

**BLACK COUNTRY PARTNERSHIP FOUNDATION NHS TRUST
(BCPFT)
CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS)
LOOKED AFTER CHILDREN TEAM (LAC)**

Subject: CAMHS LAC Team Report

For the attention of: Looked after Children Health Steering Group

Submitted by: Dr Roberta Fry, Consultant Clinical Psychologist

Period Covered: April 2013 - March 2014

Date: 7th November 2014

Who are the CAMHS LAC Team and what do we do?

We are a multi-disciplinary team of Specialist Mental Health Practitioners who have been specially trained to work therapeutically with looked after children and their carers.

The LAC Team provides a therapeutic service to children, both looked after and adopted children.

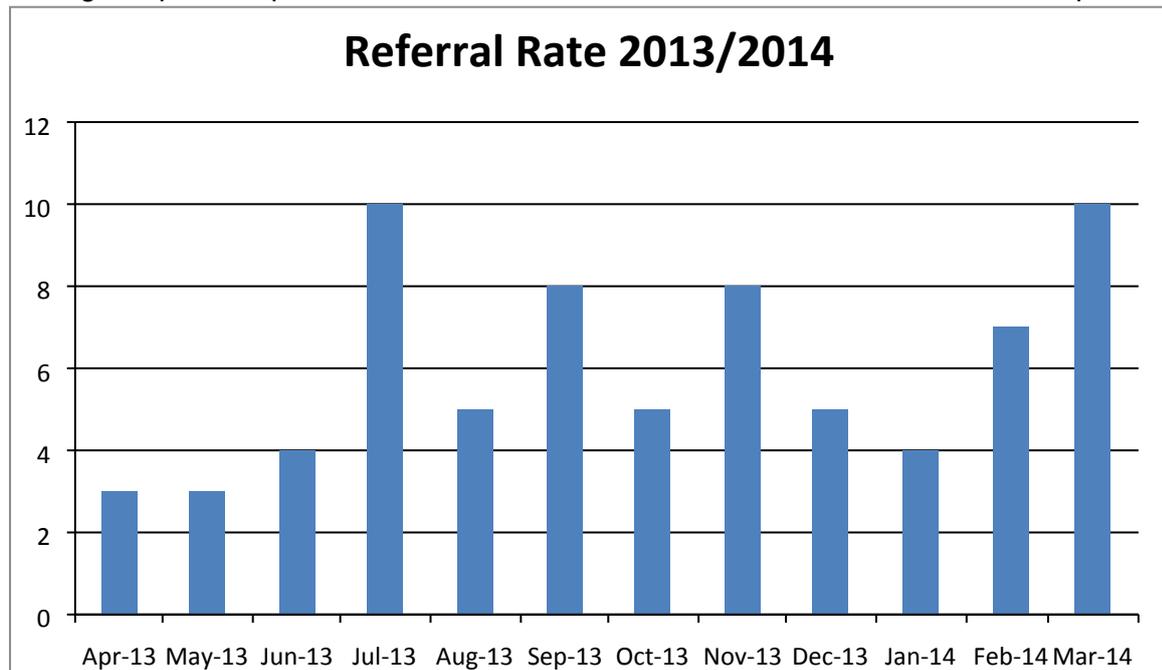
Typically these children have suffered considerable **trauma** and will present as **insecurely attached.** This insecure attachment style affects **all areas** of their lives and development; this includes their capacity to form and sustain relationships with others, to integrate and manage their behaviour, to “pay attention” at school and cope with the school environment and to empathise with others.

Current Composition of the Team:

Dr Roberta Fry	Consultant Clinical Psychologist	0.2 WTE
Dr Sarah Bosworth	Counselling Psychologist	0.5 WTE
Joginder Shoker-Kang	Social Worker	1.0 WTE
Mark Fallon	Child Psychotherapist	0.6 WTE
Kamaldip Kahlawan – Due to start Dec 2014	Clinical Psychologist	0.5 WTE
Dr Brigid Duffy	Clinical Psychologist	0.2 WTE

Data of Service Activity from April 2013 – March 2014

During the period April 2013 – March 2014 **72** new referrals were received and processed.



Regardless of who refers, we always contact the Social Worker to establish their view on the referral and invite all the relevant professionals to a Professionals Meeting, which is typed up and sent out.

This summarises as much as is known of their early history, number of placements, details of Carers etc. and helps to focus and prioritise any subsequent interventions.

If we are not going to be involved, an explanation is always given and as much thought can go into this decision as to the work that we take on.

Due to a change of data recording system, the support services are needing to double check all the cases have been transferred and are accurately updated. If there are any specific questions you would like answered, please let Roberta know and she will endeavour to find out and reply directly on an individual basis. Thank you for your patience and understanding with this.

Update of Current Activity:

- Ongoing clinical work

Our clinical interventions aim to integrate attachment, systemic, cognitive, psychodynamic and psychoanalytical traditions into our practice.

Our work includes:

- Working with the child individually
- Working with the child and carer simultaneously
- Working with child and carer separately
- Working with carer and/or professional system only

- Pillars of Parenting Consultations to Residential Units

We offer an average fortnightly consultation using the 'Pillars of Parenting' model to the following Residential Units:

- Upper Pendeford Farm (Local Authority)
- Red Gables (Local Authority) - Closed in October 2014
- Stafford Road (Advanced Childcare)
- Brooklands Parade (Advanced Childcare)
- The Wergs (Advanced Childcare)
(Service Decommissioned October 2014)
- Merridale Street (Advanced Childcare)

Each Unit has a named Practitioner who consults with staff on site. Where possible, cases of children residing at the Unit are brought by staff/staff groups for discussion.

All referrals to the Child and Family Service (CAMHS) for children in Residential Units are in the first instance discussed within the unit using the consultation model.

- Consultation to Social Work Teams

LAC-CAMHS has developed consultation surgeries for the following teams at Beldray Building (Social Services)

- Looked after Children Team 1
- Looked after Children Team 2
- Adoption Support Team and Fostering Team
- Transition Team 14+

Consultation is an activity in which one practitioner helps another through a process of joint enquiry and exploration. The work discussed remains the responsibility of the consultee, who retains control of its direction, decision making and methodologies. Consultation emphasises mutuality, requiring the consultant to adopt a 'collaborative' position with the consultee, rather than an expert one.

The advantage of Consultations to Social Work Teams is that:

- It is a mutual learning process
- It can contribute to the development of skills and knowledge of Social Work colleagues with a view to being more psychologically minded
- The skills developed are across a group of professionals rather than one individual
- It can prevent ongoing referrals, enabling the person or family to stay with their original 'front line' practitioner where appropriate
- It can speed up the process of accessing specialist services where appropriate
- It is an activity that helps build relationships between individuals, areas of service and agencies

Consultation is important because it:

- Enables us to offer timely support
- Helps prevent inappropriate referrals
- Can help reduce waiting times
- Helps develop across agency relationships
- Supports Social Workers in holding cases where children/young people refuse to access/attend CAMHS services
- Helps Social Workers to start to think differently about Mental Health
- Helps Social Workers to become aware, understand and manage their own professional anxieties

Ideas in the Pipeline:

An “agony aunt” type column on the website accessed by young people who may find this a more accessible format for initial contact with CAMHS.

A Group for Foster Carers (early discussion stage to ensure it does not duplicate existing provision).

Quotes from Adults and Children who have used the CAMHS – LAC Service

From Adoptive Parents:

“When we have come on our own, as individual parents that’s been useful, though not through planning. The strain it (difficult adoption relationships) places on the marriage is incredible.”

“This has always been a Safe place to come and share what’s happening, and to get a new way of reframing it. This has helped us cope with everyday life – the trauma of dealing with their trauma.”

“We’ve also had a lot of support with the school. The worker has attended meetings at school and explained the behaviour – obviously school work to a set criteria. Due to (son’s) poor attendance at school, the support was invaluable”.

“The opportunity to talk and to be understood without that, the adoption would likely have broken down; we’d have become a statistic.”

“We’ve found it invaluable, it’s a steep learning curve – the self-examination can be uncomfortable. Sticking with it makes you better parents, better able to deal with things and not afraid to use other services.”

From a Young Asian Boy:

“At first I was kind of shy; as time went on I was less shy. I could say a lot more things as time went on.”

“Don’t be scared, because I know I was when I first came, but then it helped me.”

From his Foster Carer:

“It was like a whole other dimension and she understood where I was coming from like a family member. She didn’t just tell him to stop – this helped.”

“I’ve let it all out so it’s a new life. A fresh start.”

From a 16 year old Girl:

“Even though you feel in the worst place, you will come out of it and be in a much better place. At the time you can’t imagine it, but it will happen.”

“Just stick to it. I was very reluctant at first, its nerve wracking at the time, but worth it for the benefits/skills that you gain.”

“Thank you for helping me and for not giving up and for sticking to it.”