

#### **Future in Mind**

Promoting, protecting and improving our children and young people's mental health

# **Single Transformation Plan**

On behalf of the five Hampshire Clinical Commissioning Groups (North Hampshire, North East Hampshire and Farnham, Fareham and Gosport, South East Hampshire and West Hampshire Clinical Commissioning Groups)











### Introduction

In March 2015 the Government published 'Future in Mind'. The document sets out the Government's ambition in improving the ways we can help support good emotional wellbeing and mental health.

In Hampshire, we fully support the vision and priorities established in Future in Mind. Even before the publication of Future in Mind we had been working hard with our partners to establish a vision for Hampshire. Our vision is called 'Make it Worthwhile'. Our priorities in Hampshire and those contained within the national document, Future in Mind are similar. For this reason, we have decided to use our local vision as a basis for developing our plans. This Strategy is our single plan for delivering the priorities established in Future in Mind.

We have prepared this single transformation plan to provide an executive summary of our ambitions and how we aim to achieve our vision.

Children and young people with good mental health do better. They are happier in their families; they learn better and do better at school; they are able to enjoy friendships and new experiences. They are more likely to grow up to enjoy healthy and fulfilling lives and to make a positive contribution to society and to have good mental health as an adult.

In developing 'Make it Worthwhile' we undertook a consultation with stakeholders across Hampshire. We received over 1,600 responses. We received feedback that people were concerned about gaps in services for 'low level' mental health difficulties and the need for more counselling services across Hampshire. We were told that people were concerned about young people having to wait too long to access services. We were told that professionals and families alike want more information about mental health in young people and more information on how best to support young people who might need additional support.

In Hampshire we will receive an additional £2.36m from the Government (subject to the assurance process) to realise our ambitions. This funding will enable us to go further and faster than we had originally anticipated which makes this a very exciting time for everyone involved in such an important area. In addition to the £2.36m, the five Hampshire Clinical Commissioning Groups have already committed extra investment for the Child and Adolescent Mental Health Service, increasing expenditure from £9.3m in 2013/2014 to £10.285m in 2015/2016.



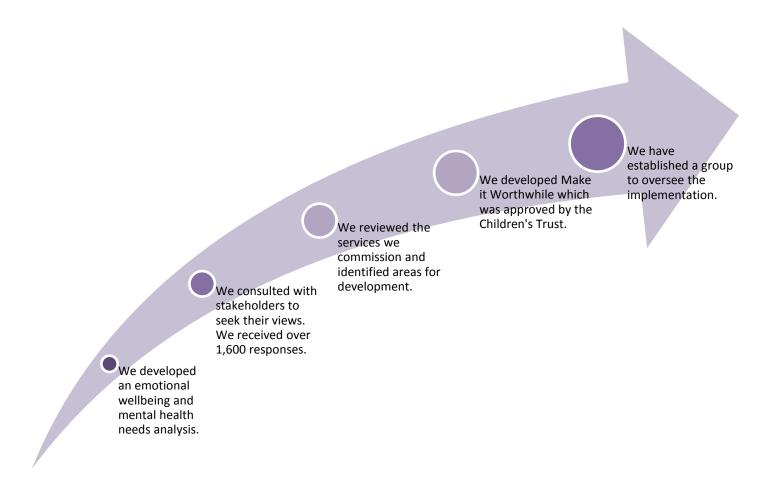






### **Our Journey**

Since the five Hampshire Clinical Commissioning Groups were established in April 2013, we have been working hard, in partnership with our stakeholders, to develop our vision and the priorities for improving emotional wellbeing and mental health in Hampshire. Some of our key milestones are listed below:



We are now implementing our priorities to achieve our vision.









### **Our Vision and Priorities**

Our vision is contained within Make it Worthwhile. We want all children in Hampshire to enjoy good emotional wellbeing and mental health. To achieve our vision we have agreed four over-arching priorities.

- 1.0 Emotional Wellbeing and Mental Health in Hampshire is Everyone's Business
- 2.0 Earlier recognition and intervention for mental health problems in children
- 3.0 Improve information and advice available for children, young people, families and professionals with regard to emotional wellbeing and mental health.
- 4.0 Ensure all children, young people and families have access to timely, evidenced based, high quality specialist mental health support, when it is needed.

Within each priority there are a number of outcomes we wish to achieve and these are contained within the Make Worthwhile Strategy. We will continue to with engage our In stakeholders. December 2015 we asked stakeholders, including children and young people, how they would like us to design services. This is what they told us.











## Our funding priorities

In Hampshire, the five Clinical Commissioning Groups have already committed extra investment for the Child and Adolescent Mental Health Service, increasing expenditure from £9.3m in 2013/2014 to £10.285m in 2015/2016.

Many of the outcomes and priorities we wish to achieve can be accomplished through reviewing and developing our services and changing the way we work, without the need for additional investment. However, we recognise that there are some key areas which will require additional investment if we are to achieve our ambitions. We have, through consultation with our partners, decided to invest the additional £2.36m in the following priority areas.

|  | Total     | April 2016<br>onwards |
|--|-----------|-----------------------|
| Commission earlier intervention services   |           |                       |
| through evidenced based counselling/psychological support                                      | 527,077   | 794,577               |
| Increased access to earlier intervention services through evidenced based parenting            |           |                       |
| programmes   | 400,000   | 400,000               |
| Improve access and support for young people who have been sexually abused and/or               |           |                       |
| exploited  | 100,000   | 100,000               |
| Develop Eating Disorder Service to ensure compliance with new standards                        | 482,500   | 965,000               |
| Reduce waiting times for young people waiting for an intervention from CAMHS                   | 750,000   | 0                     |
| Improved access to technological solutions that support young people's emotional wellbeing and |           |                       |
| mental health  | 100,000   | 100,000               |
| Grand Total  | 2,359,577 | 2,359,577             |









### What Next?

During this year we have made significant progress in developing our long term plans, over the five year funding period, to realise our ambitions. We have started the process to procure earlier intervention services with regard to counselling/psychological support and improved access to specialist parenting programmes, which will deliver services over at least a three year period. We have awarded a five year contract to Sussex Partnership NHS Foundation Trust, which will deliver the specialist Child and Adolescent Mental Health Service in line with our ambitions and priorities established in Make it Worthwhile. We have established an implementation group and have started to deliver increased levels of training to professionals and group work to children, young people and families. We have been successful in being awarded funding to implement the nationally led Schools Pilot Programme, improving the ways we work with our schools to support good emotional wellbeing and mental health.

We will continue to monitor our progress through the implementation group with oversight from the Children's Trust and the Health and Wellbeing Board.

Our full action plan is included at Appendix 1.







| 1   | A greater awareness, amongst professionals who work with children and young people, of why good important and the factors that influence it in children. |  |  |  |  |
|-----|--|--|--|--|--|
| No  | What   | How  | Timescale  |  |  |
| 1.1 | Develop a suite of awareness training programmes with regard to emotional wellbeing & mental health.   | As part of delivery of the EWB strategy Sussex Partnership NHS Foundation Trust have developed and are delivering an awareness training programme for professionals who work with CYP. The programme is being delivered via the Hampshire Learning and Development Team and is part of the SDIP.  Attendance at the sessions will be evaluated using both quantitative and qualitative measures and recognised feedback tools on content, timing and delivery. An analysis of feedback will be provided to Commissioners. Approximately 4 training sessions will be held per month  Promotion of MindEd online education programme to professionals in Hampshire  Mental Health awareness material will be produced in partnership with young people and could be used by schools as part of the PHSE Curriculum.  Participate in the School Link Pilot Scheme within West Hampshire CCG, as per the successful application. | 2015/2016 Training Programme completed by April 2016.  Training Programme will be developed, reviewed and implemented each year. For 2016/2017 onwards programme will be delivered in accordance with requirements of new CAMHS Contract |  |  |
| 1.2 | Increase the support available to schools and  | Increased support through re –commissioned school nursing service with EWMH as a key priority from August 2015.  | TBC  |  |  |

| level<br>emot<br>ment | n community settings at 1 and 2 to promote tional wellbeing and tal health and support ren with mental health dems. | Enhanced support for schools will be available in 2015/2016 via improving access to the consultation, advice and support service within CAMHS (SDIP).                     | 2015/2016 Programme completed by April 2016. Programme will be developed, reviewed and implemented each year. For 2016/2017 onwards programme will be delivered in accordance with requirements of new CAMHS Contract. |
|-----------------------|---|---|--|
|                       |   | Develop commissioning approach to enable more young people to access earlier intervention services through evidenced based counselling/psychological support              | Award of funding made in Quarter 3, 2015/2016.   |
|                       |   | Review the way in which youth community settings can be supported to promote good emotional wellbeing and mental health and support children with mental health problems. | Yearly evaluation of impact to April 2020  |

| 2   | The importance of good me continued prioritisation of in   | strategic plans, for example   |   |
|-----|--|--|---|
| No  | What   | How  | Timescale   |
| 2.1 | Ensure that the importance of good emotional wellbeing and mental health in children is recognised at a Strategic level across the Hampshire health and social care economy.   | Advocate for children's emotional wellbeing and mental health to be a priority in local authority, CCG and multi-agency plans.  The implementation of the Strategy is overseen by the Integrated Children's Commissioning Board  Seek opportunities to promote the aims of the EWB strategy. |   |
| 2.2 | Review and implement improved ways of working between Early Help Hubs, being led by Hampshire County Council, and the Specialist Child and Adolescent Mental Health Service to ensure specialist mental health advice, guidance and support is | Working with services to ensure effective delivery of Early Help Model  Development of relationship between multi-disciplinary services  Improved promotion of services and awareness  A seamless pathway of interventions as they move in and out of services  Multi-agency launch events   | April 2016 Yearly evaluation of impact to April 2020. |

|     | available at an earlier stage.  |  |   |
|-----|---|--|---|
|     |   |  |   |
| 2.3 | Improve early identification and management of maternal perinatal mental health through a whole systems approach including maternity, health visiting, primary care, adult mental health services and the voluntary sector. | Implementation of an evidence based multi-agency maternal mental health pathway with a clear role for midwifery and heath visiting.  Health visiting service developing service improvements based on audit by September 2015  | April 2017 Yearly Evaluation of impact to April 2020. |
| 2.4 | Maximise the positive impact of parenting to improve emotional wellbeing, health, social and educational outcomes for   | Identify gaps in current provisions through parenting review  Ensure that existing resources are providing best value of money  Develop commissioning approach to enable more families to access earlier intervention services through evidenced based parenting programmes. | October 2016 April 2016                               |
|     | children and to reduce inequalities.  | Ensure that the needs of young people with disabilities are specifically considered within the review with a view to identifying gaps in commissioning arrangements.   | Yearly evaluation of impact to April 2020.            |
| 2.5 | Improve access and support for young people who have  | Work with the multi-agency group that has been established to consider intervention and support services for this group of young people, to identify gaps  | April 2016  |

| been sexually     | abused | in commissioning.  |                |
|-------------------|--------|--|----------------|
| and/or exploited. |        | Develop a multi-agency support pathway (including police, social care, education, health, SARC, voluntary sector) for those young people to ensure their needs are appropriately assessed and appropriate support provided. This should include timely access to evidence based specialist support where indicated. The review of pathways will ensure there are clear and robust arrangements in place between CAMHS and SARCs. | to April 2020. |

| 3   | Improve information and advice available for children, young people, families and professionals with regard to emotional wellboand mental health. |  |            |
|-----|---|--|------------|
| No  | What  | How  | Timescales |
| 3.1 | PSHE (Personal,<br>Social and Health<br>Education)<br>Bullying<br>Resilience training.  | Liaison with multi-disciplinary services  Review of tools for school, anti-bullying alliance and anti-bullying template  Increased awareness to staff  Improved promotion of anti-bullying  Creation of KPI's and training baselines | April 2017 |
| 3.2 | Sex and Relationships   | Improve links with Schools and Colleges to influence and support delivery of SRE   | Ongoing    |

|     | Education (SRE).   | Facilitate the continued delivery of 'Girl Talk, Boy Talk' in target schools   |  |
|-----|--|--|--|
|     |  | Support practitioners to deliver 'Speakeasy' to groups of parents  |  |
|     |  | Speakeasy workshop pilot to be delivered and evaluated   |  |
| 3.3 | Review the information, advice and guidance available to children, young people, families and professionals and work with them to improve the quality and accessibility of such information and improve the awareness of services that are | Creation of local offer website  App being developed for children and young people to provide a source of information and coping strategies.  Requirements of developing a single source of information within the CAMHS Specification for 2016/17 | April 2016  Yearly evaluation of impact to April 2020. |
|     | available locally.   |  |  |
| 3.4 |  |  |  |
|     | Review the feasibility of using technology based solutions to support young people and families with   | Following the review, consider commissioning intentions to enable young people to have   | April 2016   |

| additional emotional |  |
|----------------------|--|
| wellbeing and        |  |
| mental health        |  |
| needs.               |  |
|                      |  |

| 4   | Ensure all children, young people and families have access to timely, evidenced based, high quality specialist mental health supp when it is needed.  |  |            |
|-----|---|--|------------|
| No  | What  | How  | Timescales |
| 4.1 |   |  |            |
|     | Ensure that our Specialist  | ,  | April 2016 |
|     | Child and Adolescent Mental Health  | Minimum Dataset being developed with CAMHS to allow for reporting by contextual and presenting problems (CQUIN).   |            |
|     | Service can meet the needs of the   | School nursing service has responsibility to identify vulnerable children and ensure their health needs, including EWB needs, are met  |            |
|     | increasing numbers of Looked After  | Audit initial and review health care assessments to understand quality and develop improved arrangements for recording, identifying and accessing appropriate services, including CAMHS where indicated. |            |
|     | Children and other groups of vulnerable Review the CAMHS Looked After Children Pathway, following the re-configuration within HCC to ensure CAMHS continue to offer timely, evidence based support to this group of children. |  |            |
|     | children in a timely  | Monitor and support the implementation of the new health services re-commissioned within Swanwick Lodge (secure children's home), ensuring there are robust transition pathways in                       | April 2017 |

|     | manner.  | place between the community CAMHS and Swanwick Lodge.  |            |
|-----|--|--|------------|
|     |  |  |            |
|     |  |  |            |
| 4.2 |  |  |            |
|     | Implement a multi-agency single point of access for the Child and Adolescent | Implement through the re-tendering of CAMHS which has the following specific requirement:  "The Provider will be responsible for developing and implementing a multi-agency point of access pathway, which will be agreed in writing with Commissioners during the implementation period." | April 2016 |
|     | Mental Health<br>Service.  |  |            |
| 4.3 |  |  |            |
|     | Increase capacity within the i2i, intensive                                  | Additional resource allocated to CAMHS to enable the Service to respond in a timely manner to urgent assessments and crisis treatment within the community.  | Complete   |
|     | community<br>treatment   |  |            |
|     | team to ensure   |  |            |
|     | families have  |  |            |
|     | access to crisis support   |  |            |
|     | in a timely  |  |            |

|     | manner.   |  |            |
|-----|---|--|------------|
|     |   |  |            |
| 4.4 |   |  |            |
|     | Implement arrangements to ensure that young people in crisis have an appropriate place of safety, when detained by the police under Section 136 powers. | Identify an appropriate place of safety through commissioning arrangements.  | Complete   |
| 4.5 | Improve access and support for young people with either emerging or diagnosed eating disorders.   | Review the eating disorder pathway in light of the recently published guidance and identify priority areas for investment to ensure that Hampshire is compliant with the newly published standards.  Following the review, consider commissioning intentions to enable Hampshire to be compliant with the new standards. The eating disorder standards will be fully implemented and KPIs met by the required dates as set out in the guidance. To enable the standards to be met by the required dates the implementation will start from October 2015. | April 2016 |

| Continue to implement the CYP IAPT Programme.  Monitor progress through CCG assurance processes, CQRM and CRM.  Programme in Hampshire, ensuring routine outcome measures are measures are  Continue to support the CAMHS provider in implementing the CYP IAPT Programme.  Monitor progress through CCG assurance processes, CQRM and CRM.  Continue to develop the offer of evidenced based interventions, such as CBT and Systemic Family Therapy in accordance with NICE guidance and relevant standards.  Continue to support the development of staff through the IAPT Programme and internal training programme to increase access to evidence based interventions such as CBT and Systemic Family Therapy. |   |
|--|---|
| used routinely and inform patient choice, treatment  Implementation of the new CAMHS Service from April 2016 which requires the service to fully implement the routine collection of outcomes and monitoring, including session by session monitoring, to inform treatment and future re-design. This will be in accordance with the CYP   |   |
| IAPT Programme.  October 2016  transition arrangements between CAMHS and  | 6 |

|     | Health.   |                       |
|-----|---|-----------------------|
| 4.8 |   |                       |
| 4.8 | Continue to support joint working with the Youth Offending Service and police, ensuring the service has access to mental health advice and support and that there is a coordinated approach between youth offending | April 2016 April 2017 |
|     | services, police and  |                       |
|     | Child and<br>Adolescent<br>Mental Health  |                       |
|     | Services.   |                       |

|      |   |  | 1          |
|------|---|--|------------|
|      |   |  |            |
|      |   |  |            |
| 4.9  |   |  |            |
|      | Review the arrangements for psychiatric liaison across Hampshire, once the guidance for this area has been published. | Ensure that young people presenting at A&E with associated mental health difficulties have access to appropriate mental health support.  | TBC        |
| 4.10 |   | Ensure the needs of this group of young people are considered within HCC strategies, such as foster care and residential care strategies | April 2018 |

|      | young people who require ongoing care following discharge from Tier 4 placements.   |   |            |
|------|---|---|------------|
| 4.11 | Review the arrangements for the provision of forensic CAMHS within Hampshire.   | Undertake a review of the current commissioning arrangements and identify any opportunities for improved working. | April 2018 |
| 4.12 | Implement the new requirements within the CAMHS specification specifically in relation to children with disabilities. The overall | Mobilisation of the new CAMHS Contract  | April 2016 |

| aim of the      |  |
|-----------------|--|
| mental health   |  |
| disability      |  |
| service is to   |  |
| "Minimising     |  |
| the impact of   |  |
| mental illness  |  |
| and             |  |
| behavioural     |  |
| problems in     |  |
| order to        |  |
| achieve an      |  |
| individuals'    |  |
| maximum         |  |
| potential and   |  |
| a life that is  |  |
| fulfilling and  |  |
| integrated with |  |
| the rest of     |  |
| society."       |  |
|                 |  |