



RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

CORPORATE PARENTING BOARD

2ND OCTOBER 2023

MENTAL HEALTH SUPPORT

**REPORT OF THE DIRECTOR OF SOCIAL SERVICES IN DISCUSSION
WITH THE RELEVANT PORTFOLIO HOLDER, COUNCILLOR G CAPLE**

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1. PURPOSE OF THE REPORT

- 1.1 This report provides information about the services that are available to improve the emotional well-being and mental health needs for young people with cares and support needs.

2. RECOMMENDATIONS

It is recommended that the Corporate Parenting Board:

- 2.1 Note the information.
- 2.2 Decide whether future reports are required.

3. REASONS FOR RECOMMENDATIONS

- 3.1 Alongside partner organisations, the Council has a duty to prevent need from escalating, and to meet the needs of children with care and support plans; this includes children who are looked after and care leavers as well.
- 3.2 Welsh Government's recently published Corporate Parenting Charter – A Promise from Wales ([Corporate parenting Charter | GOV.WALES](#)) includes the following undertaking at p.3 in relation to looked after young people and care leavers:
- **Good Health** – We will provide support to access the right health care and advice needed to support the best physical, mental health and general well-being for all care-experienced children and young

people. This is because all children have the right to the best possible health and support.

4. BACKGROUND

4.1 Children's Services last provided information on the subject to Scrutiny Committee in 2022. Since that date there has been changes in service provision that is matched by increasing need.

4.2 Those developments have been summarised below:

4.3 Early Years Strategy

Responsibility for the **RCT Early Years Strategic Plan 2022-25** sits jointly with Education and Inclusion Services and Community and Children's Services. For the purpose of this strategic plan, Early Years is defined as the ante- natal period up until a child is 7 years of age.

This plan sets out Rhondda Cynon Taf's medium to long- term vision for ensuring families have access to the services they need during the Early Years and Foundation Phase of school and that children have access to quality provision in order to maximise their chances of leading a healthy, happy and fulfilling life. Acknowledging that strong collaboration between partners is fundamental to achieving the vision of *'Every child in RCT has the right to have the very best start in life with access to equitable and excellent Early Years Services'* the strategic plan identifies four strategic priorities:

- All children and families in RCT will have timely access to high quality services and early intervention and prevention support throughout the Early Years;
- Parents and carers are actively engaged in their child's development and learning from the ante-natal period to the age of 7;
- Effective collaboration between Children's Services, Education, Health and wider partners upholds a strong Early Years system across the County Borough that facilitates smooth transitions for all 0-7 year olds, that is understood and promoted by an appropriately trained wider workforce;
- Information sharing and data management supports the effective and timely identification of children at risk of not meeting the developmental milestones necessary to progress effectively through the early years and tracks the outcomes for children of interventions delivered.

4.4 Agreement has been secured from the Regional Partnership Board to allocate Regional Integration Fund money in 2023-24 to support the regional delivery of interventions to support children's emotional wellbeing. It will compliment the range of services that are already available via the Resilient Families Service and seeks to address a provision gap for children in this age group. In RCT this will see the implementation of an **integrated wellbeing pathway for 8-11 year olds** requiring support to build their resilience and improve their emotional and mental health and wellbeing. Focusing on the provision of support for children outside of school the project will focus on:

- A Child's Right to Play (UNCRC) acknowledging that play is a protective factor for children's wellbeing. The methodology will use the principles of play as an engagement technique to provide community based 121 support;
- making support fully accessible and where necessary helping children to re-engage with universal services;
- building a child's resilience to manage family relationships and cope in the home environment employing a systemic / relational approach to problem solving.

4.5 This pathway will also be compliant with the principles set out in the NEST Framework ([NEST framework \(mental health and wellbeing\): introduction | GOV.WALES](#)) that aims to improve the integration of services and support to meet the emotional and wellbeing needs of children and families.

Development of the Whole School Approach known as Shine

4.6 CAMHS In-Reach (SHINE) service was implemented in September 2022, and comprises of 3 team leads and 13 emotional wellbeing practitioners covering the entire Cwm Taf Morgannwg (CTM) primary and secondary school's footprint.

4.7 The purpose of the team is to support and maintain early identification and appropriate input for the emotional and mental wellbeing of the children aged 4-18 years and staff within CTM schools.

4.8 The service complements the Whole School Approach by applying the assessment framework and identifying current mental health and wellbeing provision and needs of the individual schools. Reviewing their own wellbeing landscape enables the SHINE service to develop plans to address the deficits and build on its strengths.

4.9 Focus has been on planning in a co-productive manner improving the integration of services and ensuring wider access to trusted adults. School staff, Children and young people and parents/carers have had

the opportunity to access early help and enhanced support in a timely manner adopting the NEST/Nyth framework.

- 4.10 To date, 2 pilot phases of approximately half of the schools in CTM have been completed with phase 3 currently in progress, feedback from stakeholders so far has been extremely positive with good outcomes. Phase 4 will commence in January 2024 with an end date of April 2024 the completed pilot will then be fully reviewed and evaluated.
- 4.11 All schools have full access to a dedicated team lead and emotional wellbeing practitioner at all times throughout term time.
- 4.12 The prevention and early intervention approach is key to upskilling tier 1 professionals, whilst also maintaining their emotional and mental wellbeing. SHINEs aim is to ensure effective and robust pathways to improve emotional and mental health needs of children from universal to more specialist services. The service has significantly progressed since its implementation date and currently provides schools with:
- Consultation and school cluster forums.
 - Relevant Emotional Mental Health Training.
 - Multidisciplinary fora.
 - Parent/ School staff drop-in sessions.
 - Psychoeducation to all.
 - 1-1 and group providing low intensity support.
 - Support and advice into PSE days.
 - Universal and targeted provision of resources through QR codes and information packs.

The SHINE service operates an open access support policy to all schools.

Embedding the Single Point of Access for CAMHS

- 4.13 A single point of contact for access to CAMHS is now well-embedded provided access to consultation, advice and signposting for professionals and families. CAMHS colleagues have advised that there has been improvement in the waiting times for CAMHS assessments over the last 6 months following additional capacity being identified. The waiting list has reduced from 333 at the end of March 2023 down to 124 at the end of July 2023. As a result of the reduction in the waiting list 89% of patients receiving assessments in July were seen within 28 days. The average wait on the waiting list on the 8th September is 2.18 weeks and the longest wait is 3 weeks.

Launch of the Neuro-divergence Improvement Programme

- 4.14 On 6 July 2022 a Written Statement was published by Government outlining the understanding that services for autism and other neuro - divergent conditions are inconsistent and under-developed.
- 4.15 The Neuro-divergence Improvement Programme will take a whole systems approach and will be developed in partnership across sectors, such as health, education and social care. Improvement will be co-produced with people with lived experience. Looked after children are over represented in eth waiting list for assessment with waiting times of 2-3 years.
- 4.16 The improvement programme is intended to drive through transformational change reducing reactive activities such as waiting list initiatives, whilst continuing to grow innovative, co-produced services that support families pre and post diagnosis.
- 4.17 People face long waiting times to access diagnostic assessment and our looked after children are numbered amongst those waiting up to 3 years for assessment.
- 4.18 Whilst it is recognised that significant investment is required into diagnostic services to provide a more timely assessment, this alone may not have a significant impact on waiting lists or waiting times. Additional investment is intended to develop services to achieve the following outputs:
- The provision of pre and post diagnostic support models.
 - The provision of information, advice and support for those families and individuals who do not reach diagnostic thresholds.
 - Accessible information and resources pre and post diagnosis.
- 4.19 Colleagues at CTMUHB are coordinating;
- A Scoping Study to establish the support needs of parents with children who are Neurodiverse, with commissioned agency 'Together Better Consultancy'. The scoping study will review what support parents need for their children and what services already exist across the region.
 - A co-production Hackathon Event (20th Oct 23) – an event for professionals, parents, families and adults with lived experience is planned to help shape and **co-produce solutions** and help improve service - presentation at Board.

Development of a Therapeutic Approach for Children who are Looked After

4.20 MAPSS is a joint Local Authority and Regional Integrated Fund supported specialist therapeutic intervention service for care experienced children, especially those who have experienced placement breakdowns and those with plans for adoption. MAPSS is accessed via Children's Services Therapeutic Support Panel and is available for children with complex emotional and behavioural needs requiring a specialist therapy-led service that can deliver consistent and high quality intervention that includes:

- One off consultations to help make sense of the child's holistic needs and how best to support the child and their carers
- Provide a mixed model suite of suitable evidence based age appropriate therapies to address and overcome the difficulties the child is experiencing, including delivering trauma informed training to carers.

4.21 In the first year of commissioning MAPSS supported 108 children in RCT, with over 80% achieving placement stability.

Therapeutic Families Team (TFT)

4.22 This is a Council funded multi-disciplinary team offering consultation, therapeutic assessments and interventions. The team is made up of Systemic (Family) Psychotherapists and Educational Psychologists, the team receives referrals via the Children's Services Therapeutic Support Panel and is now part of the wider services approach to therapeutic provision for all children at risk of family breakdown and children looked after within our in house residential provision.

4.23 TFT offer a range of ways to intervene with individuals, families, and professionals, these include:

- Consultation.
- Individual therapy
- Family therapy with the whole family, or parts of a family and wider family network.
- Family Consultation/Choice appointments.
- Staff group supervision.
- Psychological Assessments.
- Trauma Recovery Model and TRM Panel.
- Group work.
- Non-Violent Resistance for individual families.
- Staff training and skills workshops

- 4.24 TFT have supported 111 children and families over the last 12 months, with 70% remaining in the care of parents or extended family.

Both MAPPS and TFT work from the foundation of the trauma recovery model and work to the therapeutic model that has been developed for RCT.

5 EQUALITY AND DIVERSITY IMPLICATIONS / SOCIO-ECONOMIC DUTY

- 5.1 This is an information report and an Equality Impact Assessment has not been carried out.

6 WELSH LANGUAGE IMPLICATIONS

- 6.1 A Welsh Language Impact Assessment has not been carried out.

7 CONSULTATION / INVOLVEMENT

- 7.1 Whilst each of these development has incorporated consultation including young person and parent / carer voice , there has not be consultation in relation to this information report.

8. FINANCIAL IMPLICATION(S)

- 8.1 There are no financial implications being brought to Corporate parenting Board's attention in this report, other than to note that services are under pressure due to demand.

9. LEGAL IMPLICATIONS OR LEGISLATION CONSIDERED

- 9.1 There are no legal implications arising from this report.

10. LINKS TO THE CORPORATE AND NATIONAL PRIORITIES AND THE WELL-BEING OF FUTURE GENERATIONS ACT.

- 10.1 The content of the proposed session links directly to:

- The Council's Corporate Plan Vision of '*a County Borough that has high aspirations, is confident and promotes opportunity for all*'; as it focuses on the specific priorities of '*People - Promoting independence and positive lives for everyone and Place - Creating neighbourhoods where people are proud to live and work*'.
- Three of the seven wellbeing goals that The Well Being of Future Generations (Wales) Act 2015' puts in place as follows:
 - A more equal Wales

- A healthier Wales
- A Wales of cohesive communities
- The sustainable approach promoted by the Well-being of Future Generations (Wales) Act through the five ways of working, by demonstrating how our work with children and families:
 - Seeks to make a long-term difference to people's lives
 - Supports the provision of preventative services and early help
 - Is integrated with relevant partner agencies.
 - Is collaborative in nature, seeking to find solutions within families and communities.
 - Involves families in determining what matters most, and how best they can be supported.

11. CONCLUSION

- 11.1 Services to improve young people's mental health needs are developing. However, demand continues to exceed the services that are available. This is especially evident in relation to neuro -diversity.
- 11.2 Professionals will continue to work on developing services knowing that families need, and value responses that are integrated across the organisations.

LOCAL GOVERNMENT ACT 1972

AS AMENDED BY

THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

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