

NHS Rotherham Clinical Commissioning Governing Body

Operational Executive –

Strategic Clinical Executive –

GP Members Committee (GPMC) –

Clinical Commissioning Group Governing Body - 3rd January, 2018

Child and Adolescent Mental Health Services in Rotherham.

Lead Executive:	Ian Atkinson Rotherham CCG Deputy Chief Officer
Lead Officer:	Nigel Parkes
Lead GP:	Dr Jason Page

Purpose:

This paper provides Governing Body with an update relating to Rotherham Child and Adolescent Mental Health Service (CAMHS) and specifically:

- The reconfiguration being undertaken by RDaSH CAMHS,
- The current performance of the service,
- Key points from the 2017/18 Rotherham CAMHS Local Transformation Plan (LTP) refresh,
- Two recent papers; An NSPCC paper – ‘Transforming the mental health service for children who have been abused’ and a CQC paper – ‘Review of children and young people’s mental health services’.

Background:

1. CAMHS reconfiguration

RDaSH CAMHS has successfully completed the reconfiguration that it started in November 2015. The service has transformed from one which was heavily dependent on agency staff, with poor staff morale and retention and high staff sickness rates to one in which staff are much more engaged and there is a real feeling of team working. In total some 15wte posts have been successfully recruited to.

The service has now been reconfigured into a number of distinct pathways with designated pathway leads to provide much improved team working:-

- A Single Point of Access (SPA) - which is linked with the Local Authority Early Help team,
- A Locality Team – with Locality workers who interface with GP practices, schools, Early Help and Social Care teams and provide local appointments for patients, away from Kimberworth Place as required.
- An Intensive Community Support service – which includes a liaison function and works to avoid patients accessing Inpatient services or stepping down sooner to community services.
- A Learning Disability Pathway.
- A Child Sexual Exploitation (CSE) Pathway – which provides direct support to Children & Young People affected by CSE and also support to staff, both within CAMHS and outside.
- A Developmental Disorder pathway – specifically undertaking Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) diagnoses.
- A Psychological Therapies pathway – providing Cognitive Behavioural Therapy (CBT) and

other therapies.

Discussions are ongoing between RDaSH and RMBC in respect of the Single Point of Access (SPA) for the service with a view to integration with the Early Help teams. The two organisations work closely together and meet twice a week to discuss referrals, and co-location is a potential, but not definite, possibility.

A pilot was also undertaken, starting in November of 2016 which prioritised the referrals of Looked After Children (LAC) into the CAMHS service. Whilst the pilot concluded that numbers were very low, it has been decided to continue with this prioritisation, bearing in mind that LAC are an 'at risk' group.

The Rotherham CAMHS service has also recently (from June 2017) introduced a new 'Advice & Consultation' service. The 'Advice and Consultation' model aims to ensure that those supporting children and young people, including parents/ carers and the professional network around the child, have quick and easy access to specialist support, where there are concerns regarding the child's mental and emotional health. Prior to a child being referred directly by CAMHS, professionals are encouraged to discuss the young person with a Locality Practitioner in the first instance, with the overriding aim of ensuring that the young person receives appropriate and individual support in a timely manner.

2. CAMHS Performance

Performance has improved significantly over the last year.

As at September 2016, 182 patients were waiting for an assessment and only 30% were seen within 6 weeks. This is compared to only 12 waiting at October 2017 and 100% waiting less than 6 weeks.

In terms of treatment waits, as at the end of September 2016, 42% of patients had waited less than 8 weeks and 73% had waited less than 18 weeks. This compares to 75% waiting less than 8 weeks and 95% waiting less than 18 weeks as at October, 2017. Perhaps most significantly, the numbers waiting for treatment have reduced from a total of 376 in September 2016 to only 20 in October 2017, through a concerted and sustained initiative to complete treatment pathways and discharge appropriately. RDaSH are consistently exceeding the 95% target of patients being discharged in a care planned way.

Following the 2016/17 CQUIN relating to Outcome measures a high proportion of children and young people continue to have goals set and for the year to date, preliminary figures show that 94% of those children & young people discharged from CAMHS with the same goal scored more than once are showing a positive improvement in their outcomes.

3. Rotherham CAMHS Local Transformation Plan (LTP) Refresh

In October of 2015, the CCG was required to produce a CAMHS LTP, in conjunction key partners, which would outline how the ambitions of the 'Future in Mind' document would be taken forward in Rotherham. This was produced and submitted in October of 2015 and signed off by NHS England.

A CAMHS LTP Action Plan was also produced, reflecting the 'Local Priority Schemes' outlined in the LTP, and detailing how these schemes would be implemented.

The CCG produced a refresh of the original LTP in October 2016 and has just produced a further refresh as at the end of October 2017.

4. NSPCC paper – 'Transforming the mental health service for children who have been abused' and CQC Paper – 'Review of children and young people's mental health services'.

These are both recently published papers, the former outlined the results of a review of CAMHS

Local Transformation Plans in respect of their focus on children who have been abused and the latter summarised the current situation regarding the quality and accessibility of mental health services for children and young people.

Analysis of key issues and of risks

1. CAMHS reconfiguration

Key Issues:-

- 7 distinct pathways created with pathway lead recruited to.
- New 'Advice & Consultation' model introduced to focus on initial support for new referrals and reduce inappropriate signposting of referrals.
- Much improved staff morale with good retention and low levels of absence/vacancies.

Measures to Mitigate the risk

- The CCG continues to have regular monthly meetings to discuss the service reconfiguration and development.
- Progress against various areas of the CAMHS LTP relating to RDaSH CAMHS being picked up through the LTP Action Plan.

2. CAMHS Performance

Key Issues:-

- Performance has much improved over the last year, with the most significant improvement being in the numbers of patients waiting for assessment and treatment. There is also very positive feedback from key stakeholders including GP's, Healthwatch and other service providers.
- The introduction of 'Advice and Consultation' has been well received but needs further time to embed and for the impact to be well understood.

Measures to Mitigate the risk

- A GP survey relating to RDaSH CAMHS is being planned along the lines of the 'survey monkeys' done previously.
- Progress continues to be monitored through monthly CAMHS Service Development and Improvement Meetings' (SDIP).

3. Rotherham CAMHS Local Transformation Plan (LTP) Refresh

Key Issues:-

- The original and October 2016 refreshed LTP included information relating to activity, finance and workforce for CAMHS services provided in Rotherham. This was updated for 2017/18,
- The LTP refresh clarifies the 'Local Priority Schemes' which are ongoing from the original LTP and any new schemes which have been identified.
- The refresh outlines that there is a national expectation that the CCG will increase funding of CAMHS in 2018/19 by approximately 21% or £135,000. This has been discussed at the CAMHS Strategy & Partnership Group and it has been made clear that this will be subject to the CCG's financial allocation.
- The document also identifies where it is proposed that extra CAMHS funding for 2018/19

will be targeted. This will specifically be:-

- £64,000 to RDaSH CAMHS to support the two new Children's Wellbeing Practitioners (CWPs) which are currently in training this year through the CYPIAPT initiative and funded by Health Education England.
 - £45,000 which has yet to be allocated, but may be targeted at back-fill for CAMHS Locality Workers on CYPIAPT training and funding for sensory assessments.
 - £7,000 for administrative support for Care Education and Treatment Reviews (CETRs).
- The LTP Action Plan has been updated to reflect any new development areas and also transferred to an Excel format, which is more user friendly. It will continue to be the main vehicle for taking forward the objectives of the LTP.
 - The CCG was also successful in bidding for £50,000 of funding from NHS England relating to 'Mental Health Crisis and Intensive Community Support for Children and Young People'. This is to be shared equally with Doncaster CCG and must be spent in 2017/18. It will be used across the two areas to support the move to an 'all-age' 8pm to 8am Crisis Service.
 - Details of the 'Family Support Service', provided by the Rotherham Parent Carer Forum (RPCF) and the 'Autism Family Support Team' provided by RMBC, have been provided to NHS England as children & young people's mental health case studies. NHSE communications have contacted RPCF directly for permission to use anonymised feedback comments from parents on social media.

Key Risks:-

- That the CAMHS LTP actions are not implemented.
- That the CCG is not able to provide the additional CAMHS funding, in line with NHSE expectations, for 2017/18, 2018/19 and future years up to 2021, in line with the aspirations of 'Future in Mind'.

Measures to Mitigate the risk:

- The CAMHS LTP Action Plan is regularly updated (bi-monthly) and all stakeholders are engaged in its delivery.
- The LTP refresh was signed off by David Roche and Richard Cullen in their respective capacities as the Chair and Vice Chair of the Rotherham Health & Wellbeing Board.
- The CCG will work closely with RDaSH to ensure that the extra £50,000 of 'Crisis' funding is spent effectively and before April 2018.

4. NSPCC paper – 'Transforming the mental health service for children who have been abused' and CQC Paper – 'Review of children and young people's mental health services'.

NSPCC Paper:-

Key Issues:-

- The NSPCC wrote to the CCG outlining that in their review of LTPs Rotherham CCG had only been RAG rated as Amber.

Key Risks:-

- That the CCG is not seen as investing sufficiently in the area of children who have been abused.

Measures to Mitigate the risk:

- The CCG has responded to the NSPCC outlining the significant investments made in this

area. This is reflected in the LTP refresh.

CQC Paper:-

Key Issues:-

- Through analysis of a sample of 101 CQC inspection reports of CAMHS services, the report looked at the quality and accessibility of mental health services for children and young people and commented on the variability both of the delivery and commissioning of services.
- The report concluded that the system as a whole is complex and fragmented.
- The report also stated that 'too many children have a poor experience of care and some are simply unable to access timely and appropriate support'.

Key Risks:-

- That local Rotherham CAMHS services are seen to be poor.

Measures to Mitigate the risk:

- Continue to work with CAMHS services to ensure that they are 'fit for purpose'.

Patient, Public and Stakeholder Involvement:

Development and implementation of the CAMHS Transformation Plan

All stakeholders were involved in the development of the Local Transformation Plan (LTP) including; RDaSH, RMBC, TRFT, Schools, Colleges, voluntary sector, patients, parents/carers etc. Key stakeholders continue to be involved in the implementation of the LTP and it's progress is monitored through the quarterly CAMHS Strategy & Partnership Group.

Equality Impact:

To be covered in the plan

Financial Implications:

In 2017-18 the CCG has continued to prioritise local investment in CAMHS provision and is investing further additional funding in line with NHS England expectations outlined when 'Future In Mind' was published in 2015.

A large part of the additional recurrent funding for the CAMHS LTP is being invested in RDaSH and the CCG continues to have on-going discussions around how the allocation will improve services going forwards.

Human Resource Implications:

Will be in the detail of the plan.

Procurement:

There were no procurement implications relating to the LTP.

Approval history:

Recommendations:

Governing Body is asked to Note the position regarding:

The RDaSH CAMHS reconfiguration.

RDaSH CAMHS Performance.

The 2017/18 CAMHS Local Transformation Plan (LTP) refresh.

The NSPCC and

CQC Reports

