

CAMHS Performance Report – June 2018

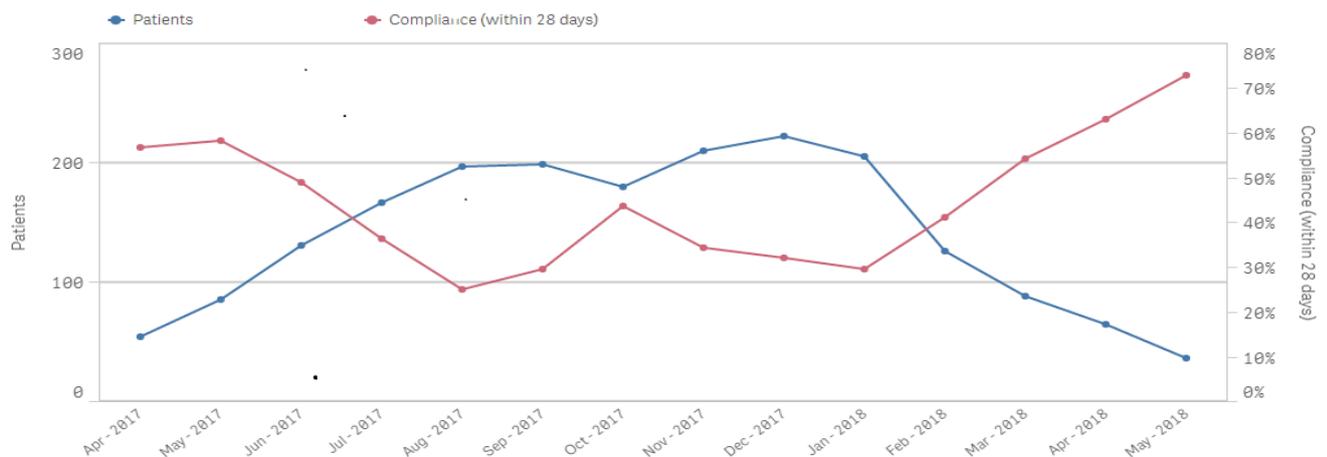
Introduction

ABMU meets with Cwm Taf University Health Board on a monthly basis, when performance is monitored and discussed. Please note that for the purpose of this report to ensure that the latest position is provided for all measures, the data included does vary, specialist CAMHS has the latest position with May data – all other measures are reporting the April position.

1. Specialist CAMHS Assessments

Graph 1

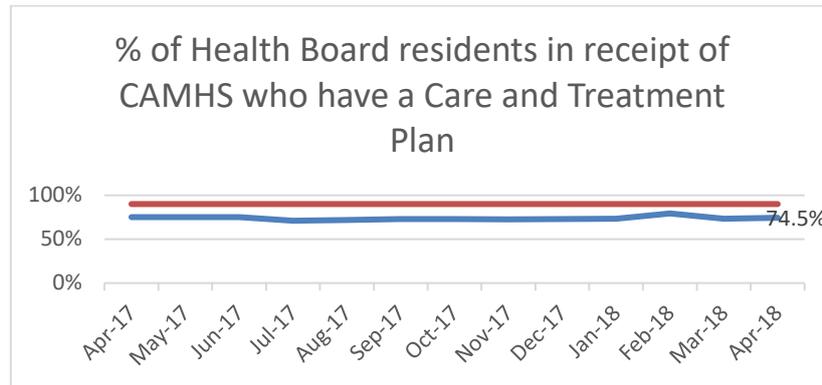
Waiting List (LIVE) > 4 weeks



Performance	Proposed action
<p>In 2016/17 waiting times targets were achieved due to focussing activity on assessments, leading to an increase in demand for interventions. There was insufficient capacity within the system to deliver this, and the service has struggled to recover from this during 2017-18.</p> <p>Waiting list initiatives to address the backlog did not start until late March due to availability of staff. The Welsh Government target of 80% was achieved by the end of March for Bridgend and Neath Port Talbot residents. However, the large number of waiters in Swansea meant that the overall ABMU compliance was 55.9% at the end of March.</p>	<p>CAPA implemented in September 2017, and is already having a positive effect on the CAMHS caseload.</p> <p>Focus on improving performance with numerous initiatives to increase capacity including WLI clinics, seeking agency staff, and moving staff from other parts of the Service to address vacancies.</p> <p>Achievement of the 80% target for this measure by end August 2018.</p>

2. Mental Health Measure (MHM)

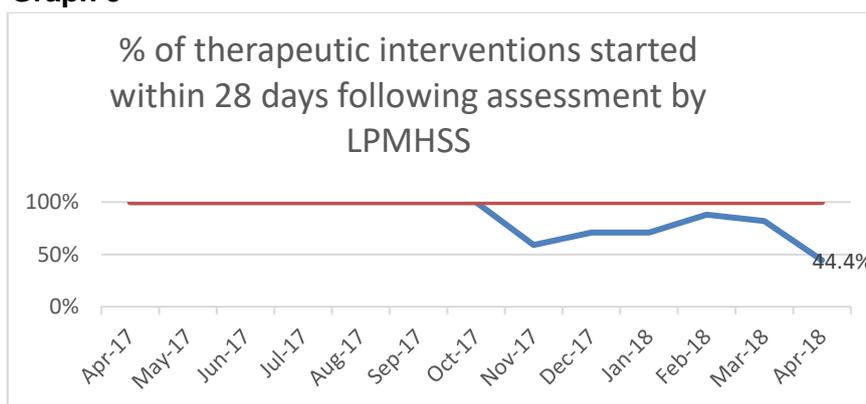
Graph 2



Performance	Proposed action
<p>Performance against the above measure has been consistent over the last 12 months.</p> <p>Feedback from Cwm Taf has highlighted that improving compliance against this measure would impact on clinical time due to the time required to coordinate and attend meetings, including frequent review meetings, and given constraints in terms of clinical capacity it has not been possible to prioritise this. Clinical time would be taken out of CAPA job plans, affecting waiting times, if this were to be prioritised.</p>	<p>To monitor the position and ensure compliance does not deteriorate.</p>

3. Local Primary Mental Health Support Services (LPMHSS)

Graph 3

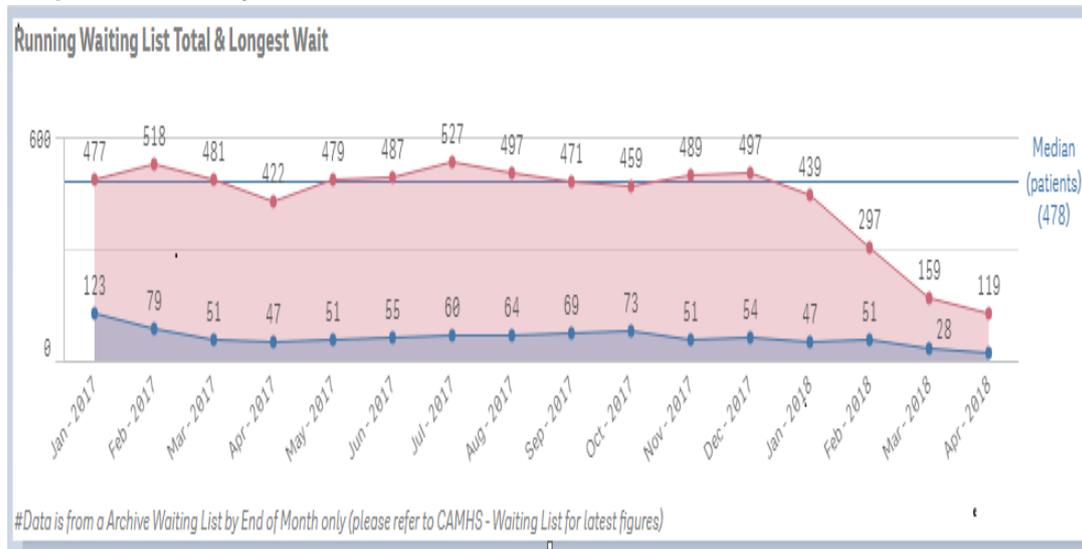


Performance	Proposed action
<p>Cwm Taf have acknowledged that there is still work to do to understand the true capacity of CAMHS overall.</p> <p>Work is on-going to understand compliance against this</p>	<p>Explore the potential to re-balance capacity between new and follow up appointments, noting that this</p>

measure specifically.

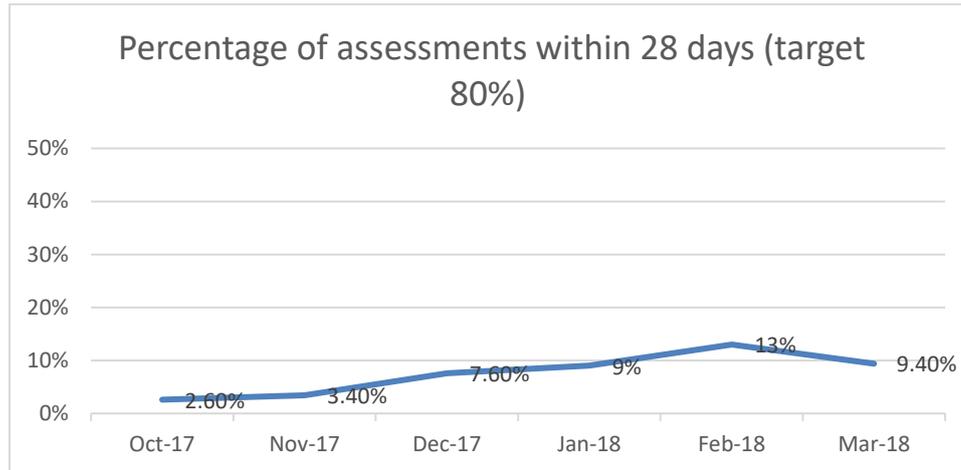
will impact on the capacity to see new patients.

Graph 4 – Primary - CAMHS



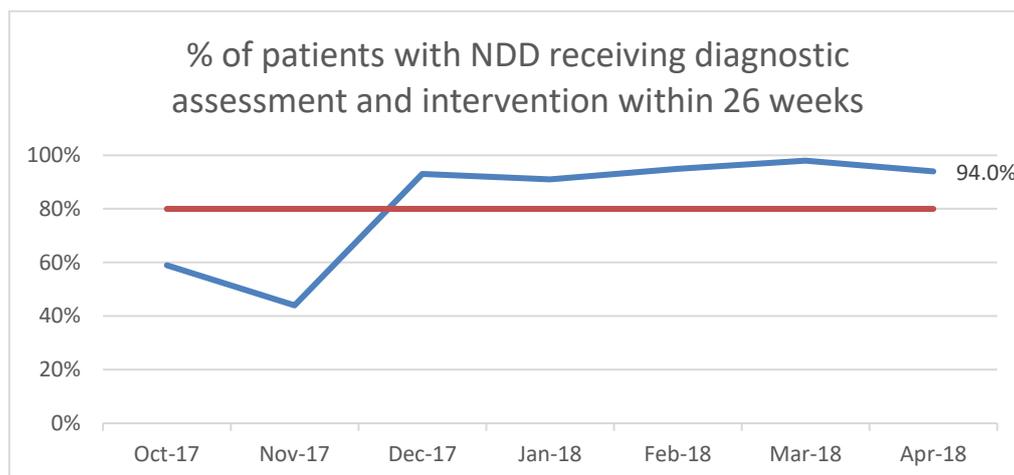
Performance	Proposed action
<p>The waiting list and the longest wait has reduced and this is as a result of an increase in activity due to the recruitment of three agency nurses providing additional sessions for assessments and intervention and releasing the existing staff to deliver increased liaison work. This has been made possible by securing funding from the Western Bay Integrated Care Fund for the recruitment of three liaison officers.</p> <p>Feedback from Local Authorities that basing these Liaison Workers with the Social Services Intake Teams is working extremely well and positively impacting on the appropriateness of referrals to specialist services.</p>	<p>Continued development of the liaison roles with local authorities to improve access for service users.</p> <p>Consideration of the liaison roles as part of the on-going and long-term development of P-CAMHS.</p>

Graph 5



Performance	Proposed action
<p>The improved progress made in P-CAMHS (graph 4), is not reflected in the compliance figures against the 28-day Welsh Government target, and this can cause confusion for Commissioners. This target is measured by looking at the time that patients seen in that month waited for their appointment, and assuming that you are booking the longest waiting patients then compliance will always be very low until the waiting list drops below 4 weeks. Compliance will be the same if you are booking patients at 5 weeks or 55 weeks, it will only improve when booking patients at below 4 weeks. 6 months data has been included for this measure as reporting mechanisms changed during April/ May 2017.</p>	<p>Compliance will continue to be monitored.</p>

4. Neurodevelopmental Disorders (NDD)



Performance	Proposed action
<p>The NDD service transferred from Cwm Taf UHB to ABMU and Singleton Hospital Delivery Unit in 2017.</p>	<p>Nationally discussion is taking place with regards to what the service measures for the NDD service going</p>

<p>The NDD team has been established and slippage from 2017-18 from Integrated Care Funding of £197k has been utilised to carry out waiting list initiative clinics to reduce the waiting list backlog, whilst additional substantive staff are being recruited (consultant psychiatrist from June 2018 and a nurse practitioner post which is about to be advertised).</p>	<p>forward, and what system can be used for the data capture. A consistent approach must be agreed.</p> <p>Accommodation for the NDD team to work out of is a major issue and will slow progress on achieving waiting time targets as there is a lack of clinical space for patients to be seen. Options to address these issues are being taken forward by a Project Team, who are also working with partner agencies to identify possible vacant accommodation.</p>
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In summary/ next steps

ABMU has a Delivery Plan for Children & Young People Emotional & Mental Health (including CAMHS & NDD), and one of the top 5 priorities for ABMU in relation to performance is as follows:

Facilitate the delivery of the Welsh Government performance indicators that support timely access for children and young people

Governance mechanisms exist to monitor performance and to identify solutions including a Cwm Taf/ ABMU Commissioning Group, and the Children and Young People's Emotional & Mental Health Planning Group.