



**Cyfarwyddwr Gwasanaethau Cymdeithasol / Director Social Services**

*Jenny Williams*

**Gwasanaethau Plant a Theuluoedd / Children and Family Services**

*Pennaeth Gwasanaeth / Head of Service – Kate Devonport*

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Committee Clerk  
Children, Young People & Education Committee  
National Assembly for Wales  
CARDIFF BAY CF99 1NA

Gofynnwch am / Please ask for: **Kate Devonport**

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Ein Cyf / Our Ref:

Eich Cyf / Your Ref:

Dyddiad / Date: **10<sup>th</sup> February 2014**

Dear Ann Jones,

**Re: Inquiry into Child and Adolescent Mental Health Services**

I am writing to provide Conwy County Borough Council Children's Services response to your request for responses on key issues.

**1. The availability of early intervention services.**

We are aware of developments which are occurring locally, these are being delivered largely through school networks to children universally

**2. Access to CAMHS**

It is our experience that children and young people still have to wait significant periods of time (many months) for CAMHS services. This is being masked by practices of managing the waiting list through offering an initial screening appointment; after which children experience a further period of delay before they are able to access the intervention / specialist service which has been identified for them.

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

We feel that this is very poorly developed. Individual practitioners, at a senior level within CAMHS, meet regularly with operational managers in Children's Services and interpersonal relationships are good at this level, though a clear shared strategic vision for partnership working has not developed.

At a practice level frustration is high due to cases not being accepted by CAMHS due to their requirement that children and young people need to be in secure placements before they are offered treatment. Additionally CAMHS locally do not accept that attachment disorder is a condition that they are able to offer a service for, and similarly they define conditions as "personality disorder" for which they do not need to offer a CAMHS response.

It is our experience that the clinical intervention preference of the CAMHS practitioners is determining eligibility for CAMHS services, rather than the needs of the local population. At a broader level therefore we have not made sufficient progress in defining which parts of our vulnerable population groups we should be collaborating on to achieve strategically negotiated improvements. We accept that social care has an equal obligation to develop these agreements.

**4. Regional variations.**

We are aware anecdotally of significant variations across North Wales in joint planning, design and delivery of services, but we have not sufficiently co-ordinated nor developed our information base on this issue.

**5. Emergency Services**

We are aware of good local services for people needing emergency services as a result of self harm and substance abuse.

We hope these comments are of help to your committee.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Kate Devonport', written in a cursive style.

Kate Devonport  
**Head of Service**