The following questions have been broken into two parts

Q1 How children and adolescents potentially at risk of developing mental health problems are identified and how those problems should be prevented?
Part a) How are children and adolescents potentially at risk of developing mental health problems identified?

At RHSC Yorkhill our work with paediatric staff raises awareness of mental health problems. We contribute to a system wide understanding of risks to mental health. Specific examples include all junior paediatricians being offered Child in Mind training. There is regular input from specialist mental health staff to clinical meetings e.g. Dept. of Neurosciences, Diabetic team, the Home care Ventilation Service, There is a range of staff at RHSC who are skilled at contributing to psychosocial aspects of care e.g. the Youth services, the Family Information Centre, Social Work and Education who have access to specialist mental health clinicians.  
Part b) How should the problems identified in question 1a be prevented?

Early identification of problems.  
Child, young person and family friendly environment.  
Parental and family support and involvement.  

Q2 What obstacles there are in identifying children and adolescents with mental health problems and how they might be overcome?
Part a) What are the obstacles in identifying children and adolescents with mental health problems?

Lack of knowledge and understanding of mental health problems by paediatric staff.  
Pressure of time within services.  
Concerns and cares of staff working with distressed children and families.  
Competing priorities with acute medical concerns.  
Part b) How might the obstacles be overcome?

Recognition that identification of mental health problems can be key determinants of outcome in paediatrics.  
Training, support and supervision of staff to increased awareness of mental health issues.  
Increased resources to facilitate this work.  

Q3 What action is being taken to facilitate early intervention and what else can be done?
Part a) What action is being taken to facilitate early intervention?

Availability of on-site embedded mental health staff in the paediatric environment.  
Development of a strong psychosocial ethos and children, young people and family rights based culture.  
Support for parents and children within the paediatric and neonatal and maternity settings.  
Part b) What else can be done?

Recognition of the particular needs of adolescents especially those attending adult hospitals. Further development of links between hospital based and community services for vulnerable children with disability and physical health problems.
**Q4 How can access to services and ongoing support be improved?**

Full implementation of the CAMHS Framework for Promotion, Prevention and Care.

**Q5 What problems there are around transition from CAMHS to adult mental health services and how a smoother transition may be achieved?**

Part a) What problems are there around transition from CAMHS to adult mental health services?

Variable ages for transition.
Different thresholds and criteria for referrals e.g. young people with neurodevelopmental disorder who do not consider themselves learning disabled are often offered no service other than a LD service.
Adult liaison psychiatry services are under resourced in adult hospitals.

Part b) How might a smoother transition be achieved?

Development of a planned transition process e.g. transition clinics between paediatrics and adult services over 1 year.
Closer working links with adult services.
Support for psychosocial services within adult hospitals.

Other comments:

We welcome this focus on services for children and young people and its attention to key areas of prevention, early identification of mental health problems and transition issues.
As a team we recognise the importance of hospital based Social Work and Education services.
We are concerned about the impact on CAMHS of the resources available to Social Work and Education.
We would also wish to raise awareness of the particular mental health needs of children and young people with physical symptoms and disability which are often missed.
Thank you for the opportunity to contribute to this important piece of work.

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