

2 FEBRUARY 2017

CHILDREN, EDUCATION AND SKILLS SCRUTINY COMMITTEE

CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) – PROGRESS REPORT

Report of the Sunderland Clinical Commissioning Group

1. Purpose of this Report

- 1.1 The purpose of the report is to provide members with an overview of Child and Adolescent Mental Health Service provision and performance in Sunderland.
- 1.2 Janette Sherratt (Joint Commissioning Manager, Children) and Ian Holliday (Head of Reform and Joint Commissioning) will be in attendance to introduce the report and presentations will also be given at the meeting by the providers.

2 Mental Health Needs

- 2.1 One in four children will have some form of mental health problem, 15% (8,703) will have mild, early stage problems; 7% (4,061) will have moderately severe problems; 2% (1,160) will have complex and severe problems and less than 0.1% (58) will have very serious problems.
- 2.2 The most recently published NHS England projected prevalence of children and young people living in Sunderland with a diagnosable mental health condition is 5,759
- 2.3 Nationally, it is recognised that half of all mental health problems have been established by age 14, rising to 75% by age 24, one in ten children aged 5-16 will have a diagnosable problem such as conduct disorder (6 per cent), anxiety disorder (3 per cent), attention deficit hyperactivity disorder (2 per cent) or depression (2 per cent).
4% of 5-15 year olds will have an emotional disorder (including anxiety, depression, phobias, obsessive compulsive disorder) this rises to 9% for 16 and 17 year olds
 - 6% of 5-15 year olds will have a behavioural disorder (awkward, troublesome, aggressive, anti-social behaviours) which rises to 12% for 16 and 17 year olds
 - 1% of 5-17 year olds will have a hyperkinetic disorder (inattention, impulsivity, overactive)

- 0.3% of 5-18 year olds will have autism, with larger numbers on the autistic spectrum
- 1% of 15-19 year old girls will have an eating disorder
- 3% of adolescents will self-harm rising to 7% in 16 and 17 year olds

2.4 Children from low income families are at highest risk of developing mental health problems, three times that of those from the highest.

2.5 One in five mothers suffers from depression, anxiety or in some cases psychosis during pregnancy or in the first year after childbirth. Suicide is the second leading cause of maternal death, after cardiovascular disease. Mental Health problems not only affect the health of mothers but can also have longstanding effects on children's emotional, social and cognitive development. Costs of peri-natal ill health are estimated at £8.1 billion for each annual birth cohort, or almost £10,000 per birth.

2.6 There is evidence of rising need in key groups, such as the increasing rates of young women with emotional problems and increasing numbers of young people presenting with self-harm.

3 Mental Health Outcomes

3.1 Mental health outcomes for children and young people are integral to and interdependent upon each of the five outcome areas including being healthy, staying safe, enjoying and achieving and making a positive contribution.

3.2 Mental health problems impact upon each of the five outcome areas and reciprocally problems in any of the other outcome areas can impact upon mental health and emotional wellbeing.

3.3 Effective service provision to support each of the five outcome areas is an essential element in promoting children and young people's mental health, similarly effective mental health service provision supports good outcomes across each of the five outcome areas.

4 CAMH Service Provision in Sunderland

4.1 There has been significant work to improve the scope, range and quality of CAMH Service provision over the last 10 years.

4.2 This has resulted in the development of the CCAMH Service, the review and re provision of regional services, the review and re provision of community services to include integrated CAMHS and learning disability services, extended CAMH

services for vulnerable children including those with complex behavioural, mental health and social care needs, the development of community based eating disorder services and the establishment of Intensive home treatment services.

4.3 The PCT (CCG) have worked together to jointly plan and commission a broad range of CAMH Services designed to operate as an integral part of services for children, offer evidence based psychological support and provide consultation, training and support to other professionals. Additionally, there has been a focus on making services as accessible as possible.

4.4 Over the last three years there have been significant changes in Children's Services. Currently a new service is being established with a new model of service provision. services for children and young people and currently a new model of service provision is being developed. We are committed to continue to work in partnership to develop a shared model of multi-agency CAMH service provision aligned to services for children, young people and families through the Children and Young People's Strategic Partnership, the CAMHS Partnership and aligned work streams.

4.5 The current range of services to support Children and Young People (CYP) with mental health needs across Sunderland these are as follows:

Universal and Targeted Services

4.6 There are a broad range of services that have responsibility for mental health promotion for ALL children, young people and their families (100%) and providing support for children, young people and their families with mild to moderate levels of mental health need (15%) These include:

- Midwifery Services (commissioned by CCG)
- Health Visitor and Family Nurse Partnership Services (commissioned by LA)
- Children's Centres, Nurseries and Early Years Settings (commissioned / provided by LA)
- Schools, Colleges and Training Providers
- Services for young people e.g. youth services (commissioned by LA)
- School Nursing Service (commissioned by LA)
- General Practitioners (commissioned by CCG from April 2015)

4.7 These services also responsible for providing continued support for children and young people with more significant mental health problems who may be accessing evidence based therapies within more specialist mental health services.

Children and Young People's Mental Health Services

Washington Mind Children and Young People's Service

4.8 Sunderland CCG support this project which works with young people 11-25yrs who live in the City of Sunderland. These young people are often experiencing a complex range of issues. Referrals are accepted from young people, families and professionals. During 2015-16 the service:

- Received 434 direct referrals (52 signposted)
- Delivered 1872 sessions of evidence based counselling
- Average wait during this period - 6weeks

4.9 Washington area committee have commissioned a one year self harm project, the outcomes of which will be considered as part of the CAMH Service Review

4.10 The CCG has commissioned the service to strengthen the opportunities for children, young people and their families to access appropriate information and self help materials

South Tyneside Foundation Trust (STFT) Community Child and Adolescent Mental Health Service (CCAMHS) Tier 2

4.12 Sunderland CCAMH Service was jointly planned and commissioned by Sunderland PCT (CCG) and Sunderland City Council with Sunderland CCG as the lead commissioner. The service was commissioned to provide evidence based therapeutic service for children, young people and their families with moderate levels of mental health need (7% of the population) and to increase the capacity of universal services to meet the mental health needs of children, young people and their families.

4.13 Working in partnership with **Sunderland Counselling Service**, the service provides:

- Individual and group work, brief intervention, parenting support, talking therapies and counselling
- Training, consultation and joint work to increase the capacity of universal service providers to meet the mental health needs of children, young people and their families.

4.14 During 15/16 the service:

- Accepted 698 new referrals
- Delivered 3,872 sessions of evidence based therapies
- Delivered 175 group sessions with 1,268 attendances
- Maximum waiting time: 7 weeks referral to treatment (Q2 16/17)

- The service collects a broad range of nationally recognised outcome and experience of service measures to inform clinical provision and service development and demonstrate improved outcomes for children and young people
- 4.15 Working with commissioners the service undertakes a process of improvement most recently this has included:
- The successful bid and implementation of the Children and Young People's Improving Access to Psychological Therapies (CYP IAPT) programme.
 - The recruitment of a wide range of posts financed via investment awarded as part of the CYP IAPT programme.
 - Implementation of the electronic care record
 - Met increased referral pressures and maintained low waiting times from referral to treatment. Working with commissioners the service has successfully met increased referral pressures and maintained low waiting times from referral to treatment.
 - Assessed by young health assessors against your Welcome criteria
 - Worked with schools to establish School Cluster meetings, provide mental health expertise to cluster groups, established CAMHS School Link role, providing clinical expertise in development of charter mark
- 4.16 The service has recently been recently commissioned to deliver services in South Tyneside and Gateshead
- 4.17 Uncertainty about continued funding pending the outcome of CAMH Service/ Pathway Review (completion June 2017) is impacting upon service and opportunities for development e.g. CYP IAPT posts

NTW Children and Young Peoples Service (CYPS)

- 4.18 Sunderland commissions and funds the NTW CYP Service. This service was commissioned following extensive partnership working and consultation to develop the service specification.
- 4.19 The Service provides:
- Specialist services for children, young people and their families with severe and complex mental health needs (2% of population)
 - Intensive Home Treatment Services for children, young people and families with acute or highly complex and severe mental health needs - to prevent hospital admission

- Multi Systemic Treatment Services - to support children, young people and their families with complex behavioural, mental health and social care needs
- Community Eating Disorder Services
- Support for children, young people and families in special circumstances with moderate levels of mental health need (Tier 2+) including those:
 - Who have learning disabilities
 - Who are or have been looked after or accommodated including those who have been adopted
 - Who have been neglected or abused or are part of a child protection plan
 - Who have a learning or physical disability
 - Who have chronic, enduring or life limiting illness
 - Who have substance misuse issues
 - Who are at risk of, or have been involved in offending
 - Who are homeless or who are from families who are homeless
 - Whose parents have problems including domestic violence, illness, dependency or addiction

4.20 In addition the service is commissioned to provide training, consultation, in-reach, outreach and opportunities for joint working with targeted service providers e.g. Youth Offending Service (YOS) and Looked after Children (LAC), substance misuse services, paediatrics.

4.21 During 15/16

- 2,050 referrals accepted into the service
- Average of 11 face to face contacts per patient
- 22,500 face to face contacts
- Q3 Average waiting time 11 weeks
- The service proactively uses a broad range of measures including CORC recognised outcome, clinical effectiveness and experience of service measures to measure patient outcomes and support clinical and service improvement. and is able to demonstrate significantly and is employs a broad range of outcome and experience of service measures and is able to demonstrate improved patient outcomes.

4.22 NTW CYP service was recently rated as **outstanding** by CQC.

- 4.23 The service continues to work with commissioners to address increased referral pressure, develop their model of care, improve access waiting times, improve flow through the service and support the high numbers of children and young people requiring urgent appointments.
- 4.24 During 15/16 Sunderland CCG has provide additional funding to support increased activity to reduce waiting time pressure. During 16/17 the CCG provided further funding to support increased demands within the service and NTW/CCG were successful in in bidding for additional NHS England funding as part of a national waiting list initiative to improve access to CAMHS.
- 4.25 The neuro developmental disorder pathways are highly resource intensive with 45% of service capacity resourcing the ADHD

Nationally Commissioned Services

- 4.26 NHS England currently commissions Tier 4 services for children with highly complex, severe or persistent mental health needs (0.075%). These are predominantly in-patient services and are provided by the two major mental health trusts in the region as follows:
- Tees Esk and Wear Valley (TEWV) Regional Eating Disorder Service for Children and Young People
 - Northumberland Tyne and Wear Mental Health Foundation Trust (NTW) Regional CAMHS and Learning Disability Services including intensive care, in-patient and Neuro-Development Disorder Service
 - NHS England operates a national bed management system and meets with CCG commissioners on a regular basis to monitor activity.
- 4.27 Sunderland has well developed Intensive Community Treatment Services and Community Eating Disorder Services which is reflected in relatively low number of admissions to in-patient services.
- 4.28 NHS England have reported a number of incidences of children and young people from Sunderland who have either been readmitted or had delayed discharge due to limited social care support in the community.
- 4.29 Locally, a Risk Management Group is being established to ensure a co-ordinated multi-agency response to meeting the needs of children with complex needs. This group will ensure appropriate multi-agency support is in place to prevent avoidable in-patient admissions and support effective discharge.

5 CAMHS Performance against National Metrics

5.1 NHS England have recently published a number of key metrics against which CAMH service Provision/ Transformation will be measured. Sunderland is performing well across all key metrics:

Key Metrics		RAG
CCG spend of additional funding for mental health	During 16/17 Sunderland CCG has invested an additional funding to support improved access to CYP Service is commissioning the NTW RAID (psychiatric liaison service to include children and young people and peri-natal mental health (to date 3.5wte)	GREEN
Number of CYP commencing treatment in treatment in NHS funded community servic	<p>National Target:</p> <p>Increase the number of children and young people commencing treatment from 28% (2016/17) to 35% by 2020/21</p> <p>Sunderland:</p> <p>The NHSE projected prevalence of children and young people living in Sunderland with a diagnosable mental health condition is 5,759</p> <p>In 2016/17 the total number of new children and young people in treatment is estimated at 1708 representing 29.66% (780 CCAMHS + 928 NTW CYPS)</p> <p>The total number of children and young people in treatment is estimated at 2,815. Which represents 48% of children and young people with a diagnosable mental health condition (1,120 CCAMHS and 1,695 CYPS)</p>	GREEN
Number of children and young people with an eating disorder receiving treatment within 4 weeks (routine) and 1 week (urgent)	100%	GREEN

6 Resource

Workforce

- 6.1 Regionally there are shortages of CAMHS professionals. However in relation to the delivery of evidence based therapies Sunderland has a very skilled CAMH workforce as a result of sustained commitment to workforce development to deliver evidence based therapies. More recently all CAMH services have actively participated in the CYP IAPT programme.
- 6.2 It is important, as a partnership, that we retain skilled mental health professionals in Sunderland and maintain a skilled workforce by continuing to support training in evidence based therapies

CAMHS WORKFORCE 2014-15			
Name of Service	Discipline	Number wte	Total wte
NTW Children and Young Peoples Service (including ICTS, Community Eating Disorder Services and MST Services)	nursing	38.26	Total : 69.02 Clinical: 57.23
	AHP	0.53	
	OT	2.69	
	Professional and technical	1.46	
	Psychology	9.34	
	Social worker	0.44	
	Admin	9.76	
	apprentices	0.67	
	Consultant medical	5.2	
	Other medical	0.67	
STFT Community CAMH Service	HoS	0.5	Total: 19.1 Clinical 14.1
	Clinical Lead	0.5	
	Data analyst	1.0	
	Admin	4	
	Specialist CAMH Teachers	2.8	
	Early Years specialist	2.3	

	Specialist PMH practitioners	5	
	PMH practitioner	1	
	PMH worker	2	
Sunderland Counselling Service	Counsellors	5	Total 13
	Volunteer Counsellors	8 (0.1)	
Washington Mind :Young Minds wellbeing project	Counsellors	2.5	Total 2.5
Total Workforce			103.62 89.33 clinical

Funding

The table below sets out Funding streams for CAMH services during 2015/16. In 2016/17 NHSE and Sunderland CCG have increased levels of investment in CAMH service provision to address referral challenges and support the transformational agenda

Service	Provider	Service Description	2015/16 Total Contract £
NTW CYPS Services	NTW	S'Land & S Tyne CYPS	8,883
NTW CYPS Services	NTW	CYPS Forensics In-Reach	41,991
NTW CYPS Services	NTW	S'Land & S Tyne CYPS (includes adult ADHD Service)	2,780,203 (includes adult ADHD service)
STFT CCAMHS Service (including total cost to CCG and recharge to the LA)	STFT	Community CAMHS [681024] Pooled Budget	1,111,708
STFT CCAMHS Service (including total cost to CCG and	Sunderland LA	CAMHS Income	-442,049

recharge to the LA)			
Sunderland Counselling Service CYP service	Sunderland Counselling Services	Counselling Services - CAMHS	188,214
CYP IAPT Funding	TBC	CYP IAPT Funding	TBC
Transformational Monies (Eating Disorder)	NTW	Transformational Monies (Eating Disorder)	174,000
Transformational Monies (School CAMHS Link Pilot (£50k from NHS England = £50K matched funding from CCG)	TBC	Transformational Monies (School CAMHS Link Pilot	100,000
Transformational Monies (School CAMHS Link Pilot (£50k from NHS England = £50K matched funding from CCG)	NHS England	Transformational Monies (School CAMHS Link Pilot	-50,000
Resilience funding for liaison (CYP)	NTW	Resilience Funding - CYPS	140,000
Washington Mind CYP	Washington Mind	13;25 Young People's	83,550
Individual Funding for CYP Complex behavioural mental health and social care needs	Various	Health contribution - 8 young people	613,549.33
Total			4,750,049

7 Recommendations

- 7.1 Members are asked to consider and comment on the contents of this report;
- 7.2 That a further report be submitted to the March meeting to seek member views on the refreshed CAMHS Transformational Plan and work programme for the year ahead.