

NORTH LINCOLNSHIRE COUNCIL

HEALTH AND WELLBEING MANAGEMENT GROUP

Update of Progress against North Lincolnshire's Children and Young Person's Emotional Health and Wellbeing Plan

1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 To keep North Lincolnshire's Health and Wellbeing Board informed of the progress against North Lincolnshire's Children and Young Person's Emotional Health and Wellbeing Plan.

2. BACKGROUND INFORMATION

- 2.1 North Lincolnshire's Children and Young Person's Emotional Health and Wellbeing Plan was first published in December 2015, as a result of the publication of Future In Mind (DH, 2013). This 5 year plan is subject to a yearly 'refresh' to which the latest edition was presented and endorsed by North Lincolnshire's Health and Wellbeing Board on the 8th December 2017

(<http://www.northlincolnshireccg.nhs.uk/data/uploads/publications/north-lincolnshire-children-and-young-peoplrs-emotional-health-and-wellbeing-transformation-plan-2015-n2020.pdf>).

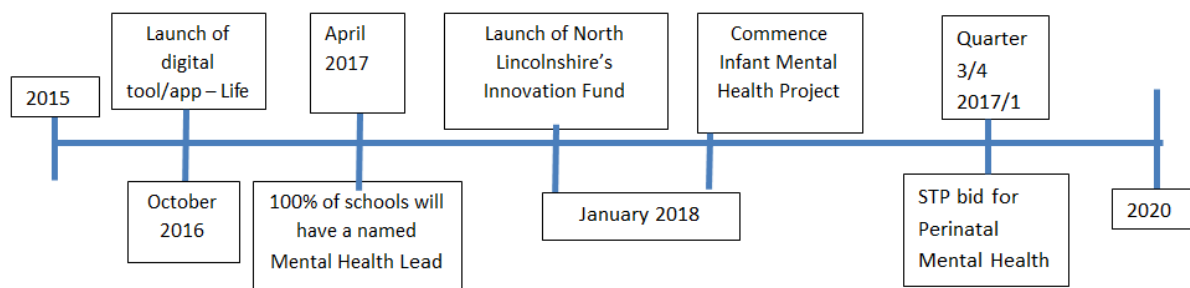
.As part of the overall governance of the plan, the Health and Wellbeing Board requested regular updates on the progress made against the plan.

- 2.2 The following report provides the Health and Wellbeing Board with an update against the priorities within the plan.

3. PROGRESS TO DATE:

The Emotional Health and Wellbeing Group continues to steer the priorities of the Transformation Plan with sub-groups taking the lead on key priority area, reporting directly to the Emotional Health and Wellbeing Group. This quarter has seen much of the work of the subgroups continue to gain momentum. The following report summarizes key progress in each of the 6 priority areas;

3.1 Priority 1: Primary Prevention / Children and Young People Good Health and Emotional Wellbeing



3.11 Commencement of Infant Mental Health Programme and Perinatal Mental Health

Identified within the Transformation Plan was the commencement of an Infant Mental Health Programme whereby an Infant Mental Health Lead has been funded to work on the programme for a year. The programme has commenced with the identified outcomes being;

- Infants are part of a locally agreed partnership approach to supporting their emotional health and well-being from the antenatal period onwards.
- Infants are part of families who receive information to help them at the right time and in the right place so that they receive the support they need at the earliest time possible.
- Infants are provided with a ‘secure base’ and a ‘safe’ haven’ by their parent / primary caregiver responding in a consistently attuned manner to their needs.
- Infants form a secure attachment relationship with their parent / primary caregiver
- Infants develop into children and adults who have emotional resilience to manage the challenges of life

To lead the piece of work a multi-agency Infant Mental Health Alliance has been formed which have initially focused on;

- the development of universal key messages from all agencies utilising UNICEF, 1001 days, AIMH and the Solihull approach, with a planned launch for national IMH week on 11.06.18.
- The development of a Universal Training Package, based on agreed IMH competencies – a sub-group of the alliance is leading this piece of work. Consideration is being made as to whether this can be made mandatory and then be delivered via a refresher.

- Pathway of support at antenatal and postnatal stage – this has included reviewing the current position / activity of; the cross-agency triage panel, the universal offer by children’s centres in the antenatal period, planning of pilot postnatal group, Solihull postnatal groups and joint working / review of the ‘ intensive family support package’, offered by Health Visitors.
- Commissioning of Solihull postnatal training programme and organising the inaugural training to commence in May 2018

3.12 In addition the CCG has worked with their partners across the Strategic Transformation Partnership and have been successful in securing national Perinatal Mental Health Monies to implement an enhanced service delivery model across the STP footprint.

3.13 Small scale project support

In 2018 the Transformation Fund was able to secure 4 key projects including;

3.131 The commission of Getting the Low-down

Getting the lowdown is a nationally developed resource designed to provide education and health facilitators with the tools they need to educate and engage young people around key issues of mental health and emotional well- being. The initiative produces a DVD Rom resource, featuring various materials including short videos, evidence based information and teaching / learning objectives for use with children and young people from ages 5-18. The education resource includes the collation of locally developed lesson plans and both a professional film, with nationally recognised actors, and a locally developed short film, filmed in North Lincolnshire with local children and young people. The resource pack is aimed at equipping mental health champions, teachers and health educators with the tools they need to teach young people, age appropriate lessons;

- Primary Schools : Bullying, Being Active, Anger Management Friendships & Relationships , Loss and Bereavement
- Secondary School Self Harm , Loss & Bereavement , Depression ,Stress &Anxiety ,Eating Disorders , Bullying ,Substance Misuse.

We are currently working with the developers, developing the timeline of the initiative, to which filming in North Lincolnshire is scheduled for September, with the aim to launch the tool in October. Furthermore we will be working with our website designers, Life Central, to ensure the resource is available to all ‘online’.

3.132 Carnegie Scheme for Anxiety Community Support Groups for Children and Young People and their families, in North Lincolnshire Libraries

Anxiety has been identified as a key issue within the young person's population of North Lincolnshire. As such, some of the Transformation Monies have been directed to support North Lincolnshire Libraries to facilitate Anxiety Support Groups for Children and Young in North Lincolnshire Libraries. The project will start in Sept 2018.

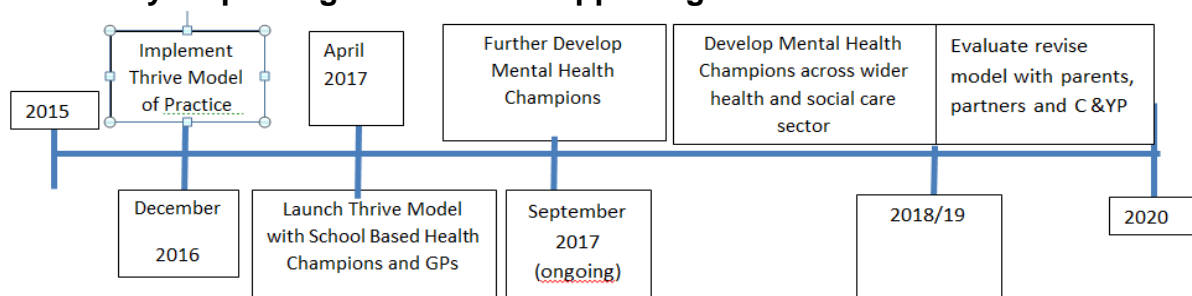
3.133 Further Development of North Lincolnshire, Life Central Website

As part of the Transformation Monies we have been able to fund a 'refresh' of the current pages of life central and develop the website and app to be more inter-active through the introduction of 'quizzes' embedded within the pages.

3.134 Further support into our Youth Mental Health Workforce Development Scheme

Our local vision is for all of the children and young person's workforce to be trained within Youth Mental Health First Aid. Even though we have approximately 8 Train-the-Trainers for the programme, the scale of our ambition does require additional training capacity. As such we have been able to allocate funds to commission an additional 'Youth Mental Health, Train the Trainer Programme'.

3.2 Priority: Improving Access and Supporting Universal Services



3.21 Update on the Implementation of the Thrive Model / Consultation and Advise Model of Practice.

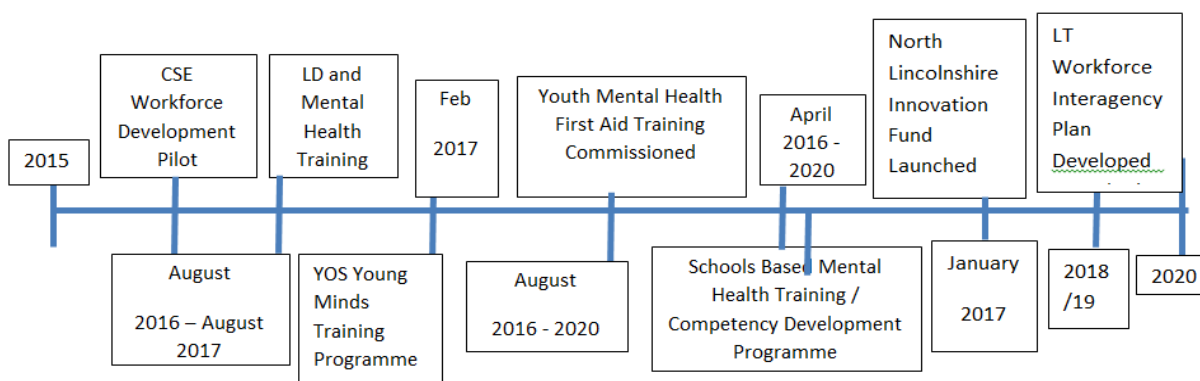
This element of the plan is seen as providing the service Transformation for CAMHS, and for the wider Emotional Health and Wellbeing Services, including schools, GP's, social workers etc, in line with the Tavistock 'Thrive' Model of Practise. This is now embedded as local practise and a multi-agency implementation group is overseeing its development. Monitoring local performance identifies that the number of referrals for what locally is coded as, 'getting advice' has been between 64 and 133 per month, with a mean number of; 84. As many of the 'routine' referrals received are subject to the model, the number of referrals accepted onto the service ranges between 2 – 50, with a mean of 26. As such, local performance statistics suggest that approximate 32% of referrals which are subject to the Advice and Consultation element of the service, go on to receive therapeutic interventions.

One of the risks associated with the revised model was the potential impact on waiting lists. This has been recognised by the CCG and additional money awarded to the pathway (80k) to add both capacity and leadership.

To provide further support to mitigate this risk, and to assist in the development of Education Based Staff, the CCG also funded an Educational Psychologist to work with CAMHS within the Advice and Consultation Model. As many of the referrals require either additional information from education or a school based intervention, the Education Psychologist has been able to work with schools to support them in the recommendations with the aim to develop the competencies of the education workforce.

The outcome of these two initiatives in ensuring access times did not deteriorate have been recognised and throughout the introduction of the model the CAMHS provider has consistently been able to reach it's 10 week target, with 97 % of all non urgent referrals within the commissioned standard of 10 weeks(see below data extracted from the CAMHS performance report on waiting lists).

3.3 Priority: Workforce Development



3.31 Development of a joined up plan to increase the knowledge, skills and confidence of the Children’s workforce around mental health and emotional wellbeing

3.311 Workforce mental health alliance

A Local mental health alliance has been formed with the aim to commit to a strategy for training and development. The alliance is in its inaugural stages of development to which the lead of the alliance has been working on using the Yorkshire and Humber Mental Health Competence Framework to support a local workforce development plan.

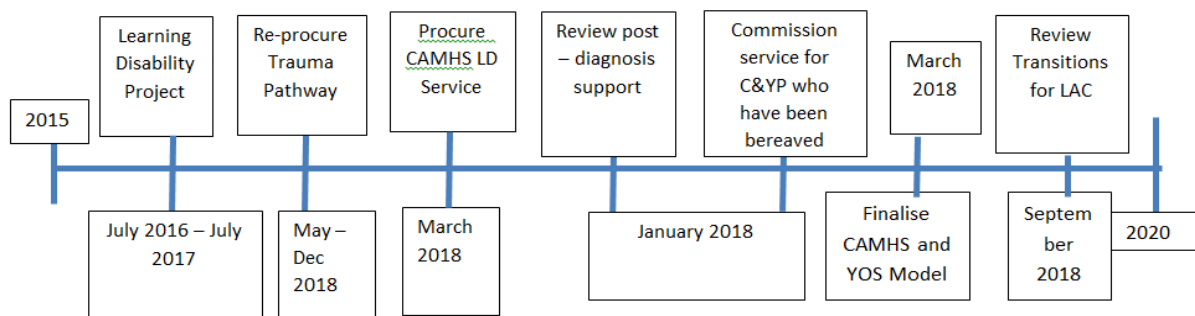
3.312 Mental Health Champion Training, Online Forum, Mental Health Champion network meetings and Young Person’s PR of Mental Health Champions.

The attendance at Mental Health Training events continues to be encouraging, with over continues over 30 MHC’s trained this term and a Mental Health Champion Network Meetings has also commenced termly.

A online forum, developed for Mental Health Champions, continues to grow, with currently 68 members, and more requesting to join weekly. This is viewed as a valuable way to keep MHC’s up to date with the quickly changing landscape.

Within the last quarter the local ‘Young Voices’ have been busy developing a poster about the role of Mental Health Champions in school. The poster is being finalised and aims to be delivered to schools and colleges in the area during April and May with a covering letter. Discussions are also underway with regards to development of screen saver for schools.

3.4 Improve access to specialist CAMHS services especially for the most vulnerable



3.41 LD CAMHS Service – Project Evaluation and Future Commissioning Arrangements

A key objective for 2018 is the procurement of a revised LD CAMHS service. The inaugural stages of the recommissioning have commenced and a needs assessment of the children currently referred to the current therapy pathway is currently underway. A project group is being planned and links have been made with the local PIP forum, who are eager to engage with the project.

3.42 Commissioning Services for Children Who have Been Bereaved.

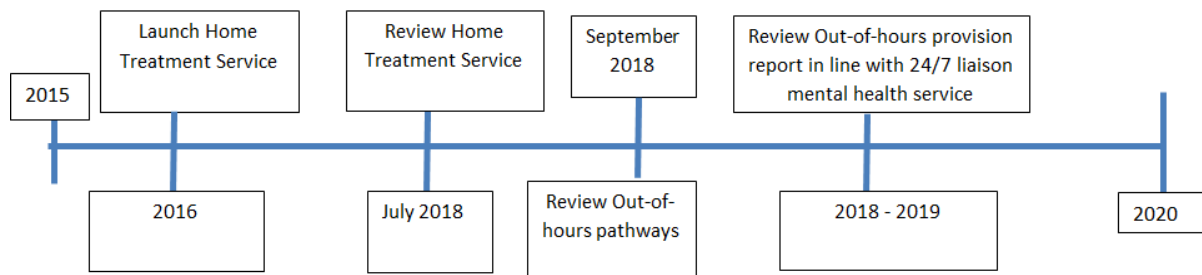
Within the refreshed Transformation Plan, services for Children Who Have Been Bereaved were identified as lacking within North Lincolnshire. As such, money was allocated to procure a local bereavement service for children. The service specification for the service has been developed and the consultation has now closed. Final changes are being made to the specification with the aim to identify a provider within the next 3 months.

3.43 Service User Experience – ASD

Healthwatch are a key partner on the Emotional Health and Wellbeing Steering Groups. One of areas identified within the Transformation Plan as requiring further information / service user insight on was the experiences of families with children with ASD. As such, Healthwatch agreed to commence a piece of independent engagement work to try and gain richer information on local peoples experiences. To date Healthwatch have heard the experiences of 20 families, to which 10 in-depth interviews have been planned for June 2018.

In addition, joint partnership working with the local Parent-In-Partnership (PIP) Forum, has identified the need to develop a user friendly ASD diagnostic and support pathway, to include on the Local Offer. This work has been highlighted to the Steering Group to which the required work is being scheduled.

3.5. Priority: Crisis/Intensive Support



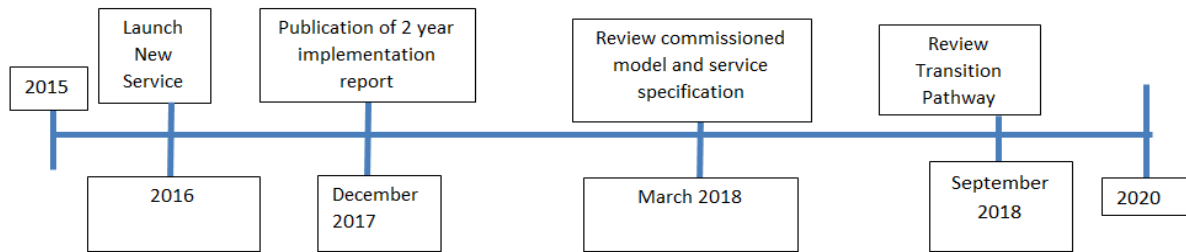
3.51 The outcome of this priority area is to reduce the reliance on Tier IV, to support timely discharge and to ensure that urgent pathways are in place and are functional.

The Crisis / Intensive Home Treatment model is now embedded as a key function within the local CAMHS team. At this stage, and with the small numbers of Tier IV admissions locally, we are unable to statistically determine whether the service has had any impact on Tier IV admissions. During the last quarter, the local CAMHS service have been leading on developing an 'Enduring Pathway', with the aim to manage children and young people (usually 13 plus) where their needs are not necessarily easy to treat, but where they require on-going CAMHS input for an extended period (often over a year). The pathway recognises that these young people will at times require the Intensive Home Treatment approach.

3.52 Urgent Care Pathway

Within the last quarter we have instigated a piece of work to review our current 'health based place of safety for young people detained and transported under the mental health act' and our 'Crisis Assessment Sites'. At present discussions have occurred with both Humber Trust and a voluntary sector organisation, Humber Care, as to how they can potential support a North Lincolnshire pathway, which offers choice.

3.6. Priority: Eating Disorders



The Eating Disorders Disorder Service is delivered as part of a Hub and Spoke model between North Lincolnshire, Doncaster and Rotherham. Performance of the Service remains satisfactory, to which the service is able to meet NICE guidelines (please find below the performance report). To support contract monitoring arrangements quarterly contract monitoring meetings between all commissioners take place, as well as it being reported through the standard CAMHS performance framework with the CCG.

3.7. Other Areas of Development

3.7.1 Care and Education Treatment Reviews (cETR's)

Within the last quarter we have been working with our local authority partners around the revised cETR standards, mainly concerning the role of cETR's in children placed in 38 and 52 week education and residential placements. To help us focus discussions, we invited a member of NHS England to talk through the revised processes. Within the next quarter we will be inviting back the representative from NHS England to help us further develop local cETR processes, in line with the statutory SEND and locally developed decision making and review processes, already in place.

3.7.2 Social Communication Pathway / ASD Assessments for Under 5's

Within the last quarter we have been reviewing the local Social Communication Pathway / ASD Assessments for the Under 5's. The revised pathway, brings the pathway in line with Local Authority processes, and facilitates greater multi-agency input into the pathway though all referrals being reviewed by an 'Early Years Triage Meeting'. In additional, additional capacity and leadership into the pathway has been supported into the pathway by the CCG.

4. RECOMMENDATIONS

4.1 The report is noted.

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Background Papers used in the preparation of this report