

HEALTH AND WELLBEING BOARD 14 September 2017

Report of the Strategic Director of Peoples Services

Derby and Derbyshire Children and Young People's Future in Mind Health Needs Assessment and the Refresh of the Local Transformation Plan.

SUMMARY

- 1.1 "For children aged 5-19 the single largest burden of disease is due to mental health conditions" (Institute for Health Metrics and Evaluation, 2013).
- 1.2 The 2015 report of the Children and Young People's (CYP) Mental Health Taskforce *Future in Mind (FiM)*, jointly chaired by NHS England and the Department of Health, established a clear direction and key principles about how to make it easier for CYP to access high quality mental health care when they need it.
- 1.3 In October 2015 Derby City and Derbyshire County Councils, and the four Derbyshire Clinical Commissioning Groups (CCGs) submitted a single FiM Local Transformation Plan (LTP). This plan outlined the actions that the local units of planning would jointly undertake to support improvements. The LTP is reviewed by NHS England, and the next refresh is required in October 2017.
- 1.4 The LTP established the Derby and Derbyshire FiM Core Commissioners and Stakeholder Groups. These groups represent the four Derbyshire CCGs, Derby City and Derbyshire County Councils, and partners from across the NHS, Public Health, Local Authority, Youth Justice and Education sectors. FiM has become a workstream of the Children and Maternity Sustainability & Transformation Partnership (STP) Delivery Group.
- 1.5 The vision of the single shared LTP is that, 'children and young people are able to achieve positive emotional health by having access to high quality, local provision, appropriate to their need, as well as a range of support enabling self-help, recovery and wellbeing.'
- 1.6 In order to achieve the local ambition, it was agreed that a comprehensive Health Need Assessment (HNA) should be produced as a platform and driver for local service transformation, with a view to making it a part of a cycle of monitoring, evaluation and continuous improvement. This assessment will form a substantial chapter of both the Derby and Derbyshire Joint Strategic Needs Assessments (JSNA).
- 1.7 The HNA is presently being concluded and a number of themes and issues have emerged. For information, these are summarised in section 4.1. As well as significant data collation and analysis, the process has also involved a number of stakeholder engagement events, including at Children's Families and Learners Board

in July 2017 and Voices in Action Youth Council in August 2017.

- 1.8 Key areas distilled from the HNA to inform the refresh of the LTP, include:
 - To develop further the support offer to parents, to empower families to become more aware of and resilient to mental ill health in CYP, with a particular focus on conduct disorders.
 - To develop further a whole-school approach to prevention and early intervention, including training for teachers and opportunities for CYP to comfortably and confidently talk about mental health during the school day.
 - Transforming care of CYP with complex and comorbid needs, such as those who have a learning disability coupled with self-harm and behavioural difficulties, or eating disorder with autism, through intensive home-treatment.
 - Developing the workforce, both in breadth of number and depth of skill, aligned to national FiM targets. This will be underpinned by the principles of Improving Access to Psychological Therapies (IAPT).
 - Building community capacity, specifically in the voluntary and community sector (VCS), which should be coherent and Derbyshire-wide. A peer support, befriending scheme, online and telephone based provision for CYP needs to be embedded in the VCS offer.
 - Continuing to work with NHSE to develop new and alternative models of care to respond to need differently, with a focus on enhanced community provision, the development of safe places and avoidance of higher cost CAMHS hospital and Tier 4 admission where less appropriate.
 - To work alongside the development of 'place-based' commissioning to strengthen our support to CYP in their local area, including through Primary care, Public Health Nursing, Early Help and Schools.

RECOMMENDATION

- 2.1 The Board is asked to note the development, key themes and next stages of the HNA.
- 2.2 The Board agrees to the priorities listed in 1.8 as the strategic shift within the refreshed LTP.
- 2.3 The Board agrees to receive the final HNA and LTP in November 2017 and for the Chair to agree the refreshed LTP on behalf of the Board.

REASONS FOR RECOMMENDATION

3.1 The FiM assurance process requires the local LTP to be jointly signed off by Health and Wellbeing Boards and the NHS England Specialised Commissioning local team.

3.2 Key drivers for the quality of the LTP should be the JSNA and Joint Health and Wellbeing Strategy. Health and Wellbeing Boards should ensure that both documents address children and young people's needs effectively and comprehensively.

SUPPORTING INFORMATION

- 4.1 Details of the HNA will be presented to the Board in a PowerPoint presentation on the day of the meeting. Emerging headlines and key themes include:
 - As a system we are likely only to be engaging and supporting one in every four children and young people with a mental illness
 - Evidence suggests that one in every ten school-aged children will suffer a mental illness, but that this will vary across vulnerable groups. For example, prevalence of mental illness in looked after children will be as much as 45%, and in the youth justice system as many as 1 in 5 (with some national estimates being as high as 80%)
 - An estimated 13,000 CYP are currently experiencing mental ill health across Derby and Derbyshire
 - Bullying remains a significant issue for CYP, with appearance, race, culture and religion dominating reasons behind it
 - Schools are an important setting for CYP, but teachers do not always feel trained and able to support individuals with issues of emotional wellbeing
 - Eligibility for 'Pupil Premium' is associated with deprivation, which is associated with poor outcomes for CYP. So in knowing which schools have greatest uptake of the premium we have a means of targeting interventions effectively
 - There is inequity in referrals into and waits for Child & Adolescent Mental Health Services (CAMHS) services by geography, though the services themselves, including CAMHS RISE in the south of Derbyshire, continue to support good outcomes
 - Parents of adolescents are the most unsupported of all groups of parents, yet they are likely to play one of the more significant roles from crisis through to recovery.
 - A summary of both qualitative and quantitative analysis undertaken as part of the HNA process reveals the following key challenges for the local system:
 - Priority CYP with a diagnosable mental illness include those with conduct disorders, emotional disorders and eating disorders
 - Priority vulnerable CYP include: those providing care; re-offenders; those with a learning disability; self-harming; LGBTQ young people; preschool children; BME groups
 - Priority risk factors for poor mental health, include: excess weight; unstable families and domestic violence; smoking during pregnancy; homelessness; child poverty; use of drugs and alcohol; stigma and awareness; bullying (including cyber bullying); access to services.
 - Priority protective factors for good mental health, include: being schoolready; good educational attainment; breastfeeding; being physically active and opportunities for positive social activities; parental attachment; positive and consistent school/teacher support; integrated health, care and education system.

- 4.2 The LTP is refreshed on an annual basis. We have gone through a consultation process regarding the health needs assessment which is then informing the priorities within the LTP. This work has been undertaken by a team of staff, working together, across the CCGs and Local Authorities and covering the STP footprint.
- 4.3 The NHS England and Department of Health's publication, *Future in Mind*, can be found here: <u>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024</u> <u>/Childrens_Mental_Health.pdf</u>
- 4.4 The NHS England 'Local Transformation Plans for Children and Young People's Mental Health and Wellbeing' guidance document can be found here: <u>https://www.england.nhs.uk/wp-content/uploads/2015/07/local-transformation-plans-cyp-mh-guidance.pdf</u>
- 4.5 The Derby and Derbyshire current and approved Local Transformation Plan can be found here: <u>https://www.derbyshire.gov.uk/images/Agenda%20item%209-%20Future%20in%20Mind%20update_tcm44-272471.pdf</u>

OTHER OPTIONS CONSIDERED

5.1 No other options considered

This report has been approved by the following officers:

Legal officer Financial officer	
Human Resources officer	
Estates/Property officer	
Service Director(s)	Frank McGhee, Director of Integrated Commissioning
Other(s)	

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Background papers:	None		

List of appendices:	Appendix 1 – Implications
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IMPLICATIONS

Financial and Value for Money

1.1 CCGs were allocated a share of new FiM monies specifically to support Eating Disorder commissioning in 2015. The release of further funds to local areas for improving children and young people's mental health and wellbeing are conditional on the assurance process – that includes submission of the LTP and a solid foundation of baseline information on local need, desired outcomes, workforce, activity and spend.

Legal

2.1 The HNA will form a central chapter of the JSNA. The Health and Wellbeing Board has a statutory duty to ensure the preparation and publication of the JSNA of its local population. The report is an essential element of the process of identifying health and social care priorities within the city, supporting strategic planning and commissioning decision-making.

Personnel

3.1 None.

IT

4.1 None.

Equalities Impact

5.1 A fundamental purpose of the HNA is to help identify health and social care needs across Derby and Derbyshire, to improve health and wellbeing and to support the identification and reduction of health inequalities.

Health and Safety

6.1 None.

Environmental Sustainability

7.1 None.

Property and Asset Management

8.1 None.

Risk Management

9.1 None.

Corporate objectives and priorities for change

10.1 The JSNA is central in supporting the planning and delivery of the Council Plan; Derby Plan; Health and Wellbeing Strategy and Sustainability and Transformation Plan, and transformation of children's services.