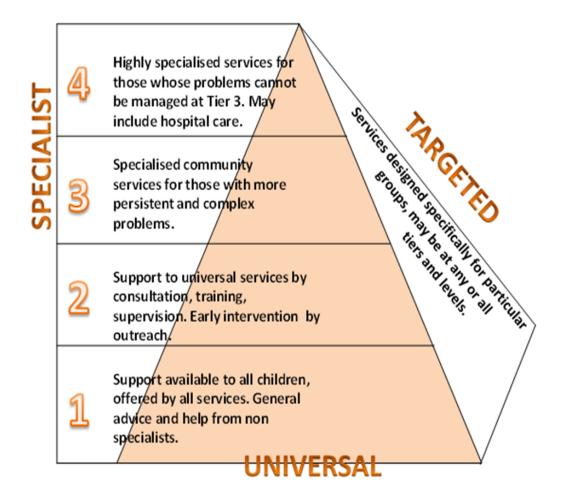
GUIDELINES FOR REFERRERS TO SPECIALIST CHILD AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS AND CAMHS LD)

This document sets out the referral process and criteria for professionals referring to the multi-disciplinary Tier 3 Specialist Child and Adolescent Mental Health Service (CAMHS) which includes CAMHS for children and young people with Learning Disabilities (CAMHS LD). The service is specifically for children and young people who have persistent and complex problems and may include referral to a Tier 4 service if required. A diagram explaining the current system of tiers of care within child and adolescent mental health is presented below Please note that for children aged 10 years and above, Tier 2 services are provided by The CLD Trust, which can be accessed separately.



The purpose of this document is to provide guidance to professionals wishing to refer into specialist CAMHS. However the list is not exhaustive and we welcome discussion on children and young people you may wish to refer.

1. Introduction

Referrals to Specialist CAMHS and CAMHS LD

There is a single point of referral for both services at the Linden Centre. Referrals are received in writing or by fax 01432 378940 using the referral form, and following any Tier 1 and/or Tier 2 involvement (from CLD). If it is a second referral, it could be helpful to include any copies of existing reports and correspondence. We do not accept referrals by email or telephone.

Referrals to CAMHS LD

Referrals for CAMHS LD follow the same process using the same referral form. However the child or young person <u>must</u> have a diagnosed learning disability/global developmental delay and there must be a mental health or behavioural component to the problem/need.

If there are existing reports prepared about the child or young person then these can be helpful in understanding the situation

How to discuss a possible referral

If you would like to discuss a potential referral for CAMHS please phone the Linden Centre (01432 378940) and ask to speak to the duty worker. We would expect that they will return your call on the same day but this may not be an immediate call back if they busy with an emergency.

2. Who Can Refer to Specialist CAMHS and CAMHS LD?

Referrals can be made by a variety of agencies including:

- General Practitioners (GPs) from Herefordshire,
- Specialist Schools,
- Schools can refer following recommendations from Educational Psychologists or Specialist Advisory Teachers,
- Educational Psychologists,
- Behavioural Support Team (BST),
- Specialist Advisory Teachers.
- School Nurses,
- Health Visitors,
- Community Paediatricians,
- Social workers,
- ZIGZAG workers
- Youth Offending Team.

All other professionals wishing to refer to Specialist CAMHS or CAMHS LD need to request the child's parents or child or the young person make an appointment with their GP who will complete the referral.

3. Referral checklist and information required

General Considerations - checklist

- Have you met with the parent(s)/carer(s) and/or the child or young person and explained your reasons for the referral?
- Has the referral to specialist CAMHS or CAMHS LD been agreed with the parent(s)/carers(s) and the child or young person?
- Does the child or young person have a Herefordshire GP?
- Have you obtained consent from the family or child or young person to gather further information from other professionals?
- Have any assessments already been carried out e.g. CAF, SEND, Educational/Health/Social Care?
- Are there other organisations that are better equipped to meet the need; for example, parenting courses, bereavement organisations, Women's Aid, etc?
- What action has already been taken to address the difficulties?

Age for Referrals

Specialist CAMHS

- Child or young person up to 18th birthday consider referral to Specialist CAMHS
- After 18th birthday consider referral to Adult Mental Health Services

CAMHS LD

- Child or Young Person up to 18th birthday with a diagnosed learning disability usually from an Education Psychologist or a Paediatricianconsider referral to CAMHS LD
- After 18th birthday with a diagnosed Learning Disability, consider referral to Adult Learning Disability Team

General information from the referrer

- Name and date of birth of referred child or young person
- Consent from parents and/or child or young person to access Specialist CAMHS or CAMHS LD
- Address and telephone number of the family or young person
- Details of the person who has parental responsibility
- Family relationships if the parents live separately
- Last name if different to the child or young person's
- GP details and NHS number
- School
- Details of any other professional involvement e.g. social worker
- Description of the difficulty and the reason for the referral
- Are there any safeguarding concerns?

Essential information about the referral

This information helps to make sure referrals are processed swiftly.

- What are the specific mental health and emotional difficulties that you want the service to address?
- How long has this been a problem and why is the family seeking help now? Is there anything that has recently changed?
- Is the problem situation specific or generalised?
- What is your understanding of the problem/issues involved?
- What is the outcome you are expecting?
- What work has already been completed with the child/young person and what was the outcome?

Further information which is helpful and appropriate

- Who else is living at home and details of separated parents
- Who else has been or is professionally involved and in what capacity?
- Has there been any previous contact with Hereford CAMHS or another CAMHS service?
- Has there been any previous contact with Social Services?
- Details of any known protective factors?
- Any other relevant factors, e.g. family, life events and/or developmental factors?
- Is an interpreter or other special facility required?
- Any information relating to education or other support services

Emergency Referrals

In an emergency please contact the local emergency services in the usual way. We do not operate an emergency system but we do accept urgent mental health referrals. These should be faxed to 01432 378916 and you should telephone the Linden Centre to make sure they have been received. An urgent referral is one where there is an acute mental health problem which gives rise to increasing risk behaviours and may result in harm to self or others.

Referral numbers and addresses

Write to: The Linden Child & Family Centre, The Health Centre, Goal Street,

Hereford. HR1 2HU

Telephone: 01432 378940

FAX: 01432 378916

Visit: www.2gether.nhs.uk/camhs

Referrals that are unlikely to be accepted for CAMHS or CAMHS LD

Specialist CAMHS or CAMHS LD will not see as a matter of routine:

- Children and young people who display inappropriate or challenging behaviour in school and who have not received input from any relevant educational support services
- Children and young people whose behaviour, although challenging, is age appropriate, for example, tantrums in 3 year olds
- Children and young people with behavioural problems in the context of inconsistent parenting without previous parenting support being offered and accessed, and in the context of a child or young person not having a mental health difficulty.
- Children and young people where behaviour problems are primarily home based, and have not had any input from other services e.g. Social Services, Parenting, Children's Centres etc
- Children and young people with Autism who do not have mental health problems
- Children and young people whose problems are primarily school based (Schools have their own resources e.g. Educational Psychologists and Learning and Behavioural Support Services, and these should be contacted in the first instance)
- Children and young people who only require provision of continence products
- Children and young people who only have physical health problems

Safeguarding Issues

If there are concerns about on-going safeguarding issues, these should be raised with MASH (Multiagency Safeguarding Hub) on 01432 260800 prior to referring to Specialist CAMHS.

Children and young people who have suffered significant harm through emotional, physical or sexual abuse or who have suffered neglect or are in the Looked-After System may develop mental health problems as a result of their life experiences. If a child or young person is in one of these categories and has mental health difficulties then please contact CAMHS to discuss whether a referral would be appropriate.

4. Specialist CAMHS: guidelines for specific conditions

Please consider a referral if the following signs/symptoms are present:

Psychosis

Where there is evidence of thought disorders (delusions), perceptual disturbances (hallucinations) and impaired reality testing, refer immediately to the service as these symptoms warrant urgent referral to CAMHS and/or the Early Intervention Service. If these symptoms are related to substance misuse refer to ZIGZAG in the first instance.

Self-Harm

Where there is a concern about self harm in the context of other difficulties, referrers may telephone to discuss the case with the Specialist CAMHS duty clinician (01432 378940) to help determine the level of priority before making a written referral

Where a person has suicidal ideas and/or a suicide plan, contact the CAMHS duty clinician on 01432 378940.

<u>Note</u>: Patients who have taken an overdose or have seriously self-harmed should be sent direct to the A+E Department and not referred to CAMHS. The hospital will subsequently refer onto our service for further assessment.

Depression

There is evidence of the following symptoms

- Change in mood, loss of interest and enjoyment, excessive fatigue, reduced energy and/or activity
- Depression where one or more family members (parents or children) have multiple-risk histories for depression
- Mild depression in those who have not responded to interventions in Tier 1 or Tier 2 (The CLD Trust) after 2-3 months
- Moderate or severe depression (including psychotic depression)
- Signs of a recurrence of depression in those who have recovered from previous moderate or severe depression
- Unexplained change in functioning of a least one month's duration that is harmful to the child's or young person's physical health
- Active suicidal ideas or plans

Eating Disorders

When there is concern in relation to an eating disorder, it is essential to complete medical investigations (biochemistry, weight, height etc) via the GP prior to the referral.

Obsessive Compulsive Disorder

Recurrent obsessions and/or compulsions which impact and are severe enough to interfere with normal age appropriate daily function

Post Traumatic Stress Disorder/Acute Stress Disorder

Following a traumatic event, a child or young person may continue to demonstrate hyper-vigilance, avoidance, flashbacks, withdrawal or marked increase in unexplained temper or episodes of other distress which would indicate PTSD

Anxiety

This should be referred through Tiers 1 and 2 initially (The CLD Trust). If no improvement has been demonstrated within 2-3 months refer to CAMHS. Please do not hesitate to refer if anxiety is causing severe impairment.

Substance Misuse

 In the absence of significant co-morbidity, for example anxiety and/or depression, refer to ZigZag as this agency provides advice and support in the first instance to young people and/or parents and/or professionals where substance misuse is involved In the presence of co-morbidity, contact CAMHS and speak to the duty clinician or refer to GP or the CLD Trust where appropriate

Neurodevelopmental Difficulties (including ADHD and ASD)

This group of children should have already received assessment, advice and some management from Tier 1 & 2 and/or Community Paediatrics prior to referral to Specialist CAMHS.

The difficulties which may impact on daily living and are criteria which would support a referral include:

- Significant and longstanding difficulties with the child's peer relationships. For children under the age of 10 years old they should be referred to Community Paediatrics first.
- Unusual or very fixed interests and bizarre or unusual behaviours.
 When these are thought to be in relation to an autistic spectrum disorder and the child is under the age of 10 years old, they should be referred to Community Paediatrics first.
- Marked preference for routine and difficulties adapting to change.
 When these are thought to be in relation to an autistic spectrum disorder and the child is under the age of 10 years old, they should be referred to Community Paediatrics first.
- Hyperactivity, impulsivity, inattention in more than one setting
- Conduct Disorder following parental interventions with agreement from the young person to access support
- Behaviour arising from already diagnosed developmental problems that significantly challenges their relationship with parents/carers

Response to Bereavement /Loss

Children's response to grief can be varied and age-dependant. It may be more appropriate in the first instance to refer to other agencies e.g. The Phoenix Trust, Hope Support Service or The CLD Trust for support. However should the grief process not resolve you may want to consider referral if the child or young person

- Is experiencing significant distress when the loss has had an extreme impact on the child and their functioning
- Is experiencing significant distress and/or difficulties following a bereavement or loss that has occurred following extreme circumstances e.g. illness, suicide or an accident

Family Difficulties

Children and young people may present with emotional and behavioural difficulties in response to family stress e.g. parental discord, divorce or separation. If referrers are aware of these issues, please encourage parents to make efforts to resolve problems prior to referring the child.

- The CAMHS Team should not be used to support children in situations where problems need first to be resolved by parents. More appropriate support can be obtained from other agencies e.g. Children and Divorce, Family Mediation and CLD Youth Counselling
- If there are severe problems, then referrers should consider referral to Social Services and/or parenting support (i.e. Triple P) prior to referral

- The CAMHS Team will not be involved in any legal issues in relation to parental separation. Reports to the court if required should be commissioned by solicitors.
- Consider referral to Specialist CAMHS when involvement with Tier 2 has produced no demonstrable change or improvement

Elimination disorders such as Soiling and/or Enuresis

There is no specific service from Specialist CAMHS and CAMHS LD for such disorders and referrals will only be accepted from a specialist clinic/clinician when there is also evidence of mental health problems.

School Refusal/Separation Anxiety Disorder

Schools have their own resources e.g. Educational Psychologists and Behavioural Support Services. These should be involved prior to referral. A summary of the schools' involvement and action taken is essential prior to a referral. CAMHS does not accept referrals for short term non-attendance at school. Please refer only when the following conditions apply:

- When there is severe difficulty in the child attending school, often amounting to a prolonged absence and in the context of problems other than just parenting
- When the child experiences severe emotional upset when faced with the prospect of attending school. This may be demonstrated by excessive fearfulness, anxiety, temper, misery and complaints of feeling unwell without any physical cause
- When an underlying mental health problem is suspected e.g. panic disorder.

Psychosomatic Problems

When a child is experiencing physical symptoms, initial referral via a GP to a Paediatrician is recommended. A referral to Specialist CAMHS is only appropriate when there is significant impact on the child or young person's functioning and physical causes have been excluded

5. CAMHS LD: Guidelines for specific conditions

Children with learning disabilities often have complex needs. Whilst not exhaustive, some of the needs have broken down below in relation to possible reasons for referring to specialist CAMHS LD.

Developmental and Learning Disabilities

It is preferable that the child receive an assessment from a Community Paediatrician prior to a referral to CAMHS LD.

The reasons for a referral to CAMHS LD may include:

- Significant difficulties with the child's behaviour at home
- Unusual or very fixed interests and bizarre or unusual behaviours
- Reduced capacity to cope with the demands of everyday life, including transitioning through adolescence and puberty.
- Marked preference for routine and difficulties adapting to change

- Behaviour arising from developmental problems that challenges their relationship with parents/carers
- The need for parenting advice and support.

Family Difficulties

Children and young people may present with behavioural difficulties in response to family stress e.g. parental discord, divorce or separation. If referrers are aware of these issues, please encourage parents to make efforts to resolve problems prior to referring the child. Referrals to parenting courses may be appropriate prior to the referral to the CAMHS LD Team.

The reasons for referral to CAMHS LD may include:

- Interpersonal difficulties (i.e. building and maintaining relationships) within the family unit
- Children with significant attachment needs (including, high levels of controlling behaviour)
- Children who have experienced abuse and / or neglect
- Children who are struggling to adjust to being in the Looked After Care system
- The need to provide parenting advice and support from an attachment perspective

Soiling/Enuresis

Many children with learning disabilities have continence needs but a referral to CAMHS LD must indicate that there are additional problems. Where there is evidence of a behavioural or mental health component to the soiling or enuresis, support in helping family to reduce these problems and promote continence may be provided.

Emotional dysregulation and challenging behaviour

There are widely differing criteria for determining and measuring challenging behaviour. It is important to consider how children with learning disabilities may communicate their feelings / needs through their behaviour. Thus, the mental health needs of children with learning disabilities may look very different to the 'neuro-typical' population.

The reason for referring to CAMHS LD may include:

- Unresponsive low mood
- High expressions of anxiety and distress
- Dealing with and responding to trauma (including, managing flashbacks, nightmares etc.)
- Challenging behaviours that directly impact the health or quality of life of the child, including: aggressive, disruptive and self-injurious behaviours
- Underdeveloped social skills and problems in building and maintaining relationships with peers.

6. CAMHS AND CAMHS LD PATHWAY OF CARE:

Specialist CAMHS and CAMHS LD services operate a model of care called CAPA: Choice and Partnership Approach. CAPA aims to improve CAMH services by ensuring clients are actively involved in their care, appointments are timely, clients are seen by clinicians with the right skills and services are monitored with outcome measures.

CHOICE appointment

From the date of receiving the referral, the child, young person and their family will be offered an initial CHOICE appointment within four weeks. Usually, the child is invited to come with the parents for the first appointment. However, it is possible to subsequently arrange an additional appointment to meet with parents alone to gather information about the 'presenting problem' that is deemed not appropriate to discuss in front of the child.

The aim of CHOICE is to make a collaborative decision about what is happening and what will help (i.e. further service involvement or alternative). At the appointment, in conjunction with the child and parents, a decision is made about whether Specialist CAMHS or CAMHS LD will provide support or whether an alternative service is more appropriate.

Partnership

If it is agreed that further intervention is indicated, the child or young person and their family will be offered further interventions. .

Within CAMHS LD this will be support from Community Nursing or Clinical Psychology..

The practitioners work flexibly, to meet the needs of the child. The nature of the work is community based and can take place in the child's home, school and child development centres.

Within Specialist CAMHS this will be from the multi-disciplinary team by the person with the most appropriate skills and expertise. This may include input from: psychologists, social workers, nurses, occupational therapists, family therapists, psychotherapists and other professionals. The service does operate a waiting list but it is hoped that new referrals will be seen within 4 weeks for CHOICE. Urgent referrals are prioritised.

Complaints, Concerns and Compliments

If you have any compliments, concerns or complaints about the service please make these known to the Team Manager/Service Manager at the Linden Centre. We are always happy to discuss any issues.

If you wish to make a complaint then you can write to:

Chief Executive
2gether NHS Foundation Trust
Rikenel
Montpellier
Gloucester GL1 1LY

More details can be obtained on the website: www.2gether.nhs.uk

Useful links and resources:

The Linden Child and Family Centre

The Linden Child & Family Centre,

The Health Centre,

Goal Street.

Hereford. HR1 2HU

Telephone: 01432 378940

FAX: 01432 378916

Visit: www.2gether.nhs.uk/camhs

Mind Ed

E learning for practitioners www.minded.org.uk

Head Meds

Information about medication for young people www.hedmeds.org.uk

Royal College of Psychiatrists

Information for parents/carers, children and young people www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo.aspx

Young Minds

The voice of young people's mental health and wellbeing www.youngminds.org.uk

National Autistic Society

www.autism.org.uk

NICE Guidance

National Institute for Health and Care Excellence – guidance on standards and pathways http://www.nice.org.uk/guidance

Herefordshire Carers Support

Information and advice for carers www.herefordshirecarerssupport.org

Updated June 2015 by Katherine Smith

Herefordshire CAMHS REFERRAL FORM



The Linden Child and Family Centre

Health Clinic Gaol Street Hereford HR1 2HU

01432 378940

Referral Form - CAMHS

Status of referral: URGENT [] ROUTINE []

Sections 1, 2, 3 and 4 are mandatory. Concerns may be provided in the form of a typed letter attached to the referral form.

Please ensure that the form is completed as fully as possible as omissions may delay the referral. THE FORM MUST BE POSTED OR FAXED. Fax number: 01432 378 916. For discussion on whether a referral is appropriate, please contact The Linden Centre, Tel: 01432 378 940 and speak to the Duty Clinician.

1. Details of child or young person				
First Name		NHS Number (if known)		
Family Name		GP Name		
Alternative Name (AKA)		GP Practice		
Date of Birth		Age		
Current Addre	ss			
Post Code		Tel No		
Ethnicity		Religion (if known)		
Gender:	Female [] Male []	First Language		Interpreter Needed Yes [] No []
Current School		SEN Yes[]] No []	

		1. Does the child have a physical		
Disability:- please describe the nature of disability and			disability?	
provide additional details as required:			Yes [] No []	
			Does the child have a diagnosed learning disability?	
			Yes [] No []	
			3. Severity of learning disability:	
			Mild [] Moderate [] Severe []	
			4. Is there a known cause for the learning disability?	
			Yes [] No []	
			5. Is the child on the Autistic Spectrum?	
			Yes[] No[]	
			6. Does the child have epilepsy?	
			Yes [] No []	
2. Details o	f all persons with parental	responsibility		
Parent/Carer Name		Parent/Carer Name		
Date of Birth		Date of Birth		
Address		Address		
Post Code		Post Code		
Relationship		Relationship		
Tel No.		Tel No.		
3. Care status: Current legal status, Orders & dates				
Looked After? (i.e. under care of Local Authority) Yes [] No [] e.g. foster/residential care or adoption		Children Act	Section	
Is the child subject to Child Protection Plan? Yes [] No []		Category		
CAF completed? Yes [] No []		If YES please	e attach	

4. Description of concerns The description of the problems may be provided in the form of a typed letter attached to the referral form.
A. Current Situation (Please describe below what is happening, where and when, frequency, duration, giving examples of specific incidents or events where possible, and impact on Physical Health, Education, Self Esteem, Emotional Wellbeing, Relationships, it is important that you document the mental health presentation of the referred child or young person and any significant risk factors there might be.
B. History (Please explain below background to problems; is it worsening or stable; what has been tried; what has worked so far) Please provide current or previous interventions (i.e. behavioural / parenting groups, etc.)
Other – are there any influences that may impact on the current difficulties, e.g. parental separation, family health, poor housing, significant losses or events etc. Please describe below.
C. Please list if there have been any other assessments undertaken by different

Court reports)					
D. Please state any curre	ent medications				
5. Other Agency involveme	nt Past or Present (please	circle)			
	ealth Visitor, School Nurse, Adul				
	ch, Behaviour Support Services	i Workar Froatti			
		oort Worker			
Children and Families Service – Social Worker, Family Support Worker					
Other agencies not covered above					
Name of Agency	Contact Name	Tel No			
6. Agreement to/Awareness of Referral					
Who is aware of this referral and are they in agreement with it? Can we contact them?					
Who is aware of this referr	al and are they in agreement with	th it? Can we contact them?			

Child Aware? Yes [] No []	In agreement? Yes [] No []				
Parent Aware? Yes [] No []	In agreement? Yes [] No []				
Carers Aware? Yes [] No [In agreement? Yes [] No []				
GP Aware? Yes[] No[]	In agreement? Yes [] No []				
School Aware? Yes [] No []	In agreement? Yes [] No []				
As a matter of course we can contact any of the above persons to discuss the referral. Is there anyone you would not like us to contact and what is the reason for this?					
7. Referrer's details (if GP is not referrer)					
Name of referrer	Job title/Role				
Address					
Post Code	Tel No				
Signature of Referrer	Date				
Data Protection / Confidentiality					
The information on this form will be used to assess the need for a service. It may be shared with other agencies when this is necessary in order to assess the need or to provide an appropriate service.					
I * CONSENT / REFUSE to allow the sharing of information Signed					
(* please delete as appropriate)					