

CHILDREN AND YOUNG PEOPLE MENTAL HEALTH AND EMOTIONAL WELLBEING UPDATE OCTOBER 2019

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	John Beckles Commissioner Emotional Well-being & Mental Health Hillingdon CCG
Papers with report	N/A
Wards	All

HEADLINES

This paper provides an update on key achievements in implementing the Hillingdon Children and Young People's Mental Health and Emotional Wellbeing Local Transformation Plan (CYPMH LTP), which is being supported through the development of the Hillingdon Thrive network.

Importantly, the paper outlines the progress made in 2018/19 and of the development of early intervention and prevention initiatives in Hillingdon. In particular, the KOOTH online counselling service and the transformation of CYP MH and the priorities of the CYP Emotional Wellbeing and Mental Health Local Transformation Plan (LTP) refresh to integrate care more effectively, and to remodel the current pathway to provide earlier intervention more quickly and to improve outcomes for children and Young People in Hillingdon.

This paper also provides an update on the national and local initiatives to provide early intervention and prevention in Hillingdon schools.

It further provides assurance that these plans are in line with local strategy and reflect the views of Hillingdon Children and Young People.

RECOMMENDATIONS

That the Committee notes the following key progress made including:

- 1. The development of the local offer available for Children & Young People and families in 'Getting Advice' and 'Getting Help' (building resilience and early intervention and prevention), particularly, the continued progress and performance in Q1/2 2019, by the new on-line counselling service KOOTH which has increased access to emotional well-being and mental health services for children and young people living in Hillingdon.**
- 2. Developing an integrated early Intervention and prevention model. A draft service specification has now been developed locally as an output from the 3 system wide workshops. The partner agencies (Local Authority, CCG and Education) are developing plans to pilot an early intervention and prevention model. The CCG and national charity P3 have been successful in securing Department of Health funding**

over the next 3 years to support the early intervention and prevention work.

SUPPORTING INFORMATION

The THRIVE model

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.

Hillingdon's Health and Wellbeing Board has formally adopted the Thrive framework, so 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 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 above).

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

Thrive Components - Getting Advice and Getting Help

1.0 Thrive Components - Getting Advice and Getting Help

1.1 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 the 9th July 2018. The service provides immediate access to support for children and young people with emerging emotional well-being and mental health issues. Monthly contract performance meetings are in place.

The service continues to perform exceptionally well and is increasing access to emotional well-being and mental health services in Hillingdon at an increasing rate.

Some of the main highlights from the Q4 2018/19 report are:

- The service has successfully addressed the escalation of need by providing 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. The service was able to address the emotional and therapeutic needs of all the children referred for the service at the point of need and without having to wait for CAMHS referral
- .Overall, the figures for Kooth activity in Hillingdon, demonstrate a high level of client satisfaction, increased registration, engagement with Black and Minority Ethnic (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 the two highest referring agencies to 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) has been extended to July 2020.
- 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.

Significant highlights Q1 April –June 2019 include:

- Q1 has seen 182 new registrations compared to 192 in Q4
- Q1 has seen 754 Logins compared to 833 in Q4, by 212 young people with 77.45% returning to engage with the service.
- Q1 has seen 65.65% of service users accessing Kooth out of office hours (office hours are defined as weekdays 9am – 5pm).compared to 71% in Q4.
- New registrations who identified as BME represented 46.70% in Q1.Similar to Q4.
- There were no complaints or safeguarding issues raised during this reporting period.

1.2 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

1.3 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.

1.4 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 adults. 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 .

2.0 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 KOOOTH service and expand our early intervention and prevention local offer to children and families in Hillingdon.

The CCG hosted a series of 3 system wide workshops in May – June 2019, with representation from leads within the Local Authority, Young Health watch 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 and recommendations made in the workshops will be presented at the Hillingdon Thrive network by representatives from local schools, parent leads and young health watch.

The output from the 3 workshops is the draft service specification for the new service which was completed on the 30th June 2019. This will be followed by a business case in autumn 19/20 and the planned mobilisation and implementation of the new service by April 2020.

In August 2019, the LA and the CCG agreed that a pilot of the new service would take place in the key hotspot areas in Hillingdon where CCG and LA data analysis indicated the prevalence of those children who are most at risk / vulnerable. Yiewsley has been identified as a pilot area.

3.0 Department of Health Funding Bid Early Intervention and Prevention

The VCSE Health and Wellbeing Fund 2019 - 20: Health and Wellbeing Fund” is part of a national programme to improve mental health services for young people across England.

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 and in August 19 the DOH confirmed that the bid was successful.

The Fund aims to support services that focus on improving support for young people and reducing health inequalities, supporting the objectives of a Shared Delivery Plan (2015-2020) with the Department of Health, Public Health, and NHS England.

Organisations were invited to apply for up to £300,000 for the first year (June 2019 – Mar 2020), fully funded by DO. For the further 2 project years (Apr 2020 – Mar 2021 and Apr 2021 – Mar 2022), applicants are required to secure match-funding from the CCG at 50%, 80%, respectively.

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 will 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.

4.0 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 Youth in mind.

(Published Nov 18).

Key Findings are:

- 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 illness and disorders nationally indicates that there may be a higher or rising prevalence or trend 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.

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.

Engagement with Schools

5.0 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. To continue momentum and drive of the project LBH will hold a SCERTS Training & Celebration Event led by the founder Emily Ruben.

Schools will have the opportunity to share best practice and recommend strategies to enhance programme delivery. The LA will also be supporting peer to peer reviews which will be led by the lead schools within the clusters.

LBH remain confident that with the correct support schools will become confident in the delivery of the SCERTS Programme and we will see a measurable difference in the social communication of specific children and young people

A number of working groups have been established to support the development of Thrive locally and the network is facilitating a coordinated approach to schools training and development:

An Emotional Wellbeing / Mental Health Training group, a task and finish group, led by the CCG CYPMH Transformation Project lead, is compiling a list of MH and emotional wellbeing/resilience training programmes currently operating in schools aiming to design a compendium for the use of local schools by March 2020. This has been delayed due to reconstruction of the LA website. This will provide teachers with advice and support on emotional wellbeing and mental health issues as well as a directory of what is available. The resource will support all schools particularly those in deprived areas that may require additional support. The compendium will be made available online and through the local offer 'Connect to Support'.

The 'Wellbeing and Mental Health in schools project' launched at the end of the summer term with an event co-facilitated by the LBH schools leads, the CCG and two local head teachers. Twenty two local schools attended, each represented by the Head, Chair of Governors and a Mental Health school champion. The Head Teachers and Governors of the schools are fully committed to this year long project and have allocated the role of Mental Health Champion to a senior staff member, in order to drive forward change in practice and policy as well as models of working and teaching across the school. This is a significant development in engagement and commitment to the agenda from local schools, and enables partners to test the 'Mental Health Champion' model and to identify best practice and support for other schools in the Borough going forward.

The output from this work is to present the policy to the Councils Wellbeing and Safeguarding board for ratification as a Hillingdon Approved Guidance document that can be sent to all schools and academies in the Borough.

A pilot of the 'Sandwell Whole School Approach' led by the Educational Psychology department commenced in Hillingdon in September 2018 aiming to test the benefits of this approach and the potential to widen the offer to more schools in due course. This approach has a sound evidence base and has been operational in several Local Authorities across the country. The first phase of this approach has started in Coteford Infants School. Staff changes and shortages have meant that completion of phase 2 has been delayed. This pilot will be completed in quarter 3, 2019/20. This will help to develop the evidence base for mental health intervention and support in schools.

5.1 Link Programme – National Initiative for schools

The government is launching a new national initiative to improve the engagement between schools and local mental health services.

The Link Programme:

<https://www.annafreud.org/what-we-do/schools-in-mind/our-work-with-schools/the-link-programme> is led by the Anna Freud Centre, funded by the Department for Education and supported by NHS England and will reach every school and college in England over the next four years.

Training will focus on two workshops, about six weeks apart, which will be coordinated by Clinical Commissioning Groups (CCGs). Invitations to take part will be sent out to education and mental health professionals from local CCGs.

The Anna Freud Centre have been trialling the programme over the last four years and an independent evaluation has found that it:

- Strengthened communication and joint-working between schools and NHS children and young people's mental health services
- Improved understanding of mental health services and referral routes
- Improved knowledge and awareness of mental health issues among school lead contacts
- Improved timeliness and appropriateness of referrals

Hillingdon CCG will be working with Anna Freud Centre and local partners to develop this program across all Hillingdon schools in autumn 2020.

6.0 Thrive component: 'Getting Risk Support' and 'Getting More Help' Performance update.

This section provides an update on progress in Hillingdon CAMHS Specialist services meeting the contract target to treat 85% of children within 18 weeks of referral.

In March 2019, the CCG successfully bid to NHSE for £45,000 non-recurrent funding to clear the waiting list in the CAMHS Specialist. The additional funding was 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 31/5/19.

In quarter 3 and 4, 2018/19, the CAMHS Specialist service successfully met the performance targets.

However, in quarter 1 and 2, 2019/20, the service has failed to meet the RTT target and in quarter 2 the service treated only 65% children within the 18 week target. The service has produced a recovery trajectory and action plan and the service will meet the target by December 2019.

6.1 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.

The level of outcome recording in the service has improved and in quarter 1 2019/20 the service reports that 90.9 % of young people discharged with CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure showing improvement between acceptance and discharge. Year to Date 82.6 % children discharged have shown improvement. The threshold for NWL teams is 60%.

7.0 Hillingdon Local CAMHS Transformation Plan Refresh October 2019.

The Health and Wellbeing Board approved Hillingdon's Overarching Local Transformation Plan in 2015, and has received regular updates on progress since. NHSE require an annual refresh of the plan based on experience with implementation. This work is underway but will not be finalised until mid-October for submission at the end October 2019. At its meeting on 24th September 19, the Health and Wellbeing Board agreed to delegate authority to approve the annual refresh of the plan for submission to NHSE by end October 2019, to the Chairman of the Board in consultation with the Chairman of Hillingdon CCG and Chair of Health watch Hillingdon. The refresh will reflect the priorities below.

The overarching priorities agreed in the plan are:

Thrive - embedding the model to deliver a pathway without tiers and support improvements in

Access:

- Early Intervention and Prevention/ Fast Access to support
- Minimal Waiting Times
- Using technology e.g. on line Counselling

Workforce Development & Training:

- Training Early help intervention & support Children Centres, Schools, GP Practices

Ensure CAMHS Specialist Services meet NHSE Targets.

Prioritise Vulnerable Groups

- Looked After Children
- Young Offenders
- Children in Need

7.1 Vulnerable children

Multi Agency Psychological Support (MAPS) Service.

The Multi-Agency Psychological Support (MAPS) Team is a multi-agency service commissioned by the London Borough of Hillingdon (LBH) and provided by Central and North West London NHS Trust (CNWL NHS). The service has been developed in partnership with social care and mental health services to promote the positive mental health and education outcomes for children and young people who are looked after or adopted aged 0-17 years old up to their 18th birthday in the London Borough of Hillingdon.

In particular, the service works with children and young people who are looked after, adopted from care, or cared for under special guardianship arrangements and who present with the following difficulties:

- Mild to moderate emotional, psychological and mental health difficulties that do not

- meet the criteria for specialist Tier 3 services (CAMHS)
- Anxiety, depression, stress and or other mood disorders
- Symptoms of trauma and/or abuse that require therapeutic input

The service delivers assessment and intervention to children and young people and their carers or adopters, as well as providing consultations to social workers and residential children's homes, teaching and training. The service also offers therapeutic support for carers, children and young people.

The MAPS service works with an especially complex population of children and young people, many of whom have experienced adverse life events including human trafficking, childhood sexual exploitation (CSE), sexual, physical or emotional abuse and neglect. The service provided can offer outreach to locations up to one hour travel from Hillingdon and also offers support and advice about accessing CAMHS services in other boroughs. This service was highly commented by the inspectors at the last Ofsted inspection in April 2018.

8.0 Local Engagement – Young Health Watch

The Thrive network and Young Health watch have reviewed the early intervention model development and the key priorities. They noted the areas of progress and achievements to date and endorsed the direction of travel. There was a general comment on the need to continue to focus on access and waiting times to ensure the percentage of CYP accessing services increased and that they had access to early support.

The network also suggested the areas to focus on in delivering the priorities:

- Early intervention and support needs to be enhanced and reduce the impact on core CYP MH (CAMHS) services.
- ASD pathway needs to be embedded and further support models developed to meet the needs of this vulnerable cohort.
- A single point of Access for CYP MH and EW services.
- Develop local offer to schools in deprived areas and have a target of an extra 10-15 schools supported by the wellbeing and mental health network by the end of the summer term 2019.
- Co-ordination of 0-5 services need to be enhanced in Hillingdon around attachment and the new model.

The CYP MH Transformation Project Lead met with Young Health watch to seek their views on the progress and priorities going forward. They are in support of the above priorities and emphasised the following:

- More support for emotional wellbeing in schools
- A single point of Access to reduce waiting time
- More use of on-line technology

9.0 Challenges

- Pilot Early Intervention and Prevention model by April 2020.
- The Increase demand and prevalence of mental health issues in Hillingdon.
- Reduce waiting times Specialist CAMHS needs to consistently meet 18 week RTT target.

- Improve and further Develop links with Hillingdon schools – Link Programme National Initiative Autumn 2020.

10.0 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 resources 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.

11.0 Implications on related Council policies

The LTP supports delivery of the following strategies:

- Hillingdon's Health and Wellbeing Strategy 2018-2021
- Hillingdon's Sustainability and Transformation Plan
- Hillingdon CCG's Commissioning Intentions 2019/20

12.0 How this report benefits Hillingdon residents

The LTP directly supports improving the emotional health and wellbeing of children and young people in Hillingdon. The Thrive model approach is designed to provide more effective help earlier.

13.0 Financial Implications

There are no financial implications relating directly from this report. The funding of the LTP has been subject to discussion at Health and Wellbeing Boards and constitutes a funded programme.

14.0 Legal Implications

There are no legal implications resulting directly from this report.

15.0 BACKGROUND PAPERS

None.