

READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	13 March 2020		
REPORT TITLE:	Future in Mind Update (Local Transformation Plan for Children and Young People's Mental Health and Wellbeing)		
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ORGANISATION:	Berks West CCG Brighter Futures for Children		

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 To provide an overview of the refreshed Future in Mind Local Transformation Plan (LTP) which was published in October 2019 in accordance with national Future In Mind requirements. The LTP provides an update on service development and improvement across the comprehensive Child and Adolescent Mental Health Service (CAMHS) system. The full LTP can be found here. <https://www.berkshirewestccg.nhs.uk/about-us/how-we-work-with-others/the-local-transformation-plan/>. Our LTP has been assured by NHS England.
- 1.2 A wide range of initiatives across the system are underway to improve emotional health and wellbeing of children and young people. Initiatives reflect the THRIVE model
- 1.3 Like most other areas of the country, demand for emotional health and wellbeing services have increased and the complexity of presenting issues is increasing. The increase in demand and complexity is being seen across voluntary sector, schools and specialist services. This is having an impact on waiting times.
- 1.4 Appendix 1 - The Future in Mind Local Transformation Plan - October 2019 refresh

2. RECOMMENDED ACTION

- 2.1 The Board is asked to approve the refreshed Local Transformation Plan.

3. CONTEXT

- 3.1 The refreshed Future in Mind Local Transformation Plan (LTP) was published in October 2019 in accordance with national Future In Mind requirements. The LTP provides an

update on service development and improvement across the comprehensive Child and Adolescent Mental Health Service (CAMHS) system.

- 3.2 Like most other areas of the country, demand for emotional health and wellbeing services have increased and the complexity of presenting issues is increasing. The increase in demand and complexity is being seen across voluntary sector, schools and specialist services. This is having an impact on waiting times to access help.
- 3.3 The NHS Long Term Plan has been published and the local partnership is on track in the key areas of Children and Young People's Mental Health Services and our refreshed LTP matches the requirements for improvements expected.
- 3.4 Access to services by Children and Young people has increased again this year. Providers are seeing more children and young people for evidence informed help than ever before.

4. THE PROPOSAL

4.1 Key achievements

- a) The NHS Long Term Plan has been published and the local partnership is on track in the key areas of Children and Young People's Mental Health Services and our refreshed LTP matches the requirements for improvements expected.
- b) Access to services by Children and Young people has increased again this year. Providers are seeing more children and young people for evidence informed help than ever before.
- c) We have continued to develop outcomes reporting and can evidence that most children and young people have positive outcomes across providers.
- d) We can evidence that most children and young people feel listened to across providers.
- e) We continue to meet the challenge of working with partners to flow CYP access data onto the national dataset, with 3 more now providers' data monthly and BHFT improving the quality of their returns.
- f) We can evidence the impact of large scale training across partners. In particular the introduction of Trauma Informed/ adverse childhood experiences training, at School and a community level is expanding rapidly across the patch. Aligned to this is the start this year of the roll out of the regional Restorative Practise awareness and training in all three Local Authorities reaching 100+ multi-agency practitioners and snr leaders as well as CYP.
- g) We are setting up Mental Health Support Teams in all of our Local Authorities. We have built on our existing strengths and learning from the Emotional Health Academy the Reading Emotional Well-Being Partnership to create an exciting offer.
- h) Following the completion of a service review, more financial investment has been secured for our Eating Disorder Service that will enable our local Mental Health provider (Berkshire Healthcare Foundation Trust - BHFT) to meet waiting time standards by 20/21.
- i) We were successful in becoming one of 9 pilot sites for a research project on improving mental health assessment for Children in Care. Training has been completed and the first 12 children in care have already participated in the project.
- j) 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.

4.2 Areas of Challenge and Development

- a) There continues to be increased demand which in turn is having an impact on waiting times, across providers. Although we were successful in winning additional resources to reduce waiting times in our specialist CAMHs teams, recruiting the workforce continues to be challenge across the sector.
- b) Availability of suitable skilled, qualified and experienced health workforce. There are recruitment and retention challenges for many parts of the wider children's workforce e.g. social care. The cost of living is high in Berkshire West.
- c) Demand for emotional health and wellbeing services across the system has increased at all levels of need, see Local Transformation Plan Appendix 2 Needs Analysis and Appendix 5 Activity. Local analysis is that we continue to be part of the cycle of positive improvements in identification of likely unmet need alongside the lowering national of the stigma related to mental health is driving the demand. However, with challenging waiting times often the need is increasing thus increasing felt levels of acuity in cases across the system.
- d) There continues to be concern about the 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 continue to be higher than the national average. A set of clear recommendations have emerged from the CYP High Impact User project along with the introduction of the MHST will begin to make a difference.
- e) Availability of suitable inpatient beds close to home. Lack of local inpatient beds for young people with Eating Disorders. The improvements in the local Willows provision as well as the work through the New Models of Care offer regionally will go so way to meeting this challenge.
- f) Flowing data onto the national MHSDS data set involves multiple providers with differing IT systems and data governance arrangements. We continue to meet the challenge of working with partners to flow CYP access data onto the national dataset, with 3 more now providers' data monthly and BHFT improving the quality of their returns.

4.3 Priorities going forward

- a) Our 2019/20 Local Transformation plan has identified 7 priorities to focus and act as a way to galvanise the partnership to collectively achieve improvement and change. These priorities are:
 - Priority 1 - Ensure that we embed and expand the Mental Health Support Teams in Berkshire West
 - Priority 2 - continue to focus on meeting the emotional and mental health needs of the most vulnerable CYP - particular attention to Children in Care
 - Priority 3: Continue to build a 24/7 Urgent care/ Crisis support offer for Children and Young People (CYP)
 - Priority 4: Continue to build a timely and responsive Eating Disorder offer
 - Priority 5: Improve the Waiting times & Access to support, with particular this year on access to ASD/ ADHD assessments and support.
 - Priority 6: To improve the Equalities, Diversity and Inclusion offer and access for Children and Young People in Berkshire West
 - Priority 7: Building a Berkshire West 0 - 25 year old comprehensive mental health offer
- b) The Future in Mind Delivery Group meets regularly to consider, challenge and

champion the changes as well as oversee this LTP refresh document. The Future in Mind group is chaired by the Assistant Director of Joint Commissioning NHS Berkshire West CCG and reports into the Berkshire West MH and LD ICP programme board. Workstreams are set up to drive each priority forward that includes strong multi-agency representation.

- c) Highlights of the work in the specific work in Wokingham can be found in the plan on pages 38 - 39 & 43 - 46 and specialist CAMHs pages 48 - 60.

5. READING MENTAL HEALTH UPDATE

5.1 Mental Health Support Team

Reading and West Berkshire were amongst the first trailblazer sites in the UK to develop a Mental Health Support Team, in partnership with the CCG. The MHST is unique in that it offers a school based mental health service, offering the right service at the right place at the right time.

The Reading MHST delivers evidence-based interventions for emerging mild to moderate mental health needs. It fits within the local systemic response to mental health concerns to meet local needs. It offers a service that is understood and accessed by Reading families, young people, schools and professionals, including an open referral system and MH triage.

Examples of what Reading MHST site has achieved to date:

- The MHST had its formal launch on 30th January.
- It covers 16 schools across the west of Reading, including Prospect, The Wren and Blessed Hugh Faringdon secondary schools and a number of primary schools.
- It has developed through a jointly established local governance structure, which enables education settings, parent/carer representatives, and partners to be members, and have a voice in how the MHST will develop and operate to meet the local need.
- It has a specific database to enable uploading data to NHS England and monitoring of outcomes for children and young people.
- The MHST has a full complement of staff, 2 Senior Educational Psychologists, 1 clinical psychologist, 4 Educational Mental Health Practitioners, 1 outreach worker.
- Referrals to the MHST: we have launched a Mental Health Triage as part of the One Reading Partnership Hub; referrals to the MHST are made via the website, including by schools, GPs, parents and self-referrals by children and young people and discussed at the multi-agency triage, to ensure a system response to the child/young persons' needs. Referrals to MHST can also be made via the CSPOA.
- MHST has received 80 referrals in total. Of that 80:
 - ❖ 50 were accepted and receiving/received MHST assessment/intervention
 - ❖ 19 have been screened and are on the waiting list for allocation of a MHST worker
 - ❖ 8 are pending triage, we need further info before accepting the referral.
 - ❖ 3 were inappropriate referrals for MHST and have been signposted to other services.
 - ❖ The majority of the cases are for anxiety and or depression.
- The MHST offers a comprehensive and tailored programme to support education settings with the design of their Whole School Approach.
- The newly qualified EMHPs have a structured workload and time, working directly from education settings on a regular basis and are able to build effective working relationships with key school staff.
- delivering evidence-based interventions for mild to moderate mental health needs. Delivered a number of bespoke activities to meet the needs of education settings, which include: mental health assessments, parent classes, mental health surgeries, training, individual therapeutic interventions for children and young people, support and consultation for school staff and parents.

- Multi-agency mental health surgeries are held 6 weekly in each participant school with each surgery discussing 3-6 children.

Developments:

- Identify and secure supplementary training for EMHPs enabling them to work with referrals that involve elements of self-harm, thus meeting a significant need reported by education settings.

5.2 Schools Link Mental Health Team

This is mental health service offered to all schools across Reading, and which has been taken up by 90% of primary and secondary schools in the area. It is offered by the Educational Psychology Service and Primary Mental Health Workers.

Deliverables:

- Initial whole school training
- 6 x mental health surgeries each academic year
- Each school will have regular mental health surgeries with EPs and PMHWs, to support and advise on individual or groups of pupils. Link staff
- 3 x network meetings each academic year
- Link staff training
- 12 mental health modules are run throughout the year for school staff to learn more about issues affecting mental health and wellbeing.

Educational Psychologists and Primary Mental Health Workers offer a range of group and individual therapeutic interventions, mental health assessments, consultations, training and signposting and liaison with CAMHS.

5.3 Secondary school mental health hubs

Two secondary schools in Reading are mental health hubs. They have developed mental health ambassadors, pupil workshops, leaflets and presentations for assemblies.

5.4 Therapeutic Thinking Schools

- The Therapeutic Thinking Approach to Behaviour and Inclusion has been adopted as Reading's approach to reduce exclusions and behaviour - it has been shown to reduce exclusions in other local Authorities and is in line with recent DfE advice "Mental Health and Behaviour in Schools 2018". It links directly to our commitment to driving trauma informed practice in the education sector.
- Being therapeutic means that school policy and the day to day practice in schools provides experiences that create sustained *positive feelings* within all children (regardless of their experiences of trauma, disability, difficulty and or neuro type).
- It is an approach that requires everyone involved in supporting a child to understand the drivers of dangerous or difficult behaviour and be consistent in how they manage children who are showing distress or anxiety through internalising or externalising behaviours.
- All BFfC staff whose role is to advise schools will be familiar with, and give advice that is in line with this approach.
- The approach was introduced to schools in December 2018 and, to date 57 schools in Reading have been trained.
- The Therapeutic Thinking Schools Approach offers tools, approaches and analyses (eg: policy audit, therapeutic plans, therapeutic tree, anxiety mapping, conscious and unconscious behaviours checklist).
- BFfC offers support to schools in this approach via visits, network meetings; clinical supervision for staff will be available.

5.5 Trauma Informed Reading

The One Reading Partnership has a commitment to leading the way on ensuring all services for children, young people and adults are trained in recognising and understanding the impact of traumatic experiences of people's lives. Training is offered to leaders, front line staff and schools.

6. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

- 6.1 The work of the LTP is contributing to Reading Health and Wellbeing Strategy priorities 3 & 4:
- Promoting positive mental health and wellbeing in children and young people
 - Reducing deaths by suicide

7. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

- 7.1 Not Applicable

8. COMMUNITY & STAKEHOLDER ENGAGEMENT

- 8.1 As a partnership we are committed to improving our services to CYP by continuously seeking their collaboration, feedback and involvement. The full range of providers regularly seek the views of CYP in a flexible adaptive way that encourages participation and involvement in not only feedback of experiences but how to improve our services. In preparation of our refreshed LTP we asked all providers to help us understand what they have heard over the last year, this is outlined in chapter 5 of the document.

9. EQUALITY IMPACT ASSESSMENT

- 9.1 Not applicable

10. LEGAL IMPLICATIONS

- 10.1 Not applicable

11. FINANCIAL IMPLICATIONS

- 11.1 Not applicable

12. BACKGROUND PAPERS

- 12.1 The full LTP can be found here. <https://www.berkshirewestccg.nhs.uk/about-us/how-we-work-with-others/the-local-transformation-plan/>.