

CAMHS collaboration drives progress in SYB

Since its successful launch in October 2021, the South Yorkshire and Bassetlaw Children and Adolescent Mental Health Services Provider Collaborative (SYB CAMHS PC) has been developing new ways of working to deliver improvements in care.

The CAMHS Pathway Coordinator had previously sat in the administration team at the Becton Centre and the CAMHS Case Manager sat within NHS England's specialised commissioning team. When the Provider Collaborative went live, both colleagues transferred to work more closely together in the SYB Hub.

The three CAMHS PC provider partners (Sheffield Children's NHS Foundation Trust, Cygnet Hospital and Riverdale Grange) are now meeting weekly with the Pathway Co-Ordinator and Case Manager to review capacity and ensure effective bed management. A weekly situation report informs discussions around new referrals and admissions, support to planned discharges and transfers to adult services (where a patient is approaching the age of 18).



Lisa Boyles, Clinical Manager at Cygnet Hospital Sheffield, said:

"As a national independent provider we have a number of CAMHS services in other regions and treat young people from across the country. As part of the SYB provider collaborative we are supporting young people from the area and working with local providers which has made us feel part of a wider team. Individual providers are the ones delivering patient care but seeing and hearing what each other are doing on a regular basis allows us to share, learn and make sure we are delivering best practice whilst improving quality across the pathway."

This closer working and monitoring of patient flow between the three providers has **successfully reduced out of area placements as well as the number of people waiting for care, and the length of time they are waiting.**



Stacey Roulson, Service Manager for Sheffield Children's Trust Inpatient CAMHS, said:

"The improved communication and joint planning between the three provider partners is having a hugely positive impact in getting the right care for patients more quickly. Now we all have oversight of the number of patients receiving or needing care from both South Yorkshire and nationally. This means we can plan better for every stage of their journey through CAMHS services, meeting the needs of young people accessing support for mental health, autism and learning disabilities."

Prior to the new model of joint working, there could be between 8 and 12 young people waiting at any one time for inpatient care, this is down to an average of between 2 and 4 patients waiting at any one time.



Lisa Sutton, Director of Clinical Services at Riverdale Grange Specialist Eating Disorders

Hospital, said: *"Being part of the Provider Collaborative has facilitated an inclusive team approach, allowing and encouraging support and challenge to ensure a positive and forward-facing trajectory. This is enhancing further the excellent patient care already provided from Riverdale and the other provider teams within the Provider Collaborative."*



Meet the case managers

We welcomed three case managers from NHS England into the newly-formed SYB PC hub when the responsibility for commissioning specialised mental health, learning disability and autism services transferred over last October.

The Case Management Team are based at the Becton Centre in Sheffield but also work remotely across the patch, receiving referrals and liaising with providers to create packages of care that meet the immediate and longer-term needs of patients, from specialist inpatient care through to discharge.



Claire Hughes - Senior Case Manager - is a registered nurse and has worked as a clinician in low and medium secure units and the community.

She moved into an adult secure care case management role with NHS England Specialised Commissioning five years ago before transferring to the SYB commissioning hub.

I am passionate about mental health and my job, to me the most crucial element is to make sure patients have timely access to services and good quality care – particularly for the prison population. I've already seen things change for the better over the last few years but there's still more we can do.

As case managers, we are in a privileged position as we can come into a situation and offer a fresh pair of eyes. We can also bring the skills we have developed from working in other agencies to look at a patient pathway and question it or offer alternative solutions.

We're under different pressures to the providers, but one benefit of having a clinical background is that I've been there and seen it first-hand – I know how difficult it can be, so I am empathetic with the teams I work alongside and the challenges they face. This shared understanding often means we work better together to find solutions.

Together, we are shifting the culture, our thinking and our ways of working. The improvement of pathways, and the funding being closer to the patient and the providers of services, means there is a collective incentive to make the patient journey better. Streamlining services so patients have a smoother transition through their treatment and recovery means we can invest in the services that will support their discharge and help them live independently.

The word 'collaborative' is absolutely key to what we are doing across South Yorkshire and Bassetlaw. Previously we've all been busy blowing our own individual trumpets but now is the time for us to get a collective tuba and make a bigger noise!



Andrew Flerin – Adult Secure Care Case Manager - qualified as a mental health nurse in 1994 and has since worked as a staff nurse and then ward manager in adult low secure care, rehabilitation and learning disability services. He worked at Bradford District Care Trust as a clinical manager for secure care and in mental health rehabilitation and learning disability services before becoming a case manager at NHSE and joining the SYB hub team.

“My family has always worked within the caring professions – they owned a nursing home – so I suppose nursing was something that appealed to me from my school days. In my case management role, even before the pandemic, I was either working from home or within the services and sites where we managed cases, rather than having a static office base. How we did case management during Covid changed due to the difficulties in accessing provider services, but with the use of online calls we remained responsive, attending more meetings and actioning things even quicker sometimes.”

“Face to face remains important though. Part of our role is to connect with services and build relationships with the staff and service users. It’s too easy to lose that personal contact with providers if you are not careful. Whilst the case management of high secure patients has remained with NHSE, Claire and I can still look after around 75 Adult Secure Care patient cases each, at any one time. We’ve been working on the ‘safe and well’ reviews recently - part of the national drive to ensure people with a learning disability and Autism are well supported and safe in their environments.”

“Together, we’ve been able to unlock some of the different pathways and successfully connect patients to the community services that will make a real difference to them. We are seeing an overall positive reduction in length of stay in secure services for our learning disability and Autism patients through our joint work to support them into community living. Seeing people living successfully with support in the community is really rewarding.”



Suzanne Chafer - CAMHS Case Manager - is a social worker by background and previously worked at a low secure setting in Bassetlaw, helping people prepare for discharge. She joined the case management team in August 2020 and was then seconded into the CAMHS case manager role.

“The commissioning aspects of case management have always interested me, so I decided to go for the deputy case manager role within NHSE Specialised Commissioning as a development opportunity to find out more.”

“Despite starting the role during lockdown, I still felt really supported. We make a great team, Andrew is the sensible one, Claire is the organised one and I’m... let’s just say I’m less organised! We share our experience and this helps broaden everyone’s knowledge and means we can cover each other’s roles more easily when needed.”

“I work with patients and families supporting those aged 13 and over with learning disabilities, autism or mental health issues including eating disorders. Referrals usually come from community teams or general hospitals, and I work with some incredible inpatient and community teams across the patch including the Becton Centre, Cygnet Hospital and Riverdale Grange. It’s really rewarding seeing the positive changes young people can make once they are connected to the services they need.”

“The secondment has been great, I’ve really enjoyed working within CAMHS. I’ve been supporting a young person who has been an inpatient for 18 months and she’s just getting towards discharge. It’s been amazing to watch her journey and recovery, it’s the sort of case that makes you get out of bed in the morning and do what you do.”

Visit to Riverdale sees collaborative working across Eating Disorder Services

Two SYB PC Hub colleagues enjoyed an inspiring visit to Riverdale Grange to see first-hand how current inpatient eating disorder services are being delivered and hear future plans for service improvement.

Dr Amy Wickstead, a Clinical Psychologist - and one of two clinical leads for Eating Disorder Services in South Yorkshire and Bassetlaw - was joined by colleague Claire Hughes, Case Manager for Adult Secure Services to look round the specialist unit in Ranmoor, Sheffield.

Riverdale Grange is a provider partner in both the South Yorkshire and Bassetlaw Provider Collaboratives for both AED and CAMHS. Amy and Claire met Riverdale's Operational Manager, Vicky Rogers and Clinical Director Dr Lisa Sutton for a tour of the unit which has 18 inpatient beds equally divided across its young people and adult wards.



Said Amy: *"Since the pandemic there's been a significant increase in the number of patients diagnosed with an eating disorder and the severity of their condition; especially in younger people. This puts real pressure on services across the pathway; including at the specialist inpatient end, for providers like Riverdale Grange. The staff there show a real understanding that the patients they are supporting are not being wilful they are just very scared and need clear guidance and support to take steps forward in recovery. No one asks to have an eating disorder, it's not a choice."*

Inpatients need intensive support to make key behavioural changes and get them on a sustainable road to recovery. Relationships between hospital and community services are crucial in providing the right care and treatment at the right time to help break the cycle of readmission that some patients find themselves in.

Said Claire: *"We were really impressed with what we saw at Riverdale Grange. It's clear that there is already fantastic joined up working with community services and a real desire to improve the pathway and work even better together. As part of the handover of case management from NHSE we have been getting to know the patients and building relationships with staff. To see the service in action was a really positive experience."*

As part of the Provider Collaborative, Riverdale Grange has been able to better manage admissions and reduce the number of inpatients from out of area – the vast majority of its inpatients are now from SYB. The unit has recruited a clinical psychologist who will be providing an additional session from the autumn and a CBT psychotherapist is already in post to support behavioural change through a compassionate, therapeutic approach.

Future developments include exploring how the space at Riverdale Grange can be used for an extension of the 'Stepping Stones' project already being trialled within young people's AED services. This is essentially a step-down care package tailored to the specific needs of each patient. It aims to reduce the length of inpatient stays by providing intensive day services to support the transition from hospital to home following discharge.

Vicky Rogers, Operational Manager at Riverdale Grange said: *"We work closely with the NHS and community services to provide care and treatment which is caring and responsive. We are committed to a collaborative, patient-focused approach that is dedicated to the needs of this client group and supports their recovery in a welcoming and calm environment."*

Dr Lisa Sutton, Clinical Director at the unit, added: *"This is highly specialised work and we are constantly reviewing services to make improvements and deliver the highest possible standards of care and treatment. Being a partner in the collaborative means we can communicate across services and join up our thinking and planning when it comes to streamlining pathways and making the patient's experience of care as positive and impactful as we can."*

Learning and engaging

The SYB CAMHS PC has been linking with other CAMHS Provider Collaboratives across the country to learn from their best practice.

Initiatives from elsewhere that they are keen to explore include the opportunity to invest in high-intensity community services, development of an eating disorder day service and employing local family ambassadors to work with the provider collaborative to provide insight and feedback from those who have experience of family members being in secure CAMHS services.

Work is ongoing to set up a mechanism for routinely engaging young people with lived experiences of CAMHS services and embed safeguards to reduce health inequalities.

The Sheffield Children's Youth Forum already actively engages with the NHS on CAMHS services and changes, and the forum is keen to link that work into the Provider Collaborative to ensure young people have a strong voice.

ICBs go live as statutory NHS organisations



SYB Provider Collaborative boundaries remain the same

On 1 July 2022, 42 Integrated Care Systems (ICSs) were established across England. Each includes an Integrated Care Board (ICB) – a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in the ICS area. ICBs replace clinical commissioning groups.

Bassetlaw has been incorporated into the NHS Nottingham and Nottinghamshire ICB, therefore the SYB Provider Collaborative will work across both the NHS South Yorkshire and NHS Nottingham and Nottinghamshire ICB areas. **Says Michelle Fearon, Programme Director for the SYB PC:** *“We look forward to continued working with our commissioning partners to ensure that inpatient and community services are joined up and focused on the same priorities as we seek to improve the patient journey through mental health, LD and autism services.”*

Welcome to the team!

The SYB Hub has welcomed new faces to the Team over the last few months, with two new project managers now in post. Eleanor Obeng-Apiah (pictured top) joins us as Adult Secure Care Project Manager and Latesha Brown is the new Project Manager for CAMHS and AED.

Dr Jenny Nicholson joins the Hub as Clinical Lead for the CAMHS Provider Collaborative and Sally Rawcliffe-Foo is the new Head of Quality and Governance. Mah Ndi (pictured bottom right) joined us back in April as finance and contracting administrator. Christiana Quarshie is the new Patient Pathway Co-Ordinator, replacing Jennifer Armstrong who has moved over to the Quality and Governance Administrator role.

We have also said a fond farewell to colleagues moving on to new adventures including Jane Reilly, Lou Peppard, Becky Driscoll and Sophie Clarke – they have all played a crucial role in establishing the Provider Collaborative over the last year or so and they leave with our very best wishes and gratitude.

The Hub is currently in the process of recruiting a Head of Finance and a substantive CAMHS case manager, more details soon.



In our next issue:

- Clinical Transformation progress
- Engaging and involving those with lived experience of care
- Tackling health inequality