

Response from the Northern Ireland Commissioner for Children and Young People to a Consultation on the Proposal to co-locate Child and Adolescent Mental Health Out-patient Services for Belfast at refurbished accommodation at Forster Green and to develop an outreach service within local communities

28th May 2010

The Office of the Commissioner for Children and Young People (NICCY) welcomes the opportunity to respond to this consultation on the proposal to relocate Child and Adolescent Mental Health Out-patient Services and to develop an outreach service within local communities. NICCY has drafted this response in letter format.

1.0 Introduction

The Office of the Commissioner for Children and Young People (NICCY) was created in accordance with 'The Commissioner for Children and Young People (Northern Ireland) Order' (2003) to safeguard and promote the rights and best interests of children and young people in Northern Ireland.

Under Articles 7(2)(3) of this legislation, NICCY has a mandate to keep under review the adequacy and effectiveness of law, practice and services relating to the rights and best interests of children and young people by relevant authorities. The remit of our Office is children and young people from birth up to 18 years, or 21 years of age if the young person is disabled or in the care of Social Services.

In determining how to carry out her functions, the Commissioner's paramount consideration is the rights of the child and NICCY is required to base all its work on the United Nations Convention on the Rights of the Child (UNCRC).

2.0 Children's Rights

The United Nations Convention on the Rights of the Child (UNCRC) provides the overarching framework which guides the work of NICCY. The UK Government, including Northern Ireland, is a signatory to the Convention and has agreed to uphold the rights of children and young people based on the Convention.

NICCY appreciates that there are often complexities when reconciling the rights of children and young people with their welfare and best interests. NICCY would recommend the proposals contained in the consultation are reviewed against the following relevant Articles within the UNCRC and that these are incorporated as



underlying principles, to ensure that the rights and best interests of children and young people are upheld and protected.

- Article 2: Children shall not be discriminated against and shall have equal access to all articles in the UNCRC.
- Article 3: All decisions taken which affect children's lives should be taken in the child's best interests.
- Article 6: All children have the right to life and to the fullest level of development.
- Article 12: Children have the right to have their voices heard in all matters concerning them.

3.0 Consultation on Children and Adolescent Mental Health Services

This proposal outlines plans to co-locate children and adolescent mental health out-patient services for Belfast at one site and to localise outreach services at six health and wellbeing centres across Belfast. Co-locating child and adolescent mental health services will mean bringing together two out-patient teams currently based at three sites to a single team based at one site - Forster Green.

In considering these proposals, the paramount concern of NICCY is that the interests and well-being of every child or young person who is, or may in the future, be affected by the changes outlined in this proposal remain the key focus. NICCY recognizes that the children and young people currently affected and those who may, in the future be affected by the proposals, are a very vulnerable group. With this in mind, it is crucial that every aspect of the proposal is carefully scrutinized to ensure that the care and support provided to children and young people, and their families through Child and Adolescent Mental Health Services (CAMHS) is not adversely impacted in any way.

There are a number of issues arising in the proposal which NICCY would like to address. These are detailed in the following sections.

4.0 Relocation of CAMHS – Impact on Children and Young People

The Belfast Health and Social Care Trust (hereafter referred to as 'The Trust') states that none of the existing facilities meet the requirements for the provision of a modern CAMH community-based service, citing over-crowding, accessibility and outdated accommodation as key problems. While NICCY recognises the relocation of CAMHS to more modern and dedicated therapeutic spaces as a



positive development, there are aspects of the proposals that could have a negative impact on the key users, i.e. children and young people.

In focusing on the children and young people who currently avail of CAMHS or who may avail of it in the future, it is important that their needs and those identified by their parents or carers, are genuinely and carefully considered. The Proposal states that the children and young people affected have 'complex, severe or persistent mental health disorders'. Relocating services to new facilities will therefore prove a traumatic experience for some CAMHS users. The absence of familiar surroundings and the challenge to adapt to new therapeutic spaces (taking account of environmental factors, such as noise levels and types, lighting, location), could have a detrimental impact on the child or young person's condition, their relationship with CAMHS staff, parents or carers and their ongoing progress. **NICCY therefore urges careful and thorough consideration of how children and young people will be affected by the relocation of CAMHS. There is no reference in the document to consultation with parents, carers and CAMHS staff. It is imperative that all relevant CAMHS staff and parents/carers are consulted to ensure that the disruption to children and young people's treatment is minimal and that their needs and wellbeing remain at the core of all decision-making processes.**

Relocating CAMHS to one site and establishing outreach services at Health and Wellbeing Centres across the city is likely to create transport difficulties for a proportion of parents, carers and users of CAMHS. The document does not acknowledge the possible inconvenience to and additional transport costs incurred by parents, carers and service users arising from the proposals. **NICCY believes it is important that alternative arrangements are considered where CAMHS users are likely to encounter significant transport difficulties or expenses.**

NICCY recognises the stigma associated with mental health conditions and that this may be a concern for children and young people using CAMHS. CAMHS users may currently travel outside their local area to access treatment, and prefer to do so as they are less likely to encounter people known to them. Locating outreach services in local Health and Wellbeing Centres is likely to diminish this sense of anonymity as CAMHS will be provided alongside a broad range of other health services accessed by the local community. **The Trust should take**



account of children and young people's concerns in this regard and consider how it might effectively address them.

As part of the outreach model, there are proposals to locate two new Health and Wellbeing Centres at Shankill and Andersonstown. Each area is largely populated by a single religious community. While recognising some improvement in community relations, the provision of two centres in these areas may serve to perpetuate existing divisions while sustaining the perceptions of the wider community. In addition, where community conflict has caused or contributed to a child or young person's mental health condition, careful consideration must be given to the most appropriate location where they can access services. **In assessing the equality impact of these proposals, under Section 75 (2) specifically, good relations, there is a need to ensure that access to CAMHS at both locations, is feasible for the entire community. NICCY is concerned that these issues are not addressed in the proposals.**

Reviewing the equality impact of these proposals, under Section 75, specifically disability, the Trust should ensure, that in relocating CAMHS, physical access to all facilities can be guaranteed for all current and future users. Section 5.1 of the Consultation document states that 'Those who require access to services at Forster Green site with reduced mobility may encounter difficulties with access to the building via stairs.' The Trust notes that 'Users [with a reduced mobility] can be accommodated at Knockbreda Health and Well-being Centre which is fully accessible and in close proximity'. Clearly this will have an impact on both CAMHS users and staff, requiring the relocation of services and additional administration and co-ordination. **Ensuring access for all CAMHS users and staff at Forster Green is clearly the preferred option. NICCY would urge the Trust to explore every opportunity to provide a fully inclusive service on this site.** If this cannot be achieved, the Trust must ensure that CAMHS users and staff with reduced mobility who are accommodated at Knockbreda Health and Well-being Centre have access to the same quality and range of services afforded to those attending Forster Green. **It is also crucial that access to all of the Health and Well-being Centres has been considered as part of the relocation proposals and that appropriate facilities have been put in place to ensure ease of access for all CAMHS users and staff. There is no indication that this has been done.**



NICCY is aware that Barnardo's Northern Ireland currently provides a valuable therapeutic service for young people, aged 12-18 years at 10 College Gardens, Belfast, one of the locations under review. If the adolescent team based at this address is relocated, it is important that this will not have any detrimental impact on the services provided by Barnardo's, in terms of access to suitable accommodation and to any existing collaborative working arrangements with the adolescent CAMHS currently based in College Gardens.

5.0 Consultation with Children and Young People

In reviewing the Trust's proposals, a significant concern for NICCY is that the children and young people most directly impacted are, where appropriate, fully consulted and their views given genuine consideration. Article 12 of the UNCRC states that children have the right to have their voices heard in all matters concerning them and NICCY strongly advocates that this article be upheld in the implementation of all government policies, practices and services. The Trust indicated that consultation with children and young people would be carried out by VOYPIC. While NICCY welcomes this consultation, further detail concerning the profile of consultees was not provided. **NICCY believes that it is important that any consultation with children and young people includes opportunities for all current users of CAMHS to participate and to have their views heard and taken into consideration.**

NICCY welcomes the publication of a 'child and young people friendly' version of the Trust's proposals. However it is concerned that this was not issued at the same time as the full consultation document in order to allow children and young people the same consideration and response period as adults. A review of the 'Easy Read Guide' reveals that it does not fully explain the proposals and their implications for current or future CAMHS users. Apart from stating that it 'will move all the groups that work with children and young people to one building', there is no reference in the document to the outreach service proposals. In addition, the document states that 'We will go ahead with this plan once we have answers to questions in this leaflet'. This statement suggests that the Trust has already taken the decision to implement the proposals. In reading this, young people may have concluded that their comments and opinion were irrelevant. **NICCY would be particularly concerned that the extended consultation period was used by the Trust to disseminate the 'Easy-Read Guide' to children and young people and their parents or carers, who are most directly affected by the proposals and that time was taken to fully explain the proposals and the impact they will have on CAMHS users.**



6.0 Relocation of CAMHS – Impact on Staff

In reviewing this proposal, the wellbeing of children and young people is the key concern for NICCY, however the needs and wellbeing of staff must also be taken into account since they are key to the successful delivery of CAMHS.

The consultation document notes that pre-consultation has been undertaken with ‘representatives of staff likely to be affected by the proposed changes to accommodation of the out-patient teams’. **NICCY would urge that all staff who are involved in the delivery of the services outlined in the proposals, are fully consulted and their views carefully considered.** They remain central to the successful implementation of any changes in CAMHS. In particular, it is important that their professional knowledge, judgment and experience are taken into account since they are particularly aware of the specific needs and circumstances of the children and adolescents directly affected by the Trust’s proposals.

The proposal refers to anticipated outcomes emerging from the relocation of CAMHS including estimates of patient contacts on a centralised and outreach basis, improved transition between the child and adolescent service, the development of significant synergy between in-patient and out-patient teams and shared learning and cross-fertilisation. **However, a feasibility study has not been conducted (or if this has been conducted, the results have not been included in the consultation). NICCY is concerned that the practical outworking and potential benefits of such outcomes have not been articulated in the document. In addition, no evidence has been provided to verify that these outcomes are achievable.**

If the relocation of CAMHS is to achieve the benefits outlined in the proposal (p.22), and crucially, if it is to meet the requirements of CAMHS users at the central location and in local communities, the Trust must be able to demonstrate how it can provide appropriate and adequate staffing to fulfil these objectives. It is important that this can be achieved without placing additional strain on staff and without compromising clinical time in any way. The Consultation document provides only limited details of staffing (number of CAMHS staff in Belfast Trust is totalled at 29), and no information regarding the breakdown of posts, allocation of staff hours, or travel times between different locations. In addition, no information is provided regarding administrative support – how this will be organised or delivered, particularly in relation to CAMH outreach services. Therefore there is no evidence in the document to demonstrate that the proposals



are workable in practice or the outcomes attainable. NICCY is aware of the shortage of CAMHS staff and particularly of Child and Adolescent Psychiatrists (NI Assembly 2007, Royal College of Psychiatrists 2008, BMA 2009). Given the recent announcements regarding cutbacks in health services in Northern Ireland and a specific reference to mental health initiatives, it may be assumed that staffing issues are unlikely to become less problematic. **Given the absence of appropriate data and any reference to a feasibility study, NICCY has a concern regarding the practical outworking of the proposals.**

Relocating CAMH outpatient services will require staff to undertake additional travel between different locations with the Trust. While staff relocation is addressed, no reference is made to the additional travel time required to provide outreach services to local communities. **NICCY would be concerned that additional travel time may encroach on valuable clinical time and place staff under undue pressure.**

The greater mobility of staff will require the carriage of client files between different locations. Given the confidential nature of this information, it is imperative that procedures are put in place to minimise the movement of files and to ensure that they are stored and transported securely. **NICCY notes that there is no reference to procedures for the management of confidential files in the consultation document.**

The spread of CAMHS across multiple sites will require careful co-ordination and the support of an effective communication network. The consultation document does not include any information relating to how this will be achieved. Potential problems such as double booking of rooms, last minute unavailability of rooms, parking and staff delays in arriving for appointments will mean disruption to the service and impact on the CAMHS users. **NICCY believes it is essential that all logistical issues are fully considered by the Trust and policies and procedures developed in co-operation with CAMHS staff in order to ensure the effective delivery of services. There is no evidence in the consultation documents that these issues have been addressed.**

7.0 Option Appraisal

NICCY is concerned that the appraisal of options outlined on pp.25-28 is extremely brief and lacks detail and transparency.



In completing an option appraisal, the proposal scores three different options considered by the Trust against a list of benefit criteria. Table 2 (p.27) outlines the different criteria employed and scores awarded. Paragraph 3.2 notes that 'various factors were considered and included...' The use of the term 'included' suggests that additional criteria may have been considered. This should be clarified and details of any additional criteria provided. Also, while brief definitions of each criterion are outlined, further details of any sub-criteria employed should also be included.

The scoring mechanism employs a scale of 0-10. Apart from a very brief definition of score '0' and score '10', no further explanation is provided in terms of how each score is calculated and what it actually means. For example, what are the criteria that distinguish a score of 3 from 4? And if it is assumed that Option 1 - Existing Base will cause minimal disruption to service and staff, why does this option score only 8 and not 9 or 10? Where are these two points lost? Further details regarding the criteria and the scoring employed should be included in order to clarify the decision-making process which led the Trust to identify Option 3 – Forster Green, as the preferred option. **The Trust emphasises its commitment to openness and transparency however NICCY feels that this is not evident in the description of the option appraisal or its decision-making process.**

8.0 Use of Statistics and Sources of Data

In order to inform the EQIA, the Trust drew on various statistics and data relating to child and adolescent mental health (pp.32-33). **However NICCY is concerned that these statistics relate to Great Britain and not specifically to children and young people in Northern Ireland.** The formulation of such significant proposals for CAMHS should be informed by data pertaining to child and adolescent mental health in Northern Ireland, taking into account the particular socio-economic, cultural and demographic characteristics of the region and importantly, the long term impact of sectarian violence.

As the document states, the population profile (p.34), is based on 2001 Census statistics, and does not take into account subsequent significant demographic changes. The Trust acknowledges this shortcoming and makes reference to 'other relevant quantitative and qualitative information sources', however these are not cited or referenced and no indication is given as to how they were used. In addition, the Section 75 areas listed that may be regarded as most relevant to CAMHS (religion, disability and ethnicity) are not disaggregated into categories



that reflect the age profile of CAMHS users. While the age categories are disaggregated, children and young people are only defined in two categories (0-9 years and 10-19 years). This does not provide the level of detail necessary to consider the proposals in depth.

In general terms, **NICCY is concerned about the continued lack of mental health statistics relating to child and adolescent mental health in Northern Ireland.** A 2006 report on CAMH from the Bamford Review highlighted the lack of statistics for children and adolescents. In an answer to a recent written answer in the Northern Ireland Assembly (NIA:AQW 6605/10, May 2010) the Minister for Health indicated that CAMHS data is still not held centrally and that the costs of collating such data are prohibitive. **If key stakeholders and the wider public are to fully appraise further proposals regarding CAMHS in Northern Ireland, they must be provided with relevant, accurate, up-to-date statistics.**

9.0 Conclusion

NICCY very much appreciates the opportunity to respond to the Belfast Health and Social Care Trust Consultation on the Proposal to co-locate Child and Adolescent Mental Health Out-patient Services for Belfast at refurbished accommodation at Forster Green and to develop an outreach service within local communities. We are happy to offer further clarification of our comments if this would be of benefit. Please contact Alison Montgomery, Senior Policy and Research Officer, on 028 90316385 or alison@niccy.org if you wish to avail of this opportunity.

