

Merton Council

Health and Wellbeing Board

25 June 2019

Supplementary agenda

7 CAMHS LTP Refresh

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This Report is published late as part of a Supplementary Agenda.

The Chair has been informed and has approved this publication.

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Committee: Health and Wellbeing Board

Date: 25 June 2019

Wards: ALL

Subject: CAMHS Local Transformation Plan for Merton

Lead officer: Leanne Walder

Lead member: Councillor Tobin Byers

Contact officer: Leanne Walder, Head of CSF Commissioning

Recommendations:

A. This is a requirement to enable the Health and Wellbeing Board Chair to sign off the Child and Adolescent Mental Health Service (CAMHS), Local Transformation Plan.

- 1.1 The purpose of this report is to outline assurance requirements to enable allocation of CAMHS Transformation monies and to request the Health and Well-Being Board (as part of those requirements), to sign off our local submission.
- 1.2 An all-party taskforce ambition set out by Future in Mind (2015), supported the case for change in the organisation and provision of mental health services for children and young people across the country. The focus for improved public awareness and understanding of mental health issues, timely and improved access to mental health support for those who need it.
- 1.3 The investment of extra funding to transform mental health services for children and young people; aligning spend with the recommendations within the review and the Five Year Forward View (NHSE 2016).
- 1.4 The guidance requires CCGs to work with all local partners to develop an agreed transformation plan.
- 1.5 The guidance also requires that Transformation Plans are signed off by a nominated member of the Health and Wellbeing Board. This is required to be the HWB Chair, DCS, DPH, Lead Member for children and young people or the portfolio holder for health.
- 1.6 Merton CCG has been working with local partners to develop the Local CAMHS LTP since its inception in 2015 and the review of CAMHS Health Needs Assessments thereby enabling priorities within the transformation plan to be set.

2.0 BACKGROUND

- 2.1 Future in Mind published in March 2015 by the Department of Health and NHS England (NHSE), represents the work of an all-party taskforce, setting out the

case for change in the organisation and provision of mental health services for children and young people across the country. The report sets out an ambition for improved public awareness and understanding of mental health issues, timely access to mental health support for those who need it and improved access and support for the most vulnerable groups. The whole systems approach to mental health and well-being is centered on five themes;

- Promoting resilience, prevention and early intervention
- Improving access to effective support in a system without tiers
- Care for the most vulnerable
- Accountability and transparency
- Developing the workforce

2.2 Additional monies for the transformation has been given yearly and promised until 2020.

2.3 Local Transformation Plans are required to cover the full spectrum of service provision and address the needs of all children and young people including the most vulnerable, making it easier for them to access the support they need when and where they need it.

2.4 The national ambition is to achieve transformation by 2020/2021.

2.5 CAMH Needs Assessment and Service Review helps to inform the development of these CAMH LTP's.

2.7.1 The CAMH LTP, was written in-line with the Future in Mind (2015), recommendations and the recommendations that came out of the 2015 local review, the Green Paper "Transforming children and young people's mental health (2017). Green Paper Trailblazer pilot sites to test proposals (2018), Mental Health 5 year Forward View (2016), CAMHS Transformation (2015-2020), and New Models of Care (2017 onwards).

3.0 DETAILS

3.1 Published national guidance by NHSE in August 2015 for the implementation of key recommendations included:

- CCG submitting the Plan and associated documentation on behalf of the local Health and Wellbeing Board and wider partners.
- The plan will need to demonstrate compliance with the core principles and ambition described in *Future in Mind* and in the subsequent NHSE guidance;
- Sign off by the local Health and Wellbeing Board, NHS England Specialised Commissioning team and CCG are mandatory and required before monies will be released.
- Submission of the transformation plan is required to NHSE on a yearly basis in the autumn.

3.2 The CCG will be required to submit progress to NHS on the delivery of the local transformation plans which is in line with their assurance framework.

The key assurances NHSE will seek nationally are that:

- Local Transformation Plans are published and made widely available;
- Children, young people, those who care for them and all local partners have been involved in developing the Plans;
- The additional money is being spent for the purposes intended;
- Locally determined Key Performance Indicators (KPI's), are being met.

4.0 ALTERNATIVE OPTIONS

4.1 None

5.0 CONSULTATION UNDERTAKEN OR PROPOSED

5.1 Consultation took place prior to the development of the Initial LTP through the CAMH Service Review and Health Needs Assessment for Merton.

5.2 Consultation/engagement was undertaken with stakeholders and professionals working with children and young people and specifically with children, young people and parents/carers.

5.3 Consultation was undertaken through 1:1 interviews, group discussion, forums and online surveys. Ongoing involvement of children and young people will continue to inform future LTPs.

6.0 TIMETABLE

6.1 Submission of Local Transformation Plan Refresh to NHS England is expected sometime in September/October 2019

7.0 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

7.1 If guidance is not followed, monies to improve CAMHS transformation will not be allocated

7.2 Merton CCG was allocated £572,000 in 2018-2019 and £743,000 for 2019-2020 to support the provision of CAMHS transformation, focusing on improving our eating disorder service, addressing our Access and Waiting Times Standard and neurodevelopmental services.

8.0 LEGAL AND STATUTORY IMPLICATIONS

8.1 None

9.0 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

9.1 Equalities impact is undertaken as part of the LTP development to minimise any negative impact on any of our children and young people and to ensure that we are providing the best services we can, fairly, to those who need them.

10.0 CRIME AND DISORDER IMPLICATIONS

10.1 None

11.0 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

11.1 None

12.0 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- Local Transformation Plans for Children and Young People’s Mental Wellbeing; NHS England, August 2018 Refresh.



Merton CYP
Transformation Plan 2

- Future in Mind; Promoting, Protecting and Improving Our Children and Young People’s Mental Health And Wellbeing; Department of Health, NHS England, March 2015
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf

13.0 BACKGROUND PAPERS

Assurance Report - LTP Refresh 2019

Author: Sarah Keen

Clinical lead: Dr Subhro Mukherjee

Date: 12/ 06/ 2019

Executive Summary

Context

In response to the 'NHS Five Year Forward View for Mental Health (2016), and 'The Future in Mind' (2015), the responsibility of leading and transforming child and adolescent mental health services within Merton borough lies with the CCG. The annual provision of extra funding for Merton through the Local Transformation Plan (LTP), between 2015 to 2020, has enabled us to continue creating a system of prevention and early intervention to support children, young people and families at an earlier stage and to further develop their resilience within this provision.

The transformation plan for Children and Young Peoples Emotional Health and Wellbeing services (and other related children's services, including education and social care services), will ensure children have better emotional and mental health outcomes and will reduce the number of young people admitted to hospital for mental health conditions and their length of stay in hospitals.

In Merton, our vision continuous to remain that we want ***“every child in Merton to enjoy good mental health and well-being and to be able to achieve their ambitions and goals through being resilient and confident”***. We hope that in 2019 and beyond, given the progress that has already been made, we will continue to foster the involvement and voice of CYP and their families to improve our CAMHS services

The Local Transformation Plan (LTP), will be 'Refreshed', following current receipt of new Key Lines of Enquiry (KLoE) from NHS England, and must be submitted in autumn 2019. This 'assurance report' is required for the Health & Wellbeing Board (HWB), who have oversight of transformation of CAMHS and are asked to sign-off the annual refresh before its submission and online publication. There are a few areas that need extra focus to strengthen the assurance process for the KLoE's, namely the LTP ambition for 2018-2020, Data access and outcomes, financial delivery increment and transformation road map.

Questions this paper addresses

The Local Transformation Plan (LTP) Refresh was over 100 pages long, in 2018, with data and evidence required by NHS England, which colleagues are welcome to revisit to understand the trajectory of our services and the broad focus of this strategic document. However, this summary report (ahead of the full 2019 Refresh) should give the reader a good indication of strengths and weaknesses of our programme, and our plans for the year ahead.

This paper will cover progress made and challenges for the year ahead. Key questions of focus are as follows:

1. *What progress have we made towards our key objectives in 2018-19?*
2. *What challenges we continue to have in transforming CAMHS services?*
3. *What new opportunities and risks exist for the year ahead and 2020-2021?*

Conclusion

Merton CCG is managing its Local Transformation Plan programme of services, ensuring a good range of services exist and has made progress towards filling gaps in services in 2017-2018. There are other transformations expected to take place in 2019-2020

We have worked with partners and providers to improve reporting and monitoring, putting in place new impact based KPIs, reporting mechanisms and data analysis, so that as the new system of services grows our partnership can continue to have a clear focus on improving young people outcomes.

We will continue to keep the Local Transformation Programme (LTP), on-track to enable us achieve and surpass the key objectives set us by NHS England by March 2021, for example to increase the number of young people accessing CAMHS services by 35% over this period.

Input Sought

We would welcome the Health and Wellbeing Board's to approve the final sign-off, of our LTP Refresh 2018/19. The information below summarises that we are on track in transforming CAMHS services in Merton for our CYP.

The Report

Performance of CAMHS Transformation 2018-19

WHAT PROGRESS HAVE WE MADE TOWARDS OUR KEY OBJECTIVES?

CAMHS LTP

The programme continuous to be informed by Merton CAMHS Health Needs Assessment and the London Borough of Merton's Children and Families 'Voice Framework review for 2017/18, as well as other engagement forums that has been completed with CYP, families and professionals working with CYP in the borough.

The focus of the Five Year Forward View (2016), and Future in Mind (2015), has and will continue to enhance past and future CAMHS LTP, enabling resilience, prevention and early intervention to support the emotional wellbeing of CYP. Merton CCG has engaged a good plan for the transformation of services for CAMHS working in Partnership with Education, Social Care and voluntary organisations to set up and mobilise a spectrum of preventative, early intervention and transformational care.

Each year NHS England has provided new Key Lines of Enquiry (KLoE), which Commissioners will respond to in the Refresh for 2019. Given the significant progress that has been made against key objectives, our focus will be to enhance areas commented upon as needing more information i.e.: -

- Our LTP ambitions up to 2020,
- Data access and outcomes, clear financial delivery plan and a
- Transformation road map

Significant strengths of the current Merton LTP, have been the integrated commissioning with our Local Authority colleagues, the positive engagement with CYP, families, professionals working with CYP and other voluntary sector organisations to inform the local delivery.

Waiting Times – Increased Access to Services 2018/2019

The Single Point of Access (SPA) has enabled Merton to maintain low waiting times from referral to assessment with the extra funding invested. The service continues to be able to offer prompt responsive triage to all referrals received, with almost 100% of patients meeting the target of 24 hours. The 14-day triage to assessment target is met within an average of 6.1 days. This is an ongoing improvement compared to 2017/18, Q1 2018/19 (7.6 days) and Q2 (6.5 days). Despite a significant increase in referral numbers over the

years, as per table below, responsiveness of the service generally remains consistently good. This is a credit to the team who have worked hard to improve speedy access.

Year	Number of Referrals	% increase
2016/17	1555	0
2017/18	1905	23%
2018/19	2107	35%

Enhanced Counselling Service for CYP - (Getting Help)

Off the Record (OTR), has been procured and commissioned by the CCG to provide an extended counselling service for young people aged 11-18 in Merton, with the service mobilising in April 2019. The referrals into this “getting help” service are via SPA, self-referrals, GP’s and other professionals. The new service includes access to both face-to-face and online counselling. Additionally, Off the Record have attracted external funding to extend its service delivery to age 25.

Eating Disorder (ED) Service

The 2018/2019 priority of delivering a community eating disorder service specification that ensures adherence to the notional access standard for routine (4 weeks), and urgent referrals (one week) has been developed, and now at the sign off phase. The joint review of the ED service specification across SWL has been developed to line in with NICE guidelines and to ensure that the commissioned service can reduce admissions to inpatient beds by making sure of the inclusion of:

- Early intervention support
- Day services
- Therapy support
- Adolescent ward provision

Listening and Engagement with Young people and families

In 2018/19, Merton has continued its transformation journey to improve the emotional health and wellbeing of children and young people. Merton has always listened to the views of local people, including young people on health and well-being with enhanced engagement activities to discuss the priorities for CYP mental health commissioning and plans. The engagement and listening programmes have included learning from outcomes and themes some of which were across South West London.

Health and Justice

Merton has a robust healthcare pathway in place for children and young people on the edge of and already in the criminal justice system, including the commitment to the provision of a core statutory service to the Youth Offending Team, building on this to ensure sufficient provision and delivery of the new Liaison and Diversion service will continue to be a future LTP focus. A user voice for the YOT board and team has also

been established through CCG underspend (Liaison and Diversion) this project supports young people from across the service to undertake a leadership programme and to have a voice in the wider adolescent services.

Local Autism Strategy and Local Parenting support/offer

Merton continues to commission 'parenting offers' to support parents in Merton. Following the listening and engagement events, an area particularly identified as needing extra investment was regarding extra support for parents with a newly diagnosed child or young person with Autism. A Parent to Parent Drop in Clinic (run by Mencap), has been commissioned, and is due to be mobilised in June 2019. Commissioned support/training such as ADHD 123 magic – (intervention post diagnosis parenting support), Early Bird Plus Parenting support for ASD, ASD in young adolescent provided by an Educational Psychologist – (Parent group), continue to be the priorities in the future.

Transforming CYP's mental health provision in Merton – Green paper Trailblazer

With the successful bid for improving the emotional and mental well-being of CYP, Merton has now got a cluster of 16 schools with a population of 8,000 CYP. The workforce for the cluster consist of 4 Educational Wellbeing Practitioners (EWP), currently being trained until autumn this year, and a clinical supervisor who will be delivering focused interventions addressing some of the emotional and wellbeing needs of CYP. Mental Health in Schools Trailblazer has also adopted a whole school approach with the availability of training in Mental Health First Aid for all schools in Merton to send representatives, thereby increasing the Emotional Resilience programmes in schools.

Prevention of Admissions of Merton Young People with SEND

Through the Transforming Care Partnership there is a strong focus on reducing admissions and the length of admissions of young people with Learning Disabilities and/ or Autism Spectrum Disorders. The motivation for this, is driven by the poor outcomes of a young person being admitted into an institution. Due to this it is now a requirement that the CAMHS Commissioning Manager (in consultation with NHS England) organise and chair Care Education and Treatment Reviews (CETRs) for all young people at risk of admission. This is done in collaboration with several referral agencies including the CAMHS Teams, education and social services. Merton has seen an increase in the number of young people that require a CETR to avoid admission. CETR's that took place in the community often results in a package of support for the young person to help avoid unnecessary admissions.

WHAT CHALLENGES DO WE CONTINUE TO HAVE TRANSFORMING CAMHS

The following areas of challenge in 2018/19 will continue to be have a commitment to be addressed in 2019/20 and beyond.

The Neuro-Developmental Service and CAMHS Tier 3 (Getting More Help), continues to have waiting lists which are being addressed and will continue to be a committed area of focus. The extra investment to enable centralised assessment and treatment is yet to be mobilised due to recruitment issues. This will also see an increase in capacity for an extra 3 ADHD assessments a week.

The focus for the future will be ensuring access for our most vulnerable children and young people, including those looked after, and those with special educational needs, learning disability and neurodevelopmental needs.

Interventions for CYP who Self Harm in Merton

The WISH service which provided self-harm interventions from April 2019 ceased to provide a self-harm service in Merton. The current OTR team who provide a face to face and on line counselling service to young people will work with children who self-harm. The service has been commissioned to provide an educational input for parents on self-harm, and will work with young people who are potentially self-harming as self-harming is usually a by-product of an unstable emotional health and wellbeing. Initial discussions with OTR regarding the commissioning of the self-harm interventions 2019/20 has commenced.

CAMHS Special Educational Needs and Disability Provision and Support for Children with 'Severe Challenging Behaviour'

CCGs in South West London have seen an increase in the number of children with complex needs including Learning Disabilities and severe challenging behaviour. Merton CAMHS has no current provision for positive behaviour support resource for our SEND population. A South West London wide review is taking place on what this provision should look like in response to the growing demand, including the possibility of a CAMHS LD nurse, and a Behaviour Analyst.

Children's Continuing Health Care provision

CCGs across the UK are responsible for providing packages of support for children under the Children's Continuing Health Care. This include children with 'severe challenging behaviour' or children without a Learning Disability. We are currently looking at how this assessment can be improved to enable CAMHS children who are eligible to be supported to a package of support in a timely way.

Other areas

Our data collection system will continue to provide valuable information that can be used to support the provision of services. For instance, one of the areas that has been highlighted as an increase is anxiety. We are therefore addressing this by focusing the topic of our network forum on the recognition and referral pathways for SENCO's, teachers and other CYP CAMHS workforce. We will continue to be attentive and responsive to the needs of our CYP through the LTP.

Looking Ahead

WHAT NEW OPPORTUNITIES AND RISKS EXIST FOR THE COMING YEARS AHEAD

The emphasis on prevention, early intervention and access for CYP will continue to be a focus of our LTP's. The growing range of CAMHS services, including school-based provision, community-based provision, prevention, early intervention and specialist provision means that there is a growing risk of services becoming disjointed and not collaborating effectively. The CAMHS Commissioning Manager and other systems leaders have a crucial role to play in enabling a cohesive integrative approach.

Transforming CYP's mental health provision in Merton – Green paper Trailblazer – Extended workforce

We have also applied for two Expression of Interests (EOI), to support the provision of the emotional health and wellbeing for CYP in Merton. If the bids are successful, these teams will oversee emotional resilience programmes, by providing a range of one to one and group treatment interventions for CYP who do not meet the threshold for (Getting More Help), Tier 3 specialist CAMHS services.

1. Joint application submitted for Merton and Sutton with a focus on providing interventions for our CYP with SEND needs in schools and (an area that needs increased provision to support families)
2. Further Education (FE) Colleges – (pan SWL) committed to targeting inequalities across the whole of SWL CYP population, with a focus on building emotional resilience and preparation for adulthood. If the bids are successful, mobilisation will commence in January 2020.

In May, Merton also applied for the second Wave of the trailblazer for children and wellbeing practitioners (CWP's), to support another cluster of schools with a population of 8,0000. This has been successful and will enable another cluster of schools to be formed.

Empowering Parents Empowering Communities (EPEC) programme

The trailblazer programme will also facilitate the Empowering Parents, Empowering Communities (EPEC). This is a train the trainer programme. Initially the focus of the training will be on primary school children but there is scope to extend this to ASD/ ADHD, toddlers, teenagers once the trainers have completed this initial training which is due to start in July with the involvement of clinicians and parent volunteers).

South West London CAMHS Approach to 'Severe Challenging Behaviour'

Across South West London CCG's, we have seen an increase in the number of complex cases where there are severe challenging behaviour and where very substantial packages of support have had to be put in place, sometimes providing close two to one home support and part time Independent Behaviour Analyst input. It is likely that in future many of these children will require a package of support under Children's Continuing Health Care. This needs a skilled workforce to complete assessments to support commissioning arrangements, so that packages can be swiftly put in place in response to the individual needs of these children. In some cases, cost sharing protocols are also required between health, education and social care.

South West London CCGs are exploring the possibility of a pilot project of South West London wide MH and LD Nurses and Behaviour Analysts that could support the delivery of packages of support in these cases. Additionally, a new South West London wide commissioning function may also be needed, which we are jointly exploring.

Continuation of Training and Support for CAMHS workforce

As per past engagement sessions organised by Anna Freud Centre, a forum to support school's mental health leads outside the trailblazer is being organised termly.

Provision of resources to enable a skilled workforce will continue to be a commitment in the coming years via several avenues including commissioned training. The Network Forum currently provides another conduit where awareness and training is provided on topical issues which is experienced by our school's workforce. We will adhere to hear and assimilate the learning needs of the CAMHS workforce on an ongoing basis. For example, we are planning to increase staff awareness of positive behaviour support for our SEND CYP, a much-needed area in view of current numbers being referred.

Crisis Care Pathway (Including 24 Hour Emergency Response)

All CCGs are required to have a comprehensive Crisis Care Pathway which helps minimise the risk of CYP being admitted into hospital.

Part of the focus of 2019 will be to explore how the Crisis Pathway can be improved and particularly what additional hours of CAMHS A&E Emergency Care and Liaison might be possible.

Integrated Approach to Supporting Most Vulnerable

The growing range of CAMHS services, including school-based provision, community-based provision, prevention, early intervention and new specialist provision means that there is a growing risk of services becoming disjointed and not collaborating effectively. The CAMHS Commissioning Manager and other systems leaders have a crucial role to play bringing teams and parts of the system together, maximising opportunities for integration.

I-Thrive Conceptualisation model for CAMHS Merton

Merton is in the process of introducing the THRIVE Model for CAMHS, a proposal which was identified as necessary in 2018/19. We are proposing to replace the tiered model with a conceptualisation that addresses the key issues. The THRIVE model below conceptualises four clusters (or groupings) for young people with mental health issues and their families, as part of the wider group of young people who are supported to thrive by a variety of prevention and promotion initiatives in the community (see diagram below). The model outlines groups of children and young people and the sort of support they may need and tries to draw a clearer distinction between treatment on the one hand and support on the other. Rather than an escalator model of increasing severity or complexity, the model seeks to identify somewhat resource-homogenous groups

In view of this, a planned cross sector engagement event on **September 11th 2019** has been agreed.

Overview of the THRIVE Conceptual Framework

Description of the THRIVE-groups

Input offered

- Distinction between advice/support and evidence based ‘treatment’
- The five needs based groups are distinct in terms of the:
 - needs and/or choices of the individuals within each group
 - skill mix of professionals required to meet these needs
 - resources required to meet the needs and/or choices of people in that group

THRIVE Elaborated, Second Edition (Wolpert et al., 2016)

The concept enabling the whole community in supporting mental health and wellbeing. Proactively working with the most vulnerable groups. Emphasis on how to help children, young people and their communities build on their own strengths including safety planning where relevant.

RISKS OR CONCERNS

Fast Growing and Increasingly Complex System

The increased awareness of the importance of CYP’s mental health will see more referrals into CAMHS services. This is evident in the increase year on year as reflected in the SPA referral data, increasing pressure on commissioned services that were initially focused on a percentage of CYP, as has become visible with our SEND children and young people population. The challenge of maintaining and meeting good standards with the growing and increase demand of services will continue to present as an ongoing risk needing to be mitigated.

There is a need to build in to our annual programme time for quality checking and peer reviews to ensure services continue to meet the standards we require. Additionally, we need to build in time and capacity to effectively respond to priority areas identified as part of Learning Incidents, CQC inspects and Ofsted Inspections.

Crisis Care Pathway (Including 24 Hour A&E Emergency Liaison and Care)

The review of Crisis Care pathways, is important to address any fragmentation to enable the journey of CYP in accessing the right help at the right time and in the right place to be as seamless as possible.

Other challenges presented will be the importance of maintaining discussions with CCG directors on how the trailblazer workforce can be assimilated into the CAMHS workforce once the trailblazer funding comes to an end.

The other challenge will be embedding and addressing issues the THRIVE conceptual model in Merton will present, whilst the neighbouring CCG’s are still operating on a tiered model.

In Conclusion

THE PLAN	NEXT STEPS
<p>As the CAMHS Commissioning Manager I believe above summary of strengths and weaknesses reflects what will be in the full LTP Refresh. Merton’s approach to transforming services is the right approach to meet the needs of young people.</p>	<p>Building on the successful LTP programmes, our challenges are filling remaining gaps in provision, creating and embedding new model of care, embedding Mental Health Teams and provision around clusters of schools, building a more joined up system and improving the effectiveness of programmes, as outlined.</p>

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