

3. Decline recommendation*

*Where the recommendation has been accepted in part (number 2 above) or declined (number 3 above) an explanation of the reasons why and alternative wording should be provided below:

The report reflected the current plethora of information available for those wishing to access support for children and young people with emotional wellbeing and mental health needs.

Whilst the NHS CAMHS website provides information about a number of clinical services, learning from other local work highlights that any central on-line resource would need to be broader but include the specialist health provision to enable early intervention when needs arise.

Service providers will need to work together to ensure this broad offer is clear, easy to navigate including agreement on where best to “host” a central online resource. This could build on the system wide Now We’re Talking approach to promoting mental health and wellbeing support services for adults.

Bringing services together under one name

Recommendation 2: The Task Group recommends that all services to support children and young people’s mental health and emotional wellbeing in Worcestershire should be badged under a common name. This may be Child and Adolescent Mental Health Services (CAMHS) or an alternative name, as appropriate.

Response to recommendation: Please tick as appropriate

1. Accept recommendation **in full**

2. Accept recommendation **in part***

3. Decline recommendation*

*Where the recommendation has been accepted in part (number 2 above) or declined (number 3 above) an explanation of the reasons why and alternative wording should be provided below:

Recommendation accepted in part

The development of the roadmap (Recommendation 1) will enable partners to understand the breadth of provision to support the wellbeing and mental health of our children and young people in Worcestershire. Any change of name should capture this breadth of provision and will need careful consideration by partners and our on to sm2nn4bon h-2 (o wt)-2 (o)2 (s124pq21v(o)4 (1sn(u)4 (r 764 (n

Recommendation 6: The Task Group recommends that all partner organisations look into the possibility of developing a system of shared access to information.

Response to recommendation: *Please tick as appropriate*

1. Accept recommendation in full
2. Accept recommendation in part*
3. Decline recommendation*

*Where the recommendation has been accepted in part (number 2 above) or declined (number 3 above) an explanation of the reasons why and alternative wording should be provided below:

It is recognised that telling their story repeatedly is frustrating and distressing for children, young people and families. Despite the obvious benefits for children and young people with emotional wellbeing and mental illness needs, this recommendation is unrealistic in the near future due to the range of electronic systems that partners have to manage service delivery and provide support. However with the introduction of the Shared Care Record we can consider how best we further develop this to support the needs of children, young people and parent carers.

Significant investment would be required to develop a single system that meets the needs of the children and young people as well maintain or enhance the existing infrastructure and governance requirements within the respective organisations.

CAMHS SPA does record the number of referrals accepted/declined for CAMHS Choice although we do not routinely report this data. In addition we do not routinely report the number of children and young people accepted/declined for Partnership (treatment). The service reports waiting times for both Choice (18 weeks from referral to assessment) and Partnership (25 weeks from referral to treatment), Eating Disorders, Children and Young People Access, Routine Outcome Measures. A range of these are reported through the Trust Performance reports and onward reporting to the Integrated Care Board and the Mental Health Collaborative.

The Trust will work with the Mental Health Collaborative to develop external reporting of information beyond the current statutory requirements.
