

Child & Adolescent Mental Health Services (CAMHS) in Barnsley – Cover Report

1.0 Introduction and Background

- 1.1 In April 2014, significant concerns were raised regarding the performance of Barnsley Child and Adolescent Mental Health Services (CAMHS) which resulted in establishing an officer Task and Finish Remediation Group. Barnsley CAMHS reflected national trends in terms of rising demand and insufficient capacity, which was supported by the Parliamentary Health Select Committee report published in November 2014 which concluded that nationally ‘there are serious and deeply ingrained problems with the commissioning and provision of children’s and adolescents’ mental health services’.
- 1.2 In March 2015, the Government published the ‘Future in Mind’ report as a result of the ‘Children and Young People’s Mental Health and Wellbeing Taskforce’ which ‘considered ways to make it easier for children, young people, parents and carers to access help and support when needed and to improve how children and young people’s mental health services are organised, commissioned and provided’. The key themes which arose from this were:
- Promoting resilience, prevention and early intervention
 - Improving access to effective support – a system without tiers
 - Care for the most vulnerable
 - Accountability and transparency
 - Developing the workforce
- 1.3 On 10th March 2015, the then Children’s Services Scrutiny Committee (CSSC) considered the performance of local CAMHS which included raising concerns regarding extensive wait times. A number of recommendations were made which included that performance of the service should be followed up every 12 months. Additionally, during 2015, Healthwatch Barnsley, which is an independent consumer champion that gathers and represents the views of the public with regards to health services, undertook a survey of service users of Barnsley CAMHS. A report summarising the findings was published in December 2015 which highlighted issues within the service that were impacting upon individual’s experiences. The findings of this report were used by the service to inform their future work
- 1.4 In May 2016, the then Safeguarding Scrutiny Committee (SSC) undertook follow-up activity and acknowledged that during 2015/16 improvements had been made to wait times (from 14 weeks in April 2015, to 5 weeks in March 2016); however wait times for Core/Partnership appointments were still lengthy and the overall wait times for access to specialist CAMHS extensive.
- 1.5 In June 2017, the Overview and Scrutiny Committee (OSC) continued to follow up the progress of CAMHS. They welcomed the introduction of the Single Point of Access (SPA); commended the reduction in waiting times that had been achieved; however noted that there was still a lot of work to be done to improve the service, especially the waiting times to receive treatment.

2.0 Current Position

- 2.1 Healthwatch Barnsley has revisited their survey from 2015 very recently and, although it is early days, preliminary findings indicate that a large percentage of children, young people and families feel there is a lack of support whilst they are waiting to access CAMHS. In addition, it would appear that there are still long wait times from referral to treatment, with over half of the parents/carers surveyed stating it was 18 months and over. Furthermore, it seems that poor referrals from doctors/professionals continue to be the reason why some referrals are not accepted by CAMHS.

- 2.2 Despite developing strong foundations, and accessible support throughout the borough, low level support services are not currently having a direct, positive impact on referrals to NHS Specialised CAMHS. The service has managed to keep the average wait (in days) for the initial assessment (Choice appointment) under three weeks. However, a rise in demand from the previous year, and considerably long waiting times for all identified pathways are reflected in current data.
- 2.3 The attached report (Item 4b), provided by Barnsley CCG (Clinical Commissioning Group) who commission CAMHS Services in Barnsley, provides an update to the OSC on performance information as well as achievements made by the service which is delivered by South West Yorkshire NHS Partnership Foundation Trust (SWYPFT).
- 2.4 Over the last 12 months, a wide range of activities have been undertaken by Chilypep, a charity dedicated to raising the voices of young people. This includes consultation with Looked After Children (LAC); work with local schools and education providers; promotion of the CAMHS Single Point of Access (SPA) and the development of a Mental Health First Aid (MHFA) Kit at Greenacre School. The details of this work can be found in Appendix A (attached).

3.0 Invited Witnesses

- 3.1 The following witnesses who are responsible for the commissioning and provision of CAMHS have been invited to today's meeting to answer questions from the OSC:
- Martin Tune, Acting Chief Nurse, Barnsley CCG
 - Patrick Otway, Head of Commissioning (Mental Health, Children's and Maternity) Barnsley CCG
 - Dave Ramsay, Deputy Director of Operations for SWYPFT
 - Carol Harris, District Service Director, Forensic and Specialist Services, SWYPFT
 - Claire Strachan, General Manager, Barnsley CAMHS, SYPWFT
 - Ovidiu Sandica, Consultant Psychiatrist, Barnsley CAMHS, SWYPFT
 - Mark Smith, Vice-Chair, Healthwatch Barnsley

4.0 Possible Areas for Investigation

- 4.1 Members may wish to ask questions around the following areas:
- Other than Autism Spectrum Disorder (ASD) & Attention Deficit Hyperactivity Disorder (ADHD), what are the main underlying issues that cause children & young people in Barnsley to visit CAMHS?
 - What have been the barriers to significantly reducing waiting times for the individual pathways over the last 12 months and what are the plans for the coming year?
 - Given that hospital admissions as a result of self-harm (10-24 years) in Barnsley are well above the national average, what is being done to support this group of young people?
 - In your opinion, is the service providing value for money?
 - What are the plans to improve the pathway for Looked After Children (LAC) and when will these be implemented?
 - To what extent does practice reflect policy and processes when it comes to working with other authorities, for example financial arrangements for treating children from outside the area?
 - To what extent do delays in treatment lead to children being prescribed medication that may not be necessary?
 - What support is in place for staff to help them manage caseloads and their own mental wellbeing?
 - What are the timescales for implementing the Oasis and Public Health Nurses action plan outlined in Appendix A?

- How are services promoted to ensure that those in need are aware of the services available, particularly those groups that are difficult to reach/in a minority (for example BME, traveller children, child carers, those that are home schooled, children of alcohol/drug dependent adults etc.)?
- What is in place to help patients transition from CAMHS to adult mental health services and is this a seamless process?
- When will the results of the Peer Review be available and what do you expect the findings to be?
- What support is available to parents and young people before and between referrals / appointments and is this available to everyone?
- Last year's report mentioned several areas for development, including training GPs to ensure that inappropriate referrals reduced. Which of these development areas were implemented and how have you measured their success?
- What can Members do to support improvement in CAMHS?
- Our children and young people have specifically asked 'how are you sure that you put the interest of the young person first'?

4.0 Background Papers and Links

- Item 4b – Barnsley CAMHS Report
- Item 4b Appendix A - Chilypep Activity
- Barnsley CCG CAMHS Key Performance Indicators Report – August 2018 (available upon request)
- CAMHS Report to the OSC 2016/17:
<https://barnsley.mbc.moderngov.co.uk/ieListDocuments.aspx?CId=224&MId=4422&Ver=4>
- Future in Mind Barnsley Transformation Plan for Children & Young People's Mental Health & Emotional Wellbeing 2015-2020:
<http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/2017/Future%20in%20Mind%20Barnsley%20Transformation%20Plan%202015-2020%20Refresh%20-%20October%202017.pdf>
- Public Health England Public Health Profiles – Self Harm Statistics 2016/17:
<https://fingertips.phe.org.uk/search/self%20harm#page/0/qid/1/pat/6/par/E12000003/ati/102/are/E08000016>

5.0 Glossary

ASD	Autism Spectrum Disorder
ADHD	Attention Deficit Hyperactivity Disorder
BME	Black and Minority Ethnic
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
Chilypep	Children & Young People's Empowerment Project
CSSC	Children's Services Scrutiny Committee
OSC	Overview and Scrutiny Committee
MHFA	Mental Health First Aid
SPA	Single Point of Access
SSC	Safeguarding Scrutiny Committee
SWYPFT	South West Yorkshire NHS Partnership Foundation Trust

6.0 Officer Contact

Anna Marshall, Scrutiny Officer, 22nd October 2018