



**Community and Wellbeing Scrutiny  
Committee**  
28 November 2018

**National Health Service  
Brent Clinical Commissioning Group**

**Children and Adolescent Mental Health Services Update**

<b>Wards Affected:</b>	All
<b>Key or Non-Key Decision:</b>	Non-key
<b>Open or Part/Fully Exempt:</b>	Open
<b>No. of Appendices:</b>	One: <ul style="list-style-type: none"> <li>Child and Adolescent Mental Health Services Local Transformation Plan</li> </ul>
<b>Background Papers:</b>	None.
<b>Contact Officer:</b>	Duncan Ambrose Assistant Director, Brent CCG Email: <a href="mailto:Duncan.ambrose@nhs.net">Duncan.ambrose@nhs.net</a> Tel: 0208 900 5371

## 1.0 Purpose of the Report

- 1.1 This report provides an overview of the current Child and Adolescent Mental Health Services (CAMHS) offer in Brent, the improvements and investments identified as in the CAMHS Local Transformation Plan (Appendix1, attached) as a response to 'Future in Mind'.
- 1.2 This report provides an update on progress against the recommendations made by the Brent Council Community and Wellbeing Scrutiny Committee CAMHS Task and Finish Group as set out in their report of July 2017.




## 2.0 Recommendations


- 2.1 The Community and Wellbeing Scrutiny Committee is asked to note the report.

### 3.0 Progress against the Scrutiny Task Group recommendations

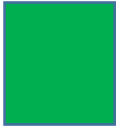
3.1 Progress against the Scrutiny Task Group recommendations is set out in the tables below:

#### Brent Clinical Commissioning Group focused actions

Recommendations	Achievements	Challenges	RAG rating
<p>1. Increase investment in mental health support with Brent's schools to ensure all schools can access Targeted Mental Health in Schools (TaMHS), Place2Be or an equivalent mental health support programme for schoolchildren.</p>	<p><b>Targeted Mental Health in Schools</b> (jointly funded by some schools and Brent Council) provided by Central and North West London NHS Foundation Trust which, also provides our specialist CAMHS service. <b>Place2Be</b> is directly funded by some schools and <b>Brent Centre for Young People</b> is also funded by some schools and commissioned by NHS Brent CCG). Brent CCG submitted a bid for School CAMHS service.</p> <p>Brent CCG submitted a bid to NHSE to increase mental health support in schools (2019/20 £2.124m and 2020/21 £2.786m) by providing a Designated Mental Health Advisor to work across schools.</p>	<p>Individual schools have responsibility for deciding their own mental health support offer for pupils, parents and staff and communication and engagement with schools remains important, to ensure investment effectively aligns with the work of schools. NHSE are currently evaluating school CAMHS bids. A decision by NHSE was originally due week commencing 15<sup>th</sup> October. There are recruitment challenges for CAMHS in recruiting to specialist posts.</p>	 <p>Red/ Amber</p>
<p>2. Improve pathways to young people receiving CAMHS support by emphasising to head teachers that they can refer directly to CAMHS and increasing the CCG's information and communication to schools about what support is available.</p>	<p>Brent CCG have engaged with schools directly and through partnership fora to confirm referral processes, leading to a positive impact in referrals. Community wellbeing practitioners working in schools are supporting children and young people to access services in a timely fashion.</p>	<p>Increasing numbers of children who require access to CAMHS.</p>	 <p>Amber /Green</p>
<p>3. Offer a programme of peer and staff support in schools and further education to strengthen awareness of emotional health and wellbeing and signpost them to effective support.</p>	<p>School CAMHS bid submitted to support the School CAMHS role. Mental Health First aid training has been offered to all schools and settings.</p>	<p>Recruitment of CAMHS workforce</p>	 <p>Amber</p>

<b>Recommendations</b>	<b>Achievements</b>	<b>Challenges</b>	<b>RAG rating</b>
<p><b>4. Organise a network of community champions to promote good mental health and wellbeing among children and young people in their community and signpost young people to effective support.</b></p>	<p>The Thrive plan for 2018/19 which is linked to the school CAMHS bid includes proposals to establish these community champion roles. A steering group has been established which works to promote emotional wellbeing and service information within the community and ensured co-production throughout the delivery of the LTP. The CCG has commissioned Community Barnet to continue with this engagement.</p>	<p>More work needed to establish a directory to sign post parents and carers and community members to.</p>	  <p>Amber /Green</p>

### **Brent Clinical Commissioning Group and Brent Council**

<p><b>5. Organise a one-off event for parents modelled on It's Time to Talk to develop community-led solutions to improving children and young people's emotional wellbeing and mental health in Brent, and strengthen partnership working between the CCG, local authority, schools, voluntary sector, faith and community groups, youth organisations, and further education colleges on this issue.</b></p>	<p>An event for parents and relevant stakeholders took place in October 2017 and was well attended. The focus of the event was to provide an update on work that was being done locally around CAMHS. The feedback highlighted parents wanted a single point of contact and seamless service, irrespective of funding streams. A further parent/carer event will be held in February 2019.</p>	  <p>Green</p>
--	--	---

#### **4.0 Next steps and the Local Transformation Plan**

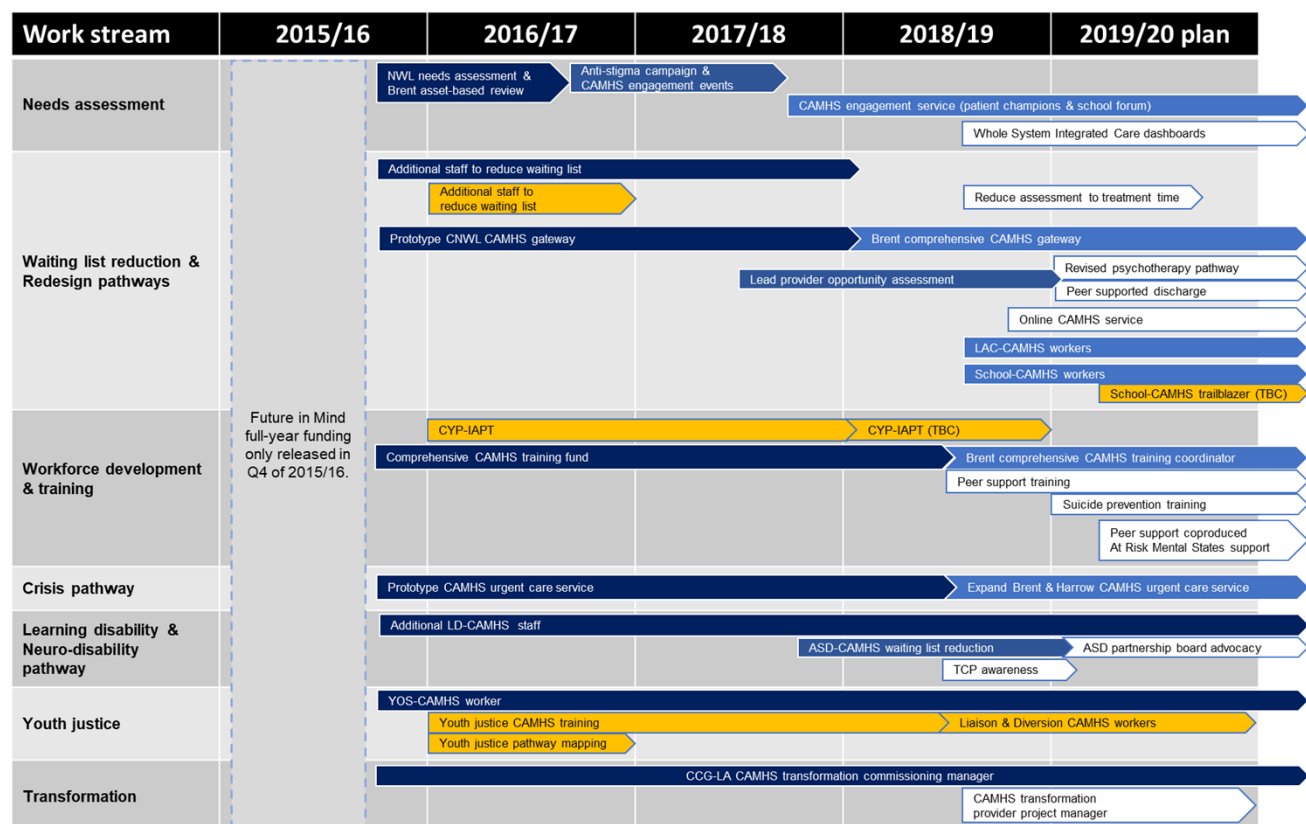
- 4.1 Implementing the Five Year Forward View for Mental Health includes our ambition to locally expand service areas, along with refreshing and republishing our Local Transformation Plans (LTPs) for Children and Young People's Mental Health. The Brent Local Transformation Plan is appended to this report.
- 4.2 The table overleaf provides a list of questions that were asked by the Scrutiny Committee and where this information can be found in our LTP.

<b>Scrutiny Questions</b>	<b>LTP Page ref.</b>
Background - existing CAMHS Universal to Specialist with the Providers and Commissioners, including services provided by NHS England	19-28
Development of the CAMHS Local Transformation priorities and governance relationships with other statutory boards	19-28
Tier-based model and THRIVE	7,21
Update on the CAMHS Local Transformation Plan 2016/17 and 2017/18 and how it supports meeting of priorities	6,19,21
How transition between CAMHS and Adult Services are organised	25
Objectives and delivering on priorities for 2018/19	8
Update on implementation of THRIVE model	7
Member' 2017 scrutiny task group. Progress with recommendations	6
Contextual data on demographic profile of Brent's children and young people	10-11
Available local or national data on the extent of mental health problems experienced by children and young people	8-9
Demographic data on those who are accessing CAMHS services by gender, age , ethnicity	8-11
Data on the caseload for services from universal to specialist community services	15, 19-21
Data on the length of time to access CAMHS inpatient services	27
In 2016 a CAMHS out-of hours pilot started. What have been the results?	16,28
Current investment in CAMHS in Brent	12,13

- 4.3 Brent Children's Trust has agreed a model for CAMHS transformation based on the THRIVE model.
- 4.4 The initial focus from 2015/16 to 2017/18 was on understanding local needs, reducing waiting times, and establishing an effective crisis response service. In addition to transformation funding from NHS Brent CCG, additional funding was provided by NHS England. NHS Brent CCG and Brent Council have committed to maintain the existing level of investment in mental health and emotional wellbeing services while seeking to improve value for money.

## Roadmap of milestones in Brent's Children and Young People's Mental Health and Wellbeing Local Transformation Plan

Yellow = NHS England time limited funding; Blue = CCG funding in progress/committed; White = CCG funding proposed.



4.5 Since 2015, Brent specialist Child and Adolescent Mental Health Service (CAMHS) waiting list size has more than halved, even though referral numbers have increased. A new screening and triage process was prototyped so that children with a possible diagnosable mental health condition were prioritised as emergency, crisis, urgent, or non-urgent. Brent specialist CAMHS achieved compliance for 85% of cases with the NHS Constitution standard of 18 weeks from referral to consultant-led treatment for non-urgent conditions. Urgent cases are seen within 1 week, and emergency cases are seen within 24 hours. Further throughput efficiency can be achieved by reviewing internal processes from assessment to treatment, and improving the aftercare support available on discharge.

4.6 In 2018/19, we are revising the CAMHS gateway to be a consistent access route for all commissioned CAMHS in Brent. We are exploring options for lead provider or Alliance Agreements to further reduce barriers and gaps between organisations.

4.7 In 2018/19, having successfully reduced waiting times, the focus changed to designing and implementing new services for children with suspected autistic spectrum disorder, Looked After Children, and schools.

4.8 Workforce and recruitment and retention issues remain a challenge to the delivery of transformation of service. Multiple attempts to recruit to existing

vacancies and to these new roles highlighted the extreme workforce challenges facing child and adolescent mental health services. The number of psychiatrists and mental health nurses are falling, as are training places for developing alternative roles. Brent CAMHS made job offers more attractive by offering additional training and development support. Rather than continue to recruit from a very limited labour market, there is a clear need for development of local peer support roles that can supplement and support non-specialist elements of care. Additionally, online support has been shown to be effective in giving children and families accessible and quality assured support without creating additional demands on the existing CAMHS staff.

- 4.9 Staff retention in Brent has been complicated by an increasing number of attractive opportunities across England, and the high cost of living associated with London. As a result some good staff have left to find more affordable housing elsewhere. Housing and keyworker options may help improve staff retention.
- 4.10 A further complicating factor in 2018/19 delivery has been the multiple, competing demands on specialist CAMHS staff to deliver more clinical work, and also give up clinical time to be involved in service redesign. A dedicated, time-limited CAMHS transformation manager working within specialist CAMHS is being recruited in 2018/19 to increase the pace of change.
- 4.11 The CAMHS transformation progress is led through Brent Children's Trust, and reported to Brent Health and Wellbeing Board.
- 4.12 NHS England has been assured of the NWLCCGs transformation plan financial achievement following a robust, independent audit in 2017/18, and will be looking at further financial assurance against that audit as the baseline position. The NHS England national team has modelled how the Mental Health Five Year Forward View savings and investments were expected to impact on each CCG in England. To support increasing levels of spend in other areas (including children's mental health), the NHS England national team has made assumptions about savings for CCGs to deliver in physical health care (due to improve talking therapy support for adults with long-term physical health conditions, and improved annual health reviews for adults with serious mental illness a physical long-term condition).
- 4.13 NHS England and CCGs recognise that no investment in children's mental health has been ring-fenced within CCG baselines, and no assumed savings in other areas of the Mental Health Five Year Forward View are guaranteed. NHS England and CCGs are committed to ensuring investment in child and adolescent mental health care is increased sustainably, as it has been to date, and that this leads to meaningful benefits to children, families, and local communities. The NHS England London Regional Team will review NWLCCG transformation plans to assure the expected level of investment is in the plan. As in previous years, once the plan has been assured it will be formally published on CCG websites, so it is available to members of the public. We expect this publication to be no later than 31 January 2019.

<b>Brent - CAMHS transformation financial summary</b>					
	2015/16	2016/17	2017/18	2018/19	2019/20 plan
<b>Allocation</b>					
Eating disorders	£163,584	£173,000	£173,000	£173,000	£173,000
Future In Mind transformation	£409,468	£420,000	£420,000	£432,032	£451,905
Waiting list reduction		£75,000			
CYP-IAPT		£15,000	£22,500	£13,000	
Youth justice mapping		£27,784			
Youth justice liaison & diversion		£85,106	£85,106	£85,106	£85,106
Perinatal mental health					
School CAMHS Trailblazer (tbc)					
<b>Subtotal</b>	<b>£573,052</b>	<b>£795,890</b>	<b>£700,606</b>	<b>£703,138</b>	<b>£710,011</b>
<b>Transformation plan</b>					
Needs Assessment	-£36,000	£0	£0	£0	£0
Community Eating Disorder services	-£163,584	-£173,000	-£173,584	-£173,584	-£173,584
Redesigning Pathways	-£154,468	-£109,000	-£112,000	-£100,420	-£45,322
Learning Disability & Neuro Disability services	-£96,000	-£62,000	-£63,550	-£64,186	-£67,139
Crisis & Urgent Care Pathway	-£10,000	-£110,000	-£111,725	-£112,110	-£117,267
Engagement & Communication	-£32,000	-£12,000	-£12,000	-£12,120	-£12,678
Workforce Development & Training	-£41,000	-£36,000	-£29,141	-£25,198	-£22,929
Embedding Future in Mind	-£40,000	-£91,000	-£91,000	-£92,820	-£97,090
CNWL Transformation Manager				-£22,700	-£68,000
<b>Other initiatives</b>					
Waiting list reduction		-£75,000			
CYP-IAPT		-£15,000	-£22,500	-£13,000	-£15,000
Youth justice mapping		-£27,784			
Youth justice liaison & diversion		-£85,106	-£85,106	-£87,000	-£91,002
Perinatal mental health					
<b>Subtotal</b>	<b>-£573,052</b>	<b>-£795,890</b>	<b>-£700,606</b>	<b>-£703,138</b>	<b>-£700,013</b>
<b>Total variance</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>

### **Assurance of increased spend in CAMHS**

4.14 The table above reflects planned transformation spend. NHS England monitors the monthly totality of spend by NHS Brent CCG on CAMHS through the non-Integrated Single Financial Environment (non ISFE) submissions. At the end of 2017/18, NHS Brent CCG reported a spend of £3.409m (excluding eating disorders). The forecast spend by the end of 2018/19 is £3.776m (excluding eating disorders), which is greater than the minimum growth in spend expected by NHS England. For our CAMHS redesign we know we need to reduce assessment to treatment waiting times.

4.15 In Sep'18, Brent Council and Brent CCG provided CAMHS finance data for a Statutory Information Request from the Children's Commissioner for England

which is included as contextual information on the partnership resource commitment.

- CCG CAMHS total funding of £3,954,000 includes specialist CAMHS and non-specialist CAMHS.
- Brent Council 2017/18 accounting data shows £1,153,987 spend on CAMHS.
- NHS England funds c£400,000 for inpatient CAMHS for Brent children.
- Schools directly purchase services, c£160,000.

## **5.0 Financial Implications**

5.1 There are no plans to disinvest in CAMHS in Brent. The CAMHS Local Transformation Plan will review existing arrangements with the intention of reshaping and improving the use of resources. Existing investment from schools, Brent Council, NHS Brent CCG, and NHS England is around £5.7m in 2018/19.

## **6.0 Legal Implications**

6.1 Brent CCG are exploring opportunities for a lead provider or Alliance approach with the local authority, noting our contract with Brent Centre for Young People will be coming to an end in May 2019.

## **7.0 Equality Implications**

7.1 Children with mental health and emotional wellbeing needs are a vulnerable group. The work of the Brent Children's Trust implementing the Transformation Plan will continue to improve the access to services and outcomes for these children.

## **8.0 Consultation with Ward Members and Stakeholders**

8.1 Ward members who are members of the Community and Wellbeing Scrutiny Committee will be involved in scrutinising this report at committee.

**Report sign-off:**

**DUNCAN AMBROSE**

Assistant Director, NHS Brent CCG