

CAMHS Targeted Team Process and Offer

The Child and Adolescent Mental Health Service (CAMHS) Targeted Team is a specialist team within Hertfordshire CAMHS, which specifically supports children and young people who have an allocated social worker. The young person might have a social worker due to a safeguarding plan (Child in Need or Child Protection plan) or they might be a Child Looked After or adopted. The team provides mental health support for children and young people who have identified difficulties with emotional wellbeing. The team includes a number of practitioners, including CAMHS practitioners, Clinical Social Workers, and a Clinical Psychologist who have a range of qualifications and additional therapeutic training. This document contains information and a flow chart, which aim to outline the support offered by the CAMHS Targeted Team as well as timescales.

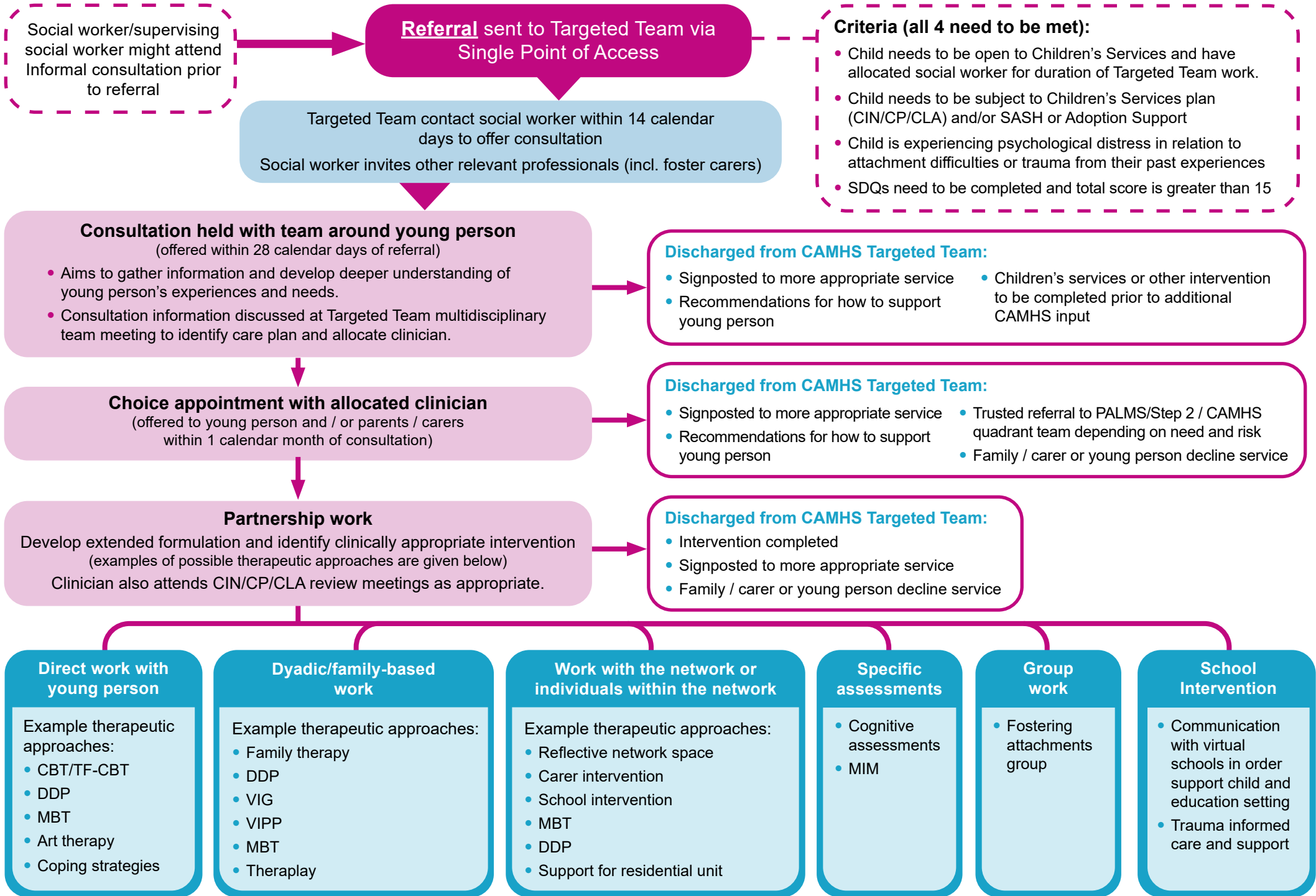
A referral can be made to the team via the Single Point of Access (SPA), by the young person's social worker, GP or school. The first step following a referral is a consultation with the young person's social worker and professional network around the young person (e.g. foster carers,

school, supervising social worker), which aims to provide a reflective space for the network to think about the young person's experiences and needs. The consultation aims to be an intervention or support in itself. The consultation also offers a space to discuss which service would be most appropriate – further intervention with the CAMHS Targeted Team might be offered or the young person will be discharged with recommendations and/or signposting to a different service depending on risk and need. The CAMHS Targeted Team can offer a range of flexible interventions, with a focus on developmental trauma and attachment difficulties depending on needs – these include interventions for the child as well as those for the network of adults supporting them. Further details about the process and interventions are provided in the flowchart and tables below.

If the child or young person is open to the CAMHS Targeted Team and requires psychiatric intervention or access to a high risk pathway, the Targeted Team are able to liaise with the local CAMHS quadrant.

The following table provides a key for acronyms and phrases used in this document.

Key	Definition
CAMHS	Child and Adolescent Mental Health Services
Single Point of Access (SPA)	A comprehensive intake, screening and triage system for new referrals and transfers of care to Hertfordshire Partnership NHS Foundation Trust services by a trained focused clinical and administrative staff team, comprising of Referral Advisors and Clinical Advisors.
SDQ	Strengths and Difficulties Questionnaire
CIN	Child in Need
CP	Child Protection
CLA	Child Looked After
Informal Consultation	Informal consultations are an initial intervention for social workers and supervising social workers to have a space to reflect on the needs of the young people they are supporting, and to discuss whether a referral to CAMHS Targeted Team would be helpful.
Consultation	A consultation is held with the social worker and other relevant professionals. The consultation is an intervention for the professional network to provide a space to discuss the young person's experiences and develop an initial attachment and trauma-informed formulation. It is also a space to reflect on whether the young person requires further direct or indirect mental health support.
Choice Appointment	Choice appointments are the first contact the child and family have with the CAMHS service. The aims of the Choice appointments are to listen to what is happening for the child and family and think together about what their hopes are from the service. An opportunity to think about their mental health presentation and to explore risk. As part of this assessment process, outcomes measures are collected. Outcome measures are questionnaires, which help young people and those caring for them gain more information about their emotional wellbeing. Consideration will be given to exploring whether CAMHS or another service is best placed to help. After a choice appointment the practitioner will send out a report giving an overview of the appointment and what recommendations have been made as part of a plan.
Partnership Work	A Partnership appointment begins the working relationship between the young person, the family and practitioner(s). The aim is to work on agreed goals with the family and young person, encouraging them to be active in their own change and to use our experience and therapeutic skills in a collaborative manner to support these changes. Outcome measures are also used at regular intervals throughout partnership to continue to assess and monitor the young person's emotional wellbeing.



Therapeutic Approaches	Definition
CBT – Cognitive Behavioural Therapy	Cognitive behavioural therapy is a type of talking treatment which focuses on how your thoughts, beliefs and attitudes affect your feelings and behaviours, and teaches you coping skills for dealing with different problems.
TF-CBT – Trauma-Focused CBT	This treatment can be used after a one off traumatic event, or repeated trauma post-6-years-old. The aim is to process traumatic memories in a safe therapeutic space.
MBT – Mentalisation Based Therapy	A therapeutic approach with an aim to enhance the capacity to mentalise, i.e. the capacity to understand ourselves and others as motivated by intentional mental states, such as feelings, desires, wishes, goals and attitudes. It is believed that the capacity to understand oneself and others is compromised where there is no secure attachment figure during a child’s development.
Art Therapy	Art psychotherapy (or Art Therapy) enables children and young people to build a therapeutic relationship and to express and explore their thoughts, feelings and experiences through the use of art materials as well as through words.
Family Therapy	<p>Family Therapy allows for conversations and discussions between members of the family. Family Therapy aims to be:</p> <ul style="list-style-type: none"> • Inclusive and considerate of the needs of each member of the family and/or other key relationships (systems) in people’s lives • Recognise and build on peoples’ strengths and relational resources • Work in partnership with families and others • Sensitive to diverse family forms and relationships, beliefs and cultures • Enable people to talk, together or individually, often about difficult or distressing issues, in ways that respects their experiences, invite engagement and support recovery. <p>Some of these sessions may be as a group, in couples, or one on one. They will have a lead therapist and a reflecting team in addition to the family.</p>
DDP – Dyadic Developmental Psychotherapy VIG – Video Interaction Guidance	<p>The overall aim is to enhance relationship and connection between caregiver and child. The specific aims are to enable trust and security, for relationship repair between parent/carer and child, and to reduce blocked care/blocked trust. Parents/carers begin the therapy with 4-6 sessions then the child is invited to join the sessions. It can be completed in 12 sessions, although is likely to take longer. Used for attachment difficulties and if trauma was prior to 6 years of age.</p> <p>Video Interaction Guidance is an intervention through which a practitioner aims to enhance communication within relationships. It works by engaging clients actively in a process of change towards realizing their own hopes for a better future in their relationships with others who are important to them. Guiders are themselves guided by the values and beliefs around respect and empowerment.</p>

Therapeutic Approaches	Definition
VIPP – Video-Intervention to promote Positive Parenting	Video-Intervention to promote Positive Parenting is a preventative intervention aimed at increasing parental sensitivity and has an evidence base for preventing or reducing behavioural problems in young children.
Theraplay	Theraplay is a relationship-based, dyadic, experiential method of play therapy that seeks to develop secure attachments between parents and their children. The Marschak Interaction Method (MIM) is conducted prior to offering Theraplay services, as it identifies strengths and challenges in the carer-child relationship in four important domains: engagement, nurture, challenge, and structure.
Reflective Network Space	This is an opportunity to bring the professional network together to think together about how to understand and respond to the child's difficulties as well as a way of supporting professionals working with the child. They give an opportunity for all to understand the child's developmental trauma and narrative. The overall purpose and scope of these meetings varies widely, depending on the case and the level of complexity. There is a group responsibility within the sessions and they can develop in a way that is supportive to the needs of the professionals when working with the child. It is hoped that these spaces strengthen relationships across professional networks to enhance the way in which professionals work together.
Carer Intervention	Support offered to carer in various forms such as education around child's emotional difficulties/mental health presentation/trauma, emotional support to help them continue providing care for child. A variety of therapeutic models and approaches can be used.
School Intervention	This could come in the form of one off session to the school to provide a reflective space. It could involve some psychoeducation for the professionals supporting a child. Advice regarding a child's emotional needs in the educational setting.
Cognitive Assessments	Cognitive assessments are a way of understanding the way in which a child can learn and think. It will give information about what their strengths and difficulties may be in relation to how they learn. It will look at cognitive skills such as a child's motor skills, memory, attention, perception which are all skills are employed to solve problems, perceive the world in a way that makes sense and is consistent, and to learn new skills and information. This assessment normally involves a number of different tasks for the child to complete.
MIM – Marschak Interaction Method	A parent-child relationship assessment. The MIM may also be used independently to assess parent-child dynamics and to formulate treatment recommendations, whether or not the family has the option of participating in Theraplay services.
Fostering Attachments Group	This group is currently offered to foster carers. Based on the work of Kim Golding and Daniel Hughes, groups provide a reflective space for foster carers to share experiences of fostering, and to learn from each other. This is an indirect method of supporting the child's mental health through supporting the foster carer. Groups are tailored to the needs of the individuals in each group.