

	Health and Wellbeing Board 12 November 2015
Title	Barnet CAMHS Transformation Plan
Report of	Director of Integrated Commissioning Commissioning Director Children and Young People
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix A: Barnet CAMHS Transformation plan 2015 to 2020
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Summary

In March 2015 NHS England (NHSE) and The Department of Health (DoH) published *Future in Mind, promoting, protecting and improving our children's emotional health and wellbeing*¹ The report sets out national transformation of child adolescent mental health services (CAMHS) over a five year period.

The Barnet CAMHS Transformation Plan has been developed in response to the letter from Sir Bruce Keogh and Richard Barker² in May 2015 which calls for "...a major service transformation programme to significantly reshape the way services for children and young people with mental health needs are commissioned and delivered across all agencies over the next 5 years in line with proposals put forward in *Future in Mind*...."

To support this aspiration additional funds have been made available to the CCG. The allocation for Barnet is set out below:

Initial allocation of funding for eating disorders and planning in 2015/16 (CCG)	Additional funding available for 2015/16 when Transformation Plan is assured (CCG)	Minimum recurrent uplift for 2016/17 and beyond if plans are assured (includes eating disorders) (CCG)
£198,863	£497,773	£696,636

Every area is required to produce a *Transformation Plan*, which is a "live" document

¹ <http://www.england.nhs.uk/2015/03/17/martin-mcshane-14/>

² See www.england.nhs.uk/wp-content/.../transformation-plans-guid-lett.pdf

demonstrating the direction of travel in every area of CAMHS improvement.

Transformation plans need to include detailed information on current services, staffing, and funding arrangements. In addition to transforming CAMHS service overall there are specific areas prioritised for improvement by the Department of Health these are:

- Perinatal mental health,
- Eating disorders, or crisis care and self –harm,
- The roll out of Children’s Improving access to Psychological Therapies (IaPT).
- Improving data.

Plans need to demonstrate that they have been developed and agreed with key stakeholders, including children, young people, their families/carers, providers, schools, third sector, NHS and local authorities.

The plan needs to be formally signed off is by the Health and Wellbeing Board.

The agreed transformation plans once signed off need to be published on local websites.

Submission of plans is subject to an assurance process, which, if satisfactory will release new funding. Barnet submitted the transformation plan on October 16th 2015 and will be assured by NHSE by the end of November using the following criteria.

Successful

- Plans meet the assurance criteria in full
- CCGs will receive all funds allocated

Successful with amendments

- Plans need minor clarification or amendment
- CCG will receive funds allocated but will be asked to re-submit showing that clarification and amendments have been made

Re-Submission

- Fundamental Concerns with Plan as a result of the assurance process
- CCG and their partners will be asked to resubmit their plans before further monies are approved.

Recommendations

- 1. That the Board notes and confirms the approval of the Transformation Plan.**
- 2. That the Health and Wellbeing Board notes the ongoing development of the five year plan.**
- 3. That the board approve the plan for publication on the LBB and CCG websites**

1. WHY THIS REPORT IS NEEDED

1.1 This report is required to formalise the approval of the Transformation Plan provided by the Director of Childrens Services and the CCG Chief Operating Officer (Interim) and to ensure the Health and Wellbeing Board is aware of the CAMHS Transformation Plan and its submission to NHS England.

2. REASONS FOR RECOMMENDATIONS

2.1 Guidance supporting Transformation Plans from NHS England requires support from local senior strategic governance and accountability structures; submission of the Barnet CAMHS Transformation Plan to NHS England

Directors of Commissioning and Operations occurred on 16 October 2015. In recognition that boards may not meet in a timely way to sign off the plan NHSE agreed that senior officers from the CCG and Local authority can sign off the plan for submission.

2.2 NHSE will be aiming to deliver ratification or amendments and further support to local plans prior to resubmission where necessary in November 2015. The plan will need to be assured by NHSE to release funding to deliver the plan. Significant funding (circa £600k) will be made available recurrently for the next five years in addition to baseline funding. This additional resource is ring-fenced to support the transformation of CAMH services.

2.3 NHSE require the plan to publicise on local web sites.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 No alternative options.

4. POST DECISION IMPLEMENTATION

4.1 NHS England will feedback to the CCG on the assurance process with any additional information required by early November 2015. Pending this a CAMHS Transformation implementation plan will be developed to support work over the next five years.

4.2 The Joint Commissioning Unit will continue to develop and deliver the plan.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.2 The service developments and updates outlined within this paper links to Barnet Strategic plans including:

- Early Intervention and Prevention Strategy 2014 - by tackling problems experienced by children and families as early as possible to improve outcomes, and to lower costs.
- Barnet CCG Vision & Values³
- 2015/16 Commissioning Intentions Barnet CCG
- Commissioning Plan London Borough of Barnet 2015 - 2020
- Children and Young People's Plan 2013-2016 - Early Intervention & Prevention: Continued support children and young people's mental health and emotional wellbeing.

5.3 **Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

³ <http://www.barnetccg.nhs.uk/about-us/our-vision-and-values.htm>

5.4 Barnet Children' Adolescent Mental Health Service (CAMHS) is currently funded between the London Borough of Barnet (LBB) and Barnet Clinical Commissioning Group (CCG), with the CCG funding the majority of the service. The current expenditure of CAMHS is estimated to be **£5,867,321.00**:

CCG	£4,590,961.00	78% of the total
LBB	£1,276,360.00	22.0% of the total

5.5 The CAMHS Transformation Plan if assured by NHS England will deliver additional resource to enable local commissioners to transform local CAMH services. The table below summarises the planned spend of the transformation funding;

Indicative budget 2015/16	New funding available (£)	Investment planned (£)
NHSE funding for plan when assured	497,773	
Eating Disorders	198,863	100,000
Crisis/Self Harm		158,636
Perinatal mental health allocation to be confirmed	tbc	tbc
Primary secondary school expansion & peer support		200,000
App/technology Communications		50,000
Data, connectivity infrastructure		40,000
CAMHS Drop in		118,000
CYP-IAPT roll out completion	tbc	tbc
Governance and change management		20,000
Child Sexual Assault		10,000
Totals	696,636	696,636

5.6 Social Value

5.6.1 The transformation plan aims to ensure developments are sustainable, evidenced based and are value for money. Prioritising preventative measures and services that promote self-reliance, resilience and self-efficacy where possible. There will be a continued focus on the most vulnerable.

5.7 Legal and Constitutional References

5.7.1 Local Authority CAMHs budgets are the responsibility of the CELS Committee.

5.7.2 The Health and Wellbeing Board has the following responsibilities under its terms of reference as set out in the Council's Constitution (Responsibility for Functions – Annex A):

- To work together to ensure the best fit between available resources to meet

the health and social care needs of the population of Barnet (including children), by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing. Specific resources to be overseen include money for social care being allocated through the NHS; dedicated public health budgets; the Better Care Fund; and Section 75 partnership agreements between the NHS and the Council.

- To directly address health inequalities through its strategies and have a specific responsibility for regeneration and development as they relate to health and care. To champion the commissioning of services and activities across the range of responsibilities of all partners in order to achieve this.
- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate.
- To receive assurance from all relevant commissioners and providers on matters relating to the quality and safety of services for users and patients.

5.8 Risk Management

5.8.1 The key risk is that the overall CAMHS Transformation plan does not receive assurance from NHS England. We do, however, understand from NHS England that areas that are not initially successful will be supported (with possible peer support) to complete revised submissions.

5.8.2 Additional risks are that local providers will be unable to deliver within the 2015-16 financial year and onwards as there is a shortage of child mental health practitioners nationally and providers may be unable to recruit to meet transformation requirements.

5.8.3 Local financial pressures may require a reduction in the existing financial envelope to transform provision.

5.9 Equalities and Diversity

5.9.1 The development of the CAMHS transformation plan has considered a range of factors relating to equalities and diversity and following the NHSE assurance of the plan and as the high level work plan is developed a full Equality Impact Assessment will be finalised. The Equality Act 2010 outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, advance equality of opportunity between people from different groups and foster good relations between people from different groups. The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

5.10 Consultation and Engagement

5.10.1 The CAMHS Transformation Plan has been developed in line with a rapid but extensive engagement strategy which will continue to develop over the next five years. Highlights of engagement and consultation to date can be found in the plan.

5.11 Insight

5.8.1 Insight and JSNA data has been central in informing the overall Transformation Plan (See section 8.00)

5.12 **BACKGROUND PAPERS**
None

Simon Stevens: <https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people>: page 6