

<b>Title of paper:</b>	Future in Mind: An update on children and young people's emotional health and wellbeing	
<b>Report to:</b>	Nottingham Children's Partnership Board	
<b>Date:</b>	28/03/2018	
<b>Relevant Director:</b>	Alison Challenger (Director of Public Health)  Helen Blackman (Director of Children's Integrated Services)	<b>Wards affected:</b> All
<b>Contact Officer(s) and contact details:</b>	Helene Denness <a href="mailto:helene.denness@nottinghamcity.gov.uk">helene.denness@nottinghamcity.gov.uk</a>	
<b>Other officers who have provided input:</b>	Lucy Peel <a href="mailto:lucy.peel@nottsc.gov.uk">lucy.peel@nottsc.gov.uk</a> Anna Masding <a href="mailto:anna.masding@nottinghamcity.gov.uk">anna.masding@nottinghamcity.gov.uk</a> Aileen Wilson <a href="mailto:aileen.wilson@nottinghamcity.gov.uk">aileen.wilson@nottinghamcity.gov.uk</a> Helen Blackman <a href="mailto:helen.blackman@nottinghamcity.gov.uk">helen.blackman@nottinghamcity.gov.uk</a>	

#### Relevant Children and Young People's Plan (CYPP) priority:

**Safeguarding and supporting children and families:** Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties and provide a safe environment in which to thrive.

☐

**Promoting the health and wellbeing of babies, children and young people:** From pregnancy and throughout life, babies, children, young people and families will be healthier, more emotionally resilient and better able to make informed decisions about their health and wellbeing.

☒

**Supporting achievement and academic attainment:** All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for independence, work or further learning.

☐

**Empowering families to be strong and achieve economic wellbeing:** More families will be empowered and able to deal with family issues and child poverty will be significantly reduced.

☒

#### Summary of issues (including benefits to customers/service users):

Partners across Nottingham City continue to work together to improve children and young people's emotional health and wellbeing and improve timely access to a range of mental health services.

National estimates suggest that 1 in 10 children and young people, age 5-16 years, have a clinically diagnosable mental health problem with 7 in 10 not receiving appropriate, timely interventions (Office for National Statistics, 2004). It is challenging to accurately identify the number of children and young people with mental health problems in Nottingham as some children and young people may have a mental health problem and not access services. The public health outcomes framework estimates that 10.6% of children and young people aged 5-16 years in Nottingham have a mental health disorders based on the age, sex and socio-economic classification of children resident in the city. This estimate should be treated with caution as the survey used to derive the estimates was carried out in 2004 and no adjustment has been made

for possible change in prevalence over time. A new prevalence study has been conducted by NatCen and ONS, publication is expected in 2018.

In recognition of the importance of children and young people's mental health the Department of Health published "*Future in Mind*" in 2015, a national programme that sets out best practice and describes how mental health services for children and young people should transform. Every area has a local transformation plan to achieve the ambitions of "*Future in Mind*" which is supported by additional funds made available to Clinical Commissioning Groups (CCGs).

The *Future in Mind* plan local transformation plan is multi-agency and covers the spectrum of support for children's mental health from prevention through to community and inpatient care. In Nottingham, progress is monitored by the CAMHS Executive, which reports to Nottingham City CCG Governing Body. In addition, Nottingham Children's Partnership Board and the Health and Wellbeing Board receive regular reports.

Progress with the plan to date includes:

- More systematically involving young people in the design and delivery of mental health services
- Providing early support to children and young people
- Integrating targeted and specialist CAMHS
- Reduction in admissions to CAMHS beds

The local transformation plan is wide ranging and whilst improvements have already been made to local provision, there is a need to ensure a continued focus on increasing and improving access to timely support. Priorities for the next year include:

- Further embedding whole school approaches to Academic Resilience and independently evaluating the programmes in Nottingham.
- Developing an Emotional Health and Wellbeing charter for Nottingham City schools to work towards.
- Further developing joint working between Targeted and Specialist/Community CAMHS in Nottingham City, prioritising the joint workforce development, joint working in the SPA and developing care bundles and reducing waiting times.
- Increasing capacity within the Community Eating Disorder Service to ensure that the service can meet the access and waiting time standards.
- Mobilising the new CAMHS liaison function as part of the CAMHS Crisis model and evaluating the options for providing an overnight response in line with *Core 24* requirements.
- Rolling out a risk assessment tool developed by collaborators including NUH and the University of Nottingham for young people who are admitted to paediatric wards with mental health needs.
- Developing a more robust and timely pathway for young people who experience first episode psychosis whilst already receiving support from community CAMHS.
- Reviewing current emotional and mental health provision for looked after children and care leavers against the national recommendations published by SCIE in November 2017, and address the recommendations.
- Continuing to develop ways to support universal services in supporting children and young people's mental health, and knowing how and when to refer to CAMH Services and other local support services, with the aim of reducing waiting times.

## Recommendations:

- |   |  |
|---|--|
| 1 | Nottingham Children's Partnership Board note the contents of this report and progress to improve the mental health and wellbeing of children and young people in Nottingham. |
|---|--|

2	Nottingham Children's Partnership Board note Nottingham City Targeted CAMHS Team offer to be a trailblazer, testing the new ways of working proposed in the green paper.
---	--

## **Future in Mind: The Local Transformation Programme for Children and Young People's Mental Health**

### **1. Background**

- 1.1 Partners across Nottingham City continue to work together to improve children and young people's emotional health and wellbeing and improve timely access to a range of mental health services.
- 1.2 National estimates suggest that 1 in 10 children and young people, age 5-16 years, have a clinically diagnosable mental health problem with 7 in 10 not receiving appropriate, timely interventions (Office for National Statistics, 2004). In recognition of this the Department of Health published "*Future in Mind*" in 2015, a national programme that sets out best practice and describes how mental health services for children and young people should transform. Every area has a local transformation plan to achieve the ambitions of "*Future in Mind*" which is supported by additional funds made available to Clinical Commissioning Groups (CCGs).
- 1.3 The *Future in Mind* plan local transformation plan is multi-agency and covers the spectrum of support for children's mental health from prevention through to community and inpatient care. In Nottingham, progress is monitored by the CAMHS Executive, which reports to Nottingham City CCG Governing Body. In addition, Nottingham Children's Partnership Board and the Health and Wellbeing Board receive regular reports.
- 1.4 Children's mental health continues to be an area of significant scrutiny and interest. A joint Department of Health and Department for Education green paper has been out for consultation and closed on 2<sup>nd</sup> March 2018. This proposes access and waiting time standards for CAMHS of 4 weeks referral to treatment, and an increased focus on support provided to young people in schools and colleges. The green paper also highlights the proposal of having 'trailblazer' areas to 'test out' and robustly evaluate ways of working with universal services. Nottingham City's Targeted CAMHS is very keen to become one of these 'trailblazer' areas, having already developed services to work in this way and recognising the benefits from robust evaluation which could support further development and innovation.
- 1.5 The recently published NHS planning guidance includes an expectation that CCGs will further invest in children and young people's mental health to increase capacity within services to enable timely and increased access.

### **2. Children and young people's mental health in Nottingham**

- 2.1 It is challenging to accurately identify the number of children and young people with mental health problems in Nottingham as some children and young people may have a mental health problem and not access services. The public health outcomes framework estimates that 10.6% of children and young people aged 5-16 years in Nottingham have a mental health disorders based on the age, sex and socio-economic classification of children resident in the city. This estimate should be treated with caution as the survey used to derive the estimates was carried out in 2004 and no adjustment has been made for possible change in prevalence over time. A new prevalence study has been conducted by NatCen and ONS, publication is expected in 2018.

- 2.2 In 2015/16, the most recently available national data, 380 young people in Nottingham aged 10-24 years were admitted to hospital for self-harm. As figure 1, shows this is not statistically significantly different to the England average.

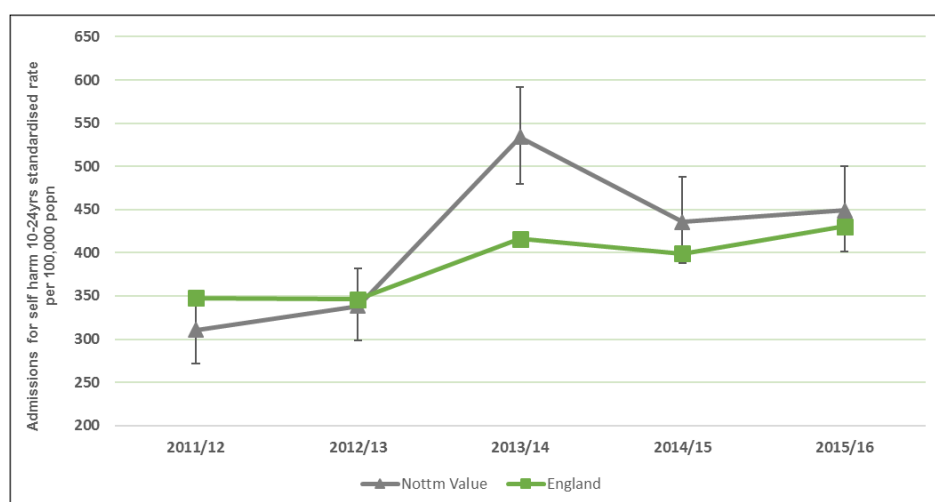


Figure 1: Hospital admissions for self-harm

### 3. Progress in implementing the plan to date

#### 3.1 Involving young people

3.1.1 A key priority within the last year has been to actively involve young people in service design. One of the key areas of focus for Nottinghamshire Healthcare NHS Foundation Trust has been involving young people in the development of the new *Hopewood Centre*, which will be a newly built centre supporting children and young people requiring 'community' (more specialist services) and/or inpatient mental health care. This centre is due to open in April 2018.

3.1.2 Within Targeted CAMHS<sup>1</sup>, the Service User's Group (SUG) has been meeting regularly since September 2016 and has been involved with the following projects and initiatives:

- An art/photography project with the University of Nottingham called *What is Recovery?*
- Input into the design of the young people's mental health passport currently being trialled in Nottingham City;
- Input into the Targeted CAMHS collaboration with NSPCC Childline project called *Next Steps* designed to provide telephone support to young people ending their CAMHS partnership but who need some further support to achieve their 'next steps' to recovery and wellbeing.
- Shaping the design of a research project being carried out by the University of Nottingham into the connection between regular exercise and mental health.
- Influencing plans for future CAMHS group interventions by giving a young person's perspective on what works well/less well in group work.
- Supporting each other with their recovery and sharing experiences of being supported by Targeted CAMHS.

<sup>1</sup> Formally known as tier 2 CAMHS

- Following feedback from young people an additional two Targeted CAMHS groups have been developed this year. An anxiety group and an exercise group which supports young people to participate in exercise to improve their emotional and mental health.

3.1.3 Nottingham City is also part of the MH:2K project, working in partnership with Involve and Leaders Unlocked. Through the project around 30 local young people representing the diversity within Nottingham and Nottinghamshire will train as citizen researchers, delivering a number of engagement events to engage over 500 of their peers across the city and county, and to set their own priorities for improving young people's mental health. The project will culminate in a roadshow in May 2018, which will in turn inform our ongoing work through this plan, to improve children and young people's mental health.

## 3.2 Providing early support to children and young people through universal services

3.2.1 One of the areas of focus in the last year has been the implementation of whole school approaches to emotional health and wellbeing. **Zippy** and **Apple's Friends** and **Academic Resilience** programmes are being rolled out in 8 primary schools, whilst a further 8 schools have attended Train the Trainer for the **Character Curriculum/Academic Resilience** programme being rolled out by the Nottingham City Council's Personal, Social and Health Education Team. A task and finish group has been established to coordinate the approach to supporting schools around emotional health, and a charter is being developed as a means to further embedding whole school approaches to emotional health. Unfortunately, due to unprecedented pressures on Nottingham City Council's budget, the council is no longer able to fund the Healthy Schools/Personal, Social and Health Education Team. Partners are working together to ensure Academic Resilience work continues.

3.2.2 Targeted CAMHS have developed a Universal Services CAMHS Practitioner role who works directly with schools and universal services around children and young people who need support, but do not need a CAMHS intervention. The role offers support and training to staff in schools/services, to help them to gain confidence in working with emotional and mental health needs, and prevents them referring to CAMHS when this is not required.

3.2.3 Targeted CAMHS support children and young people with their emotional/mental health support in schools. Such as an initiative called **Time4Me**, where young people can access direct monthly support in their school from a consistent CAMHS professional, and monthly **self-harm clinics** in schools from our preventative self-harm team called SHARP (Self harm awareness and resource project). These clinics have demonstrated that 89% of young people seen in the clinic, remained within Universal Services with clear recommendations of support. There is also the development of a project, for primary schools called **'Amazing Me': Early Intervention to promote emotional wellbeing in primary schools**.

3.2.4 The CityCare Behavioural and Emotional Health (BEH) team underwent a service redesign at the end of 2016 in response to feedback from an independent review that, commissioned by the CCG. Consequently, the service now has an emphasis on 1:1 specialist support and the ability to offer bespoke packages of care to children and young people with persistent behavioural challenges. There is a greater emphasis on early support including evidence based parenting programmes undertaken by universal services as well as continual upskilling of universal services by parenting practitioners to ensure knowledge is embedded and universal staff feel confident and well supported.

3.2.5 The City has a well embedded cross-agency approach to delivering the evidence based **New Forest Parenting Programme**. This is an 8 week home-based, or 6 week group-based, parenting programme aimed at children and young people whose symptoms and behaviours are associated with ADHD. This work is supervised monthly by the accredited lead to ensure

the programme is outcome focussed, and is delivered within the fidelity of the evidenced based model.

3.2.6 The SHARP team also continue to offer self-harm awareness training as part of a training programme around self-harm and mental health, and trained over 1500 front-line professionals in the city in 2017.

### 3.3 Support for vulnerable groups

3.3.1 Targeted CAMHS continue to deliver a weekly community group called **TRANS4ME** where 15-20 young people and young adults who identify as transgender/gender dysphoria, come together weekly to support each other to overcome the challenges that they face, but also to celebrate who they are. This is however fragile to continuation, as only has a small amount of funding (£1500) a year from the diversity community grant.

3.3.1 Targeted CAMHS have co-developed a **CAMHS Syrian Refugee Practitioner** post in partnership and funded by the re-settlement team. This post is unique nationally and is researching and developing the most effective ways of working with, and directly supporting this vulnerable group, who have often experienced very traumatic life events and have little or no family support in the UK.

### 3.4 Targeted CAMHS

3.4.1 In 2017, Targeted CAMHS introduced an assessment team, with its existing staff, to better manage caseloads and wait times. Since the development of this team, and the recruitment to the vacant posts, the current waits have reduced, and shown in figure 2.

(\*Choice is a full CAMHS assessment, and Partnership is a full therapeutic intervention)

Today's Date:	Thursday 15 March 2018	Target Wait Times (Weeks):	Actual Wait Times (Weeks)	Date of:	Surplus/Deficit Wait Time:
Next available Choice:		6	2.86	04 April 2018	3.14
Next available Choice if all waiting were booked into next available slots:		6	3.71	10 April 2018	2.29
Next Available Joint BEH/CAMHS Choice		6		BEHT Unavailable*	
Next Available Joint community CAMHS/CAMHS assessment:		6	4.57	16 April 2018	1.43
Next available Consultation:		6	2.86	04 April 2018	3.14
Next Available Partnership		8	8.86	16 May 2018	-0.86

Figure 2: Waiting times for Targeted CAMHS

3.4.2 The above data is reported weekly by the service in order to ensure they are continuing to bring wait times down. The service is working hard to continue to reduce partnership waits by developing better ways to support universal services, with the aim to try to reduce the referral numbers into SPA.

### 3.5 Targeted CAMHS Staff development

3.5.1 Targeted CAMHS are currently supporting staff to access the national IAPT (Increased Access to Psychological Therapies) training programmes. Last year 7 staff successfully completed a number of trainings to become qualified therapists in various evidenced based modalities of treatment. This year 5 staff are in training. There are challenges to this, as the service needs to get back-fill for those out on training. However, as this is a NHS England initiative and is health funded for a limited time, the service has taken advantage of this opportunity in order to be able to offer more evidenced based therapies to children and young people in the city.

### 3.6 Integrating targeted and specialist CAMHS

- 3.6.1 Over the last year, there has been a strong focus in Nottingham City on simplifying access into services, and promoting joint working between targeted and specialist/community<sup>2</sup> CAMHS.
- 3.6.2 There is a well-established single point of access (SPA) that unlike other areas nationally, is located in the local authority, alongside children and families direct and social care access point (Multi Agency Safeguarding Hub). The teams work closely together, and regularly signpost children and young people for other support where CAMHS isn't required, but early emotional health or family support is. This includes Base 51 and Kooth counselling services.
- 3.6.3 The SPA model is quite unique nationally and offers benefits, especially around strengthening partnership in early intervention and prevention. This model has ensured that over the last 4 years 95% of cases referred through SPA remain at a Targeted CAMHS or universal level, only escalating to specialist community CAMHS when absolutely essential. Over the past few months a specialist practitioner from specialist community CAMHS has been co-located with the SPA with the aim to improve access into specialist community CAMHS and, in addition, is able to support practitioners with more complex and higher risk cases.
- 3.6.4 Further development of SPA is planned with a new multiagency working group lead by Targeted CAMHS looking at increasing and strengthening how children and young people/families can self-refer, and get access to help, including access to guided high quality self-help- as a first line of treatment, or whilst they are waiting for their CAMHS appointment.
- 3.6.5 There is a joint-protocol in place to ensure Targeted CAMHS respond jointly, with social care, within 48 hours when there are serious concerns about a child/young people's self-harm or suicidal behaviours.
- 3.6.6 A referral criteria has been developed to enable better signposting within SPA by facilitating greater understanding regarding specific service areas. The aim was also to better inform other services of the different criteria, how to refer, and what support there is available in the city for emotional and mental health.
- 3.6.7 There is always a member of the Behaviour and Emotional Health (BEH) team present in the SPA to facilitate integration and a channel of communication. Despite the challenges in relation to accessing different data systems, which the different organisations have, an information sharing agreement in place with Citycare who employ the BEH team, to facilitate a model of integration that allows the Service Advisors in SPA from the different organisations to gather information to ensure that robust assessments can be undertaken, which will underpin the programme of care for the child/young person moving forwards. There is ongoing work to ensure that same agreements are in place with community CAMHS who use the NHS data system.

### **3.7 Specialist/Community Services**

- 3.7.1 In terms of Specialist/Community CAMHS, the average waiting time for assessment reported to the CCG on the 2nd February 2018 was 6.4 weeks, whilst average waiting time for treatment was 15.5 weeks. The service is working hard to improve waiting times by putting in place measures to improve recruitment and retention. 741 children and young people had been accepted into specialist CAMHS as at end of February (year to date).
- 3.7.2 In terms of specialist teams, the Crisis Resolution and Home Treatment team providing assessment and intensive support to young people in mental health crisis in the community has now been in place for two years. This has shown a positive impact on outcomes, with fewer City and County young people admitted to in-patient mental health beds between 2015/16 and 2016/17 (95 to 74). A CAMHS Liaison function was piloted as part of the Crisis

---

<sup>2</sup> Formally known as Tier 3 CAMHS

Team in May 2017 at King's Mill Hospital. This service ensures that young people who attend hospital emergency department in psychological or psychiatric distress can receive timely assessment within an hour of arrival and has recently been identified by CQC as an area of outstanding practice. Funding has been agreed to roll out a similar function at Queen's Medical Centre and this will mobilise in March 2018.

3.7.3 The CAMHS Eating Disorder Service is another area that was positively highlighted in the recent CQC report, although there is currently insufficient capacity within the service for it to meet the new national access and waiting time standards for eating disorders. Whilst referral numbers to this service are small (hence having a significant impact on percentage compliance), eating disorder cases are more likely to be complex and long term, requiring intensive treatment. The CCG is currently determining future resource allocation to support this service.

3.7.4 The third specialist area within CAMHS, which has seen service development, is the *Head 2 Head* team which provides outreach mental health support to young offenders, those with first episode psychosis, those with comorbid substance misuse needs and those who sexually harm. Two successful bids have been made to NHS England Health and Justice to pilot additional Speech and Language Therapy and Clinical Psychology capacity within the team. The intention is to improve the response to young people who have experienced trauma and attachment difficulties, and to address the communication needs of this vulnerable group of young people and thus enable them to better engage in therapeutic intervention.

3.7.5 Finally, the Trust will move to the new Hopewood Centre in Spring 2018, which will mean that more city children and young people will be able to be supported both in the community and as inpatients, closer to home. The site also includes inpatient provision for perinatal mental health.

#### **4. Priorities for 2018**

4.1 The local transformation plan is wide ranging and whilst improvements have already been made to local provision, there is a need to ensure a continued focus on increasing and improving access to timely support. Priorities for the next year include:

- Further embedding whole school approaches to Academic Resilience and independently evaluating the programmes in Nottingham.
- Developing an Emotional Health and Wellbeing charter for Nottingham City schools to work towards.
- Further developing joint working between Targeted and Specialist/Community CAMHS in Nottingham City, prioritising the joint workforce development, joint working in the SPA and developing care bundles and reducing waiting times.
- Increasing capacity within the Community Eating Disorder Service to ensure that the service can meet the access and waiting time standards.
- Mobilising the new CAMHS liaison function as part of the CAMHS Crisis model and evaluating the options for providing an overnight response in line with *Core 24* requirements.
- Rolling out a risk assessment tool developed by collaborators including NUH and the University of Nottingham for young people who are admitted to paediatric wards with mental health needs.
- Developing a more robust and timely pathway for young people who experience first episode psychosis whilst already receiving support from community CAMHS.
- Reviewing current emotional and mental health provision for looked after children and care leavers against the national recommendations published by SCIE in November 2017, and address the recommendations.



- Continuing to develop ways to support universal services in supporting children and young people's mental health, and knowing how and when to refer to CAMH Services and other local support services, with the aim of reducing waiting times.