

FREQUENTLY ASKED QUESTIONS

1. Why is this change happening now?

The trigger for this change was when Solihull CCG received notice from Heart of England Foundation Trust (HEFT) that they would no longer provide a CAMH Service (Child and Adolescent Mental Health) from April 2015. This meant that Solihull CCG would have to buy mental health services for children and young people in Solihull from another organisation.

HEFT made this decision because they are not an established mental health provider and felt that the mental health needs of Solihull's children and young people could be better met by an alternative provider with more specialist expertise and access to a broader pool of services.

However, Solihull CCG and Solihull Council have been listening to stakeholders and consulting service users for some time about how emotional wellbeing and mental health services need to change. This is the ideal time to make improvements to how services work rather than just buying the same service from a different provider organisation.

2. Why is the consultation so short?

The consultation is short because the procurement process for new services takes about nine months, and so there isn't much time before the 1st of April 2015.

However, we have been consulting stakeholders for some time about what needs to change, for example we asked young people and parents in the Autumn of 2013 about how easy it is to make the transition to adult services. They told us that we should make changes, including providing more information and support, changing the ages at which young people can no longer access CAMHS to 18 or older, and improving the handover between CAMHS and Adult Mental Health Services.

We also ran a stakeholder workshop in February this year which involved parents and stakeholders from a wide range of organisations in Solihull. The workshop concluded that Solihull needed a much stronger focus on early intervention, including for the youngest children; more information for people to know how the mental health system works in Solihull; improved support for transition to adult services; and stronger arrangements for multi-agency working. In particular stakeholders wanted services to be designed around families rather than the other way around.

3. Isn't this really about budget cuts?

This change is not about the money. All public sector organisations are under budget pressures, but we would be seeking to change how mental health services work for children anyway. We know that we can improve the experience for families if we focus more on early intervention and make services work together better.

We must prioritise what we do with taxpayers' money, which means buying services that make the biggest difference to families. We can only afford early intervention services if we reduce the cost of more specialist services. But we can do this by modernising our workforce, reducing waste and duplication and being more innovative.

4. Other places are creating a single mental health service for children and young adults up to the age of 25. Why isn't Solihull doing this?

We are. The new primary mental health service will continue to support young people after their 18th birthday if they need it, potentially up to the age of 25. This will make sure that vulnerable young people don't lose out because of organisations not connecting together.

We will also review service specifications for adult services to make sure they take sufficient account of the needs of young people in transition, and create a formal agreement or protocol which describes how organisations must work together.

We want to move away from fixed age boundaries for mental health services. We are seeking views through this consultation as to whether these changes will be effective in supporting young people to transition into adulthood.

5. Will my son/daughter continue to have any support from CAMHS or will it all stop?

This change will not disrupt existing care and support for children and young people. Although organisations will change the existing staff usually transfer to the new organisation. Where there are changes in how care is provided these will be based on the care plan for each child and young person, and discussed in advance.

6. You haven't talked much about inpatient services – why?

Specialist inpatient services for children and young people who have a serious mental illness are commissioned at a national and regional level by NHS England and so are not part of this consultation.

There is a national issue about demand for specialist mental health beds for children and young people, and it is commonly thought that one of the reasons for this is a reduction in early intervention services. However, in Solihull relatively few children need to access these services due to good local preventative services such as ICOS, the Intensive Community Outreach Service, and the changes proposed in this consultation are about increasing early intervention services.

7. What role will educational psychology play in these new arrangements?

The British Psychological Society states that educational psychology helps children and young people who experience problems that can hinder their chance of learning. This includes learning difficulties, social and emotional problems, issues around disability as well as more complex developmental disorders. They work in a variety of ways including observations, interviews and assessments and offer consultation, advice and support to teachers, parents, the wider community as well as the young people concerned. They research innovative ways of helping vulnerable young people and often train teachers, learning support assistants and others working with children.

This role overlaps significantly with the proposals for a primary mental health service, and we are seeking views through this consultation as to what role Educational Psychology should play in the new arrangements.