

Walsall CAMHS Referral & Exclusion Criteria

<u>Please ensure that you have referred to other appropriate services before</u> <u>referring to CAMHS and that the child/family has attended.</u>

Who can refer to CAMHS?

- General Practitioners
- Paediatricians
- Social Services (Qualified Social Workers Only)
- School Health (Only via Paediatric Panel)
- Children with Disabilities Team
- Black Country Healthcare NHS Foundation Trust colleagues
- Youth Justice Service Practitioners (To the Specialist Pathway)
- Other CAMHS Teams

Children and Young People often present with a mixed range of difficulties. Here are some indicators to think about when considering making a referral:

- Length of time/onset of presenting difficulty
- Recent life events that may suggest an understandable reaction
- Significant change/deterioration in the individuals presentation
- Level of impact/interference in different environments of the child's or young person's life
- Developmental stage
- Response to early intervention strategies (details are to be provided)

Examples of the types of difficulties appropriate for CAMHS are listed below. This list is not exhaustive but represents some key problems referred.

<u>Anxiety</u>

- Where other frontline interventions, such as counselling (including Reflexions, available within some schools) have been unsuccessful.
- Where it is affecting the child's development or level of functioning (i.e. too anxious to leave the house/attend school etc).
- Where it is out of proportion to the family circumstances.
- Where there is an impact on the parent/carer/child relationship.
- Where there is a sudden change or deterioration.





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- A young person may seem overly worried, experience panic attacks or phobias. You may notice the young person avoiding certain situations and/or seeking reassurance.
- Where the child is experiencing severe emotional upset on being faced with the prospect of attending school, demonstrated by extreme fearfulness, anxiety, misery and complaints of feeling unwell without an obvious cause.

A note on COVID: It is understandable that young people may experience an increase in levels of anxiety during and following this unprecedented national emergency. Other frontline services such as counselling should be sought in response to such concerns prior to submitting a referral to CAMHS.

Low Mood

- Where the difficulties are beyond age appropriate mood variation.
- Where there is an impact on daily living, e.g. sleep, appetite and/or school attendance.
- Where the young person may seem sad, withdrawn, lethargic, tearful, irritable and angry.

Where there is a family history of mental illness or suicidal ideation.

Self-Harm or Suicidal Gestures/Ideation

• Where there is concern about harm in the context of other difficulties, e.g. depression, suicidal ideation.

Overdoses or other forms of significant self-harm should be sent to Walsall Manor Hospital, A&E Department for immediate medical care.

Obsessive Type Difficulties

• Consider early referral if the symptoms are interfering with the young person's functioning.

A young person may experience obsessive thoughts and show obsessive compulsive behaviours such as frequent checking, repeating, strict rituals and reassurance seeking. They may also seem very anxious.

Post-Traumatic Stress Disorder

• Consider a referral to the Trauma Response Network (<u>www.traumaresponsenetwork.org</u>)

Where a young person continues to demonstrate hypervigilance, avoidance, flashbacks or a marked increase in unexplained emotional outbursts or other episodes of distress over a period of <u>6 months</u>.





• A young person may refuse to eat, show extreme dieting/binge eating or self-induced vomiting. You may notice that the young person is pre-occupied or secretive about their food intake.

Please consider an early referral where there are symptoms of an emerging eating disorder. Please note that height, weight and BMI should be plotted on a centile chart, a general examination including baseline bloods and an ECG for those with BMI <15 must be completed. If weight loss is rapid or BMI <15 an urgent referral is necessary.

<u>Psychosis</u>

• Symptoms may include visual/auditory hallucinations, delusions, thoughts disorder, paranoia.

Refer immediately to CAMHS, including those secondary to substance abuse.

Complex Developmental Problems (not post diagnosis)

Difficulties may include:

 Impaired social communication
 Unusual or fixed interests
 Marked preference for routine, difficulties adapting to change or rigid behaviours
 Hyperactivity, impulsivity and inattention in children that is

unresponsive to behavioural intervention

Complex Bereavement

 It is essential that the young person should be referred to a counselling service initially (SWING can be contacted on 01922 645 035 or <u>children@wbss.org.uk</u>). Winston's Wish can also be considered for signposting (www.winstonswish.org).

Only consider a referral to CAMHS if the young person is experiencing severe distress following a death that has occurred within traumatic circumstances and/or they have an abnormal grief reaction <u>6 months</u> post the date of bereavement.

Psychosomatic Presentations (Only accepted via Paediatrics)

Where a child is experiencing significant physical symptoms with suspected psychological cause.

Enuresis/Encopresis (Urinary/Faecal Incontinence) (Only accepted via Paediatrics)



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A referral should initially be made to a paediatrician for assessment to exclude physical health problems.

Further to medical investigations being carried out, psychological

assessment/intervention via CAMHS may be offered alongside medical reviews.

Referrals that do not meet the criteria for specialist CAMHS include:

<u>Under 5s</u>

- With the exception of pre-school children that would meet a specific psychotherapy criteria.
- Please note, we do not accept under 5s for the purposes of providing diagnoses. These should be directed to the Child Development Centre, contactable on 01922 605 800 or <u>CDC.admin@nhs.net</u>

School related issues

• Children and young people whose problems are primarily school based and who have not yet received input from educational psychology or education welfare, including issues surrounding bullying.

Behaviour Problems

• Young people where behaviour although challenging, is age appropriate. Please consider a referral to Early Help by contacting 0300 555 2866 Opt 1 or <u>EHpathway@walsall.gov.uk</u> for support around parenting and behaviour management.

Child Protection Concerns

 Concerns that a child is at risk of harm from physical, sexual or emotional abuse must initially be referred to the Local Authority – see <u>https://go.walsall.gov.uk/walsall-safeguarding-partnership/Report-a-</u> <u>concern/For-a-child</u>. CAMHS may be part of a subsequent action plan.

Post Autism Spectrum Disorder Diagnosis

Consider seeking support from a range of services, including Autism West Midlands (<u>www.autismwestmidlands.org.uk</u>), Cygnet Parenting (<u>wellbeing@walsallhealthcare.nhs.uk</u>) and Walsall Information Advice & Support Service for SEND (01922 650 330 or <u>iasssend@walsall.gov.uk</u>) amongst others.

