

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

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Project Key and name:	The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan		
Project Description:	<ul style="list-style-type: none">• The purpose of this Action Plan is to deliver the key requirements of the Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016)• The Action Plan will deliver the micro and macro commissioning and procurement changes that are required to achieve delivery of the Strategy within budget.• The Action Plan will support the delivery of improved care pathways and service and carer user experience.• The Action Plan will support the delivery of commissioning intentions and key strategic priorities.		
Action Plan Members:	Mai Gibbons - Joint Commissioning CAMHS, Sarah Fellows – Joint Commissioning Mental Health; CCG /LA – Procurement and Contracting; CCG /LA Finance, CCG /LA Quality and Risk, LA- Provider Lead, Qadar Zada, BCPFT.		

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

Milestones	Project Milestones	Timescale/s	RAG Rating
	<p>1. CARE PATHWAYS</p> <p>The Provider has developed 23 Care Pathways. A management of change / service transformation process is on-going. The joint BCP / CCG Strategy Group will agree the funding profile of the revised service model. A Single Point of Access will be delivered and will commence as a pilot in October 2014. The Provider will align the care pathways with the service specification developed by the commissioner to ensure compatibility with proposed service model.</p> <p>Action – Provider to align the care pathways with the service specification. Provider and Commissioner to agree implementation timescales and revised funding profile of revised service as above and develop implementation plan accordingly. SPA Pilot to commence in October 2014.</p>	End January 2015	A
	<p>2. COMMISSIONING INTENTIONS</p> <p>These have been developed and will be forwarded to the Trust as per the standard contractual process.</p> <p>Action – as above.</p>	On-going	G

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>3. LOCAL AUTHORITY FUNDED ELEMENTS (Key Team) (Impacts on Crisis Resolution and Home Treatment).</p> <p>Detail provided in response to the commissioner information request to the provider regarding the Local Authority funded elements of the service has been received. The information provided is being considered.</p> <p>The commissioning intention to re-profile the funding and service model for the Key Team working with BCPFT.</p> <p>The revised enhanced crisis / home treatment model and succinct Key Team Model can then be finalised.</p> <p>Non –recurrent funds can be utilised in the interim to pump prime increased capacity in CR / HT. Future CRHT model could be collaboratively commissioned with SWB CCG.</p> <p>Action – Commissioner and Provider and Local Authority to agree revised service model/s as soon as outcome of LA review agreed and agree time line for implementation.</p>	End January 2015	A
	<p>4. LOCAL AUTHORITY FUNDED ELEMENTS – Social Workers.</p> <p>Clarification is required regarding the review of the local authority funded social work staff within CAMHS who are seconded into the service, in terms of future location i.e. embedded within CAMHS or based in the Local Authority. .</p> <p>Action – The Local Authority and Commissioner will confirm as required above with the Provider.</p>	End December 2014	A

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>5. PRIMARY CARE PATHWAYS</p> <p>A Single Point of Access is under development. This model will be shared with GP sector leads, RWT and the Local Authority and then next steps for implementation agreed.</p> <p>(Clarity is essential in terms of the criteria to the existing CAMHS /AMHS teams for those children and young people aged 0 – 25 years. A “hot line” will offer advice to those primary care G.P’s/Teams who are unsure if their referral is eligible for CAMHS/AMHS criteria. It is imperative that the Single Point of Access agreed interfaces with the New Operating Model across Social Care and Social Inclusion to avoid children/young people falling through the net.).</p> <p>Action – Provider to share with Sector GP leads, RWT and LA. Commissioner to share Social Care Operating Model. Implementation time scales to be agreed and planned accordingly. Pilot to commence in October. The Provider will align all draft care pathways with the service specification developed by the commissioner to ensure compatibility with proposed service model.</p>	End January 2015	A
	<p>6. Tier 2</p> <p>Service model for Tier 2 needs to be agreed and commissioning intentions developed accordingly.</p> <p>Action – as above.</p>	End January 2015	A

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>7. NEUROLOGICAL CONDITIONS</p> <p>Care Pathways for Adult Autism and Attention Deficit Disorder need to be agreed as part of the Adult Service re-design and an implementation plan agreed accordingly. An all age care pathway should be considered and interim arrangements agreed.</p> <p>Action – as above.</p>	<p>End October 2014 (interim arrangements)</p> <p>End March 2015 (all age draft care pathway)</p>	<p>A</p>
	<p>8. EATING DISORDERS</p> <p>A draft service specification for an all age service collaboratively commissioned with SWB CCG has been shared with the Trust, as has a draft business case for a nurse consultant funded from non-recurrent funds to initiate the service re-design process and provide dedicated clinical expertise and training across primary and secondary care services.</p> <p>Action – The provider will provide feedback regarding the service specification and the commissioner will sign off the business case so that the Nurse Consultant/s can be appointed to.</p>	<p>End December 2014</p>	<p>A</p>
	<p>9. DASHBOARD</p> <p>National guidance will be used to develop a revised dashboard for CYPs. This will include reference to national bench marking standards and will be taken forward by the Trust / CCG joint finance and performance group.</p> <p>Action – as above.</p>	<p>End February 2015</p>	<p>A</p>

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>10. Better Care Fund</p> <p>Discussion with provider and commissioner should include options regarding aligning service re-design and transformation with the Better Care Fund in 16/17.</p> <p>Action – Director level meeting to be arranged to take forward discussion / next steps etc.</p>	End October 2014	A
	<p>11. TIER 3 + and Tier 4 (See LOCAL AUTHORITY FUNDED ELEMENTS (Key Team) action point 3 and Better Care Fund action point 9).</p> <p>Discussions regarding potential plans to collaboratively commission Crisis / Home Treatment with SWB CCG and a bespoke revised TIER 3 + and Tier 4 model across the Black Country remain on-going. Both would include plans for CYP provision of Section 136 MHA. This can be aligned with Better Care plans for 16/17. An interim model could be developed for CRHT using Targeted Resilience funds from the Area Team for both SWB CCG and W CCG.</p> <p>Action – Provider and commissioners to meet and agree next steps in terms of interim and longer term plans.</p>	End November 2014	A

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>11. INSPIRE TEAM</p> <p>A review of the Inspire Team will take place as part of the care pathways development work. This will include provision of services and interventions</p> <p>(The remit of the existing team is to be revisited to align its work with the revised proposed care pathways which will form the basis of the Young Adults Service 0- 25 years. A Multi Agency workshop has been organised on 24 October 2014 to clarify the All Age Autism Diagnostic Pathway. This work has been included in the draft Young Adults Service Specification submitted to the provider (BCPFT). The outcome of the above workshop may influence the remit of Inspire going forward.)</p> <p>Action - Commissioner and provider to agree review timescales and agree next steps accordingly.</p>	<p>Review to commence December 2014</p>	<p>A</p>
	<p>12. SEXUALLY HARMFUL BEHAVIOUR</p> <p>A review of the services and interventions for Children and Young People who display sexually harmful behaviour will be undertaken across health, education and social care.</p> <p>Action - Commissioner and providers to establish task and finish group and identify programme of work. Training provision to be scoped across providers.</p>	<p>Review to commence January 2015</p>	<p>A</p>

The Emotional and Psychological Health and Well-Being Strategy for Children and Young Peoples (2013-2016) Action Plan

	<p>13. INEQUALITIES SCOPING ACROSS SPECIALIST CAMHS</p> <p>An analysis of the data regarding the ethnicity of referrals and case load size in specialist CAMHS will be undertaken.</p> <p>An analysis of the concerns regarding care pathways for young people who are LGBTQ to be undertaken by the CDWs working with our local equalities and LGBT Group.</p> <p>Action - Service to conduct a 2 year retrospective ethnicity audit across CAMHS including patterns of referrals (to include referrals into Tier 4 and admissions to paediatric wards and referrals of all ages into EIS). CAMHS and CCG to jointly review / analyse data - this to be cross referenced with demographic data to identify areas of under referral.</p> <p>CDWs to meet with CAMHS and agree pattern of engagement and support – including key targeted groups. CDWs to provide dedicated support with clear plan jointly agreed with CAMHS. Referral data to include root of access e.g. school / GP - again this to be cross referenced with demographic data to identify areas of under referral. TIER 2 development plans to include targeted interventions based on needs / prevalence.</p> <p>CDWs to meet with specialist CAMHS and LGBT to scope care pathways and potential concerns.</p>	<p>Review to commence January 2015</p>	<p>A</p>
<p>Reporting Process:</p>	<p>Reporting Process:</p>	<p>Frequency</p>	

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Review Dates of this plan	Review Date / Reviewer/s	Comments
	October 2014 – reviewed by Sarah Fellows.	Timescales and actions reviewed to reflect recent progress /activity.