



London Trailblazers and four week waiting time pilot launch workshop

Tuesday 12th February 2019

Supported by and delivering for:







MAYOR OF LONDON

01 Welcome

Tracy Parr
Director of Transformation
Healthy London Partnership

What proportion of their time do 8 – 15 year olds spend playing outside?

What percentage of 12 – 15 year olds spend most of their waking hours online at the weekend? Ofcom

What proportion of their time do 12 – 15 year olds spend online per week?

During term time, what percentage of their week do children aged 11 – 16 spend at school?

Background

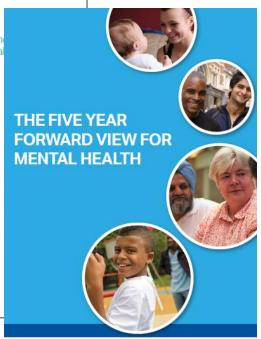




Future in mind

Promoting, protecting and improving children and young people's mental and wellbeing





A report from the independent Mental Health Taskforce to the NHS in England February 2016





Transforming Children and Young People's Mental Health Provision: a Green Paper

Presented to Parliament by the Secretary of State for Health and Secretary of State for Education by Command of Her Majesty

December 2017

NHS The NHS Long Term Plan #NHSLongTermPlan www.longtermplan.nhs.ul

An additional 345,000 CYP will access support via NHS funded services and school/college MH Support Teams rolled out to 20-25% of England (by 2023/24)

Partnership approach

- **Schools** providing infrastructure and local leadership for Trailblazers
- Mental health providers employing mental health support teams for schools and piloting four week waiting time Universities providing education new practitioners Clinical commissioning groups co-ordinating development of Trailblazers
- **Department for Education** providing direct support to Trailblazer schools
- NHS England acting as conduit between national and local teams, providing assurance of local delivery and monitoring of financial allocations
- Healthy London Partnership convening and linking system partners, enabling shared learning within and beyond Trailblazer sites

Healthy London Partnership

We aim to make London the healthiest global city in the world by working with our partners for Londoners to improve health and care, so everyone can live healthier lives

What we do...

- **Bring together partners** with improvement and transformation experts and Londoners, to work towards the common goals set out in *Better Health for London*, *NHS Five Year Forward View* and the *Devolution agreement*
- **Develop an evidence base** so we inspire London to be the best it can be, gathering insight and data, building on local successes and sharing learning and best practice
- Tackle issues best solved 'once for London' by pooling resources and attracting additional funding to specific London issues like homelessness or access to GPs

We also provide the strategic challenge and infrastructure to make sure there is robust governance in place through the London Health Board and the London Strategic Partnership Board. Read more about this here www.healthylondon.org/our-work/london-health-care-strategic-partnership-board

02

Simone Bayes

Deputy Director, Mental Health Delivery Children and Young People, Department for Education

Mental Health Green Paper Background and context

Simone Bayes

Mental Health Delivery Division Department for Education

London Trailblazers - 12 February 2019



National Service Framework for Mental Health 2004,

- Every Child Matters 2005
- Targeted Mental Health in Schools 2008 11
- Parity of esteem ambition 2010
- Austerity and localism
- CYP Improving Access to Psychological Therapies (IAPT) 2011
- SEN and Disability reforms 2012
- Future in Mind 2015
- Five Year Forward View for Mental Health 2016



- January 2017 PM announced a Green Paper
- Developed jointly by Department of Health & Department for Education
- Published 4 December 2017
- First 25 trailblazers announced December 2018
- First trainees started courses at 7 HEIs in January 2019



Transforming Children and Young People's Mental Health Provision: a Green Paper

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December 2017

Cm 9523

- ✓ We will incentivise every school and college to identify a Designated Senior Lead for Mental Health to oversee the approach to mental health and wellbeing.
- ✓ We will fund new Mental Health Support Teams, for 20-25% of schools and colleges by 2023, supervised by NHS children and young people's mental health staff, to provide specific extra capacity for early intervention and ongoing help. These teams will be linked to groups of primary and secondary schools and to colleges, providing interventions to support those with mild to moderate needs and supporting the promotion of good mental health and wellbeing.
- ✓ We will trial a four week waiting time for access to specialist NHS
 children and young people's mental health services.

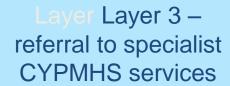
- Deliver evidence based interventions in or close to schools and colleges for those with mild to moderate mental health issues.
- Help children and young people with more severe needs to access the right support and stay in education. Includes providing timely advice and linking to more specialist NHS services.
- Support schools and colleges to do more on mental health, working with their mental health leads and existing service providers eg promote positive mental health, map provision & gaps, monitor wellbeing.



Build on and increase support already in place, not replace it.

- ☐ To appoint a named senior lead/point of contact to work with CCGs and the MHSTs ☐ To involve children and young people and their families/carers in the design and set-up of the teams ☐ To engage fully with monitoring and evaluation requirements and as a first step complete a baseline survey ☐ To commit to the principle that the MHST will complement, rather than substitute for, existing support To work with providers and universities to offer trainee placements for Education Mental Health Practitioners during their training year (between March and December 2019).
 - ☐ DfE to communicate direct to schools and colleges







Remit of
Designated
Senior Leads
spans these
layers

Layer 2 – introduction of Mental Health Support
Teams alongside existing services e.g.
educational psychologists, school nurses, school
counselling

Layer 1 – Health Education reforms and updates to behaviour, SEND, safeguarding and wellbeing policies

DfE offer to train a lead for every school and college by 2024 to act as strategic lead for mental health, put in place whole school approach and co-ordinate links with other services



NHS Long Term Plan

- Mental Health and Behaviour Guidance and respectful schools tool
- Expansion of Schools Link programme
- Curriculum reforms to make health education compulsory from 2020
- Public Health England review of key prevention evidence & relevance
- Trials of evidence on school-based interventions to support children and young people's mental health and wellbeing; peer support pilots
- CMO evidence review on social media use and mental health





02

Professor Oliver Shanley OBE Regional Chief Nurse

NHS England and NHS Improvement (London region)

Mental health of London's children and young people

of London's population is under 18 years of age



8.8 million total population 2.2 million under 18

London's 5 to 19 year olds

have a mental health disorder



10.6% 7.4%

autism spectrum, eating and other less common disorders



1/2 of all mental health problems manifest by age 14



14-19 year olds



Mental disorder of young people identifying as lesbian, gay, bisexual, or another sexual identity



Heterosexual

11-16 year olds

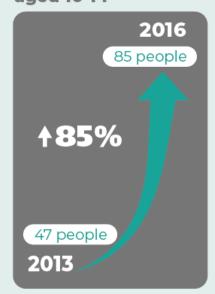


Self-harm of young people diagnosed with a mental disorder



Mental disorder No diagnosed disorder

Suicide has increased for young people aged 10-14



Schools in London



92% Public-funded rated good or outstanding





KEY STAGE 4: London had the highest attainment 8 score of any region in 2016

2014-15 to 2019-2020



Real-terms reduction in per-pupil funding for mainstream schools due to cost pressures

Special Educational Needs and Disabilities (SEND)

Rise in need since 2010



Exclusions across all schools

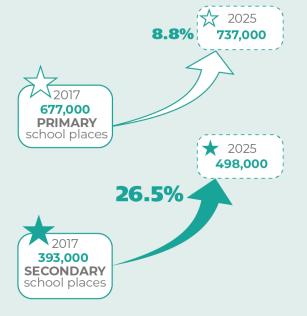
980 **Permanent** exclusions



3380 Fixed-term exclusions

2016-2017

Increasing demand for school places 2017-2025



Eligible for school meals

18%

PRIMARY school pupils



19%

SECONDARY school pupils

Minority ethnic backgrounds

72% PRIMARY

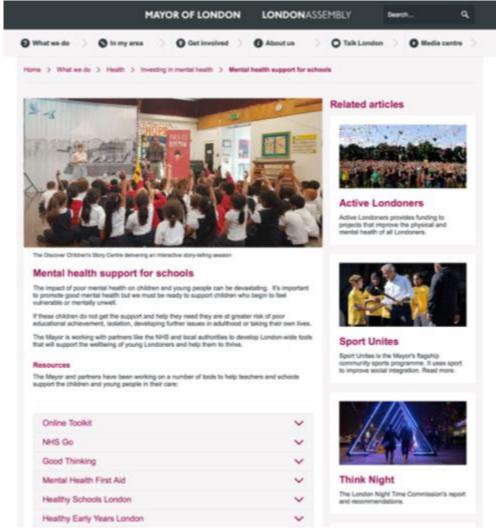


70% SECONDARY

school pupils

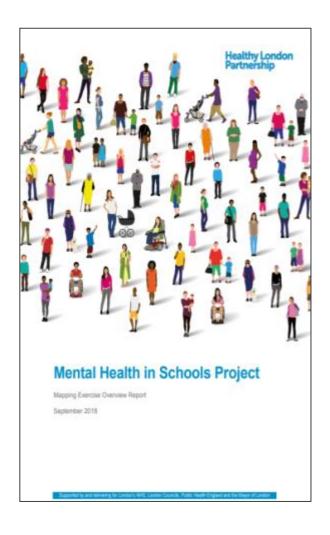
Partnership with Mayor of London

Worked in collaboration with Mayor of London and Greater London Authority through the London Health Board



Wrote to all headteachers and school nurses to inform them of work around MH in schools

Mapping exercise



Through CCGs and local authorities mapping exercise of current provision showed wide variation

Mental health in schools toolkit

https://www.healthylondon.org/resource/schools-mental-health-toolkit/



Schools mental health leads

Schools links

Healthy Schools London

Includes good practice examples, training and whole school approaches

NHSGo - designed by young people for young

Each month 3 topics are highlighted.
Currently highlighting "winter blues"

Sleep

Puberty and teen health

Schools assembly pack distributed December 2018



Depression and anxiety

LGBT

Smoking, drugs and alcohol

Eating healthily and exercise

Sex and relationships

Views of Young People



Amplified and Healthy London Partnership: Insights on young people's perspectives on school mental health support in London

Introduction

As part of the NHS England funded Amplified programme, YoungMinds worked together with Health London Partnerships to:

- Collect existing pupil insights work from London schools around mental health and analyse these to identify key themes
- Facilitate a workshop session to review these insights and develop a top ten summary
 of ways young people want schools to support their mental health

The workshop also explored with young people their own practical ideas and thoughts on how schools can improve provision and how young people can be involved with this, as well as with the recruitment, training and ongoing support for the role of Designated Senior Mental Health Lead (DSMHL) within schools.

10 young people (13-19) took part in the workshop including representatives from Newham Headstart, Healthy London partnership and Amplified. Discussion notes and worksheets generated by participants were analysed after the workshop and are reported thematically here, alongside the findings from the insights reports submitted by schools.

Commissioned Young
Minds to work with
children and young
people to gain their
perspectives on what
they want in schools to
support their mental
health (Sharon Long will
provide more detail)

03

The views of young people

Sharon Long – Strategic Director

Partnership for Young London and Schools Advisor

Healthy London Partnership

Young People's Views

Amplified and Healthy London Partnership Insights Report

1. Every pupil knows who is responsible for and can help with mental health issues

Make sure we know who to go to in school if we are struggling and need someone to talk to-share this information in lots of ways, like assemblies and on posters

2. Every adult in the school offers a good first response if I say or show I am struggling with my mental health

We want the staff who have contact with us daily to notice if we are struggling and know how to help us find the right person and place to get support from if we need it.

3. Bullying is dealt with effectively

If we have experienced bullying, we want to get emotional support quickly and easily from school- and we want bullies as well as victims to get support and assistance from school.

4. Empower us to understand and take a role in caring for our mental health

We want useful information which is co-designed and delivered by people like us about how we can take care of our mental health and how to get help if we need it. We want this in lots of different ways like lessons as well as information resources we can use on our own.

Young People's Views

5. Extra support for pupils that are struggling

If a pupil is struggling, we want someone such as the forum tutor to check in every day and see how they are. This can make a huge difference when you are going through a hard time. And we want personalized plans to help us come back to school if we've had to take time off because of our mental health.

6. Emotional and practical support during busy, stressful times

Exam time is a really stressful time for us. We want information and advice on how to cope with the pressure we feel and quick and easy access to support if we feel it's getting too much.

7. A place to go to on hard days

We want a quiet space designed to promote wellbeing that we can go to when we are having a hard time and feel overwhelmed. We can use it clear our heads and calm down if we need to, as well as build ourselves up to carry on for the day

8. Signposting to support in our area and beyond

We are in school so much that's it's one of the best ways for us to find out about what other things can support us outside of school. We want school to provide information about local mental health services as well as other wellbeing activities we could use locally or online.

Young People's Views

9. Pupil involvement in making the school more mentally healthy

We know what things impact our mental health and what could help school promote our positive mental health, so we want to be involved in designing the policies, projects and activities that are about our mental health.

10. Recognising us as individuals

We want to be recognised for all the things we do and are interested in, not just our academic achievement as that can make us feel pressured. We want school to help us take part in things we enjoy outside of lessons that help us work out who we are and feel good about ourselves.

https://www.healthylondon.org/wp-content/uploads/2018/11/Amplified-and-HLP-School-Insights-Report-2018.pdf

04

Green Paper, Trailblazer & Four Week Waiting Time Pilots

Katie Horrell

Head of Assurance & Delivery NHS England (London)



Implementing the ambitions of the Children and Young People's Mental Health Green Paper in London

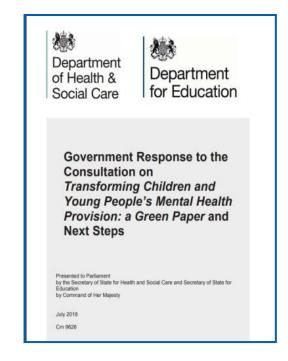
Children & Young People's Mental Health Green Paper London Trailblazers Welcome Workshop

Katie Horrell – Head of Assurance & Delivery, NHS England (London)

An additional investment of £1.4 billion was committed to transform children and young people's mental health services from 2015/16 to 2019/20



- The Green Paper announced that the Government would make additional available funding to implement proposals outlined in the Green Paper.
- An additional £215M funding over the course of 2018/19-2020/21 to support the roll out of Mental Health Support Teams (MHSTs) and waiting time pilots.
- £16M to establish MHSTs and £8M towards waiting time pilots in year one.
- In addition, £15-20M a year for dedicated training funds from the Department of Education to support the creation of Designated Senior Leads in schools over the course of 2019/20- 2023/24.



Implementing the Green Paper in London



22
Expressions
of Interest
received



Reviewed by an expert panel from across London's health, care and education system



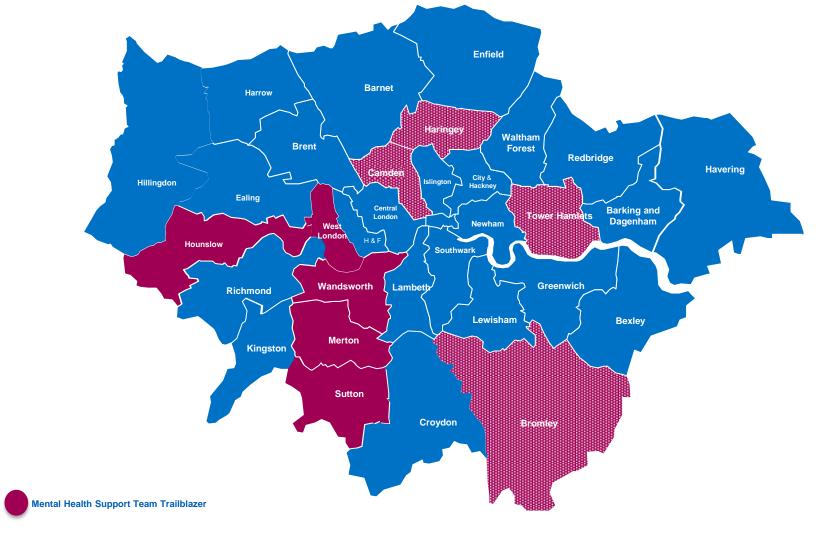
£7,411,294 awarded across London



>170 schools signed up to work with the Mental Health Support Teams

London has been awarded £7,411,294 across 2018/19 and 2019/20 to support the roll out of 15 Mental Health Support Teams across 7 areas and trial four week waiting time across four areas for CYP Mental Health







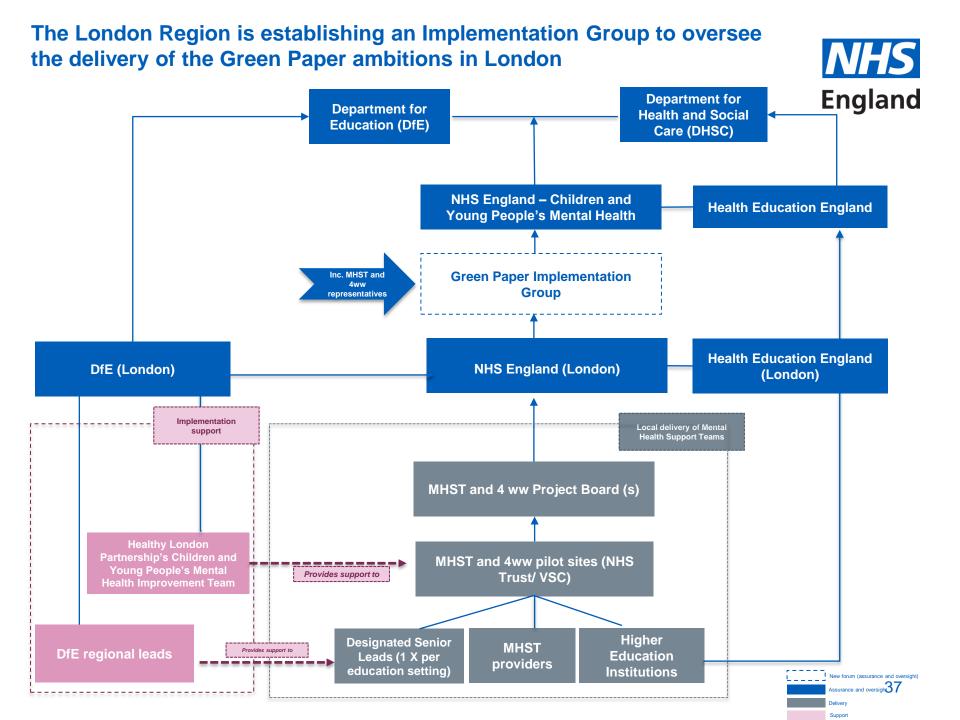


Table Discussion

Hopes and expectations for today and the programme

www.menti.com

Code 25 04 29

Mentimeter

In three words, what are your hopes and expectations for the day?

Mentimeter



05Higher Education Institutes

Lili Ly: Course Director,
University College London

Wendy Geraghty: Lead training placement support,

King's College London

Key staff on the EMHP trainings for KCL and UCL

- Head of training UCL: Peter Fuggle
- Head of training KCL: Derek Bolton
- Lead training placement support UCL: Claire Ely
- Lead training placement support KCL: Wendy Geraghty
- Director of EMHP course for UCL: Lili Ly
- Director of EMHP course for KCL: Susanna Payne

We all work together closely in training delivery across London.

Where we fit in the implementation

- Peter Fuggle and Derek Bolton contributed to the development of the curriculum as members of the HEE convened national curriculum committee (2018)
- HEE commission us to deliver EMHP PgDip + Supervisor training (this year as CPD) + RtT
- In addition HEE funded us to provide "assurance, organisation & transformation support".
- Funding for supervisors is routed via the HEIs, reclaimed by sites.
- We supported the host Trusts to recruit the first cohort of EMHPs
- EMHP training started on 21st January
- Supervisors training started on 28th January

EMHP allocations, Numbers, Potential Supervisors, Colleges x Trailblazer sites

Site	EMHP trainees	Super- visors	RTT	College
Bromley	8	4	0	KCL
Camden	5	2.5	0	UCL
Haringey	4	2	0	UCL
Herts	8	4	0	UCL
North Kent	7	4	4	KCL
SW London	12	6	0	KCL
Tower Hamlets	6	3	0	UCL
West London	9	4.5	0	UCL

Overview of EMHP training

- Total of 59 EMHP Trainee Practitioners (across London training programmes)
- Trained in principles of CYP-IAPT: Accessibility, Awareness, Participation, Accountability & Evidence-Based Practice
- To deliver low intensity evidence-based interventions for mild-moderate MH difficulties in educational settings (with supervision):
 - Anxiety: Child anxiety Guide Self Help (GSH) through parents/carers
 - Anxiety: Adolescents (GSH)
 - Low mood: Adolescents (GSH)
 - Challenging behaviour: Childhood problems GSH through parents/carers (4-8yrs)
 - Common adverse experiences bullying, social media and other social pressures, transition, exams
 - Developing general wellbeing/resilience peer mentoring, sleep, health promotion e.g. through psychoeducation workshops/ groups
 - Offer signposting

Laying down the track as the train is rolling...How to make this okay for trainees

 An interim supervisor/ manager who understands EMHP role and training needs, including supportive induction

Close clinical supervision

 Experience that enables trainees to meet course requirements

Experience that will enable them to meet the course requirements:

Early on: - Being part of a school team – primary and secondary

- Induction to school culture, organisation, existing wellbeing and MH support structures
- Opportunity to a survey of MH and other support structures available locally to pupils
- Opportunity to conduct a small audit of a specific group of pupil's MH needs

Throughout year:

- Access to cases: (CYP/parent/carer). CYP with anxiety/ low mood (all ages), challenging behaviour (in under 9s), low risk and complexity. Recording sessions
- Running a psychoeducation workshop(s) for pupils/staff/parents
- Running a group (universal or targeted for wellbeing of pupils OR parent group)

The Trainee Experience

Uncertainty about governance and

placement:

Teaching informat ive

Lots to learn!

Worry about not having necessary placement experience to complete assignments

Worry about not yet having supervisors

Variation in placement experience

Trainee meetings

 UCL & KCL in conjunction with HLP to hold feedback sessions with Students.

 Information to be collated and feedback to individual Trailblazer sites and CYP MH Green Paper Implementation Group Meeting (London).

 Meeting dates to be set by the end of February 2019

06

Mental Health Support Teams and 4 Week Waiting Time Pilots



Mental Health Support Teams and 4 Week Waiting Time Pilots: Data, monitoring & evaluation

Sara Saunders – Implementation Lead (Green Paper) CYP Mental Health Team



What will we be collecting to test the approach?



Baseline Information

One off

Baseline investment

Baseline workforce

Baseline activity

Routine Management Information

Quarterly

Time limited until MHSDS QA

Non MHSDS data -Workforce, schools

Activity & outcome data

Project set up

Qualitative data

MHSDS

Monthly

New MHST team types from 2020

Unique team identifier until then

Once QA data can stop flow of management info

National Evaluation

2 phases

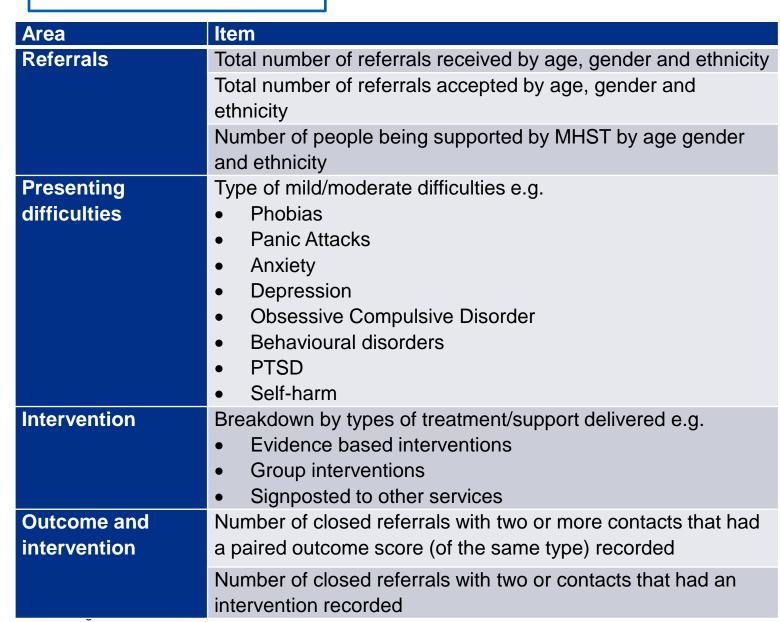
Qualitative data collection

In process of being commissioned by DfE & **DHSC**

Likely to start from mid-late 2019

Will share details once research team in place

Metrics





What are we interested to know?



- Learning from the process of setting up a trailblazer
- Coverage of teams
- Range of activities undertaken by teams
- Numbers of CYP seen
- Outcomes for CYP seen
- Impact on demand for wider CYP MH services
- Changes to the pathway for CYP accessing specialist MH services
- Impact on the whole school/college
- How to integrate with existing provision in schools/colleges and the community

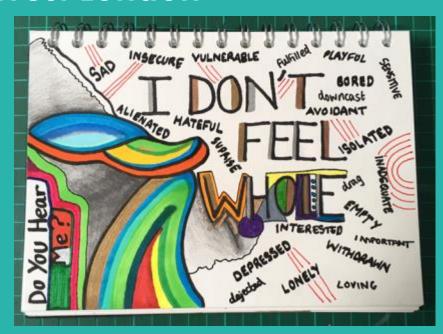
07

Trailblazer sites

South West London Health Care Partnership Tracy Cawley, Programme Director

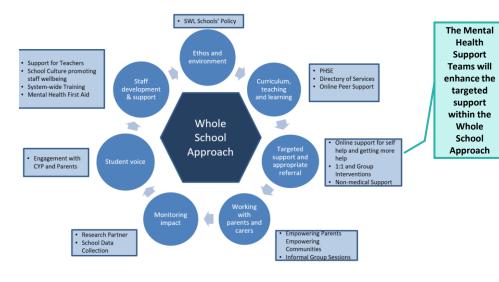


Launch event: Children and Young People's whole school approach and mental health support teams in South West London



How do the MHSTs align with whole school approach?

- In our expression of interest we set out that the development of the whole school approach was a critical foundation to enable the success of the mental health support teams.
- The whole school approach pilots will be rolled out from the spring term 18/19 with a phased roll out across our boroughs.
- The diagram below sets out the different component parts of South West London's whole school approach, with further detail on the right hand side of the page. The Mental Health Support Teams



Next steps and questions to answer

 Roll out of the whole school approach pilot commences from spring term 2019. School clusters will deliver a whole school approach and each school cluster to have Clinical Psychologist who will support the following:

- An ethos and environment that promotes respect and values diversity. A common SWL Mental Health policy to be implemented for schools.
- Curriculum, teaching and learning to promote resilience and support social and emotional learning

Delivered as part of PSHE education

Access to information via Directory of service, as above

Access to online peer support programme

Using additional online tools/resources - these need to be agreed

Targeted support and appropriate referral

Online counselling support to be provided

Additional support for those with mild to moderate MH needs will be required. Clinical psychologist will provide some 1:1 and group interventions. This will be enhanced for the boroughs who are delivering the pilot for Mental Health Support Teams as there will be an additional team of 4.5 trained staff.

Access to non-medical support in community settings

Working with parents and carers

Delivery of Empowering Parents, Empowering Communities (EPEC) across SWL

Group sessions (e.g. exam stress, internet safety) to be led by Clinical psychologist

Identifying need and monitoring impact of interventions

Research partner to assess impact of pilot

Schools to support data collection (We will ask schools to do a baseline survey this term using a validated tool and to carry out another survey at the end of the pilot to monitor the impact of the intervention)

Enabling student voice to influence decisions

Engagement programme with CYP and parents – to be developed

Staff development to support their own wellbeing and that of students

Clinical psychologist to deliver programme of support for teachers

School culture to promote staff wellbeing

System-wide training programme (content to be developed based on training needs)

Mental health first aid to be rolled out across schools (to inclusion teams and head of year)

• Leadership and management, that supports and champions efforts to promote emotional health and

 Leadership and management that supports and champions efforts to promote emotional health and wellbeing

System leaders attending the Yale University development programme

System leaders championing the programme by engaging strategic leaders across SWL and identifying opportunities to innovate

Cluster leads supporting their cluster schools to complete audits, develop and implement their action plan

CAMHS partnership boards overseeing this work at a strategic level to ensure that the programme is aligned with borough priorities

Working with NHS leadership academy to develop a programme for the school designated leads so that they have the capacity and capability to develop their strategic roles in schools.

South West London Health & Care Partnership

•London boroughs/CCGs: Merton, Sutton and Wandsworth

Other organisations involved

SWL and St George's Mental Health Trust

Number of schools =44	
Primary = 30	Special = 3
Secondary = 9	Pupil referral unit =2
Other= 0	FE College = 0

University – Kings College London

Mental health provider and team

South West London & St George's Mental Health NHS
Trust

Number of Mental Health Support Teams = Three

Clinical psychologist x 3 (WTE)	Nurse practitioner x 2 (WTE)
Supervision x 0.1 (WTE)	Well being practitioners x 12 (WTE)

Key features

To deliver three MHSTs across Merton, Sutton and Wandsworth, these teams will build on the interventions that are already in place as part of the whole school approach pilot. The majority of schools who are part of the MHST are the schools that have worked as part of the whole schools approach pilot.

Key challenges

- Finalise arrangements with CORC for the provision of the evaluation of the whole school approach.
- Work with NHSE, once national evaluation partner agreed, to align the evaluations.
- Determine the local delivery model (for each borough)

 this will include mapping and integration of the
 MHSTs in the CAMHS pathway (including considering health inequalities)
- Engage with CYP/parents/schools/health sector how interventions will sit alongside current provision.
- Funding arrangements for band 8a supervisors during on boarding year
- Communication with wider stakeholders about the programme
- Travel costs and on boarding costs for EMHP

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07

West London

Simon Brauner-Cave, Commissioner, North West London Collaboration of Clinical Commissioning Groups

Skye Blyth-Whitelock, Youth Services Manager, Hammersmith & Fulham Mind.

West London

London boroughs/CCGs: West London (Kensington and Chelsea, Westminster (QPP))

Other organisations involved

Hammersmith and Fulham Mind

Xenzone Kooth

Number of schools = 15

1x 6th form college, 1x secondary, 1x special, 12x primary. 4 tentative (2x secondary, 2x primary). We expect to confirm all schools by end of Feb

University - University College London

Mental health provider and team

Hammersmith and Fulham Mind

Number of Mental Health Support Teams = 2

Clinical Lead x1 WTE	Family Therapist x1 WTE
Educational Psychologist x1 WTE	Clinical Psychologist x1 WTE
Family Support Worker x1	Wellbeing Practitioners x9
Wellbeing Facilitators x2	

Key features

- To deliver two MHSTs across West London.
- Population of Children and Young People and schools to be covered will be confirmed by the end of February 2019.

Key challenges

- DSLMH and expectations of schools posing a challenge to school sign-up
- Mapping existing provision within educational settings (CAMHS, LA, VCS, Grenfell Recovery) to ensure meeting needs and not duplicating
- Agreeing appropriate triaging mechanisms and pathways within educational settings and with other providers

07 Hounslow

Susie O'Neill: Senior Joint Commissioning Manager – Children & Young People London Borough of Hounslow/Hounslow Clinical Commissioning Group

Hounslow

London boroughs/CCGs: Hounslow

Other organisations involved

Number of schools = 21			
Primary = 9	Special = 0		
Secondary = 10	Pupil referral unit = 1		
Other (primary & secondary) = 1	FE College = 0		

University – University of Reading

Mental health provider and team			
West London NHS Trust			
Number of Mental Health Support Teams = two			
Service lead x 1 (wte)*	Band 7 Practitioner x 2 (wte)*		
Practitioners x 8 (wte)*	Administrator x 1 (wte)*		

Key features

- To deliver two MHSTs, one in East and one in West Hounslow with a core offer to 8 secondary schools and 29 primaries. A targeted offer will be made available to 'high needs' settings (as assessed during mobilisation).
- The teams will work primarily in schools and college settings, providing evidence-based interventions for CYP with mild-moderate needs.

Key challenges

- Location & communication
- Timescales
- How MHSTs fit with our wider offer

* Across two teams 61

07Questions to the Trailblazers

Tracy Parr - Chair

Break

REFRESHMENTS ARE AVAILABLE IN THE FOYER

01

Trailblazers and Four Week Waiting Time Pilots

Camden

Jennie Mackeith, Strategic Commissioning Manager, London Borough of Camden

Andy Wiener, Clinical Director CAMHS, Tavistock and Portman NHS Trust



Camden Trailblazer Update MHST and Waiting Time Pilot

Jennie Mackeith

Strategic Commissioning Manager

Children's Integrated Commissioning Team

Andy Wiener

Clinical Director CAMHS

Tavistock and Portman NHS Trust





Supported by and delivering for:







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Camden - Mental Health Schools Teams

Camden CCG and local authority

Other organisations involved

- Camden Learning partnership between Camden schools and Camden council to improve teaching and learning.
- Mental health learning hubs providing CPD and sharing good practice
- Engagement with Ed Psych service and voluntary sector partners

Number of schools = 29			
Primary = 19	Special = 0		
Secondary = 10	Pupil referral unit =0		
Other	FE College =0		

University – University College London

Mental health provider and team			
Tavistock and Portman NHS Foundation Trust			
Number of Mental Health Support Teams = two			
Senior Clinicians (Supervisors) x 2 WTE	Trainees x 5 WTE		
2x CWP Graduates	Band 5 CAMHS practitioners x 5 WTE		

Key features

- To roll out two MHSTs using a 'blended team' model of Educational Mental Health Practitioners (EMHPs) and Band 5 CAMHS practitioners; each team will consist of 6 practitioners and a team lead/ supervisor.
- There will be c. 70% coverage of all schools in Camden.
- As well as delivering 1-2-1 interventions, MHSTS will roll out a menu of other interventions too, including parenting groups, inclusion cafes and peer mentoring.

Key challenges

- Scale of the rollout
- Integrating with current CAMHS offer
- Schools managing and prioritising multiple offers
- Out of borough students and eligibility

Camden – Four week waiting time pilot

Four Week Waiting Time Pilot

- To reduce the average wait from referral to second appointment from five to four weeks.
- Camden will achieve this by converting the local Joint Intake system (across schools, GP practices, social services etc) to a clinical team.
- This service uses a THRIVE model of delivery and will aim to increase the number of 'Getting Advice' interventions.
- Reduce internal waits for psychotherapy and CBT
- Evaluate acceptability of online CBT for young people and families

Key Points

- No internal wait for brief intervention
- Support while waiting for specialist treatment
- Focussed on GP referral pathway
- Welcome phone calls before first appointment
- Telephone liaison to gather more information
- Telephone triage in selected cases

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Trailblazers and Four Week Waiting Time Pilots

Tower Hamlets

Diana Viscusi, Transformation Manager, Children and Maternity, Integrated Commissioning, NHS Tower Hamlets Clinical Commissioning Group and London Borough of Tower Hamlets

Tower Hamlets Mental Health in Schools Teams

London boroughs/CCGs: Tower Hamlets

Other organisations involved

Step Forward

Number of schools = 27	
Primary = 9	Special = 1
Secondary = 13	Pupil referral unit = 3
Other = 1	FE College =

University – University College London

Mental health provider and team

East London NHS Foundation Trust

Number of teams = 2

Clinician leadership and supervision x 1 (wte)*	Clinician (sub CAMHS threshold) x 2 (wte)*
Education Mental Health Practitioner x 6 (wte)*	Qualified Children Wellbeing Practitioner (schools experience) x 3 (wte)*
Step Forward Counsellor x 2 (wte)*	Administrator x 1 (wte)*

Key features

- 2 MHSTs covering 27 schools in Tower Hamlets, wioth a view to extend to all schools once the service is established
- A mix of clinical qualification and experience to reflect the different level of need and complexity

The project will eb delivered in two phases:

- Phase 1, (April-Autumn 2019), both teams will work with 6 schools (a mix of academies, secondary, primary and sixth form colleges) covering a population of c.4,530 pupils, with a capacity of 280-33- pupils.
- Phase 2 (Autums 2019 onwards), roll out to additional schools. Each fully operational team will serve a population of c. 7,300 pupils and hold c.4-500 cases.

Key challenges

- Challenging delivery timelines
- Stretched capacity to lead the project while staff is being recruited
- Conflicting priorities with Education which impacts on timely and effective communication and engagement with schools
- Space to accommodate MHSTs within schools and CAMHS
- Uncertainties around funding which impact on recruitment and retention

69

^{*} Total across two teams

Tower Hamlets Four Week Waiting Time Pilot

Key features

To develop a service model that will allows CAMHS to achieve and sustain an average wait of 4 weeks from referral to assessment . Our approach involves 1) Clearing existing backlog: the current average waiting time to enter treatment is 6.1 weeks. In Q2 there were 65 CYP awaiting assessment, 2 WTE will be recruited for six month to reduce backlog to in-month demand. 2) Improve efficiency: more CYP treated per clinical WTE drawing on proven transformation models (e.g. CAPA and i-Thrive); Increase Tier 2 capacity though the MHSTs, whole-schools programmes, groups interventions; Increase Tier 3 WTE capacity (5 WTE);

Experience for service users

Acces to specialist CAMHS will be 'facilitated' by the MHSTs and CWPs working within schools. CYPs with more severe needs will be seen sooner by a specialist CAMHS practitioner the stepped approach will allow to offer support quicker and tailored to the CYP needs. It will also offer greater choice of type of intervention and settings.

Pathways

Clinicians will be deployed in: Front Door / Triage system to deliver assessment as well as short interventions (up to 3 sessions); the Emotional & Behavioural pathway offering a wide range of individual and group interventions (CBT, family therapy, etc.); CAMHS Neurodevelopmental teams offering group and individual interventions

Tower Hamlets Four Week Waiting Time Pilot

Working with Education and other partners

significant experience in working schools around mental health and wellbeing including its Healthy Schools, Family and Parental Engagement Service, Educational Psychology and School Health Services, CAMHS link Pilot and CAMHS Training programme for secondary schools. The newly established MHSTs multi agency steering group which reports to the Mental health and Emotional Wellbeing working group, one of four delivery group of the Born Well Growing Well Board. Both the working group and the board have senior representation from Education, Public Health and voluntary sector. Partners. The Tower Hamlets Together Board provides overarching leadership and assurance.

Local needs

There are 112,958 0-25 year olds, increasing to 129,128 by 2030. **47,000 CYP of school age projected to increase by c. 10% to 50,000** in the next 10 years. **More than 53% of children living in poverty** (after housing costs). Prevalence of **4,576 (2018/19) CYP aged between 5 and 18 with a diagnosable mental disorder**. Up to 2,900 school children with a SEMH disorders, 6.8% higher than London and England averages. Demand for specialist CAMHS is also growing. From 16/17 to 17/18 CAMHS received 16% additional referrals (200 CYPs) and this rate of growth set to continue in the next five years.

	16/17	17/18	18/19	19/20	20/21	20/22
Referrals	1329	1535	1772	2048	2365	2732

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Trailblazers and Four Week Waiting Time Pilots

Bromley

Nazmin Mansuria, Integrated Commissioning and Transformation Senior Commissioning Manager, (Children), NHS Bromley Clinical Commissioning Group

Bromley

London boroughs/CCGs: Bromley

Other organisations involved

 Bromley Beacon Academy and Bromley Trust Academy

Number of schools

Bromley CCG expects to conclude engagement with schools by the middle of February 2019.

University – Kings College London

Mental health provider and team

Oxleas NHS Foundation Trust

Number of Mental Health Support Teams = Two						
Senior Wellbeing Practitioner x 2 WTE						
Wellbeing Practitioner X 4 WTE	Referral Officer X 0.6 WTE					
8x WTE Education Mental Health practitioner (EHMP) funded separately						

Key features

- To deliver two Mental Health Support Teams (MHSTs) in the North East of Bromley.
- The two teams will provide interventions for c.16,000 (half population) primary and secondary schools.

Key challenges

- Schools selected and maintaining interest and motivation
- Offering a service to the non selected schools in Bromley- fairness and equality
- Employment is through Slam so EMHP have to report to Bromley Y, Kings and Slam (South London and Maudsley Foundation Trust)
- Retention of EMHP due to travel and location
- Inner London waiting- Bromley

Bromley – 4 Week Wait Pilot

BACKGROUND

As outlined in the initial bid document, specialist community CAMHS (Oxleas NHS FT) has embarked upon a redesign of care and treatment pathways in order to reduce waiting times from referral to assessment to within 4 weeks. Key elements of the redesign include:

- Assessment Clinics establishment of multi-disciplinary clinical assessment hubs, which will meet following assessments to complete clinical formulation and care/treatment plan
- Brief Intervention Pathway development of a brief intervention pathway model with the aim of building resilience and coping mechanisms targeted at both the service user and their professional network
- Group Treatment expansion of evidence-based parent and service user group treatment pathway as core interventions
- Psychoeducation development of psychoeducation groups and self-help resources to support parents and service users to better manage and understand mental health needs (in partnership with Bromley Wellbeing).

Bromley – 4 Week Wait Pilot

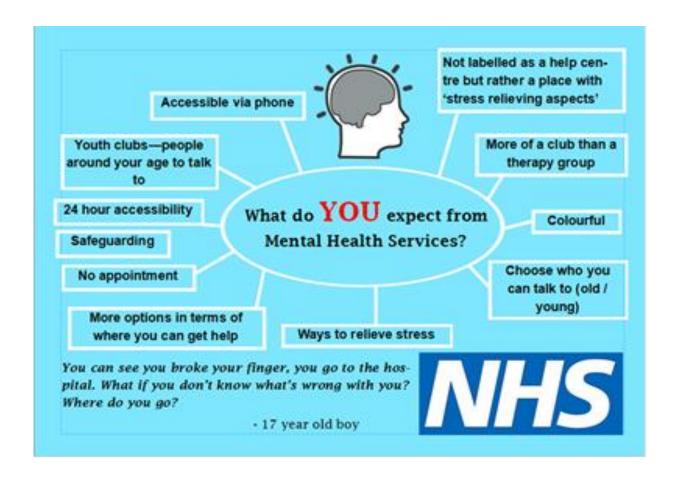
PROGRESS

- All new posts out for advertisement (excluding Consultant Psychiatry)
- Assessment Clinic working group underway
- Inclusion of Neurodevelopmental team pathways in redesign with particular reference to brief intervention and group treatment pathways
- Group treatment strategy in development
- Individual Support Plans updated, further psychoeducation resources in development.

CHALLENGES

- No posts filled as of February 2019
- Recruitment into Band 7 Clinical Psychology posts has proved particularly difficult outside of traditional post-qualification period (Sept.)
- Managing transition to new pathways amidst existing service pressures.

Bromley - CYP voices



Trailblazers and Four Week Waiting Time Pilots

Haringey

Michele Guimarin, Joint Commissioner for Vulnerable Children, Haringey Council and Haringey Clinical Commissioning Group









Haringey Trailblazer



Children and Young People's Mental Health Support Teams (MHSTs) and Four Week Waiting Time Pilot (4WW)







36 schools – 30 primary, 1 special primary and 5 secondary

- High levels of inequality
- Haringey is an exceptionally diverse and fast-changing borough.
- 43,141 young people and a quarter of the total population is under 20 years.
- 36% of Haringey children live in poverty, a rate of child poverty higher than the England average of 26.8%. FSM 50%.
- Above London average rates multiple indicators of deprivation.
- ACEs e.g. trauma including violence in the home, abuse, neglect and bereavement.
- Projects in schools programme, but no consistent CAMHS service
- 2016 Review of CAMHS Services showed a range of services/projects not joined up

Staff for each MHST

- 1 Team Leader
- 2 experienced CAMHS practitioners
- 2 Education Mental Health Practitioner (EMHP) trainees – start January 2019 for two years
- 1 Children Wellbeing Practitioner (CWP)
- 0.5 Educational Psychology
- 0.5 Occupational/Speech and Language Therapy
- 1 Administrator
- Links to community and LA partners Early Help, Anchor Project, Education Business Partnership, More Than Mentors, deep:black and THF
- BEHMHT Lead and Tavistock and Portman

Progress

- Project Manager and Educationalist
- Strong partnership board
- Consultation with schools
- Consultation with partners
- CAMHS and schools have very different organisational cultures
- Each school has a very different starting point
- Recruitment and activities started
- Redesign of CAMHS service
- Implement iThrive
- Linking major Haringey programmes with Trailblazer

Questions to the Trailblazers and Four Week Waiting Time Pilots

Tracy Parr - Chair

Children and Young People's Mental Health Workforce Strategy

Jess Simpson, Programme Manager Healthy London Partnership

Robin Barker, Clinical Advisor, Healthy London Partnership

Background

Why do we need a CYP MH workforce strategy for London?

- Workforce is highly mobile (across areas)
- Similar workforce problems (NHS retention, high staff turnover)
- Strategies across the five STP areas are fragmented
- Existing strategies are out-dated and do not consider wider CYPMH workforce
- London is growing at twice the rate as the rest of the UK

What is driving current CYPMH workforce strategy?

- Policy (Long Term Plan, Future in Mind, FYFV, Green Paper)
- Programmes (CYP IAPT, Mental Health in Schools)
- Health Education England via education
- NHS England via new services

Who are the CYP MH workforce?

- Children and young people (e.g. peer mentoring)
- Parents / carers
- Education schools, colleges, universities
- Local Authority social workers, housing, etc.
- VCS voluntary and community sector
- Health mental and physical health, primary, secondary and specialist
- Targeted (e.g. youth justice)

Development

What will a HLP CYPMH workforce strategy provide?

London

- London-wide goals
- Informed by the views of children and young people and their parents / carers

STP

- STP level 'sense check' on current strategy
- Identify organisational views of the workforce

CCG

- Map CYPMH workforce progress
- · Highlight areas of good practice

Mile	estones and activities	Jan	Feb	Mar	Apr	May
1	Engagement with stakeholders including (but not limited to) STP leads, Health Education England, NHS England, voluntary sector, community organisations, local authority, education.					
2	Working with STP leaders to map baselines of existing CYP MH workforce					
3	Review of existing work across London and nationally, including STP strategies and links to national policy and programmes.					
4	Launch engagement with children and young people and their parents/carers through a survey and targeted events/outreach					
5	Interim report delivered to Health Education England on engagement work to date.					
6	Additional development of the strategy through targeted workshops with various stakeholders					
7	Recommendations and report published.					

03 Table discussions

Tracy Parr
Sharon Long

Table Discussion

1. What support do you need and how would you like HLP to bring you together?

2. What thematic areas would you like covered in future, e.g. assurance, safeguarding, and mental health related stigma?

O4 Questions Tracy Parr Chair

Close and Network Lunch