Improving Children & Young People’s Mental Health in Stockport

Local Transformation Plan 2015-2020
Summary Document

The full plan which includes a description of current mental health services for children and young people in Stockport and further details on population needs, service activity and investment can be viewed on NHS Stockport Clinical Commissioning Group website:

www.stockportccg.org
Introduction
This document summarises our 5 year plan to improve the availability, appropriateness and effectiveness of mental health services for children and young people in Stockport. The Plan has been produced by the Stockport Children and Young People's Mental Health Transformation Project Team; a multi-agency partnership led by Stockport Clinical Commissioning Group (CCG) in collaboration with Stockport Metropolitan Borough Council (SMBC) which includes representatives from health, social care and education services, voluntary sector organisations and parents.

The Project Team have consulted with wider services, public representatives, parents & carers and have listened to the views of children and young people. Our plans for improvement and new investment are consistent with national policy and are based on available evidence about effective practice. These plans are also informed by the needs of the local population and by what local people believe will secure and sustain improvements in the mental health of our children and young people.
Needs Assessment

Research conducted in 2004 by the Office of National Statistics (ONS) suggests that one in five children have poor emotional wellbeing and one in ten have a diagnosable mental health problem - conduct disorder, anxiety, depression and hyperkinetic disorders being the most common problems\(^1\). Based on this research, we would expect to see around 4,000 children aged 5 to 16 in Stockport living with a diagnosable mental health problem. In 2012/13 Stockport Child and Adolescent Mental Health Services (CAMHS) received 1,588 referrals for 5 to 16 year olds. By 2014/15 this had increased to 2,384 a significant increase, although this still represents only 50% of the child population predicted to have a mental health disorder – a prediction that is now widely thought to be an underestimation. In common with the national picture our information suggests that a large proportion of Stockport children and young people with mental health disorders are not accessing appropriate support for their conditions.

Failure to prevent and treat mental health problems in children and young people (C&YP) comes at a high price; not just in terms of the personal cost to the individual affected and their families, but also in terms of the high cost to society. There is a strong link between mental ill health in childhood and young adult hood and physical ill health, educational attainment, employment prospects, drug and alcohol misuse, teenage pregnancy and offending behaviour. Furthermore, over half of mental health problems in adult life (excluding dementia) start before the age of 14 years and 75% by the age of 18 years.

Future in Mind: A new vision for Child and Young People’s mental health

In March 2015 the Department of Health and NHS England published ‘Future in Mind’: promoting, protecting and improving children and young people’s mental health and wellbeing. This report of the Government’s Children and Young People’s Mental Health Task Force sets out a clear national ambition in the form of key proposals to transform the design and delivery of mental health services for C&YP by 2020. These include:

- improved public awareness and understanding and less stigma and discrimination around mental health
- an increase in the use of evidenced based, clinically effective treatments
- more visible and accessible mental health care and support for children and young people and families
- better care for children and young people in crisis so they are treated in the right place at the right time
- greater access for parents to evidence based parenting support programmes
- better care for the most vulnerable C&YP making it easier for them to access the support they need
- more training for professionals working with C&YP in child development and mental health so they understand what can be done to help and support those who are experiencing difficulties
- improved transparency and accountability across the whole system to drive further improvements in outcomes.

There is considerable overlap between the Government’s aspirations and the recommendations of Stockport Council’s Health and Wellbeing Committee following a review of local CAMHS in 2014. Specific recommendations for local services, some of which have been fully or partially implemented are published in the report ‘Mind the Gap:

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2 Future in Mind; Promoting, protecting and improving our children and young people’s mental health and wellbeing. DOH and NHS England, 2015
mental wellbeing and mental health services for children and young people in Stockport’

These include:

- joined up planning, commissioning and delivery of services between the NHS locally and the Council
- development of assessment and care pathways for C&YP with neurological conditions: Autistic Spectrum Disorder (ASD) and Attention Deficit and Hyperactivity Disorder (ADHD)
- better access to mental health support for C&YP with learning disabilities
- improved access to mental health support for Looked After Children (LAC) and care leavers
- development of mental health services for C&YP aged 16-18 to ensure young people don't fall between children’s adult services
- advice and training and providers of early years care, and for staff in schools and colleges to deliver mental health and wellbeing programmes and to support C&YP with emotional and mental health difficulties.

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The Voice of the Family

Our aim is to develop Stockport’s Children and Young Peoples Mental Health and Well-being pathway in partnership with children, young people and their parents and carers. We want Stockport families to feel able to take an active role in maintaining their own mental well-being and to find the best help, care and support easily when it’s needed.

*Future in Mind* was developed in partnership with children, young people and families and sets out a culture of listening to the voice of C&YP and families. We hold the view that C&YP and their families are the experts in their own needs and we will ensure that:

- C&YP have the opportunity to set their own treatment goals
- C&YP and families have the opportunities to shape the services they receive
- Services listen to experiences of care and respond flexibly to how C&YP and families would like the services to work for them
- C&YP and families have the opportunity to feedback and make suggestions about services and services we will tell them what has happened as a result of the feedback (i.e. you said we did)
Local Transformation Planning

Stockport Children and Young People’s Mental Health Transformation Project Team have considered each of the Government’s key proposals and the progress being made in relation to the local Scrutiny Committee’s recommendations. A Local Transformation Plan has been structured around the five main themes of ‘Future in Mind’:

- Promoting Resilience, Prevention and Early Intervention
- Improving Access to Effective Support
- Care for the Most Vulnerable
- Developing the Workforce
- Accountability and Transparency

Our Local Transformation Plan has been approved by the Department of Health and Stockport NHS Clinical Commissioning Group has received an additional income of £584,000 per year from 2015/16 towards the costs of implementing service improvements. This includes £167,000 per year earmarked for the development of specialist services for children and young people with Eating Disorders. For each of the main themes of Future in Mind and for Eating Disorders we have summarised what we are planning to do, what we expect to achieve, how we will measure success, and how we will use new funding.
Promoting Resilience, Prevention and Early Intervention

A key theme in ‘Future in Mind’ is the importance of valuing, recognising and promoting good mental health and wellbeing and the need to help children, young people and families adopt and maintain behaviours that build resilience and support good mental health. There is an emphasis on taking early action with those who may be at greater risk and on early intervention as soon as problems arise to prevent more serious problems developing.

What we are planning to do:

Work with schools to develop a ‘whole school’ approach to mental health and emotional wellbeing (MHEWB). This will include:

- development of tools and materials to promote and integrate mental and emotional wellbeing across the school curriculum
- specific preparation and support for vulnerable children in primary schools for transition to secondary schools
- support for school and college staff dealing with pupils who have mental health problems and opportunities for staff to improve their own wellbeing
- promote and support the use of self-care resources including digital, online mental health support programmes for C&YP particularly for those who do not need higher level support or who are facing a waiting period
- ensure there is a comprehensive local online directory of the support available and how to access it across all agencies for C&YP experiencing emotional and mental health difficulties
- enhance the provision of specialist support for parents and infants from pregnancy to 5 years to address early attachment, relationship and behavioural difficulties

Outcomes we expect to achieve:

- greater visibility of mental wellbeing/fitness content in school curricula
- transition plans for vulnerable children moving from primary to secondary schools
- peer support and supervision sessions held for schools staff
- annual multi-agency mental health and emotional wellbeing (MHEWB) networking events for school staff
• training teams established in schools with identified delivery plans, supporting integration of mental health and wellbeing content across the curriculum
• a purchasing resource developed for schools and colleges to help them to buy in high quality and effective support for their student’s MHEWB
• a comprehensive directory of mental health and wellbeing support options created and available to schools and other partners

Key performance indicators:
• Annual increase in % of education staff saying they have good knowledge of local health and wellbeing services including web-based resources.
• Annual increase in % in education staff saying they have good knowledge of health and wellbeing issues.
• Increase in the number of parenting consultations and interventions delivered by the Infant Parent Partnership (for children aged 0-5yrs).
• Increase in the number of staff in early years services who have completed children’s emotional health and wellbeing training programmes.
• Increase in usage of ‘With U in Mind’ website and in the number of self-help resources downloaded. (www.withyouinmind.nhs.uk)

New funding in this area will be used to:
• recruit specialist infant mental health practitioners to deliver more parenting interventions for attachment difficulties
• purchase ‘Incredible Years Beginnings’ training for early years staff
• provide evidenced based health promotion and resilience programmes in schools
• pilot emotional wellbeing tracking tools for schools and emotional wellbeing tool kits to assist schools to identify students who may be vulnerable and to provide appropriate support
• create an annual flexible budget for Public Health specialists in SMBC to sponsor rolling programme of mental health promotion initiatives for C&YP
Improving Access to Effective Support

A key theme of ‘Future in Mind’ is to move away from a tiered model of services, which often results in children and young people falling in the gaps between different services, to a more flexible needs based model (such as i-THRIVE⁴) where services integrate and collaborate to create seamless pathways of care and support.

What we are planning to do:

- create one point of information through a single digital portal for children and families and professionals to find out about local services and to access self-help resources
- establish a single point of access to targeted and specialist CAMHS through the local multiagency safeguarding and support hub (MASSH) so that CAMHS workers can provide expert advice to other children’s services
- provide dedicated named points of contact in targeted and specialist mental health services for every school and primary care provider including GP’s
- strengthen the link between children and young people’s mental health and learning disability services and services for C&YP with special educational needs and disabilities
- improve waiting times for assessment and treatment in targeted and specialist services
- improve the choice and flexibility in the way services are delivered away from traditional NHS settings
- improve support and intervention for young people in crisis to avoid unnecessary admission to hospital
- improve the coordination of mental health services for young adults and ensure a smooth transition between CAMHS and adult mental health services (AMHS)

Outcomes we expect to achieve:

- improved accessibility and visibility of mental health and emotional wellbeing services and a higher usage of digital self-care resources
- delivery of MHEWB services for C&YP at a range of community venues

- equitable access to and provision of MHEWB services across Stockport for all C&YP
- reduction in waiting times for assessment and treatment
- increase in the number of C&YP supported at lower steps in the service and a corresponding reduction in the level of demand for higher step CAMHS
- Improved service user experience and a reduction in the need for C&YP to move between services

**Key Performance Indicators:**
- Referral to treatment (RTT) within 2 weeks for those who experience first episode of psychosis
- RTT within a maximum of 18 weeks for C&YP for routine (non-urgent) CAMHS
- Referral to diagnosis for Autistic Spectrum Disorder within 12 weeks
- Annual increase in number of children with Attention Deficit and Hyperactivity Disorder monitored in primary care
- Annual reduction in the number of C&YP presenting in crisis and requiring urgent mental health care
- Annual reduction in number of C&YP detained in a place of safety under Section 136 Mental Health Act
- Annual increase in the number of CAMHS appointments provided in the community (non-hospital)
- Increased usage of ‘With U in Mind’ website
- Increased awareness amongst C&YP and families of the MHEWB services available across the borough.

**New Funding in this area will be used to:**
- recruit mental health link workers for schools
- develop the role of MHEWB co-ordinators/champions in schools and colleges
- recruit mental health link workers for locality Integrated Children’s Services (Stockport Family) and primary care
- reduction of the current RTT waiting times for routine CAMHS from between 20-32 weeks currently, depending on the team, to within an maximum of 18
weeks for all non-urgent referrals (this is the target for 15/16 and further reductions will be expected through service transformation)

- reform of the ADHD pathway to increase access in primary care
- create a single point of access to CAMHS through MASSH
- provide digital self-help resources and on-line directory
- provide community based counselling and self-directed support (including mentoring and supported leisure)
- survey and evaluation of community sites to deliver CAMHS
- provide IT equipment, database and networking in community sites including voluntary sector delivery partners
Care for the Most Vulnerable
There are some children and young people who have greater vulnerability to mental health problems but who find it more difficult to access help. A key message in ‘Future in Mind’ is that if we can get it right for the most vulnerable, such as looked after children and care leavers, then it is more likely we can get it right for all those in need. The aim is to support staff who work with vulnerable groups by providing access to high quality mental health advice when and where is it needed.

What we are planning to do:

- ensure that children and young people or their parents who do not attend (DNA) appointments are followed up and given help and support to engage with services
- develop flexible acceptance criteria, based on need rather than diagnosis, and bespoke care pathways for vulnerable children and young people including Looked After Children (LAC)
- improve assessment to identify those who have been abused and/or exploited and ensure referral to appropriate evidence based services
- strengthen the lead professional approach to coordinate support and services for children and young people with multiple and complex needs
- improve mental health care for young adults including Care Leavers up to age 25 who present in crisis
- to continue to develop specialist mental health input to the Edge of Care Team as part of a coordinated package of support for vulnerable C&YP and their families

Outcomes we expect to achieve:

- clearer understanding of the needs and access to services of the local LAC population and other vulnerable groups
- improvement in the wellbeing of all LAC and in the outcomes of all children and young people accessing mental health services
- reduction in the DNA rates and better engagement of vulnerable children and young people and families in mental health services (this applies to all children and young people)
• reduction on the number of LAC, care leavers and other vulnerable groups, presenting in crisis and requiring urgent mental health care (this also applies to all children and young people)
• clear pathways for vulnerable C&YP who present in a crisis

Key Performance Indicators:
• Annual % reduction in the SDQ (strengths and difficulties questionnaire) scores of looked After Children (LAC) in Stockport which are higher than the national average.
• Increase in % of SDQs completed, scored and made available to the health practitioner prior to undertaking the statutory health assessment.
• Annual % reduction in DNA rates for C&YP attending CAMHS appointments.
• Annual % reduction in number of C&YP presenting in crisis and requiring urgent mental health care.
• Increase in number of LAC and care leavers completing resiliency training.
• Increase in C&YP with learning disabilities receiving a Positive Behaviour Plan Across home and school.

New Funding in this area will be used to:
• recruit mental health workers for those in transition (age 16-18 years) and care leavers up to age 25
• recruit mental health workers linked to the Multi-Agency Support and Safeguarding Hub (MASSH)
• provide therapeutic interventions for LAC & care leavers who have high needs
• provide support and therapeutic interventions for C&YP who are victims or at risk of sex exploitation
• provide counselling for C&YP affected by domestic abuse
Eating Disorders

It is vital that children and young people with eating disorders, and their families and carers, can access effective help quickly. Offering evidence-based, high quality care and support as soon as possible can improve recovery rates, lead to fewer lapses and reduce the need for in-patient admissions.

What we are planning to do:

- in partnership with neighbouring CCG’s our intention is to commission a 7 day a week local specialist Eating Disorders Community Hub offering drop in sessions, support groups, individual assessments and treatments and family based approaches
- our ambition is that this will be a thriving community resource for young people and families and for those working with them including a library of self-help resources, a café and a centre for training events, groups and meetings
- staff at the Hub will be able to offer same day responses to screen referrals and will be able to carry out urgent visits where needed
- the Hub will provide education to the wider children and young people’s workforce, families/ carers and peers to increase awareness and skills and the support available for young people with Eating Disorders within the community

Outcomes we expect to achieve:

- a more equitable and standardised level of provision for children, young people and their families
- more timely access to evidence based community treatment
- fewer transfers to adult services
- earlier help for those with lower level eating disorders
- earlier step down and discharge from inpatient settings
- reduced use of both medical and mental health inpatient services
- reduction in crisis presentations and re-referrals to specialist services
- increased awareness and skill within the community including families/carers and peers
- release of capacity within generic CAMHS to enable shorter access times into the service

**Key Performance Indicators:**
The new national waiting time standard for children and young people with an eating disorder is:
- referral to treatment (RTT) within a maximum of 4 weeks for routine cases
- referral to treatment (RTT) within a 1 week for urgent cases

Further local KPIs will be agreed as a part a business case approval process. For example:
- reduction in those referred with eating disorders who are admitted
- reduction in the average length of stay for those who are admitted
Developing the Workforce

Developing the workforce is a key theme in Future in Mind, and much of what is recommended is for action at a national level such as mental health and wellbeing training in the Initial Teacher Training (ITT) course and extending the C&YP Improving Access to Psychological Therapies (IAPT) curricula and training programme. However, some of the recommendations are for local action and one of the key task of our Local Transformation Project Team is to develop a joined up multi-agency strategic approach to workforce development.

What we are planning to do:

- develop a comprehensive workforce strategy to make sure we have a workforce with the right mix of skills, competencies and experience to best support C&YP’s mental health and emotional wellbeing
- enhance the offer of consultation and advice, training and supervision by specialist and targeted CAMHS to professionals working in wider C&YP’s services across health, education and social care
- provide additional targeted mental health training to key professionals working in our schools and colleges and in Stockport Family locality teams so they can become MHEWB champions in their communities
- ensure the workforce in targeted and specialist CAMHS are skilled in the full range of evidence–based therapies recommended by NICE (National Institute of Clinical Excellence)

Outcomes we expect to achieve:

Professionals working with C&YP will:

- feel confident to promote good mental health and wellbeing to C&YP and families and identify problems early
- be able to offer appropriate support and refer appropriately to more targeted and specialist support
- exhibit the qualities and behaviour that C&YP and families would like to see
- use feedback from C&YP and families on a regular basis to guide treatment
- be trained to deliver evidenced based care appropriate to their discipline
- be trained to practice in a safe and non-discriminatory way
**Key Performance Indicators:**

- Increase in professionals stating they have good knowledge of local mental health and emotional wellbeing services including web-based resources.
- Increase in professionals stating they have good knowledge of the referral process into CAMHS.
- Increase in professionals stating they have good knowledge of a range of mental health conditions.
- Increase in the number of professionals who are trained in evidenced based treatment modalities.

**New Funding in this area will be used for:**

- A workforce skills audit across targeted and specialist CAMHS service
- Increased capacity in an integrated Tier 2/Tier 3 CAMHS service to deliver more consultation, advice, training and supervision to the children’s workforce
- Additional accredited mental health training for universal staff enabling them to identify and respond to children with emotional and mental health difficulties
- Additional training in evidence based parenting interventions for professionals working in early years
- Specialist training in EMDR - an evidenced based intervention for use by mental health professionals working with C&YP suffering trauma
Accountability and Transparency

The current system of commissioning CAMHS is fragmented with money sitting in different budgets in different organisations without clear lines of accountability. Also commissioners have limited access to information about how well services are performing and about patient experience and outcomes.

What we are planning to do:

- establish lead accountable commissioning arrangements for C&YP’s mental health and wellbeing with aligned or pooled budgets. Stockport CCG will work with the Local Authority and other partners including schools to coordinate commissioning across the borough in line with this Local Transformation Plan
- develop a joint commissioning framework across health, education and social care which aligned to the THRIVE model of care\(^5\) which will clarify our roles and responsibilities, commitments and contributions to commissioning for each of the needs based groupings described in this model e.g. getting advice, getting help, getting more help and managing risk
- Stockport CCG will monitor the implementation of the Local Transformation Plan (LTP) and will track the delivery of the key performance indicators. The LTP will be integrated with Stockport’s Health and Wellbeing Strategy which is overseen by the Health and Wellbeing Board
- ensure that investment from commissioners is fully transparent and published (see full Local Transformation Plan for details)
- work with our commissioning partners to agree a joint local service specification for an integrated targeted and specialist (Tiers 2/3) CAMHS based on the new model service specification developed by C&YP Mental Health Task force for NHS England
- encourage partnership working between providers in the voluntary, independent and statutory sector to develop creative approaches to improving access to services, particularly for vulnerable groups

• work with our providers to agree a common local data set and reporting framework which will enable us to monitor activity, waiting times and outcomes across all services

**Outcomes we expect to achieve:**

• strong leadership and accountability for the commissioning and delivery of C&YP mental health service across the borough

• a clearer picture of the mental health needs of C&YP in Stockport and whether these are being met and whether resource are being used effectively

**Key performance indicators:**

• An agreed joint commissioning framework to support the implementation of this Local Transformation Plan

• A strong Joint Strategic Needs Assessment for C&YP mental health

• A joint local service specification for integrated Tier 2/ Tier 3 CAMHS service

• Aligned or pooled budgets for specialist and targeted CAMHS

• A robust Quality and Performance Monitoring Framework to ensure delivery of local quality standards and KPI’s

**New funding will be used in this area to:**

• provide additional commissioning support to the CCG and LA

• commission work with the Child Outcomes Research Consortium to improve the way we collect and use outcome data and to support our participation in the i-THRIVE accelerator programme
Conclusion
This Local Transformation Plan is not set in stone; it is a five year programme of change and as such it is a ‘living document’ and will be subject to regular review by the Project Team and progress will be monitored by the CCG and our Health and Wellbeing partners. The initiatives and service developments proposed in this Plan have been co-produced with key stakeholders and there is a strong element of ‘designing by doing’.

Finally, Stockport Children and Young People’s Mental Health Transformation Project Team welcomes comments from all interested Parties on existing services and ways of improving provision.

You can have your say by completing the following on-line survey at:
http://www.surveymonkey.com/r/FamiliesStockport2

or, by emailing your comments about this Plan to stockportccg.communications@nhs.net