

Report on feedback to Healthwatch Richmond regarding Richmond CAMHS services

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Introduction

Healthwatch Richmond were 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 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.

Copies of the online surveys are included in appendix 1.

This report presents the emerging themes arising from the qualitative responses and the quantitative responses to provide an overview of what respondents have said. It is not our intention to draw firm conclusions or recommendations from this report.

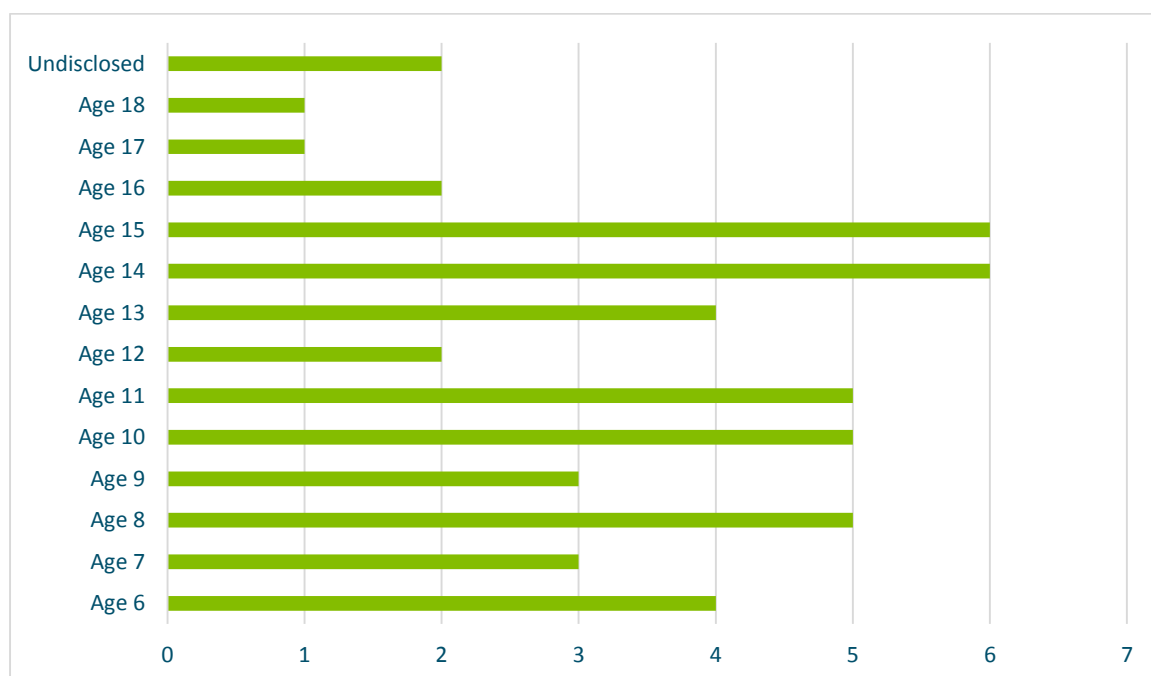
We gained informed consent from all respondents to share the data. We hope that this data will be used to inform the 2016 CAMHS strategy, help shape CAMHS services, and inform future Healthwatch work around CAMHS.

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:



Key findings

An initial review of the data was undertaken to present key themes that emerge, rather than to draw conclusions. Only one question in the survey specified a period of time for respondents to comment on, respondents 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 our work around CAMHS services.

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

- 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'* 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
- 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'*

Care

- Care was identified by many respondents as being *'medication focussed'* and offering little support in terms of coping methods for parents in how-to cope
- Cognitive Behavioural Therapy (CBT) was referred to by a number of respondents as being a *'positive experience'*

Waiting times and referral

- Most respondents 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

Support

- Some people raised concerns over the lack of support between yearly appointments with CAMHS.
- A lack of support was identified which focussed on alternatives to medication
- 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

Prescriptions

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

Working with other agencies

- Engagement with schools was described as low by a number of respondents
- 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

Relationships with staff

- A number of doctors were mentioned by name as providing excellent service
- A few comments described experiences of appointments where they felt staff were uncaring and uninterested in building a relationship with their child

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.

Quantitative data

The data presented below includes all responses and is not filtered between Tiers 2 & 3 or by age.

Transition

If your child is aged 16 or over do you feel they are adequately prepared for transition into adulthood?

Yes	22.2%
No	55.6%
Other	22.2%

The route to diagnosis

How easy was it to get a CAMHS assessment?

Very easy	2.3%
Easy	15.9%
Unsure	4.5%
Quite hard	34.1%
Very hard	43.2%

After the assessment with CAMHS, was a diagnosis given quickly and clearly?

Very easy	11.9%
Easy	23.8%
Unsure	9.5%
Quite hard	31%
Very hard	23.8%

How easy was it understand where you were along the pathway to diagnosis?

Very easy	4.8%
Easy	21.4%
Unsure	19%
Quite hard	35.7%
Very hard	19%

How easy was it to understand diagnosis and/or treatment?

Very easy	2.4%
Easy	46.3%
Unsure	9.8%
Quite hard	34.1%
Very hard	7.3%

Satisfaction with the service

How satisfied were you with the help to understand your child's diagnosis?

Very satisfied	13%
Satisfied	34.8%
No comment	15.2%
Not very satisfied	19.6%
Not satisfied	17.4%

How satisfied were you with where to find information about support?

Very satisfied	10.9%
Satisfied	13%
No comment	6.5%
Not very satisfied	50%
Not satisfied	19.6%

The suitability of the CAMHS waiting areas?

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

Responsiveness of Richmond CAMHS

How responsive did you find Richmond CAMHS

Reception area staff?

Very responsive	10.4%
Responsive	33.3%
No comment	18.8%
Not very responsive	31.3%
Not at all responsive	6.3%

Professionals seen?

Very responsive	22.9%
Responsive	33.3%
No comment	20.8%
Not very responsive	18.8%
Not at all responsive	4.2%

CAMHS working with other agencies

How effectively do CAMHS staff work with your child's school?

Very effective	2.1%
Quite effective	8.3%
No view	35.4%
Not very effective	31.3%
Very ineffective	22.9%

How effectively do CAMHS staff work with your child's GP?

Very effective	2.1%
Quite effective	6.3%
No view	39.6%
Not very effective	35.4%
Very ineffective	16.7%

How effectively do CAMHS respond to assistance requests?

Very effective	6.3%
Quite effective	12.5%
No view	35.4%
Not very effective	22.9%
Very ineffective	22.9%

Experience following changes in 2014

Significant improvement	0%
Improvement	9.1%
No change	34.1%
Worse service	22.7%
Significantly worse	22.7%
Other	11.4%

CAMHS schools survey

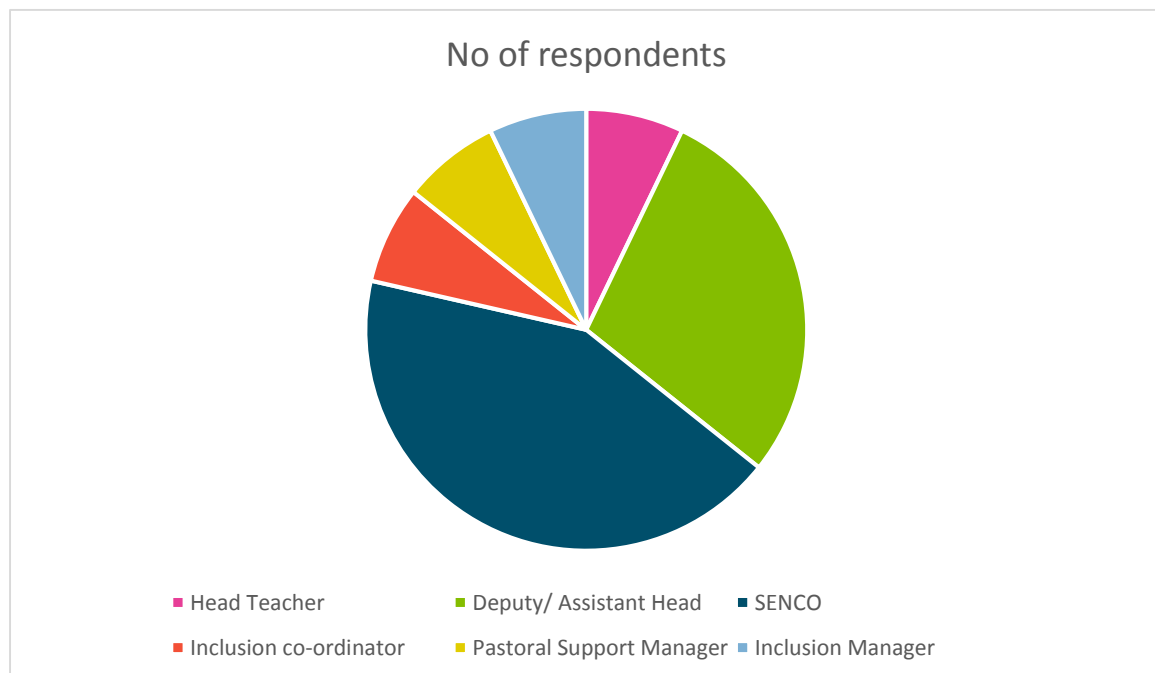
Introduction

Healthwatch Richmond were invited to work in collaboration with Richmond SEND family voice to engage with local schools in Richmond around their experience of CAMHS services in Richmond. The survey was distributed online to school head teachers and SENCO's (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 Queens 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:



Qualitative data

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. Similar to the CAMHS user survey only one question in the survey specified a period of time for respondents to comment on, 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 our work around CAMHS services. Key themes from responses are presented as key findings below.

Communication

- There is a lack of engagement with schools
- Low engagement with schools impacts on parents and students, especially in understanding 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

Support

- 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

Moving forward

- One of the top changes respondents were keen to see from CAMHS was an improvement in communication between schools, parent's carers and the CAMHS services around referrals
- People reported difficulties providing feedback on referrals between CAMHS and schools, stating that there was no appropriate mechanism

Quantitative data

Referral to CAMHS via single point of referral

How easy it to make a CAMHS referral for a student you have concerns about?

Very easy	20%
Easy	46.7%
Unsure	13.3%
Quite hard	13.3%
Very hard	6.7%

How easy is it to follow up a student's progress?

Very easy	6.7%
Easy	26.7%
Unsure	6.7%
Quite hard	40%
Very hard	20%

Once a referral is made do you hear back from CAMHS?

Yes	64.3%
No	35.7%

Working with CAMHS

How effectively do CAMHS work with you as a school?

	Tier 2	Tier 3
Very effective	6.7%	0%
Quite effective	33.3%	30.8%
No view	26.7%	15.4%
Not very effective	20%	23.1%
Very ineffective	13.3%	30.8%

How effectively do CAMHS staff communicate with schools (written or verbally)?

	Tier 2	Tier 3
Very effective	7.1%	0%
Quite effective	42.9%	30.8%
No view	21.4%	15.4%
Not very effective	14.3%	23.1%
Very ineffective	14.3%	30.8%

Are you notified when a student is discharged?

	Tier 2	Tier 3
Yes	66.7 %	25%
No	33.3%	75%

Support from CAMHS

How easy was it for your students and their families to get support from CAMHS service?

	Tier 2	Tier 3
Very easy	7.7%	0%
Easy	23.1%	21.4%
Unsure	38.5%	14.3%
Quite hard	15.4%	35.7%
Very hard	15.4%	28.6%

How effective is the support received from CAMHS for your students?

	Tier 2	Tier 3
Very effective	14.3%	0%
Quite effective	14.3%	28.6%
No view	35.7%	35.7%
Not very effective	28.6%	35.7%
Very ineffective	7.1%	0%

Is there a notable impact on the students following receipt of CAMHS support?

	Yes	No
Tier 2	30%	70%
Tier 3	45.5%	54.5%

The CAMHS service

CAMHS underwent changes in 2014. Has this resulted in service improvements?

	Yes	No
Tier 2	50%	50%
Tier 3	33.3%	66.7%

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.

The key findings identified in this report are taken from a patient, carer, parent and a representative from a school's perspective.

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 service users of the trust to inform future service development and improvement.

Next steps

1. We will send this report to South West London and St George's Mental Health Trust and Achieving for Children, with the anonymised data collected from by this survey. Using our power to make recommendations and require a response, we will ask:
 - 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?
 - 1.2. How will the trust and Achieving for Children will ensure that patient feedback is collected and included in shaping Richmond CAMHS services?
2. We will Share 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
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 representation from Achieving for Children Richmond to feed into the next stages of our work regarding CAMHS in Richmond in which we hope to directly engage 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.

Appendix 1 Richmond CAMHS user survey

Richmond CAMHS: parent survey

Healthwatch Richmond are inviting schools and families of children and young people that access Child and Adolescent Mental Health services (CAMHS) in Richmond to share their opinions and experiences on the services they receive. All information will be held by Healthwatch Richmond confidentially. Information will only be passed by us to South West London and St Georges Mental Health Trust, Achieving For Children, Richmond upon Thames council and Richmond Clinical Commissioning Group anonymously. Healthwatch are working in partnership with Richmond SEND Family Voice, ADHD Richmond and Richmond NAS. The results of this survey will inform future CAMHS strategy and shape local CAMHS services. The closing date for responses to this survey is the 19th June, 2015.

Definitions

Single Point of Access: Achieving for Children's Single Point of Access (SPA) allows professionals and/or families to refer a child, young person or parent/carer that needs support in some way by contacting our SPA team. Referral is made by telephone or email via the Kingston or Richmond Council websites.

Tier 2: This is known in Achieving for Children as the Emotional Health Service. The Service is accessed through the Single Point of Access and is provided across the community of Kingston and Richmond. Professionals in the Service include Clinical Psychologists and Family Therapist. A wide range of support and interventions are provided, including Cognitive Behavioural Therapy and Systemic Family Therapy. Sessions take place in schools, the family home and buildings in the community.

Tier 3: Consists of specialist multidisciplinary teams such as Child & Adolescent Mental Health Teams (CAMHS), including psychiatrists. Children and young people may be presenting development problems such as autism, hyperactivity, or depression, eating disorders and even early onset psychosis. This service is provided by South West London & St. George's Mental Health NHS Trust and may be located in a local clinic or hospital such as the Richmond Royal or Springfield's.

Question 1

1. Are You

Mark only one oval.

- Male
- Female
- Prefer not to say

2. Please tell us your postcode

Question 2

3. Please tell us which level of CAMHS service your child or young person currently receives?

Mark only one oval.

- Tier 2
- Tier 3

4. If you are not sure please describe the service and/or support your child or young person receives.

Question 3

5. Please state the age/s of the young person/s currently accessing Richmond CAMHS service.

6. If your child is aged 16 or over do you feel they are adequately prepared for transition into adulthood?

Mark only one oval.

- Yes
- No
- Other:

7. Please add any further comments

The route to diagnosis

If you have received a diagnosis please complete the following question. if you have not received a diagnosis please leave the question blank

How satisfied were you with:

10. Mark only one oval per row.

	Very satisfied	Satisfied	No comment	Not very satisfied	Not satisfied
The help to understand your child's diagnosis?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Where to find information about support?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The suitability of the CAMHS reception waiting areas?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Please provide any additional comments

How responsive did you find Richmond CAMHS:

	Very responsive	Responsive	No comment	Not very responsive	Not at all responsive
Reception area staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Professionals seen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Please give examples of positive practice and areas for improvement

Working with other agencies

1. Mark only one oval per row.

	Very effective	Quite effective	No view	Not very effective	Very ineffective
How effectively do CAMHS staff work with your child's school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How effectively do CAMHS work with your child's GP?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How effectively do CAMHS staff respond to assistance requests?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Additional comments

Following the changes to CAMHS in 2014 has your experience with the service changed?

- Significant improvement
- Improvement
- No change
- Worse service
- Significantly worse
- Other:
- Please give examples of anything that has changed your experience since 2014

The future:

18. Moving forward, what top two changes would you like to see from CAMHS?

Further involvement

19. Healthwatch Richmond are looking to engage with children and young people around their experiences of the local CAMHS services. If you and your child or young person is interested in being involved in this, please can you provide your email address or contact details below.

20. If you would like to keep up to date with Healthwatch Richmond please provide your name and contact details for our mailing list.

Appendix 2
Richmond CAMHS schools survey

Richmond CAMHS: school's survey

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About you

1. Name
2. School
3. Job title

Referral to CAMHS via single point of referral

	Very easy	Easy	Unsure	Quite hard	Very hard
How easy is it to make a CAMHS referral for a student you have concerns about	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How easy is it to follow up a student's progress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Once a referral is made do you hear back from CAMHS?

Mark only one oval.

- Yes
- No

6. Further comments

7. From the time a referral is made, how long before a student can get support?

Working with CAMHS

8. How effectively do CAMHS staff work with you as a school?

Mark only one oval per row.

	Very effective	Quite effective	No view	Not very effective	Very ineffective
Tier 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tier 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. How effectively do CAMHS staff communicate with schools (written or verbally)?

Mark only one oval per row.

	Very effective	Quite effective	No view	Not very effective	Very ineffective
Tier 2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tier 3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Working with CAMHS

Are you notified once a student is discharged?

	Tier 2	Tier 3
Yes	<input type="radio"/>	<input type="radio"/>
No	<input type="radio"/>	<input type="radio"/>

11. Further comments

Please identify which tiers comments relate to

Support from CAMHS

14. Is there notable impact on students following receipt of CAMHS support?

	Tier 2	Tier 3
Yes	<input type="radio"/>	<input type="radio"/>
No	<input type="radio"/>	<input type="radio"/>

15. Please leave comments on any impact that CAMHS support has on your students
Please identify which Tier comments relate to.

The CAMHS service

16. CAMHS underwent changes in 2014. Has this resulted in service improvements?

	Tier 2	Tier 3
Yes	<input type="radio"/>	<input type="radio"/>
No	<input type="radio"/>	<input type="radio"/>

17. Moving forward what top two changes would you like to see from CAMHS?
Please state which CAMHS tier your suggestions relate to.

Any other comments