

# Report to Children and Young People's Committee

**17 December 2018** 

Agenda Item: 4

#### REPORT OF THE CONSULTANT IN PUBLIC HEALTH

## ANNUAL REFRESH OF LOCAL TRANSFORMATION PLAN FOR CHILDREN AND YOUNG PEOPLE'S EMOTIONAL AND MENTAL HEALTH

## **Purpose of the Report**

- 1. To advise the Committee on the refreshed local transformation plan for children and young people's emotional and mental health and seek approval to bring an update report on progress with implementing the plan in six months' time.
- 2. The report also seeks the nomination of a member of the Children and Young People's Committee to the Children and Young People's Mental Health Executive, which has responsibility for the delivery of the Local Transformation Plan and Action Plan.

#### Information

- Local areas, led by clinical commissioning groups (CCGs), have been required to have a 3. system-wide local transformation plan (LTP) for children and young people's emotional and mental health since 2015. The full LTP is available as a background paper to this report. This plan, which covers the period 2015 to 2021, is the fourth iteration, covering Nottingham and Nottinghamshire (including Bassetlaw), in line with the Sustainability and Transformation Plan. Progress in implementing the plan was last reported to the Children and Young People's Committee in February 2018. The LTP has been signed off by NHS England as 'partially compliant' in line with their assurance process. Children's commissioners will be working with the NHS East Midlands Clinical Network and local stakeholders throughout 2018/19 and 2019/2020 to work towards achieving compliance where possible. The refreshed LTP is currently being taken through CCG governance processes for board level approval, in line with NHS England requirements, and will be published on CCG websites and the Nottinghamshire Children and Families Alliance website once approved.
- 4. A detailed delivery plan for this transformation plan is reviewed by Nottinghamshire Children and Young People's Mental Health Executive, which is responsible for:
  - reviewing and monitoring delivery of the plan, including considering the impact on outcomes for children and young people
  - monitoring the risks and issues to ensure appropriate mitigating actions are undertaken, or escalate as necessary

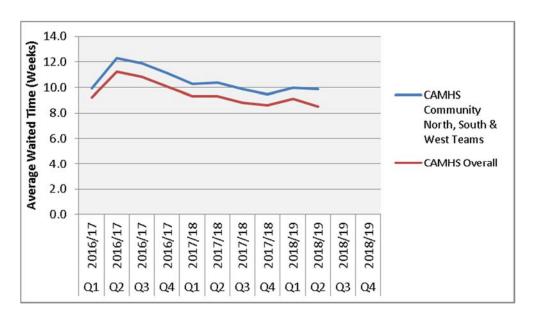
- ensuring that commissioning of children and young people's mental health services is undertaken in a collaborative and joined up way and that commissioning and contractual mechanisms are utilised to ensure improvements are achieved
- ensuring that the interdependencies between the strategy and other strategies being implemented are considered and managed.
- 5. The Nottinghamshire Children and Young People's Mental Health Executive includes representatives from CCGs, Local Authority Children's Services, Public Health, local NHS providers and NHS England. Update reports from this Executive are provided to the Health and Wellbeing Board.
- 6. The plan is system-wide and as such covers services commissioned and provided by the two local authorities (public health and children's services functions), local clinical commissioning groups and NHS England. Progress in implementing the plan is reported to Children and Young People's Committee in the context of the Local Authority's role in relation to safeguarding children and young people.
- 7. Achievements made over the last year in implementing the plan to improve children and young people's emotional and mental health include:
  - the Primary Mental Health team within Nottinghamshire Healthcare NHS Foundation Trust (NHFT) CAMHS (Child and Adolescent Mental Health Service) continue to work with GPs, Healthy Family Teams and schools across Nottinghamshire providing consultation, advice and training. During 2017/18 the team delivered 701 case consultations. By offering case consultation there has been an increase in the number of appropriate referrals received by CAMHS, with approximately 55% accepted in 2016/17, 80% accepted in 2017/18 and, as of September 2018, 83% accepted.
  - NHFT CAMHS now offers self-referral for all CAMH services including specialist services such as CAMHS Eating Disorder Service and CAMHS Crisis Resolution, Home Treatment and Liaison. Young people and their parents and carers can now complete an online self-referral form giving them direct access to the service without seeing a GP in the first instance. Self-referrers can also contact the Single Point of Access for advice and guidance prior to completing a referral.
  - to ensure that the CAMHS Eating Disorder Service can achieve the access and waiting time standard by 2020, CCGs have committed additional recurrent funding to increase the capacity within the service. This will allow the service to remodel and offer a same day 'assess and treat' model to ensure young people start treatment at the earliest opportunity.
  - during 2017/18 the CAMHS Crisis Resolution and Home Treatment Service was enhanced to include a CAMHS liaison function which is for those young people attending emergency departments in emotional or mental health crisis. The CAMHS liaison function has been rolled out across the two main acute settings, Queen's Medical Centre and King's Mill Hospital, with the aim of reducing admissions where safe, and ensuring appropriate, joined up follow-up support in the community.
  - during 2017/18 and continuing through 2018/19 the Council has taken part in a national pilot, Integrated Personal Commissioning (IPC) CAMHS Looked After, the aim of the

pilot is to support and improve the care on offer for the looked after and care leaver population by offering a personalised approach to support planning and personal budgets. A target of 50 young people offered a personal budget by March 2019 was set by NHS England. As of October 2018 111 young people have been referred to the pilot of which 79 have a personal budget allocated and 32 have an indicative budget waiting to be allocated. Young people have been using their personal budget to purchase a number of creative ways to manage their emotional wellbeing and mental health needs including bike and bike safety equipment, cookery classes, photography equipment, ballet workshop at the Royal Academy of Dance and football coaching. A youth worker and apprentice care leaver have also been recruited to help evaluate the pilot. Work will continue to develop a business case to enable commissioners understand how this could be embedded within current commissioning and contracting processes with the aspiration to be able to offer a personal budget to young people who would normally access CAMHS services.

- across the last year there has been continued focus on strengthening the perinatal mental health pathway across the STP footprint driven by a multi-agency steering group. The capacity of the Perinatal Psychiatry Service has increased including peer support, nursery nurse, mother infant therapist and speciality doctor posts recruited and additional patients now being supported by the service.
- from an academic resilience perspective, 30 schools from across Nottinghamshire have been taking part in the Take 5 at School Programme (North and West Nottinghamshire) and Young Minds Academic Resilience Programme (South Nottinghamshire). The full evaluation of these programmes is due in September 2019.
- Nottinghamshire was successful in being selected to take part in the Mental Health Services and Schools Link Programme facilitated by the Anna Freud National Centre for Children and Families. The programme is a ground breaking initiative to help CCGs, other services providers and local authorities work together with schools and colleges to provide timely mental health support to children and young people. It works to empower professionals and support staff by brokering contact, sharing expertise and developing a joint vision for children and young people's mental health and emotional wellbeing in each locality. 107 schools from Nottinghamshire signed up to the programme, with 177 colleagues working within schools and colleges taking part along with 48 professionals from a range of services including CAMHS, Healthy Families Teams, Family Service and Youth Justice. A full evaluation is expected in early 2019.
- a large scale engagement programme (MH:2K) with children and young people was undertaken during 2017/18 and 2018/19. MH:2K is a powerful new model of engaging young people in conversations about mental health and emotional wellbeing in the local area. The programme recruited 31 diverse young people as the project's Citizen Researchers, who through a number of roadshows across Nottinghamshire engaged with 647 other young people, collecting a wealth of information which identified their views on the mental health challenges they face and their ideas for solutions. A 'Findings and Recommendations' report has been produced and this will help to inform future transformation of children and young people's emotional and mental health services and support.

8. As demand increases challenges remain in ensuring that all children and young people in need of support have timely access to an appropriate level of emotional or mental health service. **Table 1** below shows waited time to treatment (weeks) for all CAMHS services, including specialist services, and the Community CAMHS teams.

Table 1. CAMHS average waited times (weeks) – Nottinghamshire Healthcare NHS Foundation Trust



- 9. Whilst waited times for CAMHS Community Teams are reducing as a whole, when looking at the CAMHS Community Teams individually, there is a slight disparity between South, North and West. Current average waited times (weeks) for treatment (as of September 2018) for CAMHS South is 10.9, CAMHS North 9.1 and CAMHS West 7.5. The longer waited time in the CAMHS South team is partly due to long term vacancies and sick leave and partly due to the delivery model.
- 10. The provider currently co-locates south County and City teams together, though they operate different models. County commissioners are working to ensure the current operational model does not have an adverse effect on County children. This is being addressed via CCG contract routes in order to ensure an equitable delivery model is in place across Nottinghamshire County and Nottingham City.
- 11. Improving waiting times continues to be a key focus over the next year. The recent Transforming Children and Young People's Mental Health Provision: a Green Paper invited areas to take part as 'Trailblazer' sites to pilot 4 weeks waiting times to specialist CAMHS treatment. Whilst Nottinghamshire is not taking part in this initiative, work is underway to develop an outcomes based payment framework with NHFT to ensure that by March 2019 no child or young person will wait longer than 10 weeks from referral to treatment.
- 12. There are a number of ongoing developments taking place during 2018/19 and through the remainder of the lifespan of the LTP:
  - work to embed the recommendations of the recent green paper. Two CCGs within Nottinghamshire County have been pre-selected to apply as 'trailblazer' sites. If

successful they will work to embed Mental Health Support Teams linked to groups of primary and secondary schools. The purpose of these new teams is to provide interventions to support those young people with mild to moderate needs.

- phase 2 of the concerning behaviours pathway review will take place. This will include
  a review of the multi-agency pathways Nottinghamshire has for children with complex
  behavioural needs and identify whether one multi-agency pathway can be embedded
  across education, social care and health. During this time a review of the Adult Social
  Care and ADHD assessment process will take place.
- two new pilots will be initiated during 2018/19 funded through the NHS England CAMHS Transformation Innovation Project. One will see a speech and language therapist embedded within the CAMHS Head2Head team working alongside City and County Youth Offending teams. The focus of these projects will be to measure and evaluate the skills and knowledge of youth offending teams around identifying and supporting young people with speech, language and communication needs and/or Special Educational Needs & Disability (SEND), evaluate the impact of SLCN screening tools and staff training on the experience of young people in contact with youth offending teams and offering 1:1 direct work with young people with a high level of needs or complexities. The second pilot will see a full time specialist psychologist embedded within the CAMHS Head2Head team. This will be a training and consultation model to enable Youth Offending Team case managers and others working in the youth justice system to develop a better understanding of trauma, including the use of trauma informed practice and psychologically informed work to support young people who are already in contact with the police and are at risk of continued, escalating offending behaviour.
- alongside the HealthforTeens website, the Health for Kids website will also be released.
  This will offer a mix of clinically assured interactive content, co-designed with children
  and young people. The website aims to be a one stop shop for young people to seek
  universal health information that is safe and from a trusted source, via quality assured
  content that is fit for the smartphone generation.

#### **Other Options Considered**

13. No other options have been considered. This plan is line with NHS England planning requirements.

#### Reason/s for Recommendation/s

14. Children and young people's emotional and mental health is an issue for all services working with children and young people across local government, health, schools, police and voluntary, community and independent sectors. This is reflected in the content of the local transformation plan. It also falls within the Council's statutory duties in relation to safeguarding children and young people.

### **Statutory and Policy Implications**

15. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human

rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Crime and Disorder Implications**

16. Implementation of this plan will contribute to reducing health inequalities for vulnerable children and young people.

#### **Financial Implications**

- 17. The services outlined in the plan are funded by individual partner and service budgets. There are no additional financial implications arising directly from this report.
- 18. It is a requirement of the Local Transformation Plan to publish each partners' spend. These figures can be found in the 'Accountability and Transparency' section on page 44 of the LTP which is available as a background paper.

#### Implications in relation to the NHS Constitution

19. Implementation of this plan is in line with the NHS Constitutional Standards.

## **Public Sector Equality Duty implications**

20. Implementation of this plan will contribute to reducing health inequalities for vulnerable children and young people.

#### Safeguarding of Children and Adults at Risk Implications

21. Implementation of this plan will contribute to reducing the risk of harm to children and young people with emotional or mental health needs.

#### **Implications for Service Users**

22. Implementation of this plan will improve the response of services to children and young people with mental health needs and thus improve outcomes.

#### **RECOMMENDATION/S**

#### That Committee:

- 1) considers whether there are any actions it requires in relation to the issues contained with the Local Transformation Plan.
- 2) agrees to receive an update report on progress with implementing the plan in six months' time and that this be included in the work programme.

3) nominates a member of the Children and Young People's Committee to be a member of the Children and Young People's Mental Health Executive, which has responsibility for the delivery of the Local Transformation Plan and Action Plan.

### Dr Kate Allen Consultant in Public Health

#### For any enquiries about this report please contact:

Rachel Clark

Programme Lead Children and Young People's Mental Health and Wellbeing

T: 0115 9932747

E: rachel.clark@nottscc.gov.uk

#### **Constitutional Comments (LM 28/11/18)**

23. The Children and Young People's Committee is the appropriate body to consider the contents of the report.

#### Financial Comments (SAS 28/11/18)

24. There are no financial implications arising directly from this report.

#### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Nottinghamshire CAMHS Pathway Review update – report to Children and Young People's Committee on 12 January 2015

Children and Young People's Mental Health and Wellbeing Transformation Plan – report to Children and Young People's Committee on 20 February 2017

Children and Young People's Mental Health and Wellbeing Transformation Plan – report to Children and Young People's Committee on 12 February 2018

Future in Mind. Department of Health. March 2015

https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people

Five Year Forward View for Mental Health – Mental Health Taskforce Strategy. NHS England. February 2016

https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf

Transforming Children and Young People's Mental Health Provision: a Green Paper. Department of Health. Department for Education. December 2017

https://www.gov.uk/government/consultations/transforming-children-and-young-peoples-mental-health-provision-a-green-paper

Nottinghamshire City and Nottinghamshire Joint Local Transformation Plan Children and Young People's Emotional and Mental Health 2016-2021: October 2018 https://www.mansfieldandashfieldccg.nhs.uk/MANewsltem?id=5598

## Electoral Division(s) and Member(s) Affected

All.

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