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Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board



Appendix 1

# **ABMU Health Board**

## **Delivery Plan 2017 – 2019**

### **Services to Support the Emotional Health & Wellbeing of Children & Young People**

**(Child & Adolescent Mental Health  
Services - CAMHS)**

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## **APPENDICES**

**Appendix 1 – ABMU Delivery Plan priorities 2017/18**

## **1. BACKGROUND**

Over a number of years the provision of specialist Child and Adolescent Mental Health Services (CAMHS) has caused concerns because of long waiting times and the lack of support for professionals to support Children & Young People's emotional health and wellbeing. As a result since April 2016 a new approach to tackling these issues has been taken with the Assistant Director of Strategy and Partnerships leading a new commissioning approach to these services. Both in conjunction with Cardiff & Vale and Cwm Taf University Health Board commissioners, in partnership with existing Cwm Taf CAMHS and with the relevant Delivery Units within ABMU Health Board to delivery operational responsibilities where required as services are increasingly being directly provided by ABMU rather than all through Cwm Taf's services. Improvements in performance are starting to show, but it is recognised that there is still much more to do and clarifying the operational responsibilities for some of these issues within ABMU will do much to mitigate the risks involved.

### **Welsh Government Guidance on CAMHS**

The Welsh Government has established a Together for Children & Young People programme for the improvement of CAMHS across Wales. This includes a range of initiatives including specifications for specific components of the service and a specialist CAMHS Framework for Improvement which each Health Board has to report against annually. It also oversees the establishment of specific teams to improve the support available for children and young people, which can be broadly split into the following areas:

#### **Specialist CAMHS including Tier 4 inpatient care:**

- Crisis Care
- Early Intervention in Psychosis
- Eating Disorders
- Local primary Care Mental Health Services for C&YP
- Neurodevelopment disorders

Whilst access to CAMHS has been a significant concern for the Local Authorities and GPs to date, the problem has largely been perceived as a health problem, and specifically that Cwm Taf CAMHS need to improve their performance and this will resolve the problem. However it is clear that this is only one part of the problem. At least as important is the lack of alternative interventions available for children and young people who need support but do not meet the national criteria for acceptance into specialist CAMHS – over half the referrals do not currently meet these criteria. Therefore there have been discussions through the Western Bay partnership about the importance of CAMHS being seen as a multiagency problem, which will only be resolved by a multiagency response. As a result Western Bay, for the first time, has agreed that CAMHS is a joint priority for the Regional Partnership Board consisting of ABMU Health Board and the 3 Local Authorities plus third sector partners. In line with this a report was produced for the recent Western Bay Regional Partnership Board and the Health Board's Quality and Safety Committee outlining the range of work underway and planned to improve support for the emotional health and wellbeing of children and young people, including the joint agency development of tier 1 and 2 interventions to avoid referral into specialist CAMHS where this is not appropriate.

## **2. SERVICE PLANNING AND DEVELOPMENT**

### **Specialist CAMHS**

Specialist CAMHS have traditionally been provided for the ABMU population by Cwm Taf Health Board, encompassing a range of services to support children and young people's mental health as well as assessment and support for children over 5 years old with neurodevelopmental disorders. With the advent of the Mental Health measure in addition services have been developed to ensure that there is access from primary care to assessments and treatment. However the main focus of specialist CAMHS should be the provision of Tier 3 and Tier 4 services (the latter through inpatient provision at Ty Llydiard on the Princess of Wales Hospital site for South Wales).

Over the past few years Cwm Taf has developed services to respond to some of the requirements across Tiers 1 and 2 services as well, but this has resulted in the view from partner organisations that any emotional health and wellbeing issues for children and young people should be referred to specialist CAMHS, whereas the children themselves want this to be the service they are referred to only as a last resort. In reality there are a lack of alternative services available, particularly at Tiers 1 and 2, leading to referrals to specialist CAMHS, almost half of which do not fit their referral criteria. Having said this, waiting times for specialist CAMHS assessments and neurodevelopmental disorders assessments are much too long, and while on the waiting list there is a lack of alternative support available for these families.

### **Neurodevelopmental Disorder Services**

In late 2016 the over 5 service transferred from Cwm Taf Health Board into ABMU Childrens Services Group, with Welsh Government funding allocated to health boards to establish a dedicated NDD team for all children and young people. This transition process has not been straight forward due to the lack of clarity over some aspects of the services which have taken some time to resolve. It is also clear that the funding provided by Welsh Government will not be sufficient to ensure that the waiting times target of all under 18s being assessed within 26 weeks of referral is achieved.

Cwm Taf CAMHS has traditionally provided the Neurodevelopmental disorder service for children over 5 years, but has put these children on the waiting list on receipt of referral rather than when all supporting assessments have been received which is not consistent with guidance from Welsh Government. This has now been resolved and the NDD service is gradually being integrated with the community paediatrics service which provided the NDD service for under 5s.

## **3. FACILITIES AND ACCOMODATION**

The facilities and accommodation used by CAMHS to see children and young people and to have as office bases have developed historically on an ad hoc basis and are not fit for purpose nor sufficient for the expanded range of services now provided. The facilities are often in inappropriate locations, based more on accidental availability of space than appropriate facilities to see Children, Young People and their families in logical geographical locations across ABMU. Cwm Taf

have provided information on all the staff employed in the various teams across the ABMU area, where they are currently based and issues with the extent or type of accommodation. Most problematic is the current base for Swansea and some specialist services in Trehafod and Fairfield at the bottom of the Cefn Coed site. Whilst these are not dependent on electrical or heating infrastructure from CCH, they do depend on the IT server from this site, so the planned closure of the site means that the transfer of these services and the associated staff is an urgent need which needs to be addressed – a project team is in place to oversee the identification of alternative premises.

#### **4. PERFORMANCE**

The performance of Child and Adolescent Mental Health Services has been a long-standing area of concern for ABMU Health Board, and progress is being made to improve the commissioner/ provider relationship with Cwm Taf to improve the delivery of services for ABMU residents. Alongside this, services which support local services such as Neurodevelopmental disorders (NDD) (linked with community paediatric services), early onset psychosis (linked with adult mental health services) and primary CAMHS (linked to GP clusters) are being transferred back to the direct management of ABMU Health Board, leaving Cwm Taf to concentrate on the provision of specialist CAMHS for our population. To support these changes, two bids for Integrated Care Funding (allocated to the Western Bay Regional Partnership Board by Welsh Government) have been successful which will support the NDD and primary CAMHS services. To ensure the various elements of work relating to CAMHS are being progressed in line with appropriate timescales a Delivery Plan is being developed which will be overseen by the multi-agency Children & Young People's Emotional and Mental Health Planning Group and progress monitored by the internal assurance group established with the Vice Chair.

Monthly commissioning meetings are held with Cwm Taf Health Board regarding delivery of CAMHS for the ABMU population. Issues with consistency of performance reporting to Health Boards are being resolved to ensure that information reported to Boards is consistent with that reported to Welsh Government in future. CAMHS remains a priority for the Strategy Directorate in terms of setting the strategic direction for services and commissioning against these as well as for the Mental Health & Learning Disability, Primary and Community Services and Singleton (children's services) Delivery Units in terms of delivery of services. In addition an annual report on progress is submitted to Welsh Government, along with reporting to the internal Vice Chair's CAMHS Assurance Group to monitor progress and take action as required.



## Services to Support the Emotional Health & Wellbeing of Children & Young People Delivery Plan 2017 - 2019

| Priority Area (T4CYP Framework for Action) | Health Board Priority                                      | Action to Delivery Priority  | Lead                           | Timescale      | Progress |
|--|--|--|--------------------------------|----------------|----------|
| Early years resilience and wellbeing       | Improved accessibility to local CAMHS services             | Contact to be made following referral within 10 days with assessment and treatment commencing within 14 days         |                                | Monthly        |          |
|  |  | Develop workforce to meet the requirements of the operational policy and pathway                                     |                                | Ongoing        |          |
|  |  | Improved working with local authorities and improved transition for children & young people                          |                                | Ongoing        |          |
| Early intervention and enhanced support    | Development of a sustainable and fit for purpose workforce | Develop and Implement liaison posts (ICF investment)   | Cwm Taf UHB                    | August 2017    |          |
|  |  | Establish a directory of services available to support the emotional health and wellbeing of children & young people | Strategy Lead, ABMU HB         | December 2017  |          |
|  |  | Transfer of Primary Care CAMHS to ABMU Health Board  | MH / LD Delivery Unit, ABMU HB | Summer 2018    |          |
|  |  | Upskilling of staff with increased support for therapies   |                                | September 2017 |          |
|  |  | Implementation of therapies training strategy  |                                | Ongoing        |          |



| Priority Area (T4CYP Framework for Action)   | Health Board Priority                          | Action to Delivery Priority   | Lead  | Timescale      | Progress |
|--|--|---|---|----------------|----------|
| Neuro developmental Issues & Co-morbid MH/LD | Development of NDD Service                     | Develop plans to improve facilities and accommodation for staff and patients  | Children's Service Manager, Singleton Delivery Unit | October 2017   |          |
|  |  | Strengthen communication links with education/CAMHS/learning disabilities to ensure consistent pathway and access   |   | Ongoing        |          |
|  |  | Baseline assessment against requirements of all-Wales pathway to be completed   |   | September 2017 |          |
|  |  | Identify appropriate follow up support for medication monitoring of ADHD patients (options are CAMHS/GP and/or pharmacist)  |   | December 2017  |          |
|  |  | Establish monthly project team and attend All Wales Steering group  |   | August 2017    |          |
|  |  | Implementation of all Wales NDD pathway via monthly meeting with education leads from 3 local authorities   |   | August 2017    |          |
|  |  | Identify recurring funding to advertise additional psychiatrist sessions, prescribing nurse sessions and health visiting time required to balance capacity and demand | Strategy Lead, ABMU HB                              | September 2017 |          |
| Early intervention and enhanced support      | Improved accessibility of local CAMHS services | Expand and deliver the Service to operate 7 days a week   | Cwm Taf UHB   | October 2017   |          |
|  |  | Improve recruitment & retention   | Cwm Taf UHB   | Ongoing        |          |



| Priority Area (T4CYP Framework for Action) | Health Board Priority   | Action to Delivery Priority  | Lead  | Timescale     | Progress |
|--|---|--|---|---------------|----------|
|  |   | Achievement of 48 hour Welsh Government target (dependent on running service 7 days a week)  | Cwm Taf UHB   | October 2017  |          |
|  |   | Identify alternative accommodation for service to operate from   | NPT Delivery Unit / Strategy Lead                         | November 2017 |          |
|  |   | Transfer of service from Cwm Taf to ABMU HB  | Children's Service Manager, Singleton Delivery Unit, ABMU | Autumn 2018   |          |
|  | <b>Securing appropriate accommodation for specialist CAMHS in Bridgend, Neath Port Talbot and Swansea areas</b> | Identify alternative / additional accommodation for services in each Local Authority area, particularly to move off Cefn Coed site | Strategy Lead, ABMU HB                                    | November 2017 |          |

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