

RDaSH CAMHS Update as at December 2017

- **Total reconfiguration of the CAMHS service** to include specific pathways with designated pathway leads:-
 - Intensive community support service – which is helping to keep CAMHS inpatient admissions to the lowest in South Yorkshire. This team includes a Paediatric Liaison Nurse, who interfaces with TRFT and supports children & young people admitted to TRFT with mental health issues.
 - Locality Workers – who interface with GP practices, schools and Early Help teams.
 - Psychological Wellbeing Practitioners – who have been recruited and will support early intervention work once fully trained.
 - Psychological Therapies pathway to support therapeutic work with patients.
 - An Eating Disorder Services for Children & Young people – which provides a ‘Hub & Spoke’ model and also works with the South Yorkshire Eating Disorder Association (SYEDA) to provide an education and prevention service.
 - A Developmental Disorder (ASD & ADHD) pathway which has significantly reduced the diagnosis time for ASD over the last year.
 - A CSE pathway, supporting Children & Young People affected by Child Sexual Exploitation (CSE) and also staff from other agencies who also support them.
 - A single Point of Access (SPA) to RDaSH CAMHS services – which is working closely with the RMBC Early Help service to ensure that children & young people are picked up by the right services initially and not ‘bounced around’ the system.
- **Improved staff morale and retention with minimal reliance on agency workers (compared to the past).**
- **Improved waiting times for assessment & treatment**
 - As at September 2016, 182 patients were waiting for an assessment and only 30% were seen within 6 weeks. This compares to only 12 waiting at October 2017 and with 100% waiting less than 6 weeks.
 - In terms of treatment waits, as at the end of October 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.
- **Outcomes monitoring**– 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.
- **Looked After Children (LAC)** – LAC are now prioritised as urgent when referred to RDaSH CAMHS. There is now also close working between RDaSH CAMHS and the RMBC Looked After and Adopted Children’s Therapeutic Team and the target is a single pathway.
- **Inter-agency working** - RDaSH CAMHS has regular meetings with Healthwatch and the Rotherham Parents Forum to discuss CAMHS related issues.
- **Schools interface** - RDaSH CAMHS is a key member of the group which meets every 2 months and discusses specific schools related CAMHS issues.
- **TRFT Interface** - RDaSH have regular meetings with TRFT to discuss the specific interface between the two organisations.
- **Introduction of an ‘Advice & Consultation process’** – which 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