

# Summary report on Richmond CAMHS services

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## Introduction

Healthwatch Richmond was invited to work in collaboration with Richmond SEND Family Voice (RSFV), ADHD Richmond and Richmond National Autistic society (Richmond NAS) to collect the opinions of parents and schools on services they have received from the Child and Adolescent Mental Health Service (CAMHS) in Richmond. A survey was developed collaboratively including taking feedback from CAMHS and was launched on the 18th May 2015, running until the 19th June 2015. The survey was circulated to Healthwatch Richmond's membership alongside a number of voluntary sector organisations that support young people and parents and carers of young people that access CAMHS. The survey was also distributed via social media and displayed on the websites of both Healthwatch Richmond and Richmond SEND Family Voice.

It was hoped that surveys could be distributed via CAMHS but this was not possible due to administrative challenges.

A second survey aimed at schools was produced with RSFV aimed at gathering experiences of CAMHS from the perspective of those who refer into CAMHS. This was sent to the Head Teachers and SENCOs (Special Educational Needs Coordinators) through RSFV existing networks.

This report presents a summary of the key findings of the survey and the headline responses from the Mental Health Trust and Achieving for Children. It is not our intention to draw firm conclusions or recommendations from this report.

We gained informed consent from all respondents to share the data. We hope that this data will be used to inform the 2016 CAMHS strategy, help shape CAMHS services, and inform future Healthwatch work about CAMHS.

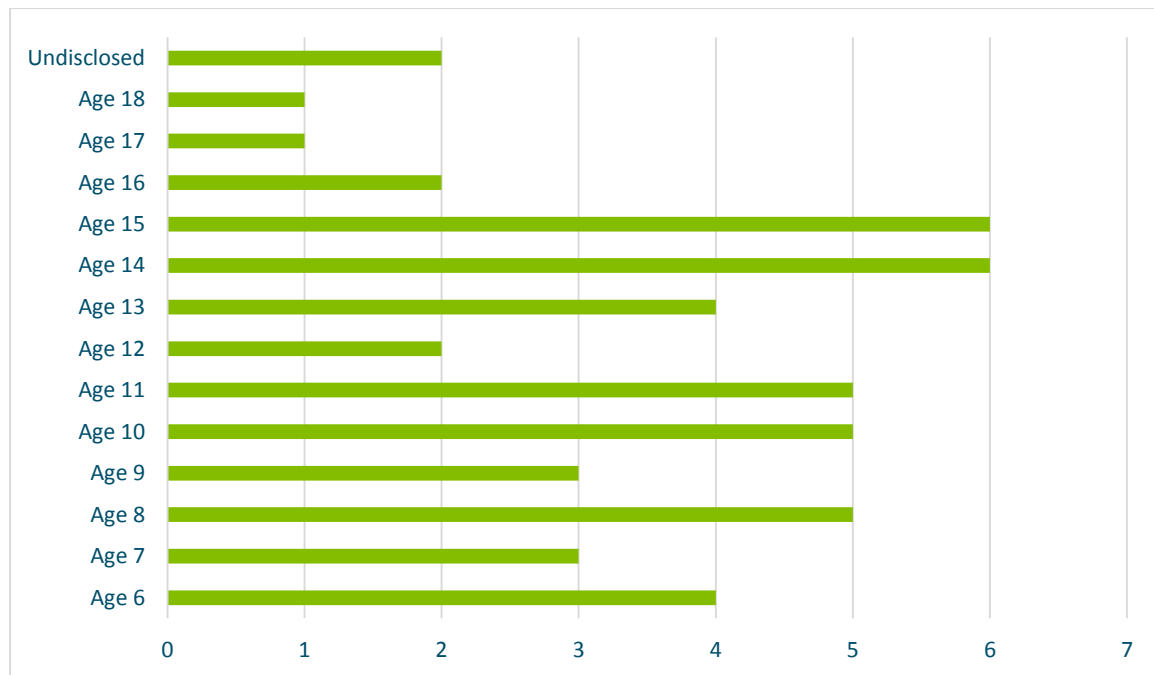
## Responses to the CAMHS Carers and Schools Survey

### CAMHS Carers Survey

49 responses were received from parents that identified themselves as being parents or carers of young people accessing Tiers 2 and 3 CAMHS services within Richmond. The responses for each Tier are specified below:

Tier 2	Tier 3	Unspecified
4	34	11

Responses received were from parents and carers of young people with a range of ages. The responses for each age are detailed below:



Only one question in the survey specified a period of time for respondents to comment on. Respondents were not asked to specify the dates on which they accessed CAMHS services in other questions, therefore it is unclear in most of the responses if their experiences were recent or not. We hope to look closer into recent experiences of CAMHS in the next stage of our work on CAMHS services.

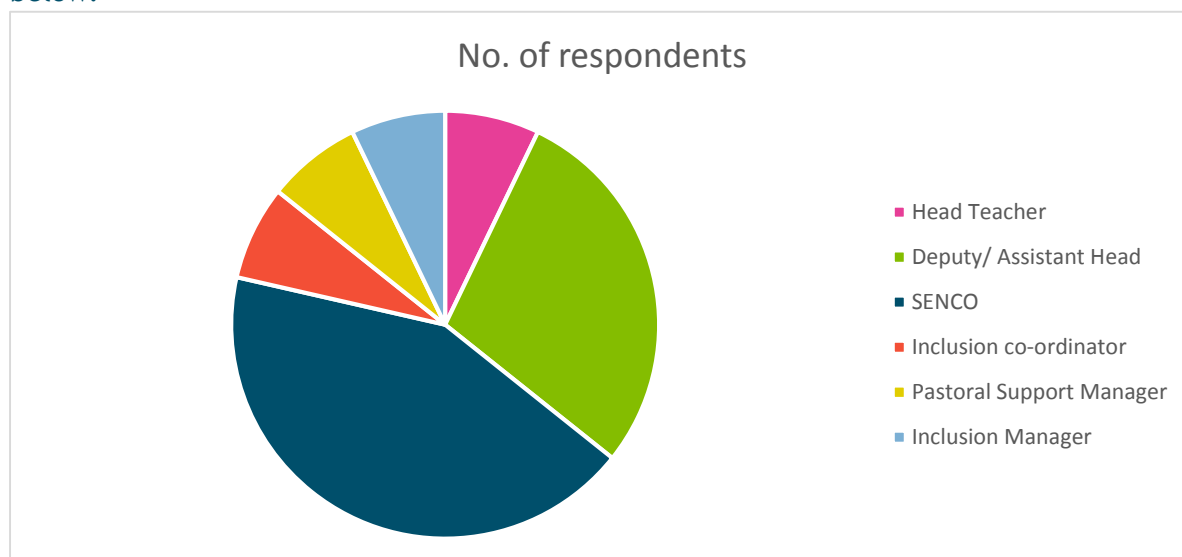
## CAMHS Schools Survey

The survey was distributed online to school head teachers and SENCOs (Special Educational Needs Coordinators). The survey ran from the 18th May until the 19th June 2015.

Responses were received from the following schools;

- Waldegrave School
- Richmond Park Academy
- St Richmond Reynolds Catholic College
- Windham Nursery School
- St Osmund's Catholic Primary School
- Heathfield Nursery and infant school
- St Edmunds Primary
- Trafalgar Infant School
- The Queen's C of E Primary School
- Clarendon School
- Orleans Park
- Russell School
- Hampton Wick infants

Responses were received from varied professionals at each school. A breakdown is given below:



### Limitations

The questionnaire did not ask how many pupils from each school had been referred so we are unable to tell how representative the responses are. Respondents of this survey were not asked to specify the dates in which they accessed CAMHS services in other questions, therefore it is unclear in most of the responses if their experiences were recent. We hope to look closer into recent experiences of CAMHS in the next stage of our work on CAMHS services.

## Key findings

An initial review of the data was undertaken to present key themes that emerge, rather than to draw conclusions. The level of consensus between the findings of the Carers and Schools Surveys adds weight to the findings of this work.

Data was not filtered to separate Tiers 2 and 3, because of the relatively low numbers that this would have left in each group. Some of the themes emerging however, such as prescriptions and the environment at Richmond Royal, would only be encountered by people using Tier 3 CAMHS. These themes are presented as key findings in the following pages.

## Reception areas and staff

This was a key issue for respondents to the Carers Survey.

We asked those surveyed whether they were satisfied with the suitability of the CAMHS waiting areas? Whilst 38.3% of respondents were satisfied with the environment, 42.6% were not:

Very satisfied	6.4%
Satisfied	31.9%
No comment	19.1%
Not satisfied	21.3%
Not very satisfied	21.3%

People raised the following concerns with us:

- Richmond Royal entrance area was described as ‘intimidating’ by several respondents due to ‘the presence of adults with mental health issues who are often around the entrance’. One person described their child as having ‘severe anxiety’ as a result of being exposed to such adults, which made her feel she might end up like them.
- Reception area described as not child friendly, and it did not appear welcoming to families. Over a third of respondents (37.6%) rated reception staff as not very or not at all responsive.
- A number of suggestions were put forward to improve waiting areas such as: fixing the water cooler, introducing toys for older children and displaying more information about support groups.
- There were mixed views on reception staff that were also evident in the quantitative data. Some people were unhappy with the attitude of reception staff, others described staff as ‘friendly and welcoming.’

## Response from South West London and St George’s Mental Health NHS Trust

### Entrance and reception area

*‘A ‘magic wand’ project has been commenced by Laura Tyrell, Participation Officer, using feedback from young people. Additionally, in terms of specific issues the water cooler in the reception area has been fixed and the Trust facilities department is examining solutions re temperature in the waiting area. CAMHS notice boards have been updated with information about local groups. Laura is also running an art project for all ages. The comments about the mix of adults and young people using the main entrance to Richmond Royal is also being considered by the Trust-wide Estates Strategy Group in terms of possible solutions.’*

## Reception staff

*'Recruitment of permanent reception staff is underway, and a customer service training programme is being rolled out to administrative staff by end of August as part of an initiative.'*

## Care

Opinions around care focused on:

- Being 'medication focused' and offering little support in terms of coping methods for parents
- Cognitive Behavioural Therapy (CBT) was referred to by a number of respondents as being a 'positive experience'

## Response from South West London and St George's Mental Health NHS Trust

*'Specific feedback regarding psychiatrists' management of ADHD being medication focused is noted and will be considered further by the service. Further work to strengthen partnership with local authority services that provide parenting programmes such as '123 magic' and family coaches is also being prioritised by the Richmond CAMHS team manager and clinical lead.'*

## Waiting times and referral

Most respondents to the Carers Survey described the waiting times between referral and diagnosis as 'too long' with examples of young people waiting from several months to a number of years, to get a formal diagnosis.

This was supported by schools who told us that lengthy referral times were cited as a factor that raised concerns for young people due to the lack of support available for 'vulnerable' students waiting to be seen.

- 80% of respondents told us that they found it hard to monitor a child's progress after referral and over a third (35.7%) told us that they did not hear back from CAMHS after a referral

## Response from South West London and St George's Mental Health NHS Trust

### Waiting times

*'The focus of the CAMHS directorate is to reduce waiting times further. The team has recently employed additional therapy staff to reduce waiting times into treatment and a recent recruitment drive to attract permanent clinicians has been successful with new members of staff due to join in October. A system known as 'job planning' has also been introduced among the staff group to improve the number of cases the team is able to treat, and therefore bring down waiting times to treatment.'*

## Waiting times for diagnosis

*'A new dedicated team to provide diagnosis of ADHD and ASD was established in 2014 in order to reduce the waiting time for this service. An increase in referrals into this service has affected its responsiveness and a number of actions are now underway. Following a team workshop on 12 August improvements have recently been agreed regarding links between the team and the Richmond Single Point of Referral and the local Richmond CAMHS team, and more efficient collection of necessary reports from schools.'*

## Support

- Some people raised concerns over the lack of support they received between yearly appointments with CAMHS
- A lack of support to focus on alternatives to medication was identified
- The local ADHD support group was seen as a good support group for families and it was suggested that this should be promoted more by CAMHS
- Over two thirds of attendees (69.6%) were not satisfied with how easy it was to access information

## Response from South West London and St George's Mental Health NHS Trust

*'We are currently looking at the procedures for annual reviews as there are different methods across south west London, and we would like to share best practice within Richmond, and ensure consistency. The feedback from the survey will be incorporated into this work.'*

## Prescriptions

- A number of people reported issues with prescriptions and in particular, problems with requesting prescriptions and with getting repeat prescriptions. Some of these people asked for improved efficiency around this, including electronic prescriptions

## Response from South West London and St George's Mental Health NHS Trust

*'Electronic prescribing is possible in the future and is currently being looked at by Trust. The team are aware that more prescribing should be done under 'shared care' and one of the psychiatrists, alongside pharmacy colleagues, are working with local GPs improve this.'*

## Relationships with staff

The feedback about staff was mixed:

- The majority (56.2%) of respondents to the Carers survey rated professionals as responsive
  - A number of doctors were mentioned by name as providing an excellent service.
- A few comments described experiences of appointments where they felt staff were uncaring and uninterested in building a relationship with their child. 23% of respondents to the Carers survey rated professionals not very or not at all responsive

## Response from South West London and St George's Mental Health NHS Trust

*'Thank you for sharing positive feedback about some of the staff in the team, and for highlighting instances of excellent service. Whenever a mental health professional works in a service for many years relationships are built up, even if contact is only minimal. Both of the consultant psychiatrists within the team changed in 2014 and it will take time for young people to get used to a new doctor when they only see them briefly annually.'*

### Communication with CAMHS

Many people reported having difficulties in contacting CAMHS. Others reported expecting to be contacted and not hearing from CAMHS regarding appointments, specifically regarding annual reviews.

## Response from South West London and St George's Mental Health NHS Trust

### Communication with CAMHS

*'The administrative team has totally changed and the new team are undergoing training around expectations and protocols in CAMHS.'*

### Working with other agencies

Engagement with schools was described as low by a number of respondents to the Carers Survey:

- Better communication between CAMHS and schools was put forward as a suggestion of changes that respondents would like to see in the future
- There was a desire to improve engagement and communication between CAMHS and GPs

One of the most frequent comments from respondents to the Schools survey was about the desire to see an improvement in communication between schools and parents and the CAMHS services around referrals. There was a significant difference in the effectiveness of communication between Tiers 2 and 3 with 28.6% saying that communication was not effective at Tier 2 and 53.9% at Tier 3. People gave us specific comments about:

- There is a lack of engagement with schools
- Low engagement with schools impacts on parents and students, especially in understanding mental health issues
- There is poor communication between CAMHS and schools regarding referrals.
- There was a need identified to improve communication throughout the referral process with timescales included

## Response from South West London and St George's Mental Health NHS Trust

### Engagement with schools

*'The survey noted that engagement between CAMHS and local Richmond schools could be stronger. The Trust has recently joined in a bid with the CCG to host a schools link pilot involving a member of staff from CAMHS, and we are due to hear about the success of this shortly.'*

## Conclusions

The relatively modest sample limited the extent to which it was meaningful to view the data on the basis of Tiers. The method of data collection may have caused bias due to the networks used. This bias could have been decreased by direct distribution of the survey to parent carers by CAMHS. Whilst this would have led to a more balanced sample this was not possible due to the administrative capacity of the service.

These limitations aside, the data collected still represents the views and experiences of a significant number of parent carers and allied professionals. The feedback we have received highlights the need for better communication between CAMHS, outside agencies and service users, as well as the need to improve prescriptions and the environment at Richmond Royal. Additionally there is a need to continue to collect the experiences of the young service users of the trust to inform future service development and improvement.

## Next steps

1. We shared this report alongside the anonymised data collected by this survey in line with the informed consent that we received from respondents with South West London and St George's Mental Health Trust, Achieving for Children, Richmond upon Thames Council and Richmond Clinical Commissioning Group.

Using our power to make recommendations and require a response, we asked:

**1.1. How will the trust and Achieving for Children respond to the experiences that parent carers and schools have provided? What actions will it take as a result?**

### Response from South West London and St George's Mental Health NHS Trust

'In specifically responding to the feedback from this survey we have commenced a series of actions regarding each issue and improvements will be monitored at team level in Richmond, and also through the CAMHS Operational Group that is chaired by myself as Service Director and attended by Dr Diana Cassell, Clinical Director for CAMHS.'

### Response from Achieving for Children

Achieving for Children provided its plans in response to this report:

- The outcomes of the survey will be shared with the Tier 2, Emotional Health Service at their team meeting in September
- Agreed areas for development will be added to the Improvement Plan for the Division
- Themes from the survey will be discussed further with Headteachers and SENCOs;
- Themes from the survey will be discussed further with the Single Point of Access

**1.2. How will the trust and Achieving for Children ensure that patient feedback is collected and included in shaping Richmond CAMHS services?**

### Response from South West London and St George's Mental Health NHS Trust

*'Laura Tyrrell is the recently appointed children and young people's participation officer working across the Trust. Her work includes holding events and one-off projects for young people to develop the skills they need to confidently feed into and improve the service. Forthcoming workshops include: communication skills training; interview panel*

*training and 1:1 work with individual children and young people. There will also be opportunities for children and young people to apply to sit on the Richmond and Kingston youth panel and to take part in anonymous waiting room feedback activities. Laura can be contacted at [CAMHSparticipation@swlstg-tr.nhs.uk](mailto:CAMHSparticipation@swlstg-tr.nhs.uk).*

*We are also training Richmond CAMHS staff to ensure that participation is a key focus within the team. Over and above these measures to collect patient feedback, CAMHS clinical staff within the Richmond team are also collecting experience questionnaires' as part of each treatment session in order to understand how helpful the work has been from the young person's perspective. This is part of the Children and Young People's Improving Access to Psychological Treatment (CYPIAPT).'*

### **Response from Achieving for Children**

*'As the Emotional Health Service is a CYPIAPT Service, extensive feedback is collected on a session by session basis for all children and young people;*

- The AfC division collects feedback from schools on this area as part of the annual service;*
- The schools survey collects data relating to young people's emotional and mental health which informs future service delivery.'*

**3.** We will Invite Janet Grimes, CAMHS Team Manager, and Laura Tyrrell, Young People's Involvement Officer, South West London and St George's Mental Health Trust, and representatives from Achieving for Children Richmond to feed into the next stages of our work regarding CAMHS in Richmond in which we hope to engage directly with children and young people with direct experience of using the CAMHS service. This will include devising the questionnaires to ensure they are clearly focused and appropriate to the target audience.