Overview of Referrals and Waiting Times for Emotional and Mental Health Services for Children and Young People

Referrals Received

| | Quarter 1 20/21 | Quarter 1 21/22 |
|--------------------------|-----------------|-----------------|
| Emotional Health Service | 256 | 481 |
| SWLSTGS MH trust | 238 | 347 |

Key Headlines, Waiting Times for EHS

Assessment (referral to choice assessment): 9% seen in 8 weeks 22% seen in 12 weeks, this is compared to 27% and 50% for 2020-21 last year. (So significant increase in wait since last year)

Treatment (choice to treatment start): 12% seen in 8 weeks 19% seen in 12 weeks. This is compared to 5% and 9% for 2020-21 (so some improvement in wait times for treatment on last year).

64% of referrals for assessment are seen within 18 weeks and 6% wait for over 6 months.

56% of people wait for between 6 and 12 months from assessment to treatment.

(the waiting time Key Performance Targets for South West London & St Georges Mental Health Trust (SWLSTGs) are set at 80% with 8 weeks from referral to assessment and 90% within 12 weeks. Kingston currently is around 92% for both).



What are we doing about it?

NOW:

- Significant mapping of current issues and pathways being undertaken across emotional and mental health services by a local task and finish group reporting to a senior leaders roundtable forum. Key focus on service demand & capacity, finance and workforce.
- A 3 month programme plan being developed to align tier 2 and tier 3 services between and a reconfiguration of a single point of access for CAMHS with clear waiting list management.
- Focus on prevention and early interventions and preventing the need for escalation to higher tiers of support. Developing our support to schools, creating a community emotional health hub.
- Utilising resources to invest in waiting list management within the EHS, additional clinicians within CAMHS, reducing neurodevelopmental waiting times and building these into next years funding requests



What are we doing about it?

In the next 6 months

- Refresh our CAMHS transformation plans for 2022
- Introduce the Thrive Framework to help us as a partnership to work as a whole system. Webinars will begin in December this year to introduce this.
- Begin work on developing and implementing our autism, neurodevelopmental pathways and Learning Disability CAMHS programme. And to offer positive behavioural support
- Review and implement our transitions pathways for mental health
- Pilot the community emotional health hub
- Implement improvement plans for the single point of access, eating disorders and self harm pathways.



21/22 Investments

| Area of investment | What will it do? | |
|--|--|--|
| CAMHS SINGLE POINT OF ACCESS (Investment has been agreed from both CCG & SWLSTG) | Bring in additional clinicians and improved access including an advice & guidance function | |
| EATING DISORDERS (CYP and adults): | Improve the current range of interventions available locally across both children and adult services | |
| LEARNING DISABILITIES CAMHS | Expand out current offer of expertise from SWLSTG to support our local services | |
| POSITIVE BEHAVIOURAL SUPPORT | We are developing our own resource to offer assessment and formulation of plans to support some of our most complex young people within the borough that we work with across health, social care and education. | |
| TRANSITIONS | Introduce transitions workers as part of the community transformation plans in 2022/23 and review all our CCG contracts to ensure transitions protocols with a focus on 18-25. | |

