

Coventry City Council
Minutes of the Meeting of Joint Education and Children's Services Scrutiny Board
(2) and Health and Social Care Scrutiny Board (5) held at 2.00 pm on Wednesday,
25 November 2015

Present:

Members: Councillor Welsh (Chair)
Councillor L Bigham
Councillor J Innes
Councillor J Lepoidevin
Councillor C Miks
Councillor K Mulhall
Councillor M Mutton
Councillor J O'Boyle
Councillor P Seaman
Councillor D Skinner
Councillor K Taylor
Councillor S Walsh

Co-Opted Members: Mrs S Hanson
David Spurgeon

Other Members: Councillors Kershaw, Cabinet Member for Education
Councillor Ruane, Cabinet Member for Children and Young
People
Councillor Thomas, Deputy Cabinet Member for Education

Others in attendance: A Cooper-Bastian, Coventry & Warwickshire Partnership
Trust
J Francique, Coventry & Warwickshire Partnership Trust
M Gilkes, Coventry and Rugby CCG
J Spencer, Coventry and Warwickshire Partnership Trust
M Wakeley, Coventry and Warwickshire Partnership Trust

Employees (by Directorate):

People A Butler, H Sandu
Resources V Castree, G Holmes, L Knight

Apologies: Councillor N Akhtar, D Galliers and H Noonan

Public Business

1. Appointment of Chair

Councillor Welsh was appointed as Chair for this meeting.

2. Declarations of Interests

There were no disclosable pecuniary interests.

3. **Transforming Child and Adolescent Mental Health Services (CAMHS)**

The Joint Board considered a report of the Coventry and Rugby Clinical Commissioning Group (CCG) which provided information on improvements made within the Specialist Child and Adolescent Mental Health Service (CAMHS) in the last 12 months.

The Joint Board noted that a number of services comprising the CAMHS system were commissioned across Coventry and Warwickshire by five commissioning organisations in line with a nationally adopted tiered model. Universal and targeted services (tiers 1 and 2) were commissioned by the two local authorities, whilst specialist services (tier 3) were funded by the three local CCGs across Coventry and Warwickshire, with Coventry and Rugby CCG holding contract lead responsibility. Inpatient services (tier 4) were funded and provided by NHS England. The total level of investment made across Coventry and Warwickshire was £8.2m.

There were a number of challenges recognised nationally surrounding CAMHS, including increasing demand, timeliness of support and barriers to access. NHS England and the Department of Health had published the Future in Mind Report in 2015 in response to these challenges, which reinforced the need for system wide change to improve resilience and provide right services at the right time, tailored to meet the needs of young people.

Locally, commissioners and stakeholders across Coventry and Warwickshire had identified a range of challenges and risks facing the local Specialist CAMHS service including increased demand, an increase in the number of self-harm presentations at A&E and delays in patient pathways. Prior to the publication and recommendations of the Future in Mind report, a CAMHS redesign was established to co-produce and redesign the comprehensive CAMHS system across Coventry and Warwickshire.

The Briefing Note indicated that within Coventry, there had been significant improvements in waiting times, support to young people presenting at hospital (acute liaison) and support to Looked After Children during the last 12 months.

In relation to waiting times, it was noted that in February 2014 over 100 young people were reportedly waiting for follow up appointments within Specialist CAMHS, with over 67 waiting over 19 weeks. Following an investment of £268k as one off funding by Coventry and Rugby CCG, additional posts were appointed to assist with the reduction of waiting times. By September 2015, only 1 person waited over 12 weeks for a follow up appointment. All urgent cases were seen within 5 working days and 100% of routine cases were seen within 18 weeks for an initial assessment. 21 young people were assessed as requiring a priority assessment and were seen outside of the normal 4 week wait and offered treatment immediately.

Additional one off investment was also made by Coventry and Rugby CCG of £99k to support the increase in referrals for the Autistic Spectrum Disorder (ASD) assessment. The increase in referrals occurred after Coventry and Warwickshire

Partnership Trust (CWPT) implemented a new ASD Pathway to ensure compliance with the National Institute of Clinical Excellence (NICE) Guidance.

The Coventry and Rugby CCG committed additional resources in October 2014 of £220k to enable Specialist CAMHS to provide an Acute Liaison function across Coventry and Warwickshire. The purpose of the service was to provide timely assessment and support to young people presenting at hospital and ultimately support work towards reducing in-patient admission. The service implemented in May 2015, provided an extended shift system and an out of hour telephone consultation service across University Hospital Coventry and Warwickshire, Warwick Hospital and George Elliot Hospital. In addition, the service had developed and implemented an adapted version of a suicidal intent scale for A&E departments to complete to inform decision making and assess the level of risk and intervention required for the young person.

With regard to Looked After Children, a new dedicated Mental Health Practitioner co-located and embedded with the Looked After Children's Social Care Team had been created and would be in post by 1st December. The dedicated resource would assist in the early identification of mental health needs amongst young people through assessment and intervention and provide support to reduce placement disruption and breakdown.

To support system wide transformation within the CAMHS services, NHS England had distributed £75m funding across all CCG's to improve children and young people's mental health and emotional wellbeing. Guidance published in August 2015 by NHS England, placed responsibility for all CCG's to produce a five year strategy detailing how services will be transformed in line with the Future in Minds report recommendations. Across Coventry and Warwickshire, the three CCG's have been allocated £1.7m recurrent funding as of November 2015.

The Coventry and Warwickshire Plan was developed in partnership by the three local CCG's and two Local Authorities. The plan had been approved by the Chair of the Health and Wellbeing Board, NHS England Specialist Commissioning Team and Executive Lead Officers in each CCG across Coventry and Warwickshire, and endorsed by the Coventry Children's Joint Commissioning Board. The Plan was submitted to NHS England on 16th October 2015 and assured on 5th November 2015.

The Briefing note identified the following seven key strategic priorities identified across Coventry and Warwickshire

- Strengthening mental health support to children and young people in schools.
- Further reducing waiting times for access to CAMHS service.
- Reducing the number of young people awaiting an assessment for ASD
- Providing crisis support to young people presenting with self-harm.
- Dedicated mental health support for the most vulnerable, including those Looked After, Adopted or in Supported Accommodation.
- Enhancing access to information and communication through technology.
- Implementation of a newly developed community based Eating Disorder Service.

The CAMHS Redesign Project Board was being led and chaired by Warwickshire in partnership with Coventry commissioners and continued to oversee the CAMHS Redesign Project and commissioning arrangements across Coventry and Warwickshire.

Whilst noting the improvements made, particularly with the use of non-recurrent funding, the Members remained concerned regarding a number of areas and questioned officers in relation to:

- Waiting lists and the time in between assessment and treatment.
- Transition between children's and adults services.
- Education and Healthcare Plans.
- Support to Schools.
- Services for the Autistic Spectrum Disorder.
- The role of parents and support on offer.

In relation to the support to Schools, Councillor Kershaw, in his capacity as Cabinet Member for Education, offered to speak with the Director of Education to ensure that CAMHS is added to the agenda for School Heads.

Following consideration of the Briefing Note and the responses received to questions, the Member indicated their dissatisfaction with the level of information provided and requested that a further report be submitted to a meeting of the Joint Boards in January 2016, to include:

1. A summary of where CAMHS were, where they are now and where they are planning to be.
2. Waiting times between different interventions, ie. initial assessment, first treatment, discharge etc.
3. The Autistic Spectrum Pathway, including waiting times.
4. Plans to improve the transition between children's and adult services, including options to create a 0-25 year old service.
5. Re-referral rates.
6. Education and Healthcare Plans and links with schools and education
7. Support to schools at Tier 1 interventions, including the training on offer.
8. The detailed Implementation Plan and Outcome Framework as submitted to and accepted by NHS England.

RESOLVED that a further report be submitted to a Joint Board meeting in January 2016, to include the information detailed in 1 to 8 above.

4. Any Other Business

There were no other items of business.

(Meeting closed at 3.45 pm)