



01. Background

Mental Health was a key priority in the Leicester, Leicestershire and Rutland Business Plan for 2020-21. The Safeguarding Children Partnership is keen to seek assurance that:

The emotional and mental health needs of children with learning disabilities and/or autism are understood in the context of safeguarding and support for this group of children is in place as required to reduce risk.

Safeguarding and mental health support for children is joined up and partners work together and with young people to reduce risk of harm.

#### 02. Summary of Learning

When a Young Person is on the CAMHS waiting list and is:

- Subject to a Child Protection Plan, CAMHS correspondence needs to be shared with Children's Social Care (CSC), especially assessments and safety plan, including cases which haven't yet been allocated within the CAMHS service. If there are no Social Worker contact details, contact needs to be made with the Safeguarding Unit to determine who is the best point of contact to share the information with.
- Is on a Child in Need Plan or a Child Protection Plan, there needs to be clear channels for sharing information, including other identified contacts within an agency.

#### 03. Summary of Learning

- The CAMHS duty team will keep an oversight of the case prior to a CAMHS worker being allocated to the case. Hence Child Protection case conference invitations should be extended to CAMHS even when the child is still on their waiting list so that information sharing can take place.
- Need for better application of the Thresholds, and robust contingency planning looking at all contextual safeguarding elements, rather than automatically escalating to or remaining on a Child Protection Plan. Ensure that the threshold for significant harm is evidenced strongly.

### 07. Raising your awareness

- LLR: Thresholds Document
- Practice Guidance: Supporting Children and Young People who self harm and/or have suicidal thoughts
- CAMHS Service: Referral Information
- MARF: Referral Information LLR
- Resolving Disagreements: Escalation
- Domestic Abuse Services



# 06. Reviewing your practice

How will you ensure that:

- The child's voice is a clear focus of intervention when mental health needs are being assessed.
- Good systems for sharing information are in place between Health and CSC with emphasis on point of referral and during periods on waiting list.
- Standard invitation to CAMHS for all Child Protection conferences so that information can be shared in respect of current or historical service provision to young people.
- GPs and other support agencies are always invited to Conferences and that processes for invites and recording attendance are robust.

### 04. Summary of Learning

- When a parent has known mental health issues, links should also be made with Adult Services to ensure that all relevant information is shared at Child Protection Conferences.
- For young people with complex mental health needs, missing from education, there's a need for strong multiagency working to try and resolve the issue including assessing all alternative provisions to support the young person to re-enter education.
- Raise awareness within all safeguarding partner agencies, in particular CSC and Education, that they can make CAMHS referrals directly rather than reliance on GP referrals. CSC and Education may have access to more information to support the referral particularly around social and family issues.

## 05. Summary of Learning

 If it is known that Domestic Abuse Services are involved, and are supporting a child's parent, invitations to Conferences and Core Groups should be sent as they may be able to contribute key information. This is especially important if any of the abuse is aimed at the child as well as the adult.