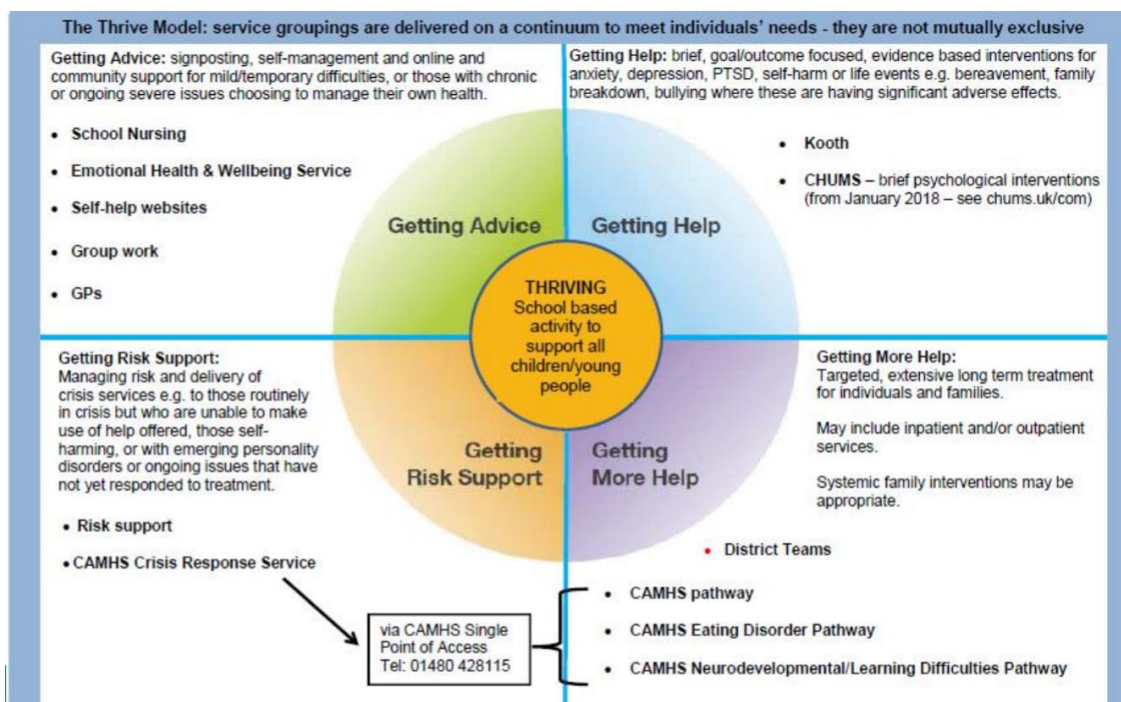


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Fenland Network Meeting November 2017 – Social and Emotional Mental Health (SEMH)

Three meetings were held across Cambridgeshire with parents, local authority commissioners, local authority managers, mental health services, schools and partner organisations. The topic for these meetings was Social and Emotional Mental Health. The aim was to give information about the new transformation in mental health services, gather feedback on this and look at where there were perceived gaps in services. Sharif Al-Rousi, Children’s Commissioner, presented about the new THRIVE model (See diagram below) CAMHS (Child and Adolescent Mental Health Services) talked about what training is available to those working with children and a representative from SEND (Special Educational Needs and Disability Team specialist services explained more about what they do in schools. In groups, we then discussed who had heard of any of the new initiatives brought about from the THRIVE model such as www.keep-your-head.com and KOOOTH and what we thought the gaps in service would be. Parents were also able to raise individual concerns with service providers. The following notes were taken from the Fenland meeting held on Wednesday 22nd November 2017 in Wisbech. A full report from all three meetings can be found <https://www.pinpoint-cambs.org.uk/improving-services/pinpoint-reports/>

THRIVE – Sharif Al-Rousi



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On a national level, there is not one language that adequately works for parents, service providers and children/ young people around explaining social and emotional, mental health. Work needs to be done in this area. There is a huge spectrum of social and emotional mental health from one end of the spectrum being “a bad day” to the other end of the spectrum where you may need in patient care for a serious mental health condition. The THRIVE model is a different way of doing things, moving from tiers and thresholds to making sure everyone fits into the model at all times.

Most children and young people can be seen to be ‘Thriving’: every person has anxieties and bad days but on the whole, these do not impact on your ability to function, e.g. get to school, keep relationships etc. If these feelings do start to impact, then to start with you may just need some specialist advice or a short, one-off intervention.

The ‘Getting Advice’ quadrant encompasses those needs. A young person or family may need a discussion with the GP or may need some information. The Keep Your Head website has been set up to try and pull together as much information and details of helpful organisations as possible(www.keep-your-head.com). There is also KOOTH.com which has been designed specifically with young people in mind: it provides information and is an online forum. Minded and Young Minds also provide advice and information for young people and families. If this is not enough for a young person, then they may need an evidence-based treatment.

The ‘Getting Help’ quadrant is for young people who need more treatment and involves evidence based treatments: CBT (Cognitive behavioural therapy), for example, is available here. KOOTH.com offers counselling (through online chat and skype) for young people. A new service called CHUMS provides mental health support in the community using counselling, CBT and family support, as do more established organisations such as the YMCA and Centre 33. The website, MindEd, provides parent training and CAMHS have free training around mental health issues for anyone working with children and young people. The Early Help Assessment (EHA) is a tool that can start the process of help for a family and would be introduced here. If these interventions are not enough, a young person may need a more intensive treatment.

‘Getting More Help’ is for young people who may need more than what is offered in ‘getting help’ and includes the CAMHS pathways. The core CAMHS pathway covers anxiety, depression and self-harm, which is for up to age 18 and involves a thorough transition between 17-18 years. There is an eating disorder pathway that covers young people up to the age of 19. There is a Psychosis pathway and the final one is for neurodevelopmental disorders such as Autism and ADHD 0-18 years. These are

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specialist services for those most in need. This quadrant also includes higher care such as in-patient treatment and services like the Croft.

The last quadrant is 'Getting Risk Support' can be for young people who are not able or ready to engage in any of the other quadrants. The new mental health helpline (111, option 2) was created for this as well as more staff being available for mental health help for longer in A and E departments.

New Emotional health and wellbeing practitioner post have been created. These roles will operate in the different districts of the county and be able to help navigate, signpost and support around social and emotional mental health. Details about how to contact and refer people to these workers will follow.

Rachel Ewan, from the Cambridgeshire and Peterborough Foundation Trust outlined what training was available for those working with children and young people from CAMHS. This included the camhs foundation model and other funded training opportunities. A representative from the SEND specialist services informed parents about the roles that make up the service e.g. Educational Psychologists, specialist teachers and specialist practitioners. The criteria and thresholds for intervention were also shared.

Responses as to how many parents and organisations had heard of the following services:

Kooth.com – None

Keep-Your-Head.com – None

The Thrive Model – None

CAMHS - Most

Some had heard of Centre 33

Recorded notes from the meeting and discussion around the gaps in service

- Information and communication.
- Home schoolers.
- Parents isolated and no access to information.
- Primary schools need help with ideas to deliver social skills mindfulness to kids with neuro-developmental conditions.

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- Emotional literacy needs to be taught to kids with neurodevelopmental conditions in school. They need help with programmes. This will pre-empt/prevent issues later on.
- Whole family approach.
- Maybe Team Around the Child meetings should remain open. Fewer meetings to check in.
- Health and education, communication is worse across borders.
- Travel issues and location issues to access CAMHS.
- Ongoing support for developmental disorders and anxiety disorders which they will continue to have if the developmental disorder is not taken into consideration.
- CAMHS closing local clinics so you can only see them at Doddington.
- Not everyone has a TAC meeting.
- Primary school children.
- Very different between counties.
- Support/services don't move counties.
- Difficulties in accessing Early Health Care assessments when educated in Norfolk school.
- Accessing Social and Emotional Mental Health support at school when it is affecting academic achievement is very difficult.
- Understanding academic achievement of chronological age.
- Therapists should come out to where the children are e.g. Little miracles centre.
- Advice is not consistent. YMCA (signposted to by doc) does not take referrals for 10-year olds, neither does Centre 33. CHUMS are not taking referrals yet.
- In Norfolk there was more support, this hasn't been continued in this county and we keep getting passed from one service to another.
- GP to school nursing team to family worker not one helping and this took months. Eventually had 6 very successful counselling sessions which nipped anxiety in the bud and didn't escalate further. Could have been a lot worse.
- Too much focus in schools on academic subjects. Need more drama, art, music to express themselves and promote wellbeing.
- Need a link practitioner who works with the schools.
- Need help with behaviour at home and not a school.
- What pathway are children with Autistic Spectrum Disorder on when they have mental health difficulties.
- How do you access the emotional health and wellbeing practitioners?
- Need early intervention.
- Proper mindfulness in schools. Not just colouring in.
- Where do places like the croft fit into the model.
- Joining up early help with health.
- Look at the whole child and family.
- Early intervention.

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- Identified successful therapies (play therapy) withdrawn from lack of funding.
- Lack of information of services.
- Lack of interventions available to:
 - Parents
 - Schools
 - Doctors
- TAC closing without resolution.
- Lottery as to if you get offered help depending on professional's awareness.
- Need parent training.
- Early intervention.
- Schools need help and training.
- What is there for the under 11s?
- CAMHS should link with existing parent groups like Little Miracles to meet the children who can't engage.
- What do we do with an autistic child with anxiety. The treatment cannot be the same as a neurotypical child.
- Skill up parents too.
- What do you do if the child can cope with school but goes to pieces at home?
- Behaviour masks issues. There is always a reason.
- Schools need SEMH literacy.
- GP knowledge around conditions and services is lacking.

A joint report from all three meetings that highlights the main points can be found here <https://www.pinpoint-cambs.org.uk/improving-services/pinpoint-reports/> The main report will be fed back to managers and commissioners of local authority and health services.