



SUMMARY REPORT ON THE COMMON UNDERSTANDING AWAY DAY WITH CAMHS TRAINING AND DEVELOPMENT PROGRAMME STEERING COMMITTEE

9 February 2004

As part of the project process it was decided that the steering committee, as a group, needed to begin the process of developing a shared understanding of the project and the area it is working on. This need arose in part, due to the membership of the group having been enlarged to reflect the spread of the project across sectors and geography.

The day's workshop was divided into several different but related parts. This report will cover each of those individually and then detail the short-term and long-term actions arising from the workshop. The workshop discussion had been guided by a variety of discussion documents. These documents served as a springboard for discussing different elements of the project. These are available by contacting Alex at a.hassett@salomons.org.uk

1. Common understanding of the scope of the area is, and how we refer to it

The Issue:

Within England there are a number of policies within the social care, mental health and educational fields, which encourage and guide joint working. Part of this process is the development of a shared language. At present however there is a great deal of controversy about how work in this complex area should be thought about and labelled. It is therefore important to define terms relating to the mental health of children and adolescents because experience shows that lack of terminology clarity leads to confusion and uncertainty about the suffering involved, the treatability of problems and disorders and, the need to allocate resources.

The Document:

The definition document attempted to look at the most influential or widely used terms and definitions across the areas of education, health and social care as well as offering a sense of the variation within those particular sectors. This document look at documents from England and Wales, the UK more broadly as well as trying to include some European and International perspective. It also tried to look at what terminology is in current use in Kent and Medway. The aim of this process is that the many organisations and professionals involved in working with children and young people develop a greater understanding and awareness of the range of terms involved, and work towards achieving greater commonality of terminology.

The Outcome:

Although no decision was made on terminology it was agreed that it was important to begin to acknowledge and understand the differences in terminology. For the sake of clarity in terms of the project the terms that are being used in the latest documentation at a local level will be used. Thus all new documents coming from the project will refer to the area of focus of this project as being children's and young people's mental health and emotional well-being.

2. Which professionals, groups, and disciplines have contact with young people and hence are the target groups for development

The Issue:

The project needs to be clear whom we are targeting in terms of training and development.

The Document:

A visual map of the range of different professionals within the range of disciplines (health, education, social services, etc) who have contact with young people, and may training and development was drawn up.

The Outcome:

It was decided that members of the steering committee would look through the list given to them and they would offer additions and corrections to the range of professionals listed. These would be passed on to Alex by end of March.

3. What, in broad terms, do these groups need in order to work with children and young people in this field?

The Issue:

A key element of ensuring quality services for children and young people is the education and training of a workforce that possess the core capabilities/competencies required to meet the demands of the new developments in children's services. Numerous studies have shown that people working with children and adolescents, including individuals graduating from core mental health professional training programmes (e.g. psychiatry, psychology, social work) often do not have the skills, knowledge or attitudes to meet the needs of the young people they will be working with. Reviews of current higher education curriculum related to all three sectors, education, health and social services reveal a real deficiency in content, time and relevance to work with young people. The same is true of many of the in-service training programmes on offer to professionals and practitioners working with young people.

The Document:

The capabilities document attempted to briefly lay out the present context in terms of work being done on competencies and related concepts across the three statutory bodies. It then attempted to look at what is core to these three sectors and what would be needed by any worker in these three areas to enable them to work more effectively with children and adolescents. This was not an attempt to spell out profession specific competencies but rather to look at what is shared across all of these professions in terms of their need to engage with, and provide a service to, children and adolescents.

The Outcome:

It was agreed that the document provides a workable framework and set of capabilities on which the project can base its work. It was agreed that a set of capabilities appropriate for the following age groups: 0-3 years of age, 3-5 years (the early years), 6-12 years need to be developed. Alex will consult with the necessary stakeholders to do this.

4. How do we disseminate our thinking about child and mental health?

The Issue:

The project needs to disseminate the information, knowledge and developments emerging from its process so that this shared view becomes part of and influences mainstream discussions about services to children and young people. It is important for the steering committee members to think about how they can take information from the project back to their sectors. It is also important that the correct forums have access to this information.

The Outcomes:

There were some concerns raised about the composition of the steering committee and whether people from the different sectors were able to adequately represent their bodies and get information back to their sector. Although this is of concern the issue was also raised that this was the first time the group had felt like a coherent whole and as such some were uncomfortable about changing it. Members were asked to think about how they could adequately report back to their sector and to discuss issues of how decision making in terms of the project could be undertaken in as effective way as possible.

It was agreed that the project needs a clear communication strategy that targets key stakeholders, decision-makers and planning forums in order to get the aims of the project more broadly shared. Also use this to influence key decision-makers in terms of aims of project.

5. Agreeing an identity for the project and the steering committee:

The Issue:

A unifying name, catch phrase, logo, slogan that identifies the steering committee and its project and captures the essence of the above discussions.

The Outcome:

Alex will look at developing a logo and identity based on the discussions from the day which he will present at the next Steering committee meeting.

6. A review of current funding and agreement to the next steps for achieving appropriate funding support from the agencies involved.

The Issue:

At present the project is funded by the health sector. In order to ensure real representation the other sectors will need to begin contributing to the funding of the project.

The Outcome:

Alex presented the estimated costs for year 2 of the project. It was agreed that the project needs to be funded across the different sectors, as health has been funding the project

Long-term funding and what the expectations will be after the initial three years was also raised, as something the steering committee needs to begin to think about.

Several short-term and long-term actions were agreed upon (see point 7 below). Steering committee members will report back on this at the next committee meeting.

7. Actions for the Steering Committee

ACTION	WHO	WHEN
Exploring potential for joint training	Georgia Lepper, Chris Glenn, Annie O'Leary, Claire Barber	By 20 April??
Meeting to explore joint work	Annie O'Leary Georgia Lepper	Mid March
Check funding availability from the Agenda for Change	Louise Chapman	Mid March
Explore possibilities for funding through the NHS Leadership Fund	Trish Evans Annie O'Leary	Mid March
Explore possibility of funding from Medway BESTeam	Juliet Sevier	Mid March
Explore possibility of funding from CAMHS Tier 2 Development Grant	Juliet Sevier	Mid March
Explore the role of the Medway Children's Strategic Partnership in terms of the programme	Juliet Sevier and Caroline Budden	Mid March
Caroline Budden to explore what hat she is wearing	Caroline Budden	Mid

in terms of her role on the steering committee and what implications this has for the project		March
Explore the link with Medway PCT and Social Services with the programme (meet with Caroline Budden)	Alex Hassett	Mid March
Look at the common training needs for Tier 1 and 2 in Medway	Juliet Sevier Caroline Budden	20 April
Explore the possibilities of the involvement and possible funding from the Kent Network Board	Trish Evans John Mitchell	Mid March
Explore what funds are available through the Vulnerable Children's Fund	John Mitchell	Mid March
Explore what funds are available through the Shepway BEST project	John Mitchell	Mid March
Explore what role the KCC External Funding Specialist could play	John Mitchell	April 20
Follow up the funding from the WFDC	Margie Callanan	Mid March
Members to look at how best they can link back to their sectors in terms of sharing about the project and about decision making processes.	All members	20 April
Members to give Alex feedback in terms of changes to the visual map of those stakeholders being targeted by the project.	Steering group	End March
Make stronger links with projects who are doing similar work	Alex Hassett	ongoing
Revisit the terms of reference for the steering committee and ensure all members are signed up to it	Alex Hassett	20 April
Capability documents for other age groups drawn up.	Alex Hassett	Mid April
Logo and name for project to be developed	Alex Hassett	20 April

OTHER LONG TERM IDEAS THAT STILL REQUIRE ACTIONING:

- Explore the possibility of lottery funding
- Funding through Special Needs Education (Colin Feltman)
- Universities could offer free training/labour for pilot projects
- Pilot projects could be used to secure small pockets of funding
- Explore the 'Knowledge Transfer Fund' as a potential funder
- Need to look at how we package elements of the project to attract funding
- Make use of existing training programmes and practitioners who offer training (get list of these people)
- Explore the European Social Fund in terms of money available for children and young Asylum Seekers
- Link to organisational training – top slicing

Other issues:

Need to think about the projects positioning with regards to broader strategic developments both in the region and nationally. Needs to be linked to broader joined up commissioning, planning and service provision forums/groups.

Project needs a clear communication strategy that targets key stakeholders and decision-makers in order to get the aims of the project more broadly shared. Also use this to influence key decision-makers in terms of aims of project.

Related to the two above issues is the need clear communication strategy to the district planning groups

Project needs to set up training pilot projects and then evaluate these and get them disseminated as a way of developing the knowledge base and best practice and as a way of securing funding.