



Health and Social Security Scrutiny Panel

Assessment of Mental Health Services

Witness: Children's Commissioner

Monday, 10th December 2018

Panel:

Deputy M.R. Le Hegarat of St. Helier (Chairman)
Deputy K.G. Pamplin of St. Saviour (Vice-Chairman)
Deputy T. Pointon of St. John
Deputy C.S. Alves of St. Helier

Witnesses:

Deborah McMillan, Children's Commissioner
Tara Murphy, Policy Principal

[14:59]

Deputy M.R. Le Hegarat of St. Helier (Chairman):

We will start. Just so you are all aware, obviously it is being live-streamed, so what we will do is we will all introduce ourselves in the panel, in order that the public outside of here can know who we all are and for the public in here as well. My name is Deputy Mary Le Hegarat from St. Helier and I am the Chairman of the Health and Social Security Scrutiny Panel.

Deputy K.G. Pamplin of St. Saviour:

Deputy Kevin Pamplin of St. Saviour and I am the Vice-Chairman of this panel.

Deputy C.S. Alves of St. Helier:

I am Deputy Carina Alves of St. Helier No. 2 and I am a member of the panel.

Deputy T. Pointon of St. John:

Trevor Pointon, Deputy of St. John and a member of the panel also.

Children's Commissioner:

Thank you. I am Deborah McMillan, the Children's Commissioner for Jersey.

[15:00]

Policy Principal:

I am Tara Murphy, Policy Principal for the Children's Commissioner.

Deputy M.R. Le Hegarat:

Thank you very much for coming. We have a couple of members of the public. We also have our Scrutiny Officer and the lady in the corner who is just working to ensure that the live-streaming all works. This is a public meeting of the Health and Social Security Scrutiny Panel and just to make you aware that it is covered by the procedures in relation to privilege for the States Assembly. The reason we have asked you to come today is because as a panel we are all new Members to the States and we got together on the scrutiny panel and we are all from different backgrounds and we all felt that mental health was an area that we all had concerns about and we wanted to raise as a priority, henceforth we started this in July. We have done a survey, which is now closed, but we did a survey and we have had over 300 responses to that survey. We have taken private testimony from individuals, both in writing and orally, and we have taken information both in writing and orally from a number of agencies, charitable organisations and we will be taking information from States-run departments as well. So from that aspect it is to enable us to get a really broad spectrum of what has been going on. So we shall ask a couple of questions. Obviously if there is anything along the way that you feel that you want to ask us as well then feel free. Following your appointment and we are fully aware of how it sits at the moment, that you are in a shadow role until the legislation comes through, basically when you undertook an Island-wide consultation, I believe, in relation to children and young people what did you find out about mental health services in Jersey?

Children's Commissioner:

Yes. I think first of all it is important just to clarify what it means to be working in shadow form because that is important and it is important that you understand the context of what I am saying in terms of that. So unusually a Children's Commissioner for the Island has been appointed before the law has been written and it underpins that role in legislation. It is a huge privilege for it to be that way round, because it has enabled me to come on to the Island and to be able to give advice to those who are crafting the law, to make sure that it is the very best, to give our children ultimate protection in terms of promoting and protecting their rights. So as you said, Deputy, I am in shadow form. In terms of a timeline we are hoping to lodge the law in January and that will lead to a States

debate at some point in March, but in the meantime I have been mandated for a job description and that has enabled me to talk to children and young people and those that care for them, to find out what it is like living and growing in Jersey. You will be familiar with the Island-wide consultation and Deputy Pamplin, I saw you had one on your desk, but this was carried out and published in April-June time, earlier this year, and it is a snapshot. It is a snapshot of children and their life on the Island. Statistically we have to be careful of the number of children that replied, so I think it is about 2,189 respondents but it does give us some headlines about what it is that children say, especially around emotional and mental health. Tom kindly has distributed to you the infographics, which are a helpful way of displaying the key findings. I have only brought 2 of them along with me today, one for 7 to 11 year-olds, and one for the 11 to 18 year-olds. Now, you will see that in both of the infographics at the bottom there are some bubbles and the questions are: "If you were the Children's Commissioner what would be the first thing that you would do to make things better for children in Jersey?" and the larger the bubble was the amount of responses that we had from children, but you can see that there are significantly a number of children who are saying: "We want better mental and emotional health support and awareness." If I can just go through some of the facts that we have heard from children, because I think it is important just to talk about those, what we heard is that for most children on the Island they have an idyllic childhood and they grow up well, but for some children that is not the case, and what we certainly heard from, for example, the 11 to 18 year-olds, that most of the time children felt positive, they felt relaxed and they felt happy. Indeed, 68 per cent said that they felt happy often or almost always, but if you have a look at the 11 to 18 year-old survey, which is just short of 1,000 pupils and children not in school, question 18 asked: "How often in the last 4 weeks did you feel worried or sad?" and 22 per cent said that they almost always felt worried or sad. This is a snapshot, but that equates to about 200 young people who are saying they almost always felt worried or sad in the last 4 weeks. The question went on, to number 19 and it said: "Well, if you are feeling worried or sad, what will you do about it?" and children had the option to tick lots of responses. That is why they do not add up to 100 per cent, but they said they talked to a friend, 11 per cent said that they would talk to a school counsellor, 4 per cent said that they would talk to their social worker, but surprisingly 50 per cent said they would keep it to themselves, they would not tell anybody that they were feeling worried or sad. Question 20 went on to say: "Well, do you know of any places in Jersey where young people can have help if they are feeling sad or worried?" and 57 per cent said: "We do not know of any places or we are not really sure," which is a huge surprise to those services that do provide places where young people can find help and there are a number of them, but what we are hearing from children is that they do not know about it and they do not know how to access it. We also heard quite clearly about bullying, and you will see that in the big bubbles again stopping bullying and antisocial behaviour was a big concern for children, something that they want to make better. The 3 to 7 year-old survey did not directly ask younger children about bullying, but it did come up as a key theme in the open-ended questions that we asked, but in the 7 to 11 year-old survey and the infographics here are around number 9, over two-

thirds of children reported that they had been hit by other children in the last 4 weeks, 61 per cent said that they had been left out by other children and 53 per cent said that they had been called names or made fun of at least once in the previous month. Moving on to the 11 to 18 year-old survey, 25 per cent of young people, so around about 250 young people, said that they had been hit by other children at least once. If you look at in particular question number 9 on the 11 to 18 year-old survey, there is a question that says: "How often in the last month have you been hit by other children in your school more than 3 times?" and 8 per cent said: "Yes, that is me." That equates to 73 young people. So children are very clear to tell us that they were concerned about bullying and they were concerned about their emotional mental health. Some went on to describe more fully what that looks like for them, and in the middle of our report, on pages 18 and 19, there is lots of further information, statistical information about that. I did just want to share some of the quotes. What is very rich about this report is the over 1,500 quotes that we have received from children, where they were able to add in free text, which cannot be analysed and put into a simple sheet like this but tells us a real story about what is going on for them and I would just like to share a couple of those with you. This is a quote from a young lady talking about her experience at secondary school and she says: "The school counsellor's office was at the end of a corridor. It became known as the walk of shame. The counsellor would knock on the classroom door, call my name and say it was time for my counselling session." That is something that has been repeated a number of times around the stigma and how they felt about having to access support, but how structures in the system were almost reinforcing this. Equally, there are a few more, because we asked young people for their opinions but also they gave us some ideas and there is a richness in their ideas. These are from the 11 to 18 year-old survey: "Work to remove the stigma towards mental health that may be a driving factor as to why people that need help do not tend to reach out from the fear of being judged." Another quote was: "If young people are feeling as if they have no one to speak to they should be reassured that there are people and counsellors available to talk. There is a huge stigma about going to see a counsellor, however having somebody to confide in is the best thing for them." They also talked about why do we not build a centre for children dedicated to mental health and general support? Parents will not be informed if they use the services unless they are at risk of danger. Everything is confidential. They have also suggested: "Can we have an app to book an appointment with a counsellor who would come to you and talk confidentially about our worries?" and even among the 7 to 11 year-olds they talked about having better mental health and emotional support. This one young person said: "The first thing that I would do is make sure children know what to do if something strange or upsetting has happened to us, or someone we know and that we know who we can talk to." Quite clearly they reported that they do not know. "Something good would be if children could have a person who they could phone or talk to if they are worried, because I find it hard to tell teachers and adults I know without feeling embarrassed." So they are just some of the quotes and some of the data that we have heard from children. What I have not done is carried out any in-depth review. We have simply listened to children, not just through the survey but through my other work.

You will be aware that I have been to visit every school on the Island. I have visited children in all of our care homes and I have spent a lot of time talking to children who access services and also are supported through the third and voluntary sector, to make sure that I can hear what is going on for them. They are very clear about the issues that are impacting on them accessing services to emotional mental health.

Deputy M.R. Le Hegarat:

Thank you for the very broad information that you have provided us. How will this, then, impact on the work you will be doing in the future?

Children's Commissioner:

The Children's Commissioner law will set out the functions, powers and duties of the role. One of those is likely to be, although I cannot presume what the law is going to say, the requirement to publish a strategic plan. It is likely that that plan will be for a period of 4 years and that will set out the work and activities of the role of the Commissioner. So at the moment I cannot second-guess what will be in that plan, however we will be looking to publish such a plan as soon as the law is enacted. Children have quite clearly spoken to me about the key issues that are of importance to them, whether that is around bullying, having more places to go, looking at road safety or emotional mental health. What we will be doing is continuing to listen to children over the next few months so that we can then outline our priorities and determine what it is that we are going to do.

[15:15]

If I can again turn to the findings report, right at the end, at page 33, it does talk about the themes that children have asked me to look at. Under the: "Emotional Mental Health Support" quite clearly Article 24 of the U.N.C.R.C. (United Nations Convention on the Rights of the Child) says that every child has the right to the best possible health. Children have the right to be both physically and mentally fulfilled, so because children have asked me to look at the role of the school counselling service and the C.A.M.H.S. (Child and Adolescent Mental Health Service), they have asked me to look at accessibility, ongoing support and access to advice, because they are the key areas of concern for children and young people. We know there is a waiting list, particularly for C.A.M.H.S. I know there is now a waiting list for Y.E.S. (Youth Enquiry Service), the service run by the Youth Service. We know that there is a lack of on-Island provision of psychological therapies and so what I have clearly set out in my findings report is that my role will be to monitor progress and to ask the Government to outline their plans to improve waiting times, to improve access to mental health support services and indeed what I would like to see is more children and young people involved in the development and evaluation of those services. So those are likely to appear in my report when we publish that later in the spring.

Deputy M.R. Le Hegarat:

So effectively what you are saying is you expect that mental health will feature in any forthcoming Children's Commissioner's plan?

Children's Commissioner:

I would expect that to. Children have been very open with me about the issues. They are entitled to have somebody be their champion. I act in that role, and therefore if it is an issue for children then we will follow that up.

Deputy C.S. Alves:

Okay. You mention that you have visited schools and the children's home. I just wonder if you have had the opportunity to inspect the Child and Adolescent Mental Health, so C.A.M.H.S., since you have arrived.

Children's Commissioner:

What I have not done is undertake any formal review of any service because I am in shadow form and not mandated to do that, but what I have had an opportunity to do is look at a range of services for children, so for example I have been to visit C.A.M.H.S. I have been to Robin Ward. My team and I spent half a day. We arrived at A. and E. (Accident and Emergency) and looked at it through a child's lens, and we made our journey through the hospital, through A. and E. services, up on to the ward, down through discharge and back in through out-patients so we could understand what it is like being a child and accessing those services. It was very eye-opening. Equally, I have been to Orchard House because I had been informed that 17 year-olds and under were being placed there and I wanted to see for myself what it felt like. I did not have the opportunity to talk to the young person that was there. It was not appropriate at the time of my visit, but I have heard from young people who have been placed there and I would be happy to share those findings. Equally, I have had an opportunity to speak to some of the school-based counsellors and to see where their office is. Is it down the end of a long corridor? The purpose of all of those visits is just to listen and to see, but also where appropriate to give some advice about those services looking at their delivery through that child rights lens.

Deputy C.S. Alves:

Okay, so what are your impressions of the mental health services available to children and young people?

Children's Commissioner:

My impressions are those given to me by children and young people, so if I can refer to the comments given to me by children. I have been working quite closely with Youthful Minds and working with young people who have all accessed C.A.M.H.S. and other services as well, so I would be happy to share this with you because they are happy for me to share it with you, and I am sure you have already heard from them, but I wanted just to replay what it is that they said. So they talked about the C.A.M.H.S. waiting list and the fact that when they are on the waiting list they felt there was no support for them. They also talked about the new premises, quite strongly, saying that it feels medical and clinical. Now, I am no professional in this field and I do not have a professional opinion, but I was fortunate enough to be able to go to the European Network of Ombudspersons for Children conference earlier this year and the focus was emotional and mental health, and children across Europe had come together and had spoken quite clearly about how it is for them growing up in different countries across the world and there were professors there far more clever than I am in this field who were talking about the discourse around the medical model and whether that medical model should be based on a psychiatric response or whether it should be based on a psychological response. We do not want to get into that here, nor do I, but children were quite clearly saying they feel medicalised when they go to C.A.M.H.S. and it might not be suitable for them. They talked about confidentiality issues. I have not gone into detail what they mean by that, but they felt that there were issues there with sharing information to aid social workers and other professionals involved in their care and where practical and necessary their parents. They talked about C.A.M.H.S. being unorganised, that contact with them was unreliable. They said there was very little opportunity to give feedback to the service about how it has been for them. They also talked about transitioning into adult services and how that was difficult. They talked about staff turnover being really high and therefore staff often had a lack of understanding and they talked again about having to tell their story more than once and then not wanting to tell their story, and them being seen as not engaging. They spoke quite a lot about the building. I did go along to see the building myself and to be honest I struggled to get in through the door. It is really stiff, but anyway the counselling rooms themselves were quite small. I do not know if you have visited, so you know what I am talking about. There are no windows. They talk about there being no parking. Something that they mentioned, that I had not noticed, was that in the waiting room Radio 1 is played. You might think that is perfectly appropriate, but they were talking about how that can be a trigger in terms of memories brought forward by the news stories and the music, and they would prefer more mood music, calming, rather than listening to the latest number one. They talked about the new building not being very private; it is all glass. People can see you in the waiting room. They were very vocal about that lack of discretion, that it felt very sterile and that the decor was not conducive to mood. It did talk about what would be good, and what good would look like and they said: "Good would be if we had a comfortable waiting room, not too dark, not exposed to the public," that good support is all that they wanted. They talked about discharge, that there should be perhaps a moving on pack, that explained clearly what their entitlements are when they move on because of their age or

because they are discharged. They talked about C.A.M.H.S. just needs to be more efficient and they said: "Can we just have reminders when we have got appointments, because we have lots of appointments and we are kids and we forget?" Yes, send them reminders, can they just have a text reminder. So there are some good ideas there about what could be better. They also talked about school-based counselling and I will share that with you as well. They talked about lack of confidentiality. Living on a small Island, many of them said: "Well, I know the counsellor" and therefore that became a reason why they would not go and see them. They said: "Does it always have to be at school? Can we not see the school-based counsellor somewhere else?" and one of the questions we have to ask is: "Well, what if they are not at school? What if they are a school refuser or feel they just cannot go into the school building?" They talked about location of the room, clearly, they talked about sometimes school counsellors being unorganised and forgetful. They talked about the rooms being very bare and being very formal. They said: "Well, these services could be better if there was before school or after school availability or certainly being able to see the counsellor somewhere else. Could we have a coffee with them, for example, in a public place?" They talked about the rooms. They have got very strong views about how they can be better decorated, be a bit more meaningful in terms of the displays. They have also said having access to school counsellors at primary school would be really useful. We know what the research tells us, that most children who present as adults with mental health issues say that they started before the age of 14, so why do we leave it so late to offer this, if you like, universal service? They talked about: "Can we have text and email reminders?" and also missing lessons. Pupils talked about being pulled out of lessons to have their counselling session and that set them apart and they did not feel that was right. Children also went on to talk about talking therapies. They said that, again, there are long waiting lists and they are getting longer and that while you are waiting there is a lack of communication, so children felt that perhaps they had been forgotten. They talked about a limit on the number of one-to-one sessions that children can have, rather than being needs-led. They talked about there is a lack of information about what talking therapies is, what it is going to offer, how it is going to help the child in their care planning. They said that they have no say on how that therapy is delivered, for example, a choice of a male or a female practitioner or the number of sessions that they can have. They felt that the best way to improve that service would be through co-production, sitting with the young person and agreeing what that package of care could look like, rather than be imposed on them. They talked about all the services working better together rather than in isolation. So they were the key points that came through from the young people that I spoke to. Equally, I have spoken to adults who care for vulnerable children and young people, so for example I met with Parent Carer Forum Jersey and again they made a number of comments about C.A.M.H.S., if I may share. They talked about: "Can we have a different name?" They said that mental health as a name is quite overwhelming. They talked about C.A.M.H.S. being under-resourced, the substantial waiting list. They talked about their children being allocated to somebody that their child just does not click with and yet there being no scope to change, that if that relationship

is not there they are forced to try to make it work. They have asked for a one-stop-shop, one place where they can access support and advice for how they are supporting their own children. They said there is a lack of empathy for what it is that the family are going through. They talked about how it takes for ever to get a diagnosis, and then once they get it there is no follow-up care or any wraparound support. They talked about their children having to get to crisis point before there is any movement or intervention and they suggested, and this was before the reorganisation and restructuring of the States, that C.A.M.H.S. and the education services should be joined together, so that was the feedback from the adults. Thank you.

Deputy C.S. Alves:

Thank you. You have identified or covered quite a few areas there that are probably areas of concern, but are there any areas that you would say are areas of good or best practice that you have been able to identify?

Children's Commissioner:

On Island or beyond?

Deputy C.S. Alves:

On Island.

Children's Commissioner:

On Island. I do not think that is something that I can necessarily comment on, because as I said before I have not undertaken an in-depth review of any of these particular services, so it would be wrong of me to make comment, I think.

Deputy C.S. Alves:

What is your assessment of the wider facilities and amenities available to children and young people in Jersey?

Children's Commissioner:

Do you mean wider in terms of mental health or broader?

Deputy C.S. Alves:

Broader as well, yes.

[15:30]

Children's Commissioner:

Again, talking to children and young people but equally talking to adults, particularly those in what I would call civil society, what I can see is that there is a whole breadth of services out there for children and young people, whether they be universal provision or targeted provision or however they are funded, but one of the things that I have noticed is that children often do not know about it, or what I have heard is sometimes referrals are not flowing through down into those organisations. Again, I had the privilege recently to go to Scandinavia with the Minister for Children and Housing to look at what does good look like in a society where children's rights are respected and their rights are promoted and protected. We asked. We asked U.N.I.C.E.F. (United Nations International Children's Emergency Fund), we asked the Government, we asked the commissioners in those countries, I said: "What is the most single most factor that enables you to ensure that children have these wonderful childhoods?" and they said it is the strength of civil society. Again, it is not something that we have looked into in any great detail, but I would consider that that is something that we should pay a bit more attention to, in terms of the contribution that the first sector, the voluntary sector, can play, particularly in the field of emotional and mental health.

Deputy K.G. Pamplin:

You have commented and read out some of the quotes in your report. There was one other for me that I think is really fascinating, the quote on page 25: "As a child myself I know people who have not been to the doctors as they have been unwell, as the parents cannot afford to go, and they only get worse, resulting in them having more time off school than they should have had" which is really an astute observation for a young person, that what this is evidencing is why you are needed because what the children are coupling together here is a culture. They are talking about bullying: "I have been bullied for 2 years and the teachers do not do anything. Bullying is not being taken more seriously" and then when you pick up a national newspaper like the other day in the *Daily Star* where the headline reads: "Snowflake kids get lessons" there is evidentially still a culture to battle, but young people are saying: "We need support" but outside you pick up a national tabloid and children are called: "snowflake kids" to get lessons in chilling. So I guess what it does is beef up your role that we have to start listening. So what you are projecting here is these children want to be heard and that you cannot change culture unless these children are taken seriously, so what would your response be to headlines like: "Well, these kids are snowflakes. We have always had bullying in my day. Toughen up, the British spirit, get on with it"? What would be your response to that?

Children's Commissioner:

Deputy, the children are really clear, not just in my survey but in what we have heard, talking to children informally on the Island, is that they do not feel that they have a voice and again, if I can refer you to the infographic pages, when you see, for example, question 12: "How often are you asked about your views in what happens in the area where you live?" in the 11 to 18 year-old survey

61 per cent said: "Never. Never asked." It then goes on to say: "Well, when you are asked are your views taken into account?" and again 61 per cent say: "No, never." We equally asked children about school: "Are you asked about how school is run?" and what we have seen there is some really good practice, picking up on your point from earlier and also some not quite so good practice where children who are members of school councils, or they are members of rights-respecting school ambassadors, and they are saying: "We have a strong voice" and they can clearly articulate how their voice has had an impact on their daily life in the school. They talk about: "Well, we sat down and we wrote a playground charter, so we all respect each other" so we see good practice there. I have equally seen school councils where they say: "Well, we are not sure what we are here for" so it is very underdeveloped, and that is our role. My role in law will be to promote but also to protect children's rights. The strongest way we can do that is make sure that every child on the Island knows that they have rights. That is why I have funded for every school to take part in the U.N.I.C.E.F. Rights Respecting Schools programme, and I anticipate that by 2020 every single school will be a member of that programme. Last week I do not know if you picked up that Trinity School have got their silver award. Also last week one of our schools was assessed by an external assessor from the U.K. (United Kingdom). Grouville School were assessed for their gold award. We are awaiting news to hear whether or not they have got that. This is not just a badge to put on their website to say: "Look at us. We have just completed this and we have filled in an award." It is an ethos that permeates through the whole school and children go home and they tell their parents and carers or whoever they live with, and they tell their friends and neighbours, and what we are hoping is that this starts a movement whereby children are clear about their rights and adults start listening to them, because children know their rights, they know that they can complain when their rights are not being upheld, and it is only then that adults that are not giving children their rights can take note.

Deputy K.G. Pamplin:

Then going outside of the school environment, it is interesting when they talk about: "safe place" and who to turn to so when they are identifying, as you rightly say, that they do not know who to turn to, what they say when they mean that is at 11.00 p.m., are they telling us when they are not at school they have got nowhere to turn to, and what you are telling us through the evidence you are providing is they would not know what to do and that is shocking, is it not?

Children's Commissioner:

That is clear. The Youthful Minds Group, I have explored this in a bit more detail with them and have said: "Well, how can we fix this? What do we need to do?" They talked about growing up in a culture where they do not like to talk to somebody face-to-face. They prefer a culture where they can text or email and so they talked about: "Well, can we just not have a service whereby in the middle of the night or during the day you feel sad and worried but you do not want to talk to an adult

or a peer?” because we have some excellent peer-led schemes in some of our schools: “Could we have a service where I could text or email somebody and get some comfort?” and they talked about that that relationship could then grow to a point where they feel confident enough to pick up the phone, and that is something that we do not currently offer on the Island. Yes, there is a Childline, there is the Y.E.S. counselling service, there is the N.S.P.C.C. (National Society for the Prevention of Cruelty to Children) service, there is Samaritans. There is a whole host of services they could ring up, and speak to somebody, but no texting service. That is a simple thing where we could listen to children and their ideas about how to make a service better and carry it out. I understand that the functionality on the Y.E.S. website, the Jersey Youth Service website, means that that can be delivered but there is a cost implication there in terms of having somebody to be there ready to answer it, but there are schemes elsewhere, across the U.K. that run it and they do seem to be successful.

Deputy K.G. Pamplin:

What you have suggested is a positive use also possibly of media where through your findings and talking to young people like we have that social media and digital media, 24-hour news media, is having an impact and it is fair to say that bullying is not as we all may have viewed it, 30 years ago on the playground. It continues at home by the introduction of social media, texting, emailing, Instagram, all these models that I am sure you are hearing as well.

Children’s Commissioner:

Yes, definitely. While we have not carried out a fundamental piece of work around what bullying looks like for children what I have heard in my travels around schools is that there is an element of social media, but there is also an element of harm that children themselves might not be feeling. They might feel that they are in control, but what I again have seen is some good practice in some schools where they are giving children tools to be able to manage their time online in a safer way. One school I went to and observed a lesson where children were being taught to put their phone down at meal times, or an hour before bedtime. Indeed, the English Commissioner has produced a 5-a-day digital diet, which is advice to families about how to manage media. It is the world that our children are living in, so to ban it, as I think they are hoping to do in France, is perhaps not the answer. We need children to learn to use media, but in a safe way.

The Deputy of St. John:

You have alluded to children feeling that C.A.M.H.S. separating from Health and going to Education is favoured by them. Definitely we can see that there will be a greater focus on children and young people. What are the benefits that you perceive in relation to that move?

Children’s Commissioner:

Children are not bothered about structures. I do not think they are particularly worried about who manages a service, where it sits, whether it sits under Health, or whether it sits under Education or somewhere else. Children just want a service that they can access and that they have their needs properly identified and they have their needs met but one thing that children are clear about is they want those services to talk to each other. They do not want to keep having to tell their stories more than once and what we have heard, and I alluded to it earlier, is that when children are fed up of having to tell their story to lots of different professionals they are then seen as being not engaging. I do not think children are particularly bothered about it, but what we can see as adults managing those services and certainly my background as a director of a children's service, understanding the benefit of having co-located multi-agency, multi-disciplinary teams, anything that we can do to ensure that professionals are working together, whether that is a structural issue or a process issue, whether that is making sure that early help works better for children, I do not know, it is not for me to say, but I think children would welcome that element of it, rather than be particularly worried about where it sits. Transition is the other bit that children would be worried about; not just the age of transition but what that process looks like for them.

The Deputy of St. John:

I think from my point of view it is more about how we get the professionals to connect with the idea, because we have a fundamental need to improve the relationship between the services dealing with children and as you rightly say the children quite possibly do not perceive the organisation as such, but in providing services we need to get it right, and that is really what I am fishing for, about getting it right.

Children's Commissioner:

Getting it right for children means you tell a story only once, but where necessary that story is shared with that team around that child, whether that is a virtual team or a real team and that that team are focused on the needs of the child and the needs of their wider family, because it must be a holistic assessment of need. It is not just about what the child needs. Quite often it is about what Mum needs, or what Gran needs, or what a sibling needs. I think children will be clear that they like one person who would be their lead professional, the person that they have a relationship with. That could be their youth worker, it could be the social worker, it could be a teacher, but that that person does not change regularly, so that they have got that element of a human adult-child relationship that we know is a strong building block of resilience. I think children would also say that they would want to be engaged in their own care planning when appropriate, so that they have a say, even at a young age. We heard very clearly from 3 or 4 year-olds, what they thought about growing up in Jersey, so we should always make sure that they have an opportunity to have a say and if not directly then through good quality, independent advocacy.

The Deputy of St. John:

You alluded yourself to the transition, narrowing it down to C.A.M.H.S. but the transition between moving from C.A.M.H.S. to the Adult Mental Health Services. Do you have any observations on that and the difficulties that arise and perhaps some ideas on solutions?

Children's Commissioner:

Again it is not an area I have carried out any in-depth review of, but I have spoken to some older young people who are at that stage. Just last week I met with a young person who is 17 who feels that they are in an in-between time where they feel nobody is in charge of their care.

[15:45]

So, for example, this young person was saying that out of hours, when they are feeling really down and need somebody to speak to the out-of-hours service is an adult service and she felt that when they were talking to her that she was being treated as an adult, whereas she wanted to be treated as a young person in that transition period. You have heard some of my quotes earlier, so I will not repeat them, but it is clear that transition perhaps should be based not on age but on a child's needs. Some young people at 17 are more than happy to transfer into adult services and to have a very strong say for themselves. Other children clearly cannot. The other issue that has cropped up is where 17 year-olds and indeed under are placed in Orchard House, which we know perhaps is not the best place for them to be when they are feeling that poorly. So transition is clearly an issue, but I do not have any answers. I am not the expert on what good transition looks like.

The Deputy of St. John:

You talked about C.A.M.H.S. having a new set of offices, which is down in La Motte Street. Have there been any comments from children and young people about access to that building, its location, at all?

Children's Commissioner:

Yes. One of the things that children have said to me quite clearly is that the co-location with children's social workers is something that they find difficult, because they say that they do not trust social workers and therefore going into the building where they are makes it harder for them, so that was one of the issues. There are all the issues around the building itself, the lack of private space, confidentiality, the playing of the radio, all those things they mentioned. I think the co-location in itself is a good thing, because we talked earlier about the need for professionals to work together more closely, but maybe the issue there is children saying: "I just do not trust social workers." That is the bit we have got to fix, rather than move a service away, because co-locating services is something that the adults have mentioned is a good thing, the children have said it is a good thing

that professionals speak to each other, so if the issue is not trusting others who might be sharing a building then that is the issue we have to tackle.

The Deputy of St. John:

Drilling down a little bit, why is it that they do not trust social workers?

Children's Commissioner:

Yes, exactly.

The Deputy of St. John:

Why do they not trust social workers?

Children's Commissioner:

Well, again this is an area that I have spoken to care experience children to a lot. I have met with most of the young people who live in our care homes and I have met with a number who live in foster care. Indeed, we have been supporting an organisation that is now known as Jersey Cares to go out and consult with older care experience young people about what they feel about their experience. The biggest issue, you will probably not be surprised with, is the turnover of social workers. So it is not unusual to hear that children have had their 8th, 9th, and in fact 12 is the highest that I have heard, turnover of social workers. Children and young people have said very clearly the impact that that has on their care. It is difficult to have a trusting relationship with somebody who you think might not be there. In fact, a couple of times I have been asked: "When are you leaving?" because I have been here nearly a year now, so: "Is it not time you should leave?" I am not going anywhere, but unfortunately that is the lived experience of many of our children in care, that the people who are there to protect them and form a relationship with quite often move on. So maybe that is where the root of the lack of trust comes from.

The Deputy of St. John:

It is nothing to do with social workers taking them into care?

Children's Commissioner:

It might be. You will have to ask them.

The Deputy of St. John:

I was going to say, you have not had that comment?

Children's Commissioner:

No, not at all. We know, when children suffer adversity in childhood ... I am not sure if you are familiar with A.C.E.S. (Adverse Childhood Experiences Study) as it is sometimes known. I would suggest maybe as part of your research you do look into it and I can provide some research around the area, but what we know is that when children suffer adversity in childhood, so for example they have been exposed to domestic abuse, a parent incarcerated, a parent or carer who is abusing alcohol or substances, what happens is the physiology of the body changes and the way that the child deals with stress is changed. Children become stuck at this heightened fight or flight mode, so when the child comes in ... I used to be a teacher so I can refer to a child that might come into the classroom in the morning and your first question is: "Where is your homework? Why are you kicking Tara? Where is your tie?" and not knowing that the night before the child witnessed dad hit mum and the police were called and it was a very difficult experience for the child. You do not understand that, you do not have that empathy, but you are just fussing about: "Where is your tie?" Off to the isolation room for 6 hours, or whatever it might be. A.C.E.S. teaches professionals to understand that and to plan for that, so first of all you need to know that it has happened, through better communications between services, so especially teachers know that something might have happened the night before and be prepared. Equally we know that there are some very strong building blocks of resilience because we are never going to stop children suffering adversity, so let us give them the tools so they can cope with it. We all cope with stress in lots of different ways. These children need extra help. We know that the relationship with an always available adult is one of the most fulfilling building blocks of tackling that adversity, so whether that is your social worker or youth worker or teacher we need to help the services to understand that. Interestingly enough, another strong building block is being active, particularly engaged in sport. That is what the research tells us. Another building block of resilience is having a voice, having a sense of agency, so being involved in your care planning, having a say at school, having a say at home, whether it is just little things about what you should eat for dinner. I went to visit a children's home last Friday evening and had tea and the children were telling me how they write the menus and they choose what they are going to have for dinner and I had a very nice pasta sweet and sour. It was an interesting combo but it worked. So if we know that they are the key points of resilience we should make sure that all our professionals working with children understand it, so again I would ask that perhaps you look into research around adversity in childhood and maybe make some comment on that in your recommendations.

Deputy K.G. Pamplin:

Talking about recommendations, in your themes you talk a lot about going to Government and asking them for various things. I am just plucking one out: "I will be making recommendations to the Government to ensure that there is a strategy in place to tackle child poverty with clear targeting aiming to break the links between low income and its relative disadvantages." The key phrase to pick out there is: "Strategy with clear targets." The theme that runs through your themes connection

is it is all well and good having a strategy, having recommendations but if you do not have key performance measurables, targets to uphold then how will anything be achieved? Your strength of words comes really across with your intent going forward, but I would imagine that is how you going forward, once everything falls into place, is strategy one thing but how are you going to do it and what are the measureables?

Children's Commissioner:

As I said before, I cannot second-guess what the Children's Commissioner law will say. It is not for me to do so, but the law, its policy under development, sets out the way in which I will carry out the role. Quite clearly it is important for all of us to make sure that we understand the impact of our work, whether I am a school counsellor, a youth worker, teacher, C.A.M.H.S. counsellor or whoever. Anything that we do we have to understand the impact. We only understand impact if we ask, if we actively seek out feedback from young people and children, yes, as young as 3. I was criticised for carrying out a 3 to 5 year-old survey, but I think it was absolutely the right thing to do and we learn a lot from children.

Deputy K.G. Pamplin:

Who were the critics?

Children's Commissioner:

There were a number of people who were asking what is the point, children do not know anything, adults will be answering for them, without naming anybody in particular.

The Deputy of St. John:

They obviously do not have 3 to 5 year-olds, then.

Children's Commissioner:

The 3 to 5 year-olds had a very strong voice and young people across the Island are full of absolutely amazing ideas. I have spoken to children who have had the most horrific childhoods, yet they speak so clearly, so eloquently about what could be better, and they want to make it better, not necessarily for them but for others. They are just amazing and they continue to amaze me. We work closely with a group of young people as members of our Youth Advisory Panel and they are incredible. We should listen more to children and young people. So as I said impact is important, but we have to seek out that feedback, as difficult as it is sometimes, and also involve children and young people in the design of services. We should be regularly asking young people to be members of our board, members of a group giving feedback. In fact we have recently had a first sector organisation ask us to help them, give them advice, about how to do that. It would be wonderful to see that all services provided for children are thinking in that way, through that child rights lens.

Deputy M.R. Le Hegarat:

Do you have any observations about how our current partnerships work, if you like, across the Island but particularly in relation to mental health and young people? Have you got any observations of how they all work together?

Children's Commissioner:

I think you should be asking the sector that, and I know that you have heard evidence. I do not think it is appropriate for me to comment on how their relationship is with state providers so I am not going to do that. We know that mental health is affected by a range of factors, and therefore partnership working is crucial. It is not just important; it is fundamental. We have heard that from children. That is where the United Nations Convention on the Rights of the Child is particularly helpful. It is not just a set of strange 42 rights. It is more than that. It is a framework. That is why we think training for all staff, no matter whether you are part of civil society or a part of the States or some other public body, if you learn about the U.N.C.R.C. you will see that it is a framework that recognises the whole child and it recognises that children's human rights are indivisible, so you cannot see any of their rights in isolation. All 42 of them, 54 if you include the rights for government, are inter-dependable on each other. The general principles of the U.N.C.R.C. around non-discrimination, the right to life, survival, development, their right to best interest and their right to express their views will help any organisation to build services that are properly focused and put the children at the heart. We are happy to help organisations to do that. That is our role.

Deputy K.G. Pamplin:

Just a quick question. In the recently passed Common Strategic Policy of the new Council of Ministers, under: "We Put Children First" they say: "We will start with a focus on children's mental health and well-being." What would your response be to them? Where would you start? I know you are probably going to repeat what you have been saying, but what would your response be to that statement of intent?

Children's Commissioner:

Of course I welcome a close look at services to support children's emotional and mental health, because we know it is a huge issue, not just for Jersey but across the U.K. and beyond. Certainly young people, the young people's group of the European Network, it is called E.N.Y.A. (European Network of Young Advisors), it is not a pop group, it is the European Network of Young Advisors, it was incredible to hear them come together in all of their different languages but to present to Children's Commissioners across Europe fundamental issues that they are having with mental health. I do not think we are unique in any way, so I do welcome the Government shining a light on this. We will be looking into that with anticipation. Our job is not to do it for the Government, but we

will be working alongside where appropriate to make sure that the work is rights focused and that through that work they can promote and protect those children's rights, as they promised, when they signed the treaty in 2014.

[16:00]

We welcome that but more importantly, because children have told us that it is an issue. Children grow up to become adults and when they are young this is our opportunity to get it right for them and if we can meet their emotional mental health needs when they are young we can prevent all sorts of more complex issues when they are older. It makes sense, but what I would say is do not just look at one service in isolation. You have to look at the breadth of service from universal right through to targeted services for more complex young people and we have to look at everything. That turns this into a huge piece of work. Indeed, the commissioners in Wales and Northern Ireland have recently reported with a mental health review but they are the equivalent of 2 years piece of work. This is not something that can be done lightly. It also cannot be done just by adults. You need children and young people engaged in this work and we will be making sure that the Government are involving children and young people as they design any improvements or any review.

Deputy M.R. Le Hegarat:

Thank you very much for your time this afternoon and the level of contribution. It has been very helpful to us as a panel and we will obviously take on board what you have had to say to us.

Deputy K.G. Pamplin:

Do you have any questions for us at this stage on what we are intending to do or anything like that? We are asking that of everybody.

Children's Commissioner:

What is the timeline for your making recommendations and where are those recommendations being made to?

Deputy K.G. Pamplin:

As part of the normal scrutiny process we started this in July. We launched a survey, which in under 2 months has received over 350 responses, so we are now going to spend a bit of time doing that. We still have got evidence gathering. We will break for Christmas, come back, pick up our hearings. We will then meet and scrutinise the Minister for Health and Social Services and policy makers. We will then submit our report with recommendations to the Minister for Health and Social Services and the Health team at the end of January, February.

Deputy M.R. Le Hegarat:

Yes, end of January, February, because we have got a little bit of a slippage from the point of view that there were a group of individuals who have not had opportunity to do the survey and we did not want to miss that opportunity of having those extra people, so we have got a little bit of slippage.

Deputy K.G. Pamplin:

Yes, then it will be as normal practice, we will launch our recommendations and our review and our findings, because the key thing for us is that we wanted it to be led by people because we hinged it on this Mental Health Strategy that was launched in 2015, so we wanted to hinge it on what is working, what is not working, but hear from charities and providers, professional and state-run. We are going out, we are going to Orchard House, we are going to therapists but we want it to be led by everyday folk who are telling us, children especially. We met with the young people and that was very powerful and then because it is a very passionate belief of all of us, that is why we have kicked all of our political life on this, it is not going to be something we will pop on the shelf. For me personally this will be something that will be driving the next few years to see what those recommendations are, much like your model here of what are the key performance models, how are we going to make the changes we want? Then obviously the Government will respond and then we will follow it through. It is all public, it will all be out there and it is great to see what is starting to happen in conversation building, the J.E.P. (*Jersey Evening Post*) today launching their loneliness initiative, so this is momentum, this is public, this is what you are hearing as well, that people want to be represented talking about it.

Children's Commissioner:

Yes, and children want to reduce the stigma. That is all that they ask, is that we talk about this as much as we talk about other things.

Deputy K.G. Pamplin:

Absolutely, but alongside that because when you do break the stigma the demand for services that help them rises so we have to match that. If we talk the talk we then have got to produce it, which I think is why we have read your report many times but the key thing that stands out is the strategy and the performance modules. Kids will pick up that, and before we know it the kids will be grown up and the next wave of children are coming through.

Children's Commissioner:

Yes, it is about the lived experience today. We can have grand plans about various models for delivery in the future but we have children today who are not having their emotional and mental

health needs met. Whatever the grand plan is for the future, you have also got to have a plan for those children and make sure that that lived experienced is the best that it can be.

Deputy M.R. Le Hegarat:

Thank you very much.

Deputy K.G. Pamplin:

Thank you.

[16:05]