



Item No: 22

Meeting Date: Wednesday 23rd March 2022

Glasgow City Integration Joint Board

Report By: Mike Burns, Assistant Chief Officer, Children's Services and North East Operations

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Mental Health Recovery and Renewal Fund: Child and Adolescent Mental Health Service

Purpose of Report:

The purpose of this paper is to update the Integration Joint Board on developments regarding the proposals for the planned use of the first and second tranche of the new Scottish Government Mental Health Recovery and Renewal Fund 2021/2022 and 2022/23 specifically in relation to Specialist Children's Services (SCS) CAMHS. This additional report provides amendments to the report approved by the IJB on [1st December 2021](#), and the IJB is asked to note the approval of these amendments under delegated authority.

This additional report is necessary to take account of the funding being confirmed as recurring, consequently enabling the recruitment to occur with permanent rather than temporary posts. This is hugely positive and will significantly assist with the challenging task of recruiting specialist staff for the Glasgow partnership. In addition, further coordination with the neurodevelopment funding from Scottish Government enables the partnership to adopt a more integrated and coordinated approach to both workforce recruitment and planning. Subsequently, requiring an adjustment in the number of posts and the cost of each post.

Background/Engagement:

Initial proposals were approved by the Integration Joint Board following consideration by the CAMHS Mental Health Recovery and Renewal Programme Board; the

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	Mental Health Programme Board; Board wide Mental Health Heads of Service group; HSCP Chief Officers meeting; NHSGGC CMT.
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Recommendations:	<p>The Integration Joint Board is asked to:</p> <p>a) Note the approval by the Chief Officer and Chief Officer Finance and Resources, under delegated authority, of:</p> <ul style="list-style-type: none">• The overall financial plan as outlined in Appendix 2.• The amendments to the plans for the funding made available by the Scottish Government for the Phase 1 Mental Health Recovery and Renewal priorities for CAMHS, as outlined in appendix 1.• The proposed spending priorities identified for one element of the Phase 2 funding, specifically the implementation of the National Neurodevelopmental Specification for Children and Young People, as outlined in appendix 2. <p>b) Note that funding proposals are subject to regular review and may require to be amended to ensure the needs of children, young people and their families are best met.</p>
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Relevance to Integration Joint Board Strategic Plan:

Investment under the Mental Health Strategy is relevant to all of the IJB's key priorities expressed in the Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	The strategy and spending plans are relevant to all nine National Health and Wellbeing Outcomes.
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Personnel:	Staff partners will be involved in shaping these workforce developments.
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Carers:	None
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Provider Organisations:	None
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Equalities:	Individual EQIAs will be completed as part of the strategy.
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Fairer Scotland Compliance:	None
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Financial:	The proposals have been developed to fit within the allocation from Scottish Government. Given that proposals are linked to recruitment the ability to spend allocations this year will be limited. This will be reflected in discussions with Scottish Government.
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Legal:	None
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	None
Implications for Glasgow City Council:	None
Implications for NHS Greater Glasgow & Clyde:	None
Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input checked="" type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Purpose

- 1.1. The purpose of this paper is to update the Integration Joint Board on developments to the proposals for the planned use of the first and second tranche of the new Scottish Government Mental Health Recovery and Renewal Fund 2021/22 and 2022/23 in relation to Specialist Children's Services (SCS) CAMHS.
- 1.2. Specifically, this paper reconciles several adjustments to post grades and numbers of posts and to note posts now to be recruited as permanent. Furthermore, some posts are no longer required due to other developments that have occurred since initial plans were drafted, and some different posts are now required that had not initially been anticipated.

2. Background

- 2.1. Proposals in relation to the planned use of the first tranche were agreed at the Integration Joint Board meeting held on 1st December 2021. Since those proposals were developed, we have continued to work to ensure alignment with developments planned with the Community Mental Health and Wellbeing investments in tier 1 and tier 2 services. As these plans have evolved, thinking in relation to plans for CAMHS have also evolved which has reduced the need for some of the posts initially planned.

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- 2.2. In addition to this, the funding relating to implementation of the CAMHS specification and the expansion of transition timescales for CAMHS from age 18 up to the age of 25 years old for targeted groups and those who wish it, has been confirmed as recurring. Proposals have therefore been re-costed, and amendments made accordingly.
- 2.3. Priorities for spending have also since been determined in relation to part of the second tranche of funding, specifically the funding related to developing the capacity of services to provide access to specialist neurodevelopmental professionals to support the implementation of the recently published National Neurodevelopmental Specification for Children and Young People. It makes sense, in terms of both the challenges of recruitment and integration (taking a whole and single system approach) to coordinate these funding streams and recruit in an integrated cross service capacity. Furthermore, it is critical that this recruitment is not fragmented, but instead approached in a coordinated and systemic fashion.
- 2.4. It is important to highlight that while there continues to be a developing understanding of the impact of Covid-19 on the mental health and wellbeing of children and young people over the short and longer term, this is not yet fully understood. In addition, given the Community Mental Health and Wellbeing investments in tier 1 and tier 2 services, it is becoming evident that the nature of need that requires to be met within community CAMHS teams is increasing in complexity and acuity. It is anticipated that this will continue to change over time as tier 1 and tier 2 services become established. For this reason, it is essential that we regularly revise our plans and vary as necessary considering the impact of the investments being made and the changing needs of children, young people, and their families. It will remain important that the recruitment can adjust and adapt to the success or otherwise of secured appointments for very specialist posts; the HSCP will be competing in an extremely limited and competitive market. The recruitment strategy will no doubt need adjusted as vacancies arise. It remains highly unlikely that the Partnership will recruit to this level and number of posts either first time or over a period of recruitment campaigns.
- 2.5. Based on our current assessment of what is needed, revised costings, and identified spending priorities for the neurodevelopmental specification implementation, financial plans have been further developed. The overall allocations and the overall planned spend are detailed in Appendix 2.

3. Finance – CAMHS Phase 1 funding

- 3.1. This funding relates to 3 elements:
- 1) Full implementation of the CAMHS service specification.
 - 2) Expansion of CAMHS to support targeted groups of young people should they wish to remain in CAMHS up to age 25 and to improve transitions for young people.
 - 3) Clearance of backlogs in waiting lists for CAMHS.

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- 3.2. The funding has now been agreed on a recurring basis for the first 2 of these elements. Since the plans were initially developed further consideration has been given to maximising clinical capacity to ensure the ability of services to meet the rising levels of demand being seen, along with the financial adjustments around permanent posts and a more integrated approach around both funding and recruitment. This has required a variation of plans for phase 1 funding as summarised in Appendix 1.
- 3.3. The priorities are underpinned by a workforce plan that outlines a model of delivery for the service which enables the aims of the enhanced funding to be met in an integrated and holistic manner. For increased clarity the revised financial plan also aligns posts with the different elements of the funding. It should be noted that the different elements of funding are being used in an aligned way to support delivery of the workforce plan and the plans for service development.
- 3.4. Across the first 2 elements of phase 1 funding some of the posts initially specified have been removed from the plan as changes across the wider system have reduced the need for these posts. These include 2.4 wte Band 8a Clinical Co-ordinators, 8 wte Band 4 Clinical Support Workers, 4 wte Band 3 Business Support Administrators and 0.73 wte Band 4 Business Support Administrator.
- 3.5. An additional 5 wte Band 2 Administrators, 1 wte Band 7 Nurse and 8 wte posts for Band 6 Clinicians have been incorporated into the new plan, facilitating increased core clinical capacity. The additional Band 6 posts include a further 2 Mental Health Nurses, 4 Child and Adolescent Therapists (not specifically referenced in the initial plan) and 2 Dieticians (also not referenced in the initial plan but now included in response to the rapid rise in numbers of children and young people being referred with symptoms of eating disorders including avoidant restrictive food intake disorder).
- 3.6. The outlined changes within the first 2 elements required further consideration be given to the Waiting List initiative element which remains fixed term funding. Again, a number of posts have been removed from the plan. Specifically, 0.2 wte Band 8a Psychology, 0.5 wte Band 7 Nurse, 1.56 Band 6 Psychology and 2 wte Band 6 Nurses. Posts added to this element are 2 wte Band 5 Nurses and 1 wte Band 2 Administrator added to the plan.

4. Finance – Phase 2 Funding

- 4.1. The first element of the Phase 2 funding has the specified aim of establishing capacity to provide access to specialist neurodevelopmental professionals to support the implementation of the recently published National Neurodevelopmental Specification for Children and Young People.

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- 4.2. This funding will be utilised to introduce designated clinical leadership for implementation of the neurodevelopmental specification. In addition, a multidisciplinary group of specialist neurodevelopmental clinicians will work across CAMHS and Community Paediatrics. Working to ensure a bridge between services will ensure that children and young people with neurodevelopmental difficulties experience more seamless pathways of care.
- 4.3. The spending priorities will therefore facilitate implementation of the specification, improving the quality of care received by children, young people, and their families. In addition, clinical capacity will be enhanced, enabling services to meet the high levels of demand for specialist assessment. Performance against this will be measured through number of children on the waiting list; length of wait; number of assessments completed; positive patient experience.
- 4.4. Additional to the proposed permanent posts a number of 1-year fixed term posts have also been aligned to this funding stream (0.2 wte GP Consultant, 1 wte Band 6 AHP, 1 wte Band 6 Nurse and 1 wte Band 4 Community Nursery Nurse). Previously a 1-year FTC Paediatrician post was approved by the IJB, funded by the Community Mental Health and Wellbeing Framework. Attempts to recruit to this post have been unsuccessful and a new proposal developed to progress a test of change which aims to improve the ASD assessment process for children under the age of five has been developed. This is better placed within the Neurodevelopmental Pathway funding stream.
- 4.5. NRAC has now been applied and funding has been allocated to Glasgow HSCP. An initial draft workforce plan has been developed. Appendix 2 provides a detailed proposal for the spend. Whilst an overspend can be seen in relation to this funding stream, by ensuring alignment of plans the overall financial plan remains within budget.

5. Post Details

5.1. Approved posts:

Funding stream	Post	Band	WTE
CAMHS Service Specification	Leadership Post	8a	1
CAMHS Service Specification	Principal Clinical Psychologist	8a	4
CAMHS Service Specification	Clinical Nurse Specialist	7	4
CAMHS Service Specification	Nurse	7	1
CAMHS Service Specification	Occupational Therapist	7	1
CAMHS Service Specification	Speech and Language Therapist	7	2
CAMHS Service Specification	Nurse	6	6
CAMHS Service Specification	Speech and Language Therapist	6	4
CAMHS Service Specification	Occupational Therapist	6	4
CAMHS Service Specification	Dietician	6	2
CAMHS Service Specification	Child and Adolescent Therapist (CAT)	6	4
CAMHS Service Specification	Administration	3	4

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Funding stream	Post	Band	WTE
CAMHS Service Specification	Administration	4	1
CAMHS Service Specification	Administration	2	5
CAMHS Waiting List Initiative – fixed term 1year	Psychologist	6	3
CAMHS Waiting List Initiative – fixed term 1year	Assistant Psychologist	4	7
CAMHS Waiting List Initiative – fixed term 1year	Child and Adolescent Therapist	6	1
CAMHS Waiting List Initiative – fixed term 1year	Nurse	5	2
CAMHS Waiting List Initiative – fixed term 1year	Nurse	3	1
CAMHS Waiting List Initiative – fixed term 1year	Administration	4	0.73
CAMHS Waiting List Initiative – fixed term 1year	Administration	2	2.6
Neurodevelopmental	Neurodevelopmental Leadership Post	7	3
Neurodevelopmental	Speech and Language Therapist	6	3
Neurodevelopmental	Occupational Therapist	6	3
Neurodevelopmental	Nurse	6	3
Neurodevelopmental	Administrator	2	2
Neurodevelopmental – fixed term 1 year	GP Consultant		0.2
Neurodevelopmental – fixed term 1 year	AHP (SLT / OT)	6	1
Neurodevelopmental – fixed term 1 year	Nurse	6	1
Neurodevelopmental – fixed term 1 year	Community Nursery Nurse	4	1

5.2. The following posts no longer form part of the financial plan:

Funding stream	Post	Band	WTE
CAMHS Service Specification	Clinical Co-ordinator	8a	2.4
CAMHS Service Specification	Clinical Support Worker	4	8
CAMHS Service Specification	Administration	3	4
CAMHS Service Specification	Administration	4	0.73
CAMHS Waiting List Initiative	Psychology	8a	0.2
CAMHS Waiting List Initiative	Nurse	7	0.5
CAMHS Waiting List Initiative	Psychology	6	1.36
CAMHS Waiting List Initiative	Psychology	6	0.2
CAMHS Waiting List Initiative	Nurse	6	2

6. Recommendations

6.1. The Integration Joint Board is asked to:

- a) Note the approval by the Chief Officer and Chief Officer Finance and Resources, under delegated authority, of:
 - The overall financial plan as outlined in Appendix 2.
 - The amendments to the plans for the funding made available by the Scottish Government for the Phase 1 Mental Health Recovery and Renewal priorities for CAMHS, as outlined in appendix 1.
 - The proposed spending priorities identified for one element of the Phase 2 funding, specifically the implementation of the National Neurodevelopmental Specification for Children and Young People, as outlined in appendix 2.
- b) Note that funding proposals are subject to regular review and may require to be amended to ensure the needs of children, young people and their families are best met.



Direction from the Glasgow City Integration Joint Board

1	Reference number	DA210222-01
2	Report Title	Mental Health Recovery and Renewal Fund: Child and Adolescent Mental Health Service
3	Date direction issued by Integration Joint Board	21 February 2022
4	Date from which direction takes effect	21 February 2022
5	Direction to:	NHS Greater Glasgow and Clyde only
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	Yes (reference number: 011221-11) - Revises
7	Functions covered by direction	Child and Adolescent Mental Health Service and Specialist Community Paediatrics Service
8	Full text of direction	NHS Greater Glasgow and Clyde is directed to carry out the spending priorities outlined for Glasgow City Health and Social Care Partnership using the funding allocation from the Phase 1 Mental Health Recovery & Renewal fund, as outlined in Appendix 2.
9	Budget allocated by Integration Joint Board to carry out direction	The funding allocation for carrying out this Direction is £3,591,258, consisting of a combination of the allocation to Glasgow City HSCP (£3,081,946) and East Dunbartonshire HSCP (£509,312)
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
11	Date direction will be reviewed	21 February 2023

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Appendix 1 - Mental Health Recovery & Renewal Glasgow City / East Dunbartonshire CAMHS Phase 1 IJB 1.12.21 to Service Update Comparison

			Approved by IJB on 1st December 2021				
Project Bids	Band	Funding	WTE	2021/22	2022/23	2023/24	2024/25
				£000's	£000's	£000's	£000's
CAMHS Specification							
Contribution to NHSGG&C Wide services & developments		Recurring		81	323	256	143
Clinical Co-ordinator	8a	Recurring	2.40	44	180	186	191
Leadership post	8a	Recurring	1.00	18	75	77	80
Principal Clinical Psychologist	8a	Recurring	4.00	73	300	309	319
CNS	7	Recurring	4.00	63	260	268	276
Nurse	7	Recurring					
OT	7	Recurring	1.00	16	65	67	69
SLT	7	Recurring	2.00	32	130	134	138
Nursing / SLT / OT / Diet	6	Recurring	12.00	161	664	684	704
CAT	6	Recurring					
Clinical Support Workers	4	Recurring	8.00	68	279	287	295
Admin	3	Recurring	8.00	61	252	260	267
Admin	4	Recurring	1.73	15	60	62	64
Admin	2	Recurring					
Accommodation		Recurring					
Non-Pay		Recurring			44	44	44
CAMHS Up to 25							
Contribution to NHSGG&C Wide services & developments		Recurring		91	377	388	400
Total Costs			44.13	723	3,010	3,022	2,991
Funding				3,039	3,039	3,039	3,039
Variance -Underspend/+Overspend				(2,316)	(29)	(17)	(48)

Revised Structure Proposed				
WTE	2021/22	2022/23	2023/24	2024/25
	£000's	£000's	£000's	£000's
		341	351	151
1.00		70	72	74
4.00		280	288	297
4.00		232	239	247
1.00		58	60	62
1.00		58	60	62
2.00		116	120	123
16.00		754	776	799
4.00		188	194	200
4.00		127	131	135
1.00		35	36	37
5.00		145	149	153
		43	43	43
		406	419	431
43		2,853	2,937	2,813
	3,039	3,039	3,039	3,039
	(3,039)	(186)	(102)	(226)

Changes				
WTE	2021/22	2022/23	2023/24	2024/25
	£000's	£000's	£000's	£000's
	(81)	18	95	8
-2.40	(44)	(180)	(186)	(191)
	(18)	(5)	(5)	(6)
	(73)	(21)	(21)	(22)
	(63)	(28)	(29)	(30)
1.00		58	60	62
	(16)	(7)	(7)	(7)
	(32)	(14)	(14)	(15)
4.00	(161)	90	93	95
4.00		188	194	200
-8.00	(68)	(279)	(287)	(295)
-4.00	(61)	(125)	(129)	(133)
-0.73	(15)	(25)	(26)	(27)
5.00		145	149	153
		(1)	(1)	(1)
	(91)	30	31	32
-1.13	(723)	(157)	(85)	(178)

			Approved by IJB on 1st December 2021				
Project Bids	Band	Funding	WTE	2021/22	2022/23	2023/24	2024/25
				£000's	£000's	£000's	£000's
CAMHS WLI							
Psychology	8a	Non-Recur	0.20	4	11		
Nurse	7	Non-Recur	0.50		33		
Psychology	6	Non-Recur	4.36		241		
Psychology	6	Non-Recur	0.20	5	6		
Assistant Psychologist	4	Non-Recur	7.00	79	244		
CAT	6	Non-Recur	3.00		166		
Nurse	5	Non-Recur					
Nurse	3	Non-Recur	1.00		31		
Admin	4	Non-Recur	0.73		25		
Admin	2	Non-Recur	1.60		38	8	
Total Costs			18.59	88	795	8	
Funding				552	552		
Variance -Underspend/+Overspend				(465)	242	8	

Revised Structure Proposed				
WTE	2021/22	2022/23	2023/24	2024/25
	£000's	£000's	£000's	£000's
3.00		136		
7.00	61	184		
1.00		54		
2.00		89		
1.00		32		
0.73		26		
2.60		75		
17.33	61	596		
	552	552		
	(491)	43		

Changes				
WTE	2021/22	2022/23	2023/24	2024/25
	£000's	£000's	£000's	£000's
-0.20	(4)	(11)		
-0.50		(33)		
-1.36		(105)		
-0.20	(5)	(6)		
	(18)	(60)		
-2.00		(112)		
2.00		89		
		0		
		0		
1.00		37	(8)	
-1.26	(27)	(199)	(8)	

			Approved by IJB on 1st December 2021				
			WTE	2021/22	2022/23	2023/24	2024/25
				£000's	£000's	£000's	£000's
GRAND Total Costs				811	3,805	3,030	2,991
GRAND Total Funding				3,591	3,591	3,039	3,039
GRAND Total Variance -Underspend/Overspend				(2,781)	214	(9)	(48)

Revised Structure Proposed				
WTE	2021/22	2022/23	2023/24	2024/25
	£000's	£000's	£000's	£000's
	61	3,449	2,937	2,813
	3,591	3,591	3,039	3,039
	(3,530)	(143)	(102)	(226)

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Appendix 2 – Glasgow City IJB Proposed Spend for Phase 2 money – Neurodevelopmental Specification Implementation (incl East Dunbartonshire)

			Revised Structure Proposed				
Project Bids	Band	Funding	WTE	2021/22	2022/23	2023/24	2024/25
				£000's	£000's	£000's	£000's
NEURODEVELOPMENTAL							
Locality leadership	7	Recurring	3.00		174	180	185
SLT / OT / Nursing	6	Recurring	9.00		424	437	450
Admin	2	Recurring	2.00		58	60	61
Accommodation		Recurring					
Non-pay		Recurring			14	14	14
GP Consultant		Non-Recur	0.20		33		
SLT/OT	6	Non-Recur	1.00		47		
Nurse	6	Non-Recur	1.00		47		
CNN	4	Non-Recur	1.00		35		
Total Costs			17.2		832	690	710
Funding					686	686	686
Variance -Underspend/+Overspend					146	3	24

			Revised Structure Proposed				
			WTE	2021/22	2022/23	2023/24	2024/25
				£000's	£000's	£000's	£000's
GRAND Total Costs (Appendix 1 and 2)				61	4,281	3,627	3,523
GRAND Total Funding (Appendix 1 and 2)				3,591	4,278	3,725	3,725
GRAND Total Variance -Underspend/Overspend				(3,530)	3	(98)	(202)

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