

Child and Adolescent Mental Health Services (CAMHS)

Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

Author:	Associate Director – Out of Hospital Care, Swindon CCG Head of Service, Swindon, Wiltshire & Banes, Oxford Health NHS FT
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Children's Health, Social Care and Education O&S Committee with an update on the position of the Child and Adolescent Mental Health Service (CAMHS) in Swindon.
- 1.2 The CAMHS service in Swindon is provided by Oxford Health NHS Foundation Trust (OHFT).
- 1.3 Mental health need is growing year on year. One in four of the population experience problems at some point in their lives. Over half of the mental health problems in adults start before they are aged 14, and 75% by the time they turn 18. Mental health services for children and young people have never been so crucial to the future wellbeing of adults and their families.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.

3. Detail

Waiting Time Update

- 3.1 In Swindon, the referral rates for children and young people with moderate to severe mental health needs is increasing in line with national trends. In addition, clinicians and other professionals regularly report that the young people they see, are now much more complex and exhibiting higher levels of risk and need than they were even five years ago. Increased referrals, and the need for more intensive therapeutic interventions has had a direct impact on growing waiting times. Oxford Health FT has implemented a number of strategies to ensure all new referrals are seen in the shortest possible time including a period of Saturday clinics, additional locum staff and refinement of assessment processes and clinics. The demand continues to grow however and requires wider whole system transformation across all agencies as described in Future in Mind:

Child and Adolescent Mental Health Services (CAMHS)

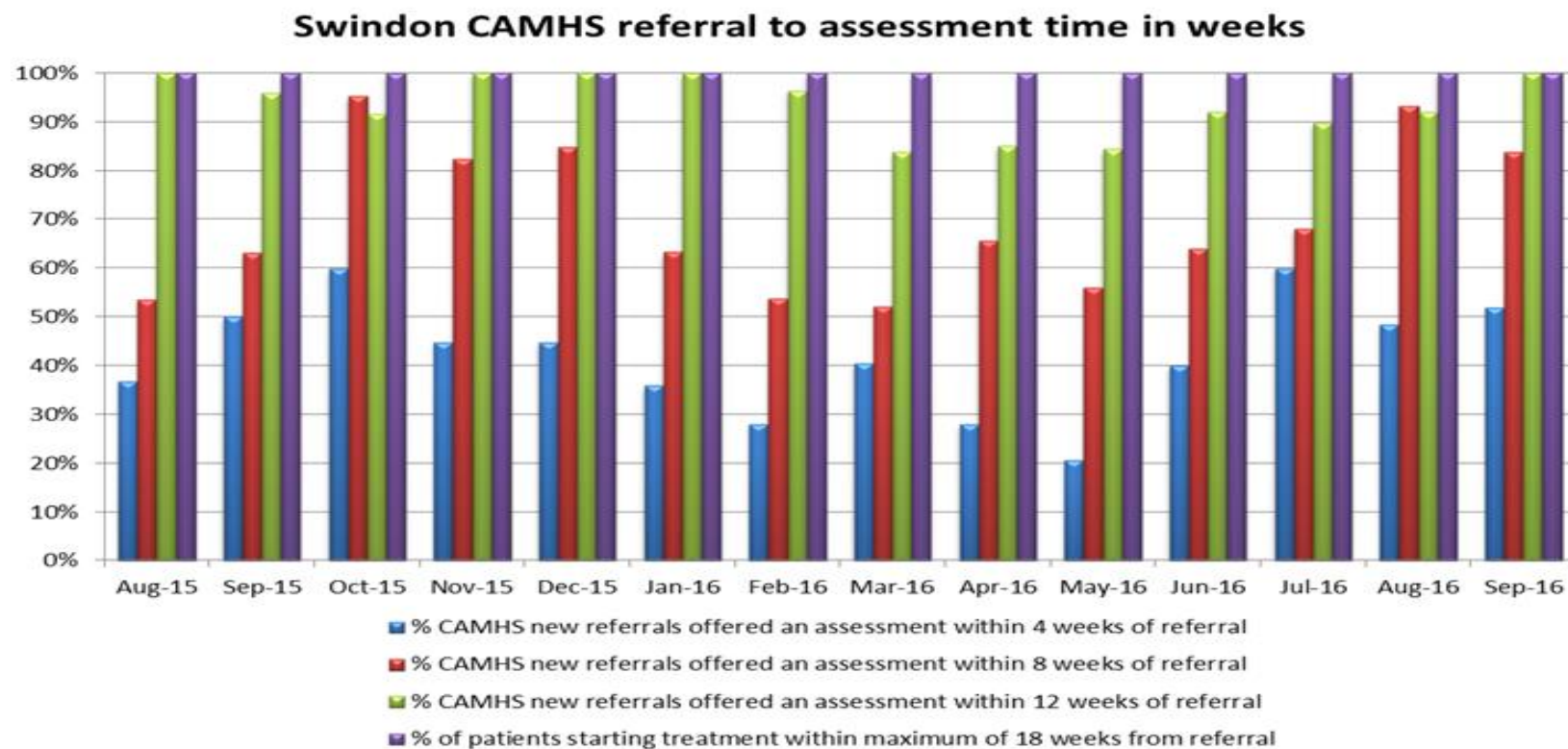
Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf

3.2



Further information on the subject of this report can be obtained from Robin Butcher, 01793 683700, communications@swindonccg.nhs.uk

Child and Adolescent Mental Health Services (CAMHS)

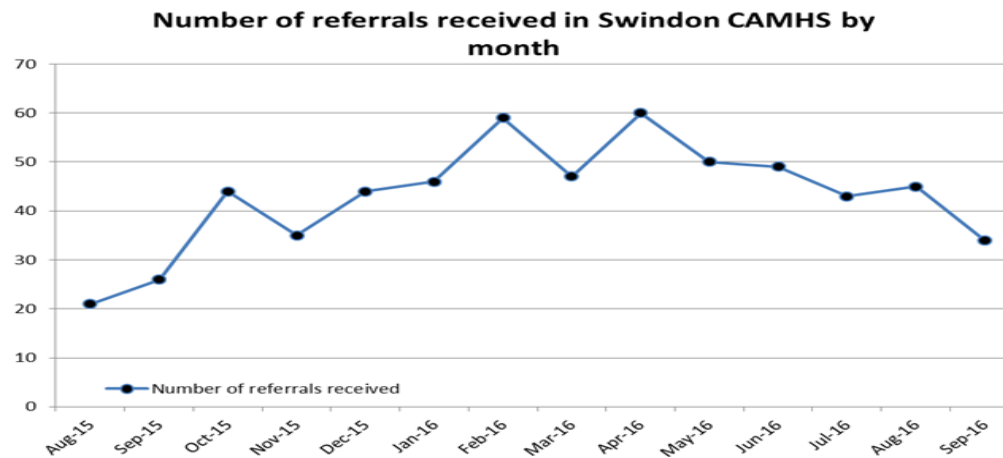
Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

Swindon referral to assessment times, August 2015 to September 2016

Time from referral to assessment	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
% CAMHS new referrals offered an assessment within 4 weeks of referral	37%	50%	60%	45%	45%	36%	28%	41%	28%	21%	40%	60%	48%	52%
% CAMHS new referrals offered an assessment within 8 weeks of referral	54%	63%	95%	82%	85%	63%	54%	52%	66%	56%	64%	68%	93%	84%
% CAMHS new referrals offered an assessment within 12 weeks of referral	100%	96%	92%	100%	100%	100%	96%	84%	85%	84%	92%	90%	92%	100%
% of patients starting treatment within maximum of 18 weeks from referral	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



Further information on the subject of this report can be obtained from Robin Butcher, 01793 683700, communications@swindonccg.nhs.uk

Child and Adolescent Mental Health Services (CAMHS)

Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

Swindon CAMHS referrals received by month, August 2015 to September 2016

Month	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Number of referrals received	21	26	44	35	44	46	59	47	60	50	49	43	45	34

CAMHS Transformation Update

Eating Disorders

- 3.3 The new Swindon, Wiltshire and BaNES eating disorders service for children and young people is now fully recruited following investment from the three CCGs. This has enabled a doubling of clinical capacity in all areas and embedding of Emergency Department (ED) trained staff in outreach teams. Specialist ED staff are now undertaking additional training in Single and Multi-Family Therapy training, alongside other evidenced based models cited in the new national Access and Waiting Time Standards
<https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-guid.pdf>
- 3.4 The new service will provide clinics in Swindon, Marlborough, Salisbury, Melksham and Keynsham ensuring capacity every day for emergency, urgent and routine assessments. Young people will be offered a specialist multi-disciplinary assessment nearest to their home, according to the urgency of the referral. Intensive home based support will also be offered to families to support home feeding and increase skills within families. Families will also be offered multi-family therapy groups alongside individual therapy for young people. Intensive community support is aimed at reducing the debilitating and sometimes fatal impact of an eating disorder, and reduce the need for admission to hospital. Paediatric colleagues in the acute hospitals are directly engaged in developing the new model. The new service is due to be launched fully in 2017.

CAMHS Transformation

- 3.5 As part of the Swindon CAMHS Transformation Board, Oxford Health FT are working closely with TaMHS to streamline access to services via the single point of access (SPA) and reduce waiting times for assessment and treatment.
- 3.6 An initial series of meetings have commenced to review the pathways, demand, systems, criteria and interface between TaMHS and CAMHS with a view to streamlining the systems and reducing hand offs for young people. This will be achieved through:

Child and Adolescent Mental Health Services (CAMHS)

Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

- A shared assessment process and format
- Daily screening and triaging of referrals to the relevant service
- Common documentation and processes
- Joint supervision and training
- Shared clinical pathways

3.7 The first step in this change process will be to commence joint assessment clinics. CAMHS Transformation funding has been released during 2016/17 to increase capacity by 2.0 wte per service in TaMHS and CAMHS. Following successful recruitment in OHFT, CAMHS will have the required resources and clinical expertise to commence the joint assessment clinics in January 2017 (subject to parallel recruitment in TaMHS).

3.8 CAMHS are also developing psychological evidence based brief interventions for those young people with mild to moderate mental health problems. The training will be offered across both services. This will reduce the need for moving young people between services unless a specialist intervention is required. Joint supervision by CAMHS will also be made available.

3.9 Streamlining of processes, criteria, documentation and other systems is subject to further discussion and agreement between respective service leads.

3.10 Supporting Information

3.10.1 None

4. **Alternative Options**

4.1 None.

5. **Implications, Diversity Impact Assessment and Risk Management**

Financial and Procurement Implications

5.1 None.

Legal and Human Rights Implications

5.2 None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

Child and Adolescent Mental Health Services (CAMHS)

Children's Health, Social Care and Education

Overview & Scrutiny Committee

Date: 9 November 2016

5.3 None.

Diversity Impact Assessment

5.4 None.

Risk Management

5.5 None.

6. Consultees

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None.

8. Appendices

8.1 None.