

Parent Network Meeting – Mental Health and Well-being

East Cambs, 17 June 2015

Ely Library, Ely

Attendees

Parents: 15

Service Providers: Jo Rooney, Meredith Teasdale, Annemarie Superville, Barbara Phillips, Caroline Webb, Claire Acklam, Harlee Scott, Jo Fallon, Jo Laur, Patricia Finnimore, Paul Howard, Sarah Spall, Victoria Durack, Holly Gilbert, Eloise Riches

pinpoint: Eve Redgrave, Lenja Bell, Jeannie Ambrose

Overview

The topic for these network meetings was Mental Health and Well-being with an aim to gather parents' views around what types of early intervention services would help families. Jo Rooney, Commissioning Manager from the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) gave an update on what is happening locally and nationally around mental health services. A copy of the presentation can be found on the pinpoint website: <http://www.pinpoint-cambs.org.uk/pinpoint-reports>. This was followed by group work with parents, service providers and commissioners to answer four questions on service provision. After the group work, each group fed back their key points which had been captured on flip chart paper and are recorded below. Parents had a chance to talk individually with each other and service providers over lunch. After lunch, pinpoint ran a well-being session for parents. For more information about this session, see: <http://www.pinpoint-cambs.org.uk/news/blog/mental-health-well-being> .

Feedback from group work

1. What services do you value and think work well? Why?

- Appropriate integration works
 - Parent Partnership
 - Short Breaks
 - Home-Start
 - Early Years
 - Family Support Workers – locality services (x3), enabling access to information and services, via CAF

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- Why? Age embracing, nucleus – working together, integration
- Parent to parent information
- Single point of referral
- Carers Trust – Saturday group, staff acceptance and able to manage
- Papworth Trust
- Parent support groups
- Sibling support groups / young carers
- Voluntary sector i.e. pinpoint group meetings and information provided
- School that has provided on site access to counselling and mental health support – on tap (fee paying school)
- GP's good but limited as can't force agencies to follow through with referrals
- Schools / SENCo (advised of CAF)
- Children's Centre
- Someone to talk to
- Help around schools transition

2. Where are the most suitable places to receive services?

- Home (x 3) (safe) / flexibility (needs dependent)
- School (x 3)
- Clinic
- GP (x 2), if progression afterwards
- Community centres
- Issues: safety, confidentiality, neutral
- Anywhere and everywhere in the community
- A single point location per person would be good
- Public transport accessible
- All over not just in areas with high numbers of 'vulnerable families'
- Pre-school (children's centres)

3. How can we improve access to services?

- Role of GP's – initial screening
- School nurse
- SENCo
- Teacher training, teaching assistants
- Parent voice
- Single point of information
- Services need to NEEDS LED (not diagnosis)

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- Mental health issues should be treated separately i.e. if a child already has a diagnosis it should not exclude them from mental health care
- Face to face triage with child rather than over the phone with adult
- Cohesive working between professionals
- Better services lower down the chain that would meet the need at a lower level i.e. counselling service
- Treat individual need rather than diagnosis
- Children's centres to increase threshold beyond 5 years
- Reduced waiting times / periods

4. How can we do things differently?

- See above
- Educational support
- Emotional and social resilience = learning coping
- Support and training to professionals – early years, school, youth services
- Lifetime pathway for LD – positive behaviour support
- Better on the ground staff with GP's, schools
- Use nurses etc. you've got
- Facilitate schools to access services as counselling
- Listened to / believed
- Schools work differently – shouldn't be pot luck, training in schools
- Many services stop at age 5 (expecting school to take over); service to be continued beyond this or ensure schools have resources

These comments were also fed back:

- Problems
 - Not early intervention; not responsible; service remit
 - Assessment at appropriate time
 - Criteria for support
 - Too many CAMHS teams with different ways of working – don't know where to go
 - No support services when do not meet thresholds
 - Sibling support needed
- Ideas
 - CAMH worker in community to support GP
 - Good practice: Millfield Primary School in Littleport has a person working on behavioural support, has made a huge difference in her son being able to cope

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- Good practice: Comberton Village College has prioritised resources for full time school nurse, family therapy, and safeguarding lead

Next Steps

The feedback from the group work will be collected and analysed across the five network meetings and shared with the County Council, CCG and Cambridgeshire and Peterborough Mental Health Trust (CPFT). It will feed into the CCG Transformation process and support work around improving how early intervention mental health services are offered by the County Council, health services, the voluntary sector and schools. Pinpoint will update parents on how this work is taken forward.