

Waiting times for Children's Mental Health Services in Norfolk

Suggested approach from Maureen Orr, Democratic Support and Scrutiny Team Manager

A report on the standards set for referral to treatment at each level of children's mental health services and on current actual waiting times.

1. Background

- 1.1 NHOSC has received reports from Child and Adolescent Mental Health Services (CAMHS) commissioners on three occasions regarding the progress of the Norfolk and Waveney Local Transformation Plan for CAMHS:-

3 December 2015
8 September 2016
6 April 2017.

- 1.2 At the meeting on 6 April 2017 there was discussion about referral to treatment standards and waiting times, in terms of the adequacy of national and local waiting time standards, the situation regarding referrals that did not meet the criteria to access the first level of services (Point 1) and the fact that the funding provided to Clinical Commissioning Groups for the Local Transformation Plan (LTP) is not ring-fenced and not all of this year's uplift to Norfolk and Waveney LTP funding is guaranteed to reach local services.

- 1.3 NHOSC noted that the Norfolk waiting time standard of 8 weeks (for at least 80% of patients) for routine referrals to NSFT's services for moderate to severe mental health needs was far more ambitious than the standard in many areas of England. The national standard was 18 weeks and the mean average waiting time for England as a whole was 17 weeks.

Since NHOSC last discussed the subject, there has been a change to the local waiting time standard for routine referrals to NSFT from 8 weeks (for at least 80% of patients) to 12 weeks (for at least 90% of patients).

- 1.4 To enable it to reach a better understanding of the situation, NHOSC asked for the joint CAMHS commissioners to return with further detail in relation to the standards set for referral to treatment at each level of children's mental health services and on current actual waiting times.

2.0 Purpose of today's meeting

2.1 The commissioners have been asked to provide the following information:-

- description of what the service offers at each level (i.e. at each of the different levels of severity of mental health problems, including the in-patient resources commissioned by NHS England Midlands and East (East) Specialised Commissioning)
- the standards set for referral to assessment and assessment to treatment times, and current performance across the service
- geographical variations in waiting times within Norfolk localities
- why has the referral to treatment standard for routine referrals to NSFT's services changed from 8 weeks (for at least 80% of patients) to 12 weeks (for at least 90% of patients)?
- what would enable services to improve waiting times?
- what is done for children who are exhibiting mental distress but not considered severe enough for referral to the first level of the mental health services?

The information is included at **Appendix A**.

2.2 The local CAMHS commissioners have been invited to present the information and to answer Members' questions. Representatives from the provider organisations have also been invited to answer questions that may arise about operation matters.

2.3 On 6 April 2017, NHOSC noted that this subject is of interest to both Children's Services Committee and health scrutiny. The Chairman of Children's Services Committee (CSC) was unfortunately unable to attend today's meeting, but several members of NHOSC are also members of CSC and Children's Services department is represented by Jonathan Stanley, the CAMHS Strategic Manager.

3.0 Suggested approach

3.1 After the commissioners have presented the information requested, Members may wish to address the following areas:-

- (a) NHOSC members have previously expressed concern about the situation for children for whom referral to the targeted mental health services is not considered necessary but who are nevertheless in need of help. Appendix A, section 7, refers to 5 new Link Workers who will deliver a rolling programme of support, advice and training to staff in education and primary care settings. When will these new staff start work and how broad is their reach expected to be across Norfolk's GP practices and schools?
- (b) The current performance (i.e. April 2017) for meeting the waiting time standard urgent referrals to NSFT's services is far below target in all of Norfolk except for the Great Yarmouth and Waveney area, and the waiting time standard has been reduced from 72 hours to 120 for all except the Great Yarmouth and Waveney area, where the

CCG did not wish to reduce the standard. Appendix A, paragraph 2.4, refers to an intention to review the clinical appropriateness of the target. What is the rationale for this review and are the CCGs in agreement on how to take it forward?

- (c) Appendix A, paragraph 2.5, refers to a senior nurse taking the role of NSFT Waiting List Co-ordinator from July 2017, to help make decisions about which young people will start treatment next. Is there assurance that individuals whose waiting time has already breached the standard and those who are still within the standard will be treated equally in this process?
- (d) On 6 April NHOSC heard that NHS England had announced an uplift to funding for Local Transformation Plans (LTP) for children's mental health in 2017/18, which would increase the budget available to the CCGs up to £3.1m. The uplift to the CCGs was not ring-fenced and had to be considered against all other service cost pressures. The Norfolk CCGs had committed to maintaining the 2015-16 level of increased investment (£1.9m extra per year), but not the potential additional uplift. The report at Appendix A mentions some additional on-off investments (e.g. to Point 1 to reduce waiting time backlogs). What is the current situation in terms of additional investment by the CCGs from LTP uplift monies or other sources?

4.0 Action

- 4.1 In view of the fact that NHOSC has previously endorsed a recommendation of the Children's Services Committee Task & Finish Group on Children's Emotional Wellbeing and Mental Health:-

'That the Local Transformation Plan be scrutinised on a regular basis **by Children's Services Committee** in order to ensure it is delivering for the children and young people of Norfolk'

NHOSC may wish to consider whether:-

- (a) The Committee's examination of this subject is complete.
- (b) There are any comments or recommendations that the committee wishes to make as a result of today's discussions.



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