

# Agenda Item 78.

<b>TITLE</b>	<b>Future in mind update</b>
<b>FOR CONSIDERATION BY</b>	Wokingham Borough Wellbeing Board on Thursday, 11 April 2019
<b>WARD</b>	None Specific
<b>DIRECTOR/ KEY OFFICER</b>	Carol Cammiss, Director of Children’s Services

Health and Wellbeing Strategy priority/priorities most progressed through the report	Priority 1: Creating Physically Active Communities Priority 2: Reducing Social Isolation Priority 3: Narrowing the Health Inequalities Gap
Key outcomes achieved against the Strategy priority/priorities	<ul style="list-style-type: none"> <li>• Promotion and Prevention</li> <li>• Getting Help</li> <li>• Early Intervention</li> <li>• Improved Identification</li> <li>• Collaborative Working</li> </ul>

Reason for consideration by Wokingham Borough Wellbeing Board	To note the updated Local Transformation Plan.
What (if any) public engagement has been carried out?	The report provides an update on the Local Transformation Plan
State the financial implications of the decision	n/a

<p><b>RECOMMENDATION</b></p> <p>To note the content of the report and the updated Local Transformation Plan.</p>
<p><b>SUMMARY OF REPORT</b></p> <p><u>Overview</u></p> <p>The full document describes how as a local system we are improving the emotional wellbeing and mental health of all Children and Young People across Reading, West Berkshire and Wokingham in line with the national ambition and principles set out in the government document “Future in Mind– <i>promoting, protecting and improving our children and young people’s mental health and wellbeing</i>” (2015).</p> <p>We are an ambitious partnership with collaboration at its centre. Over recent years there has been a marked culture shift to a mature thriving system which has a collaborative solution focussed approach to improving services for children, young people and families. We are bidding to become a Trailblazer site for the Green Paper Reforms with the confidence of already being cited by the Children’s Commissioner for England as an area of good practise. Our intention is to build on well-established joint working arrangements with Local Authorities to achieve further sustainable whole system change. We are bidding for 2 Trailblazer lots- creating new local Mental Health Support</p>

Teams (MHSTs) and reducing our waiting times for Specialist CAMHs and the Anxiety and Depression pathway.

Our Local Transformation Plan is reviewed, refreshed and published annually. Our plan has been refreshed in line with the requirements of Five Year Forward View for Mental Health and the Green Paper.

This document provides a brief summary of the full plan.

The full document builds on the 2017 plan and provides an update through a THRIVE lens of

- What we have achieved so far
- Our commitment to undertake the further work that is required
- Local need and trends
- Resources required

The full document is available on the CCG website

<https://www.berkshirewestccg.nhs.uk/media/2516/berkshire-west-future-in-mind-ltp-refresh-oct2018.pdf>

### **Our Ambition**

We will ensure that every child and young person experiences positive mental health and wellbeing, using the right help, when and where needed.

By 2020 support will be individually tailored to the needs of the child, family and community – delivering significant improvements in children and young people's mental health and wellbeing. We have already made good progress in this. We want to go further.

Our Local Transformation Plan is about integrating and building resources within the local community, so that emotional health and wellbeing support is offered at the earliest opportunity. Our goal is to reduce the number of children, young people and mothers whose needs escalate to require specialist intervention, a crisis response or in-patient admission.

Successful delivery of the plans will mean that:

### **Promotion and prevention**

- Good emotional health and wellbeing is promoted from the earliest age and poor emotional health is prevented when possible
- Children, young people and their families are emotionally resilient
- Everyone who works with children and young people is able to identify issues early, enable families to find solutions, provide advice and access help
- Staff feel supported in their own emotional health, wellbeing and resilience through nurturing working environments
- We will work with the wider system to reduce isolation, increase physical activity and reduce health inequalities

## **Getting help**

- More children and young people with a diagnosable mental health condition are able to access evidence based services
- Agencies work more closely together so that vulnerable children can access the help that they need easily. Vulnerable children and young people often require a more collaborative multiagency approach in order to successfully engage with services. Vulnerable groups include children in care and those subject to a child protection plan; children who have experienced abuse and multiple trauma, victims of crime, young people who are in contact with the criminal justice system, those with Special Educational Needs and Disabilities, young people who are at risk of exclusion from school and traveller communities. Children and young people who have experienced multiple Adverse Childhood Events (ACEs) are at particular risk of poor outcomes.
- Fewer children and young people's needs escalate into crisis, but for those that do, good quality care will be available quickly and will be delivered in a safe place. After the crisis the child or young person will be supported to recover in the least restrictive environment possible.
- Fewer children and young people require inpatient admission but for those that do, this is provided as close to home as possible.
- Pregnant women and new mothers with emerging perinatal mental health problems can access help quickly and effectively, as can their partners. This will also reduce the impact on the child.

## **Collaborative working**

- Help is provided in a coordinated, easy to access way. All services in the local area work together so that children and young people get the best possible help at the right time and in the right place. Help provided takes account of the family's circumstances and the child or young person's views.
- The child's journey is seamless. While there may be transfer of provision between providers, the child and their family experience joined up support with the child's needs at the heart of care.
- There is a smooth and safe transition into and out of inpatient services. Local services remain involved and support transition back into local community services so that there is timely discharge from inpatient care.
- We learn together on a multiagency basis and when needed, change the way in which we work
- The number of young people who need services into adulthood is reduced, but for those who do, young people and families report a positive experience of transition.

## **Background**

### **Transformation in Berkshire West- impact and extent of transformation to date**

The extent of our transformation so far has been recognised by CQC, OFSTED, NHS England Regional Team and the Children's Commissioner for England. We are an ambitious partnership committed to continuous improvement.

### **Ethos**

We have shifted from a traditional escalator style tiered system to a systems approach informed by the THRIVE framework.

We are promoting a whole system framework of care, moving away from a specialist single agency mental health response to families, communities, schools, public health, social care and the voluntary sector sharing the same vision and working together on prevention, early help and building resilience. The same partnership approach applies to complex mental health difficulties and mental health crises among children and young people. These are all key features of Future in Mind (2015). This inter-professional collaboration and coproduction will support a cultural change in the language used, the way in which systems and agencies work together, and the way in which children, young people and their families access support, care and treatment. We are interested in expanding the use of Restorative Practice across partners.

We have found multiagency emotional health triage at an earlier stage to be a particularly effective way of harnessing a swift community response before needs escalate. This approach alongside regular consultation and surgeries for schools are at the heart of the Green Paper bid.

### **Building skills in the community**

We have invested in workforce training across schools, primary care, the voluntary sector and social care. We have grown an evidence informed workforce across the whole system so that issues are identified and responded to earlier.

The Reading Emotional Well-Being Partnership, West Berkshire Emotional Health Academy and Wokingham School Link Project have built skills and support in schools and the community. There is a growing understanding that a GP referral to Specialist CAMHs is not always the best solution as there is a stronger community response available. There is more work to be done on ensuring that pathways meet the needs of all children and young people.

Voluntary sector organisations provide important parts of our care pathways and these organisations are more connected with other partners through meetings and training. Organisations are learning from each other and reporting against the same outcomes framework and audit tools.

We have increased the number of Care Education and Treatment Reviews to avoid hospital admissions and reduce hospital stays for young people with learning difficulties and or autism, unless there is no alternative. In conjunction with NHS England we have supported a number of people with a learning disability and/or autism to step down from secure beds into community settings. We are working with Local Authority partners to

increase tailored housing provision for adults with Learning Difficulties and/or autism with behaviour that challenges and implemented an intensive support service for adults. Joint learning across the system has led to workers speaking the same language more frequently. This in turn has built relationships and furthered collaborative working.

### **Focus on outcomes and the voice of children and young people**

We developed an outcomes framework across all providers 2 years ago. Our focus on outcomes is driving service improvement. We learn from children and young people who use our services, their families and partners as to what is working well, how things might need to change, the impact of interventions, whether support needs are being met.

We are better at using data to inform service planning and provision more consistently. This is underpinned by consistent data and outcomes reporting across different parts of the system and different providers. We know that we need to find a technical solution to flowing all of our activity onto the national dataset and are working to resolve this.

### **Partnership**

Our culture of joint ownership and accountability is driving transformation. In August 2018, partners described how the culture has shifted to a thriving, mature system over recent years. Partners report that the partnership feels collaborative, supportive of each other and respectful. Barriers have been broken down between organisations and services, there is greater understanding of how each other contribute to meeting the needs of children and young people, language barriers between organisations have significantly reduced and there is greater trust between partners. New partnerships have been forged and this is further driving transformation. An example is the relationship with the University of Reading which is proving to be beneficial to all parties as well as increasing the body of research in this field. Joint clinical governance has helped to drive joint working at a cultural, organisational and practical level. We acknowledge that there is further to go, especially given the context of rising demand and financial constraints across the system.

### **Cross cutting agenda**

Delivering Future In Mind is embedded into related work streams and strategies that are driving and supporting transformation in Local Authorities and Health's Integrated Care System. Strategies include SEND, Early Help and Transforming Care.

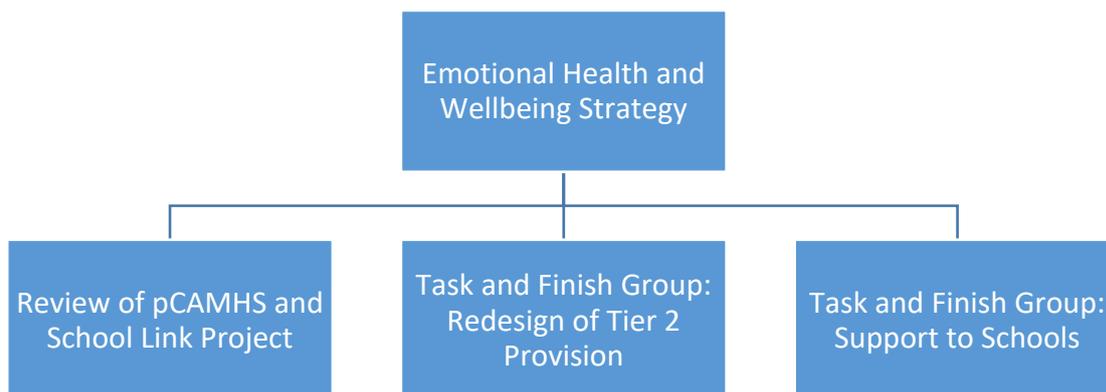
### **What next? Developments in Wokingham for 2019 and beyond**

Wokingham Borough Council has established a number of task and finish groups to drive forward priorities set out in the Council's Emotional Health and Wellbeing Strategy.

Specifically the work of the Task and Finish Groups, will aim to

- Improve our understanding of the needs and impact of children's emotional and mental health in order to help the commissioning process and service improvement
- Create an environment in schools that promotes good emotional and mental health leading to a system that supports children at the earliest opportunity, in the most appropriate setting

- Improve and better coordinate the offer of services within the community in order to help identify and support emotional and mental health in the right place and at the earliest opportunity
- Improve joint working between schools, the voluntary sector, the Local Authority and CAMHS allowing a comprehensive step-up and step-down offer
- Better integrate SEND and Mental Health support to in order to coordinate resources
- Improve pathways for children and young people's emotional and mental health in order to provide the best outcomes possible



### **pCAMHS & School Link Project**

Berkshire Healthcare Foundation Trust is commissioned to provide Tier 2 Primary Child and Mental Health Services (PCAMHS) in Wokingham. A small team of Primary Mental Health Practitioners offers direct treatment of mild to moderate mental health issues to children, young people (CYP) and their families, consultation to families and other practitioners, outreach to identify severe/complex needs, and assessments and training to practitioners at Tier 1 and Tier 2 to support service delivery. The team works closely with the Specialist (Tier 3) CAMHS teams to ensure safe and timely step up and step down from Tier 3 specialist CAMH services.

The Service is made up of 2.4 WTE clinicians, all of whom are registered CAMHS professionals and collectively have a significant experience of working with children and families. Clinical skills include a broad scope of experience and training; this includes individual treatments such as Cognitive Behavioural Therapy (CBT) for Anxiety and Depression, individualised Psychological interventions, and Family and Systemic interventions.

PCAMHS provides intervention for anxiety management to parents with young people under the age of 11 years within a group setting. This is an intensive 10 week programme providing parents with Cognitive Behavioural Strategies.

In addition to direct work with families, the team offers consultation and training to other frontline services and individual staff who provide care to CYP and their families. Consultation offers the opportunity for professionals to discuss their concerns about the mental health of CYP and to be supported in understanding their difficulties and utilising strategies and skills to support them. These CYP will often not have an open referral to the CAMHS service. Our direct work is also frequently integrated with other frontline Tier 2 services as part of holistic care.

The team offer specific days of consultation to the Looked after children and Early Integrated Help Hub teams. They engage with local opportunities to discuss the more

vulnerable CYP on a case by case basis by attending the Multi Professional meetings, in order to offer a CAMHS perspective on more complex CYP and families.

With the aim of increasing capacity of pCAMHS and as a training opportunity to increase skill base, pCAMHS invite an observer to each group. This has been well received and Student support staff from a school has been invited with the intention that they can take back learning into their school setting.

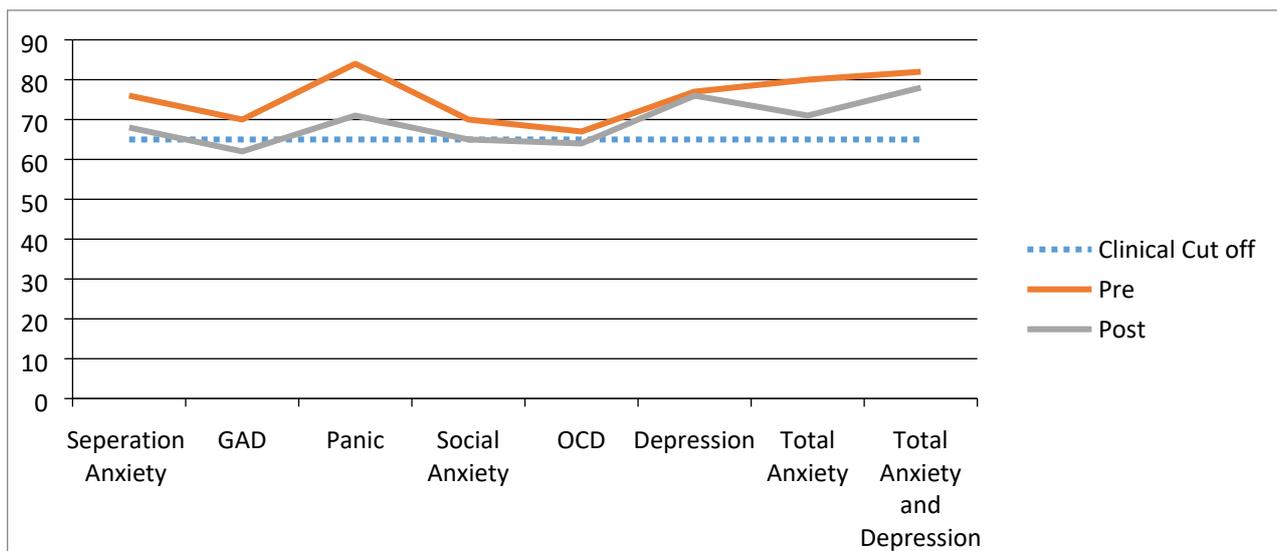
Furthermore Consultation surgeries (approx. every 6 weeks) have been offered to Young Carers' staff to help support them in their own 'early intervention' regarding emotional wellbeing with young people.

Referrals to the service from April 2018 – December 2018 totalled 124, a reduction of 11% compared to the same period Apr 17 –Dec 17. For the same period in 16/17 we saw a significant increase in referrals, 88 (16/17) to 140 (17/18) representing an increase of 59%.

The majority of referrals to the service are for anxiety (inc. OCD) related conditions, followed by issues related to ASD/ADHD and then low mood.

Reason for referral	Apr 18 – Dec 18	Apr 17 – Dec 17
Anxiety (inc OCD)	48	50
Issues related to ASD/ADHD	29	28
Low Mood	27	25

In order to measure the impact of an intervention/s that children or young people receive they complete a questionnaire pre and post treatment. The questionnaire used is the Revised Children's Anxiety and Depression Scale (RCADS). Below is the RCADS scores for children and young people from October 2018 – December 2018 which shows an improvement in their RCADs score.



As part of the wider tier 2 offer we commission BHFT to run the School Link Project. This project is funded through Future in Mind and supports schools to identify and

respond to emotional and mental health needs in a consistent manner. The main objectives of the project are to;

- Provide evidence based training to school staff in a mental health
- Identify, train and support a key person within a school setting to lead on emotional and mental health
- Develop a model of school based stepped care
- Provide regular consultation sessions to schools
- Hold regular joint consultation sessions

For 2019 our aim is to merge the school link project with the pCAMHS service in order that it becomes part of the core service offer of pCAMHS. In addition to this, we will also be providing additional funding to the Educational Psychology Service to offer additional support to this service.

In 2019 we will also be undertaking a full service review of the pCAMHS service.

### **Educational Psychology Service**

We have established a Capacity Group that is looking at how the local authority can provide a range of training to support children with SEND, included in this will be online supported training on ASD, Attachment and Behaviour to name a few. The plan is that staff based in the setting can access this training at their own level and LA staff (Educational Psychology Service, Early Years' Service, Learning Shared Support)

Addington staff, Foundry staff and ASSIST will act as tutors to support the participants. Participants are expected to complete a case study on a child they are working with as part of the training so the training will have a direct impact on children. Nurture Assistant training and supervision will continue. The next course will run from October to December with termly group supervisions.

The Holt have commissioned another exam stress group from the EPS this term. This is a group intervention using CBT techniques to manage anxiety sitting public exams.

Our specialist Educational Psychologist for children in care is offering two workshops this academic year again for foster carers emphasis on behaviour and emotional well-being.

ASSIST offer wide range of training and support for children and families with ASD. Their Healthy Minds training specifically focuses on understanding anxiety in children and young people with ASD.

Foundry College offer a range of training and interventions, including Theraplay. Theraplay is a child and family therapy for building and enhancing attachment, self-esteem, trust in others, and joyful engagement. It is based on the natural patterns of playful, healthy interaction between parent and child and is personal, physical, and fun. Theraplay interactions focus on four essential qualities found in parent-child relationships: Structure, Engagement, Nurture, and Challenge. Theraplay sessions create an active, emotional connection between the child and parent or caregiver, resulting in a changed view of the self as worthy and lovable and of relationships as positive and rewarding.

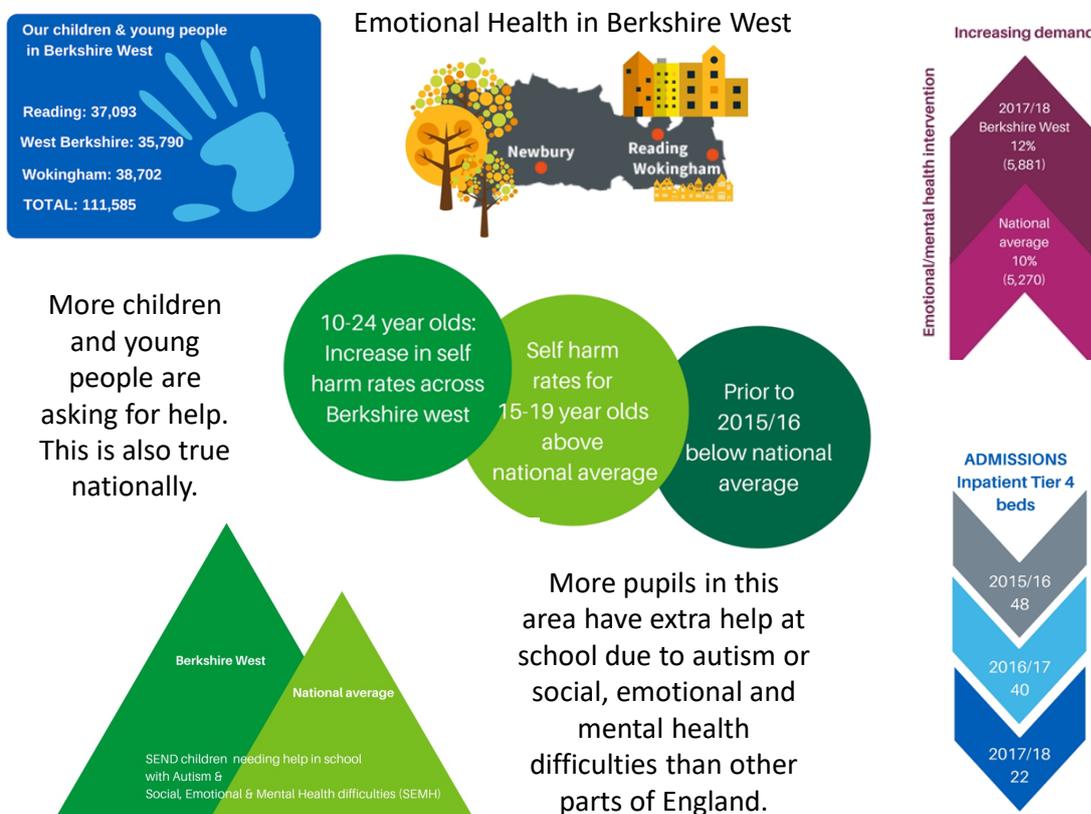
## Children and Young People Partnership

Over the last few months we have been working with our partners to determine the new priorities for the Children and Young People Partnership. Four priorities were identified:

- Early intervention and prevention
- Emotional Wellbeing
- SEND
- Transitions

Over the next few weeks we will be developing these priority areas further and as part of this work we are developing a vision and mission statement which will set the direction and guide the work of the CYPP.

### How does the emotional health and wellbeing of children and young people in Reading, Wokingham and West Berkshire compare with the rest of the country?



### Headline messages for financial year 2017/18

It has been a very busy this year in delivering our transformation plan and we are proud of what we have been able to achieve alongside young people, parents and our strategic partners from the local authority, health, education and the voluntary sector. What follows is a synopsis of the headline messages for this year. More detailed descriptions of the actions we are taking to further improve services are described in the main document.

- Transforming emotional health and wellbeing services through whole system partnership working continues to be strength in Berkshire West. Anne Longfield, Children’s Commissioner for England, cited the work she had seen in our area as good practice in her evidence to the Commons Select Committee in November 2017.
- We have continued to develop outcomes reporting and can evidence that most children and young people have positive outcomes across providers.
- We can evidence that most children and young people feel listened to across providers.
- We can evidence the impact of large scale training across partners. This will continue.
- We have been successful in our application to become a Green Paper trailblazer site to create new local Mental Health Support Teams. This will put even more early help into schools.
- A number of service users and young ambassadors have received recognition for the work they have done in promoting good mental health.
- Demand for emotional health and wellbeing services across the system has increased at all levels of need.
- Increased demand is having an impact on waiting times. We have been successful in a bid for additional resources to reduce waiting times. However this is short term funding only.
- Increased demand may demonstrate that stigma associated with emotional health and wellbeing has reduced and that partners are more able to identify issues as a result of the training provided.
- Providers are seeing more children and young people for evidence informed help than ever before. We cannot currently flow all of these numbers onto the national dataset and are seeking a technical solution to this.
- The number of children and young people with autism or seeking autism assessment in Berkshire West is higher than in other areas. While autism is not a mental health condition, it is estimated that 71% of people with autism also have mental health difficulties. We are reviewing our neurodevelopment service and whole system response to meeting the needs of children and young people with autism and ADHD.
- We have seen an increase in self-harm rates in all three Local Authorities for people aged 10 – 24. Self-harm rates for 15 to 19 year olds across all three areas are higher than the national average with the biggest jump being in Reading. Prior to 2015/16 all three LA’s were below or in line with the national average.
- Children and young people with mild to moderate needs are having their needs met at an earlier stage as we have focussed on improvements at the early help stage.
- Children and young people who are under Specialist CAMHs tend to experience more severe symptoms and have more complex presentations than in comparator areas. We wonder whether this is related to earlier help being more embedded in Berkshire West as we have rolled out Future In Mind.
- There is better working with specialist agencies to meet the needs of vulnerable children such as those who have been abused or are victims of crime. We know that these children do not always fit traditional care pathways and that there is more work that we could do. This is a priority for the coming year. We are also bidding to become a pilot site for a research project on improving mental health assessment for Looked After Children.
- We are ensuring that the legacy of the Transforming Care Programme for People with Learning Difficulties is built into our Future In Mind work. The programme

includes seeking opportunities to expand the adult intensive support function to children and young people; continuing to work with partners to build a wider, more tailored range of local placements and support for people with Learning Difficulties and/ or autism; working with health and social care colleagues on a pledge to improve the use of medicines for people with a learning disability, autism or both.

- Since the CAMHS Rapid Response/ crisis service was implemented, fewer children and young people have been admitted to inpatient beds. Those who are admitted have a shorter length of stay. We are seeking additional resources to extend the Rapid Response service.
- We are considering how to develop a local DBT service for young people with emerging personality disorders, self-harm, suicide attempts and intractable depression
- We are proactive in whole system learning from cases to inform crisis prevention and to inform further system change and development.
- For Eating Disorders the current trend suggests that demand continues to be greater than the nationally modelled estimates on which our Berkshire service was commissioned. The risk and acuity of referrals has increased. We are reviewing this service.
- As with other areas, there are ongoing challenges relating to availability of appropriate in patient Eating Disorder beds. This can have an impact on the use of beds at Royal Berkshire Hospital while suitable placements are found.
- We are working with partners on new Tier 4 inpatient network that is being developed to enable improved flow and access to inpatient beds within the geographical patch. This means that young people will be more likely to stay in the area when they require a bed. We are looking for an opportunity to expand our inpatient unit.
- We have increased the number of Care Education and Treatment Reviews undertaken for adults and children, in line with NHS England policy.
- BHFT have secured funding from NHS England to build a new inpatient facility to replace Willow House in Wokingham. This will provide more capacity and reduce the number of children who have to be placed out of area.

## **Next steps**

We will continue to work on our plans over the next 12 months in conjunction with children, young people, parents and carers. We will review and refresh our plans in autumn 2019.

If you are a young person or parent/carer and would like to share your views on how you feel emotional health support could be provided please contact [bwccg.enquiries@nhs.net](mailto:bwccg.enquiries@nhs.net).

*If you want to speak to someone urgently about a mental health concern, CAMHS and other healthcare professionals are available between the hours of 8am-8pm Monday-Friday for telephone discussion 0300 365 1234.*

*Information about the CAMHS service, other BHFT children's services and the on-line referral form can all be found on the BHFT website:*

*<https://cypf.berkshirehealthcare.nhs.uk>. However call 999 if you are worried about your immediate safety, or go straight to the nearest A&E department*

## **Analysis of Issues, including any financial implications**

See above.

No financial implications.

### **Partner Implications**

The local transformation plan promotes a whole system framework of care; moving away from a specialist single agency mental health response to families, communities, schools, public health, social care and the voluntary sector sharing the same vision and working together on prevention, early help and building resilience.

The same partnership approach applies to complex mental health difficulties and mental health crises among children and young people. These are all key features of Future in Mind (2015). This inter-professional collaboration and coproduction will support a cultural change in the language used, the way in which systems and agencies work together, and the way in which children, young people and their families access support, care and treatment. We are interested in expanding the use of Restorative Practice across partners.

We have found multiagency emotional health triage at an earlier stage to be a particularly effective way of harnessing a swift community response before needs escalate.

### **Reasons for considering the report in Part 2**

n/a

### **List of Background Papers**

Link to full Local Transformation Plan document:

<https://www.berkshirewestccg.nhs.uk/media/2516/berkshire-west-future-in-mind-ltp-refresh-oct2018.pdf>

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