



NORTH LONDON PARTNERS
in health and care



North Central London Children and Young People's Mental Health and Emotional Wellbeing Transformation Plan

Version 1. of 1 Produced November 2021

This is a live document, please check you are viewing the version



Contents

Developing our North Central London Plan

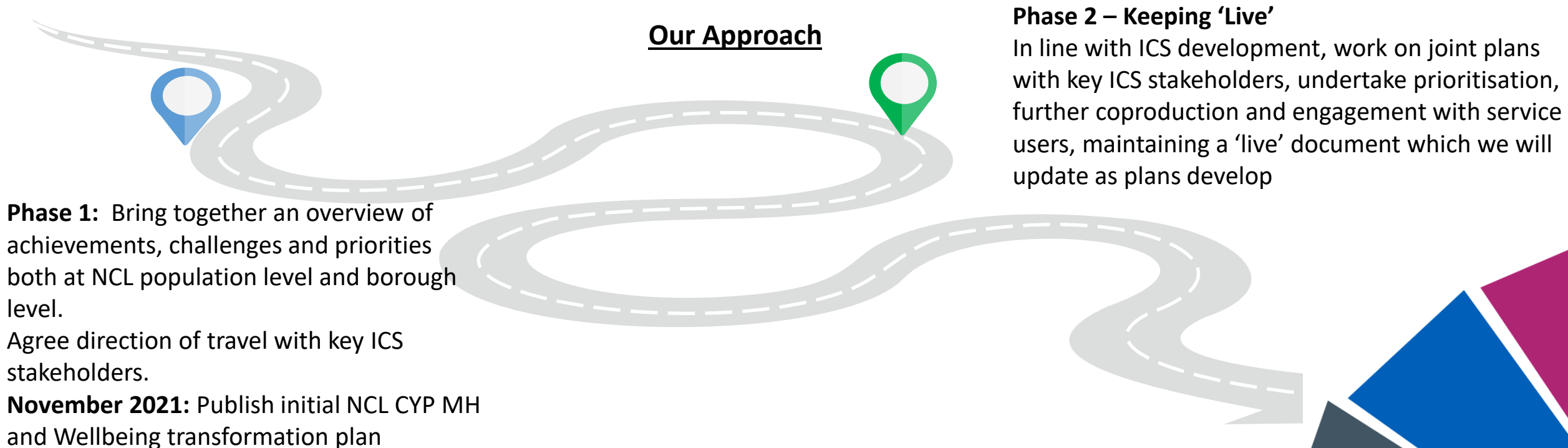
- Our Developing ICS - Quotes From Key Partners
- North Central London – Our Area
- Child Population and Growth
- NCL Demographics and Characteristics
- NCL Demographics and Characteristics – Deprivation
- Key children’s indicators
- Mental Health Needs in NCL
- COVID-19 and Our Response
- Impact of the Pandemic
- Our Strengths as a System
- Our System Challenges
- Our Vision for CYP Mental Health
- NCL Guiding Principles for CYP MH Delivery
- Coproduction Informing This Plan
- Borough Examples of Co-production

Major Achievements Across NCL Since Plans Last Published

- Spotlights on good practice
- Performance Summary
- Our Progress and Priorities
- What we want to achieve through this plan
- **THRIVE* Approach**
- Thriving
- Getting Advice
- Getting Help
- Getting More Help and Risk Support
- **System Enablers**
- Driving equality Workforce, Digital, Governance, Finance.
- **Population Based Approaches**
- Early Years, Perinatal, Young Adults, Learning Disabilities and Autism.

Developing our North Central London Plan

- Improving support for children and young people with emotional wellbeing and/or mental health concerns is a key priority for North Central London's NHS and Local Authorities. This document sets out what we've done so far and our plans to improve care and support further.
- Across the NHS, every Integrated Care System publishes an annual CYP MH Transformation plan. In the past, we published a plan for each borough, and in our last plans each borough included a NCL section setting out shared priorities.
- This year, we take another step towards operating as an Integrated Care System with a single plan setting out collaborative priorities across boroughs, alongside priorities in each borough, as we increasingly work together to meet our population's needs.



Developing our ICS – Key Partner Quotes

Our Children and Young People’s mental health and wellbeing partners have a good foundation of working in partnership to meet the needs of CYP and families in the borough. Below are some thoughts from Key Partners across our developing ICS.

“Children’s mental health and emotional wellbeing services are experiencing considerable pressure and this is likely to continue. However, over the last few years NCL providers and commissioners been working in close collaboration and have developed a strong system partnership – and we’ll build on this to continue improving outcomes for CYP through this plan .”

Sally Hodges, Tavistock and Portman Clinical Chief Operating Officer and Tina Read, BEH Trust Wide Service Lead, Joint Chairs of NCL CAMHS Board

“Children and young people need to be able to access mental health provision in the spaces they occupy. Services need to be dynamic and flexible and informed by the changing demographics and needs of our child population. We have a good foundation from which to step forward for change”

NCL Directors of Children’s Services

“Improving mental health outcomes for children and young people and addressing inequalities in access to care are key priorities for NCL’s emerging Integrated Care System. We’ve made good progress but know there is more to do. We look forward to delivering on the ambitions set out within this plan”

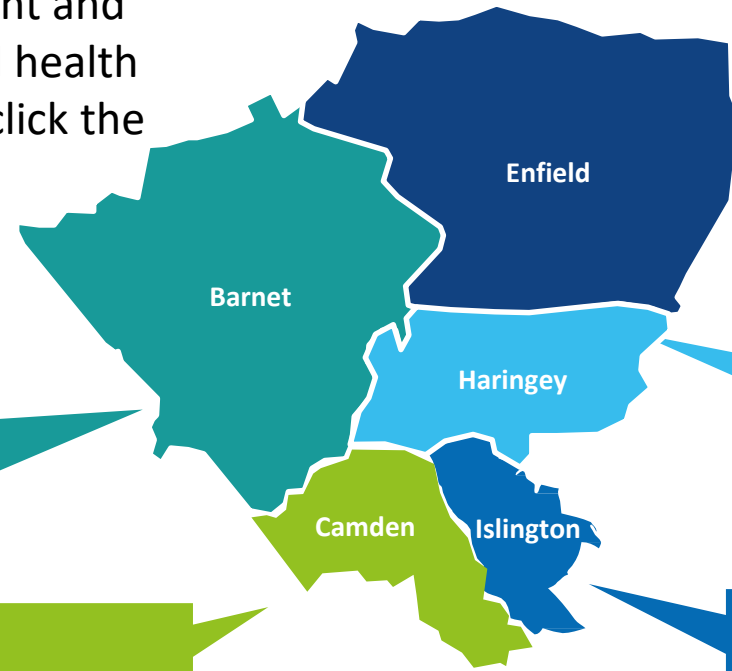
Jinjer Kandola & Sarah Mansuralli MH SROs and CCG representatives on behalf of ICS

“Providers and professionals across North [Central] London worked together well to try and meet the needs of children and young people with mental health needs. Necessary changes were made quickly. Professionals from across the system shared examples of good joint working.”

Draft Provider Collaboration Review findings CQC 2021

North Central London – Our Area

North Central London ([Barnet](#), [Camden](#), [Enfield](#), [Haringey](#) and [Islington](#)) has a population of approximately 1.7 million residents, of which 323,000 are under 18. If you are a resident and want more info on how to access mental health and wellbeing services in your borough click the relevant borough name above.



Barnet

- 437,371 total registered population
- 94,898 under 18s

Enfield

- 354,822 total registered population
- 83,683 under 18s

Haringey

- 331,754 total registered population
- 62,540 under 18s

Camden

- 284,807 total registered population
- 40,549 under 18s

Islington

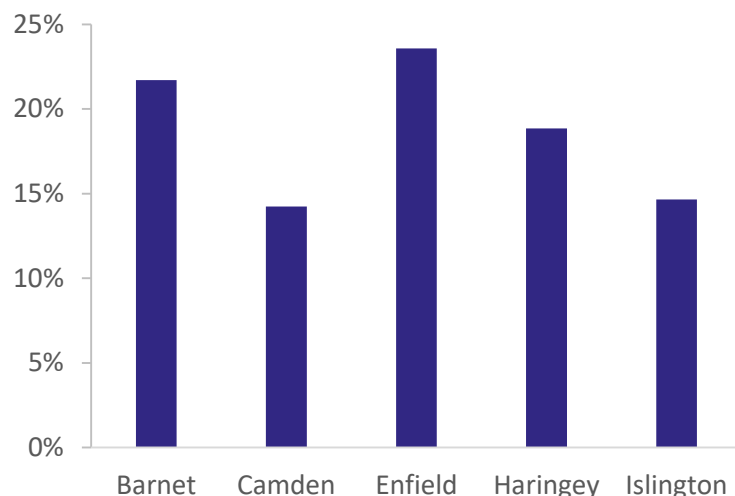
- 280,828 total registered population
- 41,126 under 18s

Across our area we have one NHS Clinical Commissioning Group (CCG) and five Local Authorities, who work with NHS Trusts, LA staff, the voluntary and community sector (VCS) and residents to plan and fund services. We work together through an Integrated Care System (ICS) – with a Children’s Mental Health Board overseeing CAMHS and are developing pathways from our borough based boards.



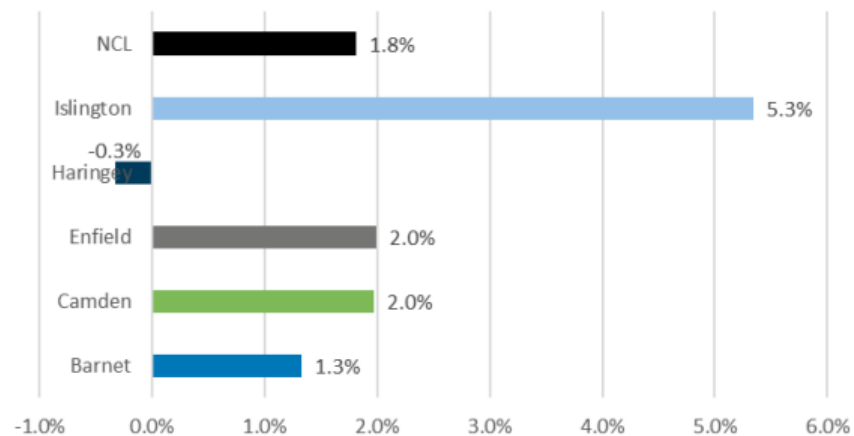
Child Population and Growth

North Central London Boroughs | 2021
Proportion of Population Under 18



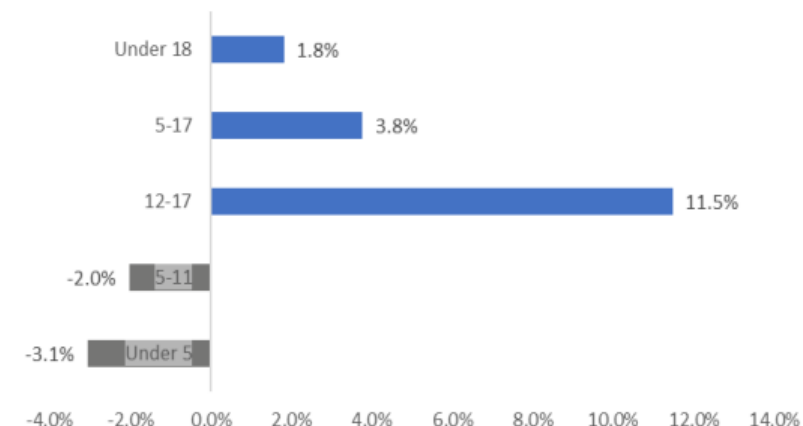
Source: NHS Digital

Population % change by Borough



Source: ONS Population Data; analysis by Attain

NCL Population % change (>2020) by Age group



Source: ONS Population Data; analysis by Attain

- As of September 2021, there were **322,796** children registered in North Central London, 19.1% of the total population.
- Barnet and Enfield have both the highest numbers of children and the highest proportions of their population who are under 18.
- The population of under 18s across NCL is expected to **increase by 1.8% (over 6000 CYP)** between 2020 and 2030, with the largest increase expected in Islington.
- The largest increase by age group is expected among the **12-17 age group (+11.5%)**.

NCL Demographics and Characteristics

Ethnicity

- 69% of children in North Central London have an ethnicity other than White British
- The largest ethnic groups across NCL are White British (31%), Other White Groups (18%) and Black African Groups (10%)
- There are differences in the ethnic composition of each borough as the graphic to the right shows
- Children in NCL speak a wide range of languages, with approximately 130 languages spoken by Haringey school children alone
- 46% of NCL school children do not speak English as a first language
- An increasing number of unaccompanied children come to live in NCL each year. A number of children from Afghanistan have also recently arrived in NCL and are being supported by system partners.

10% of children in Camden are Bangladeshi

Barnet has the largest number of Indian children in NCL

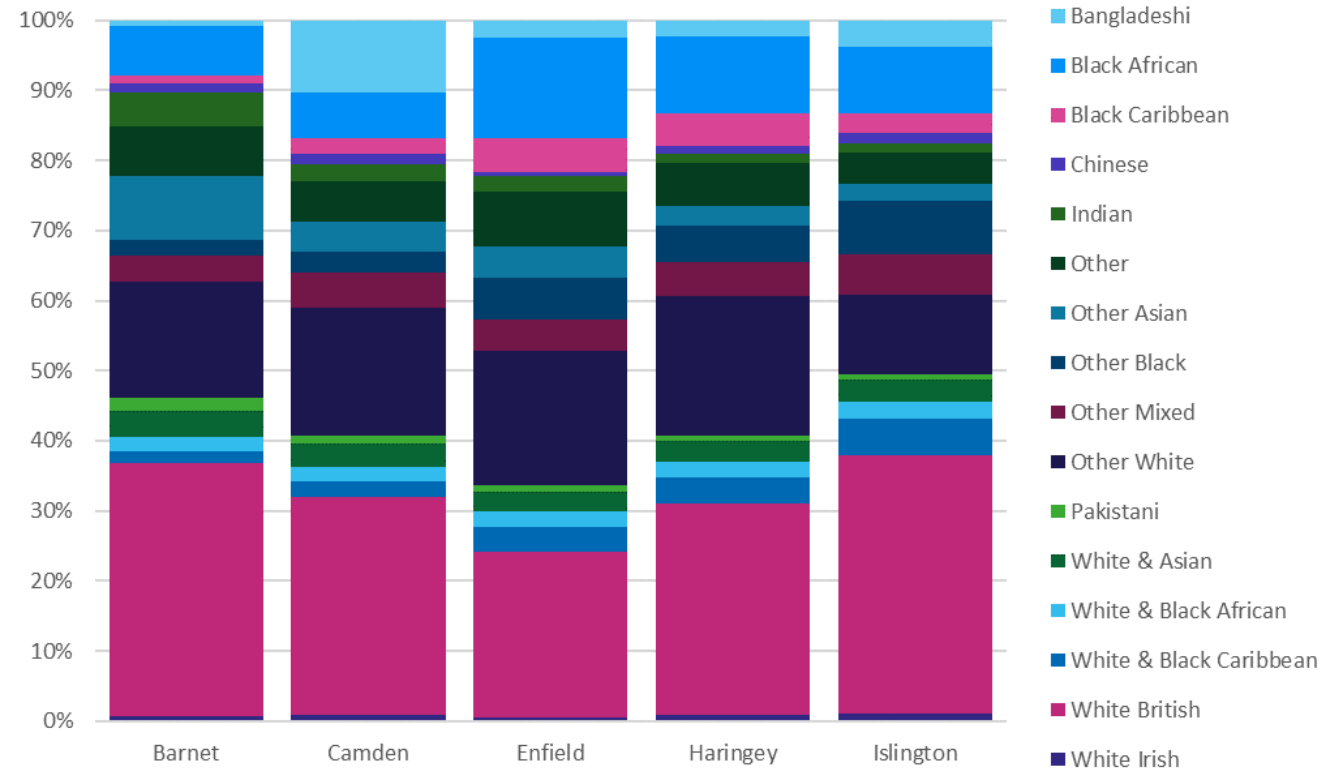
Around 20% of children in Enfield and Haringey are from Other White backgrounds, with significant numbers of Turkish, Greek and East European residents

14% of children in Enfield are from Black African backgrounds

Islington has the highest proportion of White British children and also has the highest proportion of children from mixed backgrounds

16% of Barnet's population is Jewish

Proportion of children in each borough by ethnic background



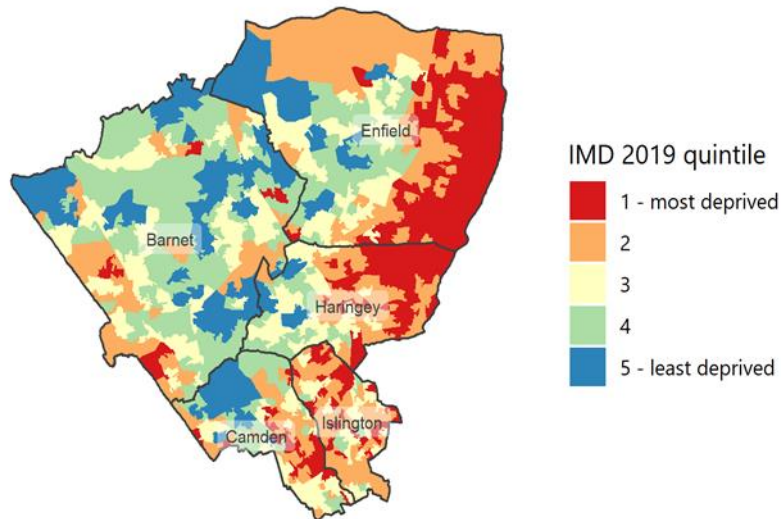
Sources:

GLA (2017): Local authority population projections – trend-based ethnic group projections, central migration scenario
[Haringey Council: Our Changing Borough](#)
 Dfe (2021): Schools, pupils and their characteristics

NCL Demographics and Characteristics

Deprivation

Deprivation quintile by LSOA
North Central London boroughs, IMD 2019



¹ Index of Multiple Deprivation, 2019

- NCL is characterised by wide differences in deprivation between areas. The areas of highest deprivation are along the eastern corridor of Enfield and Haringey, but there are also pockets of deprivation in Camden, Islington and, to a lesser extent, in Barnet.
- 29% of small neighbourhood areas in Islington are within the 10% most deprived areas nationally, based on IDACI 2019. 26% of Haringey children live in poverty with 36% living in social housing.
- Approximately 50,000 children in NCL live in relative low income families. We know that living in poverty increases the likelihood of poor mental health.
- While not explaining all differences, the intersectionality between ethnicity and deprivation is very important. Black, Asian and minority ethnic communities that are living in the most deprived areas include Black, White Irish, Turkish, and Eastern European communities in Enfield, Haringey and Islington, the Bangladeshi community in Camden, and Gypsy, Roma and Irish Traveller communities in Barnet, Enfield and Haringey.
- Further information about each borough’s children can be found within their JSNA profiles which are available via the links below:

[Barnet](#)
[Camden](#)
[Enfield](#)
[Haringey](#)
[Islington](#)



Children's deprivation indicators

Better than London

Similar to London

Worse than London

| Indicator | Period | England | London | NCL | Barnet | Camden | Enfield | Haringey | Islington |
|---|---------|---------|--------|-------|--------|--------|---------|----------|-----------|
| Percentage of children in relative low income families (under 16s) | 2019/20 | 19.1% | 18.3% | 18.7% | 13.9% | 14.7% | 18.1% | 19.1% | 18.3% |
| Free school meal: % uptake among all pupils | 2018 | 13.5% | 15.6% | 17.1% | 11.3% | 25.0% | 15.2% | 17.1% | 27.9% |
| School readiness: % of children achieving a good level of development at the end of reception | 2018/19 | 71.8% | 74.1% | 72.5% | 74.3% | 72.8% | 69.7% | 74.6% | 71.0% |
| Percentage of 16-17 year olds not in education, employment or training (NEET) | 2019 | 5.5% | 4.2% | 4.7% | 1.5% | 4.2% | 4.1% | 10.9% | 4.1% |
| First time entrants to the youth justice system, per 100,000 | 2019 | 208 | 260.2 | 263.2 | 161.7 | 266.6 | 275.3 | 330.3 | 367.1 |
| Children in Care, per 10,000 | 2020 | 67 | 49 | 50 | 35 | 36 | 44 | 67 | 86 |

Source: PHE Fingertips

- Within NCL, there is significant variation between and within boroughs relating to some of the key children's indicators, some of these, mainly linked to deprivation are shown at borough level in the table above. It's important to note that these indicators only tell part of the story and each borough, regardless of the indicators has its own challenges.
- 18.7% (50,000) of under 16s in NCL live in relative low income families, which is above the London average and this figure is highest in Haringey, Islington and Enfield. More than 25% of pupils in Camden and Islington have free school meals.
- Young children in NCL are less likely to reach a good level of development by the end of reception compared to the rest of London, with particularly low rates in Enfield and Islington.
- Haringey has a significant proportion of 16-17 year olds not in education, employment or training, while both Haringey and Islington have some of the highest rates in the country of first time entrants to the youth justice system. There are also higher rates of children in care in these boroughs. Rates of looked after children (LAC) also vary significantly by ethnicity, with higher rates seen among black and mixed children.

Emotional and Mental Health Needs in NCL

Prevalence of mental health, behavioural, and emotional disorders in NCL is **higher** than the national average for most conditions. The table below shows the estimated prevalence of mental health conditions across NCL, together with additional relevant indicators relating to school children, children in care and hospital admissions for self-harm. Our approach to meeting these needs is varied and must be undertaken in close partnership with the wide range of partners across the system, such as our work in schools to address social emotional and mental health needs amongst our school age population or developing capacity in community services to support CYP with disordered eating.

| Indicator | Time Period | England | London | NCL | Barnet | Camden | Enfield | Haringey | Islington |
|--|-------------|--------------|--------------|---------------|--------|--------|---------|----------|-----------|
| Estimated number of children and young people with mental disorders – aged 5 to 17 | 2017/18 | - | - | 27,725 | 7,827 | 4,234 | 7,206 | 5,072 | 3,385 |
| Estimated prevalence of conduct disorders: % population aged 5-16 | 2015 | 5.6% | 5.7% | 5.7% | 5.0% | 5.5% | 6.1% | 6.1% | 6.2% |
| Estimated prevalence of emotional disorders: % population aged 5-16 | 2015 | 3.6% | 3.6% | 3.7% | 3.2% | 3.6% | 3.8% | 3.9% | 4.0% |
| Estimated prevalence of hyperkinetic disorders: % population aged 5-16 | 2015 | 1.5% | 1.5% | 1.5% | 1.4% | 1.5% | 1.7% | 1.6% | 1.7% |
| Estimated prevalence of potential eating disorders, aged 16-24 | 2013 | - | - | 22,069 | 5,146 | 4,327 | 4,850 | 3,819 | 3,927 |
| % of school pupils with social, emotional and mental health needs | 2020 | 2.7% | 2.5% | 2.9% | 2.6% | 3.4% | 2.7% | 2.8% | 3.4% |
| Percentage of looked after children whose emotional wellbeing is a cause for concern | 2019/20 | 37.4% | 32.1% | 35.1% | 33.3% | 40.7% | 28.1% | 40.0% | 34.4% |
| Hospital admissions as a result of self-harm (10-24 years) – Per 100,000 | 2019/20 | 439 | 192 | 202 | 253 | 201 | 176 | 205 | 223 |

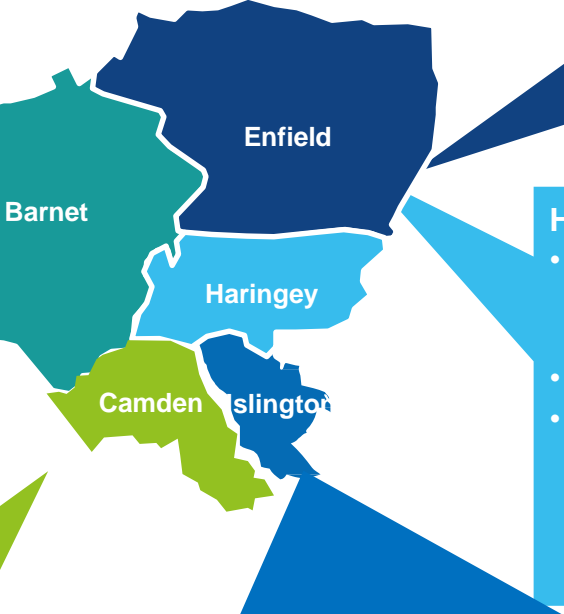
COVID-19 and Our Response

- NHS, LA and VCS services remained open, delivering through a mix of face to face, virtual and telephone appointments
- Schools, LAs and some Trusts offered laptops and/or confidential spaces for counselling sessions
- The Out of Hours Service was quickly expanded and a 24/7 Crisis Line fast tracked.
- Trusts worked together and flexed the workforce to where

- most needed
- Crisis Hubs were established to divert children from acute hospitals
- Enhanced our Eating Disorders capacity
- Consolidated MH Liaison support into acutes to support A&E diversions

- Barnet**
- Partnerships delivered new programmes and models to support CYP with MH and SEND needs returning to schools
 - BICS and other teams introduced support hotlines for young people, parents and professionals plus extra MH support and toolkits from LCB teams, Terapia, Resources for Autism and other partners.
 - Open spaces project created safe enclosed play spaces & swimming for CYP & families experiencing autism or challenging behaviours and 'Gardens for All' scheme supporting emotional wellbeing with access to safe outdoor spaces
 - LA led information campaign including a poster campaign with Kooth and a wellbeing brochure delivered to every household

- Camden**
- Multi channel approach to share information for CYP and parents on MH services & support via routes such as Camden Rise Website, Camden New Journal newspaper, Faith Leaders forums & Peer Education
 - Extended our equine therapy offer & expanded content of sessions to focus on reducing anxiety, resilience to transition and behaviour management
 - Introduced 'Level Up': A psychological transition support for 6 primary schools linking to the secondary school accordingly and the wider VCS offer to support those who were transitioning after lockdown.



- Enfield**
- Virtual panel events held with Healthwatch and Our Voice to provide CYPMH advice to public during lockdown.
 - Early Years Speech and Language Therapy and CAMHS Clinical Psychology conducted a successful pilot on autism assessments via video call, for children under 6

- Haringey**
- Consultations led by CAMHS/MHSTs and Educational Psychology with parents/carers on how to manage the return to school
 - 80 schools survey on what support was needed
 - As a result ran webinars on sleep, bereavement and behaviour and additional training in Mental Health First Aid and bereavement and Educational Psychology services. Open Door provided support to young people and their families while on the waiting list.

- Islington**
- A&E diversion hubs for the South of NCL.A
 - Therapeutic support, where risk assessed, delivered digitally to maintain services
 - Increased communications re central point of access and ability for parents and young people to self-refer to make as accessible as possible
 - Virtual parenting sessions held across a number of priority delivery programmes

Impact of the Pandemic

The Covid 19 pandemic caused disruption and uncertainty for all. Children and young people were particularly affected from the changes to education, socialising and access to services. We know there will be longer term impacts for our children, young people and families which will require a system wide approach to address:

- **Modelling** predicts increases in new cases of **moderate-severe anxiety depression** in adults with an almost 20% rise in depression in the **under-25s**⁴;
- NHSE Benchmarking shows an increase in MH conditions in under 18's increasing from 1 in 9 to 1 in 6 young people over the past year
- **Young people are worried** about their education, finances and future. **Young children were** responding to the **uncertainty** around them and **worry** about their family members. **Parents** were concerned about **children's mental health and wellbeing**³ and **feel overwhelmed** by financial insecurity, childcare and home schooling.
- Mental health had deteriorated somewhat or a lot for **70% of LGBT+ residents**².
- For **people with learning disabilities**, there was a gap in services around emotional wellbeing, and accessing suitable information around Covid-19 and support has been a particular difficulty³.
- **Some people have suffered more from Covid-19's effects on mental health and wellbeing.** The wider determinants of health, including but not limited to ethnicity, gender, family and employment status, have an influence. Levels of **depression and anxiety** are **still highest**¹ among, for example: **women, young adults, people who live alone or with children or in urban areas**, or are from **Black, Asian and Minority Ethnic (BAME) backgrounds**.

¹ [UCL Covid-19 Social Study Results Release 25. Nov 2020](#)

² Camden & Islington Stakeholder meetings, Nov-Dec 2020, and stakeholder survey

³ [Covid-19 resident engagement. Camden and Islington Public Health team, Oct 2020](#)

⁴ Centre for Mental Health Forecast Modelling Toolkit, Nov 2020 – full results available on request



Our Strengths as a System

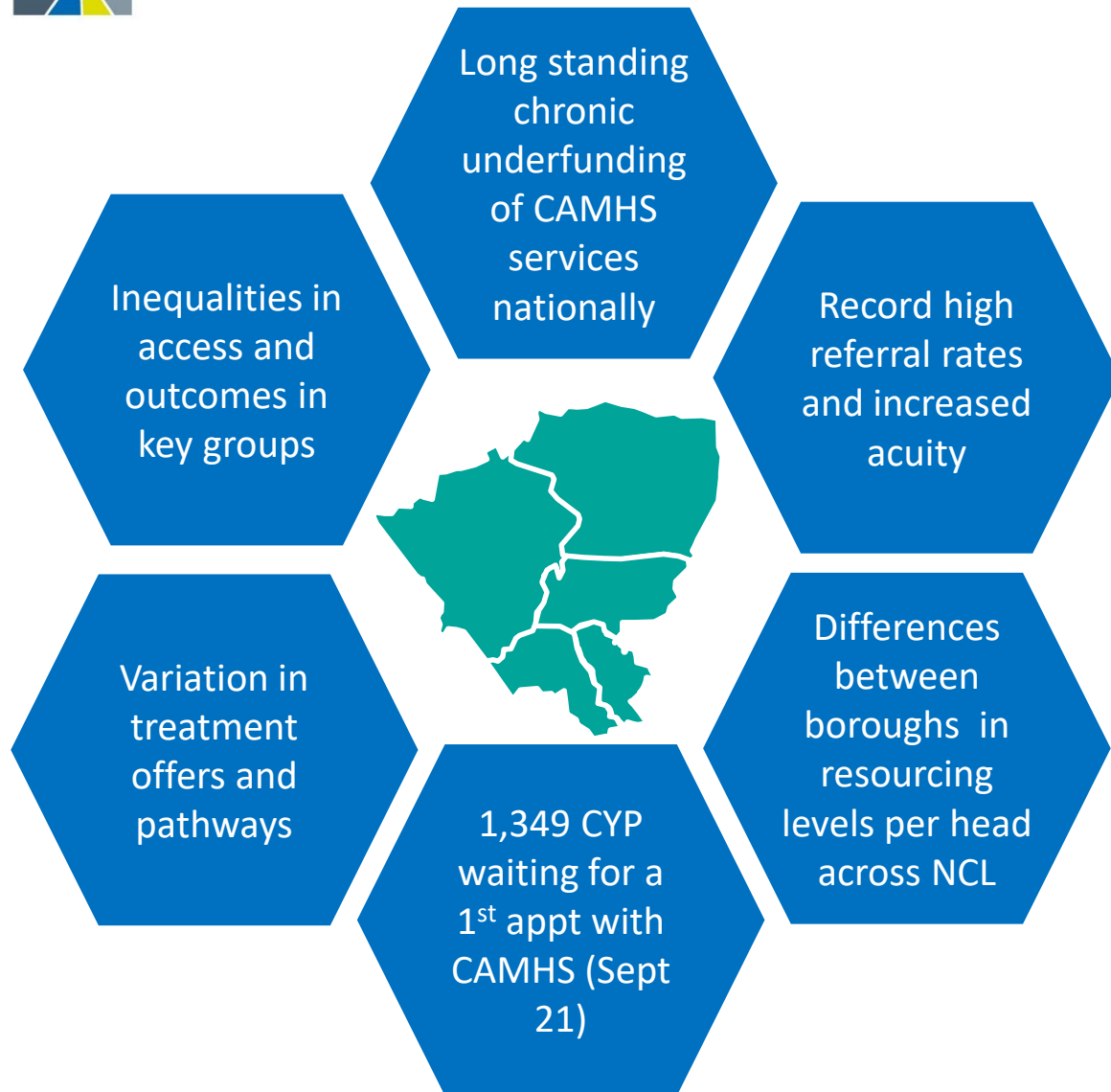


Our CYP MH and Wellbeing Transformation Plan has been informed by:

- Engagement undertaken with CYP and families across the boroughs
- The NHS Long Term Plan and its commitments to CYP mental health
- Covid recovery planning
- An external audit – ATTAIN NCL System Mapping and Borough Modelling with THRIVE framework for system change (Wolpert et al., 2019) principles based recommendations
- An NCL wide review of Mental Health offers for children and adults
- Local needs analyses undertaken in boroughs
- CQC visit to NCL regarding provider collaboration for CYP MH during the pandemic period.



Our System Challenges



Our pressures:

- Rising demand has meant that 670 Children and young people were waiting more than 4 weeks for a first appointment with community CAMHS in August 21
- Particular pressures in Enfield and Haringey
- 155% increase in referrals to our Eating Disorder Intensive Service between 2020/21 and 21/22
- Out of Hours referrals to crisis services grew from 21 in April 2020 to 108 in March 2021
- Too many children waiting longer than 12 weeks for Autism assessment
- Demand for CYP MH services has been forecast to grow by 20-30% following the impact of Covid-19
- Some specialist MH placement providers have had issues with maintaining a highly skilled, trained workforce during the pandemic, resulting in significant quality concerns raised about several care providers. A new Quality Assurance Framework for children and adults developed together with ICS partners will work to address this

What we want to achieve through this plan

Our vision:

“Children and young people living in North Central London grow up knowing how to protect and develop their emotional and mental health and wellbeing and they and their families get the right help from the right place quickly to support their mental health if they need it”

We want CYP in NCL to be able to:

- Have access to high quality information, advice and guidance to support and protect their physical, emotional and mental health and wellbeing – ensuring we better understand and target and tailor support to groups of children and young people where evidence tells us the risk of emerging mental health needs is higher
- Access advice and support in a range of ways including online and through their schools and wider communities, when CYP have emerging or lower level mental health and wellbeing needs. Ensuring greater equity across NCL in the support available.
- Get support from professionals who think about both their mental health and physical health needs holistically, thinking about all the factors that impact on a child and young person’s wellbeing.
- Access the right mental healthcare support more quickly and experience less variation in waiting times across NCL.

What we want to achieve through this plan

- Be supported quickly if they experience serious mental illness, at home and/or out of hospital wherever possible. We want to see further reductions to the number of inpatient mental health admissions.
- Be kept safe, by ensuring self harm and suicide risk factors are identified early and managed safely through strong multi-agency networks.
- Be able to access a wider range of specialist support for CYP with disordered eating concerns, in the community wherever possible.
- Access and complete autism diagnostic assessments more quickly, where autism is suspected.
- Experience a sustained and more equitable offer across NCL of pre and post diagnostic support for children and young people with learning disabilities and/or autism including those with behaviour that challenges. We will continue to support more young people with the most complex needs closer to home and outside of inpatient settings.
- See more consistency across NCL in the emotional health and wellbeing support offered to families of children under five
- Have access to greater support for those young adults moving between CAMHS and adult mental health services

NCL Guiding Principles for CYP MH and Emotional Wellbeing Delivery

- ✓ **MHIS invested into CYP MH services at a faster rate than adult MH services**
- 1. Commitment to addressing inequality– ensuring services are accessible and sensitive to the diverse communities that make up NCL, in addition to addressing structural inequalities, so investment goes where it is most needed
- 2. Service user input from CYP and their families must be central to service transformation
- 3. Shift prioritisation towards community and school-based settings for earlier intervention, proactive care management and step up/down services
- 4. Partnerships are key to delivering integrated services (particularly working together across the LA, Education, VCS and mental and physical health)
- 5. Ensure CYP in NCL experience no wrong door, minimal hand-offs and joined up, consistent care offers wherever they present.
- 6. Workforce wellbeing and sustainability at the heart of ensuring quality services
- 7. Continue to grow our analytics capabilities so we can make evidenced based decisions on robust, timely data
- 8. Shared service standards across NCL CYP MH and wellbeing services or ensure CYP receive timely, quality care and support, regardless of where they present or live.
- 9. To focus on holistic services which improve outcomes for CYP and their families, implementing THRIVE - the Thrive Framework for System Change (Wolpert et al. 2019)

Coproduction Informing This Plan

Engagement and coproduction are key strategic priorities for our CYP mental health and wellbeing service developments.

- In every borough, local teams have involved children, young people and families in developing services. Our residents have been involved in workshops and working groups, shared their views and experiences through a range of consultation exercises and shaped services by sitting on interview and procurement panels.
- In NCL CCG our Mental Health strategic review was informed by feedback from CYP and parent groups
- Our provider collaborative engaged with parents and service users to develop their strategic health needs analysis
- We have developed a co-production workstream to share good practice and drive improvements.

The next slide highlights just a few examples of co-production and engagement since our last Transformation Plans were published.

Spotlight on NCL co-design project

- A group of parents and young people with lived experience have been supported to undertake projects related to system-wide codesign.
- The group co-designed a NCL Home Treatment Team model, reviewed a Great Ormond Street Hospital research proposal and developed a mental health wish list that has been utilised by numerous A&E depts across London.
- A report outlining the approach, learning, outcomes and learning points has been created and the group continues to meet to take part in service design and review.

Spotlight on borough: Barnet

- A Peer Champions Pilot ran in two secondary schools delivering a Champion Mental Health First Aid course to selected 6th form students. A follow up co-production workshop was held with students to explore how they use the training to fit within their school ethos.



Borough Examples of Co-production & Engagement

Barnet

The Barnet Integrated Clinical Services (BICS) Youth Engagement officer carried out a post lockdown September 2021 service user engagement survey and forum on what affects their mental health; how they access support; how they would like to contribute to content and delivery; what they would like in return for their participation.

Enfield

[How Are You?](#) - launched in Mental Health Awareness Week 2021. This was developed by the Young Mayor with young people from Kratos and Our Voice (with support from LBE Educational Psychology Service, LBE Strategy Team, LBE Libraries and LBE Youth Development Services)

Camden

2020 CAMHS virtual Takeover Challenge week took place in schools on the theme of Lockdown including a challenge related to lockdown and mental health resulting in recommendations to Education, Health Council staff and elected members on their views for future service development

Islington

Participation project led by an organisation called Peer Power, engaged with over 100 young people some of whom on edge of criminal justice pathways or already known to YOS, to understand how they want to access health services.

Haringey

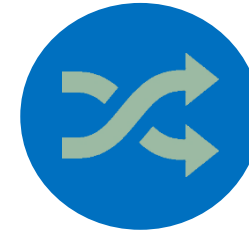
Worked with social enterprise 'Ideas Alliance' to reimagine mental health support for CYP in Haringey in preparation for a 100 day kick start challenge. Scoping with local stakeholders showed support for co-creation with CYP/families and a collaborative system accessed through one front door

Major Achievements Across NCL Since Plans Last Published



Embedding a strong foundation of collaboration and delivering value

- Strong partnership working across boroughs, NCL, VCS, LA's and schools – which helped deliver a robust COVID response
- North Central and East London (NCEL) Provider Collaborative: Devolved referral management and commissioning of inpatient beds to our area from NHS England. Reduced admissions and length of stay, releasing funds for a new Hospital at Home Eating Disorders service from 2022
- ICS wide commitment to alignment with the THRIVE Framework for System Change and principles



Significant Delivery Achievements

- The 12 month CYP rolling access rate indicator continues to be well above the annual target - 39.5% (target 35%).
- NCL wide 24/7 crisis line established
- Crisis hubs and Out of Hours service set up
- Mobilised 11 MHSTs in schools across the 5 boroughs
- NCEL Provider Collaborative have reduced inpatient admissions by 34%, Out of Area placements by 73%, Length of stay by 43% and admissions for CYP with ASC down 50%.



Spotlights on good practice

Barnet

Improving MH in schools:

- Successful rollout of mild-to-moderate CYP MH service to *all* mainstream schools in the borough,
- 58% Primary Schools, 43% Secondary schools and 62% Special Schools part of the established Resilient Schools Programme
- New self-harm and suicide protocol in Barnet schools safeguarding policy
- Over 115 MH First Aiders in schools

Enfield

Mentalisation Based Therapy Training / Anna Freud Centre Collaboration - Following a tri-borough CAMHS collaboration with the Anna Freud Centre, a number of CAMHS clinicians have been trained in the child protocol for MBT, with supervision groups running from April-October to embed the learning.

Camden

Camden CAMHS has a specialist service for Looked after children (LAC) and refugee CYP/families. These services are integrated within the Camden local authority to optimise collaborative multiagency working. The team have co-produced videos with both LAC and unaccompanied asylum seeking children (UASC) on what to expect from CAMHS and strategies to support emotional well-being

Haringey

Expanded trailblazer programme through the NCL Inequalities funding delivering sports and arts with therapeutic support, provided by Open Door.

Islington

Islington work on engaging Young black men
The new Elevate Young Black Men and Mental health initiative is a innovative community based, multifaceted and youth led mental Health wellbeing programme designed to support young black men aged 11-25 through a suite of culturally competent therapeutic and mentoring interventions to support young black men to thrive and access the best life opportunities.

Clinical Services Performance Summary

| NHS Long Term Plan indicator | RAG | Note |
|--|--------|--|
| 12 month CYP rolling access rate indicator of 35% | Green | Currently at 39.5% |
| 24/7 Single point of access | Green | In place, NHS 111 link under development |
| Crisis assessment within the emergency department and in community | Yellow | In place and expansion to OOH support to diversion hubs in 21/22 |
| Intensive Home Treatment service aimed at CYP who might otherwise require inpatient care | Yellow | Pilot planned for 21/22 and bid to be submitted via accelerator for short term bed base increase |
| Continue to invest in workforce and training | Yellow | Investment in 21/22 and plans re workforce development |
| Advance mental health equalities in children and young people's mental health services | Yellow | Lived experience group in place. Data recorded but not flowing to MHSDS |
| Eating disorders: deliver the waiting and access standard. 95% of CYP with a suspected eating disorder should receive (NICE)-concordant treatment within a max. of 4 weeks from first contact with a designated healthcare professional for routine cases and within 1 week for urgent cases | Red | Urgent – 91%/ 95% target and routine – 74%/ 95% target |
| Eating disorders: deliver effective evidence based services, to include support for children and young people presenting with avoidant restrictive food intake disorder | Yellow | ARFID planned as part of 21/22 investment |
| Local indicator | RAG | Note |
| Ensure CYP waiting times standards are met across NCL | Red | Planned improvement in 21/22 based on trajectories |

Our Progress and Priorities

- **THRIVE framework;** Children and Young People’s Mental health and wellbeing services in NCL are working towards being organised and delivered within the THRIVE framework. This consists of support falling into one of 5 domains, recognising CYP and families may move between domains
- **Priorities;** Across the THRIVE domains, this plan sets out our progress since our last Transformation Plans were published and our priorities going forwards. We have priorities reaching across all our boroughs as well as borough specific priorities
- **Meeting needs holistically;** Boroughs have worked to gather and incorporate feedback from their residents and are instrumental in developing a seamless interface with the social care and education offers to holistically meet CYP and their families’ needs
- **Mental Health Strategic Review;** In 2021/22 NCL CCG has undertaken an NCL wide strategic review of all our community and mental health services segmented by age group. Through a series of workshops a ‘Core Offer’ for health services has been developed setting out our aspirations to delivering an equitable and high quality offer across NCL, aligning access criteria, hours of operation, referral pathways etc. As such, this work will inform our workplan and priorities as we move towards becoming an Integrated Care System. The Core Offer and our analysis of work to do to address gaps in achieving this offer has shaped the plans that follow.

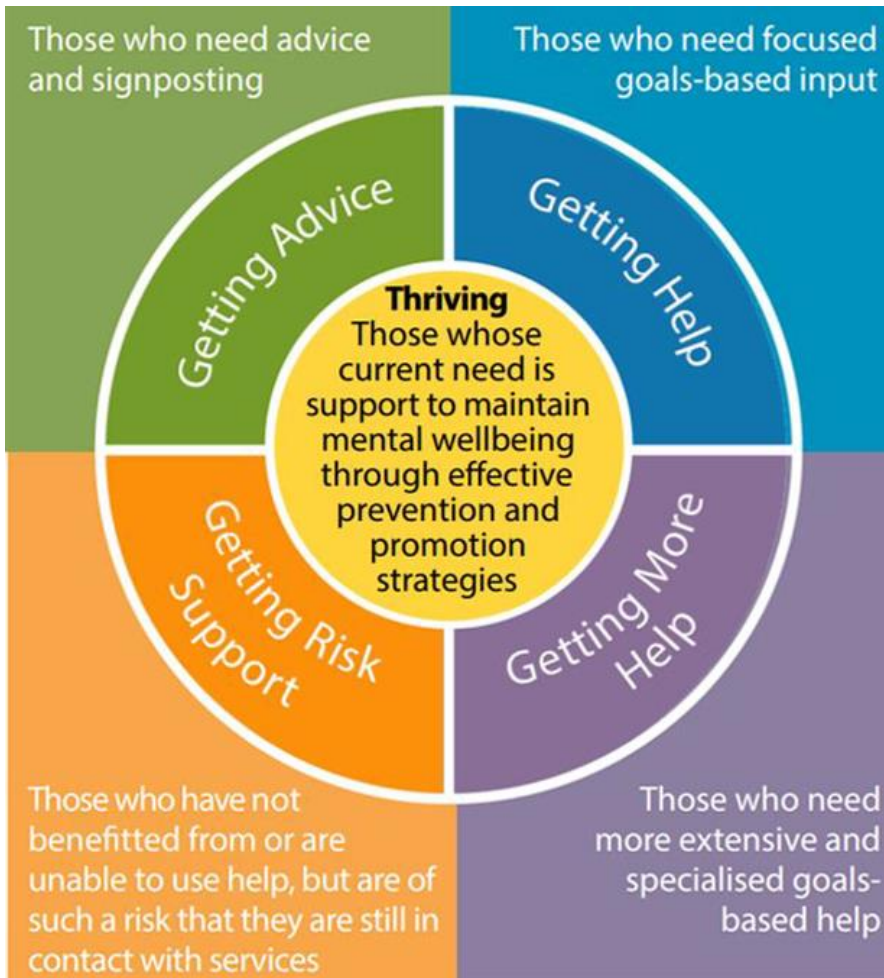
The next section of this plan sets out progress towards and future priorities in achieving these ambitions across NCL and in each borough across the THRIVE Framework for System Change.



THRIVE* Approach

This diagram sets out the THRIVE domains around which this plan is organised [**THRIVE Framework for system change*](#)

Universal services focused on early identification and prevention. Available from within schools, GPs health visitors and other universal services



E.g. - Targeted services/provision: low intensity interventions that can be delivered through universal settings or within VCS services, with provision aimed at identified groups with specific identified needs and/or considered to be vulnerable. Also available online.

System wide partnership working with shared responsibility and accountability to build capacity to support CYP presenting with a range of complex need and risk. Eg. breakdown of family/ educational placement, engagement with youth justice and frequent MH crises

E.g. - Specialist community CAMHS provided by various NHS organisations including

- Tavistock & Portman NHS FT
- Whittington NHS FT
- Barnet, Enfield and Haringey FT
- Royal Free NHS FT
- Inpatient CAMHS (facilitated through the NCEL Provider Collaborative)

THRIVING

In NCL, we support promotion of mental health and wellbeing by:

- Developing and sharing prevention and health promotion information that keeps our children, young people and their families informed about how to maintain mental wellbeing and spot the signs that extra help or support may be needed.
- Working closely with a range of partners who are in contact with CYP and families every day in settings such as school or children's centres as well as through harnessing digital and other means to share the message to all parts of the population.
- Valuing children and their families as key delivery partners - peer education can be a powerful means to share messages about mental health and wellbeing.

Since the last plan, across all our boroughs we've seen:

- Recovery support to schools returning from lockdown, through the Education for Wellbeing project and other local initiatives
- CYP and Parent Participation groups continued through lockdown, often virtually
- Partnerships growing in strength, brought together by the pandemic

Across NCL, our future 'Thriving' priorities are:

Digital innovation

Improve the digital offer and digital innovation in sharing mental health and wellbeing advice

Partnership working

Continue working with key delivery partners such as Public Health teams across NCL to analyse needs, target health promotion campaigns and root our work in an understanding of the wider determinants of health. Including strengthening engagement with groups of CYP where MH needs can be higher, e.g. young black men, LGBTQ+ YP, Looked After Children and care leavers

CYP voice

- Improve our approach to involving YP in key decisions about care, prevention and health promotion
- Review peer to peer engagement and education models across NCL, moving to address inequalities where necessary

Borough progress in the 'Thriving' domain

Haringey

- Increased the capacity of Anchor Project to support all Haringey schools trauma informed-practice. This is a systemic model to improve relationships within schools.
- Increased mental health training across the CYP workforce and Haringey Academy.
- Public Health and CCG implemented Haringey Schools and Colleges in Mind, planned for Senior Leadership within Schools/Colleges

Enfield

- New networks set up – for example: 'Babies in Lockdown', 'Enfield Thrives Together' and 'Mental Health Lead networks'
- 16 Schools were awarded the Sandwell Wellbeing Charter Mark. The *Enfield Thrives Together* Bulletin provided further information to schools on service offers.
- 'How are you' film produced:
<https://www.youtube.com/watch?v=C4GSeQvPFww>
- Enfield Trauma Informed Practice in schools (E-TIPS) partnership initiative began in July 2020, training 180 professionals.
- Emotional Literacy Support Training underway – 48 ELS Assistants working in schools

Barnet

- Development of whole school training to raise awareness of MH signs and symptoms in 2019/20
- Development of RS website to provide MH and Resilience resources, support and signposting for schools <https://wwc.barnet.gov.uk/wwc/working-children-barnet/information-schools/resilient-schools-programme> and Resilience in Schools Forum offering training and guidance in whole school resilience
- Updates to Barnet Local Offer and Barnet Integrated Clinical Services websites to keep families informed and provide links to online resources (eg podcasts)
- Early years and Early help groups, workshops interventions in children and community centres.
- Space2Grow – LA funding for 5 VCS project as part of early intervention offer
- Support for pastoral staff through a new forum
- Commissioning of Brook to support RSE in secondary schools and youth sector and building sexual health and emotional resilience, including direct counselling support through the 'my life programme'
- HSL programme supporting whole school approaches to health and wellbeing with some schools focusing on mental and emotional resilience.



Borough progress in the 'Thriving' domain cont'd

Islington

- Developed a framework to support a whole school approach to mental health and resilience in schools: iMHARS (Islington Mental Health and Resilience in Schools www.islingtoncs.org/imhars).
- Trauma informed training is being rolled across Secondary/ Primary schools to embed trauma informed principles and ways of working to support whole school approaches in responding to children affected by trauma and effects of intergenerational trauma
- In 2019, launched a central point of access for CYP to access all social, emotional and mental health services (SEMH), integrating CAMHS into Islington's Children's Service Contact Team (CSCT) front door. Operating from the principle of 'no wrong referral' the model extends beyond traditional CAMHS settings to improve access into a wide range of health, social and digital community-based services for local CYP.

Camden

- Recommissioned mental health-focussed peer support. Young people in the peer support programme have fed back that the sessions and training have helped with, identifying their own MH needs, sharing experiences, supporting others and developing their own resilience tools. Evaluation results show that 72% of participants improved in their overall mental health and emotional wellbeing, 78% said they feel more optimistic about the future, and 77% felt able to deal with problems well.
- TIPiC (Trauma-Informed Practice in Camden) training and support to schools to implement trauma informed approach to provide an effective response to children and young people who have experienced trauma

Borough plans in the 'Thriving' domain

Barnet

- Collaboration with Youth Realities and Barnet young people to co-produce a campaign style film, addressing the impact of the digital world on mental health and increase awareness of how to stay **mentally and physically** healthy
- Suicide Prevention Training and at least one Mental health first aider for all schools
- Commissioning of Peer Champion Training for Secondary Schools to increase self-esteem and confidence, and reduce the stigma of poor mental health
- To support the wellbeing of Autistic CYP peer support groups and programmes are being rolled out & develop training packages and links to the parent carer forum
- School Training on Mental Health for Autistic students in collaboration with CAMHS
- Develop resources for Autism training packages and strengthen links with Barnet Parent Carer Forum

Haringey

Address gaps in universal emotional health and wellbeing work using Thrive framework.

- Develop an approach to supporting mental health support in early years settings, working across Early years, public health, VCS and NHS partners to maximise impact and value for money.
- Work with Early Help and Early Years Services to improve CYP workforce understanding of intersection of mental health and neuro diversity.
- Undertake a review and refresh of our communications and information resources to support people to navigate mental health and wellbeing services.

Enfield

- Mental Health Leads Network Meeting will be open to Mental Health Leads across all schools
- Engage with schools to plan new support to enhance the health and wellbeing needs as a school community; and establish a whole school approach to physical and mental wellbeing steering group
- The Anna Freud 'Link' Programme will be working with Enfield partnership from January 2022.
- Continue to roll out the Trauma Informed Practice initiative as a whole system approach.
- A Public Health approach to Youth Violence Reduction is in development



Borough plans in the ‘Thriving’ domain cont’d

Islington

- Continue to roll out Trauma Informed Practice across secondary and primary schools
- Develop a joint commissioning approach to deliver a transformation programme/ provision to support children aged 0-7 with autism, including whole workforce practice and training on Autism, to strengthen understanding of autism and approaches
- Working with schools (alongside health and wellbeing team) to develop guidance for schools on the new senior mental health lead role
- Roll out of families learning about self harm across schools.

Camden

- Recommission mental health-focussed peer education and peer support service, involving CYP in all elements of the process
- Evaluate our universal information offer to highlight areas of focus
- Further explore how young people access information (particularly digital formats) and tailor communications projects to provide better reach
- Undertake work to define, further develop and embed a public health (asset building) approach to mental health and wellbeing

Getting Advice

In NCL, we want to ensure those who need advice and signposting can access this at the earliest opportunity by:

- All professionals working with CYP and their families being able to identify and support these CYP to access early mental health support
- 24/7 access to an online offer of information and support
- Ensuring a wide range of VCS and LA provided community based mental health and wellbeing programmes across all boroughs
- An universal offer of training and support to Health, education and care staff in all settings
- Whole school approaches delivered through Mental Health in Schools (Support) Teams (MHSTs)
- CAMHS liaison and in-reach into every school
- Tailored approaches to address inequalities in access to mental health and wellbeing services

Since the last Transformation plans were published, across all our boroughs we have:

- Rolled out Kooth, an online counselling service, in all our boroughs
- Established a 24/7 crisis line established and improvements to 111
- Expanded and embedded Mental Health in Schools Teams in most boroughs

Across NCL, our emerging Getting Advice priorities are....

Provide a range of ways to access advice and support

- Recommission digital counselling e.g. Kooth across NCL
- Enhance blend of digital and face to face offers

Expand Mental Health in Schools Teams

Roll out new MHSTs in Enfield, (2021/22), Haringey and Camden (2022/23) and Enfield and Islington (2023/24)

Enhance CAMHS in Schools

Review the CAMHS in schools offer in all boroughs to identify key gaps

Borough progress in the 'Getting Advice' domain

Islington

- Developing our Trailblazer Programme of MHSTS, building on the existing service offer within schools to deliver increased early intervention programmes. So far the trailblazer programme has: In 2021 in last quarter, Supported 265 young people/families through groups or 1:1 interventions.
- Delivered 28 groups or workshops in 19 schools. Supported other SEMH partner services with high levels of need Consulted on the model for scaling up to work with all mainstream schools. Set up meetings at additional 30 primary schools this term – to be fully operational in all mainstream schools in September
- Developed small multi-disciplinary teams of support and expertise across schools, including CAMHS clinicians, SENCOs, Education Mental Health Practitioners (EMHPs) and Educational Psychologists.
- Good range of personalized bespoke services for parents, KOOTH counselling and supportive forums for Children and Young People.
- Significant additional local funding into the VCS has increased capacity by providing access for a minimum of 500 children and young people into community-based counselling and therapeutic services.
- Piloting Families Learning About Self Harm (FLASH) group this term and Sibs pilot group (supporting siblings of CYP with additional needs)

Camden

- Delivered a new Wellbeing Champions programme-primary and secondary pupils trained to raise awareness about mental health in their school and educate peers about wellbeing strategies
- Adapted all training and support following Covid and provided an enhanced and increased virtual offer to staff and mental health leads and 18 virtual parent workshops involving 163 parents from 9 primary schools
- Developed and coordinated a new peer support for staff wellbeing programme-a collaboration between Camden Learning, Tavistock, Brandon Centre (VCS provider) and Camden Educational Psychology Service to provide regular small group sessions for staff on mental health topics, staff wellbeing and consultations about difficult cases, open to all staff in schools, delivered by a mental health professional
- MHSTs have delivered a range of workshops on topics worrying CYP and parents post lockdown, and facilitated parent webinars and groups on healthy transitions including one in Bengali
- Production of videos with both Looked after Children and Unaccompanied Asylum Seeking Children on what to expect from CAMHS and strategies to support emotional well-being



Borough progress in the 'Getting Advice' domain

Barnet

- Through co-production with parents/ carers and CYP, BEH have restructured their clinical pathways using usage data to create a clear offer to families accessing the service. Enhanced communication and clarity of offer are key components of the offer.
- Barnet Public Health has a roll out Resilience School Programme since 2017 and over 70 schools are now participants.
- Barnet has over 100 trained Mental Health First Aiders that can be also accessed through dedicated support lines
- BICS has rolled out MHSTs and CWP's to all 130+ mainstream schools in the borough as well as low-intensity offer across GP surgeries
- Universal workshops co-produced with young people and offered by BICS virtually or face-to-face in schools, EH hubs, libraries etc.
- BICS Support Line established for YP, parents/carers, education staff and professionals for easy access to guidance, support and signposting (Monday-Friday, 9am-5pm, response time within the day)
- Piloted a BEH programme for self-re-referral into the service (2020)
- Development of a responsive short breaks offer for children with a disability
- Development of an early intervention/prevention offer for families experiencing autism – with VCS - Resources for Autism

Borough progress in the 'Getting Advice' domain

Enfield

- Mental Health in Schools teams launched in 2019 and MHST future funding was secured, meaning 50% coverage of the borough's schools,. The MHST future funding wave 5 has been secured meaning 95% coverage. Network meetings were established with schools to enhance timely advice and signposting
- Virtual panel events held with Healthwatch and Our Voice ran to provide CYPMH advice to public during lockdown.
- Children's Wellbeing Practitioners complemented the MHST offer by working with non-MHST schools, through libraries and with Early Help – developing pre-recorded webinars on key areas.
- Enfield Thrives Together Bulletin provided further information to schools on service offers.
- Children's portal and SEMH Local Offer is in place.
- EPS Telephone Support were established, providing parents/carers easy access to advice and guidance throughout the pandemic. Calls responded within 3 days.
- Kooth offer integrated into the Enfield Thrives Together Network meetings presenting to partners and schools through various forums and meetings.

Haringey

- Implemented the Trailblazer Pilot and expanded it through the NCL Inequalities funding through sports and arts with therapeutic support provided by Open Door and others.
- Implemented a digital offer Kooth, NHS GO and Good Thinking, and ran parent/carers and CYP webinars in Pandemic
- Strengthened the role of VCS organisations such as Open Door, Hope in Tottenham, Deep:black and Mind in Haringey
- Healthy Schools programme has agreed to coordinate social emotion and mental health information and mental health training programme in its newsletter and website.
- Haringey CHOICES open access self-referral team offer one to three therapeutic sessions for support and advice for Haringey CYP and families to enable better navigate access to social, emotional and mental health support offers in the borough.



Borough plans in the 'Getting Advice' domain

Islington

- Establish 2 further MHSTs over 2 localities
- Annual progress and evaluation review of impact and outcomes achieved by the MHST schools trailblazer programme

Haringey

- Implement in 22/23 more coverage of Mental Health Support Teams in schools and integrating that with Healthy Schools programme, Early Help Strategy and other school approaches to meeting need, improving outcomes and reducing exclusions. Extend the offer further through use of Inequalities funding
- Refresh advice and information under Preparing for Adulthood
- Learn from work in Camden and Islington about integrating front door access for mental health support
- Embed CAMHS practitioners within key Council Services

Barnet

- Working with Barnet Parent Carer Forum to develop a You Said We Did as part of CAMHS service development.
- Continued partnership working LA and VCSE to commission local initiatives relevant to population
- Continued low intensity delivery within School and community
- BICS to run train the trainer: eating issuers, neuro/learning disabilities and gender diversity training
- Opening of new Autism Support Hub in Barnet in 2022 incorporating respite provision.
- Development of social care Autism Team
- Embedding effective autism pathways across partnerships
- Establish and embed post-diagnostic support and parent support groups



Borough plans in the 'Getting Advice' domain

Camden

- Continue and further develop the Peer Support for Staff Wellbeing programme in collaboration with EPS, Tavistock and Brandon Centre
- Pilot a new project to engage young males from Black Asian and other ethnicity backgrounds to share lived experiences and support local mental health services to become more culturally competent
- Continue provision of advice, information and training to schools that supports the return to school and addresses the on-going impact of COVID-19 on staff, parents and pupils

Enfield

- The Enfield Council website is being transformed, which will improve access to advice and signposting.
- Mental Health Leads Network Meeting for all schools launching in October. Key strand will be signposting information.
- Social Prescribing continues to be built on.
- Pilot initiated for peer support workers will be evaluated and reviewed.

Getting Help

In NCL, we want to ensure those who need focussed support from a service to meet their mental health needs:

- Have a holistic assessment and timely access to support services with coproduction of a care plan at the heart of the intervention.
- Get support from services offered flexibly, delivering interventions at times and locations that fit in with family life.
- Access care integrated across health, education and social care, ensuring that the most appropriate service is identified mental health support is in line with other plans or needs identified by the team around the child/family.

Since the last Transformation plans were published, across all our boroughs we have:

- Rolled out and developed approaches to reducing waiting times through 4 week wait pilot funding in Haringey and Camden
- Undertaken an external audit through the ATTAIN programme and used findings to inform how services develop
- Increased joint working between Trusts to share practice and support mutual aid where needed
- Introduced virtual appointments alongside face to face care, learning from pandemic experience

The next slide shows our waiting times for NHS CAMHS services as at August 2021. We have seen significant growth in referrals this year and going forwards, our priority is to work together to manage the level and acuity of need our children and young people are experiencing,

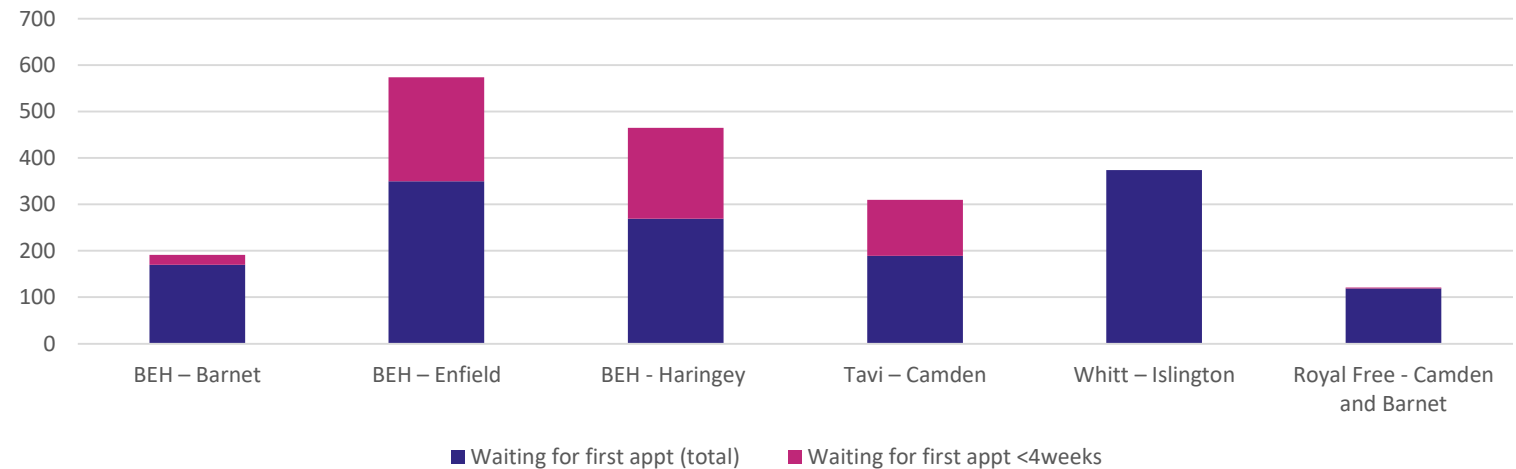
Waiting times and access across CAMHS services

- Like all CCGs, we measure the percentage of CYP estimated to have a diagnosable mental health condition who are in contact with a mental health service. Not all CYP with a diagnosable condition will need services. **We are above the national target of 35% with nearly 40% of our CYP accessing a service**

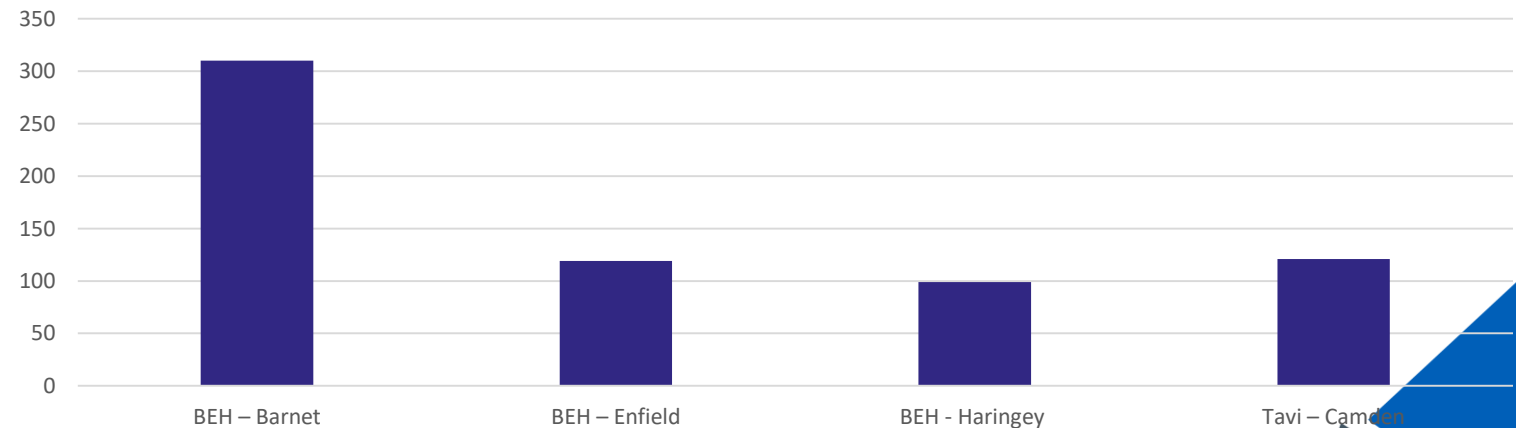
However rising referrals mean that:

- 1,471** CYP across **NCL** are currently (Aug. 2021) waiting for a 1st appointment with NHS CAMHS
- 679** CYP (42%) are waiting over 4 weeks
- 649** CYP are currently waiting for a 2nd appointment

Waiting times at Aug 21 across CAMHS



Waiting for second apt (total)



Getting Help

Some of our challenges are:

- Different levels of coordination between Education, Social Care, Early Help, Youth Services, voluntary sector and all MH services in different boroughs
- Not all boroughs have 14+ supported accommodation for CYP with MH needs and transition support generally varies
- Variation in CAMHS services and pathways for under 5ys
- Variation in provision of targeted support for groups including unaccompanied minors, those in pupil referral units and looked after children (LAC) and care leavers

Our emerging plans and priorities across NCL are:

Target and tailor support to address inequalities

- Share good practice and strengthen offer for LGBTQ+ CYP
- Improve consistency of targeted support offer for key groups such as unaccompanied minors, those in pupil referral units and LAC and care leavers
- Work with the Lighthouse Child Sexual Abuse centre to mitigate the impact of a MOPAC/NHS England pilot ending and funding reducing.

Integrating access to social and mental health support

- Build on Islington's Central Point of Access model to Implement single points of access to social care and mental health services ('Integrated Front Doors'), starting in Camden
- Ensure our support for LAC and care leavers is in line with new NICE guidelines (Oct 21), including building expertise about trauma across the children's workforce and ensuring access to CYP MH services where needed.

Reduce Waiting Times

Invest in interventions to reduce the number of children waiting and waiting times in all boroughs, drawing on NHS, VCS and LA workforce, skills and experience

Borough progress in the 'Getting Help' domain

Enfield

- The CYP access rate for Q1 2021/2022 was 41.9%, above the ICS target of 39%.
- Parenting offer has continued to be offered by a range of local partners
- Further development of Nexus, a community project run by the Behaviour Support Service, partnering with external services/organisations e.g. the Butterfly Project (build self-esteem, confidence and resilience of girls and young women through coaching and mentoring)
<https://www.nexusenfield.com/nexus-projects/butterfly>
- The Youth Offer in Enfield includes the Council's dedicated youth service provision, grant funded targeted youth support provision in partnership with third sector providers and community groups and wider youth offer delivered independently by third sector and community groups. Including targeted youth support
<https://new.enfield.gov.uk/youth/>
- New Health and Wellbeing Youth Worker developed by Public Health and located with the Youth Development Service – delivering social prescribing
- Kooth was built into pathways of specific services, e.g. CAMHS Access and Early Help.

Haringey

- Integrated front door pathway between BEHMHT CAMHS and Open Door, funded to deliver 4 week wait targets, has reduced waiting times and made it easier for young people to reach the right treatment
- Used the learning from 4WW and the NHSE Improvement Team to improve systems within Open Door and Haringey CAMHS & aligned funded opportunities such as Youth Endowment Fund, etc with Trailblazer work to maximise impact.
- Increased jointly funded posts between Council and CAMHS in YOS and the Disability Team
- Rolled out PBS training

Barnet

- Access targets met and exceeded
- Implemented a targeted model for all-age SEND provision across LA, NHS, VCS and Parent Forums with a focus on key transition ages [primary to secondary, 16+, 18-25years]
- BICS UASC-designated clinician based in social care appointed to lead on UASC and refugee offer to Barnet community
- BICS established PHMT and low intensity (MHST and CWP) clinical services
- Family Therapy Clinic
- Kooth online counselling commissioned and expanded
- Early years parenting HUB for families at the edge of care proceedings opened & Parenting Programmes for CYP with ASD/LD/ADHD
- Enhanced offer of therapeutic support for children in care transitioning to adulthood through VCS counselling service,
- Corporate parenting strategy revision prioritises emotional health and wellbeing

Borough progress in the 'Getting Help' domain

Camden

- Improved access rates exceeding target
- Introduced a clinic based programme called Parent Child Psychological support, building on the healthy child programme led by health visitors providing additional universal checks for CYP aged 3-18months
- Whole Family team outreach project promoted engagement and addressed difficulties with attending appointments through discussion with multi-agency network and meeting the YP and family where they are at (home visits, school, park etc)
- Project on Young peoples' reasoning for carrying a weapon to support clinicians' understanding help with discussions around future educational placements
- Reorganisation of multi-disciplinary resources within our MOSAIC child development services to direct resource support autism assessment and diagnosis
- Established 'The Crib' a new project at the Haverstock school which assesses and stabilises children excluded from school using creative therapies
- The Hive (adolescent service) developed a number of new groups in response to suggestions from service users and youth board incl. young black men's and women's group. Introduced new therapies such as CBT and systemic therapy

Islington

- Islington Parent and Baby Psychology Service delivered a specialist assessment and treatment service to over 100 children aged 2 and under in 18/19
- Focus on increasing access to services for vulnerable adolescents and CYP with Learning Disabilities and Autism, as well as young people known to or on the edge of criminal justice pathways (including mandatory speech and language screening for YP entering YOS)
- Developed an All Age action plan to address STOMP / STAMP to support professionals to think about behavioural interventions before prescribing psychotropic medication
- Strategy and plan in place to reduce waiting times for Autism assessment, including streamlined assessment process, single keyworker and improved clinic system.
- Implementation of the new LD and Autism Key worker service.
- The service will be delivered across NCL, working in partnership with health, SEND, social care and education partners as required, to deliver the specified outcomes.
- The Keyworker service will support young people in Tier 4 and those at highest risk of admission, with the aim of reducing inpatient numbers, progressing towards the NCL 2021/22 target of 9 inpatients across NCL. Priority for the service will be given to children and young people who are inpatients, followed by those at risk of admission

Borough plans in the 'Getting Help' domain

Camden

- Launch Integrated Front Door service to manage referrals – integrated between CAMHS and social care/early help
- Provide training to Personal Advisors about talking to young people about self-harm and when they express emotional difficulties
- Roll out mindfulness groups for Looked After young people and Foster carers
- Expansion of the CWP team as the Emotional Wellbeing Service to increase the capacity for mild to moderate mental health difficulties
- Continued partnership providing consultation to Camden YOS ENGAGE team to ensure earliest possible engagement and intervention with CYP in custody
- Work with occupational therapists to grow work on tackling sleep, diet and exercise in relation to exposure to adverse childhood experiences. Target programme at Unaccompanied Asylum Seeking Children (UASC), residential staff and foster carers through training and ongoing consultation

Barnet

- All young people between 11-26 to be able to continue to access Kooth (on line counselling) with plans for targeted promotion to young males and looked-after children and hard to reach groups.
- Develop further targeted work with care experienced young men and young people aged 16+. Based on evidence of local need and feedback from young people. Terapia supports care leavers that have experienced trauma, isolation and abuse.
- BICS: 'getting trauma-informed training and supervision (all children's workforce involved in direct work /practice supervisors)
- BICS: train the trainer incorporating eating issues, neuro/learning disabilities and gender diversity training
- LA and BEH Memorandum Of Understanding for psychiatry input for children in care across the Local authority to be in place and operational
- Early years parenting HUB for families at the edge of care proceedings established
- Joined up Autism pathways including diagnosis agreed and operational

Borough plans in the 'Getting Help' domain

Islington

- Reduce waiting times for Autism spectrum assessments for children 5-18 years. Jointly commission an autism-specific Joint Strategic Needs Assessment (JSNA) topic / chapter
- Identify further data sources across the partnership, collate and analyse in order to build up a better picture of service provision
- Develop our Transforming Care Work embedding system wide work for CYP with LD / Autism including prevention of admission into Tier 4 services and residential provision.
- Address pathways into adulthood by developing a Joint Strategy across Council and CCG to support and set out our ambitions and activity to support 'Progression to Adulthood'
- The LD and autism Keyworker service will support young people in Tier 4 and those at highest risk of admission, with the aim of reducing inpatient numbers, progressing towards the NCL 2021/22 target inpatients across NCL.

Haringey

- Mobilise expansion of core CAMHS services to meet growing demand. Successfully embed all new workers within the borough CAMHS and Council teams
- Continue to improve CAMHS and Council services working relationships and governance
- Reduce waiting lists for speech and language therapies and autism assessments, including better support children and their parents waiting for assessment or having recently had a diagnosis
- Continue to address ongoing inequalities in access to CAMHS amongst some of our most deprived wards.
- Reintroduce access to borough CAMHS services for Looked after Children living in Borough, and address issues in transition (including for those returning to the borough).
- Successfully embed eating disorder liaison workers in borough teams to improve access and outcomes, supported by other teams including the Autism Team
- Improve ADHD care pathways, e.g. with a nurse prescriber.



Borough plans in the 'Getting Help' domain

Enfield

- Expansion of Enfield's Advisory Service for Autism (0-25) – a multi-agency offer to schools, parents/carers and CYP
- Development of the Speech and Language Communication Hub – a multi-agency to increase access to support in this area.
- Expansion of CAMHS digital offer
- Continue to review Child Development Service waiting times for autism diagnosis and adapt pathway to ensure early access to services such as CAMHS at key stages
- Roll out Disrupting Exploitation package for the secondary schools to support CYP with speech and language needs at risk of exploitation.

Getting More Help and Risk Support

Some of our children and young people will need intensive and specialised support from across the system to meet their needs. Since the pandemic, we have seen the number of children experiencing a mental health crisis grow. We have also seen a sharp rise in the number of children and young people with eating disorders. Conversely however, fewer young people are entering inpatient CAMHS – and our ambition is to reduce this even further, ensuring children and young people have timely access to practitioners and services skilled to meet their individual needs, including;

- 24/7 support for children experiencing a mental health crisis
- Risk Support available for CYP with high needs who are not currently in a space to actively utilise treatment to ensure they stay connected and the integrated networks of professionals and family/carers are clear on the plans to mitigate risk and pathways to escalate
- Access to Positive Behaviour Support/Non violent resistance training for professionals within health and social care
- Good paediatric liaison to coordinate between hospital, social care and CAMHS
- Support for children and young people with particular needs such as disordered eating concerns or conditions

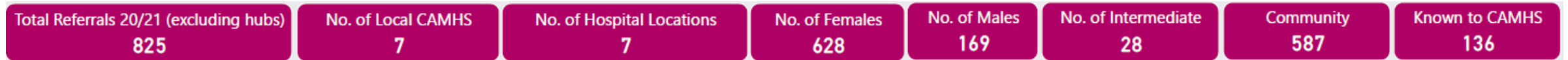
Since the last Transformation plans were published, across all our boroughs we have:

- Rolled out Crisis Hubs during the pandemic so families can get support outside of hospital and an Out of Hours Service
- Implemented a 24/7 Crisis telephone line
- Increased paediatric liaison capacity
- Increased capacity in our Eating Disorders Intensive Service (EDIS)
- North Central and East London Provider Collaborative have reduced the number of inpatient admissions by 34%, Out of Area placements by 73%, length of stay by 43% and admissions for CYP with Autistic Spectrum conditions down 50%.
- Introduced Transforming Care Prevention and Support services (TCaPS), providing support for families and young people with Learning Disabilities, autism and/or challenging behaviour

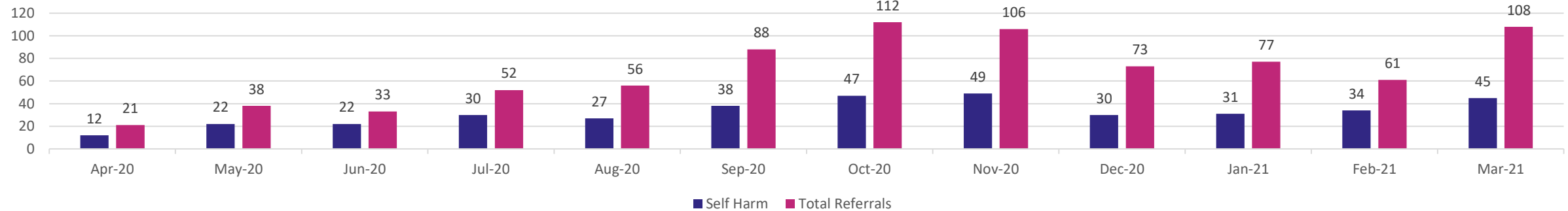
Performance - CYP in Crisis Data

More children and young people are being referred for mental health crises.
Referrals have increased from 21 in April 2020 to 108 in March 2021.

NCL CYP MH Crisis Service Summary Apr20 – Mar21



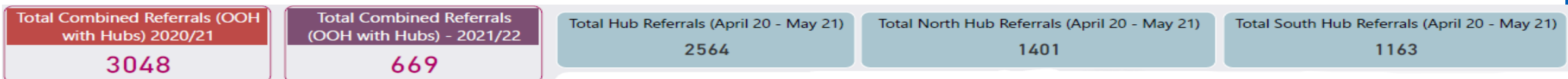
CYP Crisis Out of Hours Referrals by Month (excluding hubs) Apr20 – Mar21



NCL CYP MH Crisis Helpline Summary Jan21 – May21



NCL CYP MH Crisis Hubs Summary Apr20 – May21



Performance – CYP Eating disorders

- There were significantly more referrals (N=130) in Q1 21/22, compared to Q1 of 2020/21 (N=51), **an increase of 155%**.
- There were significantly more referrals triaged as urgent (N=30) compared to last year (urgent n=15).
- This is undoubtedly a result of Covid and the lockdown, which has led to a nationwide increase in people presenting with ED. This is in line with research evidence demonstrating the negative impact of lockdown on individuals with ED (Castellini et al. 2020). We have seen a steep and consistently rising rate of referrals and caseloads since October 2020.

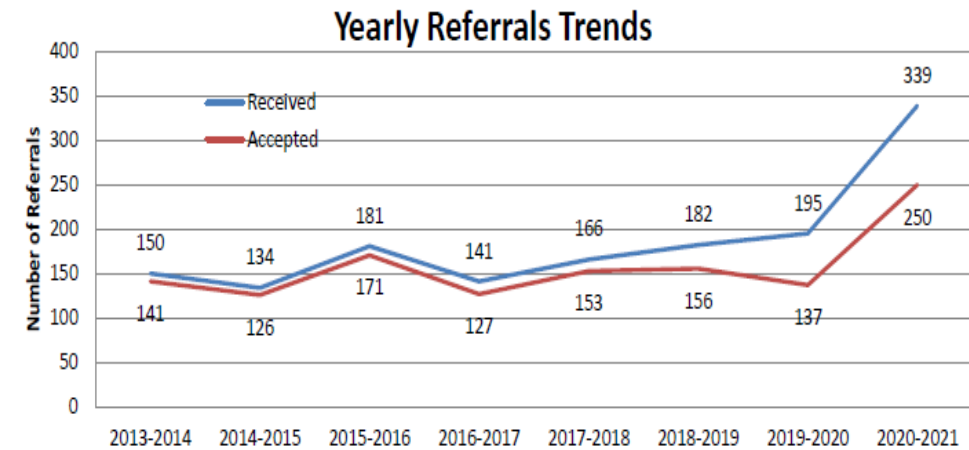
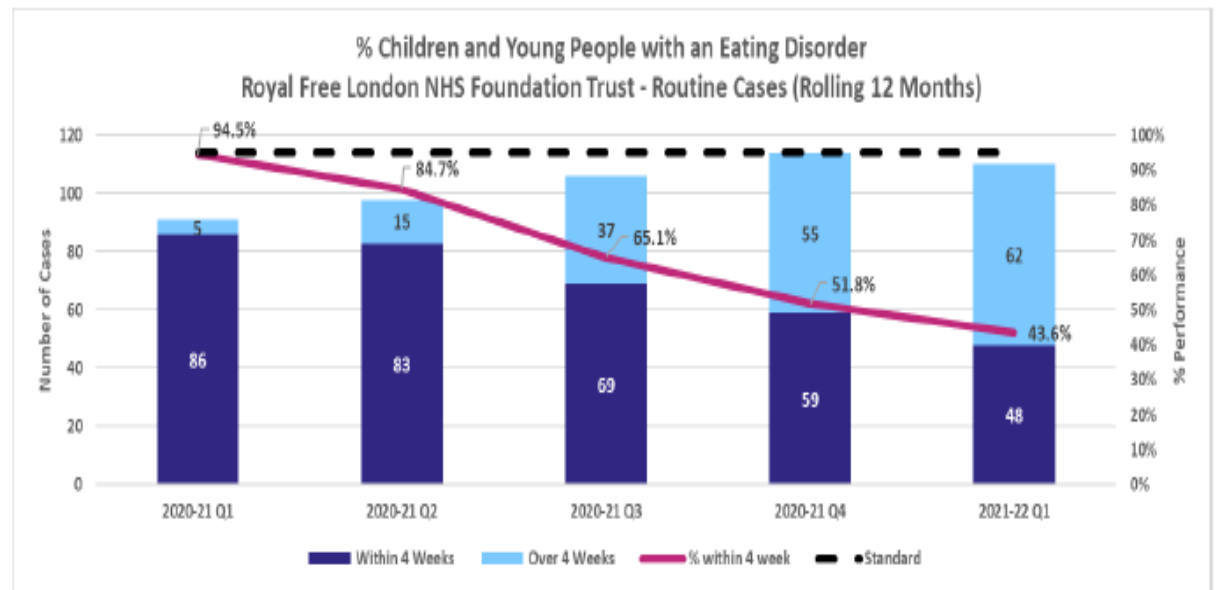
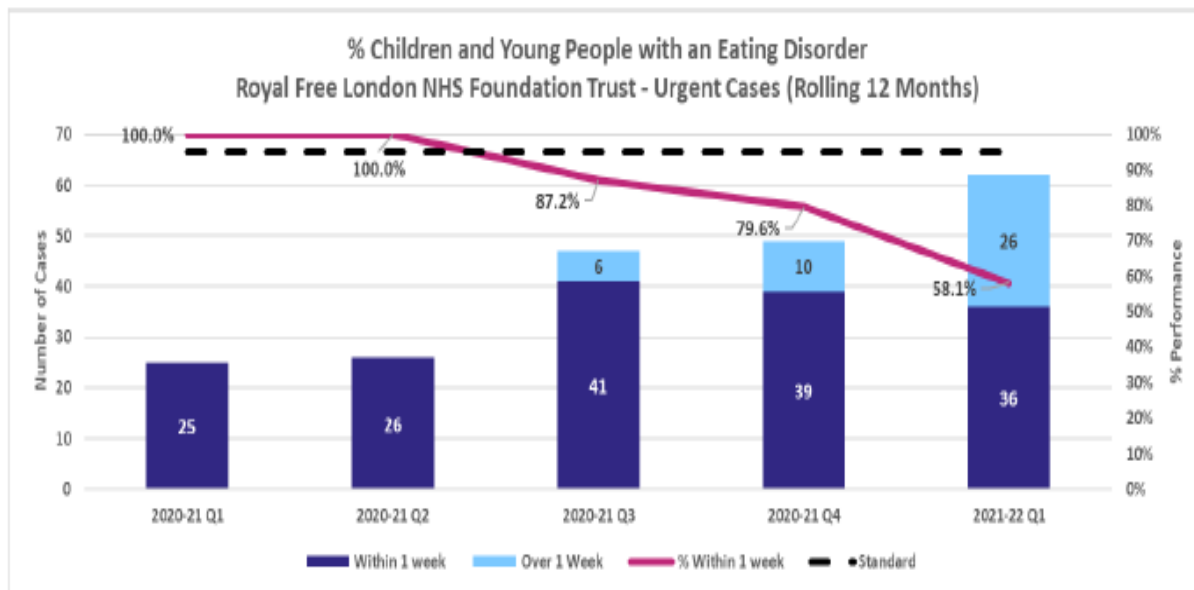


Table 1&2. Children and Young People Eating Disorder Performance – Urgent and Routine Quarterly



Getting More Help and Risk Support

Some of our challenges across all boroughs are:

- Addressing the sharply rising levels in demand and acuity we are witnessing post pandemic, particularly around Eating Disorders. We are also seeing lots of children with multiple needs, e.g. disordered eating and autism
- Ensuring the children's education, health and care workforce recognise risk factors for suicide (see National Child Mortality Database (NCMD) 'Suicide in CYP' report, Oct 21) and continue to work in partnership across our systems to identify and support young people at risk of significant self harm and suicide
- Many boroughs have some home support but not home treatment teams
- Crisis, Out of Hours, Assertive Outreach Teams and Hospital Liaison capacity and staffing models vary between our Trusts
- Gaps in pathways for binge eating and Avoidant Restrictive Food Intake Disorder (ARFID)
- Not all boroughs hold an effective Admission Avoidance Register to prevent young people with autism/LD from reaching crisis and there is no NCL wide register
- We do not have any S136 'Place of Safety' suites in our area

Getting More Help and Risk Support

Our emerging plans and priorities across NCL are:

| | | | | | |
|--|--|---|---|---|---|
| <p>Community Eating Disorders</p> <ul style="list-style-type: none"> • Embed a new NCL Community Eating Disorders service • To work in partnership with local CAMHS with support from Eating Disorders Intensive Service (EDIS) | <p>Eating Disorder Intensive Service and Hospital at Home for ED</p> <ul style="list-style-type: none"> • Increase resource to recover and maintain performance against our targets • Using reinvestment from NCEL Provider Collaborative, roll out an Eating Disorders Hospital at Home service in 22/23 | <p>Avoidant Restrictive Food Intake Disorder</p> <ul style="list-style-type: none"> • New community ED provision to offer ARFID support with training and support from Royal Free | <p>Acute Paediatric Mental Health Liaison</p> <ul style="list-style-type: none"> • Embed additional resources • New consultant and practitioner response at North Middlesex and Barnet Hospitals | <p>Community Intensive Home Treatment</p> <p>Implement a HTT pilot, demonstrating an invest to save impact in NCL.</p> | <p>Dialectical Behavioural Therapy (DBT)</p> <ul style="list-style-type: none"> • Employ DBT service lead(s) • Agree the model and timeline for an NCL pilot |
| <p>Building capacity with the system wide children's workforce</p> <ul style="list-style-type: none"> • Expanding our training offer across all system wide stakeholders including Education, Social Care, VCS, Police and Ambulance Service | <p>Crisis service out of hours</p> <ul style="list-style-type: none"> • Ensure adequate capacity during winter pressures period | <p>Suicide prevention</p> <ul style="list-style-type: none"> • All boroughs and CCG to review and implement recommendations outlined in NCMD Oct 21 report | <p>Access to National and Specialist CAMHS</p> <ul style="list-style-type: none"> • Monitoring outcomes and out of borough investment to review whether we can invest in local service development to deliver care closer to home for CYP needing to access specialist community support. | | |

Crisis, Liaison and Home Treatment

Purple = Transitioning service in 2022/23

Green = new service for 2023/24

Home Treatment Team pilot - Barnet (Hospital @ Home) – Intensive home treatment to avoid T4 admission and improve outcomes

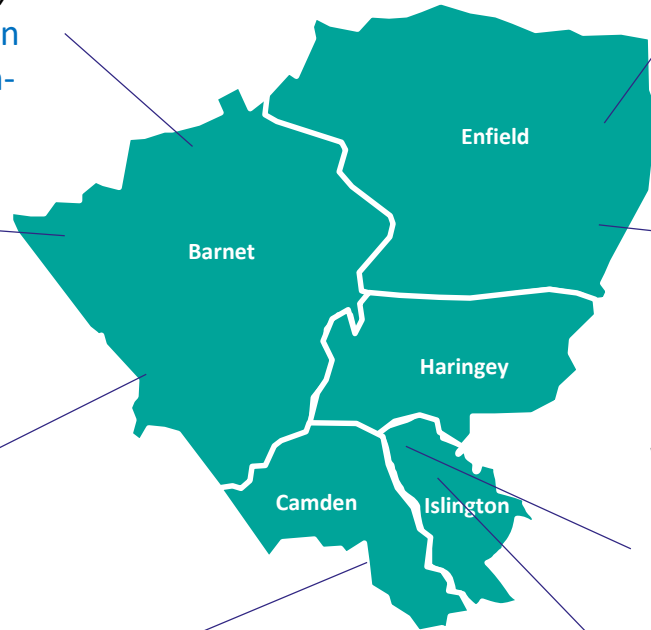
Safe haven– Diversion from A&E for crisis assessment and bedded site for 72 hour admission

Edgware Community Hospital (North Hub) – Diversion from A&E for crisis assessment and treatment – transforming into home treatment teams

NCL Out of Hours team – Crisis response out of hours in NCL. Increase to support 2 x diversion hub sites

BGH - Paediatric liaison on wards, Psychiatric liaison in paediatrics (in-hours)

UCLH - Paediatric liaison on wards, Psychiatric liaison in A&E (in-hours)



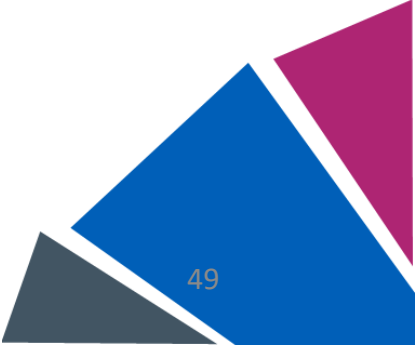
NMUH – Paediatric liaison on wards, Psychiatric liaison in paediatrics (in-hours)

Home Treatment Team pilot - Enfield (Hospital @ Home) – Intensive home treatment to avoid T4 admission and improve outcomes

Whittington Health - Paediatric liaison on wards, Psychiatric liaison in A&E (in-hours)

Northern HC (South Hub) – Diversion from A&E for crisis assessment and treatment – Transforming into home treatment teams

Enhanced NCL 24/7 Crisis Line – Crisis line for all CYP in NCL. Additional CYP specialist clinician to upskill team on CYP advice and support (Increase 9-12am, 7 days per week)



Health and Justice

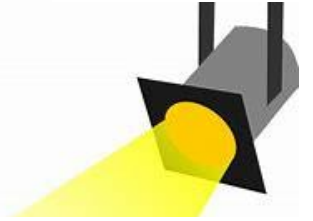
NCL CCG is committed to working with partner organisations to ensure YP who are engaged with youth offending teams are given a care plan and support. There is a commitment to:

- Ensure Plans are developed jointly with key stakeholders in the Justice system including YOT/S, Liaison and Diversion Services, YOIs, Police, Courts, Probation, FCAMHS
- Co-produce pathways with YP their families and carers
- Develop a dashboard to measure outcomes for this group of young people in relation to their care plans
- Understand the inequalities impact on youth offending and develop and implement an NCL wide strategy to reduce inequalities

Our draft action plan for the interface between CAMHS and youth offending services has the following key priorities

- Development of a health in justice task and finish group to review our collective offer and approach to tackling inequalities and develop a multi-agency prevention and intervention strategy
- Inclusion of progress (RAG rated) within the CAMHS transformation dashboard
- Improved links to existing governance structures to ensure visibility, collaboration and cohesion across the NCL footprint
- Evidence of CYP and communities working with agencies to coproduce more effective and efficient services

Spotlight on Good Practice: Violence affecting Young People



- NCL will receive ~£1m (per annum for 3 years) to pump prime existing projects and work in specific areas of high rates of violence against young people and deprivation
- The priority is to target service provision in areas of high need, greatest prevalence of local risk factors associated with SYV such as unemployment, crime, deprivation and low service uptake.
- Plan is to mobilise more provision in Enfield, Haringey and Islington Boroughs which have the highest level of violence in London, as well as deprivation indices, spread the learning across NCL and encourage access across all NCL boroughs.
- The priority focus is to enhance existing schemes;
 - Islington: Finsbury Park, Holloway and Caledonian will be prioritised; building on initiatives expanding Young Black Men and Mental Health Programme and Youth Transitions project.
 - Haringey: Project Future in Tottenham
 - Enfield: Developing a Project Future in Lower Edmonton and Edmonton Green wards
 - Camden and Barnet: Preventative work with families of children at risk and expanding training, consultation and supervision around trauma informed approaches to working with young people at risk of engaging in or being affected by serious youth violence.

Islington

- CETR's (Care Education Treatment Reviews) in place to prevent admission to hospital for C/YP and to prevent readmission to hospital
- Good progress of the AAOT team in supporting highly complex children and young people. Good partnership working with Health, Social Care and Education.
- Strong relationship with JAP funding panels and engagement with Tier 4 panels and good representation in CETR's and CETR reviews.
- Tier 4 panels monthly working well to reduce admissions and readmissions to inpatient hospitals, engaging a broad range of professionals. Includes children with learning disability, autism and/or challenging behaviour.
- Further implementation of AAT/ Dynamic risk register meetings to avoid hospital readmission
- Embedded a CAMHS Liaison and Diversion nurse, CAMHS Psychologist and Speech and Language service into YOS and TYS, with mandatory speech and language screening for all young people entering YOS, resulting in better outcomes for some young people undergoing court proceedings
- Islington has strong and robust joint commissioning partnership arrangements through the delivery of JAP panels comprising of representation from across Health, Social Care and education. Strong collaborative decision making is in place to ensure we are putting in place the right packages at right time for children and young people. This is underpinned by Pre jap panels arrangements which exhaust all community options for children and young people.

Enfield

- A MDT Professional Dynamic Risk register in place to prevent admission to residential settings and ensure that CYP with LD, Autism and Challenging Behaviour are supported (led by Disability Services).
- PBS training has been provided to special schools and partners. Staff are trained to coach level in Autism Special Schools and in key specialist services. Physical Intervention training has been reviewed and a BILD Act accredited training provider has trained trainers across all special schools and CYP/Adults disability services.
- Monthly multi-agency decision making panel to support children with mental health needs to access to education (Admissions led)
- Emotional Based School Avoidance (EBSA) Partnership Group established in January 2021, with the proposed development of a multi-agency specialist intervention linked to a special school.
- There continues to be urgent prioritisation of crisis pathway enhancements to ensure the most vulnerable CYP can access specialist support
- Introduced greater flexibility around self-referral to CAMHS during lockdown

Getting More Help and Risk Support – Borough Progress

Haringey

- Promoted to schools, Social Care and Early Help - FCAMHS, Lighthouse, 24/7 Crisis Line, OOH Nursing Support
- Reduced 15 CYP in mental health beds through improved working between partners
- 75% of acute hospital admissions reduced due to the out of hours support.
- Introduced a Brandon Centre suicide prevention programme for care leavers

Barnet

- Standardisation of care pathways and service across the borough & earlier access through developed access and triage model
- Enhanced response into Acute hospitals including assessments in A&E
- Inpatient protocol for Barnet CYP agreed by LA, Barnet CAMHS and Barnet inpatient provision
- Opening of Therapeutic Children's Home with clinical intervention on site and refreshed foster carer and residential staff training to include trauma informed care and mentalisation
- Multi agency work between school police and Autism Advisory Team to develop understand and good practice when engaging with Autistic/ Neurodiverse CYP.
- NCL LD/ASD keyworker project to avoid admission and aid discharge

Camden

- Implemented the Brandon Centre suicide prevention pilot undertaking clinical work with a focused group of care leavers, with good engagement to date.
- Raised awareness of CETR process to engage wider professionals
- Transitions for Tier 4 Task and Finish groups to develop multiagency pathway for young people in Tier 4 settings to ensure planning for discharge at earliest opportunity, home visits wherever possible, earlier support from Adult Mental Health services and flexibility on end dates from CAMHS for children being discharged at transition age.
- Closer to Camden strategy to reduce out of borough placements for children and young people with complex needs wherever possible.
- Complex needs panel includes governance for dynamic risk register and a 'watchlist' developed to support those below threshold for dynamic risk register
- CAISS team offering flexible and responsive service, including outreach work, and in-reach to inpatient units and hospitals

Islington

- Strengthen interface and working with Royal Free Hospital to support and ensure step down and discharge pathways from EDIS are robust. This will part of the strategic work and plans we are developing regarding preventing tier 4 admission and developing community reintegration pathways to avoid repeated hospital readmission.
- Further strategic diagnostic work is being undertaken to prevent Tier 4 admissions and improve step down from Tier 4 admission into the local community.
- Implement new key working service to specifically provide intensive engagement support to launch (Nov 2021) supporting C&YP in tier 4 settings in preventing admission to tier 4 and supporting safe landings back into the community.
- Implementation of the new Keyworker service will support young people in Tier 4 and those at highest risk of admission, with the aim of reducing inpatient numbers, progressing towards the NCL 2021/22 target of 9 inpatients across NCL. Priority for the service will be given to children and young people who are inpatients, followed by those at risk of admission

Enfield

- Emotional Based School Avoidance will be further developed for CYP and their families where difficulties are more entrenched (this will be complemented by a preventative approach providing borough guidance, training and consultation to promote early identification and support).
- Identify funding to roll out PBS training to special and mainstream school staff.
- Enfield's commitment to restraint reduction will be overseen by a partnership group, linked to trauma informed practice - accountable to Enfield's Transforming Care and Enhanced Family Support Board.
- Enhanced service provided by the Integrated Learning Disability service for crisis response in terms of challenging behaviour.

Getting More Help and Risk Support – Borough Plans

Haringey

- Reinststate an Admission Avoidance Register to improve coordination between Health, Schools, Social Care and Education in supporting young people with autism/LD who may go into crisis;
- Continue the promotion of NCL/NHSE initiatives so that Haringey's use is proportionate to its CYP population
- Successfully introduce the Home Treatment Teams into Haringey's pathways, ensuring Council and Education partners are able to rapidly respond to hospital admission avoidance plans and hospital discharge plans for young people.
- Level up paediatric mental health liaison offer so that there is an on-site presence in hours at BGH and NMUH and embed that in borough pathways and post-attendance follow up

Camden

- Take forward closer to Camden strategy multiagency priorities for CYP with complex needs including improving outcomes for CYP based out of borough, investment in positive behavioural support, personal budgets and support this group of CYP and their families to remain within or closer to home
- Develop an offer of DBT and group work sessions for adolescents through Minding the Gap
- Multidisciplinary communications and AMBIT training for professionals supporting those due to be discharged from inpatient settings

Barnet

- Continue to develop improved services for CYP at key transition points including 18+ into adult mental health services, working across NCL in line with our Long Term Plan ambitions
- Review of thresholds across services within getting help and getting more help to improve pathways across the system
- Barnet Inpatient agreed protocol with an established a discharge protocol for CYP leaving inpatient treatment to prioritises a wrap around multiagency plan
- Improve transition planning for children receiving Continuing Care on basis of complex behaviours to ensure timely assessment for Continuing Health Care
- NCL LD/ASD key worker project involving Tier 4 and crises support to avoid admission and enable discharge.

A Population Based Approach

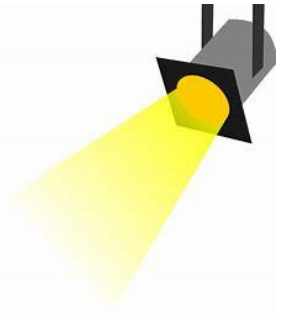
Although the THRIVE framework encompasses an all age approach, there are two age periods highlighted in national policy and identified as workstreams in their own right:

- 0-5s Mental Health and Emotional Wellbeing support for families of young children
- 0-25s – Mental Health and Emotional Wellbeing support for Young Adults

We also have a workstream around supporting children and young people with Learning Disabilities and/or Autism including those with behaviour that challenges, reflecting the additional complexities this group sometimes have of accessing the care and support that benefits them.

This section sets out our ambitions, progress and plans for these children and young people

Our ambitions for Early Years mental wellbeing



Our 0-5s core offer aspirations

- An offer of training for families and early years professionals around children's emotional and behavioural development and family relationship issues
- Advice, liaison, and training for assessment, triage and provision for family drop ins.
- Consistent involvement of CAMHS in Multi Disciplinary Team (MDT) planning with key stakeholders across the system

Identified challenges

- No CAMHS in Haringey early years settings
- In Enfield there is no established U5's pathway

Spotlight on good practice

Enfield Parent Infant Partnership (EPIP) is a small therapeutic team within CAMHS made up of two parent infant psychotherapists and a therapeutic specialist health visitor. The team works with families when there are concerns about the parent infant relationship. Parents may be struggling with factors such as mental illness, postnatal depression, post-natal anxiety, adjustment to parenthood, previous loss of a baby, traumatic birth or adverse childhood experiences

0-5s: NCL Specialist Mental Health Perinatal Service

The NCL Specialist Mental Health Perinatal Service offers care and support for women who are planning a pregnancy, pregnant or who gave birth within the last 24 months and have been diagnosed at any time with a severe mental illness. The service works together with the mother, her partner, her family and other professionals involved in her care to help her stay as well as possible during pregnancy and post birth.

The teams consist of various WTE: consultant psychiatrist, nurses, social worker, occupational therapist, clinical psychological, family therapist, pharmacist, nursery nurses and peer workers.

As well as psychiatry and psychology, care planning and crisis planning, the service provides the following intervention for children under 5.

- Support parents to breast feed
- Teaches parents first aid
- Runs baby massage and yoga to support bonding
- Facilitates Play & Stay sessions that provide socialising opportunities to children and parents, and provides peer support opportunities for parents
- Delivers Video Interactive Guidance (VIDS) – providing feedback on parents playing with their child
- Provides New Brazelton Observation – new born behaviour observation to support positive parent interactions

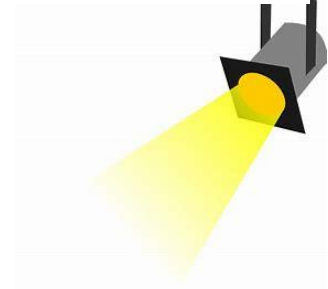
Performance: The NCL service achieved 4.6% in 2020/21 whilst the London region access rate was 5.0%, which increased to 5.5% in Q1 of 2021/22. Average waiting times for initial assessment is 28 days and 86% of referrals to psychological treatment started within 6 weeks.

Partnerships: Perinatal services work in Partnership with; public health, health visitors, other CYP health and community services, CAMHs services in cases where the mother is under 18, adult and children safeguarding leads.

Co-located service: Runs clinics from local children's centres, introducing the centres and their range of offers to parents

Training: Designs and delivers training to a range of services, including the development of joint training packages e.g. with social services.

Our ambitions for young adults mental health and emotional wellbeing provision



Our 16-25 Young Adults aspirations

- Extend current service models to create a comprehensive 0-25 offer
- Support transitions from CAMHS to AMHS
- Consistent support and counselling offer for young adults and students available in the community and online
- Online counselling, self help and peer support options
- Locality based wellbeing hubs for young adults with emerging emotional wellbeing and mental health needs

Identified challenges

- Programmes such as Minding the Gap not present in all NCL boroughs

Spotlight on good practice

Camden's Complex Adolescent Intensive Support Service (CAISS) is a nurse led service for CYP in emotional/psychological crisis which has contributed to a consistent reduction to admissions to Tier 4 since 2019. In addition to temporarily stepping into CAMHS teams to provide intensive support they also support local acute providers i.e. hospitals, paediatric liaison teams with a rapid response to any admissions to their acute wards.

Their approach of using flexible interventions (outreach, CBT, DBT informed work, etc) and ways of working alongside families and other services to provide support without waiting lists or strict criteria for intervention type or length has supported management of risk outside of hospital.

Young Adults

Our challenges to date: Young adults moving between CAMHS and Adult Mental Health Services have:

- Historically faced a 'cliff-edge' in support
- Found the AMHS offer not appropriate, appealing or easy to engage with
- Been especially impacted by Covid-19 with a rising prevalence of mental ill health.

Progress made:

- Pockets of excellent practice eg Camden's Minding the Gap holistic support service and Adolescent Intensive Support Service

Further improvements planned: We are investing £1.1m in 21/22 to implement new Young Adults-focussed roles:

Young adults clinical specialists in MH networks

Implement Young Adults Clinical Specialists and EBEs in 10 early implementer Primary Care Networks, where they will :

- Proactively reach out into community settings and partner providers incl. Local Authority Services (YOS and LAC) and the VCS , bridging young people into services as required. There will be a particular focus on vulnerable groups specifically BAME, care leavers (incl. people seeking asylum) and young offenders.
- Offer developmentally appropriate pan-diagnostic assessment, formulation intervention and support colleagues to do the same
- Develop and roll out training for Adult MH staff in specialist services on adolescence and transitioning, including trauma impact on developmental delay.

Clinical Transition Champions

Develop new clinical transition 'champion' roles and key worker roles to support YA transitions from CAMHS including Tier 4, Care Leavers and patients with emerging EUPD into AMHS:

- Transition champions will identify CAMHS users requiring continued adult mental health support. They will deliver highly specialist psychological and systemic assessment, formulation and care planning as appropriate for young adults and their families and bridge YA into the most appropriate AMHS service. They offer leadership, consultation, training, supervision around YA within the adult teams. Transition workers (primarily Expert by Experience) will help YA access signposted services and support care planning activities.

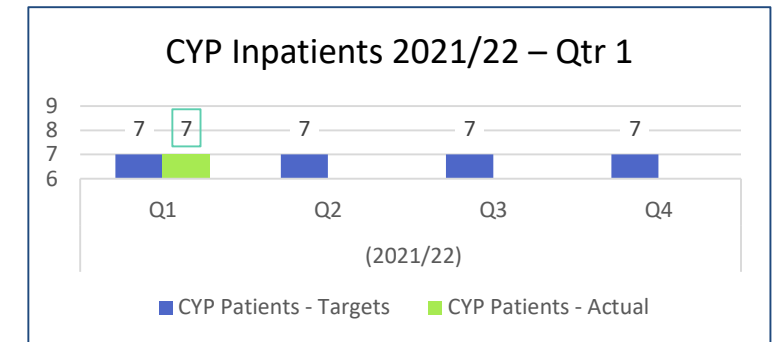
Learning Disability and Autism

Our challenges to date:

- Rising number of referrals of CYP with suspected autism (nearly 1000 CYP waiting to start autism assessment in Aug 21 of whom 600 waiting longer than NICE guidance of 12 weeks) and some children wait 2 yrs+ to achieve diagnosis. Exacerbated by delays to assessments during lockdowns
- Pre and post diagnostic support offer varies across boroughs
- Complexity of need – supporting children with LD, autism and/or challenging behaviour to remain at or close to home

Progress since the last Transformation plans:

- Only 7 CYP with LD/autism/challenging behaviour in inpatient settings at Q1 21/22
- New Care Co-ordinator and Keyworking roles in places/being recruited to
- Positive Behaviour Support approaches introduced or enhanced in most boroughs
- Autism diagnostic pathway review undertaken
- STOMP/STAMP plans to reduce inappropriate use of medicine developed



Emerging priorities include:

Expand Keyworking

Continue recruiting to Keyworker posts and explore sustainability for TCaPS provision

Reduce Autism waiting times

Progress recommendations of CYP ASD diagnostic pathway review 2020/21, including options to sustainably address waiting lists, pilot of online assessment model, manage future capacity and deliver wider quality improvements to CYP LD/ASD pathway.

Improve post-diagnostic Autism support for families

Implement ATLAS post-diagnostic support programme and review pre-diagnostic support offers

Quality provision and care closer to home

Develop a quality assurance framework for specialist residential provision and explore new ways to reduce the number of CYP with complex LD/autism/SEMH needs in residential schools/colleges and inpatient settings far from home

System Enablers

All of the ambitions in this Plan are underpinned by some key enablers:

- **Placing a focus on equalities at the heart of our work:** We can only support the best outcomes for our children and young people if we ensure our services are tailored to their needs. We will ensure our workforce, systems and policies are actively anti-racist and anti-discriminatory and our services reflect the needs of our communities.
- **Workforce:** Our plans are only possible through the recruitment and retention of a skilled, diverse workforce. Our workforce in NCL is highly skilled and committed to our young people. NCL had 779 WTE staff working in children and young people mental health services in 20/21. By the end of 21/22 we will have 908 WTE staff – a 17% increase. But we know that there are key recruitment and retention challenges faced by Trusts and the VCS providers
- **Digital:** The pandemic highlighted the importance of making best use of digital technology to deliver and support care – whilst ensuring everyone can access care in the way that is right for them
- **System Governance and data:** Achieving and monitoring progress and quality is supported by strong, multi-agency governance that acts on children and their families' views and uses rigorous population and performance data to track delivery

Driving equality and addressing inequalities in outcomes for CYP

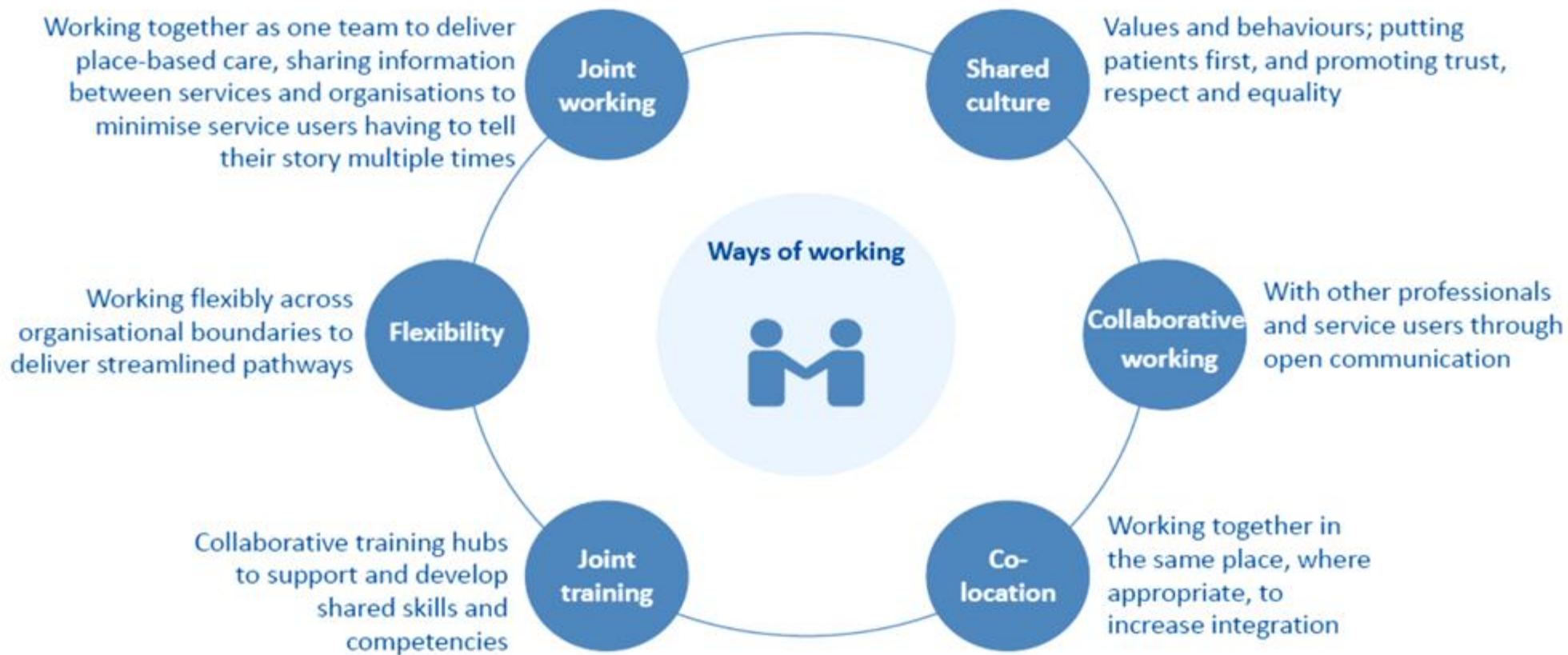
- **Improving data quality and reporting:** We want to improve our monitoring of and use of population and service data on ethnicity, gender, age, sexual orientation, disability and other characteristics (where necessary) to ensure our services continue to meet our populations' needs effectively
- **Targeted initiatives:** We know that mental health and emotional wellbeing outcomes are more at risk in some population groups than others and will continue to develop targeted initiatives where appropriate and adapt services where needed
- **Co-production:** We will ensure we involve CYP and their families from our borough's diverse population groups in shaping services
- **Organisational development:** We will engage with our communities to ensure our services are culturally competent, disability and LGBTQ+ aware and share learning between Trusts
- **Training:** Trusts and the CCG will continue to ensure staff receive anti-racism training and undertake ongoing work to ensure the workforce is culturally competent, along with continuing to provide access to training tackling other forms of discrimination.



Workforce Ways of Working Summary

CYP

Working as an Integrated Care System for children and young people, families and their carers across North Central London



Workforce Risks and Mitigations

There are significant challenges facing the workforce, particularly the clinical workforce, whilst this presents a level of risk, mitigating actions have also been developed

- **Recruitment** - Risk is based on the ability to attract enough applicants with the right competencies and skills to address the high level of current vacancies and future resource requirements to deliver the ICS CAMHS strategy. Future strategies will include additional sessions for existing staff and wider flexibility for staff across NCL to work across clinical divisions. Locum and agency will provide back-fill wherever possible. Training opportunities and increasing the skill matrix - Apprenticeship levy and peer support workers, nurse associates, graduate mental health workers training, leading to RMN pathways.
- **Retention** - Risk is based on the capacity and capability of the ICS partners to compete with staff opportunities in the private sector and agencies offering higher pay rates and better work life balance. Future plans include CAMHS engagement in HLP Pan London Staff retention wellbeing project. Current mitigation includes hybrid working at home and in clinic, flexible hours, weekend sessions available for staff and patients, greater mobility between divisions and roles to enable staff to step away from high stress areas of work but remain within CAMHS, increased supervision and group supervision as a preventative against burn out. Longer term strategies include review of roles and bands to identify career progression options for lower banded staff through the CAMHS system. Mentoring – Trusts mentoring junior nurses into more senior roles. Innovation staffing rotations – MH Trusts looking into rotations of staffing esp. into specialist placements.
- **Cultural Competence** - Risk is the timeline required to safely change the workforce composition to better reflect and relate to the NCL demographic. Short term mitigation is a challenge due to the current and future availability of candidates that reflect the diverse communities in which we work. More work is required in this area and will be a focus of the Workforce workstream in the CAMHS transformation. This will also link into the workforce sustainability work - creating new roles in CAMHS with new core competencies, increasing workforce skillsets.

Digital, Governance and Data

Digital

As well as commissioning online services to offer direct support to CYP (e.g. Kooth), we will:

- Explore roll out of high quality platforms that facilitate digital assessment and support health promotion, such as the 'NCL virtual waiting room' with regular reviews built into the process, including reach and furthering digital inclusion.
- Engage with and make use of digital programmes such as HealthIntent, Health Information Exchange and Digital First Primary Care to inform our practice and knowledge of our population's needs

Governance and Data

- We want to further align how we collect, align and use performance data across our Trusts to inform clinical and strategic developments. In 21/22, we plan to develop common datasets and reporting principles across all Trusts.
- Progress on our plans is monitored through a robust multi-agency governance structure as set out on the next slides
- In addition, commissioners and the Trusts lead meet weekly, as do Trust Leaders – providing routes to escalate and address challenges systematically.

The Tavistock MH NHS trust has developed the an **NCL virtual waiting room** to support families from the moment their referral is accepted by CAMHS, during their wait to be seen, throughout their episode of care and potentially beyond the point of discharge.

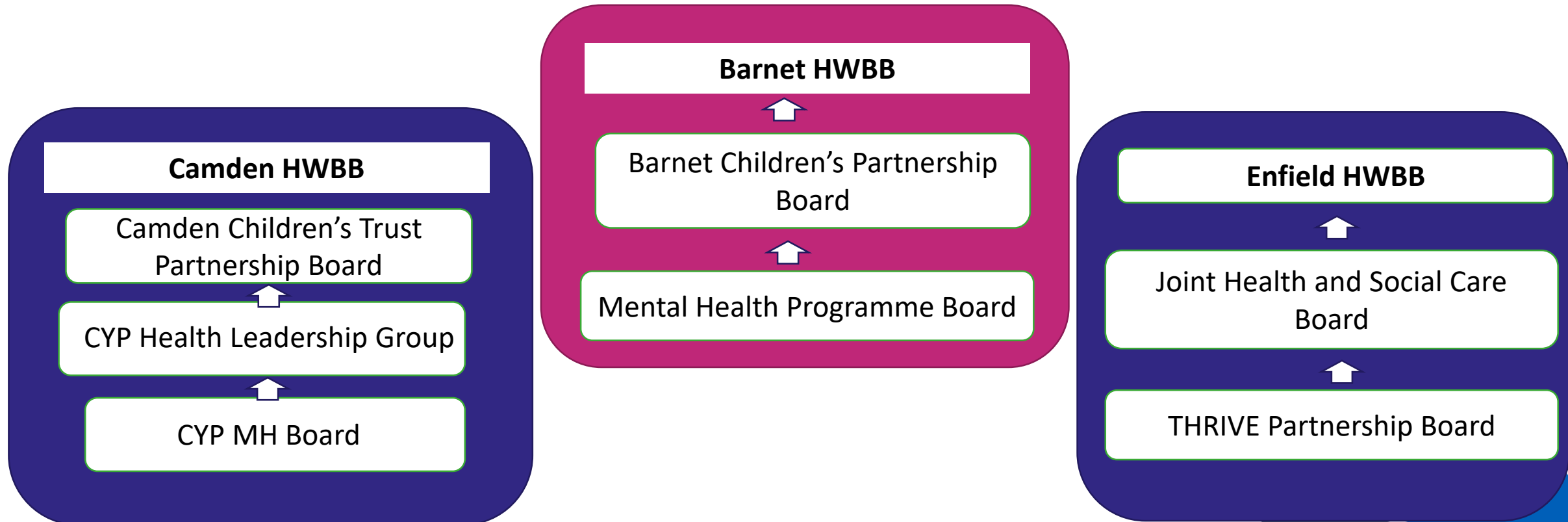
The platform provides CYP and their families with information and resources related the Service they were referred to and their borough of residence, it allows them to share goals, track mood and progress and get involved.

The NCL waiting room is being piloted within the Tavistock MH trust in services spanning all NCL boroughs and has the potential to roll out to other trusts.

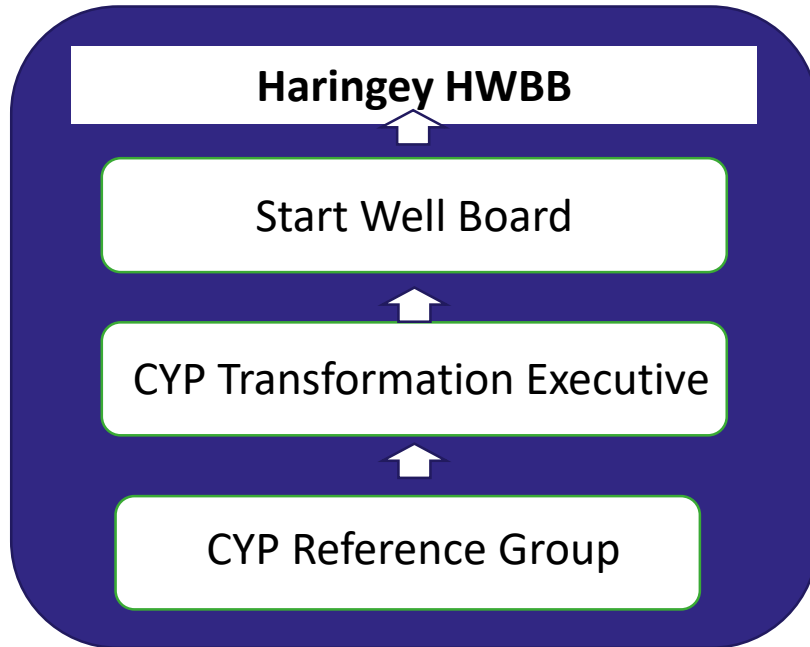
It has also been optimised to enable use from devices located at services, to reach CYP and families without access to their own digital devices.

Our Governance

Each borough has a local CYP Mental Health Partnership Board bringing together local NHS, Local Authority, VCS and in some cases parent/carer and/or CYP representatives. These boards have oversight and accountability for NHS borough-based and LA funding, strategic direction and partnership working for CYP Mental Health in each borough. They both inform and are informed by NCL CYP MH Programme priorities. Local Health and Wellbeing Boards are key partners in the development of our ICS plan and the local action plans that sit beneath. Co-ordination across NCL is provided by an NCL CYP MH Delivery Board underpinned by key working groups. This reports up into the NCL ICS Mental Health Board. At present (Autumn 2021) we are reviewing governance to make sure that NCL and local governance interfaces work effectively.

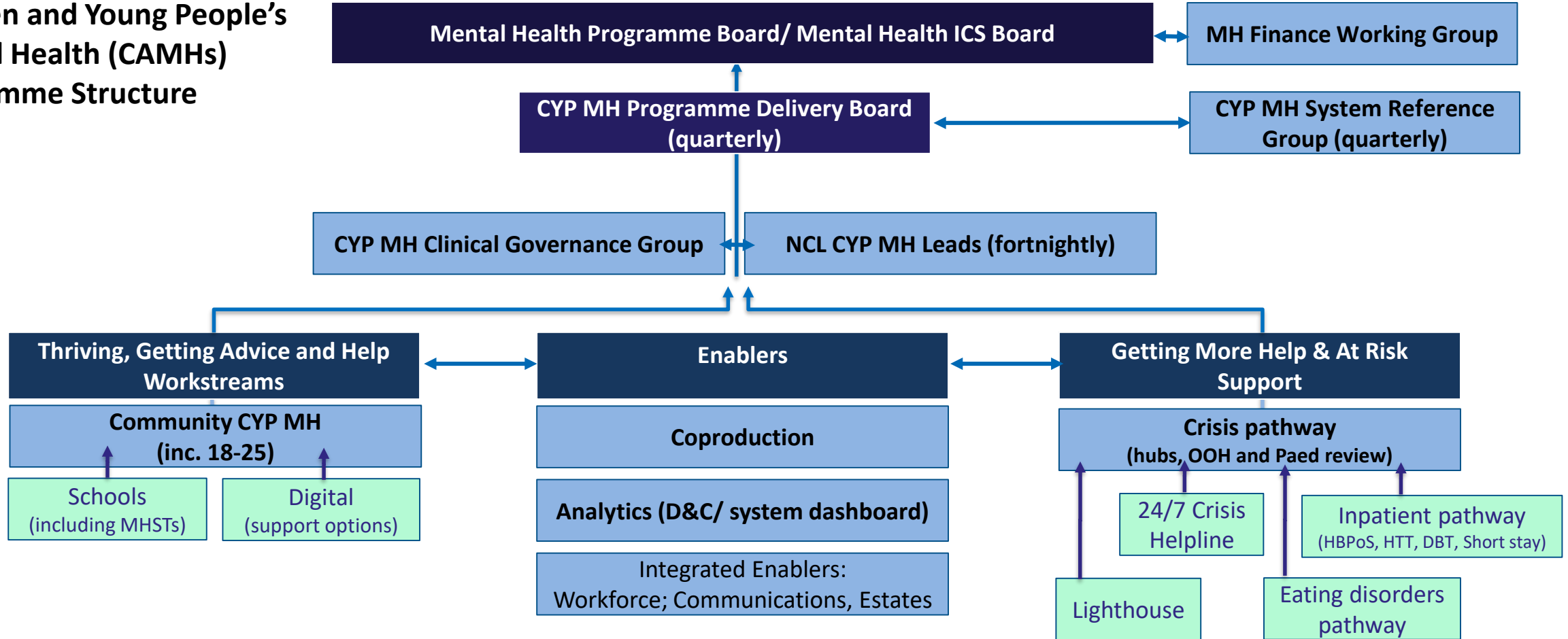


Our borough-based governance cont'd



North Central London's Governance for CYP Mental Health (under review)

Children and Young People's Mental Health (CAMHs) Programme Structure



NCL CYP and MH partners continue to work collaboratively across the breadth of primary care, community CAMHS, borough partnerships and NCL-wide pathways to ensure CYP receive safe, equitable care, regardless of where in the system they present. We also continue to work across NCL CYP and Paediatrics governance structures to ensure integrated models of care and CYP are receiving support for their MH needs wherever they present.

21/22 NHS Funding Summary for NCL

| Mental Health Investment Standard | Source of funding MH Trust | Other NHS | Non NHS | Total £ |
|--|-----------------------------------|------------------|----------------|--------------------|
| Children & Young People's Mental Health (excluding LD) | MHIS | 23,022 | 5,392 | £40,032,000 |
| Children & Young People's Eating Disorders | MHIS | 0 | 2,394 | £2,394,000 |
| | | | Total | £42,426,000 |

| Funding available - CYP Mental Health and Young Adults via System Development Fund and Spending Review | | |
|---|---|---------------------------|
| | Source of funding | 2021/22 allocation |
| Children and Young People's Community and Crisis | Central / Transformation Funding (SDF) | £2,297,000 |
| | Spending review settlement | £1,543,000 |
| Children and Young People's Eating Disorders | Spending review settlement | £411,000 |
| Young Adults (18-25)* Young Adults is within the NCL Adult Community Transformation Workstream | Central / Transformation Funding (SDF) | £686,000 |
| | Spending review settlement | £446,000 |
| | Total Central / Transformation Funding (SDF) | £2,983,000 |
| | Total spending review settlement (SRS) | £2,400,000 |
| | Total SDF + SRS | £5,383,000 |

MHST and 4WW SDF funding TBC (£4,960,000 in 2020/21).
This does not include any Local Authority Children's and Young People's funding.



NCL Partners

Providing CYP MH and Wellbeing Services

| Borough | NHS Service Providers |
|------------------|---|
| Barnet | Specialist CAMHS services are provided by Barnet Enfield and Haringey Mental Health NHS Trust and Royal Free London NHS Foundation Trust. The services commissioned are Eating disorders and Tier 4 specialist inpatient service. |
| Camden | Specialist CAMHS services are provided by the Tavistock and Portman NHS Foundation Trust and Royal Free London NHS Foundation Trust (ADHD CAMHS) |
| Enfield | Barnet Enfield and Haringey Mental Health NHS Trust. Enfield has a spot contract arrangement with South London and Maudsley NHS Foundation Trust, and the Tavistock and Portman NHS Foundation Trust. |
| Haringey | Barnet Enfield Haringey Mental Health NHS Trust, Tavistock and Portman NHS Foundation Trust, Whittington Health NHS Trust for the Parent Infant Psychological Service. |
| Islington | Specialist CAMHS services are provided by Whittington Health NHS Trust Tavistock and Portman – Child and family and adolescent clinic |
| NCL wide | Royal Free London NHS Foundation Trust - Out of hours Nursing Service. Royal Free London NHS Foundation Trust - Intensive Eating Disorder Service NSPCC, UCLH & Tavistock and Portman – Lighthouse |

| Borough | Non NHS Service Providers |
|------------------|--|
| Barnet | Mental Health Support Teams Health & Justice liaison and diversion CAMHS in schools Children and Young People’s Wellbeing Practitioner (CWP) services Xenzone – online counselling Barnet Integrated Clinical Services (BICS) |
| Camden | Brandon centre – counselling and psychotherapy and parenting (jointly funded with London Borough of Camden) Strength and Learning through Horses (LB Camden) Coram Creative therapies (LB Camden) Fitzrovia Youth in Action – peer support Manor gardens – parental peer support (LB Camden funded) Depaul Camden Kaleidoscope (supported housing) Catch 22 (Adolescent Mental Health) |
| Enfield | Brandon Centre |
| Haringey | Brandon Centre Open Door Haringey Mind Haringey Shed Deep Black |
| Islington | Mental Health Support Teams – School Wellbeing Service (provided by Whittington Health and London Borough of Islington) Tavistock and Portman – Child and family and adolescent clinic Xenzone – online counselling * Barnardos – Third sector counselling and therapeutic service * Isledon – Emotional Wellbeing workers * Brandon Centre – young people counselling and psychotherapy * Islington Council - TYS counselling * |
| NCL wide | Kooth – online counselling |