

# HEALTH AND WELLBEING BOARD



<b>TO:</b>	Health and Wellbeing Board
<b>FROM:</b>	Vanessa Hollings – Divisional General Manager East Lancashire Hospitals Trust  Claire Jackson- Programme Director Integrated Commissioning Blackburn with Darwen CCG/LA
<b>DATE:</b>	8 <sup>th</sup> March 2016

## **SUBJECT:**

**Update on Children’s Emotional Wellbeing and Mental Health in Blackburn with Darwen**

## **1. PURPOSE**

The purpose of this report is to:

- Provide an update on local delivery of mental health services for children and young people
- Provide Health and Wellbeing Board members with an overview of service performance, immediate developments and challenges
- Provide an update on the Pan-Lancashire Transformation Programme to improve Children’s Emotional Wellbeing and Mental Health

## **2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD**

Health and Wellbeing Board members are requested to:

- Note the performance of local mental health services for children and young people
- Note the challenges outlined and support the continued joint commissioning of the services to prevent fragmentation
- Note progress in gaining NHS England assurance of the Transformation Plan and support publication with associated funding allocation
- Note Pan Lancashire governance structures for delivery of the Transformation Plan and support joint leadership around implementation of the plan across Blackburn with Darwen

## **3. BACKGROUND**

‘Mental health problems cause distress to individuals and all those who care for them. One in ten children need support or treatment for mental health problems. These range from short spells of depression or anxiety through to severe and persistent conditions that can isolate, disrupt and frighten those who experience them. Mental health problems in young people can result in lower educational attainment and are strongly associated with behaviours that pose a risk to their health, such as smoking, drug and alcohol abuse and risky sexual behaviour’ (Future in Mind, March 2015).

There has been a national focus to improve the emotional Health and Wellbeing of children following a National Taskforce led by the MP Norman Lamb. In 2015, a series of recommendations were made through the Future in Mind: Children and Young People’s Mental Wellbeing (2015, DoH, NHS England). The report recognises the wider influences on mental health and wellbeing and the benefits of a clinical approach whilst avoiding the risk of over medicalising children along the way.

Future in Mind recommended that a Transformation Plan be drawn up led by CCGs with oversight of local

## Health & Wellbeing Boards.

As a result of the report, commissioners and providers have come together to develop a Mental Health, Emotional Wellbeing and Resilience Plan which was submitted to NHS England and received final assurance in December 2015. This plan is a Pan-Lancashire document including Lancashire County Council, BwD and Blackpool Unitary authorities and 8 Clinical Commissioning Groups (CCGs).

Delivery of the plan is supported by the annual funding allocation of £332,082 for Blackburn with Darwen. It is expected that £94,796 of the funding be allocated to the Community Eating Disorder Service with an associated access target of 2 week wait. Blackburn with Darwen funding has been allocated on 3 levels;

- Pan Lancashire schemes
- Pennine Lancashire schemes
- Blackburn with Darwen Schemes

Allocations and Key Performance Indicators will be monitored quarterly through submissions to NHS England.

## 4. RATIONALE

### 4.1 Service Provision East Lancashire Hospitals Trust

East Lancashire Hospitals Trust provide East Lancashire Child and Adolescent Service (ELCAS), a specialist service for children and young people with mental illness which has historically been termed tier 2/3+ provision.

Services are based on an outpatient model of care with clinics being delivered within community settings including Barbara Castle Way Health Centre / Everybody Centre and local schools. There is a purpose built day care facility for ELCAS at Burnley General Hospital which children and young people may attend for intervention and education.

The ELCAS teams are configured as a central team of therapists and an intensive support team that work across Pennine Lancashire. In addition there are locality teams led by a consultant psychiatrist.

There are currently no staffing vacancies in the BwD locality team.

### 4.2 Immediate Developments

Considerable additional resources have been allocated to Child and Adolescent Mental Health Services (CAMHS) at a national level, some of which were released to CCGs earlier this financial year to support the development of local plans and Pan Lancashire provision.

CCGs have released the resources to providers to deliver on local priorities. For Pennine Lancashire these include:

- An enhanced Eating Disorders provision up to 17<sup>th</sup> birthday
- Primary Mental Health Care workers to improve access and early interventions for specialist mental health provision directly into primary care / schools
- Delivery of 7 day provision to assist with winter pressures to improve access to self-harm assessments and reduce bed days on the acute medical ward
- Scope the need for additional perinatal mental health support

These are all time limited projects, using non recurrent resources, following which it is envisaged services will be procured on a Lancashire basis. A challenge to delivery for these developments will be the ability to

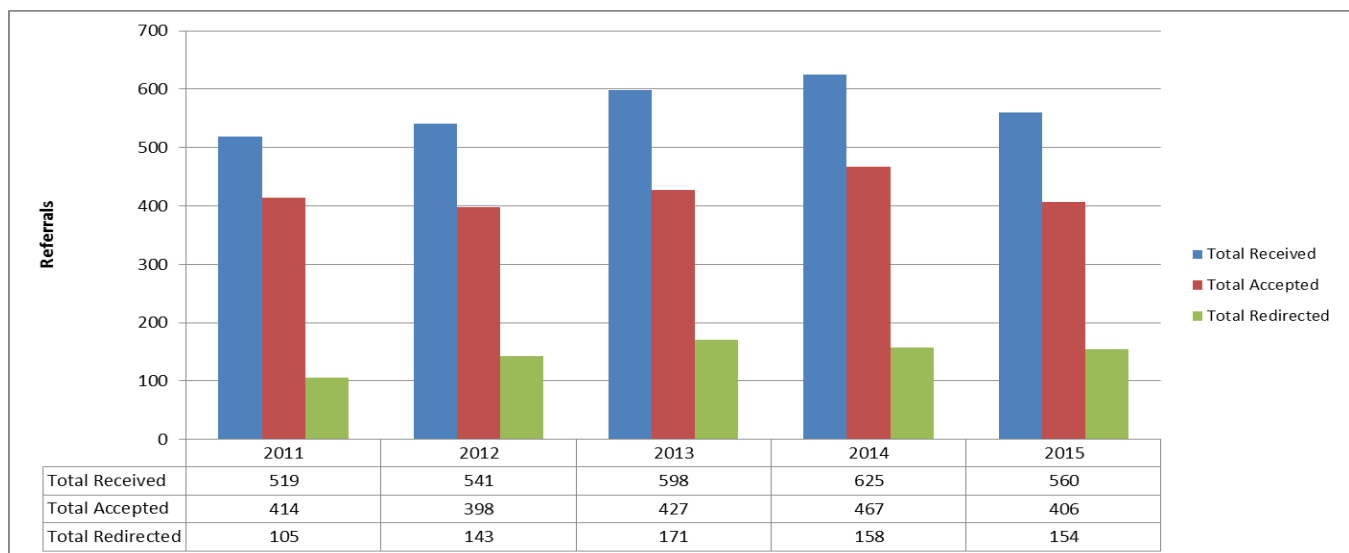
recruit as all providers will be seeking the same skill sets.

### 4.3 Performance Data

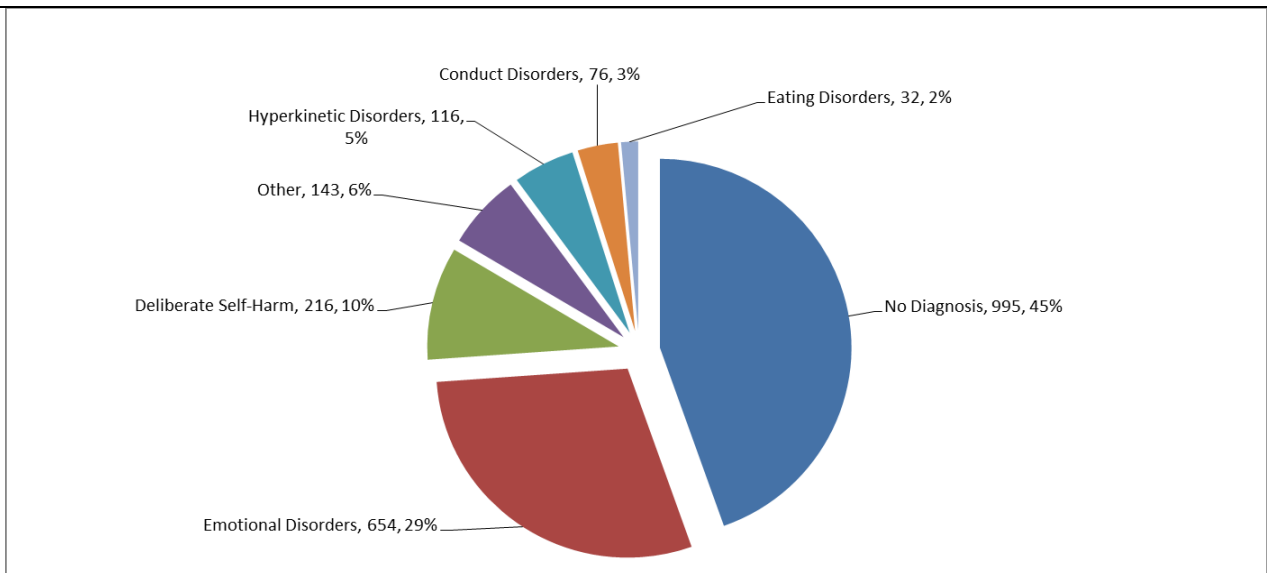
#### 4.3.1 Extract from contract monitoring dashboard for 2015/16

Indicator	Q1	Q2
	April - June	Jul – Sept
Referrals received	163	169
New cases	100	100
Follow up child and family contacts	916	825
Total direct contacts	1016	925
Number of patients	304	312
N2R Ratio	1:9	1:8
Discharged	106	124
% of discharged patients reporting an improvement	100%	75%
Intensive Intervention team contacts	17	10
Looked After Children	20	21
Waiting time from referral to attended initial assessment	3.6 weeks	

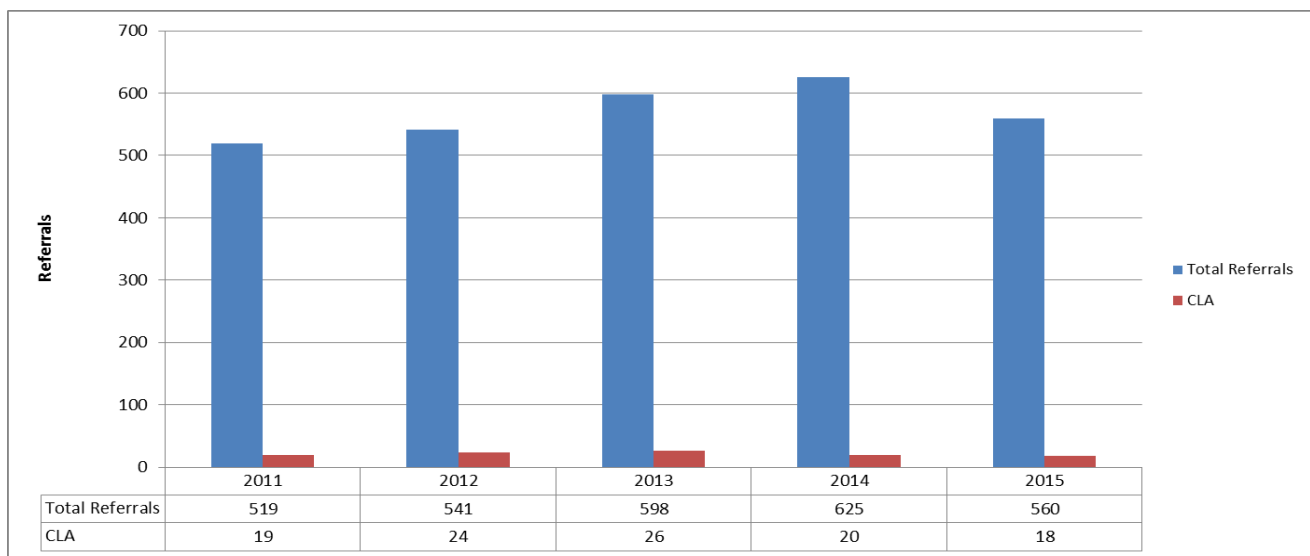
#### 4.3.2 Total referrals received by BwD locality team per calendar year



#### 4.3.3 Diagnosis summary of all cases accepted by BwD locality team 2011– 2015



#### 4.3.4 Looked After Children



The data shows low number of children in care accessing ELCAS services. Young people in care are much more likely to experience emotional health difficulties than other young people and specialist provision is commissioned separately to support them by the local authority. Only those young people who require specialist ELCAS provision would be referred to this service but many would receive a range of other commissioned services provided by psychologists and trained therapists.

Total LAC referrals	Average wait to treatment	Average length of treatment	Gender		Average age	
			Male	Female	Male	Female
23	3.5 weeks	16 weeks	13	10	13 years	13 years

#### 4.3.5 Waiting Times

Nationally waiting times for services have been increasing. The ELCAS service has prioritised seeing young people as quickly as possible to begin treatment and is committed to signposting to appropriate services without delay where required. This remains a challenge but currently ELCAS has the shortest waiting times for referral to treatment across Lancashire.

#### **4.4 Commissioning of Children's Emotional Wellbeing and Mental Health services**

The Emotional Wellbeing and Mental Health System Board leads the commissioning and delivery of children's emotional wellbeing and mental health services across Lancashire. The Governance Structure is set out in Appendix A.

Transformation Plans have been published with an easy to read version.  
<http://www.blackburnwithdarwencycg.nhs.uk/health/child-health/camhs/>

Delivery of the Transformation Plan will be led through the 5 key work streams, as required by Future in Mind with a continued emphasis through the Local Transformation Plan. They include

- Promoting Resilience, Prevention and Early Intervention
- Improve access to effective support including age appropriate services, Increasing Access to Psychological Therapies (IAPT) and Eating Disorders services.
- Care for the most vulnerable and Crisis Care
- Accountability and Transparency
- Workforce Planning

#### **4.5 Local Governance Arrangements**

A local group has been established across the Pennine Lancashire footprint called Future in Mind. This group is chaired by GP Clinical Lead for Children and Young People and has representatives from Public Health, Voluntary Sector, East Lancashire Hospital Trust CAMHS, Clinical Psychology Services at Lancashire Care Foundation Trust and Learning Disability Services. Since first meeting in December, progress to implement the plan is as follows;

- Self-harm training, including GP education sessions commissioned from the organisation Harm-Ed. This includes training for GP in education sessions
- Engagement with all education establishments to understand gaps and needs
- Consultation with young people around receipt of information to promote emotional wellbeing and use of technology
- Proposal to have a 'Passport' for young people with Learning Disabilities as a Quality Indicator within Acute and Community Contracts
- Funding bids to Health Education England submitted by CCG and Child Action Northwest to draw down additional resource for schemes to complement the Transformation Plan
- Commissioning Manager appointed to co-ordinate delivery outputs/outcomes across the two CCGs and Local Authorities
- Plans in place to submit a bid for Children Young People IAPT in June 2016 to commence in October 2016
- Workforce development (training and education) for Third Sector organisations to understand, recognise, develop and support resilience in children and young people.

#### **4.6 Children and Young People Increasing Access to Psychological Therapies (IAPT)**

Lancashire Care Foundation Trust has been tasked by the Systems Board to convene a sub group to bring together the three CYP IAPT partnerships in Lancashire to collaborate on the development of effective and productive partnerships along care pathways. This work will support our shared aspiration to improve participation, achieve consistency of access to high quality evidence based interventions and to have a common framework of outcome measures. This will demonstrate the impact on the lives of those children and families we care for.

The sub group will provide leadership and assurance regarding the successful implementation of CYP IAPT principles across Lancashire and support the development of effective local partnerships.

#### **4.7 Preventative Measures**

Future in Mind (DH, 2015) sets the clear intention that *“A whole system approach is needed focusing on prevention of mental ill health, early intervention and recovery”*, supporting a strong case for Public Health focussed prevention and early intervention programmes.

Blackburn with Darwen Public Health department are committed partners in the Pennine Lancashire Future in Mind Steering Group and have a strong influencing role to develop the prevention and early intervention offer within this partnership.

There are a number of programmes in Blackburn with Darwen currently funded by the Department of Health Public Health Grant, which support and enhance the early intervention and prevention agenda as outlined in Future in Mind.

- A digital company (Indigo) are currently commissioned by Public Health to co-produce, with children and young people, a ‘digital resource’ for Emotional Health and Wellbeing, due to be launched in June 2016. The potential to extend this provision across Pan Lancashire is being progressed. Public Health currently commission ‘Youth Mental Health First Aid’, which promotes positive mental and emotional wellbeing and support for young people who might be experiencing mental and emotional distress.

Public Health are currently working with partners to transform Healthy Child Programme Services (including the Early Help offer) for children and young people, through improved integration and delivery model, with a emotional health and wellbeing as a key outcome. Stakeholder engagement workshops are planned from February-May 2016 with a new model to be in place from April 2017.

#### **4.8 Adverse Childhood Experiences (ACE)**

Work is ongoing in BwD to highlight the impact of ACE on the future Mental Health and Wellbeing of the community. Research shows that educating young people at an early age can reduce depression and anxiety induced mental health issues that often exhibit themselves as self-harm.

These include:

- Problem Solving
- Parenting - to include being positive, persistent and a problem solver
- Resilience

Encouraging schools and other universal services to talk to children and young people about these areas could have a significant impact on their need to access more formal services at a later date.

## **5 KEY ISSUES**

### **5.1 Tier 4**

Nationally and locally there continue to be problems accessing Tier 4 provision in a timely manner with young people being placed on the children's acute medical ward for extended periods of time. Locally ELCAS provides an Intensive support team outreach provision. This area of development is being considered by the Crisis Group as set out in section 4.4.

### **5.2 Learning Difficulties & Challenging Behaviour**

East Lancashire Hospitals Trust has been successful in integrating the LD nurse previously employed by LCFT into the safeguarding unit to meet the needs of those with Learning Disabilities. Whilst this role focusses predominately on adults there has been engagement in the development of the CAMHS Transformation Plan through the Pennine Lancashire Group.

The CCG are in discussions with ELHT and LCFT to implement the use of a 'Passport' based on NHS England recommended guidance for young people with learning difficulties. The CCG has led a bid to Health Education England to fund resources and training of staff around LD and use of the passport.

### **5.3 Ward admissions following self-harm episodes**

There has been an increase in young people presenting to services following episodes of self-harm, mirroring the national picture. Self-harm can be considered a symptom of psychological distress. Each young person needs a comprehensive psychological assessment, and then on-going intervention to minimise this risk and treat underlying mental health issues. The increase in demand may represent an increase in primary service recognition of the difficulties, which is to be welcomed, but it does place a considerable demand on the community services. ELHT has expanded the assessment service to include weekends through the use of Transformation funding, but the trend of increasing need and demand may require a more substantive solution.

A self-harm needs assessment of school children will commence in March 2016. The final report will contain in depth analysis of trends around self-harm with recommendations for service providers.

Self-harm training courses have been commissioned from Harm-Ed. Previous training has been well evaluated. Training dates have been filled by Early Years, Education, Voluntary Sector and Health. Some sessions have been held in the hospital setting to encourage Accident and Emergency staff to attend. Training from N-Compass is being incorporated into future GP Education Events.

## **6. POLICY IMPLICATIONS**

Policy implications are outlined within the main body of this report.

## **7. FINANCIAL IMPLICATIONS**

Child and Adolescent Mental health is the one exception where additional money is being made available to develop services and reduce the inequity between resources in mental and physical health provision.

There are ongoing financial challenges to the delivery of all NHS, Public Health and Social Care services. Emotional wellbeing and resilience are embedded through the universal Healthy Child Programme funded by the Department of Health Public Health Grant, of which there is current uncertainty of future allocation.

## **8. LEGAL IMPLICATIONS**

At present there are no specific legal implications arising from this report.

## 9. RESOURCE IMPLICATIONS

There are risks regarding recruitment of staff across Pan-Lancashire especially the number of short term projects that need resourcing within a tight deadline. Services will be flexible and innovative regarding the skills and competences required to maximise the potential of successful recruitment.

It is anticipated that the workforce training and development strategy developed through the Transformation Plan will start to address these challenges. East Lancashire Hospitals Trust is working towards becoming compliant with Children and Young People IAPT requirements by October 2016. This will draw down additional funding for workforce training across Hospital, Community, Voluntary Sector and Commissioning Organisations. IAPT provides a joint outcomes framework that all partners will contribute to across the system to demonstrate improvement in emotional and mental health.

## 10. EQUALITY AND HEALTH IMPLICATIONS

The Transformation Plan aims to improve equality for underserved groups.

As with all NHS services individuals seen within the ELCAS service are seen according to clinical need.

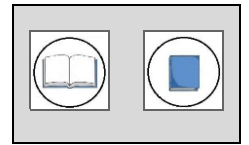
## 11. CONSULTATIONS

The Pan Lancashire Transformation Plan and local implementation plan have been informed by the Blackburn with Darwen Integrated Strategic Needs Assessment (ISNA) on Emotional Health and Wellbeing of Children and Young People which included engagement with over 250 local children and young people.

The Pan Lancashire Programme Office is leading on a Communications and Engagement Strategy. Locally funding has been made available to the Council to support engagement with young people which will be carried out this year through existing local engagement networks and third sector partners.

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<b>DATE:</b>	09/02/16
<b>BACKGROUND PAPER:</b>	Future in Mind (March 2015)





# Appendix A

## Governance Structure; Emotional Wellbeing and Mental Health System Board

