

<b>Report to:</b>	<b>HEALTH SCRUTINY COMMITTEE</b>
<b>Relevant Officers:</b>	Helen Lammond-Smith, Head of Commissioning, Blackpool Clinical Commissioning Group Claire Grant, Divisional Commissioning Manager, Blackpool Council and Blackpool Clinical Commissioning Group
<b>Date of Meeting:</b>	26 April 2017

## TRANSFORMATIONAL PLANNING PROGRAMME

### 1.0 Purpose of the report:

- 1.1 To provide a summary of the Transformational Planning Programme across Lancashire for Children and Young People's Emotional Health and Wellbeing and progress to date in Blackpool, challenges, opportunities, next steps and involvement of children and young people.

### 2.0 Recommendation(s):

- 2.1 To review local plans in respect of meeting the requirements of the Transformational Planning Programme developed by the Lancashire Transformation Board; and to provide ongoing support and challenge to enable continued engagement in respect of Transformation Planning.

### 3.0 Reasons for recommendation(s):

- 3.1 Local Authority Partners, Health and Social Care have a key role to play in ensuring that the commitment to transform services for children and young people to meet their emotional health and well-being needs are achieved. Health Scrutiny needs to secure assurance that transformation meets the needs of this population group, provides value for money and is sustainable.
- 3.2 Local plans need to meet the requirements of Transformational Planning Programme developed by the Lancashire Transformation Board - a strategically led partnership of the eight Clinical Commissioning Groups (CCGs) and the three Local Authorities (and Health and Wellbeing Boards) for the Lancashire area.
- 3.3a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No
- 3.3b Is the recommendation in accordance with the Council's approved budget? N/A

3.4 Other alternative options to be considered: None.

#### **4.0 Council Priority:**

4.1 The relevant Council Priority “Communities: Creating stronger communities and increasing resilience”.

#### **5.0 Background Information**

5.1 Following the release of [Future in Mind](#) (see ‘policy drivers’ section below for more information on this) the following Transformational and Systemic work is currently underway across Blackpool as part of a wider Lancashire programme of work with each Clinical Commissioning Group being the lead partner agency around Children and Young People’s Emotional Health and Wellbeing.

5.2 Clinical Commissioning Groups through the Lancashire partnership submitted Transformational Plans to NHS England in October 2015 clearly articulating the case for change and evidencing how this will be achieved with all partners over the next five years. The case for change originates from the Department of Health and the Department for Education following Government work in this area (see ‘policy drivers’ section below for more information on this).

5.3 Each Clinical Commissioning Group locality area through the wider Lancashire partnership co-ordinates the effort across all agencies in relation to how Children and Young People’s Emotional Health and Wellbeing Services are delivered. There is an expectation that Transformational and systemic change occurs. Delivering this means making some real changes across the whole system. It means the NHS, all services within local authority (public health, social care, schools and youth justice sectors) must work together to ensure the following priorities are realised:

- Promoting resilience, prevention and early intervention - Place the emphasis on building resilience, promoting good mental health, prevention and early intervention.
- Improving access to effective support – A system without tiers - Simplify structures and improve access: by dismantling artificial barriers between services by making sure that those bodies that plan and pay for services work together, and ensuring that children and young people have easy access to the right support from the right service.
- Care for the most vulnerable - Deliver a clear joined up approach: linking services so care pathways are easier to navigate for all children and young people, including those who are most vulnerable, so people do not fall between gaps.
- Accountability and transparency - Harness the power of information: to drive improvements in the delivery of care, and standards of performance, and

ensure we have a much better understanding of how to get the best outcomes for children, young people and families/carers and value from our investment.

- Developing the workforce - Sustain a culture of continuous evidence-based service improvement delivered by a workforce with the right mix of skills, competencies and experience.
- Make the right investments: to be clear about how resources are being used in each area, what is being spent, and to equip all those who plan and pay for services for their local population with the evidence they need to make good investment decisions in partnerships with children and young people, their families and professionals. Such an approach will also enable better judgements to be made about the overall adequacy of investment.

5.4 Due to considerable investment in Blackpool from the Big Lottery Fund (Betterstart – Headstart – Fulfilling Lives), Blackpool Council, Blackpool Clinical Commissioning Group, NHS England and Lancashire MIND around emotional well-being and mental health, the Transformational Planning Programme is timely in that it provides the Strategic Framework to ensure that this work is linked together to ensure a coherent system. This is a must to ensure that complex commissioning arrangements and funding of new programmes are seamlessly linked and creates system change that is effective.

5.5 A governance structure that includes all key partners has been implemented in order to take this work forward over the next five years. The structure reports to Health and Wellbeing Board, who are the accountable body. It will also link with the Strategic Commissioning Group; Betterstart Executive; Headstart Executive; Clinical Commissioning Group Executive Board; Clinical Leads Group; Commissioners’ Network Meeting.

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### **Policy drivers**

5.6 The Policy Framework that underpins this transformation and systemic change originates from the following and is mandatory.

5.7 In 2014 the Government asked for a Taskforce to understand what needs to be done to improve the emotional health and wellbeing of children and young people. Norman Lamb MP took leadership of the Taskforce to review the different aspects of care and services.

5.8 The Taskforce has resulted in a suite of seven documents being published with recommendations for systemic changes. The leading document is entitled [‘Future in Mind: Promoting, protecting and improving our children and young people’s mental health and wellbeing’](#). This has been collectively produced by the Department of Health (DoH), Department for Education (DfE) and NHS England.

5.9 Within the documents and also as part of additional press releases, the Government increased the funding dedicated to Children's Mental Health Services. There is a recommendation for commitment by the Government of £250 million annual investment with outcomes of 110,000 additional children and young people being treated within mental health services by 2020.

5.10 All Clinical Commissioning Group areas have produced Transformational Plans to provide the framework for systemic change and transformation.

5.11 The over-arching strategy, that all of this Transformational work links to, is the Government paper – ['No Health Without Mental Health'](#).

5.12 **Access Targets**

- A requirement of the Transformation Plan is to achieve an increase of children and young people accessing NHS funded Community Mental Health Services.
- Children and Young People access to mental health services trajectories (NHS England) – set at 28%; Blackpool currently achieving 33.6% (Quarter one and two, 2016-2017).
- For 2017-2018 we will be required to demonstrate that 30% of children and young people with a diagnosable mental health condition are accessing support.
- Based on current understanding, the numbers required to achieve the target for 2017-2018 may be challenging.

5.13 **Achievements to date**

- Perinatal mental health bid submitted – led by Blackpool
- Health based 'place of safety' bid submitted – including a 'place of calm' for the Child and Adolescent Self Harm Emergency Response Team (CASHER) Service
- By 1 April 2017 new referrals will be taken for the co-designed evidence based dedicated community eating disorder service for our children and young people
- Robust action plan in place – co-produced with Better Start, Head Start and Emotional Health and Wellbeing services (CASHER, Connect now known as YouTherapy and Child and Adolescent Mental Health Services (CAMHS))
- Duty hours (for emergency paediatric psychosocial assessments) extended until 4:00pm – CASHER on duty at 5:00pm
- CAMHS have extended their opening hours until 7pm twice a week; YouTherapy are now opening and offering appointments 3 evenings a week

with a twilight drop in starting in January 2017

- CAMHS 'Choice' appointments will be offered in both North and South Shore Medical Centres from January 2017
- Looked After Children psychologist recruited
- YouTherapy Looked After Children post established
- YouTherapy are now offering counselling support to the children's diabetic clinic
- Two CAMHS Transformation Champions have been identified within our CAMHS service and have completed two days training funded by Health Education England
- Two Primary Mental Health Workers (PMHWs) in post (September 2016) – named contacts for all schools
- CAMHS patient experience survey completed
- Robust plans in place to reduce waiting times for CAMHS/Child Psychology by 15% by end of Q4 2016-2017.
- Engagement events are being held on a regular basis with 'Breaking the Cycle' (anti bullying group)
- CASHER self-harm support follow up will commence in Spring 2017

#### 5.14 **Challenges to Date**

- Aligning the work-streams and finances allocated to these across the Lancashire footprint to ensure that Clinical Commissioning Group locality areas retain their autonomy and that the diverse population needs are met. These challenges have been overcome.
- Working with, and around, the different systems and services in place across the Lancashire footprint i.e. there are different three providers of CAMHS services across Lancashire.
- Ensuring Blackpool retains its identity, and the transformational planning process aligns with Betterstart, Headstart and Fulfilling Lives, which is also a strength.
- Developing the Blackpool workforce, creating a culture for change and implementing systemic change across both the Blackpool and Lancashire workforce that embraces local programmes, but is equitable across the footprint and shares good practice principles.

#### 5.15 **Local Governance**

A Blackpool Transformation Board has been established to oversee implementation of Blackpool's plan and to ensure continued alignment with the Lancashire plan. The

group is chaired by the Clinical Commissioning Group's Head of Commissioning with senior representation from Council Commissioning, health providers, social care, police, education, Headstart and Betterstart. There are various sub-groups and other meetings that feed into the Board (see Appendix 4(a)).

5.16 Does the information submitted include any exempt information? No

**List of Appendices:**

Appendix 4(a) – Blackpool Transformation Programme Governance Structure

**6.0 Legal considerations:**

6.1 To meet the requirements of Transformational Planning Programme, the Council and Clinical Commissioning Group must work within the legal requirements of the Mental Health Act 1983 and the Mental Capacity Act 2005. Individuals in hospital settings are subject to restrictions through the Deprivation of Liberties Safeguards (DOLS) or Court of Protection. Patients can therefore not be moved without the appropriate applications being made.

**7.0 Human Resources considerations:**

7.1 There is workforce development, systemic and cultural change to be considered across different organisations and other strategic programmes in order for the programme to be successful.

**8.0 Equalities considerations:**

8.1 According to CHI Mat the National Child and Maternal Health Intelligence Network (CHI Mat) the health and wellbeing of children and young people in Blackpool is generally worse than the English average.

**9.0 Financial considerations:**

9.1 There is additional finance directed through NHS England, received through the locality Clinical Commissioning Groups to undertake system transformation over the next five years. Blackpool's proportion is approximately half a million a year for five years (£2.5m in total). The finance is to be used to support existing budgets to facilitate transformational change, not to replace existing provision or create stand alone new provision. It must transform the system.

**10.0 Risk management considerations:**

10.1 Aligning the work-streams and finances allocated to these across the Lancashire

footprint to ensure that Clinical Commissioning Group locality areas retain their autonomy and that the diverse population needs are met.

**11.0 Ethical considerations:**

11.1 N/A

**12.0 Internal/ External Consultation undertaken:**

**12.1 Involvement of Parents, Children and Young People (CYP)**

Children and Young People and their parents have been consulted and engaged regarding their views relating to the emotional health and well-being system through the following means:

- January 2016: Feeding in consultation and engagement that has taken place with Children and Young People and parents through the Betterstart and Headstart Programme
  - February 2016: Survey Monkey that was circulated to parents, children and young people who access any commissioned health service (including CAMHS) and some council commissioned services.
  - February 2016: A consultation and engagement day that was held at Blackpool Zoo targeting parents, children and young people who access any commissioned health service directed at Children and Young People (including CAMHS) and some council commissioned services.
  - February 2016: Telephone interviews targeting all those parents, children and young people who access any commissioned health service directed at Children and Young People (including CAMHS) and some council commissioned services, who were not able to attend the zoo consultation event but wished to participate.
  - February 2016: Analysis of results of 'Friends and Families Test' issued by Blackpool Teaching Hospitals' Childrens Services.
  - April 2016: A pan Lancashire event that was specifically aimed at consulting with Children and Young People to feed into the Pan Lancashire Transformational Planning process.
- August to September 2016: Stand-alone placing of electronic devices in Blackpool CAMHS and Psychology waiting area so that parents and children could provide feedback. Also separate Staff Supported placing of electronic devices in Blackpool CAMHS and Psychology waiting area so that parents and children could again provide feedback.

- November 2016: Consultation and engagement through questionnaires over several weeks supported by staff with groups of Children and Young People in UR Potential (third sector group supporting young people) and CAMHS around crisis pathways.

**13.0 Background papers:**

13.1 None.