

**CHILD AND ADOLESCENT MENTAL HEALTH ISSUES RELATING TO LOOKED
AFTER CHILDREN IN CAMBRIDGESHIRE**

To: **Corporate Parenting Sub-Committee**

Meeting Date: **September**

From: **Dr Paul Millard, Clinical Director, Children, Young People
and Family Directorate
Cambridgeshire & Peterborough NHS Foundation Trust**

Electoral division(s): **All**

Purpose: **To respond to a request by the Corporate Parenting Sub-
Committee for a report on Child and Adolescent Mental
Health (CAMH) issues, including information on criteria
and thresholds.**

Recommendation: **The Committee are asked to note the contents of the
report.**

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Summary:

To provide a report on child and adolescent mental health issues relating to Looked After Children in Cambridgeshire for the Corporate Parenting Sub-Committee.

1. BACKGROUND

- 1.1 The purpose of this report is to set out the current position on child and adolescent services for looked after children (LAC) in Cambridgeshire.

2. MAIN ISSUES

- 2.1 Over the last 12 months we have received a total of 73 children referred who have been identified in the referral as LAC:

Cambridge = 11

Huntingdon/Fenland = 40

Peterborough = 22 (Note this number is based only on

referrals for CORE services as referrals for Neurodevelopmental disorders are processed internally due to Peterborough having an integrated service; it would be expected that the numbers would be more in line with the figures for Huntingdon and Fenland)

- 2.2 In order to respond accordingly to the level of vulnerability Cambridgeshire and Peterborough Foundation Trust (CPFT) Child and Adolescent Mental Health (CAMH) has in place the following Standard Operating procedures:

1. STANDARD OPERATING PROCEDURE FOR PRIORITISATION OF CHILDREN IN CARE

The aim is to ensure measures are in place to provide prioritised CAMH services to Looked After Children in Cambridgeshire and Peterborough at the earliest opportunity. The procedure is already in place however the written Standard Operating Procedure (SOP) is to ensure consistency and will be shared with SPA and Cambridgeshire and Peterborough Teams.

- Referral received either via Single Point of Access or Neurodevelopmental Service CAMHS
- Case identified as Looked After Child or Child in Care
- Prioritised as MODERATE RISK on basis of Looked After status
- Additional risks then screened and further prioritised as necessary

- Added to waiting list or scheduled into CHOICE appointment or NEURO appointment based on the above

What constitutes a Looked After Child (LAC) (definition):

Under the Children Act 1989, a child is legally defined as 'looked after' by a local authority if he or she:

- gets accommodation from the local authority for a continuous period of more than 24 hours
- is subject to a care order (to put the child into the care of the local authority)
- is subject to a placement order (to put the child up for adoption)

A child who is on a special Guardianship is no longer a LAC, and a child who is adopted is no longer LAC, unless either relationships breaks down and the child is then placed back into the care of the Local authority.

Children who have residential placements for respite for more than 76 nights a year are also classed as LAC, but parents still hold parental responsibility for their child.

In recognition of ensuring services need to ensure children out of county receive appropriate services, we developed:

2. Standard Operating Procedure for Therapy Funding Requests for Looked after Children (LAC) placed outside of Cambridgeshire & Peterborough

This ensures that Cambridgeshire and Peterborough looked after Children receive appropriate services, and covers: CAMH, psychotherapy, play therapy, counselling and review of attention deficit hyperactivity disorder (ADHD) / autism spectrum disorder (ASD) medication for children placed out of area (placed within another county where it is not feasible to bring the child back to Cambridgeshire for therapy/assessment). Children / young people placed out of county should not be disadvantaged in accessing assessment or treatment for their mental health compared to their peers that are placed within Cambridgeshire and Peterborough, neither should they be disadvantaged due to short term placements or placement moves.

The procedure ensures good governance of services not previously known to us and accountability for services provided.

3. Multi – Agency Working

CAMH work closely with colleagues from Cambridgeshire Children's Services, including the clinical team. The challenges experienced by children who are looked after require a systemic response, with attention to context, key relationships as well as intrapsychic and neurodevelopmental factors. Social

care clinicians work alongside frontline social work colleagues contributing to care planning, sibling assessments, placement stability and matching. They also offer interventions such as family work, Video Interactive Guidance, Foster Carer Training and Consultation.

CAMH, the Clinical Commissioning Group (CCG) and social care clinicians work together in situations of high complexity to share expertise and create joint plans to manage risk and address the needs of children and young people. There is an ongoing process of developing and sustaining those links so that young people can quickly access the most appropriate service whether they are placed in or out of county.

2.3 **Under Development /Discussion:**

- Tracking and reviewing of LAC children on waiting lists is currently completed as standard - LAC and children to be reviewed as specific cohort
- Safeguarding champions in teams will co-ordinate within teams