

June 2015



***An initiative to promote best practice in meeting the  
mental health needs of children and young people***

## 1 Introduction

1.1 ***Making Sense*** is a new initiative by the High Needs Collaborative – an alliance of mental health charities Hafal, Bipolar UK, and the Mental Health Foundation, supported by Diverse Cymru - aimed at improving support for children and young people in Wales with a mental illness.

1.2 In the short-to-medium term the Collaborative is keen to support the Welsh Government's Together for Children and Young People programme which seeks to improve services for young people through a speedy review and refocus of services. ***Making Sense*** will contribute to this programme by putting across the ideas of our own local networks and contacts and facilitating further consultation this summer with all young people concerned.

1.3 The Collaborative also welcomes the Welsh Government's announcement of £7.6 million per annum to support the mental health needs of young people. We offer our support to the Government in identifying how to invest this new funding most effectively – and based on what young people and families tell us.

1.4 We offer this short paper as an initial response to the Government's programme and we will provide further responses by the end of September this year, including results of our consultation with young people and their families.

1.5 We believe there is an urgent need to reform and refocus services for children and young people in order to clarify who is responsible for providing support at different levels of need and, through that clarification, to make a major improvement in services for those in highest need.



1.6 The Collaborative is mindful of the need to ensure that young people and their families in need of support should not experience delay and inconsistency because of poor communication between services. This concern, however, sits alongside an *equal concern* to ensure that the different agencies engaged in supporting young people apply consistent and appropriate procedures in determining which agency is best placed to provide support, depending on each young person's circumstances.

## 2 Key Issues and Principles

2.1 We note the massive increase in referral to CAMHS for assessments: we agree with the Minister of Health Mark Drakeford AM that many of these referrals are not appropriate and lead to:

- frustration for those children, young people and their families who learned that they have been sent down a route which cannot meet their needs
- frustration for CAMHS staff in finding time and money being soaked up in assessments which need not have happened
- harm for those young people who really do need the mental health expertise of a CAMHS service, but will find their way to that service frustrated by so many others who will turn out not to have needed it

2.2 We further support the maxims set out by the Minister, of:

- Maximum diversion
- Minimum intervention
- Systems management

2.3 We cannot emphasise too much that the inappropriate, upward referral of young people towards specialist mental health services is not just inefficient but also damaging to those young people.

2.4 *There is no dilemma here* – inappropriate referral harms both those young people who do not turn out to need specialist help and those who do.

## 3 What's Needed

3.1 *Making Sense* calls for improvements in mental health services for children and young people in Wales, specifically:

- (i) **The Welsh Government needs to refocus mental health services on those with the highest needs, while encouraging lower tier services to meet the needs of the majority of young people:**

General young people's services such as schools and youth services must address the problems of the majority of young people who get into difficulty, making use of



their own staff, in-house (especially school) counselling services, and awareness, peer support and prevention activities ; GPs should provide for those with more serious problems, making use of primary care-level services including counselling; Child and Adolescent Mental Health Services (CAMHS) should support those with the most severe problems.

**(ii) Waiting times for children and young people to be assessed by CAMHS need to be reduced:**

Many young people are waiting for several weeks to be assessed, causing unacceptable distress to them and their families and raising levels of risk. Some young people need same-day attention; others should be seen within just a few days. And where the assessment indicates this appropriate services should be provided promptly following the assessment.

**(iii) CAMHS need to raise their game in providing services to children and young people in high need:**

New standards in treatment need to be established and delivered for those assessed as needing specialist (secondary level) support, building on the holistic Care and Treatment Plan prescribed by the Mental Health Measure and its Codes of Practice. All “life areas” specified in the Measure need to be considered and all relevant agencies need to be coordinated to deliver on Plans: this includes non-mental health agencies but responsibility to coordinate the overall response for *these* young people lies with CAMHS.

We would particularly point to the Guide to Care and Treatment Planning published by Hafal with the support of Collaborative partners which provides a systematic framework for care planning and an effective template for improved standards.

**(iv) Young people should not face disadvantage when they reach 18:**

We need to end the abrupt and disruptive transition from CAMHS to adult services. Through Care and Treatment Plans, which apply to both under and over 18s, young people should see continuity of high quality support over 18. Protocols are also required to enable staff to work across the age divide to ensure this continuity of care.

**(v) Carers should be supported:**

The carers and family of young people with a serious mental illness are often the most important part of the team helping a young person. Mental health services need to establish and deliver a new standard of communication, engagement and support for carers which recognises this.

We would particularly point to Hafal’s recently revised and republished 10 Point Plan for Carers which provides a framework for identifying areas of support required by carers.



## 4 How Can this be Achieved?

4.1 The Minister's third maxim – **Systems Management** – holds the answer. At present, in spite of the significant investment and growth in non-specialist support below CAMHS (particularly counselling services in schools and primary care mental health schemes under Part 1 of the Mental Health Measure), the increase in referral into specialist services suggests a lack of or clarity or confidence in lower tier services about which young people's needs are actually best met by those lower tier services.

4.2 Clear pathways need to be established which *intervene only where necessary, systematically deploy support at the lowest appropriate level, and always prioritise diversion from higher level services where possible.*

4.3 In addition a *clear pathway needs to be established into adulthood* which ensures that there is no disruption of support at age 18 but rather there should be an appropriate *evolution of support appropriate to each individual's needs as they grow up.*

4.4 There is also a need to *examine closely practice within CAMHS, benchmarking best practice and ensuring the most efficient and effective use of this service.*

4.5 And there is a need to focus on how services are delivered to specific groups, in particular to ensure that *BME young people are not escalated into higher level services because of a lack of earlier support.*

4.6 Finally, it is vital that *the Government's new funding is targeted effectively* – on those with highest needs and on those who are at the early stages of psychosis or other serious mental illness – and caution is needed to ensure such investment is not misinterpreted as a reason to refer more young people into mental health services.

## 5 Our Next Steps

5.1 The High Needs Collaborative will work closely with the Welsh Government in support of its Together for Children and Young People programme. We will engage in the rapid review now underway through the planned events and elsewhere.

5.2 We will undertake a consultation during the summer through our local networks and social media in order to assist young people and their families in identifying their priorities and specifically the key issues of appropriate levels of service, transitions between services by reason of needs and age, and the support needed for carers and families. We will report on that consultation by the end of September.

5.3 We will research and publish our own advice on what young people and families should expect of different levels of service – based on the experience of young people and families; we will publish initial advice by the end of September.

5.4 We will give particular attention to the *development of pathways of care* under the Government's Together for Children and Young People programme – we believe these lie at the heart of that programme and are essential to improving the timeliness and quality of care.



## 6 More Information

6.1 If you want more information or to get involved please contact the High Needs Collaborative c/o:-

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