

CHILDREN AND YOUNG PEOPLE MENTAL HEALTH AND EMOTIONAL WELLBEING UPDATE

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Organisation	Hillingdon CCG (HCCG) London Borough of Hillingdon(LBH)
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Papers with report	Appendix 1 - KOOOTH Quarter 4 Report Appendix 2 - Hillingdon Early Intervention and Prevention Workshop 2 Aims and Outcomes

1. HEADLINE INFORMATION

Summary	<p>This paper updates the Board on progress in assuring the Hillingdon Children and Young People's Mental Health and Emotional Wellbeing Local Transformation Plan (CYPMH LTP) 2018-2019.</p> <p>The Board agreed to delegate authority to approve the annual refresh of the (CYPMH LTP) for submission to NHSE on 31st October 2018, to the Chairman of the Board in consultation with the Chairman of Hillingdon CCG and Chair of Healthwatch Hillingdon. The plan was approved by the Board and submitted to NHSE for assurance. The plan was fully assured by NHSE on 17 May 2019.</p> <p>Of particular note this quarter is the continued progress that has been made in establishing the new online Counselling Service, Kooth. The service provides increased access, prevention and early intervention for children and young people in Hillingdon with emotional wellbeing and mental health issues.</p> <p>The CCG is hosting 3 system wide workshop in May-June 2019 and this report outlines the progress in the development of the new early intervention model and service specification for Hillingdon children and young people.</p> <p>The report notes that Hillingdon CCG bid successfully for £45,000 for waiting list monies accepted by NHSE. The monies have been used to provide additional clinical resource to remove 90 children from the current waiting list for the specialist service by May 31 2019 to ensure that the 18 week performance target is met. The report also outlines the service development plan to develop robust outcome measures in the local services.</p>
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	<p>This paper provides an update on the continued engagement with Hillingdon schools in response recently published response to the government Green Paper. Schools Mental Health Champions and mental health support in schools (Child wellbeing practitioners). The report also outlines the key findings from the Mental Health Survey of children and young people which provides the most up to date available data on the national trends and prevalence of mental disorder in children and young people and the possible implications for Hillingdon.</p>
<p>Contribution to plans and strategies</p>	<p>Previous Health and Wellbeing reports Hillingdon's Health and Wellbeing Strategy Hillingdon's Sustainability and Transformation Plan Hillingdon CCG's Commissioning Intentions 2019/20. Hillingdon Children and Young Persons Emotional Health & Wellbeing Transformation Plan 2018-2019.</p> <p>National: 'Future in Mind: promoting, protecting and improving our children and young people's mental health and wellbeing' (2015) 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 & Adolescent Mental Health Services (CAMHS) case for change (NHSE August 2016) Green Paper The Government response to the consultation on Transforming Child mental Health Provision- A Green Paper next Steps. (DOH July 2018). Mental Health Survey Children and Young People(Office of National Statistics 2018) NHS Long Term 10 Year Plan (DOH 2019)</p>
<p>Financial Cost</p>	<p>This paper does not seek approval for costs.</p>
<p>Ward(s) affected</p>	<p>All</p>

2. RECOMMENDATIONS

That the Health and Wellbeing Board note the progress made:

- 1. In the approval and submission of the annual refresh of the Hillingdon Children and Young People's Mental Health and Emotional Wellbeing Local Transformation Plan. The plan was approved by NHSE on the 17/5/19, the plan has now been published on the Hillingdon CCG website.**
- 2. In developing the local offer available for CYP and families in 'Getting Advice' and 'Getting Help' (building resilience and early intervention and prevention),**

particularly the progress made in establishing the new on-line counselling service Kooth which has increased access to emotional wellbeing and mental health services for children in Hillingdon in 2018/19 .

3. In the development of the Early Intervention and prevention model .Hillingdon CCG has hosted 2 workshops with the Local Authority, CNWL and the voluntary sector to develop an early intervention model for emotional wellbeing, and mental and physical health. The meetings took place on the 14/5/19 and the 22/5/19. A third workshop will be held on the 11/6/19. The aim of these workshops is to agree a service specification for the new model by 30/6/19. The model has been developed in consultation with Young Healthwatch and with parent and school representatives via the Thrive Network meetings that are held bi-monthly.
4. In the sustained improvement in increased access for CYP in ‘Getting More Help’ and ‘Getting Risk Support’ shown in the performance data from CCG and NHS commissioned services The CCG successfully bid for monies to reduce the Hillingdon waiting times for access to CAMHS by removing 90 children from the Hillingdon CAMHS waiting list by May 2019.This has proved successful and CNWL have met the 18 week target during the February to April 2019 period as well as reducing the waiting list in the CAMHS specialist service.

3.0 The THRIVE model Figure 1.



The Thrive domains:

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.

4.0 Given the Board's formal adoption of the Thrive framework, the progress within this report is framed within the four Thrive domains in order to provide an appropriate and consistent structure 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. (See Figure 1 above).

4.1. Progress has been made against the four domains of the Thrive model and as agreed in the Local Transformation Plan. Achievements of note are:

4.2 Thrive Components - Getting Advice and Getting Help

4.3 Early Intervention and Prevention Update since Last Report

Kooth' the online counselling, support and advice service for 11-19 year olds went live in the

Borough on 9 July 2018. The service provides immediate access to support for children and young people with emerging emotional wellbeing and mental health issues. Monthly contract performance meetings are in place and the Quarter 4 report is attached (Appendix 1).

The service continues to perform exceptionally well and is increasing access to emotional wellbeing and mental health services in Hillingdon at an increasing rate. Some of the main highlights from the Q4 report (Appendix 1) are:

- The service has successfully addressed the escalation of need and early intervention with zero referrals or signposting to external services, especially CAMHS, from 516 new registrations, and this has reduced the need to refer to the more costly Specialist CAMHS.
- Overall, the figures for Kooth activity in Hillingdon, demonstrate a high level of client satisfaction, increased registration, engagement with BAME young people and those with protected characteristics, out of office hours' engagement, evidencing how the service has successfully embedded within the region, ensuring growth and stabilising engagement with young people via Kooth.
- Schools and GP's are represented as the top two places young people heard about Kooth in Hillingdon, with Friends being the next most popular. This demonstrates the successful work of the Integration and Participation Worker within the region and the strong working relationships established with schools and stakeholders to sustain engagement with Kooth in Hillingdon.
- The current contract with Hillingdon (which includes part delivery to Harrow) ends in July 2019. The conversations to date with both Hillingdon CCG and Harrow CCG have indicated that the commissioning of Kooth delivery beyond July 2019 is likely to be recommended and that Harrow CCG will wish to roll-out universal delivery of Kooth across the whole of their footprint.
- In response to the NHS 10 year plan (Section 3.30) 'to extend current service models to create a comprehensive offer for 0-25 year olds that reaches across mental health services for children, young people and adults', we are currently in discussions with Hillingdon CCG to incorporate access to 18-25-year olds in Hillingdon via the Kooth platform. This is likely to be from September 2019 but is subject to further dialogue and confirmation.
- The service has successfully addressed the escalation of need and early intervention with only one referrals or signposting to external service (CAMHS) from 516 new registrations by Q4. This has reduced the demand on the specialist service and reduced costs and these benefits will be more fully investigated in future reports.

4.4 Kooth: Key Performance Indicators

Kooth activity is measured against KPI targets. The data below demonstrates that Kooth has achieved and exceeded their KPIs in 2018/19.

KPI Outcomes

85% of respondents completing the voluntary questionnaire would recommend Kooth to a friend

Performance level = 89%

70% of respondents completing the voluntary questionnaire found their visit to Kooth helpful.

Performance level = 87%.

70% of respondents who completed the end of chat rating measure had a positive response

Performance level = 79%

Number of formal and informal complaints received = Zero

4.5 Outcomes

Clinical outcome Goals (CoGS) has been designed as an interactive tool to be used in counselling to chart the achievement of personalised goals. It also serves as a tool to measure the level of this achievement and an evidence base for counselling. Personalised goals are recognised as a valid measuring tool by CORC (CAMHS Outcome Research Consortium). The service can evidence positive outcomes and increase in positive outcomes for the children that it sees and this work will be reported on in future reports.

4.6 Kooth in Hillingdon: Future Development

In response to the NHS 10 year plan (Section 3.30) 'to extend current service models to create a comprehensive offer for 0-25 year olds that reaches across mental health services for children, young people and adult's. Kooth are currently in discussions with Hillingdon CCG to incorporate access to 18-25 year olds in Hillingdon via the Kooth platform.

It is expected that the referrals to the service will rise in future quarters and that this service will be a significant part of the emerging strategy for the integrated service model for early intervention and prevention for children and young people in Hillingdon.

4.7 Early Intervention and Prevention model Development - System Wide Workshops.

The CCG is aiming to further develop and build on the early intervention initiatives delivered by the KOOTH service and expand our early intervention and prevention local offer to children and families in Hillingdon.

The CCG is hosting a series of 3 system wide workshops in May – June 2019, with representation from leads within the Local Authority, Young Healthwatch CNWL and the Voluntary sector. The workshops will aim to develop a new integrated early intervention Model for emotional wellbeing, mental health and physical needs in Hillingdon that will have the following benefits:

- Every child in Hillingdon is seen by the Early Intervention Service within 2- 4 weeks of referral
- Looked after children are seen by the Early Intervention Service within 2 weeks of referral
- Specialist CAMHS waiting lists and referrals are reduced by 15%
- Reduction in 10% of CYP GP visits for primarily EWB issues
- 70%of all schools have a dedicated wellbeing lead who is part of/ linked into the Early Intervention Model
- Decreased school exclusion and absence rates for CYP on the Early Intervention Service case load
- A&E attendance of CYP for primarily EWB needs is reduced by 20%

The decisions made in the workshops will be sense checked at the Hillingdon Thrive network by representatives from local schools, parent leads and Young Healthwatch.

The output from the 3 workshops is to agree a service specification for the new service by 30 June 2019. This will be followed by a business case in 2019/20 and the planned mobilisation and implementation of the new service by April 2020. Appendix 2 outlines the workshop aims and progress made in developing the model locally.

4.8 Department of Health Funding Bid Early Intervention and Prevention

In the last report to the Board it was noted that the Hillingdon voluntary sector organisation P3 in partnership with the CCG and LA have submitted a bid to the Department of Health and wellbeing fund. This funding will support young people in Hillingdon who have emerging mental health disorders and provide a range of social and practical solutions and supports for children and young people in the community. In May 2019, the Department of Health informed P3 that they have been shortlisted for potential funding (£500,000).

If the bid is successful the vision is to use the funding to expand the P3 Navigator Hub in Yiewsley into “Navigator Plus” - wellbeing early intervention hub for young people 13-25. This would offer instant access, cross sector wellbeing & mental health support for children and young people in one place. This development would significantly support and enhance the developing Hillingdon early intervention and prevention model. An update on the bid will be provided in future reports.

4.9 Early Intervention and Prevention Schools

The work with local Hillingdon schools continues. The work with 22 Hillingdon schools in developing mental health champions and the Social Communication, Emotional Regulation and Transactional Support. (SCERTS which operates in 35 Hillingdon schools is progressing successfully and this work has been detailed in previous reports to the Board. In particular during this quarter there have been a number of developments.

The Child Wellbeing Practitioner Service This has been fully operational from 15th of August 2018, and has been accepting referrals via the CAMHS Gateway and the participating schools. Currently the two Child wellbeing Practitioners are delivering the intervention, consisting of 8 one to one CBT based Guided Self Help sessions, at six Hillingdon schools. In the last quarter:

- Meetings have taken place between the CCG, local schools and CNWL to review and approved the development of this model to provide an early identification and response to identification and response to emerging mental health issues in schools.
- In May 2019, CNWL and HCCG submitted a bid to NHSE to increase the number of Practitioners by 2 WTE.

5.0 Thrive component: ‘Getting Risk Support’ and ‘Getting More Help’ Performance update.

This section provides an update on progress in Hillingdon CAMHS services meeting the contract target to treat 85% of children within 18 weeks of referral. The performance of the team is outlined in the performance report from CNWL.

In March 2019, the CGG successfully bid to NHSE for £45,000 non-recurrent funding to clear the waiting list in the CAMHS Specialist. Service these monies were used to recruit 3 WTE CBT nurses who were employed to use an evidenced based CBT approach of 6-8 sessions per child to remove 90 children from the waiting list by 31 May 2019.

In quarter 4 2018/19, the CAMHS Specialist service successfully met the performance targets.

5.1 Outcome Recording CAMHS Specialist Service

HCCG has outlined a service delivery plan in 19/20 to improve the recording and monitoring of outcomes for those children and young people who use the Hillingdon Specialist CAMHS. This

has been agreed with CNWL as part of the CAMHS service development plan for 2019/20.

Meetings have taken place with the CCG, CNWL and the Centre for Clinical Outcomes (Corc) in March 2019 and Corc will be working with the service to ensure clear robust outcome measures are in place and that they are recorded by the clinical team. The workshops with the Specialist Team and Corc will take place by quarter 2 2019/20, and the outcome measures will be agreed and recorded by quarter 3 2019/20. This will be monitored by the CCG / CNWL contract meetings and reported in future reports to the Board.

5.2 Mental Health Prevalence and Local Need in Hillingdon

The Mental Health and children and young people's survey presents the most up to date data on mental health trends. Major surveys of the mental health of children and young people in England were carried out in 1999, 2004, and 2017. While many surveys use brief tools to screen for nonspecific psychiatric distress or dissatisfaction, this series applied rigorous, detailed and consistent methods to assess for a range of different types of disorder according to International Classification of Disease (ICD-10) diagnostic criteria. All cases were reviewed by clinically-trained raters.

Comparable data is available for 5 to 15 year olds living in England in 1999, 2004, and 2017. The 2017 survey for the first time provides findings on the prevalence of mental disorder in 2 to 4 year olds, and spans the transition into adulthood by covering 17 to 19 year olds.

The latest survey was funded by the Department of Health and Social Care, commissioned by NHS Digital, and carried out by the National Centre for Social Research, the Office for National Statistics and Youthinmind (published November 2018).

Key Findings:

- One in eight (12.8%) 5 to 19 year olds had at least one mental disorder when assessed in 2017.
- Specific mental disorders were grouped into four broad categories: emotional, behavioural, hyperactivity and other less common disorders. Emotional disorders were the most prevalent type of disorder experienced by 5 to 19 year olds in 2017 (8.1%).
- Rates of mental disorders increased with age. 5.5% of 2 to 4 year old children experienced a mental disorder, compared to 16.9% of 17 to 19 year olds. Caution is needed, however, when comparing rates between age groups due to differences in data collection. For example, teacher reports were available only for 5 to 16 year olds.
- Data from this survey series reveal a slight increase over time in the prevalence of mental disorder in 5 to 15 year olds (the age-group covered on all surveys in this series). Rising from 9.7% in 1999 and 10.1% in 2004, to 11.2% in 2017.
- Emotional disorders have become more common in five to 15 year-olds – going from 4.3% in 1999 and 3.9% in 2004 to 5.8% in 2017. All other types of disorder, such as behavioural, hyperactivity and other less common disorders, have remained similar in prevalence for this age group since 1999.

The rise in prevalence of mental disorders nationally indicates that there may be a higher or rising prevalence of mental health disorders in Hillingdon. NHSE have estimated on the basis of this survey that the prevalence of mental disorders in Hillingdon will rise from the previous figure of 4051 to 6,000-7,000 children and young people.

The CCG, Local Authority and Public Health will be meeting in June 2019, to review and

triangulate all available data to present a comprehensive overview of emotional wellbeing and mental health needs for children and young people in Hillingdon. This will involve a review of the Public Health data available on Fingertips relating to mental health prevalence in Hillingdon. This information will be outlined in future reports to the Health and Wellbeing Board

This increased demand will be a key challenge for local services and necessitates the need to redesign our services to provide earlier intervention and prevention to improve outcomes for children and young people and reduce the demand on specialist services as outlined earlier in this report. The new model aims to provide an integrated response from the Health, local authority and voluntary sector that will identify unmet need, emerging mental health issues and appropriately signpost to community services to optimise and improve the use of existing resources (Appendix 2).

6.0 Governance

The new CYP MH Transformation project lead for Hillingdon CCG (John Beckles) joined the CCG in July 2018. The lead had been employed on a full-time basis on a fixed term 2 year contract and is providing additional resource and support to implement our plans working with local partners and stakeholders to deliver the priorities. This additional leadership will support the implementation of the LTP and the changes required to achieve an effective, efficient and economic pathway (VFM) for CYP and their families.

7.0 FINANCIAL IMPLICATIONS

This paper does not seek approval for costs.

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

9.0 BACKGROUND PAPERS

Appendix 1 - Kooth Quarter 4 Report

Appendix 2 - Workshop 2 Aims and Outcomes