



Ein Cyf / Our Ref: AL/CB/  
Gofynnwch am / Please ask for: Angela Lodwick  
Ffôn / Tel: 01267 674450  
Ffacs / Fax: 01267 229219

**Gwasanaethau Arbenigol Iechyd Meddwl Plant a Phobl Ifanc**  
Gwasanaethau Iechyd Meddwl ac Anableddau Dysgu  
Canolfan Ty Llewelyn  
Ysbyty Glangwili, Heol Dolgwili, Caerfyrddin, Sir Gaerfyrddin SA31 2AF  
**Specialist Child & Adolescent Mental Health Service**  
Ty Llewelyn Centre  
Glangwili Hospital, Dolgwili Road, Carmarthen, Carmarthenshire SA312AF

8 July 2014

Mrs Ann Jones AC AM  
Chair Children, Young People and Education Committee  
National Assembly for Wales  
Cardiff Bay  
CF991NA

Dear Mrs Jones

**RE: Children, Young People & Education Committee  
Request for data in respect of Child and Adolescent Mental Health Services**

Please find attached the requested information in response to the provision of Specialist Child and Adolescent Mental Health Services provided by Hywel Dda University Health Board. The documents are embedded due to large amount of data contained in them in respect of the information requested.

Alongside each request a narrative is provided to provide additional information/rationale which may be helpful when interpreting the data.

Please do not hesitate to contact us for any additional information

Yours sincerely

**ANGELA LODWICK**  
Head of Specialist CAMHS

On behalf of

**Karen Howell**  
Interim Chief Executive  
Hywel Dda University Health Board

**Request 1:-**

**HYWEL DDA UNIVERSITY LHB**

	<b>Programme Budget Figures - MH Spend</b>	<b>CAMHS expenditure</b>	<b>CAMHS as % of Total</b>
2009/10	63.865	1.687	2.64
2010/11	75.955	1.886	2.48
2011/12	75.955	2.330	3.07
2012/13	73.181	2.505	3.42
2013/14			
2014/15			

**Notes:** the programme budgeting costing information is not available for 2013/14 currently.

The number of s-camhs referrals received and “not accepted “  
for the most recent / last 5 years



**Specialist Child & Adolescent Mental Health**

	Carmarthenshire	Ceredigion	Pembrokeshire	Annual Total
<b>2009-10</b>				
Referred	498	163	343	<b>1004</b>
Not Accepted	243	75	162	<b>480</b>
<b>2010-11</b>				
Referred	581	149	354	<b>1084</b>
Not Accepted	295	66	138	<b>499</b>
<b>2011-12</b>				
Referred	536	185	335	<b>1056</b>
Not Accepted	289	80	138	<b>507</b>
<b>2012-2013</b>				
Referred	524	177	390	<b>1091</b>
Not Accepted	325	105	227	<b>657</b>
<b>2013-2014</b>				
Referred	540	156	432	<b>1128</b>
Not Accepted	317	77	230	<b>624</b>

# CAMHS - Annual Operating Framework Target 15 2009/10 - Information Template

(22 April 09)

To be completed quarterly with monthly breakdown of data: This is to be completed by the CAMHS Networks on behalf of each LHB. Each LHB will then be responsible for agreeing the content, and returning this completed template to their respective Regional Office 15 working days after the end of the period to which this refers to: First quarter return due to Welsh Assembly Government on

Name of Local Health Board: HYWEL DDA

Name of contact completing the return: KEITH JONES, GENERAL MANAGER

Contact details (email/ telephone no.) 01267 235151

Appendix A: Population numbers for all ages for use by each LHB

Appendix B: Definitions associated with CAMHS AOF Targets

In accordance with the policy Everybody's Business and the National Service Framework (NSF) for Children, Young People and Maternity Services:

(i) The Local Health Boards (LHB's) acting on the advice of the Regional CAMHS Networks, will commission a Specialist CAMHS Primary Mental Health Worker Service to provide consultation, training and advice to professionals who deliver the functions of Tier 1 in the area that:

- **Has a dedicated Primary Mental Health Worker (PMHW) on a formula of 2 wte per 100,000 population with a minimum of 2 wte per LHB where the population is below 100,000;**

Population for this LHB: 375,237

Total number of WTE PMHW's needed: 6.7

Months:	Total number of WTE PMHW's in post as at the last working day of the month	Total number of WTE PMHW's in post funded through non-recurrent funding streams	Total number of funded WTE PMHW vacancies (please indicate if recurrently funded or non-recurrently funded)
April 09	3.5	0	3.5
May 09	3.5	0	3.5
June 09	3.5	0	3.5
July 09	5.5	0	5.5
August 09	5.5	0	5.5
Sept 09	5.5	0	5.5
Oct 09	5.5	0	5.5
Nov 09	5.5		5.5
Dec 09	5.5		5.5
Jan 10	5.5		5.5
Feb 10	5.5		5.5
Mar 10	5.5		5.5

➤ **The PMHW's offer consultation and advice to professionals who deliver the functions of Tier 1 within 2 weeks of request;**

Report the number of consultations & advice that have taken place during the month according to the time between receipt of referral and actual provision of advice/consultation.

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Total number of consultations/ advice requests received in period	219	261	225	218	122	179	210	235	190	279	280	410
Of those consultations/ requests for advice dealt with in the period how many were within 2 weeks of request	219	261	225	218	122	179	210	235	190	279	280	410
Of those consultations/ requests for advice dealt with in the period how many were waiting longer than 2 weeks of request	0	0	0	0	0	0	0	0	0	0	0	0

Comments:

- **The PMHW's offer at least one training course in each Unitary Local Authority area to professionals who deliver the functions of Tier 1 and the clinical staff of hospital emergency departments on recognising and responding to children and young people who have depressive disorders or eating disorders and managing deliberate self harm.**

\* The target is for 1 training course to each per year. Please enter 'yes' or 'no' in each box, as appropriate

	Tier One Professionals*	Hospital Emergency Departments*
Has a course been held on depression	Yes	Yes
Has a course been held on eating disorders	Yes	Yes
Has a course have been held on managing deliberate self harm	Yes	Yes

Comments:

PMHW's are working on training plan with minor injury units and tier 1 staff, to roll out future training across the LHB area.

(ii). The LHBs will commission Specialist CAMHS, on the advice of Regional CAMHS Commissioning Networks, and put systems in place, to ensure that:

➤ **All patients referred to Specialist CAMHS are assessed and any intervention plans required are initiated within 16 weeks;**

Report the number of patients that were assessed by specialist CAMHS and that had their intervention plans initiated during the month, disaggregated between the three time-bands:

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients assessed and had their intervention plans initiated within 16 weeks of receipt of referral	54	48	35	42	30	55	54	38	43	45	45	69
Number of patients assessed and had their intervention plans initiated between 17 – 26 weeks of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of patients assessed that had their intervention plans initiated after more than 26 weeks of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of patients assessed and intervention plans initiated within period.	54	48	35	42	30	55	54	38	43	45	45	69

Breach Report to be completed for any patients with plans initiated over 16 weeks

Trust	Date of receipt of referral	Date of initiation of intervention plan	Total length of wait to date	Comments: include reasons for breach and any action taken



**All patients referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks;**

Report the number of patients that were assessed by specialist CAMHS and had their intervention plans initiated during the month, disaggregated between the two time-bands

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients assessed & intervention plans initiated within 4 weeks of receipt of referral	12	16	7	14	7	11	26	21	22	16	26	41
Number of patients assessed & intervention plans initiated beyond 4 weeks of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of patients assessed and intervention plans initiated within period.	12	16	7	14	7	11	26	21	22	16	26	41

Breach Report to be completed for any patients with plans initiated over 4 weeks.

Trust	Date of receipt of referral	Date of initiation of intervention plan	Total length of wait to date	Comments: include reasons for breach and any action taken

➤ **Mental Health Advisers, who are drawn from the experienced professional staff of Specialist CAMHS, that are available to each Youth Offending Team.**

Does your Youth Offending Team have access to a Mental Health Adviser? **YES**

If not please provide further details/ explanation:

(iii). Commissioners of Tier 4 services will ensure that children and young people referred for admission are assessed and admitted according to the following criteria:

➤ **Those who are assessed, by Specialist CAMHS, as requiring admission to a psychiatric unit for adolescents on account of their clinical needs are assessed for admission within 2 weeks from the date on which a written or electronic referral is dispatched and, if admission is considered necessary, it occurs within a further 2 weeks.**

Report the number of patients that were assessed during the month, disaggregated between the following two time bands:

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients <b>assessed</b> within 2 weeks of referral	0	0	0	0	0	0	3	0	0	1	0	0
Number of patients <b>assessed</b> later than 2 weeks of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of patients assessed within the period	0	0	0	0	0	0	3	0	0	1	0	0

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients <b>admitted</b> within 2 weeks of the assessment	0	0	0	0	0	0	1	0	0	0	0	0
Number of patients <b>admitted</b> later than 2 weeks of the assessment	0	0	0	0	0	0	1	0	0	0	0	0
Total number of patients admitted within the period	0	0	0	0	0	0	2	0	0	0	0	0

Breach Report to be completed for any patients that breaches the targets

Trust	Date of receipt of referral	Date of initiation of intervention plan	Total length of wait to date	Comments: include reasons for breach and any action taken
Hywel Dda Health Board	Referral to Hafod Newydd on 20/10/09	23/10/09	3 days	Following assessment and recommendation by HN to admit they did not have a bed for this client until 16/11/09

- **Those who are assessed by staff from a Specialist CAMHS, as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs are assessed for admission within 12 hours of the time at which a written or electronic referral is dispatched or a telephonic referral is made and, if immediate admission is considered necessary, it occurs within a further 24 hours. If non-immediate admission is agreed, it occurs within a further 2 weeks.**

Report the number of patients that were assessed during the month, disaggregated between the following time bands:

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients <b>assessed</b> within 12 hours of referral	0	0	0	0	0	0	0	2	2	0	0	0
Number of patients <b>assessed</b> later than 12 hours of referral	0	0	0	0	0	0	0	2	0	0	0	0
Total number of patients assessed within the period	0	0	0	0	0	0	0	2	0	0	0	0

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients <b>admitted</b> within 24 hours of the assessment	0	0	0	0	0	0	0	1	0	0	0	0
Number of patients <b>admitted</b> later than 24 hours of the assessment	0	0	0	0	0	0	0	0	0	0	0	0
Total number of patients admitted within the period	0	0	0	0	0	0	0	0	0	0	0	0

	April 09	May 09	June 09	July 09	Aug 09	Sept 09	Oct 09	Nov 09	Dec 09	Jan 10	Feb 10	Mar 10
Number of patients admitted within 2 weeks of the assessment who required non-immediate admission	0	0	0	0	0	0	0	0	0	0	0	0

Breach Report to be completed for any patients that breaches the targets

<b>Trust</b>	<b>Date of receipt of referral</b>	<b>Date of initiation of intervention plan</b>	<b>Total length of wait to date</b>	<b>Comments: include reasons for breach and any action taken</b>

## Appendix A: Total Population per LHB

[003122] Mid-Year Population Estimates (2001 onwards), by local authority (single year of age, Welsh LAs)

Statistical Directorate, Welsh Assembly Government

**Mid-Year Population Estimates (2007), by local authority in Wales.**

<b>Wales</b>	2,979,975
<b>Isle of Anglesey</b>	69,003
<b>Gwynedd</b>	118,374
<b>Conwy</b>	111,709
<b>Denbighshire</b>	97,009
<b>Flintshire</b>	150,537
<b>Wrexham</b>	131,911
<b>Powys</b>	131,963
<b>Ceredigion</b>	77,777
<b>Pembrokeshire</b>	117,921
<b>Carmarthenshire</b>	179,539
<b>Swansea</b>	228,086
<b>Neath Port Talbot</b>	137,376
<b>Bridgend</b>	133,917
<b>The Vale of Glamorgan</b>	124,017
<b>Cardiff</b>	321,000
<b>Rhondda, Cynon, Taf</b>	233,734
<b>Merthyr Tydfil</b>	55,619
<b>Caerphilly</b>	171,824
<b>Blaenau Gwent</b>	69,170
<b>Torfaen</b>	91,086
<b>Monmouthshire</b>	88,200
<b>Newport</b>	140,203



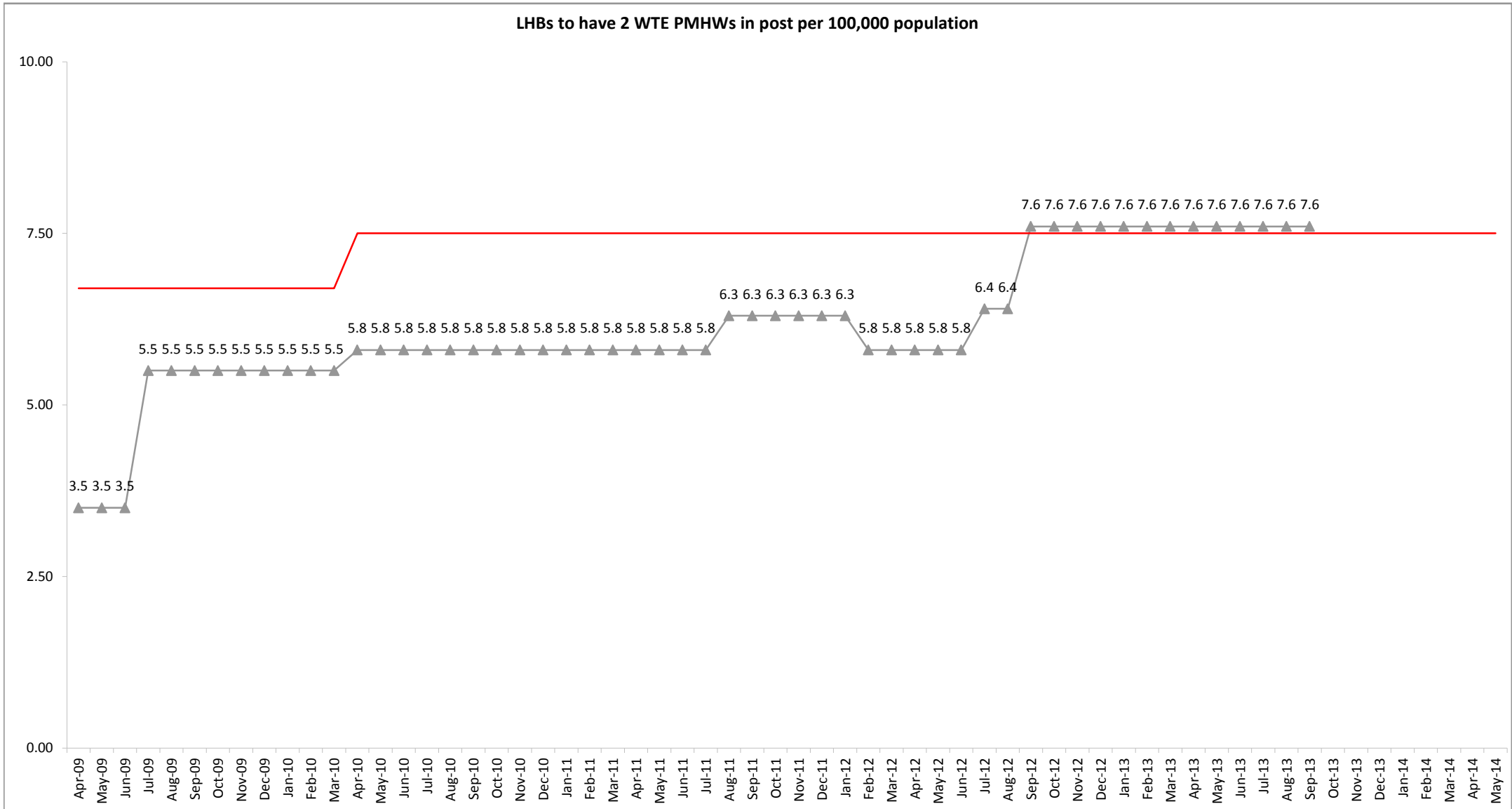
Type of Request:	Adhoc
Subject:	CAMHS performance stats
Requester Details:	Angela Lodwick
Data Source:	CAMHS monthly submissions
Geographic Area:	Hywel Dda University Health Board
Time Period:	Financial years 2009/10, 2010/11, 2011/12, 2012/13, 2013/14 & 2014/15 (to date)
Date Completed:	2nd July 2014
Request Number/Reference:	Adhoc/2374
Analyst Name & Contact Details:	Steve Davies - <a href="mailto:steve.davies3@wales.nhs.uk">steve.davies3@wales.nhs.uk</a>
QA Sign-off	
Data Quality Issues	

Notes:	
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# HYWEL DDA UNIVERSITY HEALTH BOARD



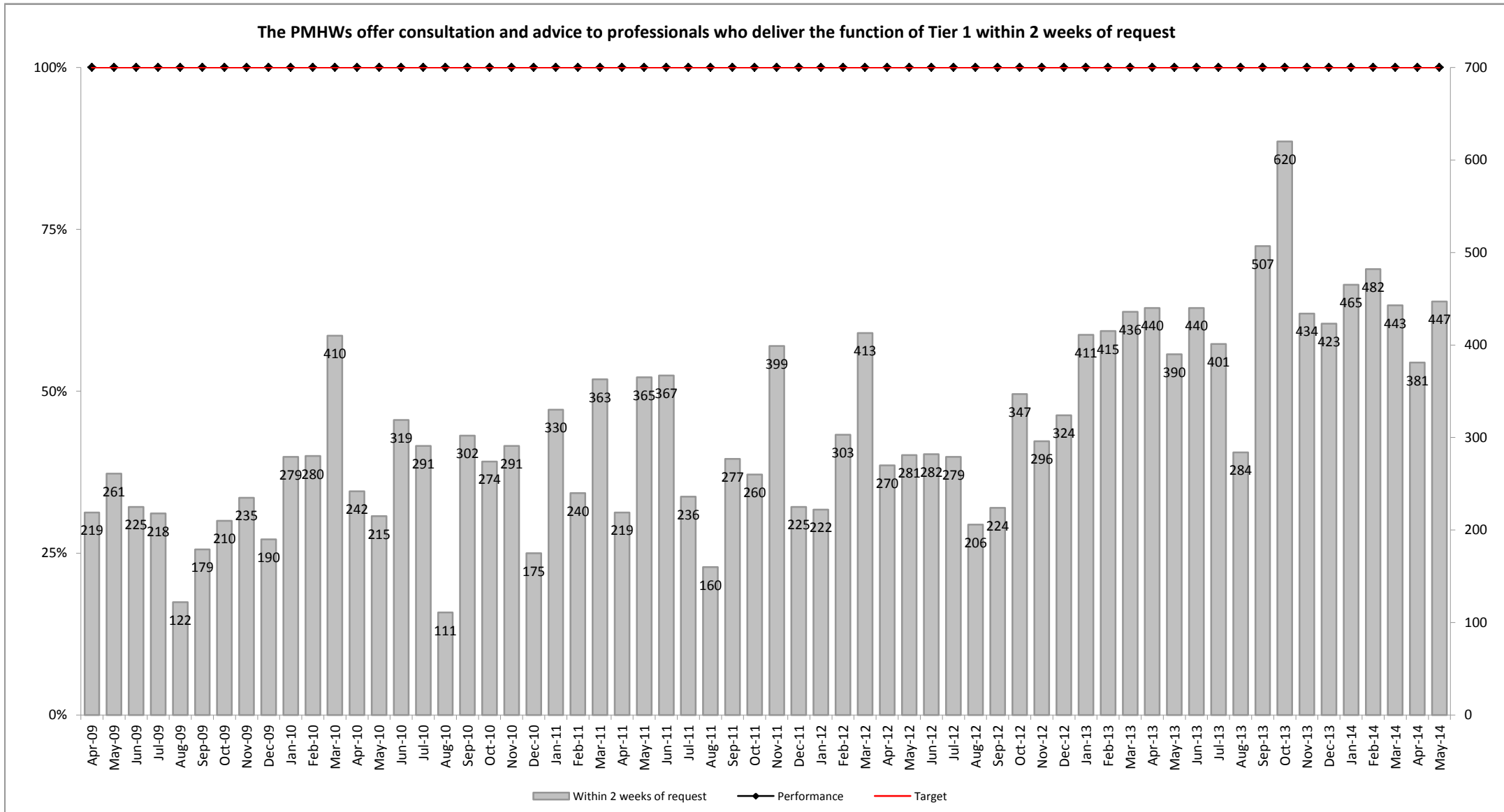
**CAMHS** - LHBs to have 2 WTE PMHWs in post per 100,000 population





# HYWEL DDA UNIVERSITY HEALTH BOARD

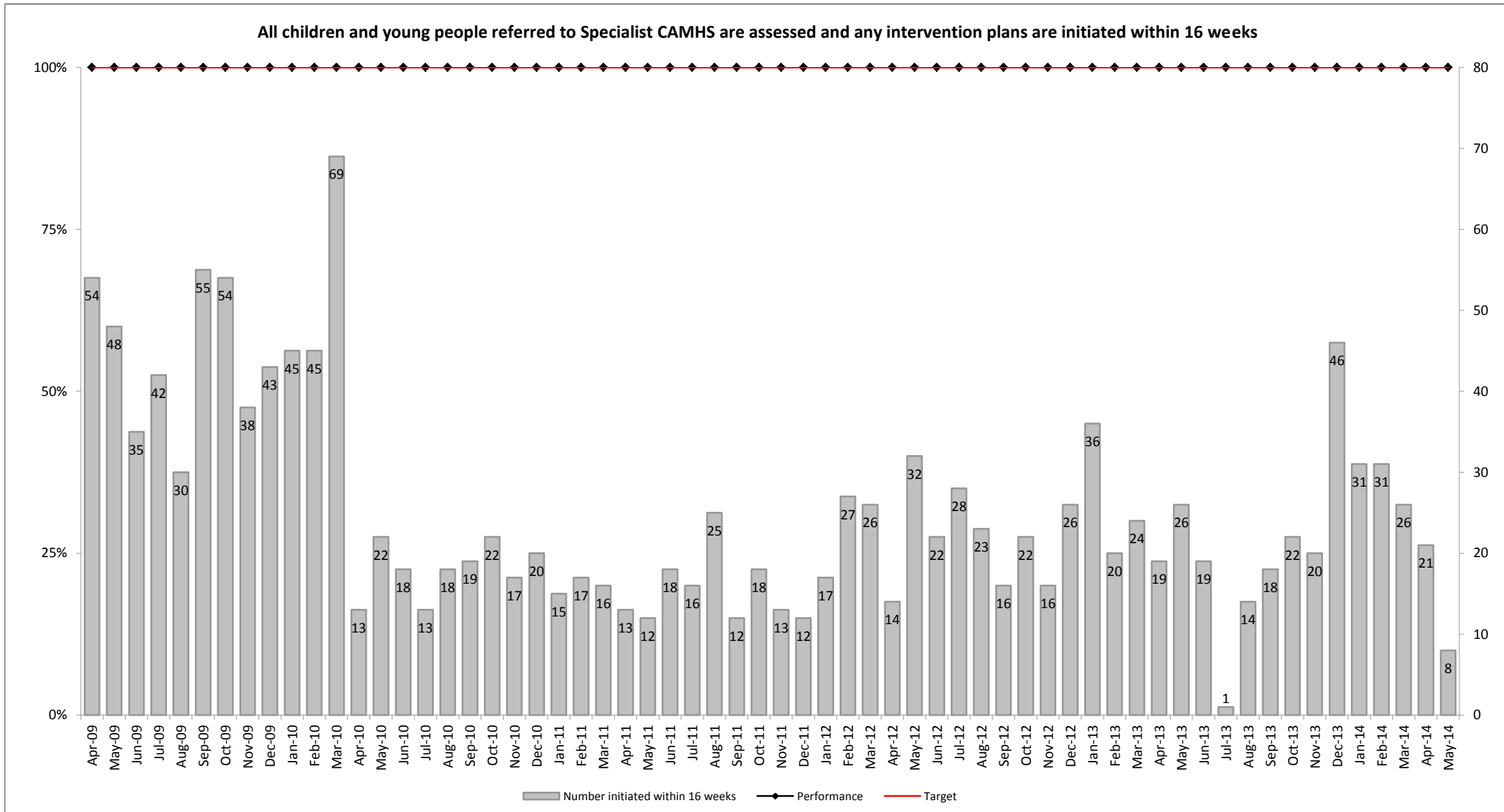
**CAMHS** - The PMHWs offer consultation and advice to professionals who deliver the function of Tier 1 within 2 weeks of request



# HYWEL DDA UNIVERSITY HEALTH BOARD



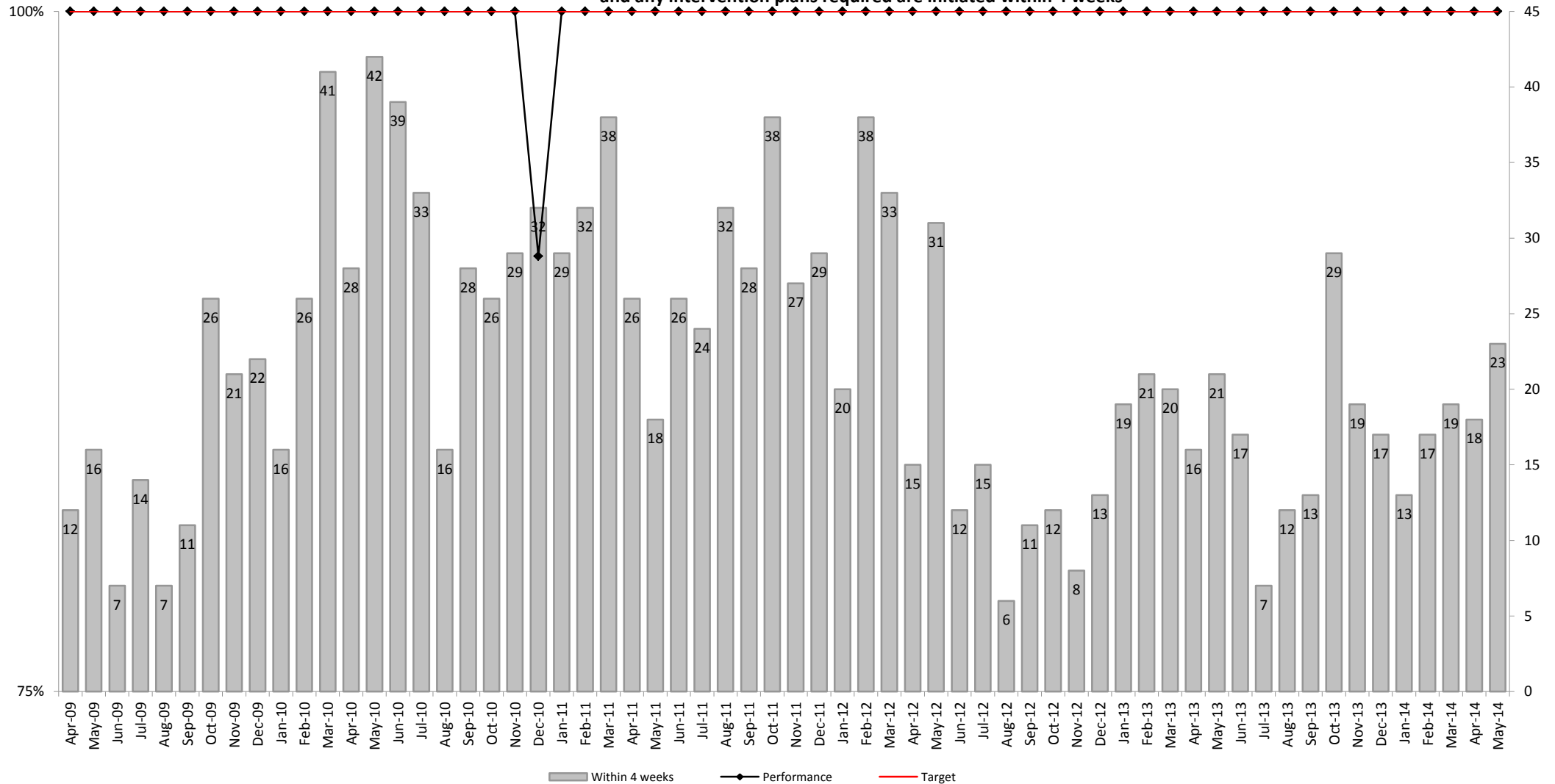
**CAMHS** - All children and young people referred to Specialist CAMHS are assessed and any intervention plans are initiated within 16 weeks



# HYWEL DDA UNIVERSITY HEALTH BOARD

**CAMHS** - All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks

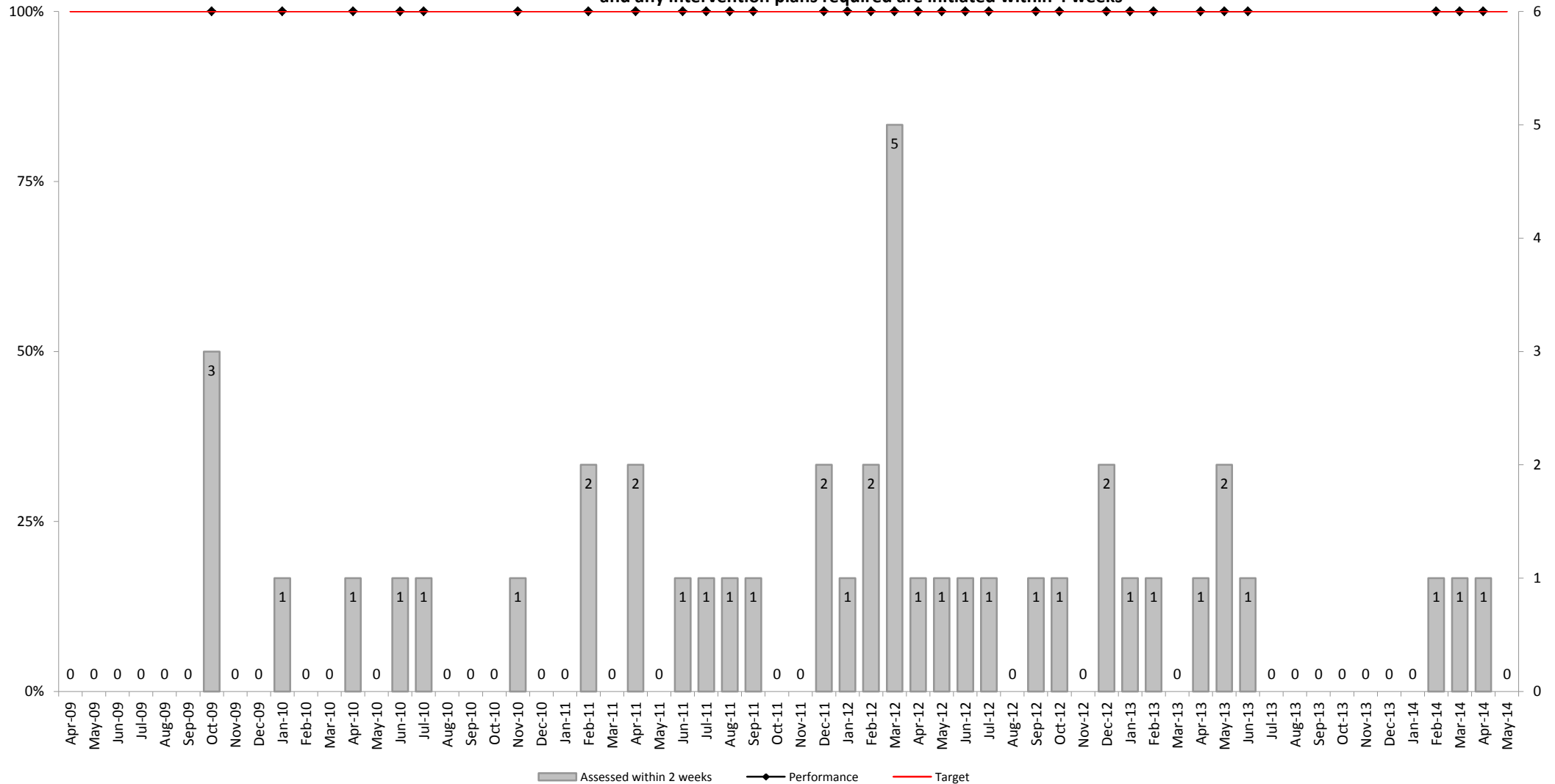
All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks



# HYWEL DDA UNIVERSITY HEALTH BOARD

**CAMHS - Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to assessment element of target)**

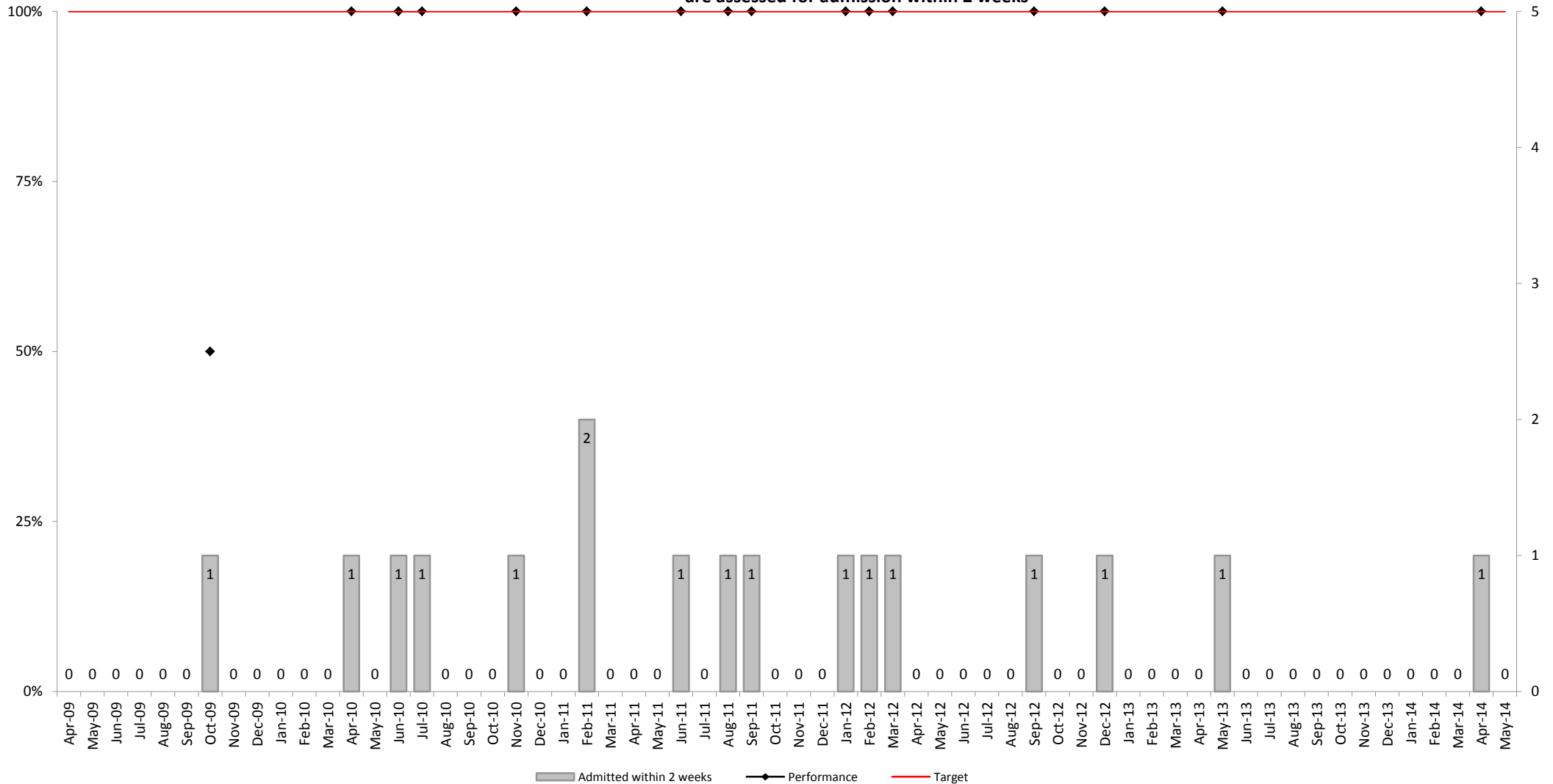
**All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks**



# HYWEL DDA UNIVERSITY HEALTH BOARD

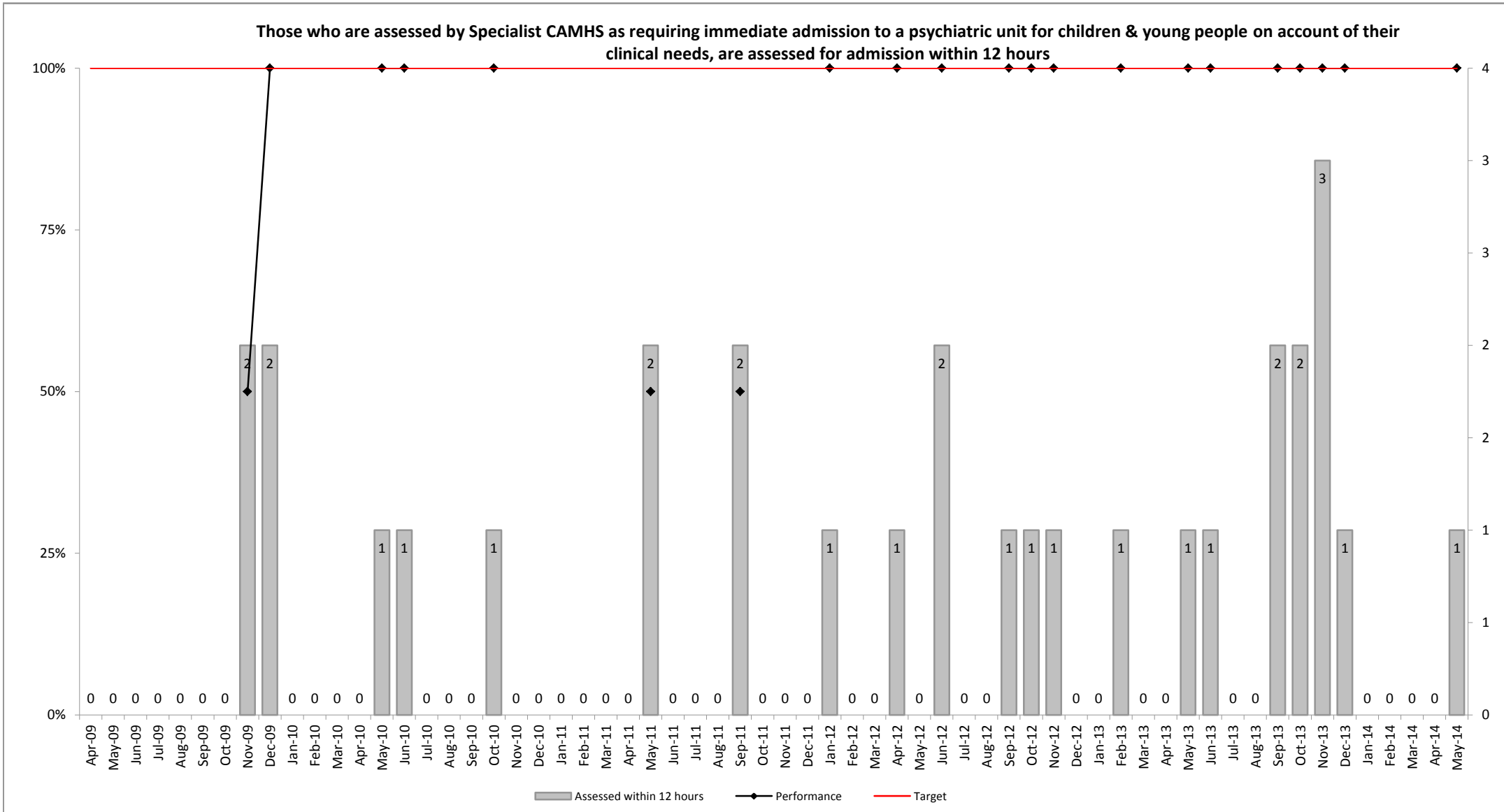
**CAMHS - Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to the admission element of this target)**

Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks



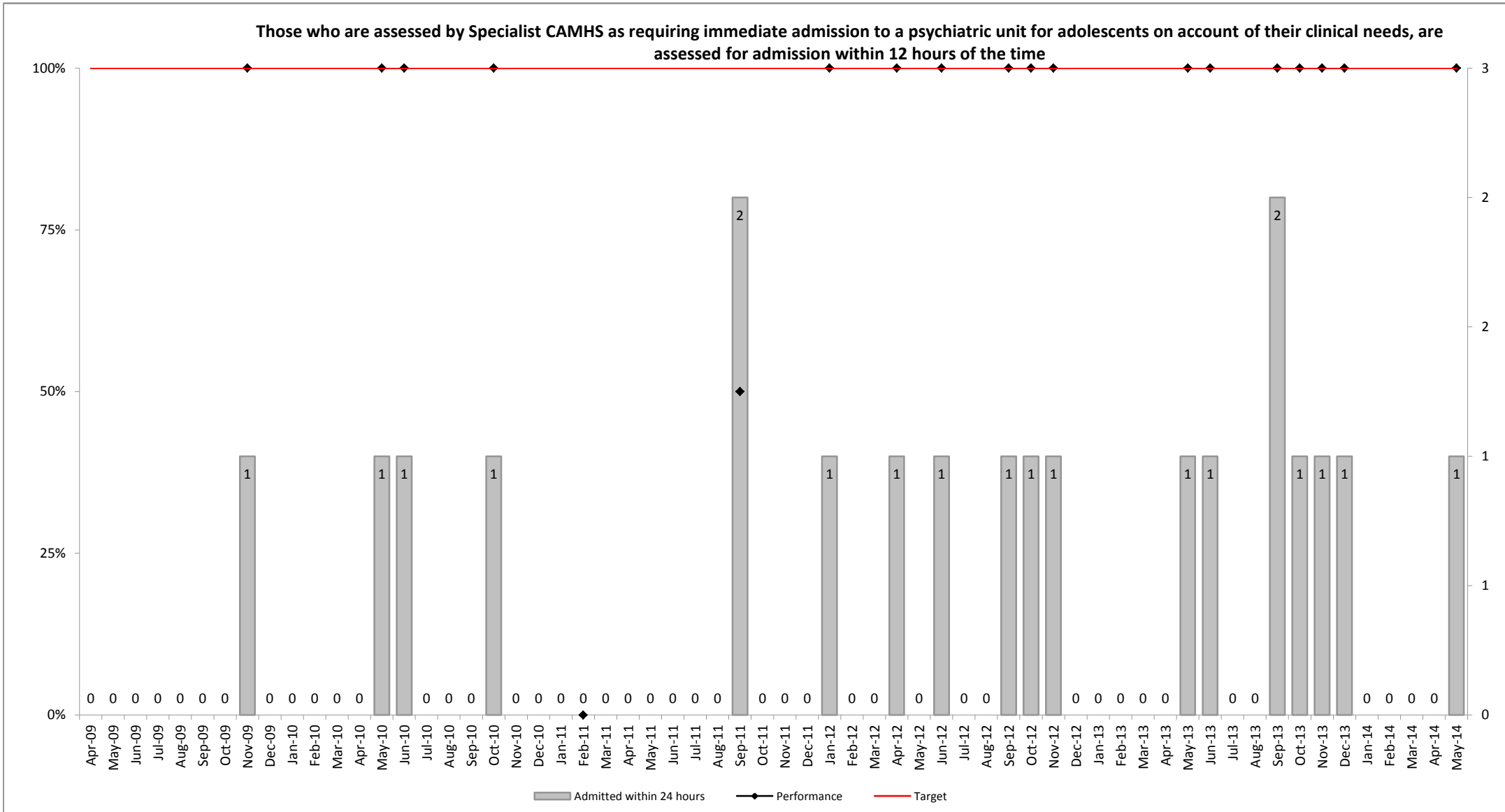
# HYWEL DDA UNIVERSITY HEALTH BOARD

**CAMHS - Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to assessment element of target)**



# HYWEL DDA UNIVERSITY HEALTH BOARD

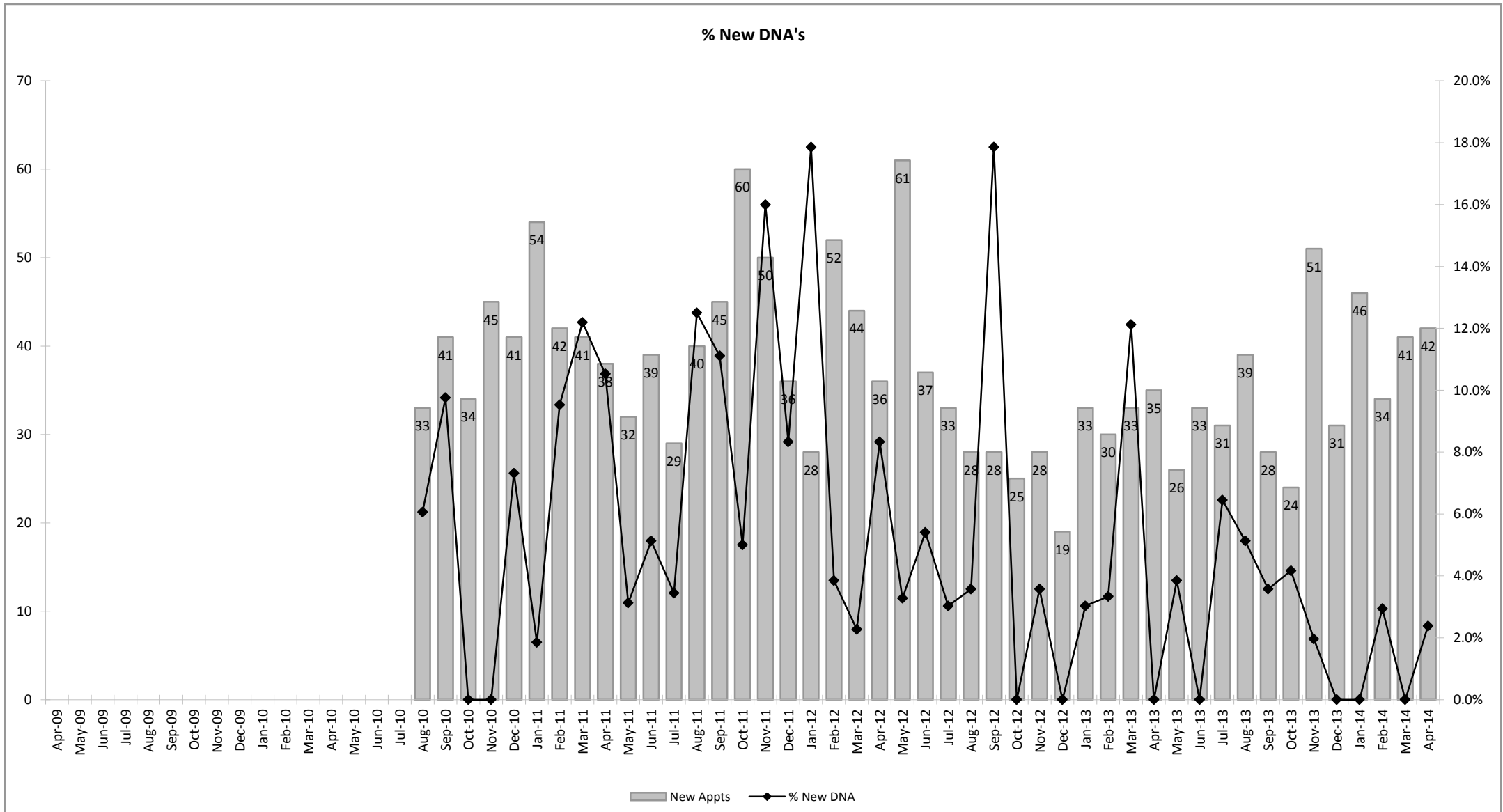
**CAMHS - Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to the admission element of this target)**



# HYWEL DDA UNIVERSITY HEALTH BOARD



CAMHS - Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place

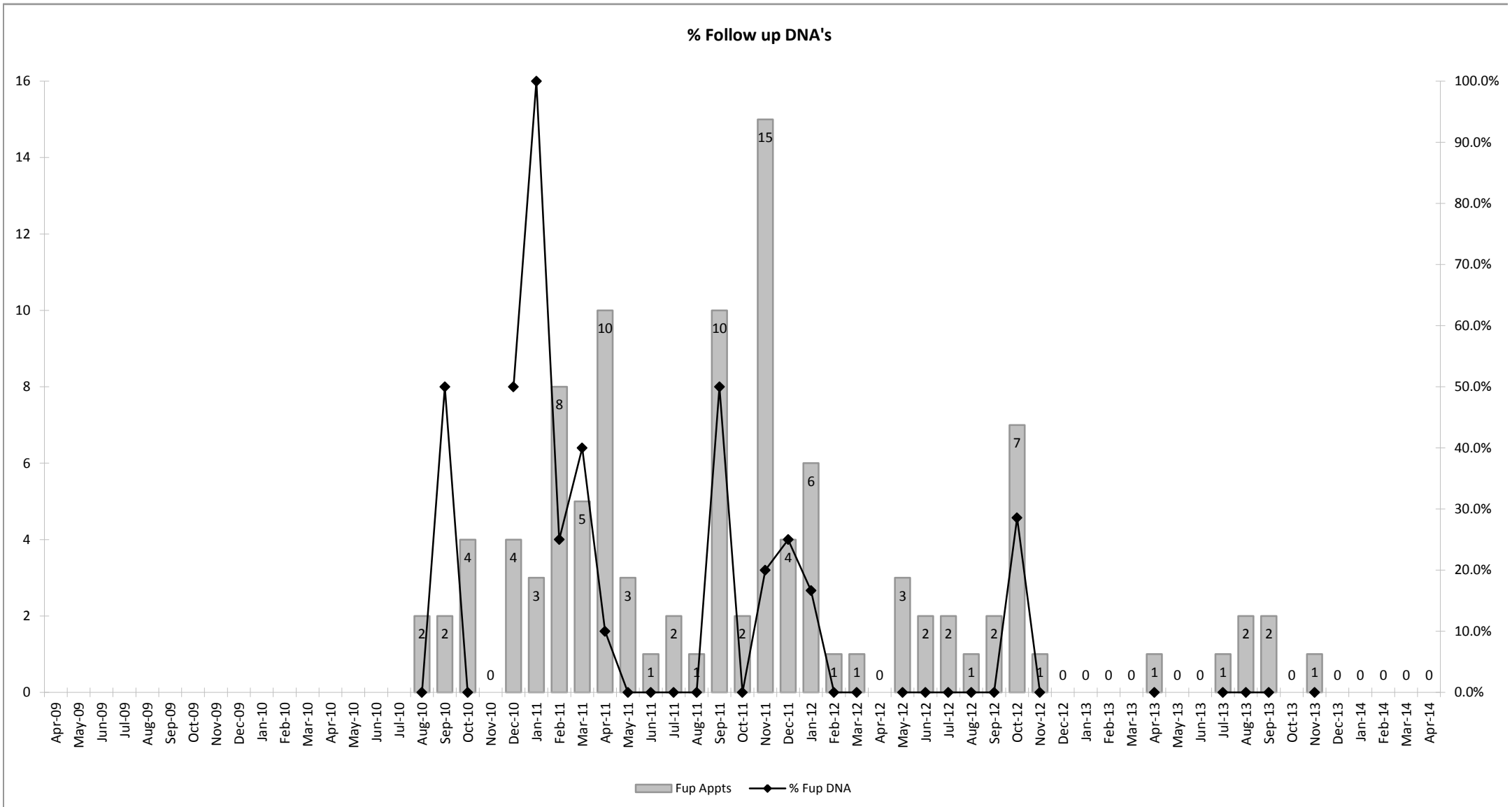




# HYWEL DDA UNIVERSITY HEALTH BOARD



CAMHS - Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place



re/ Welsh Gov data request (Adhoc/2374) - Message (HTML)

Message

Reply Reply to All Forward Respond

Delete Move to Folder Create Rule Other Actions Actions

Block Sender Not Junk Junk E-mail

Categorize Follow Up Mark as Unread Options

Find Related Select Find

You replied on 02/07/2014 08:23.  
This message was sent with High importance.

From: Angela Lodwick (Hywel Dda UHB - Remote email account) Sent: Mon 30/06/2014 21:38  
To: Christine Bowen (Hywel Dda UHB - PA & Service Admin Lead); Steve Davies (Hywel Dda UHB - Business Intelligence Analyst); Carwen Jarman (Hywel Dda UHB - Head of Management Accounting - Corporate Finance)  
Cc: Diane Sadler (Hywel Dda UHB - Business Support)  
Subject: re/ Welsh Gov data request (Adhoc/2374)

Message | 14.06.17 Hywel Dda HB.PDF (3 MB)

Hi

I require the following information as a priority this week please for welsh government response on behalf of karen howell . original attached but ive copied out below

Request 1  
Breakdown of the annual expenditure on CAMHS in cash terms and as a % of the overall spending on mental health for the most recent 5 years for which data is available **Carwen are you able to provide this please**

Request 2  
The number of s-camhs referrals received and "not accepted " for the most recent / last 5 years for which data is available – **Christine can you do this**

Request 4  
Performance data against the CAMHS annual Targets( AOF) for past 5 years including breaches – **Christine you may need to send steve any old AQF data to convert into a annual graph like we did this year for 2013/14 / steve can you provide this or at least as much as we have**

Request 4  
Vacancy rates in S- CAMHS for the past 5 years as a % of working time equivalents – **Diane any ideas here as who can provide the data as not sure its available ??**

Ang

start | Inbox - Microsoft Out... | re/ Welsh Gov data r... | Microsoft Excel - \\Re... | Microsoft Excel - 25) ... | Microsoft Excel | 09:08

**Interim CAMHS Proforma AOF 2010-20' Updated April 2010**

Llywodraeth Cynulliad Cymru  
Welsh Assembly Government

**To be completed monthly:** This is to be completed by the CAMHS networks on behalf of each LHB.

Each LHB will then be responsible for agreeing the content, and returning this completed proforma to the ISD mailbox, Welsh Assemb

**Send to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk) 10 working days after the month end eg. 17th May 2010 for April's data**

*Name of Local Health Board:HYWEL DDA*

*Name of LHB contact:*

*Email address of contact:*

In accordance with the policy Everybody's Business and the National Service Framework (NSF) for Children, Young People and Maternity Services:

### 1. LHBs to have 2 WTE PMHWs in post per 100,000 population

LHB populations are shown in Appendix A - see tab

Target WTE PMHW's to be achieved:	<i>Figure to be inserted as appropriate on the basis of pop'n figures in Appendix A</i>						
Months:	Census count: Total no. of WTE PMHWs in post as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post	Census count : Total number of funded WTE PMH vacancies as at the last working day of the month e.g. 30 April		Difference between Target and actual WTE in post
	(a)From core funding	(b)From programme funding	Total = sum of a + b		(c)From core funding	(d)From programme funding	Total = sum of c + d
Apr-10	5.8	0	5.8	7.5			0
May-10	5.8	0	5.8	7.5			0
Jun-10	5.8	0	5.8	7.5			0
Jul-10	5.8	0	5.8	7.5			0
Aug-10	5.8	0	5.8	7.5			0
Sep-10	5.8	0	5.8	7.5			0
Oct-10	5.8	0	5.8	7.5			0
Nov-10	5.8	0	5.8	7.5			0
Dec-10	5.8	0	5.8	7.5			0
Jan-11	5.8	0	5.8	7.5			0
Feb-11	5.8	0	5.8	7.5			0
Mar-11	5.8	0	5.8	7.5			0

**Comments:** Please provide any additional comments/ observations to support the data above e.g. explain the different funding sources or any recruitment difficulties:

**2. The PMHWs offer consultation and advice to professionals who deliver the function of Tier 1 within 2 weeks of request**

Report the number of consultations & offers of advice that have been given during the month.

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Of the consultations/ advice requests dealt with within the period, how many were <b>within 2 weeks</b> of request?	242	215	319	291	111	302	274	291	175	330	240	363
Of the consultations/ advice requests dealt with within the period, how many were <b>NOT within 2 weeks</b> of request?	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total number of consultations/ advice requests dealt with within the month (Row 6 + 7)</b>	242	215	319	291	111	302	274	291	175	330	240	363

**Comments: Please provide any additional comments/ observations to support the data above**

### 3. The PMHW's working within an LHB area must offer at least one training course to professionals who deliver the functions of Tier 1 within the

Create a matrix below by listing all unitary local authorities and hospital emergency departments\* (see definition) within its boundaries against each of the mandatory elements:

LHBs can decide whether to run individual or combined courses, provided all unitary local authorities and hospital emergency departments have the opportunity to attend training that covers all three elements. The return must build cumulatively throughout the year to demonstrate that by the year end the LHB has provided training to all constituents for all elements.

List <u>all</u> the individual Local Authorities and hospital emergency departments in the LHB area	Has a course been offered on depression - enter date & venue	Has a course been offered on eating disorders - enter date & venue	Has a course been offered on deliberate self harm - enter date & venue	
<b>CARMARTHESHIRE</b>				
A&E Glangwili Hospital Carmarthen			january 2011 at Glangwili Hospital Carmarthen	Sarah
A&E Prince Phillip Hospital, Llanelli			7 April 2010 - Prince Phillip Hospital, Llanelli	SW
Carmarthenshire LA			27 April 2010 - Machynys Golf Club, Llanelli	SW
Carmarthenshire LA	13 Sept 2010 - Glangwili Hospital, Carmarthen	13 Sept 2010 - Glangwili Hospital, Carmarthen	2 Sept 10 - Coleg Sir Gar, Llanelli	PMHW
Carmarthenshire LA			13 Sept 2010 - Glangwili Hospital, Carmarthen	PMHW
Carmarthenshire LA		22 Oct 2010 - QE High School, Carmarthen		PMHW
<b>CEREDIGION</b>				
A&E - Bronglais Hospital Aberystwyth				
Ceredigion LA			5 May 2010 - The Hive on the Quay, Aberaeron	PMHW
Ceredigion LA			19 May 2010 - London House, Aberaeron	PMHW
Bronglais Gen Hospital			11 June 2010 - Post Graduate Dept, Bronglais General	PMHW
Ceredigion LA	11 Nov 2010 at Post Grad Dept, Bronglais General Hospital, Aberystwyth	11 Nov 2010 at Post Grad Dept, Bronglais General Hospital, Aberystwyth	11 Nov 2010 at Post Grad Dept, Bronglais General Hospital, Aberystwyth	PMHW
Bronglais Gen Hospital			2 Feb 2011 Post Grad, Bronglais	PMHW
<b>PEMBROKESHIRE</b>				
Pembrokeshire LA			5 May 2010 - Bluestone, Canaston Bridge	SW
Pembrokeshire LA			10 May 2010 - Pembrokeshire Activity Centre	PMHW
Pembrokeshire LA			10 June 2010 - Greenhill School, Tenby	PMHW
Pembrokeshire LA			14 Sept 2010 - Greenhill School, Tenby	PMHW
Pembrokeshire LA	30 Sept 2010 - Havenway, Day Hospital, Pembroke Dock	30 Sept 2010 - Havenway, Day Hospital, Pembroke Dock	30 Sept 2010 - Havenway, Day Hospital, Pembroke Dock	PMHW
Pembrokeshire LA	11 Oct 2010 - Preseli Centre, Withybush Hospital, Haverfordwest		1 Nov 2010 - Preseli School	PMHW
Pembrokeshire LA			5 Jan 2011 Greenhill School Haverfordwest	PMHW

**4. All children and young people referred to Specialist CAMHS are assessed and any intervention plans are initiated within 16 weeks**

Report the number of children and young people that are assessed by Specialist CAMHS and that have had their intervention plan initiated during the month, disaggregated between three time bands. This includes those children and young people that are assessed but where it is deemed no intervention plan is required or where the intervention plan is to 'do nothing' and clients are discharged after first assessment.

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people who have been assessed and had their intervention plans initiated within <u>16 weeks (112 calendar days )</u> of receipt of referral	13	22	18	13	18	19	22	17	20	15	17	16
Number of children and young people who have been assessed and had their intervention plans initiated <u>between 17 weeks and 26 weeks (113 - 182 calendar days)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed and who had their intervention plans initiated <u>more than 26 weeks (183 calendar days or more)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who had their intervention plans initiated within the period	13	22	18	13	18	19	48	17	20	15	17	16
Total Number of children and young people waiting for assessment at end of month.	0	0	0	0	0	0	0	0	0	0	0	0
Of the total number of children and young people waiting for assessment at end of month how many have already waited more than 16 weeks (113 days)	0	0	0	0	0	0	0	0	0	0	0	0
Separate breach reports must be completed and attached for each child/ young person with plans initiated over 16 weeks this period or who are still waiting over 16 weeks:												

Comments: Please provide any additional comments/ observations to support the data above:

**5. All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people who have been assessed and have had their intervention plans initiated <u>within 4 weeks</u> ( 28 calendar days) of receipt of referral	28	42	39	33	16	28	26	29	32	29	32	38
Number of children and young people who have been assessed and have had their intervention plans initiated <u>more than 4 weeks</u> (29 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	3	0	0	0
Total number of children and young people who have been assessed and have had their intervention plans initiated <u>within the period</u>	28	42	39	33	16	28	26	29	32	29	32	38

Separate breach reports to be completed and attached for each child/ young person with plans initiated over 4 weeks in this period:

Referral received 1 December 2010 and accepted for four week intervention. Secretarial error in processing appointment resulted in breach. Appointment should have been held no later than 29 December 2010 but appointment arranged for 11 January 2011

LJA

Referral received 8 December 2010 and accepted for four week intervention. Secretarial error in processing appointment resulted in breach. Appointment should have been held no later than 5 January 2011 but appointment arranged for 11 January 2011.

OJ

Referral received 8 December 2010 and accepted for four week intervention. Appointment held on 6 January 2011 which is one day over the AOF Target due to inclement weather and three bank holidays.

EH

**Comments: Please provide any additional comments/ observations to support the data above:  
Current system reviewed and action implemented to ensure no further breaches of this nature.  
Training and communication issues addressed.**



**6. Mental Health Advisers, who are drawn from the experienced professional staff of CAMHS, that are available to each Youth Offending Service (YOS)**

Does your YOS have access to a Mental Health Adviser?

Yes	No

If not please provide further details/ comments:

**7a. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to assessment element of target)**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people assessed <b>within 2 weeks</b> (14 calendar days) of receipt of referral	1	0	1	1	0	0	0	1	0	0	2	0
Number of children and young people assessed <b>more than 2 weeks</b> (15 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	1	0	1	1	0	0	0	1	0	0	2	0

Separate breach reports to be completed and attached for each child/ young person assessed more than 2 weeks from receipt of referral in this period:

Comments: Please provide any additional comments/ observations to support the data above

**7b. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs**, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if **admission** is considered necessary, it **occurs within a further 2 weeks**. (Bold text refers to the admission element of this target)

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people admitted <b>within 2 weeks</b> (14 calendar days) of assessment	1	0	1	1	0	0	0	1	0	0	2	0
Number of children and young people admitted <b>later than 2 weeks</b> (15 calendar days or more) of the assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted within the period	1	0	1	1	0	0	0	1	0	0	2	0

Separate breach reports to be completed and attached for each child/ young person admitted more than 2 weeks of the assessment in this period:

Comments: Please provide any additional comments/ observations to support the data above

**8a. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to assessment element of target)**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people assessed <b>within 12 hours</b> (up to and including 11:59 hours) of receipt of referral	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Number of children and young people assessed <b>more than 12 hours</b> (12:00 and more) (from receipt of referral)	0	0	0	0	0	0	0	0	0	0	1	0
Number of children and young people assessed <b>within the period</b>	0	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

8a

Separate breach reports to be completed and attached for each child/ young person assessed more than 12 hours from receipt of referral in this period

Comments: Please provide any additional comments/ observations to support the data above

**8b. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to the admission element of this target)**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Number of children and young people admitted <u>within 24 hours</u> (up to and including 23.59) of assessment	0	1	1	0	0	0	1	0	0	0	0	0
Number of children and young people admitted <u>more than 24 hours</u> (24:00 and more) from assessment	0	0	0	0	0	0	0	0	0	0	1	0
Number of children and young people admitted <u>within the period</u>	0	1	1	0	0	0	1	0	0	0	0	0

Separate breach reports to be completed and attached for each child/ young person admitted more than 24 hours from assessment in this period

JB assessed within 12 hours as on a adult psychiatric ward but bed not available in Hafod Newydd therefore out of county placement funded by WHSSC

Comments: Please provide any additional comments/ observations to support the data above

Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place – to be included in monthly performance reports.

Report the number of DNA's for New appointments, the number of DNA's for Follow Up appointments

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	Total 10/11
Total number of <b>New Appointments</b> for month					33	41	34	45	41	54	42	41	<b>331</b>
Number of <b>DNA for New Appointments</b>					2	4	0	0	3	1	4	5	<b>19</b>
<b>New DNA %</b>					<b>6.1%</b>	<b>9.8%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>7.3%</b>	<b>1.9%</b>	<b>9.5%</b>	<b>12.2%</b>	<b>5.7%</b>
Total number of <b>Follow Up Appointments</b> for Month					2	2	4	0	4	3	8	5	<b>28</b>
Number of <b>DNA for Follow Up Appointments</b>					0	1	0	0	2	3	2	2	<b>10</b>
<b>Follow up DNA %</b>					<b>0.0%</b>	<b>50.0%</b>	<b>0.0%</b>	<b>#DIV/0!</b>	<b>50.0%</b>	<b>100.0%</b>	<b>25.0%</b>	<b>40.0%</b>	<b>35.7%</b>
<b>DNA % of all appointments</b>					<b>5.7%</b>	<b>11.6%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>11.1%</b>	<b>7.0%</b>	<b>12.0%</b>	<b>15.2%</b>	<b>8.1%</b>

#### DNA REPORTS FOR MARCH 2011

<b>Summary of reasons for DNA if known:</b>	DNA 1	Unknown why they did not attend
	DNA 2	family did not receive appointment letter as they had moved house recently
	DNA 3	Unknown why they did not attend
	DNA 4	Family had another commitment on the day of the appointment
	DNA 5	Unknown why they did not attend as appointment had been agreed with parent
	DNA 6	Follow up from previous DNA - Family & referrer felt happy symptoms had diminished
	DNA 7	Follow up from previous DNA - Unknown why family did not attend
<b>Summary of action taken relating to DNA's:</b>	DNA 1	Clinician rang family left voicemail message. Also spoke to referrer. Appointment offered
	DNA 2	Further appointment agreed with family within aof target
	DNA 3	Enquiries made to referrer and also attempts to contact family
	DNA 4	Agreed to come to appointment week later and attended
	DNA 5	Spoke to family and agreed further appointment
	DNA 6	Follow up from previous DNA - Discharged from Service
	DNA 7	Follow up from previous DNA - Attempted to speak to family and also spoke to referrer
<b>Summary of outcomes of actions taken:</b>	DNA 1	Failed to attend second appointment. No response from family to our enquiries. Agreed with referrer to discharge
	DNA 2	Plan to see family in april
	DNA 3	Unable to get response from family. Referrer agreed to discharge
	DNA 4	family seen
	DNA 5	Due to be seen early April
	DNA 6	Follow up from previous DNA - Liaised with referrer and spoke to family to ensure protocol adhered to
	DNA 7	Follow up from previous DNA - Discharged from Service following agreement with Referrer

#### DNA REPORTS FOR JANUARY 2011

<b>Summary of reasons for DNA if known:</b>	DNA 1	Client did not want to attend
	DNA 2	No contact from family
	DNA 3	Client did not attend and no contact received
	DNA 4	Client does not want to engage
<b>Summary of action taken relating to DNA's:</b>	DNA 1	Clinician spoke to client and referrrrer
	DNA 2	Clinician spoke to referrer
	DNA 3	Clinician has attempted to reach family by phone and letter
	DNA 4	Clinician spoke to client and referrrrer
<b>Summary of outcomes of actions taken:</b>	DNA 1	client discharged with agreement of referrer
	DNA 2	Clinician attempted to phone family and has written asking them to contact clinic
	DNA 3	Clinician has advised referrer if family wont engage then discharge will occur
	DNA 4	Clinician has arranged another appointment with client

#### DNA REPORTS FOR DECEMBER 2010

<b>Summary of reasons for DNA if known:</b>	DNA 1	Reasons for DNA unknown. Clinic offered family appointment for 26 January 2011
	DNA 2	No response when attempted to contact family
	DNA 3	Family had forgotten appointment.
	DNA 4	Client says he does not wish to engage with Service.
	DNA 5	Following first dna, client dna's his second appointment
<b>Summary of action taken relating to DNA's:</b>	DNA 1	Clinic contacted family and offered further appointment for 26 January 2011
	DNA 2	Clinic written asking family to contact clinic so appointment can be offered
	DNA 3	Client offered another appointment for 18 January 2011
	DNA 4	Spoke to client over telephone and offered appointment for 14 December 2010
	DNA 5	Client unable to attend as was attending Court. Further appointment offered for 21 January 2011
<b>Summary of outcomes of actions taken:</b>	DNA 1	appointment 26 January 2011
	DNA 2	Waiting response from family following our letter
	DNA 3	second appointment offered and attended on 14 December
	DNA 4	Client did not attend second appointment offered as appearing in Court
	DNA 5	following dna clinician contacted client and offered further appointment 21 january 2011

#### NO DNA APPOINTMENTS FOR NOVEMBER

#### NO DNA APPOINTMENTS FOR OCTOBER

#### DNA REPORTS FOR SEPTEMBER 2010

<b>Summary of reasons for DNA if known:</b>	DNA 1	Family say they did not receive appointment letter
	DNA 2	Unknown
	DNA 3	Client ran away from home to avoid being arrested
	DNA 4	Unknown
	DNA 5	Unknown
<b>Summary of action taken relating to DNA's:</b>	DNA 1	Appointment letter sent to family
	DNA 2	Unable to engage family despite enquiries and letters offering further appointments.
	DNA 3	Contact made with client and family to ensure client willing to engage if appointment arranged
	DNA 4	Contact details checked and further Letter sent to family offering further appointment
	DNA 5	Contact details checked and further Letter sent to family offering further appointment
<b>Summary of outcomes of actions taken:</b>	DNA 1	Awaiting outcome of Appointment in October
	DNA 2	Discharged due to family unwilling to engage
	DNA 3	Awaiting outcome of Appointment in October
	DNA 4	Awaiting outcome of Appointment in October
	DNA 5	Awaiting outcome of Appointment in October

## Appendix A: Populations

Mid-Year Population Estimates (2001 onwards), data aggregated by local authority and presented for each LHB

Statistical Directorate, Welsh Assembly Government

<http://www.statswales.wales.gov.uk/TableViewer/tableView.aspx?ReportId=16889>

Year	2008	
<b>Wales</b>	<b>2,993,426</b>	<b>Target WTE</b>
<b>Abertawe Bro Morgannwg</b>	<b>501,530</b>	<b>10.00</b>
<b>Aneurin Bevan</b>	<b>561,751</b>	<b>11.00</b>
<b>Betsi Cadwaladr</b>	<b>680,642</b>	<b>13.50</b>
<b>Cardiff &amp; Vale</b>	<b>449,690</b>	<b>8.75</b>
<b>Cwm Taf</b>	<b>289,832</b>	<b>5.75</b>
<b>Hywel Dda</b>	<b>377,383</b>	<b>7.50</b>

## Appendix B: Local authorities within LHB boundaries

<b>LHBs/ Local authorities</b>
<b>Abertawe Bro Morgannwg</b>
Bridgend
Neath Port Talbot
Swansea
<b>Aneurin Bevan</b>
Blaenau Gwent
Caerphilly
Monmouthshire
Newport
Torfaen
<b>Betsi Cadwaladr</b>
Conwy
Denbighshire
Flintshire
Gwynedd
Isle of Anglesey
Wrexham
<b>Cardiff &amp; Vale</b>
Cardiff
Vale of Glamorgan
<b>Cwm Taf</b>
Merthyr Tydfil
Rhondda, Cynon, Taf
<b>Hywel Dda</b>
Carmarthenshire
Ceredigion
Pembrokeshire
<b>Powys</b>
Powys



## **CAMHS Proforma AQF 2011-2012**

Llywodraeth Cynulliad Cymru  
Welsh Assembly Government

**To be completed monthly:** This is to be completed by the CAMHS networks on behalf of each LHB.  
Each LHB will then be responsible for agreeing the content, and returning this completed proforma to the Welsh Assembly Government

**Send to [HSSDG.Performance@wales.gsi.gov.uk](mailto:HSSDG.Performance@wales.gsi.gov.uk) 10 working days after the month end. 13th May 2011 for April's data**

*Name of Local Health Board:* **HYWEL DDA**

*Name of LHB contact:*

*Email address of contact:*

In accordance with the policy Everybody's Business and the National Service Framework (NSF) for Children, Young People and Maternity Services:

### 1. LHBs to have 2 WTE PMHWs in post per 100,000 population

LHB populations are shown in Appendix A - see tab

Target WTE PMHW's to be achieved:	<i>Figure to be inserted as appropriate on the basis of pop'n figures in Appendix A</i>							
Months:	Census count: Total no. of WTE PMHWs in post as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post	Census count : Total number of funded WTE PMH vacancies as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post
	(a)From core funding	(b)From programme funding	Total = sum of a + b		(c)From core funding	(d)From programme funding	Total = sum of c + d	
Apr-11	5.8	0	5.8	7.5			0	1.7
May-11	5.8	0	5.8	7.5			0	1.7
Jun-11	5.8	0	5.8	7.5			0	1.7
Jul-11	5.8	0	5.8	7.5			0	1.7
Aug-11	6.3	0	6.3	7.5			0	1.2
Sep-11	6.3	0	6.3	7.5			0	1.2
Oct-11	6.3	0	6.3	7.5			0	1.2
Nov-11	6.3	0	6.3	7.5			0	1.2
Dec-11	6.3	0	6.3	7.5			0	1.2
Jan-12	6.3	0	6.3	7.5			0	1.2
Feb-12	5.8	0	5.8	7.5			0	1.7
Mar-12	5.8	0	5.8	7.5			0	1.7

**Comments:** Please provide any additional comments/ observations to support the data above e.g. explain the different funding sources or any recruitment difficulties:

**2. The PMHWs offer consultation and advice to professionals who deliver the function of Tier 1 within 2 weeks of request**

Report the number of consultations & offers of advice that have been given during the month.

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Of the consultations/ advice requests dealt with within the period, how many were <b>within 2 weeks</b> of request?	219	365	367	236	160	277	260	399	225	222	303	413
Of the consultations/ advice requests dealt with within the period, how many were <b>NOT within 2 weeks</b> of request?	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total number of consultations/ advice requests dealt with within the month (Row 6 + 7)</b>	219	365	367	236	160	277	260	399	225	222	303	413

**Comments: Please provide any additional comments/ observations to support the data above**



**Comments: Please  
provide any additional  
comments/ observations  
to support the data above**

#### 4. All children and young people referred to Specialist CAMHS are assessed and any intervention plans are initiated within 16 weeks

Report the number of children and young people that are assessed by Specialist CAMHS and that have had their intervention plan initiated during the month, disaggregated between three time bands. This includes those children and young people that are assessed but where it is deemed no intervention plan is required or where the intervention plan is to 'do nothing' and clients are discharged after first

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people who have been assessed and had their intervention plans initiated within <u>16 weeks (112 calendar days )</u> of receipt of referral	13	12	18	16	25	12	18	13	12	17	27	26
Number of children and young people who have been assessed and had their intervention plans initiated <u>between 17 weeks and 26 weeks (113 - 182 calendar days)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed and who had their intervention plans initiated <u>more than 26 weeks (183 calendar days or more)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who had their intervention plans initiated within the period	13	12	18	16	25	12	18	13	12	17	27	26
Total Number of children and young people waiting for assessment at end of month.	0	0	0	0	0	0	0	0	0	0	0	0
Of the total number of children and young people waiting for assessment at end of month how many have already waited more than <u>16 weeks (113 days)</u>	0	0	0	0	0	0	0	0	0	0	0	0

Separate breach reports must be completed and attached for each child/ young person with plans initiated over 16 weeks this period or who are still waiting over 16 weeks:

Comments: Please provide any additional comments/ observations to support the data above:

**5. All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks**

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people who have been assessed and have had their intervention plans initiated <u>within 4 weeks</u> ( 28 calendar days) of receipt of referral	26	18	26	24	32	28	38	27	29	20	38	33
Number of children and young people who have been assessed and have had their intervention plans initiated <u>more than 4 weeks</u> (29 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who have been assessed and have had their intervention plans initiated <u>within the period</u>	26	18	26	24	32	28	38	27	29	20	38	33

Separate breach reports to be completed and attached for each child/ young person with plans initiated over 4 weeks in this period:

Comments: Please provide any additional comments/ observations to support the data above

**6. Mental Health Advisers, who are drawn from the experienced professional staff of CAMHS, that are available to each Youth Offending Service (YOS)**

Does your YOS have access to a Mental Health Adviser? 

Yes	

If not please provide further details/ comments:



**7a. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to assessment element of target)**

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people assessed <u>within 2 weeks</u> (14 calendar days) of receipt of referral	2	0	1	1	1	1	0	0	2	1	2	5
Number of children and young people assessed <u>more than 2 weeks</u> (15 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	2	0	1	1	1	1	0	0	2	1	2	5

Separate breach reports to be completed and attached for each child/ young person assessed more than 2 weeks from receipt of referral in this period:

Comments: Please provide any additional comments/ observations to support the data above

**7b. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to the admission element of this target)**

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people admitted <u>within 2 weeks</u> (14 calendar days) of assessment	0	0	1	0	1	1	0	0	0	1	1	1
Number of children and young people admitted <u>later than 2 weeks</u> (15 calendar days or more) of the assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted within the period	0	0	1	0	1	1	0	0	0	0	1	1

Separate breach reports to be completed and attached for each child/ young person admitted more than 2 weeks of the assessment in this period:

**Comments: Please provide any additional comments/ observations to support the data above: one client admitted BUT second client: (EH) was assessed by Ty Litchard but they were unable to admit as there was no bed available, therefore client was placed at a specialist unit in Stafford**

**8a. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to assessment element of target)**

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people assessed <b>within 12 hours</b> (up to and including 11:59 hours) of receipt of referral	0	2	0	0	0	2	0	0	0	1	0	0
Number of children and young people assessed <b>more than 12 hours</b> (12:00 and more) (from receipt of referral)	0	2	0			2	0	0	0	0	0	0
Number of children and young people assessed <b>within the period</b>	0	2	0	0	0	4	0	0	0	0	0	0

8a

Separate breach reports to be completed and attached for each child/ young person assessed more than 12 hours from receipt of referral in this period

Comments: Please provide any additional comments/ observations to support the data above

**8b. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to the admission element of this target)**

	Apr-11	May-11	Jun-11	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
Number of children and young people admitted <u>within 24 hours</u> (up to and including 23.59) of assessment	0	0	0	0	0	2	0	0	0	1	0	0
Number of children and young people admitted <u>more than 24 hours</u> (24:00 and more) from assessment	0	0	0	0	0	2	0	0	0	0	0	0
Number of children and young people admitted <u>within the period</u>	0	0	0	0	0	4	0	0	0	1	0	0

8b

Separate breach reports to be completed and attached for each child/ young person admitted more than 24 hours from assessment in this period

**Sept 2011** Comments: Please provide any additional comments/ observations to support the data above KJ assessed as requiring immediate admission however no bed was available for transfer on two planned occasions, due to Unit being closed to admissions. LS request for urgent assessment/admission but not undertaken within the stated time scale.

**Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place – to be included in monthly performance reports.**

**Report the number of DNA's for New appointments, the number of DNA's for Follow Up appointments**

	Apr-10	May-10	Jun-10	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11
Total number of <b>New</b> Appointments for month	38	32	39	29	40	45	60	50	36	28	52	44
Number of <b>DNA</b> for <b>New</b> Appointments	4	1	2	1	5	5	3	8	3	5	2	1
<b>New DNA %</b>	<b>10.5%</b>	<b>3.1%</b>	<b>5.1%</b>	<b>3.4%</b>	<b>12.5%</b>	<b>11.1%</b>	<b>5.0%</b>	<b>16.0%</b>	<b>8.3%</b>	<b>17.9%</b>	<b>3.8%</b>	<b>2.3%</b>
<b>Follow Up Appointments</b>												
Total number of <b>Follow Up</b> Appointments for Month	10	3	1	2	1	10	2	15	4	6	1	1
Number of <b>DNA</b> for <b>Follow Up</b> Appointments	1	0	0	0	0	5	0	3	1	1	0	0
<b>Follow up DNA %</b>	<b>10.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>50.0%</b>	<b>0.0%</b>	<b>20.0%</b>	<b>25.0%</b>	<b>16.7%</b>	<b>0.0%</b>	<b>0.0%</b>
<b>DNA % of all appointments</b>	<b>0.0%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>12.2%</b>	<b>18.2%</b>	<b>4.8%</b>	<b>16.9%</b>	<b>10.0%</b>	<b>17.6%</b>	<b>3.8%</b>	<b>2.2%</b>
<b>Mar-12</b>												
One dna - no response from client despite telephone call and letter - liaised with referrer and will attempt to re-engage and offer further appt												
<b>Feb-12</b>												
Two dna's were of forensic clients refusing to engage in the service. Currently liaising with youth offending service to attempt to engage clients in appointments												
<b>Jan-12</b>												
Dna's were during the Christmas holidays. Two have declined to engage in the service whilst the others have all been reappointed												
<b>Dec-11</b>												
The dna's were due to the appointments falling just before or after Christmas weekend. One family runs a local business and were too busy to attend. One family forgot about the appointment. All appointments have been re-arranged and three subsequently seen.												
<b>Nov-11</b>												
Exams were taking place in several schools which resulted in dna's. Also one clients had moved away and Two clients, despite several attempts to engage refused to attend and have been discharged back to the care of the GP.												
<b>Oct-11</b>												
Three DNA's have had new appointments and two attended. Reasons for DNA were due to incorrect address and another appointment letter not received. Third DNA is a client who is refusing to engage with services, and clinician spoken to referrer who will liaise with the family.												
<b>Sep-11</b>												
All DNA's have been followed up by clinicians attempting to speak to clients/families and referrers. All those who have wanted appointments have been re-appointed and seen, but one has moved out of the Health Board area, four have refused any input from the Service, and in another circumstance the referring agency have assisted in helping family to reach appointments												
<b>Aug-11</b>												
Of the five DNA's for New appointment, there were legitimate reasons for three clients to dna ie illness; holidays. One client has moved to live outside of the Health Board area and one client has refused to engage in service at all, despite efforts via the referrer and ourselves. All of the other three dna clients have been offered further appointments												
<b>Jul-11</b>												
Client could not locate clinic; Clinician spoke to family; further appointment offered and seen within two days												
<b>Jun-11</b>												
Client has no fixed abode; Clinician contacted referrer; Seeking clarification of contact details to offer further appointment												
<b>May-11</b>												
Failed to attend as client was ill; Clinician made contact with family but failed to get a response. Contacted Referrer; Further appt arranged												
<b>Apr-11</b>												
Reason for the four dna's were due to appointment not received in time or no response from family following enquiries to dna; contacted families to ascertain reasons - all wanted appointments re-arranged; 4 appointments re-arrange												

## Appendix A: Populations

Mid-Year Population Estimates (2001 onwards), data aggregated by local authority and presented for each LHB  
Statistical Directorate, Welsh Assembly Government

<http://www.statswales.wales.gov.uk/TableViewer/tableView.aspx?ReportId=16889>

Year	2008	
<b>Wales</b>	<b>2,993,426</b>	<b>Target WTE</b>
<b>Abertawe Bro Morgannwg</b>	<b>501,530</b>	<b>10.00</b>
<b>Aneurin Bevan</b>	<b>561,751</b>	<b>11.00</b>
<b>Betsi Cadwaladr</b>	<b>680,642</b>	<b>13.50</b>
<b>Cardiff &amp; Vale</b>	<b>449,690</b>	<b>8.75</b>
<b>Cwm Taf</b>	<b>289,832</b>	<b>5.75</b>
<b>Hywel Dda</b>	<b>377,383</b>	<b>7.50</b>

## CAMHS Proforma AQF 2012-2013

welsh government

**To be completed monthly:** This is to be completed by the CAMHS networks on behalf of each LHB. Each LHB will then be responsible for agreeing the content, and returning this completed proforma to the Welsh Government.

**Send to [HSSDG.Performance@wales.gsi.gov.uk](mailto:HSSDG.Performance@wales.gsi.gov.uk) 10 working days after the month end. 14th May 2012 for April's data**

*Name of Local Health Board: HYWEL DDA HEALTH BOARD*

*Name of LHB contact:*

*Email address of contact:*

In accordance with the policy Everybody's Business and the National Service Framework (NSF) for Children, Young People and Maternity Services:

### 1. LHBs to have 2 WTE PMHWs in post per 100,000 population

LHB populations are shown in Appendix A - see tab

Target WTE PMHW's to be achieved:	<i>Figure to be inserted as appropriate on the basis of pop'n figures in Appendix A</i>							
Months:	Census count: Total no. of WTE PMHWs in post as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post	Census count : Total number of funded WTE PMH vacancies as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post
	(a)From core funding	(b)From programme funding	Total = sum of a + b		(c)From core funding	(d)From programme funding	Total = sum of c + d	
Apr-12	5.8	0	5.8	7.5			0	1.7
May-12	5.8	0	5.8	7.5			0	1.7
Jun-12	5.8	0	5.8	7.5			0	1.7
Jul-12	6.4	0	6.4				0	1.1
Aug-12	6.4	0	6.4				0	1.1
Sep-12	7.6	0	7.6	0			0	0
Oct-12	7.6	0	7.6	0			0	0
Nov-12	7.6	0	7.6	0			0	0
Dec-12	7.6	0	7.6	0			0	0
Jan-13	7.6	0	7.6	0			0	0
Feb-13	7.6	0	7.6	0			0	0
Mar-13	7.6	0	7.6	0			0	0

**Comments:** Please provide any additional comments/ observations to support the data above e.g. explain the different funding sources or any recruitment difficulties:



**2. The PMHWs offer consultation and advice to professionals who deliver the function of Tier 1 within 2 weeks of request**

Report the number of consultations & offers of advice that have been given during the month.

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	
Of the consultations/ advice requests dealt with within the period, how many were <b>within 2 weeks</b> of request?	270	281	282	279	206	224	347	296	324	411	415	436	
Of the consultations/ advice requests dealt with within the period, how many were <b>NOT within 2 weeks</b> of request?	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Total number of consultations/ advice requests dealt with within the month (Row 6 + 7)</b>	270	281	282	279	206	224	347	296	324	411	415	436	3771

**Comments: Please provide any additional comments/ observations to support the data above**

**3. The PMHW's working within an LHB area must offer at least one training course to professionals who deliver the functions of Tier 1 within the unitary local authorities, and the clinical staff of hospital emergency departments, on recognising and responding to children and young people who have depressive disorder or eating and managing deliberate self harm.**

Create a matrix below by listing all unitary local authorities and hospital emergency departments\* (see definition) within its boundaries against each of the mandatory elements:

LHBs can decide whether to run individual or combined courses, provided all unitary local authorities and hospital emergency departments have the opportunity to attend training that covers all three elements. The return must build cumulatively throughout the year to demonstrate that by the year end the LHB has provided training to all constituents for all elements.

List all the individual Local Authorities and hospital emergency departments in the LHB area	Has a course been offered on depression - enter date & venue	Has a course been offered on eating disorders - enter date & venue	Has a course been offered on deliberate self harm - enter date & venue
Ceredigion Local Authority	12 April 2012 Penglais School	12 April 2012 Penglais School	12 April 2012 Penglais School
Pembrokeshire Local Authority	21 March 2013 St. Peter's Civic Hall, Carmarthen	21 March 2013 St. Peter's Civic Hall, Carmarthen	16 April & 8 November Tasker Milward School Haverfordwest
Carmarthenshire Local Authority	21 March 2013 St. Peter's Civic Hall, Carmarthen	21 March 2013 St. Peter's Civic Hall, Carmarthen	21 March 2013 St. Peter's Civic Hall, Carmarthen
Bronglais General Hospital Aberystwyth, Ceredigion A&E	4 October 2012 Enlli Ward, Bronglais Hospital	4 October 2012 Enlli Ward, Bronglais Hospital	4 October 2012 Enlli Ward, Bronglais Hospital
Withybush General Hospital, Haverfordwest, Pembrokeshire A&E	20 March 2013 at Withybush A&E	20 March 2013 at Withybush A&E	20 March 2013 at Withybush A&E
Glangwili General Hospital, Carmarthen, Carmarthenshire A&E	20 March 2013 at Glangwili A&E	20 March 2013 at Glangwili A&E	20 March 2013 at Glangwili A&E

**Comments: Please provide any additional comments/ observations to support the data above**

**4. All children and young people referred to Specialist CAMHS are assessed and any intervention plans are initiated within 16 weeks**

Report the number of children and young people that are assessed by Specialist CAMHS and that have had their intervention plan initiated during the month, disaggregated between three time bands. This includes those children and young people that are assessed but where it is deemed no intervention plan is required or where the intervention plan is to 'do nothing' and clients are discharged after first assessment

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people who have been assessed and had their intervention plans initiated within <u>16 weeks (112 calendar days)</u> of receipt of referral	14	32	22	28	23	16	22	16	26	36	20	24
Number of children and young people who have been assessed and had their intervention plans initiated <u>between 17 weeks and 26 weeks (113 - 182 calendar days)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed and who had their intervention plans initiated <u>more than 26 weeks (183 calendar days or more)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who had their intervention plans initiated within the period	14	32	22	28	23	16	22	16	26	36	20	24
Total Number of children and young people waiting for assessment at end of month.	0	0	0	0	0	0	0	0	0	0	0	0
Of the total number of children and young people waiting for assessment at end of month how many have already waited more than <u>16 weeks (113 days)</u>	0	0	0	0	0	0	0	0	0	0	0	0
Separate breach reports must be completed and attached for each child/ young person with plans initiated over 16 weeks this period or who are still waiting over 16 weeks:												

Comments: Please provide any additional comments/ observations to support the data above:

**5. All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks**

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people who have been assessed and have had their intervention plans initiated <u>within 4 weeks</u> ( 28 calendar days) of receipt of referral	15	31	12	15	6	11	12	8	13	19	21	20
Number of children and young people who have been assessed and have had their intervention plans initiated <u>more than 4 weeks</u> (29 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who have been assessed and have had their intervention plans initiated <u>within the period</u>	15	31	12	15	6	11	12	8	13	19	21	20

Separate breach reports to be completed and attached for each child/ young person with plans initiated over 4 weeks in this period:

Comments: Please provide any additional comments/ observations to support the data above

**6. Mental Health Advisers, who are drawn from the experienced professional staff of CAMHS, that are available to each Youth Offending Service (YOS)**

Does your YOS have access to a Mental Health Adviser?

Yes	No

If not please provide further details/ comments:

**7a. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to assessment element of target)**

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people assessed <u>within 2 weeks</u> (14 calendar days) of receipt of referral	1	1	1	1	0	1	1	0	2	1	1	0
Number of children and young people assessed <u>more than 2 weeks</u> (15 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	1	1	1	1	0	1	1	0	2	1	1	0

Separate breach reports to be completed and attached for each child/ young person assessed more than 2 weeks from receipt of referral in this period:

Comments: Please provide any additional comments/ observations to support the data above

**7b. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to the admission element of this target)**

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people admitted <u>within 2 weeks</u> (14 calendar days) of assessment	0	0	0	0	0	1	0	0	1	0	0	0
Number of children and young people admitted <u>later than 2 weeks</u> (15 calendar days or more) of the assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted within the period	0	0	0	0	0	1	0	0	1	0	0	0

Separate breach reports to be completed and attached for each child/ young person admitted more than 2 weeks of the assessment in this period:

Comments: Please provide any additional comments/ observations to support the data above

8a. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to assessment element of target)

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people assessed within 12 hours (up to and including 11:59 hours) of receipt of referral	1	0	2	0	0	1	1	1	0	0	1	0
Number of children and young people assessed more than 12 hours (12:00 and more) (from receipt of referral)	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	1	0	2	0	0	1	1	1	0	0	1	0
Separate breach reports to be completed and attached for each child/ young person assessed more than 12 hours from receipt of referral in this period												
Comments: Please provide any additional comments/ observations to support the data above:												
<p><b>May 12</b> - Second referral to Tier 4 ( EH ) from Hywel Dda detained on Section 2 Mental Health Act was referred for immediate admission. However assessment did not take place as no staff were available to assess or to admit which resulted in the client being admitted to Tier 4 Residential placement in Staffordshire.</p>												



**8b. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to the admission element of this target)**

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13
Number of children and young people admitted <u>within 24 hours</u> (up to and including 23.59) of assessment	1	0	1	0	0	1	1	1	0	0	0	0
Number of children and young people admitted <u>more than 24 hours</u> (24:00 and more) from assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted <u>within the period</u>	1	0	1	0	0	1	1	1	0	0	0	0

8b

Separate breach reports to be completed and attached for each child/ young person admitted more than 24 hours from assessment in this period

Comments: Please provide any additional comments/ observations to support the data above: June 2012: Referred DR for immediate assessment and admission; assessed within target but unable to provide a bed within the target as no bed available.

Client fits criteria for admission to Ty Litchard, but Ty Litchard do not have a bed available for the next three weeks. Application to WHSSC for funding to admission outside of Wales. Client placed at home under care of local services until appropriate placement sought and funding agreed. Funding agreed for one month placement at the Maudsley Hospital, London, admitted 6 March.

Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place – to be included in monthly performance reports.

**Report the number of DNA's for New appointments, the number of DNA's for Follow Up appointments**

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Total 12/13
Total number of <b>New</b> Appointments for month	36	61	37	33	28	28	25	28	19	33	30	33	
Number of <b>DNA for New</b> Appointments	3	2	2	1	1	5	0	1	0	1	1	4	
<b>New DNA %</b>	<b>8.3%</b>	<b>3.3%</b>	<b>5.4%</b>	<b>3.0%</b>	<b>3.6%</b>	<b>17.9%</b>	<b>0.0%</b>	<b>3.6%</b>	<b>0.0%</b>	<b>3.0%</b>	<b>3.3%</b>	<b>12.1%</b>	<b>#DIV/0!</b>
Total number of <b>Follow Up</b> Appointments for Month	0	3	2	2	1	2	7	1	0	0	0	0	
Number of <b>DNA for Follow Up</b> Appointments	0	0	0	0	0	0	2	0	0	0	0	0	
<b>Follow up DNA %</b>	<b>#DIV/0!</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>28.6%</b>	<b>0.0%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>
<b>DNA % of all appointments</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>3.4%</b>	<b>16.7%</b>	<b>6.3%</b>	<b>3.4%</b>	<b>0.0%</b>	<b>3.0%</b>	<b>3.3%</b>	<b>12.1%</b>	<b>#DIV/0!</b>
<b>Summary of reasons for DNA if known:</b>													

May 2012 -two dna's were due to families not remembering to attend.

June 2012: Appointments missed due to school exams

August 2012: Appointment missed due to holidays

October 2012: Two DNA appointments - both clients very reluctant to be involved with Services. Liaison with referrers continues and further appts offered

November 2012: One DNA - client refused to engage with services; following discussion with referrer client discharged

January 2013: One DNA - no contact with client despite several efforts: written to referrer

February 2013: one dna: Family forgot. Further appointment offered

March 2013: Two families refused to engage with services and were signposted back to referrers. Two DNA's have been re-appointed and seen

## Appendix A: Populations

Mid-Year Population Estimates (2001 onwards), data aggregated by local authority and presented for each LHB  
Statistical Directorate, Welsh Assembly Government

<http://www.statswales.wales.gov.uk/TableViewer/tableView.aspx?ReportId=16889>

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<b>Aneurin Bevan</b>	<b>561,751</b>	<b>11.00</b>
<b>Betsi Cadwaladr</b>	<b>680,642</b>	<b>13.50</b>
<b>Cardiff &amp; Vale</b>	<b>449,690</b>	<b>8.75</b>
<b>Cwm Taf</b>	<b>289,832</b>	<b>5.75</b>
<b>Hywel Dda</b>	<b>377,383</b>	<b>7.50</b>
<b>Powys</b>	<b>132,598</b>	<b>2.60</b>

## Appendix B: Local authorities within LHB boundaries

<b>LHBs/ Local authorities</b>
<b>Abertawe Bro Morgannwg</b>
Bridgend
Neath Port Talbot
Swansea
<b>Aneurin Bevan</b>
Blaenau Gwent
Caerphilly
Monmouthshire
Newport
Torfaen
<b>Betsi Cadwaladr</b>
Conwy
Denbighshire
Flintshire
Gwynedd
Isle of Anglesey
Wrexham
<b>Cardiff &amp; Vale</b>
Cardiff
Vale of Glamorgan
<b>Cwm Taf</b>
Merthyr Tydfil
Rhondda, Cynon, Taf
<b>Hywel Dda</b>
Carmarthenshire
Ceredigion
Pembrokeshire
<b>Powys</b>
Powys

## Appendix B: Local authorities within LHB boundaries

<b>LHBs/ Local authorities</b>
<b>Abertawe Bro Morgannwg</b>
Bridgend
Neath Port Talbot
Swansea
<b>Aneurin Bevan</b>
Blaenau Gwent
Caerphilly
Monmouthshire
Newport
Torfaen
<b>Betsi Cadwaladr</b>
Conwy
Denbighshire
Flintshire
Gwynedd
Isle of Anglesey
Wrexham
<b>Cardiff &amp; Vale</b>
Cardiff
Vale of Glamorgan
<b>Cwm Taf</b>
Merthyr Tydfil
Rhondda, Cynon, Taf
<b>Hywel Dda</b>
Carmarthenshire
Ceredigion
Pembrokeshire
<b>Powys</b>
Powys

## CAMHS Proforma AQF 2013-14

welsh government

**To be completed monthly:** This is to be completed by the CAMHS networks on behalf of each LHB. Each LHB will then be responsible for agreeing the content, and returning this completed proforma to the Welsh

**Send to [HSSDG.Performance@wales.gsi.gov.uk](mailto:HSSDG.Performance@wales.gsi.gov.uk) 10 working days after the month end. 14th May 2012 for April's data**

***Name of Local Health Board: HYWEL DDA HEALTH BOARD***

*Name of LHB contact:*

*Email address of contact:*

In accordance with the policy Everybody's Business and the National Service Framework (NSF) for Children, Young People and Maternity Services:

**1. LHBs to have 2 WTE PMHWs in post per 100,000 population**

LHB populations are shown in Appendix A - see tab

**Target WTE PMHW's to be achieved:** *Figure to be inserted as appropriate on the basis of pop'n figures in Appendix A*

Months:	Census count: Total no. of WTE PMHWs in post as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post	Census count : Total number of funded WTE PMH vacancies as at the last working day of the month e.g. 30 April			Difference between Target and actual WTE in post
	(a)From core funding	(b)From programme funding	Total = sum of a + b		(c)From core funding	(d)From programme funding	Total = sum of c + d	
Apr-13	7.6	0	7.6	0			0	0
May-13	7.6	0	7.6	0			0	0
Jun-13	7.6	0	7.6	0			0	0
Jul-13	7.6	0	7.6	0			0	0
Aug-13	7.6	0	7.6	0			0	0
Sep-13	7.6	0	7.6	0			0	0
Oct-13								
Nov-13								
Dec-13								
Jan-14								
Feb-14								
Mar-14								

**Comments:** Please provide any additional comments/ observations to support the data above e.g. explain the different funding sources or any recruitment difficulties:

**2. The PMHWs offer consultation and advice to professionals who deliver the function of Tier 1 within 2 weeks of request**

Report the number of consultations & offers of advice that have been given during the month.												
	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Of the consultations/ advice requests dealt with within the period, how many were <b>within 2</b> weeks of request?	440	390	440	401	284	507	620	434	423	465	482	443
Of the consultations/ advice requests dealt with within the period, how many were <b>NOT within 2 weeks</b> of request?	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total number of consultations/ advice requests dealt with within the month (Row 6 + 7)</b>	440	390	440	201	284	507	620	434	423	465	482	443

**Comments: Please provide any additional comments/ observations to support the data above**



**3. The PMHW's working within an LHB area must offer at least one training course to professionals who deliver the functions of Tier 1 within the unitary local authorities, and the clinical staff of hospital emergency departments, on recognising and responding to children and young people who have depressive disorder or eating and managing deliberate self harm.**

Create a matrix below by listing all unitary local authorities and hospital emergency departments\* (see definition) within its boundaries against each of the mandatory elements:

LHBs can decide whether to run individual or combined courses, provided all unitary local authorities and hospital emergency departments have the opportunity to attend training that covers all three elements. The return must build cumulatively throughout the year to demonstrate that by the year end the LHB has provided training to all constituents for all elements.

List <u>all</u> the individual Local Authorities <u>and</u> hospital emergency departments in the LHB area	Has a course been offered on depression - enter date & venue	Has a course been offered on eating disorders - enter date & venue	Has a course been offered on deliberate self harm - enter date & venue
Ceredigion Local Authority	19 July 2013 Post Grad Bronglais Hospital	19 July 2013 Post Grad Bronglais Hospital	19 July 2013 Post Grad Bronglais Hospital
Pembrokeshire Local Authority	2 December 2013 at Milford Haven	2 December 2013 at Milford Haven	2 December 2013 at Milford Haven
Carmarthenshire Local Authority	8 October 2013 Stradey School, Llanelli	8 October 2013 Stradey School, Llanelli	8 October 2013 Stradey School, Llanelli
Bronglais General Hospital Aberystwyth, Ceredigion A&E	4 July 2013 at Bronglais hopsital	4 July 2013 at Bronglais hopsital	4 July 2013 at Bronglais hopsital
Withybush General Hospital, Haverfordwest, Pembrokeshire A&E	05/12/2013 Withybush Hospital	05/12/2013 Withybush Hospital	05/12/2013 Withybush Hospital
Glangwili General Hospital, Carmarthen, Carmarthenshire A&E	27 March 2014 at Training bungalow, ty Llewelyn	27 March 2014 at Training bungalow, ty Llewelyn	27 March 2014 at Training bungalow, ty Llewelyn

**Comments: Please provide any additional comments/ observations to support the data above**

**4. All children and young people referred to Specialist CAMHS are assessed and any intervention plans are initiated within 16 weeks**

Report the number of children and young people that are assessed by Specialist CAMHS and that have had their intervention plan initiated during the month, disaggregated between three time bands. This includes those children and young people that are assessed but where it is deemed no intervention plan is required or where the intervention plan is to 'do nothing' and clients are discharged after first assessment

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people who have been assessed and had their intervention plans initiated within <u>16 weeks (112 calendar days)</u> of receipt of referral	19	26	19	1	14	18	22	20	46	31	31	26
Number of children and young people who have been assessed and had their intervention plans initiated <u>between 17 weeks and 26 weeks (113 - 182 calendar days)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed and who had their intervention plans initiated <u>more than 26 weeks (183 calendar days or more)</u> of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total number of children and young people who had their intervention plans initiated within the period</b>	19	26	19	1	14	18	22	20	46	31	31	26
Total Number of children and young people waiting for assessment at end of month.	0	0	0	0	0	0	0	0	0	0	0	0
Of the total number of children and young people waiting for assessment at end of month how many have already waited more than 16 weeks (113 days)	0	0	0	0	0	0	0	0	0	0	0	0
Separate breach reports must be completed and attached for each child/ young person with plans initiated over 16 weeks this period or who are still waiting over 16 weeks:												

Comments: Please provide any additional comments/ observations to support the data above:

**5. All children & young people referred to Specialist CAMHS who have sustained low mood of 6 weeks or more duration and suicidal ideation are assessed and any intervention plans required are initiated within 4 weeks**

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people who have been assessed and have had their intervention plans initiated <u>within 4 weeks</u> ( 28 calendar days) of receipt of referral	16	21	17	7	12	13	29	19	17	13	17	19
Number of children and young people who have been assessed and have had their intervention plans initiated <u>more than 4 weeks</u> (29 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Total number of children and young people who have been assessed and have had their intervention plans initiated <u>within the period</u>	16	21	17	7	12	13	29	19	17	13	17	19

Separate breach reports to be completed and attached for each child/ young person with plans initiated over 4 weeks in this period:

Comments: Please provide any additional comments/ observations to support the data above

**6. Mental Health Advisers, who are drawn from the experienced professional staff of CAMHS, that are available to each Youth Offending Service (YOS)**

Does your YOS have access to a Mental Health Adviser?

Yes	No

If not please provide further details/ comments:

**7a. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to assessment element of target)**

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people assessed <u>within 2 weeks</u> (14 calendar days) of receipt of referral	1	2	1	0	0	0	0	0	0	0	1	1
Number of children and young people assessed <u>more than 2 weeks</u> (15 calendar days or more) of receipt of referral	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	1	2	1	0	0	0	0	0	0	0	1	1

Separate breach reports to be completed and attached for each child/ young person assessed more than 2 weeks from receipt of referral in this period:

Comments: Please provide any additional comments/ observations to support the data above

**7b. Those who are assessed by Specialist CAMHS as requiring admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 2 weeks from the date on which a written or electronic referral is received by the LHB; and, if admission is considered necessary, it occurs within a further 2 weeks. (Bold text refers to the admission element of this target)**

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people admitted <u>within 2 weeks</u> (14 calendar days) of assessment	0	1	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted <u>later than 2 weeks</u> (15 calendar days or more) of the assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted within the period	0	1	0	0	0	0	0	0	0	0	0	0

Separate breach reports to be completed and attached for each child/ young person admitted more than 2 weeks of the assessment in this period:

Comments: Please provide any additional comments/ observations to support the data above

8a. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for children & young people on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. **(Bold text refers to assessment element of target)**

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people assessed <b>within 12 hours</b> (up to and including 11:59 hours) of receipt of referral	0	1	1	0	0	2	2	3	1	0	0	0
Number of children and young people assessed <b>more than 12 hours</b> (12:00 and more) (from receipt of referral)	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people assessed within the period	0	1	1	0	0	2	2	3	1	0	0	0
Separate breach reports to be completed and attached for each child/ young person assessed more than 12 hours from receipt of referral in this period												
Comments: Please provide any additional comments/ observations to support the data above:												

**8b. Those who are assessed by Specialist CAMHS as requiring immediate admission to a psychiatric unit for adolescents on account of their clinical needs, are assessed for admission within 12 hours of the time at which a written or electronic referral is received by the LHB; or a telephonic referral is made and, and, if admission is considered necessary, it occurs within a further 24 hours. (Bold text refers to the admission element of this target)**

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
Number of children and young people admitted <u>within 24 hours</u> (up to and including 23.59) of assessment	0	1	1	0	0	2	1	1	1	0	0	0
Number of children and young people admitted <u>more than 24 hours</u> (24:00 and more) from assessment	0	0	0	0	0	0	0	0	0	0	0	0
Number of children and young people admitted <u>within the period</u>	0	1	1	0	0	2	1	1	1	0	0	0

8b

Separate breach reports to be completed and attached for each child/ young person admitted more than 24 hours from assessment in this period

Comments: Please provide any additional comments/ observations to support the data above:

**June 2012: Referred DR for immediate assessment and admission; assessed within target but unable to provide a bed within the target as no bed available.**

**NOVEMBER 2013: One client was assessed by Ty Litchard who agreed to admission but unfortunately no bed was available for the foreseeable future. In view of client's clinical condition it was agreed via WHSSC to admit to an unit outside of Wales for an initial period of six weeks**



**Specialist CAMHS Planning Networks, on behalf of the LHBs, to monitor non-engagement rates, and to ensure that review mechanisms are in place – to be included in monthly performance reports.**

Report the number of DNA's for New appointments, the number of DNA's for Follow Up appointments

	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Total 2013/14
Total number of <b>New</b> Appointments for month	35	26	33	31	39	28	24	51	31	46	34	41	<b>419</b>
Number of <b>DNA for New</b> Appointments	0	1	0	2	2	1	1	1	0	0	1	0	<b>9</b>
<b>New DNA %</b>	<b>0.0%</b>	<b>3.8%</b>	<b>0.0%</b>	<b>6.5%</b>	<b>5.1%</b>	<b>3.6%</b>	<b>4.2%</b>	<b>2.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>2.9%</b>	<b>0.0%</b>	<b>2.1%</b>
Total number of <b>Follow Up</b> Appointments for Month	1	0	0	1	2	2	0	1	0	0	0	0	
Number of <b>DNA for Follow Up</b> Appointments	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Follow up DNA %</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>#DIV/0!</b>	<b>0.0%</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>
<b>DNA % of all appointments</b>	<b>0.0%</b>	<b>3.8%</b>	<b>0.0%</b>	<b>6.5%</b>	<b>4.9%</b>	<b>3.3%</b>	<b>4.2%</b>	<b>1.9%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>2.9%</b>	<b>0.0%</b>	<b>2.1%</b>
Nov DNA: Cancelled first appointment and requested male clinician, appt arranged as requested but then dna'd and is refusing to attend													
Oct DNA : Following client dna referrer and client contacted with client refusing to engage with Service. Referrer agreed to discharge													
Sept DNA - client contacted following dna. Client refusing to engage with service. Service liaised with referrer and client discharged.													
15 aug: Could not get in touch with Client Spoke to GP who agreed to contact client and advise scamhs of outcome. Gp highlighted client's unstable lifestyle; following several attempts by scamhs to contact gp and establish the outcome of his discussion with client there has been no response to date and failure to attend other appointments offered													
16 Aug: client dna'd. On enquiry client was refusing to attend clinic. Home visit has been arranged by scamhs													

## Appendix A: Populations

Mid-Year Population Estimates (2001 onwards), data aggregated by local authority and presented for each LHB  
Statistical Directorate, Welsh Assembly Government

<http://www.statswales.wales.gov.uk/TableViewer/tableView.aspx?ReportId=16889>

Year	2008	
<b>Wales</b>	<b>2,993,426</b>	<b>Target WTE</b>
<b>Abertawe Bro Morgannwg</b>	<b>501,530</b>	<b>10.00</b>
<b>Aneurin Bevan</b>	<b>561,751</b>	<b>11.00</b>
<b>Betsi Cadwaladr</b>	<b>680,642</b>	<b>13.50</b>
<b>Cardiff &amp; Vale</b>	<b>449,690</b>	<b>8.75</b>
<b>Cwm Taf</b>	<b>289,832</b>	<b>5.75</b>
<b>Hywel Dda</b>	<b>377,383</b>	<b>7.50</b>
<b>Powys</b>	<b>132,598</b>	<b>2.60</b>

## Appendix B: Local authorities within LHB boundaries

<b>LHBs/ Local authorities</b>
<b>Abertawe Bro Morgannwg</b>
Bridgend
Neath Port Talbot
Swansea
<b>Aneurin Bevan</b>
Blaenau Gwent
Caerphilly
Monmouthshire
Newport
Torfaen
<b>Betsi Cadwaladr</b>
Conwy
Denbighshire
Flintshire
Gwynedd
Isle of Anglesey
Wrexham
<b>Cardiff &amp; Vale</b>
Cardiff
Vale of Glamorgan
<b>Cwm Taf</b>
Merthyr Tydfil
Rhondda, Cynon, Taf
<b>Hywel Dda</b>
Carmarthenshire
Ceredigion
Pembrokeshire
<b>Powys</b>
Powys