

‘Open Up, Reach Out’ – Children’s Mental Health Local
Transformation Plan Refresh 2019

Agenda item 9
HWB/28/19

Report title: ‘Open Up, Reach Out’ – Children’s Mental Health Local Transformation Plan Refresh 2019	
Report to: Essex Health and Wellbeing Board	
Report author: Chris Martin (Director Strategic Commissioning and Policy Children and Families) chris.martin@essex.gov.uk	
Date: 20 November 2019	For: Discussion
Enquiries to: Matt Barnett (Mental Health Commissioner), matthew.barnett@essex.gov.uk Emily Oliver (Head of Commissioning), Emily.oliver@essex.gov.uk Jess Thom (Assistant Director, CAMHS Commissioning, West Essex CCG), Jessica.thom@nhs.net	
County Divisions affected: All	

1. Purpose of report

- 1.1. The purpose of this report is to present the refreshed ‘Open Up, Reach Out’ the Southend, Essex and Thurrock Children’s Mental Health Local Transformation Plan to the Health and Wellbeing Board for endorsement. The plan was approved in 2015, we are therefore not seeking re-approval.

2. Recommendations

- 2.1 To endorse the proposals to refresh the five-year transformation plan ‘Open Up, Reach Out’ as detailed in the report. This is the refresh for year 2018/19 year 4 in year 5.

3. Background and proposal

- 3.1 In March 2015 NHS England and the Department of Health published Future in Mind, a national ambition to transform the design and delivery of local services for children and young people with mental health needs. This was followed by the 5 year Forward View for mental health. The focus of these documents is on transforming the system through early intervention, evidenced-based treatment and measurable outcomes. Additional investment was made available subject to areas producing a five-year Local Transformation Plan setting out how they would respond to the transformation.
- 3.2 Health and social care partners across Southend, Essex and Thurrock had agreed to jointly commission an Emotional Wellbeing and Mental Health

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Service (EWMHS) for children and young people. Alongside the new service commissioners collaborated with NELFT (the EWMHS provider), a range of stakeholders and young people to develop our Local Transformation Plan ‘Open Up, Reach Out’. Our plan was one of only 6 nationally to be rated as green in all categories. The new service and our transformation plan launched in November 2015 with endorsement from the three Health and Wellbeing Boards. Local areas are required to refresh their transformation plan each year and seek endorsement from the relevant Health & Wellbeing Board/s.

- 3.3 Our aims, set out in ‘Open up, Reach out’ are to improve access and equality, build capacity and capability in the system and build resilience in the community. These aims are supported by 6 principles:
- Early action – avoiding and preventing mental health problems.
 - No judgement, no stigma – with care that is right for each individual, delivered in safe places and with children and young people having a say in decisions.
 - Support for the whole family – with care as a part of daily life backed up by professionals and specialists when needed.
 - Inform and empower – information there for everyone, simple to access, providing tools for self-care and resilience, as well as recovery.
 - Joined-up services – efficient, effective and clear for all to understand.
 - Better outcomes – through evidence-based care and listening and responding to feedback.

Year 1- 3 (2015- 2018)

- 3.4 Significant progress has been made during the first three years:
- **Year 1** (2015/16) had a great start by supporting double the number of children and young people compared with the previous year, the transition to a new system encountered challenges but began to see great service improvements.
 - In **year 2** (2016/17) the new Emotional Wellbeing & Mental Health Service was embedding in the community with great progress on; recruitment and mobilisation of the staff and teams, the promotion of the open access supported referrals into the service from a wide range of; children, young people, their families/ carers, schools and other professionals.

We continued to invest in children and young people’s services with additional investment into the crisis service, engagement with children and young people and schools support.

- **Year 3** (2017/18) was the year to further improve and transform children and young people’s emotional wellbeing and mental health services. We invested in an online counselling service, reconfigured our CYP engagement model and reviewed our crisis and transitions offer.

Where we are now

Year 4 (2018/2019):

3.5 Year 4 was a year to further implement service redesign and more services to support meeting the emotional and mental health needs of our children and young people. During year 4 we have focused on:

- Mobilising the re-modelled Crisis service, the EWMHS Learning disability service and embedding the specialist Eating disorder service
- Designing and seeking a provider to deliver the transitions service for our 16-25yrs
- Promoting our digital offer and CYP engagement
- Improving our NHS target for CYP to access mental health support
- Reviewing and evaluating our current services for CYP mental health to plan for the future

Year 4 (2018/19) Outcome overview

Priority	Action	Outcome
EWMH Service	Continue to improve access to mental health services for CYP	12,985 CYP referrals accepted, 91.43% of CYP receiving treatment within 18 weeks & 73.59% reported improved outcomes within 6months of treatment.
Digital service	Continue to deliver and evaluate the Online Counselling offer for 11-18 yrs (Kooth) available to across Southend, Essex & Thurrock 7 days a week	1,907 individual CYP accessed service in year https://kooth.com/
Crisis service	Roll-out the new intensive support service for CYP in crisis and in need of intensive support.	The new service has begun recruitment and is partially mobilized, with full service to begin in April 2020. The new model offers a rapid response, intense support and longer home treatment provision.
Transitions	design and procure a Transitions service offer for CYP 16-25yrs	Successful procurement of two transitions services for young adults 16-25yrs leaving EWMHS; one service covering

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		Southend & Essex and the other covering Thurrock.
EWMH Learning Difficulty service	Fully mobilised the EWMH Learning difficulty service across Southend, Essex & Thurrock.	Fully recruited and mobilised service and team.
Review and evaluate our commissioning and commissioned services	Undertake an evaluation of our 10 partner commissioning arrangement, evaluate the EWMH model in Southend, Essex & Thurrock and review our current CYPMH transformation services.	Completed the 10 partner evaluation, the EWMH model evaluation and partial review of CYPMH transformation services.
Improve access to CYP mental health services	Improve the access in relation to the NHSE access target of 32% in 2018/19 for CYP to access support when needed	Average across the 7 NHS CCG areas was 33.2% access rate for CYP in 2018/19.
Improve waiting times to access CYP Eating disorder service	Work towards meeting the national target of 95% waiting time standard of; 1 week wait for urgent and 4 week wait for routine referrals.	Average percentage achieved in 2018/19 across the 7 NHS CCGs for urgent was 82.8%and routine was 67.2%

- 3.6 At the end of year 4 (March 2019) the EWMH service has an active caseload of over 5,700 young people, 53 cases within the crisis team and has seen 226 first appointments within the Eating Disorder service.

The top three presenting problems across Essex were:

- Emotional Disorder
- Conduct Disorder
- Deliberate Self Harm

In year 4 (April 2018- March 2019), a total of over 17,200 referrals were received to the single point of access this is an average of 1400 referrals per month, of which 12,985 were signposted to the EWMH Service. The highest referral rate was in North East Essex CCG followed by Mid Essex and West Essex CCGs. The average acceptance rate across Southend, Essex and Thurrock was 98%, indicating more children and young people continue to access the service.

3.7 Year 4 (2018/19) Key performance indicators for our plan

Delivery	Review and planning	Building resilience in communities
<ul style="list-style-type: none"> Continue to embed the Essex wide specialist Community Eating Disorder Service- Achieved Mobilisation of the Learning Disability CAMHS Pilot- Achieved Pilot the new (Crisis) Enhanced Community Response- Good progress, full mobilisation in Year 5 Implementation of the transitions service- Good progress, full mobilisation in Year 5 Pilot an infant mental health service 0-5 years- Good progress, ongoing work for delivery Roll-out the Self-Harm management toolkit to health professionals- ongoing work for delivery 	<ul style="list-style-type: none"> Review the EWMH service and the Commissioning partnership- Achieved Plan for the future service provision- Ongoing work, good progress Develop an in-depth workforce strategy for CYP mental health & wider system- Achieved 	<ul style="list-style-type: none"> Ensure increased numbers of CYP commence treatment in NHS funded community services- good progress and ongoing Continuous evidence-based, outcomes- good progress and ongoing Continue to improve and build CYP and family engagement and communication- good progress and ongoing Continue to develop, integrate and work with the wider children’s service system- progress achieved and ongoing

3.8 Priorities for Year 5 (2019/20)

As we enter year 5 of our five-year local transformation plan, there is still a major challenge to achieve our aspirations.

Year 5 is a year of learning from our evaluations, adapting, integrating and planning across children and young people’s emotional wellbeing and mental health areas and the wider system to support the improvement and sustainability.

We will:

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- **Plan for the future** re-procurement options for children and young people’s emotional and mental health services, taking into account; STP’s, NHS LTP objectives, achievements in CYPMH to date and remaining focussed on CYP & their family’s needs
- Continue to embed the Essex wide specialist **Community Eating Disorder Service**, - By 2020/21, evidence-based community eating disorder services for children and young people will be in place ensuring that 95% presenting cases will receive NICE concordant treatment within the nationally prescribed timescales.
- Evaluate the **Learning Disability CAMHS** across Southend, Essex & Thurrock - to inform future CAMHS re-procurement options
- **Crisis services** – Full mobilization of the new service model offering the existing A+E liaison pathway together with an Enhanced Community Response pathway (including Home Treatment)
- **Transitions** – Oversee the two Pilots and review the services to inform the future CAMHS re-procurement options
- **Access** – work together to ensure increased numbers of CYP commence treatment in NHS funded community services and that all providers are able to flow data from these services to the NHS national MHSDS.
- **Outcomes** – work with NELFT to sustain a culture of continuous evidence-based, outcomes focused service improvement delivered by a workforce with the right mix of skills, competencies and experience working with the existing Children and Young People’s Improving Access to Psychological Therapies (CYP IAPT) programme
- Continue to **improve and build CYP and family engagement and communication**
- Continue to **develop, integrate and work with the wider children’s service system** to provide a seamless offer (Tier 4 inpatient, EHC, TCP, SEND, Paediatric care, Children Looked After & Children in Need)

3.9 Year 5 (2019/20) Key performance indicators

Delivery	Review and planning	Building resilience in communities
<ul style="list-style-type: none"> • Continue to embed the Essex wide specialist Community Eating Disorder Service • Fully mobilise the new (Crisis) Enhanced Community Response • Full Implementation of the transitions 	<ul style="list-style-type: none"> • Implement the recommendations from the EWMH service and the Commissioning partnership evaluations • Plan for the future service provision • Review the commissioned pilots (EWMHS LD, Crisis, Kooth & Transitions) • Align this LTP to the 	<ul style="list-style-type: none"> • Ensure increased numbers of CYP commence treatment in NHS funded community services • Continuous evidence-based, outcomes • Continue to improve and build CYP and family engagement

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service pilot <ul style="list-style-type: none"> Fully mobilise the infant mental health service 0-5 years 	NHS long term plan (LTP)	and communication <ul style="list-style-type: none"> Continue to develop, integrate and work with the wider children’s service system
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The refreshed ‘Open Up, Reach Out’ is the transformation plan for the emotional wellbeing and mental health of children and young people in Southend, Essex and Thurrock. Once approved by NHS England, it will be published on all Essex CCG websites and Essex County Council’s website and made available for other stakeholders to publish.

4. Options

- 4.1 Future in Mind included additional investment for Children’s Mental Health, this is subject to local areas producing Local Transformation Plans and refreshing them each year for review. The Local Plans are required to be endorsed by the Health & Wellbeing Board and are subject to review by NHS England. Failure to produce an appropriate plan could put the additional investment at risk.
- 4.2 There are no staffing implications for Essex County Council as all staff and resource implications principally lay with the commissioned provider NELFT

5. Issues for Consideration

In January 2019, NHS England launched the NHS Long Term Plan (LTP) the LTP sets out the transformation and priorities for the NHS over the next 10 years and offers a clear set of priorities for Children and young people’s mental health, these are:

- By 2023/24, at least an additional 345,000 children and young people aged 0-25 will be able to access support via NHS-funded mental health services and [school or college-based Mental Health Support Teams](#).
- Developing the new Mental Health Support Teams in schools and colleges.
- Investment will continue into [eating disorder services](#) to deliver the [waiting time standard](#) of; one week in urgent cases and four weeks for non-urgent cases at 95% beyond 2020/21.
- Improved support for young people during a mental health crisis, 24 hours a day, 7 days a week
- Develop new approaches to supporting [young adults aged 18-25](#) which bring together partners in health, social care, education and the voluntary sector CYP mental health plans will align with those for children and young people with learning disability, autism, special educational needs and disability (SEND), children and young people’s services, and health and justice [from 2022/23].

- ECC is committed to working with partners to ensure that a consistent offer is in place for children and young people in Essex. This will be driven through continued participation in the Collaborative Commissioning Forum for mental health.

5.1 Financial Implications

- 5.1.1 Future in Mind provided Clinical Commissioning Groups with additional funding to invest in Children’s Mental Health subject to developing a Local Transformation Plan. In line with our collaborative commissioning arrangements a single transformation plan and approach has been developed.

The year 4 (2018/19) EWMHS contract value was just under £20 million. The LTP investment during 2018/19 equated to £5.8 million and supported the continuation of service developments in previous years with further additional investment into new provision enabled by LTP growth monies.

The Year 5 (2019/20) EWMHS contact value is just over £21m. The proposed LTP investment (2019/20) is £7.0m. The Table below gives a detailed breakdown of the planned spend on service development for 2019/20.

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Scheme Number	Description of work stream	R/NR	Provider	Total Planned spend Essex
LTP 1	Expansion in local services for specialist community Eating Disorders	R	NELFT	978,756
LTP 3	Development and publication of the Essex wide Local Transformation Plan (LTP) with an accessible version for CYP and their families	R	Other	10,000
LTP 4	Active engagement with CYP in partnership with Represent	NR	Represent	-
LTP 6	Project Management Office (PMO) function to deliver transformation work streams	R	NELFT	110,904
LTP 10	Enhanced crisis service cover across Southend Essex and Thurrock and building capacity in the teams to provide more intensive care at home	R	NELFT	442,710
LTP 11	Enhanced staffing capacity in the Single Point of Access team to ensure better information, consultation and support, and signposting to local services	R	NELFT	143,446
LTP 12	Enhanced senior psychology posts across each locality to ensure high quality supervision	R	NELFT	78,240
LTP 13	Increased junior psychology posts at a local level to enhance service delivery	R	NELFT	432,345
LTP 14	Additional staffing capacity in all locality teams with a specific focus on low to moderate needs and increased capacity for greater access	R	NELFT	613,935
LTP 15	Increase support for CYP with Complex needs, i.e. SEN, ASD, LD etc	R	NELFT	205,735
LTP 16	Enhanced management capacity at a local level, Southend Essex and Thurrock	R	NELFT	297,776
LTP 17	Additional local bespoke CYP IAPT training programmes over and above the national IAPT programme, with a specific focus on Primary Mental Health Workers	R	NELFT	102,702
LTP 19	Building community resilience by providing additional support to schools and the voluntary sector	R	NELFT	318,378
LTP 20	Transformation Support Cost	NR	Other	-
LTP 21	Communication and Engagement	R	Represent	81,671
LTP 21 A	Communication and Engagement	R	Other	20,929
LPT 22	Care and treatment Review		Other	-
LPT 23	Transitions - support for young people leaving childrens services gap (excluding Thurrock) including MH Peer Support	NR	Core Assets	383,066
LPT 23	Transitions - support for young people leaving childrens services gap Thurrock		MIND	16,500
LPT 24	LD - additional capacity and equitable offer across county	R	NELFT	337,089
LPT 25	Mental Health Direct - OOH clinical triage and advice service			-
LPT 26	Online Counselling Service	R	KOOTH	258,315
LPT 27	Crisis remodelling	R	NELFT	1,236,603
LPT 28	Service evaluation	NR	Atta In and Apteligen	-
LPT 29	Work force development and Tetr 4 Interface	NR	Other	5,729
LPT 30	Communications Lead role	NR	ECC	9,150
LPT 31	Information portal	NR	ECC	1,500
LPT 32	Self Harm Management Toolkit	NR	ECC	20,000
LTP 34	Infant Mental Health Service	R	EP UT	395,784
LTP 35	FIF			-
LTP 36	Sound Doctor			-
LTP 37	Waiting time reduction	R	NELFT	261,722
LTP 37-A	Waiting time reduction	NR	NELFT	-
LTP 1A	CYPEDS	R	Technomed	5,990
LTP 38	Transforming Care CYP 'spot purchase'	R	Other	100,000
LTP 39	Wellbeing Workshops in Primary Schools	R	N.O.W.	16,200
LTP 40	CYP engagement sub-group for the EWMHS re-commissioning	R	Mid NEE Mind	22,500
LTP 41	CYP MH Ambassadors - Healthwatch	R	Healthwatch Essex	9,750
	CLDS	NR	EP UT	96,733
	Other local schemes	NR	BEAT	30,000
	Total			7,044,158
	Allocation			
	Eating Disorders			958,889
	Other transformation projects			6,088,696
	Total Planned spend			7,047,585

- 5.1.3 Endorsement of the refreshed ‘Open Up, Reach Out’ Local Transformation Plan does not commit Local Authorities to any additional spend, so there are no direct financial implications. Health partners must comply with the terms of the Future in Mind funding.

5.2 Legal Implications

- 5.2.1 The NHS England requires CCGs to seek endorsement from the relevant Health & Wellbeing Boards for the Local Transformation Plan.
- 5.2.2 There is no direct legal implication for Essex County Council or the Health and Wellbeing Board.

6. Equality and Diversity implications

- 6.1 The Public Sector Equality Duty applies to the Health and Wellbeing Board when it makes decisions. The duty requires it to have regard to the need to:
- (a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination *etc.*, on the grounds of a protected characteristic unlawful
 - (b) Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - (c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
- 6.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, gender, and sexual orientation. The Act states that ‘marriage and civil partnership’ is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).
- 6.3 One of the key aims of Open Up, Reach out is to improve access and equality. Significant progress has been made through establishing a single point of access and opening up the referrals process.
- 6.4 The locality teams will work with partners to create a wider understanding of mental health and by educating families and communities we intend to eliminate discrimination and stigma. Our teams will make services more responsive and easier to get to by taking support to young people.
- 6.5 We are prioritising assessments for vulnerable groups including children known to the youth justice service, children in care or on the edge of care and children with complex needs such as physical or learning disabilities.

7. List of appendices

7.1 None

8. List of background papers

8.1 Future in Mind: <https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people>

8.2 The Five Year Forward View for Mental Health: <https://www.england.nhs.uk/wp-content/uploads/2016/02/Mental-Health-Taskforce-FYFV-final.pdf>

8.3 Implementing the Five Year Forward View for Mental Health: <https://www.england.nhs.uk/mentalhealth/taskforce/imp/>