## **HEALTH AND WELLBEING BOARD**

# 26 July 2016

Title:	Children and Young People Mental Health Transformation Plan Update	
Report o	of the Children and Maternity Group	
Open Report		For Decision
Wards Affected: All wards		Key Decision: No
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#### Sponsor:

Conor Burke, Chief Officer Barking and Dagenham Clinical Commissioning Group

#### Summary:

This report provides an update on the Children and Young People's Mental Health Transformation Plan and its implementation, and some commentary on the connections with the child and adolescent mental health services (CAMHS) needs assessment.

#### Recommendation(s)

The Health and Wellbeing Board is recommended to note the content of this report and agree to receive a further update in October 2016.

#### Reason(s)

The HWB meetings have touched on a number of Joint Health and Wellbeing Strategy priorities including parity of esteem between mental health and physical health improving integrated care and improving life expectancy. Mental wellbeing is a key part of the Joint Strategy and recent policy directives have demanded parity of esteem with physical health. The Children and Maternity Sub-Group and the Health and Wellbeing Board agreed the Children and Young People's Mental Health Transformation Plan (CYP MH TP) which was submitted to NHS England in December 2015. This paper provides an update on the implementation of this plan and some commentary on the connections between the plan and the newly published child and adolescent mental health services (CAMHS) needs assessment.

#### 1. Purpose

1.1 The purpose of this report is to update the Board on the delivery of the Children and Young People's Mental Health Transformation Plan and to provide some commentary on the alignment of this plan with the newly published CAMHS needs assessment.

#### 2. Introduction

- 2.1 75% of mental health problems in adult life (excluding dementia) start by the age of 18 and if left untreated can develop into conditions which need regular care. It is recognised nationally that children and young people's emotional wellbeing and mental health is not given the attention it needs and that there are barriers in the system that prevent change.
- 2.2 Since April 2013, commissioning for children's mental health services has been fragmented across Local Authorities, CCGs and NHS England specialist commissioning which has resulted in a lack of joined up planning.
- 2.3 NHS England has developed a phased approach to delivering an ambitious programme of system wide transformation to improve children and young people's mental health and wellbeing over the next 5 years. Some of this will be delivered by improving existing pathways and some will be facilitated by additional investment. The development of evidence based community Eating Disorder services for children and young people was a national priority for 2015/16.
- 2.4 The aim is to build capacity and capability across the system so that by 2020 measurable progress will have been made to close the health and wellbeing gap and secure sustainable improvements in children and young people's mental health outcomes.
- 2.4 This report describes the progress that has been made in developing the Local Transformation Plan for Barking and Dagenham.

## 3.0 Background

3.1 <u>Future in Mind</u> is a national report, produced by the Children and Young People's (CYP) Mental Health and Wellbeing Taskforce, which was published in March 2015 focusing on promoting, protecting and improving children and young people's mental health and wellbeing. Simon Stevens, Chief Executive of the NHS, responded to the report by giving it NHS England's full support:

"There is now a welcome recognition of the need to make dramatic improvements in mental health services. Nowhere is that more necessary than in support for children, young people and their families. Need is rising and investment and services haven't kept up. The treatment gap and the funding gap are of course linked."

- 3.2 The report established a clear direction and some key principles about how to make it easier for children and young people to access high quality mental health care when they need it.
- 3.3 Guidance for local areas was produced by NHS England in August 2015 on the development of Local Transformation Plans to support improvements in children and young people's mental health and wellbeing. The guidance:
  - set out the strategic vision for delivering improvements in children and young people's mental health and wellbeing over the next 5 years

- outlined a phased approach to securing locally driven sustainable service transformation and includes details of how extra Government funding will be used to support this work
- provided guidance to support local areas in developing their Local Children and Young People's Mental Transformation Plans through a planning process that can be tailored to meet the individual needs and priorities of different local areas
- 3.4 Following the publication of *Future in Mind*, CCGs were charged by NHS England with creating a Children and Young People's Mental Health Transformation Plan (CYP MH TP) which would set out how CCGs, working with Health and Wellbeing Boards and other partners, would bring about local improvements in children and young people's mental health and wellbeing. This was part of the process to access additional funding that has been made available for CYP MH by NHS England.

# 4.0 Barking and Dagenham Children and Young People's Mental Health Transformation Plan

- 4.1 The Barking and Dagenham CYP MH TP was developed by the joint commissioner for children's services and reviewed by the Children and Maternity Sub-Group of the Health and Wellbeing Board and the Children's Trust, before approval by the Chair of the Health and Wellbeing Board and the CCG Chief Officer.
- 4.2 The development of the plan was informed by information taken from the JSNA, information on local services and stakeholder engagement. Engagement events were held with CYP who fed back on their experience of local services and suggested where improvements could be made. The plan was approved in advance of the CAMHS needs assessment being completed and reflected the following key issues:
  - The growing number of young people in the borough who are at risk of developing a mental health condition means that services need to develop more responsive and preventative approaches to build resilience and provide early intervention
  - Current service provision cannot keep pace with demand which is impacting on waiting times for assessment and treatment for lower levels of need
  - Current demand levels and service capacity indicate that there are unmet emotional wellbeing and mental health needs in the borough
- 4.3 Five key themes were identified for specific development and investment in 2015/16, in addition to the specific investment in Eating Disorders services:
  - Theme 1: Building Resilience and Promoting Prevention
  - Theme 2: Developing a Wellbeing Hub
  - Theme 3: Maximising use of Digital Resources & Guided Self Support
  - Theme 4: Better support for children, young people and families with mild/emerging behaviour difficulties
  - Theme 5: Better supporting looked after children and those leaving care.

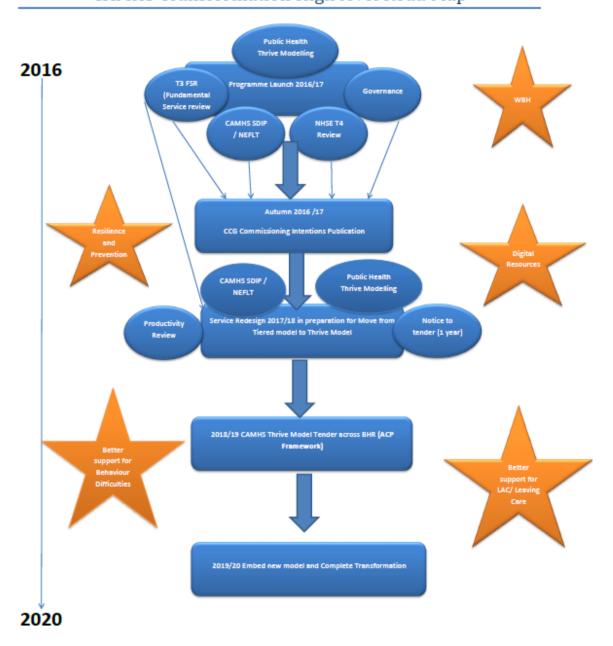
- These themes comprise improvements in early intervention to include building support for emotional needs (distinct from mental health), targeting investment in lower level and earlier help (including counselling and cognitive behavioural therapy) and collaborative commissioning with schools to support whole school resilience building; redesigning services to remove the traditional tiers of child and adolescent mental health services (CAMHS) and have a single point of access for referrals, while exploring options for a dedicated service for looked after children (LAC) and outreach. This will see improved monitoring of CAMHS outcomes and access joint working between agencies and co-location of workers, with a single point of access into services and integrated electronic records.
- 4.5 Further developments for perinatal mental health care will be planned in 2016/17 when there is further guidance available on additional allocation for perinatal services from NHSE.
- 4.6 The plan is available at <a href="http://www.barkingdagenhamccg.nhs.uk/Downloads/Ourwork/CAMHS/Barking-and-Dagenham-CAMHS-report-v2-December-2015.pdf">http://www.barkingdagenhamccg.nhs.uk/Downloads/Ourwork/CAMHS/Barking-and-Dagenham-CAMHS-report-v2-December-2015.pdf</a>
- 4.7 The plan was submitted and assured by NHS England in December 2015. Approval of the plan released £390K new funding for CYP MH TP in Barking and Dagenham, £111, 358 of which was ring fenced for investment in CYP community eating disorders services.

## 5.0 Strategic direction and five year roadmap

- 5.1 The transformation plan aims to shift the focus from **crisis support** to **early intervention** to keep children and young people well, providing additional support when needed to stop them and their families from going into crisis. This will lead to shifting resources further upstream from the point where they might currently access CAMHS. This will lead to more work in schools, Looked after Care, Transition support, in homes and families, so children, young people, their families and the other people they come into contact with have more skills and resources to help themselves and each other. This will require the development of a new commissioning framework that reflects this principle of more resources available "upstream" and to remove unnecessary barriers to integrated approaches to care.
- There are two kinds of transformational changes required, firstly there is the development of a new philosophy around providing a whole system early intervention approach which directs resources "upstream", and secondly there is significant transformation required within services to facilitate greater access and to break away from the tiered approach previously used to manage limited resources. There is also the requirement to undertake some transactional change, to operationalise new staff and to ensure that the additional allocation of funds from NHSE are made available to support delivery of the plan. A high level road map of the transformation required has been developed which explains this process in Figure 1.

Figure 1

CAMHS Transformation High level Road Map



## 6.0 Progress to date

A significant amount of work has been done to implement the Barking and Dagenham CYP MH TP since December 2015, described below.

# 6.1 Eating Disorders service

Barking and Dagenham CCG has worked with Havering, Redbridge and Waltham Forest CCGs to agree additional investment in the child and adolescent community eating disorders service. This 4-borough service, provided by North East London NHS Foundation Trust (NELFT) and based in Barking and

Dagenham, has started to recruit additional staff to greatly increase its capacity to provide evidence-based interventions to more young people that it can currently. This will enable the service to make progress towards the new access and waiting times standards that are being developed for community eating disorders services (as found in <a href="https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-quid.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-quid.pdf</a>)

## 6.2 Building Resilience and Promoting Prevention

The CCG has jointly commissioned with local authority partners the following resilience programmes:

- The Thrive an early intervention person centred approach to children and young people with mental health issues is being developed in schools as a priority (the Thrive model is applicable across all settings). The first school's session for staff took place on 28 April 2016.
- Positive Parenting Programme (Triple P) This will be run as a pilot with Redbridge and aims to support Extra and Early Help (linked to the Wellbeing Hubs), and build resilience and support children and young people with emotional and mental health challenges. The Positive Parenting Programme, is expected to result in the following benefits in 2016/17 and beyond:
  - Fewer behavioural and emotional problems in children, and support for children with special educational needs and disability (SEND)
  - Introduction of new services, which we know are responsive to need and will enable greater and quicker access to support, and including the use of digital technology to achieve greater reach, access and value for money.
  - Increased parental confidence, skill and knowledge to support child and family emotional resilience.
  - Early help for lower level emerging emotional difficulties in children and young people, reducing need for medical/specialist support

## 6.3 Developing a Wellbeing Hub

A stakeholder workshop was held in March to develop a vision for the wellbeing hub, and detailed discussions are underway about how best to implement this approach as part of the single point of access offered by NELFT.

## 6.4 Maximising use of Digital Resources & Guided Self Support

An agreement has been reached to develop an online counselling service (Kooth) as a pilot with Redbridge. The pathways and links to the service will be developed over the next few months in discussion with GPs; Local Youth Forum; Local Authority and other partners.

## 6.5 Better support for looked after children and those leaving care

The job description for a worker to support this (based on that of a Mental Health Social Worker) has been developed with the targeted Children's Service to support the existing Single Point of Access (SPA) and triage arrangements.

A meeting with Youth Forum 18 April 2016 was attended by the Lead Member for Mental Health and the Public Health lead and led to the Youth Forum agreeing to participate in the shaping of the online service and the future engagement with schools and GPs.

#### 6.6 Inpatient services

The temporary closure of the child and adolescent inpatient unit, Brookside, run by NELFT in May 2016 has brought forward a review of the service model for tier 4 CAMHS. Clinical evidence supports a different model of care for those young people with emerging personality disorders that often manifest as admissions to CAMHS inpatient units through serious self-harm and risk. A series of meetings have taken place with NHS England (the commissioner) NELFT (the provider) and the CCGs to develop a new model of care which would be an extension of the home treatment team model that has been put in place following the closure of the unit at the end of April 2016.

## 6.7 Urgent and emergency care vanguard proposal

Since the development of the CYP MH TP, NHSE invited all 8 Vanguard sites (part of a national programme to test out new models of care) to bid for a £5m pot of funding to test to out the best way of providing urgent and emergency support for young people in crisis, in particular to provide better support to young people attending A&E after self-harming. BHR has a Vanguard programme focused on urgent and emergency care. The Vanguard sites were asked to put in expressions of interest, showing how they would be testing out new models of care in line with their local transformation plans. BHR CCGs, working with NELFT, rapidly developed a BHR wide bid to the value of £846,627 and have had confirmation that this bid has been approved. It is expected that the funding will be received in August to enable mobilisation.

#### 7.0 Future plans for 2016/17

## 7.1 Children and Young People's Mental Health Needs Assessment

The CYP MH TP was created before the completion of the Children and Young People's Mental Health and Wellbeing Needs Assessment, led by Public Health. Now the needs assessment has been completed, the plan can be refined to respond to the recommendations emerging from the needs assessment. A gap analysis of the current plan and the needs assessment recommendations has been completed to inform future refinements to the plan. This is set out in CAMHS needs assessment paper part of the Board agenda.

The findings of the CAMHS needs assessment broadly validate the CYP MH TP and in particular reinforce the need for action and investment in improving the system wide approach to improving outcomes for CYP. The implementation of the CYP MH TP has had to adapt to changes in the local context, in particular focusing on the review of tier 3 services. However what the needs assessment highlights is the importance of co-ordinated universal effective prevention and early intervention for children and young people with emerging emotional difficulties. A lack of this can contribute to the escalation of need and growing numbers of referrals to high cost services like specialist CAMHS and social care This means that urgent pressures on specialist services need to be addressed as well as developing longer term strategies for universal and primary care services, and in particular support (peer support) for parents. It will be challenging to balance these transformational priorities, particularly given the indication from the needs assessment that even the additional investment planned to develop resilience will not meet all of the current unmet need.

The needs assessment also highlights the importance of engaging with children and young people and families, reminding us to make use of, and extend, the range of methods to engage with CYP that have been developed by LB Barking and Dagenham.

We will be testing the current plan further against the recommendations of the CAMHS needs assessment and providing a further update to the Health and Wellbeing Board with any proposed changes that might be needed to the CYP MH TP in October.

#### 7.2 Tier 3 CAMHS service review

A fundamental service review of tier 3 CAMHS is planned for Quarter 3 2016/17. This will provide a more detailed understanding of current demand and capacity to inform the commissioning of the new model of care.

## 8.0 Implementation Support

Implementation support has been galvanised, through the joint children's commissioner who has created Task & Finish groups specifically to support the implementation of work on the LAC pathway and supporting Social Emotional Mental Health (SEMH). This work is reported by the joint children's commissioners to the Children and Maternity Sub-Group. The BHR CCGs have also recruited some additional interim support for the transformation plans across the 3 CCGs, particularly in relation to the development of common contractual changes required to support the implementation of the TPs.

#### 9.0 Governance

To support the implementation of the CYP MH TP and to facilitate collaboration across Barking and Dagenham, Havering and Redbridge, a CYP MH Transformation Board is being established by the BHR CCGs Mental Health Transformation Programme. This Board will need to make the appropriate connections with the Health and Wellbeing Board and relevant sub-groups in order that the HWB can take an oversight of the transformation process.

## 10.0 Development of a Mental Health Outcomes Approach

In order to measure the success of the CYP MH TP and to support the changes in thinking that are required to deliver the transformation we are proposing to develop an emotional and mental well-being outcomes framework that covers all aspects of the CAMHS service covering universal, targeted and specialist services. This will support our aspiration to ensure all services provided under the emotional and mental well-being hub are outcomes focused, holistic, and accessible and built around the needs of children, young people and their families and informed by their views. The intention is that these outcomes will cover strategic, service and operational outcomes, to see to what extent the plans have been able to: for example, build resilience, provide Extra and Early Help, and improve wellbeing and crisis care. The intention is to support the shift in thinking needed from understanding how a service operates (what it does) to the good that it accomplishes (what it achieves). Ideally this will lead to the development of a shared set of principles, with data, outcome measures and service standards that

align across the whole system (NHS, public health, social care, youth service, education, voluntary and community sector) to deliver improvements in child mental health outcomes. A project between the BHR CCGs and NELFT with CORC (Commissioned Outcomes Research Consortium) is currently being scoped as part of the TP.

## 11.0 Mandatory Implications

## 11.1 Joint Strategic Needs Assessment

This programme will further the findings of the JSNA with regards to reducing emotional ill health.

## 11.2 Health and Wellbeing Strategy

This programme will further and support the following priorities in the H&WB Strategy. We will in this Strategy improve health and wellbeing through all stages of life to:

- Reduce health inequalities
- Promote choice, control and independence
- Improve the quality and delivery of services provided by all partner agencies

http://www.lbbd.gov.uk/AboutBarkingandDagenham/PlansandStrategies/Documents/HealthandWellbeingStrategy.pdf

## 11.3 Financial Implications

CYP MH TP will bring new funding of £390k per annum to the CCG over the next five years subject to NHSE assurance and implementation of the plan.

#### 11.4 Legal Implications

None identified at this point

#### 11.5 Risk Management

Non-delivery of the CYP MH TP will lead to failure to deliver the required improvements in outcomes for children and young people. Non-delivery can also affect NHSE assurance rating for the CCG which could impact on future allocation of funds for the plan.

A risk log has been developed showing identified risks and the mitigation that has been put in place to ensure that the programme meets all NHSE assurance. There is a risk that a comprehensive Child and Adolescent Mental Health Service (CAMHS) service that contributes to the emotional wellbeing and mental health care of all children and young people, which could be provided by health, education, social care or other agencies would not be implemented and that the clear identified need would be unmet as a direct result.

#### 11.6 Patient/Service User Impact

The plan and needs assessment actions have been developed with input from children and parents and will continue to do so with the aim of improving experience and outcomes.

## **Public Background Papers Used in the Preparation of the Report:**

Future in Mind

https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/414024/Childrens Mental Health.pdf

Barking and Dagenham Children and Young People Mental Health Transformation Plan <a href="http://www.barkingdagenhamccg.nhs.uk/Downloads/Our-work/CAMHS/Barking-and-Dagenham-CAMHS-report-v2-December-2015.pdf">http://www.barkingdagenhamccg.nhs.uk/Downloads/Our-work/CAMHS/Barking-and-Dagenham-CAMHS-report-v2-December-2015.pdf</a>

Access and Waiting Time Standard for Children and Young People with an Eating Disorder Commissioning Guide

https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-accesswaiting-time-standard-comm-guid.pdf