

Report to: Leeds City Council Scrutiny Board

Date of meeting: 15th March 2016

Report title: Child and Adolescent Mental Health Services – Briefing Paper

1 EXECUTIVE SUMMARY

Leeds Community Healthcare NHS Trust (LCH) is the provider of tier-3 Child and Adolescent Mental Health Services (CAMHS) in Leeds.

In early 2015 the CAMHS service faced a number of pressures which included a rise in demand for services, a national requirement to make efficiencies and a shortage of specialist staff. As a result, waiting times for non-urgent elements of our service increased.

The service has worked hard to ensure that children and young people have access to routine first appointment/assessment within 12 weeks of referral, and vigorous recruitment is beginning to pay off, bringing in the needed specialist staff.

We are now tackling the waits that occur following first assessment, and expect that the average wait time for autism assessment will be 12 weeks by the end of December 2016.

This paper describes the current access position for autism assessments and recovery plan to achieve the 12 week standard by December 2016.

2 INTRODUCTION

2.1 A detailed description of the Child and Adolescent Mental Health Services (CAMHS) was provided to the Board in January 2016.

2.2 The specialist mental health element of the service has an annual budget of £5.4m and a staffing complement of 101.25 WTE. The workforce is multi-professional and includes clinical psychologists, nurses, psychiatrists, creative therapists, psychotherapists, family therapists, mental health practitioners (from a range of professional backgrounds including occupational therapy, social work), administration and clerical staff, team and service managers

3 Access to CAMHS

3.1 CAMHS responds reliably to the children and young people who present with the highest risk and most urgent need. All emergency and urgent referrals are prioritised by clinicians and seen rapidly (e.g. within 4 hours for self-harm presentations in A&E, and between 1-5 days for urgent referrals).

3.2 In 2015-16, CAMHS has systematically reduced the waiting time for non-urgent cases, and can now assess within 12 weeks of referral. To reach this position, the teams have diverted capacity to this assessment work, and now that we are at this 12 week standard (and have calculated the resource needed to maintain it) some capacity is

available to improve access elsewhere. We will be using this time to increase autism assessments.

4 Current position for autism

4.1 An autism assessment is undertaken by a specialist multi-disciplinary team including Child Psychiatrist / Paediatrician, Speech and Language Therapist, a CAMHS practitioner and Clinical Psychologist. The assessment includes a detailed parental interview, assessment of the child or young person, a school observation followed by a further assessment by the team in a clinic setting. A plan is formulated and discussed with the family, the school and with colleagues from the Educational Psychology Team.

- There are **155** children currently waiting for their assessment (at 9th March 2016).
- **103** children have waited more than 12 weeks
- All the children waiting over 52 weeks (**10 in total**) have an appointment scheduled to occur before the end of April 2016.
- New referrals for autism assessment are received at a rate of 2.4 per week

5. Recovery Plan

As outlined in 3.2, specialist clinicians in CAMHS will have time (freed up from other assessment work) from April 2016 onwards, and this will be put towards autism assessment. In addition to this, we have recruited to specialist positions and expect further recruitment to follow as a result of a much more vigorous and lively recruitment campaign. We have carefully and realistically calculated the resource needed to work through the backlog of children and young people waiting, and we know exactly how many appointments are needed to reach and maintain a more satisfactory position. It will not be necessary to purchase assessments outside Leeds in 2016-17 because of the recruitment and released clinical time.

- From April until December 2016, additional appointments will be provided each week by the CAMHS teams in Leeds to keep pace with new referrals and reduce the backlog of children waiting.
- Children and young people who have waited the longest will be offered appointments as soon as possible.
- Referrals that are judged to contain significant elements of clinical risk will be prioritised.
- Week-by-week monitoring will assess progress against target and allow adjustments in capacity to be made.
- By the end of December 2016, the backlog will be cleared and a 12 week wait for assessment will apply from then onwards.

6.0 Conclusions

6.1 Work is ongoing to improve all waiting times in the CAMHS service.

- 6.2 The Trust routinely meets the four-hour target to see children and young people who self-harm.
- 6.3 The Trust also sees all children and young people referred with urgent need within 1-5 days.
- 6.4 We have seen significant improvement in access to first routine appointments and a child referred today will be seen within 12 weeks of the referral.
- 6.5 The internal wait for autism assessment is not acceptable and a realistic plan is in place to clear the backlog of children waiting by the end of 2016, and then to maintain a 12 week wait for assessment for new referrals.

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