

<b>CREATING OPPORTUNITIES AND TACKLING INEQUALITIES SCRUTINY COMMITTEE</b>	<b>Agenda Item No. 8</b>
<b>20 JULY 2015</b>	<b>Public Report</b>

## **Report of the Corporate Director for People and Communities**

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### **SUPPORTING THE MENTAL HEALTH NEEDS OF CARE LEAVERS**

#### **1. PURPOSE**

- 1.1. This report provides information to Members about the nature of mental health support for care leavers, including analysis of where there are gaps in the current provision. The report identifies what steps are being taken to address the gaps identified, within the context of a highly pressured funding context.

#### **2. RECOMMENDATIONS**

- 2.1. Committee is asked to note the contents of this report.

#### **3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY**

- 3.1. Creating Opportunities - Tackling Opportunities
- Supporting vulnerable people

#### **4. BACKGROUND**

- 4.1. Child and Adolescent and Adult Mental health services are areas where there have been longstanding pressures in terms of the amount of funding available to meet the demands on services.
- 4.2. For care leavers, pressures on services to meet need can also be compounded by the transition between Child and Adolescent Mental Health [CAMH] Services and Adult Mental Health services at age 17-18 years.
- 4.3. This report sets out some information about the number of young people leaving and who have left care who have been affected by pressures in the two service areas, and the steps being taken to help to address these.

##### **Care Leavers impacted by delays in Service Provision**

- 4.4. The Leaving and Aftercare Service estimates that over recent months, ten young people have been affected by delays in the provision of services by the CAMH service or have been affected as a result of moving between children's and adult mental health services. This impact has been exacerbated by difficulties in sourcing maternity cover for the principal psychologist within the Children Looked After Psychology Service, which has been able to provide a range of support for children and young people looked after and who are or have left care.

- 4.5. Of these 10 young people, 3 have been affected by the difficulties in recruiting maternity leave cover for the Children Looked After Psychology Service. A further young person has been identified as someone who would have benefited from the service had it been available.
- 4.6. Two are now adults and while both have very complex needs including needs that arise from potential or actual sexual exploitation, both have disengaged with adult mental health services, which they are of course fully entitled to do as adults. This is an area where the development of the People and Communities' Directorate is intended to improve outcomes. Young people do not suddenly become no longer in need of support or vulnerable to abuse simply because chronologically they have achieved the age of 18; however, despite continuing vulnerabilities, most do not reach the thresholds for adult mental health or learning disability services.
- 4.7. Another young person experienced delays in assessment and treatment from CAMH services but is now being assessed by adult mental health services following a number of complaints being made on her behalf. Another young person has now been assessed by adult mental health services and details of that assessment are awaited.
- 4.8. One young person has been referred for support in the area where he is placed and is experiencing delays in this area accepting his referral. Our health partners in the Looked After Health Service are escalating this referral so that he gets the service that he needs.
- 4.9. One young person has been affected by the significant shortages in specialist services to support children and young people with neurological disorders such as Autistic Spectrum Disorder and Attention Deficit and Hyperactivity Disorder locally. An assessment of needs has been completed, but a treatment plan has not yet been developed. The assessment was completed in January 2015.

#### **Children Looked After Psychology Service**

- 4.10. The Children Looked After Psychology Service operates in Peterborough in recognition that children in care are much more likely to experience mental and emotional health difficulties than the general child population. The service provides consultation and support to foster carers and adopters as well as individual support to a number of children and young people looked after and is currently managed through the Educational Psychology Service. Examples of what the service has historically offered include:
- Direct assessments and therapeutic input with young people that are fostered, adopted, in kinship or residential placements – including those leaving care;
  - Consultation: offering advice regarding young people to carers/adopters and professionals (e.g. social workers, teachers);
  - Training for carers/adopters and professionals;
  - Running groups for carers and adopters, focused on reducing placement breakdown;
  - Recruitment, assessment and training of potential carers and adopters
  - Assisting in the matching of children to adoptive, kinship and fostering and residential placements
  - Facilitating referrals to local CAMH and other health services, when appropriate.
- 4.11. The service offered has been very well received but has in recent months been impacted by the maternity leave from March 2015 of the Clinical psychologist. Despite numerous attempts to secure a temporary Clinical Psychologist we have been unable to recruit to

the post. In the meantime the Educational Psychology Service has worked hard to absorb demand within their capacity, but there have been additional delays notwithstanding this.

- 4.12. We have now however been successful in attracting a clinical psychologist and forensic psychologist to the service. These specialists offer 9 days per calendar month [to be reviewed as at September 2015] to the service in support of the senior Education Psychologist co-ordinating and managing referrals to the service – less than the full time support previously offered by the Clinical Psychologist, but a significant improvement.
- 4.13. A planning meeting is being convened to include the clinical and forensic psychologist and the Principal Educational Psychologist to prioritise outstanding work for the Children Looked After Psychology service, including the support needs of the 10 young people identified above.
- 4.14. The information below provides some information about the ages of children and young people being supported directly or indirectly by the service during the financial year 2014/15::

- Distribution of **assessment** work across the age ranges

Area of Work	For 0-5 years	For 6-10 years	For 11-15 years	For 16+	For Adults
Assessment	20%	37%	28%	13%	2%

- Distribution of **therapeutic** work across age ranges

Area of Work	0-5 years	For 6-10 years	For 11-15 years	For 16+	For Adults
Therapy	13%	22%	39%	28%	-

- Distribution of **consultation** work across the age ranges

Area of Work	For 0-5 years	For 6-10 years	For 11-15 years	For 16+	For Adults
Consultation	19%	23%	46%	8%	4%

#### Local CAMH Provision

- 4.15. The Children Looked After Psychology Service was never intended to be able to meet the mental and emotional health needs of all children and young people looked after, many of whom will require additional specialist support and treatment from specialist Child and

Adolescent mental Health Services where they are aged 17 or under, or from Adult mental Health Services where they are aged 18 and above.

- 4.16. There has been significant pressure on CAMH services in Peterborough over recent years, with more children and young people waiting longer than the target 18 week timeframe for assessment appointments. In part this is related to increasing demand with specialist CAMH services seeing an increase in referrals of 18% over 2014/15.
- 4.17. Cambridgeshire and Peterborough Foundation Trust and the Clinical Commissioning Group have been working to identify solutions to the waiting time issue, and £150,000 one off funding and £600,000 recurring funding has been identified for 2015/16 to help address capacity issues.
- 4.18. The Government is also committed to investment in mental health services and it is expected that new funding will also become available in due course.
- 4.19. The immediate priority is to tackle the waiting list for specialist CAMH services, which will help improve the service to all children and young people including our care leavers.
- 4.20. In the longer term, there is a need to look at how mental and emotional health needs are responded to strategically including through having single points of contact with the services and ensuring that triaging is working well. Ultimately, the aim will be to invest more in the prevention and early help services to help prevent referral to specialist CAMH services.

#### **Transition between Children's and Adult Mental Health Services**

- 4.21. Some care leavers are affected by the transition at between 17 and 18 between adult and child and adolescent mental health services.
- 4.22. There can be particular issues when services are sought for a young person aged 17 as very often, the Child and Adolescent Mental Health Service is likely to take the view that it would be more appropriate for the young person to be assessed and treated by the adult service so that there is no built-in change of professionals and relationships within a short timeframe of the young person starting to be seen by the service. Adult services do not always agree with this view, however.
- 4.23. For young people already accessing CAMH services, delays in transitioning to adult services can also take place. In part this can be related to different service ethos and thresholds between a children's and an adult service.
- 4.24. In response to issues such as these, a project group has been established with the Assistant Director for Adult Social Care as chair. This group is tasked with working to improve transitional arrangements for young people across a range of services areas including learning difficulties and disabilities and mental health services, and to develop clear pathways for young people transitioning between children's and adult services.
- 4.25. As part of this work, it is planned to establish a 'transitions panel' that will help to plan transitions for young people with complex needs who will continue to need a service as adults. The intention is that planning transition should begin from age 14 so that there are effective early warning systems in place that can help ensure that and resource related issues are planned for well in advance.
- 4.26. As noted above, one of the issues that we are seeking to address is delivering forms of support to vulnerable young adults who either do not reach the thresholds for accessing

traditional adult services, or who are reluctant to engage with such services. Very often, these young adults are very vulnerable and have complex needs, despite not currently meeting criteria for services flowing from any learning disability or mental or emotional health need.

- 4.27. Developing effective transitions and particularly in relation to vulnerable adults who do not meet the criteria for traditional services will likely to be of particular benefit to young people leaving care.

## **5. KEY ISSUES**

- 5.1. Key issues arising from the above include:

- Some young people leaving care have been impacted by difficulties in recruitment of the Child Looked After Service Psychologist to cover maternity leave;
- Some young people leaving care have been affected by the resource pressures and increased demands for specialist CAMH services;
- Some young people leaving care have also been affected by difficulties in current transitional arrangements between children's and adult mental health services;

- 5.2. A number of steps have been taken to help to address these issues. These include:

- The appointment of sessional clinical and forensic psychologists with experience working with children, young people and their families to the Children Looked After Psychology Service;
- Additional investment in CAMH services, with action being taken to address waiting lists being undertaken by CPFT;
- Work to address the issue of transitions being led by the Assistant Director of Adult Social Care.

- 5.3. Taken together, these changes should improve the experience of care leavers and other children and young people in accessing support for mental and emotional health issues.

## **6. IMPLICATIONS**

- 6.1. There have been longstanding shortfalls in mental health services for children and adults across the country for many years – something about which there is an increasing consensus.
- 6.2. Although new funding streams are being identified to help improve services, the reality is that it is likely that securing sustainable improvement will not be achieved only by investing in the current model of service delivery and more needs to be done to secure effective prevention and early help services in order that the need for high cost, resource intensive specialist services is reduced.
- 6.3. Improving transitional arrangements is an example of where investing in more of the same will not result in improved services for all; many young adults have needs that make them very vulnerable, but because they do not have an identifiable mental health diagnosis of learning disability, they do not meet the referral criteria for adult services. Many of these young people will be those known to Children's Social Care and one of the strengths of bringing children's and adult services together within the Council is that it provides us with an opportunity to improve the support available to these groups.

## **7. CONSULTATION**

- 7.1. Consultation has taken place with relevant managers within Children's Social Care including the Head of Service for Children Looked After and team manager for young people leaving care, along with the Head of Commissioning for Child Health.

## **8. NEXT STEPS**

- 8.1. The key next steps are to deliver the investment in CPFT to reduce waiting lists and implement plans to improve transitional services to support young people as they cross from being children to adults.

## **9. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985:

- 9.1. None.

## **10. APPENDICES**

- 10.1. None.