#### KIRKLEES HEALTH & WELLBEING BOARD

**MEETING DATE:** 25/08/16

TITLE OF PAPER: CAMHS Local Transformation Plan Update.

#### 1. Purpose of paper

The paper is coming to the Health and Wellbeing Board for discussion and update on the Transformation Plan outcomes and priorities submitted as part of the Local Transformation Plan requirements.

The Board has a clear defined role and responsibility in relation to the development, implementation and monitoring of Local Transformation Plan's. Therefore the paper has attached to it the most recent monitoring returns to NHS England.

#### 2. Background

The Health Select Committee held an inquiry into Children and Adolescent Mental Health Services (CAMHS). The committee heard evidence from experts who described a national picture of services with inadequate data, multiple commissioners, reductions in funding, growing demand and a historic tier system that is out of step with current initiatives to modernize, develop and deliver a more flexible, personalized NHS.

The national CAMHS Taskforce, led by Jon Rouse, Director General, Social Care, Local Government and Care Partnerships, was launched to make recommendations to improve commissioning and mental health services for young people and their families. The national report called 'Future in Mind' was published in March 2015. The report has made wide reaching recommendations in order to transform provision across all tiers of need.

Guidance issued by The Department of Health to Clinical Commissioning Groups in August 2015 required that a Local Delivery Plan to transform services was developed. This Transformation Plan was submitted on the 16th of October 2015 to the joint NHS England and Department of Education assurance process. It is a 5 year plan with a focus on ambitions for culture change over the whole time period, priorities and year 1 actions. The Kirklees plan was classified as receiving full assurance by NHS England, and held up as an example of national good practice.

The funding was released in 2015/16 to start implement the year 1 agreed priorities, funding has been released in 2016/17 to continue the implementation of the far reaching systemic changes required locally. As part of the monitoring of implementation of Local Transformation Plans a quarterly assurance process is undertaken by NHE England to update on the implementation of local priorities and to account for the budget required to transform provision. To date there has been a return required for Q3 and Q4 for 2015/16. The process for 2016/17 is under review so a brief summary for Q1 has been requested until NHS England issue further guidance in relation to the process for Q2 2016/17. For information the 2015/16 Q4 return is attached.

#### 3. Proposal

The Board should receive a quarterly update on the implementation of the plan in order to monitor and support the implementation of transformation plan priorities. In October 2016 there will need to be a refresh of Local Transformation Plans which the Health and Wellbeing Board will need to support and approve prior to submission.

#### FORMAT FOR PAPERS FOR DISCUSSION AT THE HEALTH AND WELLBEING BOARD

#### 4. Financial Implications

Greater Huddersfield CCG £577,000 North Kirklees CCG £469,000

Total allocation £1,046,000

#### 5. Sign off

Any report that is presented to the Board must be signed off by the appropriate senior officer (note 5). At least one Board member or invited observer should be involved.

Include details of who signed off the report and when.

#### 6. Next Steps

- 2016/17 Quarter 1 assurance will be submitted on 22<sup>nd</sup> of August 2016, this return will be brought to the Health and Wellbeing Board after the submission date.
- The new Quarter 2 assurance process will be outlined by NHS England in the quarter 2 period and will be communicated to the Health and Wellbeing Board.
- A refresh of the transformation plan will be brought to Health and Wellbeing Board prior to October 2016 submission date.

#### 7. Recommendations

The Health and Wellbeing Board are asked to:

- Note the quarterly returns attached in relation to progress made and risks identified.
- Agree to receive future quarterly reports for information and/ or discussion.
- Agree a process to sign off the transformation plan refresh prior to 31<sup>st</sup> of October 2016.

#### 8. Contact Officer

Tom Brailsford

Joint Commissioning Manager

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2015 - 2020**Progress Update** Quarter 4 - 2015 - 2016

Kirklees Future in Mind Transformation Plan

**Children and Young** People's Mental Health and Wellbeing

> Greater Huddersfield Clinical Commissioning Group Clinical Commissioning Group



## **Kirklees Future in Mind Transformation Plan - Children and Young People's Mental Health and Wellbeing**

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#### **Additional separate documents**

- a. NHS North Kirklees CCG tracker template
- b. NHS Greater Huddersfield CCG Tracker template

#### 1 Progress update for Q4 period of 2015 – 2016

## 1.a General plan implementation progress, including progress against local priority streams (LPS).

Activities during this quarter have focused on delivery of the priorities identified in our published Transformation Plan and two tracker templates for NHS North Kirklees CCG and NHS Greater Huddersfield CCG.

The following have been the priority focus for this quarter:

- 1. Schools link approach We have begun the planning and implementation of our local schools link pilot.
- 2. Establishing and operationalising our new Single Point of Access which went live on 1 of April 2016.
- 3. Invested in increasing front line capacity across the CAMHS system including establishing a waiting list reduction initiative.
- 4. The creation of Tier 2/3 provision for vulnerable children and young people who are most vulnerable e.g. LAC/CSE/YOT. This has included investment in the pillars of parenting approach across of residential children homes and plans to roll out to our foster carers.
- 5. Eating Disorders Establishing a regional approach which meets the new waiting times standards and national guidance.
- Redesigning our Tier 2/3 provision in line with Thrive Elaborated model and aligning and recommissioning the provision alongside the Kirklees Healthy Child Programme (Health Visiting and School Nursing).

The Kirklees Local Transformation Plan (LTP) consists of 29 priorities; many of these are longer term transformational changes over a 2, 3, 4 or 5 year period. The Kirklees LTP high level summary identified 12 outcomes during Year 1 which we proposed to progress by March 2016. (See Page 23 for original high level summary document).

These 12 outcomes overarch a number of the LPS areas and clusters them together, having detailed actions and KPIs which underpin them. This report mirrors aspects of our Quarter 3 submission by retaining a focus on those 12 original outcomes. To help identify the outcomes and associated LPS numbers these clusters are included below in brackets.

The in year spend identified in the tracker templates for both CCGs for Quarter 4 2015/2016 are in line with our submission with the exception of LPS 15 and LPS 16.

The planned spend for this quarter was re-profiled to support **LPS 6** to increase front line capacity within Tier 2 and Tier 3 provisions in order to reduce waiting times in order improve access for children and young people. This is reflected in the tracker templates for both CCGs. The spend was re-profiled as the regional approach to LAC provision is no longer progressing as a priority for 10 CC, and it has transpired the stronger families link and access can be achieved without further resource allocation.

Appendix A, details our first year outcome priorities and the remaining local priorities detailed in both CCG tracker documents. We are particularly pleased that all of our

year 1 priorities are either partially or fully implemented.

Appendix A also includes the status of implementation reached during Quarter 4 and those projected/anticipated positions by 31 March 2016.

The appendix identifies priorities that were not intended for implementation until 2016/17. This information is cross referenced by the two updated trackers submitted with this progress update.

#### 2 Areas of most challenge in implementation.

The Quarter 3 report included three risks to delivery, one of these LPS 7 related to the provision of a comprehensive eating disorder service across Kirklees, Calderdale, Barnsley and Wakefield. Effective regional partnership functions ultimately ensured that the service was in place to target timescales with the provider meeting NICE guidance and waiting times standards.

Appendix B provides details of continuing risk for LPS 3 and LPS 7 and new potential risk for LPS 1. The appendix includes the challenges and mitigating actions to the delivery of our CAMHS transformation plan within year.

#### 3 Finance and activity review.

The tracker submissions for NHS Greater Huddersfield CCG and NHS North Kirklees CCG shows the spend for this quarter. The 2015/16 allocations have been fully utilised in meeting our local transformation plan priorities. The 2016/17 allocation is also fully committed to local transformation plan priorities.

This report includes activity information to substantiate the status of progress towards delivery including our longer term KPIs. It is also worth noting that the additional investment made across all priorities has resulted in a total of 13.7 FTE posts being established and a projected 296 more children and young people receiving a service in 2016/17.

#### 4 Review of partnerships

4a NHS North Kirklees CCG continues to be the communications lead for the transformation plan working in partnership with the Local Authority Communications Team, including agreeing an interagency communication strategy.

Appendices C – relates to the most recent Transformation Plan Implementation Partnership Group meeting. The minutes include detail of approaches intended to keep stakeholders up to date.

Initial stakeholders are still involved in ongoing assurance processes and are kept informed of any progress and current partnership activities. Our local Chief Officers Group, Health and Wellbeing Board and the Children's Trust receive regular updates and contribute to its alignment with other priorities and initiatives.

During this Quarter involvement of schools has included presentations and feedback from SENCOs and school heads from across Kirklees.

A range of stakeholders are involved through a Transformation Plan Implementation

Partnership Group this includes Public Health representation. This group currently continues to meet monthly.

The most recent meeting was on Monday 14 March 2016, the minutes from that meeting are attached as Appendix C.

#### 5 Eating Disorders

The model has been developed between the commissioners and providers to establish a seamless multi-disciplinary approach eating disorder service for Wakefield (Provision for model will cover Barnsley, Calderdale, Kirklees and Wakefield).

The model is based on evidence based practice and is reflective of that outlined in the National Guidance; Access and Waiting Times Standards for 'C&YP with an Eating Disorder' National Guidance. Implementation is under way and progress has been made with recruitment, and working towards the implementation of the waiting time standards.

Commissioners and providers continue to have regular meetings to ensure mobilisation of the service is progressing.

The tracker templates for NHS North Kirklees CCG and NHS Greater Huddersfield CCG have been update accordingly.

#### 6 Publication of the Local Transformation Plan

Work is ongoing to maintain communication approaches with the public as outlined in point 4a. An "easy read" version of our LTP is being finalised for publication on the Transformation Plan webpages. See Appendix C. This easy read will look to respond to feedback from Quarter 3 regarding providing suitable information for young people.

#### Submitted by:

Tom Brailsford
Joint Commissioning Manager – CAMHS Transformation Lead Officer
26 April 2016

LPS	Year 1 priorities including associated overarching cluster links  LPS Priority Description Implementation status for Q4 2015/16 Expected position by not intended					
number	Priority Description	implementation status for Q4 2015/16	30 June 2016	2016/17.		
1	Redesign and implementation of a school nursing service that is more focused on emotional health and well-being, and provides an early intervention function across all educational settings.  (Cluster links: LPS 1, 3 and 5)	A Healthy Child Programme (HCP) 0-19 Integrated Commissioning Project Board established in Q3 continues to undertake service re-design. This is following governance arrangements, in engagement and specification redesign. Including CAMHS SPA, Tier 2 and Tier 3. Project commissioning plan, governance process and project timeline to inform re-tendering put in place during this Quarter.	Development phases to facilitate a competitive tender to be ready for publication in June 2016. Full HCP recommissioned service will start delivery in April 2017.			
2	Implement clear joint working arrangements and clear pathways between schools and emotional health and well-being provision. The provision will be based on presenting need and linked to the Social, Emotional and Mental Health Difficulties (SEMHD)  Continuum work that is being developed. (Cluster link: LPS 2, 6, 8 and 9)	Schools link pilot and proposed training programme developed between Tier's 2, 3 CAMHS and Education Psychology Service, including integrated relationships with continuing SEMHD development together with other interactions with schools to inform implementation. SENCO and school leadership engagement meetings in February 2016 identified potential schools for involvement in pilot.	Pilot being rolled out with nominated schools during Quarter 1 2016/17 to include named CAMHS lead in schools and links with CAMHS staff and the SPA with evaluation processed being developed from April 2016.	Yes		
3	Establish emotional health and well-being provision that is collaboratively commissioned with educational settings. (Cluster links: LPS 1, 3 and 5)	Mapping of schools spend on EHWB and identified still needs completing. Community Hub concepts being developed to inform redesign and cocommissioning of Healthy Child Programme.	Ongoing consultation under Healthy Child Programme re- commissioning to enable provisions in place April 2017.	Yes		
5	Redesign the specification for Tier 2 and Tier 3 CAMHS provision transforming services to provide a "tier free" new service model that is based on the "thrive" approach.  (Cluster links: LPS 1, 3 and 5)	As priority 1.	As priority 1.			

LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.
6	Increase front line capacity within Tier 2 and Tier 3 provisions in order to reduce waiting times and improve access for children and young people.  (Cluster links: LPS 2, 6 and 11)	Additional investment arrangements in place this includes investment in Tiers 2 and 3 CAMH service provisions and waiting list initiative in place. Tier 2 involvement has initially reduced waiting times from 16 weeks to an average of 11.5 weeks. SPA looks to provide positive outcomes against priority. Impact on reduced waiting time and improved access will not be evident until Quarter 1 2016/17. However previous investment in offering crisis provision has resulted in Tier 3 'choice appointments' being offered within 28 days, and average partnership waiting time is reducing.	Single point of access (SPA) in place for 1 April 2016 will be monitored during this quarter to address unmet needs.  Further reductions in waiting times across Tier 2 and Tier 3 provision.	
7	Provide a comprehensive eating disorder service across Kirklees, Calderdale, Barnsley and Wakefield in line with best practice and issued guidance.	Regional Commissioning Group has co-produced a service model. Initial contract will be for 2016/17 whilst longer term procurement options are developed. Contract currently being agreed to enable implementation of a model that will be compliant with Eating Disorder guidance.	ED service in place provider working towards NICE guidance and waiting times standards.	
8	Implement Tier 2 and Tier 3 CAMHS Link workers to directly liaise with and support Schools, primary care and other universal provision. This will be developed in line with SEMHD continuum of support. (Cluster links: LPS 2, 8 and 9)	As priority 2.	As priority 2.	
9	Implement a joint training programme to support the link roles within primary care, schools, Tier 2 and Tier 3 CAMHS provision and to support joined up working across services. This will be developed in line with SEMHD continuum of support. (Cluster links: LPS 2, 8 and 9)	As priority 2.	As priority 2.	

LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.
10	Have in place a single point of access model for advice, consultation and assessment and coordination of provision.  (Cluster links: LPS 1, 2, 6 10 and 11)	A single point of access model and service specification developed to ensure the service is delivering to project timeframe. See Appendix D	Service operational from 1 April 2016, will be monitored during Q1 2016/17 to address unmet needs.	
11	Provide a one stop shop approach providing advice and support, that has been collaboratively commissioned with the voluntary and community sector.  (Cluster links: LPS 2, 6 10 and 11)	Single Point of Access service once live will respond to responses to the KPI and identify best practice approaches to inform longer term commissioning approaches and how the voluntary sector will be involved. See Appendix D	SPA in place from April 2016. Pathways developed for one stop shop, will be monitored during Q1 2016/17 to address unmet needs.	
13	Invest in and implement a flexible multiagency team to address the emotional health and wellbeing needs looked after children, children in the youth offending team, children experiencing CSE and children on child protection plans.  (Cluster links: LPS 13 and 17)	Agreement with Tiers 2 and 3 CAMHS providers and Education Psychology Service. Contracts to be varied to reflect the increased investment. Interim arrangements have enabled procurement of private psychological interventions to establish early support. Providers' currently recruiting substantive posts and a short term provision has been procured through private provider to provide an interim service.	Ongoing arrangements to enable recruited team to be in place by June 2016. Work ongoing to enable longer term achievement of KPIs by March 2017 which will deliver a flexible multi agency team comprising of a FTE psychologist, psychotherapist and Tier 2 worker.	
17	Work with Kirklees Safeguarding Child Board to undertake a "deep dive" into the way in which vulnerable children and young people experience the CAMHS system, and use the learning to inform the development of our discrete provision for vulnerable children. (Cluster links: LPS 13 and 17)	Consultant identified and commissioned to undertake the work. Research has begun, Safeguarding Children's Board are overseeing the work. Ongoing work to commission discrete provision continuing.	Findings to be presented June 2016 to inform future service modelling	

LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.
18	Implement lead commissioning arrangement for all CAMHS provision covered within the transformation plan, discharged through the Joint Commissioning Manager who is jointly funded by North Kirklees CCG, Greater Huddersfield CCG and Kirklees Council. (Cluster links: LPS 18,19, 20 and 21)	Agreements completed though the relevant commissioning structures for both North Kirklees and Greater Huddersfield CCGs and Kirklees Council. Pooled budget planning arrangements to include Tier 2 and 3 CAMHS. Formal Section 75 agreements will delegate the Tier 3 budget and contract to the Local Authority.	Arrangements agreed, monitoring ongoing.	
19	Use the Transformation plan as the basis for our commissioning priorities over the next 5 years. (Cluster links: LPS 18,19, 20 and 21)	Integrated Commissioning Executive has agreed priorities. Transformation Plan Implementation Group met twice during this quarter. Health and Wellbeing Board updated in January 2016.	Ongoing to 2020	
20	Embed the responsibility for overseeing the commissioning intentions within the Health and Wellbeing Boards work plan and oversight function.  (Cluster links: LPS 18,19, 20 and 21)	Quarterly updates to Integrated Commission Executive, Integrated Commissioning Group, Children's Trust and Health and Wellbeing Board. Next updates during Quarter 4 January 2016.	Ongoing to 2020.	
21	Ensure the integrated commissioning group is overseeing the implementation of the future in mind detailed operational commissioning plan. Ensuring that commissioned services are evidence based and that NICE guidelines are implemented throughout the service provision. (Cluster links: LPS 18,19, 20 and 21)	Integrated Commissioning Group and Executive provided with updates on progress. Ongoing review of relevant NICE guidance and future priorities.	Ongoing to 2020.	
29	Work with local Systems Resilience Group to Design and implement all age psychiatric liaison provision in line with the "Core 24" service specification. Where appropriate work on a regional basis across acute footprints develop collaborative approaches	As priority 12 – work still required to develop regional basis across acute footprints and collaborative approaches.	Liaison provision in place by May 2016	

	Other LPS priorities				
LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.	
4	Collaboratively design with young people peer education programmes for children and young people that promote resilience, and assist with early identification of emotional health and wellbeing issues.	Pilot of peer education programmes is ongoing to identify best practice approaches to inform the Healthy Child Programme and re-commissioning of appropriate service. This will form the basis for part of the tender model which will be about building community capacity including peer education approaches.	Ongoing evaluation to inform long term achievement of KPI.		
12	Provide a local crisis model that ensures assessment within 4 hours and is in line with the Crisis Care Concordat, and utilises our redesigned psychiatric liaison service.	Being developed in line with SRG bid. In Greater Huddersfield the psychiatric liaison age limit has been dropped to 16 years. Pump Prime funding and increased investment in providing a local crisis model.	Specialist discrete crisis team in place to enable longer term achievement of KPI by March 2017.		
14	Provide the CAMHS link and consultation model within the range of provision across Kirklees for the most vulnerable children.	To be developed in line with Priority 13 – to enable longer term achievement of KPI by March 2017.	Ongoing arrangements.		
15	Ensure rapid access to CAMHS interventions for those children who are part of Stronger Families programme.	Processes being developed to identify referral processes and families to access CAMHS, to enable longer term achievement of KPI by March 2017.	Ongoing arrangements and rapid access arrangements developed within existing provision.		
16	Provide cohesive CAMHS provision on a regional basis for LAC who are placed within the 10 CC (West Yorkshire Clinical Commissioning Groups, Commissioning Collaborative) footprint	10 CC have not taken this recommendation forward therefore spend re-profiled as per narrative report above.	Ongoing arrangements.		
22	Ensure integrated commissioning group closely monitor CAMHS minimum dataset and waiting time's standards, whilst developing a rigorous outcome based dataset to monitor and improve performance across the system.	Awaiting the first report on CAMHS minimum dataset. Currently exploring outcome based dataset through Healthy Child Programme retender. IAPT developments and session by session outcome monitoring.	Ongoing work to enable longer term achievement of target by March 2017.		

LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.
23	Implement clear and transparent outcome monitoring supported by membership of CORC, and the implementation of session by session outcome monitoring across CAMHS provision.	Provider working towards developing implementation to achieve longer term out comes by March 2017. Tier 2 services providing quarterly outcome monitoring reports from young people and parents.	Ongoing arrangements. Cluster link to LPS 22	
24	Receive quarterly service feedback from children, young people and families in all performance reporting to the integrated commissioning group.	Discussions begun with both CCG Patient Involvement Services and young people engagement via IYCE. Tier 2 services provide quarterly outcome monitoring reports and feedback from young people and parents, Tier 3 have established a service user forum which will from part of feedback mechanisms	Ongoing arrangements.	
25	Ensure Tier 2 and Tier 3 providers are fully participating in CYP IAPT core curriculum in 2016/17.	Calderdale and Kirklees 'Light Touch' IAPT Steering Group established to oversee the Light Touch IAPT feedback, implementation of the full IAPT process in September 2016 providing a consistent and robust approach to children and young people IAPT process to ensure a unified compliance exists.	Ongoing arrangements.	Yes
26	Ensure Tier 2 and Tier 3 provider managers are involved in the introduction to CYP IAPT in 2015/16.	Calderdale and Kirklees 'Light Touch' IAPT Steering Group established to oversee the Light Touch manager involvement.	100% of managers trained by April 2016.	
27	Ensure that where required staff and parents receive appropriate training and continuing development opportunities to enable them to deliver relevant evidence based interventions. (Cluster Links: LPS 2, 6, 8 and 9)	Ongoing arrangements to develop training to complement existing Mind ed resources, Tier 2 CAMHS training and SENCO network events.	Ongoing arrangements.	

LPS number	Priority Description	Implementation status for Q4 2015/16	Expected position by 30 June 2016	Implementation not intended until 2016/17.
28	Develop a comprehensive workforce development strategy for CAMHS across Kirklees. The strategy will inform and direct how workforce development will be supported, and implemented.	Not yet developed. 0-19 Healthy Child Programme review has established a workforce sub-group to support development to a workforce strategy.	Ongoing arrangements Implementation 2016/17.	Yes



### CAMHS Transformation Plans – Issues and risks to delivery Q4 2015/16

Please complete for any issues of risks to the delivery of your CAMHS transformation plans within year

LPS Number	Description of local priority scheme	Description of issue of risk to delivery of 2015/16 plan	Mitigating Actions	*Date expected to deliver
1	Redesign and implementation of a school nursing service that is more focused on emotional health and well-being, and provides an early intervention function across all educational settings.  (Cluster links: LPS 1, 3 and 5)	Progress and implementation is directly influenced by the ongoing commissioning review and proposed re-tender of the 0-19 Healthy Child Programme. Project plan and full risk log in place to ensure programme is delivered on time.	Healthy Child Programme Project Manager in place to ensure delivery to timescales.	November 20
3	Establish emotional health and well-being provision that is collaboratively commissioned with educational settings.	The fragmented nature of schools and their pyramids creates levels of complexity in securing universal agreement for a collaboratively commissioned offer that will support a consistent approach towards tierless model.	Currently piloting approaches with school community hubs to consolidate resources and demonstrate to schools what an enhanced and collaborative commissioned provision would give them.	April 2017
7	Provide a comprehensive eating disorder service across Kirklees, Calderdale, Barnsley and Wakefield in line with best practice and issued guidance.	Timescales to establish service and recruit staff	Use of existing resources and agency staff as appropriate	1 April 2010

# Kirklees CAMHS Transformation Plan Implementation Partnership Group Meeting MINUTES

Monday 14 March 2016 Kirkgate Buildings – Training Room

Attendees:

Tom Brailsford TB Joint Commissioning Manager, CAMHS Transformation Plan Lead

(Chair)

Matthew Holland MH Head of Children's Trust Management & Development

Carl Mackie CMa HIPA, Public Health

Carol Lancaster CL Children and Young People - Learning and Skills

Mandy Cameron MC Deputy Assistant Director, Vulnerable Children and Groups

Alan Laurie AL Commissioning Manager – Joint Commissioning

**Apologies:** 

Bev Paris BP Head of Corporate Parenting

Linda Patterson LP Service Manager Corporate Parenting

Clare Mulgan CMu Head of Stronger Families Programme

Roger Clayphan RC Integrated Children's Services Manager

Julie Walker JW Operations & Development Manager - IYCE

Helen Severns HS Head of Transformation and Integration, NHS North Kirklees CCG

Karen Poole KP Head of Children's Commissioning - NHS North Kirklees and Greater

**Huddersfield CCGs** 

#### Minutes:

#### 1. Matters arising - previous meeting 25 January 2016

Minutes from previous meeting had been circulated to all group members together with an invitation for comments/issues for agenda inclusion at this meeting. No items had been received.

- **a. Quarter 3 report** covering October to December 2015/16 was submitted in line with submission deadlines. No feedback requiring immediate action had been received.
- **b.** Easy read version of the full Transformation Plan is being finalised by North Kirklees CCG. This is a collaboratively produced document between the CCGs, Local Authority, the local parents Group (PCAN) and a number of young people.

This document will look to respond to initial Quarter 3 feedback on the expectation of areas to ensure availability of accessible information specifically for young people. The intention is to publish the easy read in April 2016.

- **c.** The Kirklees Health and Wellbeing Board received a progress update on the 28 January 2016 and agreed the reporting arrangements for ongoing implementation of the Plan.
- **d. Financial tracker sheets** for both CCG's will be confirmed for this quarter. The Q4 report, tracker documents and risks report need to be submitted by 29 April 2016.

**Action**: No suggested revised priorities were received prior to this meeting. Year 2 priorities and associate budget availability needs including on agenda for the next meeting in April. Q4 tracking and report may help inform future direction for 2016/17.

- e. Communication plan it has been agreed that North Kirklees CCG (NKCCG) Communications Team will take lead responsibility on all communications for Future in Mind and the Transformation Plan. To maximise spread of information across all sectors they will be supported by the Local Authority team as and when necessary. A communication plan is being formalised by NKCCG.
- f. A simplified spreadsheet has not been developed. Agreed to await any revision or direction from NHS England for Q4 or any process changes for Q1 of the 2016/17 period.
- g. Stakeholder involvement Presentations on the Transformation Plan including actions to date and future proposals have been delivered to SENCo and Senior School leads. This included progress on the schools CAMH pilot, Thrive Elaborated and a consolidation report providing a summary of survey responses submitted by Kirklees Schools. To enable those not present and whole schools to be informed the presentations and supporting information has been published in relevant circulation opportunities. eg 'Head's up' and uploaded as electronic documents onto the one hub schools information system.

An information update on the Transformation Plan and proposed implementation of the new single point of access was provided at the Children's Emotional Well-being Network (ChEWN) by the 3<sup>rd</sup> Sector Provider in March 2016. Membership of this group is drawn from a cross section of the public, parent groups, professionals and 3<sup>rd</sup> sector providers with the group being open to anyone working to improve children and young people's emotional wellbeing.

**Action:** AL to ensure there are joined up communications approaches with the ongoing review work for the 0 -19 Healthy Child Programme.

**h.** Clinical input – relevant information is already shared with the Mental Health Lead GP. Agreed that this would continue with minutes being provided to enable relevant contributions. To include open invite to attend meetings.

**Action**: TB to share minutes with GP lead. TB asked to review attendee membership for future meetings.

#### 2. Progress update

#### 1. Single point of Access Pilot

Pilot is on target to go live 1 April. Set up has involved developing and agreed a service specification, staffing of the service and partnership working between Tier 2

and Tier 3 to ensure the administrative delivery systems will be in place.

Working title will be ASK CAMHS (Access and Support for Kirklees - Child and Adolescent Mental Health Services). Northorpe Hall as the lead Service provider is developing information sheets and publicity posters to inform the public and professionals of the new service and how to access it.

A draft allograph pathways document was discussed at the meeting. This document was initially developed to respond to a request from the Kirklees CAMHS Scrutiny Panel to set out the changes the Transformation Plan will bring to CAMHS in terms of the connections with other agencies and how the tierless approach is intended to work in the longer term. The document looks to give clarity how agencies will link together, and connections at various stages of intervention.

CL suggested final document needs to ensure people are aware of what underpins some of the community hubs and other support options. Work is ongoing to complete this document to support wider public communication approaches.

**Action**: documents will be incorporated into communication plan and information sharing processes by the CCG, Local Authority and ASK CAMHS provider.

#### 2. Schools Link Pilot

Outline structure and implementation has progressed between the Council, Tier 2 and Tier 3 providers. Input is ongoing with Education Psych Team to identify enhancement options. This includes identification of at least 10 potential schools and development of a training programme and support mechanisms. Number of schools identified following presentation to SENCO network and Senior School leads. Options to encourage cluster approach to enhance the offer have been included in development discussions.

**Action**: MC advised the pilot needs to be linked into the SEMHD (Social, Emotional & Mental Health Difficulties) continuum of activities to ensure the model is joined up with the schools model.

**Action**: ensure SEMHD is referenced in the pilot project documentation.

#### 3. Eating Disorder Service

Development/implementation activities have continued. Service is in place now and will be fully functional across the region by April to meet national waiting time standards.

#### 4. Vulnerable Children's Team

Development/implementation activities ongoing at Riverbank. Team comprises of 3 workers who will focus their work on LAC, CSE and YOT. Recruitment of staff required, SOCATES covering in the interim to ensure sufficient timescales for appropriate staff to be recruited. Buying in Ed Psych support to pilot new approaches within service capacity.

#### 5. IAPT

IAPT 'light touch' manager training now been resolved for full completion.

#### 6. Pooled Budget Arrangements

CCGs have agreed S75 pooled budget arrangements to formally delegate budget with

the local authority.

#### 7. Review of year 1 priorities

**Action**: options need developing regarding collaboration with schools and named CAMHS lead in schools.

#### 3. Budget allocation/Indicative allocations

Budget allocation for this quarter has been shared previously in the tracker reports and discussed as part of the Q3 report preparation.

2016/17 CCG budget allocation sheets had been circulated to group members prior to the meeting. These identified indicative allocations for Greater Huddersfield CCG of £577,000 and North Kirklees CCG at £469,000. Year 1 funding was ring-fenced, concerned expressed by group of the risk that the CCG would put into their baseline budgets. Challenge will be to ensure this funding is kept as Transformation Plan delivery.

**Action**: Recommended the group continues to share progress updates and the budget with the ICG Executive secure signed off by the Health and Wellbeing Board.

**Action**: C.Ma further discussions are needed regarding future budget allocations and association with Healthy Child Programme delivery.

#### 4. Year 2 priorities

Discussion deferred to next meeting to enable review based on Q4 progress and any new directives. Activates may need to be realigned against priorities and available budgets.

**Action**: Aim to have draft Q4 report prepared for discussion at next meeting (18 April), prior to submission on 29 April.

#### **Ongoing activities**

Administrative activities and future developments of the Transformation Plan include discussions with Children's Safeguarding Board, young people and CAMHS pathway services.

#### 5. Any other business

None.

#### 6. Date of next meeting:

18 April 2016 15:30 – 17:00. Kirkgate Buildings – Training Room

# (ALL ASK (AMHS ON 01924 492183) To TALK ABOUT YOUR (ON(ERNS

#### GETTING IN TOUCH

Call ASK CAMHS on 01924 492183 Lines are open 9am-5pm, Mon-Fri

Northorpe Hall Child & Family Trust is open Mon-Thur till 8pm and Saturday till 1.30pm. When we're open, we'll happily take messages for ASK CAMHS as required.

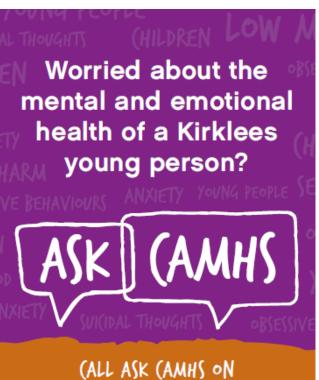
You can fax ASK CAMHS anytime (01924 850490) or send us a message via the Trust's website www.northorpehall.co.uk/contact-us

If a child or young person is already been referred or is in touch with CAMHS or ChEWS please contact the service directly.



Northorpe Hall Child & Family Trust - 53 Northorpe Lane - Mirfield West Yorkshire - WF14 OOL

Telephone 01924 492183 · www.northorpehall.co.uk



01924 492183
TO TALK ABOUT YOUR (ONCERNS



ASK (AMHS) IS THE INITIAL (ONTACT
POINT FOR THOSE WHO HAVE (ONCERNS ABOUT
A (HILD OR YOUNG PERSON'S EMOTIONAL OR
MENTAL HEALTH IN KIRKLEES.

EXPERIENCED WORKERS WILL LISTEN TO YOUR CONCERNS PROVIDING INFORMATION, ADVICE AND SELF-HELP RESOURCES WHERE THEY (AN.

IT IS ALSO THE POINT OF A((ESS FOR (HILD AND ADOLES(ENT MENTAL HEALTH SERVICES ((AMHS).

In Kirklees CAMHS are delivered by South West Yorkshire Foundation Partnership Trust and ChEWS (Children's Emotional Wellbeing Service) at Northorpe Hall Child & Family Trust

These services provide support for children and young people:

- · Who are aged between 5-18
- Who are registered with a Kirklees GP
- Whose emotions are impacting on their daily functioning

Both services are accessed through ASK CAMHS.

#### THE RIGHT SUPPORT

Information is taken over the phone. We will ask for consent to speak with those at home, school and other professionals involved. We will also speak with the young person themselves, where appropriate. This will help ASK CAMHS to really understand what's going well, what's not going so well and what might be helpful.

ASK CAMHS will inform the family and referrer what support can be offered and what other services and resources may be useful.

#### WHO (AN (ALL?

Anyone can contact us to discuss concerns and we particularly welcome calls from families and young people themselves as you know best about what is going on for you.







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www.northorpehall.co.uk

#### ASK CAMHS (Access and Support for Kirklees - Child and Adolescent Mental Health Services) Pathways for Children and Young People with Emotional Health and Wellbeing Concerns 5-18's: Children's Emotional Wellbeing Service. Child or Young Person O to 5's Family (ChEWS) Short term interventions where emotional aged 0 to 18 Support Services. needs are impacting on their day to day lives. An initial assessment has been completed by: 0-5s and 5-18s: CAMHS Specialist service Emotional / School / College Early help advice undertaking assessments, diagnosis and mental health • GP / Health alternative treatment of complexconditions. Other sources issues are support including, impacting on including: community services daily function Youth Justice, Social statutory providers In-patient Mental Health Services in-patient and (including ADHD Services, Drug & and the Local Offer. day-patient care for those suffering from severe and/ initial enquiries) **Alcohol Services** or complex mental health conditions that cannot be Emotional /mental A & E (non-urgent) adequately treated by community CAMHS. ASK CAMHS or no crisis) health issues not Schools/Colleges internal impacting on daily new partnership daily review function. support systems **0-18's: Eating Disorder Service** Regional service Concerns raised by: Follow the referral meetings and and CAMHS leads ASK CAMHS for serious eating disorder conditions. route by contacting Young Person either escalate in schools/colleges. signposts Parent/Carer the Single Point of to support to the best service Access. pathways And the concerns are for the young **Vulnerable Groups** Distinct provision for the vulnerable **ASK CAMHS** NOT just an Autism or de-escalate person at that time eg: Looked after Children, child protection cases, 01924 492183 Spectrum Disorder signposting to and inform referral involved in the youth justice system and child sexual (ASD) or a suspected Parent/Carers best service for source/ family exploitation. young person ASD condition local support of any decision. groups, at that time Referral is identified and inform Eg PCAN<sup>1</sup> Transition Referral to support within adult services. referral source and KIAS<sup>2</sup> and the family ASK CAMHS will ASD or suspected ASD of the decision. should follow existing **INSIGHT Team** Early Interventions in psychosis All Age Disability for young people aged 14 and over. maximising specialist assessments Crisis Team independence in preparation for **0-18's: Crisis Team** For children and young people in adult life. crisis. (Including an out of hours service).

ASK CAMHS pathway options

Community support

Specialist CAMHS services

Alternative pathways

**S** Kirklees

NHS
North Kirklees

Greater Huddersfield

Clinical Commissioning Group Clinical Commissioning Group

### ASK CAMHS (Access and Support for Kirklees - Child and Adolescent Mental Health Services) Pathways for Children and Young People with Emotional Health and Wellbeing Concerns

Telephone Referral and Support Workers are available 9am-5pm Monday to Friday to take calls. Support requests with ASK CAMHS can be logged with the administration team between their operational hours of 9am and 8pm Monday to Thursday, 9am - 5pm on Friday and on Saturday mornings between 9:30am and 1:30pm by ringing 01924 492183. Referrals can also be sent by secure electronic forms at any time, using AnyComms or NHS.net accounts ONLY.

ASK CAMHS does not provide a weekend or out of hour's duty service. Outside of operational hours a voicemail system will offer appropriate emergency advice or ring back information during appropriate times.

The Crisis Team is not part of the ASK CAMHS service. The Crisis Team emergency service is only accessible thought referral by Accident and Emergency Departments. The Crisis Team will work with ASK CAMHS and other services to ensure the appropriate pathways to support are available.

#### Underpinning principles to achieve CAMHS transformation by 2020\*.

- The right support is offered quickly with reduced waiting times, in the right place for children, young people and families.
- Support is offered based on need and eligibility where tiers of provision do not get in the way of accessing the right support.
- Schools and primary care will have close working relationships with CAMHS, including any other relevant support provided in schools.
- Vulnerable children will have discrete multi-agency CAMHS support.
- Staff will be trained to help them to get involved earlier and provide ongoing advice and support.
- Services will be adequately funded and resourced by shared budgets.
- · Communication between those involved will have improved.
- Staff will be working within The National Institute for Health and Care Excellence (NICE) national guidance which will help improve health and social care outcomes for children and young people.

\*The flowchart outlines proposed support routes, adaptations will be made to meet local need. ASK CAMHS will clarify any questions around this process

PCAN¹ - Parents of Children with Additional Needs Making a Difference in Kirklees

KIAS<sup>2</sup> - Kirklees Information Advice and Support Service







## Annex 1: Kirklees High level summary - Local Transformation Plans for Children and Young People's Mental Health

#### Q1. Who is leading the development of this Plan?

North Kirklees CCG is the lead accountable commissioning body for children and young people's mental health. The lead commissioner for Future in Mind across Kirklees is a joint post across Greater Huddersfield CCG, North Kirklees CCG and Kirklees Council. This ensures that although North Kirklees CCG is the accountable body, there is, and will be close collaboration across the partnership in the development and delivery of our Transformation Plan.

There is Chief Officer support for our local Transformation Plan priorities from Kirklees Council, North Kirklees CCG and Greater Huddersfield CCG, through the Health and Wellbeing Board and support from lead portfolio elected members.

We have in place a number of arrangements that also include strategic planning and involvement with a number of partners across Kirklees. Through both our Children's Trust and Health and Wellbeing Board arrangements, we have strong partnerships in place with the voluntary and community sector, police, probation, CCGs, across council departments, a range of providers, parents and children and young people.

The development of the local Transformation Plan has been a testament to the partnerships in place. This has ensured that the plan has an ambition that involves whole system redesign to improve emotional health and wellbeing, that all partners understand their role in transforming provision in Kirklees, are fully committed to the objectives of the plan and we will hold each other accountable for the delivery.

Any queries in relation to the application should be directed to:

Tom Brailsford
Joint Commissioning Manager
Tom.Brailsford@northkirkleesccg.nhs.uk
Tom.Brailsford@Kirklees.gov.uk
07947 123160

#### Q2. What are you trying to do?

The scope of the Kirklees CAMHS Transformation Plan brings together core principles and requirements, considered fundamental to creating a system that supports the emotional wellbeing and mental health of children and young people in Kirklees.

The plan covers the whole spectrum of services from health promotion and prevention work, to support and interventions for those with existing or emerging mental health problems, as well as transitions between services. This will make it easier to access the support they need, when and where they need it by providing a continuum of care.

This means our offer will ensure that:-

- Children, young people and their families/carers can access the right support at the earliest possible opportunity to prevent escalation of emotional health and wellbeing issues.
- The right support is offered quickly with reduced waiting times, and is in the right place for children, young people and families first time.
- Support is offered based on needs, and eligibility criteria and tiers of provision do not get in the way of access to the right continuum of support.
- Universal provision including schools and primary care will have closer working relationships with wider CAMHS provision, as well as a good understanding of emotional health and wellbeing issues. This will ensure universal provision can support children, young people and families in a coordinated timely manner.
- Support offered will be evidence based, collaboratively commissioned and cohesive. This will include clear specifications, monitoring and accountability from the lead commissioning organisation.
- The most vulnerable children will have discrete multi-agency CAMHS support to meet their needs and reduce the impact on their emotional health and wellbeing.
- Staff will be trained in delivering evidence based interventions through the IAPT programme, and wider health, social care, education staff and parents/carers will be trained to deliver appropriate care and support.

#### Q3. Where have you got to?

In Kirklees we have made some progress towards developing our local offer in line with the Future in Mind recommendations. We have developed our Transformation Plan Year 1 priorities based on our self-assessment against the 49 recommendations and have a clear commitment to the delivery of our commissioning intentions. To date we have:-

- Redesigned our psychiatric liaison provision reducing the upper age limit from 18 to 16 years old.
- Invested significantly in our local Tier 3 crisis CAMHS provision in order for children and young people to receive rapid access to support and assessment in line with the crisis care concordat.
- Undertaken a review of our CAMHS LAC provision for those children and young people out of area, with a clear commissioning recommendation to address the presenting needs.
- Invested in some discrete provision locally for LAC using pupil premium funding.

- Developed and implemented the pillars of parenting programme for our local children's home residential staff and are now extending this to our local foster carers.
- Undertaken a review of those children experiencing or at risk of CSE and the emotional health and wellbeing support they need. This has resulted in resource being dedicated locally to meet this need.
- Agreed and started to implement a model of Social, Emotional and Mental Health Difficulties (SEMHD) Continuum of need across our local schools on which our CAMHS offer will also be based.
- Started to develop a single point of access model between our Tier 2 and Tier 3 provision locally.
- Ensured that the development our local integration arrangements between CCGs and Kirklees Council have the integration of emotional health and wellbeing provision as a core priority.

#### Q4. Where do you think you could get to by April 2016?

Following the assurance process in October 2015 some of the changes that we will implement by April 2016 have been cross referenced with elements of our tracker Local Priority Stream (LPS) numbers which show partial implementation and working towards progressive longer term KPI completion.

- Capacity will have been increased in our current Tier 2 and Tier 3 provision to reduce waiting times for intervention. (LPS6)
- We will have started the delivery of our new eating disorder provision across Kirklees, Calderdale, Wakefield and Barnsley. (LPS7)
- We will have in place a single point of access between our Tier 2 and Tier 3 provision. (LPS10)
- We will have re-specified our Tier 2 and Tier 3 provision in line with a tier less approach based on the thrive model. (LPS5)
- We will have re-specified our healthy child programme 0 -19 to be more integrated and focused on emotional health and wellbeing. (LPS1)
- We will have in place discrete provision for the most vulnerable children in Kirklees. (LPS17)
- We will be piloting the CAMHS link model with a number of schools in Kirklees and primary care, despite being unsuccessful in our bid to NHS England. (LPS2)
- Our governance arrangements and reporting arrangements will be in place in relation to the delivery of our Future in Mind objectives. (LPS21)
- We will have drafted a pooled budget arrangement for emotional health and

wellbeing funding across Kirklees. (LPS21)

- We will have begun collaborative commissioning with schools in relation to emotional health and wellbeing provision. (LPS3)
- There will be identified CAMHS link workers to liaise with schools and primary care. (LPS8)
- We will have started to design and implement an all age psychiatric liaison provision in line with the "Core 24" service specification on a regional basis. (29)

## Q5. What do you want from a structured programme of transformation support?

In Kirklees our programme our transformation is wide reaching and ambitious and we will need support locally for all our partners, but will also require support from NHS England in a number of areas. This will include support:-

- To develop and implement the delivery of a tier less CAMHS system across Kirklees. Good practice examples and specifications in this area would be particularly welcome.
- Access to training both for commissioners and providers in relation to evidence based practice and outcome monitoring.
- Challenge and oversight in relation to progress on the identified local objectives in our Transformation Plan.
- Improved datasets nationally in relation to national outcomes monitoring for CAMHS provision, and improved data reporting e.g. for example based on the substance misuse provision model.
- Early indication of supportive best practice evidence to enable appropriate implementation of the right mix of specialist community health services which will enable staff to have the relevant skills and support the development of a tier less triage model.
- Clarity of funding beyond year two to support longer term planning to 2020.
- Examples of effective collaborative arrangements between educational establishments in pyramids and clusters.
- Support for change programme across the system to embed new and different ways of working in support of the transformation (getting people to think and work together to deliver the change).
- Provide other infrastructure support with aspects such as IT systems and interfaces between systems and organisations.