

	Health and Wellbeing Board 3 October 2019
Title	Children and Young People's Mental Health Transformation Plan 2019/20
Report of	Director of Commissioning, Barnet CCG
Wards	All
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Urgent	No
Key	Yes
Enclosures	None
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Summary

This report presents Barnet's Children and Young People's Mental Health Local Transformation Plan 2019/20 outline for consideration. The Plan focuses on prevention across the whole system as well as ensuring access to good quality care, when needed.

Recommendations

1. That the Health and Wellbeing Board delegate authority to the Director of Public Health in consultation with the Chairman and Vice-Chairman of the Board to sign off this plan for 19/20 period ahead of the final submission to NHSE on 31/10/2019.
2. That the Health and Wellbeing Board agree to support the system wide Children and Young People's Mental Health Transformation.

1. WHY THIS REPORT IS NEEDED

- 1.1 We are proud of the progress we have made so far against our plan to improve children and young people's mental health services in Barnet. This includes

increased investment in early help, reduced waiting times and our progress in moving services out of clinical settings and into the community.

1.2 We know there is more to do and as a part of our routine yearly update, this iteration of our Local Transformation Plan for 2019/20 reflects our commitment to continue to improve provision for young people and their families.

1.3 Our 2018/19 achievements include:

- Strengthened co-production and engagement with families and young people, including parent representation of the children and young people (CYP) Mental Health Transformation Board, Local Authority consultations and a co-produced health conference for parents of young people with special educational needs and disability (SEND) focused on mental health. Barnet, Enfield and Haringey Mental Health Trust (BEH) also completed a co-produced re-design of services to improve access which will launch in 2019/20.
- Our Resilient Schools programme has been co-produced with parents, pupils, Barnet Public Health, Cambridge Education, Local Schools, Family Services and Barnet CCG. The programme aims to help schools, parents and pupils to recognize their own mental wellbeing needs and be confident to access information to support themselves and others, de-stigmatise mental health in schools and intervene early to prevent escalation of mental health problems. The Public Health led programme has expanded to 55 schools.
- Pioneered online counselling support for local Children and Young People provided by Kooth and rolled out online support for school professionals and Special Education Needs and Disabilities Information, Advice and Support Services (SENDIASS) through Qwell – An online counselling and emotional well-being platform accessible through mobile, tablet and desktop.
- Further development of the Local Authority's Barnet Integrated Clinical Service reflects investment in early help, enhancing our prevention offer. The Integrated Clinical Service structure organises and distributes clinical expertise across Early Help, Schools, Children's Social Care and Youth Offending Services so that clinicians are embedded with the wider children's workforce offering direct support to children, young people and families, as well as clinical consultation, supervision and training.
- Barnet children's 0-19yrs services launched locality based structures with three Children's Hubs in October 2018. The hubs are established and coordinated through Barnet Council Children and Families 0-19 service. They cover a range of provision and have strong partner engagement to support early intervention and child centered support.
- Children's Wellbeing Practitioners (CWPs) work with children and young people who have mild to moderate mental health needs i.e. low mood, low level anxiety or behavioral difficulties. The CWPs use a guided self-help approach with young people and parents based on Cognitive Behaviour

Therapy (CBT) approaches and is embedded in the 0-19 Early Help framework.

- A range of services have been commissioned by the Local Authority, to provide advice to families of disabled children and those with special needs; including Attention Deficit Hyperactivity Disorder (ADHD) and Autism.
- We continue to grow Voluntary Community and Social Enterprise (VCSE) activities and services through the Young Barnet Foundation led Space2Grow to support children and young people.
- The Local Authority's Youth Offending Team (YOT) has utilised the NHS England health and justice funding to support a Liaison and Diversion Officer and a part-time clinical practitioner, who undertakes mental health screening and contributes to assessment and intervention activities.
- We achieved 47.8%¹ against the 32% national access target through an increased early help and prevention offer and increased access to our specialist provision.
- Reviewed our specialist provision; bringing our specialist providers together to explore pathway redesign and to move away from geographically led provision.
- We mapped our prevention and early help offer to identify gaps and to support alignment of provision with the 0 -19 Hubs.
- The CCG established a Senior Care Coordinator post to support young people with Autism Spectrum Condition (ASC) and learning disabilities (LD) to reduce hospital admissions and crisis for this cohort. The Coordinator is based in BEH working between the CCG and BEH as an integrated post with strong partnership working with education, social care and providers.
- BEH launched an Adolescent Crisis Team (ACT) in November 2018 which has mainly supported young people presenting in mental health crisis at Barnet Hospital. The service has reduced length of admissions at Barnet Hospital and increased the number of young people discharged home.

1.4 The NHS Long Term Plan (2019) specifies plans to move to a new service model in which patients get more options, better support, and properly joined-up care at the right time in the optimal care setting. This includes actions the NHS will take to strengthen its contribution to prevention and health inequalities. Funding will be distributed on a regional level, this is North Central London (NCL) for Barnet, and plans are being developed to meet the Long Term Plan objectives. Below is a list of key areas that the Long Term Plan focuses on including:

- The expansion of mental health services for children and young people so 70,000 more children and young people will access treatment each year by 2020/21.

¹ As a percentage of identified need

- A new commitment that funding for children and young people's mental health services will grow faster than both overall NHS funding and total mental health spending.
- Expanding access to community-based mental health services to meet the needs of more children and young people.
- Children and young people's eating disorder services.
- Better mental health crisis support access for Children and young people.
- The embedding of mental health support in schools and colleges for children and young people.
- A new approach to young adult mental health services, for people aged 18-25 to support the transition to adulthood.

1.5 In 2019/20, there are a number of key areas of development where the local partnership have agreed to focus on improving provision for young people taking into consideration local needs, required service improvements and national priorities. Our 2019/20 plans align with the i-THRIVE approach which is a national programme of innovation and improvement in child and young people mental health that is endorsed with the NHS Long Term Plan. i-THRIVE is the implementation of the THRIVE Framework for system change (Wolpert et al., 2019), translating the principles of the THRIVE Framework into local models of care using an evidence based approach to implementation. i-THRIVE has been designed to enable a move towards delivery of a population health model for children and young people's mental health.

1.6 The THRIVE Framework for system change principles are the basis for all support options that are provided by those implementing the THRIVE Framework. These principles are themes that are embedded in every example of care in both the service and community as seen below:

- Common language
- Needs-led
- Shared decision making
- Proactive prevention and promotion
- Partnership working
- Outcome-informed
- Reducing stigma
- Accessibility

1.7 i-THRIVE is organised into the following areas:

- Getting advice: One off contact, sign posting in the community and promoting self-support.
- Getting help: Goal orientated, evidence based focused intervention.
- Getting more help: The improvement of therapeutic progress and the management of risk.
- Getting risk support: Goal based help and extensive support.

1.8 For each of the areas, our 2019/20 local transformation plan is organised around the THRIVE model and focuses on the following:

- Getting advice:
 - The roll out of the Resilient Schools programme as a universal offer to schools and develop a website to embed whole school awareness.
 - Development of whole school training to raise awareness of Mental Health signs and symptoms.
 - Continued promotion of the SEND Local Offer.
 - Continue to develop ADHD support and psychoeducation for families, in conjunction with specialist CYP MH services and other multidisciplinary teams.
 - Continued investment in the VCSE to strengthen our community offer.
- Getting help:
 - Continue to increase access to mental health support; increasing access by at least 2% (to 49.8%) in line with national targets, this will be achieved through our prevention and early help services as well as our specialist provision.
 - Review Prevention and Early Help services to ensure that the offer is meeting the needs of children, young people and families in the borough, is a coherent offer and addresses the gaps identified in the mapping exercise completed in 2018/19:
 - Lack of socialisation/social activities to help young people tackle isolation and loneliness, particularly around ASC and Attention Deficit Hyperactivity Disorder (ADHD).
 - A gap in services from 18-25
 - Further consideration of resourcing requirements to enable the increase in prevention in line with priorities.
 - Following evaluation, consider roll out of Qwell to parents / carers.
 - Continue to embed the Integrated Clinical Service within the council.
 - Development of new Mental Health Support teams (MHSTs) for Children and Young People's Mental Health with mild / moderate mental health needs; Barnet's Trailblazer programme will focus on the west locality² and will be delivered alongside the council's locality hub in the west. There will be two mental health support teams covering 33 education settings (including Barnet and Southgate College). The two MHSTs will be in place from January 2020, first working in Resilient Schools in the west then expanding to further schools.
- Getting more help:

² The funding was restricted to a school setting / population size which, for Barnet, led to a focus on a locality – the west locality has the highest number of referrals to specialist CYP mental health, most populous and deprived wards, highest early help/CAF referrals and the locality hub is based in the college which will support transition work for older young people. Learning from the west locality will be shared with schools outside of the west through our resilient schools programme and through school networks.

- Improved response to and pathways for young people in crisis – considering the expansion of ACT and compliance with the Children and Young People’s Mental Health crisis concordat.
- Review the North Central London (NCL) eating disorder service and develop a specification that takes into account current demand.
- Consider the local commissioning of Dialectical Behaviour Therapy (DBT) to reduce step-up to inpatient provision and to support step-down and community support for young people who have been admitted as an inpatient.
- NCL, working with North East London (NEL), will develop new models of care for the local commissioning of specialist inpatient Children and Young People’s mental health services (devolved from NHSE) through a NCL NEL provider collaborative.
- Getting risk support:
 - Embed new Senior Nurse post to promote the needs of children and young people with ASC / LD cohort to reduce hospital admissions.
 - Work with the CYP Board to develop a borough wide, co-produced Autism Strategy which will cover:
 - A redesign the diagnostic pathway
 - Support for children and young people with autism across health, social care and education including respite provision
 - Parent/carer involvement in shaping services
 - Strategic co-ordination of services
 - Review liaison and diversion posts currently funded by NHS England.
 - Tripartite; working across the partnership to improve local support to reduce the number of out of borough / residential placements particularly for children and young people with autism and learning disabilities.
 - Improving transitions in line with the 0 – 25 agenda.

1.9 There are also a couple of overarching areas of focus:

- Workforce – to ensure that our workforce is able to meet the need of our young people including:
 - Ensuring sufficient capacity to meet and exceed the access target.
 - Recruit to our two MHSTs.
 - Training to support young people with ASC.
 - Training to increase the identification and support for young people with eating disorders especially for school staff and GPs.
 - Review the use of RMNs (Registered Mental Health Nurse) at acute sites and consider alternatives.
- Pathways – in line with the “no wrong front door” principle of access to services including:
 - Developing appropriate triage across the whole system.
 - Working with our specialist Children and Young People’s Mental Health providers (BEH, Royal Free London RFL, Tavistock and Portman) to develop a borough-wide service with specialisms to move away from geographically led provision.

2. REASONS FOR RECOMMENDATIONS

- 2.1 Discussion at the Health and Wellbeing Board allows an opportunity to further develop our plans and embed them across the whole- system to further improve outcomes.
- 2.2 Each local area is required to submit an annual Children and Young People Mental Health Local Transformation Plan, which has been considered, by the local Health and Wellbeing Board.
- 2.3 The i-THRIVE approach, Future in Mind and Five Year Forward View outline the necessity of a partnership, whole-system approach to build capacity and capability across the system to be able to secure measurable achievements in children and Young people's mental health outcomes by 2020/21.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 N/A

4. POST DECISION IMPLEMENTATION

- 4.1 The Children and Young People's Mental Health Transformation Plan will be developed and presented to the Children and Young People's Mental Health Transformation Board on the 7 October 2019. Following this, the Chair and Vice-Chair of the HWB will be asked to approve the submission of the plan to NHS England. The submission deadline to NHS England is 31 October 2019. The plan will then be published on the CCG and partner websites.
- 4.2 The delivery of the plan will be managed by the Children and Young People's Mental Health Transformation Board, which is a partnership board chaired by the CCG's clinical lead for mental health.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 Improving mental health and wellbeing (life course approach) and improving children's outcomes are key priorities of the Corporate Plan 2019-2024.
- 5.1.2 The CYP MH Transformation Plan supports the delivery of Barnet's Children and Young People's Plan 2019-2023, developed and shaped by partners from different sectors across the borough, sets out the vision, outcomes, priorities and objectives and represents a joint commitment to making Barnet London's most 'Family Friendly' Borough, where communities thrive and build their resilience. In a 'Family Friendly' Barnet.
- 5.2 **Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**
- 5.2.1 The CAMHS transformation fund has increased annually from 2016/17 up to 2020/21. In 2016/17, Barnet CCG received £772k to transform Children and Young People's Mental Health locally. For 2018/19 the fund grew to £1.1m and

further to £1.4m for 19/20. In addition, the CCG invests circa £4.7m in community / outpatient Children and Young People's Mental Health services and the London Borough of Barnet invests an additional circa £1m in early help and prevention.

5.3 Social Value

5.3.1 The voluntary, community and social enterprise sector are a key strategic partner in the delivery of the Children and Young People's Mental Health Transformation Plan.

5.4 Legal and Constitutional References

5.4.1 Article 7 of the Council's Constitution sets out the responsibilities of the Health and Wellbeing Board which includes responsibilities:

- To jointly assess the health and social care needs of the population with NHS, commissioners, and apply the findings of a Barnet joint strategic needs assessment (JSNA) to all relevant strategies and policies.
- To work together to ensure the best fit between available resources to meet the health and social care needs of the population of Barnet (including children), by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing. Specific resources to be overseen include money for social care being allocated through the NHS; dedicated public health budgets; the Better Care Fund; and Section 75 partnership agreements between the NHS and the Council.
- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health.
- To explore partnership work across North Central London where appropriate.

5.4.2 In October 2015 Clinical Commissioning Group (CCG) areas were required to develop a Local Transformation Plan (LTP) in response to the recommendations set out in the Future In Mind Report - promoting, protecting and improving our children and young people's mental health and wellbeing, the report of the Government's Children and Young People's Mental Health Taskforce in 2015.

5.4.3 The Government has recently published Transforming Children and Young People's Mental Health Provision: Green Paper (December 2018) which builds on Future in Mind and highlights the need for further focus on effective and sustainable provision for children and young people (CYP) with mental health issues.

5.4.4 The local Children and Young People's Mental Health Transformation Plan is informed by local and national policy and context considered to be pertinent in the development of mental health and wellbeing provision for children and young people. In addition to Future in Mind, these include:

- Mental Health Act 1983 as amended and the Children Act 1989
- Children Act 2004
- Mental Health Act 2007
- Equality Act 2010
- No Health without Mental Health (DH, 2011)
- Closing the Gap (DH, 2014)
- Children and Families Act 2014
- The Care Act 2014
- Promoting the Health and Wellbeing of Looked After Children (2015)
- Working Together to Safeguard Children (2018)

5.4.5 Other relevant policy and contextual drivers include guidance from the National Institute for Health and Care Excellence (commonly referred to as NICE guidance), Access and Waiting Time standard for children and young people with an eating disorder, DfE guidance on Behaviour and Counselling, Transforming Care and the Crisis Care Concordat.

5.5 Risk Management

5.5.1 Risks are reported to and overseen by the Children and Young People's Mental Health Transformation Board.

5.6 Equalities and Diversity

5.6.1 The Equality Act 2010 outlines the provisions of the Public-Sector Equalities Duty which requires Public Bodies to have due regard to specific needs and to integrate considerations of equality into day business and keep them under review in decision making, the design of policies and the delivery of services.

5.6.2 The Children and Young People's Mental Health Transformation Plan is based on the assessment of local need. Equality and diversity are therefore a key element for providers in the delivery of services.

5.7 Corporate Parenting

5.7.1 Looked-after children are considered as a vulnerable group within our Children and Young People's Mental Health provision with the Integrated Clinical Team within the council providing specific support to this group alongside Children and Young People's specialist mental health services.

5.8 Consultation and Engagement

5.8.1 The Local Area is committed to engaging with young people and their families and carers. We take a holistic approach to enable us to fully understand young people's experiences such as considering the impact of council tax and housing on young people's mental health and wellbeing. Our engagement also takes into account the demographics of the borough including the introduction and

engagement in the Orthodox Jewish Children and Young People's Forum, which is attended by BEH MHT and the council's Family Services. There is a parent representative on the Children and Young People's Mental Health Transformation Board.

5.9 Insight

- 5.9.1 Local provision is commissioned in line with local need. The Children and Young People's Mental Health LTP uses JSNA data as well as up to date Public Health England data. Public Health have completed a specific MH needs assessment to ensure that our plans meet current and projected need.

6. BACKGROUND PAPERS

- 6.1** N/A