

	March 2016	March 2107	March 2020
<p><i>Objective 1:</i> To build resilient communities in all settings including home, school and wider community which promote, improve and maintain the emotional health, mental health and wellbeing of children, young people and their families, to encourage them to help themselves.</p>	<ul style="list-style-type: none"> • Develop resilience training programmes in order to roll out to all people working and/or engaging with children and young people across the following • Birth (including pregnancy) to 25 years old • Schools, colleges and universities • Universal & Community settings including maternity, early years, primary care, youth work • Including all staff from football coaches to health visitors to teachers to school nurses • Mechanism for delivering the training to be developed • Identification of all people working with children and young people who will receive resilience training. • We will engage children and young people in the development of a resilience campaign targeted at children and young people themselves. • Learning from the universal resilience based programme being piloted in Blackpool • Explore and identify opportunities for engaging family members in the resilience movement promoting family assets • Identify existing points where data is already collected about children's emotional health and wellbeing. • Collect samples of this data and use to develop a consistent approach going forward. • Explore the possibilities of establishing a provider forum including third sector, health and social care of those working around children and young people's emotional health and wellbeing. 	<ul style="list-style-type: none"> • Use the evidence base from Headstart in Blackpool in order to target schools in Lancashire to deliver universal resilience programmes. • Develop the training for the family • Roll out of training to the highest priority groups • Launch the resilience campaign for children and young people Pan-Lancashire • Use identified data to inform a baseline of all children and young people's emotional health and wellbeing in Lancashire 	<ul style="list-style-type: none"> • Ensure that children, young people and their families are able to deal with their problems • Ensure that schools and the wider community are able to support each other and children and young people to become resilient.
<p><i>Objective 2:</i> Improve access to evidenced-based interventions which support attachment between parent and child, to build resilience, improve behaviour and avoid</p>	<ul style="list-style-type: none"> • Identify which evidence-based interventions which support attachment between parent and child are appropriate and meet the need relevant to each CCG area • Learn from existing programmes of work 	<ul style="list-style-type: none"> • Ensure commissioned services utilise evidence-based interventions identified which support parenting. <p>Align the Lancashire and Blackburn parenting strategies and BetterStart Blackpool to develop</p>	<ul style="list-style-type: none"> • Implement the pan-Lancashire parenting strategy • Ensure service delivery is aligned to pan-Lancashire parenting strategy

early trauma	improving life chances of children aged 0-3 years old across Lancashire including BetterStart Blackpool and Family Nurse Partnership	and embed a comprehensive parenting approach Lancashire	
<i>Objective 3:</i> Improve public awareness and understanding of children and young people's mental health and wellbeing as well as perinatal mental health and work to reduce stigma and discrimination.	<ul style="list-style-type: none"> Engage children and young people to develop pan Lancashire awareness raising campaign, with an emphasis on addressing stigma, aimed at the entire population of Lancashire Develop and implement a communication strategy including the development of a single brand for emotional health and wellbeing services across Lancashire in partnership with children and young people 	<ul style="list-style-type: none"> Implement the Lancashire awareness raising campaign, with an emphasis on addressing stigma, aimed at the entire population of Lancashire 	
<i>Objective 4:</i> Improve the availability of information regarding self-help and support that is available and how to access it.	<ul style="list-style-type: none"> Scope mechanisms of self-help including peer support that is available for children and young people in relation to emotional health and wellbeing Scope mechanisms of self-help including peer support that is available for parents/carers in relation to their resilience and emotional health and wellbeing Promote the existing telephone helpline's throughout Lancashire 	<ul style="list-style-type: none"> Utilise the learning of the Wellbeing Challenge (peer support programme) and develop a model to roll out across Lancashire Develop pathways which ensure that parents/carers are equipped, feel confident in their ability and are supported to nurture the good emotional health and wellbeing of their children Ensure all commissioners and providers of universal services, including primary care, deliver mental health promotion and prevention activities on a whole system basis. 	
<i>Objective 5:</i> Improve early identification and timely intervention for children and young people at risk of and/or experiencing poor mental health	<ul style="list-style-type: none"> Ensure that clear policies procedures and guidance are in place for the CYP workforce which improve early identification Develop guidance for schools to ensure that the provision of school counselling is consistent across Lancashire. Develop a pan-Lancashire system process for providing named CAMHs contacts for schools. Building on the learning from TAHMS develop the role of primary mental health workers across Lancashire Explore methodology of routine enquiry into adverse childhood experiences 	<ul style="list-style-type: none"> Begin implementation of the methodology of routine enquiry into adverse childhood experiences Promote the pan-Lancashire pathway to all children and young people's settings, primary/secondary care networks and ensure it is embedded in all services in contact with children and young people Monitor the effectiveness of the pathway. 	

	<ul style="list-style-type: none"> • Ensure a consistent continuous assessment process across pan-Lancashire including appropriate use of lead professional 		
<p><i>Objective 6:</i> Ensure ease of access to support based on the needs of children, young people and their families, through coordinated care in the most appropriate place</p>	<ul style="list-style-type: none"> • Develop a Lancashire system process for providing named CAMHs contacts for all CYP settings working with young people at risk of experiencing poor mental health • Develop training across workforce to ensure early identification and low level brief interventions for all people working and/or engaging with children and young people across the following <ul style="list-style-type: none"> ○ Birth (including pregnancy) to 25 years old ○ Schools, colleges and universities ○ Universal & Community settings including maternity, early years settings including children’s centres, primary care, youth work ○ Including all staff from football coaches to health visitors to teachers to school nurses 	<ul style="list-style-type: none"> • Roll out of training to the highest priority groups • Monitor the effectiveness of the pathway. 	
<p><i>Objective 7:</i> Improve early identification and timely intervention for pregnant women and new parents at risk of and or experiencing poor mental health</p>	<ul style="list-style-type: none"> • In partnership with the Strategic Clinical Network, benchmark the current peri-natal mental health services provision across Lancashire. • Develop commissioning intentions for peri-natal mental health services in line with the forthcoming commissioning guidance for peri-natal mental health. • Ensure that clear policies procedures and guidance are in place for the workforce appropriate for pregnant women and new parents which improve early identification. • Develop training across workforce to ensure early identification and low level brief interventions for all people working and/or engaging with pregnant women and new parents. • Developing a Lancashire pathway describing each service and routes of access as part of the single point of access. 	<ul style="list-style-type: none"> • Roll out of training to the highest priority groups • Promote the Lancashire pathway settings engaging with pregnant women and new parents • Monitor the effectiveness of the pathway. 	

<p><i>Objective 8:</i> Locally adopt and adapt the Thrive model as a conceptual framework for our collective response to improving the emotional health and wellbeing of children and young people.</p>	<ul style="list-style-type: none"> • Benchmark current provision against the model, including understanding the drivers for the numbers of DNA's and inappropriate referrals and use this to inform our needs-based model for structuring services • Develop a performance management and quality improvement dashboard against the model. 	<ul style="list-style-type: none"> • Promote our model widely • Strengthen our model through further understanding of children and young people's needs and the building evidence base through IAPT 	<ul style="list-style-type: none"> • Have an equitable evidence based response across the model and Lancashire • Be able to clearly demonstrate how children and young people's outcomes have improved.
<p><i>Objective 9:</i> Use the technology available we will develop and promote widely a pan Lancashire online one stop portal which will include self- help materials in addition to clear information on the support available across Lancashire.</p>	<ul style="list-style-type: none"> • Commission a digital solution provider to develop an appropriate digital platform in which children and young people and parents can access information regarding self-help and support • Map current online resources locally and nationally to ensure existing best practice is utilised e.g. MindEd e-portal 	<ul style="list-style-type: none"> • Provide an online single point of access for children and young people, parents and carers and professionals, designed by young people and incorporating online referral. • Ensure a robust communication strategy and a 'brand' for all services 	<ul style="list-style-type: none"> • Develop a range of digital therapies accessed through the portal. • Children, young people, parents, carers and professionals across Lancashire will know the support available and how to access it.
<p><i>Objective 10:</i> Create a single point of access into all services providing interventions to improve emotional health and wellbeing. This will include consultation as well as direct delivery.</p>	<ul style="list-style-type: none"> • Develop local networks of emotional wellbeing and mental health champions and practitioners across all services to develop practice and increase professional trust. • Improve relationships between schools and emotional wellbeing and mental health services by naming leads in those organisations. 	<ul style="list-style-type: none"> • Expand our local single points of access for specialist services to include voluntary sector provision and counselling. • Develop a single assessment process • Develop a robust consultation model for professionals to seek advice and support in order to be able to support children and young people. 	<ul style="list-style-type: none"> • Have explored 'one stop shop' models for children and young people, learning from national and local good practice, where there is access to help and support from a multi-disciplinary team in a setting which is welcoming to children and young people.
<p><i>Objective 11:</i> Ensure transitions from children's services will be based on the needs of the young person rather than their age.</p>	<ul style="list-style-type: none"> • Include adult services in our performance monitoring framework so that activity and outcomes for young people is understood. 	<ul style="list-style-type: none"> • Have reviewed all (all age) emotional wellbeing and mental health commissioned services and included specific outcomes measures for children and young people. • Have built on the learning from our previous CQUIN to ensure the mental health workforce delivering all age or adult services has the skills and expertise to work with young people. • Have a 0-19 CAMHS service model in place. 	<ul style="list-style-type: none"> • Have developed a clearly defined offer of local provision for 0-25s available on the pan-Lancashire single point of access portal.
<p><i>Objective 12:</i> Ensure children, young people and families will have timely access to an evidence based community eating disorder service.</p>	<ul style="list-style-type: none"> • Increase geographical coverage of CYP IAPT to 75 % • Extend the current breadth and depth within current partnerships across pathway to include 3rd sector and Schools. • Establish the baseline for availability and choice of evidence based interventions across Lancashire and develop a future training plan. • Secured appropriate training places, support and funding for backfill of posts 	<ul style="list-style-type: none"> • Have increased geographical coverage of CYP IAPT to 100% • Further increased the provision of availability of evidenced based interventions. • Developed a pan-Lancashire training plan to detail the local requirements for training to work towards sufficient coverage of all evidenced based interventions across Lancashire 	<ul style="list-style-type: none"> • Have routine outcomes measures embedded across the whole partnership • Have secured the full range of evidenced based provision equitably across Lancashire.

	<ul style="list-style-type: none"> • Ensure the implementation of routine outcome monitoring and feedback to guide treatment and future service design • Work collaboratively with children and young people, their parents and/or carers. • Ensure appropriate investment in mobile technologies and ensure appropriate information governance arrangements are included in the amendment of trust protocols to allow clinical information to be stored, encrypted and transported. 		
<p><i>Objective 13:</i> Improve access to evidenced-based care and support designed in partnership with children and young people and their families, treating them as individuals, taking into account both their physical and mental health needs.</p>	<ul style="list-style-type: none"> • Jointly fund a robust eating disorder needs assessment incorporating the views of children young people and families to further build on findings from the initial workshop. • Complete mapping of current practice and service provision against the recommendations identified in the stakeholder workshop and commissioning guidance. • Improve early detection of eating disorders by increasing awareness in the general population and universal frontline professionals through a targeted promotions campaign. • Develop and agree joint service development plans for 16/17 with our current services, to address recommendations. • Secure commissioning and procurement support to lead the service design and procurement 	<ul style="list-style-type: none"> • We will have procured a co designed evidenced based dedicated community eating disorder service for our children and young people. • Develop a training programme to ensure that relevant staff are appropriately trained in the specialist assessment of eating disorders in children and YP. 	<ul style="list-style-type: none"> • Improved waiting times and access, • Improved outcomes for children and young people • Reduced admissions to Tier 4 beds • Fewer referrals to A&E and admission to paediatric wards or Tier 4 admissions.
<p><i>Objective 14:</i> Ensure that children and young people have early access to evidence bases early intervention in psychosis services in line with the new access and waiting times standards for people experiencing a first episode of psychosis</p>	<ul style="list-style-type: none"> • Ensure that the Trust meets the new access and waiting times standards for people experiencing a first episode of psychosis, • Those children and young people accessing the service are treated with a NICE approved care package within two weeks of referral and for a special ARMS assessment to have commenced for referrals for those with 'at risk' mental statement. 		
<p><i>Objective 15:</i> Ensure crisis support to be made available whenever it is needed and delivered in an appropriate place of safety as close to the</p>	<ul style="list-style-type: none"> • Have a support helpline that have out of hours advice and support for everybody who may be involved with the child/young person, the young person themselves, parents/carers, schools, other key 	<ul style="list-style-type: none"> • Provide mental health training to A&E doctors and consultants. • Work with the ambulance service to develop better understanding of the presenting 	<ul style="list-style-type: none"> • Skill up parents and significant others to cope with their own issues and support their child/young person. Teach them to identify signs of crisis. Build the resilience of the child/young

<p>child or young person's home as possible.</p>	<p>professionals.</p> <ul style="list-style-type: none"> • Pilot in Pennine Lancashire an appropriate alternate safe place, staffed by a multi-agency team, for children in Lancashire to be assessed on an emergency basis or where the crisis can be de-escalated. • Extend the crisis resilience pilots for out of hours response to children and young people in crisis from CAMHS while the crisis response service is redesigned to be all age. 	<p>complaints of children and young people in mental health crisis and how this group present differently than adults in crisis.</p> <ul style="list-style-type: none"> • Increase awareness and knowledge of the range of services and support/treatment that is available for children and young people and their families/carers when they are in crisis for example, access to advocacy services through promotion on the single point of access website. • Evaluate alternative safe-place pilot and consider roll-out across Lancashire • Ensure that, at the point of crisis, the workforce who interfaces with these young people will have the skills and training to enable them to empathise and support the young person in crisis with sensitivity to their age and mental health 	<p>person and their family/carers/significant others and teach them to identify signs of crisis. Support the family/significant others when child/young person does not want to engage.</p>
<p><i>Objective 16:</i> Prevent the development of mental illness through targeted interventions for groups identified as being high risk</p>	<ul style="list-style-type: none"> • Work in close partnership with our local Tier 4 service and paediatric teams to ensure clear pathways and smooth transitions for children and young people requiring an inpatient admission and the identification of alternate solutions for those children and young people who do not need inpatient admission. 	<ul style="list-style-type: none"> • Conduct empirical evaluation of the medium to long term impact of this (REACH) routine enquiry about adversity in childhood approach and adjust commissioning intentions accordingly. 	<ul style="list-style-type: none"> • Implement trauma focussed care on a Lancashire wide footprint so that staff are able to meet the needs of traumatised children and young people and their families.
<p><i>Objective 17:</i> Ensure equitable access to evidence-based interventions for those most vulnerable children and young people following a holistic and comprehensive assessment of their needs.</p>	<ul style="list-style-type: none"> • Improve the experience of vulnerable young people with mental health difficulties on paediatric wards by supporting paediatric staff through training initiatives regarding the management of self-harm and eating disorders <ul style="list-style-type: none"> • Learn from and replicate/extend current best practice for children in care/CLA across Lancashire. • Pilot the REACH project which empowers our professional workforce to proactively identify vulnerable children and young people, providing an opportunity for safeguarding and early intervention by training and supporting them to asking young people routinely as part of their assessments about adverse childhood experiences (ACEs). • Develop and implement a range of multi-disciplinary and multi-agency care pathways for vulnerable groups, eg ADHD 	<ul style="list-style-type: none"> • In alignment with the LD fast track plan, we will work with providers to ensure children and young people with moderate to severe LD with complex and challenging behaviour have access to skilled support staff and, where necessary, the support of specialist professionals to assist assessment and plan effective support. • Provide support to the staff so that they are better able to support these young people, including implications of safeguarding protocols and informed decision to disclose. 	<ul style="list-style-type: none"> • Develop Paediatric liaison in an acute trusts, for a child/young person with mental health issues.

	<p>and ASD</p> <ul style="list-style-type: none"> • Routinely monitor the uptake and use of services by vulnerable groups eg CLA, LD to ensure no young person or family in need fall through the net because of difficulty in engaging, inflexible referral criteria or lack of bespoke pathways • Identify the additional capacity created from the additional funding provided for eating disorders to support the development of a self-harm pathway in each health economy. 		
<p><i>Objective 18:</i> 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.</p>	<ul style="list-style-type: none"> • Build on the success of existing joint commissioning arrangements, including Better Care Fund and Transforming Care across Lancashire to reduce complexity and build a system that is responsive to the needs of children, young people and their families. • The Lancashire Collaborative Commissioning Board (CCB), with representation from eight CCG's, three Local Authorities and Specialist Commissioning will lead the system change through development and approval of the Transformation Plan. The CCB will ensure where possible and practicable, services are jointly and equitably commissioned on a pan-Lancashire footprint. The CCB's vision of a fully integrated system in place and services that are co-commission in a co-ordinated way to ensure they are provided in an integrated way, around the needs of service users and the families or carers and not the system, to improve quality and reduce inequalities. Providers will expected to work in collaboration with other professionals to ensure care is co-ordinated across organisations, health, local authority and voluntary sector, so that it is seamless and supports delivery of the plan. • Integrate commissioning approach under the Better Care Fund (virtual-pooled budget) umbrella whilst a more robust system is put into place. • Support joint commissioning roles within locality footprints to deliver the plan. 	<ul style="list-style-type: none"> • Formalise the integrated commissioning approach through a detailed Section 75 agreement 	
<p><i>Objective 19:</i> Have clear governance arrangements which hold each partner to</p>	<ul style="list-style-type: none"> • Establish governance arrangements to allow delegated authority to the Children and Young People Emotional Wellbeing and Mental 	<ul style="list-style-type: none"> • Ensure that investment and/or disinvestment decisions will be based on joint agreement 	

account for their role in the system	<p>Health Transformation Board for delivery, service transformation and redesign. Members of the transformation board will ensure that consistent engagement with children, young people and their families to inform the plan. Board members will also ensure local area involvement from schools, education establishments and the voluntary sector, see Appendix 7.</p> <ul style="list-style-type: none"> • Ensure the Transformation Board, including all providers, will hold each partner to account for delivery of the plan as outlined in the governance section above. Appoint a system leader to lead the delivery of integrated children and young people's emotional wellbeing and mental health services programme as agreed with partners, including the implementation, management and monitoring of agreed programmes to develop systems for partnership and planning and investing in new care models which break down the barriers between organisations and advocating system leadership at a local level. • Ensure the current level of investment, based on the 2014/15 level of investment by partners is maintained and underpins the ambitions of this transformation plan to develop new capacity in the medium/long term. 	<p>between commissioners on the impact on both the CAMHS service and wider system, and there will be transparency about such decisions.</p> <ul style="list-style-type: none"> • Implement a benefits realisation plan for the programme to identify and monitor the impact of prevention and early intervention on both specialist children and young people's services, adult mental health services and social care 	
<i>Objective 20: Increase transparency through the development of robust metrics on service outcomes'</i>	<ul style="list-style-type: none"> • Ensure that IT capability is developed in order collect and collate national mental health shared data set in Lancashire. • Work collaboratively across commissioners and providers to develop a shared performance and outcomes framework for children and young people's emotional and mental wellbeing. • Ensure the framework will reflect the national mental health shared data set and encompass local outcome measures developed in consultation with key stakeholders, CYP and their families. • The framework will be informed and build on the learning from our Joint Strategic Needs assessments across BwD, Blackpool and Lancashire. • Ensure the metrics outlined within the framework will be incorporated into service 	<ul style="list-style-type: none"> • Work with the Digital Lancashire strategy programme to ensure IT capability is developed in order to allow records to be shared between providers in Lancashire. • Ensure an exception report will be provided to the Transformation Board, where performance is off track, with mitigating actions and risks to delivery are escalated where required. • Support the development and implementation of systems to ensure information about the pathways into and through care and quality data on service performance and commissioner spend is highly visible, readily accessible and shared across agencies. • Publish an annual report card on children and young people's emotional wellbeing and mental health, setting out key achievements, areas for improvement and required action • Require commissioned emotional wellbeing and 	<ul style="list-style-type: none"> • Explore models and feasibility of a single case management system across all providers delivering emotional wellbeing and mental health interventions in Lancashire. • Develop a single data collection portal to ensure that standardised information is available to inform planning and commissioning of services. This will be made available on the one stop portal for service users and carers to support informed decision on their care and the choices they have.

	specifications and information requirements for each provider and monitored through contract management arrangements.	mental health services to develop and publish quality improvement plans on an annual basis	
<i>Objective 21:</i> Work together to ensure that our increased levels of investment will be used transparently, equitably and demonstrate value for money.	<ul style="list-style-type: none"> Undertake a review of how commissioning activity across the CCGs and the Local Authorities can be brought together within a strong strategic framework for a more effective health and social care economy of service providers and commissioners working together to establish organisational arrangements that promote the most effective and efficient use of services, minimise duplication and streamline access. Ensure that investment and/or disinvestment decisions will be based on joint agreement between commissioners on the impact on both the CAMHS service and wider system. Undertake a bench marking exercise pan-Lancashire to support the demonstration of good value for money, efficiency and effectiveness compared to similar services. 	<ul style="list-style-type: none"> Commission emotional wellbeing and mental health services for the children and young people of Lancashire in accordance with the needs of the population as articulated in our Joint Strategic Needs Assessments. Ensure continuous improvement in the quality of services to be achieved whilst achieving financial balance within a challenging economic climate. Utilise evidence based approaches and working collaboratively with service users, carers, providers and commissioners on joint commissioning to maximise quality and efficiency and minimise risks to service users and carers. Publish an annual local plan for children and young people's emotional wellbeing and mental health, linked to a wider whole population mental health strategy which recognises the clear links between the mental health of family members and the impact in particular on children and young people where their carers have poor mental health. 	
<i>Objective 22:</i> Ensure our service offer will be designed with children, young people and families and be responsive to needs as opposed to service structures.	<ul style="list-style-type: none"> Further developed in consultation with parents and young people which will be an integral part of the development and implementation of the strategy going forward. Building on our learning and engagement with children and young people we will strengthen the support and role that is available to service users and carers who become involved in planning and monitoring of mental health services including a process of induction and training as well as ongoing support. Improve capacity of service users, carers and families to take part in local and regional involvement, service improvement work, self-help support and service provision by effectively supporting involvement within our commissioning practice. 	<ul style="list-style-type: none"> Work in partnership with service users and carers on their ideas for different approaches to widen involvement Ensure that representation for carers in commissioning is supported to represent mental health issues adequately Ensure that service user and carer feedback and involvement in delivering and developing services will be mandatory Develop a culture of sharing learning of good practice across Lancashire through developing pilots and testing new service provision models ensuring that children and young people and their carers are involved in the measurement of outcomes and the evaluation of these programmes. 	<ul style="list-style-type: none"> Ensure that people will be communicated with using formats and means appropriate to their individual requirements e.g. service user led website and carers on-line forums Ensure that carers can gain access to their own needs assessment within a primary care, generic or mental health setting and are supported so that their role is valued in the creation of care plans
<i>Objective 23:</i> Work with	<ul style="list-style-type: none"> Work with service providers who deliver 	<ul style="list-style-type: none"> Establish and agree the key principles for those 	<ul style="list-style-type: none"> Identify and use creative means to recruit and

<p>partners across all sectors to ensure that there is an appropriately resourced, skilled and trained workforce who feel confident in their ability to support the emotional health and wellbeing needs of our children and young people and their families.</p>	<p>specific emotional wellbeing and mental health interventions to undertake an audit of staff numbers, skills, competencies and training building on the returns as part of this planning process.</p> <ul style="list-style-type: none"> • Utilise local workforce modelling undertake a gap analysis to identify workforce numbers requirements, succession planning, skills and training needs. • Ensure clear organisational commitment, resources and time for continuing professional development and training. 	<p>planning/commissioning services in addition to providers and partner agencies about the workforce and resources required to meet the needs of a population of children and young people to support the development a workforce strategy and plan for Lancashire.</p> <ul style="list-style-type: none"> • Enhance existing roles and create new roles to tap into a new recruitment pool and complement existing staff groups. • Build on training programmes that are currently available in Lancashire to enable continuous professional development of all staff. • Develop Education and Training plan based on needs analysis which will be updated annually. • Develop programmes of work with our health education partners, including Health Education NW Higher Education Institutions, CYP IAPT, Local Health Education and Training Boards, NHS England and colleagues across the region, to consider what is required for workforce to address the identified gaps. • Ensure the roles and responsibilities of each member of the multi-disciplinary team are made explicit. • Develop a dashboard to allow ongoing review of staffing numbers and competencies and highlights any staff development training/skills deficits. 	<p>retain people in the workforce in order to increase the overall numbers in successive years.</p> <ul style="list-style-type: none"> • Young people and/or their parents/carers are involved in and their views taken into account in the recruitment and appointment • Facilitate ways of working within services and across professional boundaries making best use of specialist staff group to meet the needs of children, young people and families.
---	--	---	---