

## Health and Wellbeing Board

April Month 2022

### Walsall Child and Adolescent Mental Health Service BCHCFT

#### 1. Purpose

This brief report is presented to the Walsall Health and Wellbeing Board to provide an update and information around the transformation of Walsall Child and Adolescent Mental Health Services (CAMHS) BCHCFT.

#### 2. Recommendations

- 2.1 The Walsall Health and Wellbeing Board receive the information within the report which supports their identification of the wider teams who have an impact on community wellbeing and mental health. That the Board supports the transformation work of Walsall CAMHS
- 2.2. That Board members have a greater understanding of CAMHS transformation and improves their understanding of how Walsall CAMHS contributes and puts measures in place that will promote the wellbeing and mental health of children and young people within Walsall and ensuring that children and young people are part of our planning process. That the Board notes the progress of the transformation of Walsall CAMHS.

#### 3. Report detail

- 3.1 **Context:** The current transformation programme works to government policies and guidelines and commenced in 2015 with the *Future in Mind* (March, 2015).

In 2015 to 2017 Government announced new funding for mental health, including specific investment for eating disorders services for teenagers and *The Five Year Forward View for Mental Health Services* (Feb, 2016) included specific objectives to improve treatment for children and young people by 2020/21. The Policing and Crime Act 2017 included provisions to end the practice of children and young people being kept in police cells as a “place of safety” whilst awaiting mental health assessment or treatment.

In Dec 2017 the Green Paper on *Children and Young People’s Mental Health* set the direction for more early intervention emotional wellbeing and mental health provisions particularly through schools and colleges.

The *NHS Long Term Plan* (Jan, 2019) restated the Government’s commitment to deliver the recommendations in the *Five Year Forward View for Mental*

*Health* and set out further measures to improve the provision of mental health services for children and young people. This policy particularly focused on improving access by 35% and building crisis and dedicated eating disorder provisions for children and young people.

### 3.2 **This requires us to: Build better mental health services** aligned and integrated with the 'whole system' of support.

In April 2020 Dudley and Walsall Mental Health Trust and Black Country Partnership NHS Trust merged to create Black Country Healthcare NHS Foundation Trust and as the Black Country Integrated Care System develops from a CAMHS perspective these changes have resulted in all Child and Adolescent Mental Health services within the Black Country being delivered by the one provider – BCHCFT with one Black Country commissioner commissioning these services. As we align and integrate our CAMHS for Walsall financial investment has focussed on:

- Increasing the capacity of the CAMHS core multi-disciplinary team to ensure they offer provisions up to the age of 18 years of age in line with national recommendations and other BC CAMHS provisions.
- Along with young people from across the Black Country Walsall young people aged 18 to 25yrs having contributed to the development of a dedicated 18yrs to 25yrs mental health provision that will see young people already engaged in mental health services having a care navigators to support them with the transition to adult mental health services and for those not yet engaged with services a community hub provision that works with other agencies to offer a community based emotional wellbeing/mental health service.
- People of Walsall being able to access a new all aged eating disorder provision which plans to have both community outpatient and outreach provisions.
- Increasing capacity in the CAMHS crisis provision to ensure 24/7 access to mental health crisis support for children and young people and to strengthen the model to provide increased home treatment, timely admission and discharge in CAMHS and acute inpatient when clinical risk indicates this and out of hours rota to ensure appropriate place of safety and mental health act assessment for children and young people placed on section 136 MHA.
- Children and young people with learning disabilities/and or autism will have access to a dedicated Black Country children and young people's intensive support team to offer community interventions for those presenting in crisis.
- BCHCFT has worked with agencies across the Black Country to develop an advocacy provision for young people up to the age of 25 years who have learning disabilities/and or autism to ensure the voice of these children, young people and their families/carers is heard and valued.

### 3.2 **Improve the outcomes and experience** of children and young people and their families/carers;

- As with all of all CAMHS within the Black Country Walsall CAMHS has a participation group. This group is made up of children and young people from Walsall who have either an interest in wellbeing or have accessed services. The Walsall participation group have contributed to all of the transformation developments within Walsall. This includes adopting the 5 principals of C&YP IAPT within our clinical delivery model; accessibility, awareness, evidence based practice, participation and accountability.
- Walsall CAMHS currently reports nationally into the Mental Health Minimum Data Set on all of our outcomes and these are nationally mandated and

licenced outcome measures. Further work is required to ensure that our new workforce are trained in capturing these.

### 3.3 **Increase access** to effective evidence-based treatment when required, including minimising inappropriate inpatient or secure care.

- Walsall CAMHS have been achieving the increase in access by 35% from the setting of this standard in 2019. Walsall CAMHS continue to increase access to emotional wellbeing/mental health provisions via the Mental Health in Schools project known in Walsall as Reflections. (Name chosen by our participation group) Teams of dedicated CAMHS and educational psychology workforce working in educational establishments across Walsall were introduced in wave 2 2019 and wave 6 2021 and further applications have been made for wave 8 and 10. These teams offer individual appointments for lower level mental health issues and work with educational establishments to adopt a whole school approach to emotional wellbeing and mental health.
- As previously stated increasing capacity in the crisis/home treatment element of the CAMHS crisis team supports inappropriate use of CAMHS and acute hospital inpatients. Increasing capacity will allow increased access to this provision with a clinical model that addresses; supporting acute hospitals and undertaking mental health assessments, gatekeeping for tier 4 inpatient admissions and ensuring timely discharge from tier 4 and acute hospitals, home treatment as an alternative to inpatient care, management of the 136 suite at Penn Hospital for C&YP placed on a section 136 MHA and offering 24/7 access to the CAMHS crisis team via the 24/7 mental health crisis line.
- The development of the two dedicated provisions for children and young people with learning disabilities and or autism increases access to mental health provisions
- Implementation of the iThrive model of delivering emotional wellbeing and mental health for C&YP in Walsall and as part of this will be reviewing the provision for getting help in Walsall with a view to assessing if the early intervention/prevention offer is adequate post the pandemic
- Changes to increasing capacity within specialist CAMHS consequently will increase access to services.
- All service provisions deliver evidence base practice.

### 3.4 **Reduce health inequalities** ensuring access for groups and individuals who have historically found it hard to find support

Walsall CAMHS are keen to develop a shared understanding of “what good looks like” for people from marginalised communities, and how best to ensure a culture of equity is built into services, supported by diverse leadership and engagement with communities. Below are some of the areas the service is working on to reduce health inequalities:

- There are numerous routes into CYP MH services and a wide array of services to choose from – this can be confusing for all attempting to use these services. Those able to persist in their attempts to access relevant services are likely to be more successful in accessing the support they need. To ensure that all have equal access to Walsall CAMHS part of the transformation of CAMHS is to work with partners to create a single point of entry for all emotional wellbeing and mental health referrals for all children and young people within Walsall. Once this is established parents and carers, as well as CYP themselves, can refer into their service.

- Kooth - a digital offer for all children and young people of Walsall is commissioned across Walsall and promoted by specialist CAMHS. This offer provides an online platform where CYP can access mental health support and resources anonymously. This includes information, messaging services, online forums, activity centres and live counselling. CYP do not have to be referred to Kooth and can access its services themselves 24/7. It is reported to be more accessible to ethnic minority children and young people and particularly those identified as Black.
- The BCWB ICS is a member of the Midlands Decision Support Unit network supported by the Decision Support Centre (organised by the Strategy Unit). One of our 2021/22 priorities was 'inequalities in access to mental health services for children and young people'. Walsall CAMHS along with the other CAMHS across the Black Country are working on the recommendations of this report which included:
  - Improving access by developing a single point of access
  - Exploring supply and demand and unmet need; BCHCFT is engaged with Grant Thornton to undertake work on demand and capacity across all services.
  - Improve the completion and quality of data recorded in mandatory data collections – Walsall CAMHS has migrated to an electronic healthcare record that has improved the recording of all appointments and follow ups. This information is sent regularly to MHSDS a national data base.
  - Utilising quantitative feedback to improve services; Walsall CAMHS collate feedback forms.

CAMHS Walsall are clear that the wider determinants of health play a critical role in creating avoidable and unfair differences in people's health and life expectancy – from the housing people live in, to the green spaces and physical activity they have access to, and the impact of educational and employment opportunities on their financial wellbeing. Further work in place-based partnerships needs to generate a greater understanding on the link between socio-economic inequality and population health of the Walsall community.

### **3.5 Support prevention, early intervention and the reduction of stigma**

It is estimated that 10% of children and young people have mental health problems so significant that they impact not only on their day-to-day life but, if left untreated, they will continue into adulthood. Walsall CAMHS offers provisions for those with identified severe mental health issues that requires intervention but they are also engaging in developing provisions that support earlier intervention and reduces the stigma around accessing mental health services. These provisions include:

- Positive Steps – this provision offers early intervention psychological therapies for mild to moderate psychological difficulties, they also offer information, advice and psychoeducation to help prevent escalation of presentations.
- Mental Health Support Teams in Schools (MHST) this provision is available in some of the school and education establishments across Walsall from wave 2 investment and they are currently recruiting for wave 6. This service as set out in the government Green Paper on CYP MH, are teams who are

linked to groups of primary/secondary schools and to colleges. Locally the service is named by young people as Reflections and the teams comprise of both CAMHS and Educational Psychology workforce. The service provides interventions to support those with mild to moderate needs and support the promotion of good mental health and wellbeing through a whole school approach.

### 3.6 Invest in the **competence and capacity of the workforce**

The Black Country are now working as an Integrated Care System (ICS), as a result want to take a more systematic approach to workforce planning with system partners working together to make best use of resource to meet patient needs. The development of dedicated workforce department within the Trust supports Walsall CAMHS and other services to ensure that we continue to find new ways of working, utilise both local and national workforce initiatives and work with system partners to share training and development and the recruitment of new workforce. So far Walsall CAMHS has:

- Worked with partners in both the acute hospital and local authority to recruit a workforce to support young people when they are admitted to paediatric wards either due to mental health issue or social care issues. The additional workforce will work with the CAMHS Crisis team and be a conduit through to social care and offer individual support to C&YP when on paediatric wards.
- As previously discussed the workforce within Walsall CAMHS is increasing in both core specialist CAMHS, CAMHS Crisis team and the development of the all aged eating disorder provisions.
- Walsall CAMHS workforce are accessing training to ensure that all reasonable adjustments to psychological interventions can be made for patients with ASD and or Learning Disability.
- Within CAMHS the national kick start initiative is being utilised to support younger Walsall community workforce applicants to gain access to employment within the NHS. These roles commence as administrative positions but can progress to be more directly involved with patient care. New workforce members are supported via a mentoring scheme whilst with CAMHS.
- CAMHS Walsall continues to take on trainees and students as part of the NHS training schemes or other specific professional bodies. These schemes support both training requirements and future recruitment into services.

3.7 **Strategic Partnerships:** Walsall CAMHS continues to work across the locality with both strategic and operational partners building working relationships to support the delivery of mental health and wellbeing across Walsall. These include; SEND Board, Walsall Health SEND Steering Group, A&E Delivery Board, Walsall Improvement Meetings, Walsall C&YP Emotional Wellbeing Mental Health Board and submission to Social Care and Health Scrutiny Committee. The aim is to work with partners giving regular feedback on CAMHS Walsall and support mental health and emotional wellbeing initiatives giving expert advice and support.

## 4. **Implications for Joint Working arrangements:**

Walsall CAMHS as part of the Black Country CAMHS provisions has worked with Walsall/Black Country Healthwatch on hearing the views of young adults

accessing mental health services. Representatives from each Black Country locality met with Healthwatch who are undertaking a similar project to ensure efficient use of resources and no duplication for young adults. The Black Country Healthcare 18 to 25 years project has utilised Walsall young adults to shape the model of care for this new service provision. Peer support workers who have either experienced utilisation of mental health services or have an interest in mental health service development are being employed within this project alongside clinical workforce. Our findings from our surveys and meetings with young adults and the model of delivering they have developed is currently being shared across all partner organisations.

## **5. Health and Wellbeing Priorities:**

- 5.1 Updating the Health and Wellbeing Board on the transformation of Walsall CAMHS supports the understanding of how Walsall CAMHS is addressing the Boards priorities and those set out in the Walsall JSNA and Health strategies. The transformation of Walsall CAMHS supports the development of improved mental health provisions for children and young people within Walsall. It creates a place where people want to work providing the highest quality of healthcare where patients are at the centre of both the development and delivery of their care. The transformation is improving access to mental health provisions and supporting prevention and earlier intervention ensuring C&YP are seen in the right place, by the right person at the right time. Utilising other venues and service user participation in all of the developments supports the DE stigmatisation of mental health services. Services are working together, developing positive relationships through sharing resources, training and looking to share venues. Increasing the capacity of workforce within the services and working across agencies ensures that patients with mental health or learning disability needs are being cared for in the Walsall community; reducing the number of C&YP with mental health needs receiving unnecessary inpatient care. Changing our 'front door' into services and working with Walsall community via the community inclusion workforce health inequalities is starting to be addressed and continued partnership working will support further development of Marmot objectives and open the honest debates about the impact of these wider pressures, and cross-government action on the link between socio-economic inequalities and population health for Walsall is vital.

## **Background papers**

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