

## **CABINET**

**30 MARCH 2021**

### **EMOTIONAL HEALTH AND WELLBEING CONTRACT AND THE LOCAL TRANSFORMATION PLAN UPDATE**

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(Lead Member)

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#### Summary

This report provides the Cabinet with an update on the Medway Young person's Wellbeing Service contract and developments through the Local Transformation Plan for Children and Young People (CYP) Mental Health and Emotional Wellbeing for 2019/20. This paper also highlights the direction of travel for 2021 to 2024 in meeting NHS Long Term Plan targets for children and young people across Kent and Medway.

This report was initially considered by the Children and Young People Overview and Scrutiny Committee on 7 January 2021 and the Health and Wellbeing Board on 16 February 2021.

#### 1. Budget and policy framework

- 1.1. Medway's Local Transformation Plan for children and young people's mental health and emotional wellbeing (LTP) was established almost five years ago in response to the programme of work set out in [Five Year Forward View](#) to guide the transformation of mental services, increasing access and availability to our children and young people. Funding was committed to support these statutory developments until March 2020 and the NHS Long Term Plan extended this commitment and investment for transformation until March 2024.

- 1.2. The procurement and mobilisation of the North East London Foundation Trust (NELFT) Medway Young People's Wellbeing Service (MYPWS) has been at the core of Medway's transformation vision and strategy since the start. The summary of Medway's position at this point is that the service is now embedded, has shown improvements in service delivery, and stepped up to the inevitable challenge Covid 19 has brought. On-going developments are continuing to meet service challenges and NHS targets for transformation.
- 1.3. The Local Transformation Plan (LTP) has been refreshed annually since 2015 with the last refresh being presented to the Health and Wellbeing Board in December 2019 after submission to NHSE/I for assessment over developments across the whole mental health system.
- 1.4. Medway's LTP plan was successful in achieving a green rag rating for seven target areas. Three areas needed further focus during the period November 2019 – October 2020: mental health and education; youth justice and workforce development.
- 1.5. The impact of Covid 19 on the LTP has not changed the statutory commitments and has only added layers of additional need to address:
  - 1) Service response due to Covid restrictions (including NHS response guidance),
  - 2) Historic, latent and new demands of our current MH services,
  - 3) Whole system response (across Kent and Medway), all whilst ensuring children and young people's experiences are at the heart of developments.

## 2. Background

- 2.1. The LTP is a tool NHS England use to measure progress in relation to the modernisation and improvement of mental health services for children and young people. The ambitions of the plan continue to be reflected in the new NHS Long Term Plan which will support transformation beyond this period.
- 2.2. The budget awarded to Medway's LTP in 2019/20 was £1.136m. As in other areas, most of this budget is allocated to the Medway Young Persons Wellbeing Service (MYPWS) and the Eating Disorder contracts. There is funding set out in the NHS 10-year plan for children and young people's mental health improvement that will enable the LTP to continue.
- 2.3. From April 2020, NHS guidance required a move of MYPWS financial arrangements to a block contract payment process. Financial flows were also blocked for the LTP funding for Medway as well as Kent. Significant uplift in investment (£304,000 for LTP and £110,000 for eating disorders) was expected.
- 2.4. Through a continued commitment of the CCG to meet Mental Health Investment Standards, there has been movement in accessing finances and investment has now been committed for the remaining of the year into our key

focus areas for 2019/20 within the LTP (early intervention, increases in workforce, digital counselling and complex groups).

- 2.5. NHSE/I have not asked for a LTP refresh this October 2020 but initially requested a summary by end March 2021, which as of week beginning 11 January 2021 has moved back until September 2021, detailing key achievements and learning during this period (and through COVID-19). This will include future planning post March 2021 to address the NHS Long Term Plan targets. With the new CCG footprint, a Kent and Medway strategic plan will be developed to give clear direction and working principles for all areas whilst addressing the local needs of children and young people.
- 2.6. Factors to be considered alongside MYPWS:
- MYPWS LTP funding for the reduction of local pathway waiting times ended March 2020.
  - During April 2020 – to date, MYPWS has been under NHS Covid 19 service recommendations and performance monitoring / meetings have been stopped until April 2021. Data presented at this time is unvalidated and service developments limited.
- 2.7. As previously reported:
- MYPWS provides local delivery of four clinical pathways: 1) Mood and Anxiety; 2) Behaviour and Conduct; 3) Substance Misuse; and 4) Sexual Trauma and Recovery.
  - A fifth pathway, neurodevelopmental, is joined with Kent, to enable additional and more senior expertise to be available to Medway children and families.
  - NELFT delivers an augmented Crisis and Home treatment team as part of MYPWS and Kent Children and Young People Mental Health Service (CYMHS) which operates across Medway and Kent.
  - MYPWS operates as part of a whole system pathway designed to meet the mental health needs of children and young people within the context of the family. Patients are allocated to one pathway but can receive care from practitioners in any other pathway as part of their individualised treatment plan. This service removes the idea of providing a tier-based service towards a continuum of support to move seamlessly across the varying levels of intervention.

### 3. Options

- 3.1. LTP refresh be moved towards a focus on NHS Long Term Plan targets to build on existing developments and continue to work on system challenges.

3.2. Services (MYPWS, MHST's and Kooth) are reviewed as part of Task Force objectives to monitor demand for emotional wellbeing and mental health services across the system.

#### 4. Advice and analysis

##### 4.1. Medway Local Transformation Plan 2019/20 Update

4.1.1. The 2019/20 LTP NHSE/I assurance process and outcome for Medway highlighted three main areas for development during October 2019 – September 2020. Table 1 below highlights the three areas and the developments that has taken place over the past 12 months to meet key lines of enquiry gaps. This is in respect of additional wider LTP Project Board priorities listed below.

Key Priorities:

##### **4.1.2. Improved communication with schools and education colleagues whilst strengthening a resource earlier through Positive Behaviour Support (PBS), Trauma Informed Practice and other intervention programmes.**

4.1.3. Update of activities:

- MYPWS / Partnership Commissioning (PC) have been present in Covid 19 cell calls with education / social care; CYP providers; and Kent and Medway restart /recovery developments.
- Regular updates have been provided to Medway Council internal communication channels for sharing across education settings (e.g. Headteachers briefing, Child Health newsletters in Public Health, Youth Service updates / Social Media)
- MYPWS monthly feedback meetings with Medway Parent and Carers Forum.
- Positive Behaviour Support closer aligned to Mental Health through staff line management in Partnership Commissioning and partnership arrangements regarding training offer with Public Health.
- A trauma-based workshop was held during June across Kent and Medway to provide assurance of the extent services are providing support and to identify any gaps.
- Trauma Informed Programme being led by Public Health includes LTP CCG training offer for practitioners working with 18 – 25-year olds.
- Joint working arrangements with the Youth Offending Team and their delivery of Trauma Informed work.
- Commissioned Emotional Literacy Support Assistants (ELSA) programme for Private, Voluntary and Independent Child Care Settings delivered by Education Psychology Team, Medway Council.
- Joint Kent and Medway Mental Health communication group to support system join up of messages.
- Kent and Medway signposting website in development for ease of signposting into services.

**4.1.4. Awareness training of services and understanding of Medway system-wide initiatives and pathways changing a culture to offering intervention at the earliest opportunity.**

4.1.5. Update:

- Eight Link programme workshops delivered by Anna Freud bringing education settings, partner stakeholders and Mental Health providers together were held during 2020. Feedback has informed Mental Health Support Team (MHST) application and signposting resources / Mental Health website.
- Survey of emotional wellbeing and mental health providers being used in education settings.
- Medway system wide delivery of Wellbeing for Education Return training modules (Public Health, Education Psychology and Partnership Commissioning). Module 5 – system, support, and resources.
- IThrive approach commissioned across Kent and Medway to build common understanding of system and language between services and across system.
- Single 0800 freephone number covering Kent and Medway specialist mental health services.
- Building links between Medway social care teams, Youth Offending Team, Special Educational Needs Co-ordinator networks and education to support cases and awareness.

**4.1.6. Increased focus and attention on some of our most vulnerable groups, for example Children in Care (CiC), Children with a disability / Special Educational Needs (SEN) and those involved in the criminal justice system.**

4.1.7. Update:

- Successful in accessing additional funding from NHSE to pilot a young person to 25 approach through recruitment of additional Mental health posts in the youth offending team to support with those who transition to adults, and those on resettlement from secure estates from 10 – 25 years.
- MYPWS Children in Care update reported to Corporate Parenting Board in November 2020 with further updates on LTP activities being presented in January 2021 reflecting the focused work on CIC. Data for CIC is also separated to manage trends and activity.
- Continued focus on SEND operational actions to review services, transitions, and developments. Over 11-year-old service data reported on SEND dashboard monthly.
- Commissioned additional community support for those families with either a suspicion or diagnosis of a neurodevelopmental condition through:
  - Small Steps programme delivered by Family Action to build up peer support, information, and helpline support for those navigating / diverting from neurodevelopmental services.

- Survey of families / Young People’s experiences of transitioning between mental health services (age transitions).
- Medway version of Kent neurodevelopmental handbook.
- Supported CCG to address Medway’s as well as Kent’s neurodevelopmental waiting list lengths and Covid 19 impact.
- Forged links between Joint Assessment Panel, Access to Resources Panel, Dynamic Support Register and Transforming Care to provide oversight and continued development of a whole system approach towards case management.
- Supporting Kent developments for bereavement support service to cover Kent and Medway children and young people. This is a specialist bereavement services being procured through Kent and Medway CCG arrangements.

#### 4.1.8. Continued focus on pathways and where the commissioning priorities exist.

##### 4.1.9. Update:

- Commissioned new online counselling support website, Kooth.com to meet the needs for access to digital solutions and out of hours counselling support during Covid 19. Piloting 11-25-year-old remit to provide service available for young adults and care leavers.
- Commissioning a review of the experiences of children and young people navigating mental health specialist services (tier 4) available to Medway. Includes three areas:
  - Desktop analysis to provide factual account of process
  - Audit analysis of experiences of practitioners supporting CYP
  - Young People’s experiences of navigating between the services
- Developing a Kent and Medway approach across new CCG arrangements and NHS Long Term Plan targets to standardise services were beneficial. Appendix 1 for shared priorities for 2019/20 across Kent and Medway. This includes developments across 0-25-year olds, Mental Health Support Teams, Crisis, and liaison services and eating disorders.

Table 1. Key Lines of Enquiry (KLOE’S) summary from Medway 2019/2020 assessment and progress to date

KLOE area	Rag rating from Oct 2019	Target / comments	Update Dec 2020
CYP in MH services working with educational settings	Amber	NHS Long Term Plan Deliverable: Mental Health Support Teams (MHSTs) rolled out to between a quarter and a fifth of the country by 2023/24. Next steps: Unsuccessful bid in 2019 but working towards a successful trailblazer bid in 2020.	<i>Self-assessed rag rating: Green</i>  Wave 3 bid submitted to NHSEI in March 2020 and received successful confirmation in May 2020. Two teams of eight awarded to Medway (training access and funding).  Next steps: 2021 Low to Moderate Framework for Emotional Wellbeing Mental Health providers in education.

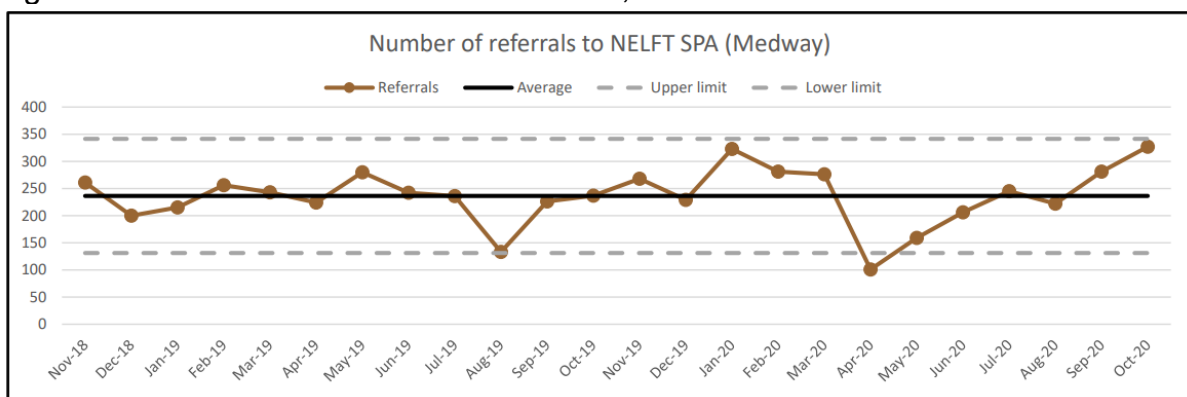
Workforce	Amber	<p>LTP linking into a multi-agency workforce plan or align with wider STP level workforce planning. Workforce plan including required work and engagement with key organisations, including schools, colleges and primary care networks. Next steps: Kent amber target also and across STP footprint - Long Term Plan target inclusion.</p>	<p><i>Self-assessment rag rating: Green although more needs developing</i></p> <p>MHST (as above) creation of 16 Education Mental Health Practitioners.</p> <p>One new Mental Health practitioner within Youth Offending Team (below).</p> <p>LTP funding for staff expansion within Emotional Wellbeing Team in School Health (MCH). 4 new staff members.</p> <p>Digital services commissioned to increase counselling access out of hours (Kooth).</p> <p>Kent &amp; Medway Trauma Informed training being offered for practitioners working with 18-25-year olds. Alongside wider Trauma Informed programme in Medway being led by Public Health.</p> <p>CYP crisis &amp; liaison team expansion as part of CCG developments. Including Better Care (Medway Council) funding for one additional Band 6.</p> <p>Next steps: Link to Kent to reach NHS Long Term Plan target for new staff by 2024 to reach access targets.</p>
Health and Justice	Red	<p>LTP detailing how it is ensuring that there is full pathway consideration for CYP in contact with Health and Justice directly commissioned services and services being commissioned through the CYPMH Transformation Teams.</p> <p>Next step: Clearer understanding of arrangements required moving forward. Need to include understanding in LTP project board.</p>	<p><i>Self-assessment rag rating: amber although more needs to be developed</i></p> <p>2020: Successful in funding (£84,000) from NHSE to pilot a young person to 25 approach through recruitment of additional Mental health posts in the youth offending team to support with those who transition to adults, and those on resettlement from secure estates from 10 – 25 years.</p> <p>Future: By March 21, developing an expression of interest across Kent and Medway for funding through the health and justice workstream to focus on complex cases.</p>

#### 4.2. Update on Medway Young Persons Wellbeing Service (MYPWS)

4.2.1. This section highlights some of the areas where progress has been made since December 2019 and where Covid 19 has had an impact.

- 4.2.2. Single Point of Access is used to triage all service referrals. This creates capacity to respond to calls timely and allow Mental Health Practitioners to be available to support enquiries.
- 4.2.3. Since November 2018, on average just under 250 per month referrals have been received through the Single Point of Access. General Medical Practitioners, carers, accident and Emergency department and education remain as the top referrers.
- 4.2.4. The impact of Covid 19 has affected referrals received into the service with an initial drop seen during March and April, with referrals steadily rising back up to and beyond expected average rates to 327 children and young people being referred in October 2020, Fig 1.

Fig 1. Number of total referrals into MYPWS, November 2018-October 2020.



- 4.2.5. For the month of October 2020, Medway's YPWS referral rate equated to 4.73 referrals per 1,000 children and young people. The lowest in comparison to Kent localities.

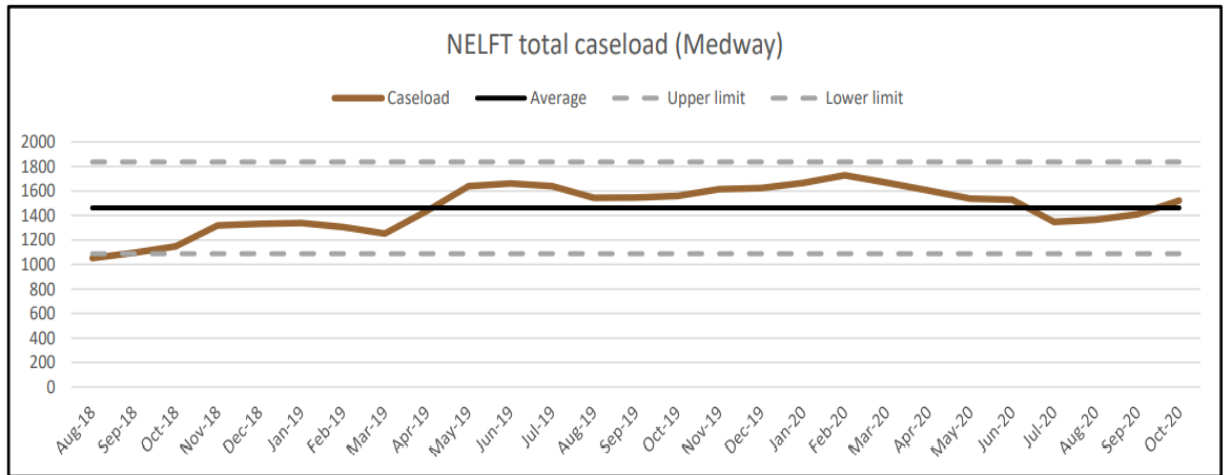
Referrals	Count	CYP population	Rate per 1,000
Ashford	253	29836	8.48
Canterbury & Coastal	341	40123	8.50
Dartford, Gravesham & Swanley	373	64132	5.82
Medway	327	69139	4.73
South Kent Coast	380	40573	9.37
Swale	198	26426	7.49
Thanet	315	29849	10.55
West Kent	536	111010	4.83
Kent	2396	341949	7.01
Kent & Medway	2723	411088	6.62

- 4.2.6. Demand across the CYP mental health system is being reviewed in the CCG to understand where there may be opportunities to offset referrals.

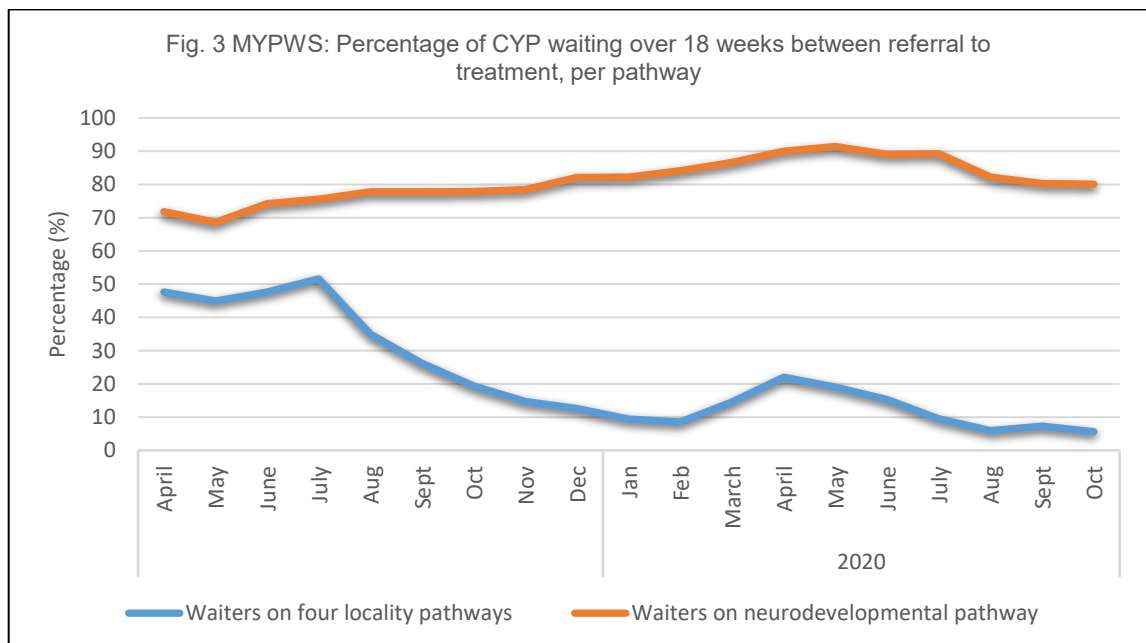


4.2.7. The total MYPWS case load has remained steady throughout the last year with an average caseload of just above 1400 children and young people, Fig. 2.

Fig. 2 MYPWS caseload, August 2018 – October 2020



4.2.8. Medway locality team was seeing a marked improvement in the time it was taking children and young people to access treatments during July 2019 – February 2020 thanks to the recruitment of new staff and an increase in the number of clinics, Fig 3. However, during March and April 2020 with Covid 19 restrictions in place, MYPWS did see a slight increase in the waiting times with up to 60 children and young people waiting over 18 weeks to access treatment in April.



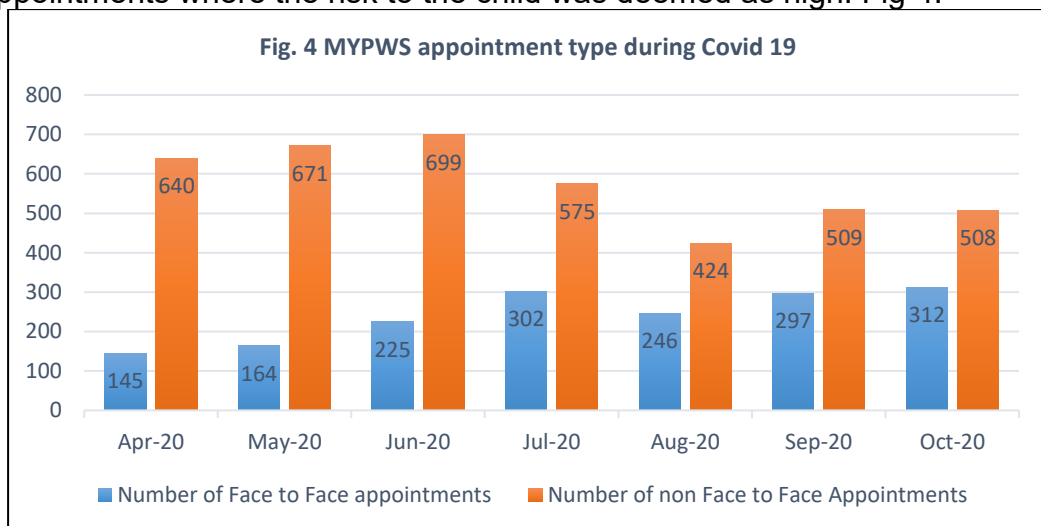
4.2.9. Since April 2020, the locality team has seen a decrease in the waiting times to access treatment towards under the national target of 92% being seen within the 18 weeks. The average waiting period for treatment from date of referral in Sept 2020 was 66 days (Appendix 2) with 92% (164) children and young people waiting under 18 weeks to start treatment. Only 13 children

and young people are now waiting over 18 weeks for treatment to start. In April 2019 this was 48% (270 young people) waiting over 18 weeks for treatment to start so the improved trajectory is very positive.

4.2.10. The significant challenge in MYPWS continues to be the Neurodevelopment pathway with the longest waiting times as Fig. 3 demonstrates. During September 2020, there was 909 children and young people on the caseload with Medway’s locality team and 500 over 11-year olds within the neurodevelopment pathway. The challenge is young people on the neurodevelopment pathway are waiting up to 668 days to access treatment and only 19% (63) of children and young people are being seen with the 18-week target (Appendix 2).

4.2.11. Combing the number of children and young people across the Kent and Medway service, the waiting list rises to approximately 7,268 waiting on the neurodevelopment pathway in September 2020 and is only increasing, resulting in extremely long waiting times, impacting on outcomes for children and families.

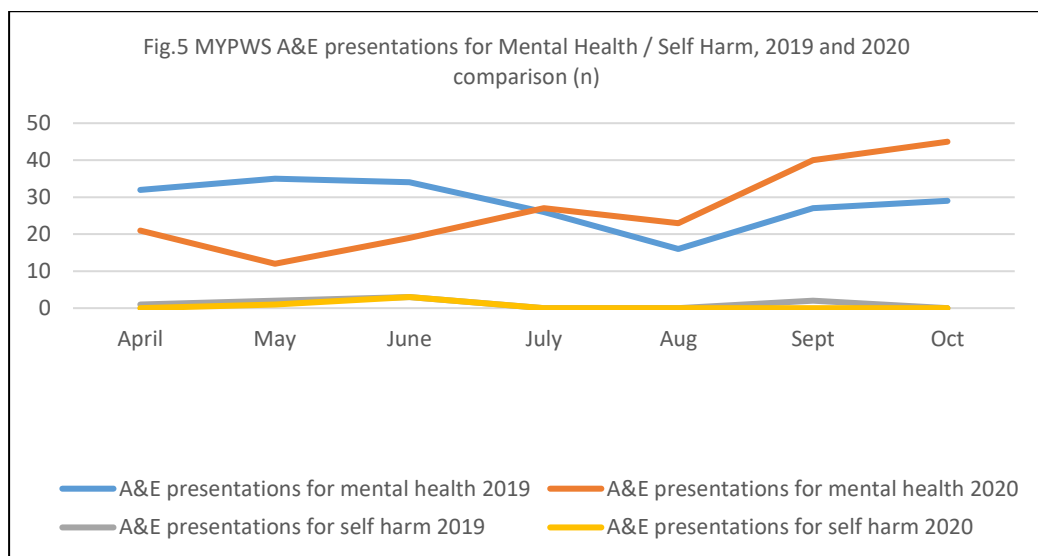
4.2.12. MYPWS moved towards offering virtual appointments, and/ or face to face appointments where the risk to the child was deemed as high. Fig 4.



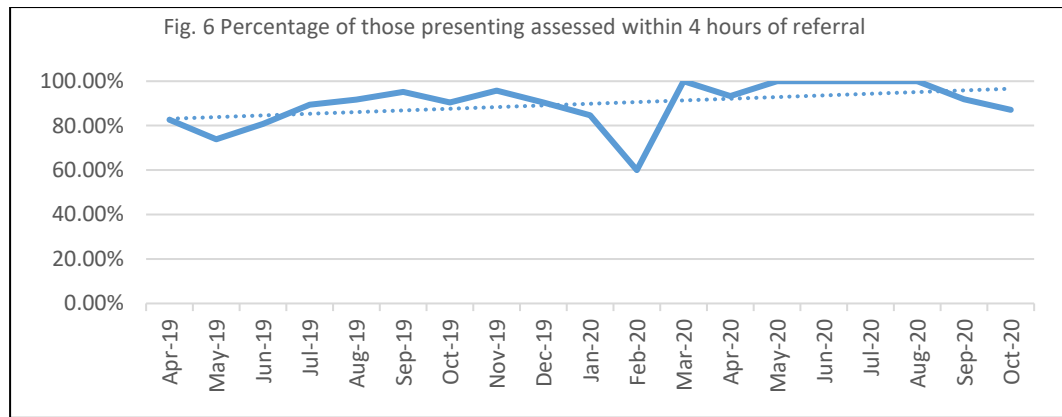
4.2.13. There were some challenges to service delivery during COVID. All assessments were risk rated and the service continued to offer face to face appointments for those of high risk/ concern. We had to move other appointments to virtual assessments for both ADHD and ASC (for over 11 pathway) via BOSA. All appointments including those offered in schools were moved to virtual appointments. Since the summer, diagnosis has started again and has continued throughout current lockdown restrictions.

4.2.14. All families waiting for Autistic Spectrum Condition/ADHD assessment within MYPWS received contact from the service regarding the impact of Covid in services and a general awareness letter has gone out through partner agencies.

- 4.2.15. Redeployment and staff sickness were not significant issues for MYPW services with only a slight increase. (E.g. NELFT Medway staff sickness January 0.8% compared to September 3.7%).
- 4.2.16. MYPWS initially had seen a decline in accident and emergency (A&E) presentations during March – May 2020, Fig.5 but are now beginning to see an increase in the number presenting to A&E for mental health conditions. This was predicted through modelling systems anticipating the possible impact of Covid 19 restrictions.
- 4.2.17. Self-harm presentations to the service has not showed the same increase during this time. Reports from the crisis team highlight anxiety, low mood and stress as main concerns in presentations. The rise in presentations is also being experienced across Kent.



- 4.2.18. MYPWS are working hard to ensure young people access the right service at the right time and are focusing on ensuring those children and young people presenting are assessed within 4 hours. Fig. 6 highlights the response time of the Crisis team over April 2019 until October 2020 which has remained within a 4-hour response. Only the last two months have seen a delay in response times 91% September and 87% in October 2020 which is anticipated being due to increase in the demand for crisis support across Kent and Medway.



- 4.2.19. Clinical harm review of over 3,000 young people aged 13 to 16 were carried out by NELFT across the Kent and Medway caseloads of those who fitted potential characteristics of the tragic deaths since the start of lockdown. The service and its commissioners have been supporting the Suicide Cluster protocol actioned across Kent and Medway to monitor and keep our children and young people safe.
- 4.2.20. Additional funding has been allocated to NEFLT through CCG investment and Winter Pressures financial support to increase capacity and growth in the Crisis and Liaison team to manage increases in demand being seen.
- 4.2.21. To date there has not been a rise in representations to service and is lower than rates seen during 2019, Appendix 2: Fig. 7.
- 4.2.22. The current caseload has seen a rise in females using the service than males and an increase in 10-18-year olds, Appendix 2: graphs Fig. 8 and Fig. 9.
- 4.2.23. Building partnerships and increasing communication have been a key priority for MYPWS and growing relationships are being developed across education, social care & early help, YOT and wider health organisations. 'Where to refer' information sent to all schools and GPs in Medway and ongoing reminders of service offers are communicated widely.
- 4.2.24. NELFT have participated in a variety of schools, social care, and multi-agency networks in supporting Covid responses and assisting in future developments. MYPWS data is included on the Kent and Medway Children and young people service dashboard.
- 4.2.25. Regular feedback is provided by Medway Parent and Carers Forum and NELFT have attend family support events and coffee mornings when being held.
- 4.2.26. Challenges MYPWS continues to face:
- The growing demand being placed on service as seen by the increase in referrals into MYPWS and the resulting expectation of a rise in caseload potentially to be seen in March / April 2021.

- The wider impact of a similar or greater increase in referrals being seen in Kent and across associated services.
- Addressing the historic waiting list for neurodevelopmental services across Kent and Medway.
- Crisis presentations and a systematic solution around recognising signs earlier to ensure help can be accessed quickly.
- Movement of referral number from an 0300 number to an 0800 number to remove a service user charges which are currently being experienced.
- Increase in CIC with emotional and mental wellbeing needs
- High usage of crisis team and liaison needing section 136

#### 4.2.27. Future focus:

- Kent and Medway CCG task force to monitor the growing number of referrals and work as a system to model demand and capacity across all services.
- Continue to support transformation priorities across Kent and Medway to improve the outcomes for Medway children and Young People.
- NELFT will continue to work across Medway and Kent with partners on reducing self-harm and suicide prevention.
- Review of website and digital resources to improve information flow.
- Further links and communication on Kooth as well as other signposting opportunities
- Medway Youth Council and links to their focused areas for 2021

### 4.3. New Mental Health and Emotional Wellbeing Developments

#### Mental Health Support Teams

- 4.3.1. Mental Health Support Teams (MHST) are a service designed to support mental health and wellbeing of children and young people in and around schools and colleges. The teams were described in: *Transforming children and young people's mental health provision: A Green Paper* and they are a key element of the ambitions set out in the NHS Long Term Plan. Transformation funding to establish and maintain these teams has been made available to successful applicants as described in the NHS Mental Health Implementation Plan.
- 4.3.2. Medway's Local Transformation Plan for Mental Health and Emotional Wellbeing 2019/20 identified support in schools as a priority to increase access for children and young people earlier when first needed and before onward referrals are needed into Medway's Young Person's Wellbeing Service.
- 4.3.3. In January 2020, Link Programme workshops were delivered by the Anna Freud Centre in Medway, which brought education settings and Mental Health providers together to discuss the challenges being faced. Workshops were aligned to the school zone partnerships. Over 60% of education settings attended alongside our main mental health providers. The application for

MHST's was discussed at these workshops allowing time to develop a Medway focused application.

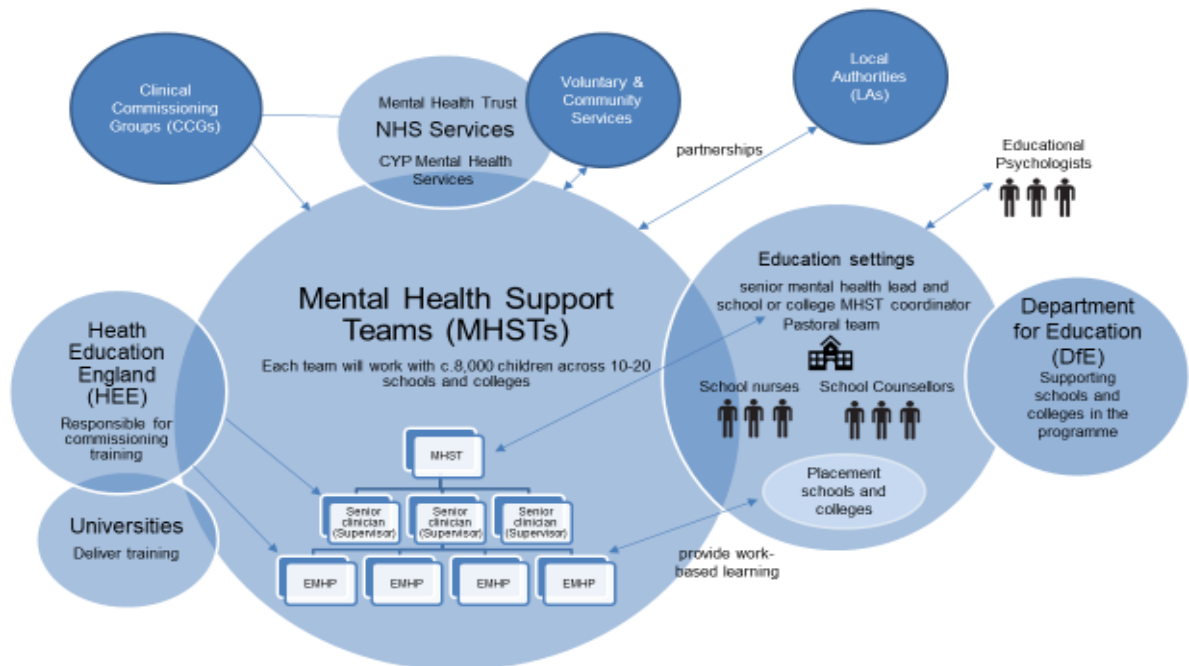
4.3.4. Medway was awarded investment in May 2020 following a successful application to develop two teams in May 2020 as part of the MHST service NELFT already deliver across Kent and Essex.

4.3.5. The Mental Health Support Teams will:

- Deliver evidence-based interventions for mild to moderate mental health issues. The new teams will carry out interventions alongside established provision such as counselling, educational psychologists, and school nurses building on the menu of support already available and not replacing it.
- Support the designated senior mental health lead in each education setting to introduce or develop their whole school or college approach.
- Give timely advice to school and college staff, and liaise with external specialist services, to help children and young people to get the right support and stay in education. Work as part of an integrated referral system with community services to ensure that children and young people who need it receive appropriate support as quickly as possible.

4.3.6. The two MHST's will bring an additional 16 WTE into Medway through on the job training and an extra 35% coverage across the total pupil headcount.

## The network supporting MHST implementation



- 4.3.7. Medway will support the above outcomes through creating a framework which acknowledges the current service providers of mild to moderate support but brings partners together to create one clear pathway, with clear roles and responsibilities. A framework model will also provide a platform for bringing mental health training together and PBS community of practice.
- 4.3.8. Medway's project plan has been approved by NHSE to take forward the development of this programme and Head Start have been recruited to assist in project planning the initial roll out.
- 4.3.9. To date 8 Education Mental Health Practitioners (EMHP's) have been recruited and started with NELFT in November 2020 with a mix of psychology graduates, Teaching Assistants, and early Intervention backgrounds.
- 4.3.10. The EMHP's have enrolled in a one-year postgraduate education and mental health course provided by the University of Sussex which they will undertake as part of their role development within education settings.
- 4.3.11. Recruitment to the two Supervisory posts within the MHST's has been challenging with a third round of recruitment underway.
- 4.3.12. A Kent and Medway steering group has been developed to oversee the Medway teams, as well as the 6 other MHST's working or being developed across Kent. This will allow standardisation across approach and ease in NHSE monitoring reporting.
- 4.3.13. Two webinars were held for education settings in September 2020 to discuss the next steps and open the expression of interests from schools to become involved in this programme.
- 4.3.14. Expressions of interest were open to those who had previously attended the Link Programme workshops. Education settings applying were ranked based on deprivation, free school meals, school exclusions, Child in Care, Child in Need and chosen through a multi-agency partnership.
- 4.3.15. Medway recruited 34 schools with 5 sites becoming host training sites. Details can be found here as to location of schools <https://www.google.com/maps/d/edit?mid=1JmXTLq9BF0GIBmNqPIJj1In3JLbGF5wK&usp=sharing>
- 4.3.16. Challenges:
- Managing expectations of education settings whilst MHST staff are building up knowledge and skills.
  - Impact of Covid on University training access and school visits / family engagement.
  - Creating clear governance arrangements with Kent MHST's whilst retaining operational management in Medway. Looking to other models (Essex's) where programmes cover multiple LA and CCG's.

- Developing the low to moderate framework provider framework across Medway to build a consistency in approach.

#### 4.4. New Online counselling Service (Kooth)

4.4.1. Kooth website access ([www.kooth.com](http://www.kooth.com)) was launched on 1<sup>st</sup> June 2020 for Medway’s children and young people between the ages of 11 and 25 years old in response to increasing access during lockdown and beyond.

4.4.2. This site offers children and young people an online mental health service to access free counselling, advice, and wellbeing support within their local area outside of normal service hours (afternoon/ evenings across the week). It provides a safe, secure means of accessing help via the internet from a professional team of British Association for Counselling and Psychotherapy qualified counsellors.

4.4.3. The launch consisted of joint press releases and social media through the council, CCG and Kooth provider, Zenxone. Shared marketing was agreed across Kent and Medway to support district roll out and “how to” webinars have been delivered to over 100 professionals.

4.4.4. Service findings across the first two quarters show (summary in Appendix 4):

- Service users: 78% female, 18% male and 4% gender fluid / Agender
- 12.7% BME
- Q1 saw predominantly 16-17-year olds using the service but Q2 showed a shift towards a wider age group 11-16-year olds
- Most referrals to service were initially from face book / parents during Q1 with a shift to school / parent referral during Q2. May reflect the marketing sources.
- Highest registrations were from Gillingham / Twydall and Rainham area; lowest from Walderslade / St Marys Island area.
- Average login per month – 499 with 67% occurring out of office hours, highest usage during 6-9pm hours.
- Usage:

Service area	Per month
No. of counselling sessions	30
Average service users chatting	18
No. of service users using message counselling	43
Average number of messages swapped	217

- The highest number of goals set through Kooth were regarding self-help / self-care and how to access services.
- Most prominent service issues presenting during Q1 were Anxiety /Stress, suicidal thoughts, self-harm, sadness and self-worth. During Q2 these were Anxiety /Stress, self-worth, self-harm, school / college issues and family relationships.
- Top three articles accessed by users were on hobbies and interests, resources and my school.



- Self-help and live forums focused on my parents, Spotify list Be resilient and back to school / anxiety. On average 369 users visited forums.
- Service feedback is asked for after every session. From those who responded:
  - 83% felt heard, understood and respected a lot
  - 83% felt what was talked about was important to them
  - 75% felt the person helping them was a good fit for them
  - Overall, 83% felt the sessions was right for them
  - 91.7% highlighted they would recommend this to a friend

#### 4.4.5. Future challenges:

- Continued marketing to ensure we test reach opportunities to full range of 11-25-year olds.
- Embed Kooth as part of the care pathway open to Medway's young people.
- Contract ends March 2021

#### 4.5. Future opportunities:

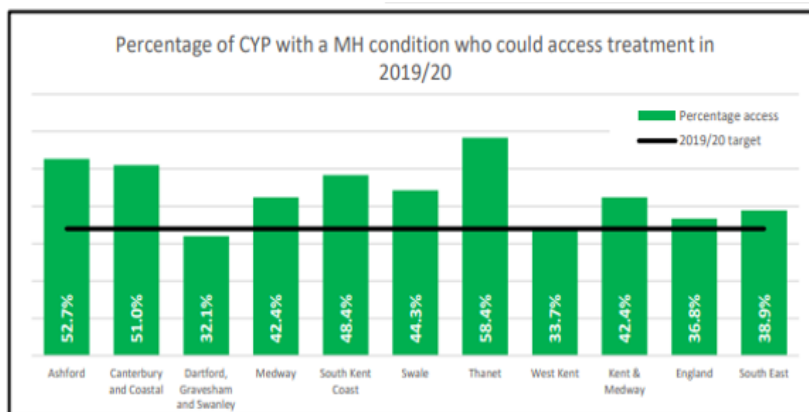
- To be part of a digital review of online tools to support children and young person's emotional wellbeing and mental health.
- Recommissioning toward focusing service on key needs.

### 4.6. NHS England CYP MH access target performance 2019/20

4.6.1. Local LTP plans set out the route to achieve the national target of increasing access to specialist mental health services to 35% by 2020/21. The rate during 2018/19 was only 33% of Medway's children and young people were accessing specialist services.

4.6.2. The national 2019/20 target was to enable 34% of CYP with a diagnosable mental health condition to access evidence-based treatment, increasing to 35% for 2020/21.

4.6.3. Medway has reached 42.4% for access performance for 2019/20 with 2570 CYP receiving treatment (defined as attending two or more appointments). This has risen from only just meeting the 33% access rate the end of 2018/19. This means that during 2019/20, over 500 more CYP received treatment through our mental health services. Fig. 10.



Estimated prevalence of CYP MH conditions

CCG	Prevalence
Ashford	2583
Canterbury & Coastal	3492
Dartford, Gravesham & Swanley	5397
Medway	6067
South Kent Coast	3887
Swale	2530
Thanet	2964
West Kent	8936
Kent & Medway	35856
England	1066433
South East	155250

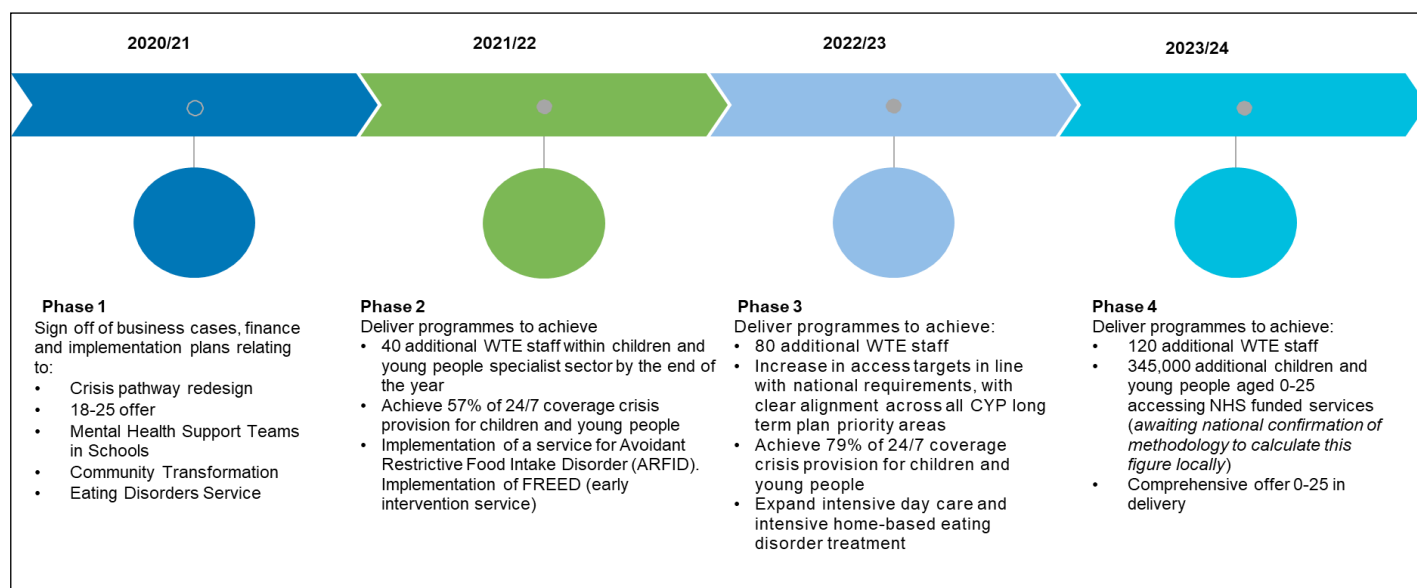
Fig. 10 Access rate for CYP

4.6.4. Medway's access rate is still only based on activity from our main block contracts with NELFT, MCH and a few specialists' providers / out of area contributions. During 20/21 even considering the impact of Covid, we are hopeful new activity from projects: Emerge and Kooth, as well as two new Mental Health Support Team's will continue to increase the support available in Medway.

#### 4.7. Future Areas of Focus for Medway:

4.7.1. NHSE/I have requested CCG's to produce a refreshed Plan for September 2021. This plan will become a Kent and Medway children and young people's mental health plan, and will set out a detailed roadmap to 2023/24, including investment planning.

4.7.2. The children and young people's mental health programme (across Kent and Medway) requires investment to meet an additional 240 whole time equivalents increase in workforce by 2023/24 (NHSE/I ambitions tool) and significantly more children and young people supported. Below is the high-level route map for meeting the LTP requirements:



4.7.3. Whilst the Long Term Plan sets out six key targets, these will be delivered under a whole system approach and will implement an iThrive and Trauma Informed framework. These approaches will support the ambition of improving outcomes for all children and families in Kent and Medway.

4.7.4. Covid-19 response to mental health capacity is a priority. The significant pressure related to volume of referral and complexity of cases within the specialist mental health service will have a long-term impact on children and young people’s outcomes as they wait longer for interventions. The nature of the pressure requires a system-response, to manage the demand pre-referral (through other services, schools, families and primary care) and to increase capacity within the crisis (urgent and emergency) pathway. A Children and Young People’s Mental Health Covid Response Taskforce will bring system leaders together to agree to actions that can relieve the pressure on the specialist service.

4.7.5. Resolving the pressure within the neurodevelopmental pathway and prescribing is a priority. The issue of the neurodevelopment challenge has been well rehearsed through our health and education boards and has been escalated through the Covid 19 Restart programme and CCG committees. As a result, there is now an identified CCG senior lead and clinical lead to support a system-wide response to the issue.

## 5. Risk management

5.1. The LTP risks are associated towards meeting the NHS Long Term Plan targets held by the CCG. Due to Medway’s Partnership Commissioning arrangements, these risks are shared.

Risk	Description	Action to avoid or mitigate risk	Risk rating
Historic, suppressed, and new demand on waiting lists for mental health and neurodevelopmental services	Neurodevelopment with large historic waiting lists over 2 years. Waits to increase with increased concern regarding children’s behaviour, prompting an increase in referrals. New demand over anxiety and /or stress concerns.	Kent and Medway Task Force to oversee increases in demand.  Demand modelling across all services to understand capacity.  CCG ND focused papers  Complex case reviews	High (B2)
Delayed or lack of investment into CYP MH	Finance arrangements unconfirmed for MHIS	MHIS finance meetings with CCG	Low (C3)

Risk	Description	Action to avoid or mitigate risk	Risk rating
	2021/22 yet commitment for CCG spend against Long Term Plan.		
Workforce	National and local challenge to recruit and retain staff	System wide response towards development of skills and expertise. Training programmes roll out.	Low (C3)
Governance	Unclear governance arrangements creating delays in decision making	Pathway developed alongside new plan to offset delays	Low (C3)

## 6. Consultation

- 6.1. NELFT and Partnership Commissioning have continued to be an active member of many strategic boards, partnership groups, and has participated in working groups for further development of joint local care pathways, such as neurodevelopmental, ADHD and sleep.
- 6.2. The LTP partnership board has continued to meet quarterly over the past year to build on the developments detailed in the 2019/20 plan and has been a partner in leading on the mental health recovery plan across Kent and Medway.
- 6.3. MYPWS is reviewing its digital presence alongside its young people feedback loops it holds with its service users.
- 6.4. Understanding of the Impact of COVID-19 on our children and young people's mental wellbeing has been a focus for Medway's LTP and of Kent and Medway mental health recovery plans. Many national and local surveys have highlighted increases in anxiety and stress during this testing time. Medway Public Health produced valuable insight into the experiences of children and young people during the first national lockdown. This exercise is to be repeated to assist with our understanding.
- 6.5. The LTP will be recruiting a Mental health participation worker to build on our understanding and a programme of work to continue ensure our children's and young people's voices are included in future developments.
- 6.6. Medway has commissioned a review to pull together the experiences of the many different people and organisations involved when accessing or leaving

specialist mental health services for children and young people. This review seeks to understand the:

- Experience or journey of our children and young people through the system,
- To build a multi-professional understanding of the problems and challenges in the system, and
- The effect of these challenges is having on children and young people.

6.7. The findings will form a set of recommendations for Medway and support the development of an expressions of interest for NHSE/I health and justice funding. This proposal seeks to address the challenges of children and young people who are often high risk and are held by a number of agencies. The proposal is for a £1.5m investment over 3 years across Kent and Medway and is of benefit to children and young people in care, in the youth justice system or those who have extremely complex needs.

6.8. Continue to build relationships and coproduction opportunities with Medway Parent and Carer Forum.

6.9. Development of robust feedback system from our children and young people through the development of a Participation worker to focus on emotional wellbeing and mental health. In development with Medway Youth Services.

## 7. Children and Young People Overview and Scrutiny Committee – 7 January 2021

7.1. The Committee considered this report at its meeting on 7 January 2021 and its comments are summarised as follows:

7.2. Officers introduced the report which updated the Committee on the Emotional Health and Wellbeing Contract and on developments through the Local Transformation Plan.

7.3. Members then raised a number of questions and comments, which included:

- **Waiting list** – officers confirmed that the Clinical Commissioning Group (CCG) had provided additional funding to tackle the long waiting lists in relation to the neurodevelopment pathway (for children aged over 11) which had since improved and was being sustained through the difficulties of the Covid-19 pandemic and activity had in fact increased. Officers across the partnership shared the concerns around this area and confirmed that it was an area with focus for all partners to address the issue across the system and services such as a more enhanced digital psycho-education offer. Officers added that no children under the age of 11 were waiting longer than the national guideline of 18 weeks.

- **Crisis presentations** – it was confirmed that in Medway this remained a challenge, however Medway was starting to even out and fall in line with Kent wide activity.
- **Tier 4 Service** – It was confirmed that the Kent and Medway Adolescent Tier 4 Service contract at Woodlands was successfully transferred in April 2020 and transformation was ongoing. This would impact on the crisis offer and would include a children section 136 suite too.
- **Kooth** – it was suggested that all Members receive a demonstration of Kooth so all Councillors can understand what it was about and its benefits for young people, in their role as Corporate Parents,
- **Engagement with young people** – officers confirmed that in addition to Medway Youth Council, which was mentioned in the report, engagement took place with Medway Children and Young People Council and other young people groups.
- **Additional support through schools** – Members welcomed the increase in 18 mental health support workers based within schools and in addition, there was a mapping of all support services available to young people so that the offer could work collaboratively as a system. The mental health support in schools would also be used as one of the main vehicles for developing the wider workforce with the appropriate skills to support children and young people.
- **Capacity to manage a potential covid related increase in demand** – concern was raised that the pandemic and lockdowns would have a negative impact on many young people's mental health and whether there was the capacity to manage a real potential in demand. Officers responded, confirming they were acutely aware and ensuring that communication with young people was clear to ensure awareness of what services and support was available. Work was taking place to prepare for an increase in referrals and this was being done in close liaison between commissioners and providers. Officers also stressed that for many children and young people, their anxiety was a normal reaction to a very unnatural situation and was not a mental illness.
- **Performance monitoring and validating data** – concern was raised about the lack of performance monitoring that had taken place during the covid-19 pandemic. Officers confirmed that the validation of NHS data would ordinarily need to go through a detailed governance process before data was released. During the pandemic, this had been stepped down. Formal contract meetings were time intensive and to respond to the crisis there was a need to provide capacity elsewhere from both commissioners and providers perspective. However, relationships had strengthened in the last year with a more collaborative partnership approach and data was

still provided to commissioners on a monthly basis, it just had not gone through the normal validating process.

- **Clinical harm review** – It was explained that any patient on a long waiting list (awaiting any health treatment) needed a clinical harm review, in case their situation deteriorated. Furthermore, in relation to the suicide and self harm prevention work stream, led by Public Health, this had identified a group of 13-16 year olds who raised particular cause for concern and therefore some additional intervention work took place with those individuals to ensure patient safety.
- **Trauma-informed practice** – officers confirmed their intention to provide all Members with information on this and would run a member briefing later in the year.
- **Gender of patients** – in response to a concern raised about the under representation of boys in the service, officers confirmed that there was the same open access for boys and girls and the over representation of girls was mirrored nationally. Nationally, this was being explored and it was also suggested that the next Medway Youth Council's conference could include this as a strand to explore.

7.4. The Committee noted the report.

## 8. Health and Wellbeing Board – 16 February 2021

- 8.1. The Health and Wellbeing Board considered a report which presented an update on the Emotional Health and Wellbeing Contract and The Local Transformation Plan which was introduced by the Partnership Commissioning Programme Lead for Children's and Young People's Mental Health and Emotional Wellbeing.
- 8.2. Since the report had been published on the agenda, the Partnership Commissioning Programme Lead was pleased to report that there had been a notable reduction in referrals due to anxiety, low mood, and stress which the report showed had increased in October 2020.
- 8.3. The Board raised several comments and questions, which included:
- **Bereavement support** – the Partnership Commissioning Programme Lead confirmed that from April 2021 there would be greater access to bereavement support services (including suicide) for under 25-year-olds across Kent and Medway. Recognising that during the current pandemic bereavement was a big issue, this was welcomed.
  - **Kooth** - the Partnership Commissioning Programme Lead confirmed that the Kooth service would continue post April 2021 and would be available from age 10, removing the Year 6 cut off. A comment was made about re-

evaluating any future contract end date of March to a more suitable time of the year.

Asked about the clinical outcomes for children using the service and how it compared with more traditional face to face services, the Partnership Commissioning Programme Lead advised that Kooth was being accessed more and more by certain cohorts, the service was goal based and data showed that goals were being achieved over time. Comparisons were unable to be drawn to other service types due to the nature of the current Child and Adolescent Mental Health Services (CAMHS) contract. Availability of outcomes data would be reviewed when the service was recommissioned.

Board Members were advised that later in the year there would be training for elected Members on Kooth. It was requested that an invite be extended to all Board Members.

- **Transition** – the Partnership Commissioning Programme Lead confirmed that locally several surveys and investigations into people’s experiences of services had been undertaken including around the transition between children’s and adult’s mental health services. A comment was made that improvements had been made regarding transition, but more work needed to be done, particularly considering the potential impact over a number of years on mental health owing to the pandemic.
- **Timely access to treatment** – with reference to figure 3 of the report (MYPWS: Percentage CYP waiting over 18 weeks between referral to treatment, per pathway), it was noted that an improvement was seen over time for waiters on four locality pathways owing to the recruitment of new staff and an increase in the number of clinics, but considerable progress was needed to reduce waiting times for waiters on the neurodevelopmental pathway. In response, the Partnership Commissioning Programme Lead explained that wait times for over 11s on the neurodevelopment pathway continued to be a challenge and was very much a focus area across the system. A working group had been established to review what else could be done not only for the service but around the service for example navigating support.
- **Children in Care (CiC)** – the work targeting CiC was commended. It was hoped that there would be closer working between mental health and wellbeing services and Medway’s CiC teams. It was considered that this would be the next stage of development.

#### 8.4. The Health and Wellbeing Board:

- a) noted the comments of the Children and Young People Overview and Scrutiny Committee set out in section 7 of the report.
- b) noted the update report together with the comments made by Board Members.
- c) requested that an invite to the Kooth training scheduled for later in the year be extended to all Health and Wellbeing Board Members.



## 9. Climate change implications

- 9.1. Wherever possible the use of local and digital solutions is being encouraged to reduce the carbon impact on the need to travel to appointments. Due to Covid 19 restrictions services are having to develop more virtual opportunities which should drive and if successful, move services towards a greater digital footprint in the future.
- 9.2. There will always be, at times a need for face to face support and these opportunities should try to take place in local facilities removing the need for traveling out of area.

## 10. Financial implications

- 10.1. As previously highlighted to the board, the NHS Long Term Plan, published on 7 January 2019, commits to grow investment in mental health services faster than the overall NHS budget. This will create a new ring-fenced investment fund worth at least £2.3 billion a year by 2023/24. Further to this, the NHS made a commitment that funding for children and young people's mental health services will grow faster than both overall NHS funding and total mental health spending.
- 10.2. Consolidated financial profiles for LTP and NHS Long Terms Plan released in the NHS Mental Health implementation Plan 2019/20 – 2023/24 provide an indicative breakdown of investment levels to be expected through CCG's and Central / transformation workstreams.
- 10.3. The LTP money is held within the CCG commissioning arrangements and reports to NHS England. There are no specific financial implications associated with this report.
- 10.4. LTP 2020/21 Funding breakdown: *Only part year financial allocation due to Covid 19 finance blocks in place until September 2020.*

Priorities	Actions	Total spend allocated
Education and mental health services	Emotional Wellbeing staffing increase MCH	£116,000
Community support of vulnerable groups	Navigation consultancy, Kooth, ELSA and resources	£90,000
Child and Young Persons Voice	Participation Worker (18 months)	£100,000
Increasing Access / Vulnerable groups	YOT MH post	£84,000 - additional transitional funding

## MHST Funding breakdown (NHS E)

Project initiation funding – payable 2020/21 only	£40,000
Full year funding 2020/21 – training (part year costs)	£217,120
Full year funding 2021/22 – adjusted for HCAS and training	£555,148

### 11. Legal implications

- 11.1. The reduction of inequalities in access and outcomes is central to the whole transformation work. In Medway we have made sure our LTP plans details how we have taken into account the duties placed on us under the Equality Act 2010 and with regard to reducing health inequalities, duties under the Health and Social Care Act 2012.
- 11.2. NHS England is committed to developing access and waiting time standards in mental health services across the whole life course. The NHS Constitution standard, Access, and Waiting Time directorate details standards for waiting times for patients to wait no longer than 18 weeks from referral to time of their first treatment. NHS England publish standards of access targets for CCG's and across the Strategic Transformation Partnership footprints.
- 11.3. The LTP programme is held to account by Medway's Health and Wellbeing Board and NHS England through monitoring and review of the publicly available agreed Local Transformation Plans for Children and Young People's Mental Health and Wellbeing.

### 12. Recommendations

- 12.1. The Cabinet is asked:
- i) To note the comments for the Children and Young People Overview and Scrutiny Committee and the Health and Wellbeing Board set out at sections 7 and 8 of the report respectively.
  - ii) To note the update report and direction of travel to produce the Local Transformation Plan (LTP) refresh by September 2021 as required by NHS England/Improvement, as set out in paragraph 2.5 of the report,
  - iii) To delegate authority to the Director of Public Health, in consultation with the Portfolio Holders for Adults' Services and Children's Services (Lead Member), to develop and finalise the Local Transformation Plan (LTP) refresh with the LTP Programme Board and submit it to NHS England/Improvement.

## 13. Suggested Reasons for Decisions

- 13.1. To support the development and timeframe of an overarching plan across Kent and Medway which provides a framework for local decisions to be made with our local communities.

### Lead officer contact

Emma Block Partnership Commissioning Programme Lead for Children's and Young People's Mental Health and Emotional Wellbeing

Email: [emma.block@medway.gov.uk](mailto:emma.block@medway.gov.uk)

### Appendices

Appendix 1 – Bringing together LTP in Kent and Medway to highlight shared priorities in meeting NHS Long Term Plan

Appendix 2 – Pathway comparisons with MYPWS

Appendix 3 – MYPWS Service user breakdown

Appendix 4 – Kooth summary

### Background papers

None.

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## Appendix 1: Bringing together LTP in Kent and Medway to highlight shared priorities in meeting NHS Long Term Plan

Local Transformation Plan: Projects and Work Streams 2019/20 <i>Kent and Medway (combined)</i>			
Health Promotion	Early Intervention and Prevention	Specialist and Crisis	Whole System Enablers
<ul style="list-style-type: none"> <li>• Good Mental Health Matters</li> <li>• HeadStart Resilience Hub</li> </ul> <p>Kent</p> <ul style="list-style-type: none"> <li>• Fantastic FRED</li> <li>• HeadStart Kent: Whole school approaches</li> <li>• School Public Health Service</li> </ul> <p>Medway</p> <ul style="list-style-type: none"> <li>• A Better Medway</li> <li>• Child Health Team Public Health</li> <li>• Child Health Team MCH</li> </ul>	<ul style="list-style-type: none"> <li>• Specialist Mental Health Service - targeted support</li> <li>• Kooth</li> <li>• Mental Health Support Teams in Schools (8 teams)</li> <li>• Training for foster carers, adopters and social care staff in mental health support for LAC</li> <li>• Anna Freud Schools Link Programme workshops</li> </ul> <p>Kent</p> <ul style="list-style-type: none"> <li>• KCHFT Adolescent &amp; Targeted Emotional Wellbeing Service</li> <li>• Mind and Body</li> <li>• HeadStart Kent</li> <li>• LGBT+ BeYou</li> </ul> <p>Medway</p> <ul style="list-style-type: none"> <li>• Triple P parenting</li> <li>• ELSA</li> <li>• Increase in capacity in Emotional Wellbeing Team School health</li> <li>• Education EW Providers audit</li> <li>• Low / moderate MH provider framework</li> <li>• Emerge</li> </ul>	<ul style="list-style-type: none"> <li>• Specialist Mental Health Service</li> <li>• North Kent Transition Service</li> <li>• Porchlight Adolescent Wellbeing Service (Thanet)</li> <li>• Kent Youth Justice speech and language</li> <li>• Kent Youth Health &amp; Justice Trauma Informed Approaches</li> <li>• Urgent and Emergency Care service development</li> <li>• Medway YOT mental health staffing</li> <li>• Substance Misuse services</li> </ul>	<ul style="list-style-type: none"> <li>• Digital Strategy development</li> <li>• Participation and engagement staff</li> <li>• Whole system analytics and intelligence</li> <li>• CYP-IAPT</li> <li>• Implementation of Thrive framework</li> <li>• Implementation of Adverse Childhood Experiences (ACEs) and Trauma Informed Approaches</li> <li>• System Communications</li> <li>• Reviews of accessing specialist mental health services</li> </ul>

**Direct relationship with:** SEND Change for Kent Children, SEND Medway, Transforming Care, Urgent and Emergency MH work stream, Perinatal mental health, Suicide Prevention, Continuing Healthcare for children and young people and contracts: *NELFT CYPMHS / MYPWS & AAEDS, KCHFT, Perinatal, Adult MH, MCH*

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## Appendix 2: Pathway comparisons with MYPWS

	Locality	NLDA
Sep-20		
Caseload Medway YPWS	909	500
Caseload waiting for assessment	34	220
Caseload waiting for treatment	156	332
Caseload receiving treatment	719	
Percentage having an assessment within 12 weeks	90.2%	21.2%
Percentage waiting under 18 weeks for treatment (national target 92%)	92.6%	19.6%

	Locality	NLDA
Comparison of waiting times		
Average waiting period for treatment from date of referral (Sept 20) (days)	66.48	668.04
Average waiting period for treatment from date of referral (12 month average) (days) <small>NLDA ASC specific</small>	111.81	617.81
Change in average waiting period for treatment between 12 month average and Sept average	-45.33	50.23
Longest waiting period (days)	112	730

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### Appendix 3: MYPWS Service User

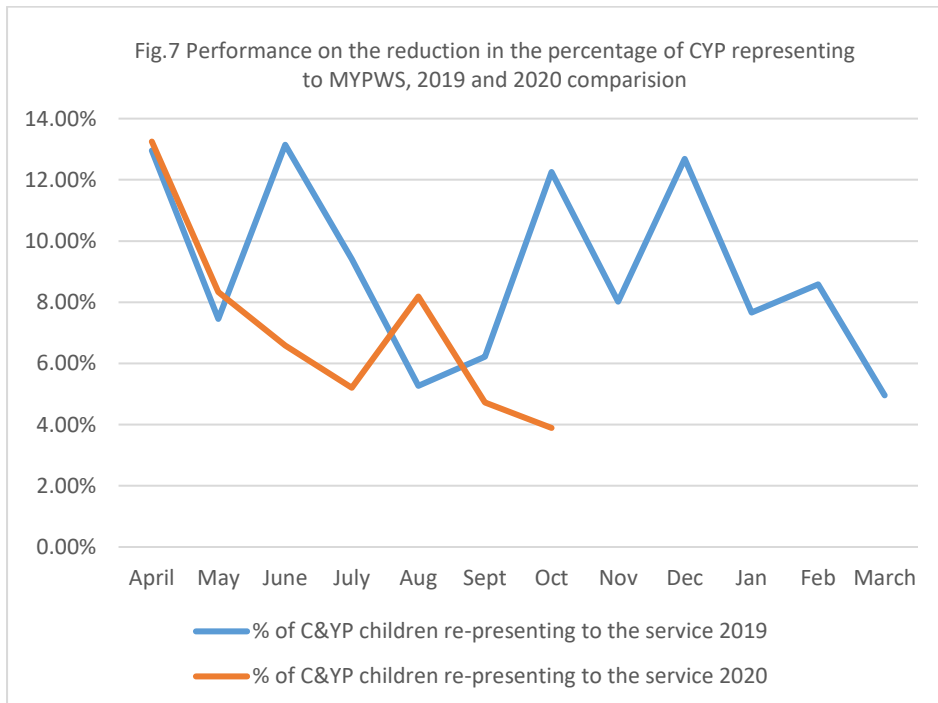
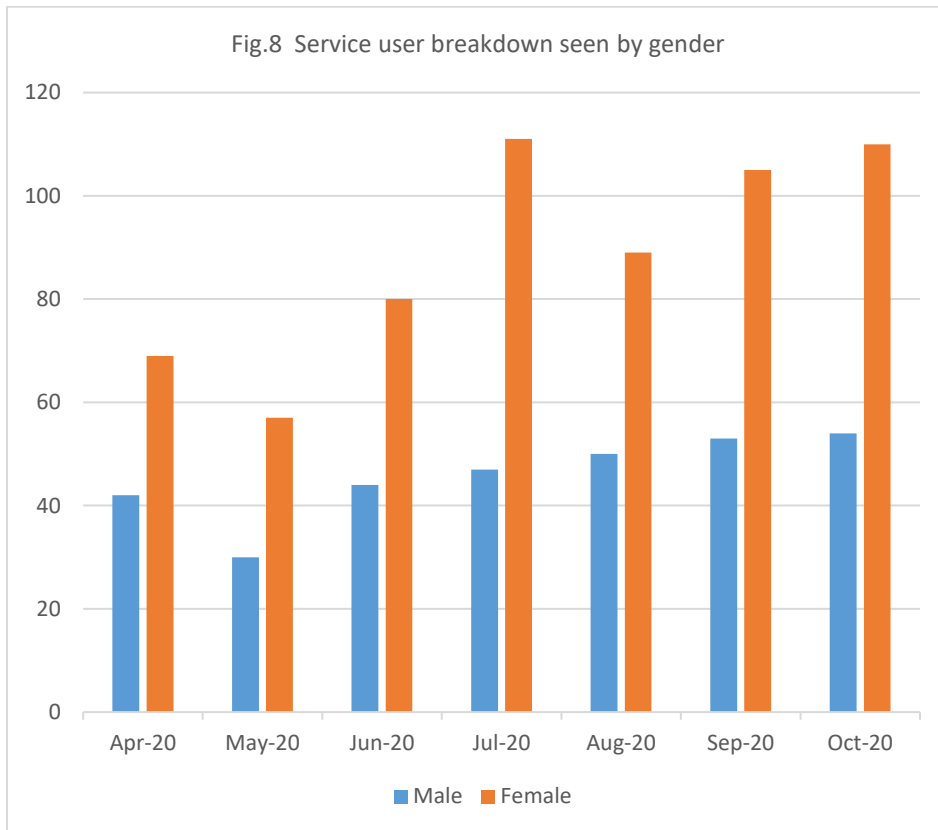
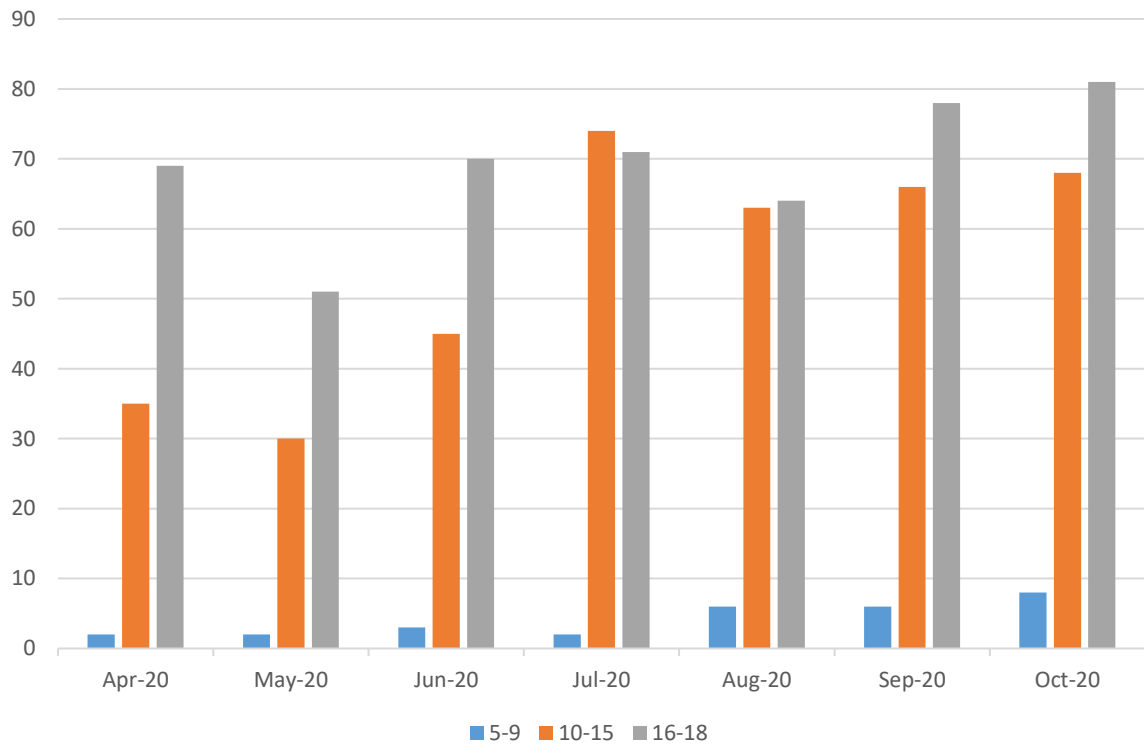

















Fig. 9 Breakdown of children and young people seen by MYPWS, April - Oct 2020



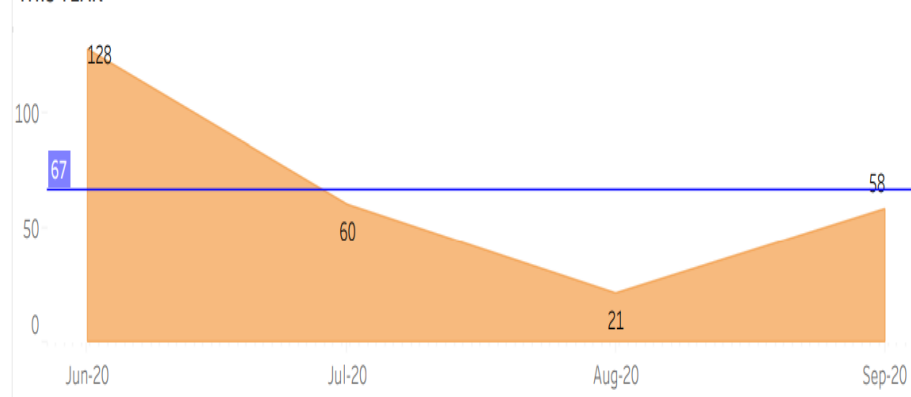
## Appendix 4: Kooth Summary

### Gender of New Registrations

Gender	Q1	Q2	Total
Agender	 3	 1	 4
Female	 98	 111	 209
Gender Fluid	 2	 5	 7
Male	 25	 22	 47
Grand Total	 128	 139	 267

### New registrations

THIS YEAR



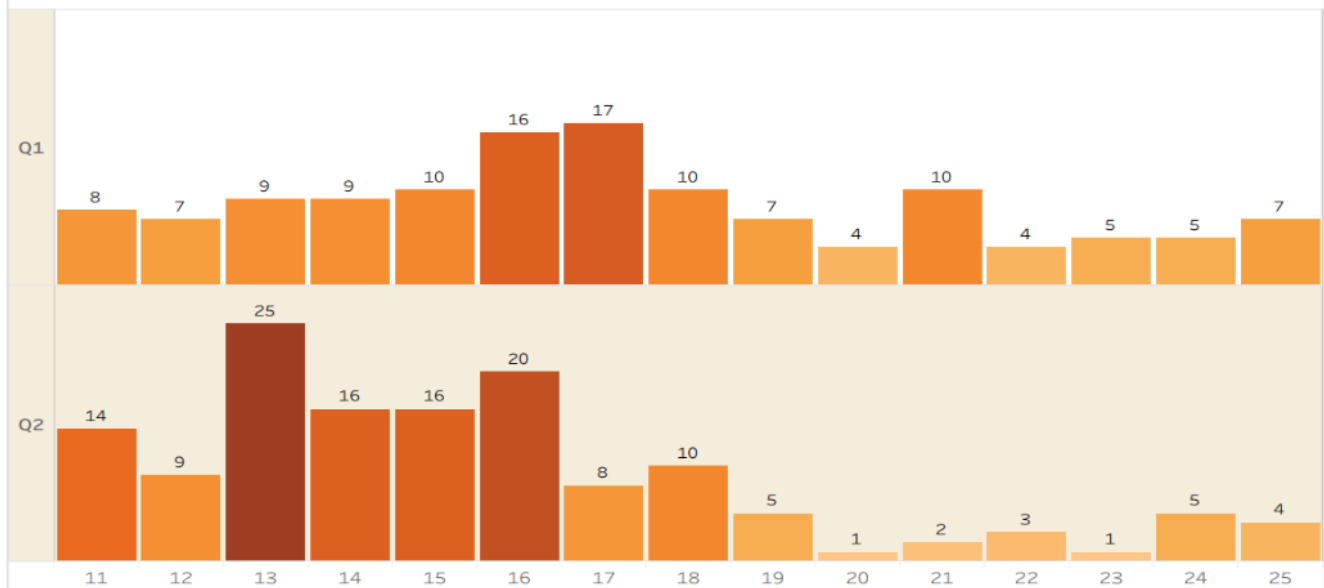
### % BME of New Registrations

	Q1	Q2	Total
BME	12.50%	12.95%	12.73%

Where new registrants heard of KOOTH

	Q1	Q2	Total
School	16	32	48
School or teacher	11	27	38
Parent	19	8	27
Others	15	11	26
Facebook	21	5	26
Friend	11	14	25
Other worker	9	5	14
Google	4	8	12
CAMHS	5	6	11
Social worker	3	6	9
GP	3	5	8
Instagram	4	3	7

New Registrations: No Service Users by Age



### Out of Office Logins % (Office hours are 9am - 5pm)

Office Hours  
32.62%



Out of Office Hours  
67.38%

Q1

Office Hours  
32.12%



Out of Office Hours  
67.88%

Q2

### Goal Categories

This shows the number of Service Users with a new goal created in each category. Service user can have more than one goal.

Self help self care	9
Getting professional help in service	7
Emotional exploration	6
Getting professional help outside our service	5
Challenging thoughts	4
Enjoying self	4
Feeling happier	4
Motivation	4
Self exploration	4
Friendships	3
School college training	3
Career aspirational	2