

**Children and Education Select Committee**

**17 November 2017**

**Child and Adolescent Mental Health Services in Surrey**



**Purpose of report:** Scrutiny of Services

**Introduction:**

1. This report provides an overview of commissioned Child and Adolescent Mental Health Services (CAMHS) in Surrey. The report will outline:
  - a. national context
  - b. overview of commissioning responsibilities
  - c. overview of key commissioned services
  - d. overview of pathways to services
  - e. key challenges and performance management
  - f. financial summary
  - g. the experience for children, young people and families
  - h. next steps

**National picture**

2. The importance of good mental health in children and young people has been recognised nationally, for example:
 

Prevention and early identification of Emotional Wellbeing and Mental Health (EWMH) needs in Children and Young People is a key strand of 'Future in Mind' (2015). 'Future in Mind' defined NHS England's programme to transform CAMHS services and encouraged innovation, improved outcomes and service quality. Local Transformation Plans and priorities which resulted in CCGs receiving Transformation funding (2015-2020). The 'Five Year Forward View for Mental Health' (2016) set out the government vision for improving the mental health of children, young people, working-age adults and older people and achieving parity between physical health and mental health.
3. It is well documented that children and young people's EWMH impacts upon every area of their lives, from their educational achievements, their relationships with peers and with the adults with whom they come into

contact and the choices they make. Children and young people with good EWMH are more likely to be able to contribute and achieve, and good mental health is important for optimum physical health. Better outcomes for children and families, prevention and early intervention can contribute to a reduction in public spending. A collaborative, cross-partnership approach to prevention, early and timely access to intervention is essential in order to make a difference.

## Key Commissioners

4. The last re-procurement of CAMHS was an opportunity for Clinical Commissioning Groups (CCGs) and Surrey County Council (SCC) to commission joined up CAMHS and integrated pathways of care from a Lead Provider (with sub-contractors). This is delivered through two contracts: one for CCG specialist services funded by the 6 NHS Surrey CCGs and one contract for targeted services and the Behavioural and Emotional Neurodevelopmental (BEN) pathway managed by SCC and funded from a pooled budget (under Section 75 of the NHS Act 2006) with contributions from SCC and the NHS.
5. This report focuses on the Targeted contract which is led by SCC and funded jointly by SCC and CCGs. Out of scope are universal services, the community health providers contract and the CAMHS specialist contract (led and funded by the CCGs).
6. SCC has contractual control over targeted services for which it is responsible, and NHS contract management procedures ensure robust monitoring and hold the provider to account on behalf of SCC residents, whilst working collaboratively with NHS CCG partners to ensure seamless pathways of support for children, young people and their families. The current contract runs for a period from April 2016 – March 2019 with an opportunity to extend for a further two years.
7. Since these services were commissioned there have been a number of developments around the CAMHS commissioning context including the continuation of transformation funding providing support to enhance services, and the development of Sustainability and Transformation plans for partnership across health and care on a locality basis.
8. The current contract was ambitious with new pathways being commissioned in response to needs identified in the 2012 CAMHS needs assessment. New pathways included the BEN pathway and post order support, as well as pre diagnostic support to provide early intervention. Whilst some services have been well received, overall performance has been mixed which is explored further at paragraphs 24-31.
9. Areas of development being prioritised include:

- transformation funding for additional resource for CAMHS children in care service to support with co-ordinating out of county health and well-being arrangements and interventions for Surrey looked after children
- mapping and communication of local EWMH services that complement commissioned EWMH services followed by the development of communities of practice regular workshops to identify dynamic changes in what is available across the county and identify any gaps,
- further development of the BEN pathway.

### Current Targeted CAMH services

10. Targeted CAMHS provide early intervention work with vulnerable children and young people; sometimes these services are also referred to as 'Tier 2 CAMHS'.
11. Within Surrey a range of targeted services are currently provided by SABP, all of which are listed within **Annex 1**. One of the largest services within the targeted services contract is Primary Mental Health. This service consists of a number of Primary Mental Health Workers (PMHW's) who act as an interface between universal services for children, young people and their families and specialist CAMHS.
12. PMHWs' remit is to improve the capacity of universal services to promote emotional wellbeing and mental health to children, young people and their families. A significant aspect of this work with universal services is PMHWs delivery of Targeted Mental Health in Schools (TaMHS) Training. This training programme for school staff is designed to build upon their understanding of mental health and to enable the early identification and management of mental health difficulties in children and young people by school staff.
13. PMHWs also have the therapeutic skills necessary to deliver brief direct interventions to children and young people who are experiencing mild emotional wellbeing and mental health difficulties. PMHWs are commissioned to spend 60% of their time undertaking their consultation and training function and 40% of their time undertaking direct work with children and young people. Through the targeted services contract the PMHW role has been further sub-divided to provide more specialist input into particular service areas. For example, specifically supporting professionals and young people who work in or access the Family Service or the Learning Disability service.
14. Other services within the targeted contract work with different vulnerable groups. For example, the Parent Infant Mental Health Service (PIMHS) works to ensure optimum relationships between parents and infants where these relationships are at risk. The PIMHS service works collaboratively with expectant parents and parents, to enhance relationships within the family

and prevent a long term disorganised or insecure attachments between parent and child. Additionally, STARS (Sexual Trauma and Recovery Support) is a small service which provides support to children, young people and their families who have been affected by sexual abuse.

15. There are a number of services that specifically support Looked after Children, Post order children and Care leavers. These services focus on providing a range of consultative support to other professionals and therapeutic support to children, young people and their families. Ensuring the impact of trauma, abuse or neglect in the lives of children and young people is properly considered when identifying appropriate interventions. These services aim to improve health and well-being outcomes for some of our most at risk children and can play a key role in reducing placement breakdown.
16. The Post Order Support Service Provides mental health and therapeutic support to best meet the needs of the children and young people who have been adopted or are subject to special guardianship orders (SGOs) to help prevent placement breakdown and improve family relationships.
17. The BEN pathway was commissioned with significant additional funding and provides a single point of referral for the identification and management of children and young people presenting with a broad range of behavioural symptoms. Upon receipt and evaluation of screening children, young people and their families are signposted to appropriate diagnostic assessment and offered pre-diagnostic support i.e. information, guidance, consultation, advice, promotion, capacity building and reduction around stigma
18. The STARS service was commissioned to support Children and Young People who have suffered sexual abuse and support their recovery.
19. HOPE and EXTENDED HOPE – is a multi agency/disciplinary service jointly commissioned to prevent children and young people from having an unnecessary admission to an adolescent psychiatric bed. The Hope service provides an intensive outreach community support package alongside a therapeutic day programme for children and young people whose needs cannot be met by one agency alone and require intensive support. The Hope service helps to prevent or shorten young people being admitted to an inpatient unit or being placed in an out of county placement. Extended Hope provides an out of hours intervention, assessment service and respite beds (for up to 10 days) for children and young people who are experiencing an emotional/mental health crisis.

### **Specialist Services**

20. The Surrey CCG Collaborative funds the contract for Specialist CAMHS Services provision with Surrey and Borders Partnership NHS Foundation Trust (SABP). The contract is led by NHS Guildford and Waverley CCG, on

behalf of the other CCGs as Associates: NHS East Surrey, North East Hampshire and Farnham, North West Surrey, Surrey Downs and Surrey Heath CCGs.

21. The Specialist CAMHS Services (formerly known as Tier 3 services) are: -
- Community CAMHS
  - Children and Young People Learning Disability Service
  - Eating Disorders service
  - Mindful Service (for 16-25 year olds)

### Access to services

22. Targeted services have a single point of contact for referrals and the booking of appointments called CAMHS One Stop. All referrals can be made by phone, website or letter. Referrals can be made by health, social care and education practitioners
23. SABP work with a number of partners to deliver the service. These include :
- **Beacon UK** – deliver the One Stop
  - **Xenzone** offers BACP (British Association of Counselling and Psychotherapy) accredited online counselling, self-help and moderated peer support via the award-winning Kooth.com
  - **Surrey's Family Service** lead the development and implementation of a NoLabels Service to engage with young people who are leading chaotic lives and do not readily engage with services
  - The **National Autistic Society**, children's charity **Barnardo's** and technology from **Brain in Hand** deliver peer support networks, digital health apps and accredited pre/post parenting support programmes for children and young people with behavioural issues, emotional problems and neuro-disability.
  - Other voluntary sector organisations in Surrey including **Heads Together, Learning Space, Eikon, The Lifetrain Trust, Reflex Working, Step by Step** and **Relate West Surrey** will also offer specialist services for groups of children aged six upwards.

### Performance overview and key areas of challenge

24. We are now mid - way through the contract and it is important to review what is working well and what needs to improve.

25. Performance management is carried out in line with the contract management conditions for NHS contracts. This includes a Contract Review Meeting looking at activity levels and performance, and a monthly Contract Quality Review meeting focusing on quality issues including performance around wait times and the experience of children, young people and families. Outcome information is provided on a quarterly basis through subcontracted services.
26. Whilst there are robust arrangements for contract management, obtaining meaningful data has been challenging due to a number of issues including: capability of the data capture system, inconsistent practice in recording activity and limitations of data capture. This has impacted upon the ability to fully understand the performance picture across services.
27. Although some recorded waiting times are due to data difficulties, some service waiting times are still too long, particularly in BEN and Post-Order. Within BEN there are issues around access to support while children wait for a medical diagnosis.
28. A small sample of case studies suggests that while service-users rate the service as good, they are not satisfied with the referral and discharge processes.
29. Further work needs to be done on improving the reputation of CAMHS, particularly among schools, and delivering the message about what support is available and how to access it.
30. To support improvements in performance SCC and the CCG - after seeking to resolve the issue with SABP without success - invoked a formal remedial action plan on SABP in line with contractual measures. The focus on the action plan was on the following areas :
  - a. how and when accurate reports will be developed for activity data against agreed contract levels for referrals, assessments and treatments for each service area ,
  - b. how and when accurate reports will be developed for waiting times from referral to assessment for each service area
  - c. how and when accurate reports will be developed for waiting times from referral to treatment for each service area
  - d. Detailed proposals for efficiency savings in 2018-19, recognising these will not impact on front line delivery
31. This plan is currently monitored on a monthly basis. SABP are working on improving data quality and producing a meaningful dashboard of key performance indicators with the ability to drill down on data. Improvements to data quality are showing an increase in activity closer to agreed contracted levels. However challenges on data showing impact and performance

improvement remain. The plan concluded on 31 October 2017 and will be formally reviewed after all relevant data has been analysed. A meeting for the formal review is scheduled for late December 2017.

The performance dashboard allows commissioners to see a range of data:

- Activity
- Wait times for referral to assessment and treatment
- Caseloads

### Finance and VFM implications

32. The total budget for CAMHS Services in 2017/18 is £8.318m. SCC fund £5.079m of this (including a £0.733m contribution from the Dedicated Schools Grant for Hope), the CCGs fund £2.974m with the balancing amount of £0.265m coming from the Social innovation fund for Extended Hope.

33. The majority of services within SCC are funded via a pooled budget arrangement (S75) between SCC and the 6 CCGs however there are services provided outside this arrangement. The below table sets out the three funding arrangements, alongside the budgets for 2017/18.

**Table 1: Total CAMHS Expenditure 2017/18**

	<b>2017/18 Total CAMHS Budget £m</b>	<b>2017/18 SCC Funding £m</b>	<b>2017/18 CCG Funding £m</b>	<b>2017/18 DfE Innovation Funding £m</b>
S75 Agreement	5.658	2.884	2.774	0.000
Extended Hope*	0.665	0.200	0.200	0.265
Other SCC Funding	1.995	1.995	0.000	0.000
<b>Total Expenditure inc DfE Funding</b>	<b>8.318</b>	<b>5.079</b>	<b>2.974</b>	<b>0.265</b>

\*The CCG contribution is via transformation funding

34. During the budget setting process for 2016/17 SCC agreed £1.9m of additional funding for CAMHS Services with the CCGs contributing an additional £1.0m. This additional funding was invested in the CAMHS Targeted Contract. £1.9m of this additional funding was invested in the BEN pathway, a new service in 2016/17.

35. Table 2 sets out the value of CAMHS Services within SCC that are provided for under the targeted contract and the level of services which sit outside of this contract. £4.155m of funding for the targeted contract comes via the S75 agreement with the remaining £0.997m being funded by SCC outside of this agreement. The targeted contract is not a traditional block contract arrangement, the total contract price is the maximum value that SCC will pay with respect to the services received however if the contract costs less to deliver than the agreed contract price SCC will only reimburse in line with actual spend.

**Table 2: CAMHS Services Breakdown**

	2017/18 Budget £m	2017/18 SCC Funding £m	2017/18 CCG Funding £m	2017/18 DfE Innovation Funding £m
Surrey and Borders Targeted Contract	5.152	3.117	2.035	0.000
Community Providers Contract*	0.286	0.146	0.140	0.000
SCC In-house Services	2.880	1.816	0.799	0.265
<b>Total CAMHS Services</b>	<b>8.318</b>	<b>5.079</b>	<b>2.974</b>	<b>0.265</b>

\*CAMHS Community Nurses for Schools and Parent Mental Infant Health Service Contract

### Inclusion and Experience of CYP and families

36. Including Children, young people and families is key to the ongoing development of the services. Commissioners work closely with the CAMHS Youth Advisors, Family Voice, Healthwatch and others to seek feedback specifically :
- there is representation in the ongoing contract management meetings
  - involvement in the CCG led annual review and
  - involvement in future needs assessment and commissioning strategy Development
37. Feedback from children young people families and practitioners suggests that the experience of CAMHS is **mixed**

It is good for those who

- get timely access
- receive support from sub-contracted pre diagnostic service
- may require crisis care eg HOPE / EXTENDED HOPE



What needs improving:

- timely access to services, and services whilst waiting
- reduce waiting times to assessment and treatment
- parents and carers would like better join up across CAMHS professionals and agencies
- experience and information for parents and carers when referring

<b>Conclusions and next steps:</b>
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Whilst there are challenges with the ongoing perception of CAMHS and mixed performance, the Commissioners and providers and will continue to work together to address challenges and develop the services to meet need. This will be done through:

- Ongoing performance monitoring to see impact of services, and improving experience across all services
- Development of CAMHS needs assessment incorporating views of children, young people and families
- Development of Joint EWMH commissioning strategy to inform future commissioning

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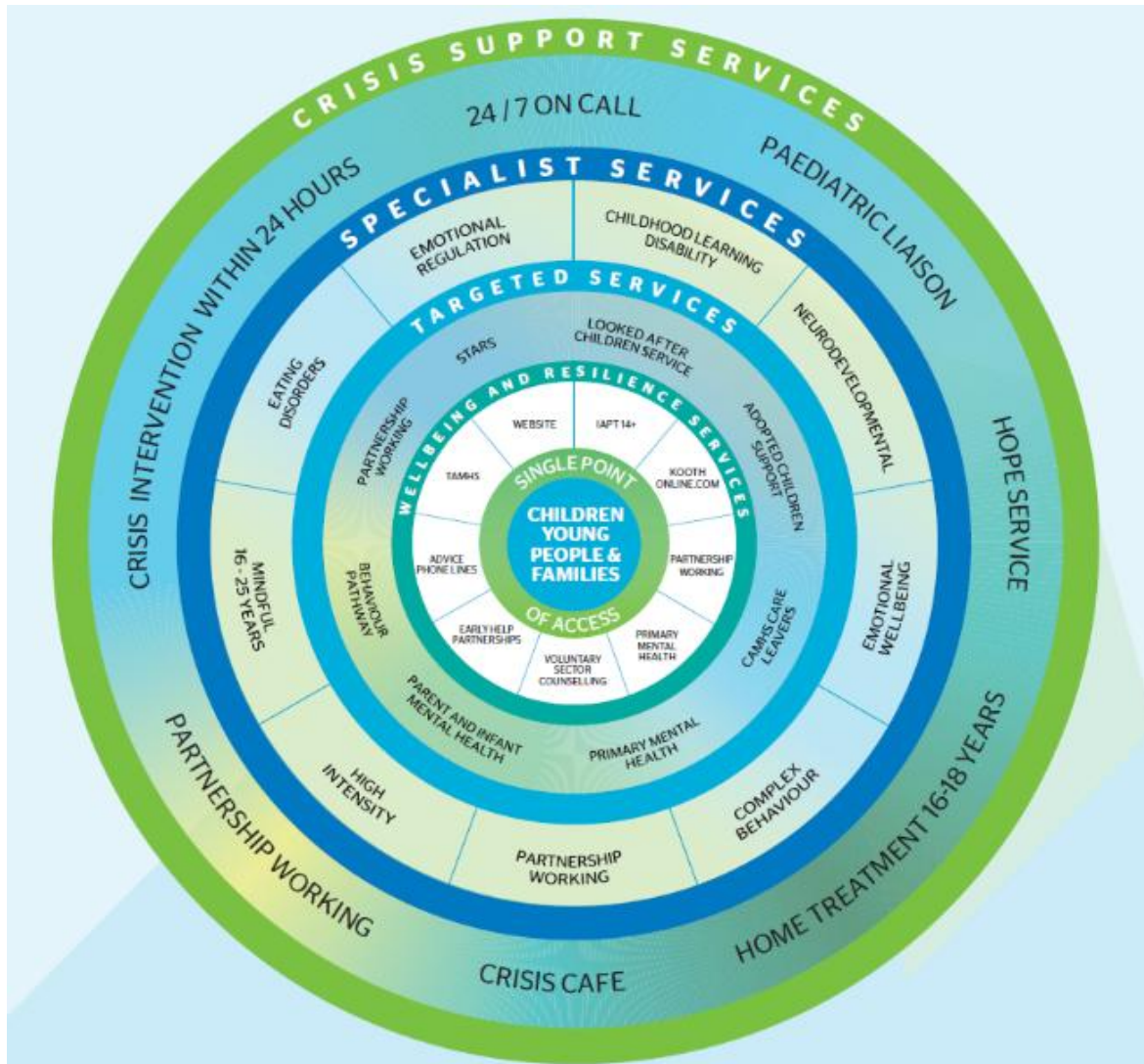
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Annex 1



Source: SABP CAMHS Service Model<sup>i</sup>

<sup>i</sup> Surrey and Borders Partnership NHS Foundation Trust (2016) *Creating a new vision for Surrey CAMHS* p.4. Available at: <http://www.sabp.nhs.uk/services/mental-health/young-people/camhs-mental-health-services/about/camhs-leaflet> accessed 02/08/17