

JOINT REPORT FROM SOUTH READING CLINICAL COMMISSIONING GROUP, NORTH &  
WEST READING CLINICAL COMMISSIONING GROUP, READING BOROUGH COUNCIL

TO:	HEALTH AND WELLBEING BOARD		
DATE:	17 April 2015	AGENDA ITEM:	8
TITLE:	Status report on comprehensive CAMHs		
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## 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 To provide an update on service development and improvement across the comprehensive CAMHs system.

## 2. RECOMMENDED ACTION

For the Health and Wellbeing Board

- 2.1 To note the progress made in terms of strategic direction and service improvement.
- 2.2 To provide partnership commitment to the Action Plan that aims to build a transformed comprehensive and integrated full CAMHs service offer to families.
- 2.3 To ensure that the JSNA to be improved in its analysis and recommendations for CAMHs
- 2.4 To delegate responsibility for overseeing the implementation of the action plan to the Children's Trust Board

## 3. POLICY CONTEXT

- 3.1 A range of national, regional and local reviews have been undertaken in the last 12 months that relate to CAMHs services. A very good summary of the policy context is to be found in the Commons Select Committee report, published 28<sup>th</sup> Oct, which says;

*'There are serious and deeply ingrained problems with the commissioning and provision of Children's and Adolescents' mental health services. These run through the whole system from prevention and early intervention through to inpatient services for the most vulnerable young people.'*

- 3.2 The report cites that the reasons for this as being:
- Rising demand for specialist services that is leading to increased waiting lists at this level. The national reasons for rising demand are unclear. It is thought that this could be due to greater awareness and less-stigma attached to mental health issues. Additionally, the current arrangements are characterised by fragmented care pathways that result in children not accessing universal and targeted provision but going straight to specialist provision. The Select Committee also highlights the increasing influence and prevalence of the digital culture that young people are growing up in as having a significant impact on demand.
  - Nationally there has been variation on whether CCGs and partners are prioritising CAMHs services. In Berkshire however there has not been a cut in funding at the specialist level, but there is variation at the universal and targeted service level across the county.
  - Nationally there are major problems with access to Tier 4 inpatient services, with children and young people's safety being compromised while they wait for an inpatient bed to become available. Locally temporary beds are always found and police cells are never used while Tier 4 beds are sourced. However because there are no tier 4 beds in Berkshire, young people have to be placed out of county and this makes contact with family, friends and local services difficult, leading to longer in patient stays.
  - Many of the children's work-force nationally currently feels ill-equipped and lacking in confidence in dealing with mental health issues in children and young people, and that their current training does not prepare them adequately for this.
- 3.3 Berkshire completed a comprehensive engagement exercise about Berkshire Children's and Adolescent Mental Health Services (CAMHs) service during spring 2014. Views were gathered from children and young people, parents and foster carers, staff who work in the service, GPs and others who refer into the service and others with an interest in the service.
- The results of this, including the findings and recommendations are available on the Berkshire Clinical Commissioning Groups' (CCGs) websites.

#### 4. PROGRESS TO DATE

- 4.1 The JSNA document which describes Child and Adolescent Mental Health Services (CAMHS) is currently been refreshed. The specific area on emotional and mental health of children was one of the last ones to be completed last year and will be improved during the refresh. The latest update data from the shared team in Bracknell Forest is expected in April 2015. Data will be analysed and comparisons made with statistical neighbours and against national averages where possible. Any relevant and available trend data will be included to demonstrate changes, if any, over recent years. The recommendations for service improvement will be based on those identified in existing NICE guidelines and new ones identified in recent reports published by Health watch Reading.
- 4.2 The action plan in Appendix 2 provides a full range of commitments to improve the service delivery to meet the 10 recommendations that were made in the recent Child and Adolescent Mental Health service engagement report.
- 4.3 Currently Tier 3 performance across the Berkshire West (i.e. Reading, Wokingham and West Berkshire areas) is showing;

- 4.4 An increase in referrals compared to the same months last year, but this is rising at a slower rate than was the case in 2013/14.
- 4.5 All urgent referrals are being seen by tier 3 CAMHS within 24 hours.
- 4.6 In addition 77% of referrals classed as needing to be seen 'soon' were seen within 4 weeks.
- 4.7 Finally 27% of routine referrals were seen within 7 weeks. The 7 week target is a Berkshire target and is ambitious, as other parts of the country often use up 26 weeks as the routine referral benchmark. (54% is our 16 week plus figure for Berkshire West).
- 4.8 It is important to note that the vast majority of those that are waiting over the 7 week benchmark are on the ASD diagnostic pathway. This is acknowledged as an action to address in the action plan.
- 4.9 The CCG have secured approx. £300k mental health operation resilience funding and have agreed with BHFT that the priorities continue to be reducing waiting times starting with those young people who are assessed as being at most risk. The short term aim is to reduce the number of young people who reach crisis point. It is anticipated that this will impact positively on the overall waiting lists but will not clear the backlog, the majority of whom have been identified as not being at immediate high risk.
- 4.10 A business case has been received from BHFT to the CCGs regarding additional recurrent revenue investment in Feb 2015 to achieve sustainable shorter waiting times, as well as deliver a high quality, safe, efficient and easily accessible service. RBC continues to retain its investment in Tier 2 services for families below the statutory threshold for investment as a range of Early Help services. RBC corporate plan for 2015 - 2018 commits to a review of these services with support from partners to understand what it can continue to afford to offer into the future.
- 4.11 A range of work has also been underway at the universal and targeted levels of support. Importantly RBC provides regular training opportunities for non-mental health practitioners in the general field of mental health as well as in specific topics such as self-harm or anxiety.
- 4.12 RBC targeted support for families continues to be part of the Children's Action Teams. Primary Mental Health workers provide assessment and interventions when there is a clear or emerging mental health need. RBC commissions 'Time to Talk' youth counselling services in Reading and this compliments a range of other voluntary sector and school based youth counselling provision in the town. For 15/16 Berkshire West CCGs have allocated grant funding to a number of voluntary sector organisations who support families in the Reading area including Time to Talk and ARC for youth counselling; and various voluntary sector organisations who support children and young people with Autism. The CATs support many families with emerging emotional health needs with non-mental health practitioners such as our youth workers, family workers and parenting courses.

- 4.13 Following a supportive challenge from Berkshire West and East CCGs (Summer 14) the six Berkshire Local Authorities have begun to discuss ways to work more cooperatively across the emotional wellbeing/ mental health pathways.
- 4.14 There has been officer agreement to focus on these areas:
- Map the current offer in each Local Authority at a universal and targeted level to begin to understand levels of consistency as well as gaps/ variations. To also look at how to communicate clearly about thresholds and discuss step up and step down protocols.
  - Development of a screening tool - establishing a range of tools to help non-mental health professionals collect information to help with decision making to access help at a range of tiers
  - Create an agreement with CPE and Tier 3 that mental health assessments at Tier 2 can stay with the child/ young person. This should avoid duplication and importantly avoid families repeating processes and information sharing.
  - Exploration of a Pan Berkshire offer of access to youth counselling at tier 2 level, in particular an on line service offer.
  - Creating a school survey of EHWP to undertake a needs analysis of what schools need in terms of support, advice and interventions to enhance their offer to pupils.
  - Explore how the Slough Public Health project that has begun to map universal and targeted care pathways that correspond with the specialist established pathways already in place can be replicated in each Local Authority.

## 5. FUTURE OPPORTUNITIES

- 5.1 Developing further cooperation between local CCGs, RBC and the neighbouring Local Authorities in these key areas
- Joint commissioning both in voluntary and statutory sector
  - Workforce development
  - Building links between care pathways to create a more seamless journey up and down the system, particularly between Tiers and providers
- 5.2 Building collaboration with University of Reading to develop an evidence base for anxiety and depression in a stepped care model.
- 5.3 Using digital technology to increase both access and support e.g. MindFull online counselling; an App for Self harm, anxiety and depression (Slough pilot); Young SHaRON online support platform for CAMHS users, young mothers and Children in Care.
- 5.4 Reading Borough Council has the opportunity to commission School Nursing and Health Visiting to support integrated pathways, universal prevention services and early identification for support.
- 5.5 A "good" CAMHS service has been described in the new national service specification for Tiers 2 and 3 and is described in [www.jcpmh.info](http://www.jcpmh.info) "Guidance for commissioners of child and adolescent mental health services". Berkshire West CCGs and BHFT constantly use benchmarking information and national exemplars of good practice to develop services. For example CAMHS workers at

the Berkshire Adolescent Unit are currently being trained in Dialectical Behaviour Therapy which has a good evidence base for people who self-harm. Thames Valley Strategic Clinical Network continues to have a focus on improving CAMHs, transition into adult services and perinatal mental health services in this area.

- 5.6 A number of national pilots are underway to improve transition between child and adult mental health services. Lessons learned could aid in developing local mental health services in the future.

## 5. NEXT STEPS

- 6.1 For the Children's Trust Board to oversee implementation of the action plan and to hold partners to account.
- 6.2 To report progress on the action plan at future Health and Wellbeing board meetings on a six monthly basis.

## 7. COMMUNITY ENGAGEMENT AND INFORMATION

- 7.1 A significant engagement exercise was undertaken in early 2014 which has been fully reported in this report
- 7.2 It is crucial to begin a discussion with school and voluntary sector colleagues to look at the shape and range of delivery that can support a comprehensive CAMHs offer locally. This fits well with action planning items; Redesign the CAMHs care pathway so that more help and advice is available at an earlier stage and how existing and new resources and services at Tier 2 become a shared Early Help responsibility across the LSCB partnership.

## 8. BACKGROUND PAPERS

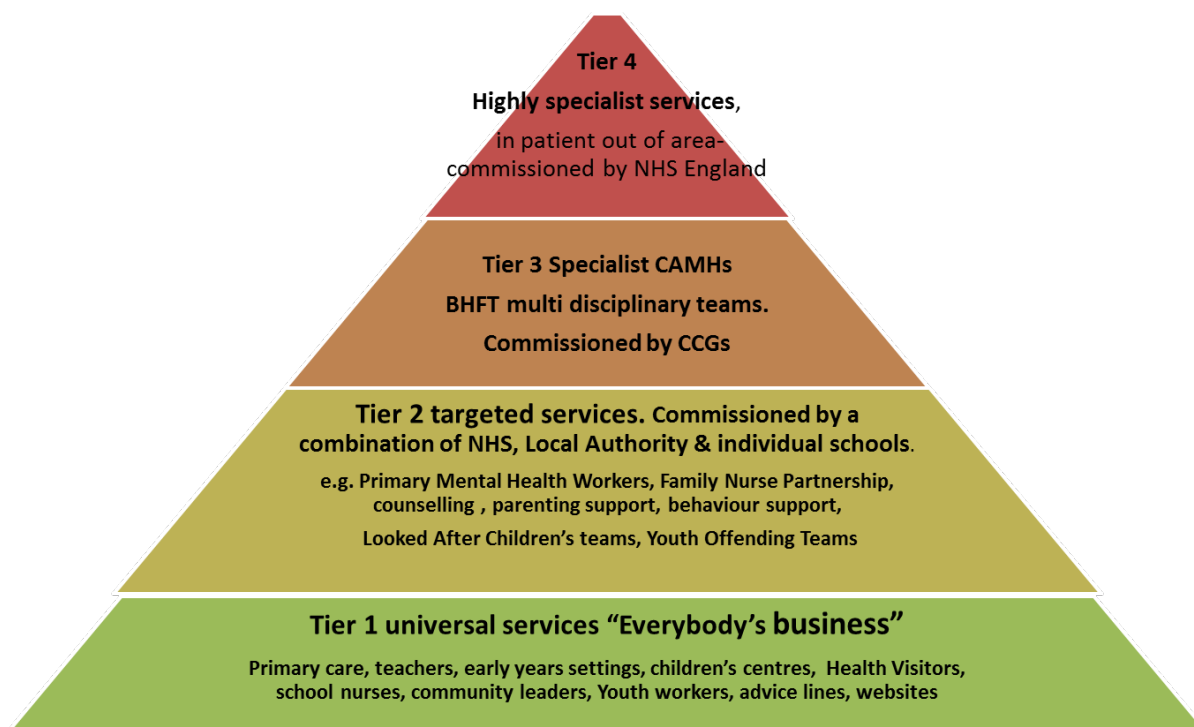
- 8.1 Commons Select Committee report - Oct 14 <http://www.publications.parliament.uk/pa/cm201415/cmselect/cmhealth/342/34202.htm>
- 8.2 Engagement exercise link <http://southreadingccg.nhs.uk/news/entry/review-of-children-and-adolescent-mental-health-services-camhs-in-berkshire>
- 8.3 Local Offer link <http://servicesguide.reading.gov.uk/kb5/reading/directory/results.page?familychannel=6-6&qt=&term=&sorttype=field>
- 8.4 Future in Mind -March 2015 <https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people>

## Appendix 1 - Acronyms used in the report

Acronym	Full description
CAMHs	Child and Adolescent Mental Health Service
CCGs	Clinical Commissioning Group
JSNA	Joint Strategic Needs Assessment
ASD	Autistic Spectrum Disorder
BHFT	Berkshire Healthcare Foundation Trust
CATs	Children's Action Team
CPE	Common Point of Entry for BHFT
EHWB	Emotional Health Wellbeing
LSCB	Local Safeguarding Children's Board
PMHW	Primary Mental Health Worker
ELSA	Emotional Literacy Support Assistant
HV	Health Visitor
YOS	Youth Offending Service
ADHD	Attention Deficit Hyperactivity Disorder
RBH	Royal Berkshire Hospital

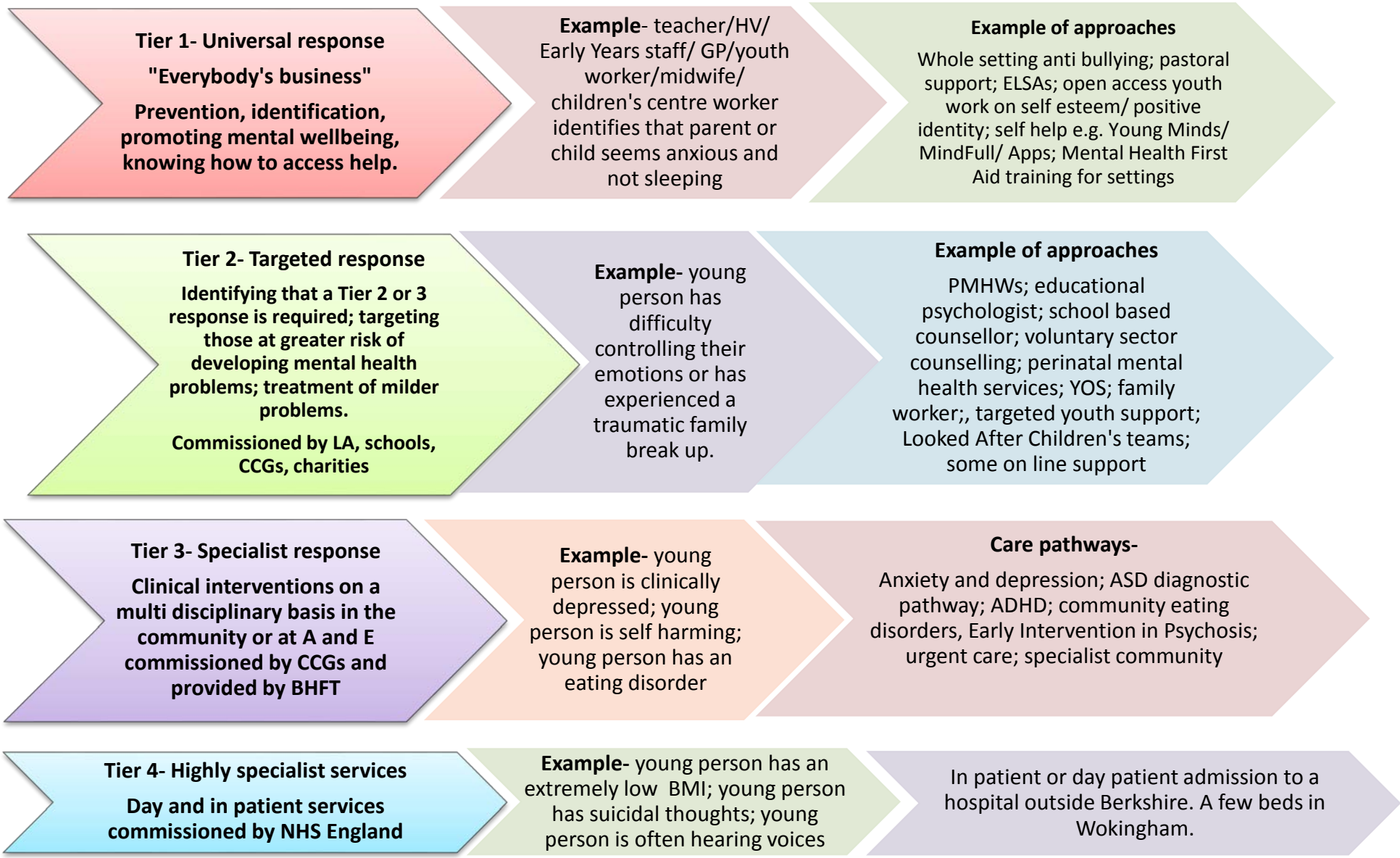
## Appendix 2

### How emotional health and wellbeing/ CAMHs services are commissioned in Berkshire



A "good" CAMHs service has timely, effective and efficient integrated working across Tiers (and therefore agencies) - reference Joint Commissioning Panel for Mental Health 2013 [www.jcpmh.info](http://www.jcpmh.info). This means that children, young people and families should be able to access emotional health and wellbeing support in early year's settings, voluntary sector, schools, the community and primary care before needs escalate to Tiers 3 or 4.

**Appendix 3: Comprehensive Mental Health service provision for children and young people in Reading**





Appendix 4 - Reading Action plan to improve Comprehensive CAMHs service delivery

NUMBER	RECOMMENDATION	ACTION TO BE TAKEN (SHOULD BE SMART) TO ADDRESS RECOMMENDATION	WHO IS RESPONSIBLE FOR THE ACTION	DATE THE ACTION WILL BE COMPLETED	PROGRESS TOWARDS COMPLETION INCLUDING EVIDENCE OF ACTION TAKEN
1	Reduce waiting times for help and increase resources to meet the increased demand.	Berkshire West CCGs have secured additional winter resilience funding from NHS England for 2014/15 to provide enhanced CAMHs help that reduces the number of young people whose needs escalate to crisis point.	CCGs	Dec 2014	<ul style="list-style-type: none"> <li>Some posts have been recruited to. Others are still vacant. BHFT working proactively to fill all vacancies.</li> <li>Service partially up and running since Dec 2014. Monthly update reports being provided.</li> </ul>
		Redesign the CAMHs care pathway so that more help and advice is available at an earlier stage, meaning that fewer children and young people will a service from specialist CAMHs.	Local Authority (children's services), LA (Public Health), CCGs, BHFT	Dec 2015	<ul style="list-style-type: none"> <li>Pilot underway in Slough for anxiety and depression and self-harm. Learning to be disseminated to Reading.</li> <li>Jointly funded pilot project to improve care pathways for perinatal mental health in Reading has been agreed and recruitment has taken place.</li> <li>Other pathways to follow.</li> </ul>
		Consideration of business case to increase investment into Tier 3 CAMHs.	BHFT and CCGs	July 2015	<ul style="list-style-type: none"> <li>Initial business case received by CCGs from BHFT- Feb 2015.</li> <li>Commissioners and provider will use learning from additional winter resilience funded projects to shape investment.</li> </ul>
		Work with schools, children's services voluntary sector and CAMHs to develop a more integrated approach to accessing help when ASD is suspected or diagnosed. Access to help should be based on the child's needs not just the presence/ absence of a diagnosis.	Local Authority (children's services), CCGs, BHFT, schools	March 2016	<ul style="list-style-type: none"> <li>Discussed at CCGs Feb 15</li> <li>Discussed in principle by CCG and BHFT March 2015</li> <li>Business case submitted to CCGs includes additional resources to support Tier 3 ASD diagnostic pathway.</li> </ul>
2	Increase Tier 2 provision, to ensure	To discuss how existing and new resources and services at Tier 2 become a shared Early Help	Local Authority (children's	July 2015	

	timely 'early intervention', reducing escalation of mental health problems and reducing the need for specialist Tier 3 and 4 services.	responsibility across the LSCB partnership. Pilot and research studies are underway to <ul style="list-style-type: none"> <li>• evaluate online (Young SHaRON/online counselling), telephone and face to face support.</li> <li>• A CAMHs app to be finalised following engagement with service users.</li> <li>• Identify and support women with perinatal and postnatal mental health issues earlier.</li> <li>• Develop the workforce, including GPs, Early Years, schools, children's centre staff, school nurses, youth workers</li> </ul>	services) BHFT and CCGs Local Authority (Public Health) LA (Public Health) with CCGs	Dec 2015 June 2015 March 2016 March 2016	<ul style="list-style-type: none"> <li>• Young SHARON being developed and trialled.</li> <li>• Online counselling being trialled in a nearby Local Authority- learning to be disseminated to Reading.</li> <li>• CAMHs App being trailed in 3 Slough schools to then refine prior to national launch.</li> <li>• Finances secured. Project manager appointed.</li> <li>• Training is taking place on an ongoing basis.</li> </ul>
3	Free CAMHS staff to work more collaboratively with partner agencies.	Consideration of business case to increase investment into Tier 3 CAMHs to enable this to happen.	BHFT and CCGs	July 2015	<ul style="list-style-type: none"> <li>• Initial business case received by CCGs from BHFT- Feb 2015.</li> <li>• Commissioners and provider will use learning from additional winter resilience funded projects to shape investment.</li> </ul>
4	Improve support in schools.	A pilot project on school based management of ADHD.	BHFT and LA (children's services)	Dec 2015	<ul style="list-style-type: none"> <li>• Pilot started in January in a single school in the South of Reading.</li> </ul>
		Offer schools a package of support, supervision and training to enhance the current Emotional Literacy Support Assistant (ELSA) role in schools.	LA (children's services)	Sept 2015	<ul style="list-style-type: none"> <li>• Package of support is on school websites.</li> </ul>

		To provide regular training opportunities for school staff in the general field of mental health as well as specific topics such as self-harm or anxiety.	LA (children's services) LA (Public Health) BHFT	March 2016	<ul style="list-style-type: none"> <li>• Training is taking place on an ongoing basis.</li> <li>• Regional conference on self-harm taking place on 27-2-15.</li> <li>• PEP Care training to be offered to GPs, schools and LA staff from July 2015</li> </ul>
5	Provide more detailed information about services and how to access them.	Make sure that up to date information is on key websites including the local offer.	LA (children's services) LA (Public Health) BHFT CCGs	July 2015	<ul style="list-style-type: none"> <li>• Local authorities have compiled lists of services that are available at Tier 2 and this is improving signposting within CAMHs. This directory of services supports teachers, GPs and others working with CYP, detailing where services are available and how to access them easily.</li> <li>• BHFT have launched a new CAMHs website which will include a 'Supporting You' section. This section will contain information and links to other agencies offering local support to families, as well as links to online resources and top tips.</li> </ul>
		Following engagement with service users, BHFT to update information, resources and the website.	BHFT	June 2015	<ul style="list-style-type: none"> <li>• Engagement with service users to develop website and resources underway</li> </ul>
6	Deliver improved communications and administration.	Engage with service users and their families to find out what they want to know about the service <ul style="list-style-type: none"> <li>• Service leaflet on what to expect from BHFT CAMHs.</li> <li>• Review service letters to be clear on wait times and service offer.</li> <li>• Improve website, add a section called "Our service". Site to be available as an App for smart phones and tablets</li> </ul>	BHFT	<p>March 2015</p> <p>March 2015</p> <p>July 2015</p>	<ul style="list-style-type: none"> <li>• Process in place for service users to be consulted on all forms of communication and publicity.</li> <li>• "CAMHs web" and new website under development</li> </ul>

		<ul style="list-style-type: none"> <li>• Improve information in waiting areas.</li> <li>• Text reminder system to be set up.</li> <li>• Implement online tool “CAMHs web” which will facilitate shared decision making with young people- they will be able to access their own care plans which they have jointly agreed and developed with their clinician using tablets and smart phones. This will facilitate the self-reporting of outcomes.</li> </ul>		<p>May 2015 May 2015</p> <p>April 2015</p>	
7	Improve the environment where CYP are seen or are waiting including more privacy for confidential conversations and availability of toys	<p>Service users suggestions to improve clinical spaces and waiting rooms are</p> <ul style="list-style-type: none"> <li>• Artwork, produced by service users, to be displayed throughout CAMHs buildings.</li> <li>• Positive and inspiring messages within CAMHs buildings.</li> <li>• Uplifting posters.</li> <li>• Access to helpful and reliable information on the issues they are experiencing within the waiting areas.</li> <li>• Fidget toys and stress balls as distraction aids.</li> <li>• A selection of up-to-date magazines.</li> <li>• Annuals and other books to ‘dip into’ whilst they are waiting for their appointment.</li> <li>• Less “gloomy” information and publicity on issues that are not directly related to young people’s mental health.</li> </ul>	BHFT	<p>March 2015</p> <p>March 2015</p> <p>March 2015 March 2015</p> <p>April 2015 April 2015</p> <p>April 2015</p> <p>March 2015</p>	<ul style="list-style-type: none"> <li>• 2 art workshops held to date. Plans to continue this as part of ongoing service user engagement</li> <li>• Materials ordered</li> <li>• Materials ordered</li> <li>• Materials ordered</li> <li>• Materials ordered</li> <li>• Materials ordered</li> <li>• Materials ordered</li> </ul>

8	Better post-diagnostic support, particularly for children with Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).	To discuss how existing and new resources and services that support children with ASD and ADHD can be better coordinated across the LSCB partnership.	Local Authority (children's services) CCG BHFT	March 2016	<ul style="list-style-type: none"> <li>• CCG have awarded grants to voluntary sector organisations who support young people with ASD</li> <li>• Discussed at CCSG Feb 15</li> <li>• Discussed in principle by CCG and BHFT March 2015</li> </ul>
9	Provide better access to services in a crisis and out of hours.	Secure additional resources to extend the availability of CAMHs help in a crisis into the evening and over weekends and Bank Holidays.	CCGs	Jan 2015	<ul style="list-style-type: none"> <li>• Finance has been secured using mental health operation resilience funding</li> </ul>
		Secure staff to be able to offer this service.	BHFT	Feb 2015	<ul style="list-style-type: none"> <li>• Partial delivery due to vacancies</li> </ul>
		Evaluate effectiveness of the service with a view to mainstreaming this with recurrent funds.	BHFT and CCG	May 2015	
		Enhance the Early Intervention in Psychosis service for young people.	BHFT	March 2015	<ul style="list-style-type: none"> <li>• Finance has been secured using mental health operation resilience funding Dec 2014.</li> <li>• Partial delivery due to vacancies.</li> </ul>
		Evaluate the new Psychological Medicines Service for teenagers aged 16+ that has opened at Royal Berkshire Hospital (RBH), providing rapid response mental health assessments for people who are being treated for physical conditions.	BHFT with RBH	March 2015	<ul style="list-style-type: none"> <li>• This service works across the hospital, including in A&amp;E, so that children and young people who are in hospital for physical health problems can be assessed for any mental health issues without a further referral. This enables more rapid access to mental health services when required.</li> </ul>
		CCGs are working with the police, ambulance service, Local Authorities, Public Health, hospitals, Drug and Alcohol Teams and BHFT to develop and implement the action plan as part of the Crisis Care Concordat.	BHFT CCG LA SCAS Police RBH	May 2015	<ul style="list-style-type: none"> <li>• Action plan drafted band being consultation with service users is underway.</li> <li>• Crisis Care Concordat Declaration was signed off Dec 2014.</li> <li>• Engagement with service users on the</li> </ul>

					Crisis Care Concordat action plan is underway
10	Provide a local 24/7 inpatient service for those CYP with the most complex needs.	To increase opening hours of the Berkshire Adolescent Unit from 4 nights per week to 7 nights per week.	NHS England BHFT	Dec 2015	<ul style="list-style-type: none"> <li>Since September longer term plans have been agreed in principle with the CCGs and NHS England to change the Berkshire Adolescent Unit, based in Wokingham from a Tier 3 unit (with some Tier 4) into a Tier 4 provision so that it can be open for 7 days, 52 weeks per year. It will eventually be expanded (7 beds currently) to form a larger inpatient residential unit (12-15 beds) as well as catering for day patients. This unit could also provide some crisis intervention beds. Under this new proposal a proportion of the funding for running the provision will transfer to NHS England. The remaining Tier 3 resources for the community based Eating Disorders service and Early Intervention in Psychosis will be included within the Tier 3 CAMHs service specification.</li> <li>Other centrally funded grants will be considered and applied for as and when opportunities arise</li> </ul>
		To increase the number of Tier 4 beds available in Berkshire	NHS England BHFT	March 2017 TBC	