

Agenda item

Meeting	Plymouth Children and Young People's Trust Board				
Date	15 June 2012				
Title	Response to recommendations from the Task and Finish Group on Children and Young People's Emotional Wellbeing and Mental Health and update on Plymouth CAMHS External Review				
Responsible Officer	Paul O'Sullivan, NHS Plymouth				
Purpose of Item	 Review progress against the Task and Finish Group on Children and Young People's Emotional Wellbeing and Mental Health Action Plan; and Receive an update on the findings and recommendations of the Plymouth CAMHS External Review. 				
Recommendations	 The following recommendations are made: Progress against the Task and Finish Group on Children and Young People's Emotional Wellbeing and Mental Health Action Plan is noted and further actions agreed; and The Board approves monitoring of the Plymouth Community Healthcare action plan developed in response to the Plymouth CAMHS External Review to be undertaken the CAMHS subgroup of the NHS Plymouth PCH Contract and Performance Monitoring Meeting. 				
Consultation Record					
Meeting Notes:					

Response to recommendations from the Task and Finish Group on Children and Young People's Emotional Wellbeing and Mental Health and update on Plymouth CAMHS External Review

I. Background

- 1.1 On 9 December 2011 the Children's Trust accepted the recommendations of the Overview and Scrutiny Task and Finish Group on Emotional Wellbeing and Mental Health. An action plan was developed and the responsibility for this plan was delegated to NHS Plymouth as the lead partner for this service area. Additional coordination will be provided through PCC's Children's Commissioning team.
- 1.2 The Action Plan is attached with a full report on progress to meet the recommendations (Appendix One).
- 1.3 A report was submitted to Cabinet on 26 March 2012, with the request that Cabinet agree recommendations from Scrutiny Task and Finish and request Children and Young People Overview and Scrutiny Panel to continue to monitor progress against the action plan.

Summary of key areas of progress:

2. Waiting times and service improvement for specialist intervention

- 2.1 NHS Plymouth have worked with Plymouth Community Healthcare (PCH) to ensure compliance with the national standard of no more than an 18 week wait between referral and treatment in the Plymouth Child and Adolescent Mental Health Service (CAMHS).
- 2.2 PCH achieved this standard by the end of March 2012 and have maintained compliance for the service overall to date. However, it should be noted that there is variation in performance at sub-specialty level, as follows:

Team	% treated < 18 weeks (April 2012)
Plymouth MDT	94%
CAMHS Neurodevelopmental	79%
Primary Mental Health Workers	100%
CAMHS Outreach Team	100%
Early Years (Infant Mental Health)	100%
Children in Care CAMHS	100%
Severe Learning Disability CAMHS	100%

- 2.3 It was agreed that Plymouth Community Healthcare would commission an external review of the service, by the high performing Oxford Health NHS Foundation Trust, to examine the model of service delivery including aspects of clinical practice, and sustainability. The external review report was circulated to NHS Plymouth and PCC Commissioners on 25 May 2012. The review had been reported back to the members of the CAMHS teams by the Oxford team and a programme commenced within the organisation prior to sharing the recommendations with commissioners. PCH is taking forward an action plan in response to the external review recommendations and will be reporting to commissioners on a monthly basis, against elements of the plan.
- 2.4 Part of the terms of the review were to identify if the overall resource available was sufficient for the current demand and whether the current model of delivery maintained children within the service for longer than other comparable services. It is important to note that the report concluded that [paraphrase] 'there is sufficient resource within

Plymouth CAMHS but that the service cannot meet demand if it continues in its current form. There are some patients being seen for overly long periods which is having a considerable impact on capacity within the service [and] the framework that the service is operating within is not appropriate for a specialist CAMH Service.'

- 2.5 The comments in the conclusion of the review support a full redesign of the service, taking into account the various recommendations provided.
- 2.6 The findings of the report have been instrumental in informing how service performance may be improved by PCH, along with changes to the service model and clinical practice. These recommendations will be acted upon, with the involvement of other partner agencies and organisations as appropriate. However, the findings have raised concerns for commissioners about performance in the service and therefore the improvement action plan will be subject to regular reporting and monitoring of progress by commissioners. The key findings of the report and associated recommendations can be summarised as follows:

Finding	Recommendation		
Lack of referral management processes	Single point of access for referrals should be		
	implemented, with clearly developed		
	thresholds and eligibility criteria put in place.		
An "overly complicated" service model.	Service model should be revised (this would		
	include a skill mix review and changes to the		
	existing clinical management structures).		
Capacity and demand modelling within the	The operationalisation of CAPA should be		
service (based on the Choice and	reviewed as a matter of urgency.		
Partnership (CAPA) approach) has not been			
wholly effective.			
Absence of performance management	·		
framework at service level.	be developed to support management of the		
	service.		
A requirement to review the current clinical	The implementation of an Operational and		
governance arrangements within the	Clinical Governance group, bringing together		
service.	managers and clinicians.		
A requirement to review case management	Strengthening of caseload management		
and clinical practice.	arrangements, to include:		
	• Implementation of a clinical assessment		
	and risk management tool in all areas of		
	clinical practice; and		
	 Implementation of a supervision and case management model for all professionals. 		

2.7 In April 2012, a bid was submitted by the Plymouth, Devon and Torbay cluster to join the National Children and Young People's Increasing Access to Psychological Therapy (IAPT) programme. This programme aims to improve treatment options through training of CAMHS staff and implementing outcome based approaches to treatment. The bid has been successful in the first round and is seen as a mechanism for supporting transformational change in relation to the delivery of CAMHS for children and young people in the city.

3. Communication

- 3.1 PCH has developed a communications strategy to ensure practitioners and referring agencies are kept informed about service developments. PCH wrote to all referring agencies on 6 January and 8 February 2012 to update them on the waiting list position and on the other mental health services they deliver for children and young people.
- 3.2 PCH also wrote to schools in November 2011 informing them of the support available through the Targeted Mental Health in Schools (TaMHS) project, commissioned using Early Intervention Grant funding. Further communication was sent by the Council by the end of February 2012 informing schools and youth services about a new counselling service (see 4.2)

4. Review of roles of statutory and non-statutory provision and Early Intervention

- 4.1 The requested Framework document has been developed. This outlines the requirements in respect of Children's Emotional Wellbeing and Mental Health for NHS Plymouth, Local Authorities and schools. Requirements in relation to Public Health are to be added once confirmed. This document also maps commissioned resources specific to Children's Emotional Wellbeing and Mental Health against the level of need for preventative services, early intervention, targeted early intervention, and specialist services.
- 4.2 PCC and NHS Plymouth have commissioned a new pilot for an early intervention therapy service targeted to meet the needs of vulnerable 11-16 year olds, including those experiencing significant family problems, such as domestic abuse and parental substance misuse and those in vulnerable groups, such as unaccompanied asylum seekers and young carers. Delivery against this contract started at the beginning of March 2012 and evidence from this pilot will be used to develop future business cases.
- 4.3 Improvements in co-ordination of preventative support and increased capacity to meet need early have formed the key components of the Children's Services early intervention planning and framework. In turn this ensures diversion from specialist high cost services.
- 4.4 PCC and NHS Plymouth have developed and negotiated new schedules for activity and quality reporting with PCH. Contract management will also include a sub group to the NHS Plymouth PCH Contract and Performance Management Meeting; the intention is for the sub group to provide a forum for more detailed discussions in relation to quality and performance management of the service.

5. Next steps

- 5.1 The action plan in relation to R8 states that "A Joint Commissioning Plan to be developed during 2011/12 for approval with view to implementation in financial year 2012/13". On 21 March 2012 Children's Trust Executive agreed that:
 - 5.1.1 Commissioned services outlined in the Children's Emotional Wellbeing and Mental Health Framework document continue to be commissioned during 2012/13.

- 5.1.2 During 2012/13 performance of these services in relation to evidence of output, outcomes, quality, and value for money will be reviewed; further analysis will be undertaken to review any potential gaps in services to meet need.
- 5.1.3 This review forms the basis of a Commissioning Plan that will be developed in autumn 2012 for 2013/14 onwards.
- 5.2 The commissioning response to the external review report of the CAMHS provided by PCH is currently being developed. A meeting between NHS Plymouth and PCC is taking place on 11 June 2012 to agree the action that will be taken. A meeting with PCH will then take place on 19 June 2012; any contractual implications arising from the external review report will be addressed through the NHS Plymouth PCH Contract and Performance Management Meeting later that month.

APPENDIX I: EMOTIONAL WELLBEING AND MENTAL HEALTH - Task and Finish Report Recommendations Recommendation Action Required to Deliver Lead **Update as at 20/02/12** Date to be Recommendation Competed by 31/01/2012 RΙ Prepare letter on behalf of Chair of panel extends Letter sent Claire Oatway, Policy, congratulations to members of **CYPOSP** Performa the Youth Cabinet for their work nce and in carrying out the survey of Partnershi attitudes towards mental health that is referenced in this report Manager **PCC** R2 Representatives of Children and Arrange session for feedback to the Claire Oatway, Policy, Attendance originally scheduled for 31/01/2012 Young People Overview and February has been rescheduled due to Performance group Scrutiny Panel attend the Youth availability (Youth Parliament elections **Partnership** Manager Cabinet to feedback on the PCC and preparation) report and recommendations Meeting re-scheduled for 22nd February following task and finish review 2012. To include within design of PCC Giles Perritt. Head of Agreed that social media and other Complete R3 The Council should consider the consultation framework Performance, Policy and online channels be included within use of social media networks to promote consultation initiatives Partnerships PCC consultation framework and associated communications. Work has started to refresh PCC consultation framework due for completion in Spring 2012. R4 The Children's Trust allocates Children and Young People's Trust Paul O'Sullivan, Director All commissioned services have been Framework Executive identify staff team to responsibility to a lead agency to of Joint Commissioning mapped document to be against statutory develop a framework that clearly produce framework document of responsibilities and role of prevention, **NHS Plymouth** presented to identifies the roles of statutory services responding to differing early intervention (2 levels of need) and Children's &

levels of need and available at both

and non-statutory agencies and

Trust Executive

specialist intervention. Resources from

	Recommendation	Action Required to Deliver Recommendation	Lead	Update as at 20/02/12	Date to be Competed by
	the resources available both in prevention and early intervention work with regard to mental health among children and young people	including those provided by the statutory and non-statutory sector.	Fiona Fleming, Commissioning Manager PCC	Dedicated Schools Grant, Early Intervention Grant, PCC and PCT revenue funding are clearly identified in document.	on 21/03/2012
R5	The Children's Trust review reasons for non-attendance of key professionals at Common Assessment Framework meetings, and make recommendations to ensure that such meetings are timely and properly resourced, with particular attention being paid to the role of Educational Psychologists and communication interaction professionals.	team prepare a review of attendance issues to be reported to	Amanda Paddison, CAF Manager	The issue of non attendance at CAF meetings by key agencies was discussed at the Children's Trust Exec on 18/01. All partners agreed to ensure through commissioned and provided services staff would prioritise attendance to CAF meetings. Maggie Carter has reported that Educational Psychologists and communication interaction professionals will attend meetings where appropriate. Further work has been progressed to ensure CAF meetings are properly resources and attendance monitored closely. Children's Trust Executive will continue to monitor.	Complete
₹6	Plymouth Community Healthcare (PCH) prepare a communications strategy with respect to children and young people's mental health and revise content of media as	people are made aware of the services that are available to them	Jacqui Gratton, Communications Manager PCH Michelle Thomas, Direct or of Operations PCH	Communications strategy developed and submitted. PCH sent letters to all referring agencies on 6th January and 8th February 2012 to update them on the waiting list	To be presented to Children's Trust Exec on 21/03/2012

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	appropriate.		Cate Simmons, Interim Head of Children's Services PCH	and on the other mental health services they deliver for children and young people.	
R7	The Panel commends the Excellence Cluster for their flexible approach to the delivery of services and the best practice demonstrated in their work.	Chair	Claire Oatway, Policy, Performance and Partnership Manager PCC	Letter sent	30/11/11
R8	PCC and PCT commissioners review the range of early intervention services available and assess the value for money of the range of options.	developed by PCC and NHS Plymouth to maximise use of		·	31/03/2012

APPENDIX I: EMOTIONAL WELLBEING AND MENTAL HEALTH - Task and Finish Report Recommendations

	Recommendation	Action Required to Deliver Recommendation	Lead	Update as at 20/02/12	Date to be Competed by
R9	The Council ensures that key universal services including schools and youth services are notified of alternative counselling services available within the city.	Communication to be prepared	Maggie Carter, Assistant Director - Learner & Family Support PCC	•	Further communication drafted and ready to be sent by 28/02/2012
RIO	The Council to update the Panel regarding the impact of new multi-disciplinary locality teams on children's emotional wellbeing and mental health services in six months	Schedule update to CYPOSP	Maggie Carter, Assistant Director - Learner & Family Support PCC / / Alan Fuller, Principal Educational Psychologist PCC	plan.	30/04/12
RII	An urgent summit meeting to be arranged between strategic leads from CYPOSP, PCC, PCT and PCH regarding the findings of this report	Meeting took place 26th October 2011.		Complete – full report made to CYPOSP on 5/1/2012	Complete
RI2	PCH review the cost effectiveness of participation support services for young people using mental health	Director of Finance to work with the Chief Executive of Routeways	Dan O'Toole, Director of Finance PCH	Completed in conjunction with Routeways.	31/12/2011

	Recommendation	Action Required to Deliver Recommendation	Lead	Update as at 20/02/12	Date to be Competed by
	services				
RI3	The Children's Trust investigate and report on ways in which the work of clinicians and other children's professionals can be better co-ordinated with respect to mental health support	Learning from the current multi disciplinary review underway of the cases waiting for CAMHS assessment will be used to inform how professionals can improve coordination at both an early intervention stage and during treatment with particular reference to use of CAF (R5). The framework document (R4) and Joint Commissioning Plan (R8) will incorporate this.	Cate Simmons Interim Head of Children's Services PCH Paul O'Sullivan, Director of Joint Commissioning NHS Plymouth	Options appraisal in development following lessons learnt from waiting list review. This will implement coordination in information gathering and referral. Initial discussions held at Children's Trust Board providing additional feedback and support from across the sector. See Appendix 5	Referral routes and options to improve coordination to be presented to Children's Trust Exec for approval on 21/03/2012 Incorporation in Joint Plan by 31/03/2012
RI4	The Children's Trust establishes a clear and transparent process for the identification, monitoring and escalation of issues such as those identified in this report	Mechanism for reporting of performance through Children's Trust Executive and Board to be reviewed and refreshed		To be incorporated into Plymouth 2020 governance review and partnership working guide.	31/03/2012
R15	Commissioners from the Children's Trust provide interim updates to CYPOSP on the response to these recommendations.	Progress report to be reviewed by Children and Young People's Trust Exec and dates for reporting to CYPOSP to be agreed with Chair.	Paul O'Sullivan, Director of Joint Commissioning NHS Plymouth & Fiona Fleming, Commissioning Manager PCC	Action plan and progress reports reviewed at Children's Trust Executive on 21/03/2012 Update to be provided in September	31/12/2011

APPE	APPENDIX I: EMOTIONAL WELLBEING AND MENTAL HEALTH - Task and Finish Report Recommendations					
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