

Council Report

Health Select Commission – Thursday 2nd March 2017

Title

Response to Scrutiny Review: Child and Adolescent Mental Health Services – monitoring of progress

Is this a Key Decision and has it been included on the Forward Plan?

This is not a key decision

Strategic Director Approving Submission of the Report

Ian Thomas, Strategic Director, Children & Young People's Services

Report Author(s)

Paul Theaker, Operational Commissioner, Children & Young People's Services

Ward(s) Affected

All wards

Executive Summary

The Overview and Scrutiny Management Board at its meeting in December 2015 noted the main findings and recommendations of the scrutiny review of Rotherham, Doncaster and South Humber NHS Trust Child and Adolescent Mental Health Services and the response to these recommendations from the Council and partner agencies. It was agreed at the meeting, that the response to the Scrutiny Review be delegated to the Health Select Commission for the ongoing monitoring of progress.

The Health Select Commission considered progress against the response to the Scrutiny Review at its meeting in October 2016 and requested that a further update against progress be given at its meeting in March 2017.

There has been significant progress made against the Scrutiny Review recommendations since the last progress update was given in October 2016. The refresh of the Emotional Wellbeing and Mental Health Needs Analysis is complete and a common performance framework that provides improved and standardised

data collection across the whole mental health system has been developed and is being tested with service providers.

The timescales for outstanding actions within the response template have been revisited due to the impact of delays in the CAMHS service reconfiguration and are now achievable and realistic. There is robust monitoring of these actions taking place through the CAMHS Contract Monitoring Group and CAMHS Partnership Group, to ensure that they are completed by the due dates.

This report outlines current progress against the response template, which is attached as Appendix 1.

Recommendations

- That the monitoring of progress against the responses to the Scrutiny review of Child and Adolescent Mental Health Services be noted and discussed.

List of Appendices Included

Appendix 1 – Response template to the Scrutiny review – progress monitoring

Background Papers

Scrutiny Review report and appendices.

Future in Mind: Promoting, Protecting and Improving our Children & Young's Mental Health and Wellbeing – NHS England 2015.

Consideration by any other Council Committee, Scrutiny or Advisory Panel

The Overview and Scrutiny Management Board at its meeting on 11th December 2015 delegated the ongoing monitoring of the Scrutiny Review to the Health Select Commission.

Council Approval Required

No

Exempt from the Press and Public

No

Title: Response to Scrutiny review: Child and Adolescent Mental Health Services – monitoring of progress

1. Recommendations

- 1.1 That the monitoring of progress against the responses to the Scrutiny review of Child and Adolescent Mental Health Services be noted and discussed.

2. Background

- 2.1 At its meeting in April 2014, the Health Select Commission (HSC) decided to focus its work around the theme of mental health and wellbeing during 2014-15. It was agreed in July 2014 that a review of Rotherham, Doncaster and South Humber NHS Trust (RDaSH) Child and Adolescent Mental Health Services (CAMHS) be included in the work programme, following local concerns and a report from Healthwatch.
- 2.2 The key focus of Members' attention was to identify any issues or barriers which impact on children and young people in Rotherham accessing timely and appropriate RDaSH CAMHS services at Tiers 2 and 3.
- 2.3 A full scrutiny review was carried out by a sub-group of the Health Select Commission and the Improving Lives Select Commission. Evidence gathering began in September 2014, concluding in March 2015. This comprised presentations, round table discussion and written evidence from health partners, RMBC officers, Rotherham Youth Cabinet and desktop research.
- 2.4 The Scrutiny review formulated 12 recommendations and the Council and its partners developed a response to those recommendations. The response was presented to the Overview and Scrutiny Management Board on 11th December 2015, where it was agreed that the response to the Scrutiny Review be delegated to the Health Select Commission for the ongoing monitoring of progress.
- 2.5 The Health Select Commission considered the progress made against the response to the scrutiny review at its meeting in April 2016 and October 2016 and requested that a further update against progress be given at its meeting in March 2017.

3. Key Issues

- 3.1 The NHS England Future in Mind Report was published in May 2015 and sets out a clear national ambition to transform the design and delivery of a local offer of services for children and young people with mental health needs.
- 3.2 The Rotherham CAMHS Transformation Plan was developed in response to the Future in Mind report and encompasses all local Emotional Wellbeing & Mental Health transformational developments. The response

to the Scrutiny review was therefore aligned to the local CAMHS Transformation Plan and the response to the Scrutiny review is monitored through the CAMHS Partnership Group as part of the overall plan. The Rotherham CAMHS Transformation Plan has been refreshed and was published at the end of October 2016.

- 3.3 RDASH has undertaken a whole CAMHS service reconfiguration, which was originally due to be completed by December 2015. The reconfiguration included the establishment of clear treatment pathways, a Single Point of Access (SPA) and locality workers linked with locality based Early Help and Social Care teams as well as schools and GPs. The reconfiguration took longer than anticipated, due to the requirement for extensive staff consultation and recruitment to a whole new structure.
- 3.4 The RDASH CAMHS service reconfiguration was not fully completed until September 2016, due to a difficulty in recruiting appropriate staff to a number of posts. This had an impact on the delivery of a number of the actions within the response to the Scrutiny review and following agreement at the Health Select Commission meeting in October 2016, these outstanding actions have been revisited and are now achievable and realistic.

There is robust monitoring of these actions taking place through the CAMHS Contract Monitoring Group and CAMHS Partnership Group, to ensure that they are completed by the due dates.

4. Options considered and recommended proposal

- 4.1 The Scrutiny review formulated 12 recommendations and the progress made against those recommendations is outlined below:
 - 4.1.1 Once the national refresh of prevalence rates of mental disorder is published, RMBC and RCCG should review the local *Analysis of Need: Emotional Wellbeing & Mental Health for Children & Young People* and the mental health services commissioned and provided in Rotherham across Tiers 1-3.

The annual refresh of the Emotional Wellbeing and Mental Health Needs Analysis has been undertaken and the recommendations from the refresh are informing the RDASH CAMHS Service Specification for 2017/18 and the CAMHS Transformation Plan refresh.

- 4.1.2 Through the CAMHS Strategy & Partnership Group service commissioners and providers should work towards improved and standardised data collection and information sharing on their service users and patients.

The common performance framework across all mental health provision has been developed and is currently being tested with service providers, which will inform any enhancements to the framework.

This important development will, for the first time, enable a deeper understanding of the support and specific interventions that children and young people are accessing in schools, the community and within the CAMHS treatment service. This will drive the enhancement of service quality across the whole mental health system and help to ensure that children and young people are accessing the most appropriate advice, support and treatment.

- 4.1.3 RDaSH training and awareness raising with partner agencies and schools should include a focus on improving the quality of information provided in referrals to RDaSH CAMHS Duty Team to reduce delays in making an assessment.

The RDaSH CAMHS service continues to hold regular meetings within localities to provide support and advice to schools, Early Help, Social Care and other services, which has improved the quality of referrals into the service. In addition, RDASH CAMHS has provided a number of training sessions to services such as School Nurses, Early Help and SENCO leads, which has raised awareness of the service pathways and how to access CAMHS treatment.

There is an Emotional Wellbeing and Mental Health workforce competencies framework currently being developed. This will clearly identify the levels of training required for different staff groups. The Rotherham Framework will incorporate the NHS England Yorkshire and Humberside Schools Competency Framework and will be produced by September 2017.

- 4.1.4 In its leadership role with schools, RMBC should ensure schools link in with partner agencies to discharge their wider duties and responsibilities towards C&YP's emotional wellbeing and mental health.

The CAMHS whole school approach pilot is an exciting piece of work that is being undertaken by five secondary and one special school in Rotherham. Each of the pilot schools undertook a mini needs analysis to identify the key emotional wellbeing and mental health priorities for their particular school and they are now taking forward their priorities in this academic year based on a clear action plan.

The priorities being taken forward include developing peer mentoring mechanisms, 'RAG' rating the emotional wellbeing and mental health needs of pupils and providing appropriate support and staff support. There is termly monitoring of the school pilot schemes and a full evaluation will be undertaken in July 2017.

- 4.1.5 CAMHS Strategy & Partnership Group is asked to consider if there is a need to develop a protocol for transition/step up/step down between providers in Tier 3 and providers in Tier 2 to supplement the planned pathways and protocols.

There is currently a review of all CAMHS pathways, which will be completed by April 2017. The pathways are being updated to take into account the RDaSH CAMHS service reconfiguration and the development of a Single Point of Access and the pathway diagrams are being re-designed to be in a more user-friendly format.

- 4.1.6 Following the work to build links between RDaSH CAMHS and GPs locality work should now be rolled out by RDaSH into schools, youth centres and other community settings as a priority.

The implementation of the RDaSH CAMHS locality worker model has brought about much closer working between CAMHS and Early Help and has reduced the number of referrals being inappropriately signposted between the services. There are currently robust KPIs being developed for the CAMHS locality service, which will be in place by May 2017.

- 4.1.7 “Investigate the options to provide more robust services at an early stage, both in lower tiers and at an early age, to ensure that patients are prevented from moving into higher tiers.

The Family Support Service, which is led by Rotherham Parent/Carer Forum, is providing support to families who have children and young people with mental health issues, with the aim of preventing children and young people moving into higher tiers of service.

The Family Support Service is being exceptionally well received, with 95% of families who access the service now feeling empowered to independently access services.

- 4.1.8 The target waiting time from referral for routine assessments by RDaSH CAMHS should remain at three weeks for 2015-16 and then be reviewed in the light of the impact of the recent positive changes introduced by the service.

The waiting times for assessment and treatment continue to improve and are monitored on a weekly basis by commissioners of service. The length of time awaiting ASD and ADHD assessment has significantly reduced. At the beginning of February 2017 there were no people waiting for more than 10 weeks for initial assessment.

The service has consistently achieved 100% against a target of 100% of appropriate urgent referrals assessed within 24 hours (KPI 3). There are currently 31% triaged referrals assessed within the CCG stretch target of 3 weeks, which is a 4.3% increase from the previous months position of 26.7%. When reported against the national 6 weeks target, 60.3% were assessed within 6 weeks. The average waiting time is 49.6 days.

The current CCG stretch target will remain in 2017/18 however performance against the national 6 week target continues to be monitored and RDaSH are undertaking work to benchmark Rotherham CAMHS against other areas in relation to the 6 week target.

- 4.1.9 RDaSH should review and evaluate the recent changes made to the CAMHS Duty Team to identify successes and any areas for further improvement by September 2015.

The CAMHS SPA/Early Help Triage teams will be fully aligned by May 2017 and the evaluation of effectiveness will take place in September 2017. The CAMHS SPA team are currently spending two days per week within the Early Help Triage team and this has already resulted in a reduction in inappropriate referrals and signposting between the two services. This will be enhanced further through full alignment.

- 4.1.10 CAMHS Strategy & Partnership Group should ensure the new mental health and wellbeing website meets accessibility standards and incorporates a user feedback mechanism and measurement of the number of “web hits” received.

The ‘My Mind Matters’ website continues to be very well received by children and young people, parents/carers and practitioners. There has recently been a full refresh of the website with input from members of the Youth Cabinet and the changes are currently being uploaded.

- 4.1.11 RDaSH should continue to work in partnership with Rotherham Youth Cabinet on service improvements and are asked to submit a progress report on the changes as a result of this work to the Health Select Commission in September 2015.

RDaSH continues to work with the Youth Cabinet and has recently shared the transitions policy and a participation self-assessment audit with the Youth Cabinet for feedback.

- 4.1.12 RDaSH and RCCG should continue to work together in 2015 on developing a clearer breakdown of costs and on the definitions of treatment to inform future outcome measures.

There is currently national work being undertaken on developing a CAMHS payment system, which is at a small pilot and data gathering stage.

- 4.2 The full response to the Scrutiny review is attached at Appendix 1 and contains an action plan against the key recommendations and progress made as at March 2017.

5. Consultation

5.1 Evidence gathering as part of the Scrutiny review comprised of presentations, round table discussion and written evidence from health partners, RMBC officers, Rotherham Youth Cabinet and desktop research.

6. Timetable and Accountability for Implementing this Decision

6.1 It is anticipated that once the report has been noted and discussed by the Health Select Commission, the recommendations will continue to be taken forward within the timescales outlined and further progress updates will be made to the Health Select Commission.

7. Financial and Procurement Implications

7.1 The financial implications of implementing the Scrutiny review recommendations have been met through monies made available by NHS England to implement the CAMHS Transformation Plan and through the re-allocation of existing resources by RDASH as part of their service reconfiguration.

8. Legal Implications

8.1 There are no identified legal implications.

9. Human Resources Implications

9.1 There are no identified human resource implications.

10. Implications for Children and Young People and Vulnerable Adults

10.1 The Scrutiny review recommendations aim to impact positively on children and young people, through enhancing current mental health service provision.

11. Equalities and Human Rights Implications

11.1 There are no negative impacts identified as a consequence of taking forward the recommendations identified within this report. The recommendations will bring about a positive contribution to promoting equality through improving access into mental health provision from disadvantaged and vulnerable groups.

12. Implications for Partners and Other Directorates

12.1 The recommendations arising from the Scrutiny Review have implications for RMBC, Rotherham Clinical Commissioning Group and RDASH CAMHS. These responsibilities are outlined within the action plan that is attached at Appendix 1.

13. Risks and Mitigation

- 13.1 Accessible and high quality mental health care is essential for children and young people in all parts of the borough to achieve improved health outcomes and reduced health inequalities for our community. Higher levels of deprivation in Rotherham mean the prevalence of mental health disorders is estimated to be 14% above the UK average. The Joint Strategic Needs Assessment and local consultation identified high levels of emotional, behavioural and attention deficit disorders at 4-19 years and high levels of depression from 20+.
- 13.2 It is difficult to maintain an accurate overall picture of children and young people's mental health and the prevalence of mental health conditions across the borough, including comparisons over time. This is due to the complexity of multiple providers, different IT systems, variations in data recording, and young people moving between, or in and out of, services as their level of need changes, or potentially not accessing support.
- 13.3 Prevalence rates of mental health conditions in the population are estimated on the basis of national studies, taking account of the impact of socio-economic and demographic factors. However the current national prevalence rates were published by the Office of National Statistics in 2004 and are likely to be out of date.
- 13.4 There has been a whole service reconfiguration of CAMHS, which has resulted in a number of the actions within the response to the scrutiny review being significantly delayed, due to there being changes to pathways, component CAMHS services, such as the CAMHS SPA, and locality working. The whole service reconfiguration is now complete and the actions are being acted upon as outlined in the attached Response Template to the Scrutiny Review. To mitigate these risks, the timescales within the Response template have been revisited.

14. Accountable Officer(s)

Linda Harper, Interim Assistant Director of Children and Young People's Services

Approvals Obtained from:-

Strategic Director of Finance and Corporate Services - not applicable

Director of Legal Services - not applicable

Head of Procurement - not applicable

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