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Date: Wednesday, 15 November 2023

Time: 10.00 am

Venue: Shrewsbury/Oswestry Room, Shirehall, Abbey Foregate, Shrewsbury, Shropshire, SY2 6ND

Contact: Shelley Davies, Committee Officer Tel: 01743 257718 Email: <u>shelley.davies@shropshire.gov.uk</u>

PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

TO FOLLOW REPORT (S)

6 Children and Young People Mental Health Partnership (Pages 1 - 10)

To review progress in delivering the work of the children and young people's mental health partnership. (Report to Follow).

Contact:

Vicki Jones, Head of Transformation and Commissioning Children and Young People Learning Disabilities and Autism - <u>vicki.jones18@nhs.net</u>

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Children and Adolescence Mental Health Services update

Liam Laughton – Head of Children, Young People and Family Services - MPFT

Vicki Jones – Head of transformation and commissioning – CYP and LD&A- ICB

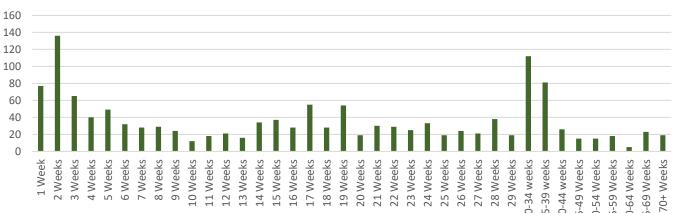
November 2023

You were concerned about lack of Referrals and Waiting Times Data

The increase in numbers of Children and Young People being referred to BeeU is shown in the graph on the right: In October 2020, 398 children were referred to BeeU In October 2023, 918 children were referred to BeeU An increase of over 130%

Page 2

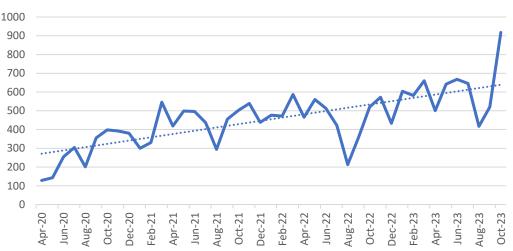
Shropshire Children and Young People Waiting to be Seen Grouped by Weeks Waiting



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NFS Partnorchin University

Midlands Partnership University



Number of Children Referred to BeeU

Waiting times vary, depending on what a Child or Young Person needs, the severity, and risk associated with their needs, and the variation in workforce with the correct skills to meet their needs.

Data is reported monthly through Contract Review Meetings to both the ICS and Local Authority.



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You were concerned about lack of information about outcomes **Midlands Partnership University**

National Context:

• From 1st April 2024, new reporting for NHSE will include Routine Outcome Measures as essential to count activity.

Local MPFT Data:

- 5,137 Children and Young People have completed Routine Outcome Measures between 1st Åpril 2021 and 31st October 2023
 - $^{\omega}$ 61.75% of measurable results (paired outcomes) saw a general improvement
 - 20.35% of measurable results (paired outcomes) saw a general decline
 - 17.9% of measurable results (paired outcomes) saw no change

National Benchmarking:

• "Approximately half of those who access child and adolescent mental health services do not show measurable improvement in symptoms." (Bear 2022)



NHS Foundation Trust

You were concerned about access for rural populations to services, specifically BEAM

BEAM's drop in services are not provided in rural locations. However BEAM continue to offer virtual drop ins using technology for populations who may have challenges accessing their physical drop in.

MPFT have focussed provision on rural areas, for the last 2 waves of Mental Health Support Teams funding from NHSE, investing in 1 team covering North Shropshire (ongoing), and 1 team who will cover South Shropshire (programme starting January 2024).

Kooth and Healios continue to provide access to digital and online services for the entire population.

DROP-IN SESSIONS

When?	Where?	Time?
Mondays	Sundorne Youth Centre 218 Sundorne Road Shrewsbury SY1 4RG	12pm-4pm (last sessions held @ 3pm)
Tuesdays	Shropshire Beam 9 Market Square Wellington TF1 1BP	10am-6pm (last sessions held @5pm)
Thursdays	Shropshire Beam 9 Market Square Wellington TF1 1BP	10am-6pm (last sessions held @5pm)
Saturdays	Shropshire Beam 9 Market Square Wellington TF1 1BP	10am-2pm (last sessions held @1pm)



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You wanted to know about the review into support for looked after children



A collaborative and comprehensive review took place between MPFT and Local Authority Children's Services, and changes were agreed, the changes in summary are: Old model:

- Multiple unclear 'referral routes' for Looked After Children in to BeeU, which led to variations in waiting times, and an unequal offer.
- Poor Data collection and quality Information was not regularly shared between the Social Workers referring a child and BeeU, as such BeeU did not collect reliable data.
- Bespoke support offered by clinicians with particular skills and experience supporting looked after children, however some challenges in Looked After Children accessing the whole BeeU offer.

New model:

- 1 single point of access for all referrals, to ensure consistency and equality in access, better data quality and information sharing.
- Looked After Children remain prioritised for assessment, and any urgent needs can be identified sooner.
- Practitioners with specific skills continue to be assigned to complete assessments, but have better access to the BeeU MDT, and if Looked After Children require another discipline this can happen quickly and without delay.



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Investments into CAMHS

Investment into CAMHS from ICB:

CAMHS Contract increase from ± 5.6 million to circa ± 11 million in last 7 years.

From the Mental Health Investment Standard funding:

- Eating disorders
- CYP Crisis

Page 6

- Mental Health in School Teams
- Core CAMHS

(NB: additional funding has also gone into perinatal and adult mental health services)
Additional investments from other organisations:
Local authority: contracts with third sector and voluntary organisations.
Education: via Whole school approach and 'Futures in mind'



Challenges

• Demand and Capacity:

Locally high levels of referrals per 100,000 population (6,306 against a national mean of 4,869)

• Workforce:

Lack of qualified staff, time required to develop the workforce,

- CAMHS contract
- Page Contract set in 2016/17, need to review in line with best evidence, recent population health data, or accounting for the consistent increase in demand; to inform the future delivery
 - ND pathways

To carry out an intensive review of CYP ND pathways including assessment and pre and post diagnosis support



Next Steps

- Commissioning
 - Current contract will end March 2025
 - Joint Engagement plan (sign off February 2024)
 - Joint Service review plan
 - Equity and Quality impact assessments
- **CYP MH Governance** Page
 - Assurance

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- Robust monitoring and data
- Shared pathways across the system
- Development of Integrated pathways
 - Provider collaborative ways of working
- Develop commissioning intentions regarding Children's Neurodevelopmental Pathways









Thank you

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