



Financial Year	2017/18
Proposal no.	CS-2017-305
Directorate	Children's Services

Savings Programme Pre-consultation Report

Subject:	Rationalisation of additional funding for Child and Adolescent Mental Health Service (CAMHS)
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1 Recommendations

- 1.1 It is recommended that members consider the proposal to end the current Service level agreement for the additional Child and Adolescent Mental Health Service (CAHMS) in order to achieve savings of £350k.

Reason for recommendation

- 1.2 Having reviewed the work being undertaken by the CAMHS service, it is felt it no longer provides value for money in improving the outcomes for children and young people receiving support across Children's Social care. In the current economic climate, it is not cost effective to have 7 dedicated workers for a minimal number of young people.
- 1.3 Those young people identified as having issues with mental health will access the Healthy Young Minds service through conventional means i.e. through referrals from GPs to Child and Adolescent Mental Health Services (CAMHS).

2 Background

- 2.1 The local Authority currently seconds 4 full time workers and three part time workers to the CAHMS service which is operated by XXXXXXXXXXXXXXXXXXXX. Originally, this was to target vulnerable young people across all services, including looked after children, by working with the cared for children's team, young offenders, by working with the Youth Offending Team, children in need and those on child protection plans by working with first response and child protection and court team. The service was also intended to target those young people who were subject of initial referrals to the Multi Agency Screening Service (MASS).
- 2.2 A monitoring process is in place to measure the impact of this resource on those young people served. It is not possible to demonstrate that services are delivering value for money, the service needs to reconsider current arrangements.
- 2.3 During the last year the Clinical Commissioning Group (CCG) has accessed significant additional funding through the CAMHS transformation programme for Rochdale Borough. This has added almost £1m in additional resources and through work with the Innovation Unit, the council and CCG have worked together to co-design the services that are now delivered through this grant with young people and their families. This has added significantly to the level of provision in the borough, with support for young people's emotional and mental health now beginning from a level of early help. This has led to a need to review the overall provision in this area.

3 Financial Implications

The saving proposal is 100% of the total budget for the area of service affected.

3.1 Table 1 provides details of the Reduction in CAHMS funding

	Savings 2017/18		Savings 2018/19		Total savings	
	£k		£k		£k	
	On-going	One off	On-going	One off	On-going	One off
Employees			273		273	
Other Costs			77		77	
Income lost						
Net savings			350		350	
Additional income generated						
Total savings			350		350	
Implementation costs						
Total savings less implementation costs			350		350	

4 Asset implications

4.1 There are no asset implications arising from this report.

5 Voluntary Sector impact

5.1 There are no Voluntary Sector impacts arising from this report.

6 Consultation

6.1. The following will be consulted with

- General Public via the Consultation Hub
- Service users
- Clinical Commissioning Group (CCG)
- Pennine Care NHS Foundation Trust
- Voluntary Sector
- The Den and Listen Up Groups of Cared for young people
- Duties under Childcare Act 2006

6.2. The Council must ensure that it remains open-minded throughout the consultation period to all alternative proposals and expressions of interest.

7 Alternatives considered

7.1 Members could decide not to take the proposal forward and identify alternative savings proposals

8 Risk Assessment Implications

8.1 Direct access to CAHMS, through social work staff located in that service will no longer be available for young people who are involved with Children's Social Care however this vulnerable group will still have full access to what are now enhanced services, commissioned by the CCG.

9 Legal Implications

9.1 There are no legal implications arising from this report. There is no statutory requirement on the Local Authority to provide such a service.

10 Personnel Implications

10.1 Subject to any final decisions on the service delivery element of the proposals outlined within this report there may be personnel implications for the council's workforce and this consultation with the workforce will be undertaken in accordance with council's Personnel Policy Framework.

11 Equalities Impacts

Workforce Equality Impacts Assessment

11.1 The Council will undertake a Corporate Workforce Equality Impact Assessment based on those employees identified at risk of redundancy at the start of formal consultation which will commence in November 2016 and this will be reviewed against the current workforce profile.

Equality/Community Impact Assessments

- 11.2. There are equality/community issues arising from this report. More detail can be found in the Equality Impact Assessment in Appendix 1.

EQUALITY IMPACT ASSESSMENT FOR SAVINGS PROPOSALS

1. Please state the name of the officers leading the EIA
XXXXXXXX XXXXX/XXX XXXXXXXXX
2. Who has been involved in undertaking this assessment?
Rochdale Borough Council Children's Services
3. What is the scope of this assessment?
To assess the impact of rationalising the additional support in relation to the CAMHS service
4 a). What does the function currently do?
b). Describe the needs which this service meets?
a) Provides support to young people diagnosed as having mental health issues. b) The service operates to meet the needs of those young people where an issue regarding mental health has been identified and where specialist support is required. It is one of a number of services available.
5. What proposed changes do you wish to make?
It is proposed to end the additional support for the CAMHS Service recognising that the young people identified as having issues with Mental Health can access the Healthy Young Minds Service through conventional means.
6. Who are the key stakeholders who may be affected by the proposed changes?
Young people Pennine Care NHS Foundation Trust Clinical Commissioning Group
7. What impact will this proposal have on all the protected groups?
Race Equality
It is not envisaged there will be any negative impact on this group of children/young people because the proposal is not seeking to change access to the Healthy Young Minds service for those young people that require it. Access can be achieved through GPs or other health referrals.

Disabled People
All service users will still be able to access services via existing and established pathways. There will be no adverse impact on this group from the proposal to end the current Service Level agreement. In the event there is a specific need identified within any assessment undertaken, arrangements should be made to ensure the service provision is sensitive to any identified disability.
Carers
All service users will still be able to access services via existing and established pathways there will be no adverse impact on this group from the proposal to end the current service level agreement.
Gender
All service users will still be able to access services via existing and established health pathways, there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within any assessment undertaken, arrangements should be made to ensure the service provision is sensitive to any identified gender issues.
Age
All service users will still be able to access services via existing and established health pathways there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within a health assessment, children's services will provide support where safeguarding needs have been identified.
Armed Forces and Ex-Armed Forces Personnel
All service users will still be able to access services via existing and established health pathways and there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within a health assessment arrangements should be made to ensure the service provision is sensitive to any identified military issues.
Religion or Belief
All service users will still be able to access services via existing and established health pathways and there will be no adverse impact on this group from the proposal to the current service level agreement. In the event there is a specific need identified within a health assessment undertaken, arrangements should be made to ensure the service provision is sensitive to any identified religious or belief issues.
Sexual Orientation
All service users will still be able to access services via existing and established health

pathways and there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within a health assessment undertaken, arrangements should be made to ensure the service provision is sensitive to any identified sexual identify issues.

Gender Reassignment

All service users will still be able to access services via existing and established health pathways and there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within a health assessment that is undertaken, arrangements should be made to ensure the service provision is sensitive to any identified gender reassignment issues.

Pregnant Women or Those on Maternity Leave or Those who have given Birth in the Previous 26 weeks

All service users will still be able to access services via existing and established health pathways and there will be no adverse impact on this group from the proposal to end the current service level agreement. In the event there is a specific need identified within a health assessment, arrangements should be made to ensure the service provision is sensitive to any identified maternity issues. This will included young women under 18 who are pregnant where safeguarding issues have been identified and additional support from children's services is required.

Marriage or Civil Partnership

All service users will still be able to access services via existing and established health pathways and there will be no adverse impact on this group from the proposal to end the current service level agreement. Whilst the vast majority of service users are not likely to be married or in a civil partnership due to their age, there may be issues identified for their carers/parents who are.

8. Conclusions and Recommendations

What are the main conclusions and recommendations from this analysis?

All young people are able to access the Healthy Young Minds Service regardless of whether they are involved with children's services or not.

Children's services will continue to provide support for the most vulnerable and for those at risk. Those young people where mental health issues have been identified will continue to access the Healthy young Minds service (CAMHS) as and when required.

The conclusion from this impact assessment indicates there are no identified detrimental elements from this proposal for protected groups.

The recommendation is to proceed with the proposal to end the current Service level agreement with CAMHS as operated by Pennine Care NHSFT.

9. In the box below please provide details of who you will consult with on the proposals, when you consult, and the methods which you will use to consult. In the box below

The Consultation and Inclusion Methodology Used

A consultation plan has been developed and uses the following methodology;

- General Public Consultation via the Consultation Hub
- Focus group with young people
- Letters and direct communication with partner agencies including health.

10. Produce an action plan detailing the mitigation measures that you propose to put in place to address any adverse impacts.

Mitigation Measure	Action	Responsible Officer	Implementation Date	Review Date	Evaluation Measure
Action Plan can be adjusted to meet any change in circumstances	Action plan to be adjusted to meet new circumstances, e.g. staff leaving the service	XXXX XXXXXXXXXX	31 st October	1 st October	Young people are receiving services from Healthy Young Minds