

Cross Party Group on Mental Health and Cross Party Group on Looked After Children

11 February 2020

12.15 – 13.15

Media Briefing Room, Senedd

In attendance

David Rees AM

David Melding AM

Vicki Evans – Head of Campaigns and Communications – Jeremy Miles AM's office

Paula Foley – Caseworker – Jenny Rathbone AM

Llinos Madeley – Clerk of the Children and Young People and Education Committee

Sian Thomas – Research Team Leader, Assembly Commission Staff

Laura Havens – Hafal

Louis Mertens - Royal College of Psychiatrists

Ann Bell – Adoption UK

Francesca Morris – Adoption UK

Elaine Speyer – Barnardo's

Helen Howson – Bevan Commission

Linda Newton – Cardiff and Vale Action for Mental Health

Graham Hinchey – Cardiff Council

Elizabeth Flowers – Children's Commissioner for Wales

Vivienne Laing – NSPCC Wales/Cymru

Sharon Lovell – National Youth Advocacy Service

Siobhan Parry – Plattform

Claire Miller – Stepping Stones

John Wrangham – Stepping Stones

Chris Dunn – Voices from Care Cymru

Tim Crahart – Voices from Care Cymru

Simon Jones – Mind Cymru

Ian Johnson – Mind Cymru

Nia Sinclair – Mind Cymru

1. Welcome

David Rees AM (DR) welcomed everyone to the joint Cross-Party Group meeting on both Mental Health and Looked After Children.

He noted the importance of today's topic on care experienced children's mental and emotional health and was interested to learn about the findings of the 'Listen. Act. Thrive' work. He welcomed Vivienne Lang (NSPCC) and Chris Dunn (Voices from Care Cymru) and invited them to discuss the recommendations.

2. Presentation on 'Listen. Act. Thrive'

Vivienne Laing (VL) thanked DR and David Melding AM (DM) for the opportunity to address the group today. She explained that the Social Services and Wellbeing (Wales) Act has been amended to include a focus on the mental health of children when they first enter care, and championed Wales as the first UK nation to commit to this change.

She noted that the collaborative project 'Listen. Act. Thrive' between NSPCC Cymru/Wales and Voices from Care Cymru explores how this requirement is being implemented, looking at how the mental health needs of children and young people are being assessed and supported.

She highlighted that the project has become embedded in the work programme of the Ministerial Advisory Group on Outcomes for Children given that the mental health of care experienced children and young people is a frequently discussed topic within the group, and that it also provides an opportunity to explore the changes in regulations, building on the Together for Children and Young People work, the Children, Young People and Education Committee's Mind over Matter report and the Welsh Government's response.

She explained that the project consulted with 21 care experienced young people (between 15 and 21 years) and carried out surveys with 26 looked after children (LAC) nurses, and 44 Independent Reviewing Officers in Wales.

Findings

She noted that mental health assessments currently last around 60 minutes, and that young people feel that i) this is not enough time to assess both their emotional and mental health needs; and ii) that the first assessment of a new child entering the system may not be the most suitable time to assess his or her mental health needs given that he or she may be experiencing some turmoil or distress while settling into a new environment.

Other findings:

- Insufficient clarity for practitioners on how to assess emotional and mental health of young people
- Lack of guidance and/or formal training for practitioners regarding emotional and mental health
- Foster parents, teachers, residential workers, and social workers have not been given enough training to equip them with the skills and knowledge necessary to adequately support care experienced children and young people with their emotional and mental health
- Multi-agency working is not working effectively. Young people are having to explain their stories multiple times which limits support for these children
- It is difficult for care experienced children and young people to access specialist mental health services across Wales due to high threshold and long waiting times.
- If a young person is moved out of the country, they are placed at the bottom of the waiting list.

Recommendations

Chris Dunn identified the need for a collective buy in from everyone involved. He stressed that understanding the views of those with lived care experience is the most useful narrative to set the scene.

He noted that the assessment framework is not fit for purpose when young people are referred to CAMHS and that work must be done with the Welsh Government and other organisations to improve the framework such as increasing the length of assessment time.

He emphasised the word 'love' suggesting that the current system does not love but that people within the system do, and said that care and nurture must be brought into the assessment process.

He drew attention to one young person's positive experience of CAMHS, despite there being no follow-up services available to him after the initial six weeks with CAMHS. He noted the need for a dedicated service and expressed his

disappointment that CAMHS is not available to all young people to get the right support.

He noted the importance of empowering young people who he said should help to shape the recommendations and be involved in the planning of wellbeing and mental health services. Attendees were interested to learn about the experience of one young person who was blamed in error for something whilst in care for the benefit of the carer, and that the fabrication of the story went on his file causing him much distress and upset.

He informed the group that the Welsh Government is looking to name corporate parenting bodies to inform different services of what it means to be care experienced.

He added that emotional wellbeing activities should also be made available given that many young people face the same issues of loneliness and isolation as those of the older generation. He noted the benefits of social prescribing.

VL concluded by saying that the NSPCC and VFCC will be monitoring closely to ensure abuse and neglected children get the right services, an issue which she said is high on the agenda.

She noted that England and Scotland do not currently have a focus on emotional Health but that the Anna Freud centre is running pilots in England on different mental health assessment tools. She added that Wales will be able to learn from the findings.

Finally, Chris noted the five key topics which young people brought to their attention.

1. Raise the importance of mental health and emotional wellbeing
2. Recognise the importance of relationships with siblings and the implications of not being able to see their family
3. The importance of being loved and the impact of not having love on their wellbeing
4. Stability and the impact of not having a safe home
5. How they often feel discriminated against and the need to break the stigma

3. Discussion

DR thanked CD and VL and asked whether anyone had any questions or comments.

Linos Madeley noted that the Children, Young People and Education Committee is looking at the work again since the original report. She added the Committee wrote to Ministers last summer and that it is currently liaising with the Together for Children and Young People youth stakeholder group.

Sharon Lovell noted her interest in the role of corporate parenting. She agreed that care should be everyone's responsibility and not just that of social services.

She noted the difficulties from an advocacy perspective and in children accessing CAMHS and services, and the discrepancy with health on quality of access which seems to have had little advancement. She asked whether there has been any progress around the assessment framework.

VL said that LAC nurses are currently using their own experience to create care and support plans. She reiterated the ambition to use the learning from the England pilot on mental health assessment which can then be presented to the Ministerial Advisory Group. DR added that it would be problematic for young people to be given a care package and then to find out that it could not be delivered.

Simon Jones asked whether young people have expressed how they would like to see the assessments happening and suggested that the process seems medicalised rather than social and supporting. CD said that young people want a more 'human' model, an opportunity to build relationships and have services which are available to them when they need crisis intervention.

Sian Thomas noted that corporate parenting has been on the agenda for some time and that there are now more children in care than ever before. She questioned whether organisations have specific ideas on what needs to change to get buy in. CD drew attention to the corporate parenting legislation in Scotland and noted the need for buy in from the Minister and Health Boards at the top.

DM suggested that different statutory agencies need to take a primary role. He noted that Assembly Members have a key role to play and emphasised the experience that Dan Pitt, Vice Chair of the Ministerial Advisory Group, as a care leaver himself brings to the discussions.

Paula Foley talked about health being in silo between adult and children services. She noted that health is difficult to find flexibility in relation to other services. Chris added his frustration that some young people are not able to access services which may have been available to them previously. He highlighted the Welsh Government's extension to enable care leavers up to the age of 25 the opportunity of having a personal adviser.

Graham Hinchey referred to an event he attended the previous evening on corporate parenting and the need to refrain from talking about politics. He added that those who have the authority to change how Wales works need to come together, and that there is some lack of understanding on what corporate parenting really means.

He suggested that Assembly Members should ask the question of how money is being spent in their area in view of the Welsh Government's £15 million allocation to Regional Partnership Boards, and to find out what therapeutic services are available to them which could be incorporated into the support plans.

The meeting closed at 1.25pm.

