Specialist CAMHS services offer support and intervention to children/young people between the ages of 5-18 years who meet the criteria laid out in the table below. Considerations will be given to the level of risk, duration and context of the presenting symptoms/ difficulties and the overall impact on the child/ young person.

|  |  |
| --- | --- |
| **IMPACT:** | The emotional health and wellbeing difficulties need to have noticeable and substantial impact on a number of areas of functioning e.g., home, school, work. |
| **DURATION** | Where the child/ young person has reported symptoms for less than 3 months, an intervention or targeted service should be tried first. This may include advice or consultation from CAMHS. Where a child/ young person’s symptoms persist beyond this time and/or they are non-responsive to first line intervention e.g school or universal service, a referral to CAMHS should be considered. |
| **CONTEXT:** | Consideration will be made to complex and/or systemic risk factors such as parental mental health, history of abuse, family disruption, care status and so on. Understandable or time limited reaction to external stresses e.g. bereavement, family breakdown, physical illness, issues of bullying, and young people with neurodevelopmental concerns their behaviour/ presentation is understood within the context of the child’s current diagnosis should be addressed in universal or targeted services. |

Anyone can make a referral to the CAMHS West team and we particularly welcome self-referrals from parents/carers and young people.

Referral forms can be requested by contacting the team on 023 8103 0061 (CAMHS Direct Line) or 0300 123 6661 and asking for the CAMHS West team.

Alternatively email the team at **camhswestnewreferrals@solent.nhs.uk**

Completed referral forms can be sent back via this email address or posted to; CAMHS West SPA Team, Child and family Services, 2nd Floor Horizon, Western Community Hospital Site, William Macleod Way, Millbrook, Southampton, SO16 4XE.

Standard opening hours for the service are 9:00 – 5:00, Monday to Friday.

**Quick Links to Referral Criteria by presenting problem – click on text**

|  |  |  |
| --- | --- | --- |
| 1. Presentation of [Attention Deficit Hyperactivity Disorder (ADHD)](#ADHD) | 6. [Eating Disorders](#ED) | 11. [Psychosis](#Psychosis) |
| 2. ADHD as a predominant presentation with autism traits in addition to ADHD. | 7. [Family/ Parent trauma](#Family_Parent_Difficutlies) impacting on CYP Mental Health | 12. [School/ College Refusal](#School_College_referral) where anxiety or mood is the cause of this. |
| 3. moderate to severe [Anxiety Disorders Inclusive of Obsessional Compulsive Disorder (OCD) and Post](#Anxiety_Disorders) Traumatic Stress Disorder (PTSD) | 8. Mental Health needs in the context of [Gender Identity](#Gender_Identity) | 13. [Somatoform Disorders (also known as Psycho-somatic Disorders)](#Somatoform) |
| 4. Complex [Bereavement](#Bereavement) where functioning is impaired | 9. [Overdose](#Overdose) and other serious harm to self | 14. [Self-harm](#SelfHarm) |
| 5. [Depression/ Low mood](#Depression_LowMood) | 10. [Tourette’s and Tics](#Tourettes_Tics) where there is functional impairment | 15. Mental Health and [Substance Misuse](#SM) |

**Digital Offer for all young people aged 11 – 25 year olds.**

[Kooth.com](http://www.kooth.com/) is an online emotional well-being platform for, accessible through mobile, tablet and desktop. On Kooth you can chat to our friendly counsellors, read articles written by young people, get support from the Kooth community and write in a daily journal.

Qualified counsellors are on hand Monday- Friday 12pm-10pm and Saturday and Sunday 6pm-10pm.

| **No.** | **Presenting Problem** | **Description** | **Referral Route** |
| --- | --- | --- | --- |
|  | Attention Deficit Hyperactivity Disorder (ADHD) | Symptoms of inattention, hyperactivity and impulsivity, that are having a significant impact on a child/YP’s wellbeing and functioning.  Referrals will not be accepted where families have not accessed any parenting support, training in the first instance. | Initial route to community support agencies for   * **Parenting support** (e.g. [Children’s Resource Service](https://www.southampton.gov.uk/children-families/childrens-social-care/report-a-concern-about-a-child/childrens-resource-service/), [Re:minds](https://www.reminds.org.uk/), Youth Options) and * **School based interventions** from Special Educational Needs Co-ordinator (SENCO), Emotional Literacy Support Assistant (ELSA) and Educational Psychologist as appropriate. All above interventions should be accessed thorough individuals own school.   Referral to Specialist CAMHS following these interventions if no change has occurred and symptoms continue to significantly impact upon the level of risk and/or functioning. |
|  | Autistic Spectrum Condition (ASC) | Symptoms suggestive of ASD (e.g. poor social communication, language needs, rigid inflexible behaviour and sensory needs).  The Solent Children’s Autism Assessment Service is the service for Autism Assessments in Southampton. **CAMHS is not the referral route for Autism Assessments in the City.**  Autism Hampshire are the service for pre and post diagnosis autism focussed support.  Presentation of mental health needs in CYP where there is an existing diagnosis of ASD may be referred into CAMHS based upon severity and level of impact upon risk and functioning. | Autism Assessment Service (This is not part of CAMHS).   * The Solent NHS Trust Autism Assessment Service delivers autism assessments for children and young people between the ages of 5 – 18 * Referrals for assessment are preferred from professionals who know the child and family well, especially education settings, but referrals from GP’s, or other professionals outside of the child’s school setting will also be accepted. * All referrals for consideration for assessment must be made using the service’s referral form and emailed to the service via [autismsouthampton@solent.nhs.uk](mailto:autismsouthampton@solent.nhs.uk) * For further information or any queries please call 0300 123 6661 and ask to speak with the Autism Assessment Service or email at the email above. * Children under the age of 5 should be referred to the Community Paediatric Team who will assess the child’s global development alongside considering if a diagnosis of autism is indicated, referrals to that service can be made via  [cpmsreferrals@solent.nhs.uk](mailto:cpmsreferrals@solent.nhs.uk) |
|  | Anxiety Disorders Inclusive of Obsessional Compulsive Disorder (OCD) and Post Traumatic Stress Disorder (PTSD). | Many young people will experience anxiety. Levels of impairment will determine whether Specialist CAMHS is required or whether additional support within school and from community counselling services is most appropriate.  If anxiety is significantly impacting leading to school refusal, unable to lead the house and social environment and other interventions have been tried and/or if there is a dramatic and sudden deterioration then a referral to Specialist CAMHS is indicated. | Initially access community counselling services or school based counsellors/ pastoral care workers.  Before making a referral to Sp CAMHS please speak with your child/YP’s school about the MHST service in schools.  No Limits Counselling  **Phone:** 02380 224 224 **Email:** [enquiries@nolimitshelp.org.uk](mailto:enquiries@nolimitshelp.org.uk)  <https://nolimitshelp.org.uk/get-help/health-wellbeing/counselling/> |
|  | Bereavement and loss | CAMHS accept referrals for complex bereavement only (e.g. those where there is significant trauma and functional impact). Child/ young person may be experiencing significant levels of distress and additional signs of mental health difficulties. | Initial referrals to be made to local bereavement services. Services detailed in the local directories and below.  Winston’s Wish   * Winston’s Wish is a bereavement agency for children and young people aged 6-18 who have lost a close one or who are grieving. They offer practical support and guidance to families’ children and to young people to live with their grief. * Winstons Wish offers an online chat to help a person talk about their grief * For further information then please call 08452 030405 or access their website [*www.winstonswish.org.uk*](http://www.winstonswish.org.uk)     Simons Says- Child Bereavement Support   * Offer support for young people upto the age of 18 when a significant person in their life is dying or has died. They offer information and advice, run a telephone support line and host monthly age appropriate support groups. * For further information then please call 01794 323 934 or access their website [*www.simonsays.org.uk*](http://www.simonsays.org.uk)   CRUSE Bereavement Centre   * Offer support, advice and information to children, young people and adults when someone dies. * Contact the team on 023 8077 4900 or their national helpline 0808 808 1677 * Email: [southhampshire@cruse.org.uk](mailto:southhampshire@cruse.org.uk)   Referrals to specialist CAMHS to be considered following interventions from bereavement services and if level of distress in child is having significant impact upon level of risk and/or functioning and mental health. |
|  | Depression/ Low mood | Low mood is persistent and symptoms are impacting upon daily living e.g. tearfulness, poor sleep and reduced appetite. | If mild to moderate than community counselling 02380 224 224 [enquiries@nolimitshelp.org.uk](mailto:enquiries@nolimitshelp.org.uk),  <https://nolimitshelp.org.uk/get-help/health-wellbeing/counselling/>  or school counsellor should be accessed in the first instance.  Before making a referral to Sp CAMHS please speak with your child/YP’s school about the MHST service in schools.  Severe depression which is having a significant impact upon an individual’s risk and functioning should be referred to Specialist CAMHS. |
|  | Eating Disorders | To include:   * Bulimia * Anorexia Nervosa * Other specific feeding and eating disorders (OSFED) | Early referral to Specialist CAMHS, ideally from GP so a physical health check can be carried out.  Information to be included in referral:   * Current weight and height * History of recorded weights * Current blood pressure * Clarify eating history including vomiting and exercise. * Any physical symptoms (e.g. headaches, chest pain, dizziness etc). |
|  | Family/ Parent Difficulties | Family conflict and or cultures which arise in emotional and behaviour difficulties for the child/ young person.  Where there is evidence of family difficulties significantly impacting upon a child/young person’s mental health then referrers are advised to contact Specialist CAMHS for an initial discussion on whether a referral would be appropriate. | [Childrens Resource Service](https://www.southampton.gov.uk/children-families/childrens-social-care/report-a-concern-about-a-child/childrens-resource-service/), Children and Families First (previously Early Help) including [Family Hubs](https://www.southampton.gov.uk/children-families/activities-and-support-for-families/family-hubs/)  and Universal services should be accessed. These include parent support services, Yellow door, children’s centres and mediation services.  Specialist CAMHS will not accept referrals for young people whose emotional and behavioural difficulties arise from ongoing family issues. Exceptions include where mental health has an adverse effect on a YP’s functioning. |
|  | Gender Identity | Young person presenting with persistent and significant emotional and psychological distress regarding their biological sex (e.g. they may express long standing distress related to feeling they are a boy in a girl’s body).  This is not about sexual orientation or about young people who do not conform to gender norms. | Yellow Door run a Gender Dysphoria Therapeutic Group for young peopleaged 12-18who are experiencing social or psychological difficulties relating to these issues. To make a referral or to find out more about this service please contact Yellow Door Tel: 023 8063 6312, email: [*info@yellowdoor.org.uk*](mailto:info@yellowdoor.org.uk)or go online <https://yellowdoor.org.uk>  Where there is evidence of gender identity concerns significantly impacting upon a child/young person’s mental health, liaison with CAMHS is advised to discuss referral. |
|  | Overdose | Send directly to Emergency Department. | Immediate referral to hospital for medical treatment. |
|  | Psychosis | Young person engaging in bizarre behaviour, reporting hearing voices and/or hallucinations/Delusions. | Referral to Early Intervention Psychosis Team (EIP) if first presenting episode and the young person is 14 years or older. South Team (Southampton) 02380 878040/07775 535109  Early referral to Specialist CAMHS if the child/ young person is under the age of 14. |
|  | School/ College Refusal | Young people who are persistent non-attenders at school will primarily access interventions initially from the local education authority.  Where there is concern that the non attendance is due to a mental health problem this may be evidenced by high levels of distress displayed by the young person at attending school and/or significant levels of anxiety demonstrated which is preventing attendance. | In the first instance we recommend education services should access additional support from Education Welfare and Educational Psychology Services as appropriate.  Schools to consult with CAMHS team for advice and consideration of referral to Specialist CAMHS or other appropriate Service. |
|  | Somatoform Disorders (also known as Psycho-somatic Disorders) | A child/young person who is experiencing persistent physical symptoms, initial referral to a paediatric service is recommended.  Chronic physical illness would not be a reason for referral to CAMHS on its own. However, where this coexists with significant impact on mental health and affects all areas of life, a referral to CAMHS may be appropriate after consultation. | Discuss with GP and referral to UHS Paediatric services, who will refer to CAMHS following the exclusion of physical causes, if considered appropriate.  Where this is having a significant adverse impact on the child’s normal functioning for long periods of time and an organic cause has been excluded, a referral to CAMHS could be considered. |
|  | Self-harm | Self-harm describes any behaviour where someone causes harm to themselves, usually as a way to help cope with difficult or distressing thoughts and feelings. | Referrals should be made to local community CAMHS provisions, such as No limits 02380 224 224, [enquiries@nolimitshelp.org.uk](mailto:enquiries@nolimitshelp.org.uk), <https://nolimitshelp.org.uk/get-help/health-wellbeing/counselling/>, School ELSAs, Emotional Wellbeing Practitioners in schools etc.  Referrers are encouraged to contact their local specialist CAMHS team if self harm is accompanied by significant impact on mental health which effects risk and functioning to discuss whether referral is appropriate to community CAMHS provisions or the Specialist CAMHS Team. |
|  | Substance Misuse | Drug or alcohol misuse. | Refer to specialist misuse services, DASH, via No Limits, 02380 224224  <https://nolimitshelp.org.uk/get-help/health-wellbeing/drugs-and-alcohol/>  CAMHS will take referrals where there are additional moderate to severe mental health needs. |
|  | Tourette’s and Tics | The majority of tic disorders, including Tourette’s, need little intervention. Psycho-education is often helpful and can be found at <https://www.tourettes-action.org.uk/> | Referrals to be made to CAMHS in cases where the tic disorder is severely impacting on functioning.  In cases where the impact on functioning such as emotional distress and significant pain a referral to CAMHS should be considered. |
|  | Trauma and Complex Trauma | Child/ Young person displaying symptoms of hyper vigilance, flashbacks and/or marked levels of distress. | For trauma related to domestic violence or sexual abuse, Yellow Door offer a range of psycho-educational, support, advocacy and therapeutic interventions. For more information and/or to make a referral go to <https://yellowdoor.org.uk> or tel: 02380 636312.  CAMHS accepts referrals where there is also the presence of self harm and suicidal intent. |