

Annex 1: Local Transformation Plans for Children and Young People's Mental Health

Please use this template to provide a high level summary of your Local Transformation Plan and submit it together with your detailed Plan (see paragraph 5.1.4)

Developing your local offer to secure improvements in children and young people's mental health outcomes and release the additional funding: high level summary

Q1. Who is leading the development of this Plan?

(Please identify the lead accountable commissioning body for children and young people's mental health at local level. We envisage in most cases this will be the CCG working in close collaboration with Local Authorities and other partners. Please list wider partnerships in place, including with the voluntary sector and include the name and contact details of a single senior person best able to field queries about the application.)

Jointly, Lincolnshire Clinical Commissioning Groups and Lincolnshire County Council are leading on the development and co-ordination of the Local Transformational Plan.

The senior lead for queries will be Chief Commissioning Officer – Children's Services, Sally Savage on sally.savage@lincolnshire.gov.uk

Lincolnshire already has a number of governance structures in place that will provide a solid foundation of support for the Transformation Plan. These include;

- A Section 75 Agreement in place with the four Clinical Commissioning Groups and the Local Authority. The agreement delegates the commissioning responsibility of moderate to specialist CAMH Services to the Local Authority, allowing the pooling of budgets in order to improve the efficiency and cost-effectiveness of the Service provision
- A jointly funded Assistant Director post to oversee the joint commissioning arrangements between CCG's and the Local Authority. This post is a key link in the joint commissioning arrangement detailed within the plan and holds overall responsibility for the Children's Commissioning Team. The Team oversee all aspects of commissioning arrangements for 0-25 years, including services for Mental Health and Emotional Wellbeing, Looked After Children support and step-down support from inpatient facilities
- The Joint Delivery Board between CCG's and the Local Authority has oversight of a number of boards, one of which is the Women and Children's Board (W&C Board) The W&C Board are responsible for services for children and young people, including Mental Health Specification, Procurement, Contract Management, Quality Assurance and Safeguarding of Services for

Women & Children. The W&C Board also has representation at the Children and Young Peoples Strategic Partnership along with a number of other key agencies including the voluntary and community sector.

- A grant is in place to support the third sector and contribute to the development and sustainability of the third sector in Lincolnshire. The grant agreement provides a mechanism for close working between the Local Authority and the voluntary sector.

Q2. What are you trying to do?

(Please outline your main objectives, and the principal changes you are planning to make to secure and sustain improvements in children and young people's mental health outcomes. What will the local offer look like for children and young people in your community and for your staff?). **Please tell us in no more than 300 words**

Integrate a new model of service delivery for Lincolnshire CAMHS based on a robust specification that combines;

- A tier-less system that includes a Community Based Eating Disorder Service, Tier 3+ provision that operates 24/7 for those in crisis and particular support for vulnerable groups to reduce health inequalities
- A service built on NICE clinical pathways explicit in the number of interventions provided, frequency of contact and anticipated length of time in treatment incorporating a CAPA approach
- A model that focuses on empowering the voice of young people, delivering evidence based practice and improved outcomes utilising mechanisms such as CORC, OOCAMHS, PROMS, SDQ and CHI-ESQ
- Increased support for transitions and behavioural support through the development of multi-agency pathways
- CYP IAPT training for clinical and non-clinical staff
- Establishing a Single Point of Referral (SPR) so all referrals are received into a daily triage function, prioritising referrals within stretching and ambitious wait times, including a 4 hour response time for emergency referrals

The local offer will be accessible and transparent for service users, their families and front line practitioners. In conjunction with the SPR, Lincolnshire will host a website that is clear on the universal services available to CYP, such as the Online Counselling Service, how these services can be accessed as well as how to refer to CAMHS. This offer will also host an up to date copy of the executive action plan making clear the roles and responsibilities of the various agencies. The local offer will include training for professionals, to upskill our front line practitioners on areas such as reducing stigma and recognising early signs of mental health and wellbeing issues. Practitioners will also have access to a Professional Advice Line, self-help psychosocial education materials and consultation and agency support.

Q3. Where have you got to?

(Please summarise the main concrete steps or achievements you have already made towards developing your local offer in line with the national ambition set out in *Future in Mind* e.g. progress made since publication in March 2015.) Please tell us in no more than 300 words

To date;

- Lincolnshire has undertaken stakeholder consultation, with over 55 local groups
- Implemented a further Section 75 Agreement between the Local Authority and CCG's
- Revised the CAMH service specification
- Participated in East Midlands review of readiness to implement Future In Mind, resulting in an internal action plan that we have shared with key stakeholders, such as Chief Commissioner for Learning, LPFT and CCG's
- Undertaken a gap analysis between existing and proposed service and identified areas of priority
- Commissioned Perinatal Specialist Teams to provide a specialised service for the prevention and treatment of Serious Mental Illness in the ante natal and post-natal period supporting Mother and Baby
- Started costing various options of CYP IAPT training / identified clinical and non-clinical staff for IAPT training
- Identified the specific support we will give to vulnerable groups, including reduced wait times
- Identified how we will deliver a community based Eating Disorder / Tier 3+ out of hours crisis service
- Developed self-harm, transition and behaviour pathways
- Commissioned a Behavioural Outreach Support Service for pupils displaying behaviour that challenges, a Physical Disabilities Support Service and Autism and Learning Disabilities Service to support the needs of pupils across the county
- Commenced a review of the services that will transfer from Public Health in October 2015 including Health Visiting and School Nursing as part of holistic package of support for CYP
- Applied for Schools Pilot funding which despite being unsuccessful, has identified enthusiasm of Schools to engage with mental health services and we remain commit to the ethos identified in the bid
- Identified training, development and consultation days in the model to support practitioners
- Started to develop a web based universal access offer making clear to service users and their families what services they can expect, how to access CAMHS with a planned "go-live" date of January 2016

Q4. Where do you think you could get to by April 2016?

(Please describe the changes, realistically, that could be achieved by then.) Please tell us in no more than 300 words

By April 2016, Lincolnshire ambitions include;

- Robust and transparent metric measuring through contract management
- Started working with Schools to raise awareness of mental health issues utilising support from commissioned Online Counselling service to share podcasts and blogs in conjunction with staff training
- Scoping national benchmarking data particularly around Eating Disorder Services
- Started phased implementation of Single Point of Referral
- Started implementation of Community Based Eating Disorder
- Started implementation of reduce routine waiting times
- Secured active participation in implementation of LTP from key agencies
- Shared the stakeholder engagement plan and begun to undertake actions, including attending team meetings
- Published Local Transformation Plan and executive service
- The website aimed at service users and their families which details local services available, how CAMHS works and what the pathways are is live
- Young Inspectors have undertaken an unannounced visit of Provider sites and fed back comments which are tracked, implemented and monitored
- Started to identify a programme of training for practitioners for the year ahead, supported with sharing of promotional materials and best practice work across agencies
- Shared financial baselines
- Commenced implementation of emergency, out of hours and crisis support
- Participated in regional and national learning, continuing to work closely with our East Midlands Clinical Commissioning colleagues
- Implemented Professional Advice Line
- Collation of PROMS mechanisms
- Identified named points of contact including commissioner contact
- Commenced implementation of Tier 3+ service that will provide intensive home treatment
- Ensured transparency around support offered for vulnerable groups including LAC, Care Leavers and YOS
- implementation of the Mental Health Services Data Set

Q5. What do you want from a structured programme of transformation support? Please tell us in no more than 300 words

- Sharing of data locally, regionally, nationally to give an informed picture that will enable local level value for money benchmarking
- Consistency of service across the county so there is parity for children and young people
- Guidance that empowers the young person receiving treatment so they become experts by experience
- Sharing of lessons learnt and best practice

- Regional training for commissioners
- Development of web based tools/apps that YP can access nationally
- Support for sustainable access to CYP IAPT training given the impending high demand of access
- Encouraging peripatetic CYP IAPT training to enable consistency of approach across the regions and value for money
- Engaged with the East Midlands funded worker supporting on implementation of Local Transformation Plans
- Provision of structured support to engage with the voluntary and community sector at a national and local level

Plans and trackers should be submitted to your local DCOs with a copy to England.mentalhealthperformance@nhs.net within the agreed timescales

The quarterly updates should be submitted in Q3 and Q4. Deadline dates will be confirmed shortly and are likely to be shortly after quarter end. These dates will, where possible, be aligned with other submission deadlines (e.g., for the system resilience trackers, or CCG assurance process).

DCOs will be asked to submit the trackers to england.camhs-data@nhs.net for analysis and to compile a master list

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