

Parental Mental Health and Child Welfare Guidance consultation

Deadline: 15 May 2009

1. Screening

Summary recommendation: Ensure screening systems routinely and reliably identify and record information about adults with mental health problems who are also parents.

Question 1a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children? Strongly agree/**Agree**/Neither agree nor disagree/Disagree/Strongly disagree/Don't know

If you have agreed (choosing 'Strongly agree' or 'Agree') please go to question 1b.

If you disagreed (choosing 'Strongly disagree' or 'Disagree'), chose 'Neither agree nor disagree' or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 1b. Please refer to the detailed recommendations on 'Screening' in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your 'own opinion'. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendations for practitioners

Ask the right questions Retain/Remove/**Amend**

Rationale for amending: We welcome the emphasis throughout the draft guidance on 'thinking family'. In our view, if this approach is to be embedded in adult mental health services, child-trained specialists should be routinely incorporated as core members of the adult mental health workforce. In our experience, adult mental health staff are overworked and overstretched, and would find it difficult to do more than they are doing, even with appropriate training and support. Child mental health specialists such as family therapists and child and adolescent psychotherapists would work alongside adult mental health staff, taking responsibility for assessing the family's needs in conjunction with the adult staff dealing with the parent's mental illness. This would ensure that the impact of any mental health problem on parenting and the child is properly explored and addressed.

Knowledge about other services **Retain**/Remove/Amend

Reassure parents **Retain**/Remove/Amend

Involve parents & children **Retain**/Remove/Amend

Rationale for retaining: The recommendation states that involving parents and children should be the start of developing a supportive and therapeutic relationship with clients. Parental mental health problems often entail a component of severe relational trauma, which needs to be addressed therapeutically. Adults with mental health problems often have attachment issues, which makes the continuity and predictability of care in the planning of services particularly important – especially in the relationship with the practitioner.

Joint working **Retain**/Remove/Amend

Recommendations for organisations

Develop data systems **Retain**/Remove/Amend

Training for screening tools **Retain**/Remove/Amend

Accessible & comprehensive information **Retain**/Remove/Amend

Training & support **Retain**/Remove/Amend

Develop communications strategy **Retain**/Remove/Amend

Recommendations for managers

Whole family overview **Retain**/Remove/Amend

We welcome the emphasis in this recommendation on improving knowledge and understanding of the inter-related nature of mental health difficulties, parenting and child development. If working with parental mental health is to be taken seriously, there needs to be a major rethink in the way adult mental health services are delivered, so that all involved think ‘family mental health’ rather than focusing only on the individual. Both child and adult mental health services should be aligned around the family, with each member of the family being seen as potentially in need of support. Thinking about the impact on children and other family members should be a routine part of the regular service, rather than being seen as something that has been triggered by a particular failure or risk.

Advice for front line staff **Retain**/Remove/Amend

*Please also see our response to **1b Recommendations for Practitioners: Ask the right questions**, which emphasises the need for specialist child-trained staff to be core members of adult mental health teams.*

Ensure screening takes place **Retain**/Remove/Amend

2. Assessment

Summary recommendation: All organisations need to adapt existing assessment and recording processes to take account of the whole family and train staff in their use.

Question 2a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children?
Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

If you have agreed (choosing ‘Strongly agree’ or ‘Agree’) please go to question 2b.

If you disagreed (choosing ‘Strongly disagree’ or ‘Disagree’), chose ‘Neither agree nor disagree’ or ‘Don't know’ please go to the next section by clicking on the ‘Save & Next’ button at the bottom of the page.

Question 2b. Please refer to the detailed recommendations on ‘Assessment’ in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it’s your ‘own opinion’. Do remember to give your suggested rewording if you think a recommendation should be amended.

More holistic approach **Retain**/Remove/Amend
Involve the whole family **Retain**/Remove/Amend

Taking consideration of the whole family in the assessment process is vital to ensure that the needs of infants, children and young people are met, as well as those of the parent and other family members. The presence of child mental health workers in adult mental health teams offers the possibility of joint assessments, where, for example, the adult worker assesses the mental illness of the parent and the child worker explores the experience of being a parent and the well-being of other family members. Child specialists bring an awareness of the child’s perspective, including, for example, an understanding of children and young people’s intense loyalty to their vulnerable parent, which can drive them to hide their own difficulties, including the early stages of mental health problems, in order to protect the parent. The needs of infants, who are heavily dependant on the parent, are particularly pertinent but are too often neglected. Parental mental illness is a known risk factor for disorganised attachment. As the draft guidance states, if the emergence of mental health problems in the next generation is to be avoided, early intervention is essential.

Relationships with other agencies **Retain**/Remove/Amend

This should include the voluntary sector, which is active in the field of mental health and often represents client group in an accessible and non-stigmatising way. They should be included at a national and local level in planning and provision.

Information sharing **Retain**/Remove/Amend
Recognising vulnerable groups **Retain**/Remove/Amend
Knowledge of mental health problems **Retain**/Remove/Amend

Again, we would urge that child mental health specialists be an integral part of adult mental health teams, to ensure that the impact of mental health problems on children and families is properly understood and addressed.

Recommendations for organisations

Adapt processes **Retain**/Remove/Amend

Simple tools **Retain**/Remove/Amend
Information sharing **Retain**/Remove/Amend
Training & support **Retain**/Remove/Amend

See also our response to 2b: Involve the whole family, for an explanation of the importance of joint assessments.

Threshold criteria **Retain**/Remove/Amend
Training about mental health problems Retain/Remove/**Amend**

As we have emphasised before, while training in mental health and child development for adult mental health staff is important, the expertise of child mental health workers should be drawn on to ensure that the impact of parental mental health problems on children and families is properly understood and addressed. Adult mental health workers, who are already overworked, cannot be expected to take on additional responsibilities without the support of specialist child-trained colleagues. All staff working with adults and children need systems of reflective supervision and management support in place. Training should address adult and child workers together, so that all understand each other's work and responsibilities.

Training about mental health & risk Retain/Remove/**Amend**

See above.

Recommendations for managers

Increase knowledge **Retain**/Remove/Amend
Develop working relations **Retain**/Remove/Amend
Strategies for complex cases **Retain**/Remove/Amend
Develop management tools **Retain**/Remove/Amend

3. Planning care

Summary recommendation: Care planning needs to take a holistic approach to include appropriate care plans for each individual family member as well as the family as a whole and in doing so staff should aim to increase resilience and reduce stressors.

Question 3a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children? Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

If you have agreed (choosing 'Strongly agree' or 'Agree') please go to question 3b.

If you disagreed (choosing 'Strongly disagree' or 'Disagree'), chose 'Neither agree nor disagree' or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 3b. Please refer to the detailed recommendations on 'Planning care' in the draft guidance document and consider for each whether you think it should be

removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your 'own opinion'. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendation Your proposal If 'amend' please suggest rewording Rationale for removing/amending

Recommendations for practitioners

Revision of the writing, sharing and co-ordination of adult and child care plans

Retain/Remove/Amend

Development of care plans to increase resilience **Retain**/Remove/Amend

In planning services, emphasis should be placed on the need for continuity and predictability in the family's relationship with practitioners. Attachment issues are pertinent to adults with mental health issues and continuity is key to increasing resilience and promoting the family's wellbeing.

Consider the use of individual budgets for greater flexibility

Retain/Remove/Amend

Recommendations for organisations

Provide training and support to improve inter agency working

Retain/Remove/Amend

4. Providing care

Summary recommendation: Commissioning, funding and management processes should ensure that they address and meet the full spectrum of needs of parents with mental health problems and their children.

Question 4a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children? Strongly agree/**Agree**/Neither agree nor disagree/Disagree/Strongly disagree/Don't know

If you have agreed (choosing 'Strongly agree' or 'Agree') please go to question 4b.

If you disagreed (choosing 'Strongly disagree' or 'Disagree'), chose 'Neither agree nor disagree' or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 4b. Please refer to the detailed recommendations on 'Providing care' in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your 'own opinion'. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendation Your proposal If 'amend' please suggest rewording Rationale for removing/amending

Recommendations for practitioners

Implement responsive, flexible interventions which identify mental health problems quickly, prevent crises and where crises do occur, deal with them promptly and effectively **Retain**/Remove/Amend

Recommendations for organisations

Develop, implement and review inter agency protocols Retain/Remove/Amend
Develop/maintain services that meet the whole spectrum of family need

Retain/Remove/Amend

Development of commissioning processes **Retain**/Remove/Amend

Revision of funding mechanisms **Retain**/Remove/Amend

5. Reviewing care plans

Summary recommendation: Reviews should consider changes in family circumstances over time, include both individual and family goals and involve children and carers in the process.

Question 5a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children? Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

If you have agreed (choosing 'Strongly agree' or 'Agree') please go to question 5b.

If you disagreed (choosing 'Strongly disagree' or 'Disagree'), chose 'Neither agree nor disagree' or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 5b. Please refer to the detailed recommendations on 'Reviewing care plans' in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your 'own opinion'. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendation Your proposal If 'amend' please suggest rewording Rationale for removing/amending

Recommendations for practitioners

Seek parents permission and involve children in the CPA review

Retain/Remove/Amend

See also our response to 1b and 3b: Recommendations for practitioners.

Conduct CPA review and review of Carers Plan concurrently

Retain/Remove/Amend

Care plan reviews should reflect changing family circumstances

Retain/Remove/Amend

6. Strategic approach

Summary recommendation: Multi-agency, senior level commitment is required to review and implement policy and practice guidance and the training and workforce development needed to provide a successful service to parents with mental health problems and their children.

Question 6a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children?
Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

If you have agreed (choosing 'Strongly agree' or 'Agree') please go to question 7b.

If you disagreed (choosing 'Strongly disagree' or 'Disagree'), chose 'Neither agree nor disagree' or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 6b. Please refer to the detailed recommendations on a 'Strategic approach' in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your 'own opinion'. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendation	Your proposal	If 'amend' please suggest rewording	Rationale for removing/amending
----------------	---------------	-------------------------------------	---------------------------------

Recommendations for practitioners

Mapping currently available services across all sectors **Retain**/Remove/Amend

Ensuring a service user centred approach to developing and delivering services

Retain/Remove/Amend

Family focussed evaluation of strategy implementation **Retain**/Remove/Amend

Recommendations for organisations

Development of a think family strategy for leaders and managers

Retain/Remove/Amend

Local ‘champions’ **Retain**/Remove/Amend

Training programmes to support front line staff and senior managers

Retain/Remove/Amend

7. Workforce development

Summary recommendation: Major investment is needed in training and staff development for front line managers and practitioners particularly joint training that addresses how to work with complexity, think individual, think family and work across service interfaces.

Question 7a. How far do you agree that this summary recommendation will help to achieve better outcomes for parents with mental health problems and their children? Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

If you have agreed (choosing ‘Strongly agree’ or ‘Agree’) please go to question 7b.

If you disagreed (choosing ‘Strongly disagree’ or ‘Disagree’), chose ‘Neither agree nor disagree’ or 'Don't know' please go to the next section by clicking on the 'Save & Next' button at the bottom of the page.

Question 7b. Please refer to the detailed recommendations on ‘Workforce development’ in the draft guidance document and consider for each whether you think it should be removed from this section or amended. Note that the recommendations listed below are only short hand for the ones that appear in the draft guidance.

If you propose that a recommendation should be removed or amended, please provide your rationale, e.g. give a practice example, reference research or state that it's your ‘own opinion’. Do remember to give your suggested rewording if you think a recommendation should be amended.

Recommendation	Your proposal	If ‘amend’ please suggest rewording	Rationale for removing/amending
----------------	---------------	-------------------------------------	---------------------------------

Recommendations for practitioners

A family perspective should be introduced into professional education and training.

Retain/Remove/**Amend**

We support the recommendations emphasis on improved professional education and training, particularly if it includes education on mental health problems, child development and how to communicate with children. However, as we have previously stated, the expertise and experience of child mental health workers needs be drawn on to ensure that the impact of parental mental health problems on children, young people and families are properly recognised and addressed. In our experience, offering additional training to already over-stretched adult mental health workers does little to address the tendency to focus on adult patients as individuals rather than parents. A child mental health worker can help focus a team's attention on the adult client's responsibilities for a child and on how that child is coping. They can also take

responsibility for offering a service once the needs of family members have been identified. Parents may need practical support, for example to help them make sure their children get to school, keep their home habitable and make good decisions about their children, despite suffering the side-effects of medication. They may also need emergency support, for example from local foster carers, and links may need to be forged with education and social services to ensure that the family is looked at in the round.

Recommendations for organisations

Social work post qualifying courses should include material on think individual, think family **Retain**/Remove/Amend

Joint training across adult mental health and children and families services

Retain/Remove/Amend

A new leadership programme for adults and children's social work supervisors

Retain/Remove/Amend

8. The overall guidance

A successful service will (page 19 of the draft guidance):

- Promote resilience and the well-being of all family members now and in the future
- Offer appropriate support to avoid crises and also manage them appropriately should they arise
- Secure child safety

Q8a. How far do you agree, overall, that the recommendations will achieve the 'successful service' which is described in the draft guidance?

Strongly agree **Agree** Neither agree nor disagree Disagree Strongly disagree Don't know

Q8b. If you wish to explain your answer to 8a please do so in the box below.

Q8c. If you have any further comments about what has been included in the guidance as a whole please record them here.

This submission has been informed by child and adolescent psychotherapists working in child and adolescent mental health services (CAMHS) and specialist parent-infant clinics. The Association of Child Psychotherapists is the professional body for psychoanalytic child and adolescent psychotherapy in the UK. Our 800 members work with children, young people and families as part of multidisciplinary teams mainly in the public sector, including the NHS, schools and social services, as well as in the voluntary sector and private practice.

Association of Child Psychotherapists

120 West Heath Road

London NW3 7TU

Tel: 020 8458 1609

Fax: 020 8458 1482

www.childpsychotherapy.org.uk