Health and Sport Committee inquiry into CAMHS

Your letter to our Chief Executive regarding the above was passed to myself to respond.

You will be aware, from our previous response to the request for written evidence and from the written and oral evidence provided by our partners in GGNHS and Clyde, that there is a partnership approach across Glasgow City Council and GGNHS&C, to the implementation of the 2005 framework, The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care.

We have subsumed the implementation of the Framework into our current joint planning arrangements and have been working on the priorities identified in the Framework for a number of years.

In response to your specific questions:

• what targets have been set for the implementation of the framework;

Glasgow City worked in partnership with NHSGG and benchmarked against the framework document throughout 2005 using the implementation of the GGNHS&CC 2001 - 2005 CAMHS strategy as a baseline. A number of CHCP stakeholder events were also commissioned to measure completeness of services on a CHCP area against the framework's description of services and NHSGGC and GCC had a significant number of the services identified in the framework, already in place.

Subsequent actions and specific service development plans were agreed though the children's services planning process via the mental health and health improvement planning group and the NHSGGC Child Health Strategy Group. There is more detail on these in the attached written evidence, and as I understand in the evidence submitted by GGNHS&C.

• whether there are any risks associated with those targets, either in relation to hindering achievement of the target or in terms of potential consequences for the organisation;

There are no specific unmanaged risks in relation to completing the standards described within the Framework other than the general risks of recruiting to specialist posts within CAMHS and other professional groups in a tight financial climate and with scarce expertise in some localities. There have been a number of successes locally including the opening of the new WoS adolescent IPU, the development of Eating Disorders Services and development of Multi Dimensional Treatment Foster Care in collaboration with NHSGGC. In addition, we have innovative plans to develop RMN led OoH crisis response services for young people who have a mental
health crisis and to develop intensive home support services for young people who would otherwise be admitted to psychiatric or secure care.

- to what extent has staffing need been estimated in relation to delivering the plan and what the outcome was of any such assessment;

Staffing levels have been agreed on a service specific basis and on the basis of agreement on service models, supported by evidence and in partnership with professional and other staff representative bodies. NHSGGC will invest £1m new monies in CAMHS on a recurring basis in 2009/10 in addition to having the highest level per capita spend in CAMHS in Scotland. As described in the attached written evidence, there was already social work resource within CAMHS Services which met the priorities of the framework. In addition, the new services highlighted above involved the assessment of new staffing to deliver against the Framework priorities.

- how many whole-time equivalents at the generic, multi-disciplinary level per 100,000 of population have been agreed?

**Greater Glasgow -**
Total wte 246
Per 100K 0-19 population - 127wte
Per 100K total population - 28.9wte

If you require further information or clarification please do not hesitate to contact me.

Yours Sincerely

Susanne Millar

Head of Practice Audit/ Children and Families