

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

TO:	HEALTH AND WELLBEING BOARD		
DATE:	18 MARCH 2016	AGENDA ITEM:	6
TITLE:	Update status report on comprehensive Child and Adolescent Mental Health Services		
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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 Child and Adolescent Mental Health Services (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 An update report to be provided to the Health and Wellbeing Board in 12 months time.

3. POLICY CONTEXT

- 3.1 The report of the government's Children and Young People's Mental Health Taskforce, "Future in mind - promoting, protecting and improving our children and young people's mental health and wellbeing", was launched on 17 March 2015 by Norman Lamb MP, the then Minister for Care and Support. It provides a broad set of recommendations across comprehensive CAMHS that, if implemented, would facilitate greater access and standards for CAMHS services, promote positive mental health and wellbeing for children and young people, greater system co-ordination and a significant improvement in meeting the mental health needs of children and young people from vulnerable backgrounds.
- 3.2 In August 2015, NHS England published guidance on how Local Transformation Plans should be developed, assured and publicised. There is a requirement for system wide transformation over 5 years. Reading's Health and Wellbeing board approved Reading's plans in Oct 2015 which has enabled additional recurrent funding to be released from NHS England to the West of Berkshire Clinical Commissioning Group (CCG) as noted in section 9 of this report.
- 3.3. Berkshire West CCGs, with support from all 3 Local Authorities hold a joint meeting once a month to oversee and support the implementation of the Local Transformation Plans. This meeting is now called the 'Berkshire West Future in Mind' group and includes a broad representation of providers of services e.g. BHFT, voluntary sector partners, RBFT, Schools, Healthwatch as well as the University of Reading.

- 3.4 The Local Transformation Plan for Reading is built around the national Future in Mind policy document as well as the comprehensive local CAMHS engagement work undertaken in 2014 to identify local needs. Themes include
- Commissioning the use of evidence-based public mental health interventions which have been shown to provide significant economic savings
  - Taking an integrated partnership approach to defining need, commissioning and delivering services.
  - Ensuring the delivery of mental health promotion and prevention through universal services such as Health Visiting, school nursing and the school pastoral roles.
  - GPs being able to identify and refer early (before specialist CAMHS is required) to a wider range of services which support mental health and wellbeing.
  - Commissioning services that meet NICE guidance
  - Delivery of the new access and waiting time standards for Eating Disorders and Early Intervention in Psychosis.
  - Providing practical support for families and schools for children with ASD and ADHD.
  - Improving longer term therapeutic input for children with enduring mental health or attachment issues who do not meet the criteria for more specialist medical support.
  - Expansion of tier 2 and 3 services through Educational Psychologists and Primary Mental Health Workers (PMHWs). Investment may be needed in this area but it will help to prevent escalation of difficulties.
  - Improving services for children and young people who present to Royal Borough Hospital Foundation Trust (RBHFT) emergency department in crisis. Reducing the number of children and young people whose needs escalate into crisis.
  - To build a stronger awareness in Reading's secondary schools around understanding, identifying and talking about emotional health and well-being issues, covering areas such as attachment difficulties, bullying and self-harm. There has been some recent development in this area. Leaflets were produced and sent to secondary schools for distribution to all pupils. A help line was set up for Children and Young People to use but it appears there has not been the marketing of this service that is needed to raise awareness of it and what it offers as it is currently drastically under-used

#### 4. PROGRESS TO DATE

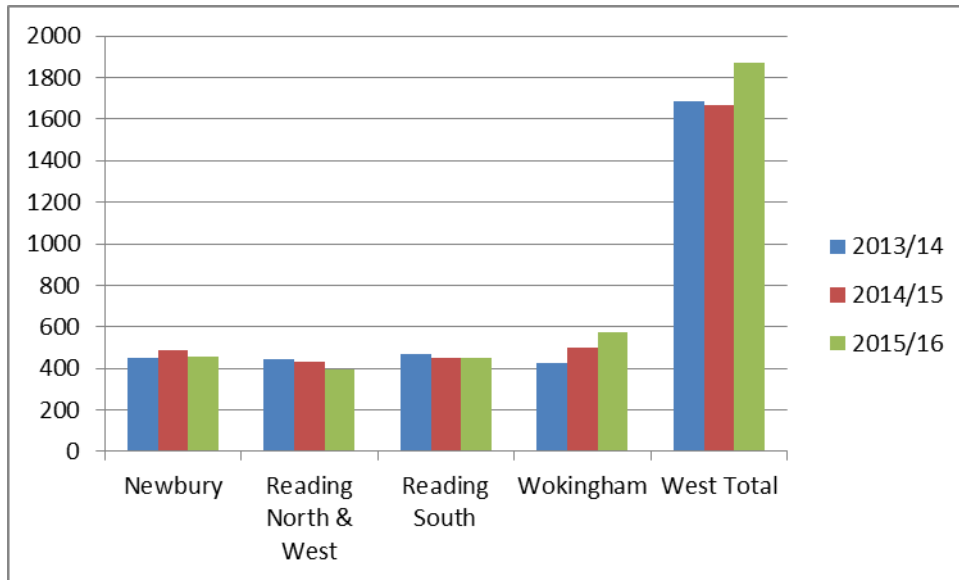
- 4.1 The JSNA document which describes CAMHS has been refreshed. The updated document will be made available to the Health and Wellbeing Board and partners by Public Health in March 2016.
- 4.2 Key recommendations are outlined in the document but fit well with the strategic direction of Reading's Transformation Plan. Berkshire West has committed an additional £1m recurrently and an additional £0.5M this financial year to BHFT to mainly address waiting times, in response to the Action plan point 1 & 3.
- 4.3 Targets have been agreed between the CCG and BHFT linked to this investment. These targets are set to reduce waiting times to:
- 95% of young people on all but the ASD pathway will access their service within 6 weeks by March 2016.
  - 95% of young people on the ASD care pathway will access their service within 12 weeks by March 2016.
- 4.4 All partners agree that these service improvements are needed, but there is recognition that these are challenging targets. For example nationally the average waiting time for ASD assessment is 42 months. Referral rates for ASD diagnosis continue to rise locally. Data from the NHS Benchmarking network suggests that referrals and average waiting times for CAMH services have increased year on year since the report was first published in January 2011. Data from the 2013 survey (latest published) gives the

median wait time for urgent access to CAMHS as 3 weeks, with the average wait for routine access at 15 weeks.

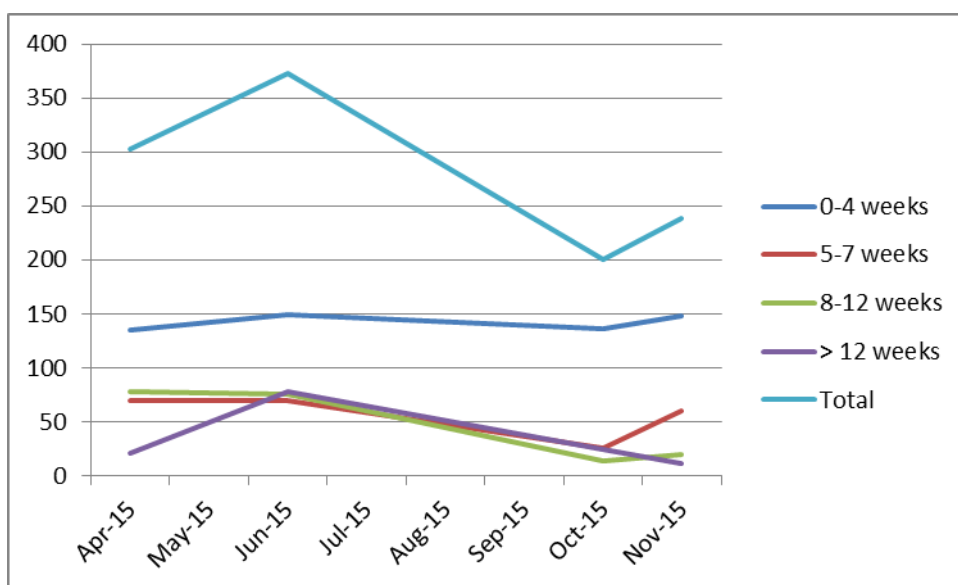
4.5 The action plan in Appendix 2 has been updated from October 2015 with progress. Noted points of progress are highlighted in points 4.6 to 4.17 below.

4.6 In December 2015 Tier 3 Berkshire West (i.e. Reading, Wokingham and West Berkshire Local Authorities) data was as follows.

4.7 Chart 1 below provides a comparison of Referrals, Year to Date Berkshire West CCG's.



4.8 Chart 2 below outlines a trend of Waiting Times into a service for tier 3 CAMHs across the Berkshire West, seen as a total as well as broken into bands of waiting times. Of note the total figure is reducing, with a small spike from October. At the time of writing there is a concern that some clinical activity has not been captured on the data recording system so the figures quoted for October and beyond may be better than indicated. Work is being done to ensure that all the data is captured accurately for the end of the financial year.



Note that all children and young people waiting in excess of 6 weeks in CPE are routine referrals. All have had contact from the team and are being actively managed to enable completion of triage assessment.

- 4.9 Currently the longest waits continue to be in the ASD diagnostic pathway which accounts for 55% of current waiting list. As of December 2015 there were 980 children waiting for an ASD diagnosis out of a total of 1766 children and young people on the CAMHS waiting list.
- 4.10 It is though clear that the ambitious targets, as referenced in 4.3 are not being met. Therefore the CCGs have taken contractual action with BHFT to ensure that a robust recovery plan is in place to achieve the waiting time targets.
- 4.11 While waiting time targets have not yet been achieved there have been a number of quality improvements.
- 4.12 The Common Point of Entry is now open 8am until 8pm enabling quicker triage of new referrals and an improved urgent care response
- 4.13 Response to urgent care needs and escalating risk amongst children and young people has been improved. Up to December 2015 there was a 30% reduction year to date in self-harm presentations to A and E at RBHFT. This is against the national trend. However in January 2016 there was a significant increase in urgent care activity at RBFT. The CAMHS service responded swiftly and worked in partnership with RBHFT staff to ensure that the young people received timely help.
- 4.14 Up to the end of October 2015 there was a 47% reduction in the number of under 18's admitted to Prospect Park Hospital. There was also a reduction in the number of young people placed in Tier 4 CAMHS beds compared with the previous year.
- 4.15 The complexity of cases has increased over the past year with a 77% increase in the number of Looked After Children receiving treatment in CAMHS and a 107% increase in the number of children on a Child Protection Plan accessing the service. There has been an increase in the number of children and young people being discharged from Tier 4 beds to the community service. This increase in complexity brings an associated increase in interventions from the multidisciplinary teams, with many young people requiring care from 2 or more clinicians in the team and more time spent on multiagency work, which has had an impact on wait list reduction capacity.
- 4.16 Autism Berkshire has been providing workshop sessions to support families who are on the ASD diagnosis waiting list. These workshops are designed to practically support families with emerging behaviour needs for their children and discuss strategies to manage whilst they are waiting for treatment. This has been funded through the Future In Mind allocation.
- 4.17 The Reading perinatal pilot project has almost concluded and the recent national drive to improve the service offer to women with perinatal mental health issues is well timed. Berkshire West CCGs have commissioned an enhanced perinatal mental health service which will commence from April 2016. An online support service (SHaRON) for women experiencing perinatal mental health issues opened in December 2015. Learning from the Reading perinatal pilot project will be aligned with the new enhanced perinatal service.
- 4.18 Training continues to be offered from the Primary Mental Health Workers and Educational Psychologist to both schools and other parts of the children's workforce. In particular two local schools have invested in whole school Emotional First Aid training. PPEPCare (Psychological Perspectives in Education and Primary Care) training will be offered to schools and the children's workforce during 16/17. PPEPCare has already been delivered to GPs and some practice staff. PPEPCare has been developed by

Thames Valley Academic Science Network in partnership with the Charlie Waller Trust at the University of Reading. Training modules have been written and developed by national experts in various CAMHS conditions as well as service users.

- 4.19 Transformation Funds will be used to increase the number of Webster Stratten evidence based parenting interventions available to families with children aged 4- 8 years of age with conduct disorder. This work forms part of a wider research project being led by University of Reading. There are opportunities to not only improve availability of support for families but to upskill local staff through close links with academic experts in the field.
- 4.20 Learning from the Psychological Medicines Service for under 18's in the Emergency Department of RBHFT, early results from CAMHS extended opening hours (8am until 8pm) and a trial of a short term care team to prevent young people from escalating into crisis has led to the development a 12 month CAMHS CORE 24 Urgent Care Response Team pilot project, funded through Future In Mind. The project plan has been developed jointly by BHFT and RBHFT. The pilot aims to develop a flexible and responsive service to meet the needs of young people under the age of 18 years who experience a mental health crisis. The project aims to prevent presentations to emergency department, Paediatric wards or Place of Safety where it is safe to do so and when an admission is required, to facilitate safe and timely discharge through the provision of short-term intensive community support. This pilot will commence from March 2016. It will run for 12 months in order to capture seasonal variation in crisis presentations amongst children and young people.
- 4.21 An enhanced community eating disorders for children and young people is being commissioned across the whole of Berkshire. This uses ring fenced recurrent funding from NHSE. The service specification reflects the nationally required response timescales and evidence based model of care. The new service will commence from February 2016.

## 5. FUTURE OPPORTUNITIES

- 5.1 With the new national requirement for system wide transformation of emotional and mental health services for children and young people over a 5 year period comes the opportunity to write a local, partnership based long term plan to address and tackle complex and important issues of service improvement in Tiers 1 - 4 CAMHS.
- 5.2 Reading's Transformation plan has a clear objective to integrate and build resources within the local community so that emotional health and wellbeing support is offered at the earliest opportunity.
- 5.3 As the plan becomes operational the intended outcomes will be that children and young people and their families are more resilient. There will be fewer children and young people escalating through to urgent or specialist interventions. There will be a positive impact on the perinatal mental health of mothers in the early years of children. There will be more young people reporting positive outcomes at a universal and targeted intervention level, including a positive experience of their services.
- 5.4 The plan expects these outcomes to be reached over the next 4 years;
  - Children and young people mental health needs will be identified early, especially in universal services such as schools, setting and GPs
  - Help will be easy to access, it will be coordinated, including the young person and family in the decision making process and provided in places that make sense to them.
  - If support is required at a targeted or specialist/ urgent level that this is provided quickly, at a high quality level and safely.

## 6. NEXT STEPS

- 6.1 There is close working across a network of partners, including Reading Borough Council is Berkshire West CCG, local Schools, the voluntary sector and other key partners to finalise the 2016/17 priorities in the plan. The current priorities are:
- Reduce waiting times
  - Develop the role of schools, primary care, early year's settings, wider children's workforce to identify and respond to emerging mental health needs
  - Plan how we make the system easier to navigate, through mapping the partnership collective resilience, prevention and early intervention offers.
  - Review current Common Point of Entry and access arrangements into CAMHS services, ensuring access for the most vulnerable
  - Consider whether to commission a crisis home treatment or enhanced step up/step down service following the CAMHS CORE 24 Urgent Care Response Team pilot project
  - Enhance provision across the system for children and young people with ASD and Learning Difficulties
  - Roll out of enhanced perinatal service
  - Implement enhanced community Eating Disorders service

## 7. COMMUNITY ENGAGEMENT AND INFORMATION

- 7.1 A significant engagement exercise was undertaken in early 2014. There will be future consultation planned with service users as part of the Transformation plan process.
- 7.2 It is crucial to build on the July 2015 Children's Trust workshop, as reported in October 2015 to the Health and Wellbeing board.
- 7.3 The transformation plan will be looking to engage young people in the many co-design opportunities for new service developments and delivery.

## 8. LEGAL IMPLICATIONS

- 8.1 There are no legal implications for this report.

## 9. FINANCIAL IMPLICATIONS

- 9.1 Current Tier two funding arrangements for 2015-16 is outlined in the table below. This is a mix of directly provided Local Authority provision as well as funded work in the voluntary sector. This information does not account for all the provision in tier two but the majority that is funded by the Local Authority and the CCG.

Service	Expenditure
Primary Mental Health Workers	£ 179,800
Educational Psychologists	£ 495,150
Youth Counselling service (Commissioned)	£ 100,000
Reading Mencap	£ 29,500
Berkshire Autistic Society	£ 15,800
Parenting Special Children	£ 6,500
Total	£ 826,750

- 9.2 Current Tier three funding arrangements for 2015-16 are outlined in the table below. This is solely funded from the NHS Berkshire West CCGs.

Service	Allocation
Tier 3 (specialist CAMHs) funding arrangements from Berkshire West CCGs as a whole, that is, Newbury & District, North & West Reading, South Reading, and Wokingham CCGs.	£ 6,166,360 This is the total 15/16 allocation for specialist (Tier 3) CAMHs. It excludes the funding for the Tier 4 Berkshire Adolescent Unit which is now commissioned by NHS England. The figure includes an additional £1M recurrent Parity of Esteem investment to reduce waiting times. There is up to a further £500K available non recurrently in order to reduce waiting times through use of agency staff while new posts are recruited committed for 2015-16
Community Eating Disorders- this will be a pan Berkshire service due to the population size required.	£ 249,535- Berkshire West
Liaison Mental Health - successful bid for non-recurrent System Resilience funds	£191K To pump prime a CAMHs crisis support pilot project

9.3 Additional CCG funding for perinatal mental health services and Early Intervention in Psychosis (age group 14 years and above) have been made available which are outside the scope of this report.

9.4 The recurrent Mental Health transformation funding will be used to improve a range of outcomes for children and young people mental health and spent across tiers 1 to 3 with a range of partners. The money outlined below in the bullet points is released to the 4 named CCG's and managed by Berkshire West CCGs.

- North and West Reading £138,460
- South Reading £151,892
- Wokingham £188,994
- Newbury and District £145,265

## 10. BACKGROUND PAPERS

10.1 Future in Mind paper;

<https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people>

10.2 Transformation plan guidance;

<http://www.england.nhs.uk/wp-content/uploads/2015/07/local-transformation-plans-cyp-mh-guidance.pdf>

Links to Local Transformation Plans on the CCG websites (includes and easy read version and Frequently Asked Questions section)

<http://www.nwreadingccg.nhs.uk/mental-health/children-and-young-people>

<http://www.southreadingccg.nhs.uk/mental-health/camhs-transformation>

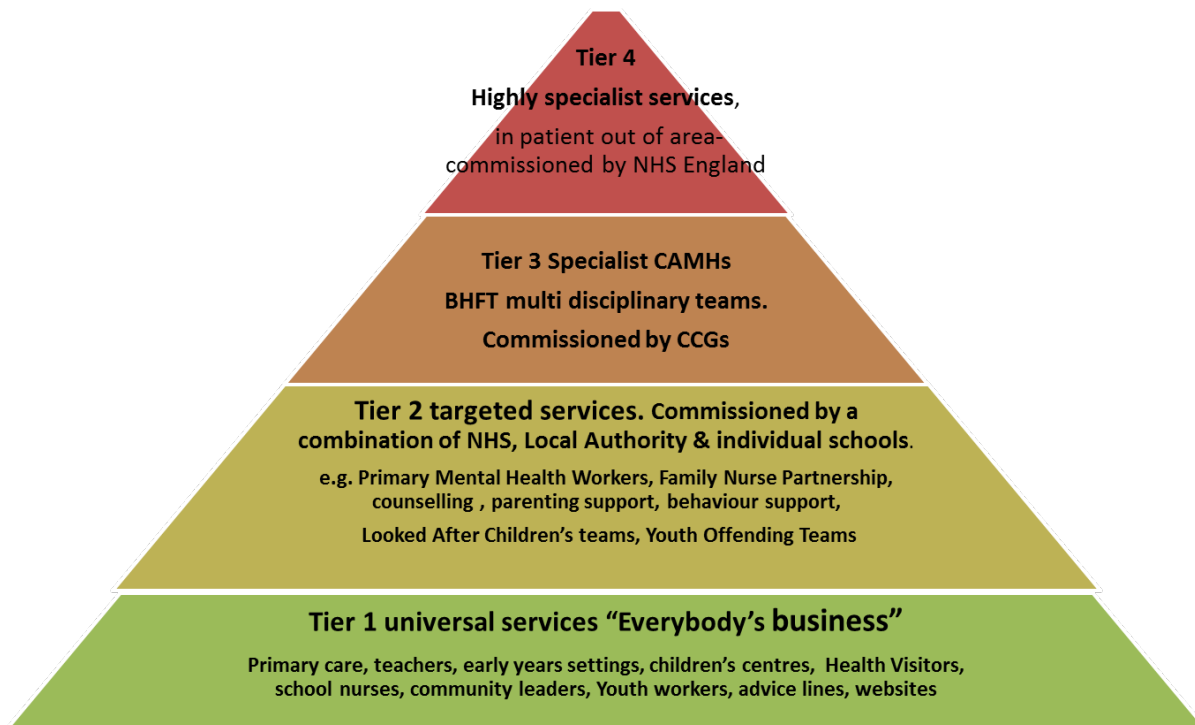
## Appendix 1 - Acronyms used in the report

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
DoH	Department of Health
HV	Health Visitor
YOS	Youth Offending Service
ADHD	Attention Deficit Hyperactivity Disorder
RBHFT	Royal Berkshire Hospital Foundation Trust
ELSA	Emotional Literacy Support Assistants
PMHW	Primary Mental Health Workers



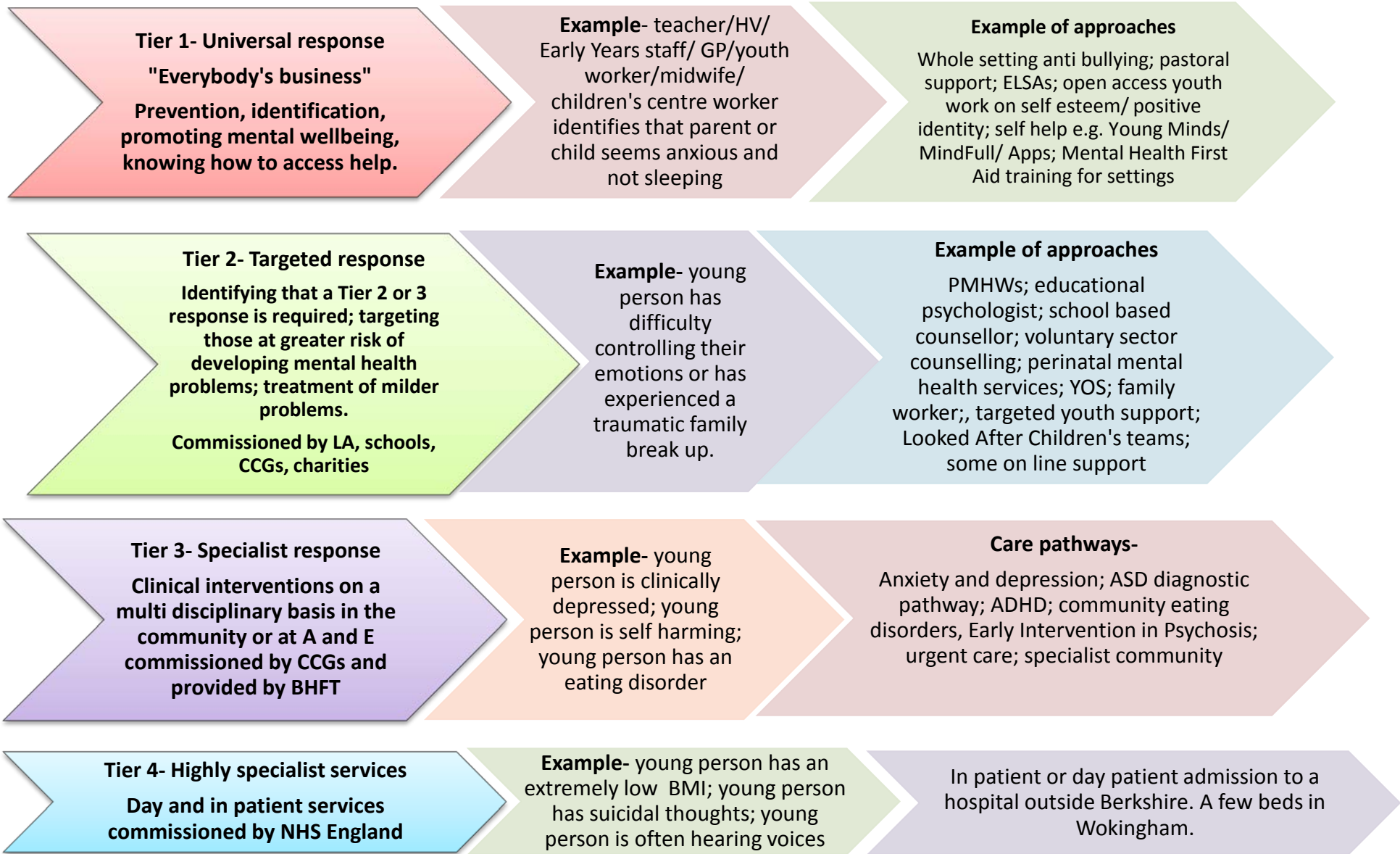
## Appendix 2

### 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**



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 – JANUARY 2016
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	Now complete	<ul style="list-style-type: none"> <li>Winter resilience work completed. Key learning is the need to improve urgent care and crisis response lead to CPE going live in October with 8 to 8 opening hours, Monday to Friday and the Short Term care team in place to tackle urgent care needs of children on the waitlist.</li> <li>This work has now been developed into a CAMHs Core 24 Urgent Care Response Team pilot project</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 partially complete and needs to be taken into next year's plan.	<ul style="list-style-type: none"> <li>School link project has been approved to funded from the Transformation fund. This will focus on schools ability to identify, provide support or know when and how to access support from targeted or specialist providers. This is the first step towards designing an alternative stepped care approach.</li> </ul>
		Consideration of business case to increase investment into Tier 3 CAMHs.	BHFT and CCGs	Now complete	<ul style="list-style-type: none"> <li>Business case approved and additional £1m recurrently and £0.5m non-recurrent funding allocated</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, partially complete and needs to be taken into next year's plan.	<ul style="list-style-type: none"> <li>See bullet point on schools link project above that will similarly contribute to this action.</li> <li>Workshops to support families on ASD waiting list have started with Transformation funding support, provided by Autism Berkshire</li> <li>BHFT has started to integrate physical and mental health pathways for children.</li> </ul>
2	Increase Tier 2	To discuss how existing and new resources and	Local Authority	Now complete	<ul style="list-style-type: none"> <li>Children Trust workshop help in July 15 on</li> </ul>

	provision, to ensure timely 'early intervention', reducing escalation of mental health problems and reducing the need for specialist Tier 3 and 4 services.	services at Tier 2 become a shared Early Help responsibility across the LSCB partnership.	(children's services)		<p>this topic</p> <ul style="list-style-type: none"> <li>LSCB has identified this as a priority for 2016.17 which will further support this area of work going forward.</li> </ul>
		<p>Pilot and research studies are underway to</p> <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>	<p>BHFT and CCGs</p> <p>Local Authority (Public Health)</p> <p>LA (Public Health) with CCGs. BHFT</p>	<p>Spring 2016</p> <p>June 2015 - not completed this year</p> <p>Complete</p> <p>Complete but ongoing nature of the work needs to be taken into next year's plan</p>	<ul style="list-style-type: none"> <li>Young SHARON for parents and carers will be launched in Spring 2016. SHaRON will provide an online platform for workers who have attended PPEPCare training during 2016. Perinatal SHaRON is open.</li> <li>CAMHs App continues to being trailed in 3 Slough and co work with National provider not concluded.</li> <li>Service mapping complete. Training offer piloted and will be continued. Perinatal mental health service has been commissioned from BHFT and will commence April 2016</li> <li>Training continues from BHFT in PPEPCare for GP surgeries (60 participants).</li> <li>RBCs PMHW service continues to provide other workforce training. PMHWs will be training as per BHFT in PPEP care will transformation fund training.</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	Now complete	<ul style="list-style-type: none"> <li>Investment agreed, see point 1 above.</li> <li>Recruitment drive underway in BHFT to clear waitlists as this is the first priority. More collaboration will be enabled later.</li> </ul>
4	Improve support in schools.	A pilot project on school based management of ADHD.	BHFT and LA (children's services)	Dec 2015 – not completed this year	<ul style="list-style-type: none"> <li>Pilot paused in single school in Reading and project is being redesigned in light of learning from pilot and is anticipated to restart early in 2016 dependant on staff</li> </ul>

					recruitment.
		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)	Now complete	<ul style="list-style-type: none"> <li>Package of support is on school websites for schools to purchase range of support including formal supervision, training for new and existing ELSAs</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-partially complete and needs to be taken into next year's plan.	<ul style="list-style-type: none"> <li>Training is taking place on an ongoing basis from the CATs</li> <li>Two schools have invested in whole school Emotional First Aid training. More planned.</li> <li>PEPP Care training will be offered as part of the School link project.</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	Now complete	<ul style="list-style-type: none"> <li>Reading local offer website has up to date information on community, LA and health Emotional and Mental Health services.</li> <li>BHFT have launched a new CAMHS website and work on the website continues</li> </ul>
		Following engagement with service users, BHFT to update information, resources and the website.	BHFT	Now complete	<ul style="list-style-type: none"> <li>Engagement with service users to develop website and resources completed and used in website improvements. Engagement continues that feeds website improvements.</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> <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</li> </ul>	BHFT	All now complete	<ul style="list-style-type: none"> <li>Our service users have helped us to develop a set of seven information sheets about our service. This focuses on pre-referral information sheet, information on what to expect at CAMHS, and information about each pathway</li> <li>Transparent information about our waiting times, the reasons for these, and the steps we are taking to reduce them is now available online. Our administration/reception team have been briefed on the information that service users have informed us is most helpful to</li> </ul>

		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.			<p>them when they make telephone calls to CAMHS.</p> <ul style="list-style-type: none"> <li>• CAMHS web, an online portal for service users, is now being introduced across the service allowing young people to access tools to enhance therapeutic communication, disclosure and collaborative practice. The tools also provide a self-help element. We are the first CAMHS service to introduce these tools across the entire service</li> </ul>
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	All actions now complete	<ul style="list-style-type: none"> <li>• Participation group have generated many pieces of artwork depicting positive and uplifting messages and images that they feel are helpful to other service users.</li> <li>• The artwork, which takes the form of painted canvasses, mounted quotes and other decorative features, is now on display at Reading CAMHS. The group have also begun to develop smaller (A5) pieces that will be used to populate an attractive tree stencil which they have selected for the corridor area of Reading CAMHS.</li> <li>• We have worked with our service users to decide which information/publicity about other issues and services they find most helpful.</li> <li>• Service users have helped us make decisions about the mental health information they would like to see within our waiting areas. There is now a folder of information sheets covering all of the issues that are treated at CAMHS in formats, aimed at both young people and parents, within all of our CAMHS localities.</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 – partially complete and needs to be taken into next year's plan.	<ul style="list-style-type: none"> <li>• CCG have awarded grants to voluntary sector organisations who support young people with ASD namely Autism Berkshire, ASD Family Help (predominantly Wokingham families), Children on the Autistic Spectrum, Young People's Project (CATSYPP), Parenting Special Children &amp; Reading Mencap</li> <li>• Will be a focus in Transformation Plan going forward.</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	Now complete	<ul style="list-style-type: none"> <li>• CPE is now operating an 8 to 8 service through the week.</li> <li>• Short term care team in place supporting children on the waitlist that need urgent immediate support.</li> <li>• Evening and weekend access continues to be through the RBH.</li> <li>• CAMHs on call consultant available out of hours.</li> <li>• CAMHs Core 24 Urgent Care Response Team pilot project starts from March 2016- enhanced service available 7 days a week.</li> </ul>
		Secure staff to be able to offer this service.	BHFT	Now complete	<ul style="list-style-type: none"> <li>• See above as update the same.</li> </ul>
		Evaluate effectiveness of the service with a view to mainstreaming this with recurrent funds.	BHFT and CCG	Complete- full pilot commissioned	<ul style="list-style-type: none"> <li>• CAMHs Core 24 Urgent Care Response Team pilot project starts from March 2016- enhanced service available 7 days a week</li> </ul>
		Enhance the Early Intervention in Psychosis service for young people.	BHFT	Now complete	<ul style="list-style-type: none"> <li>• Service now in place</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	Complete- 12 month pilot for under 0-18's commissioned.	<ul style="list-style-type: none"> <li>• CAMHs Core 24 Urgent Care Response Team pilot project starts from March 2016- enhanced service available 7 days a week</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	Crisis Care Concordat Action plan being refreshed for 16/17	<ul style="list-style-type: none"> <li>• Crisis Care Concordat Declaration was signed off Dec 2014</li> <li>• Action plan published and regular review of work begin. Street and ambulance triage pilot service in place during 15/16.</li> <li>• Initial learning from the enhanced service for 16-18 year olds has led to CAMHs Core 24 Urgent Care Response Team pilot project for under 18's. Previous work on 16 and 17 year olds has enabled more rapid assessment when child presenting at A&amp;E; that children are being discharged/ transferred more quickly and appropriately and improved confidence across RBH staff in mental health issues in young people. See above as same update</li> </ul>
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	Complete	<ul style="list-style-type: none"> <li>• Berkshire Adolescent unit is now a 24 hours a day, 7 days a week, for 52 weeks a year service for vulnerable young people</li> </ul>
		To increase the number of Tier 4 beds available in Berkshire	NHS England BHFT	Complete	<ul style="list-style-type: none"> <li>• Building work is complete</li> <li>• Year to date fewer Berkshire young people have required Tier 4 admission.</li> </ul>