

Report

Title:	Children and Young People's Mental Health: Buckinghamshire Transformation plan
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1 Purpose of Paper

For Information and comment

To share a draft of the refreshed Buckinghamshire Transformation Plan for Children and Young People's Mental Health and Emotional Wellbeing ahead of its publication at the end of October 2018.

- Please note this is an **early draft** for comment and will be subject to design work once the final text is completed.

Transformation Plan for Children and Young People's Mental Health and Emotional Wellbeing

'Futures in Mind', published by government in 2015, proposed that local areas should produce and publish a Transformation Plan for Children and Young People's Mental Health and Wellbeing. Plans should articulate the local offer and cover the whole spectrum of services for children and young people's mental health and wellbeing from health promotion and prevention work, to support and interventions for children and young people who have existing or emerging mental health problems, as well as transitions between services.

Futures in Mind anticipated that the lead commissioner would draw up local plans, working closely with Health and Wellbeing Board partners including local authorities. It also set out a number of other requirements, including that there should be an annual declaration of current investment and the needs of the local population with regards to the full range of provision for children and young people's mental health and wellbeing.

To support the ambition for transformation set out in 'Futures in Mind', NHS England committed to prioritising the further investment within mental health services, and since 2015 transformation funding has provided an additional £1,590,426 for investment into the Buckinghamshire CAMHS service.

The Buckinghamshire Transformation Plan was published in 2015. The plan reflected that children and young people's mental health services in Buckinghamshire had just been recommissioned (new service model started 1st October 2015 – 5 year contract awarded to Oxford Health Foundation Trust in partnership with Barnardo's and Beat), with the new model reflecting many of the themes identified through 'Futures in Mind'. The service is commissioned as an integrated service under section 75 arrangements (pooled budget) between Buckinghamshire Clinical Commissioning Group (CCG) and Buckinghamshire County Council (BCC).

Annual updates to the Transformation Plan were completed for 2016/17 and 2017/18, in line with the expectation of 'Futures in Mind' and the 2018/19 update is currently being finalised ahead of publication at the end of October. The update has been written in partnership with Oxford Health and other stakeholders and takes account of feedback from service users and their families.

There has been recent feedback from NHS England on the lack of detail in the plan published by Buckinghamshire last year. In addition, the NSPCC recently 'red flagged' the plan published by Buckinghamshire last year as they felt it did not make sufficient reference to the increased mental health needs of children who have experienced abuse and neglect. Feedback from both of these sources is being considered in the updated plan for this year.

Draft priorities set out in the refreshed plan are:

Develop resources and skills in universal services to enable improved early support and advice for children and young people with mental health concerns

- Ensure resource to promote good mental health and self-help resources are available through schools, youth services and voluntary partners.
- Deliver training sessions for parents and support parents in the establishment of a parent support group.
- Delivery of training on mental health to young people through schools.
- To work with the Local Authority in the early help review to consider how mental health can be integral to the early help strategy and pathways.

Increase access to NHS commissioned service

- Work with voluntary sector partners to explore maximising workforce to deliver mental health support into schools particularly to support younger children.
- Ensure sustainability of waiting time standard of 90% referral to assessment within 4 weeks.
- Develop and implement pathway for all age neurodevelopment presentations with aim to reduce waiting times in CAMHS to offer assessment in less than 6 weeks from receipt of full required pre-referral information.
- Develop engagement strategy to raise awareness and support under-represented groups to access mental health services.

Ensuring children and young people in crisis have access to timely support to prevent/minimise escalation to more complex needs

- Improve and extend the response to children and young people in crisis – particularly outside of core hours and to include those who may have complex presentations, including

young people who may have autism and mental health problems leading to severe behavioural difficulties.

- Co-location of CAMHS staff into social care teams (Looked After and adoption teams and court team).
- Work with social care in developing the in county provision and assessment unit to ensure environment and resources to best support young people presenting in crisis who are not detainable within a mental health setting but are unable to stay with their parents/carers.
- To review the clinical pathway for young people presenting with emotionally unstable personality disorders and develop an all age pathway to support young people through transition.

Continue to embed whole system working to ensure services work together to meet the mental health needs of this group of children and young people

- Improve positive behaviour support for children that exhibit challenging behaviour in the context of poor mental health for those with a learning disability.
- Develop work on Transitions to consider the mental health needs of care-leavers as they move out of care and into independent or supported living.
- Develop network to support the mental health needs of those not in education, employment or training (NEET) and for those not attending a school through home education or absentees.