated in each team. Responses were analysed to identify patterns across service type and region.

The audit highlights significant inequities in ED service provision across England, particularly for ARFID. Compared to other eating disorders, ARFID treatment is less consistently available, with substantial regional variation. To address these gaps, further research is needed to inform evidence-based interventions and support the development of standardised care pathways across services.

### **Ensuring Sensory Needs are Met in Children and Young People's Mental Health Service Settings**

**Louise Davenport** is an Advanced Clinical Practitioner at *Mersey Care NHS Foundation Trust*

Young people accessing CYPMHS require reasonable adjustments in relation their age when coming to appointments without them having a diagnosed Learning Disability or Neurodivergent Need. My colleague Carl has designed a Sensory tool to ensure the needs of all young people are met when they come to their CYPMHS appointment. Their needs are considered even before they access the building. During the session you will have the opportunity to see how this works in practice in a community. CYPMHS and how the CYP and families appreciate it. Carl has linked in the Trust SEND Champions and the LD Champions in the Trust.

### **Neuro:Diverse Quality Improvement: Accessibility, Co-production, and Service User Involvement**

**Eshan Vadgama** is a Patient Representative for the QNCC at the *Royal College of Psychiatrists*.

This presentation will explore unique approaches to meeting the needs of neurodiverse patients through direct care planning tailored to individuals, as well as indirectly through various forms of service user involvement. Eshan will be discussing how best to support neurodiverse individuals through

individualising care to make it sensory friendly, making reasonable adjustments and using psychoeducation to improve patient engagement.

Eshan will share his journey with late ADHD diagnosis into adulthood, and the barriers he, and many others may also face, Eshan Vadgama's lived experience will also inform various other parts of the presentation.

As a dental student, Eshan will briefly discuss the importance of maintaining good oral health amongst neurodiverse individuals, what teams can do to support this and how to tackle some of the barriers commonly faced in doing so.

The overall aim of this presentation is to inform services on how to increase accessibility for neurodivergent individuals and holistically improve the quality of their care experience.

### **Working towards an Integrated Neurodevelopmental Service Target Operating Model: Using QI Mapping and Delphi Consensus**

**Dr Jenny Parker** is a Consultant Child & Adolescent Psychiatrist at North East London Foundation Trust and an Assistant Research Professor at the University of Cambridge and **Dr Carrie Williams** is a Consultant Community Paediatrician at the North East London Foundation Trust and an Honorary Associate Professor at University College London.

Challenges in neurodevelopmental services are well documented, with increasing referrals for assessment and lengthening waiting lists for children and families. Children and young people's mental health services and community development teams are impacted, while local variation in commissioning arrangements has created silos for different neurodevelopmental assessments and age groups. This presentation outlines the process and steps being taken in NELFT to review current service models with clinicians and experts by experience, working together towards an integrated target operating model: an effective and efficient service designed to meet the needs of children and families in diverse population areas.

### **The Role of Occupational Therapy in CAMHS working with Neurodiversity**

**Charlotte Kempster** is an Aspiring Consultant Occupational Therapist at Lancashire and South Cumbria Foundation Trust NHS.

Health Services (CAMHS), only to be discharged due to perceived non-engagement. This often results from challenges with social communication and the limited flexibility of traditional therapies, which may not be suited to their neurodevelopmental and mental health needs.

As an Allied Health Professional within LSCFT CAMHS, the speaker brings a unique perspective as one of the very few—if not the only—Aspiring Consultant Occupational Therapists working in CAMHS mainly with autism across England and Wales. They actively advocate for the value of Occupational Therapy in every interaction with colleagues and leaders, highlighting its essential role in supporting neurodiverse young people.

The underrepresentation of Occupational Therapy in CAMHS does not reflect its potential impact. Meaningful occupation is fundamental to mental health recovery and can be adapted to meet the needs

of autistic children and young people. This presentation will share clinical insights and demonstrate how Occupational Therapy can facilitate progress where traditional psychological interventions may not—particularly for those who are homebound, disengaged from education, and socially isolated.

The Occupational Therapy CAMHS Clinical Pathway, developed and aligned with the THRIVE model, offers Occupational Therapy as a standalone or complementary intervention alongside family therapy, CBT,

DBT, and psychology. It is designed to support young people at risk of long-term occupational deprivation and mental health decline due to prolonged isolation and lack of engagement in meaningful roles.

Within services, there is a growing number of young people who are bedroom-based, out of education, and disconnected from society. While staying at home may initially feel safer due to autism-related anxieties, over time this leads to social and occupational deprivation, increasing the risk of depression, anxiety, and enduring mental health issues. Parents often turn to CAMHS for help, but existing services may struggle to meet these complex needs.

Occupational Therapy, as the originator of practical, functional therapy, is well-placed to support this cohort in re-engaging with life through purposeful activity. This presentation will share the pathway and advocate for the wider integration of Occupational Therapy within CAMHS to better serve neurodiverse populations.

### **An Online Delivered ADHD Parent Coaching Programme**

**Priya Nathwani** is Consultant Psychiatrist and **Joanna Robinson** is a Clinical Lead at the Priory Group.

In this presentation the speakers will discuss the development of a parent training intervention for ADHD.

Their innovative and virtually delivered parent training intervention, delivered over six sessions, provides strategies to help parents support their child with ADHD. Psychoeducation and parent support are often neglected following an ADHD diagnosis, leaving many parents feeling helpless in supporting their children with the condition.

Across five group sessions, parents learn from a therapist and from each other about what ADHD is and how it may impact both them and their child. The sessions cover communication strategies, managing challenging behaviours, developing distress tolerance strategies for their child, establishing effective routines, and supporting with procrastination and task completion.

A final one-to-one session is then offered by the therapist to troubleshoot and further tailor the new skills to the specific needs of the child. The benefits of this approach and feedback received so far will be demonstrated.