

Child and Adolescent Mental Health Services Presentation

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Inpatient Care

Workforce challenges

COVID

Outpatient and Specialist Teams

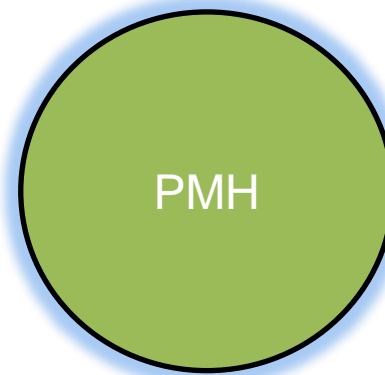
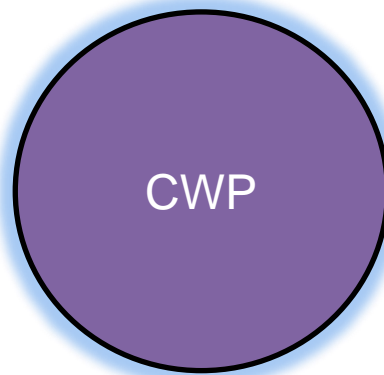
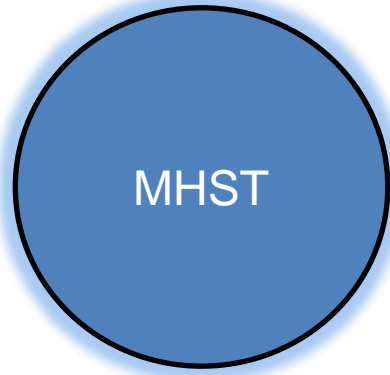
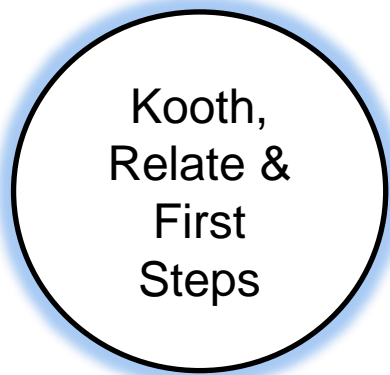
Crisis and Paediatric acute liaison, Urgent Care Hub, Home Intervention Team, Intensive Community Support

Increased investment

Early Intervention – Children’s Wellbeing Practitioners, Mental Health Support Teams, Primary MH

Increasing numbers of complex referrals

Early Intervention



Improving access to early intervention and support

Improving access for CYP in Leicester City in line with the Future in Mind strategy

Strengthening the emotional and mental health offer at neighbourhood level; aligning with the Step up to Great Mental Health transformation

Co-production is at the centre of reducing inequality and improving access

CAMHS Outpatients

Nationally a record high for referrals to child and adolescent mental health services in March 2021. At 65,533, it is more than double the number in March 2020 and 68% higher than March 2019.

Locally within this, we are seeing an increase in urgent and complex referrals

Consequences

Prioritisation of urgent and acute cases
Waiting times for routine assessment appointments exceeding 13 weeks
Lengthy internal waits for treatment

Actions

Redesigned ND pathway – waits reducing
Increased investment – MHIS
Improvement plan – initial assessment waits
Restoring Group work
Improved digital offer
Improved care navigation
Weekly PTL meetings

Specialist Teams

CAMHS LD

Eating Disorders

Paediatric
Psychology

Young People's
Team

Increasing number of complex referrals in CAMHS LD stretching the capacity of the team – new investment allocated through MHIS

CAMHS ED increase in referrals 31% (2020/21) and further 26% (2021/22) – investment in HIT team and core team – partnership working with VCS

Crisis and urgent Care

Previous model was based on assessment, home treatment and 7 day follow up from A&E attendance

The service saw a 17% increase (2020/21) and a further 13% increase (2021/22) in referrals

New Model



Improved System working

CYP Mental Health Pathway Work

Progress update...

- **What was in place-** limited operational outreach, an unclear understanding of where to escalate in both ED and the wards. LOS was extended due to being unaware of what the current offer was, which at times led to delays in access to appropriate support.
- **Challenges-** Delayed interventions, LOS increased, confidence in services reduced, quality of care and safety potentially impacted. Escalations to MHA's.
- **Improved system working-** dedicated and identifiable support from CAMHS (in addition to the all age mental health offer), which is integrating into the LRI. Escalation process and working relationships between LPT/UHL are improved. UHL CYP is included in the CAMHS daily acuity meeting.
- **Current developments** -Developing a joint UHL/LPT SOP, Which includes a pathway which provides clarity on CYP's journey and when to escalate and what that would look like. Held scoping meetings with system providers and commissioners around how to improve CYP MH pathway due to the reduction in specialist CAMHS beds- this group is evolving into a delivery group, with lots of ideas being formed.
- **So what?-** Access to support is clearer (good links between all age mental health & CAMHS and aware of hours covered specifically for CAMHS), discharge is safer with the Crisis team assessing when medically fit on wards. Safer stay, ie Trust has been supported by LPT's H&S team regarding a ligature risk assessment when CYP have been admitted and were under section of the MHA. Staff consultation provided in supporting UHL colleagues. Working on how to improve data collection, however anecdotally its been reported that assessments when a CYP is medically fit is more timely and joined up and also as the number of children being seen by CAMHS has increased at the LRI, there is a reduction in 7 day follow ups, improving the patient experience. Dedicated resource when it needs to be escalated to LPT ie CYP sectioned and staff required.

Beacon

Challenges include:

- **Acuity of CYP**
- **Availability of suitable beds e.g. PICU and LSU**
- **Workforce supply**

Improvement Actions

