



*Scottish MCN for Children with
Complex Mental Health Needs*

Annual Report
2008-2009

Contents:

Content	Page Number
Introduction	1
Background	2
The Network	3
Network Objectives 2008/9	4
Network Objectives 2009/10	6
Communication	6
Finance	7

1. Executive Summary

The Scottish Managed Clinical Network (MCN) for Children with Complex Mental Health Needs was launched in August 2007. This report tracks the progress of the network 1st April 2008 to 31st March 2009. In the period 2007-08 the network clinical lead was Dr Sandra Duke (Consultant Child and Adolescent Psychiatrist). Dr Duke resigned from this post in September 2008. She was succeeded by Sarah Lloyd (Head Occupational Therapist and Play Therapist) at the beginning of March 2009.

The MCN Manager of the network is Marianne Hayward, who took up post in July 2008. Michael Durkan has provided administration support since October 2008.

Network Objectives 2008-2009

- Benchmarking of services
- Further development of the practice exchange forum.
- The creation of an executive group
- The further development of User involvement

Benchmarking

To progress benchmarking, the network has developed links with the Scottish Government Advisory group who are currently undertaking numerous benchmarking activities. In addition, Sarah Lloyd is currently leading on a project to benchmark which clinical cases Children and Adolescent Mental Health Teams (CAMHS) find most complex. In 2009, the result of this project plus the Advisory group work will be pulled together by a small working group. This group will formulate options to be considered by the MCN executive on the clinical areas which will come under the remit of the MCN workplan.

Practice Exchange Forum

Practice exchange has continued to develop. Three sessions have been organised in the period of this report have been on disordered eating, autistic spectrum and paediatric liaison. The increase sites that use videoconferencing has been encouraging. Through the network office, the network has links to the national development work on video conferencing. The details of this will be available in 2009-10, but will include a review of technical support, equipment and training needs.

Executive Group

During the year an Executive Group has been formed from the wider Network group to oversee and coordinate the work of the MCN. Its members represent a wide range of stakeholders who will have an impact on services for children with complex mental health needs. This group had its initial meeting in December 2008.

User Involvement

In October 2008, the network held an 'open event' in Perth to explore user involvement. This event was attended by a wide range of users, clinicians and voluntary sector organisations.

The MCN steering group had user participation from three parents through 2008-9. One of these parents has become an active member of the Executive Group.

A wider user involvement strategy will be proposed after the benchmarking exercise is complete. The network is also linking with the Yorkhill office 'user forum' recommendations. (Appendix 2)

Network Objectives 2009/10

- Define which groups of complex children the network will have within its remit through qualitative benchmarking.
- Develop a user involvement strategy
- Continue the development of practice exchange.
- Develop a quality assurance framework and submit this to QIS for accreditation.
- Develop a core data set for measuring network activity and outcomes

1. INTRODUCTION

The report details the performance of the MCN from April 2008 to the end of financial year in March 2009.

Managed Clinical Networks

In 2002 the Scottish Executive issued NHS HDL (2002) 69 "Promoting the Development of Managed Clinical Networks in NHS Scotland" to confirm their commitment to the development of MCNs.

MCNs are defined in the HDL as:

Linked groups of health professionals and organisations from primary, secondary and tertiary care, working in a co-ordinated manner, unconstrained by existing professional and health Board boundaries, to ensure equitable provision of high quality clinically effective services throughout Scotland.

The most recent HDL on Managed Clinical Networks (2007) 21 "Strengthening the Role of Managed Clinical Networks" confirms the Scottish Government's commitment to MCNs and encourages future development.

The HDL recognises that...*whole system change is beyond the capability of any single organization, and therefore encourages the continuing development of Managed Clinical Networks.*

2.0 BACKGROUND

The Scottish MCN for Children with Complex Mental Health Needs

The Scottish Managed Clinical Network (MCN) for Children with Complex Mental Health Needs has a membership of multidisciplinary clinicians, service users, voluntary sector organisations and regional planners, who have an interest in the care of children with range of complex and severe mental health needs. The network has been established since 2007. Its aim was to facilitate the appropriate assessment, treatment, and management of children with severe and complex mental health problems across Scotland. There were three Network meetings between August 2007 and September 2008. These have been invaluable for engaging with all stakeholders, service users and voluntary organisations who are involved in the care of children with complex mental health needs. From these meetings two sub-groups evolved – a practice exchange forum and a user participation group. The practice exchange forum planned regular teleconference events through the year to discuss complex cases with colleagues across Scotland, facilitating best practice and evidence based care. This use of teleconferencing has ensured that the wider networks of stakeholders are engaged.

Another evolving area of work has been communication. To promote information sharing about all aspects of complex mental health needs in children across Scotland, the MCN has established Network newsletters and has developed a website.

In addition the MCN has forged links with the Scottish Government Advisory Group for Children and Adolescent Mental Health Services (CAMHS) who are driving mental health services for young people.

3: THE NETWORK

The Scottish MCN for Children with Complex Mental Health Needs is a national paediatric managed clinical network, commissioned by NHS Scotland National Services Division (NSD), and operating within functions outlined by the Scottish Government.

The MCN is chaired by Sally Kuenssberg, a former Non-Executive Director of NHS Greater Glasgow and Clyde and trustee of the Scottish Child Psychotherapy Trust. The Lead Clinician for the Network from 2007 to September 2008 was Dr Sandra Duke, Consultant Child and Adolescent Psychiatrist in NHS Tayside. Sandra has been succeeded by Sarah Lloyd, Head Occupational Therapist and Play Therapist, NHS Fife.

Due to the five month gap until the appointment of the new lead clinician some of the network objectives have been carried forward into the 2009/10 work plan.

Over the past year, the Network has been managed by Marianne Hayward, with dedicated administrative support being provided by Michael Durkan since October 2008.

The only network meeting during the period of this annual report was held on the 12th September 2008 at the centre for child health in Dundee. This was attended by small number of stakeholders from a wide range of professions.

This meeting endorsed the proposal to form an executive group and committed to holding two wider network meetings a year which will include an educational component to encourage greater attendance. The objective of this was to encourage wider participation in the network. The management structure of the MCN was therefore revised with the establishment of a MCN Executive group. This group committed to meeting four times a year with the wider network meetings occurring twice annually. The wider network meetings would focus primarily on education and communication to the wider stakeholders involved in the care of these children.

4: NETWORK OBJECTIVES 2008-2009

In 2008/09 the network was committed to:

1. Benchmarking of services
2. Further development of the practice exchange forum.
3. The creation of an executive group
4. The further development of User involvement

Network Progress

4.2 Benchmarking Services

Sarah Lloyd is currently leading a project to benchmark services in partnership with Child and Adolescent Mental Health (CAMH) Teams, to define which complex conditions they find challenging. This project will be pulled together by a small working group who will meet in August to plan the way forward. The findings will form the basis of options to be considered by the executive on the clinical areas which will come under the remit of the MCN work plan. This in turn will inform the user involvement strategy and data collection.

The MCN has links with the Scottish Government Advisory Group which has ongoing benchmarking work streams on CAMHS teams, workforce planning and patient pathways.

4.3 Practice exchange forum

The Practice Exchange Planning Group works on a range of tasks in order to facilitate clinical discussion between practitioners for cases that teams find challenging.

The practice exchange forum was piloted in May 2008 when the topic for discussion was Autistic Spectrum Disorder. It was anticipated that the forum would evolve to define some aspects of complexity of these cases, benchmarking of services and the exchange of ideas across specialties.

Two practice exchange forums have been held since the pilot during the period of this report. These have been attended by a broad range of specialties across CAMHS. The MCN has also formed a practice exchange planning sub group of the MCN which will plan the programme for 2009/10. Through the network office the MCN has links to national developments on videoconferencing. Future initiatives which will be included in this work are training, equipment and technical support.

Table 1
Practice exchange 2008/09

Date	Topic	Attendees
22 nd September Base: Edinburgh Lead :Brenda Renz Consultant Child Psychologist, Day Unit, Lothian	Topic ADHD and feeding problems	Number of attendees 8 Number of sites 4
23 rd October Base: Glasgow Lead: Ama Addo Consultant Child Psychologist, NHS GGC	Topic Learning disabilities	Number of attendees 13 Number of sites 3
4 th Dec 2008 Base: Glasgow Lead: Elaine Lockhart Consultant Child Psychologist, NHS GGC	Paediatric Liaison	Number of Attendees 14 Number of Sites 4

4.4 Executive Group

The first Executive Group meeting was held in December 2008 at Delta House in Glasgow. At this meeting a terms of reference were agreed and the work plan objectives discussed. In addition to the four objectives above the executive also supported the creation of a quality assurance framework to be submitted in 2009/10 to Quality Assurance Scotland for accreditation. The membership of the executive group is listed on Appendix 1.

4.5 User Involvement

The work of the original service user group has been unfortunately stalled through 2008-09. This was due to the resignation of the joint chairs, who moved posts at this time. However the network did run a parent forum open event in October 09. The results of the evaluations from this event are available on Appendix 3.

There are a number of users who were involved on the MCN executive 2009/10. In January these parents were invited to a wider network forum discussion. At this event, parent representatives were invited from across the paediatric MCNs to voice their opinion on the way forward for user involvement within MCNs in general. This event was facilitated by Pauline Fletcher who has experience in user involvement.

The results of this forum will inform the future direction of 'users' across the paediatric MCNs. The summary of the forum is highlighted in Appendix 2.

Once the MCN benchmarking exercise is complete, the MCN will be formulating a user involvement framework which will include ideas from the user event and MCN forum.

5.0 NETWORK OBJECTIVES 2009/10

- Define which groups of complex children the network will have within its remit through qualitative benchmarking.
- Develop a user involvement strategy
- Continue the development of practice exchange.
- Develop a quality assurance framework and submit this to QIS for accreditation.
- Develop a core data set for measuring network activity and outcomes.

6.0 COMMUNICATION

The Network has committed to producing the quarterly newsletter. In addition the network has a web site which is being led by Michael Durkan and a small group of clinicians.

The MCN Executive has agreed terms of reference and agreed standards in frequency of communication.

7.0 FINANCE

The network was allocated £5000 from NSD for 2008/9. This has been spent as follows.

Description	Amount
Communications and Stationery	£1996
Network Meetings	£651
Miscellaneous / Tax	£338
Total	£2985

Note: tax costs are due to a change in tax rules in Greater Glasgow and Clyde which sees hospitality as a benefit in kind unless external parties are present. To overcome this, Networks will be obliged to demonstrate that parties external to NHS Greater Glasgow and Clyde are attending meetings. The Finance Department are currently working on our behalf to reclaim these costs for 2007/08.

Appendix 1: Membership of the MCN

Core Group

MCN Chair: Sally Kuenssberg

Lead Clinician: Sarah Lloyd
Head Occupational Therapist and Play Therapist, NHS Fife

Network Manager: Marianne Hayward
MCN Manager, NHS Greater Glasgow and Clyde

Network Administrator: Michael Durkan
MCN Administrator, NHS Greater Glasgow and Clyde

Executive Group

Charles Clark
Child Health Commissioner, Lanarkshire

Lorraine Currie
Child Health Commissioner, Grampian

Michael Durkan
Network Administrator, Greater Glasgow and Clyde

Lorna Fitzsimmons
Lead Nurse, Learning Disability CAMHS, Greater Glasgow and Clyde

Margo Fyfe
CAMHS Nurse Advisor / Acting Mental Health and Learning Disabilities Nursing
Officer, Lothian

Marianne Hayward
Network Manager, Greater Glasgow and Clyde

Alasdair Hosking
Chair of Practice Exchange Group, Consultant Psychiatrist, Community
CAMHS, Forth Valley

Sarah Lloyd
Head Occupational Therapist and Play Therapist, NHS Fife

Sally Kuenssberg
Network Chair

Stephen McLeod
General Manager CAMHS, Greater Glasgow and Clyde

Graham Monteith
Lead Clinician, Fife

Michael Morton
Consultant Psychiatrist, Liaison CAMHS/Neuropsychiatry, Greater Glasgow and Clyde

Brenda Renz
Consultant Child Psychologist, Day Unit, Lothian

Albi Taylor
Parent Representative (committee member)

Michelle Sutherland
Parent Representative (network member)

Diane Kerr
Parent Representative (network member)

Justin Williams
Senior Lecturer/ Honorary Consultant Psychiatrist, Aberdeen University,
Grampian

Practice Exchange Planning

Alasdair Hosking
Chair of Practice Exchange Group, Consultant Psychiatrist, Community
CAMHS, Forth Valley

Michael Durkan
Network Administrator, Greater Glasgow and Clyde

Marianne Hayward
Network Manager, Greater Glasgow and Clyde

Jacqui Howison
Consultant Clinical Psychologist, Greater Glasgow and Clyde

Michael Morton
Consultant Psychiatrist, Liaison CAMHS/Neuropsychiatry, Greater Glasgow and
Clyde

Brenda Renz
Consultant Child Psychologist, Day Unit, Lothian

Naomi McCaig
Specialist Registrar in Child and Adolescent Psychiatry, Tayside

Appendix 2: Getting involved in MCNs

Getting Involved in Managed Clinical Networks Focus Group Summary notes

Tuesday 24th February 2009

Facilitated by: Pauline Fletcher

The following summary highlights the main points of discussion and the key messages to be fed back to the Managed Clinical Network (MCN) Office in the form of a report.

1. Journey of Involvement in Managed Clinical Networks. (This first section focused on participant's involvement in MCNs)

Starting point:

- first point of involvement is coming here tonight
- Asked by an existing member of Managed Clinical Network to get involved about 2 years ago got
- Feel the need to be involved because others might not be able/want to get involved and that would mean that the parent voice is not heard

Input:

- Attend meetings
- chance to influence the standardisation of services across different areas (to achieve best practice)
- Develop patient/parent information leaflets
- Attend sub-group meetings and work with other members

Highlights:

- it only takes one person to change the direction of a meeting or the points of view of members in a meeting. Parents involved in MCNs have seen this happen when they have challenged an issue.
- By making a point it changed people's thinking.

Challenges:

- Lack of awareness of MCNs and the opportunity to get involved
- Some support groups/organisations are not based in Scotland

- National/geographic challenge
- Lack of support groups for some conditions

2. Model of involvement and next steps:

- Support groups should be set up (if they don't already exist) for each condition. Need to map what support groups currently exist. This will then highlight where there are gaps. Support groups would be linked directly to MCNs
- These groups should be regional not national
- May need different support groups for different stages of condition (e.g. Diagnosis, palliative care etc.)
- The MCNs should help to set up the support groups, with a member of each MCN helping to do this. This person doesn't need to be a clinician.
- There should be a direct 2-way link between each support group and the relevant MCN. This link could be used for keeping parents/children informed of changes or developments to services, and also for the MCN to have a network of people who can share their ideas and input into new developments (e.g. producing a new information resource). Support group members should be aware of when the MCN meetings will take place, have the opportunity to influence the agenda and attend meetings/events where relevant or of interest.
- All parents should be given information on the support groups when children are first diagnosed. This information should clearly state that by getting involved in the support group there is a direct link to the MCN.
- It would be useful for representatives to come together twice a year (like tonight) to share common themes, ideas and offer support to each other.
- There are pros and cons of being referred to as a 'Parent Representative'. It would be useful for all MCN members to see a written role description.
- Need to advertise MCNs – and the opportunity to get involved.
- It would be useful to have a 'welcome pack' when you first get involved. This would explain what an MCN is and how it is structured.

Appendix 3: Service User Event

Perth and Kinross Service User Open Day October 2008

Attendance

There were 20 people at the training event.

Evaluations

Evaluations were received from 11

Section 1: Why did you decide to attend this event?

Subject matter	No importance	Low importance	Moderate importance	Important	Major importance
Participants answers	0	0	0	4	8

Meeting Format	No importance	Low importance	Moderate importance	Important	Major importance
Participants answers	0	1	6	2	1

Speakers	No importance	Low importance	Moderate importance	Important	Major importance
Participants answers	0	1	1	6	2

Location	No importance	Low importance	Moderate importance	Important	Major importance
Participants answers	2	4	4	0	0

Date meeting held	No importance	Low importance	Moderate importance	Important	Major importance
Participants answers	1	3	3	3	0

Section 2

Please rate how the event met your expectations	Very well	Well	Not very well	Not at all
Participants answers	0	1	5	4

How did you rate the relevance of this event	No part relevant	Fairly Relevant	Mostly Relevant	Highly Relevant
Participants answers	0	2	2	6

How did you rate the overall quality of the event	Poor	Satisfactory	Good	Excellent
Participants answers	0	1	6	3

Section 3

Five questions were asked about the event. Here are the questions and a few Example answers.

What did you like best about the event?

"How to move forward / sharing experiences"

"Hearing from parents about their experiences"

"Hearing parent's perspectives" "Parents perspectives"

"Information" "Free pens" "Good, relaxed atmosphere"

"Good communication" "Range of perspectives"

What did you like least about this event?

"Lack of time" "Cold noisy hall" "Slightly unclear about objectives"

"More to do with network service user involvement than local service user involvement"

How could the event be improved?

"More time" "Examples of good practice"

"Hold frequently 3 - 4 times per year" "revision of common syndromes"

"Improved directions"

What have you gained as a result of this event?

"More knowledge of MCN"

"Understanding of MCN and how important it is to involve and listen to service users"

"Importance of service users"

"Clearer view on what is required" "The need to have better mapping of own area"

"Greater understanding of issues"

What topics would you like to see covered in future events?

"Learning from other services' experiences"

"What happens within each department" "Different types of therapy"

"Standards for training" "Education attending"