

Report of the Cabinet Member for Health & Wellbeing

CHILD & ADOLESCENT MENTAL HEALTH SERVICES SCRUTINY INQUIRY PANEL

PANEL DATE - November 15th 2017

IMPACT REPORT: SCRUTINY INQUIRY INTO REDUCING THE DEMAND FOR CHILD & ADOLESCENT MENTAL HEALTH SERVICES

Purpose	To help the Scrutiny Inquiry Panel to assess the impact of their report into reducing the demand for Child & Adolescent Mental Health Services
Content	This report deals with three questions related to the impact of the inquiry: 1. What has changed since the report was presented to Cabinet? 2. Have the agreed recommendations been implemented? 3. What has been the impact of the scrutiny inquiry?
The Scrutiny Inquiry Panel are being asked to	 Consider the contents of the report Reach conclusions about the impact of the inquiry
Lead Councillor(s)	Cabinet Member for Health & Wellbeing – Mark Child
Lead Officer(s) and Report Author	Dave Howes – Chief Social Services Officer Julie Thomas – Head of Child & Family Services

1. Introduction

- 1.1 The Child & Adolescent Mental Health Services Scrutiny Inquiry Panel undertook an in-depth inquiry in 2015/16. The resulting final report is attached at **Appendix C**.
- 1.2 The reporting timeline of the inquiry is as follows:

Commenced	Oct 15
Agreed by the Scrutiny Programme Committee	12 Sep 16

Presented to Cabinet	20 Oct 16
Cabinet Response agreed	16 Feb 17

- 1.3 The final stage of the scrutiny inquiry process is the follow up. It is at this point that the original panel reconvenes in order to asses the impact of the work.
- 1.4 The purpose of this report is to assist the panel as it seeks to answer the following three questions, each of which will be dealt with in detail below:
 - What has changed since the report was presented to Cabinet?
 - Have the agreed recommendations been implemented?
 - What has been the impact of the scrutiny inquiry?
- 2. What has changed since the report was presented to Cabinet?
- 2.1 Since the inquiry concluded the following changes have taken place.
- 2.2 As a result of the Inquiry, 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.
- 2.3 Specific teams to improve the support available for children and young people have been established with clear criteria
 - Crisis Care
 - Early Intervention in Psychosis
 - Eating Disorders
 - Neurodevelopment disorders (NDD)
 - Local Primary Care Mental Health Services for C&YP
- 2.4 The plan for Local Primary Care Mental Health Services Tier 1 and 2 is to jointly, across agencies, develop tier 1 and 2 interventions to avoid referral into specialist CAMHS where this is appropriate. This service is to be brought back to ABMU in April 2018 to enable integration with local provision. To be most effective, these services need to more closely aligned with other services provided by ABMU Health Board and with services provided by Schools, Education and Social Services Departments. Services for Neurodevelopmental disorders (NDD) and the new early onset psychosis service funded by Welsh Government has already transferred back into ABMU.
- 2.5 To support improved performance in Primary Health, (prior to the new model being developed), and the NDD service, two bids were made for Integrated Care Funding (ICF), (allocated to the Western Bay Regional Partnership Board by Welsh Government) which were successful and supported by the 3 Local Authorities £199k to enhance the Neurodevelopment Disorders Service and £160k for appointing 3 primary care CAMHS liaison posts to be located within CFS across the region. In

- addition, £250k has been identified for CYP from the ring-fenced funding for Mental Health (age blind) which was allocated to ABMU for 2017 18.
- 2.6 Monies from Mental Health ring-fenced allocation has been used non-recurrently to address backlog waiting list problems in NDD and specialist CAMHS. This has been partly successful.
- 2.7 A Delivery Plan has been developed, which is attached as *Appendix 1 and 1a*. Progress against this Delivery Plan will be overseen by the Health Board Children and Young People's Strategy Group and the Multi-agency Children and Young People Mental Health Group and progress reported to the Health Board and Western Bay Regional Partnership Board as agreed but at least on an annual basis.
- 2.8 The Multi Agency Placement Support Service (MAPSS) a Local Authority, Health and Education collaboration, is in place following a successful bid to the ICF. This service provides therapeutic support to children and young people experiencing care.
- One of the most significant changes resulting from the Inquiry is CAMHS management of the waiting list. Children are now only accepted by CAMHS when all the relevant information has been gathered and the criteria for the service has been met. Only then will a child be placed on the waiting list and there are now clear targets around waiting list times. In addition advice is provided to parents or professionals as to how best to respond to their child's needs while they wait for a service and for those children where CAMHS is not the right service for them signposting to the relevant service occurs in a timely way.

3. Have the agreed recommendations been implemented?

- 3.1 In responding to the inquiry an action plan was drawn up showing what steps would be taken to implement all of the scrutiny recommendations agreed by Cabinet (**Appendix B**).
- 3.2 The table at **Appendix A** shows progress against each recommendation and specifically:
 - the Cabinet decision in respect of each recommendation
 - the action taken / proposed to implement the recommendations
 - the responsible officer(s)
 - timescales involved

4. What has been the impact of the scrutiny inquiry?

What has been the impact of the scrutiny inquiry?

4.1 The inquiry has responded to the concerns and feedback from professionals and family members and has been influential in ensuring the Regional Partnership Board established CAMHS as a priority area.

- 4.2 The inquiry has also supported a broader understanding of emotional health, wellbeing, and mental health amongst professionals. It has supported a dialogue about the importance of emotional wellbeing being everybody's business and of the importance of early help, early identification and prevention and of the importance of agencies working together effectively to meet children's needs.
- 4.3 The importance of de-stigmatising mental health issues proved helpful and the message from children that they do not want to be labelled was taken seriously.
- 4.4 An important area identified was that of waiting lists and the length of time children and families waited for a service. This helped CAMHS think about the referral system, make changes to address these problems, and identify additional funds to reduce waiting times. This is however an area requiring improvement and will need to be carefully monitored.
- 4.5 The Inquiry proved useful in establishing the delivery and monitoring of some performance information (Appendix 2). But again this is an area for further development.
- 4.6 The inquiry was able to ensure that the work being driven by the Family Support Continuum Steering Group (FSCSG), and specifically the commissioning reviews incorporated emotional wellbeing and the need for a Behaviour and Wellbeing Strategy into their work plan. This will potentially have a major impact on the ability of professionals to promote emotional wellbeing and reduce the need for more specialist intervention.
- 4.7 The need for Primary Health to work with local services has been a welcome outcome of the Inquiry and supported the decision of ABMU to bring the service 'in house'. This again will provide positive opportunities to promote the early help work.
- 4.8 Specialist CAMHS teams have been developed and are operational, as above. These teams are also beginning to provide consultation and training support and are now able to recognise their role in not only providing specialist interventions, but providing support to professionals working at different tiers on the continuum.
- 4.9 There has improvement in waiting times and the timelines of intervention from specialist CAMHS. Swansea's most vulnerable children, including those experiencing care are receiving specialist support.
- 4.10 In conclusion the Inquiry provided a voice for professionals and parent/carer's to express their concerns about, what at that time, was considered to be a service that was not meeting the needs of children locally, or indeed across Wales. The profile of children's mental health and emotional wellbeing was also raised. As a result the local CAMHS service has worked with partners to establish the operational teams specified in the

T4CYP Programme and many of the recommendations of the Inquiry are being fulfilled, albeit with further progress required. In addition there are clear governance and performance monitoring arrangements in place to track progress and monitor outcomes for children.

APPENDIX A

Scrutiny Inquiry of Child & Adolescent Mental Health Services Scrutiny Inquiry Panel Cabinet Action Plan

Red	commendation	Action already being undertaken	New Action Proposed	Timescale	Responsible Officer
1.	Cabinet seeks to engage with the Abertawe Bro Morgannwg Health Board and Western Bay Children and Young People's Emotional and Mental Health Planning Group to broaden the current membership to include other agencies such as Education,	Complete	Membership and terms of reference of ABMU Planning Group to be reviewed and alternative arrangements put in place.	February 2017	Julie Thomas HOS/ Jo Davies ABMU AD of Strategy
	Youth Justice, the voluntary sector which play an important role in the mental health and emotional wellbeing of children and young people.		Local partnership Board to drive the recommendations of T4CYP and ensure local implementation.	Ongoing	Dave Howes Chief officer for Social Services
			Integrate the Continuum of support used within the LA with that used within ABMU and CAMHS	April 2017	Julie Thomas HOS/ Jo Davies ABMU AD of Strategy

COMPLETED - YES

Progress: The membership and Terms of Reference (TOR) of the ABMU Planning Group has been reviewed and the Children and Young People Mental Health Group (CYPMHG) established with multi-agency representation. The high level Delivery Plan 2017-19 is monitored through the group as well as key performance indicators (KPl's). The Regional Partnership Board also receives progress reports in their monitoring capacity of the T4CYP programme. The Primary Care CAMHS Service is to be brought back into ABMU from Cwm Taf in April 2018 to enable better integration with local services. The model for Primary Care CAMHS will be developed via a separate multi-agency group to be established.

2.	Cabinet seeks clarification from the CAMHS service on the types of mental illnesses that CAMHS deals with and this is communicated to relevant agencies.	Service specifications in draft	Officers to participate in finalising the service specifications, including pathways and these to be presented to the LPB for sign off.	April 2017	Julie Thomas HOS Nick Williams HOS Rachel Moxey HOS Dave Howes Chief Officer SS Jo Davies ABMU AD of Strategy
	A clear communication plan is developed by CAMHS and Partners regarding criteria and pathways for professionals and parents	Under development	As above		Emotional Wellbeing and Mental Health Strategy Group

COMPLETED - PARTLY

Progress: The development of clear pathways to provision requires further work and it is acknowledged that there is still a level of confusion in respect of the All Wales Pathway for parents. A plan is in place to update information for families and for this to be made available via the national website. Service specifications for Secondary CAMHS have been developed and a communication plan is under development.

3.	Cabinet brings together relevant	Collaboration within	ABMU/CAMHS to be	January	Julie Thomas HOS/
	agencies and facilities	the LA to co-ordinate	invited to join this work	2017	Gareth Bartley ABMU
	collaborative development of low	and improve Early	stream with the		Head of Partnerships and
	level prevention and early	help and Prevention	Primary care work		Development
	intervention services that support	services being	stream.		Mental Health and

children and young people who do not have a diagnosis for a mental illness.	developed and supported by the commissioning reviews.			Learning Disability
	Support for young carers' is considered given the research around the impact of their caring role on their emotional wellbeing and mental health	The young carers' support group develops recommendations with an action plan for delivery to support young carers'.	Ongoing	Gavin Evans – Young people's service manager.

COMPLETED - PARTLY

Progress: The Family Support Continuum Group (FSCG) is driving work on emotional wellbeing and Primary CAMHS are developing a training programme to support schools meet the emotional wellbeing needs of pupils; this is to be rolled out by March 2018. A regional group is meeting to consider best practice to support young carers and a local action plan is being developed led by Nichola Rogers, PO in CFS. This will encompass the commissioning of services for young carer's, drafting a young carer's strategy and developing support to young carer's across the continuum of need. The timescale for completion of this work is September 2018. This will be supported by new grant monies made available by Welsh Government.

4.	Cabinet ensures the sustainability of good services like those provided by Team Around the Family, Exchange Counselling Service and the Educational Psychology Team.	As recommendation 3	Sub group of the EOTAS Review to be established to develop a multi-agency Behaviour Strategy.	January 2017	Nick Williams HOS
	Recommendation partly agreed				

COMPLETED - YES

Progress: TAF in schools is being rolled out within all primary schools in Swansea with positive feedback from primary school head teachers. The model is being developed by Evolve (Young People Services) throughout secondary schools. A working group has been developed led by Mark Sheridan (Head of Additional Learning Needs Unit) to develop a local behaviour and wellbeing strategy; this will specify evidence based models of intervention to be used within Swansea, to provide a tool kit of interventions for use by professionals. A performance framework is being developed to evidence outcomes for children.

|--|

COMPLETED - YES

Progress: This is being driven by the CYPMHG and the FSCSG.

6.	Cabinet investigates the	Core Competency and	T4CYP workforce	Ongoing	Julie Thomas HOS/ Jo
	feasibility of the development of a	Training Framework	development	2017	Davies ABMU AD of
	training programme in	has been developed	programme to be		Strategy/Dave Howes
	collaboration with CAMHS which	via the T4CYP	driven forward by the		Chief Officer SS
	is relevant to the education sector	programme	LPB		
	and is affordable and accessible.			Ongoing	
			Within the LA the	2017	Julie Thomas HOS
			Family Support		Nick Williams HOS
			Continuum Group to		Rachel Moxey HOS
			progress the		
			workforce		
			development		

			programme and co- commission training.		
CO	MPLETED - PARTLY	,			1
the Ser The ana	gress: Some training is being rolled Youth Offending Service (YOS) on vices (CFS). Family Support Continuum has delysis which links with the work of the attervention is commissioned and roll	the trauma recovery mod eveloped a Workforce D e Behaviour and Wellbeir	el. This training has been evelopment Sub-Group or group to ens	en offered to s to undertake	staff within Child and Family a workforce training needs
7.	Cabinet supports the Western Bay's review of CAMHS across the region and ensures that the Council takes a full and participatory role in this review. Recommendation not agreed				
Pro	MPLETED – YES gress: Service specifications have	•	•	•	

Progress: Service specifications have been developed for the Crisis Care, Early Intervention in Psychosis, Eating Disorders and Neuro Development Disorder (NDD) teams and these are operational. The development of the new Integrated Autism Service (IAS) is being developed regionally and this will be integrated with NDD. The model for primary care services is under development, although adverts are out to recruit into 3 primary health care posts, one for each Local Authority, to be located within CFS front door arrangements to provide an advice and signposting service to families and professionals.

8.	Cabinet takes steps to formalise	Pathway and support	April 2017	Julie Thomas HOS/ Jo
	support services arrangements	arrangements		Davies ABMU AD of

between child and family services and CAMHS in any future CAMHS service delivery model.	between Child and Family service and CAMHS to be formalised within the Service Specification documents.	Strategy
Cabinet takes steps to formalise support services arrangements between STF's, EOTAS and GP's and CAMHS in any future CAMHS service delivery model.	Pathways to be developed as part of the service specification plan	Emotional Wellbeing and Mental Health Strategy Group

COMPLETED - PARTLY

Progress: CFS has developed pathways to specialist and secondary CAMHS services via their internal therapeutic team. The regional Multi Agency Placement Support Service (MAPSS) is in place funded via the Integrated Care Fund (ICF) to provide therapeutic support to children who experience care.

Further work is required to formalise Pathways for STF's EOTAS etc. and this is covered in the Delivery Plan.

9.	Cabinet works with the planning group to ensure there is collaborative development of and consultation on eligibility criteria.	The eligibility criteria for CAMHS is contained within the service specification documents.	These documents to be agreed and signed off by the LPB.	April 2017	Jo Davies ABMU AD of Strategy/Dave Howes Chief Officer SS
----	---	---	---	------------	---

COMPLETED - PARTLY

See Recommendation 7

10.	Training and Information on the	Com	nmunication and	April 2017	Julie Thomas HOS/ Jo
	CAMHS referral process and new	train	ning plan to be		Davies ABMU AD of
	eligibility criteria is developed and	deve	eloped for		Strategy
	communicated to relevant	profe	essionals via the		-
	agencies such as schools, GPs,	ABM	MU planning group.		
	Social Services, the voluntary				
	sector and the youth justice and				
	early intervention service.				

COMPLETED - NO

Progress: The service specification for specialist and secondary CAMHS has been completed. However, a communication plan requires development and this forms part of the Delivery Plan.

11. Development of peer support to help parents understand the referral process, the eligibility criteria and pathways in CAMHS services.	Peer support to be progressed via the Family Support Commissioning Review in collaboration with ABMU.	April 2017	Julie Thomas HOS/ Jo Davies ABMU AD of Strategy/ Nick Williams HOS / Rachel Moxey HOS
	Training to be provided to Local Authority Councillor's on CAMHS services and those developed via the ALN review, and ASD Strategy	July 2017	CAMHS representative Nick Williams HOS.

COMPLETED - NO

12.	Cabinet should encourage the ABMU Board and Western Bay Children and Young People's Emotional and Mental Health Planning Group to use the opportunity of the welsh government investment to simplify the referral process.	See recommendation 2		
ON	IPLETED - NO			

COMPLETED - YES

Progress: Recruitment into the three primary health workers post is underway. These posts will be co-located within CFS

14.	Cabinet to monitor referral rates and how long it takes to be seen by CAMHS.	T4CYP programme Board monitoring performance and information available about assessment activity.	Child and Family Scrutiny Panel to receive quarterly performance information.	April 2017	JT HOS
			The ABMU Planning Group develop a comprehensive Performance Framework	September 2017	ABMU Planning Group Regional HOS

COMPLETED - PARTLY

Progress:

A performance framework has been developed – *Appendix 2*. This is monitored by the Regional Partnership Board, the CYPMHG and will be added to CFS Scrutiny Panel work plan in 2018.