



Working together for children

From 'SEBDA News' Issue 6: Spring/ Summer 2005 , pp11 -12
- published by the Social, Emotional and Behavioural Difficulties Association
01768 210 510

'Multi-disciplinary working with CAMHS in Stockport'

Janice Cahill

© SEBDA/Janice Cahill

Janice Cahill, Headteacher of the Pendlebury Centre, outlines the work of the Stockport PRUs, focussing in particular on the close links formed with CAMHS through projects such as Jigsaw. The Pendlebury Centre was the only PRU in the country named twice by OfSTED in the HMCI's Annual Report for 2004 and entered into the 'Hall of Fame'.

In Stockport we are striving to ensure that children and young people with a wide range of 'special' or 'additional' needs, have flexible access to a range of settings, to enable them to reach their potential, academically, emotionally and socially. Mainstream, resourced and special schools and units work collaboratively to provide an education which allows children and young people to be taught in a range of provision for short, medium or long term periods of time. This helps them to address their needs and to be able to return to mainstream education and/or make the appropriate transition to Post 16 opportunities. Examples of this collaboration are particularly evident within Stockport's Pupil Referral Units (PRUs). We have three such PRUs, one for pregnant schoolgirls and schoolgirl mothers, one for students at risk of exclusion or permanently excluded, and one for students with emotional and social difficulties.

The Pendlebury Centre

The EBSD unit is the Pendlebury Centre, which provides education for secondary aged students who are deemed emotionally vulnerable and have experienced a range of difficulties, including bullying, school anxiety, bereavement, non attendance, family issues, abuse in the widest sense of the word, and those who have long term medical and mental ill health. In 2000 the centre became responsible for the education of all sick children aged 4 to 16 in the authority who have a medical or mental health problem which prevents them attending their mainstream school full time, and who require educating either within the local hospital, regional psychiatric unit or within their home.

The centre provides places for up to 40 students at any one time. They are all dual registered, accessing 25 hours of education weekly, and within the first few weeks they have usually made a visit back to their mainstream school and a programme of reintegration has begun. For all students at Key Stage 3 a return to mainstream within 12 months is anticipated and for the majority of our young people this is achieved. Their curriculum reflects that of the mainstream and all students wear their school uniform.

'For all students at Key Stage 3 a return to mainstream within 12 months is anticipated and for the majority of our young people this is achieved.'

An holistic view to education is adopted, encouraging all students to take responsibility for their own learning, with the aim of promoting their confidence and self esteem. This development of self worth and the way the young people judge themselves is an essential component for them to change their past behaviours. Young people with low self esteem feel their contribution is worthless and they believe their efforts to succeed are pointless. A counsellor from a local charity, Beacon Counselling, works within the centre each week, students self refer and there is never an empty slot. Once they return to mainstream they are monitored for the remainder of their statutory education through the Pendlebury outreach service.

Linking with the mainstream

At Key Stage 4, students are encouraged to maintain links with their schools to attend for GCSE subjects that Pendlebury cannot offer. This requires a tremendous commitment from the student's school and parents for this to be successful. However for many Year 10 and 11 students the main part of their education is provided by the centre where they can take a range of GCSE's and other accredited courses. All the Year 11 students attend a local college every week and experience a work placement. A Connexions adviser works within the centre for 2 days each week.

Addressing Mental Health Needs

Over the past six years there has been an increasing number of students referred who have mental health needs, and it is with this group in mind that the centre has attempted to improve the opportunities for this extremely vulnerable group. This coincided with several developments:-

- The Child and Adolescent Mental Health Service (CAMHS) provision at the local hospital changed from an in patient provision to a five day out patients provision, and this subsequently became a one day assessment unit
- Education within CAMHS became the responsibility of the Pendlebury Centre
- Through the restructuring of Emotional, Behavioural and Social Difficulties (EBSD) provision in Stockport, Pendlebury was re-positioned to meet the needs of these students, being redefined as the provision for emotionally and socially vulnerable young people. This an innovative move by the LEA as, in general, students with these needs tend to be 'forgotten' or home educated.
- There were several CAMHS vacancies for consultant psychiatrists

However, the centre was not set up or resourced as a psychiatric day provision. With the publication of the document, 'Promoting Mental Health in Primary and Secondary mainstream school settings' in June 2001 and subsequently the Access to Education statutory guidance in November of the same year, professionals decided to investigate the possibility of providing more Tier 1 and 2 support to professionals within the school environment to ensure inclusion of this group of students.

Employing a Mental Health Practitioner

In 2002 the Pendlebury Centre, together with the Team Leader at CAMHS, made a successful bid for £55000 to the Health Foundation. This allowed the employment of a mental health practitioner to work within the school environment, to promote mental health, act as a link worker for advice and support, serve as an education and training resource and audit current approaches in the secondary educational sector. This would be provided through:-

- Small group training

- Creating a web site to improve communication between professionals for cross borough discussions
- Providing talks to young people on mental health issues
- Developing interactive multi agency working between the LEA, schools and CAMHS
- Supporting an evaluation and benefits assessment of the role performed by the Mental Health worker

The Project was independently evaluated by Manchester University, School of Nursing and Midwifery, Mental Health division. The evaluation concluded that even though teachers became better informed and trained, there was a need for mental health professionals to work directly with students and their parents.

A Community CAMHS Network

Using CAMHS strategy monies, and a large investment from Education resources, a further project has been established. The Secondary Jigsaw Mental Health Service consists of 2 teachers, 2 family resource workers and 2 mental health practitioners. Two further projects, one from Social Services, known as The Kite Project and one from the Youth Service, called Sound Minds were also developed using CAMHS Grant and, consequently, the Community CAMHS network came into being.

Multi-disciplinary Working

We have attempted to implement a truly multi-disciplinary approach to the development of the new Community CAMHS provision. Staff appointments were made by a panel of representatives from each of the projects so that the teams could complement each others strengths. We have 'joined' together the workings of CAMHS, Social Services, Youth Services and Education, and have gradually embraced other Community CAMHS developments. To monitor all the Community CAMHS services we have established and implemented:-

- A Multi-disciplinary Steering Group, chaired by the Assistant Director of Education, which has representation from the Joint Strategy and Development Group to which the Community CAMHS Coordinator reports to on a monthly basis;
- A Strategic Staircase Development Plan for the three years initial funding;
- Developed an Operational Group which meets weekly to oversee the business planning for the projects, ensures practitioner continuity and allocates referrals;
- Promoted monthly Practitioners meetings for training and good practice information sharing;
- Commissioned Manchester University to provide us with an independent evaluation.

Within Jigsaw, professional supervision for the family resource workers is provided by the Community CAMHS Coordinator from Social Services, whilst the mental health practitioners have clinical supervision from the CAMHS Manager who has been instrumental with the Head of the Pendlebury centre in implementing the changes described. The team is truly multi-disciplinary, embracing the recommendations of 'Every Child Matters'.

Jigsaw Patch Teams

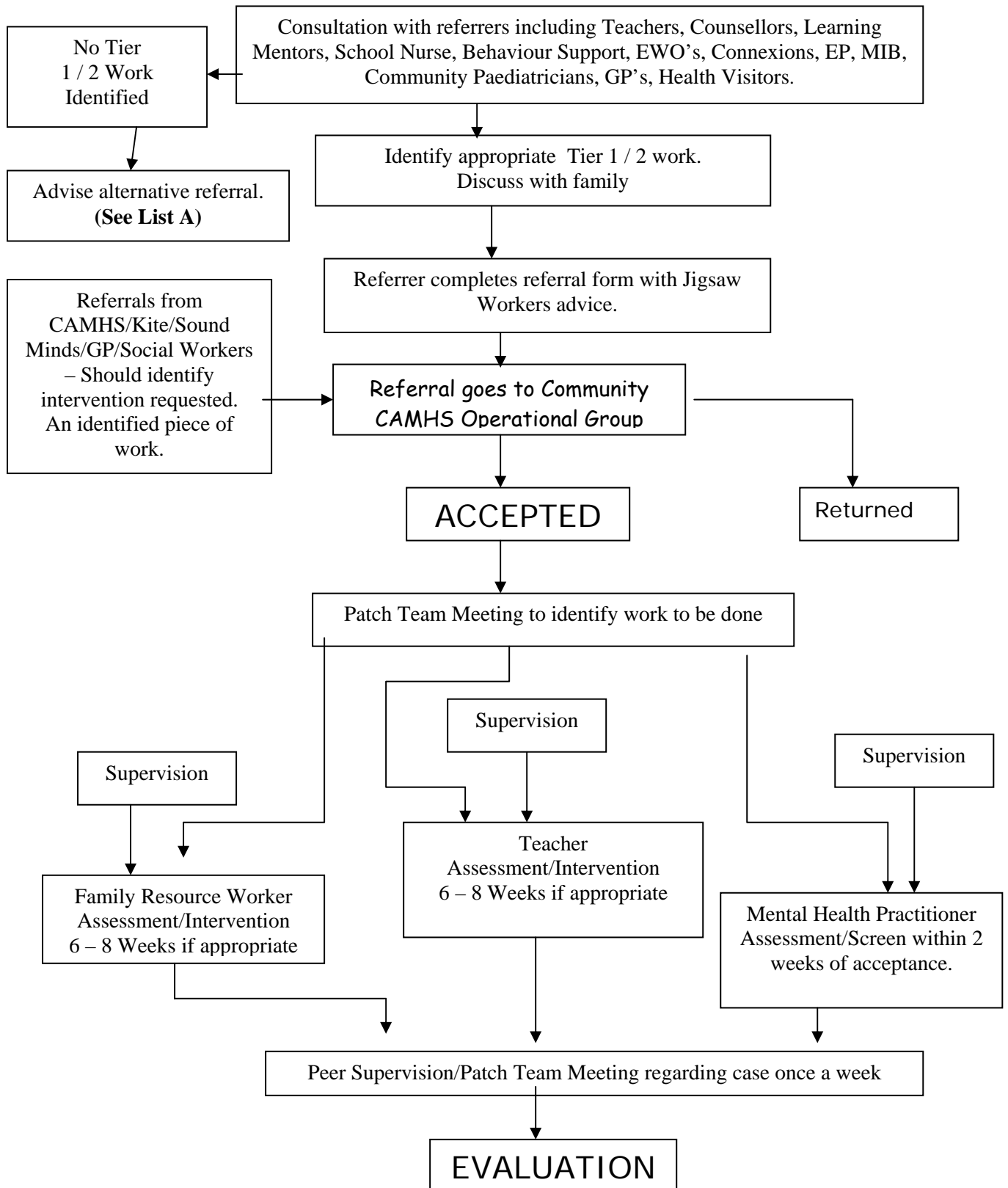
The practitioners in Jigsaw have been divided into patch teams to cover the three areas of Stockport, each team consisting of a teacher, family resource worker and mental health practitioner who work in all the 14 secondary mainstream schools, 2 special schools and the other PRUs. They provide fortnightly consultations within the

school for any new referrals and support the school in identifying training needs around mental health. We have set up and run several parenting courses, and have helped several schools establish a 'Sanctuary'. After 12 months 104 students have been provided with an 8-week programme of intervention. A number of students who had been previously referred to core CAHMS are now being more appropriately supported through the Community CAMHS projects, leaving Core CAMHS to deal with appropriate Tier 3/4 referrals.

Referral Procedures

All children and young people requiring support from any of the Community CAMHS services are screened by the Operational Group every week. This group consists of representatives from all the Community CAMHS projects. There is a multi disciplinary referral form and information required for each service is identified. Most referrals have been discussed by the practitioners through the telephone helpline or through the school consultations. Referrals will not be supported if this has not been completed. Once the referral is accepted the Operational Group will identify any additional support required and this may involve some cases being joint managed to ensure the whole child's needs are met. The strength of the Jigsaw Service is in ensuring that young people remain within their home and school community and continue to achieve. It is not used as a fast track for young people to be removed from their school place but through a multi disciplinary approach the most appropriate services are linked to support the young person. Below is the referral pathway used by all the services.

REFERRAL PROCEDURES FOR THE JIGSAW PROJECT



And what for the future?

One of the comments at our last Ofsted Inspection in May 2003 was that the centre had a good Development Plan and, by using this, two further development needs

have been identified; mental health provision for primary aged pupils and training. This in turn has influenced the LEA to set up a Primary Jigsaw to meet the needs of primary aged students. Secondly, an application was made to the Department for Education and Skills (DfES) Innovation Unit, and an award of £15000 subsequently made, to establish an accredited training course for a range of professionals working across the Tier 1 to 3 provisions in Stockport to support those young people who have an increased susceptibility to poor mental health. The aim is for every secondary school to have one person suitably trained to assist in the assessment and identification process of Tier 1 and 2 mental health. The training programme will be developed, designed and delivered in liaison with the Education Training and Development Agency (ETDA) based within the Mental Health Division of University of Manchester School of Nursing, Midwifery and Social Work. The training programme will be certificated by the University and can be used by staff for their Continuing Professional Development programme (CPD).

In January 2005 we were the only PRU in the country named twice by OfSTED in the Chief Inspectors Annual Report on Schools and Colleges and entered into the 'Hall of Fame'. We feel this recognises the positive work that we do with emotionally, vulnerable young people.

Conclusion: making ordinary schools special and special schools ordinary

There is much hard work and cooperation between mainstream schools, resourced schools and special schools and inclusion services to remove the unseen barriers to teaching and learning, and the stigmas that may be unwittingly attached to children and young people with additional needs. No matter what their needs may be, we see our students first and foremost as people. We review our services annually to ensure all staff within the school community feel empowered and able to support our most vulnerable children and young people so that they in turn can access and be included alongside their peers in their chosen educational community.

References

DfES (2001) *Promoting Mental Health in primary and Secondary Mainstream School Settings*

DfES (2001) *Access to Education*

QCA/DfES (2001) *Supporting school improvement, Emotional and Behavioural development*

Stockport LEA *Achievement for All: A position statement on the future roles of Specialised Schools and Services in Stockport*