

Health Overview and Scrutiny Committee (23<sup>rd</sup> July 2012)  
**Report of the Assistant Director – Children’s Specialist Services**

1. Introduction

A recent scrutiny planning event identified, as a topic for initial consideration, the relationship between behavioural issues in older boys / young men and low level mental health problems.

Specifically, members expressed an interest in the possible correlation between behavioural problems (including, school exclusion, youth offending and suicide) and low level mental health issues.

Members also wish to better understand the local arrangements for the early identification of possible mental health issues in this particular group. The effectiveness of any subsequent interventions was also highlighted as part of any review.

2. Brief Background

In preparation for this initial briefing the views of colleagues from the Child and Adolescent Mental Health Service [CAMHS], the Youth Offending Team and Children’s Social Care were canvassed.

3. Summary of Initial Views

Dr Christine Williams, Consultant Child Clinical Psychologist who is also the Lead Clinician for CAMHS in York reports:

*The team and I have considered the issue highlighted for possible scrutiny by the Health Overview and Scrutiny Committee. On the basis of our clinical experience here in York we believe that, in terms of mental health issues in teenage boys generally, there is no evidence of any major changes (growth in referrals or diagnosis) in the last 5 years. Of course should the Committee wish to review this issue I would be pleased to investigate this further.*

*Also, we are not sure that this remit requires a high level of scrutiny. However, the Committee's query prompted a very helpful and closely related debate within our service. In particular, we identified a cohort of young people involved with the Youth Offending Team [YOT]. There are a small but growing number of young men and women who present as 'high risk' in terms of danger to others. These young people often require psychiatric assessments and out of area placements which are expensive and sometimes unsatisfactory. YOT colleagues estimate that there are approximately 10 young people within this 'high risk' category at any one time. There are many more at a lower level of risk although some of these are likely to 'graduate' to higher risk with time. In my opinion, in terms of trying to improve care and avoid escalation of these risky behaviours as well as trying to reduce costs, it would be worth the committee giving some consideration to a review of these arrangements.*

Angela Crossland – Service Manager – Youth Offending Team reports:

*The Youth Offending Team has seen a steady increase in the recognition of very complex cases both within our service and from colleagues in Children's Social Care. We see young people with higher levels of risk to others, and significant need, presenting before the court on a regular basis. The correlation of these individuals being Looked After Children, on high-end intensity orders and ultimately in custody, has particularly highlighted the need for more responsive approaches in terms of their long-term care and development needs. The YOT, CAMHS and Children's Social Care have been looking at practice level ways to try and identify such individuals but this has shown that there needs to be an overview of what questions this is raising for commissioners in terms of the overall resource for this group of vulnerable and escalating young people.*

Colleagues in Children's Social Care recognise the issues highlighted by both Dr Williams and Ms Crossland.

Responding to 'children who harm' has been the subject of considerable debate both within the service and across the multi agency network. In a nutshell, meeting the

needs of these young people whilst minimising the risk they pose to others requires high level of interagency cooperation. Clear pathways to a range of highly specialist resources are also required. These challenges are further exacerbated by the need to maintain some normality for these young people throughout any treatment period to maximise their opportunity for a full and effective rehabilitation.

#### 4. Early identification of emerging mental health problems.

A multi agency conference, hosted by York's CAMHS executive group in April 2012, brought together representatives from over 50 agencies working with children and young people.

The event provided a forum for professionals to explore local arrangements for the prevention and early identification of mental health issues in children and young people. Feedback from the event reassured us that there is a high level of awareness across children's services in York about the importance of spotting early signs of emotional distress or mental health problems in children and young people.

The workshops and findings from the conference will inform the next CAMHS strategy for the City. At the heart of this strategy is a commitment to further strengthen the message that children's mental health is everyone's business. The supporting delivery plan will ensure that greater support and training is available to all those professionals working with children.

#### 5. Conclusion

There is no sense of any complacency about the wider challenges presented by low level mental health issues for young people and in particular young men. Good multi agency awareness and planning is already in place to support this group.

However, enquiries to prepare this initial briefing reveal a clear consensus about the value of further scrutiny of arrangements for responding to children who harm.

## 6. Options

(a) The Health Overview and Scrutiny Committee pursues a more detailed review of the overall arrangements to support the emotional and mental of young men in the City. Such a review could be undertaken within the context of the draft CAMHS Strategy 2012 – 2015.

( b) The committee undertakes a more focussed review on the prevalence and local arrangements for responding to the mental health and care issues associated with children who harm.

### Recommendations

A wider review of local arrangements to respond to the mental health needs of children and young people in York has recently been completed (Annex 1). This work will inform York's CAMHS strategy for the next three years.

Addressing the issues associated with 'children who harm' will, of course, feature in the final strategy. However, a more immediate and sharper focus on this issue through further review by this committee would be helpful and is recommended.

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