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University Health Board



<b>Meeting Date</b>	<b>28<sup>th</sup> March 2019</b>	<b>Agenda Item</b>	<b>2.4</b>
<b>Report Title</b>	Performance Update and Strategic Direction for Child & Adolescent Mental Health Services (CAMHS)		
<b>Report Author</b>	Michelle Davies, Head of Strategic Planning Joanne Abbott Davies, Assistant Director of Strategy & Partnerships		
<b>Report Sponsor</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Presented by</b>	Siân Harrop-Griffiths, Director of Strategy		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	<p>The purpose of this paper is to</p> <ul style="list-style-type: none"> <li>• Provide an update on CAMHS Performance;</li> <li>• Outline the strategic vision to develop a fully integrated Child &amp; Adolescent Mental Health Service (CAMHS) for the Swansea and Neath Port Talbot areas aimed at improving the sustainability of these services.</li> </ul>		
<b>Key Issues</b>	<p>Access to Child &amp; Adolescent Mental Health Services (CAMHS) for the ABMU population (and most other areas in Wales and across England) has historically been poor with long waiting times for children and young people. Performance has improved over the last 18 months, and as commissioners, ABMU has a much improved understanding of the challenges, barriers and opportunities for the service and has developed good working relationships to advance these services. In the medium to longer term, ABMU are working in partnership with Cwm Taf University Health Board to re-model CAMHS to implement a single point of referral and work towards full integration of Primary &amp; Secondary CAMHS. The revised service will have system wide benefits including improved access for specialist advice on referrals, improved waiting times, services provided in fit for purpose non-stigmatised facilities and consistent compliance with Welsh Government targets.</p>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the latest performance position for CAMHS;</li> <li>• <b>NOTE</b> the work that is being progressed strategically to enable CAMHS to be sustainable in the medium to long term;</li> <li>• <b>AGREE</b> the plans for the future integration of primary and secondary CAMHS to provide a sustainable service going forward.</li> </ul>		

# PERFORMANCE UPDATE AND STRATEGIC VISION FOR CHILD & ADOLESCENT MENTAL HEALTH SERVICES

## 1. Introduction

The purpose of this report is to-

- Provide the latest performance position of the Child & Adolescent Mental Health Services (CAMHS) provided for ABMU residents by Cwm Taf University Health Board;
- Outline plans to remodel the CAMHS Service to achieve a single point of referral and work towards a fully integrated single team of Primary & Secondary CAMHS for the Swansea and Neath Port Talbot areas.

## 2. BACKGROUND

The performance of CAMHS has been heavily scrutinised historically, as a result of poor access with long waiting times for children & young people. Performance has improved over the last 18 months, and as commissioners ABMU has an improved understanding of what the challenges, barriers and opportunities for the service and have developed good working relationships to advance these services.

Action has been taken to stabilise the CAMHS Service to maintain the improved position including additional waiting list clinics, however it has become clear that changes that are more radical are required to transform the service model to provide a sustainable service in the medium to long-term.

The constraints of the current CAMHS configuration include:

- Confusion for referrers about referral pathways and referral criteria / service thresholds between Primary and Secondary CAMHS
- Frustration for referrers re referrals being declined ('so called 'inappropriate referrals'). Currently approximately 50% of referrals to Secondary CAMHS are declined.
- Frustration and delay for families and young people when they are 'bounced' between Primary and Secondary CAMHS, either at the point of referral or following initial assessment.
- Transfers and discontinuity of care of families and young people having to move between Primary and Secondary CAMHS in order to access necessary clinicians, i.e. moving the service user to fit the needs of the service rather than the other way round.

## 3. Situation

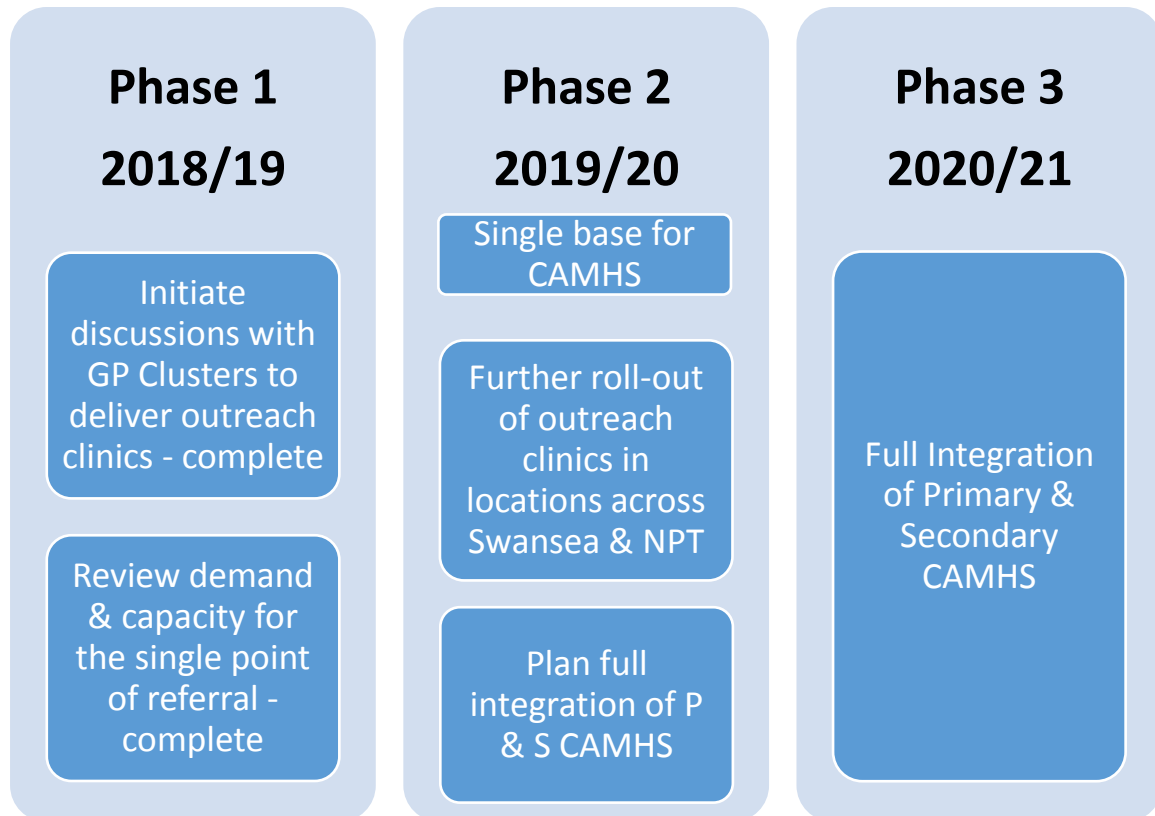
### 3.1 Strategic Direction

ABMU are working with Cwm Taf University Health Board to develop an integrated model and single team operating across Swansea and Neath Port Talbot (instead of the current 3 teams). The proposed integrated model will include a single point of referral / entry to the service via a telephone triage system, which will allow all professionals working with children and young people to access advice and consultation from CAMHS, and onward referral into CAMHS (primary or secondary) where appropriate. The service will use the Choice and Partnership Approach (currently embedded within Secondary

CAMHS) to facilitate provision of the right support, at the right time, to the right children, young people and families, by the right clinician from across the service. This will therefore provide a single point of referral to all primary and secondary CAMHS, an approach which is strongly supported by primary care and Local Authority partners.

The diagram below highlights the milestones to achieve an integrated model for CAMHS.

### Integrated Model for Primary & Secondary CAMHS



The benefits of the integrated model include:

- The current three small CAMHS Teams operating as a single team across Swansea and Neath Port Talbot, so improving the resilience of the service and reducing variation in access to services across the area;
- Improved access for patients with shorter waiting times;
- Advice and support for professionals;
- Appointments delivered at non-stigmatised outreach accommodation;
- CAMHS staff organised so that vacancies do not impact so significantly on performance;
- Consistent decision making on assessment of referrals to reduce the risk of children and young people 'bouncing' around the system;
- Compliance with Welsh Government targets.

The integrated model, has been developed with Cwm Taf University Health Board, and the CAMHS clinical leads within ABMU have been at the forefront of these discussions.

The integrated model has been discussed and agreed at the Children and Young People's Emotional Health & Wellbeing Planning Group, which is a Subgroup of the new West Glamorgan Children & Young People's Board, feeding into the Regional Partnership Board. The membership of this group includes the local authorities, ABMU, Cwm Taf UHB, CAMHS, third sector and parent representatives. The integrated model aligns well with the single point of access mechanisms set-up by both Swansea and Neath Port Talbot Local Authorities to manage referrals.

During 2018/19 plans included initiating discussions with GP Clusters on the roll-out of community clinics. There is an appetite amongst GPs and CAMHS to implement a pilot of this in 2 GP Clusters in 2019-20 and so planning work is underway to achieve this.

Monies have been secured for the last two financial years for CAMHS liaison posts to work within the local authority single point of access teams, and the Western Bay Partnership recently proposed the approval of monies for 2019/20 for the scheme to continue. Cwm Taf University Health Board are also in the process of setting up a CAMHS e-mail point of contact for all professionals to receive advice on referrals.

### **3.2 Performance**

This section of the report includes performance data for January 2019 and the 12-month trend for both Secondary CAMHS and Primary CAMHS. The performance data highlights that performance and compliance against the Welsh Government targets and the number of patients waiting fluctuates considerably over the 12 month period, and this is largely down to a number of vacancies across the service, with a number of staff on maternity leave, staff leaving, and vacancies having to be re-advertised.

However in spite of this variation, performance has been gradually improving, particularly over the last 2 months as shown in the table below. It should be noted compliance against the Welsh Government target of 80% of non-urgent Secondary CAMHS patients being assessed within 28 days has been achieved across the ABMU Health Board area in the week commencing the 22<sup>nd</sup> February for the first time ever. Average waiting times are also at an all-time low of 2.1 weeks.

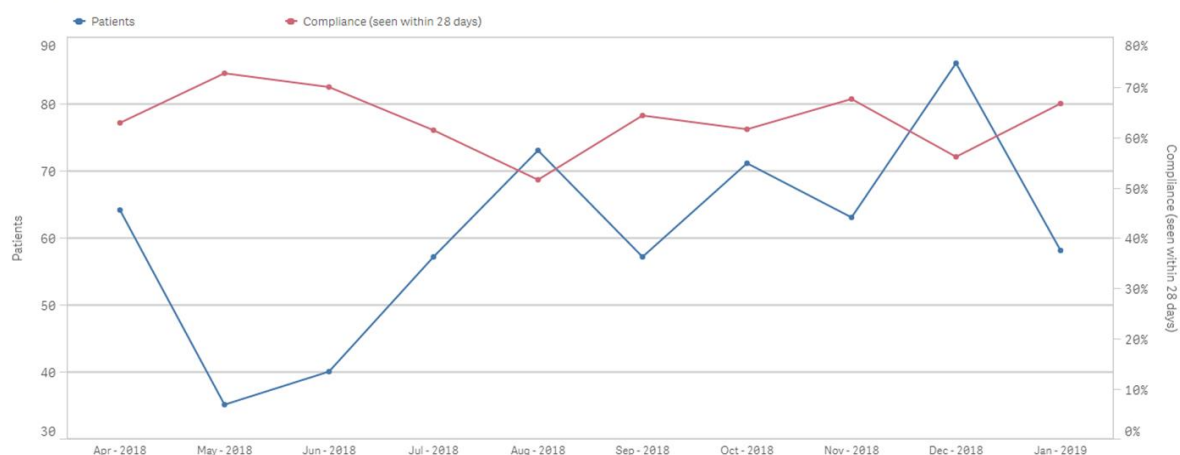
Position as at w/c 22 <sup>nd</sup> February 2019	Bridgend	Neath Port Talbot	Swansea	ABM Overall	Cardiff & Vale	Cwm Taf
<b>Total WL</b>	56	43	88	<b>187</b>	171	136
<b>&gt;4 weeks</b>	9	5	21	<b>35</b>	99	19
<b>Compliance</b>	84.2%	88.4%	76.1%	<b>81.4%</b>	42.4%	86.1%
<b>Average Weeks</b>	1.8	1.6	2.5	<b>2.1</b>	4.8	1.6

### (a) Secondary CAMHS (S-CAMHS)

As graph 1 below demonstrates, following a period of deteriorating compliance against the 28-day target, the position had improved significantly until May 2018. However, the position then deteriorated due to the reduction in waiting list initiative clinics and peak holiday season. The waiting list initiative clinics have now fully recommenced and it can be seen in the table above that the compliance has improved in February 2019.

Graph 1

Waiting List (LIVE) > 4 weeks



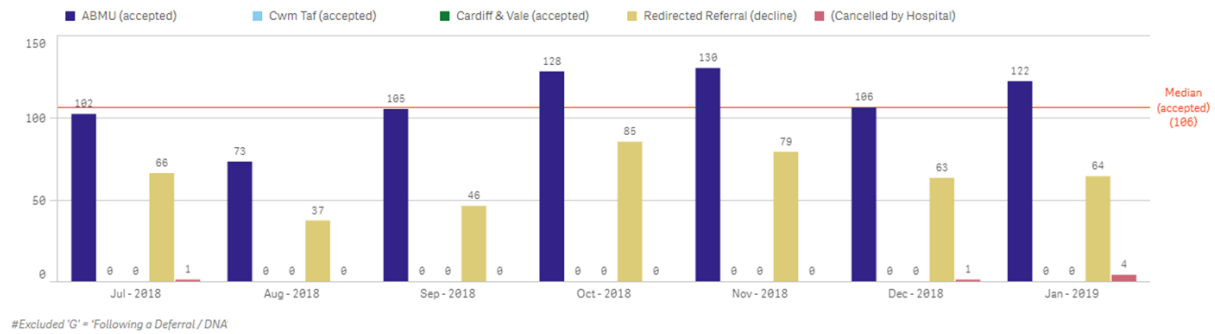
Performance monitoring is carried out formally on a monthly basis between ABMU and Cwm Taf, with updates on performance being received by ABMU on a weekly basis.

As graph 2 overleaf demonstrates, the number of referrals received in recent months is consistent with previous months. The median accepted in 2017/18 was 98 per month with an average % accepted of 62%. The median accepted in 2018/19 to date is 106 per month with an average % accepted of 67%. Encouragingly, not only have access times reduced, but also the proportion of referrals outside SCAMHS referral criteria has reduced significantly from the average 50% of a year ago. However more needs to be done to reduce the number of inappropriate referrals, and so ABMU is leading a work-stream for CAMHS prevention and well-being, which is looking at the

gaps in service provision that could potentially be causing this unnecessary activity. There is significant variation across different GP practices and this has been highlighted via the Local Medical Committee with individual practice graphs being distributed to show individual performance in comparison with other practices in the area.

**Graph 2**

The number of referrals made for an assessment to CAMHS received during the month of: showing Accepted and Declined referrals

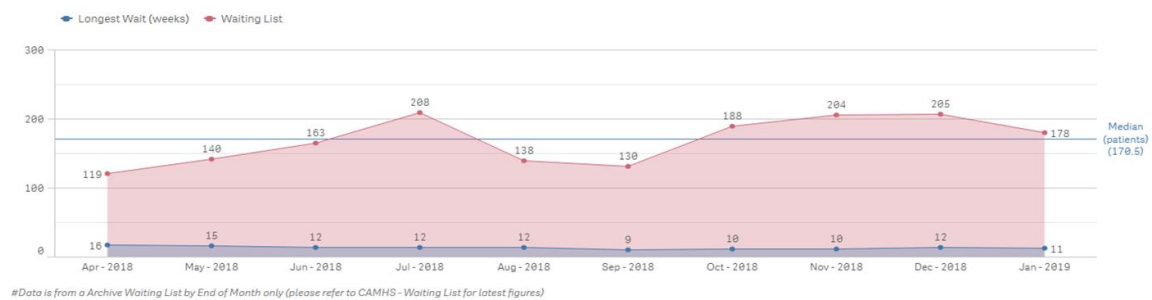


**(b) Primary CAMHS (P-CAMHS)**

As graph 3 below demonstrates, the total patients waiting and longest wait had reduced but increased again since September. However, the waiting list is at 209 on 25 February 2019 with 61 patients waiting over 4 weeks for assessment. The current compliance is 70.8%, a significant improvement again compared to past performance. Additional Waiting List Initiative clinics are being run to improve throughput as this very small service has a number of vacant posts which has a significant input in the ability of the team to treat the patients referred in a timely manner.

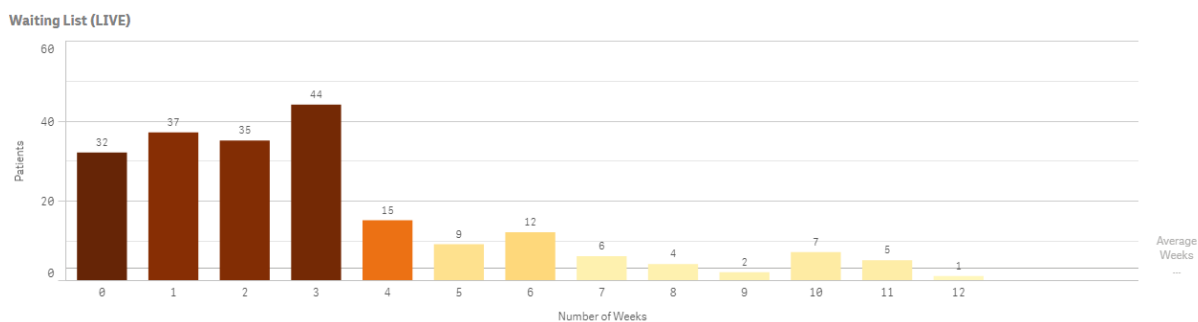
**Graph 3**

Running Waiting List Total & Longest Wait



**P-CAMHS waiting list - as at 25<sup>th</sup> February 2019**

Graph 4 overleaf shows the distribution of numbers of patients waiting as at 25 February 2019 by number of weeks. The longer wait patients are being prioritised through the waiting list initiatives to further improve the position.



A review of Primary CAMHS has been undertaken by the NHS Delivery Unit during January, and the feedback as a result of this review will be considered jointly by commissioners and providers. It is understood that Cwm Taf UHB are likely to ask the Delivery Unit to undertake some additional work on their CAMHS services to understand the significant variation in practice which seems to exist across different teams.

#### 4. GOVERNANCE AND RISK ISSUES

Governance is much improved with consistent commissioning arrangements in place to monitor performance, and to discuss strategic priorities.

In addition to the monthly commissioning meetings between ABMU and Cwm Taf, the Health Board now leads and manages a Children & Young People’s Emotional Health & Well-being Planning Group. Whilst this group is led by the Health Board, membership covers all partners including local authorities, third sector and service user representation. The work programme of the Group allows all partners to review CAMHS performance and to identify opportunities for improving services and ways of working.

Whilst performance has stabilised and is currently in a much improved state, CAMHS remains on the ABMU Health Board’s risk register. Performance can fluctuate considerably, due to the staff shortages as set out above, and the trends to date have not shown signs of consistency. It is unlikely that such consistency will be achieved until the service is operating as a single team, with increased resilience and ability to cover staff absences when required.

The Health Board’s Performance & Finance Committee has received regular updates on CAMHS performance and has undertaken in-depth discussions and analysis on these over the past 12 months. As a result the Committee has been assured on the actions being taken to secure improved performance against Welsh Government targets, and improving access for children & young people.

To ensure that the Health Board develops and delivers actions that are relevant to children & young people, the Strategic Planning Directorate has been working with partners to improve governance structures and relationships to ensure partners have shared priorities that are addressed on a multi-agency basis. In 2018/ 19 there have been a number of successes as a result of partnership working as follows:

- In 2018/ 19 additional funds were secured from the Western Bay Integrated Care Fund (ICF) as follows:

- £160,000 revenue to provide additional support for Screening, Early Intervention and Prevention as part of plan to move towards a single point of access for CAMHS
  - £544,000 revenue to fund the new Western Bay Multi Agency Placement Support Service (MAPSS). The team aims to help children with, or at risk of mental illness and emotional and behavioural difficulties by providing specialist placement support.
  - £500,000 capital to fund the refurbishment of Health Board accommodation for the Integrated Autism Service, MAPSS, Neurodevelopmental Disorders Service and CAMHS.
- In 2015, Swansea Council set up a Scrutiny Panel and developed an action plan with a series of recommendations for the Health Board and the local authority due to a number of concerns about access for children and young people to CAMHS. In November 2018 following a presentation from the Health Board, members of the Panel felt sufficiently assured that they agreed no further follow-up of the recommendations was required – this represents a significant positive change in the relationships between agencies.
  - £100,000 recurrent funding has been secured from the Mental Health Transformation Fund to develop universal/ tier 1 services. A task & finish multi agency group has been set-up to review current support services, and identify the gaps to ensure the investment achieves value and good outcomes for children & young people.

## 5. FINANCIAL IMPLICATIONS

There are no financial implications to consider as part of this report.

## 6. RECOMMENDATION

Members are asked to:

- **NOTE** the latest performance position for CAMHS;
- **NOTE** the work that is being progressed strategically to enable CAMHS to be sustainable in the medium to long term;
- **AGREE** the plans for the future integration of primary and secondary CAMHS to provide a sustainable service going forward.

<b>Governance and Assurance</b>										
<b>Link to corporate objectives</b> <i>(please ✓)</i>	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	✓		✓		✓		✓		✓	
<b>Link to Health and Care Standards</b> <i>(please ✓)</i>	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care	Individual Care	Staff and Resources			
	✓	✓	✓		✓	✓	✓			
<b>Quality, Safety and Patient Experience</b>										
The report highlights a plan to secure the long-term sustainability of CAMHS, and action taken to date to stabilise the services' performance.										
<b>Financial Implications</b>										
Members of the Board are not being asked to approve any financial assumptions.										
<b>Legal Implications (including equality and diversity assessment)</b>										
There are no legal implications associated with this report or the plans outlined within it.										
<b>Staffing Implications</b>										
There are no staffing implications associated with this report or the plans outlined within it.										
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015 - <a href="https://futuregenerations.wales/about-us/future-generations-act/">https://futuregenerations.wales/about-us/future-generations-act/</a>)</b>										
The actions outlined in the report support the five ways of working outlined in the Act. ABMU Health Board are working with all partners to identify improved ways of working and secure the long-term sustainability of services.										
<b>Report History</b>	The Board receives regular updates on CAMHS.									
<b>Appendices</b>	There are no appendices to this report.									