

# CHESHIRE EAST COUNCIL

## Scrutiny Committee via Children's SMT

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**Date of Meeting:** 15.11.11  
**Report of:** Steve Tatham – Integrated Commissioning Unit  
**Subject/Title:** 'Child & Adolescent Mental Health Services' (CAMHS) Overview

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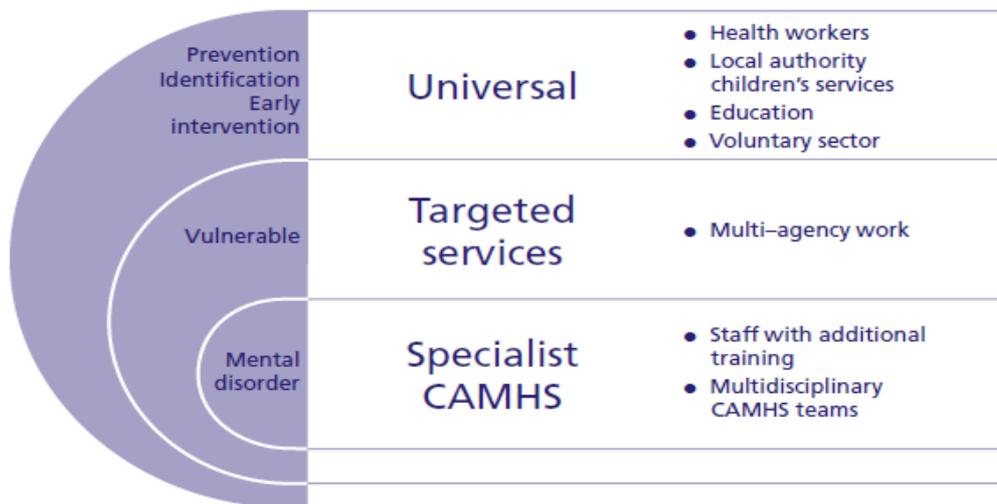
### 1.0 Report Summary

- 1.1 The majority of services that support children and young people's emotional health and wellbeing outside of Universal Services i.e. schools, youth support, etc. are commissioned by the 'Integrated Commissioning Unit' between Central & Eastern Cheshire Primary Care Trust (CECPCT) and Cheshire East Council. At this point the funding for these services approximately £4m is primarily from CECPCT's budget, with some investment from Cheshire East Council. These services are commissioned in line with the Cheshire East Children's Trust priorities and there is a draft '***Emotional Health and Wellbeing Strategy for Children and Families***' currently being consulted upon for implementation in 2011/12.
- 1.2 'Emotional Health and Wellbeing Services' are commissioned on the basis that we provide timely access to evidenced based interventions that deliver good outcomes and / or better management of more complex or longstanding conditions. Waiting time for non urgent referrals are generally below the national recommendation of 13 weeks. Urgent referrals are prioritised based around need and emergency placements are managed through a bespoke commissioning process.
- 1.3 In the Eastern part of the authority a high and increasing demand for 'Autistic Spectrum Diagnostic Services' have led to a longer waiting time for assessment and this is being addressed through a joint piece of work between the Integrated Commissioning Unit, the Special Educational Needs Manager in CEC and the Clinical Lead in our local Child & Adolescent Mental Health Service. Our intention is implement an integrated single point of access for children, families and professionals who require advice, training, consultation, assessment and ongoing support. This will require the blending of a range of provision including Child & Adolescent Mental Health Services, Community Paediatrics, Occupational Therapy, Family Support, Speech and Language and the Cheshire East Autism Support Service.

It is important to note that a formal 'Clinical Diagnoses' does not prevent intervention and support from services. Many families are already receiving interventions from services such as Cheshire East Autism Support Service, the

Children’s Disability Team, Speech and Language, Occupational Therapy, 3<sup>rd</sup> Sector Organisations such as Crossroads, etc. In addition a formal ‘Clinical Diagnoses’ is not required for children and young people to receive additional funding for classroom support in school or to be able to obtain a ‘Statement of Special Educational need’.

1.4 The ‘Integrated Commissioning Unit’ commission the following services from Cheshire & Wirral Partnership Trust (CWP) Child and Adolescent Mental Health Services (CAMHS) and the service has two bases one in Macclesfield and one in Crewe. The service model is based around a tiered approach simply described in the diagram included below produced by the **National Advisory Council for Children’s mental health and psychological well being, 2010**:



There is a additional fourth tier that provides services for the most complex children and high risk young people who require specialist eating disorder services, inpatient or forensic services.

**Note:** A much more detailed breakdown of this provision is included in the appendices

1.5 Prevention and Early Intervention are key local and national priorities, in line with this Cheshire East Council in partnership with Cheshire West and Chester, PCT’s & Clinical Commissioning Groups will in 2012/13 is establishing two new nationally led evidenced based programmes:

- The ‘Family Nurse Partnership’ (FNP) programme – Intensive and therapeutic support for 100 first time teenage mothers
- A ‘Multi-Systemic Therapy’ (MST) Programme – Intensive support to prevent children and young people entering care and/or custody

**Note:** A more detailed description of these programmes is included in the appendices

1.6 It is the intention of the Integrated Commissioning Unit alongside the Children’s and Families Service in CEC to work collaboratively with its partner agencies including the 3<sup>rd</sup>

Sector to embed a more preventative and early approach to meeting children, young people and families/carers emotional health and wellbeing needs. This will require us to review existing provision and workforce development plans to inform how we invest future resources to achieve better outcomes.

## **2.0 Recommendation**

- 2.1 That Scrutiny supports the work to integrate the existing autism provision into a single 'multi-agency' pathway to improve the autism assessment and support pathways across the authority.
- 2.2 That Scrutiny supports the further investment in preventative approaches and services to meeting the emotional health and wellbeing needs of children, young people and their families/carers.

## **3.0 Reasons for Recommendations**

- 3.1 The recommendations are in line with the Cheshire East Children's Plan and priorities.
- 3.2 There is a strong evidence base that prevention and early intervention can improve outcomes and reduce future costs of more intensive interventions
- 3.3 There is a National drive to deliver more evidenced based models of intervention and build capacity in the 3<sup>rd</sup> Sector
- 3.4 Long waiting times for assessment of neuro-developmental conditions such as autism are not helpful for children, young people and their families/carers

## **4.0 Wards Affected**

- 4.1 All, although Eastern Wards are most affected by long waiting times for Autism assessment and support.

## **5.0 Local Ward Members**

- 5.1 All

## **6.0 Policy Implications including – Carbon reduction - Health**

- 6.1 There is a risk that CEC and CECPCT could be challenged under the Disability Discrimination Act regards inconsistency of waiting times across the authority for Autism assessment.
- 6.2 Opportunity to support the 'Community Budgets' agenda through identification and targeting of 'Troubled' families.

## **7.0 Financial Implications (Authorised by the Director of Finance and Business Services)**

- Investment will require the utilisation of the 'Early Intervention Grant' based upon a set of recommendations worked up through a business case for investment.

## **8.0 Legal Implications (Authorised by the Borough Solicitor)**

- N/A

## **9.0 Risk Management**

- 9.1 Clinical risk is managed through the provider contracts.
- 9.2 Risk to reputation is being managed through Central & Eastern Cheshire primary Care Trust Complaints Team and Children and Families Commissioner.
- 9.3 Financial risk - Local contracts are a block funded contract, only inpatient provision and bespoke care are individually funded. However family breakdown often leads to high cost placements. Cheshire East's new 'Placement Service' and the 'Multi-Systemic Therapy' programme aspire to reduce costs, improve quality and stabilise families.

## **10.0 Background and Options**

- Report requested by Scrutiny to update on CAMHS provision

## **11.0 Access to Information**

The background papers relating to this report can be inspected by contacting the report writer:

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## 12.0 Appendices

12.1 The 'Integrated Commissioning Unit' commission the following services from Cheshire & Wirral Partnership Trust (CWP) Child and Adolescent Mental Health Services (CAMHS) and the service has two bases one in Macclesfield and one in Crewe

12.12 Primary Child & Adolescent Mental Health Services (CAMHS) (Tier 2) - for 0-16 year olds provides training, consultation and support to universal and targeted services i.e. school nursing, schools, etc. Whilst also undertaking assessment and therapeutic interventions (small teams some funding from CEC) (a few schools have independently commissioned Primary CAMHS from CWP).

12.13 Specialist Tier 3 - Child & Adolescent Mental Health Services (CAMHS) for 0-16 year olds with complex / higher risk mental health problems i.e. moderate to severe depression, self injury, eating disorders, OCD, etc.

12.14 Learning Disability Child & Adolescent Mental Health Services (CAMHS) - 0-16 young people experiencing mental health difficulties delivers programmes such as 'Portage', 'Signposts' and works on issues such as communication difficulties.

12.2 16-19 Child & Adolescent Mental Health Services (CAMHS) - As for Specialist CAMHS, manages transition to adult services where required

12.3 Autism and ADHD Assessment & Treatment Services in East for 5-16 year olds. (Community Paediatric Services undertake 0-16 work in central)

12.4 Early Intervention into Psychosis Service - first episode 14-35 age group

12.5 Child & Adolescent Mental Health Services (CAMHS) Nurses placed in Youth Offending Services (YOS) provide an assessment and intervention role, also advise YOS team on management of cases.

12.6 Child & Adolescent Mental Health Services (CAMHS) are linked into the Cared for Children Support Team in CEC (commissioned by CEC).

12.7 Social Workers based in Specialist (Tier 3) Child & Adolescent Mental Health Services (CAMHS) Teams in Macclesfield and Crewe.

12.8 North West Specialised Commissioning Team (NWSCT) commission on a Cheshire & Merseyside footprint from providers such as Cheshire & Wirral Partnership Trust; Tier 4 mental health provision described below. However the Integrated Commissioning Unit continue to have a great deal of involvement in individual care packages for local cases due to high levels of risk, need and cost. Services include:

- Tier 4 Inpatient Child & Adolescent Mental Health Services (CAMHS) (including eating disorders service and community services)

- Home Based Treatment Service - for complex young people, intensive systemic family based model

12.9 Central & Eastern Cheshire Primary Care Trust also commissions bespoke placements for children and young people who need access to low secure and paediatric intensive care units. In addition also where there is a need for a 'forensic' assessment i.e. high level of risk to others from violence and /or sexualised behaviour.

- 2 As of April 2012 the Integrated Commissioning Unit will be going live with a **'Multi-Systemic Therapy Programme (MST)'** in partnership with Cheshire West and Chester Authority. This programme will work with 35 families whose children aged 11-17 are on the edge of care and/or custody to stabilise their families and keep the children at home. This was a successful partnership bid to the DFE for 4 years funding and is part a national programme to implement more evidenced based programmes across authorities and follows the Allen Report and its recommendations regards preventative intervention models.
- 3 As of April 2012 South and East Clinical Commissioning Groups have now verbally agreed to fund the **'Family Nurse Partnership Programme'**. This intensive programme will target first time teenage parents from 20 weeks gestation for up to 2 years. The programme will aim to work with 100 families each year. This evidenced based programme like MST is a highly prescriptive programme of therapeutically led evidenced based interventions that is backed up by over 30 years of research in the USA. The programme is also part a national programme to increase the numbers of community nurses and deliver more evidenced based programmes across authorities. Cheshire East Council have also agreed to financially contribute to the programme as part of the prevention and early intervention agenda.
- 4 The local authority also commissions [www.kooth.com](http://www.kooth.com) to provide online counselling and support services. The Service provides access to moderated message board forums, live 1 to 1 chat and private messaging with qualified counsellors. This is being marketed through schools and other mediums.
- 5 'Visyon' 3<sup>rd</sup> Sector Counselling Services draw in national funding alongside local fund raising to deliver a range of counselling services, schools also commission this organisation to provide direct access provision for children and young people.