

22nd December 2015

2015

CAMHs Feedback



CONTENTS

Introduction.....	2
Attendees across all activities.....	2 - 3
Questions asked.....	3
Question Responses.....	4 - 9
Analysis/ Discussion.....	10
Appendix.....	11 - 12

Introduction

After three family based activities parent carers were asked some basic questions relating to knowledge and experience of CAMHs during the feedback process for the activities.

The questions were attached to the feedback forms for each activity and were designed to be detached and completed anonymously. The questions were changed slightly from the first to the last activity based on how they were answered and understood. The data gathered has been incorporated in this report to show a brief snapshot of how CAMHs is understood and experienced. Also not all questions were completed by all those who either attended the activities or completed the feedback forms.

Attendees across all activities

Activity One

16 families attended and completed forms and they had children and young people (CYP) aged between 11 months and 23 years. The self-reported ethnicities were white British, Pakistani British, Hungarian and white mixed. Parent carers reported their CYP needs as; ADHD, LD, ASD, OCD, Cerebral Palsy, Tourettes, GDD, Hearing Loss, Hereditary Multiple Exostoses. Parents reported have between 1 and 4 CYP with needs

Activity Two

25 families attended and 18 families completed forms and they had children and young people (CYP) aged between 3 and 20. The self-reported ethnicities were White British, Pakistani British and Dutch. Parent carers reported their CYP needs as ASD, GDD, Neurodevelopmental delay, Tourettes, UPF313 Syndrome, Hearing Impairment, SpLD and GDD. Parents reported having 1 to 3 CYP with needs

Activity Three

21 families attended and 19 families completed forms and they had children and young people (CYP) aged between 2 and 24. The self-reported ethnicities were White British, Pakistani British, French and Dutch. Parent carers reported their CYP needs as ASD, GDD, DAMP, Tourettes, UPF313 Syndrome, Hearing Impairment, SpLD, GDD and FASD. Parents reported having 1 to 2 CYP with needs

General Information

There are some families who have attended more than one activity and generally there have been one or two families who have opted not to complete feedback forms. Of the forms completed not all sections relating to CAMHs have been completed by all those who have completed feedback forms. Of the 53 forms/

questionnaires completed approximately 45 were completed by parents who attended only one of the three activities.

Questions asked

Activity One

1. What do you know about CAMHs?
2. Do you access CAMHs? Yes/ No
3. If you answered yes to question 2 please use the space to explain why and what service they provide
4. If you answered no to question 2 and you feel this is a service you should be accessing please tell us why and if you have had any experience of trying to get a referral to the service
5. How would you rate CAMHs for Referrals, Support, Waiting Times (From 10 being high to 1 being low)

Activity Two

1. Do you access CAMHs? What do you know about the service?

Activity Three

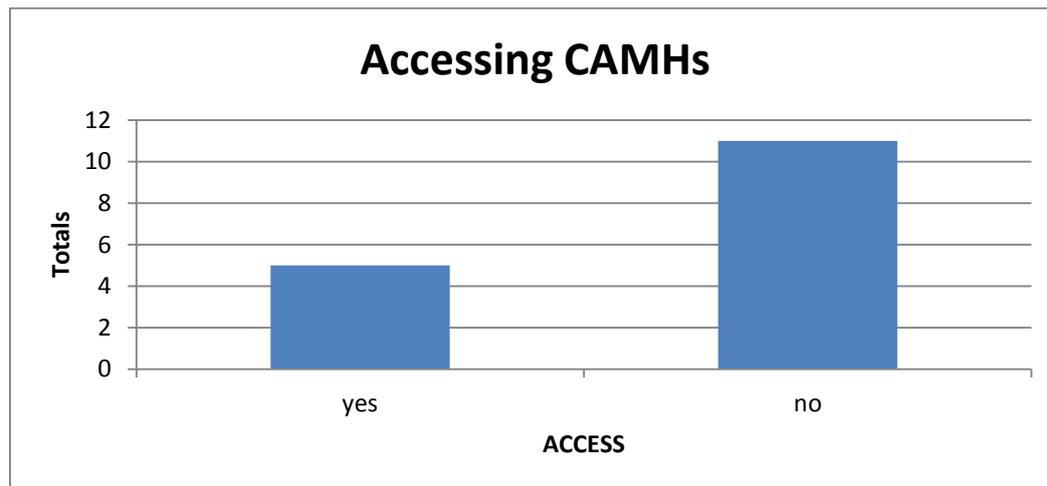
1. What do you think CAMHs is meant to do?
2. Do you access CAMHs? Yes/ No
3. If you answered yes to question 2 please use the space to explain why?
4. If you answered no to question 2 and you feel this is a service you should be accessing please tell us why
5. Please tell us about your experience of the referral process to CAMHs (*answer this question if applicable*)
 - a. Who referred you? School/ GP/ Other
 - b. Why were you referred
 - c. When was the referral made?
 - d. Was the referral accepted yes/ no
6. Waiting List (*answer this question if applicable*)
 - a. Are you on the waiting list to be seen, if so for how long?
 - b. If you have already been seen how long were you on the waiting list for?
7. What support have you received from CAMHs (*answer this question if applicable*)
8. How would you rate CAMHs for Referrals, Support, Waiting Times (From 10 being high to 1 being low)

Question responses

Activity One

Question relating to whether CAMHs has been accessed

Accessing CAMHs	yes	no
Total selected	5	11



Five of the 16 parents who completed the questionnaire said they had accessed CAMHs meaning 31.25% had accessed the service

When asked the question “What do you know about CAMHs?” 13 parent carers answered the question. Some of the answers are as follows:

1. *“They avoid you”*
2. *“Years of involvement and the lack of power it has to help children in mainstream school is useless”*
3. *“They have a long waiting list and they deal with mental issues displayed in children with ASD and ADHD”*
4. *“Nothing”*

The next question asked was “Why was CAMHs accessed and for what type of service?”. Seven parents answered this with comments such as:

1. *“ADHD, ASD assessment from CAMHs practioner”*
2. *“Daughter referred and never heard back, still desperate, disgusting”*
3. *“First time”*

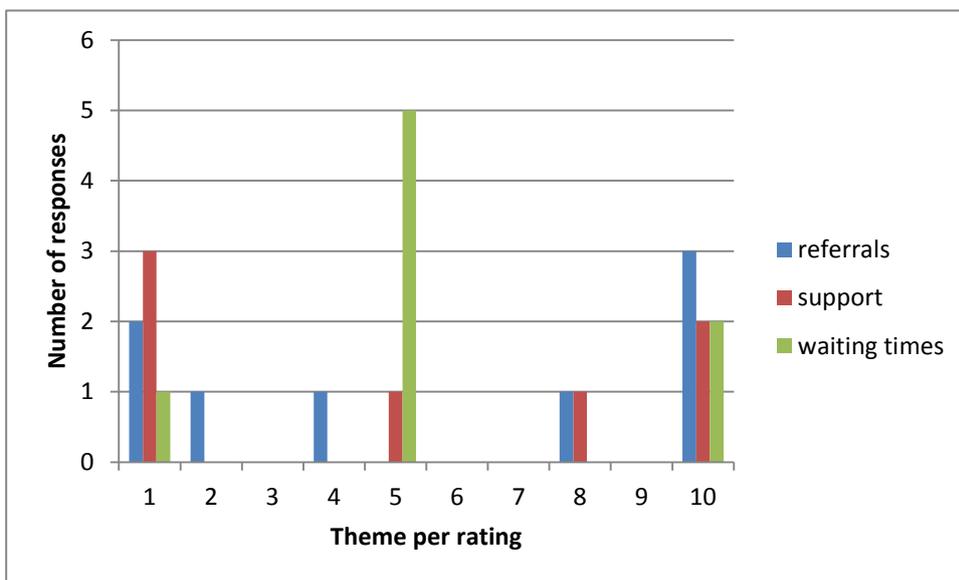
The third question asked “Why do you feel you should access CAMHS and experience around referrals?” Of this only two parents provided answers, one of which was

1. *low level behaviour, OCD and anxiety*

The full list of questions and answers are in the appendix.

Parent carers were also asked to rate CAMHs for referrals, waiting times and support the results of which are in the table below. A rating of 1 = poor experience and a rating of 10 = a good experience.

	low									high
	1	2	3	4	5	6	7	8	9	10
referrals	2	1		1				1		3
support	3				1			1		2
waiting times	1				5					2



8 forms had no ratings

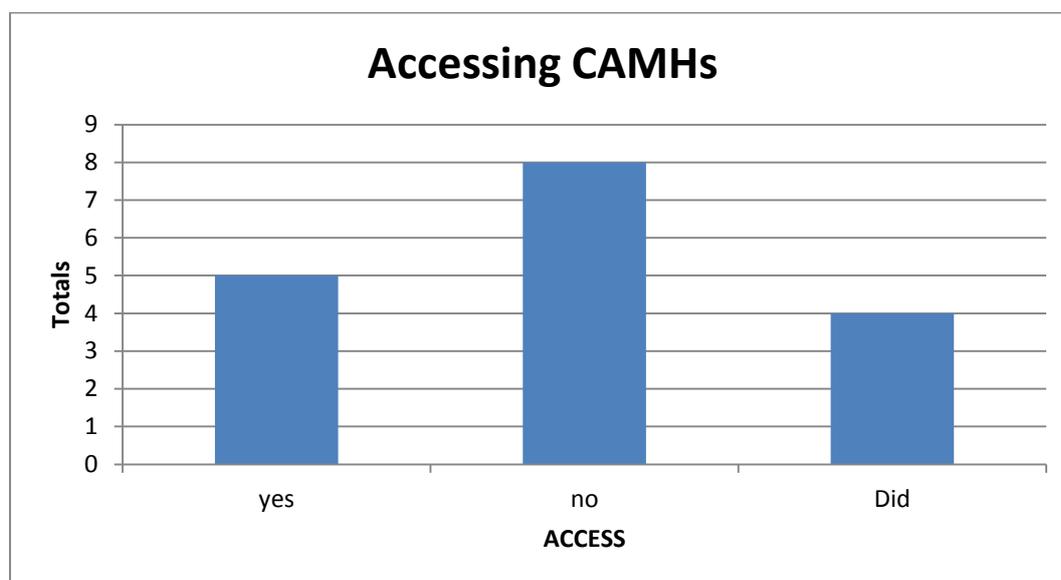
8 forms had ratings one of which only rated referrals

The responses to the questions asked and ratings were mixed “waiting times” receiving the highest number of responses under one rating of “5”

Activity Two

A third field was added to the answers for the accessing CAMHs question due to parents writing on their forms that they had accessed CAMHs as opposed to did or did not access CAMHs

Accessing CAMHs	yes	no	Did
Total selected	5	8	4



18 forms were completed of which 17 responses were given to the question. Of the 17 responses 9 showed CAMHs was or had been accessed so 53% had accessed CAMHs at some point.

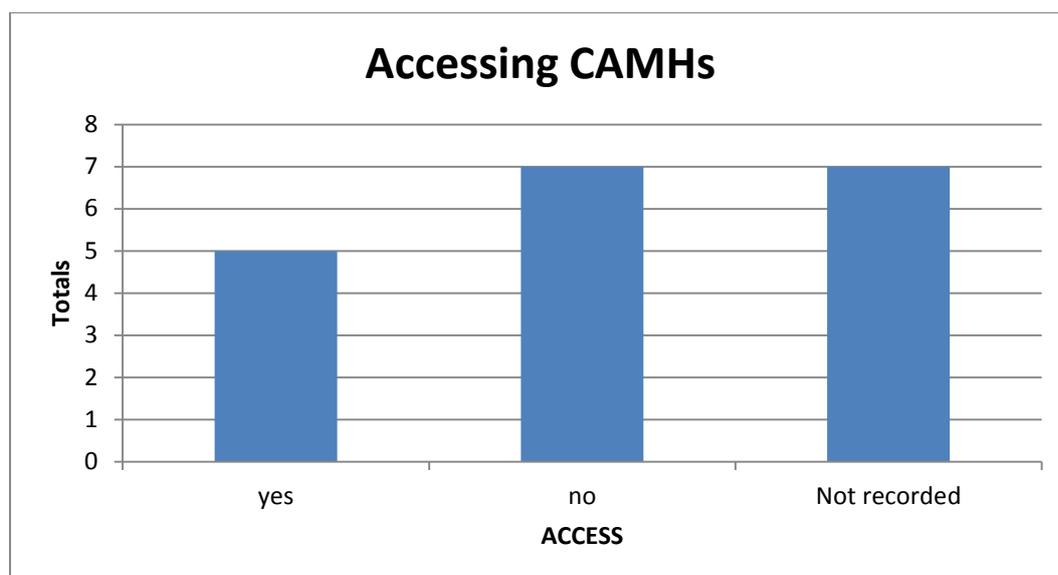
When asked "What do you know about CAMHs?" seven parents answered the question and gave the following response:

1. "Don't know"
2. "mental health service for children"
3. "don't access but nice to raise awareness"
4. "nothing"
5. "CBT"
6. "For behaviour specialists"
7. "being used for support, staff excellent"

Activity Three

Again the question was asked “Do you access CAMHs” and of the 19 forms completed 12 answered the question.

Accessing CAMHs	yes	no	Not recorded
Total selected	5	7	7



26% chose the answer yes they had accessed CAMHs

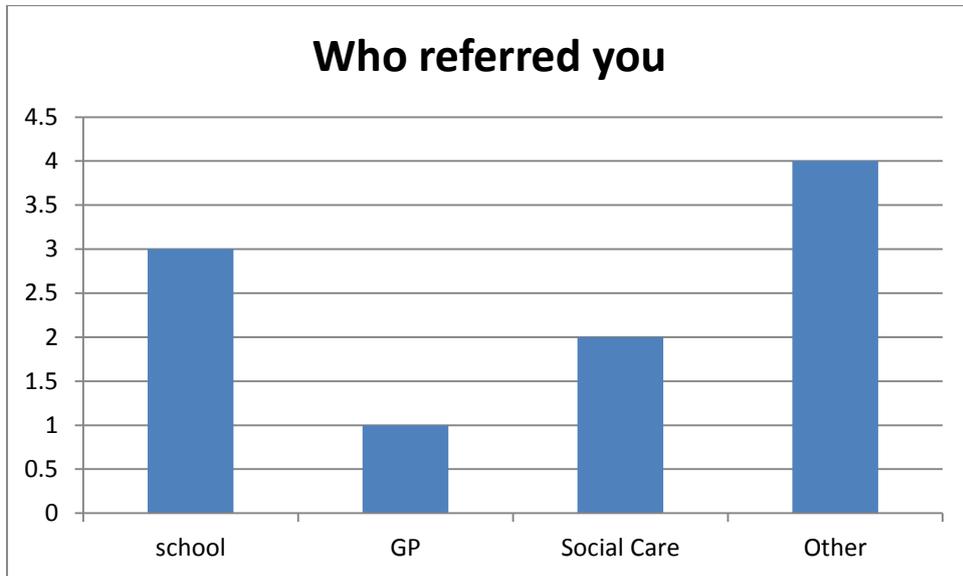
The next question was worded slightly differently as it had been reported the previous version had created some confusion. The question was worded as “What do you think CAMHs is meant to do?” this time.

10 parents answered the question and gave responses such as:

1. *“For mental health, behaviour management”*
2. *“To help people that need support”*
3. *“Support local people who need access to services”*
4. *“To diagnose and help”*

Follow up questions were asked the first of which related to referrals which was in three parts; Who referred the parent carer to CAMHs

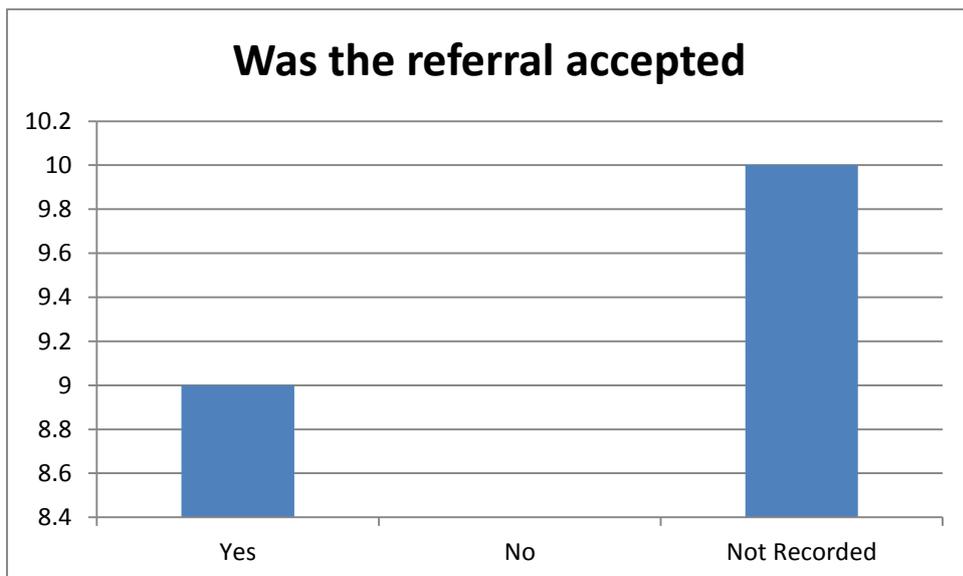
Who referred you	school	GP	Social Care	Other
Number of Responses	3	1	2	4



10 parents answered this question and from the answers it can be seen that the highest referrals were listed under other and the next under schools.

The next part related to whether referrals were accepted and from the results it can be seen that 9 were and 10 were not recorded

Was the referral accepted	Yes	No	Not Recorded
	9		10



The last part related to reasons for a referral with answers as follows:

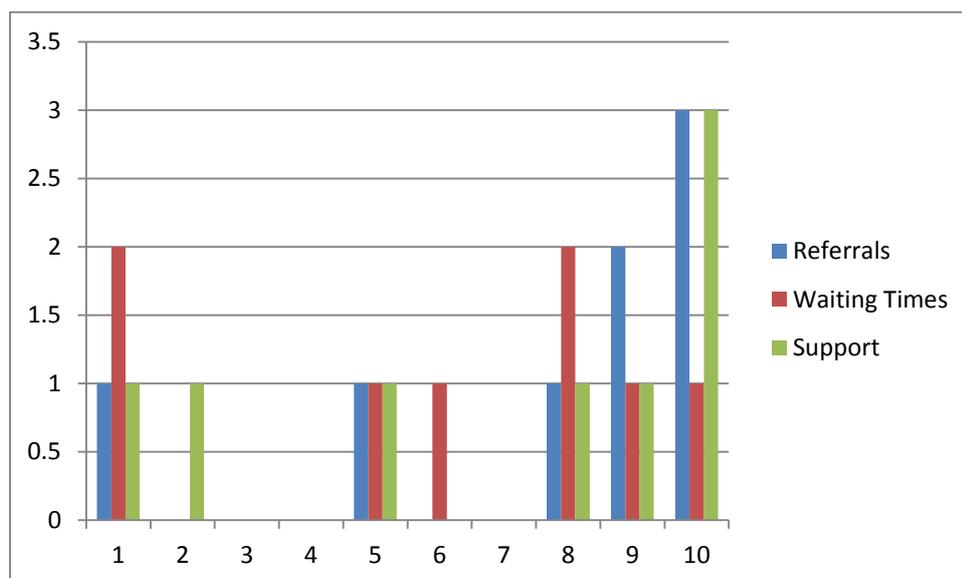
1. Behaviour,
2. don't know x2,
3. ASD diagnosis,
4. OCD and Anxieties, Diagnosis,
5. CBT,
6. FASD needs,

Views on what support was like were gathered again and three responses were given; two examples are as follows:

1. *“E received excellent support from CAMHs. A consultant Psychiatrist is doing CBT with him who has twice been into school to give advice. As a parent and family we have felt supported. I have been impressed with the excellent care”*
2. *“Home visits, social stories and training for TA. Not enough support though, I am sure they would love to provide more but realise this is down to finances. Have had a different and terrible experience with my older children”*

Again as in the feedback on the first activity where CAMHs views were sought a rating of CAMHs was conducted in relation to referrals, waiting time and support

	low									high
	1	2	3	4	5	6	7	8	9	10
Referrals	1				1			1	2	3
Waiting Times	2				1	1		2	1	1
Support	1	1			1			1	1	3



Analysis/ Discussion

The data gathered is intended to give a snapshot of parent carers understanding and experience of CAMHs and is not an in depth review. Data is both quantitative and qualitative; responses are varied and the details on the parent carers who have responded are also varied.

Overall approximately 45 parent carers have responded. An accurate number had not been established as a cross analysis of attendees has not been conducted at this time. The most common self-reported disability/ additional need of the parent carers' CYP was ASD. The most common ethnicity self-reported was White British.

One factor that stands out is parents understanding of what CAMHs is/ does with responses being mainly focussed on "support" for mental health/ behaviour. There was some mention of it being for ASD in particular. Parents who had accessed CAMHs rated support as more highly than those who had not. Also referrals/ waiting times led to more negative than positive responses. It is not possible to conduct a cross comparison on the rating questions from activity feedback one to activity feedback three as it was not possible to determine which parents had completed both forms.

It could be suggested that the parents who were accessing CAMHs had a more positive view and understanding as they felt they were receiving support. It could also be suggested that waiting times, confusion over referrals and a feeling that CAMHs can offer support which parents feel they are not receiving could lead to negative views.

Appendix

Feedback Questions from Activity One

What do you know about CAMHs	Why CAMHs accessed and type of service	Why do you feel you should access CAMHS and experience around referrals
<p>They avoid you</p> <p>diagnose and treat additional needs</p> <p>years of involvement and the lack of power it has to help children in mainstream school is useless</p>	<p>support</p> <p>help with daughter</p> <p>just been diagnosed with Autism</p> <p>3 children diagnosed with autism and lucky enough to get statements and special school and one left to rot and not helped in mainstream</p>	
<p>Not much</p> <p>help with mental health</p>	<p>adhd, asd assessment from CAMHs practioner</p>	<p>ridiculous as a nightmare to initial assessment for child with emotional and social difficulties as can't get through front door at single point of access</p> <p>low level behaviour, OCD and anxiety</p>
<p>that they are very busy</p>	<p>daughter referred and never heard back, still desperate, disgusting</p>	
<p>Not a lot</p> <p>they have a long waiting list and they deal with mental issues displayed in children with ASD and ADHD</p> <p>Nothing</p> <p>Nothing</p> <p>I've heard it mentioned</p> <p>nothing</p> <p>nothing</p>	<p>First time</p>	

Feedback Questions from Activity Three

What do you think CAMHs is meant to do?

For mental health, behaviour management

To help people that need support

Support local people who need access to services

To diagnose and help

Support families who have children with needs

Help assist children with mental health needs

supporting children with mental health needs

provide support to families who need it

provide help to people/ families who need it

help children with mental health needs

What support have you received from CAMHs

E received excellent support from CAMHs. A consultant Psychiatrist is doing CBT with him who has twice been into school to give advice. As a parent and family we have felt supported. I have been impressed with the excellent care

Home visits, social stories and training for TA. Not enough support though, I am sure they would love to provide more but realise this is down to finances. Have had a different and terrible experience with my older children

CBT, Tourettes Clinic and Education Group. Concerned that there is no longer any support for children with Tourettes. When Clare Major left there was no-one to specialise in Tourettes and the clinic was lost