

Future in Mind Local Transformation Plan (LTP) refresh 2017

Summary

1. The report provides an overview of the work to implement the LTP and sets out the themes for inclusion in the 2017 refresh. The Health and Well Being Board is asked to:
 - a. Note the report and direction for the Local Transformation Plan in 2017/18
 - b. Delegate authority to the Chair of the Board to approve the LTP for submission to NHS England on 31 October 2017.

Background

2. *Future in Mind* described the vision and steps to transform the way in which services support children and young people's emotional and mental health. The LTP sets out locally how to achieve step change within the CCG area, working across partners and stakeholders. The Vale of York CCG LTP published in 2015 and refreshed in 2016 was prepared in consultation with a wide range of stakeholders including children and young people and written in close collaboration with City of York and North Yorkshire County Council colleagues. The plan outlined both NHS –mandated and local priority themes:
 - a. Community eating disorder service across North Yorkshire and York (NHS mandated).
 - b. Development of 'Children and Young People's IAPT' principles: these focus on workforce development, service transformation and patient experience (NHS mandated).
 - c. Promotion, prevention and early intervention (local priority).

- d. Easier access to support.
 - e. Support for the most vulnerable.
3. The funded schemes under the LTP are:
- a. Community eating disorder service: a single service across North Yorkshire and York to provide specialist support to meet national delivery targets by 2020. In 2016/17 Tees Esk and Wear Valleys NHS Trust (TEWV) report there were 65 referrals into service within Vale of York. Staff are continuing training to deliver to the national waiting time standards.
 - b. City of York school well-being service, jointly funded by health and schools: each school cluster has a dedicated well-being worker to advise and support staff, and undertake work with individual and groups of pupils. In the first 6 months, over 260 pupils were referred to the well-being workers for advice or support, and the work with school staff has resulted in schools reporting higher levels of confidence in responding to pupils with apparent emotional and mental health needs. The service is overseen by the Strategic Partnership for Emotional and Mental Health (SPEMH) and is regarded as an example of best practice in early intervention.
 - c. North Yorkshire County Council school well-being service: delivered by Compass, a third sector provider, from September 2017 there will be 8 workers across the county, offering advice, training and support to school staff, but not undertaking work directly with pupils.
4. The re-tendered Vale of York CCG mental health contract commenced in October 2015 and included service developments that are key to delivery of the LTP: the single point of access is now operational, and the crisis response offer has now been extended through funding from the New Models of Care programme to offer extended hours of operation and develop intensive home support to prevent admissions and provide some step down treatment after discharge from an inpatient unit. The extended service commenced in June 2017 and there is some anecdotal evidence from York Hospital that the numbers of admissions to Ward 17 from A&E has reduced.

5. The SPEMH is the delivery board for emotional and mental health and has a key role in determining and reviewing the progress of the LTP.
6. There are now national targets and performance indicators for children and young people's mental health services (CYPMH); these cover levels of access to services, and waiting times for eating disorders and psychosis services. Local performance monitoring is now focused on reducing waiting times for all parts of the CYPMH service. The first quarter report for access waiting times for CYPMH general admissions shows that 65% of full assessments (2nd appointment) were undertaken within 9 weeks of referral at the end of June, up from 52% in April. Members will be updated regarding the June position at the meeting.

Preparing the LTP refresh for 2017/18

7. Attached at Annex 1 is the assurance return for 2016/17 to NHS England, which details the work across the CCG area for CYPMH.
8. At Annex 2 is the detailed feedback from NHS England from the 2016 LTP refresh, which provides assurance that there is positive progress towards meeting the aspirations of the LTP, and also highlights areas for further work in 2017/18 and beyond. The feedback is across the four North Yorkshire CCGs, thus some comments are not directly applicable to City of York
9. Work is in hand to review and plan for 2017/18 and beyond. NHS England has issued detailed guidance for the LTP (at Annex 3): we are working with colleagues across all agencies to ensure that specific information required is included in the LTP
10. The LTP must incorporate both national and local priorities. National guidance is currently focused on:
 - a. Early intervention, particularly in schools
 - b. Workforce development to provide up to 10,000 additional staff nationally (it is not clear how this is to be funded)
 - c. Integrated commissioning and delivery structures
11. In setting local priorities for detailed planning, discussions with colleagues, feedback from children, families and providers indicate a focus on systems issues which have potential to significantly

impact on the outcomes and experience for children and young people:

- a. Transitions in and between services: this is an area of real concern for young people and families, and the whole system needs to ensure it manages care and communication to ensure the best outcomes and experience.
 - b. Vulnerable groups of children and young people: those in contact with the youth justice system, children looked after, those with complex needs all need a specific offer of support, and the structures of care and support should be assured to be robust.
 - c. Increasing the awareness of and availability of early support including mentoring, peer support and counselling; these types of intervention reduce necessity and pressure to refer to Limetrees or other specialist services.
 - d. Reducing waiting times further.
 - e. Workforce development plan.
 - f. Commissioning intentions up to and beyond 2020 to examine the scope for greater integration of services, and broadening the base of support for children and young people.
12. The timetable for the LTP is as follows:
- a. Publication on or by 31 October 2017: the Health and Well being Board must approve the Plan, hence the recommendation that the Chair have delegated authority to sign the Plan.
 - b. Discuss the draft LTP at the Health and Well-Being Board Development meeting on 6 October, to allow for informal consultation prior to finalising the LTP.
 - c. Discuss the themes and outline at the SPEMH on 19 September 2017.

Consultation

13. Discussions are in hand with partners and stakeholders across a range including police, TEWV, YOT, colleges, third sector,

Healthwatch, and public health. These will inform more detailed planning.

Options

14. Not applicable.

Analysis

15. Not applicable.

Strategic/Operational Plans

16. The York Health and Well Being Strategy includes mental health and well being as a key theme, with a top priority to spot early signs of mental illness or distress, and actions include improving services for children and young people.
17. The Vale of York CCG Strategic Plan includes as an objective “high quality mental health services for the Vale of York, with increased awareness of mental health conditions, improved diagnosis and access to complex care within the local area”. The key programmes for mental health delivery include access, early involvement and crisis avoidance for children and young people’s mental health services.

Implications

- **Financial:** there are no implications
- **Human Resources (HR):** there are no implications
- **Equalities:** there are no implications
- **Legal:** there are no implications
- **Crime and Disorder:** there are no implications
- **Information Technology (IT):** there are no implications
- **Property:** there are no implications
- **Other :** none known

Risk Management

18. Not applicable.

Recommendations

19. The Health and Well-being Board to asked to
 - a. Note the report and direction for the Local Transformation Plan in 2017/18
 - b. Delegate authority to the Chair of the Board to approve the final LTP

Contact Details

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**Report
Approved**

Date *Insert Date*

*Chief Officer's name
Title*

**Report
Approved**

Date *Insert Date*

Wards Affected: *List wards affected or tick box to indicate all [most reports presented to the Health and Wellbeing Board will affect all wards in the city – however there may be times that only a specific area is affected and this should be made clear]* **All**

**For further information please contact the author of the report
Background Papers:**

All relevant background papers must be listed here. A 'background paper' is any document which, in the Chief Officer's opinion, discloses any facts on which the report is based and which has been relied on to a material extent in preparing the report

Either the actual background paper or a link to the background paper should be provided.

Annexes

1. Assurance report to NHS England April 2017
2. Feedback report from NHS England for LTP 2016
3. NHS England guidance for the LTP 2017

Glossary

A separate document must be attached to each report which clearly lists in alphabetical order any abbreviations used within the report and its associated annexes.