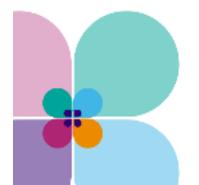




Walsall Health and Wellbeing Board 21st March 2023

Reference:	Agenda		Action ref		Enclosure	
	item no:		(if any):		no:	
Title of report:	Annual Report on the update of the Black Country Mental Health and Emotional Wellbeing Strategy for Children and Young People					
Author:	Mags Courts and Sarah Hogan					
Presenter:	Mags Courts and Sarah Hogan					
Purpose of the paper:	This paper is presented to: (tick one) Approve: To formally receive and discuss the report and approve its recommendations or decide on a particular course of action.					
	 ☑ Receive: To receive and discuss, in depth, noting the implications without formally approving it. ☐ For information: To note the report for the intelligence without in-depth discussion. 					
Summary of key issues:	Needs Led Assessment is slightly behind schedule to understand what the needs for CYP in Walsall are and how they can be met as well as potential commissioning intentions.					
Identified key risks (summary risk only)	Recruitment and retention of staff.					







Introduction:

Black Country Healthcare NHS Trust is now the Lead Provider for Mental Health, Learning Disability and Autism Services in the Black Country from 1st of July 2022. This means we will be working pro-actively with our partners and friends in health and care, the voluntary sector and our communities to deliver services that meet the needs of our population. It was felt that it would be useful to pull together a draft Mental Health and Emotional Wellbeing Strategy for Children and Young People for consultation purposes and to articulate the vision for our young people.

A draft Black Country wide Mental Health and Emotional Wellbeing Strategy for Children and Young People has been pulled together to articulate our vision for the Black Country to be a place where children and young people thrive and have the capacity to develop both physical and emotional resilience. This strategy is about delivering that vision, and driving change to improve outcomes across the system, in partnership with our local authorities, childrens trust, voluntary sector partners and communities. Our vision is that:

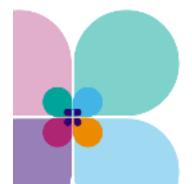
- All children and young people will enjoy a happy and fulfilling childhood.
- All children and young people will be resilient and manage their emotional health and wellbeing in their family, school, and community.
- That the most vulnerable children and young people will have access to the most appropriate range of services.

We would envision to achieve this vision, evidence-based services will be commissioned, which are evidence-based and will be designed to:

- Promote resilience, prevention, and early intervention.
- Improve access to effective support.
- Improve specialist early help and Intervention for the most vulnerable

Background:

Every year, NHSE has requested the local commissioners to update the initial CAMHS transformation plan with specific Key Lines of Enquiry to give assurance that funding was being used to address specific areas and reach targets set. However, it left us locally with a plan that was unyielding, cumbersome and although it gave assurance to NHSE, it did not necessarily support us articulating what work was







being undertaken to increase capacity in services or developments, the impact the funding was making, challenges and risks that existed and any mitigations for these risks and challenges.

As Black Country Healthcare NHS Foundation Trust has now become the lead provider for Mental Health, Learning Disability and Autism Services in the Black Country from 1st of July 2022, it was felt that developing a strategy pro-actively would help us to articulate, as a collective, the work that we would be undertaking across the Black Country and the overarching principles and outcomes. This in turn would enable local places to think about how this could be used to support development of a local place-based Emotional Mental Health and Wellbeing Strategy taking local needs led assessments into account and existing services in place as well as how gaps in provision can be addressed.

Activity which is currently taking place or due to take place in the Black Country:

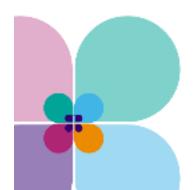
CYP Core and Crisis

- Baseline uplift 21/22 and 22/23 This allowed for the age range In Core CAMHS in Dudley and Walsall to be brought up to 18 years.
- Capacity in the CAMHS crisis teams has also been increased across the Black Country especially in Dudley and Walsall.
- A 24 hours a day, 7 days a week CAMHS Medics rota and a 24 hours a day, 7 days a week rota on CAMHS crisis is now available across the Black Country and Service development funding in 21/22 has allowed for an increase in multi-disciplinary capacity within Sandwell and Wolverhampton CAMHS Core teams.

Eating Disorders

- Baseline Uplift 21/22 This has allowed for development of an all age eating disorders service in Dudley and Walsall which is already in place in Sandwell and Wolverhampton.
- Funding is now available over 3 years under Community Transformation Programme to develop an outreach service and support reducing hospital admissions.

18-25 Younger adult's transition







Service development funding 21/22 and 22/23 and funding available over 3 years under Community Transformation Programme – to establish a wraparound service for Young Adults aged 18-25 and to provide a seamless transition from CAMHS to AMHS services when Young Adult turns 18. This is particularly relevant for those young people who do not necessarily easily meet thresholds for adult mental health services and will include care leavers and children who have been subject to the criminal justice system.

CYPF Intensive Support Team

 Funding is available under LDA to mobilise an intensive support team for CYP across Black Country.

Mental Health Supports teams in Schools

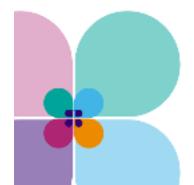
• Wave 2, 4 and 6 funding has been available across the Black Country for the last few years. In Walsall, there has been funding available for MHSTs in Wave 2 and 6 with more due to come on line for wave 8 (recently confirmed) and wave 10. Recruiting and mobilising MHST teams to provide mental health support to CYP in schools across Black Country has been challenging with recruitment and retention being one of the main concerns.

Tier 4 delayed discharge programme

- Non-recurrent funding in Q4 in 21/22 which has been moved into 22/23 to support admission avoidance and early discharges. The aim will be identifying the system population cohort in CAMHS Tier 4 hospital provision, tracking patients through their inpatient journey using the 12-step model to enable care to be delivered in the least restrictive setting, strengthening relationships between CAMHS Tier 4 providers and local community teams to enable effective planning, reducing Length Of Stays in Tier 4 for C&YP from Black Country presenting with eating disorders.
- During the time whilst this programme has been in place, the number of young people being admitted to tier 4 mental health beds, who have presented with eating disorders, has been reduced.

Winter pressures monies

 We are piloting a project to put some keyworker roles, which are working as a conduit between CAMHS Crisis Team, acute hospitals, and social care when there is a social reason for a CYP remaining in an acute hospital aiming to







reduce the length of stay for C&YP on paediatric wards across the Black Country and to provide 1:1 support if CYP require this during an admission.

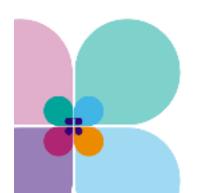
<u>Digital Offer</u>

Currently BCHFT commission Kooth as part of the 'signposting and getting advice' services and the 'getting help' services as part of the Thrive model to provide an online digital offer for emotional mental health and wellbeing for young people and this will include a number of children in care and care leavers, although not specifically for this group. The offer includes a

- A chat function for a young person to drop in to speak to a readily available counsellor
- A messaging function for young people to contact the service
- A schedule function to provide booked sessions with a named counsellor on a regular basis
- A range of forums, all of which are pre-moderated, to offer facilitated peer support for CYP. They also provide crucial first steps towards getting further therapeutic support
- Live discussion groups run by professionals (with all comments moderated) to enable groups of CYP to interact with each other in a safe environment
- An online magazine will full content moderation, creation and editing which includes opportunities for CYP to submit their stories or write articles, all of which is moderated
- Information, activities and self-care tools and resources on the site for CYP to download.

The current digital offer is to be reviewed in the Black Country in light of the increased number of providers and their range of offers that have emerged following the COVID-19 pandemic to ensure that our provision at this level is appropriate and meeting the needs of our young people in the Black Country including our underserved communities. The service specification for this service will be coproduced with our young people and stakeholders to ensure it meets their needs.

Embedding I thrive Model





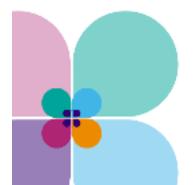


The i-Thrive framework was proposed as part of the Future in Mind national policy document as a method of grouping children and young people together according to their level of need, allowing children and young people to move more flexibly around and between services. In order for this to occur, it will be important to understand and map all of the services that are available across the framework including those that are non-commissioned and commissioned via BCHFT and the Local Authorities/Childrens Trust. This will include those services that are considered thriving all the way up to getting risk support.

The i-Thrive model replaces the currently recognised tier-based system with a whole system approach. It is s based on the identified needs of children, young people (CYP) and their families. It advocates the effective use of data to inform delivery and meet needs. It also helps to identify groups of CYP and the range of support they may benefit from. The i-thrive model also ensures CYP and their families are active decision makers.

Getting Help services

In each of our 4 areas of the Black Country 'Getting Help' services are either commissioned by BCHFT alone or with the Local Authority (in some of the areas) with some Local Authorities commissioning these services by themselves. These







services are commissioned, recurrently in some instances, from local voluntary sector organisations in each of the four areas and they are able to enter the activity onto the Mental Health Service Data Set (MHSDS), when commissioned via the NHS. Other services are commissioned in some of the local authorities/ childrens trust but are non-recurrent. There are significant differences across the Black Country in terms of the commissioning arrangements and work is to be undertaken to clearly understand what is available and the capacity required following a needs led assessment that is occurring in each area.

Children in care/care leavers services

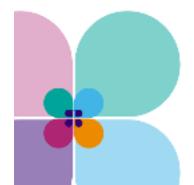
A full review of services for children in care and care leavers commissioned through the lead provider model is going to be undertaken across the Black Country. This will include the following steps:

- Scoping of Specialist Mental Health Support for CIC in the Black Country
- Research Models of Good Practice
- Review Findings of Scoping Material
- Identify any gaps in provision or funding across the Black Country
- Developing a Black Country Emotional Mental Health and Wellbeing CiC Service
- Operationalising the New Model
- Review and Evaluation

Youth Justice Services

A full review of the current offer for Children and Young People who are part of the Criminal Justice system commissioned through the lead provider model is going to be undertaken across the Black Country. This will include the following steps:

- Scope out current provision from CAMHS to the criminal justice system in all areas
- Liaise with stakeholders
- Identification of finances associated with each of the CAMHS posts into the criminal justice system
- Liaising with contract re SLA
- Identification of best practice in the country for CYP who are part of the criminal justice system







- Developing the New Offer from CAMHS to the Criminal Justice System across Black Country which also ties in with the new offer from the Liaison and Diversion Service which has recently been awarded to MPFT.
- Advocating in each place based for additional health offers that will support the rehabilitation process as part of the criminal justice system.

Actions:

- 1. Meet with a range of stakeholders to discuss what we think a strategy should look like for the Black Country.
- 2. Needs Led Assessment for Emotional Mental Health and Wellbeing for CYP in Walsall to continue to be developed so that it can support us to understand what the needs for CYP in Walsall are and how they can be met.
- 3. Stakeholder sessions to be put in place to look at the Needs Led Assessment and understand what the Emotional Mental Health and Wellbeing Strategy for Walsall should contain.
- 4. Stakeholder sessions to be booked with social care team to ensure that we are co-producing the offer for children in care from specialist mental health services.

