

National CAMHS Conference and Networking Event Hosted by the Quality Network for Community CAMHS (QNCC)

'Working with young people under special circumstances'

#QNCCForum

Friday 19 November 2021

09.30 – 09.40	Welcome <i>Carol-Anne Murphy, Nurse Consultant, Mersey Care NHS Foundation Trust QNCC Advisory Group Chair</i>
09.40 – 10.00	Quality Network for Community CAMHS Project Update <i>Daphne Papaioannou, QNCC Deputy Programme Manager Arun Das, QNCC Programme Manager</i>
10.00 – 10.50	Rethinking CAMHS Input into Youth Justice Services <i>Bryn Mitchell, Highly Specialist Therapist, East Lancashire CAMHS</i>
10.50 – 11.00	COMFORT BREAK
11.00 – 11.50	National Deaf CAMHS <i>Victoria Fernandez, Child & Adolescent Psychiatrist, and Lenka Novakova, Deaf Advisor, South West London & St George's Deaf CAMHS</i>
11.50 – 12.20	Discussion-Led Networking Session
12.20 – 13.00	LUNCH
13.00 – 13.40	Developmental Trauma Recovery Programme: A Video-Based Parenting Intervention for Children and Young People of Developmental Trauma <i>Hayley McCann, Assistant Psychologist, Bradford CAMHS Looked-After and Adopted Children (LAAC) Team</i>
13.40-14.10	The Importance of Identifying and Supporting Young Carers Accessing Community CAMHS <i>Hannah Fox, Patient Representative, QNCC</i>
14.10 – 14.20	COMFORT BREAK
14.20 – 15.10	The Fostering Developments Project: CAMHS Children in Care Team in Gloucestershire <i>Dr David Hinchliffe, Lead Child Psychotherapist & Social Worker (CAMHS), Stephanie Jones – Child Psychotherapist and Social Worker (CAMHS), Dr Rosemary Richards – Child, Adolescent & Family Psychiatrist and CAMHS Clinical Director in Gloucestershire</i>
15.10-15.20	COMFORT BREAK
15.20 – 16.10	Working at Multiple Levels: How We Have Tried to Reach our Looked After and Asylum-Seeking Young People and How They Have Shaped Us <i>Zoe Given-Wilson, Lead Clinical Psychologist, Looked After Children / Refugee CAMHS, Tavistock and Portman NHS Foundation Trust</i>
16.10-17.00	Final Speaker TBC
17.00-17.10	Close and Evaluation <i>Carol-Anne Murphy, Nurse Consultant, Mersey Care NHS Foundation Trust QNCC Advisory Group Chair</i>

The event will be eligible for 4 CPD hours, subject to peer group approval.

Speakers

Rethinking CAMHS Input into Youth Justice Services

Bryn Mitchell, Highly Specialist Therapist, East Lancashire CAMHS

As criminogenic factors and mental health risk factors overlap considerably it can be expected that clients in Youth Justice Services (YJS) would have a higher incidence of mental health issues than the general population. In Pennine Lancashire, the Integrated Mental Health Team (IMHT) in the YJS had to develop a model of service provision that was appropriate to and accessible for the clients in the local Youth Justice Services up to 18 years, and the staff. The team operates a clinical model aligned with the principles of Assessment, Consultation, and Brief Intervention (ACBI). The IMHT work with an emphasis on active and assertive engagement, to try and ensure young people are supported in the short term to access the mainstream services that will be able to support them over the longer term.

The Service provision model has been developed to accommodate the time constraints imposed by Court Orders and YJS agreements, thus placing a priority on rapid assessment and early intervention. The acceptance criteria for IMHT covers all 4 quadrants of the THRIVE model, from Getting advice to Getting Risk Support, which ensures easy access to assessment and low intensity support. This approach of low threshold often highlights more complex unmet needs which may be addressed directly or through a managed transition to more appropriate mainstream services. The IMHT model has evolved in response to feedback from clients and, particularly, YJS colleagues. The colleague feedback has been predominantly positive, particularly around rapid assessment, early intervention and managed transition. Positive feedback has also been given regarding the accessibility of consultation and the appropriateness of the ongoing training program.

National Deaf CAMHS

Victoria Fernandez, Child & Adolescent Psychiatrist, and Lenka Novakova, Deaf Advisor, South West London & St George's Deaf CAMHS

At present, there are almost 54,000 deaf children across the UK (CRIDE, 2019). Mental health problems are reported to be higher in deaf people compared to their hearing peers (Fellinger et al., 2012), including in emotional, behavioural and autistic spectrum disorders (Hindley, 2005). This vulnerability is particularly increased in children with early onset, severe to profound deafness. Research suggests that more than 40% of deaf children experience mental health problems compared to some 25% of hearing children (Department of Health, 2005). Unfortunately, deaf children with mental health problems are known to have difficulties in accessing generic services (Department of Health, 2005). The specialist skills necessary to meet the needs of deaf children, mean that mainstream mental health services such as CAMHS are often not able to provide a specialised service adequately catering to their specific needs (Beresford et al., 2008). The presentation will discuss the relevance of language and communication in development and its link to mental health, and challenges to diagnostic overshadowing/differential diagnosis in deaf children and young people (particularly when considering neurodevelopmental disorders such as autism and ADHD).

The presentation will also give an overview of the structure of National Deaf Child and Adolescent Mental Health Service (ND-CAMHS), which was launched in England in 2009 and has four main specialist centres, providing community care, in London, York, Dudley and Taunton, as well as six additional local outreach centres. The service provides highly specialised mental healthcare, thorough assessment and interventions for severe to profoundly deaf people, below the age of 18, with serious child mental health problems (Wright et al., 2012). South West London & St Georges Mental Health NHS Trust (SWLSTG), who provide community care for service users in London and the South East of England, also have an inpatient centre which covers care for all of England (NHS England, 2013). The service also supports the families of service users and hearing children of deaf adults.

Developmental Trauma Recovery Programme: A Video-Based Parenting Intervention for Children and Young People of Developmental Trauma

Hayley McCann, Assistant Psychologist, Bradford CAMHS Looked-After and Adopted Children (LAAC) Team

There are many benefits to the caregivers of children and young people who have experienced neglect, physical and/or emotional abuse attending a parent/carer only, trauma-informed parenting intervention (Nice Guidelines, 2021), as caregivers provide a key role in the child's healing and recovery. The aim is to provide the child with a different experience of parenting so they can feel secure within their families (Golding & Hughes, 2020).

The presentation will outline the Looked After and Adopted Children Team's unique Developmental Trauma Recovery Programme (DTRP), developed after using video platforms to provide a parenting programme, and support caregivers during the Coronavirus pandemic. Trauma-informed psycho-education videos were developed to encompass education about the impact of early trauma, an interactive and supportive element based on mindfulness, and advice and strategies about how carers/parents can help their child heal and repair. These strategies were then discussed in weekly sessions with an assigned therapist key worker.

The presentation will provide an overview of the three main elements of the videos, and an initial overview of how the DTRP has been received by carers and parents. Information will be shared on how working with carers/parents, provides a foundation to other therapeutic interventions through first supporting and building up the caregivers knowledge on developmental trauma, attachment, therapeutic parenting and PACE, based on the work of Kim Golding, Sarah Naish and Dan Hughes (Golding & Hughes, 2020). In addition, parental self-care, through mindfulness will be highlighted how carers/parents remaining regulated can be beneficial for continuing to care and be present alongside their child (Ortiz & Sibinga, 2017).

The Importance of Identifying and Supporting Young Carers Accessing Community CAMHS

Hannah Fox, Patient Representative, QNCC

According to the Children's Society prior to the pandemic over one third of young carers reported having a mental health problem. The effect of the pandemic is likely to have increased this figure drastically with over half of young carers also reporting they have not had a break since the start of the pandemic. This is in addition to schoolwork and other life commitments.

The topic area will draw on my own experience/young person experiences as a young carer in CAMHS whilst raising awareness of statistics of young carers with mental health problems and the issues they may face whilst accessing healthcare in the community, the effectiveness of early identification/intervention within community services (as this is often the first point of contact and common age mental health problems first appear), what CAMHS services can do to help support young carers in the short-term and the long-term benefits of preventative mental healthcare/supporting a brighter future for young carers as caring responsibilities are often long-term and young carers often need ongoing support into adulthood.

Fostering Developments Project Team – Final Title TBC

Dr David Hinchliffe, Lead Child Psychotherapist & Social Worker (CAMHS), Stephanie Jones – Child Psychotherapist and Social Worker (CAMHS), Dr Rosemary Richards – Child, Adolescent & Family Psychiatrist and CAMHS Clinical Director in Gloucestershire

The Fostering Developments Project is a proactive cross-agency undertaking which aims to provide newly approved foster carers in Gloucestershire with mandatory therapeutic consultation support in their first 12 months of becoming carers. The project has a focus on increasing the psychological and psychodynamic understanding of foster carer about the impact of ACEs upon children's relational expectations on them as parental objects.

In addition, the Fostering Developments Team provide monthly clinical group supervision to approximately 100 fostering social workers who support and recruit foster carers in Gloucestershire in an attempt to consolidate the learning from consultation and increase their confidence in providing therapeutic support to their carers.

Working at Multiple Levels: How We Have Tried to Reach our Looked After and Asylum-Seeking Young People and How They Have Shaped Us

Zoe Given-Wilson, Lead Clinical Psychologist, LAC/Refugee CAMHS, Tavistock and Portman NHS Foundation Trust

Young people in care have had many difficult early life experiences (ACEs) often involving people who have harmed them, neglected them, or both. As a service who wants to build relationships with these very young people we must work creatively in a trauma-informed way to meet them. The presentation describes some of the challenges of working with unaccompanied asylum-seeking minors and children in care and discusses these dilemmas interactively with the conference attendees. The presentation will also consider the creative ways the service has tried to meet their needs with different layers of intervention including; Co-created focus groups on service improvement, Co-created animations to address commonly mental health difficulties (in multiple languages), and Integrated initial assessments for newly arrived unaccompanied asylum seekers.

General Information

Speaker presentations: Presentations will be sent out to all delegates by email after the conference.

Certificates of attendance: A certificate of attendance will be emailed out to all delegates after the event upon request. Please email the QNCC team at QNCC@rcpsych.ac.uk

Twitter: Follow us on social media: [@rcpsychCCQI](https://twitter.com/rcpsychCCQI) and use the hashtag [#QNCCforum](https://twitter.com/hashtag/QNCCforum)

Feedback forms: A feedback form will be in your delegate email. Please complete and return it as soon as possible. It helps the Project Team improve your experience.