

Children and Young People Committee

CYP(4)-15-12 Paper 4

Response to the Children and Young People Committee: Inquiry into Adoption and CAMHS

The term Child and Adolescent Mental Health Services (CAMHS) is taken to mean all of the services provided by all sectors that impinge on the mental well-being, mental health, mental health problems and mental disorders of children and young people including Local Authority, Education, Health and the Voluntary Sector. Commonly, the term CAMHS is taken more narrowly to imply those specialist services provided, mainly but by no means exclusively, by the NHS. The term ‘**Specialist CAMHS**’ as shorthand to depict those services that have a particular role and expertise relating to child and adolescent mental health.

Looked after and adopted children have the same access to Child and adolescent mental health services (CAMHS) as any other child who presents with a disorder that falls under the remit of a CAMH service.

In the context of the assessment and treatment of psychiatric and neuro-developmental disorder, the Royal College of Psychiatrists identify the following as being the remit of specialist tier 2/3/4 CAMHS:

- psychosis
- depressive disorders
- attention-deficit hyperactivity disorder (ADHD)
- autistic-spectrum disorders
- Tourette’s syndrome and complex tic disorders.
- self-harm and suicide attempts
- eating disorders
- obsessive–compulsive disorder (OCD)
- phobias and anxiety disorders
- post-traumatic stress disorder (PTSD)
- mental health problems secondary to abusive experiences
- mental health problems associated with physical health problems and
- somatoform disorders
- behavioural challenges associated with a learning disability

In addition to this, Primary Mental Health Workers can be contacted by professionals from any agency/background who have a concern about a child’s emotional, behavioural or mental health issue. Parents/carers who have a concern can also contact the service for brief advice/consultation.

The value base of Specialist CAMHS is family oriented: this enables families and carers to be partners in the treatment and care of their children and young people. In addition to providing treatment and care directly to the children and young people, a key objective of the service is to help parents/carers better understand, manage and care for children when they have mental health or psychological problems.

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The ethos of such a family oriented service should be based upon a commitment to achieve good working relationships with all relevant individuals and agencies involved in the care and treatment of an individual.

There is an acknowledgement that the Specialist CAMH services are not uniform across Wales. In particular, the input into the CAMHS teams provided by social services has gradually been withdrawn over the past 5 years. This has left a gap for the NHS that has affected the dedicated provision to adopted and looked after children.

Some Children & Young People Partnership plans have developed dedicated posts to meet the attachment needs of children under the care of the local authority to try and bridge this gap. They have not chosen to widen the remit to include adopted children at this moment although the individuals are sometimes included in training and preparation for prospective adopters.

In response to the statement that: *'some parents have also suggested that some CAMHS staff are not 'adoption aware' – and have a limited understanding of the behavioural difficulties and conduct disorders associated with the early experiences of children who later go on to be adopted.'* All senior staff in a specialist CAMH service are highly trained professionals who are experienced in dealing with children and young people who are both adopted or looked after. Competency in such is required by the Royal College of Psychiatrists. Each service employs Child psychotherapists within the CAMHS teams who provide therapy around attachment disorder, a long term therapy. However the evidence base for effectiveness is mixed.

Specialist NHS CAMH services assess each child on their need and try and ensure equity of access for all including children in special circumstances such as those in those in the youth justice system, looked after and adopted children, learning disabled and those whose parents have mental health problems.