

Meeting of South Ayrshire Health and Social Care Partnership	Integration	Joint Board	
Held on	17 th May 20	023	
Agenda Item:	7		
Title:	•	ation of the National CAMH Iopmental Specifications	S and
Summary: The South Ayrshire IJB are asked to note the successful implementation in Ayrshire and Arran to meet the National CAMHS Specification, to be aware of the ongoing demands and risks placed on the service of accepting referrals for young people that do not meet the national criteria and specification. The requirement for the 3 HSCPs in Ayrshire and Arran is to take forward work at pace with partners to progress whole system plan(s) to meet the National Neurodevelopment Specification. This has resulted in the commissioning of a Pan Ayrshire Extreme Team. The IJB are being asked to approve that referrals not meeting the CAMHS specification (Neurodevelopmental Concerns with no Mental Health Diagnosis) will cease to be accepted by CAMHS from 1 August 2023.			
	Thelma Bowers / Mark Inglis		
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IMPLEMENTATION OF THE NATIONAL CAMHS AND NEURODEVELOPMENTAL SPECIFICATIONS

1. PURPOSE OF REPORT

1.1 The purpose of this report is to report the successful implementation in Ayrshire and Arran to meet the National CAMHS Specification, to be aware of the ongoing demands and risks placed on the service of accepting referrals for young people that do not meet the national criteria and specification.

2. RECOMMENDATION

- 2.1 It is recommended that the Integration Joint Board
- i. Note the successful implementation of the CAMHS national specification
- ii. Note the impact that this has on those children who do not meet the national specification, in particular Children with Neurodiversity which has resulted in the commissioning of an "extreme teams" approach
- iii. approve that children not meeting the CAMHS specification will cease to be accepted as referrals into CAMHS

3. BACKGROUND INFORMATION

- 3.1 Child and Adolescent Mental Health Services in Ayrshire and Arran are now aligned and resourced to fully implement the NHS Scotland National CAMHS Service Specification published in February 2020 Child and Adolescent Mental Health Services.
- 3.2 This follows a significant amount of Reform work in the preceding 3 years and is a culmination of the combined work of the CAMHS Extreme Team and CAMHS Implementation Group.
- 3.3 The specification describes the role of CAMHS as providing access to multidisciplinary teams that provide:
 - assessment and treatment/interventions in the context of emotional, developmental, environmental, and social factors for children and young people experiencing mental health problems.
 - training, consultation, advice, and support to professionals working with children, young people, and their families.
- 3.4 In Ayrshire and Arran, reinforced by Scottish Government investment for recovery and renewal for Mental Health, there has been significant investment in the redesign and development of the service to meet the specification and the needs of the children, young people, families, and carers. CAMHS will offer assessment, treatment and care to children and young people experiencing moderate to severe depression, moderate to severe anxiety problems, self-



harming behaviours, and other diagnosable mental health conditions where there is an indication for treatment and therapeutic care.

- 3.5 Young people requiring CAMHS will present with mental health problems that are causing significant impairments in their day-to-day lives. Such presentations can result in both the need for scheduled and/or unscheduled care and to this end there has been investment in the development of an CAMHS Urgent Assessment and Intensive Treatment service that is now operating across seven days which complements the traditional core CAMHS service model.
- 3.6 A Neurodevelopment CAMHS service (N-CAMHS) has also been developed specifically for those children and young people whose Neurodevelopmental Disorder co-exists with a clearly defined and treatable mental illness. This service offers specialist clinical support, assessment and diagnosis for children and young people experiencing the combined challenges of mental ill-health with conditions such as Autism or Attention Deficit Hyperactivity Disorder.
- 3.7 The CAMHS Extreme Team was commissioned in 2020 to respond to the reform question: How will we improve children and young people's mental health and wellbeing with timely access to services and support to children, young people, and their families at a locality level?
- 3.8 The programme of work undertaken by the Extreme Team at pace centred on the reform question on delivery of the new CAMHS National Service specification and delivered transformation in key areas of enquiry over an intensive 6-month period and critically developed and defined:

Three core CAMHS pathways:

- Core CAMHS delivery.
- Unscheduled Care CAMHS
- Neurodevelopment CAMHS
- 3.9 Clarified the provision of psychological interventions and professional roles from CAMHS and Educational Psychology for children and young people across the three Partnerships in Ayrshire and Arran.
- 3.10 The Extreme Teams programme of work formally concluded in June 2021 with the achievements noted above. To ensure that these changes could be embedded and achieve consistency of service excellence across the whole system a CAMHS Implementation Group continued to meet with the same membership as the core Extreme Teams. The focus of the work of the group over the last 2 years has been on the monitoring of recruitment plans, workforce modelling, waiting times for the Neurodevelopment service and review of the developing evidence base to inform ongoing development of the service and inform future planning in alignment with the service specification.
- 3.11 In addition to the Extreme Team reform programme there have been other whole system developments which complement and enhance provision to the whole population and wider communities.



Neurodevelopmental Specification

- 3.12 The Children and Young People's Mental Health and Wellbeing Taskforce reported in 2019 and recommended that Scottish Government and Partners should: "Develop a Neurodevelopmental Service Specification for use across services in Scotland". The National Neurodevelopmental Specification is for children and young people who have neurodevelopmental profiles with support needs and require more support than currently available. These children are often referred to CAMHS but do not always meet the mental health criteria described in the CAMHS national service specification criteria.
- 3.13 The Specification complements, and sits within, the Getting It Right for Every Child approach. It reflects the principles of UNCRC, the Universal Health Visiting Pathway, and Ready to Act for Allied Health Professionals.
 - The Specification aims to ensure that children and families receive the supports and access to services that meet their needs at the earliest opportunity, based on the GIRFEC approach. For many children and young people, such support is likely to be community based, and should be quickly and easily accessible.
- 3.14 The Specification outlines that children, young people and their families will be able to access additional support, appropriate for their neurodevelopmental needs, through universal services, such as via the named person, and community based mental health and wellbeing supports and services. Universal services should work closely with professionals working in neurodevelopmental services, relevant health and social care and education services. These professionals should be linked with CAMHS so that children and young people with both neurodevelopmental and mental health support needs can get the additional support they require.
- 3.15 Professionals providing support will also provide assessment, formulation, recommendations, and where appropriate and helpful, diagnostic assessment for those children and young people to help them understand their neurodevelopmental differences and support needs. Understanding of support needs can be enhanced by diagnosis but should not wait for diagnosis. The National Neurodevelopmental Specification sits along the Service Specification for CAMHS and the same principles underpin both specifications. There are 7 standards of care set out to provide the minimum stand of care expected from neurodevelopmental services.

These are:

- 1. High Quality Care and Support that Is Right for Me
- 2. I am fully involved In the Decisions about my Care
- 3. I will receive High Quality Assessment, Formulation and Recommendations that are right for me
- 4. My Rights are acknowledged, Respected and Delivered
- 5. I am fully involved in Planning and Agreeing my transitions
- 6. We fully involve Children, Young People and their Families and Carers
- 7. I have confidence in the Staff who support Me



- 3.16 Across Ayrshire and Arran the requirements of the Neurodevelopmental Specification have not been implemented or met. In order to achieve a whole system approach the neurodevelopmental specification needs to be cross sector and involve health, education, social services and the third sector. The specification sits as part of a whole system, with a single point of access, whereby health, education, social services and third sector professionals actively seek to understand each other's unique contributions and respect each other's areas of expertise. A stepped and matched care pathway is needed so additional supports for example from CAMHS can be accessed as needed, this stepped support from CAMHS is in place in Ayrshire and Arran with the establishment of the Neurodevelopment CAMHS service.
- 3.17 Professional staff supporting the implementation of the neurodevelopmental specification will include registered children's professionals with additional training in the identification, assessment and formulation of neurodevelopmental conditions, including:
 - Speech and Language Therapists
 - General Practitioners
 - Paediatricians
 - Occupational Therapists
 - Peripatetic Teachers
 - Educational Psychologists
 - Nurses
 - Clinical Psychologists
 - Social Workers
 - Children and Adolescent Psychiatrists
 - Physiotherapists

This illustrates the whole system approach and range of professionals required to support young people.

A timely response to requests from families and carers who have concerns about their children's neurodevelopmental profiles and needs can reduce family and carer stress, improve confidence in adopting positive and supporting parenting approaches, and receive support, guidance and interventions that are tailored to the needs of their children, increasing the prospects of early improvements in outcomes. It is nationally recognised that the implementation of the neurodevelopmental specification will reduce the numbers of children and young people referred to CAMHS, and rejected, as they do not meet the CAMHS referral mental health and risk/impact criteria.

In Ayrshire and Arran to date the CAMHS service has not rejected any referrals for young people where there is a query of a Neurodevelopmental Disorder or a request for diagnosis.



Impact on CAMHS Service in Ayrshire and Arran

- 3.18 The key performance standards that the service is measured against and is required to provide is our Referral to Treatment (RTT) for all referrals. It is required by Scottish Government that every child or young person referred to CAMHS is assessed and receives a form of treatment and intervention within 18 weeks of that referral. Ayrshire and Arran CAMHS continue to meet more than the 90% compliance against this target. The achievement of this target however continues to present challenges in the context of increased referrals and demand which has doubled between 2022 and 2023 compared to previous years of referral activity
- 3.19 The increasing trajectory and trend of referrals to CAMHS since June 2022 has shown no sign of abating which also peaks over holiday periods. This can also be compounded by unprecedented number of DNA's (Did Not Attend) resulting in significant backlog in children and young people awaiting assessment. Between June and August 2022 there was a 20% DNA Rate in which one in every five assessments were not attended. South Ayrshire has the lowest DNAs of the three Ayrshire's.

An assertive recovery mitigation plan was developed by the service leadership and management team to respond to this increased demand and reduction in waiting time performance. The projected wait time in October for November/ December if remaining unaddressed, would have resulted in a potential reduction in performance to as low as 14% compliance equating to a wait of 91 weeks.

The recovery plan was implemented in early October 2022. The results reported in January 2023 for December's position is 96.5%, based on scheduled appointments January RTT% is projected at 99% with February at 100%. Appointments have not been allocated for March 2023 at the time of writing. The waiting list as of 31 December 2022 has only 2% breached and 98% waited less than 18 weeks.

3.20 The key area of challenge in the context of service reform remains the high demand and subsequent long waiting time for Neurodevelopmental (ND) diagnosis. CAMHS currently accepts referrals for young people requiring a ND assessment regardless of whether a mental health need is evident. This is currently practice which is not in alignment with other CAMHS services nationally and lacks alignment with the CAMHS National service specification.

Figure 1 below shows the trend in referral to CAMHS for ND difficulties and the increase over time. Figure 2 below shows the ND referrals compared to referrals for other reasons to CAMHS. Figure 3 below shows that 69% of young people referred to CAMHS with ND concerns did not have a co-existing or suspected mental health difficulty.



Figure 1: Referrals to CAMHS for ND difficulties from 2019 to 2022

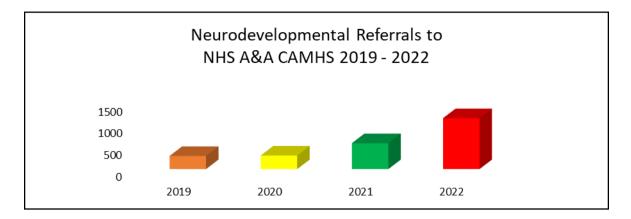


Figure 2: The increased demand for CAMHS services from 2019 to 2022 comparing referrals for ND difficulties to other referrals.

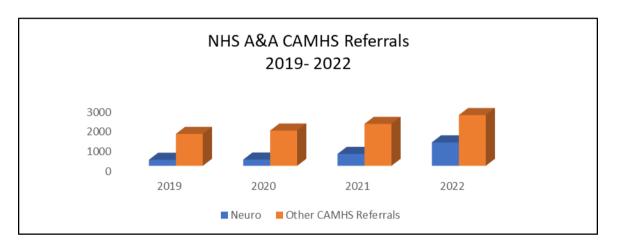
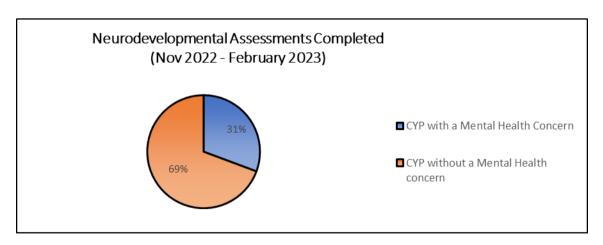


Figure 3 the proportion of referrals to CAMHS with ND difficulties with and without mental health difficulties.





3.21 A telephone contact service has also been established to provide information and assist children and their families who are currently waiting for a diagnostic assessment. The specialist N-CAMHS team have completed 75 assessments for ND difficulties from November 2022 to February 2023.

In January 2022 with Scottish Government recovery and renewal funding external provision was secured to assist with reducing the waiting time for a neurodevelopment diagnosis and CAMHS has subsequently commissioned two external providers: Purple House and Helios to manage the backlog of referrals. 180 young people were referred to Helios with 176 accepted in the year to February 2023. The contract with Purple House has been secured for review of 3 complex referrals per month. In the period January 2022 to end of February 2023, 44 young people were referred. The current waiting list holds non-Mental Health referrals of around 700 young people with a referral/waiting list management plan which will take 22 months to complete if the current use of external providers is maintained and the CAMHS specification is fully implemented immediately.

The longer CAMHS continues to accept these referrals the greater the length of time required to address the long waits.

3.22 To fully deliver CAMHS in alignment with the National service specification planning requires to taken forward at pace to facilitate the signposting of referrals to alternative pathways for those young people who do not meet the service specification access criteria. This is required to ensure safe service sustainability and to enable the critical CAMHS resources to be allocated to young people with mental health needs in alignment with the CAMHS pathways developed by the Extreme Team reform work.

The alternatives to this approach would compromise:

Core CAMHS Delivery:

- Young people with moderate to severe mental health disorder such as depression, Anorexia nervosa and psychosis may not receive treatment.
- Without responsive treatment young people's mental health may deteriorate, and long-term prognosis will be impacted in some disorders such as psychosis.
- Increased risk of young people requiring hospital admission or OOH support as they are not receiving regular and effective support.
- A larger burden will fall on other services such as OOH services, ED, Police and other services such as school counselling and voluntary sector organisations.
- The RRT will increase and NHS Ayrshire and Arran CAMHS will no longer reach 90% compliance



Unscheduled Care CAMHS

- Young people who have presented and been admitted to paediatrics or ED may not receive a mental health assessment from CAMHS.
- As young people have not received assessment including risk assessments there will be increased risk of a completed suicide or significant act of self-harm leading to life changing physical health difficulties such as liver transplant.
- A larger burden will fall on other services such as OOH services, ED, Police, and other services such as school counselling and voluntary sector organisations.

Comprising either of these core CAMHS pathways carries an unacceptable level of risk for young people in Ayrshire and Arran.

To fully operationalise the CAMHS specification ensuring appropriately deployed CAMHS resources and safe service delivery from the 1 August 2023 the CAMHS service will focus on delivering the CAMHS service specification as prescribed nationally. The CAMHS will continue to screen all referrals directed into the service to ensure that young people that are appropriate for CAMHS are accepted. CAMHS will continue to accept young people with a comorbid or existing mental health difficult along with their ND difficulties, supported by the N-CAMHS team.

4. REPORT

Neurodevelopmental Pathways

- 4.1 To fully operationalise the CAMHS specification ensuring appropriately deployed CAMHS resources and safe service delivery from the 1 August 2023 the CAMHS service will focus on delivering the CAMHS service specification as prescribed nationally and resourced locally. The CAMHS will continue to screen all referrals directed into the service to ensure that young people that are appropriate for CAMHS are accepted. CAMHS will continue to accept young people with a comorbid or existing mental health difficult along with their ND difficulties, supported by the N-CAMHS team.
- 4.2 Together with the three HSCPs in Ayrshire and Arran plans require to be developed at pace with partners to progress whole system plan(s) to meet the National Neurodevelopment Specification.

Specific outputs include:

- Communication plan to be developed to inform stakeholders about the change in provision and new service models
- Whole system development of alternative service or community wellbeing solutions for young people building on the good practice already being commissioned by Education and Children's services across the whole system.



- Continue to deliver NEST as a universal life course service offer with whole system with whole system partner consideration to be given to build on this key service development and early intervention solution.
- Whole system consideration of the outcomes and recommendations of the Ayrshire Neurodevelopment Glasgow University event held early in 2023 to build on local good practice and a partnership approach to develop a comprehensive range of alternative provision

Neurodevelopmental Empowerment and Strategy Team (NEST)

NEST is a new and first in Scotland service jointly funded by East, South and North HSCP's in Ayrshire and Arran. This newly launched service provides coordination and development of pathways of empowerment for the large number of children and adults directly and indirectly affected by neurodevelopmental diversity across the three Ayrshire partnership areas which will deliver on three critical outcomes. Whilst not directly managed or within the CAMHS service provision, NEST complements the service redesign and aspirations that are outlined for CAMHS Neurodevelopmental services and there will be a natural synergy between the core service and this new emerging model, the core outcomes and benefits of which are noted below:

<u>Information access</u> – Up to date, relevant and accessible information will be freely available for the neurodivergent community and professionals across Ayrshire. Individuals and families will have a good understanding of what a diagnosis means for them and will be able to make informed decisions.

<u>Empowerment Programme</u> – Individuals and families/carers will have a better understanding of their neurodivergent differences and through the opportunity to learn, develop strategies and networks will be empowered to live as full a life as possible. The NSET team, in partnership with individuals, families and neurodevelopmental professionals will design and deliver a systematic pan Ayrshire, needs based empowerment programme. Existing communities and groups will be supported to increase their scope and reach across their area.

<u>Community/Services</u> - Communities across Ayrshire will be more tolerant and understanding of the needs of neurodivergent individuals. This tolerance and understanding will provide a marked improvement in access and opportunity for neurodivergent individuals and families. Local services will be aware of the needs of our neurodivergent community and will systematically incorporate solutions to these needs into their service delivery.

These core critical outcomes are being delivered through collaborative working with neurodivergent individuals, their families, clinicians, third sector and services across Ayrshire.

This is a unique life span population wide universal service and an example across the rest of Scotland in building a cohesive lifespan pathway of supports to people with neurodivergent needs. The NEST service provides the building blocks and foundation in Ayrshire and Arran to taking forward the full implementation of the Neurological Specification.



5. STRATEGIC CONTEXT

5.1 None

6. <u>IMPLICATIONS</u>

6.1 IJB are asked to:

- Note the successful implementation in Ayrshire and Arran to meet the National CAMHS Specification, noting the ongoing demands and risks placed on the service of accepting referrals for young people that do not meet the national criteria and specification.
- Through the 3 HSCPs in Ayrshire and Arran take forward work at pace with partners to progress whole system plan(s) to meet the National Neurodevelopment Specification, noting approval that referrals not meeting the CAMHS specification will cease to be accepted by CAMHS from 1 August 2023.
- 6.2 IJB has assurance that risks are identified and managed appropriately to ensure the safe and sustainable delivery of the National CAMHS Specification. Ayrshire and Arran will have a sustainable and world class CAMHS service that meets the needs of young people that require support under the national CAMHS service specification.
- 6.3 Full alignment and compliance with the national CAMHS service specification with improved Children and Young People's Mental health and wellbeing outcomes, timely access to services and support to Children, young people, and their families at a locality level in alignment with the CAMHS extreme team reform question.
- 6.4 The positive delivery of a whole system Neuro-developmental Service in Ayrshire and Arran. CAMHS will be able to progress through the current Neurodevelopmental list more timeously and be able to offer more therapeutic interventions. Young people coming through N-CAMHS will be seen by the right person, in the right place at the right time.
- 6.5 Opportunity for whole system partnership approach to developing alternative service or community wellbeing solutions for young people that do not need a CAMHS referral and building on the good practice already being commissioned by Education and Children's services across the whole system.
- 6.6 CAMHS can monitor the number of referrals that come to the N-CAMHS service and the referrals that are meaningfully redirected to more appropriate Partner Services. Benson Wintere has been commissioned since 2020 and is able to produce locality and school level information on referral activity, work force modelling, capacity, and demand with live dashboards to reflect service activity. This information is utilised to continue to inform service planning and workforce development. An engagement officer has been recruited by the



service to facilitate young people in service design and inform service improvements. KIDSCREEN has been implemented with a digital approach to capturing quality of life and experience information.

A follow up report will be presented to the IJB with progress and details of plans from a whole systems perspective across Ayrshire and Arran and also locally in our own HSCP/Local Authority area.

7. Financial Implications

Creating a Neuro-developmental Service for Children and Young People who do not meet the CAMHS Specification will require financial investment from system partners, as the model and pathways are designed and developed the financial implications will be quantified.

8. Human Resource Implications

None

9. Legal Implications

None

10. Equalities implications

None

11. Sustainability implications

None

12. Clinical/professional assessment

None

13. CONSULTATION AND PARTNERSHIP WORKING

13.1 The work developed by the CAMHS Extreme Team and more latterly the CAMHS implementation group has been fully consulted as part of the programme of Whole systems Reform. There has been an event for all stakeholders on 16th February with Glasgow University and world experts to try and understand the alternatives for young people who would fall under the ND service specification. The proposals as outlined are supported by the three HSCPs and will be presented to all three IJBs.

14. RISK ASSESSMENT

14.1 Reputational and operational risk of CAMHS being able to safely meet demand if the Specification is not implemented. Risk implications of other functions that CAMHS would be unable to sustain are detailed in the report. There is a significant risk to the North Ayrshire CAMHS service of continuing to accept referrals until August, it is likely that national performance targets for CAMHS waiting times will be breached as the service continue to accept referrals over the period required for the Neuro specification to be implemented.



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BACKGROUND PAPERS

None