## HEALTH SCRUTINY - IMPACT OF SCRUTINY SUB-COMMITTEE (ISSC) 12 JULY 2018

**ISSC REPORT: CAMHS** 

RECOMMENDATION		IMPACT OF ACTIONS TAKEN e.g. new strategy, X residents engaged, practise changes, planned stakeholder discussions, partnerships/stakeholders have issues on agenda, service development and dates	COMPLETED (do not input 'ongoing' in this column) and dates
2.1 That Hertfordshire should become a 'trailblazer' and adopt the Green Paper with an amendment as to the amount of time needed to operationalise proposals. This should be reduced to 2020 rather than 2022/23. (Paragraphs 3.14, 3.15, 3.17, 4.1, 4.2)	A joint response was submitted to the Green Paper consultation from CAMHS Transformation partners (Children's Services and Herts Valleys Clinical Commissioning Group) asking that timescales for implementation are bought forward and putting Hertfordshire forward as a potential trailblazer area. The consultation closed on 2nd March and all the feedback received is currently being analysed at a national level. If the government does not select us as a national trailblazer area we will evaluate which of the Green Paper recommendations we can deliver locally without national support and implement these as soon as possible. The three main recommendations from the Green Paper were:  • each school to identify and train a designated senior lead for MH – we already encourage schools to have a senior mental health lead and will continue to do this  • new mental health support teams to bridge the gap between schools and NHS CAMHS services – if we are not chosen as a trailblazer we will consider how best to	A joint response to the Green Paper was submitted by the CAMHS partners.  CAMHS partners have been told informally that the government will announce the trailblazer application process "soon". At that stage an application will be submitted by the CAMHS partners.  Trailblazer application will be completed based on central government timescales. Work continues locally with schools and specialist CAMHS to improve services locally along the lines of the green paper. If we are not successful with a trailblazer application these areas will continue to be local priorities in the CAMHS Local Transformation Plan which runs to 2020.	YES

2.2 Members understand the difficulty in evaluating CAMHS projects. However, the prototype and piloted services should be reviewed ahead of the implementation of the Green Paper. (Paragraphs 3.5, 3.11, 3.14, 3.15, 3.17, 3.18, 4.1, 4.2, 4.6)	implement this proposal locally with a target of doing so by 2020.  • Reduction in waiting times for NHS services – this is already a local priority and through additional NHS investment we plan to continue to reduce waiting times  Once the Government has officially announced the process for selecting trailblazer areas CAMHS partners will submit a formal application.  Over the coming year the Children and Young People's Emotional & Mental Wellbeing Board will evaluate the impact of a number of pilot schemes to consider their effectiveness. These will include HPFT's pilot scheme covering the management of Tier 4 inpatient beds, which will also be the subject of review as part of the national 'New Models of Care' pilots and the independent evaluation of the Empathy project.	On 21 May an event for professionals in Hertfordshire was held to consider progress against the CAMHS Transformation Plan and hear about the progress made. This demonstrated significant progress on a range of priorities such as eating disorders, promotion of good mental health and community perinatal services.  Funding has been secured from Health Education England to continue the Empathy project for a further year. The evaluation of the Empathy project shows that 34 young people have worked 105 three hour shifts between October 2017 and March 2018. They had approached 697 patients and families and spent time with 329 of these during that period. 23% of people received a social prescribing pack and the report gives a number of examples of the positive impact of the project.	YES  The 'New Models of Care' pilot evaluation will take place towards the end of the pilot period which runs to the end of March 2019.
2.3 CAMHS partners need to work with schools to make sure that there are	Partners at the Children and Young People's Emotional & Mental Wellbeing Board received a report in March evaluating progress on the schools related element of the Board's work	A report was presented to the CYP Emotional and Mental Wellbeing Board in March. Some of the key outputs / outcomes are:  • Training delivered to over 2,500	YES

designated mental health leads that can educate schools and community groups, whilst recognising the limit to which classroom teachers can provide this service. (Paragraphs 3.5, 3.9, 3.10, 3.14, 3.17, 4.1, 4.3)	programme so far. Working with schools will continue to be a high priority for the Board over the coming year.  As set out in 2.2 above we will evaluate the	professionals in 2017/18, around 2,000 of whom have been school staff  • An online toolkit for schools mental health leads has been accessed by over 150 school leads  • Case consultations with specialist CAMHS are now in place for high need school settings  • A kite mark will shortly be launched to recognise schools with good mental health practice.  • Comparative analysis of survey data shows from 2016 and 2018 that Hertfordshire school staff are significantly more likely to agree or strongly agree that they are able to recognise behaviour that may be linked to a mental health issue; that all classroom teachers have appropriate support to identify mental health issues in pupils; that they are more knowledgeable about mental health issues, risk factors and how to help pupils access appropriate support.  This will continue to be a priority in the CAMHS Local Transformation Plan until the 5 year transformation period ends in 2020. Over the next two years this will include an ongoing training programme for school staff, briefings for governors, further development of the working relationship between schools and specialist CAMHS and information and advice for schools.	YES
should explore	effectiveness of the Home Treatment Team	See comments at recommendation 2.2	123

developing further preventative and early intervention models to prevent children and young people reaching crisis. Using The Home Treatment Team model, run by HPFT, as an exemplar. (Paragraphs 3.18, 4.1, 4.6)	model over the next year. Children and Young Peop Wellbeing Board will cont models to reduce crisis	ole's Emotional & Mental		The 'New Models of Care' pilot evaluation will take place towards the end of the pilot period which runs to the end of March 2019.
2.5 It is imperative that officers secure longer term funding for Empathy and similar projects as yearly funding is not sufficient for	Since the Scrutiny session NHS England has set out a clear expectation that all Clinical Commissioning Groups invest additional funding in NHS CAMHS services in each of the next three years. For local CCGs the additional investment is set out below.		<ul> <li>Additional funding for autism / ADHD new pathways and to reduce waiting list</li> </ul>	YES
sustainability of a	2018-19	2019-20 2020-21	E250,000 Total Additional support to schools £100,000	
service. (Paragraph	£	££	£ • Staff training £50,000	
3.2, 3.3, 3.4, 4.1, 4.4, 4.5)	NHS East & 297,000 North Herts CCG	200,000 241,000	738,000 communications and website development £10,000  The allocation of the remaining additional funding	
	NHS Herts 314,000 Valleys CCG	211,000 255,000	7(29,09,000) has not yet been finalised and will be agreed through the CYP Emotional and Mental Wellbeing Board.	
	Total 611,000	, ,	518,000	
	This gives a greater degree of longer term funding an in future planning. We are evaluation of the Empath:	d so is incredibly helpful e expecting the	Funding agreed in March as set out in the table to the left.	

months and will make a decision on longer term	
funding once that has been received.	I