Vaughan Gething AC/AM Ysgrifennydd y Cabinet dros Iechyd, Llesiant a Chwaraeon Cabinet Secretary for Health, Well-being and Sport



Ein cyf/Our ref VG/01351/17

Mike Hedges AM
Chair - Petitions Committee
National Assembly for Wales
Ty Hywel
Cardiff Bay
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20 June 2017

Dear Mike,

Thank you for your further letter of 2 June on behalf of the Petitions Committee regarding petition P-04-408 Child and Adolescent Eating Disorder services.

I note the comments made by Mrs Missen and appreciate her concerns about the need for early diagnosis and intervention in treating this debilitating condition. The need for early identification and intervention in order to stop more serious problems developing is a key theme in the NHS-led Together for Children and Young People Programme. The programme is examining the way in which CAMHS services work with partners to deliver an appropriate response to the needs of children and young people, including those with an eating disorder. One of the early products of the programme was to develop an eating disorder pathway for adoption across CAMHS to promote consistent high quality provision.

In relation to how the additional £500,000 funding for eating disorders is to be utilised, the focus will be on strengthening services around transition. The differences between how CAMHS and adult services support their clients with eating disorders are considerable. CAMHS commonly delivers a family-based treatment approach up to the age of 18, whereas adult services deliver an individualised model of treatment from the 18th birthday, with varying degrees of involvement of family members in the treatment. This arrangement causes anxiety and uncertainty, which is compounded by weak links between CAMHS and adult services and a lack of information about the respective services that would aid communication and preparation to manage the transition effectively.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

As a result, the new funding is being used to develop unified services that work across service boundaries and benefit from each other's skills and expertise, with transition from CAMHS to adult services being clinically-led rather than solely age-driven. Among other things, in order to improve skills and knowledge of staff working with young people of transitional age, training currently offered to deliver the Maudsley model of family-based treatment for eating disorders will be extended to staff in adult eating disorders services. CAMHS will also offer consultation to staff based in adult eating disorders services, as well as undertaking assessments as required.

CAMHS will also assist in the setting up of joint treatment interventions, including Multi-Family Group Therapy Programmes, Cognitive Remediation Therapy and Family Support. CAMHS and adult services will work collaboratively to collate, analyse and report audit data and outcome measures to evaluate interventions. Evaluation of outcomes will incorporate goals-based outcomes and feedback regarding satisfaction and service user experiences.

I hope this information is helpful to the Committee.

Yours sincerely,

Vaughan Gething AC/AM

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