

# Lancashire & South Cumbria Children & Young People's Emotional Wellbeing and Mental Health

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Transformation Plan  
2015 – 2020/21

Refresh January 2020

## Our Vision

‘Children and young people in Lancashire & South Cumbria will grow up with healthy minds, feeling confident and resilient, and able to fulfil their potential’.

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## Introduction

The Children and Young People's Emotional Wellbeing and Mental Health (CYPEWMH) Transformation Plan for Lancashire (2015-2020) was first published in January 2016.

That document set out the initial iteration of a five-year plan for Lancashire, to support local implementation of the national ambition and principles as set out in '***Future in Mind – promoting, protecting and improving our children and young people's mental health and wellbeing***' (2015).<sup>1</sup>

The Plan's continued aim is to improve the resilience, emotional wellbeing and mental health of children and young people, especially those who are at increased risk due to their vulnerability, such as those within and on the 'edge of care', making it easier for them and their families to access help and support when they need it whilst improving the standard of mental health services across Lancashire and now, South Cumbria.

The Case for Change within the first iteration of the Plan is still relevant today, clearly identifying our aim to promote good emotional wellbeing and prevention of mental ill-health through early intervention, care and recovery.

Throughout, the Plan has been informed by engagement with children, young people and families, and based on comprehensive identification of needs and evidence-based practice, as well as a clear understanding of the local context.

The Plan has been refreshed annually as part of our ongoing commitment to deliver assurance around the work being undertaken and outcomes achieved. On all occasions we have worked closely with local stakeholders including service providers, clinicians and most importantly children, young people and families.

In 2019 the Transformation Plan joined together the work being undertaken in South Cumbria with that in Lancashire thus a Lancashire and South Cumbria Transformation Plan was delivered from April 2019.

From April 2020 through to March 2021, will be the final year of this Transformation Plan and it is proposed that we will continue to look forward to delivering the wider strategy for children and young people's emotional wellbeing and mental health. This new Plan will serve to respond to maintaining and enhancing current provision but will also be an opportunity to take account of any gaps in provision alongside our commitment to delivering the requirements and aspirations of NHS Long Term Plan (2019)<sup>2</sup> and the Implementation Framework (June 2019)<sup>3</sup>

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<sup>1</sup>[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/414024/Childrens\\_Mental\\_Health.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf)

<sup>2</sup> <https://www.england.nhs.uk/long-term-plan/>

<sup>3</sup> <https://www.longtermplan.nhs.uk/implementation-framework/>

## New National Guidance and Policy

### NHS Long Term Plan (January 2019)<sup>4</sup> - Children & Young People's Mental Health NHS Long Term Plan Priorities

The NHS Long Term Plan (2019) makes a renewed commitment that mental health services will grow faster than the overall NHS budget, creating a new ringfenced local investment fund worth at least £2.3 billion a year by 2023/24. This will enable further service expansion and faster access to community and crisis mental health services for both adults and particularly children and young people. (p8)

The Plan sets out its ambitions in key areas including (p6-10):

- Better support and joined up care
- Prevention and health inequalities
- Care quality and improved outcomes
- Workforce
- Upgraded technology and digitally enabled care
- Achieving sustainable financial pathways
- Implementation of the Long Term Plan and the role of Integrated Care Systems

The Plan states that:

- Existing commitments in the **Five Year Forward View** and national strategies for cancer, mental health, learning disability, general practice and maternity will all continue to be implemented in 2019/20 and 2020/21 as originally planned. (7.2)
- The NHS is making **a new commitment** that funding for children and young people's mental health services will grow faster than both overall NHS funding and total mental health spending. (3.24)
- Over the next five years, the NHS will therefore **continue to invest** in expanding access to community-based mental health services to meet the needs of more children and young people. (3.25)
- By 2023/24, 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. (3.25)
- Over the next five years, we will also boost investment in children and young people's **eating disorder services**. The NHS is on track to deliver the **new waiting time standards** for eating disorder services by 2020/21...**extra investment** will allow us to maintain delivery of the **95% standard** beyond 2020/21. (3.26)
- Children and young people experiencing a mental health crisis will be able to access the support they need... With a single point of access through NHS 111,

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<sup>4</sup> <https://www.england.nhs.uk/long-term-plan/>

all children and young people experiencing crisis will be able to access **crisis care 24 hours a day, seven days a week.** (3.27)

- Mental health support for children and young people will be **embedded in schools and colleges...** new **Mental Health Support Teams** working in schools and colleges...which will be rolled out to between one-fifth and a quarter of the country by the end of 2023. (3.28)
- Mental Health Support Teams will receive **information and training** to help them support young people more likely to face mental health issues – such as **Lesbian, Gay, Bisexual, Transgender (LGBT+) individuals or children in care.** (3.28)
- New **national waiting time standards** for all children and young people who need specialist mental health services. (3.28)
- **In selected areas,** we will also develop **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. (3.29)
- A new approach to young adult mental health services for people aged 18-25 will **support the transition to adulthood...** We will 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. The new model will deliver an integrated approach across health, social care, education and the voluntary sector. (3.30)
- NHS England is working closely with Universities UK via the Mental Health in Higher Education programme to build the **capability and capacity of universities** to **improve student welfare services** and improve access to mental health services for the student population, including focusing on **suicide reduction, improving access to psychological therapies and groups of students with particular vulnerabilities.** (3.30)

In June 2019, the NHS published its Implementation Framework, which set out the approach that Integrated Care Systems (ICS) are to take in creating their five-year strategic plans (2019/20 to 2023/24). These plans are to be submitted to NHS England during November 2019.

For Lancashire and South Cumbria, there is a requirement to deliver a single ICS Strategic Delivery Plan. The CYPEWMH programme were asked to provide an evaluation of the impacts in regard to the implementation of the Long-Term Plan requirements on service delivery, covering:

- finance
- activity, and
- workforce impacts

The submission for children and young people's emotional wellbeing and mental health with form part of a collective submission on behalf of 'Mental Health and Learning Disability/Autism'.

## Our Commitment

As part of our commitment to continually review and refresh this Plan, we strive to provide assurance to all of our stakeholders and to NHS England, that the Partnership Board and the role of those assigned to deliver the programme, have undertaken their responsibility diligently and with the ambition to make a difference to the outcomes for children and young people with emotional wellbeing and mental health issues.

As part of this refresh, the Plan continues to be underpinned by its nine key Principles that will influence and be accounted for within all aspects of our planning and delivery.

This Plan serves to recognise the challenges faced by children and young people with complex needs and multiple vulnerabilities that may significantly impede their access to, engagement with, and outcomes from services. It is therefore important that both local and national research and data guide our understanding. And, that we continue to recognise vulnerable children and young people and/or those who have experienced Adverse Childhood Experience(s) within our planning and service delivery, including those within the following groups:

- Adopted children
- Children Looked After, Care Leavers and those on the 'edge of care'
- Children in contact with the Youth Justice system
- Children who are abused (including those who are sexually exploited), neglected or victims of trauma
- Young people who are most excluded including those who are involved in gangs
- Children and young people with Learning Disabilities/Autistic Spectrum Disorder
- Children and young people with protected characteristics, such as disabilities caused by both physical and mental health difficulties, complex medical conditions, race, faith, sexual orientation, or gender reassignment.
- LGBTQ children, particularly those who are just coming to terms with their sexual orientation or gender identity
- Children and young people from minority ethnic groups
- Children who have been bereaved or experienced bereavement
- Children who have experienced or witnessed domestic violence

Furthermore, we recognise the vulnerabilities and needs of children and young people who are carers themselves. Findings tell us that a third more young adult carers report anxiety or depression than other young people and for young carers under the age of 17 years, a survey of 61 young carers in school found that 38% had mental health problems<sup>5</sup>.

Finally, as part of this review, we have been able to celebrate our achievements whilst recognising that we have an ongoing commitment to working with colleagues from across the Lancashire & South Cumbria Integrated Care System. We will continue to raise the

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<sup>5</sup> <https://professionals.carers.org/young-adult-carer-mental-health>

profile of children and young people with emotional wellbeing and mental health issues, and ensure their needs are reflected in other programmes of work, such as the Learning Disability & Autism Workstream, SEND, the Adult Mental Health programme, the All Age Suicide and Self Harm Strategy and the ICS Workforce Strategy. For this reason, we have closed some of the objectives included in previous iterations of this Plan but have reflected the need to remain cognisant of their importance through the Principles and inclusion of new targets on our Performance Dashboard. Furthermore, reporting arrangements have been agreed to ensure the Partnership Board remains updated on progress and, on our inclusion in and influence of, the work of other programmes such as Peri-natal that now sits within the Adult Mental Health programme.

In summary, as part of this review we have:

**To be completed following the November engagement period**



## Principles

Our plan is underpinned by **nine** key Principles drawn from national policy and guidance, that inform all our work. We will:

1. work collaboratively with children, young people, families, carers, partners, providers and wider stakeholders to support them to:
  - a. Shape, influence and drive forward the delivery of our objectives.
  - b. Engage in the co-production of system wide and local solutions.
  - c. Identify opportunities to improve efficiency, effectiveness and patient experience.
  - d. Understand how their feedback has informed service development and redesign.
2. draw on the learning from both local and national pilots and evidence based best practice.
3. recognise and respond to the needs of children, young people and families who have protected characteristics. This will include undertaking Equality Impact and Risk Assessments and ensuring that we have due regard to the public sector equality duty (Equality Act, 2010)<sup>6</sup>.
4. represent and respond to the needs of children, young people and families, including those deemed to be at greater risk due to their vulnerability, within our planning, commissioning, service delivery and strategy development.
5. improve services and outcomes for children, young people and families by comparing our performance against national targets within the refreshed Transformation Plan and its monitoring via the Partnership Board
6. draw on learning from the Joint Strategic Needs Assessment (JSNA) and other national and local data regarding needs and health inequalities.
7. strive to achieve 'parity of esteem' – valuing mental health equally with physical health, and that this principle will form the foundation of our planning and delivery.
8. seek to achieve a balance between ensuring positive outcomes for children, young people and families whilst at the same time developing services that are both sustainable and affordable.
9. sustain a culture of 'continual learning and development'.

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<sup>6</sup> A Public Sector Equality Duty Guidance document has been developed.

## Achievements

By working collaboratively, we have achieved considerable improvements and progress in delivering the transformation programme. These are summarised collectively within the diagram below 'Review of Our Achievements'. Alongside this collaborative approach, significant work has also been undertaken through local co-ordination and local partnership groups. Whilst local achievements are too many in number to detail within this plan, it is important to acknowledge the extensive work of local partners and the impact for children, young people and their families.

## What difference have we made to children, young people and their families and/or carers?

Here are just some examples of the difference we have made:

- **CAMHS Redesign...**  
Following on from the intensive engagement carried out by the Care Partnership and Healthwatch we established four children and young people's panels in order to evaluate the proposal for the redesign. We also wanted to know what they understood about the redesign process and the changes that would bring. Through briefing sessions, we also agreed how the Care Partnership would carry out their presentations and checked out the most appropriate format so as to make it as user friendly as possible. This feedback was shared with the Care Partnership and directly influenced the style and delivery of their presentations.
- **Chorley's Mother & Baby Unit, One year on...**  
Our eight-bed Mother and Baby unit (Ribblemere) opened in October 2018. This inpatient facility for mothers with serious mental health problems enables access to support and treatment whilst remaining alongside their babies. Since the opening, 54 mothers and their babies have been supported on the ward (up to the 31<sup>st</sup> August 2019), with bed occupancy increasing to 96% in August 2019. The average length of stay for mums is 21 days. Referrals have been received from 21 different CCGs across the country with the most referrals from Central Lancashire. This service enables treatment and recovery for mothers while allowing their relationships with their babies to develop.
- **Primary Mental Health Workers...**  
We have increased the number of Primary Mental Health Workers (PMHW) employed. Originally there were 3 PMHWs in North Lancashire, there are now 17 across Lancashire and South Cumbria. Schools have told us that working with the PMHWs has led to improved joined up working, and improved outcomes for children and young people.

- **Improving Access to Psychological Therapies (IAPT)...**

The IAPT programme for CYP MH provides training for staff within Children's MH services, both NHS and VCFS, to enhance their skill set and the range of evidence-based treatments that they are able to offer. CCGs have identified an annual investment fund of approximately £500,000 to support continued attendance on this training. In 2018/19 30 staff accessed IAPT Training across Lancashire (only). For 2019/20, the offer will be widened to encompass staff from across the L&SC footprint and Expressions of Interest are currently being accepted. It is anticipated that a similar number of staff will continue to access this training in future years.

- **Healthy Young Minds Website...**

Our engagement with professionals has led to a phased development of their section of the Healthy Young Minds website. A Resources webpage was set up and nine topics were identified by Primary Mental Health Workers (PMHWs) as being the most useful for education professionals. The content for the 9 topics was co-produced over summer 2019 by PMHWs and the communications and engagement team, including testing with a wider group of professionals and was launched onto the live website in September 2019. Professionals now have access to a library of resources.

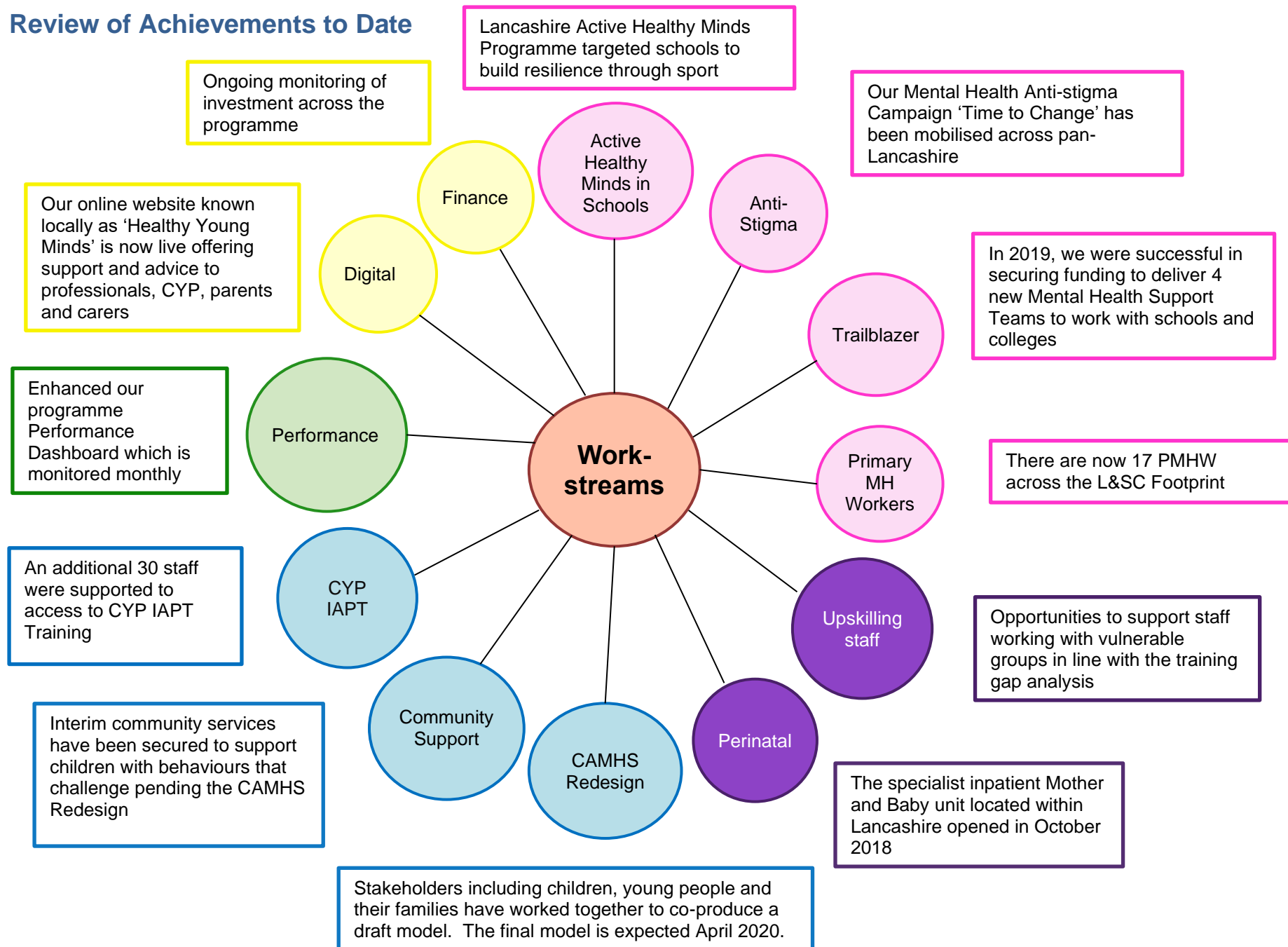
- **Short Tour Videos...**

Working with children and young people we have created a short video tour of two CAMHS offices. This filming is a direct result of the feedback and insights from our active engagement with children, young people, carers and family members. People sometimes felt anxious about attending an appointment especially if it is a first appointment in a CAMHS venue. People can now watch the video prior to attending the appointment to help them to prepare for the appointment therefore helping to ease any anxiety.

- **Social Media...**

We have created a YouTube channel with playlists on a number of topics that children and young people told us were most relevant to them, and these are linked to the website. We have continued to engage through our Twitter and Facebook channels too and will be launching a toolkit containing resources to empower individuals or groups to create content and enable conversations about mental health, as well as signposting to self-help resources.

## Review of Achievements to Date



## What are our objectives going forward?

We have reviewed our plan and identified the following **four** key areas of work going forward to 2021. These objectives serve to deliver the programme's Vision statement whilst providing surety that children, young people, their families and carers will have access to tools and support to understand their needs and how best to address them. They will become experts in their own care and there will be no stigma in needing or asking for help or support. They will know where to find help in a way that is accessible, safe and seamless to them regardless of who provides this support.

We have therefore defined a series of objectives that will serve to deliver the programme over the next 12 month (2020/21):

### Promoting Resilience, Prevention and Early Intervention

1. All Primary Mental Health workers will be trained to deliver the 'schools mental health first aid' one day course **(RETAINED)**
2. Each CCG area will deliver a minimum of four 'Mental Health First Aid' courses per year **(REWORDED)**
3. We will have confirmed our early support offer to children, young people and their families to avoid escalation, promote recovery and maintain wellbeing **(REWORDED)**
4. We will deliver Mental Health support within education settings in line with the 2019-20 Trailblazer programme – Morecambe Bay CCG **(NEW)**
5. We will deliver Mental Health support within education settings in line with the 2019-20 Trailblazer programme – Blackburn with Darwen CCG **(NEW)**
6. We will use the learning from the Trailblazer programmes to embed new programmes of work with education settings across the wider footprint **(NEW)**

### Improving Access to Effective Support

7. Our website known locally as 'Healthy Young Minds', will offer information, advice, self-help, care pathways and self-referral for children and young people, parents and carers and professionals **(REWORDED)**
8. We will have redesigned the CAMHS Clinical Model in line with THRIVE **(REWORDED)**
9. We will have mobilised the approved 'redesign of CAMHS' **(RETAINED)**

10. We will have a consistent 'Out of Hours' provision **(REWODED)**
11. CAMHS will accept referrals up to 18<sup>th</sup> birthday and continue to work with young people up to 19<sup>th</sup> birthday if appropriate and necessary **(REWODED)**
12. We will have developed and agreed an approach to providing Risk Support in each local authority area, including a minimum NHS funded offer **(REWODED)**
13. Through the Lead Provider Collaborative, we will define and deliver specialist inpatient and intensive home treatment in line with THRIVE – **(REWODED)**
14. We will define our offer for '0-25 year olds' that reaches across mental health services for children, young people and adults, providing an integrated approach across health, social care, education and the voluntary sector **(REWODED)**
15. We will implement an 'all age' eating disorder service model in South Cumbria **(REWODED)**
16. We will have implemented recommendations from the '0-19 Eating Disorder Review' (2019) into the future delivery of the All-age Eating Disorder model across the Lancashire & South Cumbria ICS footprint **(RETAINED)**

### **Ensuring Appropriate Support and Intervention for CYP in Crisis**

17. We will support families and carers who are caring for children and young people in crisis through access to appropriate crisis training packages **(REWODED)**
18. All hospitals will have training in place for their Paediatric and Emergency Department staff **(REWODED)**

### **Improving Service Quality**

19. We will work with Health Education England (HEE), Skills for Care (SfC), the L&SC ICS and other relevant agencies to inform 'workforce strategies' to deliver the right mix of skills, competencies and experience across the workforce **(REWODED)**
20. Key performance indicators, incorporating the Mental Health Standard Data Set (MHSDS), national transition CQUIN, and CAMHS outcome measures, will be monitored and challenged via the Performance Management Group and reported monthly to the Partnership Board with recommendations for action **(REWODED)**

## Our Priorities

For 2020/21, our 3 key priorities are to:

1. Redesign CAMHS in line with the THRIVE model (Objectives 8)
2. We will have mobilised the approved 'redesign of CAMHS' (Objective 9)
3. Through the Lead Provider Collaborative, we will define and deliver specialist inpatient and intensive home treatment in line with THRIVE (Objective 13)

## How will we deliver?

### THRIVE Model

Building on the *Future in Mind*<sup>7</sup> principles of promoting, protecting and improving our children and young people's mental health and wellbeing, the programme has adopted the THRIVE model to underpin the development and redesign of services. THRIVE wraps services around children and young people allowing access to the correct level of support at the time it is needed, using a multiagency model.

The model consists of four quadrants:

- Getting Advice
- Getting Help
- Getting More Help
- Getting Risk Support



When it comes to delivering services, all partners are committed to delivery being as close to children, young people and their families as possible with integrated neighbourhood care teams seen as the core delivery mechanism for the majority of community services.



## Governance

The CYPEWMH Transformation Programme sits within the All Age Mental Health portfolio of the Healthier Lancashire & South Cumbria (HL&SC) Integrated Care System (ICS) and as such reports into the HL&SC Programme Delivery Board and the ICS Executive Leadership Team. As part of this wider programme of work to deliver sustainability and transformation across the ICS, CYPEWMH works collaboratively with a number of other complimentary portfolios including Prevention & Population Health, Digital, and Workforce. A copy of the L&SC ICS Governance structure is included at Appendix 6.

Implementation of the plan is overseen by the Children and Young People's Emotional Wellbeing and Mental Health Partnership Board. As of 2019, the Board includes key partners from across both Lancashire and South Cumbria and is supported by the Professional Reference Group and the Commissioning & Finance Group. A copy of the CYPEWMH L&SC Governance structure is included at Appendix 1.

The Partnership Board has become an effective body working with a range of services and organisations including 4 Child & Adolescent Mental Health Services (CAMHS), 8 Clinical Commissioning Groups (CCGs), 4 Local Authorities, 7 NHS Trusts, hundreds of schools, a wide ranging third sector including voluntary and faith groups, primary care, community services, various children and young people's support services and groups, and, children, young people and their families.

### **The role of the Partnership Board is to:**

- a. set the strategic direction in support of system architecture, re-design and re-positioning of services to better meet local needs. This will be achieved through:
  - i. understanding needs at population level,
  - ii. assuring commissioning and system performance,
  - iii. holding partners to account
- b. lead in the design, delivery, implementation, review and evaluation of the Transformation Plan.
- c. be responsible for workstreams, implementation groups, task and finish groups etc. in line with the agreed governance structure.
- d. support positive channels of communication and engagement.
- e. make recommendations for commissioning arrangements including investment priorities and the use of resources.
- f. make recommendations for service improvements and new delivery models.
- g. make decisions on behalf of organisations in line with delegated decision-making authority.

**The Professional Reference Group** is a sub-group of the Board and operates as a support to the work of the Board. This is not a decision-making group. The group will:

- a. act as an advisory group as part of the programme's Governance arrangements
- b. provide visible professional leadership, direction and commitment to the programme
- c. facilitate communication and professional engagement pertaining to activity in the programme
- d. provide support and commitment to work stream leads facilitating the effective delivery of the Transformation Plan
- e. support programme risk mitigation processes where relevant
- f. report to the Partnership Board as required
- g. give professional and clinical opinion and recommendations on matters relating to service development and service improvement
- h. provide a mechanism for co-production and professional consultation

**The role of the Commissioning & Finance Group:**

The purpose of the Commissioning & Finance Group will be to work collaboratively with all relevant key stakeholders to guide the deliverables and overall objectives of the programme. This group is not a decision-making group. Recommendations from the group will be presented to the Children and Young People Emotional Wellbeing and Mental Health Partnership Board and the Directors of Finance Group for appropriate sign off.

Aims of the group are to:

- a. reduce the complexity of current commissioning arrangements through joint commissioning and service redesign, developing a system that is built around the needs of children, young people and their families
- b. have clear governance arrangements which hold each partner to account for their role in the system
- c. Increase transparency through the development of robust metrics on service outcomes
- d. ensure that our increased levels of investment will be used transparently, equitably and demonstrate value for money by working together

## **The role of the Performance Management Group:**

The purpose of the Performance Management Group will be to work collaboratively with all relevant key stakeholders to support the deliverables and overall objectives of the Improving Service Quality workstream.

We will:

- a. have clear governance arrangements which hold each partner to account for their role in the system
- b. increase transparency through the development of robust metrics on service outcomes
- c. ensure that our increased levels of investment will be used transparently, equitably and demonstrate value for money by working together
- d. report the Performance Dashboard on a monthly basis to the Partnership Board or as required

## **Programme Management**

A Programme Dashboard is in place and currently used to monitor monthly progress against the 20 objectives, and to manage risks and issues within the Transformation Plan with a summary report presented to the Board each month.

A Project Initiation Document (PID) incorporating project objectives, benefits and key milestones will be developed where appropriate and signed off through the programme governance. Equality Impact and Risk Assessments will also be completed in line with governance practice where appropriate.

## **Enablers**

There are four key teams/services supporting the programme, these are known as 'enablers':

- a. Engagement
- b. Communication
- c. Finance
- d. Business Intelligence

**Engagement** with children, young people and their families/carers has continued in order to obtain insight and intelligence to inform projects of the improvements and benefits but also the challenges and difficulties they have faced whilst using a service. Since 2016, we have effectively engaged with children, young people and our stakeholders to inform our decision making. After working with children and young people to co-design a visual

identity (branding) for the transformation programme (Healthy Young Minds), we are now working with children and young people, professionals, carers and family members in order to co-produce a website. We are working with these groups to better understand what they would like from the website, how it will work, what information it will contain, how information will be displayed, and the format of the information i.e. using text and/or videos. Our engagement with professionals has led to a phased development of their section of the Healthy Young Minds website. A Resources webpage was set up and nine 'Phase 1' topics were identified by Primary Mental Health Workers (PMHWs) as being the most useful for education professionals. The content for the 9 topics was co-produced over summer 2019 by PMHWs and the communications and engagement team, including testing with a wider group of professionals and launched onto the live website in September 2019. It includes a library of information relating to the nine topics: overview of topic, national guidance, useful videos/apps/books, e-resources and the training that is available in each area of Lancashire and South Cumbria to professionals. We are engaging with schools and colleges across Lancashire and South Cumbria to gain feedback and tailor these sections if needed. Phase 2 will be scoped during October – November 2019.

2019 has seen greater development of the children and young people's area of the website, shaped by the views and insights obtained from children and young people, professionals, carers and family members. Working with children and young people we have created a short video tour of two CAMHS offices, and we will be working with groups of young people from other locations to create more video tours as we move forward. This filming is a direct result of the feedback and insights from our active engagement with children, young people, carers and family members. People sometimes felt anxious about attending an appointment especially if was a first appointment in a CAMHS venue and didn't know what to expect. People can watch the video prior to attending the appointment to help them prepare for the appointment therefore helping to ease any anxiety.

During 2019, we have held seven sessions with children and young people aged 9-19 to find out what they would like to see on a website and social media. A total of 72 children and young people engaged with us through these sessions and their feedback has already started to shape the content and navigation of the Healthy Young Minds website and social media channels. We have created a YouTube channel with playlists on a number of topics that children and young people told us were most relevant to them, and these are linked to and from the website. We have continued to engage through our Twitter and Facebook channels too and will be launching a toolkit containing resources to empower individuals or groups to create content and enable conversations about mental health, as well as signposting to self-help resources.

We have continued to adopt, champion and grow the national anti-stigma 'Time to Change' campaign ensuring we actively communicate anti-stigma messages via a range of channels.

Extensive stakeholder development has continued. This year we have carried out stakeholder mapping in order to identify any potential gaps so as to ensure we have a good representation from our local population.

Following on from the intensive engagement carried out by the Care Partnership and Healthwatch we established four children and young people's panels in order to evaluate the proposal for the redesign. We worked with children and young people to understand what they wanted to know about the redesign process and the changes this would bring. We held briefing sessions with each of the panels in order to establish what they wanted to evaluate. We also agreed how the Care Partnership would carry out their presentations and checked out the most appropriate format so as to make it as user friendly as possible. This feedback was shared with the Care Partnership and directly influenced the style and delivery of their presentations. Furthermore, we engaged with carers, parents, education professional, third sector representatives and other professionals by hosting evaluation panels for them as well. Following on from the evaluation panels the information shared was fed in directly into the decision-making process. We will also share the next steps with the panels once these have been formally agreed.

**Communication** has continued with our stakeholders, and we will preserve and strengthen stakeholder partnerships, working with them to inform decisions and shape change as we move forward. An example is that stakeholders are invited to be part of various workstreams within the programme so that we can capture their valuable expertise and insight.

The large-scale change that is being implemented, facilitated through the Transformation Plan, requires large scale communication between organisations, staff, the public, children, young people and their carers. There are systems in place to maintain the governance of the programme, which promotes communication between the organisations in the Governance Structure (Appendix 1). This takes the form of presentations to the relevant Boards and a bi-monthly bulletin. Continual work is being carried out to grow and strengthen communication channels and networks.

**Finance** is governed by the Commissioning & Finance Group who have put systems in place to make recommendations and monitor spend. This work is supported by a Chief Finance Officer from one of the member CCGs.

**Business intelligence** - the Programme has commissioned and works closely with colleagues within the Midlands & Lancashire CSU Business Intelligence Team. The team collates and analyses data with specific regard to our Key Performance Indicators, working closely with task groups to deliver accurate and up to date information/data as required. In addition, the team supports the quality assurance and monitoring responsibility of the Programme through the presentation of monthly reports to the Performance Management Group and the Partnership Board.

## Interdependencies

The CYPEWMH Programme is one of a number of key programmes within the Lancashire & South Cumbria Integrated Care System and as such there is value in our being cognisant of their work and vice versa. Consideration of how we can engage in, influence and contribute to their decision making, planning and delivery, on behalf of children, young people and their families is a central to our planning.

The Programme has identified six key interdependencies:

- Adult Mental Health including the Peri-natal programme
- Learning Disability & Autism workstream
- SEND
- Workforce Development
- Commissioning Development
- Prevention and Population Health and the work of the All Age Self Harm and Suicide Prevention programme

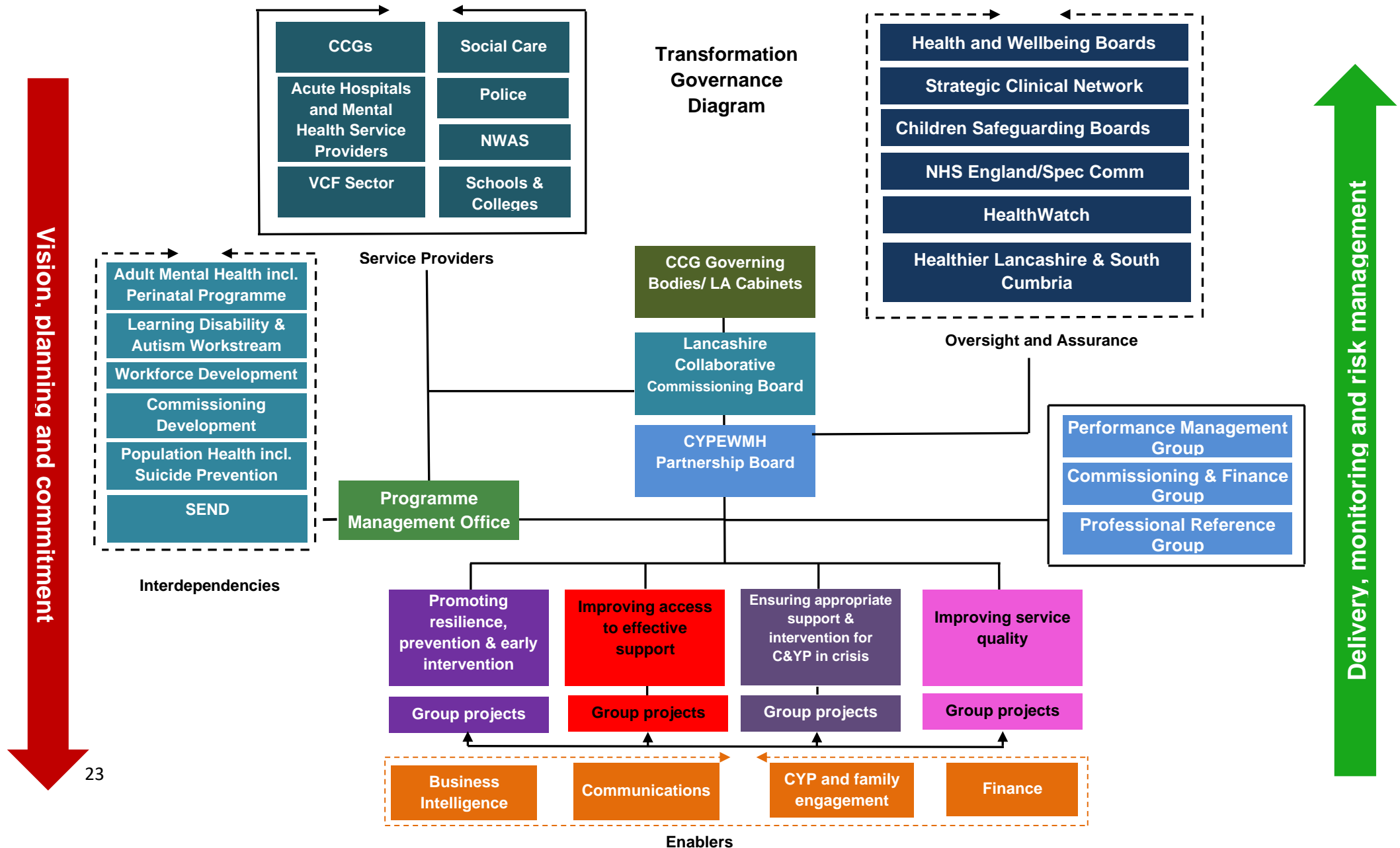
## Partners

We work collaboratively with a wide range of partners and stakeholders, many of whom have been identified within our Governance Structure below (Appendix 1).


It is important to us to ensure that the communities of Lancashire & South Cumbria are equitably represented through our partners. To support this, we will continue to explore and utilise creative ways to support engagement and participation through the use of digital technology to minimise the distance people have to travel, especially given our large geographical footprint.

We regularly check the membership and accessibility of our groups and seek ways to remain engaged with all of our key partners and stakeholders especially representatives from our four Local Authorities and Public Health services; the Voluntary, Community & Faith sector; schools, colleges and further education providers; and our Health and Social Care providers.

## Appendix 1 - Lancashire & South Cumbria CYPEWMH Governance Structure 2020



## Appendix 2 - Summary of National Policy, Guidance & Reports

Document Title	Document Link
Children and young people's mental health – policy, services, funding and education House of Commons Library Briefing Paper: 07196 11 July 2019	<a href="https://researchbriefings.files.parliament.uk/documents/CBP-7196/CBP-7196.pdf">https://researchbriefings.files.parliament.uk/documents/CBP-7196/CBP-7196.pdf</a>
NHS Mental Health Implementation Plan 2019/20 – 2023/24 July 2019	<a href="https://www.longtermplan.nhs.uk/wp-content/uploads/2019/07/nhs-mental-health-implementation-plan-2019-20-2023-24.pdf">https://www.longtermplan.nhs.uk/wp-content/uploads/2019/07/nhs-mental-health-implementation-plan-2019-20-2023-24.pdf</a>
NHS Long Term Plan 2019	<a href="https://www.england.nhs.uk/long-term-plan/">NHS Long Term Plan</a> <a href="https://www.england.nhs.uk/long-term-plan/">https://www.england.nhs.uk/long-term-plan/</a>
DH. (2019), The handbook to the NHS Constitution	<a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770675/The_Handbook_to_the_NHS_Constitution_-_2019.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770675/The Handbook to the NHS Constitution - 2019.pdf</a>
Meeting the needs of young adults within models of mental health care NCCMH 2019	 NCCMH Report 2019
DH, HEE (2018) Government response to the consultation on 'Transforming children and young people's mental health provision: a green paper' and next steps	<a href="https://www.gov.uk/government/consultations/transforming-children-and-young-peoples-mental-health-provision-a-green-paper">https://www.gov.uk/government/consultations/transforming-children-and-young-peoples-mental-health-provision-a-green-paper</a>
Health Education England (2018) Self-harm and suicide prevention competence framework, for children and young people	<a href="https://www.ucl.ac.uk/pals/sites/pals/files/self-harm_and_suicide_prevention_competence_framework_-_children_and_young_8th_oct_18.pdf">https://www.ucl.ac.uk/pals/sites/pals/files/self-harm_and_suicide_prevention_competence_framework_-_children_and_young_8th_oct_18.pdf</a>



The Children's Society, (2018) The Good Childhood Report 2018	<a href="https://www.childrenssociety.org.uk/sites/default/files/the_good_childhood_report_full_2018.pdf">https://www.childrenssociety.org.uk/sites/default/files/the_good_childhood_report_full_2018.pdf</a>
DHSC HEE (2018) Government response to the consultation on <i>Transforming Children and Young People's Mental Health Provision</i> : a green paper and next steps	<a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/728892/government-response-to-consultation-on-transforming-children-and-young-peoples-mental-health.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/728892/government-response-to-consultation-on-transforming-children-and-young-peoples-mental-health.pdf</a>
Are We Listening? – CQC 2018	<a href="https://www.cqc.org.uk/sites/default/files/20180308b_arewelisting_report.pdf">https://www.cqc.org.uk/sites/default/files/20180308b_arewelisting_report.pdf</a>
Stepping Forward to 2020/21: Mental Health Workforce Plan for England July 2017	<a href="https://www.hee.nhs.uk/our-work/person-centred-care/mental-health/mental-health-workforce-plan">https://www.hee.nhs.uk/our-work/person-centred-care/mental-health/mental-health-workforce-plan</a>
Next Steps on the NHS Five Year Forward View March 2017	<a href="https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf">https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf</a>
Government announcement (Jan 2017)	<a href="https://mhfaengland.org/mhfa-centre/news/2017-01-09-government-announces-plans-for-youth-mental-health/">https://mhfaengland.org/mhfa-centre/news/2017-01-09-government-announces-plans-for-youth-mental-health/</a>
Children & Social Work Act (2017)	<a href="http://www.legislation.gov.uk/ukpga/2017/16/contents/enacted">http://www.legislation.gov.uk/ukpga/2017/16/contents/enacted</a>
DH (2015) Future in Mind, promoting, protecting and improving our children and young people's mental health and wellbeing	<a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf</a>
Access and Waiting Time Standard for Children and Young People with an Eating Disorder Commissioning Guide July 2015	<a href="https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-guid.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/07/cyp-eating-disorders-access-waiting-time-standard-comm-guid.pdf</a>

From the Pond into the Sea - Children's transition to adult health services (2014)	<a href="https://www.cqc.org.uk/sites/default/files/CQC%20Transition%20Report%20Summary%20lores.pdf">https://www.cqc.org.uk/sites/default/files/CQC Transition%20Report_Summary_lores.pdf</a>
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## Appendix 3 - Finance

There is a national expectation that investment in children's mental health is expected to continue to rise over the course of the five-year Transformation Programme, up to 2020/21 as outlined in Table 1 below. In addition, the NHS Long Term Plan (2019) makes a renewed commitment that mental health services will grow faster than the overall NHS budget, creating a new ringfenced local investment fund worth at least £2.3 billion a year by 2023/24. This will enable further service expansion and faster access to community and crisis mental health services for both adults and particularly children and young people.

The investment is added into CCG baselines with future investment being linked to the achievement of targets aimed at increasing access to support for those with a diagnosable mental health need.

In support of this Transformation Plan refresh, financial commitments and allocations are collated into an annual Business Plan for Lancashire & South Cumbria. The Business Plan will consider the transformation plan objectives related to year 5 of the transformation programme and the intended investment of the transformation resources to support their implementation. The Business Plan for 2020/21 is due to be agreed April 2020.

**Table 1 – Total Transformation Funding by CCG**

CCG Name	2016/17	2017/18	2018/19	2019/20	2020/21
<b>Blackburn with Darwen CCG</b>	£367,510	£432,277	£524,658	£586,151	£647,531
<b>Blackpool CCG</b>	£423,027	£497,579	£603,915	£674,698	£745,350
<b>Chorley and South Ribble CCG</b>	£392,084	£461,182	£559,739	£625,344	£690,827
<b>East Lancashire CCG</b>	£889,325	£1,046,053	£1,269,603	£1,418,359	£1,566,595
<b>Fylde and Wyre CCG</b>	£360,870	£424,467	£515,179	£575,561	£635,831
<b>Greater Preston CCG</b>	£445,867	£524,444	£636,522	£711,126	£785,593
<b>Morecambe Bay CCG (Lancashire North)</b>	£353,363	£415,637	£504,462	£563,588	£622,605
<b>Morecambe Bay CCG (South Cumbria)</b>				£737,080	£814,265
<b>West Lancashire CCG</b>	£247,296	£290,877	£353,040	£394,418	£435,720
<b>Total Lancashire</b>	<b>£3,479,341</b>	<b>£4,092,516</b>	<b>£4,967,120</b>	<b>£6,286,324</b>	<b>£6,944,317</b>

## Increased Investment from 2014/15 – 2019/20

**Table 2 - shows the investment by CCG for 2018/19 compared to the baseline position in 2014/15. Figures for 2019/20 have yet to be agreed.**

	0-18 pop (10%)	2014/15 Baseline	£ per prevalent child	2018/19	£ per prevalent child
<b>Blackburn With Darwen CCG</b>	4463	£1,286,230	£288.20	£1,833,175	£410.75
<b>Blackpool CCG</b>	3413	£ 2,188,255	£641.15	£2,526,072	£740.13
<b>Chorley &amp; South Ribble CCG</b>	3851	£1,287,350	£334.29	£1,823,739	£473.58
<b>East Lancashire CCG</b>	10755	£3,652,596	£339.62	£4,833,839	£449.45
<b>Fylde &amp; Wyre CCG</b>	2807	£987,070	£351.65	£1,593,344	£567.63
<b>Greater Preston CCG</b>	4635	£1,206,841	£260.38	£1,695,522	£365.81
<b>Morecambe Bay CCG (Lancashire North)</b>	3095	£662,366	£214.01	£1,129,621	£364.98
<b>West Lancashire CCG</b>	2284	£862,548	£377.65	£1,220,980	£534.58
<b>Lancashire Total</b>	<b>35,303</b>	<b>£12,133,256</b>	<b>£343.69</b>	<b>£16,656,292</b>	<b>£471.81</b>

2017/18 marked a shift in emphasis for the Transformation Plan with a firm commitment to focus on more aligned approaches to commissioning, using a commissioning model that enabled commissioning decisions at a Pan-Lancashire scale (rather than at individual CCG level as in 2016/17). This shift enabled consistent improvements to be made in Children and Young People's services (especially around shared standards, access arrangements, assured and evidence-based intervention and treatment pathways and outcomes). This collaborative approach was supported by the decision to align 85% of the transformation funding across Lancashire rather than the 15% aligned in 2016/17.

It should also be noted that in the same year a significant proportion, 27% (£1.1m of £4.3m of transformation funding) needed to be allocated to plug the gap left by the withdrawal of funding by Lancashire County Council (LCC) from the CAMHS services. This is now a recurrent position, and the decision has been taken to continue to support these services to preserve current levels of access and to safeguard the access targets. The outcome of the alternative investment by LCC into emotional health and well-being support is being monitored by the Partnership Board.

The Transformation Fund financial allocation to L&SC CCGs (total) in 2019/20 was £6.3 million (exclusive of the separate allocation for Eating Disorders):

- 15% of the budget is allocated to local CCG spend for innovation, pilots or local support costs
- 85% of the budget is allocated to Lancashire & South Cumbria commissioning, against the agreed and shared priorities in the refreshed Transformation Plan

**Table 3 – Allocation of Transformation Funding 2019/20**

CCG Name	2019/20 Allocation	15% Local spend	85% Aligned Spend
NHS Blackburn with Darwen CCG	£586,151	£87,923	£498,229
NHS Blackpool CCG	£674,698	£101,205	£573,493
NHS Chorley and South Ribble CCG	£625,344	£93,802	£531,542
NHS East Lancashire CCG	£1,418,358	£212,754	£1,205,604
NHS Fylde and Wyre CCG	£629,561	£94,434	£535,127
NHS Greater Preston CCG	£707,126	£106,069	£601,057
NHS Morecambe Bay CCG (Lancashire North)	£513,588	£77,038	£436,550
NHS Morecambe Bay CCG (South Cumbria)	£737,080	£110,562	£626,518
NHS West Lancashire CCG	£394,419	£59,163	£335,256
<b>Total Lancashire</b>	<b>£6,286,326</b>	<b>£942,949</b>	<b>£5,343,376</b>

**Table 4 - Allocated Spend for 2019/20, Aligned Transformation Funding (85%)**

Theme	Objective	Grand Total
Promoting Resilience, prevention and Early Intervention	Complimentary offer of support to wrap around clinical services	£282,526
	Youth Mental Health First Aid England	£10,000
	Resilience (Youth Sport Trust)	£85,000
Improving Access to Effective Support	Continue to fund the 7-day CAMHS response in place across Lancashire & South Cumbria	£883,701
	CAMHS Crisis / Home Treatment	£237,669

Ensuring appropriate support and intervention for CYP in Crisis	AMBIT	£2,655
	Psychiatry input to 7 days CAMHS response	£60,042
	Purchase additional capacity from LCFT (0-19 CAMHS replacement of LCC Disinvestment)	£1,342,687
	Additional capacity in CPFT & My Time	£271,269
	As part of the ASD/ADHD pathway work we will develop our pre and post diagnosis support offer	£327,829
	LGBT support	£20,000
	During 2017/18 we will continue to work on the development of a minimum service offer 'pathway for vulnerable groups': ASD, ADHD, LD, CSE	£390,788
	Behavioural Support Programme	£194,966
	IAPT trainees - cohort 3	£56,097
	IAPT trainees - cohort 4	£50,000
	Continue to fund infant mental health / perinatal pathway pilot schemes where evidence suggests	£83,000
	Kooth	£126,759
General	Primary Mental Health Workers/Psychological Wellbeing Practitioners	£761,721
	Transformation Coordination	£155,564
Other	Various Other	£1,103
<b>Grand Total</b>	<b>2019/20 - 85% Planned Spend</b>	<b>£5,343,376</b>

The remaining 15% in 2019/20 would stay with the CCGs to fund local coordination and innovation.

For 2020/21, the Transformation Plan once again describes a number of shared priorities with continued investment from our CCG partners, from across the ICS Footprint, including South Cumbria. In addition, there is agreement to continue to

support CAMHS services with the equivalent investment of that withdrawn by LCC in 2017/18. This will preserve current access.

Clarity on the full scope of the investment and its allocation will be agreed early in 2020 for the 2020/21 financial year and in support of this Transformation Plan.

### **Specific Investment for children and young people with an Eating Disorder requiring a Community Intervention**

In line with the Five-Year Forward View for Mental Health the eight CCGs have, in addition to the above investment, commissioned an All Age Community Eating Disorder Service pan Lancashire. For South Cumbria, investment has yet to be agreed due to changes in service provider within the financial year and the agreement to implement the All Age Eating Disorder model.

**Table 5 – Allocated spend for 2019/20 for Pan-Lancashire only**

<b>CCG Name</b>	<b>2019/20</b>
Blackburn With Darwen CCG	£94,796
Blackpool CCG	£106,867
Chorley & South Ribble CCG	£98,793
East Lancashire CCG	£214,568
Fylde & Wyre CCG	£89,889
Greater Preston CCG	£113,187
Morecambe Bay CCG	£85,021
West Lancashire CCG	£62,869
Lancashire Total	£865,990

## Appendix 4 - Performance

To be confirmed



## Appendix 5 - Consultation and feedback

### Narrative from C&E team regarding the survey/engagement process

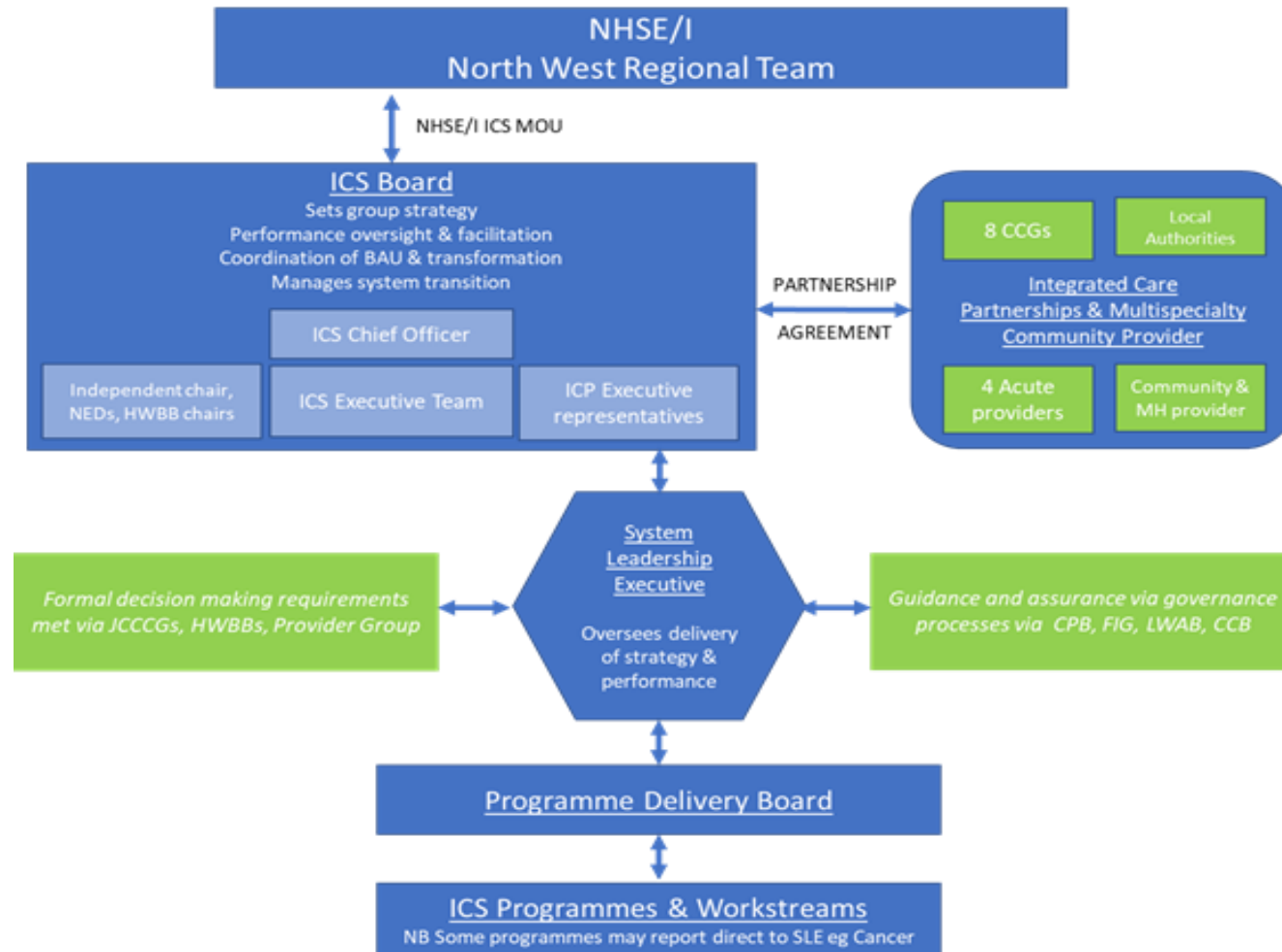
We thank all of those who took the time to reply to the survey and your comments have been responded to within the next section – You Said, We Did.

<b>You Said</b>  Do you agree with our objectives for the next 12 months?	<b>We Did</b>

<b>You Said</b>  Do you agree with our priorities for 2020/21?	<b>We Did</b>

<b>You Said</b>  Other Comments	<b>We Did</b>

## Appendix 6 - Lancashire & South Cumbria Integrated Care System Governance Structure 2020



## Appendix 7 – Milestones 2020/21 – 2023/24

