

Date of issue: 14 April 2021

MEETING EDUCATION AND CHILDREN'S SERVICES

**SCRUTINY PANEL** 

(Councillors Basra (Chair), Kelly, A Cheema, Ajaib, Begum, Qaseem, A Sandhu, Sarfraz, Vacancy)

**Education Voting Co-opted Members** 

Vacancy

**Education Non-Voting Co-opted Members** 

Paul Kassapian - Secondary School Representative

Fifi El Sayed – Slough Youth Parliament

**DATE AND TIME:** TUESDAY, 20TH APRIL, 2021 AT 6.30 PM

**VENUE:** VIRTUAL MEETING

**DEMOCRATIC SERVICES** 

OFFICER:

(for all enquiries)

NADIA WILLIAMS 07749 709 961

#### **SUPPLEMENTARY PAPERS**

The following Papers have been added to the agenda for the above meeting:-

#### PART 1

| AGENDA<br>ITEM | REPORT TITLE   | <u>PAGE</u> | WARD |
|----------------|--|-------------|------|
| 6.             | Annual Safeguarding Report on Social Care  | 1 - 28      | All  |
| 7.             | Positive Change to the Commissioning and Delivery of our Children & Adolescent Mental Health Service (CAMHS) Tier 4 provision in Berkshire | 29 - 32     | All  |



<sup>\*</sup> Items 6 and 7 were not available for publication with the rest of the agenda.



### **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Education & Children's Services Scrutiny Panel

**DATE:** 20<sup>th</sup> April 2021

**CONTACT OFFICER:** Betty Lynch, Safeguarding Partnership Manager,

(For all Enquiries) 07821 811386

**WARD(S):** All wards

### PART I For INFORMATION

# SAFEGUARDING PARTNERSHIP ANNUAL REPORT 2019-2020 (Identified as Annual Safeguarding Report on Social Care on the agenda)

### 1. Purpose of Report

1.1 To provide an account of the effectiveness of Slough Safeguarding Partnership for the period 2019/20

### 2. Recommendation(s)/Proposed Action

2.1 The Committee is requested to note the report.

### 3. The Slough Joint Wellbeing Strategy, the JSNA and the Five-Year Plan

3.1 The Safeguarding Partnership priorities have been set using demographic information from the JSNA described in the annual report.

### 3.2 Slough Wellbeing Strategy Priorities

#### Priorities:

- Starting Well in relation to safeguarding children and
- Integration in relation to safeguarding adults.

### 3.3 <u>Five Year Plan Outcomes</u> (Compulsory Section)

- Outcome 1: Slough children will grow up to be happy, healthy and successful
- Outcome 2: Our people will be healthier and manage their own care needs

### 4. Risk Management

| Recommendat ion from section 2 above | Risks/Threats/<br>Opportunities  | Current<br>Controls   | Using the Risk<br>Management<br>Matrix Score<br>the risk    | Future<br>Controls   |
|--------------------------------------|--|---|---|--|
| The ECS panel to note the report     | Safeguarding partnerships should function well during the COVID 19 crisis which began towards the end of the reporting period. (last quarter | SLG oversight of risk log. COVID19 information sharing meetings commenced to identify and | 6 (Health & Safety Risk – Marginal impact. Low probability) | SLG has<br>continued to<br>oversee and<br>manage<br>emerging<br>risks. |

| Jan-March | ) manage       |  |
|-----------|----------------|--|
|           | emerging risks |  |

### 4.1 Other Implications

Financial: There are no financial implications in this report.

(a) <u>Human Rights Act and Other Legal Implications</u> (compulsory section to be included in **all** reports)

There are no Human Rights Act Implications.

(b) Equalities Impact Assessment

There are no equalities impact implications.

### 5. **Supporting Information**

- 5.1 The Safeguarding Partnership annual report 2019-2020 is attached and is in power point format. Links to more detailed reports are provided in the body of the report.
- 5.2 The report is an account of the key achievements and areas for development in relation to the work of the Safeguarding Partnership for 2019/20. The partnership is led by the Slough Strategic Safeguarding Partnership Leaders' (SLG) group which is made up of Directors of Adults and Children's Services, the Borough Commander and Directors from East Berkshire Clinical Commissioning Group and the Chief Executive Officer of Slough Borough Council. This group provides leadership and direction to the safeguarding partnership arrangements via subgroups and with the support of the Safeguarding Partnership team. The SLG leads on the safeguarding partnership in relation to children and adults and delivers on legislative requirements in the Children Act 2004 and the Care Act 2014. In Slough one combined annual report in relation to children and adults is provided to reflect the combined efforts of the partnership to address and prioritise both groups. The partnership commissions an independent scrutineer to ensure the business is subject to external scrutiny throughout the year and to provide consultancy and advice to SLG members. The Independent Scrutineer has completed this annual report following scrutiny of the work carried out in the reporting period.

### 6. Comments of Other Committees

6.1 There are no comments from other committees.

### 7. Conclusion

7.1 This annual report is late due to capacity pressures brought about by COVID19. The reporting period is for the financial year 2019-2020. The Covid 19 crisis therefore began towards the end of the reporting period. Normally this report is collated in the first quarter of the following financial year. However, partners could not prioritise this work during that time. The SLG therefore decided to postpone the collation of the annual report.

### 8. Appendices Attached

'A' Safeguarding Partnership annual report 2019/20



# Slough Safeguarding Partnership Annual Report

An account of the effectiveness of Slough safeguarding partnership

for the period 2019-2020

https://www.sloughsafeguardingpartnership.org.uk/

## **About This Document**

Read this online.



Follow the links provided to find more detail.

You can print out the document and the on line supplementary documents if you prefer.

If you need anything else,

E-mail: betty.lynch@slough.gov.uk

# Content

- Forward by Independent Scrutineer, David Peplow
- About Slough
- Progress against priority areas of work.
- Child Protection

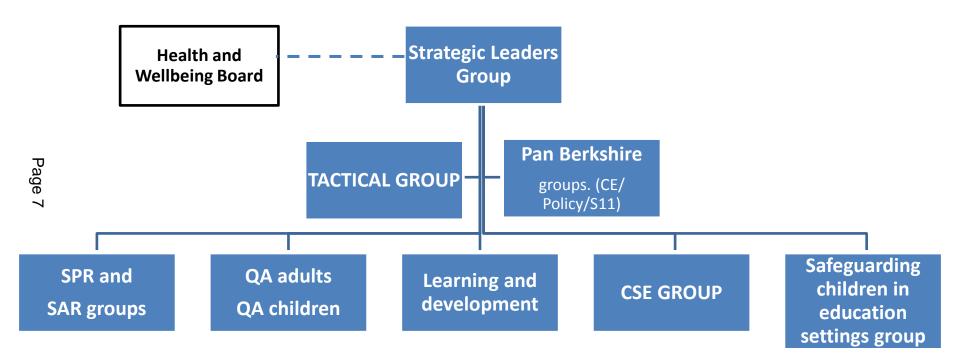
Page 5

- Safeguarding Vulnerable Adults
- Partners accounts
- Summary of strengths and areas for development

# Forward by Independent Scrutineer David Peplow

- Slough Safeguarding Partnership is pleased to present their first Annual Report on safeguarding adults and children.
- It is significant that during this period there was a requirement to transition from the previous Local Safeguarding Children Board to the new safeguarding Partnership arrangements encompassing the Care Act 2014 requirements for a Safeguarding Adult Board. The transition in Childrens had to be completed by 29<sup>th</sup> September 2019, half way through the reporting year. (Please click here to view the arrangements).
- While strategic leadership has strengthened and changed, our duties to safeguard and promote the welfare of children and adults has remained and been consistently delivered.
- The annual report outlines progress made against the objectives set in the annual report 2018/19 and agreed priorities for 2019-20 and the difference partnership working has made to how children and young people and vulnerable adults are protected from harm, abuse, neglect and exploitation.
- Although this report only covers events up to the end of March 2020 I must acknowledge that the Covid-19 pandemic which began in the latter stages of this reporting period has been a major issue. The next annual report will have more detail.
- The Slough Safeguarding Partnership would like to extend its gratitude to all staff across the
  partnership who work relentlessly, adapting and implementing innovative solutions to identify
  gaps and best support children and families and vulnerable adults.





# Slough population: Key Facts from The Berkshire Observatory

## https://slough.berkshireobservatory.co.uk/deprivation/

- Total Population of 149,539
- Children (0-19yrs) are 30.5% of the population that is 44,860
- Population predicted to grow to 161,900 by 2041
- It has a higher proportion of people aged 30-40 than the England average.
- It is ethnically diverse; 39.7% of the population is Asian or Asian British and 45.7% are White British.
- It has a highly transient population and high rates of refuges and asylum seekers.
- Slough is an attractive location for both European and global headquarters. Slough trading estate provides local employment opportunities.
- Slough is ranked 79th out of 152 upper-tier unitary authorities in England, where a ranking of 1 is the most deprived (based on the 2019 Indices of Multiple Deprivation average score).
- There are number of neighbourhoods in Slough that are among the most deprived in England.

# Safeguarding Children: Progress made since 18/19

|        | In 2018/19 we learned that we needed to;   | We did in 19/20  | What needs to happen next.   |
|--------|--|--|--|
| Page 9 | Deliver high level training seminars on the neglect strategy and the tool and monitor impact.  | Delivered neglect training to over 160 professionals from all relevant agencies which included the application of the tool and multi-agency communications. Evaluations were positive. | Review the strategy and tool. Include in multiagency case audits.        |
|        | In relation to exploitation of children we aimed to improve the use of intelligence and profiling. Carry out another self assessment when the JTAI themes are published. | One safeguarding partnership event reviewed the self assessment and created a holistic all age exploitation strategy.  | Explore the need for a local multi-agency group to deliver the strategy. |
|        | Develop the idea of "one "serious violence strategy.   | Produced a serious violence strategy produced by the Safer slough partnership  |  |

age

## CHILD PROTECTION PERFORMANCE

(FULL REPORT AVAILABLE ON THIS LINK)

An account of child protection performance is provided by the Children's Trust in the link above. As well as accounting for the performance of the Children's Trust, this data is analysed to help us to understand the multi-agency implications specifically around thresholds.

Some of the facts, analysis and conclusions are provided in the next three slides.

# **Child Protection: Some Key Facts**

- The Trust continues to ensure that the voices of children are heard, both on a daily basis through direct work and through our Reach Out (Slough's Children in Care Council) group.
- The required average duration for care proceedings is 26 weeks and Slough's average performance was 20.3 weeks, the best in Berkshire.
- Slough's looked after children have seen some amazing results in the last academic year.
   The GCSE results for June 2019 were better than national and statistical neighbours.
   Record numbers of our young people are accessing university.
- The Trust's children's home, Breakaway received an Ofsted rating of 'good'
- Work was undertaken to review and develop a new model of CP Conference based on promoting the welfare of and protection of children by working in partnership with families to achieve the best outcomes
- The Trust has increased the capacity of child protection chairs
- The Trust has carried out a programme of core and thematic audits
- Commissioned an independent person to come in and complete 50 audits at the Front
  Door looking at contact and referral and S47 and Strategy Discussions providing an overall
  assurance of the quality of contact and decision making and overall application of threshold
  for S47

## **Child Protection: Data**

The data provided in this report shows that child protection activity has been increasing over the last three years with more contacts, assessments and children becoming subject to CP Plans year on year.

The last 6 months of 2019/20 saw the most significant increases and this placed additional pressures on the Trust and on partners.

Performance in some key areas has improved, or remains in line with Statistical Neighbours, South East and England averages.

Trust worked closely with the Safeguarding Partnership and has supported the development and delivery of the Neglect Strategy and Tool, and the revision of the Threshold Document.

It is positive to note that despite the increase in contacts and referrals the repeat referral rate was lower than the previous year, although the percentage of children on a child protection plan for a second or subsequent time had risen slightly, it is important to continue to focus on the process of stepping down and supporting families following intervention to ensure the changes and improvements made are sustainable.

# Child protection data analysis continued

- The change in the front door incorporating early help referrals has allowed a more consistent overview of the threshold and level of need that is being identified and more consistent application of threshold as a result (as evidenced in audit and through DfE revision of children's cases).
- In some areas of activity the increased volume of demand has impacted on the timeliness
  of work being completed including child and family assessments and timeliness of ICPC in
  15 working days. The Trust continues to review this performance through a regular
  Performance Board and identify solutions to improve performance, which may include
  consideration of additional resources in some key areas.
- The Trust has in place a comprehensive improvement plan designed to address on going areas for improvement and development and progress is reported to the Trust Board and the Council through on-going contract monitoring activity.

# **Safeguarding Adults: Progress made since 18/19**

|  | Identified in 18/19 report   | Impact   | Next steps   |
|--|--|--|--|
|  | Need to deliver, collate data<br>and analyse and to carry out<br>multi-agency audits   | Learning and improvement framework agreed by SLG. Workshop by new Tactical group produced core data set.   | Data collection to be embedded in Tactical groups work.                              |
|  | Roll out risk tool via multi-<br>agency seminars.<br>Carry out Slough specific<br>safeguarding adults training<br>needs analysis.<br>Explore training that could<br>target both children and adults. | Risk tool seminars delivered with positive evaluations. Training needs analysis completed by learning and development group. All age exploitation training agreed. | Deliver all age exploitation training.   |
|  | Appoint permanent training and development manager. Training and development for the team.   | Training manager appointed and leading on multi-agency safeguarding training.  | Revise training needs analysis to ensure training delivers on agreed priority areas. |

Lage 14

# Safeguarding adults: data (FULL REPORT AVAILABLE ON THIS LINK)

An account of safeguarding adult performance is provided by Slough Borough Council Adult Social Care services in the link above. As well as accounting for the performance of ASC this data is analysed to help us to understand the multi-agency implications specifically around referrals. Some of the facts, analysis and conclusions are highlighted in the next slides.

| No of Concerns     | 1259 |
|--------------------|------|
| Received           |      |
| No of Safeguarding | 245  |
| Enquiries          |      |
| 'Conversion rate'* | 19%  |
| <b>*</b>           |      |

\* The proportion of referrals proceeding to assessment and/or safeguarding procedures.

# Safeguarding adults: Key facts/analysis

The number of safeguarding contacts remained significantly high. An audit of referrals/concerns in 2019 identified that the Safeguarding referral pathway was being used for other types of referral or communication with ASC, for example requests for Care and Support Needs assessments under the Care Act. A new triage protocol was introduced and will be evaluated in 2020/21.

# **Managing risk**

The roll out of the Multi Agency Risk Tool (MART) gives partners a pathway for supporting adults that partners are concerned about when the person either does not meet the Care Act safeguarding criteria or who makes a decision (with mental capacity) to decline a safeguarding enquiry or does not allow Social Services to work with them through another route. Training and communications has begun and will be further promoted in 2020/21

# Safeguarding Adults Types of abuse

The most common type of abuse is Neglect and Omission at 32%. The second and third most common are Financial Abuse (16%) and Psychological and Emotional (13%). This is the first time that Psychological Abuse has featured in the top three types and this is thought to be because this type of abuse is often a feature of many types of abuse, for example modern slavery.

# **Modern Slavery**

Modern Slavery has risen from 1% to 3.5%. As a result of the joint work, awareness raising and training. A Multi Agency Modern Slavery Group is actively working to improve the identification of modern slavery and build a range of targeted responses support individuals in Slough who are victims of this particularly worrying form of abuse.

# Self neglect

Self Neglect has risen from 5% to 10% of the safeguarding situations that Adult Social Care support. This is complex and sensitive work which is being supported by a new Pan Berkshire policy on Self Neglect. In 2020/21 Slough is developing a pathway and resources to support staff to work with people who hoard

# Child Exploitation in Slough Highlights of Multi-Agency Performance:

|         | Achievements  | Impact  | Next steps  |
|---------|---|---|---|
| Pe      | Slough is the host for Pan<br>Berks Child Exploitation group-<br>Screening tool developed | Tool accompanies referrals providing information to inform robust decision making.  | Evaluate screening tool.  |
| Page 18 | Slough Holistic approach to exploitation agreed.  | Improved practice in multi-<br>agency response to<br>safeguarding children from<br>exploitation.                          | Revise alongside learning from SPR when complete. Set up a safeguarding children from exploitation group.     |
|         | Delivery of training on exploitation and gangs.   | Over 120 professionals received training in relation to CSE and other forms of exploitation and specialist gang training. | Clarify governance with particular reference to knife crime and the role of the community safety partnership. |

Lage 1

# **Policy Development-Children**

Slough Partnerships gratefully acknowledge the leadership by Reading and Wokingham safeguarding partnerships in managing the Pan Berkshire policy and procedures sub-group.

- Key policies updated in 19/20 were as follows;
- Responding to Abuse and Neglect
- Referrals
- Child Protection Conferences
- Allegations Against Staff or Volunteers who work with Children
- Faith related Harmful Practice
- Child Sexual Exploitation
- Child Sexual Abuse in the Family Environment
- Many other policies were subject to review and updates

# Training for 2019-2020 (FULL REPORT AVAILABLE ON THIS LINK)

A new Learning and Development forum was established which included staff working in the fields of adult and children safeguarding.

All courses were planned to be co-facilitated by members of the forum or nominated staff from their agencies.

Due to this support, the Partnership continued to provide training free of charge to people working in the public and voluntary sectors.

The forum carried out a training needs analysis to inform the curriculum for 2020-21.

Due to the impact of COVID-19 on the ability to attend training, a further analysis was carried out during 2020 and an amended training offer was established.

# **Training key data highlights**

- 688 people have received training from a large spread of organisations including Slough Children's Services Trust; Slough Borough Council; Primary and Secondary Schools; Childrens centres; Wexham Park Hospital; Berkshire Health Foundation trust; Solutions 4 Health, Thames Valley Police; GP's from the CCG, Probations Services and the Voluntary Sector.
- 36 separate courses were provided during the year covering Children's Exploitation;
   Modern Slavery and Adult exploitation; Level 3 safeguarding for multiagency staff;
   Gangs awareness; Difficult conversations and Neglect and the Adult Risk tool and Framework.
- Excellent 94% satisfaction identified over all the courses with individual courses ranging from 91% to 97%
- Excellent average self reported competence variance increases of just under 3 scale points.
- 816 people booked on to training this year however there was a 16% (128 staff) non attendance

# How do we know we are making a difference? (Quality assurance)

## Safeguarding partners gather evidence from the following sources;

- Practitioners in both adults and children's services, through learning events and via their Partnership representatives,
- Feedback from young people, adult services users and their families.
- Leaders and managers identifying operational challenge.
- Multi-agency case audit.
- Performance data
- Case reviews.
- National policy and research evidence.

# Safeguarding Practice review group Summary account of activities 2019/20

| Achievements   | Next steps   | Impact  |
|--|--|---|
| Carried out 9 rapid reviews (Working Together 2018)  | Analyse the rapid reviews to identify recurring themes           | Emerging theme around knife crime but further analysis planned.   |
| Instigated two Safeguarding Practice reviews. One with a theme of Neglect and one in relation to a fatal stabbing. | Both SPR's will be published when criminal proceedings complete. | New contextual safeguarding arrangements to be developed in 2020 Neglect strategy and threshold review in SLG strategic plan. |
| Development programme A development training day for members was planned agreed 2020                               |  | nembers was planned for July  |

# Safeguarding Adults Review Group (SARP) Summary account of activities 2019/20

| Achievements  | Impact   | Next Steps.   |
|---|--|---|
| Discussed 7 cases, leading to two formal Safeguarding Adult Reviews.(SAR) | Learning about Multi-agency risk, resulting in delivery of the Multi-agency Risk Tool (MART) and training as well as publicity about pressure sore prevention. Campaign to reach unknown carers and new helpline for them to contact and get help. | Sustain MART through training and communications. Communications group will repeat communications on prevention of pressure sores on a quarterly basis, and sustain awareness raising for unknown carers. |
| Tracker for all reviews created to monitor delivery and impact.           | Readily available tool to monitor cases at each meeting.   | Carry out a retrospective analysis of all recommendations of all SAR's carried out in the last 5 years to ensure all actions delivered.   |
|   |  | Agree a development day for members.  |

# Partners' listed below have provided individual accounts to the Safeguarding Partnership

(All REPORTS AVAILABLE ON THIS LINK)

- Slough Borough Council
- Slough Children's Services Trust
- Berkshire Clinical Commissioning group
- Berkshire Health Care Foundation Trust
- Berkshire Fire and Rescue Service
- Slough Council voluntary services
  - South Central Ambulance Service
- Solution 4 Health
- Frimley Health NHS Foundation Trust
- Thames Valley Police
- Thames Valley Community Rehabilitation Company

# Slough Strategic Safeguarding Leaders Group

- Made up of accountable leads for safeguarding children, safeguarding adults and community safety.
- The Statutory agencies are Slough Borough Council, Thames Valley Police, Clinical Commissioning Group and Slough Children's Services Trust.
- Priority setting and leading on multi-agency safeguarding and community safety.
- Steering the sub-structure, redesigning to deliver effectively to Slough Residents.
- Creating "one" approach to multi-agency delivery.
- Providing overall leadership and clear governance

# Slough Strategic Safeguarding Leaders Group

### **AGREED PRIORITIES 2020/21**

Improved practice, communication and quality assurance around:

- Child abuse and neglect
- Adult abuse and neglect
- Exploitation
- Violence
- Domestic abuse

A strategic plan is in development in this reporting period.



Thank you for reading, please find further information below:

https://www.sloughsafeguardingpartnership.org.uk/



Update on change in Children and Adolescent Mental Health Service (CAMHS) Tier 4 service model

### Purpose of paper/action required

This paper provides a briefing on the change to the commissioned service model for the CAMHS Tier 4 service provided by Berkshire Healthcare.

An outline of the new service is provided with the timescale for implementation and impact on children, young people, and families.

The purpose of the paper is for discussion and to hear views, thoughts, and positive suggestions about how we can improve the ways that we work across multi-agencies to support this cohort of young people and their families.

### **Background**

Willow House commenced operation as a nine bedded CAMHS Tier 4 General Adolescent Unit (GAU) in August 2015 following a review of service provision at the then Berkshire Adolescent Unit (BAU) by NHS Specialist Commissioning.

The fabric and layout of this building is no longer suitable, and we are not able to develop the building to meet current standards for inpatient provision so we have, for some time, been working with NHS England on plans to develop a new facility at Prospect Park Hospital in Reading. However, learning from the national New Models of Care programme and a review of bed use and needs across the country, has indicated that there is not a need for more general adolescent beds in the South East region and our Commissioners have changed their focus to develop and deliver a new enhanced community care model for the majority of children and young people who are currently being admitted to this type of inpatient bed, in line with the ambitions set out in the NHS Long Term Plan.

Following this change of approach, the build at Prospect Park Hospital will no longer go ahead and Willow House will close to inpatient admissions at the end of April 2021. However, working closely with NHSE and partners in the Thames Valley CAMHS Tier 4 Provider Collaborative, as well as our clinical staff, patients and their families, we have developed a new 'out of hospital' clinical model that will ultimately ensure better care and outcomes for our children and young people in Berkshire. There are precedents already set for this in other parts of the country, which we are learning from, that are showing excellent results.

NHSE/I is currently transferring responsibility for commissioning of CAMHS Tier 4 services to local Provider Collaboratives under the national New Care Models programme. We are partners in the Thames Valley Tier 4 CAMHS Provider Collaborative which is led by Oxford Health NHS Foundation Trust (OHFT). Under this arrangement, OHFT will be taking over responsibility for commissioning CAMHS Tier 4 services for the Thames Valley from NHSE/I.

OHFT have confirmed their commitment to commission the new service and NHSE/I have confirmed additional funding for 2021/22 to enable smooth transition.







Willow House will remain the base for the new service, with transition from inpatient care to the new Out of Hospital service starting from March 2021.

#### How are we considering service user views?

We have spoken to some of our service users about their experiences of crisis and Tier 4 care, including asking them what they felt would have been better. The comments below are not specific to Willow House, but to experiences of crisis and Tier 4 care in general:

- The unit was too far away from where we live
- (the unit was a) poorly maintained, crumbling old house
- The unit felt like a lock up place for over medicated teenagers

#### What would have been better?

- Intensive community support therapy, regular check in phone calls to get advice/support
- Support from the specialist staff from the inpatient unit before becoming an inpatient- e.g. day patient/ intensive daily support offered when needed
- Home visits/other support within the home setting mental health carers supporting in the home
- Specialist education provision to support young people with mental health needs small classes, safe space, quiet space, trained mental health professionals working alongside teaching staffsomething like Willow House hospital school available in the community
- Community programme combining therapy, education, peer support all in one place
- Community provision at weekends/evenings
- A drop-in centre that could be open to people who have been into an inpatient environment several times
- Virtual/ telephone support available

We have taken these views into consideration, both in the development of this new service and in the concurrent programme of work to develop mental health crisis services for children and young people as per requirements in the NHS Long Term Plan. We are currently developing a programme of service user engagement and on-going involvement with the development, evaluation, and monitoring of the new service.

#### New service model

The new service will continue to meet the current specification for Children and Adolescent Mental Health Services Tier 4 (CAMHS Tier 4): General Adolescent Services including specialist eating disorders services (service specification no: 1723). It will provide assessment, formulation and treatment for young people under the age of 18 who have developed complex and persistent emotional and psychological difficulties that require intensive interventions above the level that can typically be provided by Tier 3 CAMHS and which would currently be provided through inpatient care. The service will provide a structured and comprehensive therapy programme, education, and wide-ranging activities that guide the development and recovery of the young person in a holistic way.

Treatment will be delivered through day care and intensive home treatment programmes that will be offered over extended hours 7 days per week, 365 days per year. Clinical care will be in line with relevant NICE guidelines and part of an integrated care pathway which includes 24/365 crisis/home treatment services (currently in development), all Tier 3 CAMH services, specialist neurodiversity services as well as adult mental health, acute physical healthcare, social care, education and voluntary sector provision. It will





Well led

also function as an integrated partner in the Thames Valley Tier 4 Provider Collaborative with learning utilised to develop community-based models across the collaborative.

The existing education provision will continue, and we are working with Wokingham Borough Council to review/develop this provision as the new service is embedded.

Figure 1 below gives a pictorial description of the proposed clinical model, which has four core components:

- 1. Liaison and consultation to Tier 3/crisis CAMHS to prevent escalation of need to Tier 4 level.
- 2. Access Assessment to Tier 4 services, working in partnership with Tier 3 CAMHS and relevant system partners to build on existing assessments and information and enable shared agreement and responsibility for care.
- 3. Intensive day care, community and home treatment care pathways based on NICE guidelines/clinical evidence and aligned with Tier 3 and inpatient pathways, delivered via individual, group and digital modalities.
- 4. Admission coordination and centralised bed-finding, liaison, and supported step down from inpatient care to reduce length of stay where a period of inpatient care is needed.

Acceptance and exclusion criteria for the service will be as per the national service specification.

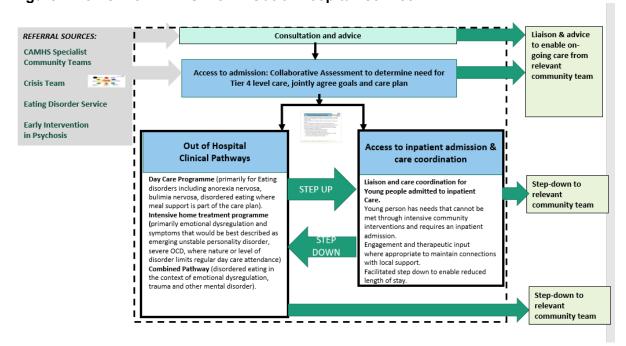


Figure 1 Berkshire CAMHS Tier 4 'Out of Hospital' service

### What does this mean for Berkshire young people?

Provision of services closer to home and increased engagement of community systems and support in acute care will bring improvements in patient experience and long-term outcomes.

Willow House is a General Adolescent Unit (GAU). Young people needing more specialist care currently go to another unit such as an Eating Disorders Unit (EDU), Psychiatric Intensive Care Unit (PICU), Secure Unit etc. In 2020, 56 Berkshire young people needed a Tier 4 inpatient admission. 50% (28) of these were admitted to Willow House, but the other 50% to another unit. Most went to other Units in the Thames





Valley Provider Collaborative e.g., Huntercombe near Maidenhead or Highfield in Oxford. But some were admitted to units that are outside of the Thames Valley e.g., Hertfordshire, London, and Kent.

For Slough specifically, 3 young people were admitted to Tier 4 inpatient units in 2020; 1 of these was to Willow House, the other 2 to other units in the Thames Valley.

The new service will have capacity to support 16 young people at any one point in time, with an annual capacity of 64. It has been designed to meet the needs of young people who would currently be admitted to a GAU or an EDU. The biggest benefit will be for young people needing intensive treatment for an eating disorder, who are most often admitted to units out of area. Once the new service model is fully operational, we will be able to provide appropriate care and treatment for approximately 70% of young people needing Tier 4 level services.

Learning from other areas, as well as the evidence informing the principles of new care models for Tier 4 CAMHS, suggests that earlier access to day care and home treatment service would improve family and wider system resilience and support positive risk management in these young people. The service has therefore been modelled on the basis that once embedded, we will receive and accept a higher number of referrals. We believe that as we move into Year 2 (2022/23) we will also be able to prevent more admissions, including some to PICU and that we will reduce the length of stay for young people who do need an admission.

### What if a young person does need inpatient care?

There are a number of units across the Thames Valley region which provide inpatient care, including some which are able to treat young people who require specialist inpatient eating disorder support or psychiatric intensive care, something we were not commissioned to offer at Willow House. National work across the network of Provider Collaboratives to realign the commissioning of beds has increased the number of General Adolescent beds that are available to the Thames Valley and programmes are underway to develop a new PICU unit and to build a specialist LD/ASD unit, something which is currently a gap in the South East region. Where a young person does need a period of inpatient care, the Berkshire service will retain responsibility for working with the Provider Collaborative Single Point of Access (SPA) to access an appropriate admission and will work closely with the inpatient team throughout any admission, to ensure that young people remain connected with their home systems and that length of stay is minimised.

There will be a need for additional beds in year 1 (2021/22) as we transition from the inpatient to 'Out of Hospital' model. Double running funding has been obtained from NHSEI to cover this period. From April 2022 we anticipate that the reduction in number of admissions to GAU and EDU combined will exceed the nine beds lost from Willow House.

The new service will therefore fully replace the capacity lost through the closure of Willow House and further reduce the number of inpatient admissions, keeping pace with the predicted rise in demand.

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