

Child and Adolescent Mental Health Services Local Transformation Plan (Refresh March 2020)

1. Background and context

- 1.1 Wigan's refreshed Borough Locality Plan 'Happy Healthy People 2020-25' is our shared plan for how we will all work together in Wigan to transform health and social care services. The locality plan includes the wishes of residents of Wigan who want to be more in control of their lives, with joined up services, and for the public to be part of the fantastic changes ahead.
- 1.2 We believe that the implementation of our refreshed Locality Plan will transform the health and care system for the residents of our borough. A fundamental enabler of the plan is the continued development of a Local Care Organisation (LCO), where commissioners and providers work collaboratively to deliver a set of ambitious population outcomes.
- 1.3 The Healthier Wigan Partnership (HWP) is Wigan Borough's Local Care Organisation and brings together the main health and care providers across Primary, Community, Mental Health, Social Care and our local hospitals. Its mission is for all services to work together to provide healthy, happy and fulfilled lives to our Wigan residents.
- 1.4 Healthier Wigan has developed a placed based operating model across seven delivery footprints of 30-50,000 population. This is to achieve more joined up services around people in their local areas.
- 1.5 The development of service delivery footprints (SDFs) includes the strengthening of GP leadership through the development of GP clusters aligned to SDFs, this connected Primary Care and other public and voluntary sector services to positively impact on the determinants of ill health. Services also included (but not exclusively); Housing, Social Services, the Police, Mental Health Services, Offender Management Services and access to a wider set of none medical support and interventions for patients, such as social prescribing through community groups.
- 1.6 We will work through our Healthier Wigan Partnership to radically improve residents' health and wellbeing and transform services. By 2025, we will have health and social care services that:
 - Support people to be well and empowers them to look after their own health and wellbeing.
 - Are easily available, supporting people at home through digital technology as much as possible, or in convenient places in their community, keeping our hospitals for when they are most needed.

- Are the best they can be, all working together to make sure services are safe, sustainable and delivering great care.
- 1.7 The refreshed locality plan includes high ambitions and a clear **vision** for our children, young people and families. We want all of our children and young people to be confident, resilient, healthy and happy individuals who feel connected into their community and make an effective contribution as responsible residents. We want them to feel safe and to care about their health and wellbeing, education, employment and their community. To deliver this approach in children’s services we have developed the Deal for Children and Young People.
- 1.8 Providing opportunities for the best start in life is a cornerstone of the refreshed Deal 2030, which sets out how we will be working together to create a truly world class place to live for the decade ahead. To deliver this approach in children’s services we have developed the Deal for Children and Young People.
- 1.9 The **Deal for Children and Young People in Wigan** is an informal contract that provides the basis for reforming children’s services in the borough to deliver this vision and acknowledges the importance of our residents as our most important asset. Through our workforce having different conversations, and connecting people to opportunities, it is our ambition to build more resilient communities with children and families at their heart. We call this an asset based approach to our work and want to embed a new culture in our workforce; know your community; have a different strength based conversation, to make more meaningful connections to children, young people and families.
- 1.10 Children’s emotional health and wellbeing is a fundamental component of our children’s services, and our Child and Adolescent Mental Health Services (CAMHS) Local Transformation Plan (LTP) set out our **ambition** to redesign our services by 2021 to create a model for CAMHS that supports our vision by developing:
- Integrated, place based working that is visible and active in our 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.
- 1.11 Wigan’s CAMHS LTP was first published in December 2015, and since then the CCG has published an annual update on progress with the plan. This year’s update shows how CAMHS transformation funding has enabled Wigan to deliver changes in the year, and to outline how we intend to use the funding to continue to transform services in the final year of the plan.

2. Wigan's Mental Health Strategy - Start Well Programme

- 2.1 The CAMHS LTP is aligned to the Start Well programme for children and young people, which is part of the joint CCG and Local Authority mental health strategy (July 2018). The strategy compliments the ambitions and opportunities that we have set out locally as a partnership to reform services for children, young people and their families. The Start Well programme includes our aspirations for children and young people's mental health services in Wigan:
- 2.2 We are ensuring 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 are working with young people and families to develop and implement the locally agreed 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 are working 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 are developing our Atom Service. A model of intervention developed based on 'No Wrong Door' that will support the transformation of residential care for young people in care, enabling them to achieve permanence in family based care. The model also provides community based intervention to support families edging away from care. The three residential care homes will become multi-agency hubs that will deliver a range of bespoke interventions.
- 2.7 We will continue to strengthen our offer for children in need of help and protection including children in care and care leavers, through developing collaborative effective teams around the child models embedding the THRIVE approach within statutory children social care frameworks.

- 2.8 We are working in partnership with our schools and expanded our support by commissioning a schools link worker to be attached to every 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.
- 2.9 We are improving 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.
- 2.10 We are improving 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 are 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.
- 2.11 We are redesigning and implementing 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.
- 2.12 We are working 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 are ensuring 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 THRIVE

- 3.1 The aspirations set out in the Deal for Children and Young People and the Start Well programme of Wigan's mental health strategy will be delivered through a THRIVE model of care¹.
- 3.2 The THRIVE framework is an integrated, person centred and needs led approach to delivering mental health services for children, young people and their families. It groups 'need' into five categories; Thriving, Getting Advice and Signposting, Getting Help, Getting More Help and Getting Risk Support. Emphasis is placed on prevention and the promotion of mental health and wellbeing.

¹ Miranda Wolpert et al. THRIVE The Anna Freud Centre–Tavistock Model for CAMHS

3.3 Children, young people and their families are empowered through active involvement in decisions about their care through shared decision making, which is fundamental to the approach.

3.4 The THRIVE model is illustrated below:



The picture on the left describes the input that's offered for each group, and the picture on the right describes the state of being of young people in that group - using language informed by consultation with young people and parents with experience of service use.

The THRIVE model is aligned with the principles of the Deal, which are to promote resilience in our children and young people while making sure that they have the right support available at the right time and building on the strengths and assets we have in our communities.

There has already been a significant amount of reform work done in Wigan as part of the Deal, which we will build on to fully implement a THRIVE model.

4. NHS Long Term Plan

4.1 Our aspirations are aligned to the core ambitions for children and young people's mental health that are included in the NHS Long Term Plan, which include:

- Over the next 10 years, 100% of children and young people who need it will be able to access specialist mental health services.
- Test four week waiting times pilot in services with view to establish a national waiting time standard for children and young people.
- 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 by 2023/24.

- Extend current service models to create a comprehensive offer for 0-25 year olds that reaches across mental health services for children, young people and adults.
- Over the next five years the NHS will fund new Mental Health Support Teams working in schools and colleges, building on the support already available, which will be rolled out to between one-fifth and a quarter of the country by the end of 2023.
- All children and young people experiencing crisis will be able to access crisis care 24 hours a day, seven days a week by 2023/24.
- New services for children who have complex needs that are not currently being met, including a number of children who have been subject to sexual assault but who are not reaching the attention of Sexual Assault Referral Services. For 6,000 highly vulnerable children with complex trauma this will provide consultation, advice, assessment, treatment and transition into integrated services.
- Boost investment in children and young people's eating disorder services. As need continues to rise, extra investment will allow us to maintain delivery of the 95% standard beyond 2020/21.
- Reference THRIVE as an operating model which can support young people 18-25 as well as children.

The ambitions that are set out in the long term plan recognise the importance of children's emotional health and wellbeing, and support our ambitions locally to transform services.

5. Mental Health and Me

We are committed to actively involving children and young people in the transformation of services in Wigan to support their emotional health and well-being.

Young people have consistently voted mental health as one of the top issues of concern for local young people in the UK Youth Parliament's 'Make Your Mark' ballot (facilitated locally by Wigan and Leigh Youth Cabinet). During 2019/20, Wigan and Leigh Youth Cabinet's young people developed a series of engagement events in response to the results as part of their 'Mental Health and Me' campaign.

The youth cabinet have held two 'Mental Health and Me' events during the year, which gave us a chance to share our transformation plans with over 100 young people, and allowed them to challenge us and ask for more detailed information where needed.

- THRIVE School Link Service
- Kooth
- Neurodevelopmental services - early help and training
- ATOM



- Enhance NWB CAMHS
- Neurodevelopmental services - joint CAMHS/paediatric triage
- Wigan and Bolton Community Eating Disorder Service
- All aged Mental Health Liaison Team

6.4 There has been a particular focus this year on achieving the key access and waiting time targets for specialist mental health services for children and young people in the Borough.

6.5 THRIVE School Link Service

The Wigan CAMHS School Link Service was launched in January 2019, with an investment of **£357k**. The key role of the service is to provide consultation, interventions and assessments for children and young people’s referrals received directly from schools and colleges. The service aims to build up professionals knowledge for supporting all young people’s emotional health that attend the school through advice, guidance and skill development on mental health and emotional wellbeing topics.

Each of the Wigan CAMHS School Link team members are linked to one of the seven SDF areas in Wigan and aligned to the schools and colleges in their SDF. They 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.

Through the team, schools have access to early intervention and prevention activities including:

- Health promotion sessions for young people about mental health and keeping well;
- Staff training about mental health and supporting young people in school; and
- Parent coffee mornings about mental health and supporting your young person.

The team also consult with key school staff and other professional on the identified needs of individual students, and support them to put interventions in for those young people.

Achievements in 2019/20

Nearly all the primary and secondary schools in Wigan are now working with the School Link Team:

Our achievements

122 of 127 primary and secondary schools in Wigan have taken up the service. 

2,198 consultations with school professionals which resulted in:

- **94% (2,073)** guidance and support offered so school could directly support the young person
- **6% (125)** direct psychoeducation work with a CAMHS practitioner.

40 health promotion sessions delivered reaching **2,313** young people.  

Schools were asked to feedback on the service, and their comments have been really positive:

Feedback from schools

51 schools responded to our feedback survey. 

96% rated the service positively, of these **84%** rated the service as very good. No responses rated the service as poor. 

92% felt that working with the CAMHS School Link Team had made a difference to how they support young people with mental health needs in their school. 

Most importantly, school's confidence in supporting young people with mental health needs has improved since the team was introduced:

Before and after the team was introduced

Confidence in supporting young people with mental health needs

| | |
|--|---|
|  <p>Before 76% of rated their confidence as average and not confident</p> |  <p>After 80% rated themselves as confident, 67% rating themselves as very confident. No one rating themselves as not confident</p> |
|--|---|

Relationship with Wigan CAMHS

| | |
|---|--|
|  <p>Before 88% rated the relationship as average and negative</p> |  <p>After 88% rated the relationship as positive, 38% rated it as very positive. No school reporting a negative relationship </p> |
|---|--|

Next steps for 2020/21

Wigan is committed to prevention work for children and young people's mental health and wellbeing and further development of the support into education settings. This includes mental health support teams and Educational Mental Health Practitioners based in primary, secondary and further education schools and colleges.

In 2020/21 we will be supporting the Link Programme, a major national initiative which is being rolled out over the next four years. The aim of the programme is to bring together education and mental health professionals so that more children and young people get the help and support they need, when they need it. The programme centres around two full-day workshops which bring together education and mental health professionals from across the locality.

The programme builds on the work of the Schools Link team and aims to:

- Strengthen communication and joint-working between schools and NHS for children and young people's mental health services;
- Increase satisfaction with working relationships;
- Improve understanding of mental health services and referral routes;
- Improve knowledge and awareness of mental health issues among school lead contacts; and
- Improve timeliness and appropriateness of referrals.

We are also planning further development to the Schools Link team, by using the Children and Young People Well-being Practitioners (CYWPs) who are currently being trained to deliver evidence-based interventions at an earlier stage within school settings. This increased therapy offer will free up the capacity of the School Link workers to support teachers to focus on whole-school approaches to mental health, in conjunction with existing programmes led by colleagues in Educational Psychology.

6.6 Kooth

Children and young people in Wigan have had access to free online mental health services via Kooth since August 2018 (**£65k investment**). Kooth is an online counselling and emotional well-being platform for children and young people, accessible through mobile, tablet and desktop.

Achievements in 2019/20

During 2019/20 Kooth has become a well embedded part of the THRIVE offer for children and young people in Wigan. This has been demonstrated in the level of registrations and also the way that young people in Wigan are using the Kooth website as a safe space and to access safe resources.

There have been 855 new registrations this year, with 6,062 logins by 951 unique young people. 67% of logins were out of hours. 80% were returning logins. 89% of young people felt heard, understood and respected.

| Kooth services accessed | Number of children and young people |
|--------------------------------|--|
| 392 counselling chats | 191 |
| 3038 messages | 3038 |
| 1591 magazine articles viewed | 391 |
| 4684 forum views | 451 |

Kooth have an Integration and Participation worker who has worked to promote service across Wigan, visiting schools, community venues and attending events. The worker had also worked with professionals delivering training and workshop sessions on Kooth and how they can signpost young people to Kooth.

Next steps for 2020/21

The Kooth Integration and Participation worker will continue to promote Kooth across Wigan and to work with professionals. They will also offer group-work sessions to schools and colleges on a variety of key areas including: exam stress sessions; managing stress; body image; and managing anger. Kooth also deliver an Emotional Resilience course which will be offered in Wigan.

6.7 Enhance Core CAMHS - Access and waiting time improvement and move to THRIVE

The current service offer for CAMHS in Wigan is provided by North West Boroughs Healthcare NHS Foundation Trust (NWB).

A continuing challenge of the offer is to have timely access to the service and realistic waiting times.

Achievements in 2019/20

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 2019/20 is that **2,176** children and young people should be receiving treatment, which is **34%** of estimated prevalence.

Based on the latest published data (November 2019), the forecast for 2019/20 is that **2,080** children and young people will have received treatment, which is **32.5%** of estimated prevalence. This is a real improvement on the figure reported in last year's update.

The reported access rate is based on submissions to the Mental Health Services Data Set (MHSDS). At the time of last year's update the only provider in Wigan that was submitting to the MHSDS was NWB, which meant that we weren't capturing the activity that is done by community paediatrics at WWL, by our third sector provider, Wigan Family Welfare or by our on line counselling service (Kooth).

The biggest area of activity that wasn't being captured was for children and young people with ADHD and autism. This activity is done in community paediatrics at WWL. The Trust made their first submission in March 2019, and so their activity is now contributing to Wigan's access rate. Kooth are also submitting their data.

The CCG and the national team are still working with Wigan Family Welfare to support their submission of data to the MHMDS.

Children and young people's waiting times for mental health services

Greater Manchester has made a commitment that children and young people should be seen in an initial appointment within 6 weeks of being referred for specialist mental health services, and enter treatment (denoted by 2 appointments) within 12 weeks (a schools term) of referral.

All partners have been working together this year to improve the position in Wigan, and waiting times have reduced significantly.

Wigan CAMHS performance (April 2019 – December 2019) shows that:

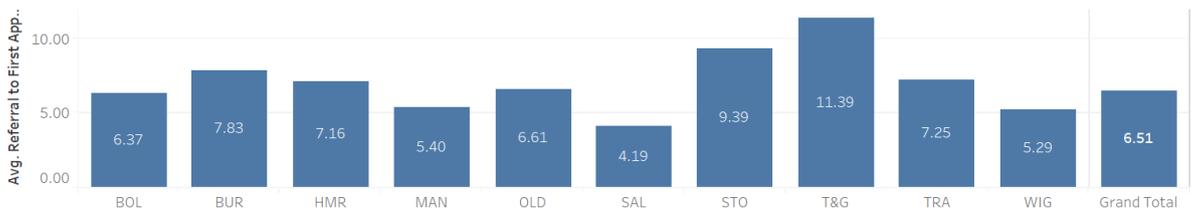
- Children and young people are now waiting just over 5 weeks for their first appointment (compared to 19 weeks at the same time last year), and

- They are waiting on average just over 14 weeks before treatment starts at their second appointment (compared to 29 weeks last year).

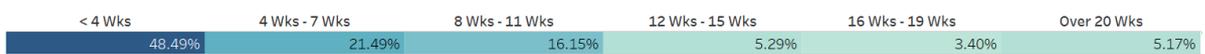
Wigan’s performance against the other 9 GM localities is shown in the following charts:

Referral to first appointment times:

Waited Weeks Referral to First Appointment by CCG



Referral to First Appointment by Week Band

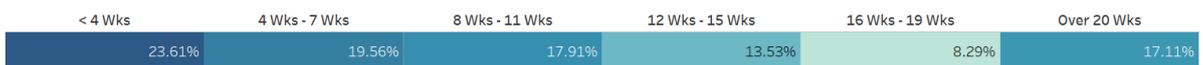


Referral to treatment times:

RTT Weeks (2nd Direct Appointment) by CCG



RTT by Week Band



(Source: GM tableau)

CAMHS transformation funding (**£187k**) and funding from GM has provided additional capacity in North West Boroughs and in our third sector provider, Wigan Family Welfare, to reduce waiting times, and to work collaboratively together in a different way.

A new multi-agency referral hub has allowed partners from CAMHS, Startwell (Local Authority) and Wigan Family Welfare to collectively screen referrals in one of Wigan’s SDFs and decide on which service would best meet a family’s needs. Pilot data suggests that this has successfully reduced the referrals requiring input from CAMHS, highlighted previously unknown duplication of work, and qualitatively improved working relationships amongst services.

Next steps for 2020/21

Plans are being developed to scale up the multi-agency referral hub model to cover all seven SDFs.

North West Boroughs are also reviewing the current position of core CAMHS in terms of numbers of staff, skill mix and capabilities to sustain the waiting time improvement and to continue to implement the new Greater Manchester CAMHS specification.

6.8 Neurodevelopmental services

Transformation of the neurodevelopmental pathway for children and young people with autism spectrum disorder (ASD) and attention deficit hyperactive disorder (ADHD) has been a priority for the LTP in 2019/20.

It is estimated from local data sources that there are over 700 children and young people in the Borough with ASD 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.

Over the past 12 months a project group has been working together to create a shared vision for the future of the neurodevelopmental service offer for children and young people in the Wigan Borough. Using the GM ADHD Standards alongside NICE Guidance, the group are working towards development of a high quality pathway to provide assessment, diagnosis, treatment and education for ASD and ADHD.

Work has been completed to understand capacity and demand in the current service, which will support the development of the new offer. LTP funding has been used to increase the frequency of the ASD diagnosis panel (**£35k investment**), reducing wait times from assessment to diagnosis to 2-3 months.

Community Paediatrics, CAMHS and Start Well have started a joint triage process to review all referrals made to the current pathway, identifying children and young people who may benefit from CAMHS support during the assessment process for ASD. The teams review their electronic record systems as part of the triage process, to identify those families that have not had an early help started and also those that have had duplicate referrals made to Community Paediatrics and CAMHS allowing the team to make informed decisions about support options for individual families.

The training offer for families who have children or young people with diagnosis of ASD has been established. The offer in the borough now consists of:

- 6 week course Autism programme, for 0-8 years and 9-16 years running constantly on a loop.
- 1 day autism awareness sessions monthly.

- Coffee mornings/drop-ins on the last Thursday in the month.

The Borough now benefits from ADHD diagnosis supported by QB testing equipment. Staff in community paediatrics at Wrightington, Wigan and Leigh NHS Foundation Trust are trained to offer this element of assessment in line with the GM ADHD standards.

6.9 Eating Disorder Services

The Wigan and Bolton Children and Young People's Community Eating Disorder Service (CEDS), provided by NWB was successfully launched on the 1st April 2017 with an investment this year of **£202k**.

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.

Achievements in 2019/20

Based on the latest data, in Quarter 3 (October to December 2019) Wigan achieved the access and waiting time standards for:

- urgent referrals to be seen within 1 week, and
- routine referrals within 4 weeks.

The standard is 95%, and performance was 100% in Quarter 3 for both. The year to date position (April to December) is 100% for urgent referrals and 78% for routine referrals.

All non-routine referrals are offered assessments within the 4 week standard however Did Not Attend (DNA) rates skew this data resulting in longer waits if there are multiple non-attended appointments.

Children and young people's Community Eating Disorder Service referral to treatment times:

| WBCCG Completed Routine Referrals That Began Treatment Within 4 Weeks of Referral | | | | | | | | | |
|---|---------|--------|---------|--------|---------|--------|---------|----|--------|
| Standard 95.00% | 2018-19 | | | | 2019-20 | | | | 19/20 |
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | YTD |
| Treatment Began < 4wks After Referral | 5 | 1 | 6 | 2 | 6 | 3 | 5 | | 14 |
| Treatment Began > 4wks After Referral | 1 | 1 | 0 | 4 | 3 | 1 | 0 | | 4 |
| Total Treatment | 6 | 2 | 6 | 6 | 9 | 4 | 5 | | 18 |
| <4 Weeks Referral To Treatment Rate | 83.33% | 50.00% | 100.00% | 33.33% | 66.67% | 75.00% | 100.00% | | 77.78% |

| WBCCG Completed Urgent Referrals That Began Treatment Within 1 Week of Referral | | | | | | | | | |
|---|---------|---------|---------|--------|---------|---------|---------|----|---------|
| Standard 95.00% | 2018-19 | | | | 2019-20 | | | | 19/20 |
| | Q1 | Q2 | Q3 | Q4 | Q1 | Q2 | Q3 | Q4 | YTD |
| Treatment Began < 1wk After Referral | 4 | 2 | 1 | 1 | 0 | 2 | 3 | | 5 |
| Treatment Began > 1wk After Referral | 0 | 0 | 0 | 1 | 0 | 0 | 0 | | 0 |
| Total Treatment | 4 | 2 | 1 | 2 | 0 | 2 | 3 | | 5 |
| <1 Week Referral To Treatment Rate | 100.00% | 100.00% | 100.00% | 50.00% | - | 100.00% | 100.00% | | 100.00% |

(Source: NHS Digital)

Next steps for 2020/21

The service will continue to work towards consistently 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.

The next steps will focus on the implementation of the GM CEDS specification and workforce development. The team are undertaking a two-day course in Family Based Treatment, which has been offered by the GM network. The plan for 2020/21 is to expand knowledge, and develop a service-offer for young people presenting with Avoidant / Restrictive Food Intake Disorder (ARFID) and for young people with co-morbid ASC, as there has been a significant increase in referrals to the team.

6.10 Mental Health Liaison Team (formerly RAID)

CAMHS LTP funding supports an all-age mental health response service in Wigan's local acute hospital (Wrightington Wigan and Leigh NHS FT, WWL) (**£105k investment**). In previous CAMHS LTPs this was all-age RAID, but the name has been changed this year to the Mental Health Liaison Team (MHLT). This team provides 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 the Trust.

The team includes two band 7 children and young people's clinical leads and three band 6 senior children and young people's practitioners. There is medical support from NWB's CAMHS medical team and on call rota.

Achievements in 2019/20

Children and young people's staff are directly available to respond to CAMHS referrals between 07:30 and 20:00, Monday to Sunday, with adult practitioners responding to and supporting referrals outside of those hours.

Performance has been aligned to the adult RAID service with referrals from accident and emergency having a 1 hour response timescale and 24 hours for inpatient wards.

Next steps for 2020/21

There is on-going commitment from partners at a strategic and clinical level in North West Boroughs (who provide the Mental Health Liaison Team) and WWL to work in partnership to make sure that the experience of young people in the acute trust is positive and to improving outcomes for children and young people.

Development of the workforce is a priority for 2020/21, to make sure that the Mental Health Liaison Team has the capacity and skills to deliver a true all-age model balancing CORE24 recommendations and NICE guidelines for under 18s.

Wigan is also one of the 3 sites in Greater Manchester piloting the 'We Can Talk' programme which supports effective working between CAMHS and paediatrics. Senior leads in the Mental Health Liaison Team and in WWL are facilitating training to help improve the response to children and young people with mental health difficulties who are being treated at WWL.

6.11 ATOM

Wigan Council's ATOM project aims to transform services for young people on the edge of care and or in care in the Borough.

ATOM is a specialist team that work with young people in care aged 12 and above, which aims to help them become resilient, confident adults by:

- Enabling them to stay safe,
- Helping them find a place to belong, and
- Supporting them to build strong relationships in their local community and with professionals.

Each young person that the team work with will have a network of people around them to provide support when needed and as part of their overall plan. This includes a:

- Social worker,
- Key worker,
- Police community support officer,
- Therapist/life coach, and
- Foster carer.

The service includes dedicated CAMHS resource, which is supported by funding from the LTP (**£208k investment**), in recognition of the vital role of CAMHS in supporting the most complex children and young people by providing a timely, integrated emotional wellbeing and mental health support service.

In addition, the NWBH CAMHS practitioners contribute skills and knowledge to the wider team, helping to improve the emotional literacy and mental health knowledge of the wider staff team, and creating more holistic understanding of young people, and holistic assessments and packages of care to support their wider developmental needs. These actions will promote better experiences of care, and reduce the need for high cost external services to meet the needs of this sometimes complex and challenging population.

Achievements in 2019/20

This year, the 3 Advanced Mental Health Practitioners and 2 Clinical Psychologists have focused on supporting the wider social care network through:

- Formal and informal consultations concerning residential and outreach (i.e. foster care home placements) cases
- Leading case formulations discussions
- Delivering training to staff within the ATOM framework
- Regularly contributing to multi-disciplinary panels and care planning meetings

Case studies have illustrated the impact of the service, including benefits in the following areas:

- Earlier discharges from hospital beds with the wrap-around ATOM offer.
- Consultations reducing the need for referrals to core CAMHS.
- Vulnerable children and young people being offered the appropriate support without their complex lives being explained in mental health terms.
- Improved communication and joint working between agencies.
- Helping prevent burnout in Social Care staff, and keeping people in work; limiting the ripple effects that this has on the children and young people that the staff care for.

Next steps for 2020/21

As for the other services funded via CAMHS transformation money, workforce is a priority for 2020/21 and making sure that the service is fully staffed from a CAMHS perspective.

The CAMHS team will also continue to work closely with local partners and with GM, to share learning and to address challenges in delivering the model, for example the lack of available foster placements which means that the aim of reducing residential beds is difficult to achieve, which changes how the model is delivered.

6.12 Workforce development.

The CCG and Local Authority have been working collaboratively with NWB to re-design and review the clinical need and demands of CAMHS in line with THRIVE and our local DEAL asset based approach and to move away from the traditional tiered offer.

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 IAPT² to plan for a long term investment in our workforce.

By using initiatives such as the schools links services, 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.

Achievements in 2019/20

Transformation funding was used in 2019/20 to back fill for staff who are on CYP-IAPT training (**£143k**).

Wigan remains on target to meet the Greater Manchester (GM) target for newly trained therapists, as calculated from national figures set out in the Five Year Forward View for Mental Health (FYFV) document. In Phase 9 (2020/2021) three practitioners will be supported to complete the CBT (Cognitive Behaviour Therapy) and SFP (Systemic Family Practice) Post-Graduate Diploma courses; thus ensuring that Wigan exceeds the minimum expectation.

The target is restricted to Post-Graduate Diploma courses, which does not truly reflect the wider investment seen in Wigan to address SASAT (Self-Assessed Skills Audit Tool) and GM Workforce reports. The service has aimed to diversify the workforce and introduce 'low-intensity' Children and Young People Well-being Practitioners (CYWPs) into the team. In May 2019 three CYWPs were recruited into the service, and on qualifying it is envisaged that their skills will be best used in bolstering the School Link offer. Whilst training the CYWPs are funded centrally by NHS England, and the service will seek to secure funding to keep the clinicians in-post upon qualifying.

Wigan CAMHS has also supported the clinical supervision of two EMHPs (Education Mental Health Practitioners) – the equivalent of CYWPs in schools. As part of the GM-pilot, EMHPs employed by the central Manchester third sector organisation 42nd Street, were placed in Wigan and Bolton high schools.

Wigan has well exceeded the target for training new clinical supervisors with three practitioners supported in Phase 8. The service has also continued to offer support for the EEBP (Enhanced Evidence-Based Practice) course, with four current trainees, mostly from the Local Authority. Although this does not contribute to FYFV targets, practitioners in Phase 9 are being supported to undertake Post-Graduate Certificates in Interpersonal Psychotherapy (IPT-A) and the Learning Disability and Autism (LD/ASC) programme.

² The Children and Young People's Improving Access to Psychological Therapies programme (CYP-IAPT) is a change programme for services delivering CYP mental health care. It aims to improve outcomes and experience of care for children, young people and their families by increasing access to effective services and evidence-based therapies through system-wide service improvements.

Wigan will contribute to the GM Workforce group to ensure that interpretation of the SASAT and associated planning is in-line with regional expectations. Service-level analysis will also ensure that CAMHS and the wider borough workforce have the necessary skills to implement collaboratively agreed GM clinical pathways.

The continued investment in a CAMHS transformation lead post this year (**£56k**) has allowed Wigan to contribute effectively to the implementation of THRIVE locally and in GM. This includes:

- Attending GM meetings – THRIVE Implementation, Community of Practice, Workforce Steering Groups;
- Presenting at GM events, sharing good practice from Wigan, and learning about other services and co-ordinating Wigan CAMHS staff to attend working parties;
- Involvement in the planning and delivery of GM clinical initiatives e.g. No Wrong Door, Ealing Model, Blue Ice application, We Can Talk;
- Contributing to THRIVE Grids – clinical decision making;
- Supporting partner agencies to embed ROMs in their practice, and start the process of flowing data to MHSDS
- Internally focused work with the NWB’s performance team to ensure that MHSDS data is accurate and addresses national drivers
- Oversight of Wigan CAMHS team to ensure THRIVE principles are upheld

7 Greater Manchester Strategic Plans to Improve Children and Young People’s Mental Health

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

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

Greater Manchester aims to deliver the greatest and fastest possible improvement to the health and wellbeing of the people of Greater Manchester. As part of devolution, Greater Manchester made a clear commitment to develop the current provision of mental health services, working towards parity of esteem. This includes taking collaborative action in making full use of the targeted Children and Young People’s mental health investment in localities, clusters and across Greater Manchester and supporting activity linked to refreshed Local Transformation Plans (LTPs) devised to deliver the ambition set out in Future in Mind (FIM) .

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

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.

7.3 The Greater Manchester programmes cover:

- Vulnerable Groups

- GM Support Programme for Children and young people in contact with the youth justice system (Collaborative Commissioning Networks)
- Greater Manchester Tier 4 (inpatient) CAMHS
- GM Children and Young People Participation and Engagement in the planning, design and delivery of services
- GM Children and Young People's Crisis Care Pathway - REACH-IN
- Greater Manchester ADHD Standards
- GM i-THRIVE
- GM Mentally Healthy Schools Rapid Pilot

Details of the programmes and how they link to our work in Wigan are given in Appendix 1.

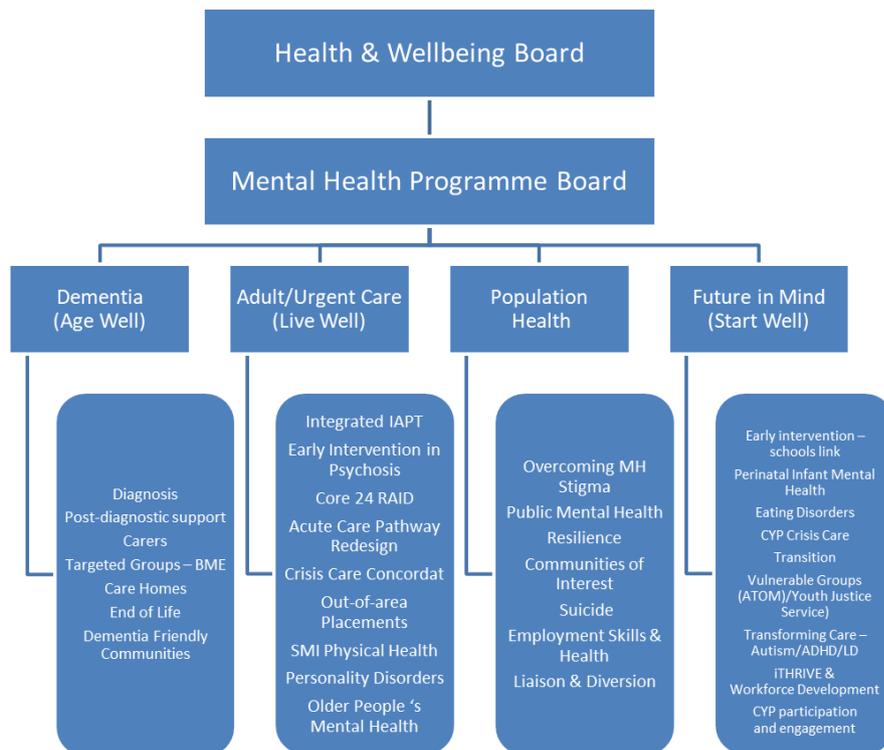
8 Conclusion

- 8.1 In Wigan we have high ambitions and a clear vision for our children, young people and families. We want them to feel safe and to care about their health, education and employment. We also want them to be confident and resilient individuals who are connected to their community and are able to make an effective contribution as responsible citizens.
- 8.2 Children's emotional health and wellbeing is a fundamental component of our children's services, and our CAMHS LTP sets out our ambition to redesign our services by 2021 to create a model for CAMHS that supports our vision.
- 8.3 The Deal for Children and Young People and the THRIVE model provide the basis for reforming services in the borough to deliver this ambition.
- 8.4 We have continued to make good progress in 2019/20 in achieving our aspirations by investing in new services and developing our workforce. In 2020/21 we will consolidate this, and the significant amount of reform work done in Wigan as part of the Deal, to fully implement a THRIVE model.
- 8.5 The funding that's been allocated to Wigan Borough CCG for Children and Young People's mental health in 2020/21 is **£1,784k**. The priorities for the allocation are described above and summarised in the following table:

| Section | Summary | Value |
|---------|--|----------------|
| 6.5 | THRIVE schools link service | £353k |
| 6.6 | KOOTH | £28k |
| 6.7 | Access and waiting time improvement and move to THRIVE | £734k |
| 6.8 | Neurodevelopmental services | £35k |
| 6.9 | Community Eating Disorder Service | £328k |
| 6.10 | All aged Mental Health Liaison Service | £106k |
| 6.11 | ATOM | £200k |
| | Total | £1,784k |

8.6 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. This year, every third meeting is held in the evening, so that young people from Wigan and Leigh Youth Cabinet can attend and support professionals to implement the transformation programmes.

8.7 The Future in Mind Group reports to Wigan’s Mental Health Programme Board, which holds the group to account for the delivery of the work programme.



8.8 All local partners are working together, through the Wigan Future in Mind 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 NHS Long Term Plan.

Appendix 1

Greater Manchester Programmes

Vulnerable Groups

Improving Access to Children and Young People's (CYP) Community Mental Health Support and Treatment is a key priority for Greater Manchester (GM) and nationally.

The NHS has committed to widening access so that by 2020/21, national 70,000 more CYP are accessing treatment each year. This equates to almost 4,000 additional CYP in GM being treated over the 2014/15 baseline (applying 2004 prevalence rates). Under GM improving access ambition plans have/are been established that will seek to improve access and care for the following groups of CYP deemed vulnerable to mental health and/or accessing support:

- Children affected by trauma or adversity (e.g. domestic or physical abuse, victims of sexual exploitation, death of close friend or family member, refugee or asylum, fleeing war, acts of terrorism).
- Looked after Children and Carer Leavers.
- 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 Learning Disabilities
- Children and young people with Neurological conditions (e.g. Autistic Spectrum Disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD))
- Young Lesbian, Gay, Bisexual, Transsexual, Queer/Questioning, (LGBTQ) People
- Children and young people in contact with the youth justice system
- Children and young people with chronic physical health problems – long term conditions
- BAME Children and Young People

In 2019/20 work at a GM level for vulnerable groups of children and young people has concentrated on young LGBTQ+ people.

The GM LGBTQ+ mental health project has been co-designed and produced with young LGBTQ+ people, CAMHS providers and VCSE partners. Each CAMHS service in GM has reviewed itself against the "You're Welcome Standards", which have been reviewed through a rainbow lens which focuses on the experience of young LGBTQ+ people. For example, where the standards state that there should be a welcoming environment, the "rainbow lens" version includes reference to staff having a positive pronoun approach to avoid mis-gendering young people.

Following the audit against these standards, services have developed action plans for improvement which will be reviewed by trained young reviewers. 100 CAMHS staff across GM will access LGBTQ+ training which has been tailored to their needs from the audit returns. Additionally, young people will visit each service provider and then meet with two staff from each provider to discuss their action plans, achievement and learning.

This project is designed to improve the experiences of LGBTQ+ people by having better informed services and greater engagement with LGBTQ+ young people. Furthermore many services are not currently reporting confidence in their monitoring gender in an inclusive way (including non-binary people) or sexual orientation thus through this project, we aim to build this confidence and establish a baseline to then review access and outcomes from the LGBTQ+ community accessing CAMHS.

There is a significant local reform programme taking place within Children's Social Care in Wigan that will be critical in developing local pathways with mental health services to ensure vulnerable children and young people have improved access to appropriate services. Local plans will continue to be developed to compliment GM level programmes.

GM Support Programme for Children and young people in contact with the youth justice system (Collaborative Commissioning Networks)

We are committed to support implementation of collaborative projects focused on improving mental health services for children and young people in contact with the youth justice system.

At a Greater Manchester level work has been initiated that focus on enhancing the pathways and bridging the gaps for children and young people who are accessing Health and Justice commissioned services. This includes, but is not limited, to the following pathways for children and young people:

- Those transitioning into and out of custody and detention
- Those transitioning into and out of secure welfare placements
- Those presenting at Sexual Assault Referral Centres
- Those in contact with Liaison and Diversion Services

The GM Youth Justice Support Programme for Collaborative Commissioning Network (CCN) project aims to:

- Improve identification of mental (including neuro-disabilities) health needs of children and young people in contact with the criminal justice system and victims on 4 key pathways;

- Enhance pathways for these vulnerable children and young people who may otherwise face barriers to accessing health and justice services, and develop bespoke solutions that best support the needs of GM children and young people;
- Understand any gaps in provisions and taking steps to close them;
- Engage with the voices of those who are 'experts by experience' to co-design solutions;
- Support trauma awareness in the workforce, linked to wider work in the GMHSCP;
- Improve integration of services as children and young people transfer to mainstream services, to promote continuity of care; and
- Enable cooperation and coordination between services commissioned by different organisations, whilst reducing duplication and delivering efficiencies.

To date the project has:

- Invested in additional mental health workers and speech therapy teams across GM Custody/ Liaison & Diversion/ Youth Offending Teams footprint in partnership with GMP, GMCA and GMHSCP;
- Increased access to SALT support available in 4 district youth justice teams. We are currently exploring how the findings from the 12 month pilot will evolve after April 2020;
- Begun to explore how extra identification of neuro developmental needs, through the Do It Profiler assessment tool, shapes where and how services are delivered, and identify any gaps in service provision;
- Mapped four pathways from a professional and young person's eye view, to gain a thorough understanding of the 'as is' pathways. This has involved all parts of the health and justice public sector system in Greater Manchester. Each pathway will give a set of recommendations per pathway and cross-cutting recommendations to deliver performance improvements, identify gaps, and review how current resources can be deployed in a more efficient way; and
- Brought young people and their carers into the design and development process, so that solutions are co-designed and focus on user need.

Wigan has received GM funding for a THRIVE Subject Matter Expert in our youth justice service. The Subject Matter Expert is working with partners in the local youth justice service to develop a common understanding of how THRIVE principles relate to their work settings and how better outcomes can be achieved for children and young people by using those principles in their work.

The Subject Matter Expert is also supporting the GM youth justice emotional wellbeing mental health pathway development work.

GM Children and Young People Participation and Engagement in the planning, design and delivery of services

The Greater Manchester Health and Social Care Partnership (GMHSCP) have agreed to an overarching engagement framework which makes the commitment to securing expertise by experience into each of the Greater Manchester (GM) based programmes.

In February 2018 the Youth Combined Authority (YCA) was established; the YCA is part of the Greater Manchester Governance structure and gives young people under the age of 18 years, the opportunity to shape, influence and scrutinise Greater Manchester's practice, policy and plans. The YCA is made up of two representatives from each of the ten Local Authority Youth Councils, including 2 representatives from Wigan and Leigh Youth Cabinet, and two representatives from each of ten additional selected organisations from across Greater Manchester all of whom are committed to youth voice and social action. The YCA is supported by the Mayor's office and co-ordinated by Youth Focus North West.

The YCA has elected a Health Working Group made up of members of the YCA and additional interested young people from the constituent groups and localities. The priority theme of the YCA Health Working Group is Mental Health with the following work streams:

- Stigma, challenging perceptions and raising awareness.
- Quality, making services young people friendly, both those provided within the NHS and other agencies.
- Training for professionals and young people on supporting young people (i.e. Mental Health First Aid training) within the NHS and other agencies.
- Spreading good services across Greater Manchester and addressing the postcode lottery.

Children and Young People from January 2019 are represented as members of Greater Manchester Children and Young People's Mental Health Board (GMCYPMH Board) which seeks to support the young people's priorities as far as possible through coproduction principles. A representative from the Wigan and Leigh Youth Cabinet will be attending the Board.

Members of the GMYCA and the Health Working Group will consider the needs of the diverse nature of young people and consider accessible methods to gather views of young people who may not feel comfortable in a meeting environment by:

- Identifying stakeholders and people who have contact with young people; youth workers, organisations
- Use the information gained from their host organisations and by speaking to other young people
- Conducting surveys and focus groups
- Keep young people updated via the GMYCA Communications Strategy
- Social media
- Use a range of different platforms to spread information, because not all young people use social media
- Twitter – live chat hashtags
- Link in with Health-watch champions
- Presentations in schools and colleges

In addition work and training has been initiated to improve shared decision making by empowering young people voices in their own treatment decisions about their individual mental health and care and treatment. Shared decision making is a central element of the GM i-Thrive programme.

GM Children and Young People’s Crisis Care Pathway (REACH-IN)

Greater Manchester Transformation Funding is being used to develop a GM-wide whole system crisis care pathway which provides a high quality and timely response to young people in crisis and their families, accessible across 7 days. The aim of the pathway is to be fully inclusive, have open access, be holistic and multi-agency and provide a timely and proportionate response based on need.

The Greater Manchester crisis care pathway is being led by four NHS mental health providers - Pennine Care NHS Foundation Trust; Northwest Boroughs Healthcare NHS Foundation Trust; Manchester University Hospitals NHS Foundation Trust; and Greater Manchester Mental Health NHS Foundation Trust.

The pathway comprises several areas, some of which are new service developments and some which require transformation of existing systems and services.

Four new Rapid Response Teams, launched in May 2019, and are now operating 8am to 8pm, 7 days a week, actively supporting young people across all 10 boroughs of Greater Manchester. They provide rapid assessment, de-escalation and brief intervention for young people who are experiencing a mental health crisis and support young people, along with their families, for up to 72 hours.

The Rapid Response Teams are being implemented in a phased way. The ambition is to have a 24/7 crisis response in place by April 2021 and to expand the points of referral over the next 12 months to ensure clear, safe and effective pathways which reach the young people most in need of support.

Also due to be fully operational from April 2021, the Greater Manchester Assessment and Inreach Centre (GMAIC) will provide a single point of access for referrals when a young person needs to be admitted to a general adolescent or eating disorders bed. GMAIC will undertake access assessments and support effective pathways across all providers in GM. This team forms an integral part of the GM CAMHS lead provider collaborative model.

Three Safe Zones have been opened across GM by a partnership of voluntary, charitable and social enterprise organisations led by The Children's Society. This service provides complementary and ongoing support in a youth-centred, community setting for young people and families who have accessed the rapid response service. There is a longer term ambition to enable open access for certain groups of vulnerable young people who may otherwise present more frequently to A&E.

The next 12 months will see further developments to enhance the inpatient services across the pathway including 3 sites piloting the 'We Can Talk' programme which supports effective working between CAMHS and paediatrics; scoping for a Discharge Coordination Team primarily to support the weekend offer; and a procurement exercise for the independent sector to provide 'crash pads' for young people who require a safe space for immediate risk management and de-escalation.

Full background to the pathway is available at www.penninecare.nhs.uk/gmccp

As a key partner we will continue to support this vital work as it progresses, and make sure that the GM pathway is fully integrated with our local services.

Greater Manchester Community Eating Disorders

Across GM there are currently three Community Eating Disorder (CED) services operating out of four different sites for young people.

Building on learning each service has developed since being established, a pan GM CED service specification has been developed for implementation from April 2020 onwards, which is in line with national ED guidance and QNCC-ED guidelines.

The three services are continuing to meet and share learning and expertise to either achieve or maintain the national target in 2021 of 90% of service users classed as urgent being seen within a week and 90% of service users classed as routine being seen within 4 weeks. GM has been consistency achieving above the national and regional average. There has been a trajectory of improvement across the year. The performance of the Wigan and Bolton team is highlighted in section 6.9.

The GM wide CED service specification has been developed to reduce unwarranted variation across GM. Key consistencies needed in the three services providing care

across GM are: paediatrician time included within the core team; research time included across all teams; and teams to be aware of the recommendations from the transition report, with particular reference to episodes of care not being interrupted solely due to age.

Investment in the GM CED services continues, as outlined in the Mental Health Investment Standard, and plans are being developed that seek to make effective use of the increase resources for Eating Disorders under the NHS Long Term Plan. Both providers and commissioners of the services are aware that workforce capacity and expansion is required in order to continue to achieve improved access and waiting times.

Greater Manchester ADHD Standards

Across Greater Manchester work is taking place to ensure paediatrics and CAMHS are jointly delivering the ADHD pathway for young people. Almost all localities have paediatric and CAMHS representatives as part of their local multi-disciplinary team developing and assuring the pathway. Additionally all localities in GM have access to an objective psychometric measure (via Qb Test) to support diagnosis and management if and when required. Further work is taking place to increase all services cognisance with the 12 GM ADHD Standards. This includes but not limited to:

- Multi-disciplinary team assuring the pathway and being involved in its ongoing quality improvement including education representatives who should be able to refer directly into the pathway (rather than only via a GP).
- Implementation of nurse led clinics
- Single point of access into the pathway, that will allocate cases to Paediatrics or CAMHS based on need.
- Reduction in unwarranted variation between CAMHS and Paediatric services including data collection and reporting, including access and waiting times.
- Post-diagnosis support offer that includes face to face session for parents and carers to attendee.

There is an expectation that ADHD services are both commissioned for, and deliver access to at least 1.5% of the population. The Greater Manchester ADHD standards are the evidence base that's being used to develop the Neurodevelopmental offer in Wigan (section 6.8).

Greater Manchester CAMHS Workforce

In order to sustain delivering increased access and improved outcomes for children and young people's (CYP) mental health – as per the national must do - a significant

expansion in the workforce (and associated investment) is required. Following publication of the Five Year Forward View for Mental Health (FYFVMH) and more recently Stepping Forward to 2020/21: The mental health workforce plan for England (July 2017), Greater Manchester (GM) is required to hold plans how it will grow the mental health workforce to enable us to deliver the FYFVMH objectives.

In addition GM and its localities have recognised the potential risk to effectively delivering our ambitious children and young people mental health transformation plans are largely centred on the workforce.

In response a £1.4 million investment through GM transformation funding has been secured to ensure a clear strategy and associate plans are in place to mitigate the known risks. The Greater Manchester Children and Young People’s Emotional Wellbeing and Mental Health Workforce Strategy has been developed through consultation and engagement with a variety of stakeholders that included NHS Providers, Clinicians, CCGs and the GM Strategic Clinical Network – to name a few.

The scope of the strategy focuses on the specialist element of CYP Mental Health workforce – CAMHS. Over time and through the work GM transformation funded GM i-Thrive programme strategic planning will seek to develop strategies for the wider CYP workforce. The purpose of the strategy is to outline principles and solutions across four key domains: -

- Improving supply and retention
- Building skills and knowledge
- Talent development and system leadership
- Improve workforce welfare and wellbeing

To date all specialist GM NHS CAMHS services have undergone the Self-assessed Skills Audit Tool (SASAT) to map their existing provision in order that a clear understanding of both local and GM gaps are understood. The assessment provides full information on staff numbers including whole time equivalents, skills and capabilities.

Building on the SASAT and in order to meet the requirements and those of the Five Year Forward View for Mental Health and Stepping Forward to 2020/21: The mental health workforce plan for England, GM as an STP area has to submitted returns to NHS England on how we are planning to grow the CAMHS workforce to enable us to deliver increased access and better outcomes.

Table 1: Greater Manchester CAMHS Workforce expansion (2016-2021)

| CAMHS Workforce Expansion | Medical | Nursing | Allied Health | Total Clinical |
|----------------------------------|----------------|----------------|----------------------|-----------------------|
| Greater Manchester (100%) | 9.0 | 65.0 | 37.0 | 111.0 |
| Bolton (10.1%) | 0.9 | 6.6 | 3.7 | 11.2 |

| | | | | |
|--------------------------------------|----------|-----------|-----------|------------|
| Bury (6.5%) | 0.6 | 4.2 | 2.4 | 7.2 |
| Heywood, Middleton & Rochdale (8.0%) | 0.7 | 5.2 | 3 | 8.9 |
| Manchester (21.1%) | 1.9 | 13.7 | 7.8 | 23.4 |
| Oldham (8.1%) | 0.7 | 5.3 | 3 | 9 |
| Salford (9.5%) | 0.9 | 6.2 | 3.5 | 10.5 |
| Stockport (10.0%) | 0.9 | 6.5 | 3.7 | 11.1 |
| Tameside & Glossop (8.3%) | 0.7 | 5.4 | 3.1 | 9.2 |
| Trafford (7.4%) | 0.7 | 4.8 | 2.7 | 8.2 |
| Wigan (11.0%) | 1 | 7.1 | 4.1 | 12.2 |
| TOTAL | 9 | 65 | 37 | 111 |

Note: Workforce expansion by service area in Full Time Equivalents (FTE)

The numbers provided are based on Public Health weighted capitation formulas to apportion the nationally agreed figures across Greater Manchester STP.

The enhancement of an additional 111 CAMHS clinical staff across Greater Manchester, outlined above, will be supported by Greater Manchester Transformation funded uplift of 39 additional clinical posts working within the Greater Manchester Crisis Care Pathway (REACH-IN). This combined growth sets an ambitious target to grow the workforce by a total of 150 clinical posts by 2021; ensuring a comprehensive CAMHS (up to 18yrs) to meet the population needs.

GM i-THRIVE

Each of the 10 Local Transformation will work with GM iTHRIVE team to enable the delivery of the GM CYP mental health transformation programme. It is planned that this will be achieved by strengthening and developing closer relationships with leaders within provider and commissioning networks, supporting the identification of a range of local implementation leads and the creation of “THRIVE informed” local teams to better support the local implementation process.

Training will be provided and supported by a GM iTHRIVE Training and Development team over a three year period. GM iTHRIVE will provide training for a minimum of 60 front-line staff per year – 6 per locality to be trained and able to embed the training back in the locality to support delivery of THRIVE-like services. The GM team will coach and mentor local leads through THRIVE informed transformation processes and work flexibly with each LTP to develop a wider understanding of each locality’s needs and requirements and draw from both the resources in the THRIVE toolkit and the expertise within the National iTHRIVE team in order to provide each LTP with a tailored package of support.

Utilising the iTHRIVE implementation, evaluation and outcomes framework the GM team will create a learning network/community of practice alongside action learning groups, and will organise and facilitate joint learning days that will address and tackle common issues and challenges encountered across the 10 LTPs, and share knowledge about service improvement, innovations, that emerge within individual localities.

Since GM i-THRIVE programme team in place (July 2018):

- All localities are engaged and fully committed to implementing THRIVE.
- All localities completed initial intelligence gathering tool.
- All localities have as draft implementation plan and have had one to one meetings with programme manager to plan next steps.
- All localities have had an i-THRIVE presentation at their strategic board.
- Engagement workshops are starting to take place across GM.
- GM Outcomes Framework drafted.

Plan for next year (2019/20):

- All localities to complete workshops and have a full understanding of what their current whole system looks like and identify priorities.
- Phase 1 of implementation to be completed.
- Subject Matter Experts to be pulled in using the funding from GM to work on implementing i-THRIVE in different parts of the system.
- THRIVE training academy to start in January – all localities committed to allocating 6 people from across the system to attend training and embed practice back within the locality.
- All localities committed to Community of Practice.
- Localities committed to supporting the gathering of data for GM Outcomes Framework including assistant psychologists undertaking surveys/interviews with Children and Young People and the wider workforce.
- Explore supervision and consultation models to support the broadening of the system (phase 2).
- THRIVE leads from each locality meet regularly to share good practice and challenges in a peer support forum.

All localities to have a communication and engagement plan.

GM Mentally Healthy Schools Rapid Pilot

A six month rapid schools emotional wellbeing and mental health pilot was delivered at pace across GM to increase access to evidence informed mental health support and help for students/pupils and staff, delivered across primary and secondary schools, special educational needs (SEN) schools and a pupil referral unit (PRU). The pilot was

linked with the Green Paper reforms for ‘Transforming Children and Young People’s Mental Health Provision,’ which was published in December 2017.

A key feature of the pilot was a collaborative model of delivery of the programme to 31 primary and secondary schools, SEN schools and PRU. The pilot was delivered by four voluntary and community social enterprises (VCSE) organisations: Alliance for Learning (AfL), Place2Be (P2B), Youth Sport Trust (YST) and 42nd St, over an intense six month period and was completed in October 2018.

Each partner delivered areas of the programme which highlighted their expertise. AfL delivered Mental Health First Aid Training to support senior leaders and Mental Health First Aid Lite. P2B supported staff with a whole school approach and delivered Mental Health Champions training to senior leaders. They also worked with primary school students and supported YST with the delivery of their sessions.

YST delivered a programme of support to children and young people – ‘Moving Minds’ which was delivered by athlete mentors to support C&YP with their physical and emotional wellbeing. They also ran a programme of peer mentoring with Young Mental Health Champions/Ambassadors. 42nd Street offered a programme of supportive workshops to groups of secondary pupils and worked collaboratively with YST to deliver one on one support during their sessions.

The schools involved in the pilot were taken from across the GM footprint and a total of 7 of the 10 localities were included in the coverage of schools for the pilot. The localities involved in phase 1 were: Bolton, Bury, Manchester, Oldham, Stockport, Trafford and Wigan.

The University of Manchester were engaged to complete an evaluation of the programme and produced a final report which was summarised into an evaluation document, which give an overview of the pilot, key findings, and recommendations for further development of the programme.

An End of Pilot Summit was held in October at the Etihad Stadium. The summit was an opportunity to celebrate the successful completion of the 6 month Rapid Pilot, to hear from the young mental health champions/ambassadors who had participated in the pilot, together with views from some of the Head teachers of the schools involved in the pilot.

The pilot delivered:

- 31 schools recruited, engaged trained and supported (including schools in the Wigan Borough)
- 62 Senior leaders received Mental Health champion training over four sessions
- 53 Middle leaders received Mental Health First Aid Training

- 60 Targeted school staff received Mental Health First Aid Lite Training
- 450 Year 5 Primary pupils participated in two active workshops with follow up support
- 240 Year 10 secondary pupils participated in two active workshops with follow up support
- 67 Primary pupils received training to become Young Mental Health Champions
- 90 Secondary pupils received training to become Mental Health Champions

Phase 2 of the Pilot will see the continuation of work across the original 31 schools and the roll out to a further 31 schools & colleges, bringing the total number of schools and colleges within the Pilot to 62. The ambition is to scale the project to 10% of schools and colleges across the GM footprint, with the third phase of the project involving the procurement of additional providers to deliver to a further 63 schools and colleges – which will mean the total coverage of schools and colleges in GM (125) will represent 10% of our total schools and colleges.