

CHILDREN AND YOUNG PEOPLE MENTAL HEALTH AND EMOTIONAL WELLBEING UPDATE

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| Relevant Board Member(s) | Dr Ian Goodman Councillor Philip Corthorne |
| Organisation | Hillingdon CCG (HCCG) London Borough of Hillingdon (LBH) |
| Report author | Jane Hainstock and Fiona Murray, HCCG |
| Papers with report | Appendix 1 - Local Transformation Implementation Plan Appendix 2 - Performance Report Month 12, 2017/18 |

1. HEADLINE INFORMATION

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| Summary | <p>Good progress continues to be made in developing the THRIVE framework as part of the Hillingdon Children and Young People's (CYP's) Mental Health and Emotional Wellbeing Transformation Plan and in implementing the Local Implementation Plan.</p> <p>The Hillingdon THRIVE Network has met three times and has identified that the initial focus of work should be to support communication and collaborative working across the system and remove barriers to accessing support so that CYP and their families feel supported wherever they sit within the THRIVE framework</p> <p>Performance Improvements were achieved for CYP in 'Getting More Help' and 'Getting Risk Support' shown in the performance data from NHS commissioned services as at M12 (March) 2017-2018. Commissioners have been alerted to a performance dip in M1 for the 18 week target.</p> |
| Contribution to plans and strategies | <p>Local:</p> <ul style="list-style-type: none">• Hillingdon's Health and Wellbeing Strategy• Hillingdon's Sustainability and Transformation Plan• Hillingdon CCG's Commissioning Intentions 2017/18• Hillingdon Children and Young Persons Emotional Health and Wellbeing Transformation Plan <p>National:</p> <ul style="list-style-type: none">• 'Future in Mind: promoting, protecting and improving our children and young people's mental health and wellbeing' (2015) |

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| | <ul style="list-style-type: none"> • The Five Year Forward View For Mental Health – report from the independent Mental Health Taskforce to the NHS in England (February 2016) • Implementing the Five Year Forward View for Mental Health (NHSE 2016) • NHS England specialised commissioning Children and Adolescent Mental Health Services (CAMHS) case for change (NHSE August 2016) |
| Financial Cost | This paper does not seek approval for costs; the Board received the indicative proposals for 2018/19 in the December Board paper. |
| Ward(s) affected | All |

2. RECOMMENDATIONS

That the Health and Wellbeing Board notes the progress made:

1. in implementing the Local Transformation Plan (Appendix 1), and the planned operational review of the 2018/19 Plan to inform the strategic approach going forward.
2. in developing the local offer available for CYP and families in ‘Getting Advice’ and ‘Getting Help’ (building resilience and early intervention and prevention).
3. in establishing the Hillingdon THRIVE Network with the planned developments to support CYP ‘Getting Help’ and ‘Getting More Help’, through earlier and easier access to ‘specialist CYP MH services (CAMHS).

3. INFORMATION

3.1 Hillingdon has made progress, with 13.4% more young people with mental health problems receiving help than last year, and more young of those people are being seen within the 18 week time frame. The most vulnerable children and young people, and those in crisis, are seen more rapidly and closer to home.

3.2 New early intervention and prevention approaches are in place and will be monitored to ensure that they make the expected impact and support CYP and their families.

3.3 The THRIVE work so far has demonstrated the breadth of provision in the Borough, some of which was not fully recognised as such up to now. The improvements in performance and feedback from the recent events with front line staff reinforces the desire to better co-ordinate activity, identify gaps as necessary and to continuously improve. Stronger governance will enable providers to be held to account for delivery.

3.4 Given the Board's formal adoption of the THRIVE framework, the information within this report is framed within the 4 THRIVE domains in order to provide an appropriate and consistent structure and approach to the process of updating the Health and Wellbeing Board on the transformation of children's mental health and emotional health and wellbeing services; and the associated work being progressed to establish the THRIVE model in Hillingdon.

4.0 The THRIVE model



The THRIVEDomains:

Getting Advice: a CYP/Family have issues and need advice and support

Getting Help: the CYP/Family have a mental health issue that is likely to be helped with a goal focused intervention working with a professional

Getting More Help: the support required is a multi-agency intervention

Risk Support: CYP with a high risk, but for various reasons there is not a goal focused intervention that is thought likely to help but the CYP needs to be kept safe.

4.1 Progress has been made against the four domains of the THRIVE model and as agreed in the Local Transformation Plan (Appendix 1). Achievements of note are:

2018/19 Developments - Digitally based support

4.2 Following Hillingdon CCG' governance approval to implement online counselling, we are now currently working with KOOTH, Xenzone, to mobilise the service in Hillingdon, including Uxbridge College. The service will launch on 9 July 2018 following a series of promotional activity in the month of June.

The agreed model includes:

- An online “drop-in” service between 12pm – 10pm
- Sign posting and advice for emotional health
- Peer support
- 1:1 online counselling for 6-8 sessions provided by recognised British Association of Counselling and Psychology (BACP) accredited counsellors
- Pre-booked counselling sessions where consistent sessions are deemed beneficial for the young person
- Liaison and integrated working with the local specialist CYP MH service, MASH and other relevant services for crisis and safeguarding issues
- Working closely with local children and young people’s emotional and mental health services to enable smooth transfer to other services as required.

4.3 This service will be “tested” for outcomes and collect performance indicators, including:

- Safety and impact on other services of the pilot
- Value for money (effective, efficient, economic)
- Improved health outcomes
- Gender
- Age
- Engaging hard to reach groups, including boys/young men and individuals from BAME backgrounds.

4.4 The THRIVE network has recognised the wealth of mental health training that is available to schools; as highlighted in the most recent THRIVE network meeting. We aim to align current training offers available and, furthermore, create a training 'menu of options' available to schools. We are currently working with a CYP Mental Health Training sub-group to mobilise this offer menu.

Current mental health training, includes:

Mental Health First Aid Training to schools

4.5 Two schools have been identified as "host" schools for the training. The training is now taking place in schools across the Borough and early feedback from attendees is positive.

Young MINDs Practitioner Training

4.6 The 'Young Minds' Practitioner training event has successfully recruited 24 schools and the local college to take part. The event includes five all day events providing:

- awareness of CYP Mental Health and Emotional wellbeing
- skills development for supporting and enhancing the emotional health of CYP
- building resilience and supporting children and young people.

In signing up to the programme, the schools have committed to join a schools MH and emotional wellbeing network and to identify a Mental Health 'champion'. The champion will provide leadership within the school and the network will continue to support them in their role. Further training for the champion and other key staff is being considered through a joint funding approach between schools and the CCG. The plan is to use the network to offer a 'good practice' model for other schools in the Borough. This work also provides a sound base to develop additional support to schools as outlined in the Green Paper and anticipated to be included within the forthcoming white paper requirements.

5.0 THRIVE Component - Getting More Help update

5.1 When considering services within this segment of the THRIVE model, it is important to note that the service functions in question may not be exclusively related to children and young people's mental health and emotional health wellbeing, but instead contribute to securing good emotional health and wellbeing outcomes. These include services such as Health Visiting and wider 0 - 5 / early years services in general whereby practitioners promote and enable emotional health and wellbeing as part of their core child and family development work.

The Gateway (single point of referral)

5.2 The 'CNWL Gateway' has been operational for three months and provides a centralised administration hub for referrals to specialist CYP Mental Health Services. Anecdotal reports from staff confirm that the gateway has increased productivity and also given consistent approaches to CYP and families.

5.3 As part of the Gateway, we are exploring the potential to introduce a telephone help line for schools and GPs to access advice; initial discussions with school representatives highlighted they would welcome the access. However, they would like it be available at specific times,

different to the times suitable for GPs. How to manage the different requirements and deliver an efficient, effective service is being considered by the providers. A progress report is to be presented to the next THRIVE Network.

Integrated clinics

5.4 The regular Multi-Disciplinary face to face seminars / webinars for schools and GP's, to enhance shared learning and to build a network across the Borough has been discussed with the SEND forum and GP lead who reflected that the idea of training via webinar would need to be considered carefully due to different school and GP working hours. There has also been a delay with identifying a technology solution that works across practices, schools and the specialist services.

6.0 THRIVE component: 'Getting Risk Support' and 'Getting More Help' Performance update (Performance update attached Appendix 2)

6.1 There have been achievements in supporting and treating the most vulnerable Hillingdon children and young people and those in crisis, earlier and closer to home, through the introduction of North West London services (Community Eating Disorder, Crisis and Liaison Service) and local services (Learning Disability, Out of Hours and Complex Case Team) and the remodelling of specialist CAMHS community capacity.

6.2 The 18 week waiting times target (85% of referrals receive 2 interventions in 18 weeks) was achieved in month 8 (November) to month 12 (March) of 2017/18. The improvement in reaching the waiting times target been based on intensive strategic input from the CNWL CAMHS leadership team. This is inclusive of increasing capacity (and widening skill mix), creating care pathway efficiencies and utilising digital modes for initial contact appointments.

Despite this positive shift for four consecutive months, it should be noted, that we have seen a drop in reaching the waiting times target for month 1 of 2018/19. This has been attributed to a delay in receiving diagnostic reports required from an interfacing but separate children' service. We have asked our CNWL CAMHS Senior Manager Team to investigate the cause and report back at the June contract meeting; and are expectant of continuous and improved waiting times for CYP who require access to the CYP MH specialist services.

6.4 In M9 2017/18, routine recording of the outcome of treatment dipped to 50%. We are pleased to report that there has been positive improvement in reporting with 80% of outcome measures completed upon discharge in M12. Though impressed by this positive movement, we will continue to monitor these figures.

6.5 Future in Mind laid out the expectation that, in order to respond to the prevalence of Mental Health issues within the CYP population, the percentage of CYP seen within Community Mental Health services needs to increase from 25% to 35% by 2020/21. Only those CYP in receipt of NHS funded services can be included within the numbers. The 2016/17 target was achieved.

6.6 At the end of Q2 2017/18, NHSE flagged to the Like Minded Team that Hillingdon CCG was not meeting the agreed trajectory. Investigating the reasons for this drop in performance led to the discovery that in 2017/18 there was a discrepancy in the baseline prevalence data submitted. The baseline prevalence figure submitted was 6,700, 2,659 above the actual 4,051

baseline (which had been set in the North West London *Child and Young People's Mental Health and Wellbeing Strategy and Transformation Plan*). The CCG is on track to deliver the 30% access target of the correct prevalence level in 2017/18 but will not deliver the percentage increase on the over-estimated prevalence.

In view of the above and available prevalence of Mental Health issues amongst CYP, it is expected that activity will continue to increase through the remainder of 2018/19 and forward to 2020/21. As such, discussions are taking place about the changes needed within the CNWL service and the wider system to sustain the waiting times target going forward.

7.0 THRIVE component: 'Getting Risk Support'

NHSE commissioned services

7.1 The introduction of specialist community based services (Community Eating Disorder Crisis and Liaison/ out of hours services) has supported the reduction in length of stay in NHSE (tier 4) bed based services (slide 9, Appendix 1). This reduction has produced an NHSE saving of £1m across the North West London footprint. These savings are being reinvested by NHS England in the Crisis and Liaison services which go live on 1 April 2018 will operate 24/7; providing short term interventions and support. This service will have a hub situated in Hillingdon. The new specialist community services straddle the Getting More Help and Getting Risk Support segments.

Childs Sexual Abuse Support Hubs

7.2 Hillingdon CCG is currently mobilising Child Sexual Abuse Support hubs on the behalf on the 8 boroughs in the North West London STP area. Funding has been provided to Hillingdon CCG by NHSE following a successful bid to implement both emotional wellbeing and medical hubs to ensure that there is accessible and specialist service for young people who have been victims of abuse.

7.3 The Emotional and Wellbeing element of the hub has been successfully procured and the project team are leading on implementation of the service across NWL.

7.4 The CSA Hub service will aim to improve the short and long-term emotional and mental health outcomes for children, young people and their families following disclosure of child sexual abuse (CSA) through offering assessment, brief intervention, case management and early emotional support at the time CSA medical examination. Included in this offer will be:

- Support to children, young people and their families, being seen for CSA medical examination by the CSA Hub, without the requirement for a mental health diagnosis.
- 6-8 sessions of support including trauma-informed therapeutic support, advocacy, case management, symptom management with safe and appropriate onward referral when necessary.
- Signposting to local specialist services, where available, for immediate or later support or/and urgent referral to CYP MH specialist services (CAMHS) where required.
- The practitioner will also be expected to have extensive knowledge of local family support services across the eight boroughs.

7.5 The three year commissioned service will launch in July/August 2018 and will see all CYP who are referred to the service via local Safeguarding and MASH teams.

CYP Liaison and Diversion

7.6 Health liaison and diversion, within the youth justice system, is a key national priority and sits within the national CYP MH and Emotional Wellbeing Transformation agenda. As part of this key area of focus, Hillingdon CCG has utilised NHSE funds to recruit to a Youth Justice Liaison and Diversion practitioner who supports the Youth Offending Team (YOT) to screen young people for health issues. We have also worked collaboratively with the local authority on two further sub-projects.

7.7 There is an increasing pool of evidencing that shows that around 60% of young people in the justice system have a speech and language need (SLCN). To meet this over-representation of need, Hillingdon CCG and the local authority have recruited to a speech and language therapist who provides speech and language training to staff, as well as assessment and light touch therapy and coping strategy provision to young people within the programme. With additional funds and positive reflections of this new service, we are currently looking at providing increased speech and language therapy (SALT) provision for our young people.

7.8 We have implemented Trauma Therapy training to YOT staff members and with further plans to develop a MH YOT app to support the Liaison and Diversion (L&D) practitioner to undertake health assessments.

7.9 We are also considering other initiatives that will complement the YJLDs pathway, such as digital platforms to support the L&D worker to undertake relevant health assessments.

8.0 MOBILISING HILLINGDON THRIVE

8.1 The third THRIVE network meeting held in May was well attended by a number of key professionals across mental health, social care, children's services, schools, voluntary sector groups and parent group representatives. The forum continues to provide an opportunity for updates on progress on the implementation plan and key projects, to seek advice and support on new proposals or changes to processes and the potential to share and develop plans for joint working. Examples from the last meeting include the approach to take to target time limited additional support within schools, information sharing leading to new developments (parent /peer support) and using the network to raise awareness of events across the Borough that could support both CYP and their families as well as people working in services.

8.2 In order to inform the 2019/20 Local Transformation Plan, the next network meeting will focus on reviewing the activity and progress made on the 2018/19 Local Transformation Plan and consider areas for action for 2019/20.

9.0 GOVERNANCE

9.1 The Board endorsed the governance arrangements proposed in the last update. Progress has been made in establishing the arrangements and the THRIVE network and establishing the reporting mechanism to the Children's Strategic Transformation Group are in place. A Strategic Commissioning group with the appropriate membership is not yet established, and the potential to align this with other commissioning programmes or current meetings is being explored by the CCG and Council officers.

9.2 Due to delays in the recruitment process, the start date of the two year post to drive forward the agenda has not yet been finalised. However, the CCG continues to employ an interim to support the programme.

10. FINANCIAL IMPLICATIONS

This paper does not seek approval for costs. The Board noted the indicative funding for Hillingdon's Children and Young People Mental Health and Emotional Wellbeing Local Transformation Funding at the December 2017 meeting.

11. EFFECTS ON RESIDENTS, SERVICE USERS & COMMUNITIES

The effects of the plan.

The transformation of services that provide emotional health and wellbeing and mental health services relate to the total child and young people population and their families/carers in Hillingdon. They also impact on the wider community.

Consultation

Consultation has been presented in previous papers and will be referred to as relevant throughout this paper.

14. BACKGROUND PAPERS

Previous papers to the Board
Appendix 1 - Local Transformation Plan
Appendix 2 - M12 & M1 Performance Report