
Manchester Health and Wellbeing Board Report for Information

Report to: Health and Wellbeing Board – 14 May 2014

Subject: Update on the development of Mental Health Services for Children and Young People.

Report of: Mike Livingstone, Strategic Director Children’s and Commissioning Services
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Summary

This paper provides an update on progress made in relation to the development of mental health services for children and young people. It builds upon the next steps presented in a report to the Young People and Children Scrutiny Committee on 10 December 2013. This report highlights the level of engagement involved in the review process and provides a structured programme of work aligned to each recommendation and a summary of progress to date

Recommendations

Members to note the contents of the report and progress made.

Board Priority Addressed

Strategic Priority 1 – getting the youngest people in our communities off to the best start;

Strategic Priority 2 – educating, informing and involving the community in improving their own health and wellbeing;

Strategic Priority 4 – providing the best treatment we can to people in the right place and at the right time.

Strategic Priority 5 - Turning round the lives of troubled families.

Strategic Priority 6 - Improving people’s mental health and wellbeing.

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Background Documents

Previous report to Young People and Childrens Overview and Scrutiny Committee
December 13 on the review of CAHMS:

http://www.manchester.gov.uk/meetings/committee/78/young_people_and_children_scrutiny_committee

1.0 Introduction

- 1.1 This paper provides an update on progress made in relation to the development of mental health services for children and young people. It builds upon the next steps presented in a report to the Children and Young People Overview and Scrutiny Committee on 10th December 2013. This report highlights the:
- Level of engagement involved in the review process
 - Presents a structured programme of work aligned to each recommendation
 - Provides a summary of progress to date.

2.0 Context

- 2.1 Commissioners from Manchester Clinical Commissioning Groups (CCGs) and Manchester City Council (MCC) have undertaken a review of Children and Adolescent Mental Health Services (CAMHS) services and the multi-agency interfaces which are part of the wider public service system. This review of CAMHS was set within the context of the Manchester Mental Health Independent Report and subsequent consultation of adult mental health services delivered under the governance of the Mental Health Improvement Programme.
- 2.2 The recent Commissioning review of CAMHS focused on how the system is operating at the moment. It provided an opportunity to sense check provision, interfaces and access to services. The review process identified a number of areas to be improved and has made a series of recommendations which are to be taken forward as collaborative commissioning intentions with Manchester CCG's and Manchester City Council including Public Health.
- 2.3 The mandate for the CAMHS Review was given by the Director of Children and Commissioning Services, Manchester City Council (MCC) and The Executive Nurse and Director of City Wide Commissioning, Quality and Safeguarding at Manchester CCGs as a response to the Mental Health Independent Report 2013, which reviewed in the main Adult Mental Health Services in Manchester but acknowledged further work was required in relation to CAMHS.
- 2.4 It was commissioned in recognition that effective adult and children's services are contingent on each other, and with the understanding that the Mental Health Improvement Programme, (the current strategic commissioning plan as a part of Living Longer Living Better), provides a timely lever for a systemic review of CAMHS provision across the City.
- 2.5 In agreement with the findings of the Independent Mental Health Report Commissioners found no indication of a requirement for significant change to the CAMHS service. Instead, the findings of the review focused on the often complex multi agency working, relationships and referral mechanisms.

3.0 Public Sector Reform

3.1 This review sits within the context of Manchester's approach to Public Service Reform programme. Two components are particularly relevant to this work.

- The development of integrated, person-centred health and social care services through the Living Longer, Living Better programme (LLLBB)
- Providing appropriate levels of support to people with complex dependencies in order to reduce their dependency on public services. The review links with both the Troubled Families programme and Manchester's Early Years New Delivery Model through the children and parents service (CAPS), which will enable partners to identify and integrate mental health services for children more effectively and shift to earlier intervention and prevention, particularly focusing on where and how targeting mental health services for children can reduce demand for adult mental health services.

3.2 It also meets Health and Wellbeing Board priorities of:

- Getting the youngest in our community off to the best start.
- Educating, informing and involving the community in improving their own health and wellbeing.
- Moving more health provision into the community.
- Providing the best treatment we can to people in the right place and at the right time.
- Turning round the lives of troubled families.
- Improving people's mental health and wellbeing.

4.0 Background

4.1 CAMHS Provision in Manchester is complex. It is commissioned at a local, regional and national level and has multiple funding streams including Manchester CCG's, Manchester City Council, and NHS England. In addition to this, there are multiple relationships and interfaces with a large number of Public and Third Sector agencies. These include MCC Children's Services, MCC Education for specialist provision and the Federation of Schools, mainstream school provision via School Nurses, MCC Youth Offending Teams, Sure Start Centres, Primary Care General Practitioners, Secondary and Tertiary health care providers including Adult Mental Health Services for transitioning children.

4.2 A high level CAMHS and multi-agency map is enclosed to simplify the description and landscape of children's provision. See Appendix 1.

4.3 The CAMHS commissioning review was completed in December and the recommendations were endorsed by, Manchester CCGs Joint Commissioning Management Board (JCMB), and individually at each of the three CCG Boards as well as the Council's Strategic Commissioning Board. It was also considered, and welcomed by the Children's, Maternity and Neo Natal Commissioning Board (CMNCB), Children and Young People's Health Scrutiny Committee and Health and Wellbeing Board

5.0 Feedback from the Young People and Children Scrutiny Committee

- 5.1 Members endorsed the need for enhanced take up of universal mental health training. The commissioners have circulated the details of Mental Health training courses delivered through the Good Health Manchester Training Programme, Healthy Schools “Behind the Behaviour” Programme and an electronic training resource called “Everybody’s Business”
- 5.2 Additionally recommendation 5 of the CAMHS review will result in the completion of a training needs analysis and production of a training strategy to be delivered to Tier 1 professionals, including staff in social care, School Nursing, and health.

6.0 Services for 16 and 17 year olds in crisis

- 6.1 Meeting the acute mental health needs of 16 and 17 year olds, who experience a crisis out of hours, was included as one of the recommendations of the Manchester Mental Health Independent Report (2013).
- 6.2 Manchester Mental Health and Social Care Trust are commissioned to provide mental health crisis services for this cohort. A working group has been meeting to address this.
- 6.3 In summary the group identified that there is a sub set of young people in this age range, who present at accident and emergency in crisis, but do not fit the access criteria for the Crisis Resolution Home Treatment Team
- 6.4 There is a consensus that adult mental health wards are not generally the best place for these young people unless their physical health absolutely necessitates it. There is also a question about where they should be, whilst waiting for an assessment. A paediatric bed is not always appropriate to their needs or the other young people within the ward.
- 6.5 A stakeholder event took place in April to begin the process of agreeing how commissioned services can better respond to this recognised gap in provision.
- 6.6 An action plan has been approved. Key objectives include; the collation of accurate prevalence data and completion of a process mapping exercise with a view to developing a preventative, stepped care approach.
- 6.7 The action plan will sit within the pre existing Crisis Provider Forum and feedback will be given to the Mental Health Improvement Partnership Board.
- 6.8 16/17 year old bed crisis management is also a strong feature of the Mental Health Improvement Programme and the newly developed pathways once implemented will address this.

7.0 Transition of Young People from Child and Adolescent Mental Health Services to Adult Mental Health Services

- 7.1 Transition was also identified as an area of concern within the Manchester Mental Health Independent Report, and is included within the Mental Health Improvement Programme Service Specifications.
- 7.2 Under the auspices of which the provider of transition services will be required to provide community based services to support effective transition of young people.
- 7.3 In the immediate term Manchester Mental Health and Social Care Trust have coordinated a meeting with all providers, including CMFT CAMHS, Adult Mental Health Services and the third sector to develop a transitional protocol for Clinical Board approval in July.

8.0 Overview of the CAMHS Review recommendations

- 8.1 The CAMHS commissioning review made 9 recommendations which aim to:
1. Increase the opportunity to identify mental health distress and mental ill health in both early years and children of school age.
 2. Improve the education and awareness rising of Children and Adolescent mental health conditions in professionals who operate within public agencies across Tier 1.
 3. Support mainstream schools to deliver a more robust universal offer by reviewing and redirecting existing resources.
 4. Improve partnership working across multiple agencies.
 5. Improve navigation and access to information from CAMHS services.
 6. Improve / level consistency in diagnosis.
 7. Explore the opportunities for a single point of access to CAMHS services and to defragment existing provision.
 8. Improve transition arrangements for children transitioning from children's to Adults mental health services.
 9. Integrate existing work (Early Years New Delivery Model) to support the broader commissioning intentions.

9.0 Governance

- 9.1 The Mental Health Improvement Programme Partnership Board provides oversight for the delivery of the above recommendations. The terms of reference can be made available at request.
- 9.2 The CAMHS Partnership Group is the vehicle for implementing the recommendations. A programme of work has been developed which will direct the work of this partnership throughout this financial year.

10.0 Engagement

- 10.1 In order to review current CAMHS service provision MCC and CCG Commissioners held focus groups with a wide range of stakeholders to capture feedback and insight into how the pathways, interfaces and relationships between agencies are currently operating.

10.2 The following stakeholders were engaged as part of the above process: Manchester City Council Strategic Education Leads, Complex Families, Children's Social Workers, Early Years, Youth Offending Service, Public Health, Pupil Referral Unit and CMFT Healthy Schools Programme. The Commissioners also ran a focus group with CAMHS service leads and the Directorate Manager, and attended a CCG locality meeting to gather intelligence and insight from GPs about their experience of the mental health system across the city. Third sector CAMHS providers also provided input. Further Reference Groups were organised by CCG Commissioners as part of the Adults consultation process for pathway redesign and particularly for 16/17 year old Emergency Protocol, and the development of robust protocols for the management of key service interfaces.

10.3 The authors recognise that for the review to result in improved outcomes for Children and Young People their voice must run through, and inform, each of the recommendations. With this in mind one of the first actions, as reflected in the work plan, is to engage with youth groups, forums and stakeholder groups, including the user group connected to the Emerge service.

11.0 The role of the Third Sector

11.1 Leading on from the engagement work, commissioners also recognise the important role the third sector play within the system, for example:

- Providing an alternative route to help and support
- Support delivered in less formal clinical environment
- Building trusting relationships with individuals outside of traditional health and social care services
- Removing the stigma of accessing mental health and well being support
- Normalising the dialogue of mental health and wellbeing
- Developing peer support and networks in the community
- Building confidence and developing communities

11.2 Commissioners intend to carry out further engagement with third sector organisations to gather further intelligence and harness their expertise

12.0 CAMHS Outcomes

12.1 CAMHS services provide clinical mental health services for Children and Young Adults and are underpinned by a national evidence base as directed by the National Institute of Health and Care Excellence (NICE). Central Manchester Foundation Trust (CMFT) as the provider deliver outcomes according to this evidence base delivered within a clinical service delivery model to prevent and ameliorate mental health distress.

13.0 System Outcomes

13.1 It should be noted that the outcome and recommendations from the CAMHS review refer to driving improvements across the wider system between inter agency relationships and processes to achieve outcomes which will:

- Improve access to information and navigation across service boundaries
- Increase education and awareness raising of mental health distress
- Improve earlier identification of mental health distress in children from a wider range of agency professionals including Schools leading to a reduction of Children presenting to CAMHS with a higher level of clinical need

14.0 Progress to Date

14.1 The attached work plan lists planned objectives and actions aligned to the review recommendations. See Appendix 2. At the time of writing the following progress has been made

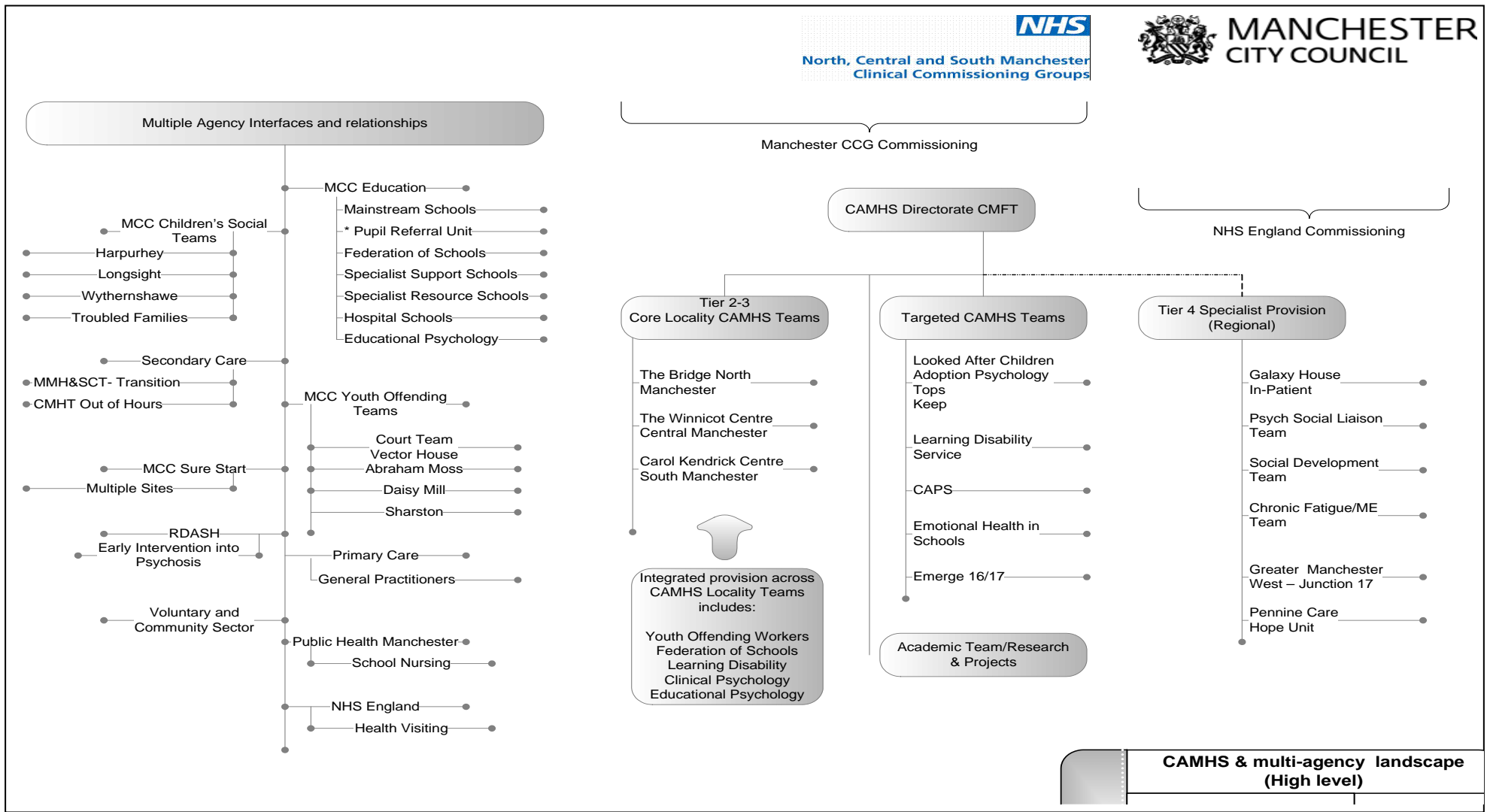
1. Strategic leads from MCC and City Wide Commissioning Team have been identified and are fully engaged in working collaboratively to support the programme of work.
2. The CAMHS Partnership Group terms of reference, including membership, has been reviewed and strengthened. CMFT are fully engaged with commissioners and the Group is responsible for taking forward the recommendations.
3. In relation to the development of a robust universal school offer; a school heads listening and engagement event was held in March and School Reference Group established to support the achievement of this objective. Additionally the Deputy Head at St. Pauls has joined the CAMHS Partnership Group. Furthermore, MCC are commencing a review of School Nursing with CAMHS Strategic leads inputting into the design of a forthcoming survey, in order to understand the school nursing skill base and training needs in relation to early identification of emotional ill health and early access to appropriate support.
4. In response to the perceived fragmentation of the CAMHS service the provider has reviewed the referral pathway to allow direct referral from CMFT Children's Services via specialist practitioners rather than the current pathway of a monthly multi agency panel chaired by Children's Services. A draft single point of access form will be presented to CAMHS partnership board in May.
5. A training needs analysis has been completed for GPs in Central Manchester, through the Central Children's Delivery Group. This evidences that a number of GPs find a range of Mental Health presentations difficult to manage. The Commissioners will work to support Central GPs with a

range of learning opportunities with a view to rolling this out in North and South Manchester.

6. CAMHS at CMFT is currently working with Service Users, Staff and Barnardos to improve their web presence.
7. MCC and City Wide Commissioning, Quality and Safeguarding Team have committed to complete a joint engagement project to secure qualitative data via focus groups and surveys.

15.0 Summary

- 15.1 The Children and Adolescent Mental Health Services (CAMHS) Commissioning Review provides an opportunity for system wide improvements and better outcomes for Children and Young People across the city. Working in collaboration MCC and the City Wide Commissioning, Quality and Safeguarding Team have made demonstrable progress against the programme of work. The Health and Wellbeing Board are asked to note the contents of this report and support the programme going forward.



CAMHS Partnership Work plan							
CAMHS Commissioning Review							
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Partnership and Governance							
Recommendation 1 Strategic Leadership	Improved agency interfaces	Hazel Summers and Craig Harris to attend the CAMHSPG in the immediate term. James Williams to work with Helen Scott to oversee work plan delivery.	Appointment of a CAMHS strategic lead from MCC Children's Services.		Mar-14	MCC CWCQT	
			Development of social care CAMHS work stream.	Capacity and engagement	Jun- Sept 14	MCC, CWCQT, CAMHS,	
			Strategic Lead liaison with MCC Senior Social Worker Practitioners and Family Therapy workers.	Capacity and engagement	Jun-Sept 14	MCC, CWCQT	
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Partnership and Governance (cont)							
			Development of integrated approach around deployment of the above.	Capacity and engagement		MCC, CWCQT	

Recommendation 2 Universal School Offer	Robust universal school offer and Improvement in take up.	Listening and Engagement event held in March. School Reference Group established Representative from School Leadership volunteered to join the CAMHSPG	Strategic leads identified to bring together MCC Education, The Provider, mainstream School provision.		Ongoing	MCC,CWCQT,P H, CAMHS	
		School Nursing Survey scheduled	Joint review of offer and system resources including School Nurses, The Healthy Schools Programme and The Emotional Health in Schools programme	Lack of engagement from stakeholders e.g. - schools, professionals, and service users	July - Oct 14	PH, CWCQT, MCC, CAMHS,	
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Partnership and Governance (cont)							
Recommendation 3 CAMHS Partnership Group	Improved multi agency working, system interfaces and strategy integration.	Revised terms of reference approved 23/1/14	Review Terms of Reference of the CAMHS Partnership Group.	Stakeholder engagement including attendance and contribution to work programme	Mar-14	CAMHSPG	
Organisational Structure							
Recommendation 4 CAMHS Service	Reduce fragmentation	CAMHS have reviewed referral	Review of CAMHS organisation		May – Dec 14	CAMHS, CWCQT, MCC	

	on and facilitate access to core and targeted CAMHS service	pathway to allow direct referral from CMFT Children's Services via specialist practitioners rather than current pathway of monthly multi agency panel chaired by Children's Services. Proposal and draft single point of access form to be presented to CAMHS partnership board in May.	structure and development of single point of access for referral.				
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Education and Training							
Recommendation 5 Training Needs Analysis	Professionals have the appropriate skill set to respond appropriately to children and adolescents with Mental Health	School Nursing Survey agreed. Completed Training Needs analysis for GPs in Central Manchester evidences that GPs find a number of MH presentations difficult to manage. HS is working with Centrals Children's Delivery Group to make training	Review skills and training for Children's social work, School Nursing, and frontline health staff and develop CAMHS training strategy	Lack of Response. Limited availability and capacity of training provision	Sept 14-Mar 15	CWCQT, MCC, PH	

	issues	available.					
Emotional Health and Wellbeing In Schools							
Recommendation 6 Review of Emotional Health in Schools	Parity of provision of Emotional Health and Wellbeing In Schools		Review business model to identify the possibility of mainstreaming	Resources	Jan - Mar 15	CAMHS, CWCQT, PH, MCC	
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Signposting and Information							
Recommendation 7 Marketing	To achieve greater clarity about the CAMHS Service Offer	CMFT CAMHS currently working with Service Users, Staff and Barnardos to improve web presence	Development of a web based information portal	Resources	Mar-15	CAMHS, Third Sector ,MCC, CWCQT	
Referrals							
Recommendation 8 Support to Pupil Referral Units	To provide Pupil Referral Units with direct access into the CAMHS Service		Agree referral process and associated paperwork		May - July 14	CAMHS, CWCQT, PH	
Appointments							
Recommendation 9 Failed Appointments	Reduction in the number of children		Review of DNA/CNA contributing factors and process	Lack of robust data	May - July 14	CAMHS, CWCQT, MCC,Third Sector	

	and adolescent s who disengage						
			Develop pathway for patients who disengage with a course of treatment	Pathway not signed up to or utilised	July - Sept 14	CAMHS, CWCQT, MCC, Third Sector	
Request from Overview and Scrutiny Committee							
Engagement	To ensure the voice of young people is used informs recommendations listed above	MCC and CWCQT have committed to complete a joint engagement project	Design survey and identify youth groups/forum to support with dissemination	Lack of Engagement	May- July 14	MCC, CWCQT and Third Sector	
Recommendation	Objective	Progress	Actions	Risks	Timescale	Project Lead	Rating/Priority
Request from Oversight and Scrutiny Committee							
	To ensure that the views of the voluntary sector inform the work plan		Schedule third sector focus group.	Lack of Engagement	May - July 14	MCC, CWCQT and Third Sector	

Prevalence	To secure prevalence data in relation to Suicide and Self Harm	Data supplied by CAMHS. National Prevalence data to be sourced and presented to CAMHSPG	CAMHS to source and supply	Integrity of data	Apr-14	CAMHS,CWCQ T	
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