St. Helens Health and Wellbeing Board  
24th September 2015  

Delivering Improvements in Children and Young People  
Mental Health and Wellbeing

WARDS AFFECTED

All

EXEMPT/CONFIDENTIAL ITEM

NO

1. PROPOSED DECISION

1.1. To note the national strategy and investment in child and adolescent mental health services;
1.2. To approve the priorities for Children and Young People’s Local Transformation Plan investment outlined in para 3.4 as required by NHS England and detailed in the Plan;
1.3. To agree that delegated responsibility be given to the Clinical Chief Executive St Helens CCG, with the Chair of the Health and Wellbeing Board, to make minor amendments and sign off the final summary of the Local Plan, self-assessment and monitoring and review tracker as required by the NHS England.

2. BACKGROUND

In 2014, in light of a perceived growing crisis in children’s mental health services, the Government established a National Taskforce to undertake a systemic review of Child and Adolescent Mental Health. The work culminating in the publication of Future in Mind: Promoting, Protecting and Improving children and young people’s mental health and wellbeing in March 2015. The Taskforce outlined evidence that half of all mental illness in adults starts before the age of 14, and three quarters of lifetime mental health disorders have their first onset before 18 years of age. The life chances of the individuals concerned are significantly reduced in terms of physical health, educational and work prospects, the chances of contact with the criminal justice system and even life expectancy. The Government has made clear its commitment that mental health services for people of all ages should have parity of esteem with physical health services.

3. FACTS SUPPORTING THE PROPOSED DECISION

There is a requirement that the plan is approved by the Health and Wellbeing Board is part of the assurance process.

3.1  Size of the problem

- One in Four (26%) young people in the UK experience suicidal thought
- Among teenagers, rates of depression and anxiety have increased by 70% in the past 25 years, particularly since the mid 1980’s.
The numbers of children and young people who have presented to A&E with a psychiatric condition have more than doubled since 2009 (8,358 in 10/11; 17,278 in 13/14).

55% of children who have been bullied later developed depression as adults.

Approximately 75% of adult mental illnesses (excluding dementia) starting by the age of 18.

The average waiting times to first appointment in specialist mental health provision for children and young people for non-urgent cases is lengthy (14 weeks in St Helens).

3.2 National Improvement Plan

*Future in Mind* outlines the need to make dramatic improvement through an integrated system which supports and promotes positive health and wellbeing with timely intervention when needed, with the NHS, public health, voluntary and community, local authority children’s services education and youth justice sectors working together.

In recognition of the scale of the problem, and the historic underfunding of children’s mental health services, an additional £1.25bn will be invested over the next 5 years to achieve the transformation necessary. Additional funding available to St Helens will amount to £420,000, recurrent funding over the next 5 years.

Initial guidance on the investment was issued in July 2015 setting out where new investment will be targeted nationally, and the assurance process which will enable the Clinical Commissioning Group to draw down funds for local transformation. The Local Transformation Plan needs to be submitted for assurance to NHSE by 16th October 2015. Local Transformation Plans should cover the whole spectrum of support for children and young people’s mental health and wellbeing from health promotion and prevention work, to interventions for children and young people who have existing or emerging mental health problems, as well as transitions between services. It will be held by the Clinical Commissioning Group in collaboration with local partners and monitored through NHS England from the second half of 2015-16.

The first phase of national reform programme will focus on the following priority areas:

- Building capacity and capability across the system, St Helens CCG allocation £300,000, subject to NHSE assurance.
- Roll out of Improving Access to Psychological Therapies (underway).
- Improving standards and access to community-based eating disorder services for children and young people (CEDS-CYP), with related referral to treatment pathways (St Helens allocation £120,000, to be commissioned for a minimum general population of 500,000)
- Improving peri-natal care (further guidance on investment expected by end of financial year)
- Bringing education and mental health services together (national pilot).

3.3 St Helens Context

Much of the work set out in the guidance in developing a Local Transformation Plan is already underway. The Mental Health and Wellbeing Strategic Framework approved by the Health and Wellbeing Board July 2015, forms the foundation for our local Plan, having aligned this to the priorities in Future in Mind. The current plan has been reviewed and
updated to reflect the new guidance. The priorities for improvement outlined in the action plan were identified through the review of mental health provision undertaken in 2014/15 and is therefore reflective of the wealth of analysis and insight gathered through stakeholder engagement during this process.

During this process the following gaps were identified:
- Under 11 provision for specialist therapeutic input including play therapy
- Gaps in whole family therapy
- Coping with anger
- Support for children with Autism and ADHD
- Capacity for therapeutic support, particularly at Tier 2 and waiting times at CAMHs
- Interface between specialist mental health services and early intervention services
- Level of young people being admitted to hospital for self-harm.
- Out of hours/crisis support
- Access to specialist eating disorder services
- Level of children and young people who ‘Did Not Attend’ CAMHs appointments
- Transition to adult mental health services

In order to address some of these, the CCG and Local Authority jointly commissioned an expanded, new early intervention service, delivered by Barnardo’s operational from 1st July 2015. The new service includes:
- Face to face and online counselling service for children and young people aged 0-19 exhibiting poor emotional health and wellbeing.
- The establishment and management of, in partnership with 5 Boroughs CAMHs service, a Single Point of Access to ensure that no child or young person will be refused a service.
- Training and Development Programme to build awareness, confidence and capacity across the workforce.
- Supported self-care though development of information, tools etc.

In addition, work is underway to strengthen capacity and capability within the Youth Offending Service to improve access to appropriate mental health support for young offenders.

3.4 Priorities for Local Investment

The additional investments from NHSE, which must be used on new initiatives, provide the borough with the potential to address other gaps highlighted in the review. In the initial phases, it is proposed that we strengthen the clinical leadership involvement and the engagement of children and young people and parents in our transformation activity and test new approaches across the following priorities:

a) Self-Harm

In St Helens, in the 3 year period from 2010/11 to 2012/13 the rate of self-harm in 10–24 year olds was 688.7 per 100,000; the second highest in Merseyside and almost double the England rate of 352.3. Over the 3 year period, a total of 657 admissions were due to self-harm. Of the 154 emergency hospital admissions for unintentional and deliberate injuries, in 10-14 year olds in 2014/15; 1 in 3 were due to self-harm (intentional self-poisoning or self-harm), with 54 admissions.
Through the Transformation Funding, we propose to review the current self-harm pathway, with the aim of both diverting young people from A & E and preventing admission/re-admission to hospital through testing new programmes with young people who self-harm, improved out of hours support, wrap around support and integrated multi-disciplinary approaches, alongside building understanding and skills across the workforce and to test initiatives which enable young people to self-care.

b) Children with Autism and/or ADHD

There has been a 37% increase in diagnosis of Autism which has led to strain on the existing pathway, and consequently there are significant waits for diagnostic assessments. Insight was gathered on the current pathway as part of the review of a number of services which has led to the commitment to implement a single neurodevelopment pathway for children and young people with Autism, ADHD and sensory processing difficulties and increased investment in Speech and Language Therapy (1st July 2015) and commissioning of a new provider and model for the Community Paediatrics Service (1st Nov 2015). This will help ease the pressure on the pathway but in order to address this in the short term, for those children with mental health conditions, a waiting list initiative is proposed for 15/15 through the Local Transformation Plan.

In addition we propose to increase the existing investment in the co-ordination the capacity diagnostic pathways, and to increase the support to parents/carers/families through the implementation of the new neuro development pathway, including transition into adult services.

c) Improving access to Eating Disorder Services

Work is underway with neighbouring CCGs, Halton, Knowsley, and Warrington to design and deliver a specialist community based community eating disorder service for St Helens. To support a collaborative commissioning venture, it is proposed that a full time project manager is employed across the 4 CCGs to manage this.

d) Workforce Development:

There is a need to further strengthen workforce planning, development and support, for the entire children’s and adult workforce and support the roll out of the of the CYP IAPT programme to embed consistent quality standards.

e) Peri-Natal Mental Health

A further workstream will be added to support improved ante, peri and post natal mental health work. Work is already underway across Merseyside looking at improving maternity experience.

f) System Re-design

In the longer term, our local plan reflects a desire for a more integrated approach to improving emotional health and wellbeing and mental health, particularly for those with greater vulnerabilities and psychological and social risk factors who do not fit neatly into current tiered models. Alongside initiatives in year one, it is proposed that a review team is established with support of mental health professionals, working alongside and primary care clinicians and health, education and social care agencies, and with the active participation of children and young people and parents/carers, to consider emerging models nationally of
integrated or holistic approaches such as the Thrive model or more innovative models of integrated care across health and social care, including transition.

g) Waiting List Initiative

At present the waiting time for a routine appointment with a CAMHs clinician is approximately 14 weeks. Additional investment into the Single Point of Access and Barnardo’s early intervention service will improve issues relating to access, but subject to further guidance, further measures will be required in addition to this in order to address the current waiting list whilst these initiatives have time to bed in.

4. CONSULTATION

In addition to the engagement outlined above, further consultation with key stakeholder and partners has taken place during the development of the strategic framework. The Mental Health and Wellbeing Strategic Framework has been presented to both the CCG Clinical and Quality Approvals Committee and the CCG’s Informal Board before approval by the Health and Wellbeing Board. The final draft framework has been revised to reflect additional comments presented by HealthWatch.

5. RISKS

Risks Associated with the Proposed Decision

There is a risk that the Plan will not be approved by NHSE. In order to mitigate this, a draft self-assessment has been undertaken against the guidance provided and this will be shared with the Strategic Clinical Network as a critical friend and Local Area Team for review prior to final submission. The timeline provides some flexibility to make changes following feedback. There is a risk that there is insufficient capacity to manage the transformation needed. The budget plan includes an element for project management, particularly in the initial phase of development. To support this, a multi professional group has recently been established under the Child Health and Early Years Forum, sub group of the Health and Wellbeing Board, comprising representatives from the CCG, Local Authority, Bridgewater, 5 Borough’s Partnership, and the voluntary sector to manage the implementation of the Children and Young People’s Local Transformation Plan.

Should the Risk be added to the Corporate Risk Register

No

6. CONCLUSION

There remain significant challenges ahead but children and young people in St Helens will benefit from a system wide approach to improvement that is broader than a sole focus on access to specialist mental health services. The additional Transformation funding will enable a step change in how care is delivered. In keeping with the latest government policy set out in Future In Mind, building on work to date to move away from a system defined in terms of the services and / or organisations provided (the ‘tiered’ model) towards one built around the needs of children, young people and their families. Integral to the model is the emphasis on prevention, early intervention and proactive recovery. To support improvement a number of key priority areas will benefit from investment to improve the experiences and outcomes for children and young people.

7. OTHER IMPLICATIONS
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<tr>
<td>Financial</td>
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<td>Anti-Poverty</td>
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<td>Effects on existing policy</td>
<td>Links with many policies</td>
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<td>Effects on other activities</td>
<td>Mental health and wellbeing has an impact on all activities such as physical health, workforce health, economic regeneration, employment and skills.</td>
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<tr>
<td>Human Rights</td>
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<td>Asset Management</td>
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8. HEALTH AND WELLBEING CROSS CUTTING THEMES

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<tr>
<td>Tackling inequality</td>
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<td>Good patient experience and access to services</td>
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<td>Integration and joint working</td>
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<td>Effectiveness</td>
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<td>Community resilience</td>
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9. APPENDICES
None

LEAD OFFICER FOR THIS REPORT
Liz Gaulton
Director of Public Health
St.Helens Council

CONTACT OFFICER
Sharon Fryer Assistant Director Integrated Children’s Health
BACKGROUND PAPERS

Future in Mind: Promoting, Protecting and Improving children and young people’s mental health and wellbeing March 2015


Local Transformation Plans for Children and Young People’s Mental Health and Wellbeing Guidance and support for local area August 2015