

# Northumberland Tyne & Wear NHS Trust

## Sunderland Children Looked After Report

January 2019





# Sunderland Children Looked After Report

## September - November 2018

### 1. Activity

	Sept 18	Oct-18	Nov-18
Referrals	7	15	12
Discharges - Seen	2	1	4
Discharged - Unseen	1	4	1

Reasons why Referral not seen

#### September

- Service user discharged as service user not currently appropriate for CYPS intervention

*To review with Commissioner & Partners to agree what should be provided by Partners until such time as the children are ready to undertake a treatment programme with CYPS.*

#### October

- Following receipt of referral, clinical member of the team contacted child's social worker for update as limited information within referral, circumstances had changed since referral and agreed referral no longer required at this time.
- Child returned back to care of mother, no longer required CYPS service.
- Child placed in out of area placement for minimum of 18 months during which local service will support child as required.
- Range of appointments offered to the young person but intervention declined.

#### November

- Young person signposted to IAPT services as most appropriate services to meet their needs.

### 2. Referral Urgency

All cases referred to CYPs either by phone, fax, and email or in written format are reviewed on a daily basis by a member of the clinical team. The purpose of this initial review is in order to signpost any cases that have been inappropriately referred and to ensure any cases that require an urgent or priority response are highlighted and actioned immediately.

All cases into the service are categorised into either Urgent or Routine. Detail of the urgent referral criteria can be found at Appendix 1. An Urgent referral will be seen within 72 hours by Intensive Community Treatment Service (ICTS).

	Sept-18	Oct-18	Nov -18
Urgent	0	0	1
Routine	7	15	11
Total	7	15	12

### 3. Waiting List

Reporting Waiting Bands	September		October		November	
	Total	%	Total	%	Total	%
Number of CYPS Incomplete spells waiting 0 - 4 weeks from Referral to Treatment	6	15.4%	8	19.0%	9	20.9%
Number of CYPS Incomplete spells waiting 4 - 6 weeks from Referral to Treatment	4	10.3%	6	14.3%	2	4.7%
Number of CYPS Incomplete spells waiting 6 - 8 weeks from Referral to Treatment	3	7.7%	2	4.8%	4	9.3%
Number of CYPS Incomplete spells waiting 8 - 10 weeks from Referral to Treatment	3	7.7%	2	4.8%	5	11.6%
Number of CYPS Incomplete spells waiting 10 - 12 weeks from Referral to Treatment	2	5.1%	3	7.1%	1	2.3%
Number of CYPS Incomplete spells waiting between 12 - 18 weeks from Referral to Treatment	8	20.5%	7	16.7%	6	14.0%
Number of CYPS Incomplete spells waiting between 18 - 30 weeks from Referral to Treatment	7	17.9%	10	23.8%	11	25.6%
Number of CYPS Incomplete spells waiting more than 30 weeks from Referral to Treatment	6	15.4%	4	9.5%	5	11.6%
Total	39	100.0%	42	100.0%	43	100.0%

The Trust is currently undertaking a range of initiatives to increase clinical capacity to support the reduction of waiting times within community services. In addition a specific review of the CYPS service has taken place to assess the efficiency and effectiveness of the current service model and as a result the service is working with the CCG to implement the resulting recommendations. The CCG has allocated non-recurring resources of £182K to address waiting list pressures which will take place from January until the end of the financial year. In addition £68K non-recurring funding has been secured from NHS England to reduce the current waiting list.

### 4. Current Caseload

	Sept -18	Oct - 18	Nov - 18
Total Children Looked After	110	112	121
Total CYPS Caseload	2182	2159	2253
Total % Children Looked After	5.0%	5.2%	5.4%

Type of case	Clinical criteria	Timescale	Who	Comments
Urgent	<ul style="list-style-type: none"> <li>• Risk to self or others but contained/ safe currently</li> <li>• Rapid weight loss with physical symptoms- low BP/ pulse, blue extremities, dizziness.</li> <li>• Severe depression</li> <li>• Acute or emerging psychosis</li> <li>• Episode of self harm requiring medical admission</li> <li>• Immediate risk to self or others with evidence of planning and/ or preparation</li> </ul>	<p>Within 72 hours by Intensive Community Treatment Service.</p> <p>If child presents at Sunderland Royal Psychiatric Liaison Team will assess and handover to ICTS CYPS</p>	<p>Intensive Community Treatment Service.</p> <p>Young people 0-18 yrs that are referred to NTW CYPS in a crisis and require an emergency appointment will be assessed by ICTS 8.00am-9..30pm Monday Friday, Saturday</p> <p>Young People 16-18 yrs who present in a mental health crisis after 9.30pm will be assessed by the adult crisis services for that area.</p> <p>If child presents at Sunderland Royal Psychiatric Liaison Team will assess and handover to ICTS CYPS</p>	<p>In cases of clear psychosis referral is made immediately to EIP Pathway, Senior CYPS colleagues and ICTS must be consulted if there are concerns that a case requires an urgent response.</p>

