Neurodiversity in CAMHS

- Presented by Danielle Haddon, Clinical Lead Speech and Language Therapist

Agenda

- Provide an overview of CAMHS services and MDTs
- Spotlight on professions: our purpose and focus so far
  - The Role of Speech and Language Therapy in CAMHS
  - Advanced Clinical Practitioner (ACP)
- Spotlight on teams:
  - FCAMHS
  - Inpatients
- Next steps…

Overview of CAMHS

The Child & Adolescent Mental Health Service offers treatment for mild to severe emotional and mental health needs for children and young people and their families up to the age of 18 years old, and up to age 25 years within the Staying Close Team. Teams are generally made up of a broad spectrum of multi-professionals working in the team; Nursing (RMN, General and LD), Allied Health Professionals: Speech and Language Therapists inc SLTA, Occupational Therapists, ARTs, Dietitians, Clinical / Forensic Psychologists inc. Trainee and assistant Psychologists, and Consultant Child and Adolescence Psychiatrists.

COMMUNITY (CORE CAMHS)

COMMUNITY SPECIALISTS.

INPATIENT

Community Teams (Core CAMHS)

There are 3 multi-disciplinary Community Teams (core CAMHS) covering Nottinghamshire.

Localities:

Community North Team; Bassetlaw, Newark and Sherwood (North Team)

Community West Team; Mansfield and Ashfield

South Team: Rushcliffe, Gedling, Broxtowe and the City (South Team). The South Team support to Nottingham City is for young people with a moderate to severe mental illness presentation as the City Council provide Targeted CAMHS services in the City.

The support CAMHS give is part of a wider group of system partners to make sure that young people receive the right treatment from the right service.

Specialist roles:

SLTs working across the 3 teams

1 advanced clinical practitioner specialising in autism and learning disability (LD Nurse by background)

1 autism specialist nurse (MH nurse by background).

Specialist Community Teams

There are also specialist teams which provide further support city and county wide. These are:

- East Midlands Forensic CAMHS (high risk and hard to place YP)
- Clayfields Secure Childrens Home (Health provision)
- Head 2 Head (EIP/ARMS, Youth Justice, Substance Misuse, Harmful Sexual Behaviour)
- Eating Disorders Team inc ARFID
- CAMHS Intellectual Disability Team (Mod. – Severe ID & MH needs)
- Children Looked After Teams – City (children accommodated in the city) and County (accommodated in the county)
- Staying Close Team (supported accommodation team 16-25yrs)
- Specialist Neurodevelopment Team (Tics and Tourette's)
- CAMHS Crisis, Liaison and Home Treatment Team (acute MH)

1 speech and language therapist per team except county looked after and adoption team, staying close team, Tics and Tourette's and crisis and liaison teams.

Inpatients

The Lookout – Hopewood

Purpose built inpatient Unit in Sherwood, part of a regional provider collaborative.

Units / Wards:

- Pegasus – Specialist Eating Disorders Unit
- Phoenix – General Admissions Unit
- Hercules – Psychiatric Intensive Care Unit

Early Intervention Pathway

Mental Health Support teams (MHST)

The CAMHS Mental Health Support Teams are a school-based mental health support service.

The service is an early intervention and preventative mental health and wellbeing service working in schools to provide support for children, young people, and families around low-level emotional wellbeing needs, such as anxiety, low mood, managing emotions, and sleep.

MHST link in directly with Nottinghamshire CAMHS teams and provide in school sessions to promote positive mental health. They offer

- Offer group interventions
- 1-1 assessment and intervention
- Whole School Approach (additional well-being training for teachers to promote and maintain their own mental health as they promote a wider whole school approach to mental health in their school environment).

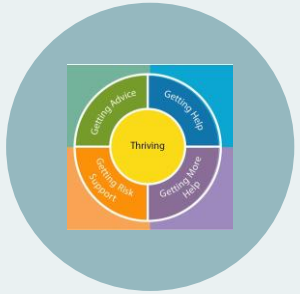
The schools included in this project have a member of staff who is a designated Mental Health Lead, who will act as the link between the service and school, and they can refer directly into CAMHS

Spotlight on our professions

Speech and Language Therapy in CAMHS

Our purpose:

CAMHS Speech and Language Therapists champion the communication needs of children and young people, ensuring their voices are heard, understood and valued. Through collaboration, tailored support and accessible resources, we aim to break down communication barriers, raise awareness of SLCN, the impact on risk and promote emotional wellbeing. We strive to embed inclusive, trauma-informed, neuroaffirming practice across CAMHS.



COMMUNITY (CORE CAMHS)

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Speech and Language Therapy in CAMHS

Nottinghamshire Healthcare NHS Foundation Trust

What we offer...

- Assessments
- Formulation
- direct interventions
- support and training to other professionals
- consultations
- Bespoke resources and accessible information

Work with families, the MDT, YJS, education, inpatient settings, and secure children's homes.

Who we are / where based...

- Clin. Lead / professional lead - Danielle
- Community Teams (Core CAMHS North, South, West) - Katie, Silvia, Olivia

Community Specialist Teams

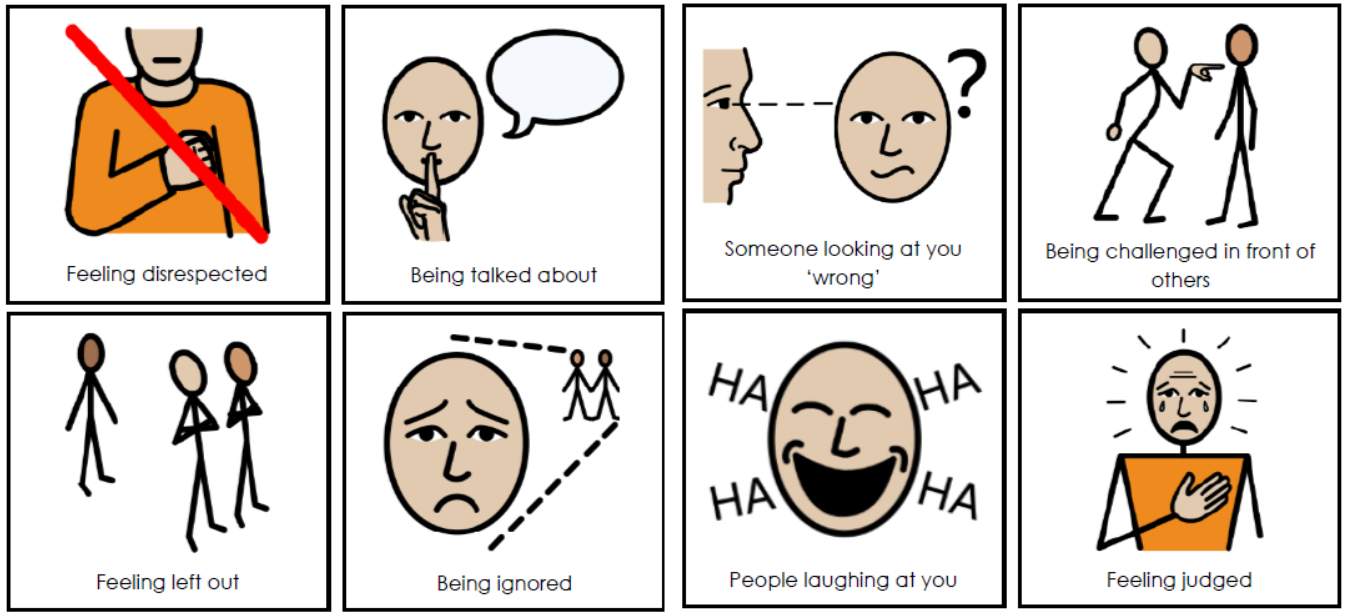
- City Lac - Madeleine
- ED / ARFID - Paula
- ID Team - Lauren
- Inpatients - Charlotte

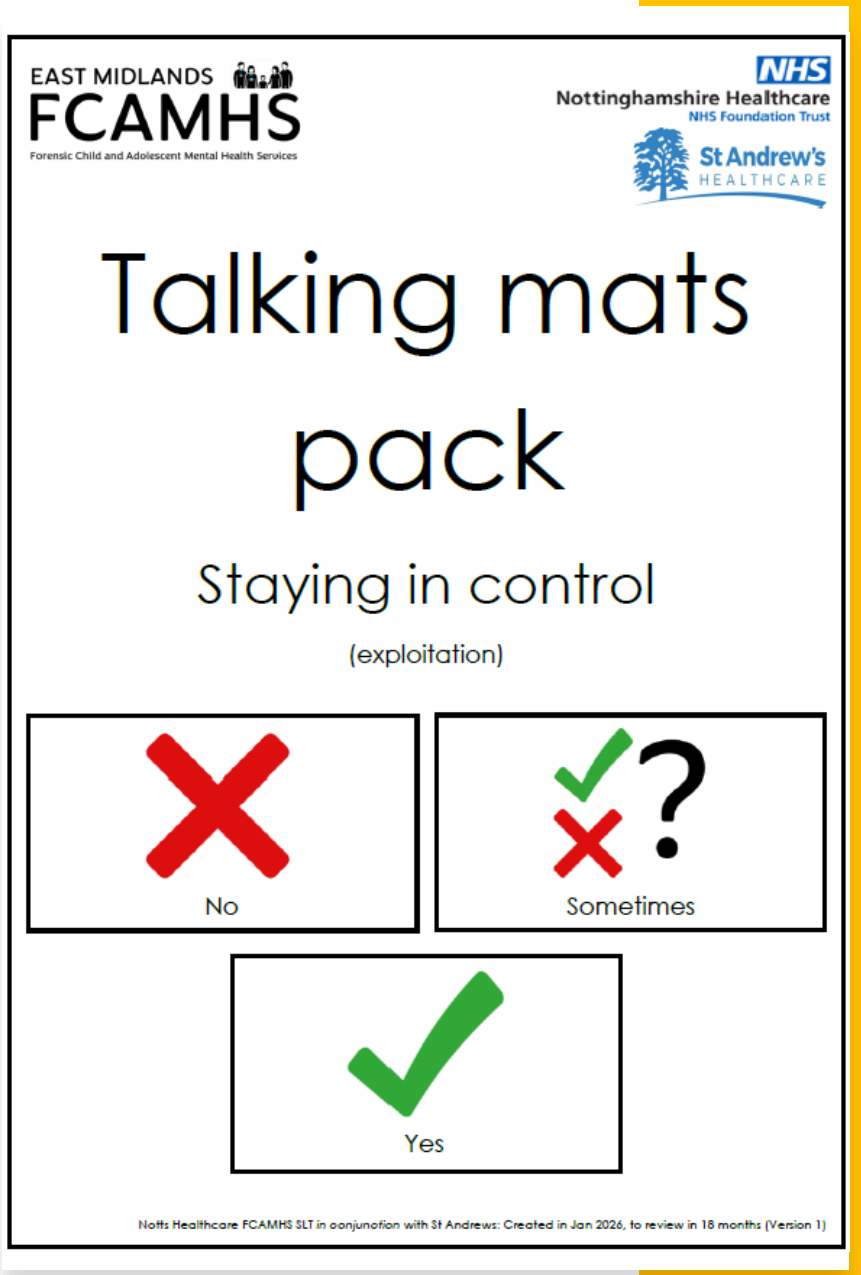
H2H - Julia
Clayfields - Ruth
FCAMHS - Danielle
Chrissy (SLTA)

SLT's are a crucial part of the MDT, we work jointly with other professionals to make important contributions to the quality of care and support provided to children and young people.

A simple way to support communication

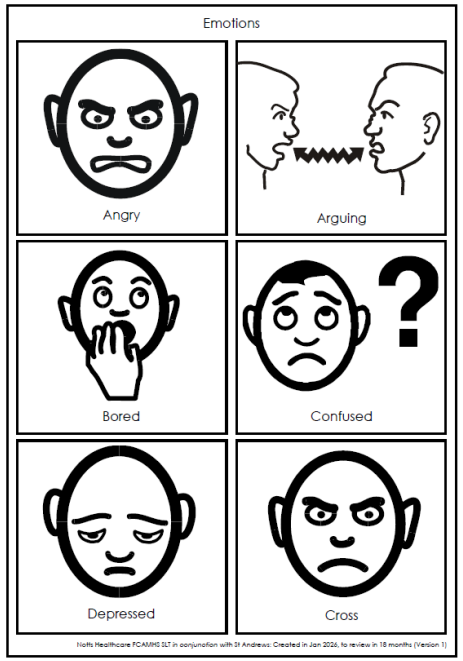
- Uses **pictures instead of words**
- Helps people **show what's going on for them**
- Works when talking is **difficult or overwhelming in the moment**

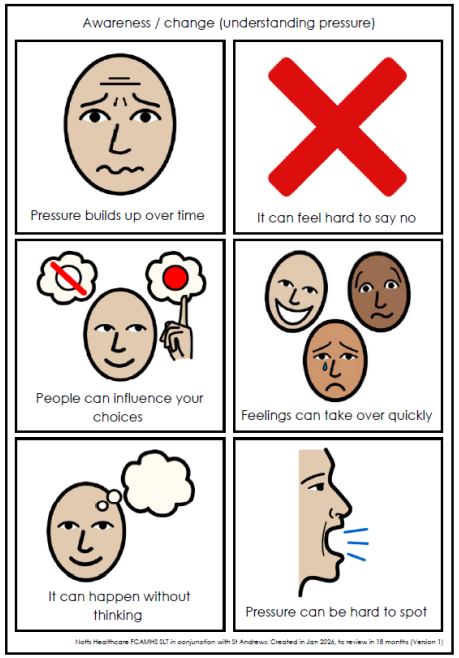




How this could work in practice

- Show what is happening (e.g. interview, lawyer, questions)
- Ask the young person to **place how they feel or understand**
- No pressure to explain, just **point or place**





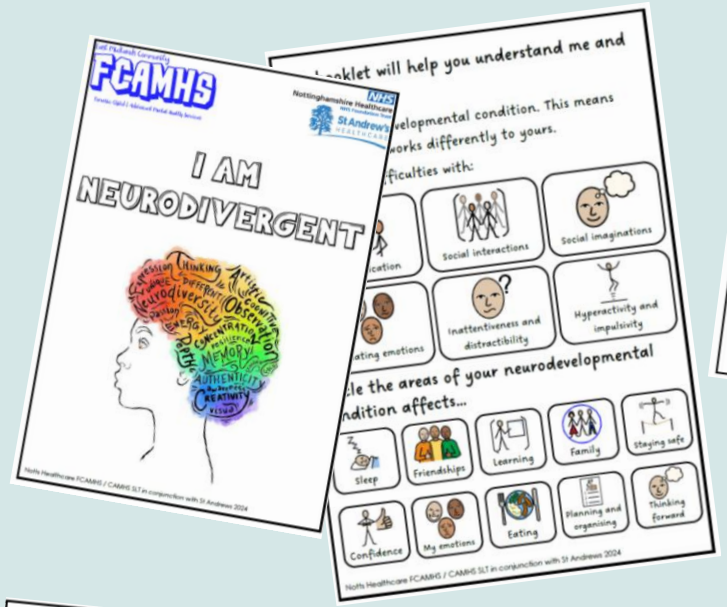
Helps you quickly see **confusion, worry, or misunderstanding**

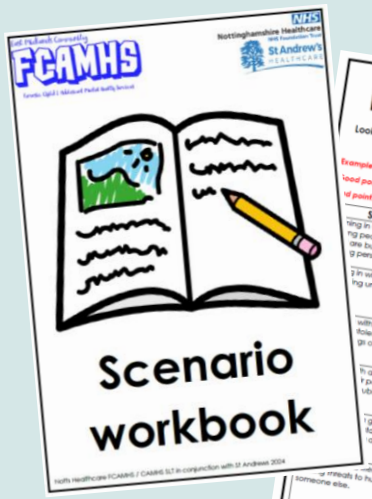
Example questions you could use:

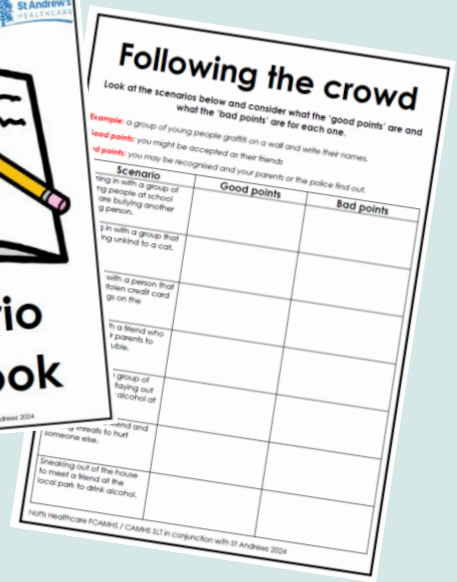
- "Can you show me if this makes sense to you?"
- "Can you point to how you feel about this?"
- "Do you understand this? (Yes, No, Not sure)"
- "Which one fits best for you?"
- "Can you show me what's going on for you right now?"

- Can you think of a time this would have helped?
- When might communication break down?

Sprinkle of SaLT to enhance practice Resources...







NHS
Nottinghamshire Healthcare
NHS Foundation Trust
St Andrew's HEALTHCARE

Advanced Clinical Practitioner- Community CAMHS

ACP works across 4 pillars:

- 80% Clinical
- 20% Non –clinical- Leadership, Education, Research

Clinical examples include:

- Working with neurodivergent CYP
- Lead professional/small case load (ND specific)
- Complexity- multi agency approach & co-ordination
- Prescribing
- Safeguarding
- Consultation and joint working with CAMHS clinicians- ‘stuck cases’
- Short pieces of specific work- i.e. psychoeducation around ND needs
- Extended assessment to consider ND needs to aid treatment pathway
- Autism assessments- high risk/urgent

Spotlight on our teams

FCAMHS – our purpose,

A regional specialist service for young people with high-risk behaviours who are:

- Under 18 years old at the time of referral (no lower age threshold)
- Usually involved in dangerous, high-risk behaviours towards others
- May have highly complex needs (including legal complexities) and are causing major concern across agencies. This may include young people at risk of CSE and/or CCE

FCAMHS Aims

Flexible approach with recognition that 'forensic' cohort is diverse- May or may not include contact with the Criminal Justice System.

Accessible to all agencies working with high-risk young people.

Collaborative multi agency working.

Reduction and management of risk – Prevention of escalation.

Contain anxieties and increase confidence.

Prevent young people falling through gaps in services.

Improving outcomes for young people.

FCAMHS offer:

- Case consultation for forensic and complex needs.
- Training
- Specialist Risk assessment and management planning
- Case formulation
- Specialist assessments eg SLT, OT, Psychology assessments

FCAMHS Training

- Requests are often around neurodivergence and offending. For example, harmful sexual behaviour, extremism, fire setting
- We ensure there is content within our training around:
    - what is neurodivergence and the neurodiversity paradigm; exploring double empathy, autism + environment = outcome (Dr Luke Beardon)
    - Communication strengths and differences
    - Sensory needs and differences

Over the last 12 months we have delivered training to:

- the Northampton Vulnerability Hub, East Midlands Prevent, Nottinghamshire Police – frontline workforce, schools and YJS officers, Derbyshire CAMHS

FCAMHS Improving pathways for Autistic children and young people at risk of entering the Justice System

- FCAMHS have a commitment to identify CYP eligible for their service, who are autistic or may have an Intellectual/Learning Disability or both needs and support them to access the right help and support to meet their needs and prevent avoidable admissions into hospital/residential/secure estate setting.

The Autism Working Group at the Lookout

- A multiprofessional team of healthcare professionals
- Formed to improve the quality, consistency, and compassion of care for autistic young people during inpatient admission
- Provides a shared space to identify challenges, share learning and implement improvements

Our purpose

- Create predictable, person-centred, autism-affirming care for young people on the unit
- - Improve communication and coordination across all teams and partner organisations
- - Build staff skills and confidence through shared learning, training, and reflection
- - Reduce distress and restrictive practices by shaping environments and routines that suit autistic young people

Focus so far

- **Refining care pathways** to better meet autistic young people's needs
- **Sensory wards project** to identify and improve the experience on the ward
- **Training for everyone who works at the lookout:** to build shared understanding
- **Increasing awareness of STOMP and STAMP principles**
- **Early gains** in staff confidence, consistent care, and young people's experiences

Our journey and next steps…

Communication and sensory boxes across all our CAMHS clinics

We are currently exploring the capacity and capability of the CAMHS workforce; training/knowledge questionnaire circulated, outcomes to inform training needs and development of a tiered system; universal, targeted, specialist level

Referral forms across CAMHS have a few key questions embedded to help referrers consider communication differences which then supports practitioners to make appropriate adaptations / reasonable adjustments from the point of access to CAMHS teams

Building links / connections with experts by experience eg the youth impact board and leaders unlocked

We would welcome further opportunities to link with networks to support with our work and service design.

Thank you