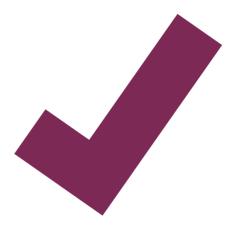


Tier 4 Child and Adolescent Mental Health Services Consultation Outcome Report



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Consultation Outcome Report

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1 Executive summary

NHS England has undertaken a major review of the Service Specifications for Tier 4 Child and Adolescent Mental Health Services (Tier 4 CAMHS). A National consultation was conducted between December 2016 and February 2017 to inform the review. Responses were received from 75 consultation online form responses (survey), Young Minds activity, letters, emailed documents and summaries from the feedback from national and regional events. The results of the consultation were analysed and key themes identified which were used by the Clinical Reference Group (a group of national experts including experts by experience) to amend and update the existing Service Specifications.

The Service Specifications reviewed were:

- 1. The general adolescent service, including appendices for learning disabilities and eating disorders
- 2. Forensic (community) CAMHS
- 3. Psychiatric intensive care units (PICU)
- 4. Low secure units
- 5. Medium secure units

The new Community Forensic CAMHS specification was published in August 2017 and the remaining 4 specifications were published in February 2018.

2 Background

- 2.1 The nationally commissioned Child and Adolescent Mental Health Services (CAMHS) T4 review in 2014 identified significant challenges for children and young people in accessing a range of Child and Adolescent Mental Health Services (CAMHS) Tier 4 specialised services as close to home as possible. The review mapped the current capacity against local need and demand and concluded that there was insufficient capacity in some areas and that there was an immediate need to increase short term bed capacity for general Child and Adolescent Mental Health Services (CAMHS) Tier 4 services. As a direct result, additional beds were commissioned as part of a short to medium term solution. There was also a commitment to develop case management across the country and to ensure that the process of access to inpatient provision was equitable.
- 2.2 Since the expansion of beds in 2014 there has been a pause on opening the market further, except where quality or safety concerns have led to a need for such. Over the past two years a lot of work has been undertaken describing the context of the Child and Adolescent Mental Health Services (CAMHS) care pathway including the inpatient aspect, but rightly focussing on local, community provision. The Child and Adolescent Mental Health Services CAMHS Tier 4 Report (July 2014) and Future in Mind (March 2015) led to the development of Local Transformation Plans (LTPs) in each area which clearly articulated how local pathways would work effectively. These plans helpfully provided the context within which to make decisions about the requirements for Child and Adolescent Mental Health Services (CAMHS) T4 beds in a local context.
- 2.3 In March 2016, NHS England set up a Mental Health Service Review programme to support a detailed and comprehensive service review in relation to the following specialised mental health services:
 - Child and adolescent mental health inpatient services (Child and Adolescent Mental Health Services (CAMHS)Tier 4)
 - Adult medium and low secure services
 - Perinatal, inpatient mother and baby units and linked outreach services.
- 2.4 The national review is underpinned by an approach which sets out to strengthen the requirement for regional planning and delivery. There is a recognition that the national review needs to align with, and support the move to local commissioning/budget arrangements and the outputs of this work would need to be embedded within local systems. The approach is based on local ownership and delivery under the umbrella of national coordination and oversight.
- 2.5 It is vitally important that the work of the Mental Health Service Review programme supports the delivery of the key objectives and recommendations described in current and relevant mental health strategy and policy. It is also important that this work aligns closely with the work of the:
 - Transforming Care Partnerships (TCPs)
 - Sustainability and Transformation Partnerships (STPs)
 - New Care models for Mental Health.
- 2.6 The aim of the Mental Health Service Review programme is to ensure that the right services are commissioned in the right place and can be accessed at the right time. It is important that these services, whilst specialised in nature, are integrated into local pathways. Wherever individuals live in England they should expect to have the same

- access to these services and that the services commissioned should be equitable in terms of the high quality care they provide.
- 2.7 The work of the clinical reference groups in reviewing, updating and developing the national service specifications for specialised services is key to enabling the delivery of the objectives of the Mental Health Service Review programme. The service specifications describe the national requirements and standards for each service and will form the basis of contracts between NHS England and the providers it commissions to deliver these services.
- 2.8 NHS England is collaborating with local commissioners on all aspects of this programme. As these services are specialist in nature, it is important that there is national oversight of this process, but with a strong emphasis on local engagement and ownership. This process is nationally coordinated to ensure there are no parts of the country or patient groups without access to specific services. This review is being driven by local and regional teams, to ensure need and capacity is considered, based on local knowledge and intelligence.

3 The Consultation

3.1 Activities

- 3.1.1 The consultation was published and sign-posted on NHS England's website and was open to consultation feedback for a period of 90 days from 1/12/2016 28/2/2017. The following details the consultation activity undertaken by NHS England. In addition to the activities below, the respondents were asked to respond through the survey hosted on the NHS England hub.
- 3.1.2 Consultation activities included webinars, face to face events and blogs. In addition Young Minds was commissioned to run interactive workshops, host an on-line survey and work in partnership with The Challenging Behaviour Foundation to deliver a tailored approach for people with learning disabilities. Details of each activity are set out below.
 - Blogs: 2 blogs were posted on the NHS England website
 - YoungMinds was commissioned:
 - To host two interactive workshops with Young People (28 January) and Parents and Carers (26 January) and an event with charities and support organisation on 31 March
 - To host a tailored online survey of the consultation questions on their website
 - To work in collaboration with The Challenging Behaviour Foundation (CBF) to deliver a specialised consultation approach appropriate for working with children and young people with a range of learning disabilities, and who have experience of Tier 4 CAMHS.

Webinars

Date	Target Audience	
17 January 2017	Providers and Commissioners	
18 January 2017	Providers and Commissioners	
19 January 2017	General Public	

Face to face events

Location	Date	Venue
London	7 February 2017	Regent's University London, Inner Circle, Regent's Park, London, Greater London, United Kingdom, NW1 4NS
Leeds	9 February 2017	Park Plaza Leeds, Boar Lane, City Square, City Square, Leeds, Yorkshire, United Kingdom, LS1 5NS

3.2 Key Objectives

- 3.2.1 NHS England is committed to developing service specifications in an open and transparent way, and to ensuring that all specifications developed by NHS England are informed by as wide a range of views as possible.
- 3.2.2 The consultation and engagement process would like to hear from anybody with an interest in children's mental health inpatient and forensic outreach services
- 3.2.3 NHS England seeks to comply with the best practice consultation principles issued by the Cabinet Office in 2012.
- 3.2.4 NHS England seeks to remain open, engaged and transparent throughout the process for discharging its responsibilities for the direct commissioning of specific health services.
- 3.2.5 NHS England is committed to promoting equality and reducing health inequalities throughout the health service. Consultation provides the opportunity to gain information about any potential impact on health inequalities which might arise as a result of new or changed processes for making decisions about health services that are directly commissioned by NHS England. This information will feed into an Equality and Health Inequalities Analysis on this programme of work.

3.3 Consultation Questions

3.3.1 General questions

- 3.3.1.1 The consultation sought responses to the following general questions:
 - To what extent do you agree that the specification clearly describes the service to be provided?
 - To what extent are you satisfied that all the relevant information for this service specification has been included?

- Are there any parts of the specification that are unclear and would benefit from greater clarification?
- Is it clear that the specification represents part of a whole patient pathway?
- Are there any quality outcomes, that you feel are important to include, that are not already covered?
- 3.3.1.2 Specific question for the Psychiatric Intensive Care Unit (PICU) Specification:
 - Can you envisage any problems with adherence to the new PICU timescale for expected length of stay (refer National Association of Psychiatric Intensive Care Units Standard)?

3.3.2 Views on future service models:

3.3.2.1 PICU specification:

 Do you have any views on alternatives to PICU, i.e. high dependency unit provision within general adolescent services or earlier referral to a low secure unit?

3.3.2.2 General adolescent specification:

- To what extent do you feel there are adequate mechanisms in place in your locality: between Tier 4 commissioners (NHS England) and community Child and Adolescent Mental Health Services (CAMHS) commissioners (Clinical Commissioning Groups CCGS); to ensure that crisis intervention, outreach and intensive home treatment services will be commissioned?
- Please state any views on how the service specification can contribute to promoting equality and reducing health inequalities faced by service users
- Can you state any potential impact on specific groups?

3.4 Outcome of the Consultation

3.4.1 Identifying themes

- 3.4.1.1 Participate Ltd was commissioned by NHS England to independently analyse and report on the data from the 'Consultation on the Children and Adolescent Mental Health Service Tier 4 on the five service specifications'.
- 3.4.1.2 The summary report sets out the analysed and thematic data from the consultation completed in February 2017. The main themes that emerged were:
 - Concerns regarding the lack of alternatives to admission including crisis services, outreach, step up and step down.
 - The need for clearer references to the role of Education/schools in Tier 4.
 - Alignment of the ED specification with other guidance, including the latest NICE guidance and Evidence Based Treatment Pathways.
 - Ensure references to LD align with Transforming Care.
 - Ensure all disabilities are addressed including deafness.
 - The need to agree recommendations around outcome measures.

- The need to clarify the role/terminology around high dependency functions/extra care areas.
- Ensure clarity around pathways into, through and out from Tier 4 services.
- The importance of high quality of assessments and reviews.
- The importance of multi-agency working.
- Ensure systems are in place to facilitate parent/carer engagement.
- The importance of good transition arrangements.

4 Responding to the Consultation Outcome

4.1 What has changed in the specifications as a result of the consultation

4.1.1 The responses and themes have been carefully considered by the CAMHS Clinical Reference Group. An agreed set of updates and changes based on the outcome of the consultation have been incorporated into the service specifications. The amendments made to each specification are set out below in addition to a number of more general changes.

Through consultation we heard	As a result we have
There is a need for clearer references to the role of Education/schools in Tier 4	Service specifications have been modified to ensure that there is a minimum standard of education provided in all units in line with national policy issued by DfE, overseen by OFSTED, and that there is improved communication between the inpatient school and Local Authorities.
There are a lack of alternatives to admission	The CAMHS CRG is developing a new specification for 'non-admitted care' services.
Alignment of the ED specification with other guidance, including the latest NICE guidance and Evidence Based Treatment Pathways (E-BTP).	The specification for general adolescent services includes an appendix for specialised eating disorder services setting out expectations for treatment interventions and pathways in line with NICE guidance and E-BTP
Ensure references to LD align with Transforming Care	All Tier 4 CAMHS include clear alignment with delivery of CETR and Transforming Care programme objectives
Ensure all disabilities are addressed including deafness	The specifications all provide clear requirements regarding care and treatment plans that address both mental health and physical healthcare needs. All patients will have access to a comprehensive range of primary healthcare services, undergo regular and comprehensive physical health checks and treatment for physical conditions as required.
The need to agree recommendations	All service specifications have clear quality

around outcome measures	indicators, outcome measures and metrics across 3 domains: clinical outcomes, patient experience and structure/process
The need to clarify the role/terminology around high dependency functions/extra care areas	The general adolescent specification includes a clear description of dedicated High Dependency Areas for the intensive management of brief periods of disturbed behaviour including the requirement for monitoring.
Ensure clarity around pathways into, through and out from Tier 4 services	All service specifications have clear referral pathways, access and exclusion criteria and referral response times
The importance of high quality of assessments and reviews	All service specifications set an expectation of assessment prior to admission and for regular reviews as part of the planning and delivery of care. Where applicable these are expected to be in line with national expectations regarding delivery of Care Education and Treatment Reviews (CETR) and the Care Programme Approach (CPA)
The importance of multi-agency working	All service specifications include expectations of multi-agency working as part of referral, assessment, treatment and discharge processes
Ensure systems are in place to facilitate parent/carer engagement	All service specifications have clear expectations regarding the involvement and inclusion of parents and carers in the planning and delivery of care
The importance of good transition arrangements	All service specifications set clear expectations of timely joint service planning to support effective service and discharge transitions.

4.1.1.1. Forensic CAMHS including outreach (FCAMHS)

A new specification for Forensic CAMHS including Outreach (FCAMHS) was
published in August 2017. This specification sets out the standards for a tertiary
advice and consultation service to support health and multi-agency care
professionals involved with the most complex and high risk children and young
people.

4.1.1.2 General Adolescent Services including specialised eating disorder services

- The specification for General Adolescent Services replaces the specification published in 2013 and sets out the standards and requirements for general inpatient care for young people aged 13-18 years old including specialised eating disorders services.
- It includes the requirement for a High Dependency Area in each ward to manage brief episodes of disturbed behaviour and reflects standards in Health Building Note 03-02 Facilities for child and adolescent mental health services (CAMHS) published by DH in 2017.
- The section on education has been expanded and agreed with DfE; it includes expectations relating to the monitoring of provision.

Clear referral response times have been set out alongside access criteria

4.1.1.3 Psychiatric Intensive Care Units (PICU)

- The specification sets out the standards and requirements for the management of short-term behavioural disturbance which cannot be contained within a Tier 4 general adolescent service.
- It replaces the appendix in the 2013 Tier 4 CAMHS General Adolescent Specification and defines a 6-week length of stay and arrangements for physical, relational and procedural security similar to those in low security.
- It sets out clear service access and exclusion criteria, referral response times and discharge pathways.

4.1.1.4 Low Secure Services

- The new specification replaces the appendix in the 2013 Tier 4 CAMHS General Adolescent Specification and sets out requirements and standards for the care of young people requiring significant levels of physical, relational and procedural security. It includes the requirement for appropriate seclusion facilities for young people requiring period of care away from the main patient group.
- The specification sets out clear expectations regarding access assessments, access and exclusion criteria and referral response times.
- The referral and discharge pathways are set out.
- The section on education has been expanded and agreed with DfE; it includes expectations relating to the monitoring of provision.

4.1.1.5 Medium Secure Services

- This specification updates and replaces the existing specification published in 2013 for young people who present with the highest levels of risk of harm to others including those who have committed grave crimes and require care with high levels of physical, procedural and relational security.
- The specification sets out clear expectations regarding access assessments, access and exclusion criteria and referral response times.
- The referral and discharge pathways are set out.
- The section on education has been expanded and agreed with DfE; it includes expectations relating to the monitoring of provision.

4.1.1.6 Transforming Care

• The principles of Transforming Care have been embedded into all the service specifications.

4.1.1.7 Education

 Education in Tier 4 CAMHS was a key theme in the feedback. Service specifications have been modified to ensure that there is a minimum standard of education provided in all units in line with national policy issued by DfE, overseen by OFSTED, and that there is improved communication between the inpatient school and Local Authorities.

4.1.1.8 Quality

 Other changes have been made to improve the overall quality of care and treatment delivered by Tier 4 CAMHS. Changes have been made to keep in line with the latest evidence base and guidance, including from NICE. Routine clinical outcomes will be collected and a range of quality measures will be developed and collected to ensure units are meeting these new standards.

4.1.1.9 Other Changes

 Other changes to the service specifications are designed to ensure that children and young people get the most appropriate and effective care in the right place at the right time.

4.2 Are there any remaining issues that have not been resolved in the publication of the 5 new CAMHS specifications?

- 4.2.1 Non Admitted Care Service Proposal
- 4.2.1.1 In recent years there has been a focus on commissioning beds to meet the needs of the young people with the most severe, complex and/or high risk mental health difficulties. However, Tier 4 CAMHS have always included a range of other services to meet these needs such as crisis intervention and home based treatment. Unfortunately, in many parts of the country these services have not been commissioned and one of the main findings from the consultation was for the need for these other Tier 4 CAMH services. This provision will help improve outcomes, reduce the need for unnecessary or even harmful admissions and provide greater family satisfaction.
- 4.2.1.2 To address this gap in services a new service proposal for "non-admitted care" (this term may change) has been developed to ensure commissioners prioritise these services alongside (what will be) a reduced need for inpatient beds. As well as services to help avoid unnecessary admissions, the new proposal requires inpatient services to provide a step down (outreach) provision to facilitate discharge as soon as possible. This proposal will be progressed through the NHS England process.
- 4.3 Learning Disability
- 4.3.1 As referred above, informed by the consultation process and to highlight the need for the further development of specialist Tier 4 learning disability services, the previous appendix has been developed into a full separate service specification.
- 4.3.2 A task and finish group considering the wider children and young people's complex pathway for learning disability and ASC has been set up and this important pathway work will help inform clarifying the scope for this specification and will facilitate the involvement of a parents and carers group to support any further considerations required.