

**Emotional Health and Wellbeing and Mental Health Transformation
 Strategy for Children and Young People in Sheffield**

Item 221

Governing Body meeting

7 July 2016

Author(s)	Kate Laurance – Head of Commissioning Children, Young People and Maternity NHSS CCG
Sponsor	Nikki Bates – Governing Body Lead Children, Young People and Maternity
Is your report for Approval / Consideration / Noting	
Noting.	
Are there any Resource Implications (including Financial, Staffing etc)?	
Transformation Plan resources agreed within 16/17 planning	
Audit Requirement	
<u>CCG Objectives</u>	
<ol style="list-style-type: none"> 1. To improve patient experience and access to care. 2. To improve the quality and equality of healthcare in Sheffield. 3. To work with Sheffield City Council to continue to reduce health inequalities in Sheffield. 	
<u>Equality impact assessment</u>	
Equality Impact assessments are being considered on an individual basis per project	
<u>PPE Activity</u>	
<i>How does your paper support involving patients, carers and the public?</i>	
There is considerable engagement with young people, parents and carers, Chilli Pep are commissioned as part of the 5 year programme to lead and support with engagement work.	
Recommendations	
<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> • Note the work to date. • Support the planned developments in emotional health and wellbeing provision and the anticipated improvement in outcomes for children and young people in Sheffield. 	

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1. Introduction / Background

1.1. Purpose and Context

The purpose of this briefing paper is to inform the Governing Body Members on progress to date in relation to improving emotional health and wellbeing for the children and young people in Sheffield.

The briefing paper is not intended to provide detailed information in relation to the Emotional Wellbeing and Mental Health Transformation Strategy for Children and Young People in Sheffield 2015-2020 (to be referred to as the Plan) but rather give an overview and update on the work undertaken to date.

The briefing paper is seeking to gain support from the Governing Body to continue to progress this work in line with the Plan.

The briefing paper is presented for information.

1.2. Background

The Future in Mind Report (FiM) was published by Government in May 2015 and sets out a clear national ambition to transform the design and delivery of a local offer of services for children and young people with mental health needs. Future in Mind describes an integrated whole system approach to driving further improvements in children and young people's mental health outcomes with the NHS, Public Health, Local Authority Children's Services, Education and Youth Justice working together to:

- Place the emphasis on building resilience, promoting good mental health, prevention and early intervention;
- Deliver a step change in how care is provided – moving away from a system defined in terms of the services organisations provide towards one built around the needs of children, young people and their families;
- Improve access so that children and young people have easy access to the right support from the right service at the right time;
- Deliver a clear joined up approach: linking services so care pathways are easier to navigate for all children and young people, including those who are most vulnerable;
- Sustain a culture of continuous evidence-based service improvement delivered by a workforce with the right mix of skills, competencies and experience.

Every CCG was required to respond and develop a detailed and robust local plan, as the allocation of NHS England funding in relation to Future in Mind was contingent on the development of a Transformation Plan for Children and Young People's Mental Health and Wellbeing. As part of the assurance process the Plan was signed off by the Health and Wellbeing Board in September 2015, Clinical Executive Team in October and was assured by NHS England and published on the NHS Sheffield CCG and the Sheffield City Council websites in October 2015. The Plan is a "live" document and will be refreshed on an annual basis.

The Plan is a five-year strategic plan 2015-2020 which aims to deliver whole system change to children and young people's emotional and mental health support and service provision in the city. The Plan incorporates priorities from primary prevention through to specialist provision and focuses on improving both children and young people's experience and outcomes. Some developments require additional investment however others are expected to be delivered within existing resources. The priorities and direction of travel detailed in the Plan were decided in collaboration with children, young people and their families as well as commissioning partners and providers.

The Sheffield Vision

In Sheffield we want every child and young person to have access to early help in supporting their emotional wellbeing and mental health needs. As a city we want to develop children and young people's resilience and coping strategies. We will transform the quality and availability of our services from early help through to specialist provision. We want services to be delivered in the community, closer to home, targeted to the most vulnerable and for fewer children and young people to require specialist mental health services.

Locally we will:

1. Improve resilience, prevention and early intervention services
2. Improve access to services and support
3. Improve care for the most vulnerable
4. Improve transparency and accountability
5. Develop our workforce

2. Key Messages for Governing Body Members:

The case for change:

In Sheffield, it is estimated that approximately 7000 children between the ages of 5-15 years have a clinically recognisable mental health disorder. Prevalence data for early years is less clear but it is estimated that approximately 10% of 0-3 year olds could have a mental health problem; this includes emotional disorders, anxiety disorders, conduct disorders and autism.

- The economic case for investment is strong as 75% of mental health problems in adult life (excluding dementia) start by the age of 18. Early intervention avoids young people falling into crisis and avoids expensive and longer term interventions in childhood and adulthood.
- One in ten children and young people needs support or treatment for mental health problems.

- Variable access to crisis, out of hours and liaison psychiatry (and a lack of designated places of safety for under 18s).
- Specific issues facing highly vulnerable groups of children, young people and their families such as children in care, or experiencing trauma.
- Increase in long term health problems.
- Mental health problems can result in lower educational attainment and are strongly associated with risky behaviours.

The local challenges identified include:

- Significant gaps in data and information;
- A treatment gap: not all of those with a diagnosable mental health condition accessed support in a timely manner and there is evidence of a rising need for example, eating disorders and young people with self-harm;
- Difficulties in access (increases in referrals and waiting times and increased complexity and severity reported by service providers);
- Complexity of commissioning arrangements.

The Plan for Sheffield sets out a clear ambition to transform the design and delivery of a local offer of services for children and young people with mental health needs. This includes prioritising investment in a range of areas, the need for strong leadership and ownership at a local level through robust action planning and the development of a robust action plan.

The Plan describes an integrated whole system approach to driving further improvements in children and young people's mental health outcomes with the NHS, Public Health, Local Authority Children's Services, Education and Youth Justice working together to:

- Place the emphasis on building resilience, promoting good mental health, prevention and early intervention;
- Deliver a step change in how care is provided – moving away from a system defined in terms of the services organisations provide towards one built around the needs of children, young people and their families;
- Improve access so that children and young people have easy access to the right support from the right service at the right time;
- Deliver a clear joined up approach: linking services so care pathways are easier to navigate for all children and young people, including those who are most vulnerable;
- Sustain a culture of continuous evidence-based service improvement delivered by a workforce with the right mix of skills, competencies and experience;
- Improve transparency and accountability across the whole system - being clear about how resources are being used in each area and providing evidence to support collaborative decision making.

The scale of the 2020 ambition is for service wide transformation to deliver improvements in children and young people's mental health outcomes. Delivering this means making some significant changes. The expectation clearly is that much of what needs to be done can be done now – requiring a different way of doing business rather than significant further investment. This means the NHS, public health, local authorities, social care, education and the youth justice sector in

Sheffield working together, investing in prevention, moving investment upstream and increasing access to high quality care.

NHS England are monitoring progress and have required quarterly assurance issuing detailed tracking templates to monitor and review progress and to capture high level summary information from local Plans. The continued monitoring will support the allocation of further funding and scrutiny.

Sheffield's single plan defines joint priorities, and the plans related to specific areas of work that respond to local needs and current and future service configuration including getting the basis right:

Transparency: There is a requirement to ensure an annual declaration of the current investment and the needs of the local population with regards to the full range of provision for children and young people's mental health and wellbeing. There is a requirement for commissioned providers to declare what services they already provide, including staff numbers, skills and roles, waiting times and access to information.

Service Transformation: There is a requirement for all partners, commissioners and providers, to sign up to a series of agreed principles covering: the range and choice of treatments and interventions available; collaborative practice with children, young people and families involving schools; the use of evidence-based interventions; and regular feedback of outcome monitoring to children, young people and families and in supervision.

Monitoring Improvement: This, includes the development of a shared action plan and a long term commitment to review, monitor and track improvements towards the government's aspirations set out in Future in Mind, including children and young people having timely access to effective support when they need it.

3. Work to Date

An Emotional Wellbeing and Mental Health Executive Group jointly chaired by Sheffield CCG and Sheffield City Council is accountable for the delivery of the Plan. Working Groups have been implemented in relation to the five work streams which lead on action planning and project management, reporting monthly to the Emotional Wellbeing and Mental Health Executive Group. A range of stakeholders and partners are involved in the implementation and mobilisation of the Plan.

3.1 Priorities for Change

Sheffield's priorities for change were developed by partners following completion of a self-assessment, as well as the analysis of the current data on mental health services for children and young people in the city. The plans will be further developed and will be monitored as part of the programme dashboard within the Children's Health and Wellbeing Board. The five priorities identified below provide a starting point for implementing change and will be updated as progress is made and outcomes are achieved.

Priority One: Improve resilience, prevention and early intervention services

- Effective identification and treatment for women experiencing mental health problems in pregnancy or after birth.
- Develop evidence based primary mental health interventions through a school and community based hub model.
- Work with community health services to identify children with risk factors such as special educational needs.

Priority Two: Improve access to services and support

- Investigate new models of integrated service delivery based on good practice and locally delivered services.
- Implement comprehensive access and waiting time standards for CAMHS.
- Develop appropriate mental health crisis support and intervention in line with Sheffield Crisis Care Concordat including the pathway for section 136.

Priority Three: Improve care for the most vulnerable

- Improve the experience and outcomes for the most vulnerable children and young people by proactively supporting those at risk, removing the barriers to accessing services and developing bespoke care pathways.
- Ensure those who have been sexually exploited or abused will receive a comprehensive assessment and referral to appropriate evidence-based services including specialist mental health service where required.

Priority Four: Improve transparency and accountability

- Develop single and transparent pooled or aligned budgets across health and social care for mental health services for children and young people.
- Ensure service users, families and carers have an equal voice within our governing structure and regular and meaningful engagement opportunities throughout the redesign process.

Priority Five: Developing the workforce

- All universal and specialist and paediatric services and commissioners are supported to develop their knowledge in emotional wellbeing and mental health needs of children young people and effective ways to engage and support young people.

4. What have we done so far and progressed up to May 2016

As much of the work cuts across the priority areas the information below is not specifically aligned to the priority areas, but reflects the work undertaken to date. There has been an ongoing focus throughout the period on detailing the governance processes, engaging stakeholders and implementing the transformations as detailed in the plan.

Stakeholder Event – A citywide Emotional Wellbeing and Mental Health Stakeholder event was held on 15th February 2016. We are incorporating the feedback from this event into our 2016/17 planning process.

Working with Young People – children and young people are involved directly in the delivery and design of the transformation plan. The Young Commissioners Programme is ensuring that young people are directly involved in the development and commissioning of mental health services for children and young people. Young people are helping to shape the local directory of services. Each of our sub-groups has young people involvement included in the terms of reference to ensure that young people's voices are at the front and centre of our transformation.

- 4.1 Improve access and waiting times in CAMHS** – additional activity has been commissioned from local CAMHS in 2015/16 to ensure the 18 week target is achieved for all accepted referrals into tier three specialist CAMHS services.
- 4.2 Home Intensive Treatment Service** – A service model has been developed and agreed. A draft service specification has been completed. There will be a delay in the mobilisation of the service as a more integrated model is now being considered. Work is progressing to redesign elements of the current CAMHS provision including an element of Tier 4. Clarity of the service model and current activity is required in order to estimate the potential resource transfer and timeframe for mobilisation/implementation. There is good collaboration between key stakeholders these include NHSE, the Council, local CAMHS services, Tier 4 Commissioners. Young people and their families have been and continue to be actively involved.
- 4.3 Improve Crisis Response** – The development of a crisis prevention and intervention service is integral to the crisis response, pathway development is progressing on a multiagency basis which will then assist in the implementation of a sustainable model. An interim arrangement for a section 136 health place of safety for 16 and 17 year olds is in place until September 30 2016. Sheffield CCG is developing a Sheffield only model and in parallel exploring with South Yorkshire CCGs, and their respective Councils, NHS England commissioners a number of opportunities to develop and implement a regional model in the longer term. Three South Yorkshire workshops were planned between March-April 2016 the first two have now taken place. A draft model, detailed specification and a care pathway have been developed, these will be further refined at the next workshops. Sheffield CCC has bid for some capital monies which will be allocated to improve access to health based place of safety. Developing a s 136 place of safety for young people is a priority in Sheffield. There are ongoing discussions in relation to extending the s 136 facility across South Yorkshire. A bid for an innovative development of Crisis Cafe was also submitted. A self-harm rota has been tested at Sheffield Children's NHS FT and there are now further plans to explore mental health liaison functions with the physical health provider.
- 4.4 Extend the eating disorder service in CAMHS** - Agreement between Sheffield CCG and Sheffield Children Hospital CAMHS service has been reached on the allocation of additional resources to increase capacity within the Sheffield eating disorder specialist clinic. All children and young people with a severe eating disorder will be seen by the eating disorder clinic in and capacity within the team has increased.

- 4.5 Extend eating disorder service in Sheffield Health and Social Care FT -** Agreement on the allocation of additional resources to increase support available to 16 and 17 year olds has been reached with the provider. This has ensured waiting times in line with the new standard will be achieved for this age group.
- 4.6 Increase PMH workers working within MAST -** There will be an increase in the capacity of primary mental health workers (PMHW) based within MAST teams targeting families and geographical areas with identified higher needs. Multi Agency Support Teams (MAST) Recruitment has been completed and this additional resource is targeting at families and geographical areas with identified high needs.
- 4.7 CAMHS School Link Pilot -** Significant progress has been made in the development and delivery of our school link pilot. Achievements include:
- The implementation and evaluation of the CAMHS in reach into schools with the development of Bronze, Silver and Gold Healthy Minds standard.
 - The appointment of dedicated CAMHS link staff for each pilot school.
 - The delivery of training facilitated by CAMHS in each of the participating schools.
 - The delivery of the second local workshop on the 14th March 2016. This event involved a range of partners including schools, School Nursing Services, CAMHS, Public Health, VCF sector and Educational Psychologists.
 - Our CAMHS School Link Steering Group is established and active. Membership includes Sheffield City Council Public Health and Multi Agency Support Teams (MAST), schools and CAMHS.
 - The development of a local Outcomes Framework to complement the national evaluation of the pilot.
- 4.8 Roll out of IAPT in CAMHS -** This work continues to be progressing well. Funding to release staff to attend training is being provided so as to increase capacity and increase the number of staff trained. Sheffield Children Hospital the CAMHS provider is developing a detailed plan outlining the increased trajectory for 2016/17.
- 4.9 SYEDA Comic Relief Project (Young People with Mental Health Problems) -** The VCF sector provider has been commissioned and funding allocation agreed. KPIs have been agreed with the provider and a Memorandum of Understanding has been finalised. Delivery of this work has commenced.
- 4.10 SYEDA Body Project –** Preparatory work is underway in King May in King Edwards and in High Storrs. A clear plan of delivery is now in place for the project and mobilisation has begun.

- 4.11 Emotional Health and Wellbeing Service** - The local Emotional Wellbeing and Mental Health pilot is being delivered in over 40 schools in the city. Interchange (VCF) provider is delivering this work with direct support from CAMHS. A local evaluation has been commissioned from Sheffield University to assess the impact and outcomes of the models of delivery. The interim evaluation reported back in February with some preliminary findings. These findings are being used to inform the development of a new EWBMH service for schools. The final evaluation report is due in June 2016. See appendix A.
- 4.12 Young Commissioners Programme** – Resources have been agreed and delivery commenced in respect of the Young Commissioners Programme.
- 4.13 Communication and Transparency** – Work is underway to develop a Sheffield directory of services which will clearly outline the services available in the city and how to access them. This will be to inform young people and those that work with children and young people. A first draft is expected to be finalised by end of May 2016. The final directory will be presented to the Executive Group in June.
- 4.14 Infrastructure Support** – additional and specialist project management and commissioning support has been made available within Sheffield City Council and Sheffield CCG to progress delivery of the Transformation Plan.
- 4.15 App Development** – There has been delay in designing the App it was hoped that some additional funding would be made available through a bid to Health Education England. The bid was unsuccessful. The target of 3000 downloads has not been achieved. The funding has been reallocated to Chillypep to develop an App.
- 4.16 Implement Youth Information Advice & Counselling (YIAC) Model** - The recruitment of the development officer has taken place. This post will be responsible for setting up a steering group with stake holders and consultation with young people, parents and partner organisations to develop the model.
- 4.17 Crisis Care and Liaison Psychiatry** – The Improving Access sub-group is working on a business case and service specification for liaison psychiatry. This is part of our all-age work that is underway. **Key Performance indicators**-Further work is being completed on a number of KPIs to develop a ‘balanced score card’ approach of targets and outcomes which will effectively demonstrate progress towards delivering our transformation priorities, improved outcomes and the funded projects on our tracker. The KPIs will be considered at the Emotional Wellbeing and Mental Health Executive.

5. Next Steps

The priorities outlined in the document are the key steps to transforming current services. Producing a joint vision has united a range of diverse stakeholders, brought together resources, capacities and expertise to develop collaborative solutions. Collaboration is at the core of the success of

the Plan. The ambition for the Plan is that by the end of 2020 the children and young people of Sheffield will see a transformed service that better suits their needs, and they will be able to access services at the right time, right place with the right offer in a welcoming environment. The changes will be sustainable beyond 2020, to ensure that future children and young people continue to receive the best quality care that makes a significant difference.

Now the transformation plan is the mobilisation phase we are reviewing the governance arrangements and aim to strengthen and streamline some of the delivery work streams and possibly reduce the number and frequency of meetings and increase the resources to support the implementation of the Plan. A key aim is on delivery and this requires increased collaboration and complex areas of integration, to ensure alignment.

The transformation funding 2015/16 has been fully utilised. Transformation funding for 2016/17 has been aligned (see Appendix A).

6. Recommendations

The Governing Body is asked to:

- Note the work to date.
- Support the planned developments in emotional health and wellbeing provision and the anticipated improvement in outcomes for children and young people in Sheffield.

Paper prepared by Kate Laurance, Head of Commissioning for Children Young and Maternity

On behalf of Nikki Bates GP Governing Body Lead Children, Young People and Maternity Services NHSS CCG

June 2016

Appendix A

Summary of Spend

CAMHS Transformation additional spend	2015/16 Spend £'000	2016/17 Planned Spend £'000
Early Intervention and Prevention (inc. for Eating Disorders)	651	303
Eating Disorders	83	302
Crisis Care	100	233
CAMHS Access and Waiting Times	350	319
Infrastructure	139	120
Total	1,323	1,277