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# Emotional Health re-design proposals for Children's Mental Health

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<b>Committee considering report:</b>	Executive on the 19 November 2015
<b>Portfolio Member:</b>	Councillor Lynne Doherty
<b>Date Portfolio Member agreed report:</b>	15 September 2015
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<b>Forward Plan Ref:</b>	EX3058

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## 1. Purpose of the Report

- 1.1 To update the Executive on the BWB: Building Community Together emotional health re-design proposals for children and young people's emotional health services.

## 2. Recommendation

- 2.1 That Executive approve the design proposals for the Emotional Health Academy; including the creation of the additional posts.

## 3. Implications

- 3.1 **Financial:** Child and Adolescent Mental Health services (CAMHs) are provided by Berkshire Healthcare Foundation Trust (BHFT). CCGs commission Tier 3 CAMHs services e.g. Psychologist and Psychiatric time (CCGs provide £6,166,360 funding for the Berkshire West area per annum). CCGs have provided an additional non-recurrent £1.5 million investment in this financial year to improve service provision and timeliness of assessments. WBC commission Tier 2 PCAMHS services e.g. early help for children with emotional health difficulties (£80,000 per annum) which purchases two 0.5 workers.

Please see the attached business case for a full financial proposal. The emotional health design proposals use the Council's existing revenue investment in Primary CAMHs (Child and Adolescent Mental Health Service) PCAMHs more effectively. We can establish the Emotional Health Academy on the revenue funding from the Council. However, we are seeking partner agency match funding to increase the size of the Academy, to support a more timely service for our local children, young people and families. The size of the Academy will be directly proportionate to the amount of income received from partner agencies i.e. if we receive more investment we will grow the Academy, if we get less we will reduce the Academy; mitigating financial risk for the authority.

We are actively pursuing philanthropic investment into the Emotional Health Academy and local business investment in/sponsorship of the Academy too. Longer term, it would be in the interests of West Berkshire Council to consider enabling the Emotional Health Academy to become a Community Interest Company (CIC), to draw in additional funding from sources that will not fund Local Authorities. Karen Felgate is currently investigating this option as part of the Brilliant West Berkshire: Building Community Together programme.

The design of the Emotional Health Academy is intended to secure financial sustainability of the Academy, potentially achieving revenue savings for West Berkshire Council longer term (please see the attached business case).

CAMHS Tier 3 services i.e. Psychological and Psychiatric services are commissioned by the CCG. The CCG is increasing its investment into CAMHS by £1.5 million to increase the resource in the service. WBC will continue to commission BHFT to provide clinical supervision of the Academy workers and oversight of complex children's needs that may require Tier 3 support in the future.

- 3.2 **Policy:** The Local Safeguarding Children Board (LSCB) have overseen the design proposals for the Emotional Health Academy i.e. to ensure the effectiveness of the arrangements to safeguard children; and have endorsed the proposals.
- 3.3 **Personnel:** The Academy will create additional posts (4 minimum and 8 maximum) within West Berkshire Council employment. The draft job descriptions for emotional health workers have been graded by HR at grade H. Elected Members approval is sought to create the new and additional posts. The business case outlines the plans to ensure that the Emotional Health Academy becomes financially self-sustaining, to finance these posts.
- 3.4 **Legal:** N/A
- 3.5 **Risk Management:** The financial risks associated with developing the Emotional Health Academy are responded to in the attached business case. In summary, the size of the Academy will be directly proportionate to the amount of income received from partner agencies i.e. if we receive more investment we will grow the size of the Academy, if we get less we will reduce the size of the Academy. Philanthropic investment is uncertain, it is difficult in the current financial climate to encourage philanthropic investors to invest in Local Authorities. As described above, to move in the longer term, to a Community Interest Company arrangement for the Academy, would be potentially advantageous.

The Academy will market training packages to independent and private schools and neighbouring Local Authorities; our local market testing suggests that this is a currently untapped resource. Generating income in this way is designed to offset the risk associated with increased pressure on statutory partner agency budgets over the foreseeable future and any associated risk of redundancy.

We note that there are two 0.5 workers in CAMHS currently funded by West Berkshire Council's contribution to PCAMHs. The additional £1.5million investment by CCGs, means that BHFT are urgently recruiting staff and there are more Tier 3 posts than postholders, significantly reducing the risk of TUPE. WBC and BHFT have discussed TUPE regularly and there are no indications that this will be required.

**3.6 Property:** Accommodation options for the Emotional Academy staff are currently being considered by Jo England as part of her lead responsibilities for Brilliant West Berkshire. Partner agencies are offering facilities to co-locate the workers.

**3.7 Other:** The Executive is asked to note that the safeguarding risk to children and young people in the current arrangements with CAMHs is of concern to the Local Safeguarding Children Board (LSCB). Most children are waiting for a minimum of a year to be seen for the first time; some children are waiting two years or more. The proposals for responding to this level of need by introducing the Emotional Health Academy workers, working across West Berkshire, intends to ensure that children and young people are seen within 6 weeks. The LSCB, Department for Education and Department for Health have reviewed and endorsed these proposals, identifying this design as an example of national innovation.

#### **4. Other options considered**

**4.1** We could continue funding BHFT to deliver the PCAMHs service. Upon review our concerns relating to this option are:

- The service was unable to identify which West Berkshire children subject to Child Protection Plan or Looked After by the local Authority were receiving help or support for CAMHs, or were on the waiting list for the service (please note the waiting list is a minimum of one year, many children are waiting two years).
- There is no risk analysis or risk mitigation for children waiting for a service.
- BHFT require children and families to attend hospital settings to receive treatment, which many local families find challenging.

## 5. Executive Summary

5.1 The Good Childhood Report (Children's Society August 2015) reports that UK children are among the unhappiest worldwide. Emotional health need is one of the most common early indications of additional need; left unsupported, early emotional health difficulties can rapidly develop into a diagnosed mental health condition.

Over 5000 (i.e. 5868) West Berkshire children were referred to CAMHS last year alone for emotional health services

5.2 Of the 80% of children and young people asking CAMHS for support/help in West Berkshire do not receive a service. The vast majority of our children subject to Child Protection Plans and those open to the Youth Offending Team have emotional health needs and many have mental health disorders. Most children are waiting over a year to be seen by a mental health professional and some are waiting over two years; for most children and young people, their condition deteriorates significantly in that time.

5.3 In summary we want to:

1) Create an Emotional Health Academy that will:

- **children will be seen in a week, rather than waiting a year** - take newly qualified psychology graduates and other emotional health qualified staff and train them to work with children and families in the communities in which they live.
- **We'll work in partnership** - to ensure that these staff work closely with schools, with GP surgeries, with Children's Centres, the Police and crucially with voluntary sector
- **We'll look at the needs of the whole family, not just the child** - by testing a new way of working with adult services, to see how we can work more effectively with whole families; where both adults and children are affected by emotional health needs
- **Sustaining good health** - we'll support children and young people to develop sustainable strategies to keep themselves well and promote their long-term well-being; by drawing on their own resources, the resources of their friends and family; by utilizing and creating community led resources.
- **Getting to children early will reduce the pressure on child protection services later**

2) Commission specialist voluntary sector providers - to provide more non-stigmatising care in, and to, our communities in close partnership with the Academy.

## 6. Conclusion

- 6.1 This development in West Berkshire has been given the full support of advisors from the Department of Education and has been identified as an example of national innovation. This paper seeks the Executive's support to progress the implementation of the Emotional Health Academy (by 1<sup>st</sup> April 15), emotional health Triage (by the end of November 15) and associated partnership working with the voluntary, community and faith sectors.

## 7. Appendices

- 7.1 Appendix A – MP Summary – West Berkshire Emotional health Services re-design
- 7.2 Appendix B – Emotional Health Academy re-design proposal final draft and timeline
- 7.3 Appendix C – Business Case for the Emotional Health Academy