

Child and Adolescent Mental Health Services Local Transformation Plan Refresh March 2018

1. Introduction

- 1.1 Wigan's Child and Adolescent Mental Health Services (CAMHS) Local Transformation Plan (LTP) was first published in December 2015.
- 1.2 The plan is based on our **vision** that the Children and Young People (CYP) of Wigan Borough are confident and resilient individuals who are connected to their communities and are able to make an effective contribution as responsible citizens. As a commissioner, we want them to feel safe and care about their health, education and employment, and their community.
- 1.3 CAMHS are a fundamental component of our commissioned children's services, and our CAMHS LTP set out our **ambition** to redesign our services by 2020 to create a model for CAMHS that supports our vision by developing:
 - Integrated, place based working that is visible and active in communities;
 - linked to Schools, Early Years Settings, Start Well Centres and GPs; and
 - builds on the wider workforce capacity for the promotion of positive mental health and well-being.
- 1.4 The CCG publishes an annual update on progress with the plan, to show how CAMHS transformation funding has enabled Wigan Borough CCG and Wigan Council to deliver changes to the service in the year, and to outline how we intend to use the funding to continue to transform services.
- 1.5 This year's update coincides with the update of the joint CCG and Local Authority Mental Health Strategy and will be part of the refreshed Wigan Mental Health Strategy. The refreshed strategy brings together individual programmes of work across the life course into one document and for the first time includes the Start Well programme for children and young people. The Start Well programme is built on the consultation that underpinned the original CAMHS LTP and has undertaken further consultation to shape the future aspirations set out in the strategy.

2. Start Well Programme

- 2.1 The joint mental health strategy updates our aspirations for children and young people's mental health services in Wigan as follows:

- 2.2 We will ensure that our Early Help programme will meet vulnerable children's needs. This will involve professionals working with families to identify strengths and areas that they need to develop. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.
- 2.3 We will work with young people and families to develop and implement the locally agreed Child and Adolescent Mental Health Services (CAMHS) transformation plans which will deliver a THRIVE model of care. This will result in a synergy with the local 'Start Well' offer that will increase the protective factors around families that will increase the resilience and ability of those family units to self-manage times in their life that are stressful and place them at risk of emotional or mental health problems that can affect family cohesion.
- 2.4 We will work with children and young people, schools, colleges and communities raising awareness of, and developing change programmes that address the risks associated with bullying, low self-esteem distorted body image, communities of Interest and other risk factors associated with mental ill health.
- 2.5 We will deliver a fast responsive CAMHS treatment service that families can access within six weeks of being referred if that referral is routine and within 24 hours if urgent. We will increase the workforce in these services so they can deliver evidence based treatments for those children and young people and their families that require those treatments.
- 2.6 We will continue to develop a 'No Wrong Door' model of intervention that will support families and vulnerable children at the edge of care and reduce the need to take children into care. The three major residential care homes will become multi-agency hubs to deliver interventions and address the needs of children in care and leaving care across the borough.
- 2.7 We will work in partnership with our schools and expand our support by commissioning a schools link worker to be attached to every Service Delivery Footprint (SDF) in the borough. We will support the implementation of the Green Paper for children which will further aspire to provide emotional wellbeing support in educational settings.
- 2.8 We will improve services for children and young people with a Statement of Educational Needs Disabilities (SEND) to ensure a more effective whole system response for children and their families.
- 2.9 We will improve services for children and young people who feel in crisis through improving access to a mental health assessment at Accident and Emergency. All children will receive an assessment within one hour of arrival. We will also be

supporting the Greater Manchester aspiration to create safe places/crisis cafes across the region where children can seek help and support earlier for their distress and receive that support in a more appropriate child friendly environment.

- 2.10 We will redesign and implement a new neurodevelopmental pathway so that children and young people who are suspected of having a condition of autism or Attention Deficit and Hyperactivity Disorder (ADHD) will start an assessment for that condition within six weeks of being referred to the pathway.
- 2.11 We will improve the care and support of families who are experiencing mental health problems prior to conception, during pregnancy and after childbirth. We will work with colleagues across Greater Manchester Health & Social Care Partnership GMH&SCP to commission specialist mother and baby unit with attached community services to support follow up after discharge. We will also develop localised peri-natal pathways to support the GMH&SCP specialised services.
- 2.12 We will work with our colleagues across GMH&SCP to make sure that the right number of CAMHS, Eating Disorder, Learning Disability and secure tier 4 inpatient beds are available locally and reduce the need for children and young people to be placed a long way away from their home when needing an inpatient bed.
- 2.13 We will ensure that all children and young people who urgently need access to a Community Eating Disorder Service (CEDS) do so within 24 hours of referral and routine access within four weeks of referral.

3 Progress in 2017/18

- 3.1 In the second year of our transformation plan commissioners have invested an additional **£715k** in children and young people's mental health above the baseline funding that was set out in the original CAMHS LTP. The projects funded by this additional investment are described in the following sections and have made good progress in achieving the aspirations set out above.

3.2 Eating Disorder Services

The Wigan and Bolton Children and Young People's Community Eating Disorder Service, provided by North West Boroughs Healthcare NHS FT was successfully launched on the 1st April 2017 (**£195k**).

The service manages and coordinates community care for children and young people with eating disorders across both Boroughs, and also provides support to them on Rainbow Ward (the acute paediatric ward at Wrightington Wigan and Leigh NHS FT) if they have acute medical needs.

The service is working towards achieving the national access and waiting time standards, which are that an urgent referral should be seen within one week and routine referrals within four weeks.

LTP funding has also been used to commission specialist eating disorder training for schools provided by national charity BEAT (**£12k**). This will continue in 2018/19

3.3 Neurodevelopmental services

At the beginning of 2017/18 there were over 200 children and young people waiting for an assessment and potential diagnosis of autism, and an 18 month wait to diagnosis. Transformation funding was prioritised to clear the waiting list (**£95k**).

The funding was used by North West Boroughs to recruit a specialist team including: a CAMHS clinician experienced in autism; a clinical psychologist; a speech and language therapist; a community paediatrician; and administration support.

Over three months, from October to November 2017, the team assessed 208 children and young people and diagnosed in line with NICE guidelines. The team also sign posted children and young people and their families to support services following diagnosis.

There is still a significant challenge locally for children and young people with Autism Spectrum Conditions (ASC) and with ADHD. It is estimated from local data sources that there are over 700 children and young people in the Borough with ASC and a further 1,500 with ADHD. A number of these children are, or will end up in statutory services as a result of the challenging behaviour associated with their condition. Transformation of the neurodevelopmental pathway for these children is a priority for the LTP in 2018/19.

3.4 Core CAMHS provision.

The current service offer for CAMHS in Wigan is provided by North West Boroughs. The Trust provides the Single Point of Access, Tier 2 and Tier 3 CAMHS.

A continuing challenge of the offer is to have timely access to the service and realistic waiting times. Reduction in waiting times was a key priority for the LTP in 2017/18 (**£167k**).

North West Boroughs used the funding to recruit additional CAMHS clinicians to their team and also to support Wigan Family Welfare to provide group work and one to one therapy for children and young people on the waiting list. Wigan Family Welfare is a well-established voluntary sector organisation who provide counselling, advocacy and community development in the Wigan Borough.

As a result of this investment the majority of children and young people who need a specialist mental health assessment now do so within **six weeks** of referral unless the referral is urgent then it is within one day.

The table below shows the significant reduction in the number of children and young people waiting over six weeks for an appointment following referral:

Single Point of Access

Position as at 02/04/2017		Position as at 25/02/18	
Weeks waited	Number of Children and Young People	Weeks waited	Number of Children and Young People
18+	12	18+	0
11-17	64	11-17	4
6-10	83	6-10	27
0-5	166	0-5	188

While improvements have been made to the service, there is still work to be done. At Tier 2 there has been a significant reduction in the number of children and young people waiting 18 weeks or more, but an overall increase in the total number waiting:

Tier 2

Position as at 02/04/2017		Position as at 25/02/18	
Weeks waited	Number of Children and Young People	Weeks waited	Number of Children and Young People
18+	38	18+	6
11-17	18	11-17	35
6-10	27	6-10	38
0-5	22	0-5	53

At Tier 3 there has also been a reduction in the number of children and young people waiting 18 weeks or more:

Tier 3

Position as at 02/04/2017		Position as at 25/02/18	
Weeks waited	Number of Children and Young People	Weeks waited	Number of Children and Young People
18+	5	18+	1
11-17	8	11-17	5
6-10	8	6-10	8
0-5	21	0-5	18

The CCG and Local Authority are supporting North West Boroughs to transform how the service works with schools and GP practices so that we can help children and young people earlier and quicker. How we will manage further improvement is set out in section 4.

3.5 Workforce development.

The CCG and Local Authority are working with North West Boroughs to re-design and review the clinical need and demands of this service in line with THRIVE and our local DEAL asset based approach and to move away from the traditional tiered offer.

All the professionals working in the service demonstrate a commitment to engaging our young people in their care and also use CYP IAPT goals and assessment tools to help engage and devise treatment plans. The CCG and Local Authority are currently engaging with providers to ensure swift and appropriate data flow of these outcome measures to demonstrate effectiveness of the service and therapeutic interventions.

Locally, as it is nationally, recruitment and retention of experienced skilled clinicians continues to be an area of significant challenge. In Wigan, we have embraced the enhancement of the whole workforce and engaged with CYP IAPT to plan for a long term investment in our workforce.

By using initiatives such as the schools links pilot, local expertise of our safeguarding training board and national available training we are developing a series of training opportunities for our workforce across the Wigan footprint.

The continued development and delivery of the Wigan LTP, including the adoption of the THRIVE model, is an ongoing transformation of all services for young people within our borough which requires collaboration between all agencies to ensure children and young people receive an integrated response from health, social care and education partners.

In order to achieve this, the CCG and Local Authority have re-visited the partnership arrangement within CYP-IAPT and extended it to social care providers, and we are committed to engagement with our third sector providers to further enhance the emotional and wellbeing offer to our young people.

Transformation funding was used in 2017/18 to back fill for CAMHS staff who are on CYP-IAPT training (**£90k**)

The LTP has been supported directly by two CAMHS transformation leads who are commissioned from North West Boroughs to provide clinical input to the development and delivery of the plan (**£110k**) and a CAMHS lead on the development of the schools link project (**£46k**).

4 Next steps for 2018/19

4.1 The NHS Operational Planning and Contracting Guidance 2017-2019 set out the requirements for CCGs to deliver to implement the Mental Health Five Year Forward View for all ages. For children and young people, this includes:

- More high-quality mental health services for children and young people, so that at least 32% of children with a diagnosable condition are able to access evidence-based services by April 2019, including all areas being part of Children and Young People Improving Access to Psychological Therapies (CYP IAPT) by 2018; and
- Commissioning community eating disorder teams so that 95% of children and young people receive treatment within four weeks of referral for routine cases; and one week for urgent cases; and
- Increase access to evidence-based specialist perinatal mental health care, in line with the requirement to meet 100% of need by 2020/21, and ensure that care is in line with NICE recommendations.

Our next steps for 2018/19 focus on how we are going to increase access to evidence based services.

4.2 Children and young people's access to mental health services

Implementing the Five Year Forward View set out an indicative trajectory to achieve the NHS's commitment that *"by 2020/21, at least 70,000 more children and young people should have access to high-quality mental health care when they need it"*.

The CCG has planned increased access rates in order to meet this trajectory over the period to 2020/21. The trajectory for Wigan is shown in the following table:

	2017/18	2018/19	2019/20	2020/21
Percentage of CYP with a diagnosable mental health condition receiving treatment from an NHS-funded community mental health service	30%	32%	34%	35%
Total number of CYP with a diagnosable mental health condition in Wigan	6,400	6,400	6,400	6,400
Number of CYP who should be receiving treatment	1,920	2,048	2,176	2,240

For Wigan the indicative figure for 2017/18 is that **1,920** children and young people should be receiving treatment, which is **30%** of estimated prevalence.

Based on the latest published data (November 2017), the forecast for 2017/18 is that **1,171** children and young people will have received treatment, which is **18.3%** of estimated prevalence shows.

The data is published by NHS Digital, based on submissions of the Mental Health Minimum Data Set (MHMDS). At the moment in Wigan, the only provider that's submitting the MHMDS is North West Boroughs, which means that we are not capturing the activity that is done by community paediatrics at Wrightington Wigan and Leigh NHS FT or by our third sector provider, Wigan Family Welfare.

The CCG is working with these providers to support their submission of data to the MHMDS, and to evidence that there is significantly more activity being done in Wigan than is being reported.

CAMHS LTP funding is supporting three new projects in 2018/19, which will continue to increase access rates, these are described in the next sections.

4.3 Thrive School Link Service

Building on the Wigan schools link pilot project, the key role of the Thrive School Link Service is to provide consultation, interventions and assessments for children and young people's referrals received directly from schools and colleges. The service will also provide training for schools or colleges staff on mental health and emotional wellbeing topics.

The service will be provided by a team of seven qualified mental health professionals and will be an extension of the current CAMHS Single Point of Access provided by North West Boroughs.

Each of the Thrive School Link team members will be linked to one of the seven Service Delivery Footprint (SDF) areas in Wigan and aligned to the schools and colleges in their SDF. They will attend multi agency meetings (Huddles) in their footprint to support the integration of collaborative working with other services by supporting and promoting the 'Thriving' and 'Getting Advice' section of the Thrive model.

4.4 All aged RAID

CAMHS LTP funding will support the implementation of an All Age RAID Core 24 Service in Wigan in 2018/19. This is an extension of the current RAID service, and will provide mental health interventions to children and young people with a suspected mental health problem who attend A&E or are admitted to the paediatric ward at Wrightington Wigan and Leigh NHS FT (WWL).

4.5 No Wrong Door Project

Wigan Council's No Wrong Door project, which is being implemented, aims to transform services for young people on the edge of care and or in care in the Borough. The service proposal includes dedicated CAMHS resource, which will be funded via the LTP, in recognition of the vital role of CAMHS in supporting the most complex children and young people.

4.6 Enhance Core CAMHS

CAMHS transformation funding will provide additional capacity in our specialist mental health services and we are working with NWB to review the current position in terms of numbers of staff, skill mix and capabilities and to implement the new Greater Manchester CAMHS specification.

5 Greater Manchester Strategic Plans to Improve Children and Young People's Mental Health Services

Wigan's CAMHS LTP is closely aligned with Greater Manchester's strategic plans to improve children and young people's mental health services.

5.1 Greater Manchester Health and Social Care Partnership and the Sustainability and Transformation Plan (STP)

Mental health problems in children are associated with educational failure, family disruption, disability, offending and antisocial behaviour, placing demands on social services, schools and the youth justice system. Untreated mental health problems create distress not only in the children and young people, but also for their families and carers, continuing into adult life and affecting the next generation.

Devolution has enabled Greater Manchester to collectively respond to the challenges outlined within Future in Mind and in doing so, make a step change in transforming mental health services for children and young people living in Greater Manchester.

Greater Manchester has developed an all age Mental Health and Wellbeing Strategy that provides a framework to support the transformation of Children and Young People's mental health at a Local Transformation Partnership level and across the wider Greater Manchester Footprint.

The Greater Manchester strategy focuses on:

- **Prevention** - with an understanding that improving child and parental mental health and wellbeing is key to the overall future health and wellbeing of our communities.
- **Access** – improving our ability to reach all the people who need care and to support them to access timely and evidence-based treatment.
- **Integration** - many people with mental health problems also have physical problems. These can lead to significantly poorer health outcomes and reduced quality of life. Through the strategy we will aim to achieving parity between mental health and physical illness.
- **Sustainability** - In order to effect change for the long term the strategy will build on evidence from the innovations which have proven to have impact either in Greater Manchester or elsewhere, to challenge the way we plan and invest in mental health.

The Greater Manchester Mental Health Strategy can be viewed at:

https://www.greatermanchester-ca.gov.uk/downloads/download/55/greater_manchester_mental_health_strategy

5.2 Collaborative Commissioning across Greater Manchester

Following the publishing of Future in Mind a collaborative approach to the commissioning and delivery of children and young people's mental health services across all 10 of GM's Local Authorities/CCGs has been established.

This collaborative approach across the 10 Local Authority footprints is enabling the sharing and implementation of good/best practice, development of consistent care pathways and quality standards, leading to improved quality and equitable services across Greater Manchester.

Working together CCGs/LAs are delivering more efficient use of resources by commissioning and delivering some services at scale. The costs of Specialist CAMH Services are unlikely to be reduced, but efficiency will improved as a result of an implementation of THRIVE informed service delivery which will result in increased throughput. Additional efficiencies will be delivered by reducing the numbers of professionals involved in complex families for whom managing risk is the primary support/intervention.

5.3 Greater Manchester Programmes

The Greater Manchester Health & Social Care Partnership has made £60m available to support Greater Manchester's Local Transformation Partnerships to implement a three year cross sector system transformation programme that is characterised by:

- The development of a single Greater Manchester **Children and Young Person's mental health specification** and a single outcomes and performance framework that will be adopted by all providers of GM's CYP's mental health services. To be implemented from 1st April 2018
- The ongoing implementation of **GM ADHD and Community Eating Disorder** standards across all of GM's 10 localities
- The development of a **GM iTHRIVE Training Academy** that will, using an Organisational Development model, support all 10 Local Transformation Partnerships to develop models of care that are informed by the THRIVE framework which in turn will enable improved access to services for children and young people who require support advice and help.
- The development of a **GM wide Crisis Support offer** that will support an extended offer from community mental health services and includes:
 - 24/7 CAMHS Medical On Call rota.
 - All Age RAID (Rapid Assessment Interface and Discharge) – all children and young people presenting at A&E departments within Greater Manchester will receive timely mental health assessments 24/7 and within 2 hours of a child/young person being admitted.
 - Four Rapid Response Teams (Crisis Care and Home Treatment Teams) that by 2021 will be available 24/7.
 - Safe Zones (to be commissioned from the voluntary sector) and three 72 hour Crisis Beds for children and young people experiencing an emotional or psychiatric crisis to stabilise/prevent deterioration.
 - A GM inpatient Assessment and In-reach Centre – the centre will support decision making relating to admissions and facilitate more informed discharge planning leading to improved patient safety and experience of care.
 - As part of an integrated crisis care and inpatient care offer “Care Closer to Home” agreement has been reached with NHSE to collaborate with Greater Manchester Commissioning Hub to develop GM place based commissioning arrangements for inpatient mental health provision within Greater Manchester. This has resulted in agreement for three inpatient beds to be reallocated as 72 hours crisis care beds to support the crisis care pathway.
- A **GM wide mental health support in schools pilot**. Lessons learned will be shared across all 10 Local Transformation Partnership and build on a range of

education settings mental health support work that has already begun in each local authority area.

- A GM wide development programme to support **Further Education Colleges** to be better able to understand and respond to the impact of Adverse Childhood Experiences and Trauma on staff and students.
- The development of GM standards (to be implemented locally) to support the mental health needs of identified **vulnerable groups** (not an exclusive list) including:
 - Looked After Children those adopted and Care Leavers.
 - Young people involved with the Youth Justice System.
 - Children and young people with Neurological conditions (e.g. Autistic Spectrum Disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD)). We will build on the standards developed for ADHD to include ASD, with a view to developing commissioning recommendations and guidance for neurodevelopment disorders.
 - Lesbian, Gay, Bisexual, Transsexual, Queer, Intersex, Asexual (LGBTQIA)
 - Children and young people with Learning Disabilities.
 - Young Carers (someone aged 18 or under who helps look after a relative who has a condition, such as a disability, illness, mental health condition, or a drug or alcohol problem).
 - Children and young people with chronic physical health problems.
 - Children and young people who originate from Greater Manchester's Black and Minority Ethnic Communities.
 - Children and young people who have experienced abuse neglect and trauma including those who have experienced CSE.
- **Transition services** for young people moving from CYP mental health services to adult mental health services. The development of processes and protocols will be informed by the learning gained from two pilot projects up lifting ADHD and Community Eating Disorders to a young person's 25th Birthday. All of GM's 10 Local Transformation Partnerships will support the implementation of agreed transition arrangements between CAMHS and AMHS and will work with adult mental health commissioners to achieve the above objectives.
- **Perinatal and Infant Mental Health Services**
Improving access to Perinatal IAPT services:
 - Develop GM standards
 - Options appraisal of different models of care.
 - Develop business case detail as required.
 - Developing elements for inclusion in IAPT Service Spec (with performance and outcomes framework).

Early Attachment Services across GM:

- Draft a Business Case for CCGs to use.
- Develop GM standards.
- Developing a GM PIMH Service Spec (with performance & outcomes framework).
- Offer support to localities to take interagency PIMH developments forward

Developing a PNIMH training ladder.

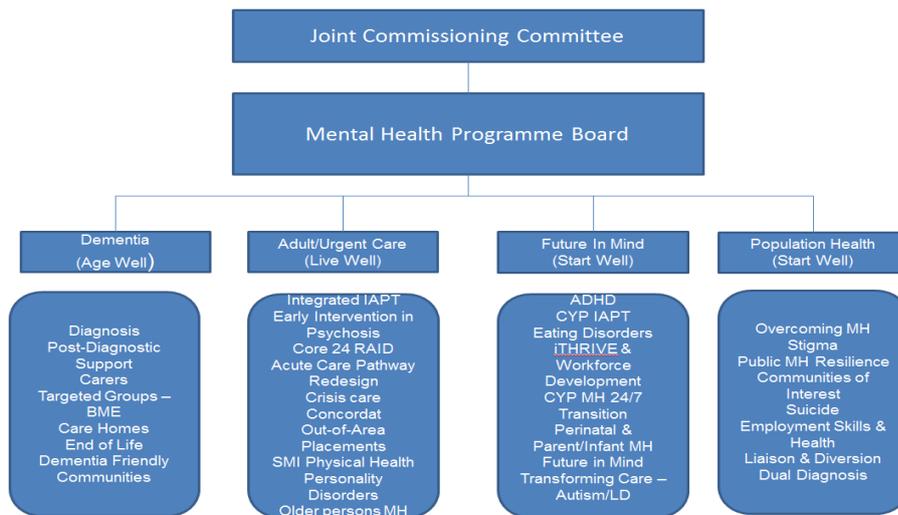
- **Workforce Development** - the importance of ensuring that organisations have the right workforce with the right skills and knowledge to deliver effective services is recognised by all and is a key ingredient in creating system transformation through building an effective workforce. A whole GM CYP mental health system skills audit that maps onto the iTHRIVE framework is underway, and the outcomes will be utilised to contribute to the planning of the whole GM children and young person's workforce planning. Local Transformation Partnerships have agreed to collaborate to ensure that the workforce will grow to meet the planned increase of young people accessing specialist services.
- **Youth Justice** – discussions are underway to develop a place based commissioning model of extended support for GM's Youth Justice Service. It is proposed that additional capacity is made available to recruit staff to coordinate and support joint working between GM's Youth Offending Services, Children and Young Person's mental health services and GM's Integrated Health in Custody and Wider Liaison and Diversion Service to better: promote development of early recognition; improve communication between agencies; promote continuity of care and review pathways.
- **GM's Trauma/Resilience Hub** – set up to support those children, young people and families who were affected by the terror attack in Greater Manchester, and options are being considered to determine the legacy arrangements for this highly effective model. A range of options have been developed to support the ongoing function of the Hub to enable a Greater Manchester trauma service, supporting any child, young person or family who has experienced trauma, for example, families coming into Greater Manchester seeking asylum, being established.

6 Summary

- 6.1 The funding that's been allocated to Wigan Borough CCG for Children and Young People's mental health in 2018/19 is **£1,232k**. The priorities for the allocation are detailed above and summarised in the following table:

Section	Summary	Value
3.2	Community Eating Disorder Service	£200k
3.2	BEAT	£28k
3.5	CYP-IAPT training back fill	£62k
3.5	CAMHS transformation lead posts	£101k
4.3	THRIVE schools link service	£360k
4.4	All age RAID	£105k
4.5	No Wrong Door	£200k
3.4/4.6	Enhance core CAMHS	£176k
	Total	£1,232k

- 6.2 The local Future in Mind Group will continue to be responsible for overseeing the effective delivery of these priorities. The group meets monthly and has representatives from all the local commissioning and provider organisations, the community and voluntary sector and from education.
- 6.3 The Future in Mind Group now reports to the newly established Wigan Mental Health Programme Board, which holds the group to account for the delivery of the work programme.



- 6.4 All local partners are working together, through the Wigan Future in Mind Delivery group, to ensure the best use of existing as well as new resources, so that all available funds are used to support improved outcomes in line with the Mental Health Five Year Forward View.
- 6.5 Progress is monitored via local performance indicators and the GM Future in Mind dashboard, which is under development.