

Wiltshire Council

Cabinet

8 October 2024

Subject: **Recommissioning of Children and Young People's Mental Health Services**

Cabinet Member: **Cllr Laura Mayes - Deputy Leader and Cabinet Member for Children's Services, Education and Skills**

Key Decision: **Key**

Executive Summary

In May 2016, Wiltshire Council Cabinet agreed to jointly commission a contract with the Wiltshire Clinical Commissioning Group and the Bath and Northeast Somerset and Swindon Clinical Commissioning Group, to provide a Child and Adolescent Mental Health Service (CAMHS) to Children and Young people in Wiltshire.

The clinical commissioning groups have subsequently evolved into the Bath and Northeast Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB).

Oxford Health Foundation Trust (OHFT) were awarded the contract with the service starting in April 2018 with a contract duration of 7-years, meaning it is due to end in March 2025.

This paper is to seek agreement to utilise the 3-year extension clause within the contract.

Proposals

Cabinet is asked to approve:

- 1) Wiltshire Council entering a 3-year extension to the jointly commissioned Children and Adolescent Mental Health Service with Bath and Northeast Somerset Council and the Integrated Care Board, provided by Oxford Health NHS Foundation Trust.
- 2) To approve the spend of £518,000 per year, for 3 years. This is a total of £1,554,000 for the 3-year period.
- 3) To initiate a range of early help pilot programmes from existing underspend in Children and Young Peoples Mental Health Service provision to develop a strategic plan for the overarching review of children and young people's mental health services to support the recommissioning of services at the end of the extension period.

- 4) To delegate authority to approve the extensions and all associated documents to the Director Commissioning and Director of Children's Services in consultation with the Cabinet Member for Children's Services, Education and Skills.

Reason for Proposals

Wiltshire Council will continue to support early intervention and prevention and increased resilience in Children and Young Peoples mental health.

This will allow Oxford Health to continue providing Child and Adolescent Mental Health Services (CAMHS) to Wiltshire's community without a reduction in service provision.

The extension period of 3 years will enable Wiltshire Council Commissioning to realise the potential of recommissioning Children's and Young Peoples Mental Health Services by allowing time to complete a full and thorough review of the mental health services currently commissioned within the broad Wiltshire system.

During this time a range of initiatives will be piloted to inform the review of children and young people mental health services and ensure that future commissioning proposals are informed by successful programmes and interventions.

Currently Wiltshire Council are inputting £518,000 per annum into the CAMHS contract, with the ICB contributing £18,341,991. Additionally, the BSW ICB fund a further £518,000 towards a range of mental health services commissioned by Wiltshire Council.

Lucy Townsend
Chief Executive

Wiltshire Council

Cabinet

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Purpose of Report

1. This report requests cabinet approval to utilise a 3-year extension clause in the CAMHS contract jointly commissioned with the BSW ICG and provided by Oxford Health Foundation Trust to enable the continuation of mental health support to children and young people.

Relevance to the Council's Business Plan

2. The proposal is relevant to the following priorities and objectives in Wiltshire Council's business plan:
3. The people of Wiltshire are empowered to live full, healthy, and enriched lives:
 - We get the best start in life;
 - We stay active;
 - We are safe;
 - We live well together;
 - We ensure decisions are evidence-based;
 - We have the right skills to prosper;
 - We have vibrant, well-connected communities.
4. To support the working themes in the council's business plan 2022 to 2032, commissioning priorities are to:

Priority 1 - ensure services are in the right place at the right time.

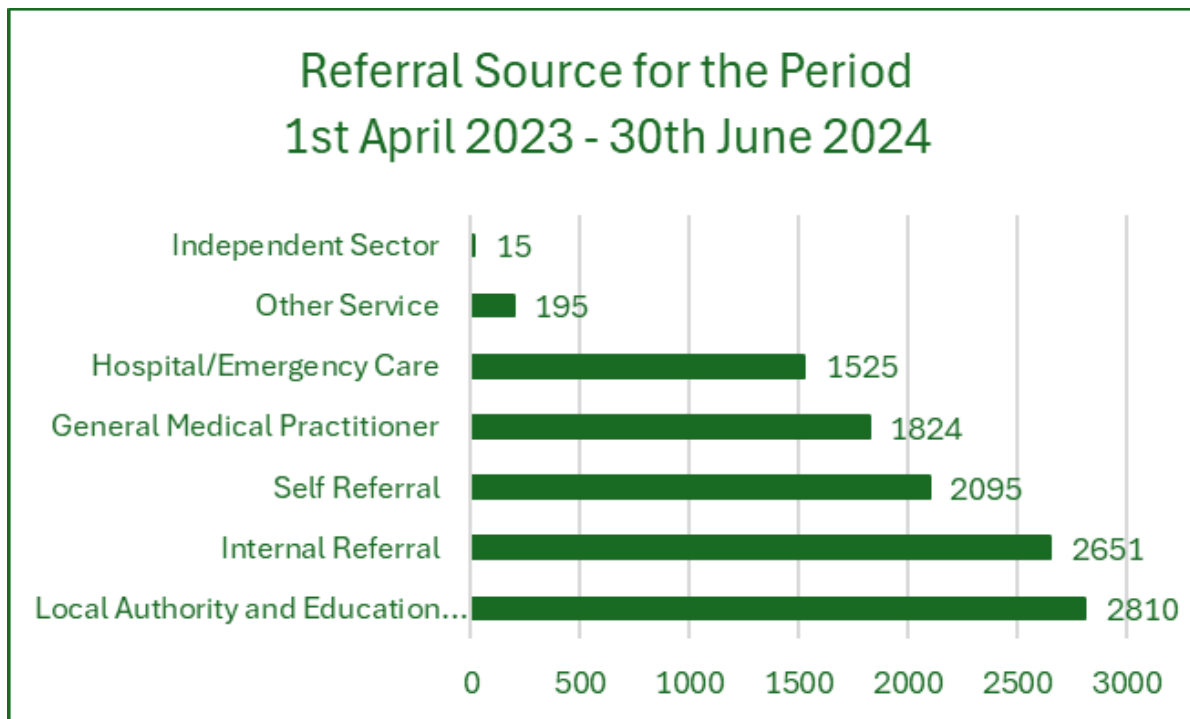
Priority 2 - ensure right people receive services in the right place i.e. increasing services delivered in the community and in people's homes.

Priority 3 - ensure right service, right price

Background

5. The Bath and Northeast Somerset, Swindon and Wiltshire Integrated Care Board act as the co-ordinating commissioners to the Child and Adolescent Mental Health Service contract with Oxford Health NHS Foundation Trust, with Bath and Northeast Somerset Council and Wiltshire Council acting as co-commissioners.

6. Swindon Borough Council does not financially contribute to the budget of the service and are therefore not recognised as co-commissioners.
7. The contract started in April 2018 for a period of 7 years and is due to end on the 31st March 2025. There is a 3-year extension option within the contract.
8. Wiltshire Council contributes a fixed amount of £518,000 to the Oxford Health Child and Adolescent Mental Health Services contract per annum.
9. For the year 2023 – 2204, Wiltshire Council's contribution accounts for 2.8% or £518,000 of the total financial package with Bath and North Somerset Council contributing 1.7% or £316,725. The remaining 95.5% or £18,341,991 was funded by the Integrated Care Board.
10. The Integrated Care Board's financial contribution varies yearly for various reasons including inflationary considerations, efficiency requirements, pay wards and grants.
11. The financial contribution is pooled with Bath and Northeast Somerset council and the Bath and Northeast Somerset, Swindon and Wiltshire Integrated Care Board's funding to deliver one service across the 3 localities.
12. The NHS England survey Mental Health of Children and Young People in England, 2023, Wave 4, which was a follow up to the survey in 2017, found that rates of probable mental health disorders for 8 to 25 years was about 1 in 5. This was 20.3% of 8 to 16 yr olds, 23.3% of 17 to 19 yr olds and 21.7% of 20 to 25 yr olds.
13. These rates remained stable in all age groups following a rise in prevalence between 2017 and 2020. In correlation to this, referrals to Children's and Young People's Mental Health services have risen to their highest rates.
14. It is widely accepted and recognised that half of all mental health conditions are established before the age of fourteen and that early intervention can prevent problems escalating and therefore bring societal benefits. This is evidenced by organizations such as, Foundations: What works for Centre for Children and Families (formerly known as Early Intervention Foundation).
15. The Child and Adolescent Mental Health service received 11,115 referrals for the between 1 April 2023 and 30 June 2024. The table below reflects the referral source and number of referrals received. This shows that the Local Authority and Education Services are the largest referrers to the service and reflects how valuable a resource it is for the community.



16. Wait times to access mental health services differ depending on the locality. The table below reflects the average waiting time between referral to first appointment for the period 1 April 2024 and 30 June 2024 and the percentage of children and young people seen within 4 weeks.

Locality	%age seen in 4 weeks	Average wait time in days
Marlborough	52%	53 days
Melksham	36%	90 days
Salisbury	43%	57 days

17. The national average for children and young people being seen within 4 weeks is 61%

18. A third of referrals received into the single point of access are diagnosed or suspected to have a neurodevelopmental condition. Support for children and young people with SEND is a strong focus for Wiltshire Council.

Main Considerations for the Council

19. In Wiltshire the iThrive framework is used to develop a robust universal offer that ensures prevention and early intervention, as well as a timely response when children and young people require specialist intervention.

20. The THRIVE Framework is an integrated, person centred, and needs led approach to delivering mental health services for children, young people and families which conceptualises need in five categories; Thriving; Getting Advice and Signposting; Getting Help; Getting More Help; Getting Risk Support.

21. In addition to this the Five to Thrive approach in Wiltshire is used to ensure families are supported via Health Visiting, Family Hubs, Family Help, and Early Years settings to develop positive mental health and reduce the risk of childhood trauma.

22. A wide range of third sector providers provide a high level of support for children and young people with mental health needs

23. As part of our work in aligning activity, learning from partners and sharing best practice Wiltshire Council chairs the local area CYPMH network which includes a wider variety of professionals, schools and third sector providers

24. A range of interventions are in place to support children and young people and ensure they can access services within the community. This includes:

- DSR (Dynamic Support Register) and Mental Health Support Workers
- PINS (Partnerships for Inclusion of Neurodiversity in Schools)
- Development Trauma Informed Practice supported by education settings
- Children Looked After Pilot
- Parenting Courses
- HCRG Community Emotional Wellbeing Counselling Services
- Primary Mentoring
- Mental Health First Aid training for schools
- School Mental Health Support Teams

25. Children can access mental health support in schools and/or via online platforms. Oxford Health operate a single point of access that supports children and families to navigate the system.

26. The CAMHS offer is an important part of the support available to Children and Young people’s mental health, their parents and professionals.

27. Wiltshire Council currently contributes towards the overall CAMHS offer, however it does not commission specific services within the CAMHS offer which makes it difficult to gauge the impact that would happen by removing Wiltshire Council’s contribution to the contract.

28. Oxford Health have considered this impact and considered 2 service impact scenarios, and both reflect a reduction in mental health professionals which subsequently impacts service delivery.

29. The table below reflects the number of roles that the current financial contribution funds in two services delivered by Oxford Health.

	Senior Mental Health Practitioners in getting help and getting more help – Band 6	In reach band 8a clinical specialists
The number of full-time equivalent roles £518,000 facilitates in each service.	8.27	6.06

- The table below reflects the reduced access and capacity that would be available if funding was reduced.

	Getting Help	Getting More Help
The reduction in the number of children and young people accessing first appointment support per year.	579	345
The reduction in the number of appointments available for children and young people service per year.	4342	4342

30. The reduction in the number of first appointments would have an impact on the waiting lists for those services, with the number not being seen reflecting the same size increase.
31. There would additionally be a reduction in clinical specialists impacting the following areas of delivery
32. A reduction in mental health support consultations to stakeholder professionals impacting upon children and young people accessing support and increasing and an escalation in their needs, more requiring an urgent response and remaining within services longer.
33. Less training to stakeholders and professionals reducing their confidence in working with children and young people and increasing referrals to services.
34. Given the critical nature of support for children and young people with mental health needs it is considered important that services continue as part of our broader approach to providing a robust mental health offer.
35. The CAMHS service sits alongside other mental health provision that is currently delivered with funding provided by the ICB.
36. To ensure that future service provision is committed to building upon the existing range of CYPMH services with a range of pilot schemes which will focus on the work third sector providers delivery and how this can be enhanced.
37. This will be developed through the local area CYMPH Network group.

Safeguarding Implications

38. Contracts give clear direction on how and when to raise a safeguarding alert to avoid any confusion about who will do this and/or assumptions that someone else will raise the alert.
39. Contracts also ensure that any issues relating to child protection are identified and appropriate referral made to Multi Agency Safeguarding Hub (MASH).

Public Health Implications

40. The contract directly benefits the health and wellbeing outcomes of children and young people in Wiltshire. Any risk to reduction in service capacity could compromise the mental wellbeing of children and young people. In addition, the extension would

provide an opportunity to complete a thorough needs assessment on the emotional and mental health of children and young people locally to inform the recommissioning of this service going forward.

Procurement Implications

41. The provision within the existing contract allows for a three-year extension, and as such is compliant under the Public Contract Regulations 2015.

Equalities Impact of the Proposal

42. The current contract is required to collect data on how it is supporting children and young people with protected characteristics to support in delivering a service that reduces or removes inequalities and barriers that exist to access.
43. Furthermore, it is recognised within the BSW ICB Draft All Age Mental Health Strategy that reducing inequalities and supporting all communities' groups is essential to delivering successful mental health services for all

Environmental and Climate Change Considerations

44. The primary environmental impacts of the service are related to emissions resulting from travel and building. There is scope within the current contractual arrangements to support with a review of environmental impacts and this includes where practicable, and meeting the needs of the young people, the delivery of some elements of the service remotely.

Workforce Implications

45. As this paper recommends a continuation of the contract there will be no workforce implications

Risks that may arise if the proposed decision and related work is not taken

46. The primary risks of not taking this decision are related to the impact on waiting lists.
47. The reduction in the number of first appointments would have an impact on the waiting lists for those services, with the number not being seen reflecting the same size increase.
48. There would additionally be a reduction in clinical specialists impacting the following areas of delivery
49. A reduction in mental health support consultations to stakeholder professionals impacting upon children and young people accessing support and increasing and an escalation in their needs, more requiring an urgent response and remaining within services longer.
50. Less training to stakeholders and professionals reducing their confidence in working with children and young people and increasing referrals to services.

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

51. It is recognised that the current service is struggling to meet demand for services and, furthermore, has encountered issues in providing reliable data on performance. A more focused approach from within Wiltshire Council has been developed to ensure that there is greater input from Council commissioners in the performance of the contract, alongside health colleagues, and this will be built upon explicitly within the contract extension.

Financial Implications

52. Wiltshire Council will continue to contribute £518,000 per annum during the period of extension, contributing to the overall CAMHS contract expenditure.

53. The BSW ICB will be investing additional funding to the provider over the lifetime of the extension to support additional service enhancements to meet need.

54. Additional services to support Children and Young People's mental health will continue to be provided through funding from the ICB to a value of £518,000, managed by Wiltshire Council.

55. As part of our joint commissioning arrangements there are procedures in place to ensure joint funds remaining at the end of any one financial year are moved to the specific reserve. An estimated drawdown from the reserve of £150,000 for 2025-26 will be utilised to delivery funding for pilot projects.

Legal Implications

56. Legal Services has been instructed to advise on this matter and prepare the relevant documents. Legal advice will continue to be sought until the conclusion of the project.

Overview and Scrutiny Engagement

57. Children and Young People's Mental Health remains a key priority and as such discussions have been undertaken with Children's Select Committee. As part of this there is a commitment to regularly update on activity and plans for future commissioning intentions.

58. The ICB All Age Mental Health Strategy has been presented to a joint Health and Children's Select Committee Rapid Scrutiny Exercise.

Options Considered

59. The option to do nothing and cease contributions to the service was considered. This option's impact would be a significant reduction in professionals working with children resulting in increased time to access mental health for support, a likely escalation in need for children and young people waiting for support and a reduction in assistance for professionals.

60. Wiltshire Council could commission a new independent Children's and Adolescent Mental Health Service. We would want to consult widely with the community and seek the voice of children and young people, parents and carers and professionals to ensure inclusion of those who are most impacted. The breadth of the exercise and the importance of exploring options through pilot schemes would require an extension to complete this successfully and comprehensively.

61. Wiltshire Council uses the 3-year extension in the contract and continues to co-commission the Children and Adolescent Mental Health Service provided by Oxford Health NHS Foundation Trust with Bath and Northeast Somerset Council and the Integrated Care Board.

62. Our recommendation is to use the 3-year extension in the contract and continue to co-commission the Children and Adolescent Mental Health Service provided by Oxford Health NHS Foundation Trust with Bath and Northeast Somerset Council and the Integrated Care Board.

63. The three-year extension option is recommended for the following reasons:

- The extension period of 3 years will enable Wiltshire Council Commissioning to realise the potential of recommissioning Children's and Young Peoples Mental Health Services by allowing enough time to complete a full and thorough review of the mental health services currently commissioned within the broad Wiltshire system.
- We will align strategic mental health commissioning outcomes to facilitate a long-term approach for children and young people's mental health services which compliments the current proposed Bath and North - East Somerset, Swindon and Wiltshire Integrated Care Board Mental Health Strategy. This will identify the outcomes and strategic priorities important to Wiltshire Council and Wiltshire's Community.
- We will start a Wiltshire Children's Mental Health Strategic Partnership group to identify service gaps, improve system level working, and shape future commissioning service model.
- We will work with Oxford Health and the Integrated Care Board to improve and focus on data collection, data quality and reporting to enable evidenced based commissioning decisions and to understand need, demand, and capacity and to inform earlier intervention commissioning as a preventative measure.
- We will consult with the community widely, seeking the voice and opinions of children and young people and their parent/carers. We will ensure inclusion and consult with communities of children and young who are considered vulnerable and under-represented, to enable us to address inequalities.
- We believe there is scope within the existing contract to support development and transformation of the service by focusing on pathways that are either not being explored or not understood to increase access and service delivery.
- We will strengthen the relationships between the Integrated Care Board, Wiltshire Council, Oxford Health, and stakeholders to encourage a wider systems approach to the commissioning and delivery of children's and adolescent mental health services.
- We will work with Oxford Health and the Integrated Care Board to understand the offer of the current service and Wiltshire Councils contribution. We will

identify any gaps, opportunities, risks and outcomes to inform our future commissioning.

- We will explore the current budget and use this time and opportunity to present a variety of options available for recommissioning.
- There is limited time to complete the tasks needed to recommission this service sufficiently in 6 months and an extension to the current service will mitigate this risk.
- This period of extension would mitigate the risk of commissioning a service without a full understanding of the impact to the existing co-commissioned contract, the impact to Wiltshire Council's mental health offer and provision and Wiltshire's Children and Young Peoples Community.

Conclusions

64. Children and young people's mental health is a national issue with record levels of referrals into mental health services, which is reflected in current demand in Wiltshire.
65. It is essential that we provide a service that delivers support to children and young people at the right time and in the right place.
66. The CAMHS service is an essential part of the continuum of support for families and it is understood that the current service is not delivering a high-quality service consistently.
67. Throughout the extension period Wiltshire Council commissioners will be holding the provider to account and ensure data is reported and performance challenged.
68. Wiltshire Council will work with partners to ensure that the full range of the mental health offer is understood and well publicised with children and families to support access to the right level of support at the right time.
69. To allow all stakeholders the opportunity to develop strategic and operational plans with evidenced outcome criteria it is recommended that the current contract extension be enacted to allow sufficient time to develop a robust and informative range of pilot schemes to learn from.

Alison Elliott - Director of Commissioning

Report Author: Kai Muxlow, Head of Families and Children Commissioning

Appendices

None

Background Papers

None