

Enfield CAMHS Alliance – Enhanced Tier 3 crisis support team

The Alliance team consists of 3 mental health nurses who have extensive experience in working with young people and their families in crisis. In July 2010 the Alliance team began to operate alongside the SAFE team and, two generic CAMHS teams in Enfield and Enfield SCAN.

The main aims of the Alliance team are to respond to those young people who are or have been at risk of admission to a Tier 4 hospital service.

- To respond to referrals from the CAMHS community teams within 24 hr of referral.
- To engage for a short period (90 days) and disengage having a clear follow up plan within the CAMHS Tier 3 clinic.
- Where a young person is admitted to Tier 4 - To engage with the young person whilst in hospital with a view to reduce the length of stay by supporting a transition into the community.
- Where possible – to reduce the need for Tier 4 admission by offering intensive home/ community support.

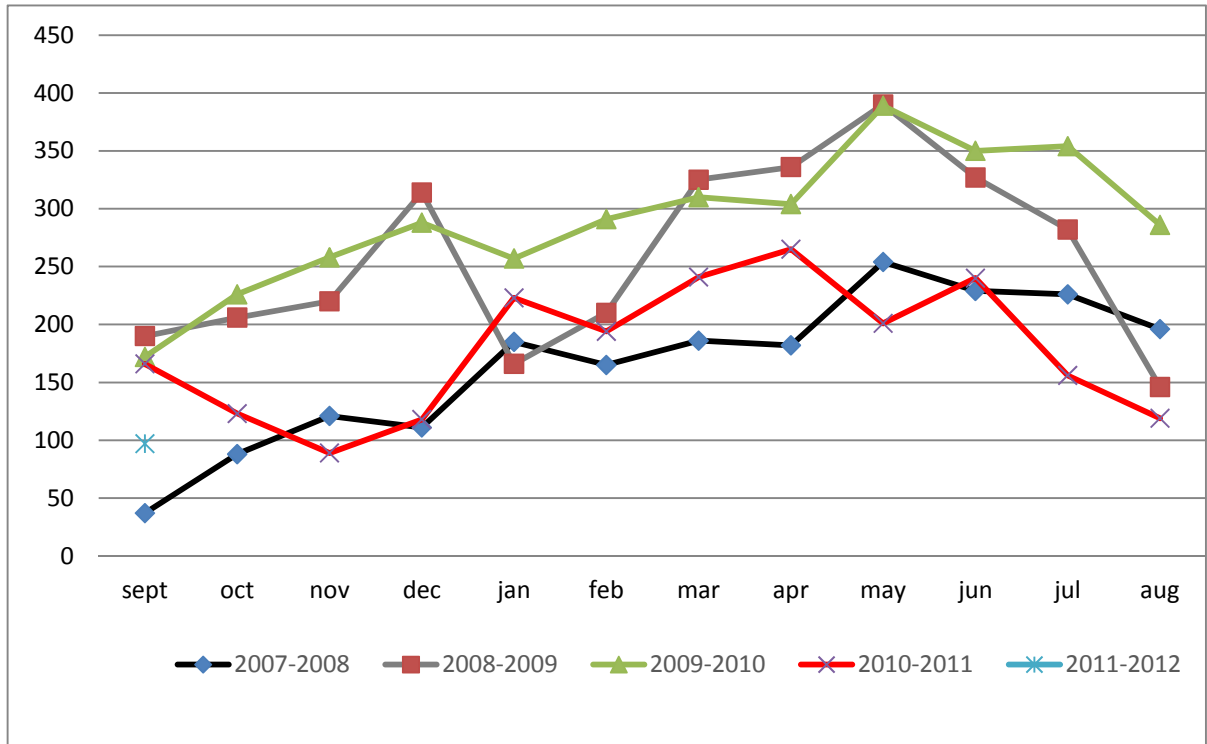
Within the first year of operation Alliance have received 50 referrals. The following information is a summary and a review of the work we have undertaken to date.

Task 1: Reducing Tier 4 bed days

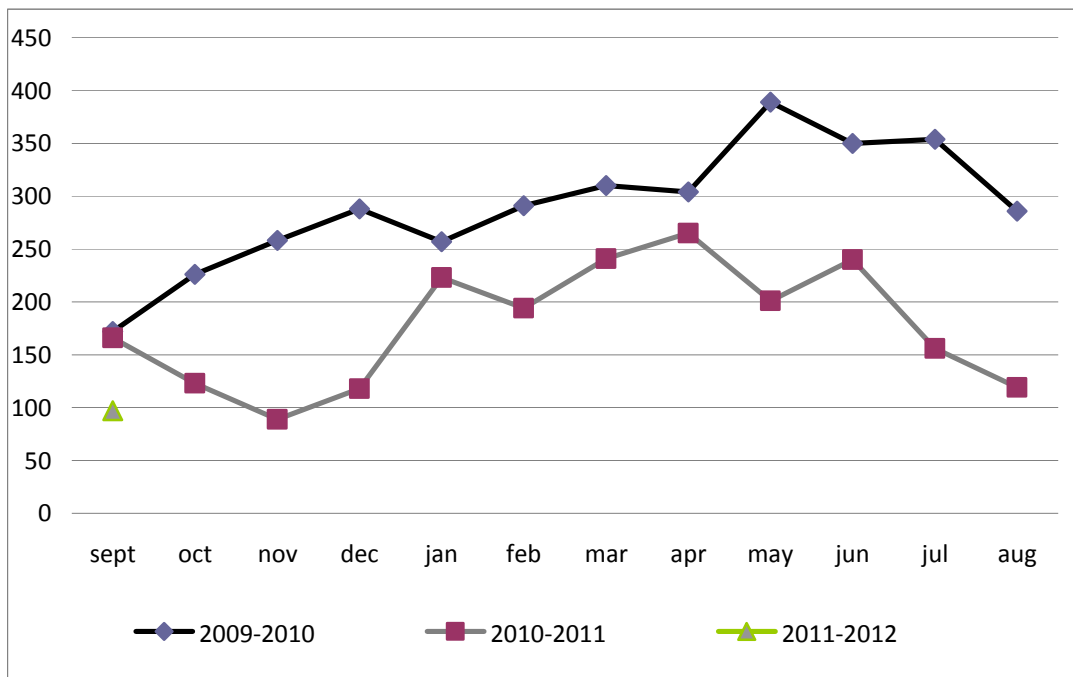
A brief review of Tier 4 bed days used by Enfield CAMHS over the past 3 years show that Alliance has made an impact in decreasing bed use by 1350 on the previous year.

- 2008-2009: Total 3112 bed days averaging 8 admissions per month.
- 2009-2010: Total 3485 bed days (an increase of 373 from the previous year) averaging 9.3 admissions per month.
- 2010-2011 Total 2135 bed days (a decrease of 1350 bed days from previous year) averaging 5.8 admissions per month.

Reviewing this impact on a month by month basis shows that bed usage has been reduced despite following admission trend, (increased admissions Jan/ Apr) ongoing monitoring of admission trends on a month to month basis allows us to observe particular trends in capacity for crisis management.



A clearer view of the reduction of Tier 4 bed stay comparing the year prior to Alliance service in operation.



Initially we anticipated that we would be working with New Beginning, however we also have worked with other Tier 4 resources. We have found it useful to observe the other services we have engaged with and also the amount of bed days being used in these resources. We think this

important for commissioners and service managers to be aware of as this work as we feel that working with external NHS and private sector services has been significant in reducing bed days.

New Beginning/ Northgate Clinic Edgware	Simmons house Muswell Hill	Priory Enfield	St Georges Tooting Bec	GOSH Central London	St Andrews Northampton	Alpha Hospital woking	TOTAL
13	1	4	2	1	1	1	23
907 obd	238 obd	99 obd	307 obd	88 obd	365 obd	131 obd	2135
INPATIENT BED DAYS SEPT 2010 – AUG 2011							

Of the overall 50 referrals in the past year, just under half (23) have had an admission to Tier 4. We are confident that there is room to prevent further admissions in the next year as some of these admissions were existing admissions prior to Alliance being operational and we have found that as Alliance has been in existence young people have been referred to inpatient services before being referred to Alliance. Of the 23 admission we believe that 5 of these may have been prevented if Alliance had been involved prior to the referral to Tier 4. We have been made aware that the issue of funding being agreed have played a part in young people going to hospital regardless of assessment by Alliance, this raises the issue of Alliance teams' role in assessment, single point of entry and gatekeeping.

At the other end of the process the capacity to disengage within 90 days is dependent upon the resources within the Tier 3 team to work alongside Alliance and not see Alliance as a separate team that 'case manage' young people on behalf of the team. Where young people have remained open for over 90 days we have identified key dynamics in the cases.

Required long stay in Tier 4	Transitions in social care – change accommodation/ Total breakdown in Parental relationship	Non engagement with Tier 3 individual or family therapy (EITHER REFUSE TO ATTEND OR NOT OFFERED)
3	7	7

We feel it is important for commissioners and service managers to have an awareness of our need to retain the capacity to work intensively and responsively to crisis as we see this a crucial to preventing the need for admission.

We would also like to highlight there are have been cases where Tier 3 practitioners have worked to discharge young people from hospital without referral to Alliance.

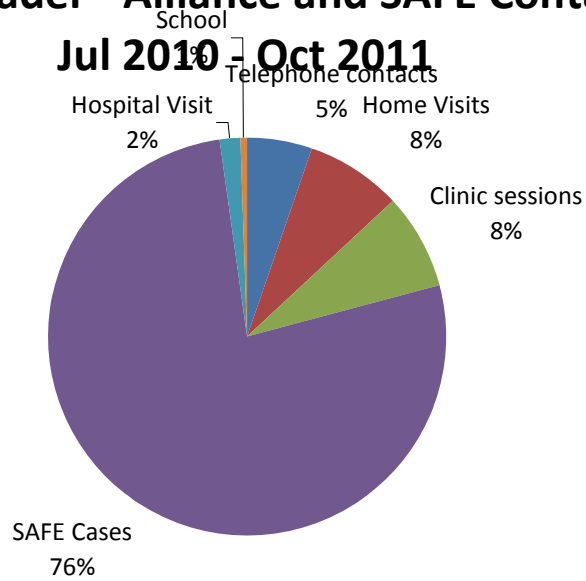
Task 2: Preventing hospital admission

27 of all cases referred have not required hospital admission. We find it impossible to measure how many of these referrals would have been admitted to hospital if Alliance had not been available.

We are reliant upon the availability of SAFE and generic teams to be able to offer a longer term engagement. As the Alliance team are based with the SAFE team there is an option for the Alliance team to take on longer term SAFE cases. This allows the Alliance worker to have the experience of engaging in longer term work and also allows for capacity for SAFE to take on clients. The following charts highlight the way by which each Alliance worker spends their time.

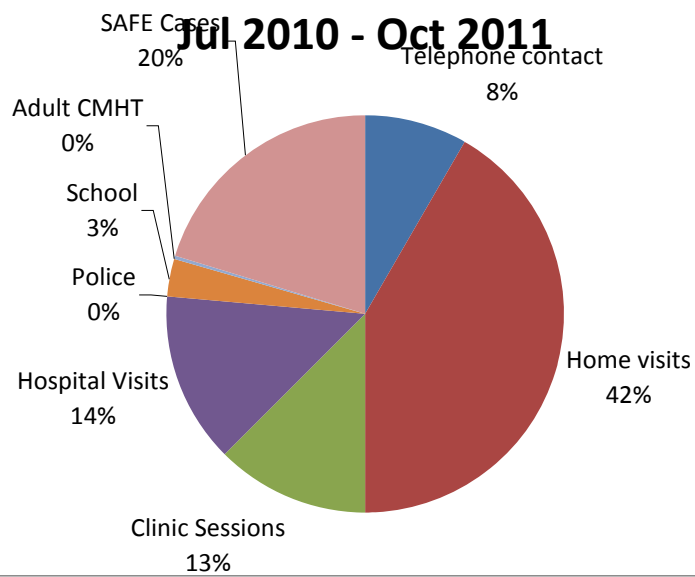
Team Leader - Alliance and SAFE Contacts

Jul 2010 - Oct 2011



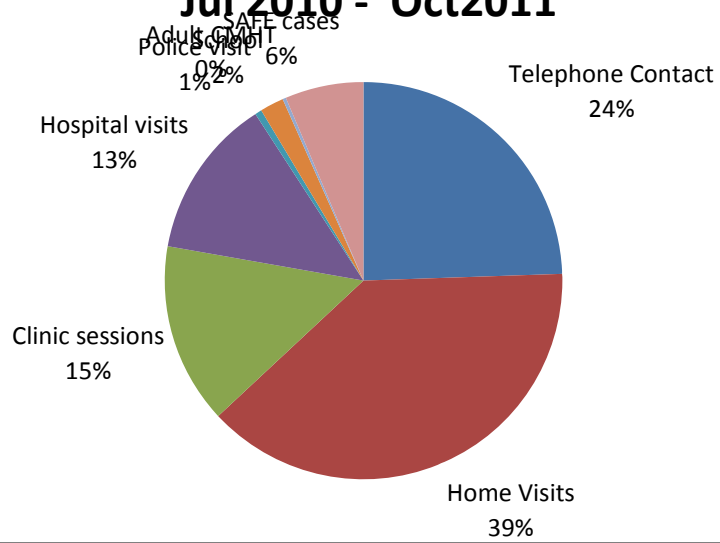
Team Member 1 - Alliance and SAFE Contacts

Jul 2010 - Oct 2011



Team Member 2 - Alliance and SAFE Contacts

Jul 2010 - Oct2011



Overall Alliance team activity

Jul 2010 -Jul 2011

