# CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL



31 January 2013

# Report for Children's Overview and Scrutiny Committee Plymouth Child and Adolescent Mental Health Services (CAMHS) 10 January 2013

# I Background

Within Plymouth the need for redesigned CAMH Services arose from the CYP Mental Health and Emotional Wellbeing Strategy which intended to create a modernised service that joined targeted and specialist provision into a mainstream service. Since November 2009 the service has delivered within a new arrangement of teams which have continued to meet challenges and continued to develop throughout the last year. The only geographical shared provision is to those CYP who present to Derriford Hospital following an episode of deliberate self harm and to those admitted to paediatric wards that have combined physical and psychological needs.

The service continues to provide its core function of providing an assessment and intervention service to children and young people with a mental health disorder. Via the Primary Mental Health Workers it also provides an early intervention role by delivering training and consultation, building the capacity of staff in Universal Services.

All of the teams work in partnership with a significant number of agencies across the City. There is also a CAMHS CYP Board 'In Other Words' that supports with planning and review of CAMH Service provision.

The following information is a description of the Child and Adolescent Mental Health Service (CAMHS) as it is currently delivered and developments within the last 12 months.

### **CAMHS Infant Mental Health Team (IMHT)**

CAMHS IMHT is a multi-agency team based at Tamarfolk Children's Centre providing services to 0-5's and their parents/carers working to improve infant/parent relationships. Staffing capacity of the current team when fully established, meets the needs of 169 children and families.

The team has three main functions

- Face to face work with children and families
- Providing consultation to professionals working in the early years system across the city
- Providing training to professionals

CAMHS IMHT currently delivers a programme named 'Safety in Numbers' which is a Cognitive Behavioural Therapy (CBT) based programme offering a treatment group for women with mild to moderate post natal depression. The team delivers this 3 times per year and aims to work in collaboration with Specialist Community Public Health Nurses to deliver the programme.

During I April 2012 to 31 December 2012, 98 children have been assessed and treated by the CAMHS IMHT and the team does not breach the contracted target of 18 weeks from referral to treatment. Children together with the family are currently assessed within 10 weeks of referral. There are currently 19 children waiting to be assessed by the CAMHS IMHT, 16 of which already have appointment dates.

The team is an excellent example of early intervention and maintains professional links with a number of other PCH services as well as those services within the partnership.

#### Targeted Mental Health in Schools Team (TaMHS)

Below is a tabled overview of the TaMHS outputs between April 2011 to August 2012, taken from the TaMHS Final Report October 2012, which was distributed following the TaMHS Shared Learning Event on 22 November 2012.

Figure I TaMHS Beneficiary outputs by core service provision for April 2011 to August 2012

CORE SERVICE PROVISION	Output
Mental Health Promotion	
Assemblies	5 assemblies 1039 pupils attending
Mental Health Promotion (initial session 1)	44 classes 1062 pupils attending
Mental Health Promotion (session 2)	37 classes 910 pupils attending
Mental Health Promotion (session 3)	34 classes 766 pupils attending
Targeted Group Work	17 groups 81 pupils attending
Triangular consultation	166 initial consultations 81 review consultations
Training	
Bespoke Training	14 visits to schools 255 staff attending
ELSA Training	Ix13 half day sessions 35 staff attending
SAMHS Training	IxII twilights & 2 whole days IxI7 half day sessions 45 staff attending
Solution Focused Coaching	24 staff attending

# Primary Mental Health Work Team (PMHW)

Following challenges relating to the achievement of RTT in October 2011, PMHW's were separated from the CAMHS Plymouth Multi-Disciplinary Team to reform the smaller PMHW team in order to undertake individual brief interventions with children, young people and their families more rapidly.

#### Other team functions include:

- Telephone advisory service delivered by Primary Mental Health Workers;
- Training and consultation to staff in Universal Services by Primary Mental Health Workers;
- Input to multi-agency Parenting Programmes by Primary Mental Health Workers;
- Provides dedicated mental health nursing input to the Youth Offending Service;
- Consultation to agencies working with CYP with complex needs from a variety of staff within the team;

During I April 2012 to 31 December 2012 the Primary Mental Health Workers Team have seen 100 CYP in the last year. Most children together with the family are assessed within 15 weeks of referral. There are currently 72 children waiting to be assessed by the CAMHS PMHW, 3 of which already have an appointment date.

#### **CAMHS** Plymouth Multi-disciplinary Team (PMDT)

In 2009 this team was established by merging three CAMHS teams; the outcome to deliver a single pathway for targeted and specialist provision to CYP aged 5-18. It was anticipated that 892 CYP would need this team but it is staffed to meet the need of only 682. Together with some staffing difficulties this has placed the staff members into a challenging environment where they are working with CYP with very complex problems. These issues are being considered as part of the CAMHS redesign proposals.

CAMHS PMDT are established to undertake assessment and intervention with up to 300 CYP who have a mental health disorder. The total number of children and young people seen within this team is now lower due to the creation of the PMHW team and the neuro-developmental team. Responses from the team can be individual, family or group work. It may also include prescribing and monitoring medication;

Other team function includes:

• Delivery of part of the sexually harmful behaviour pathway;

The team receive a number of inappropriate referrals which is being addressed through consultation model development and clearer referral criteria.

During I April 2012 to 31 December 2012 the Plymouth Multi-Disciplinary Team have seen 140 CYP in the last year. Most children together with the family are assessed within 15 weeks of referral. There are currently 86 children waiting to be assessed by the CAMHS PMDT, 3 of which already have an appointment date.

#### **CAMHS** Outreach Team (COT)

This multi-agency team was formed following the closure of the 6 beds and 10 day programme places for adolescents based at Mount Gould Hospital as part of the CAMHS redesign in 2009. The team has a number of roles

- To assess and intervene with CYP aged 5-18 who present in crisis are who have a level of need that indicates they require assessment within 24 hours;
- To prevent admission to hospital where appropriate
- To assess CYP who present to Derriford Hospital following an episode of deliberate self harm.

The team can stay engaged with CYP for up to six months if that is indicated although much of the work can be of a short term nature. Unfortunately, there is no longer a social worker within the team, which is a significant loss to the service. Staff from COT and ACE work closely ensuring that CYP have their needs met from within one single operational system.

The team is currently staffed to meet the needs of a total of 156 CYP in one year, 90 of which are assessments to be undertaken at the Derriford Hospital. During I April 2012 to 31 December 2012 172 CYP were assessed, of which 103 were assessed at Derriford following self harm or overdoses of CYP. There have been a further number of consultations totalling 104.

#### **CAMHS Neuro-developmental Team**

The CAMHS neuro developmental team was created in October 2011 following the challenges CAMHS faced in relation to the RTT. This enabled CYP and their families to gain accessible services to support their needs. Further development to define the clinical pathway for CYP requiring this intervention will form part of the CAMHS redesign process so that we can ensure that we continue to deliver safe and accessible services to CY and their families.

The team is currently staffed to meet the needs of a total of 192 CYP in one year. During I April 2012 to 31 December 2012 163 CYP were seen r. Most children together with the family are assessed within 17 weeks of referral. There are currently 60 children waiting to be assessed by the CAMHS Neuro developmental team, 9 of which already have an appointment date.

#### **CAMHS** Children's Day Programme

The Children's Day Programme is a redesign of the Children's Day Unit that ceased to function in July 2010 and was replaced by a new arrangement with a new integrated care pathway in September 2010.

The team is multi-agency in that the delivery is a collaboration with the Outreach Team and ACE. It aims to provides to 72 children aged 5-12 in any one year and who have a neurodevelopmental difficulty most often complicated by an attachment problem. The child and family are offered a three week assessment period (two days per week for three weeks) whilst remaining on roll at their school and then is likely to require a period of intervention (two days per week).

The review of the old arrangement and which led to this new arrangement was a collaboration between the Plymouth Psychology Service and CAMHS. A significant number of agencies across the city worked with parents and CAMHS staffing to determine the new pathway. The impact of the proposed CAMHS redesign is minimal for this team.

The day programme is based at The Terraces, Mount Gould Hospital but staff also work out into a variety of settings.

The team is currently staffed to meet the needs of a total of 72 CYP in one year. During I April 2012 to 31 December 2012 38 CYP. Most children together with the family are seen, on average, 8 weeks average of referral. There are currently I4 children waiting to be assessed by the CAMHS CDP, 6 of which already have an appointment date. The creation of the Neuro-developmental team has supported the work of CDP and impacted on the number of CYP requiring assessment by this team.

## **CAMHS Severe Learning Disability Team (SLD)**

The CAMHS SLD team contains, nursing, non verbal arts therapy and consultant psychiatry in addition to psychology. Although the team are based at Mount Gould Hospital the vast majority of their work takes place at Mill Ford and Downham Schools as well as some input to Woodlands School. The team enjoy excellent relationships with schools staff and the continued working arrangements following the 2009 CAMHS redesign have drastically improved the quality of the service to this vulnerable group.

The CAMHS SLD team work very closely with the Children's Integrated Disability Service (ChIDS) and have a well established referral system included within the ChIDS Single Point of Access.

• The team was staffed to meet all need which was judged to be about 36 CYP in one year. During I April 2012 to 31 December 2012 19 children and young people together with their families via face to face work. Most children together with the family are currently assessed within I4 weeks of referral. There are currently I2 children waiting to be assessed by the CAMHS SLD team, 4 of which already have appointment dates.

#### Other team functions include:

- Delivering training to professionals, parents and carers (such as the sleep and CYP with a learning disability workshop)
- Work with the Transitions Team to better improve the pathway of transition for these young people
- Ongoing service evaluation to understand why CYP with a severe and profound learning disability are placed out of area and to determine how this might be prevented.

#### **CAMHS** Children in Care Team (CIC)

CAMHS CIC team is co-located with social care staff at Midland House was established before the CAMHS redesign in 2009. However, the work of the team and the skills mix was expanded as part of the redesign process. The team continues to experience significant challenges with recruitment, particularly in relation to psychology posts. It is anticipated that the team will return to full staffing and activity in the near future as the recruitment process is well underway. Unfortunately, there is no longer a social worker within the team, which is a significant loss to the service.

CAMHS CIC team provides an assessment and intervention function for children and young people aged 0-19 who are in the care of the local authority and who have an emerging or existing mental health presentation. The team are staffed to provide face to face work with 80 such CYP per year.

CAMHS CIC team provide consultation to foster carers and social care staff who are caring for CYP with emotional well-being difficulties or who have complex presentations but who are not willing or ready to engage in therapeutic face to face work. This type of consultation is intense and can involve meeting the same set of carers and professionals for hour long meetings over a series of months. The team also provide shorter single consultations on a needs led basis.

During I April 2012 to 31 December 2012 26 CYP in the last year. Most children together with the family are assessed within 10 weeks of referral. There are currently 8 children waiting to be assessed by the CAMHS CIC team, I of which already has an appointment date.

This team also provides training to foster carers and social care staff. Work with Band 4 Foster Carers successfully transferred from the Plymouth CAMHS MDT into the CAMHS CIC team following the CAMHS redesign in 2009. This means that all work with and around CYP who are in the care of the local authority is located in this team. The exception is for CYP who have a severe learning disability or who require specialist input only available elsewhere in the Plymouth CAMH Service.

The impact of the proposed CAMHS redesign is minimal for this team.

#### Children & Young People Improving Access to Psychological Therapies (CYP IAPT)

The Deputy Prime Minister, Nick Clegg, and Health Minister Paul Burstow announced that the ambitious Children and Young People's Improving Access to Psychological Therapies (CYP IAPT) programme will receive an extra investment of up to £22 million over the next three years. This is in addition to the £8 million per year for four years that had previously been secured. The new resources will be used to:

- extend the geographical reach of the collaboratives
- extend training to two further therapies that address depression, eating disorders, self-harm, and conduct problems with Attention Deficit Hyperactivity Disorder (ADHD)
- develop e-learning packages for professionals.

CYP IAPT is aimed at Child and Adolescent Mental Health Services (CAMHS) which are already established and routinely offer psychological services. CYP IAPT has been given additional funding by the government in order to transform existing services to help improved outcomes for CYP's mental health.

CYP IAPT programme was initially established to provide primary care psychological support for people of working age having depression or anxiety. The project is about transforming existing services for children and adolescents by adopting those elements of IAPT programme which will help improve services to Children and Young People by:

- Working in partnership with children and young people to shape their local services
- improving the workforce through training in best evidence based practice
- developing mechanisms to deliver frequent/session by session outcome
  monitoring help the therapist and service user work together in their session,
  and help the supervisor support the therapist to improve the outcomes
- Supporting local areas to improve their infrastructure to collect and analyse the data to see if children and young people are getting better

Plymouth have been successful in obtaining a significant amount of funding for CYP IAPT and CAMH Service transformation as part of a collaborative with Devon and Torbay. Work has begun to develop CBT and parenting treatment pathways for children and young people.

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