



ASSURING THE APPROPRIATENESS OF UNPLANNED CAMHS ADMISSIONS SPECIALISED COMMISSIONING MENTAL HEALTH (NOT MANDATORY)	
Indicator number	MH9 (Service specification reference: CO7)
Indicator name	Assuring the appropriateness of unplanned CAMHS admissions
Indicator weighting (% of CQUIN scheme available)	<commissioner to complete>
Description of indicator	To provide assurance about the clinical appropriateness of unplanned admissions to Tier 4 CAMHS (general adolescent services) through a rapid multi-agency review process and reduce the number of inappropriate admissions
Numerator	Not applicable
Denominator	Not applicable
Rationale for inclusion	<p>A guiding principle for inpatient referral should be that the child or young person's needs cannot be managed safely or effectively within the community or in an intensive community service. This is because only those children and young people with the greatest needs should be referred to the most intensive level of service provision and because hospital admission may make their overall difficulties worse rather than better given the potential for disruption to personal, educational, social and family functioning.</p> <p>National guidance on inpatient CAMHS advocates that admission should operate within a pathway of care, involving the local community team. As more Tier 4 adolescent units are offering emergency access, unplanned admissions are steadily increasing and these referrals may bypass local processes especially when they occur out of hours. The expected outcomes of this scheme are:</p> <ul style="list-style-type: none"> • To promote a reduction in clinically inappropriate unplanned admissions to general adolescent services. • Strengthening adherence to local gatekeeping/access assessment procedures. • Improved demand management in and out of hours. • To promote a reduction in out of area admissions.
Data source	Provider
Frequency of data collection	Quarterly

Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly
Baseline period/date	Q1 2014/15
Baseline value	Number of reviews held in Q1 2014/15
Final indicator period/date (on which payment is based)	Q4 2014/2015
Final indicator value (payment threshold)	60% improvement in number of reviews held within 5 working days of unplanned admission
Rules for calculation of payment due at final indicator period/date (including evidence to be supplied to commissioner)	Provider to demonstrate to commissioner that payment milestones has been met
Final indicator reporting date	Q4 2015/16
Are there rules for any agreed in-year milestones that result in payment?	Yes – see below
Are there any rules for partial achievement of the indicator at the final indicator period/date?	Yes – see below
Additional Information	
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  <p>Additional Information - CAMHS</p> </div> <div style="text-align: center;">  <p>Additional Information - CAMHS</p> </div> </div>	

Milestones

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 1	<p>The provider must submit a quarterly report (presenting the information from the recording template in the additional information section above) to the commissioner for agreement as the baseline position. The report should include:</p> <ul style="list-style-type: none"> • Date of each unplanned admissions in the quarter • Date of the multi-agency review meeting held for each unplanned admission • List of participants including the organisation they represent and a list of invites issued including the organisation they represent. • Evidence of pathway plan agreed at each review meeting and evidence of action taken. 	30 June 2015	25%
Quarter 2	<p>The provider must submit a quarterly report</p> <p>The provider should evidence a 45% improvement in number of reviews held within 5 working days of unplanned admission</p>	30 September 2015	25%
Quarter 3	<p>The provider must submit a quarterly report</p> <p>The provider should evidence a 50% improvement in number of reviews held within 5 working days of unplanned admission</p>	31 December 2016	25%
Quarter 4	<p>The provider must submit an annual report highlighting the learning from review meetings</p> <p>The provider should evidence a 60% improvement in number of reviews held within 5 working days of unplanned admission</p>	31 March 2016	25%

Rules for partial achievement at final indicator period/date

Final indicator value for the partial achievement threshold	% of CQUIN scheme available for meeting final indicator value
Q1 40%	80% payment
Q3 45%	80% payment
Q4 50%	80% payment