Hillingdon's Child and Adolescent Mental Health Performance

January 2017

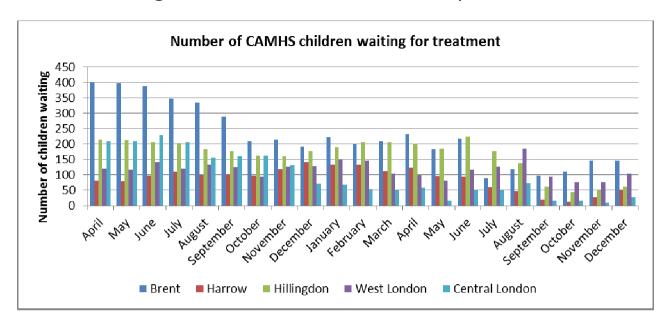




HCCG Month 9 Integrated Performance Report (CAMHs) CNWL Report

Mental Health - CAMHS	Frequency	Threshold (month)	Prev month	Month 9	YTD
CAMHS - 1st Appt. DNA Rates	Monthly	<15%	12.3%	17.1%	11.8%
CAMHS -FU Appt. DNA Rates	Monthly	<15%	9.7%	16.5%	13.9%
Outcome measure completed on acceptance	Monthly	80%	88.2%	86.2%	92.7%
Outcome measure completed on discharges	Monthly	80%	80%	50%	80.6%
CAMHS Eating Disorder - Urgent Referrals seen within 1 week (NB family choice accepting appointment after target time)	Monthly	100%	No Activity	No Activity	75%
CAMHS Eating Disorder – Routine Referrals seen within 4 weeks	Monthly	>75%	100%	100%	87.5%
CAMHS 18 weeks waiting times	Monthly	85%	93.6%	85.7%	69.1%

Number of Children Waiting for treatment – CNWL Core specialist services CNWL Report



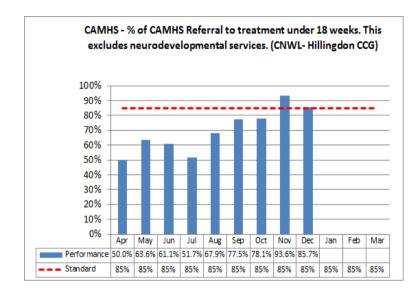
In order to meet the waiting time target the service has increased productivity through:

- Increasing capacity for face to face sessions in teams
- Increasing patient throughput through roll out of evidence based care pathways
- Stopping the clock more quickly through improved recording and first treatment interventions delivered more quickly

In addition to the focus on waiting times CNWL is also working on a number of additional transformation projects. These are:

- Brief Treatment and Intervention
- Redesign of core CAMHS
- T4 New Models of Care
- Development of a 24/7 intensive Community Support Service
- Piloting Child Wellbeing Practitioners (CWP)

Month 9 CAMHS Exception report



Mitigating Actions:

Service will continue to utilise additional capacity to ensure more children are assessed and treated. Embedding new models of care.

Assurances:

On-going monitoring via CQG and PFIG. Improvement in performance has resulted from recruitment of additional staff increasing capacity in service and staff working extra hours in the evenings and weekends to focus on assessments.

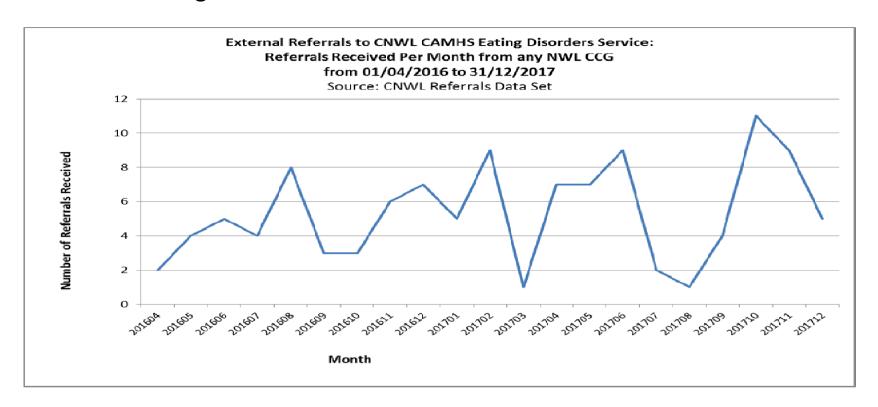
Hillingdon CCG achieved M08 and M09 in month target.

Gaps in Assurance:

2016-17 YTD target not achieved by Trust.

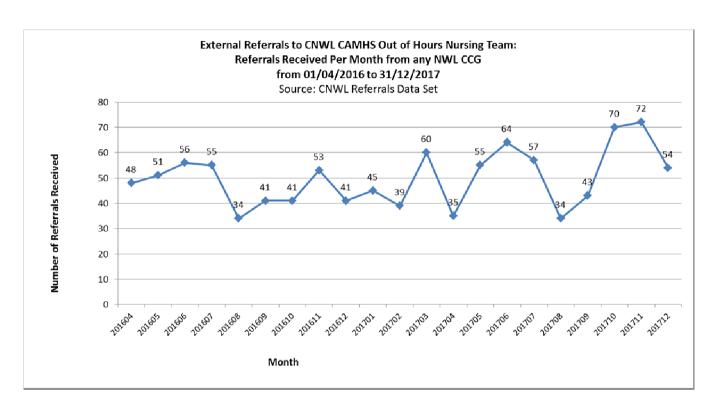
Issue	Provider	Action	Action Status			Provider Owner	On Track	Original Delivery Date	Revised Delivery Date	Contract	Contract Penalties to date
Underperformance	CNWL	The teams all operate 'speedy slots' where an urgent assessment can take place should someone need to be prioritised.	Open	Yes	AN	MR	Yes	On-going until 31/03/18	N/A	N/A	N/A
against CAMHS 18 weeks RTT		The service has moved to a new model of care whereby children will be provided with up to six sessions of intervention following assessment before review by senior clinicians in the team and discharge.	Open	Yes	AN	MR	Yes	On-going until 31/03/18	N/A	N/A	N/A

NWL CNWL Eating disorders service – referrals received.



- Total of 112 external referrals between 01/04/2016 and 31/12/2017
 28 were for Hillingdon CCG young people
- Interventions offered family based intervention (Anorexia), Systemic Family Therapy, CBT
- · Individual goals set with family
- Outcomes from evaluation include reduction in Tier 4 admissions to ED units.

NWL CAMHs crisis out of hours service: Number of CYP assessed by Out of Hours Team.



Referrals

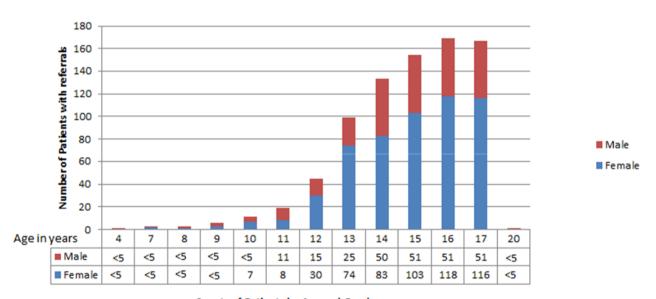
- 1,048 external referrals were received by the CNWL CAMHS Out of Hours Nursing Team between 01/04/2016 and 31/12/2017.
- Of these, 238 (10.5%) were referrals for Hillingdon CCG patients.

From July 2017, this service will be called the crisis and liaison service and operate 24/7.

CAMHs crisis out of hours service – Number of CYP assessed by Out of Hours team by gender and age

Patients Referred by Age and Gender - CAMHS Out of Hours

Patients from any NWL CCG referred to CNWL CAMHS Out of Hours Nursing team between 1/4/2016 and 31/12/2017. (Only external referrals are included).



Counts of Patients by Age and Gender

The data above supports targeting online and face to face counselling services for young people over the age of 11 years. Complimenting the existing face to face Hillingdon counselling services currently available. The new service will have a 'Hub' based in Hillingdon.

NB This chart and table only counts each patient once, even if they were referred multiple times between 01/04/2016 and 31/12/2017.

Month 9 CAMHS performance (CNWL)

	Local Quality Requirements				TRUST TOTAL		BHH FEDERATION	
Category	Quality Requirement	Description		「hreshold	CENTRAL & NORTH WEST LONDON NHS FOUNDATION TRUST		NHS HILLINGDON CCG	
				+	In mth/qtr	YTD	In mth/qtr	YTD
DNA	CAMHS DNA 1st appointments	% DNA for 1st appointments	Monthly	<15%	13.8%	11.6%	17.1%	11.8%
DNA	CAMHS DNA follow-up appointments	% DNA for Follow Up appointments	Monthly	<15%	12.7%	11.5%	16.5%	13.9%
CARALIC Cating Disorder	Urgent Referrals seen within 1 week	100%	100.0%	82.1%	NO ACTIVITY	75.0%		
CAMHS Eating Disorder	Routine Referrals seen within 4 weeks	% of CYP referred (routine cases) with suspected ED that started treatment within 4 week of referral in the reporting period	Monthly	>75%	85.7%	74.6%	100.0%	87.5%
	Outcome measure completed on acceptance	% of CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure completed for patients accepted into the service	Monthly	80%	89.3%	91.1%	86.2%	92.7%
Outcome Measures	Outcome measure completed on discharges	% of appropriate CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure completed for patients discharged from the service	Monthly	80%	78.3%	83.3%	50.0%	80.6%
	Outcome measure improvement	% of young people discharged with CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure showing improvement between acceptance and discharge	Monthly	>50%	69.4%	72.6%	60.0%	70.0%
Appointments	Location - 1st appointments	% of first appointments to be offered in locations other than CAMHS clinic buildings, excluding eating disorder service	Quarterly	>10%	27.3%	26.5%	20.2%	18.9%
	Location - follow-up appointments	% of follow up appointments to be offered in locations other than CAMHS clinic buildings, excluding eating disorder service	Quarterly	>10%	27.3%	27.7%	18.9%	18.3%
Waiting Times	CAMHS 18 weeks waiting times	% of CAMHS Referral to treatment under 18 weeks. This excludes neurodevelopmental services.	Monthly	85%	92.5%	82.7%	85.7%	69.1%

Inpatient care (Formally Tier4)

Average number of admissions per month has reduced from 2.5 (2014-15) to 1.8 (2017-18 M9)

Distance from home has seen an improvement with an average of 25 miles. This does not always take into account any transfers following placements out of area. Please note PICU, Low Secure and LD beds are being established in the North West London Footprint.

Length of stay has improved from average of 97 days to average of 70 days.

