



Committee and Date
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Item
7
Public

Discussion Paper and Progress Update of CAMHS for Shropshire

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Context and Background Information

In the past two years there have been two separate reviews of CAMHS for Shropshire and Telford & Wrekin respectively. During this time, there have been significant changes in the commissioning and provider bodies responsible for these services in terms of both organisational structure and allocation of resources. There have also been major changes in both local authorities. Both reviews identified strengths, good practice and challenges for the CAMHS service and for parties involved in the wider preventative model. A series of recommendations for each review were included with clearly defined actions for the respective organisations in each local authority and health economy areas. Whilst there are some commonalities Shropshire wide for service design there are some distinct differences that also need to be considered in relation to need, geography, demography and delivery of services.

There is a real opportunity to commission services and programmes that are complimentary and based on local need using a pathway model starting from a wider universal mental health promotion offer through to more specialised and intensive clinical support.

Progress to Date

An action plan based on the review findings is in place and progress has been made against many of the areas especially in relation to service redesign within the CAHMS service. The transitions group chaired by the Mental Health Commissioner meets monthly to oversee development of the service redesign and includes provider and commissioner parties, with representation from local authorities. The proposed model for the service will involve joint delivery between Shropshire's Community Trust and South Staffordshire and Shropshire Healthcare NHS Foundation Trust however progress has been slow and there is resistance from local clinicians about the current proposal. The anticipated deadline for implementation is July 2013. There is a rapid improvement event planned in early April.

CAMHS are not a standalone service, they interface with many other services and work with other local organisations and currently deliver interventions at different points on the mental health pathway. They are active participants in pieces of inter-related work taking place in separate working groups to ensure other actions from the reviews are implemented. This includes the redesign of the CAMHS pathway, new referral forms for GP's, clarity on roles

and expectations of the provider panel, inclusion of a health worker in the mini mash, the development of a single point of access and development of a wider 'universal offer' based on the TAMHS model and working well in schools to promote well-being/mental health promotion for children and young people across Shropshire.

Some external short-term support is being provided by public health to support the commissioning capacity for Shropshire. This has entailed in depth discussions and meetings with key stakeholders involved in the previous reviews, visits to local services and schools, discussions with local leaders in the NHS, local authority, and through participation at relevant meetings and analysis of key documents.

Overview of Progress to Date

- All partners in agreement that a comprehensive CAMHS is a local priority.
- Action plan in place for redesign of a specific part of the CAMHS service and a service improvement plan in place but resistance from local clinicians about the proposed new model.
- Current providers of the CAMHS service expressing desire to change and modernise.
- Some proactive work taking place but no central point of communication on progress and no single governance structure in place.
- Agreement of all parties for a single point of access for Shropshire which is being taken forward through Early Help.
- School nurse role under review to support mental health promotion and provide public health leadership
- Some good practice in place for through the TAMHS model in some schools and localities, which provides opportunity for universal prevention model.

Outstanding Challenges

- Limited capacity of current commissioner for mental health
- Resistance from existing and new provider about the proposed model.
- Different methods of data being used for different programmes and projects but no central reporting mechanism.
- Practitioners report a lack of clarity about thresholds and referral criteria for CAMHS services resulting in excessive referrals at certain points of the pathway.
- General confusion about an overall vision for comprehensive CAMHS
- Confusion amongst the workforce across partner agencies about their roles and responsibility for delivery of each element of the pathway.
- Expressed concern from some frontline staff in some schools about skills/expertise to address emotional/behavioural problems and mental health issues.

Proposed Solutions for Consideration

1. Creation of a countywide vision for comprehensive CAMHS across partners that is based on the needs of the population.
2. Development of a multi-agency governance process with clear reporting mechanisms (that embraces the existing working groups).

3. Development of a programme management approach to implement the existing action plan with clearly defined objectives, timelines and lead officers.
4. Engagement of the role of children and young people in the commissioning process using existing mechanisms in place.
5. Continue to work on single point of access for Shropshire
6. Dissemination of progress updates to all partners about the work underway including performance, evaluation and case studies.
7. Need for a common language between services and professionals
8. Improved use of data to inform developments.

Recommendations

That lead senior officers with commissioning responsibilities for CAMHS meet to agree a way forward giving consideration to the proposals outlined above.

Jo Robins

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