Wolverhampton Clinical Commissioning Group

# WOLVERHAMPTON CCG

# Governing Committee Meeting 10<sup>th</sup> October 2017

Agenda item 12 TITLE OF REPORT: CAMHS transformation refresh 2017 - 2020 AUTHOR(s) OF REPORT: Mags Courts MANAGEMENT LEAD: Steven Marshall **PURPOSE OF REPORT:** To present the first draft of the CAMHS transformation plan refresh.  $\boxtimes$ Decision ACTION REQUIRED: Assurance This report is for the public domain as it articulates the direction of **PUBLIC OR PRIVATE:** travel for the CAMHS transformation and the distance travelled since the original plan was presented in 2015. Brief description of the progress made • **KEY POINTS:** Difficulties with meeting CYP IAPT training trajectories. • Proposed funding for CAMHS transformation going forward To endorse the approach set out in the paper and to discuss any **RECOMMENDATION:** further changes required for the refresh to be submitted to NHS England by 31<sup>st</sup> of October 2017. LINK TO BOARD **ASSURANCE FRAMEWORK** AIMS & OBJECTIVES: The refresh of the CAMHS transformation plan submitted in 2015 will demonstrate the journey travelled for Children and Young People 1. Improving the quality and Mental Health services in Wolverhampton, gaps that have been safety of the services we identified and filled and pathways developed as a result of commission collaborative commissioning with CWC and/or Specialist NHS commissioning. 2. Reducing Health The refresh of the CAMHS transformation plan will demonstrate Inequalities in increase access to Mental Health services for the children and young people of Wolverhampton across the system. Wolverhampton

Governing Body 10<sup>th</sup> October 2017 Page 1 of 8





3. System effectiveness delivered within our financial envelope The CAMHS transformation refresh when complete will demonstrate how funding in the future will be allocated to ensure that it is used in an effective manner and will benefit a range of children and young people across the city of Wolverhampton.

# 1. BACKGROUND AND CURRENT SITUATION

- 1.1 The CAMHS transformation plan was originally submitted to NHS England in 2015 and its aims were to transform our local system by developing care pathways, services and initiatives across health, education, criminal justice and social care with a unified set of values. The vision was to deliver early intervention and prevention services, close treatment gaps and deliver a dynamic whole system of care pathways and processes that were fully aligned across all agencies, partners and stakeholders. Full alignment across the agencies would ensure that our 'whole system' can respond pro-actively to the needs of the child, their family and community and to facilitate and enable resilience, growth and achievement.
- 1.1. The vision of the original plan was to use the additional Future in Mind funding to transform mental health services for children and young people by building capacity and capability at critical points across the system so that by 2021 measurable progress could be demonstrated towards closing the health and wellbeing gap and securing sustainable improvements in children and young people's mental health outcomes in Wolverhampton.
- 1.2. Whilst progress has been made in many areas identified in the original plan, there is still a distance to travel to ensure that children and young people in Wolverhampton are able to access the Emotional Mental Health and Wellbeing services as well as specialist CAMHs that they require and at the appropriate time. This refreshed plan aims to provide the narrative around the distance travelled from the initial plan, current services and work still to be undertaken. It will articulate impacts and outcomes of additional funding, challenges which still present areas of concern within the system and actions to be taken to mitigate against them.

# 2. MAIN BODY OF THE REPORT

2.1. NHS England has asked each CCG to refresh the CAMHS transformation plan which was submitted in October 2015. NHS England has provided specific Key Lines of Enquiries which must be addressed to ensure that the plan meets NHS England requirements. It is also important to ensure that the refresh also meets the Improvement and Assessment Framework for the CCG to ensure that all

Governing Body 10<sup>th</sup> October 2017 Page 2 of 8





performance measurements are addressed when the refresh is completed and submitted.

- 2.2. The initial plan was given a RAG rating of red in the areas of data, CYP IAPT, workforce, collaborative commissioning and Impact & outcomes. There were several areas that were given a RAG rating of amber and these were Early Intervention in Psychosis, Local Transformation Plan ambition and Transparency and governance. It must be noted that most CCGs scored badly in the workforce section. Also with the progress which has been made regarding the STP and the mental health workstreams, the CAMHS commissioners in the Black Country (Wolverhampton, Dudley, Sandwell and Walsall) are going to work together on the workforce section of the plan. This work is also supported by the fact that the providers of services to the four CCGs who are represented by the STP are all coming together as part of Trusts Coming Together (TCT). This is a new development from the time when the original plan was devised and it has been referenced in the new CAMHS transformation refresh 2017.
- 2.3. The first draft of the CAMHS transformation plan refresh is provided with this paper. It is still in draft format as additional work is required to ensure that all Key lines of enquiries (KLOEs) are addressed. NHS England offered support to the region via Associate Solutions and Wolverhampton CCG was keen to accept this support. A day was booked for the 25<sup>th</sup> of September 2017 at the science park with a range of stakeholders to look at ensuring that pathways have been agreed for all services to ensure it is clear how children and young people are able to access the service they require. This had not been agreed to date amongst all potential providers and stakeholders. The outputs from this day have been used to further support the plan and as a result it is felt that the THRIVE model should be used as a clear view of all of our services and how they interconnect. This is documented in the refresh on page 27.

# 3. CLINICAL VIEW

3.1. The Emotional Mental Health and Wellbeing service which is funded solely by the CCG as a pilot scheme has been in operation since September 1<sup>st</sup> 2017 and will be used as a test and learn model to support the joint procurement with the City of Wolverhampton Council of the Emotional Mental Health and Wellbeing service from April 1<sup>st</sup> 2018. The providers of this service are keen to demonstrate that it will impact on the specialist CAMH services with the children and young people being referred in being able to see the right professional, first time, and in the right place.





### 4. PATIENT AND PUBLIC VIEW

4.1. There has been a great deal of frustration across the current service system, due to lack of provision with referrers disgruntled with an inability to find solutions to current problems, and dissatisfaction amongst mental health providers unable to deliver services to children and young people clearly in need. Children, young people and their families and carers have been unhappy with the difficulties accessing the CAMH services although they often report that once seen by CAMHS professionals the service is good. This level of frustration is also felt by those working in schools either in pastoral care or in actual teaching. It is seen that as part of the overall workforce development strategy from HeadStart school staff will be supported to develop their skills in supporting children and young people with emotional mental health and wellbeing issues at a universal level and recognise when they need to refer for further more targeted and specialist intervention.

#### 5. **KEY RISKS AND MITIGATIONS**

5.1. The risks of delivering against the CAMHS transformation plan refresh is the ability to recruit suitably qualified individuals who can meet the competencies required to deliver the services in the timescale. Children and young people's needs are changing over time and more adult difficulties are presenting with staff involved with Children and Young People services needing to have a full understanding of these areas. The CCG can support its commissioned providers to be employers of choice in the area to improve recruitment and retention of staff and ensure that all vacancies are filled quickly and effectively.

#### 6. **IMPACT ASSESSMENT**

#### Financial and Resource Implications

6.1. The table below sets out the indicative amounts for the monies from recent announcements for CYP MH that are now within the baselines of the CCG budget, and to which the requirement in the Planning Guide to continue to deliver CYP MH Transformation Plans including community based Eating Disorders refer. This demonstrates the investment that Wolverhampton CCG will make to impact on CYP MH services in the coming years. This is in addition to the £124,000 investment which was made recurrent in 2016/17 on top of the original investment in 2015 of £501,000. Some of the investment for this year, 2017/18, £100,000 has been allocated to the Emotional Mental Health and Wellbeing Service initially as a single funded pilot service but from April 2018 it will be a jointly procured service with the





Page 5 of 8

local authority of which both commissioning services will be providing funds. This supports the drive for the CCG to meet Mental Health Investment Standard (previously known as parity for esteem for mental health).

2017/18 Plan Figure	2018/19 Plan Figure	2019/20 Plan Figure	2020/21 Plan Figure	2021/22 Plan Figure
105,660	107,667	109,713	112,675	114,703
	145,000	147,755	151,745	154,476
		100,000	102,700	104,549
			197,000	200,546
105,660	252,667	357,468	564,120	574,274

# 6.2. Potential Wolverhampton CCG Funding which could to be used to transform Children and Young People's Mental Health 2017 – 2021.

Year Plan Figure	Available from Where?	Service to be invested in
2017/18 £105,660	Growth monies from Future in Mind - £5,660 to be used for spot purchasing HSB assessments	£100,000 to be invested in Emotional Mental Health & Wellbeing – recurrent
2018/19 £145,000	Additional funding from EPP uplift not required and money left from last year = £15,000 additional	£70,000 Possible for STP crisis – recurrent £66,000 Possible online digital counselling service – recurrent £27,000 PRU CAMHS link worker – recurrent if evaluation is successful. <sup>1</sup>
2017/19 £262,500	This funding has been ear marked for CYP IAPT training/backfill this needs to be arranged either by finding courses or staff who can be recruited to train	CYP IAPT services
2019/20 £100,000	When all services that have been invested in are taken into account at full year effect, there is approximately £70,000 for investment in other services.	£70,000 possibly to be invested in Neurodevelopmental services to support the ASD strategy for CYP

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Governing Body 10<sup>th</sup> October 2017

<sup>&</sup>lt;sup>1</sup> It is acknowledged that this amount is in excess of that agreed at beginning of year but it is only £3,000 and this can be found via savings on CCG's contributions to EPP placements following change in way funding is agreed.



2020/21	There is approximately £197,000 for	£197,000 potentially for
£197,000	investment in services going forward	investment for primary
	and it is felt that investment in	care workers and possibly
	primary care workers for CYP should	for Core CAMHS and
	be considered at this time once other	Crisis and Home
	services have been reviewed and	Treatment Teams. Also
	redesigned if necessary	some of this funding will
		have to be identified to
		undertake additional CYP
		IAPT training.

- 6.3. The above table documents proposals for how the additional funding for Children and Young People's Mental Health could be used every year up until 2020/2021. This proposal assumes that there will not be any additional requests for funding following a submission of a bid to NHS England for CYP MH services.
- 6.4. NHS England have also provided some funding, although limited, for CYP IAPT training backfill as well as the courses themselves neither of which will be available from next year and there will be no further funding available going forward. There is also a need for the CCG to meet its trajectories for training for CYP IAPT amongst the services it commissions which will impact on improving access for Children and young people to evidence based interventions. This has the potential to impact on the resources available at the CCG for actual services as NHS England will no longer be providing funding towards the backfill for providers who send staff on the training. However, it will improve the quality of the services provided as it will ensure access to evidence based interventions.

# Quality and Safety Implications

6.3. Refreshing the CAMHS transformation plan will ensure that the quality and safety of the services are taken into account, increasing the access to a range of Emotional Mental Health and wellbeing services as well as specialist CAMHS for children and young people in the city of Wolverhampton, ensuring they are seen at the right place, at the right time and by the right professionals. This refresh will ensure that there is a reduction in the number of inappropriate referrals to the specialist CAMH services, with the provision of the new Emotional Mental Health and Wellbeing service. There will also be clear pathways across services commissioned by specialist commissioning including tier 4 inpatient provision and Criminal Justice. Provision of CYP IAPT training across the children's workforce will improve Children and young people's access to evidence based interventions as well as increasing





their participation in their treatment and the services. This will impact on the quality and safety of the services commissioned.

### **Equality Implications**

6.4 Equalities will be featured in any re-modelling and re-commissioning of services. Due consideration will be given to protected characteristics during the re-modelling and re-commissioning of services.

### Legal and Policy Implications

6.5 One of the difficulties that may exist in the future is if a decision is taken for services to be tendered to ensure that the CAMHS transformation plan refresh is delivered against. This is likely to have legal implications and with the possibility of policy implications if it is a new provider who is providing the services.

#### Recommendation

6.6 The LTP needs to be signed off by a number of committees and boards across the system before it is submitted to NHS England on October 31<sup>st</sup> 2017. Although this version is not in its final stage, it is anticipated that the approach to completion will remain, with the exception of the additional items needed to ensure it is completed to the appropriate level and support both the submission criteria and the CCG Improvement and Assessment Framework. The request for the governing body at this time is to sign the report off with the intention that the final report will return to the next Governing Body which will be after the submission date.

Name	Mags Courts
Job Title	Children's Commissioning Manager
Date:	1 <sup>st</sup> October 2017

# ATTACHED:

CAMHS Transformation Plan Refresh 2017 – 2020 Key Lines of Enquiry Document





# **REPORT SIGN-OFF CHECKLIST**

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View	N/A	
Public/ Patient View	N/A	
Finance Implications discussed with Finance Team	A. Hadley	30.08.2017
Quality Implications discussed with Quality and Risk	N/A	
Team		
Equality Implications discussed with CSU Equality and	N/A	
Inclusion Service		
Information Governance implications discussed with IG	N/A	
Support Officer		
Legal/ Policy implications discussed with Corporate	N/A	
Operations Manager		
Other Implications (Medicines management, estates,	N/A	
HR, IM&T etc.)		
Any relevant data requirements discussed with CSU	N/A	
Business Intelligence		
Signed off by Report Owner (Must be completed)	Mags Courts	01.10.17

Governing Body 10<sup>th</sup> October 2017