

NOTTINGHAMSHIRE CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) OVERVIEW AND PATHWAY REVIEW UPDATE

Purpose of the Report

1. To inform the Members of the Committee of:
 - a. the challenges faced by CAMHS both nationally and within Nottinghamshire
 - b. findings from the review of the Nottinghamshire CAMHS Pathway, the resulting recommendations and expected benefits of the proposed service model
 - c. the next steps required for approval and implementation of the model

Information and Advice

2. In a report published in November 2014, the Health Select Committee concludes that *"there are serious and deeply ingrained problems with the commissioning and provision of children's and adolescent's mental health services"* through the whole system from prevention and early intervention through to inpatient services. The executive summary of the Health Select Committee report is attached as **Appendix 1** of this report. A National CAMHS Taskforce has been established to take forward the recommendations made within the report and this is expected to raise CAMHS as a priority and increase levels of scrutiny nationally.
3. Locally, in November 2013, the findings of the 2013 health needs assessment (HNA) of the mental health and emotional wellbeing of children and young people in Nottinghamshire was published. In February 2014, a Health and Wellbeing Workshop focusing on CAMHS was held, where concerns were raised in relation to the changing patterns of mental health problems in children and young people and the capacity of CAMHS in Nottinghamshire to meet these needs. In December 2014, the HWB received a report describing the findings of the Nottinghamshire CAMHS pathway review and proposals for future commissioning.
4. Community CAMHS are currently commissioned by Clinical Commissioning Groups (CCGs), with specialised Tier 4 (in-patient CAMHS) commissioned by NHS England. In Nottinghamshire, the Children, Families and Cultural Services Department (CFCS) in the County Council funds additional posts within the Tier 2 CAMHS and also joint-commission the CAMHS Looked After Children service.

5. This paper reports on the CAMHS Pathway Review undertaken in Nottinghamshire, the recommendations arising from the review and proposals for future commissioning of services across the County.

Background to the CAMHS Pathway Review

6. On behalf of Nottinghamshire Clinical Commissioning Groups (CCGs) and Nottinghamshire County Council (NCC), the Children's Integrated Commissioning Hub (ICH) carried out a review of the Nottinghamshire CAMHS Pathway between October 2013 and April 2014. The review was initiated in response to the findings of the 2013 health needs assessment (HNA) of the mental health and emotional wellbeing of children and young people in Nottinghamshire and the reported pressures faced by CAMHS locally. The aim was that the findings of the review would inform the development of a commissioning framework for services going forward, to ensure that children and young people in Nottinghamshire achieve the best possible emotional wellbeing and mental health.
7. The review process, overseen by a Pathway Review Group, involved bringing service commissioners, providers, clinicians, third sector organisations, children, young people and their families together to review the current service provision, undertake gap analyses and consider evidence-based models of future delivery.
8. It was anticipated that the programme of work would result in the following outputs:
 - evidence review
 - new operating model
 - implementation strategy
 - workforce development strategy
 - performance management framework including a health needs assessment template for future use.

Key findings, proposed new service model and implementation plan

9. The review highlighted that staff are passionate, dedicated and are working hard to meet the needs of children, young people and their families. Areas of excellent practice were identified; however, significant challenges across the entire pathway, systems and processes were identified, reflecting the national concerns in relation to CAMHS. In summary:
 - parts of the CAMHS pathway are at gridlock and there is evidence of cumbersome processes affecting flow through the pathway
 - children and young people are falling through gaps between elements of the service
 - there are artificial barriers for families to navigate
 - in some localities children and young people are waiting a long time for a service
 - services are becoming crisis driven and are having difficulty in responding to new crises. This has impacts earlier in the system
 - primary care and universal services, including schools, do not receive sufficient support and advice to enable them to support children and young people.

10. Areas requiring further exploration included transition arrangements (between CAMHS and adult services) and the impact of parental risk factors – mental health, substance misuse and domestic abuse.
11. A new service model has been proposed in response to the findings of the pathway review and policy and evidence reviews. An overview of the model is attached as **Appendix 2**. The proposed model has been presented to all Nottinghamshire CCGs, the Children's Trust Board and HWB. The model has been widely supported with its ambition of improving the experience and outcomes for children, young people and their families through the provision of a responsive, flexible, service-user led model. The key components of the model aims to address the issues highlighted above:

Key components and benefits of new service model

Current issues	Proposed changes	Expected benefits
<ul style="list-style-type: none"> Primary care, schools and universal services receive insufficient support 	<ul style="list-style-type: none"> Provide a primary mental health function that offers training, advice and consultation 	<ul style="list-style-type: none"> Build understanding and capacity in primary care, schools and universal services Improve early identification of and support for emerging emotion and mental health needs Improve quality, timeliness and appropriateness of referrals into CAMHS Improve transition from specialist CAMHS to universal settings
<ul style="list-style-type: none"> Artificial barriers to navigate Children and young people falling through gaps between elements of the service 	<ul style="list-style-type: none"> Merge tier 2 and 3 CAMHS into 'One CAMHS' 	<ul style="list-style-type: none"> Remove artificial barriers between teams and tiers Reduce waiting, duplication and waste
<ul style="list-style-type: none"> Unclear referral criteria and processes Limited interface with Early Help services 	<ul style="list-style-type: none"> Integrate or co-locate CAMHS Single Point of Access within NCC's Early Help Unit 	<ul style="list-style-type: none"> Single referral point for CAMHS and Early Help services with clinical oversight and telephone advice Clearer referral criteria for professionals Multiagency triage and care planning
<ul style="list-style-type: none"> Parts of the system are at gridlock affecting flow of the pathway Long referral to assessment / treatment waiting times Limited national and local 	<ul style="list-style-type: none"> Implement Choice and Partnership Approach (CAPA) 	<ul style="list-style-type: none"> Evidenced-based model to manage capacity, demand and flow and reduce waiting times Delivery of evidenced-based, standardised interventions (care

capacity and demand intelligence		bundles) • Enables measurement of capacity, demand and outcomes, to inform future commissioning
• No dedicated assertive outreach and rapid response provision for CAMHS • Increasing numbers of children and young people are presenting in crisis, including as section 136 detentions in police cells • Increased inpatient admissions and length of stay	• Dedicated assertive outreach and rapid response team • Crisis response team to be developed in partnership with adult service	• Increase support for children and young people to be treated in the right place, at the right time, by the right person • Reduce admissions to inpatient care, reduce length of stay • Children and young people receive care closer to home

12. It is envisaged that robust, appropriately resourced implementation of the new service model will address many concerns raised within the Health Select Committee report in relation to CAMHS.

Agreeing and implementing model

13. Agreement to the recommendations and investment plans will require approval from each CCG Governing Body, as the accountable organisations commissioning CAMHS. Therefore the final review report, recommendations, any identified non-recurrent investment requirements and proposed implementation plan will be presented to the six Nottinghamshire County CCG Governing Bodies for consideration during January and February 2015.
14. Current implementation timescales are estimated to be 18 months, starting in April 2015. This is dependent on agreement by the six CCGs across Nottinghamshire.
15. As highlighted in the Health Select Committee report, *“those planning and running CAMHS have been operating in the fog”* which reflects the challenge in identifying current and realistic investment requirements at CCG level. In Nottinghamshire, CCGs are working to quantify levels of non-recurrent investment, using available data relating to estimated prevalence levels, current expenditure, activity and waiting times. It is envisaged that during the implementation phase, robust data on need, demand and required service capacity will be collated, to inform future commissioning.

Other Options Considered

16. There is widespread acknowledgement that the mental health and emotional wellbeing needs of children and young people in Nottinghamshire are not being met by current services and structures. The option of maintaining the status quo and not endeavouring to develop a CAMHS model fit for the future was not considered acceptable.

RECOMMENDATION/S

That the Health Scrutiny Committee:

- 1) Considers and comments on the findings of the review of the Nottinghamshire CAMHS Pathway, the resulting recommendations and expected benefits of the proposed new CAMHS model
- 2) Schedule further consideration of CAMHS issues, as necessary.

Councillor Colleen Harwood
Chairman of Health Scrutiny Committee

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Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Children's and young people's mental health and emotional wellbeing in Nottinghamshire – report to Health and Wellbeing Board on 6 November 2013

Nottinghamshire Children and Adolescent Mental Health Services (CAMHS) report to Health and Wellbeing Board on 3 December 2014

House of Commons Health Committee: Children's and adolescents' mental health and CAMHS, published on 5 November 2014