## Agenda Item No: 7

## MENTAL HEALTH SERVICES FOR LOOKED AFTER CHILDREN

*To:* Corporate Parenting Sub-Committee

Meeting Date: 21 November 2018

From: Sarah Jane Smedmor

**Assistant Director Children and Families Services** 

Pamela Parker

Professional lead for Psychology Children and Families

**Services** 

Electoral division(s): All

Purpose: The Sub-Committee asked for a report setting out what a

good mental health service for Looked After Children

should look like.

Recommendation: The Sub-Committee is recommended to review the

information provided and agree to use this as a

benchmark for local services.

	Officer contact:		Member contact:
Name:	Pam Parker	Names:	Councillor Lis Every
Post:	Professional Lead for Psychology	Role:	Chairman, Corporate Parenting Sub-Committee
Email:	Pamela.Parker@cambridgeshire.gov.uk	Email:	Lis.Every@cambridgeshire.gov.uk
Tel:	01223 728180	Tel:	(office) 01223 706398

# **Summary:**

This report is to present the key findings of the Expert Working Group created to ensure that the emotional and mental health needs of children and young people in care, adopted from care, under kinship care, under Special Guardianship Orders, as well as care leavers, would be better met. It is hoped that this will support councillors in their task of holding local services to account regarding their offer for children who are looked after.

The findings are considered particularly credible as they were developed in collaboration with a significant number of young people and key stakeholders, like foster carers and residential home workers.

#### **BACKGROUND**

1.1 This report was requested at the Corporate Parenting Sub-Committee meeting on September 19th 2018 following discussion with commissioners and providers of local mental health services. It was suggested that it would be helpful to review national guidance on what best practice should look like in relation to meeting the mental health needs of children in care to provide clarity regarding what should be available and how services should be delivered.

### 2. MAIN ISSUES

- 2.1 The key recommendations of the expert working group are presented below. The full report is provided as an attachment to this document.
  - 1. Building on the success of the virtual school head (VSH), a similar oversight role of a virtual mental health lead (VMHL) is established. This is to ensure that every child and young person in the system is getting the support they need for their mental health and emotional wellbeing.
  - 2. The Strengths and Difficulties Questionnaire should be supported by a broader set of measures which can trigger a comprehensive mental health assessment. There are a range of tools in use that could support the assessment depending on the need of the young person.
  - 3. Assessments should focus on understanding the individual's mental health and emotional wellbeing in the context of their current situation and past experiences, rather than solely focusing on the presenting symptoms. The young person, their caregivers, family (where appropriate) and professionals' viewpoints should be included. Young people should be able to share who they would like to accompany them to assessments, and where possible those wishes should be accommodated.

- 4. Caregivers should receive support for their own mental health and wellbeing.
- 5. Caregivers need to be informed of which statutory and non-statutory services are available when support is needed for the child or young person. This should be included in each area's local offer. It is crucial that services are funded to support caregivers' training and development.
- 6. Everyone working directly with looked after children should receive training on children and young people's mental health so they are equipped with the appropriate skills.
- 7. A needs-based model is the best way to support and respond to young people. This model places the young person at the centre of decision-making and where appropriate lets them exercise choice as to how and what support they access. This allows appropriate support to be generated by need, rather than diagnosis.
- 8. Formal services should be more flexible in who they will allow to support the young person, acknowledging that support can come from a range of services and places. Health, education and social services need to work collaboratively to achieve this recommendation.
- 9. Ministers at the Department for Education and Department of Health should work together to ensure children in care and leaving care have access to services provided for their mental health and wellbeing.
- 10. Ofsted, the Care Quality Commission (CQC) and Her Majesty's Inspectorate of Prisons (HMIP) should review their regulatory frameworks linked to registration to ensure that equal weight and attention is being given to mental and physical health needs.
- 11. The statutory review of a child's care plan by the independent reviewing officers (IROs) must include at each meeting a review of whether mental health needs have been met.
- 12. Every school should have a designated teacher with the training and competence in identifying and understanding the mental health needs of all their pupils who are looked-after.
- 13. Existing mechanisms for capturing direct views of young people should be integral to planning and commissioning arrangements. Local Health Watch services should monitor the effectiveness of mental health care arrangements for children and young people who are looked after, and report their findings to Health and Wellbeing Boards at least annually.
- 14. Self-help, peer mentoring and community initiatives should be considered if a young person expresses this is their preference) before a referral to more formal child and adolescent mental health services.

- 15. Clinical Commissioning Groups should ensure commissioning is informed by a Joint Strategic Needs Assessment (JSNA) which addresses the mental health and wellbeing needs of looked after children and care leavers. This should be reflected in Local Transformation Plans.
- 16. The Local Safeguarding Children Board, Corporate Parent Board and Health and Wellbeing Board should give appropriate priority to ensuring that the mental health needs of children and young people in care and leaving care are met.

## 3. SIGNIFICANT IMPLICATIONS

- 3.1 Resource Implications N/A
- 3.2 Procurement/Contractual/Council Contract Procedure Rules Implications N/A
- 3.3 Statutory, Legal and Risk Implications N/A
- 3.4 Equality and Diversity Implications N/A
- 3.5 Engagement and Communications Implications N/A
- 3.6 Localism and Local Member Involvement N/A
- 3.7 Public Health Implications
  N/A

### SOURCE DOCUMENTS

Source Documents	Location
Improving mental health support for our children and young people	https://www.scie.org.uk/ children/care/mental- health/report
Expert Working Group final report	<u>rroam port</u>
Dec 2017	