

Multi Agency
Quality
Assurance
Audit:
Multi Agency
Response to
children at risk
of Mental
Health Issues
May 2019



Organisations that audited their involvement with the 10 cases were: Children's Social Care, Preventative Services, Education, GP, Police, Sirona and AWP/Camhs
7 of the cases were reviewed in the meeting



Harvey, age 16, is a looked after child, has a learning disability and ADHD, possible ASD, but not accepted at camhs as mild LD.



Hayden, age 3, referred to Infant Mental Health by health visitor as sudden refusal to drink. Known to children's centre and preschool



The audit of 20th May 2019 reviewed the records of ten children who are at risk of Mental Health issues and known to the CAMHS service. The aim of the audit was to ascertain whether there were good multi-agency standards for managing cases and whether organisations have implemented a robust and consistent response in line with statutory and good practice guidance, SGSCB policies and procedures



Helen, age 12, referral to camhs by GP. Extreme anxiety and possible OCD. Appointment not yet taken place (6 months)



Hazel, age 13, referred to LD service and paediatrician. Possible ASD. Recommended refer to FYPS. Threats to end her own life. Referral to eating disorder clinic. Difficulties in managing behaviours at home.



Heidi, age 2, referred to Camhs by Children's Centre because of difficulty regulating emotions and night terrors.

Henry, age 8



Harold, age 4



Hugo, age 14



Harry, age 3, initial referral developmental needs, possible ASD. Referral from speech and language therapist. Did not meet Camhs threshold.

Hannah, age 17, referral to Be Safe, referral to Camhs as urgent by GP, after behavioural problems at home and self-harm.



What is Working Well:

- Quick response by Camhs
- Voice of child evident in records
- FYPS working with family – began outside the audit timeframe.
- Good communication between agencies
- Team of professionals working well together and know the child well
- Good signposting to other services
- Proportionate response from agencies to need, positive interagency working
- GP recommending Early Help Partnership Team
- Urgent appointment system effective
- Whole family thinking leading to increased engagement and better referrals
- Use of Tools: 'Circles of security' completed
- Good reference to Adverse Childhood Experiences
- Reference to use of Claire's Law

What are we Worried about:

- Some lack of understanding among professionals about terminology used for pre school activities
- Referral made without parental knowledge/consent
- Information not shared with preschool
- Young people with mild LD, ability to access support at an early stage – not available through Camhs
- Unknown picture of GP recording and notification of LAC status
- Voice and engagement with father missing
- Long delay for being seen by Camhs, exacerbated by delay from GP in sending referral (average wait is currently 81 days in South Gloucestershire)
- Delays in contact/multi agency working for one case
- Resolution of risky situation not clearly recorded

What Needs to Happen?

- Pathways for parents & professionals to get information and diagnosis on ASD
- Clearer messages about spectrum of children FYPS can work with
- Ongoing support for universal settings to help them maintain early help provision alongside specialist services
- When a social worker is involved with a family, the social worker should always be informed about referrals made to new services by professionals
- When practitioners don't have appropriate responses from another agency – make use of the Resolution of Professional Differences (Escalation) Policy
- Professionals should inform universal services involved when Camhs referral is made.

Click this circle to access the Resolution of Professional Differences Policy