

From: Peter Oakford, Cabinet Member for Specialist Children's Services
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To: Children's Social Care and Health Cabinet Committee – 11 January 2017

Subject: **UPDATE ON THE CHILD AND ADOLESCENT MENTAL HEALTH SERVICE**

Classification: Unrestricted

Previous Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: This report provides an update on the performance of the current Child and Adolescent Mental Health Service (CAMHS) contract, including the service for Kent Children in Care.

In line with national trends the service is continuing to receive high numbers of referrals. The number of referrals received out of hours is higher than anticipated at the tender stage. This high demand is impacting on the ability to meet the waiting times set out in the contract. Officers from the Councils commissioning unit continue to monitor performance and work with the provider to address these.

Since January 2014 the Council and the Clinical Commissioning Groups have been working together to improve the current position, but also to develop the Emotional Wellbeing and Mental Health Strategy, The Way Ahead. This has resulted in the development of the new whole system integrated model which has been designed to address the gaps in the current services and pathways.

The procurement of the new mental health service for children and young people is ongoing. The new service is due to start 1 September 2017.

Recommendation(s): The Children's Social Care and Health Cabinet Committee is asked to **NOTE** the content of the report.

1. Introduction

- 1.1 The current child and adolescent mental health service is provided by Sussex Partnership Foundation Trust (SPFT). The service is commissioned by West Kent Clinical Commissioning Group (WKCCG) on behalf of all the CCGs and the County Council.
- 1.2 The current contract is due to end on 31 August 2017. A new children and young people mental health service is currently being procured.

2. Background

- 2.1 In January 2014 Kent Health Overview and Scrutiny Committee (HOSC) raised concerns regarding the performance of the child and adolescent mental health service across Kent. This prompted a review of the service which found disparity between how schools support children and young people, how staff approach building resilience, numerous contact points in the system and disjointed services with too much focus on 'tiers' of service rather than on the needs of children and young people, plus lengthy waiting times for assessment and treatment.
- 2.2 This led to the development of the Emotional Wellbeing and Mental Health Strategy; The Way Ahead. The Strategy and procurement process have been the subject of papers to the Children's Social Care and Health Cabinet Committee and HOSC.

3. Contract performance

3.1 Mainstream service

- 3.1.1 Demand remains high for the service. In September 2016 there were 81 emergency referrals of which 44 presented out of hours. The tender documentation estimated that there would be ten out of hours referrals per month.
- 3.1.2 All of the children and young people who presented out of hours were seen within the required 24 hours and received appropriate intervention.
- 3.1.3 The high number of emergency referrals increases the pressure on the mainstream service, where referrals also remain high, averaging 910 referrals a month. During the last year the lowest number of referrals was 671 in August and the highest number of referrals was 1,032 in May. This is a typical pattern around the school year. There are currently (September 2016) 7,859 children and young people open to the service.
- 3.1.4 Currently (September 2016) there are 624 children and young people on the waiting list; this is a decrease from 980 in September 2015. 53% of children and young people are seen within the target time of six weeks. The average waiting time for routine assessment is 8.6 weeks. The longer waiting times are for specialist assessments. This continues to be a challenge.

3.2 Children in Care (CiC) service

- 3.2.1 In September 2016 there were 315 CiC being supported by the specialist CiC mental health team and a further 339 CiC who are supported within the mainstream service where their needs can be more appropriately met.
- 3.2.2 73% of children and young people have an assessment within six weeks. The average waiting for an assessment is currently five weeks.

4. Contract management

- 4.1 The contract for the provision of the CAMHS is between WKCCG and the provider, SPFT. There are monthly performance monitoring meetings, chaired by WKCCG which representatives from the other CCGs and the Council attend.
- 4.2 In addition, the Council chairs regular performance monitoring meetings with a specific focus on the CiC element of the service. During these meetings it has been possible to highlight challenges and successes. The function of the CAMHS CiC service is to help maintain placement stability, particularly where a child's emotional wellbeing or mental health needs are having an impact. Recognising and responding to the complex care needs of CiC and the need for specific case discussion, SPFT staff run drop-in sessions at the social work teams in order to offer immediate case consultation with a view to promoting placement stability.

5. Commissioning update

5.1 Whole system integrated model

5.1.1 The Children's Social Care and Health Cabinet Committee has previously welcomed and endorsed the proposal to commission new emotional wellbeing and mental health services as part of a whole system model.

5.1.2 The whole system comprises:

- Specialist and targeted mental health services for children and young people
- Primary School Public Health Service
- Adolescent Health and Emotional Wellbeing Service
- HeadStart
- KCC Early Help and Preventative Service

5.1.3 The new system has been designed to address the challenges within the current services and respond to the consultation carried out at the start of the procurement process. In the new integrated whole system there will be a greater focus on early intervention. This is being addressed in a number of different ways; through the commissioning of the two new services; Primary School Public Health Service and the Adolescent Health and Emotional Wellbeing Service which was the subject of a paper to the Children's Social Care and Health Cabinet Committee in November 2016.

5.2 Early Help and Preventative Services

5.2.1 In recognition of the growing demand for emotional wellbeing services and the impact that it has on children and families, the Council's Early Help and Preventative Services (EHPS) have re aligned some of their funding for commissioned services to ensure that there is specialist mental health support in the Early Help Units. The specialist mental health workers will be part of the Early Help Units, based in the Units and working as part of the Early Help team, they will undertake case work and provide consultation to the staff. This development is being put in place now; a team of staff are currently being recruited. This is also included in the new mental health contract going forward.

5.2.2 As part of the revised and enhanced service model there will be specialist mental health staff working closely with the Health Needs Education Service, for children with mental health needs. Staff will be aligned with the mental health needs schools and will undertake case work and provide consultation to the staff. As above staff are currently being recruited.

5.3 Children in Care (CiC)

5.3.1 The model of supporting CiC is changing; currently children can be supported by either the specialist CiC mental health team or by the mainstream team. Furthermore some children and young people are referred out to other providers for specialist services e.g. for children who have been sexually abused or who exhibit harmful sexual behaviour. These services will now all fall within the scope of the new contract for specialist mental health services.

5.4 HeadStart

5.4.1 The HeadStart Kent project is part of the whole system. The project provides early intervention and promotes resilience to help young people cope better when faced with difficult circumstances in their lives, preventing them from experiencing common mental health problems.

5.4.2 The Council is one of just six Local Authorities to receive additional Big Lottery funding, following the successful work in Kent over the past two years. Phase three will focus on:

- promoting the importance of resilience in young people, and providing early support to prevent problems getting worse
- developing approaches that ensure timely and accessible support, including direct access in appropriate settings
- transforming the skills and understanding of the wider workforce, so they better engage and respond to young people's emotional and health needs
- championing approaches that recognise and strengthen wider family relationships
- preparing children and young people so they have a positive transition between services including should they need them, adult services
- enabling young people to have the skills and confidence to better manage adversity and be able to access and negotiate support should they need it.

5.5 Commissioning for outcomes

5.5.1 The specification for the new children and young people mental health service has been developed and written with a focus on outcomes. The provider will be expected to use a range of tools, including recognised clinical tools and user feedback to evidence improvement in a child or young person's mental health and achievement of their goals.

5.5.2 This will be underpinned by routine performance monitoring data.

5.5.3A major benefit of the whole system approach and procuring the children and young people mental health service in parallel with the Primary School Public Health Service and the Adolescent Health and Emotional Wellbeing Service is that there will be a core data set across all the services, thus enabling better intelligence gathering and data analysis in future.

6. Procurement timeline

6.1 The procurement process for the specialist mental health service and the Primary School Public Health School Service and Adolescent Emotional Wellbeing Service is being led by the Council's Strategic Procurement team. This has been a well managed process. Both procurement streams are on track with the contract for the Public Health services due to be awarded at the end of January 2017 and the specialist mental health contract being awarded in May 2017.

7. Financial Implications

7.1 Specialist Childrens Services (SCS) currently contribute £1m per year to the mental health contract for the children in care element of the service. SCS also separately commission services for children who have been sexually abused and who exhibit harmful sexual behaviour. This funding will go into the new contract.

7.2 EHPS will be contributing £1.4m per year to the new contract for the specialist mental health workers in the Early Help Units and aligned to the Mental Health Needs Schools.

8. Legal Implications

8.1 A range of legal Agreements will be needed between the Council and the lead CCG to underpin the new contract for children and young people mental health service. These agreements will set out the contract management, monitoring, governance and financial arrangements between the Council and the CCGs. These are currently in development.

8.2 At its meeting on 5 July 2016 the Children's Social Care and Health Cabinet Committee endorsed the decision to be taken by the Cabinet Member for Specialist Children's Services:

- a) That Kent County Council enter into such legal agreements that are necessary and appropriate to enable the joint operational delivery of the project between the County Council and West Kent Clinical Commissioning Group and the provider for the purpose of jointly procuring a mental health service for children and young people, including children in care and integrated provision within the health needs pupil referral units and
- b) To delegate authority to the Corporate Director of Social Care, Health and Wellbeing or other nominated officer, to undertake the necessary actions to enter into the agreements

9. Conclusion

- 9.1 There are ongoing challenges with the current service with the waiting times and high demand. Officers from the Council's commissioning unit continue to monitor performance and work with the provider to address these.
- 9.2 The services described above are part of a whole system pathway designed to meet the emotional wellbeing and mental health needs of children and young people, to prevent escalation and enable fast access to the right part of the system.

10. Recommendation

Recommendation(s): The Children's Social Care and Health Cabinet Committee is asked to **NOTE** the content of the report.

11. Background Documents

Reports to Childrens Social Care and Health Cabinet Committee on:
22 March 2016 <https://democracy.kent.gov.uk/documents/s63942/C1%20-%20Procurement%20of%20Children%20and%20Young%20Peoples%20Mental%20Health%20Service.pdf>

8 September 2015 <https://democracy.kent.gov.uk/documents/s59415/B2%20-%20Emotional%20Health%20and%20Wellbeing%20Strategy%20Cover%20Report%20-%20Final.pdf>

12. Contact details

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