



NATURE AND SCOPE: CAMHS OPERATIONAL GUIDANCE

SUBJECT: CHILDREN LOOKED AFTER AND ADOPTED CAMHS

DATE REVIEWED: MAY 2023

**NOTTINGHAMSHIRE HEALTHCARE NHS TRUST SPECIALIST SERVICES CAMHS
NOTTINGHAMSHIRE COUNTY COUNCIL, CFCS**

CLA CAMHS OPERATIONAL PROCEDURE

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CLA CAMHS OPERATIONAL GUIDANCE

1.0 INTRODUCTION

- 1.1** The County CAMHS Children Looked After & Adoption team was established in 2001. The team was restructured in 2007 and has developed into the service currently offered. The Child and Adolescent Mental Health Service (CAMHS) provide a service for children 0 -18 years, where there are concerns about their emotional well-being or mental health.
- 1.2** The County Children Looked After Team and Adoption Team is jointly commissioned by Nottinghamshire County Council and Nottinghamshire health care trust. The team is based within the Specialist CAMHS Service, Specialist Service Directorate, Nottinghamshire Healthcare NHS Trust.

2.0 AIMS OF THE SERVICE

- 2.1** The team is commissioned to specifically work with children & young people who are looked after and living away from their birth parents, in the care of Nottinghamshire Children's Services. These children and young people may be living with foster carers or living in residential care; or in supported accommodation. The team also offers specialist consultation and support to children/young people who have been adopted, and their families.
- 2.2** We are a multi-disciplinary multi-agency team whose purpose is to assess the mental health needs and promote the psychological well-being of:
- 2.2.1** Young people within Nottinghamshire who are living with foster carers or living in residential care; or supported accommodation.
 - 2.2.2** Young people who have been have been adopted, and their families, or for whom adoption is being explored / planned.
 - 2.2.3** Young people who are looked after or adopted and placed in Nottinghamshire by other Local authorities/Health Trusts

3.0 SERVICE PROVISION

- 3.1** Referral Pathway to access a service from CAMHS CLA & Adoption team
- 3.2** An initial CAMHS consultation with the young person's social worker is the referral pathway to accessing a service from the CAMHS CLA & Adoption team.

The child/young person's Social Worker is asked to complete a referral form; to access a copy of the most up to date referral form please email

CAMHSCountyCLAReferrals@nottshc.nhs.uk .

Following the consultation, the CAMHS clinicians will provide a written record of the consultation detailing the ongoing CAMHS plan. This information is also shared with the child/young person's GP and the Healthy Families Team.

- 3.3** Access- to ensure ease of access to the service for initial CAMHS consultations are available each week for social workers and booked in advance. These can take place either virtually via MS teams or face to face. Social worker will be asked which they prefer at the time of being offered an initial consultation. Monthly consultations take place with the three mainstream Nottinghamshire County council residential homes. These sessions take place with key staff at the residential home and the social worker is also invited to attend.
- 3.4** Urgent Referrals - To access support for a child young person following an episode of self-harm, the young person will need to attend their local hospital Accident & Emergency Department to be assessed by the on-call team. A follow up appointment will be offered based on the assessment of the on-call team.
- 3.5** Follow up & Ongoing consultations- Following the initial consultation with the social worker, further consultations are arranged and may include the foster carers for the children/young people, education staff and/or other relevant people from the child young person's network.
- 3.6** Dependent on where the child/young person is in the adoption process, the child/young person's network can vary for adoptive families.
- 3.7** The consultation model offers the network around the child a space to reflect on the complex issues they are dealing with; and it provides the opportunity for a shared understanding of the powerful emotions and experiences of the young person. It provides the opportunity for containing anxieties in the network generated around the child. It offers an alternative to therapy for a child who may not be in a secure long-term placement, but where some form of intervention is needed to help the child reach this goal and improve their long-term prospects.

3.8 Looked-After Children and Young People (G) Barriers and facilitators for promoting physical, mental and emotional health and wellbeing of looked-after children and young people and care leavers NICE guideline NG205 issued October 2021 NICE; identified: Multiagency working with mental health services and specialist teams:

Usefulness of multiagency working. For example, a mental health consultation service for carers or social workers, one stop shop for children in care, specialist teams for trafficked children or unaccompanied asylum seekers, Benefits for continuity of care as the likelihood of a consistent member of the team higher. However, blurring of roles and unreasonable expectations can be an issue. It was often difficult to get all parties “to the table”. With healthcare professionals also carers preferred to be treated as fellow professionals who bring valuable information to the table and who should be fully informed”. “Child psychotherapists themselves felt that primarily their focus was about offering a thoughtful, consultative capacity to the professionals who hold responsibility for the child, rather than leaping into individual therapy that was so often requested”

3.9 Ongoing work - We tailor our model of intervention to meet the individual needs of the child and their network, based on the evidence base; NICE guidelines; the views and skills of the client and their family/foster carers; and practice-based evidence.

3.10 Beginning with the initial assessment and plan of intervention formulated at the Initial CAMHS consultation, there is an ongoing process of individualised psychological formulation and intervention, reviewed with the network via the consultation process. This process may identify and agree the need for additional interventions with the young person and their network.

3.11 Alongside ongoing consultation, the following additional integrative interventions may be introduced: fostering attachments; therapeutic parenting or attachment focused family-based interventions such as Theraplay; Dyadic Developmental Psychotherapy or in Eye Movement Desensitisation and Reprocessing (EMDR). The team can also provide specific diagnostic assessment, as well as the prescribing and reviewing of medication. Individual play therapy, art therapy and psychotherapy are also offered when assessed as appropriate to meet the formulated need.

3.12 Theraplay

The services aim is for all team members to complete Theraplay training in addition our aim is to have 1 or 2 members completing their accreditation in therapy.

3.13 Dyadic Developmental Psychotherapy (DDP)

The service aim is for all team members to be trained in DDP. A lot of the team members are already level 1 and 2 DDP trained. DDP is an 'attachment' focused 'family' based intervention.

3.14 Fostering Attachments Group

CAMHS CLA and Adoption team continue to provide a therapeutic group for foster carers. This group has been running successfully for a number of years and is highly valued by participants. The aim of the group is to support foster carers to increase their understanding of how to meet the unmet emotional needs of the young people they are caring for.

3.15 CAMHS CLA and Adoption team offer a Non-Violence Resistance (NVR) group to foster carers and adopters. This group again is highly valued by participants

3.16 Support for residential staff

CAMHS CLA and Adoption team have recently developed a course similar to the foster carer course for residential staff. It is hoped that this will be available following a trial period with selected residential homes

4.0 TEAM STRUCTURE

The CAMHS CLA and Adoption team is a multi-agency team which is made up with some staff employed by Nottinghamshire County Council and others by Nottinghamshire Health care trust. The team is a multi-disciplinary made up of professionals that have undertaken different types of training. The team is currently consisting of: Clinical psychiatrist, 2 clinical psychologists, 2 specialist social workers, therapeutic support worker, 2 Nurses, Drama psychotherapist, Art Psychotherapist. The hope is to also employ an Occupational Therapist within the team. The team is supported by an administration team. The team is led by a Team Manager (who is social work qualified).

5.0 IMPLEMENTATION

This procedure will be implemented by communication to all responsible staff through team meetings and induction process.

6.0 TRAINING

All clinical staff to be made aware of procedure during induction to the clinical team. Operational Managers will ensure that all operational staff are familiarised with the requirements of this local procedure and the specific implications for their role.

7.0 TARGET AUDIENCE

7.1 All staff working with Looked After and Adopted children

8.0 REVIEW DATE

8.1 April 2024