

Vale of York CCG Local Transformation Plan 2018/19 Action Plan **Working draft 30 Sept 18**

Introduction

The Local Area Transformation Plan (LTP) for children and young people's emotional and mental health sets out the aims of the CCG and local authority partners to 2020:

By 2020, we will work together and share resources across North Yorkshire and York to make sure that children and young people:

- Grow up confident and resilient and able to achieve their goals and ambitions
- Can find help easily when they need it
- Receive help that meets their needs in a timely way

Are fully involved in deciding on their support

In the last year significant progress has been made towards meeting the needs of children and young people's emotional and mental well being and health.

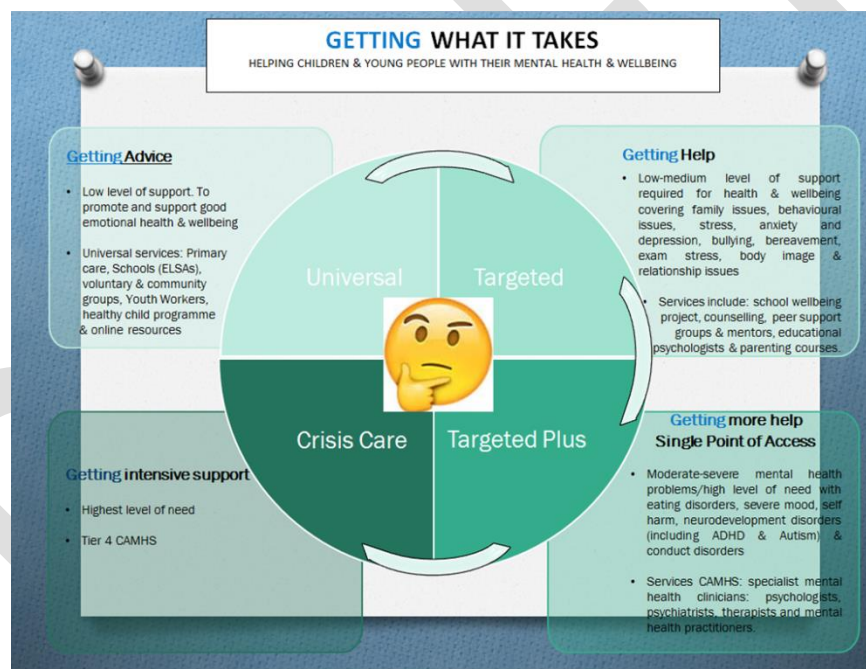
- Additional £120K recurrent CCG funding and £50K recurrent TEWV funding into specialist CAMHS services to support the emotional treatment pathway, reduce waiting times for autism assessments, and provide additional resource for eating disorders.
- In year non-recurrent CCG funding of £120K to increase the number of autism assessments
- Community eating disorder service received parent and patient feedback describing the support received as excellent.
- Group work has become the norm for children and young people on the emotional pathway, offering earlier support and reducing the numbers requiring individual one to one interventions:
- The Single Point of Access managed over 1900 referrals in the year, and offered every family a 30 minute phone call to discuss concerns and facilitate a decision on whether the child or young person needs a full face to face assessment.
- The Well-Being Worker Service in City of York is now well-embedded: 6 workers, jointly funded by the CCG and schools worked with over 300 pupils in 2017/2018 delivering evidence based therapies, advice and information, achieving high satisfaction ratings: Over 80% of children stated they achieved their goals, and SDQ scores fell from 16.5 to 11.8. There was also a reduction in onward referrals on to

CAMHS indicating that the earlier support received prevented difficulties escalating. The service also worked closely with CAMHSD to ensure assessments and interventions for any primary school aged child on the emotional pathway.

- Compass Buzz school well-being service in North Yorkshire County Council provided training for ##### staff in the CCG area and worked on co-facilitation of support for #### pupils. Schools describe the training as excellent, #####
- Buzz Us texting service was set up for pupils in North Yorkshire: it has initiated 200 texting conversations to advise and signpost young people, meeting secondary school pupil's aspirations for 'instant access'.
- A specialist peri-natal service has been funded and is setting up, providing support for 220 mums, and signposting advice for a further 1200.
- Crisis support team in York, working 10am-10pm seven days a week to support children and young people in crisis: in the first 6 months, over 600 children and young people accessed the service. We have seen a fall in presentations at A&E, and a significant drop in admissions to inpatient units, as young people can access intensive support for up to eight weeks.
- 40% of children and young people received support against the national target of 32%
- Mental Health Champions in York: 10 secondary schools and colleges have been trained to provide peer support and roll out school based mental health campaigns so that pupils have rapid access to advice and information.
- Strengthened Family Early Help Assessments developing support plans with families, schools and other agencies.
- Schools workforce development plan for schools in City of York showed all staff increased knowledge, and between 84% and 97% felt more confident in responding to emotional and mental health need.
- The Transforming Care Partnership for children and young people has been set new approaches to CETRs and inter-agency support arrangements are now in place: fewer than 5 CETRs were undertaken for Vale of York, and all were able to be supported in the community.
- Extensions to No Wrong Door in North Yorkshire has provided intensive support for more looked after children who are not engaged in services.
- Extension of the City of York FIRST project through the commitment of funding for a new centre of excellence to offer intensive short breaks to those children who at risk within the Transforming Care Partnership group, and also increase the number of overnight short breaks for children and young people with autism or physical disabilities. **The project has also applied for over £900K of capital funding from NHS England to support the project.**
- 2 schools in the Vale of York area (Kirbymoorside and Barwic Parade, have adopted the Thrive Approach across the schools to support the social emotional and mental health of children. This has resulted in improved attendance, reduced exclusion and improved developmental scores around emotional development.
- A Back on track project in NYCC aimed at building the capacity of mainstream school to meet the SEMH needs of children with SEMH and reduce the exclusions led to increased attendance of a small cohort of pupils through integrated multi-disciplinary support.

This refreshed plan sets out how we intend to improve still further in supporting children, young people and families. The plans have been driven by:

- Engagement with service users, Youth Councils, parent groups
- Needs analysis based on the JSNA and monitoring and performance data for the locality
- National policy drivers and guidance through the Five Year Mental health Forward View
- The local health and well being strategy, mental health strategies, autism strategies
- Thrive Model of support, which maps sources of advice and support to the domains of Advice, Getting Help, Getting More Help and High Levels of Need. The Thrive Model helps ensure there are no gaps in sources of support, and agencies work well together



<http://www.implementingthrive.org/wp-content/uploads/2016/03/Thrive.pdf>

There remain challenges which we aim to address this year and next:

- Health and local authority budgets remain challenged, with strongly competing calls for funding. The CCG has prioritised mental health funding, in particular children's mental health funding for further investment, and has confirmed that it will continue to invest in school based projects and eating disorders, in addition to increasing investment in core mental health services for children when funds allow.
- Integration of services across agencies to ensure seamless provision especially some very complex groups.
- Overstretched specialist services. There remain delays in accessing treatment, and although we expect the school well-being services and other community services such as Healthy Child programme and counselling services to reduce demand in the longer term, these projects will take some time to work through. In the meantime, TEWV is developing its range of approaches such as group therapeutic work with young people with emotional difficulties and online offer.
- Need to develop further the capacity of schools and community settings to encourage children and young people's resilience, and provide an environment of support: the area was unable to bid for trailblazer status as proposed by the Department for Health in its response to the Green Paper, and we will follow the training elements of the trailblazer bids to learn how the local area can develop leadership skills still further.

Despite these challenges, there is a lot that we plan to do:

- Train schools staff to spot and respond to early signs of difficulty
- Ensure that communication and information for families is supportive
- Work with maternity services, health visitors and school nursing services, particularly with the newly re-structured service in York to ensure that all families receive advice and support for emotional and mental health
- Ensure support for vulnerable groups of children and young people offers the best possible support
- Explore more collaborative working with the third sector
- Explore scope of services in future, to develop joint commissioning and service integration
- Developing online forms of support alongside face to face

The plan for 2018/19 is divided into:

1. Prevention, promotion and early intervention
2. Specialist support for those with higher needs
3. Ensuring transparency, joint commissioning and partnership working

The LTP is subject to assurance by NHS England, and is monitored through the Strategic Partnership for Emotional and Mental Health, and the Mental Health Partnership Board

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1. Promotion, Prevention and Early Intervention

Scope:

- Local Authority area teams, LATS in City of York, and Prevention Service in North Yorkshire (Selby and Ryedale localities) both operate on a locality place basis to pull together multi-agency partners to identify needs as they emerge and address them at the earliest stage possible. The services support children, young people and families through a holistic understanding of whole family need: their work contributes to the agenda of emotional well-being and mental health but also reflects wider needs within families. The teams are all about working in partnership with families, communities and partner agencies. Team members include a range of multi-skilled 0-19 practitioners and deliver the Healthy Child Programme for 0-19
- The jointly funded City of York School Well-being service works with staff and pupils in all schools and colleges in the City. Each cluster has an assigned well-being worker to provide training and advice to staff and undertake 1:2:1 and group work with pupils: interventions are evidence based, around CBT and talking therapies. The service works closely with TEWV and LATS providing the crucial bridge between early support and specialist CAMHS services.
- City of York Counselling Service: Mind has successfully bid for the contract for counselling for 16-25 age group.
- Compass Buzz and Buzz Us in North Yorkshire County Council. The *Future in Mind* funded service works to build capacity in schools and colleges to improve the whole school and pastoral team response to emotional and mental health problems, and also offers limited time-limited co-facilitation with staff members of low level approaches to help pupils. Working out of NYCC Prevention offices it enables liaison with local authority early intervention services. Buzz Us offers a texting service for pupils to share concerns and be signposted to self-help support or other services.

2017/18 performance

Schools service:

School Well-being Service in COY:

- The service now offers whole class interventions in addition to individual and group work.
- Over 980 consultations, and 316 interventions,
- An average improvement in SDQ scores of 16.5 to 11.8.
- A 61% decrease in onward referrals to CAMHS, and the service now works with CAMHS to ensure that all primary school age children referred to CAMHS are first assessed by the SWS.
- Feedback from parents, teachers and pupils has been excellent, with 80% achieving goals and 90% feeling listened to and happy with the support.
- The CCG has committed to future funding beyond 2020, ensuring the future sustainability of the service.
- Mental Health Champions have been trained in 8 secondary schools and 2 colleges

Compass Buzz and Buzz Us:

- 31 schools in the CCG area have participated in whole school training for over 400 staff. 11 schools booked onto level 2 and 3 training for pastoral leads and SenCos.
- Positive feedback with 92% staff stating they have an increased knowledge of emotional and mental health
- Co-facilitated interventions with individual pupils, and delivered within 21 days. 90% stated they achieved their goals.
- 74 Buzz Us text conversations between February and March, meeting aspiration of secondary school pupils for instant access.

Healthy Child Service fully operational in City of York following transfer of staff to City of York.

Summary of achievements:

1. Successful bid for NHSE peri-natal funding across STP footprint to support 220 women, and signposting advice for a further 1600.
2. Access to support for women in the peri-natal period with mental illness is through the fast track adult IAPT pathway
3. Midwifery service has a lead mental health midwife and training, and pathway
4. City of York School well-being services worked with 316 individual pupils and groups, saw a decrease in onward referrals to CAMHS, and had a larger improvement in SDQ scores following interventions.
5. Holiday appointments are offered through the School Well Being Service
6. Feedback from all staff training in North Yorkshire Schools through Compass Buzz reporting increased confidence in working with pupils
7. Buzz Us texting service well-received by pupils.
8. Refreshed counselling offer in City of York
9. Safe Haven for over 16s at 31 Clarence St in York
10. Crisis team well established with 6WTE providing support 7 days a week
11. Strengthened parenting support through LATS in York to help with attachment and positive support approaches.
12. GP leaflets for signposting in NYCC area
13. Revised RSS guidance and forms for GPs
14. Completion of the HCS restructure in August 2017 and embedding the service within Local Area Teams.

No	Outcomes	Actions and Measures	Lead	Action update at Q end	RAG at Q end
1	Rollout of community peri-natal support team in North Yorkshire and York	<p>Primary care, midwives, health visitors and TEWV working together to identify mums at risk and ensure appropriate advice and support provided.</p> <p>Clear whole system approach evidenced</p> <p>High level of satisfaction with support provided.</p> <p>High numbers of positive outcomes for mums and families</p>	TEWV: Carol Redmond to advise	Q2 Funding secured and delivery board in place.	
2	Effective support for families in early years through Healthy Child Programme, health visitors, school nurses and early support teams	<p>Continue to increase performance levels against the mandated contacts from 0-5</p> <p>Refresh partnership based interventions supporting the priority of “best start in life”</p> <p>Evidence of effective engagement with mothers, families and young children regarding their emotional and mental health</p> <p>Demonstrate KPIs for measurement by Q4 2018/19</p>	COY: Niall Mc Vicar NYCC: Emma Lonsdale	Q2.	

3	Effective counselling service and diversionary services for children and young people	Rollout of City of York Counselling offer contracted to York Mind for delivery through Clarence St Development of APPs/online/group work support from CAMHS	COY Niall McVicar TEWV Kath Davies	Q2: Mind awarded contract for Counselling Service in COY Thrive embedded within 24 NYCC schools to support early identification of SEMH needs and provide early intervention within school. SEMH intervention guidance for schools developed. Back on Track project providing therapeutic support for 53 children in NYCC identified as having SEMH but no mental health disorder in the first year of the project	
4	Effective school well-being service in City of York	Effective service measured by reduction in SDQ scores Positive feedback from staff/parents and pupils Training programme delivered with positive impact on staff confidence and approach	COY: Emma Hughes	Q2: for 2017/18 SDQ average score after intervention is 11.8, down from 16.5 90% stated felt listened to 80% achieved their goal 90% happy with the service 73% staff felt had increased confidence in supporting CYP EMH 72% pupils reported increase in resilience and well-being Reduction in onward referrals to specialist CAMHS, and all primary school children referred to CAMHS have preliminary appointment with SWS Appointments offered in school holidays School Mental Health Champion programme launched with training in schools: enables early access to information and advice Funding assured by CCG for future.	
5	North Yorkshire Schools offering early support through Compass Buzz training offer	Level of take up and satisfaction with training Increased use of Buzz Us texting service Level of positive feedback around Buzz and Buzz Us Increase in non-facilitated	<i>Compass Lisa Gale</i>	#####	

		sessions with pupils			
6	Development of integrated schools offer in ERYC area	Engagement and support in developing a schools based offer.	CCG Susan De Val		
7	Improved referrals process through RSS and training and support for primary care in directing families	GPs have ready access to details of referrals to signpost or refer children and young people and families Under 10% referrals returned for lack of information	CCG Susan De Val TEWV Angie Casterton	Q2: GP training and consultation event led by TEWV around role of SPA and referral process. Review of RSS to improve access to information.	
8	Improve speed of access for assessment and treatment	<i>X% receive call from SPA within 48 hours by (date)For discussion and negotiation with TEWV</i> 90% referrals requiring full assessment are assessed in under 9 weeks from referral. Work with GPs and early intervention services to help with early identification and support to reduce demand for CAMHS support Development of alternative approaches such as APPs and online to broaden the offer of instant access and reduce waiting times for 121 therapeutic support.	TEWV Carol Redmond	Q2 Current referral to assessment is 57% against target. CCG has invested additional funds, staff commence in post in Q3. Expect reduction in waiting times by end Q4. Capacity and demand gap analysis considered at CMB and will inform decisions around further investment.	
9	Effective staff training programmes	Measure effectiveness of training programme, target of at least 80% finding the	COY: Emma Hughes	Q2: COY SWS : pupils state 90% felt listened to and 90% happy with service. Staff state that 84% -97% feel confidence increased depending on course provided.	

		training useful	NYCC: Lisa Gale TEWV: Carol Redmond	IN NYCC Compass Buzz training returns state 92% staff feel better informed NYCC: YMHFA training delivered to staff within mainstream secondary schools.	
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Section Summary

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2. Specialist Support for Those Who Need It

Scope:

Some groups of children and young people are particularly vulnerable, because of life history or home circumstances, illness or disability, being looked after, or in contact with youth justice service. The Local Offer, Youth Justice support, No Wrong Door (North Yorkshire County Council), the FIRST (City of York) project for those on the edge of care or placement, or the Transforming Care Partnership ensure specialised care and support. CYPMH specialist services at Limetrees and Selby offer therapeutic interventions across all scales of need, including learning disabilities, assessment service for autism and eating disorders support. For children looked after in NYCC, there is a bespoke service based in Northallerton.

Performance in 2017/18

Health checks for LAC: 98% provided in accordance with target

Referrals to CAMHS: 1904

40% CYP receiving mental health support against the national target of 30%

Access to CAMHS: 75% performance against target of 90%

Children signed off as medically unable to attend school: 25 between September 2017 and August 2018 in City of York.

CEDS: 79 referrals both external and internal to service. 57 were assessed as requiring treatment and support for eating disorders. 40% against target for urgent cases and 20% against target for routine cases and 21 completed treatment and were discharged from service.

T4 admissions: 23, with a drop in Q3 and 4 and 70% reduction in out of area placements following the implementation of the crisis team

Funding for 36 additional ASC assessments

80% 17 ½ with a transition plan

Satisfaction with transition plan (CQUIN) #####

No Wrong Door:

Summary of achievements to date

1. FIRST extension project in COY to develop intensive short breaks approved and grant funding sought from NHSE
2. No Wrong Door project in NYCC secured additional psychology support for young people in care
3. Sexual assault assessment service across North Yorkshire and York run by York Hospital
4. Outcome Panel for all children and young people coming into contact with
5. FCAMHS service working with local authority staff to offer early interventions for high risk children and young people
6. Think First Programme in City of York to develop self-esteem and decision making among young offenders
7. Dedicated CAMHS LAC service in North Yorkshire
8. No Wrong Door extension for CYP with SEMH offering therapeutic support to access education
9. No Wrong Door project in NYCC secured additional psychology support for young people in care
10. High levels of satisfaction with the support provided by CAMHS: ##### felt they had been listened to, involved in their care and well-supported.

Specialist Support for Those Who Need It

No	Outcome	Action/Measures	Lead	Action update at Q end	RAG at Q end
1	COY FIRST extension project: therapeutic short breaks and autism short breaks	Service ready to commence Successful NHS England capital bid	COY William Shaw	Q2: project well advanced through planning process. Grant application made to NHS England for capital funding. #####	
2	Transforming Care Partnership is effective in reducing number of children in 38/52 week placements and CAMHS inpatient beds in 2018/19 measured against 2017/18	Timely CETRs with monitored outcomes and care plans Effective CETR and care plans to ensure children and young people stay at home. Dynamic Support Register provides basis for support for those children and young people at risk of admission 2017/18 T4 admissions: 24	CCG Josie Tatum COY Jenny Bullock NYCC Emma Lonsdale?	Q2: CETR manager in post, working with colleagues to review and assess CETRs. Work on Dynamic Support Register format and parental information and consent forms finalised. CETRS have all enabled CYP to remain in community services.	
3	No Wrong Door	#####	NYCC Cerys Townend	Q2 All secondary schools in the Selby, Tadcaster, Easingwold and Kirbymoorside area have been offered the one day DFE funded YMHFA training. Additionally 6 staff across the secondary schools have received the YMHFA two day training and become Mental health champions. Back on Track have supported 53 children with SEMH in the first year of the programme, the cohort have received less exclusions during the year than within previous years and in comparison to a similar cohort from previous years.	

4	Ensure clarity of pathway of support for children and young people with most complex needs through the Specialist Support Sub Group of the Strategic partnership for Emotional and Mental Health.	Roll out the programme of task and finish groups in City of York	TEWV Carol Redmond COY Sophie Keeble	Q2: Agreement around task and finish group to review and identify gaps in support for complex children and young people out of school and waiting for treatment. First task and finish group will be to improve the system response for pupils out of school with mental	
5	Reduction in need for complex packages of care through improved community support	NEED DETAILS	Sophie Keeble		
6	LAC CAMHS services are effective in offering support for children and carers to reduce numbers of out of area placements and prevent placement breakdown	Outcomes of therapeutic support Reduction in numbers of failed or at risk placements	COY Sophie Keeble NYCC?	Q2: successful bid with the NSPCC to be partners in a Reflective Fostering programme which is one way we plan to reduce placement instability and support/improve emotional resilience of our foster carers. We continue with our Placement Review looking at our placement sufficiency and all options to meet our need.	
7	Children and young people with eating disorders are assessed and treated in line with national guidance and standards	2018/19 target: 75% urgent cases and 25% routine cases. Clear pathways around physical health checks	TEWV Carol Redmond	Q2: Performance is improving against trajectories, and 60% urgent and 40% routine cases meet targets. CEDS working group working on shared care arrangements for physical health checks.	
8	Reduction in admissions to acute and CAMHS units for eating disorders	2017/18 as baseline: below 5 admissions for either eating disorders or with associated eating disorder.	TEWV: Carol Redmond	Q2: TEWV crisis team reviewing approach towards community support for those with eating disorders. Additional teaching time at Mill Lodge inpatient unit, afternoons will now include teaching time, with staff also able to undertake outreach teaching for those on edge of admission or recently discharged.	
9	Reduction in admissions to acute wards for young people in mental health distress (self-harm)	2017/18 part year measures as baseline: 65 admissions of which 44 were out of hours.	TEWV: Carol Redmond	Q2: TEWV crisis team developing options for 24 hour service from early 2019.	

10	Children and young people within the YOT have access to effective support for emotional and mental health needs	<p>Effective interventions from CAMHS.</p> <p>Effective interventions form Psychology support and SLT support funded through NHSE and OPCC</p> <p>Effective signposting and support through FCAMHS service</p>	<p>YOT Sara Orton</p> <p>NYCC YOT Steve Walker</p>	<p>Q2: FCAMHS risk panel meeting with support from FCAMHS to advise and case plan for at risk children and young people. Funding received from NHSE and OPCC for psychology and SLT support</p>	
11	Outcomes for children and young people accessing CYPMH support are improving	<p>Outcome measures include din DQIOP for 2018/19, including the national indicator due in 2019/20.</p>	<p>TEWV Carol Redmond</p>	<p>Q2: DQIP on target to offer outcome measure in Q1 2019/20</p>	
12	Reduction in waiting times for CAMHS assessment and treatment	<p>Target: 90% assessed in under 9 weeks from referral.</p> <p>Reduction in waiting times for start of therapeutic support</p> <p>Reduction in waiting times for autism assessments, and improved communications and information for families</p>	<p>TEWV: Carol Redmond</p>	<p>Q2: performance 57% against target. CCG additional investment of £120 K recurrently and additional TEWV investment of £50K recurrently to tackle issue following capacity and demand gap analysis: staff appointed and second half improvement expected.</p>	
13	Meet actions and recommendations for the JTAI inspection in September 2018	TBA	TBA		

Section Summary

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Ensuring Transparency, Joint Commissioning and Partnership Working

Scope:

The 2015 LTP commits the CCG and partners in local authority to working together to improve children and young people's emotional and mental health. Increasingly the approach is for joint commissioning structures to deliver change against a backdrop of limited resources.

Summary of achievements to date

1. Health and Well-Being Boards for all local authorities actively engaged in emotional and mental health issues
2. Integrated Commissioning Board, Strategic Partnership for Emotional and Mental Health for COY/NYCC, and Children's Trust Board and YorOK Board develop and monitor the actions to deliver the mental health strategies
3. All-age autism strategy for City of York and North Yorkshire County Council
4. All-age Mental Health Strategy for City of York and North Yorkshire County Council
5. Co-production of SEND Strategy for North Yorkshire County Council
6. Co-production of LD Strategy for City of York
7. Local Transforming Care Partnership Board
8. New Models of Care Programme Board with NHSE and TEWV
9. Jointly funded with COY Head of Joint Commissioning
10. System Leaders forum in North Yorkshire to drive closer working and joint commissioning
11. Co – commissioning of school well-being worker services in City of York and North Yorkshire County Council

Ensuring Transparency, Joint Commissioning and Partnership Working Action Planning 2018/19					
No	Action	Outcomes	Lead	Action update at Q end 2018/19	RAG at Q end
1	Implementation of all age mental health strategy (City of York) and action plan: <ul style="list-style-type: none"> Getting better at spotting the early signs of mental ill health and intervening early Improve services for mothers, children and young people 	Actions reflect strategic aims and deliver to MH strategic outcomes: metrics reflect improvement	Who/all?	Q2: Partnership Board established	
2	Effective implementation of NYCC mental health strategy		NYCC: Cerys Townend	Q2: SEMH joint implementation plan for NYCC CYP	
3	Engagement with local authority youth councils and young people	Demonstrable involvement of children and young people in strategic planning and service improvement	Who/all	Q2 OPCC: Youth Commission Report published regarding relationships between Police and children and young people COY: engagement with Youth Council to think about protective factors and how to promote them TEWV: #####	
4	Consider with partners the long term approach to service delivery for emotional and mental well-being to ensure integrated services to meet all levels of need	Strategic view of long term joint commissioning approaches in conjunction with local authority partners			
5	Improved transparency for children, young people and families around pathways of care and information about waiting times, and care	Pathway mapping with partners and parents as base for improved communications and partnership working with parents.			
6	Monitor increase in numbers of children and young people receiving interventions for a diagnosable mental health condition receiving support from an	NHSE target is 7% increase in numbers: 2018/19: 32% 2019/20: 34% 2020/21: 35%	TEWV: Carol Redmond	Q2: performance against national indicator currently 39%. Discussions with LA colleagues in COY establish that there are not resources to enable regular flow of data. Issue being discussed with Embed as the CCG's data support provider. CCG	

	<p>NHS community funded service</p>	<p>All NHS funded MH services able to flow data to NMHDS</p> <p>Work on flowing non NHS funded work to NMHDS</p>	<p>COY: Emma Hughes</p> <p>CCG: Susan De Val</p> <p>NY: Lisa Gale</p> <p>NYCC: Emma Lonsdale</p>	<p>involved in work to review how to bring non-NHS funded data into the MHDS</p>	
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Section Summary

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Q4					
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