

LEWISHAM SCHOOLS FORUM			
REPORT TITLE	Council Savings Impacting on Schools		
KEY DECISION	Yes	Item No.	13
CLASS	Part 1	Date	6 October 2016

## 1. Purpose of the Report

This report looks at the future financial position of the Council and the savings currently proposed to the Mayor that impact on schools, parents and children.

## 2. Recommendation

The Schools Forum note the report

## 3. Background

- 3.1 The Council's net General Fund budget for 2016/17 is £236m. This is based on using reserves for the third consecutive year to balance the budget.
- 3.2 In order to put the Council's finances on a sustainable footing, the Medium Term Financial Strategy identifies the need for £45m of ongoing savings in the three years to 2019/20, at £15m per year. However, this remains an estimate pending confirmation of any policy, funding, or wider implications from the change of Prime Minister and European Referendum decision in June.
- 3.3 This is also in addition to £17.4m savings already identified and agreed for 2017/18. In total this would bring the total savings made in the ten year period 2010 to 2020 to £200m.
- 3.4 Through the Lewisham Future Programme approach officers have worked hard to identify possible new savings proposals to meet the £45m target over the three years to 2019/20. In so doing, targets by work strand have been set on a differential basis to protect front-line services where possible.
- 3.5 The total savings currently being presented to Mayor for the whole Council identifies savings proposals from officers of £21m.

## 4 Children and Young People's Directorate

- 4.1 Within the Children and Young People's Directorate total savings of £3.1m are being considered, with existing saving of £0.7m agreed last year for 2017/18, the total savings for next year are £3.8m. The net budget of the CYP directorate is £48.9m, the savings proposals represents 8% of the budget. Two main savings that potentially will impact on schools cover the Child and adolescent mental health services (CAMHS) service and public health

#### 4.2 Child and adolescent mental health services (CAMHS). **Saving £244k**

The CAMHS service in Lewisham is divided into specialist community and tertiary inpatient/outpatient services. There are eight teams within the specialist community service, which cover:

- Generic support for significant mental health issues/access into CAMHS
- Children and young people involved with the Youth Offending Service
- Children and young people who are looked after (LAC)
- Children and young people with disabilities
- Children and young people with severe and enduring mental health issues

4.3 The savings proposals focus on the four teams providing generic support to young people (East and West Clinic teams) and specific support to looked after children (SYMBOL and the Virtual School for CAMHS).

### **5 Commissioning**

Lewisham CAMHS (excluding inpatient and some outpatient services) is commissioned by the Joint Commissioning team on behalf of both NHS Lewisham Clinical Commissioning Group (CCG) and the London Borough of Lewisham. Services are delivered by South London & Maudsley (SLAM) NHS Foundation Trust.

### **6 Funding**

The total funding for CAMHS is £4.286m, broken down as follows:

- Local authority contribution – £1.008m
- CCG contribution – £2.775m
- Other funding (e.g. DoH, DSG, Pupil Premium Grant) – £503k

### **7 Provision**

CAMHS services are limited and can only be accessed by young people who exceed certain thresholds for risk and need. However, CAMHS provision is one element of a broader range of support available to meet the emotional and mental health needs of children and young people – other provision includes schools-based counselling and mental health & wellbeing services delivered by local voluntary and community organisations

7.1 These savings proposals should be regarded as an opportunity for positive change, enabling us to reshape part of the current CAMHS service (supported by CAMHS transformation funding) in order to deliver a more integrated and streamlined clinical function which embeds outreach and consultation within community-based settings and services, meeting the needs of children and young people more effectively.

7.2 Proposal 1 – Improve the access pathway for child and adolescent mental health services

Phase 1 – we will enable greater alignment of the two generic teams which provide a route into CAMHS by merging operational management. Alongside this, we will integrate the crisis care team within the generic function, providing additional resources to assess all emergency presentations via A&E, all urgent presentations via schools, police, children’s social care & GPs and undertake seven day follow-ups

Phase 2 – we will implement the Choice & Partnership Approach (CAPA) across the service. The CAPA model was developed specifically for CAMHS services and, based on its implementation in other areas (including Greenwich), we anticipate that it will significantly improve the flow of cases, reduce the overall treatment time and increase the speed from referral to treatment. This will be supported by technical and process redesign across the generic function, plus a reduction in non-core functions. Wider redesign activity (supported by CAMHS transformation funding) – we intend to further enhance the access pathway for children and young people through the development of a blended online/face-to-face triage and clinical support model (see report for further detail) and by establishing CAMHS outreach support in the community, which will combine consultation training and short term interventions

### 7.3 Delivery of savings

Phase 1 – we anticipate that savings of £44k could be achieved in 2017/18 through the merger of operational management. However, given the existing demand and capacity issues within the two generic teams, making further savings in this phase would present a potential clinical risk

Phase 2 – the implementation of the CAPA model will take place during 2017/18 (using CAMHS transformation funding to support programme and change management). The expected reduction in demand as a result of improvements to the access pathway as well as increased capacity following the CAPA implementation (plus wider redesign activity) and integration of the crisis care team should enable us to achieve savings of £150k during 2018/19 and 2019/20. The local authority contribution to the generic CAMHS teams is £224k, so delivering savings of c.£194k would effectively mean that Lewisham no longer funded this part of the service. We are not proposing any savings to the CCG contribution at this stage as there would be a significant impact on the sustainability of the service, (as well as increased pressure on adult mental health services) if these savings were delivered over the same period. Given that the CCG contribution in this area has increased as a result of CAMHS transformation funding and the new access pathway should improve capacity and demand management, we will consider whether any further savings are viable after 2019/20.

### 7.4 Proposal 2 – Further integration of mental health services for looked after children

The Lewisham Virtual School has collaborated with CAMHS to pilot an integrated mental health outreach service (funded via the Pupil Premium Grant) which supports Lewisham looked after children and improves their

readiness to learn. Given the success of this new approach, we intend to integrate the outreach service with the CAMHS SYMBOL service (which provides more traditional, clinic-based support for looked after children), blending outreach and clinic-based support within a graduated model. This will increase the speed of response for the most vulnerable children and young people whilst ensuring that we maximise opportunities to see them in the most appropriate environment

- 7.5 Delivery of savings – we will work closely with CAMHS and the Lewisham Virtual School to develop and implement a new model at a lower cost by April 2017 (releasing savings of £50k, equivalent to one clinical post). To support the implementation of the new delivery model (particularly the outreach element), we will fund a CAMHS Practitioner post via the Pupil Premium Grant

### Impact and Risks of Proposals

Outline impact to service users, partners, other Council services and staff:

Proposal 1 – Improve the access pathway for child and adolescent mental health services

The proposed model offers a more coherent and consistent pathway for children and young people accessing mental health services, ensuring that there is better integration between community provision and CAMHS clinical services.

Although there will be a reduction in clinical staff within the generic function, the CAPA approach will enable the service to manage demand & capacity more effectively and respond flexibly to clinical pressures

Proposal 2 – Further integration of mental health services for looked after children

The outreach approach will enable better promotion of resilience, prevention and early intervention whilst the blended model will deliver a more tailored intervention based on individual need

## **8 Health visiting and school nursing**

The Council will deliver savings of £1.7m through a combination of re-commissioning and redesign of the health visiting service and the school aged nursing service. These proposals have been drawn up with an emphasis on effectiveness of outcomes, increased integration of services for children and young people, and (i) Savings from the school aged nursing service

The proposed redesign will deliver savings of £510,915 (2017-18) and an additional £15,057 (2018-19 onwards).

(ii) Savings from health visiting

The proposed redesign will deliver savings of £1,203,813 (2017-18 onwards).

	Budget £'000	saving £'000	2017/8 £'000
Health Visiting	7,350	1,204	6,146
School aged Nursing	1,750	511	1,239 *
Teenage health and wellbeing Service	n/a	n/a	348 **

\* An additional £130,000 will be added to this budget to pay for the new integrated weight management service.

\*\* There will be additional funding for this new service to finance substance misuse, sexual health and mental

The full report can be found in Appendix A

## **9 Savings from the children's weight management service (£100,000)**

The Council will cease commissioning the provider of the existing service. This will be mitigated by investing £130,000 in the new contract for school nursing, to ensure weight management is a core function of the service.

The EAA identified potential negative equalities impacts of children with complex needs receiving the same offer as other children in the new service, which the Council will seek to mitigate through specifying strong pathways to other areas of the redesigned health visiting and school nursing services. The incorporation of the service into school nursing may help to mitigate this negative health impact by maintaining close links with children with complex needs to provide some additional support where required.

The EAA identified potential positive impact for age, the integration the service into school nursing may mean better follow up of those in overweight/obese groups requiring MEND since the National Child Measurement Programme (NCMP) takes place in schools. However, since there will be reduced capacity of the service to provide additional support to children, this may offset any new benefit for young people overall.

The professionals consultation of Staying Healthy services expressed concern of a potential equalities impact of any reduction in overall service capacity as a result of changes most notably that childhood obesity affects those of lower socio-economic status the most, and that any reduction in capacity of the service would increase health inequalities.

Close monitoring of service use and health outcome data following the introduction of the proposed changes, particularly to capture demographic data for service users will be vital to identify if any negative impacts are realised and to work to mitigate them when/if they arise.

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