

Taskforce Charter

National Quality Improvement Taskforce for children and young people's mental health inpatient services¹

Aim

Our vision is for mental health, learning disability, and autism inpatient services to be delivered to the consistently high standard that children and young people deserve.

We look forward to working closely with children, young people, and their families, who must be at the centre of our work to drive rapid improvements to the quality and experience of specialist inpatient mental health services for children and young people, including those who also have a learning disability, autism or both.

Scope of taskforce

The primary scope of the taskforce is:

- ✚ To ensure inpatient services deliver safe, high quality care for children and young people that is timely, treatment focussed and outcomes based.

What the taskforce will look at

In order for the taskforce to deliver the scope above it will look at:

- **Workforce:** including the training and support for staff. We will look at medical, nursing, psychology, allied health professionals and care staff.
- **Hospital Facilities:** the suitability of the environment, technology, and how hospitals help children and young people to stay in contact with their family or carers.
- **Inpatient admissions:** we want to reduce inappropriate admissions and long stays in inpatient care, but in some cases, they may still be in the best interests of patients. Where they are needed, we will ensure access to high quality treatment, and help children and young people to leave inpatient care as quickly as appropriate.

What the taskforce will strive to work towards

The challenges around inpatient services for children and young people are high profile, complex and wide-ranging and whilst the taskforce will focus on inpatient care we will align and work with other cross government programmes already ongoing to make progress towards a system where:

¹ (this includes specialist units for children who also have a learning disability, autism or both)



- No child or young person is admitted as an inpatient unless it is necessary for them to be there to receive treatment. We will not support admissions to manage a condition or challenging behaviour.
- Alternatives to inpatient care, including intensive support at home or in social care settings, should be offered when inpatient treatment is not needed
- No child who needs an inpatient bed has to wait or be admitted to units far away from their home.
- No child or young person stays in inpatient care any longer than they need to and discharge planning commences at the point of admission.
- Human rights guide decision-making in care.
- The voice of children and young people, and their family or carers, are embedded in the culture of care, and are taken on board in all decisions about the care that they receive.

Our working principles

Our work will be guided by the following key principles:

- The views and experiences of children, young people and their families are central to the work of the taskforce - we will listen and respond to their concerns and their ideas for improvement;
- Our actions and recommendations will be informed by expert clinical opinion and the latest available evidence;
- We will look to identify and spread best practice both in the UK and internationally;
- We will call out poor care and practice where needed but focus on supporting improvement and change, rather than apportioning blame;
- We will use data to monitor progress and identify where focussed action may be required in order to continuously drive improvement;
- We will work collaboratively across governments and relevant national and local agencies and partners to ensure that the whole system is working in the same direction, to drive improvement for children.

Wider Context

We know that there is already a lot of work taking place to improve these services for children and young people. We will work closely with these programmes, making sure they provide updates to the taskforce and we will keep colleagues updated on our work too.

The Long Term Plan

Over the next five years the NHS is committed to developing new forms of care including more alternatives to hospital and care closer to home. The Long Term Plan outlines plans to:



- Expand access to children and young people's inpatient services to ensure they are as local as possible.
- Improve and expand community crisis services that join up community and inpatient services.
- Improve specialist community and inpatient services for children and young people with autism and or learning disabilities including supporting those in crisis.

The NHS Long Term Plan is already committed to expanding access to 'CYPMHs', creating more crisis alternatives, developing new models of care for young adults and ending the so-called 'cliff edge' that can exist when 18 year olds transition to adult mental services.

Alongside treating acute conditions, the Plan commits to delivering a £2.3 billion funding injection for community mental health services, as well as record-high investment in children's care, to provide care for 345,000 extra young people and more than 370,000 adults with severe mental illness.

However, we need to see immediate improvements in NHS commissioned inpatient care, both in the Independent Sector and NHS provision. Inpatient services are not currently of a high enough quality and improvements are needed specifically for under 18-year olds.

