

## **CHILDREN, YOUNG PEOPLE AND SPECIALIST SERVICES DIRECTORATE**

### **5 Year Strategy for the Development of Child and Adolescent Psychotherapy in Northumberland, Tyne and Wear NHS Trust**

#### **EXECUTIVE SUMMARY**

##### **1) Purpose of Strategy**

This is a 5 year strategy aimed at developing the workforce in Northumberland, Tyne and Wear NHS Trust, to ensure child and adolescent psychotherapy is accessible across the whole of the Trust as part of the provision of comprehensive CAMHS.

##### **2) Strategic Context**

Key national and local documents have highlighted the need for a range of therapeutic modalities to be included in comprehensive CAMHS, including child and adolescent psychotherapy,.

##### **3) Outcomes**

Child and Adolescent Psychotherapists make a distinctive contribution to improving outcomes for children and young people through children's services delivery. They bring a psychoanalytic perspective to multidisciplinary teams and interagency practice which, as a result of the long and sustained period of training, offers a unique understanding of children, young people, parents and system's problems. Their skills and competencies support workers with less specialist trainings who will be in contact with highly disturbed and disturbing children and adolescents.

##### **4) Current Child and Adolescent Psychotherapy Workforce**

The current workforce is small (One part-time consultant, two part-time Band 8a posts and one trainee) all based in Newcastle Locality CAMHS.

##### **5) Identified Gaps in Service Provision**

There is a need to provide equity of access to child and adolescent psychotherapy services for users in Northumberland Tier 3 Locality Services, Learning Disability Services, Tier 4 Services, Forensic Service, and South of Tyne Adolescent Services.

The aim in 5 years is to have child and adolescent psychotherapy input into all Service Areas in the Trust to address the gap in services, ensuring adequate specialist skills providing treatment and training.

## **6) Cost of Not Providing a Comprehensive CAMHS**

Costs are high in not providing comprehensive CAMHS, in terms of emotional needs left unrecognised and untreated, and the actual financial cost incurred when children and young people's needs escalate.

## **7) Delivery Plan**

To develop the child and adolescent psychotherapy workforce, including the placement of up to four trainees with qualified child and adolescent psychotherapists in the Trust, at minimal cost to the Trust.

Over the next 5 years, the establishment of 3-4 Band 7/Band 8a Child and Adolescent Psychotherapy posts to address gaps in Service Areas in Northumberland Locality Services, Learning Disabilities, Early Intervention Services, South of Tyne Adolescent Services, Tier 4 Services, Forensic Service.

# **5 YEAR STRATEGY FOR THE DEVELOPMENT OF CHILD AND ADOLESCENT PSYCHOTHERAPY IN NORTHUMBERLAND, TYNE AND WEAR NHS TRUST.**

## **1. PURPOSE OF STRATEGY**

The strategy has been prepared for the Children and Young People's Business Group for ratification prior to presentation to the range of CAMHS Partnership and Commissioning Groups responsible for commissioning for the NTW Trust Services.

The strategy describes current provision of child and adolescent psychotherapy in the Trust, sets out the distinctive contribution of child and adolescent psychotherapy and identifies where needs are not currently being met both across geographical and service areas.

The strategy demonstrates how the Northumberland, Tyne and Wear NHS Trust can meet the aims of developing the workforce to ensure child and adolescent psychotherapy is accessible across the whole of the Trust as part of the provision of comprehensive CAMHS, as recommended by the National Service Framework for Children, Young People and Maternity Services (2004) and agreed in the Trust's workforce plans.

### **1.1 Services Provided by Northumberland, Tyne and Wear NHS Trust**

The Child and Adolescent Mental Health Service Directorate of Northumberland, Tyne and Wear NHS Trust currently includes the District service for Newcastle, the District service for Northumberland and District Services ( 3 Adolescent Service Teams, and a range of Psychology Services,) provided in Sunderland, South Shields & Gateshead. The Trust also provides District level Learning Disability services across the five areas. In addition to Local Services, the Trust provides Tier 4 Regional Child and Adolescent Service and a nationally commissioned Adolescent Forensic Service.

## **2. STRATEGIC CONTEXT**

### **2.1 National Policy Drivers**

Key national documents have highlighted the need for comprehensive CAMHS services to include a full range of treatment options in multi-disciplinary teams.

*DOH (2004) 'Every Child Matters'* states 'A critical mass of staffing is required for services to be safe, timely and effective and able to respond to a wide range of demands which include the provision of: specialist and multidisciplinary assessment and treatment services.' It emphasised the need for staff with the necessary skills and competencies to deliver a comprehensive CAMHS are needed, including child psychotherapists. It further suggested that 'Services offer a comprehensive assessment and

treatment service based on a skills mix drawn from professionals from the range of disciplines and therapeutic backgrounds.'

*DOH (2004) The Mental Health and Psychological Well-being of Children and Young People: National Service Framework for Children* suggested 'Arrangements are in place to ensure that specialist multidisciplinary teams are of sufficient size and have an appropriate skills mix, training and support to function effectively.' Further, there should be in place 'A mix of short term and long term interventions and care according to levels of complexity, co-morbidity and chronicity.'

*The Report on the Implementation of Standard 9 of the National Service Framework for Children, Young People and Maternity Services (2006)* highlights short and medium priorities to achieve the 10 year objectives of Promoting the Mental Health and Psychological Well-being of Children and Young People. It states that in order to achieve the objectives commissioners and providers of services need to recruit sufficient staff and develop the skill mix, capability and competencies to deliver all the assessment and treatment components of comprehensive CAMHS. Child and adolescent psychotherapy is an important component within the target areas and can make a significant contribution to local service delivery.

## **2.2 Strategic Aims within Northumberland, Tyne and Wear NHS Trust**

Northumberland, Tyne and Wear NHS Trust is a centre of excellence in the North East of England for the development and delivery of Child and Adolescent Psychotherapy. In 2002 the Trust successfully bid to host a post of Clinical Director of the newly formed Northern School of Child and Adolescent Psychotherapy, funded by the 8 Northern Strategic Health Authorities. The Northern School was established to train Child and Adolescent Psychotherapists to address the shortfall of the profession in the NHS workforce in northern England.

The Trust's strategy 2000-2006 for children and young people with mental health problems aimed to "Reduce inequity in NHS provision of psychoanalytic child psychotherapy in Northern England" and "Co-ordinate workforce planning by developing substantive Child and Adolescent Psychotherapy clinical posts according to regional training and education strategy." Further to "provide child psychotherapy integrated with CAMHS for direct specialist work with children and families especially in relation to high risk groups and for the supervision of other professionals (tiers 1 and 2) especially in relation to early intervention and preventative work."

The Independent Review of Child and Adolescent Mental Health Services (2006) for the Trust (then the Newcastle, North Tyneside and Northumberland Mental Health Trust) recommended, 'To review the provision of different therapeutic interventions provided across Newcastle and Northumberland in

order to improve the breadth of provision to meet local need and the needs of particular groups.<sup>1</sup>

The document 'Providing Better Mental Health Services for Child and Young People in Northumberland and Tyne and Wear' (2006) emphasised that Child Psychotherapists are in short supply, both nationally and locally and the nationally agreed workforce targets are far from being met.

Comprehensive CAMHS in Northumberland, Tyne and Wear Strategy Paper (2006) emphasised that specialist multi-disciplinary teams in all localities should be able to provide:

- Specialist assessment and treatment services
- Services for the full range of mental disorders in conjunction with other agencies as appropriate
- A mix of short and long term interventions and care according to the complexity and chronicity of the child or young person's problems
- A full range of evidence based treatments
- Consultation and training

Northumberland, Tyne and Wear NHS Trust 'Our Vision, Aims, Values and Priorities 2007-2011 aims:

- To develop services to achieve NHS and National Service Framework for Children, Young People and Maternity Services targets and aspirations
- To improve the commissioning of services and their development by working with the national and regional commissioners on their reviews of children's services.
- To improve cognitive-behaviour therapy (CBT) and psychotherapy services. This will involve a review of the model of service, funding and commissioning of these services.

### **3. OUTCOMES**

*'In developing District level services in Newcastle, Child & Adolescent Psychotherapy has contributed significantly in the clinical, multidisciplinary team, and interagency context . The psychoanalytic model has informed the ongoing development of the model and has been endorsed through the support of commissioning forums and Children's Service themed partnerships.'* Jan Cole, Service Manager

#### **3.1 The contribution of Child and Adolescent Psychotherapy**

Child and Adolescent Psychotherapists make a distinctive contribution to improving outcomes for children and young people through children's services delivery and provide a specialist service as part of a multidisciplinary team

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<sup>1</sup> Wilson, P, Verby, S and Wolpert, M (2005) Independent Review of Child and Adolescent Mental Health Services, Newcastle, North Tyneside and Northumberland Mental Health NHS Trust. (Service development recommendation no: F21)

and interagency working. They provide a unique perspective from the psychoanalytic tradition which informs the work of multidisciplinary team members. Examples of the work of child and adolescent psychotherapists include:

- Brief work with adolescents.
- Brief work with families with very young children
- Consultation to parents
- Group work
- Autistic spectrum disorders
- Children with physical disabilities
- Work with children in the care system
- Foster care support and training
- Post-adoption support
- Family Court assessments
- Forensic services
- Learning disabilities
- Eating disorders
- School based therapeutic services
- Therapy and consultation in hospitals including neo-natal units
- Consultation to institutions
- Practice based research

### **3.2 Skills and Competencies**

Child and adolescent psychotherapy is a graduate entry profession and applicants must already have substantial experience of working with children, adolescents or families. The pre-clinical training includes two years of close observation of infants and young children and the rigorous doctoral-level clinical training is unique in that it is based on a 4-year fulltime training post in one CAMHS team. This enables the trainees to develop skills in a multi-disciplinary setting from the outset. As well as the core study of individual psychoanalytic work with children and young people, work is undertaken with parents, groups, families, and consultation and supervision of other trainees and professionals.

### **3.3 Role within the Team**

Supervision, teaching and consultation are offered by Child and Adolescent Psychotherapists across all agencies and professions. Their skills can support workers with less specialist trainings who will be in contact with highly disturbed and disturbing children and adolescents. At the same time the breadth and depth of their training gives them the ability to provide expertise in specialist areas of work and to extend their practice into new service areas where this is required to meet the needs of service users.

### **3.4 Complexity, Severity and Enduring Problems**

Child and Adolescent Psychotherapists have high-level competencies in the assessment of children and their families and are uniquely able to sustain long-term individual psychotherapy with children and young people when difficulties are severe, complex or chronic. The evidence base for this work is a substantial collection of case studies; randomised control trials are impossible to complete with this client group due to the number of complicating variables.

### **3.5 New Ways of Working**

New Ways of Working is an important development for Child and Adolescent Mental Health Services and is central to the delivery of effective services focused on the needs of children, young people and their families. Child and Adolescent Psychotherapists are a key contributor to this development at both local and national level.

The areas in which Child and Adolescent Psychotherapists are developing New Ways of Working and contributing to the provision of value for money services that meet the needs of service users and their carers include:

- Extending the role of experienced and specialist staff to meet the needs of children, young people and their families. Examples include working in schools and in paediatric liaison.
- Working in a multi-disciplinary and multi-agency way that focuses on the needs of the patient. Examples include multi-agency training and services for children who are looked-after or in the youth justice system.
- Early intervention to transform infant mental health. Examples include work with Children's Centres and parent-infant psychotherapy.
- Developing the Children's Workforce including a training skills escalator and new roles such as assistant and practitioner grades.

### **3.6 Service Users**

There is a well documented preference for talking therapies amongst service users.

Child and Adolescent Psychotherapists are in short supply, many districts across the country having no, or limited, provision. In NTW Trust significant numbers of children and young people do not have access to child and adolescent psychotherapy and service users have highlighted this shortfall.

### **3.7 Effective Outcomes**

There is evidence to support the effectiveness of psychoanalytic psychotherapy for children and young people with a range of psychological disorders. Beneficial effects are shown with treatment on a variety of outcome

measures and many studies show that improvements are sustained or even enhanced at long-term follow-up.<sup>2 3</sup>

#### **4. CURRENT CHILD AND ADOLESCENT PSYCHOTHERAPY WORKFORCE**

Newcastle City Health Trust has been at the forefront of developing Child and Adolescent Psychotherapy having supported two trainees from 2000, and then successfully bidding to host one of the clinical directors of NSCAP from 2003.

The current workforce within NTW Trust is as follows:

- Consultant Child and Adolescent Psychotherapist: 0.5wte with West Newcastle locality team and 0.5wte Clinical Director with NSCAP.
- Child and Adolescent Psychotherapist (Band 8a): 0.4wte with East Newcastle locality team and 0.4wte in the Looked After Child team in Newcastle.
- Child and Adolescent Psychotherapist (Band 8a): 0.5wte with North Newcastle locality team.
- Trainee Child and Adolescent Psychotherapist (full-time): NSCAP funded trainee based with qualified member of staff in North Newcastle.

NSCAP is involved in training the wider CAMHS workforce through short courses and the MA in Psychoanalytic Observational Studies. Short courses include; Introduction to Child and Adolescent Psychotherapy for ST4s and Allied Disciplines, Personality Development, Emotional Factors in Teaching and Learning, and Adolescent Development. A short course in Early Years is in the planning stages.

The MA in Psychoanalytic Observational Studies provides training for professionals working in education, health and social services to apply a psychoanalytic understanding to their work. The Strategic Health Authority funds six places a year on the Newcastle course at Northumbria University. NTW workforce now includes professionals with 3 levels of training in psychoanalytic theory and practice.

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|---------|---|
| Level 1 | Different Professional disciplines who have complete the MA in Psychoanalytic Observational Studies |
| Level 2 | Trainee Child and Adolescent Psychotherapist  |

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<sup>2</sup> Kennedy, E(2004) Child and Adolescent Psychotherapy: A Systematic Review of Psychoanalytic Approaches. London: North Central London SHA

<sup>3</sup> Kennedy, E. & Midgely, N. (Eds) (2007) Process and Outcome Research in Child, Adolescent and Parent-Infant Psychotherapy: A Thematic Review. London: NHS London.

## Level 3 Qualified Child and Adolescent Psychotherapists

However, there are gaps in service delivery identified by staff and service users in the areas below.

### **5. IDENTIFIED GAPS IN SERVICE PROVISION**

“The government is determined that core CAMHS are built up and that action is taken to reduce the inequity in provision.”<sup>4</sup>

The delivery of part-time Child and Adolescent Psychotherapy services is now established in Newcastle Tier 3 locality Services bringing benefits including; increased access to a range of treatment options, specialist assessment and family work, and consultation and supervision to multidisciplinary teams on the understanding and management of severe and complex child and adolescent cases. Child and Adolescent Psychotherapy cases also offer consultation and training to Tier 1 and 2 professionals and contribute to an understanding of team dynamics.

There is a need to provide equity of access to Child and Adolescent Psychotherapy for users of the following service areas within the Trust .

- Tier 3 Locality Services, Northumberland
- Children and Young People with Learning Disabilities and Mental Health Issues
- Early Intervention
- Tier 4
- Forensic Service
- South of Tyne Services

#### **5.1 Northumberland Tier 3 Locality Services**

Child, young people and families in Northumberland are unable to access Child and Adolescent Psychotherapy services that are available to service users in Newcastle.<sup>5</sup>

Children and young people with complex mental health needs are unable to access a specialist treatment that could alleviate their distress. Child psychotherapy is requested in this area but the need cannot presently be met. Appropriate services are needed in this service area to meet all children’s and young people’s needs.

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<sup>4</sup> NHS Modernisation Fund and Mental Health Grant for CAMHS 1999/2002.

<sup>5</sup> NSCAP (2007) Commissioning Child and Adolescent Psychotherapy, Northern School of Child and Adolescent Psychotherapy, [www.nscap.org.uk](http://www.nscap.org.uk)

## **5.2 Learning Disabilities**

Children and adolescents with learning disabilities and complex mental health problems are denied access to a specialist treatment, which is provided in a comprehensive way elsewhere in the UK.

Individual child psychotherapy treatment for children with learning disabilities is frequently requested but the need cannot at present be met.

The capacity for a multidisciplinary response to children's presenting mental health problems. The range of specialist, evidence based treatments that can be offered to children with Learning Disabilities is limited.

## **5.3 Early Intervention**

Lack of CAMHS resources targeting the first 5 years means that opportunities for preventative work are lost, and children's problems escalate. Child and Adolescent Psychotherapists with their comprehensive training in Infant Observation, and experience of training Tier 1 and 2 Early Years Specialists are uniquely placed to offer this work.

'To address the needs of those parents and carers and their young children whose problems are more serious and complex than can be dealt with by primary care and universal services, support, consultation and ready access to therapeutic services needs to be available from specialist CAMHS.'<sup>6</sup>

## **5.4 Tier 4 Services**

Users of regional Tier 4 services presently have no access to Child and Adolescent Psychotherapy Services.

An aim of the strategy is to build Child and Adolescent Psychotherapy Services into the bid for reconfigured services at the Prudhoe and Northgate site, enabling a broader range of specialist treatment options and a comprehensive multidisciplinary approach.

Adolescent Psychotherapy offered as an outreach service Tier 4 service would enable young people with severe, complex problems to be treated over an extended period of time without the need for removal from the familiarity of their environment.

## **5.5 Forensic Services**

The Forensic Service is a national specialist service yet there is a gap in its specialist delivery as there is no Child and Adolescent Psychotherapy to inform assessment and/or to offer as a treatment option. The multidisciplinary teamwork in Forensic is lacking a psychoanalytic perspective to inform its

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<sup>6</sup> DOH (2003) NSF Emergent Findings

work, with a gap in the provision of psychoanalytic consultation and supervision.

A Child and Adolescent Psychotherapist as a team member would provide a specialist trained in understanding the complexities of unconscious processes interfering with clinical work with patients, and complicating and interfering with team dynamics.

## **5.6 South of Tyne Services**

To provide a comprehensive Adolescent Services south of the Tyne the workforce needs:

- Clinicians with the highly specialist skills and competencies needed to sustain treatment in the community for severely disturbed adolescents.
- Clinicians with the skills to differentiate between serious psychiatric disorder and developmental breakdown characteristic of adolescence.
- Clinicians able to offer brief psychotherapy for young people with moderate to severe depression, which has been unresponsive to other treatments, as recommended by the NICE guidelines.<sup>7</sup>

## **6. COST OF NOT PROVIDING A COMPREHENSIVE CAMHS**

If the Trust is unable to provide comprehensive CAMHS, including Child and Adolescent Psychotherapy, in all its Service Areas the likely costs are:

- Repeated interventions/revolving door in CAMHS
- Family breakdown leading to children and adolescents in care
- Foster placement breakdown
- Self-harm, suicide, anorexia
- School problems – EBD schools, pupil referral units
- Cost of enforcing ASBOs, costs to police/fire services
- Increase in requests for in-patient services
- Out of district referral for psychotherapy, or therapeutic community
- Court, prison, secure units, YOTs
- Ultimately an increase in mental health problems in the adult population

## **7. DELIVERY PLAN**

### **7.1 Developing the Workforce**

Child and Adolescent Psychotherapists train the wider workforce through multi-agency case discussion, workshops, short and long courses, leading to the development of a specialist workforce on 3 levels.

Level 1 In 5 years time the Trust multidisciplinary workforce will include professionals (child psychiatrists, clinical psychologists, CAMHS nurses, CAMHS social workers, Occupational Therapists etc) who have completed the MA in Psychoanalytic Observational Studies

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<sup>7</sup> National Institute of Clinical Excellence (2005) Depression in children and young people

6 places a year funded by SHA. No cost to the Trust

Level 2 Support one new trainee child and adolescent psychotherapy post a year in the Trust up to a maximum of 4 in the Trust, each supervised by a qualified Child and Adolescent Psychotherapist.

Funded by Northern School. Cost of admin support for trainees only

Level 3 Within 5 years establish a full time/part time Child and Adolescent Psychotherapist post in each Service Area in which there is an identified gap in provision (Northumberland Locality, South of Tyne Services, Learning Disabilities, Tier 4 Services, Early Intervention, Forensic Services)  
Within 10 years increase provision to 1.0wte in each Service Area

Cost: 3-4 Band 7/Band 8a posts + admin  
Band 7 £28,313 - £37,326  
Band 8a £36,112 - £43,325  
Band 3 Admin £17,257 (0.5wte pro rata)

## 7.2 Next Steps

- The strategy to be signed off by the Children and Young People and Specialist Services Business Group – Angela Robinson
- The strategy to be presented to Commissioning Groups for specific service area development – Janet Shaw and Service Managers

Dr Janet Shaw  
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