#### Funding pro-forma for Mental Health Service Improvement Fund

Name of health board	Hywel Dda UHB
Allocation amount for full year (please see covering letter).	£849
Project Title	S-CAMHS Eating Disorder Service

Please provide a general description of the project. This needs to include a clear case for proposed changes / service development, evidencing how this will provide additionality and added value to current service provision. This section should also include any relevant engagement activity undertaken which enabled prioritisation of proposals. (Max. 400 words).

This funding proposal is to develop a Specialist Community Eating Disorder Service for children, young people and families, which will provide specialist services across the Health Board footprint. The service will comprise of 1 Eating Disorder Lead, 2 Eating Disorder Practitioners, 1 Dietitican, 1 Admin and 1 CBT Therapist. This proposal meets the following priorities outlined in Together for Mental Health Delivery Plan 2019 -22:

- Priority 6.2 to develop a new model of service in response to the recent national review
- Priority 4 Improving the access, quality and range of Psychological therapies for children

It will enable the recommendations of the National Review of Eating Disorders to be implemented, providing earlier intervention, implement NICE standards and work towards meeting the 4 week waiting time. This service will align closely to the Adult T3 Eating Disorder Service, which will address key issues in respect of Transition from SCAMHS to Adult Mental Health Services. The team will establish close links with the All Wales Community Eating Disorder Team, Tier 4 In patient Service and local Child Health Services (refeeding takes place within Paediatric Wards).

This multidisciplinary team of medical and non-medical staff will have significant training and experience in the assessment, risk management and treatment of children and young people with anorexia nervosa, bulimia nervosa and their variants. The team will hold a high level of expertise (both medical and non-medical) to manage the level of medical risk safely and to provide continuous high-quality supervision for the psychological treatments.

The expertise from the team can be applied to support primary care, non-eating disorder specialist services, education, social care, public health and other agencies to work in partnership. The relationships developed through the training utilised to provide regular support to the teams involved in improving early

identification of children and young people at risk of developing an eating disorder. This should lead to a truly integrated approach.

There is increasing recognition of the importance of addressing serious mental health disorders as early as possible . The Welsh Government's programme for Government 2016-2021, Prosperity for All includes a cross-cutting priority for all children to have the best start in life.

This proposal was developed in collaboration with service users, Carer representatives, third sector organisations and statutory service representatives through the HB's partnership arrangements with West Wales Action for Mental Health and representatives of the LMHPB.

Please provide detail on the key milestones that will need to be achieved following approval of funding. **(Max. 150 words)** 

Key Milestones	Date Completed			
Funding Approved	September 2020			
Recruitment Process	October - November 2020			
Staff in post	January 2021			
Staff Training	January 2021 – March 2021			

Please provide detail here if your proposal includes any non recurrent funding in 2020/21 to support future planning or service delivery. **(Max. 150 words)** 

This proposal includes non-recurrent funding in 2020/21 for provision of the following training courses. This will ensure that clinical staff are fully trained in specified therapies outlined below.

# <u>CBT</u>

CBT Certificate Cardiff University

## **ARFID Presentation Master Class**

The course is a stand-alone, pre-foundation module for the Master Practitioner Course in Eating Disorders & Obesity. It broadens the practitioners skills base and provides a greater understanding of individuals relationships with food and body weight.

## Family Therapy for Anorexia Nervosa

This training focuses on the application of SFT-AN) - the Maudsley Approach. It provides participants with the skills, knowledge and confidence in order to apply the treatment to their own clinical setting.

#### Family Therapy and Multi-Family Therapy for Bulimia Nervosa

This training focuses on the Maudsley Centre for Child and Adolescent Eating Disorders (MCCAED) approach to working with young people and families with bulimia nervosa. It provides participants with the skills, knowledge and confidence in order to apply this model to the irrelevant clinical setting.

## ED masterclass in supervision

This programme offers a masterclass in supervision for the Maudsley approach, including basic principles of supervision, FT and MFT/ED specific supervision of supervision, and complex case discussion.

Full costing details provided in table below.

Please provide detail on how you expect the proposal to achieve the expectations laid out in annex b of the covering letter. Please include how you will ensure that these are measured and monitored. **(Max. 200 words)** 

This proposal meets the following priorities outlined in Together for Mental Health Delivery Plan 2019 -22:

- Priority 6.2 to develop a new model of service in response to the recent national review
- Priority 4 Improving the access, quality and range of Psychological therapies for children

All individuals accessing the Service will undertake a baseline assessment. Referral and pathway information will be captured to identify and track where additional support has been offered and taken up by statutory and Third Sector organisations. Case studies will be developed to highlight and capture the impact the service has had.

In particular the following quantitative and qualitative outcomes will be achieved:

- Reduction in waiting times
- Increased access to Eating Disorder Service within 4 week standard
- improved outcomes as indicated by sustained recovery and reduction in relapse
- Reduced need for inpatient admissions.
- Qualitative experience of service user, staff, wider professionals
- Measurement of engagement pre and post intervention
- Qualitative experience of service user, staff, wider professionals (collected in the POEM outcome measure and CORE-OM)

- Quantitative measurement through satisfaction questionnaires (POEM)
- Review cost effectiveness of new roles
- Improved knowledge and training for those working with C&YP, including a better knowledge of how to recognise eating disorders and how to access appropriate care when needed.

Please provide a broad breakdown of costs for this proposal. *Please provide the detail for both 2020/21 and 2021/22 (where appropriate) To note costs for 2020/21 are expected to be for the six months currently being issued.* 

2020	)/21				20	21/2	22			
					1		Band 7	Eating Disord	er	33,398
1 X (	0.6	Band 7	Eating Disorder Lead	8,350		-		Lead		
2 X 1.0		Band 6	Eating Disorder	23,610	2		Band 6	Eating Disorder		94,438
		Practitioner				0	Ũ	Practit		
1 X 1.0		Band 6	Dietitican	11,805	1	Х	Band	Dietitio	can	47,219
1 X	0.6	Band 3	Admin	3,875	1.	0	6			
1 X (	0.6	Band 7	CBT Therapist	8,350	1 x	0.6	Band 3	Admin		15,500
			Total	55,989				CDT		22.200
			33,303	1 0.		Band 7	CBT Therap	oist	33,398	
				44564	_  -			Total		223,954
2	СВ	CBT Certificate		11564						
4	ARFID presentation master class		1280	TI	ravel 3,000			)		
4	Fan	nily Thera	py for Anorexia	2400						
Nervosa				4	Mo	obile con	tract	688		
4		Family Therapy for Bulimia Nervosa		1280		RSA remote		access 400		
4		ED masterclass in supervision					RSA remote access			
-		Travel		750				2480		
						Total		3,568		
	Tot	al		18,554		-				

	Total	81,151	Total	230,522
	Total	6,608	—	
4	Licenses	2480		
4	Laptop	2140		
4	RSA remote access	400		
4	Mobile contract	688		
4	Mobile phone	900		

Please use this space to provide a high level overview of how the initial six months funding was utilised within the health board to respond to the pressures associated with the current pandemic situation in mental health. (Max. 300 words)

The initial six months of Service Improvement Funding was utilised within Hywel Dda University Health Board to respond to emerging pressures associated with the current pandemic in mental health services. In particular aspects of the Delivery Plan which aligned to the Health Boards Transforming Mental Health Programme have been accelerated at pace during the Pandemic, in order to provide extended and more efficient Mental Health services. Such as:

- A conveyance scheme to support service user flow to and from inpatient settings has been developed and is now operational. This will support inpatient flow and add capacity to the workforce.
- The co-location of CRHTs and CMHTs has taken place to deliver intensive home treatment or a community assessment for new patients alongside the care and treatment provided for our 'Relevant Patients' who are patients that meet the criteria for secondary mental health care under the Mental Health (Wales) Measure.
- The S136 Place of Safety was centralised to Bryngofal Ward, Llanelli during the pandemic and this arrangement has continued in accordance with the implementation of the Transforming Mental Health agenda. The alternative place of safety in Ceredigion is operational at weekends and it is planned for this to extend to 24 hours a day over a 7 day week.
- A Psychiatric Liaison Service has been developed across the four DHG sites as an essential service. Carmarthen was identified as a pilot site and service development continues as we integrate Adult Mental Health into our existing Older Adult Liaison Service. The Service will provide a single cross age/speciality liaison team with

a single point of referral across the Hywel Dda footprint for adult, older adult and learning disability individuals. A Senior Nurse and Consultant Psychiatrist have been appointed in order to lead, develop and recruit staff into the team with a vision for a Liaison Psychiatric Service.

An electronic version of this form should be submitted to <u>mentalhealthandvulnerablegroups@gov.wales</u> for consideration once completed.