



Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

Cadelydd Dros Dro/Interim Chair: **Emma Woollett**
Prif Weithredwr/Chief Executive: **Tracy Myhill**

gofalu am ein gilydd, cydweithio, gwella bob amser
caring for each other, working together, always improving

Pencadlys Bwrdd Iechyd Prifysgol Bae Abertawe Headquarters
Un Porthfa Talbot, Parc Ynni, Baglan, Port Talbot, SA12 7BR . Ffôn 01639 683334

Swansea Bay University Health Board Headquarters
One Talbot Gateway, Baglan Energy Park, Port Talbot, SA12 7BR Phone 01639 683334

Rydym yn croesawu gohebiaeth yn y Gymraeg ac yn y Saesneg. We welcome correspondence in Welsh or English.

Director of Finance

Your ref/Eich Cyf:

Our Ref/Ein Cyf: LH/GH/SDA

Dyddiad / Date: 7 October 2019

☎ 01639 683306

✉ Lynne.Hamilton@wales.nhs.uk

Lynne Neagle AM
Chair
Children, Young People & Education Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

Sent by email only: SeneddCYPE@assembly.wales

Dear Ms Neagle

Welsh Government Draft Budget 2020 – 21
Children, Young People and Education Committee

Swansea Bay University Health Board welcomes the opportunity to present information to inform the Committee's scrutiny of the 2020-21 Draft Budget.

Strategic Context

The Health Board, as part of the West Glamorgan Partnership, has agreed a delivery plan for the Emotional Health & Wellbeing of Children. This is being progressed via multi-agency group, which includes the Health Board, Cwm Taf Morgannwg University Health Board (CTM UHB), parents, local authorities and the third sector. The strategic aims of the delivery plan are to:

- Improve accessibility to Child & Adolescent Mental Health Services (CAMHS) and specialist advice & support;
- Sustainable and accessible local services (universal services);
- Further develop and sustain the Neurodevelopment Disorder Service (NDD);



- Develop a better range of services for all children with emotional difficulties and wellbeing or mental health issues including transition and single point of access to services;
- Develop robust multi-agency arrangements for children with complex needs.

The Health Board and its partners are clear about the importance of CAMHS being seen as a multi-agency issue, which can only be resolved by a multi-agency, integrated response. As a result, CAMHS is a joint priority for the Regional Partnership Board.

CAMHS services for residents of Swansea Bay are primarily provided by CTM UHB. Both Health Boards are now progressing plans to build on recent improvements to services, and to undertake more fundamental changes to develop services on a sustainable basis over the medium to long-term. Key to this will be the introduction of an integrated delivery model will include a single point of access to the service via a telephone triage system, which will allow all professionals working with children and young people to access advice and consultation from CAMHS, and onward referral into CAMHS, where appropriate. The service will use the Choice and Partnership Approach (currently embedded within secondary CAMHS) to facilitate provision of the right support, at the right time, to the right children, young people and families, by the right clinician from across the service.

The benefits of the integrated model include:

- The individual CAMHS Teams operating as a single team across the Swansea Bay area, so improving the resilience of the service and reducing variation in access to services across the area;
- Improved access for patients with shorter waiting times;
- Advice and support for professionals;
- Appointments delivered at non-stigmatised outreach accommodation;
- Reduced impact of vacancies within CAMHS;
- Consistent decision making on assessment of referrals to reduce the risk of children and young people 'bouncing' around the system;
- Compliance against Welsh Government targets.

Health Board spending on mental health services for children and young people

This is set out below, using information from the Health Board's Programme Budgeting returns*, and includes spend and population for the former Abertawe Bro Morgannwg University Health Board (ABM UHB).

	2013/14	2014/15	2015/16	2016/17	2017/18
Total Adult & Elderly Mental Health Expenditure	110,304,498	116,003,211	118,250,098	125,296,729	125,079,824
Child & Adolescent Mental Health Services	4,016,184	5,565,229	5,231,795	5,628,918	5,471,758
CAMHS as % of HB Expenditure	0.43%	0.57%	0.50%	0.51%	0.49%
CAMHS as % of HB Mental Health Expenditure	1.79%	2.34%	2.16%	2.20%	2.14%
CAMHS Cost per Child	38.56	53.44	50.12	53.74	51.99

*Programme Budgeting is an annual costing exercise undertaken by all Health Boards breaking down total expenditure by Programme of Care. The Mental Health Programme Budget cost includes ABM UHB's share of services provided by CTUHB and services commissioned by WHSSC on a usage basis.

Programme Budgets are prepared on a retrospective basis – 2018/2019 is not yet available

Costs are calculated on a fully absorbed basis and will not be directly reconcilable to directly managed operational budgets.



Costs will inevitably fluctuate year on year particularly due to variable incidence of low volume / high cost cases.

Health Board spending on specific services:

Neurodevelopmental Services (NDD)

In 2017, the management of the NDD Service transferred from the former Cwm Taf University Health Board to the former ABM UHB. The NDD team have worked with stakeholders to develop evidence-based pathways, assessment frameworks and ongoing professional development tools to ensure that all children and young people within the Health Board footprint are able to access appropriate, robust and timely assessments with specialist clinical staff.

	2016/17	2017/18	2018/19	2019/20*
	£	£	£	£
NDD spend/forecast	96,747	527,426	556,949	527,534

*Reflects new Health Board footprint

CAMHS Crisis and Out of Hours Care

Psychological Therapies

Local Primary Mental Health Support Services (LPMHSS)

Inpatient Provision/ Service Development

Spending on the above services are included in the Programme Budget information above.

Health Board spending on low level children's mental health services.

This is included in the Programme Budget information above.

The Health Board has received additional funding of £300k, as described below, for universal/ tier 1 services. This is being targeted at the development of the Emotional and Wellbeing Service in schools.

Issues in relation to poor staff recruitment and retention that has an impact on spending on mental health services for children and young people

Recruitment and retention is reported by CTM UHB, as the primary provider of the services for our resident population, as a key challenge for CAMHS due to the specialist nature of the services provided.

Comments on recurrent funding for mental health services for children and young people. Including details of how this is being used to drive forward service improvements.

The Health Board is supportive of the ring-fencing of mental health monies, to ensure that there is a balanced focus of investment in both mental and physical health services. In terms of the ring-fence, this was established in 2008 and the original basis of allocation was



determined by the Programme Budget share of costs for mental health services as identified by health bodies at that time. While the use of Programme Budget shares was a useful way of allocating funding, there are a number of issues with its continued use over a prolonged period of time, for example, the ability to reflect changes in flows of activity between Health Boards.

The Health Board considers that it may be timely to review the ring-fence allocation and to consider a revised methodology to provide more relevant and transparent allocations that reflect local population needs, including the particular needs of children and young people. This would build upon the work currently being undertaken by Welsh Government on the Resource Allocation Formula.

In terms of improvement funding, the Health Board has benefited from the following:

- **Mental Health Transformation and Innovation Fund 2018-19:** £100k recurrent allocation to the Health Board, plus an additional £200k over three years (via the Regional Partnership Board) to develop the Emotional Health & Wellbeing Service in schools. This service recognises the importance of early intervention and will be provided to children between 4 and 11 years of age.
- **Mental Health Service Improvement Fund 2019-20:** £145k to support the expansion of primary CAMHS to provide increased capacity and a more robust team structure including psychological therapies; £128k to facilitate the integration of primary and secondary CAMHS through the implementation of a Single Point of Access; £92k for increased CAMHS crisis staffing expanding the hours of operation to midnight.
- **Integrated Care Fund 2018/ 2019:** £160k to provide additional CAMHS liaison support for screening, early intervention and prevention to support the single point of entry points within the local authorities; £544k to fund the new Western Bay Multi Agency Placement Support Service (MAPSS) which aims to help children with or at risk of mental illness and emotional and behavioural difficulties by providing specialist placement support; £500,000 capital to fund the refurbishment of Health Board accommodation for the Integrated Autism Service, MAPSS, NDD and CAMHS. The two revenue schemes for CAMHS and MAPSS have also been agreed for 2019/ 20.

Waiting times performance for first appointment and start of treatment. Details of demand for mental health services for children and young people, and the number and % of referrals accepted into treatment.

As described above, commissioning arrangements exist between the Health Board and CTM UHB for CAMHS services. Access has steadily improved over the last 2 years, and both Health Boards are now working towards the integrated model which will include a single point of access.

The current performance against the secondary CAMHS 28 day target, as at 30th September 2019 is:

Date: 30th September	Swansea Bay
Total WL	51
> 4 Weeks	1
Compliance	98.0%
Average Weeks	1:1



The residents in receipt of CAMHS with a valid Care and Treatment Plan has consistently complied with the Welsh Government target of 90% during 2018/19.

Access to primary CAMHS for an assessment has improved over the last 12 months. Patients are now on average waiting less than 4 weeks. Additional resources for primary CAMHS has been secured via the Welsh Government Service Improvement fund, as set out above, and the expectation is that access will continue to improve as a result.


Primary CAMHS waiting list- as at 24 September 2019.

Waiting List (LJVC)



Yours sincerely


Lynne Hamilton
Director of Finance


Gareth Howells
Director of Nursing & Patient Experience

