

North East Lincolnshire

Children and Young People's Mental Health and Emotional Wellbeing Strategic Plan

2021 – 2024

What has been achieved so far?

Contents

The Children and Young People's Mental Health and Emotional Health and Wellbeing Strategic Plan 2021 – 2024 sets out the following:

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Key National & Local Drivers

<p>The NHS Long Term Plan</p>	<p>The plan supports the commitments to mental health services for children and young people and provides details of a new framework to help achieve the mental health specific improvements such as:</p> <ul style="list-style-type: none"> • Better access to community mental health services for those experiencing common mental health issues such as anxiety and depression • A multi disciplinary Mental Health Support Offer in schools – with mental health support teams in a quarter of the country by 2023 • Extending service models to those up to 25 years old, taking an integrated approach across health, social care, education and voluntary sector services • Exploring how the i-THRIVE operating model can be extended to cover services for those up to 25 years old • Ensuring easier access for specialist services for children and young people with an eating disorder • Expanding age-appropriate crisis services
<p>Humber and North Yorkshire – Children & Young People’s Mental Health Strategic Plan Priorities</p>	<p>This annual high level work plan is to deliver the priorities identified in the plan. The summary of the priorities are:</p> <ul style="list-style-type: none"> • Improved prevention and early intervention to help people stay healthy and reduce demand on clinical services • Improved/expanded access to mental health services for those who need them • Systems approach to trauma informed care • Effective management of risk • Improved engagement and coproduction with children and young people • Workforce development
<p>Local Policies & Strategies</p>	<ul style="list-style-type: none"> • Joint Strategic Needs Assessment • Adolescent Lifestyle Survey • Vulnerable Health Needs Assessment • North East Lincolnshire Mental Health Strategy (in development) – <i>This plan forms part of the MH Strategy and is the children’s delivery plan for NEL</i>

National Metrics

NHS Long Term Plan, Children and Young People's Mental Health Access Commitments:

- By 2023/24 at least an additional 345,000 children and young people aged 0-25 will be able to access support via NHS funded mental health services and school or college-based Mental Health Support Teams
- From April 2021 NHSE will be monitoring the number of 0-18s receive at least 1 contact from an NHS funded service – changes to 1 contact is consistent with evidence for the effectiveness of single session interventions

Long Term Plan Access Trajectory

	2019/20	2020/21	2021/22	2022/23	2023/24
Five Year Forward View for Mental Health Access (two contacts)	63,000	70,000	70,000	70,000	70,000
LTP Access (one contact)	N/A	73,000	186,500 (164,000 from LTP and 22,500 additional SR)	254,000	345,000

Progress and Achievements

During the last 12 months some of the key milestones achieved are highlighted below:

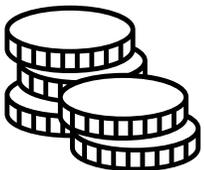
- Set up a team to support children who have struggled to return to education from the direct or indirect effects of COVID-19 - Emotionally Based Barriers to School Avoidance
- Gained Wave 9 funding to enhance the offer from the Mental Health Support Teams, with a focus on SEND
- Delivered an enhanced service for bereavement support via COVID-19 recovery funded (time limited project)
- Set up a Resilience Team to support children and young people based upon the results of the Adolescent Lifestyle Survey (time limited project)
- Successful in a Humber and North Yorkshire wide bid for Integrated Care to Health and Justice
- Chosen as one of the first pilot sites for the health and justice programme and set up the JEFF team to support children who have mental health issues and are in or likely to enter into the youth justice system
- Additional funding was gained to extend the Autism in School pilot to include new educational settings to support children and young people with neurodiverse needs to remain in mainstream education
- The Mental Health Sector Network was formed
- Listening event was held to co-produce the mental health strategy which all partners will work towards
- Undertook a comprehensive and robust assurance process to directly award the CAMHs contract to the new provider – NAViGO
- Successfully transitioned the CAMH service to NAViGO
- Additional neurodiversity funding gained from the ICB to enhance the neurodiversity model
- Working closely with Humber and North Yorkshire ICB colleagues to deliver on a number of programmes of work
- Pilot of the High Cost Placement Panel

Mental Health of Children and Young People in England 2022

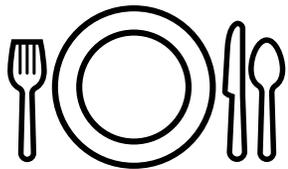
NHS Digital conducted a series of follow up reports to the Mental Health and Young People Survey 2017, exploring the mental health of children and young people in 2021, during the COVID-19 pandemic. This has also been repeated in 2022 to explore changes since 2017. Experiences of family life, education, and services during the COVID-19 pandemic are also examined.



In 2022, 18% of children aged 7 to 16 years and 22% of young people aged 17 to 24 years had a probable mental disorder. Children aged 7 to 16 years, rates rose from 1 in 9 in 2017 to 1 in 6 in 2020. Rates of probable mental disorder then remained stable between 2020, 2021 and 2022. Young people aged 17 to 19 years, rates of a probable mental disorder rose from 1 in 10 in 2017 to 1 in 6 in 2020. Rates were stable between 2020 and 2021, but then increased from 1 in 6 in 2021 to 1 in 4 in 2022.



One in five 7 to 16 year olds lived in households that experienced a reduction in household income in the past year. This was more than 1 in 4 among children with a probable mental disorder.



The proportion of children and young people with possible eating problems increased since 2017; from 6.7% to 13.0% in 11 to 16 year olds, and from 44.6% to 58.2% in 17 to 19 year olds.

Mental Health of Children and Young People in England 2022



39.2% of 6 to 16 year olds had experienced deterioration in mental health since 2017, and 21.8% experienced improvement. Among 17 to 23 year olds, 52.5% experienced deterioration, and 15.2% experienced improvement.



Problems with sleep on three or more nights of the previous seven affected 28.7% of 6 to 10 year olds, 38.4% of 11 to 16 year olds, and 57.1% of 17 to 23 year olds. Across all age groups figures were much higher in those with a probable mental disorder (59.5%, 74.2%, 86.7% respectively).

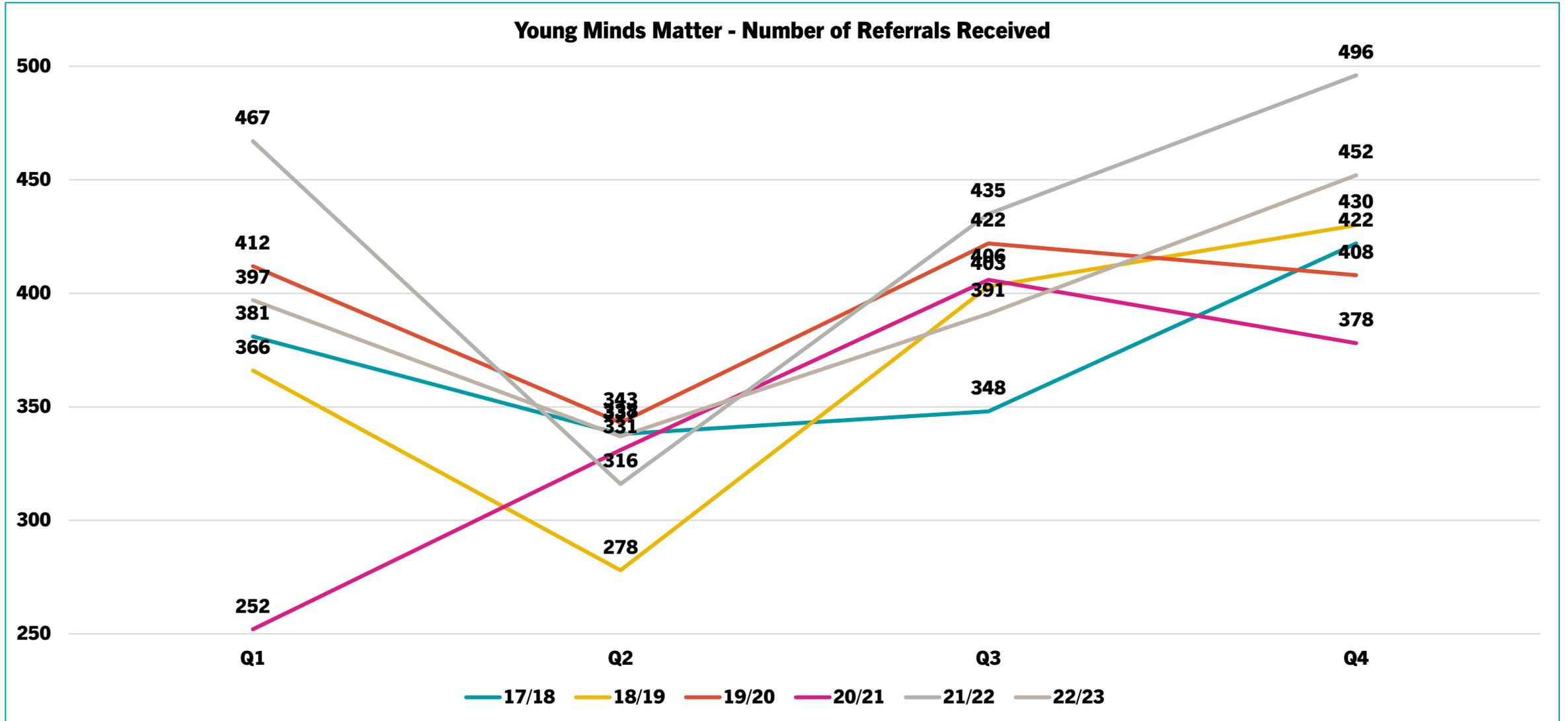


10.6% of 6 to 16 year olds missed more than 15 days of school during the 2020 Autumn term. Children with a probable mental disorder were twice as likely to have missed this much school (18.2%) as those unlikely to have a mental disorder (8.8%).



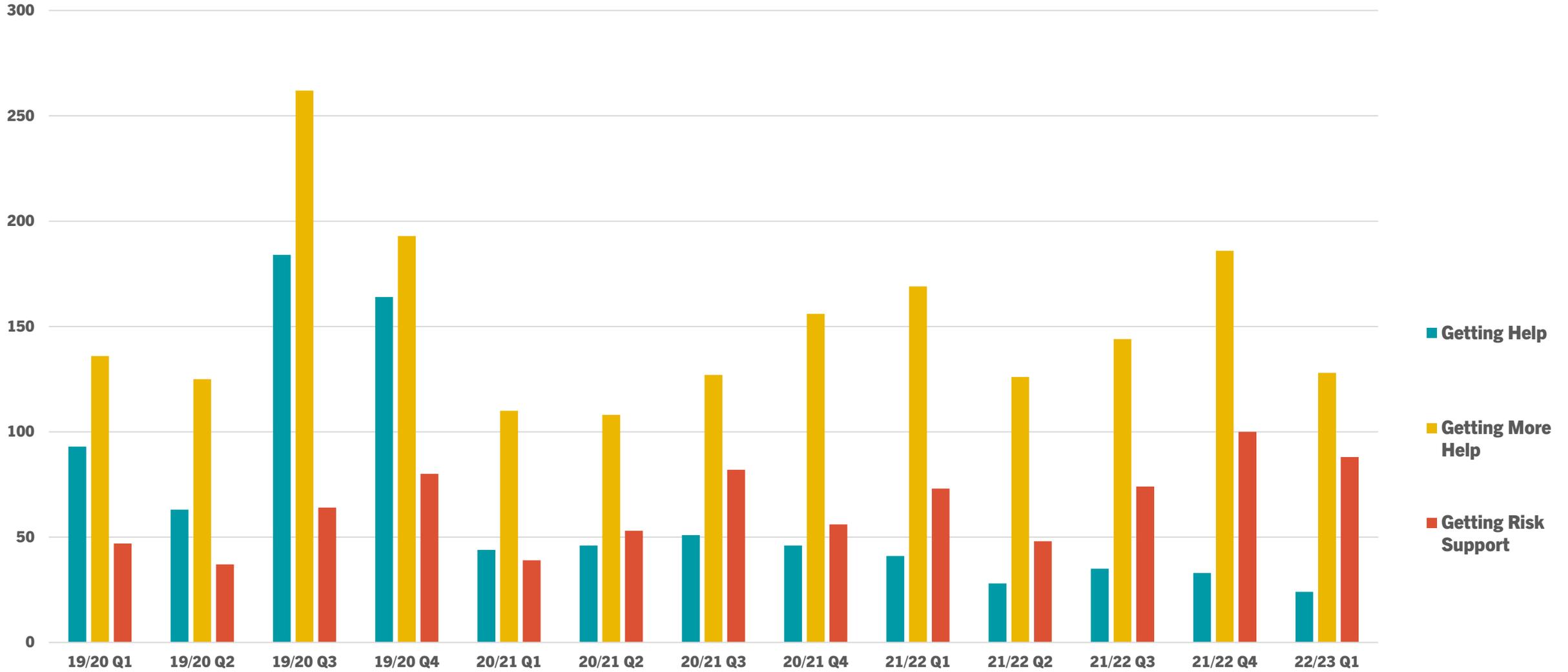
The proportion of 6 to 16 year olds with a laptop or tablet they could work on at home increased from 89% in 2020 to 94.4% in 2021. The proportion receiving regular support from school or college also increased, from 73.7% in 2020 to 79.9% in 2021.

Children & Young People's Data



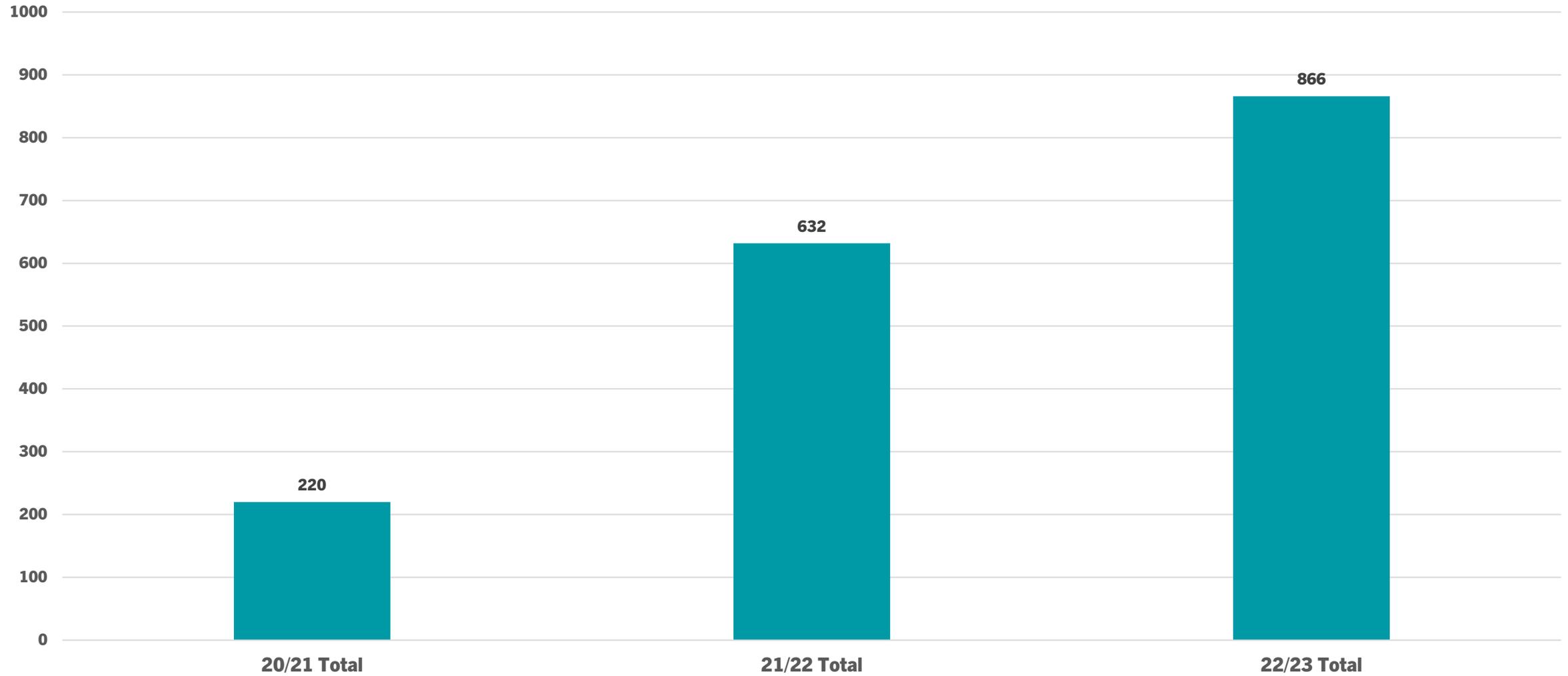
Children & Young People's Data

Young Minds Matter - Numbers Accessing Services by Quadrant



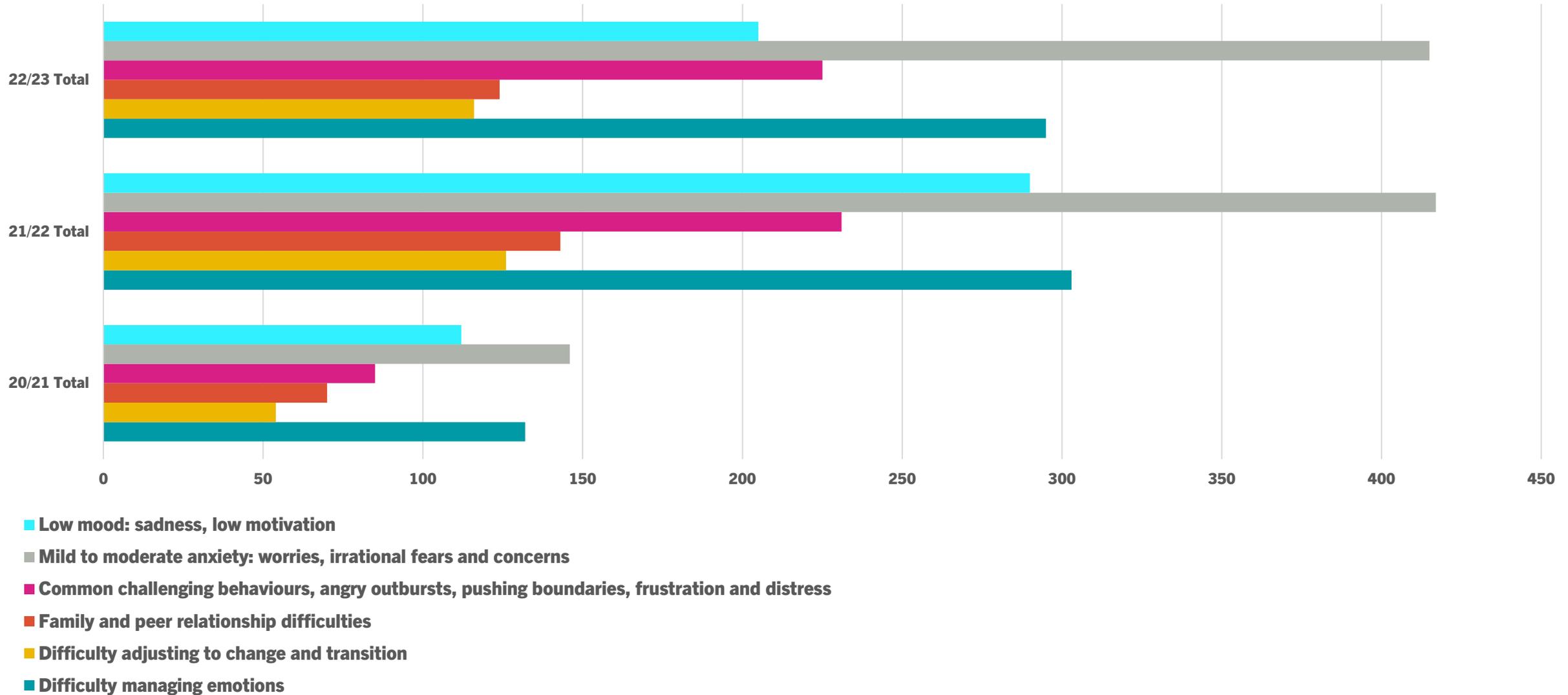
Children & Young People's Data

Compass GO... - Number of Referrals Received



Children & Young People's Data

Compass GO... Reasons for Referral



Local Data for Children and Young People

In the context of our Place we know:

74% of children and young people are happy about their life ¹

38% of children and young people often feel sad, anxious, depressed or tearful ¹

13% of young people have 'sometimes' cut/hurt themselves to deal with a problem or stress, **4%** stated 'usually' and **3%** stated 'always' ¹

The rate of self-harm (10-24 years) at **274.7 per 100,000 (2021/22)**, which is better than the England average. ²

The rate of hospital admissions for mental health conditions (<18 years) is **75.7 per 100,000**, which is better than the England average. ²

615 children are looked after by the local authority as of 31 March 2022 and **233** were subject to a children protection plan ³

26% of children live in low income families (2019) ⁴

There has been an **increase in the number of students who have started Elected Home Education since COVID-19**, however the reasoning remains uncertain ⁵

Increased screen time and behaviour are the main issues as children settle back into school due to the disruptions caused by COVID-19 ⁵

There is a continue **increase in demand and acuteness across all mental health services** (e.g. increases in anxiety/eating disorders) (Local Data)

There is an estimated **3,000** of children and young people with mental health disorders aged 5 -17 years ⁴

There is an estimated **904** of children and young people with emotional disorders aged 5 -16 years ⁴

1. Adolescent Lifestyle Survey (2021)

2. Child Health Profile (2021/22)

3. Department for Education (2021/22)

4. Local Authority Health Profile (2019)

5. North East Lincolnshire: COVID-19 Impact Assessment (2021)

Our Ambition – What will 2025 look like?

All children, young people, families and professionals are aware of the local mental health and emotional wellbeing services and access routes

Children, young people and families get the right support, at the right time, before issues escalate

There is continued improvement in the mental health and emotional wellbeing support in school and colleges providing early intervention and prevention support within a school and college setting

When children and young people are experiencing a mental health crisis, they will be able to access the support they need in a timely and age-appropriate manner

The provision for eating disorders will have improved locally to respond to the increase in demand and there will be earlier identification for children who require support

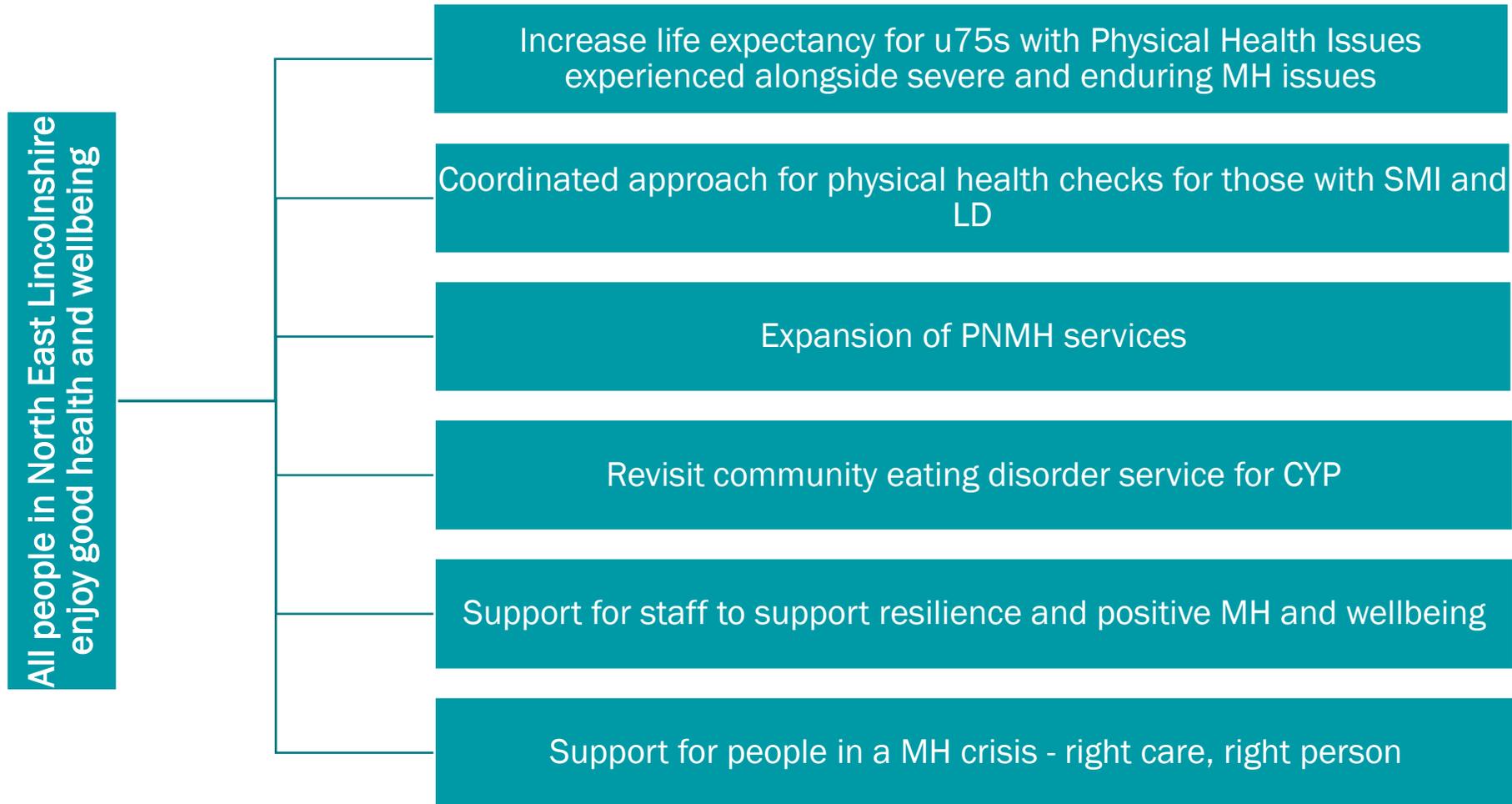
Support is provided for the most vulnerable children and young people and health inequalities will have reduced for children and young people

Educational staff will be upskilled and have the right knowledge to support children at the earliest opportunity

Children, young people and families are central to everything that we do, and all decisions are made utilising their views and experiences to improve the services and support available locally

Outcomes Framework

Below are our priorities for Mental Health (all-age) as part of our local Outcomes Framework



Our Priorities & Actions

1. Access to Community Services

2. Prevention & Early Help

3. Mental Health Support Teams

4. Crisis Support (including suicide prevention)

5. Eating Disorders

6. Support to Vulnerable Children & Young People

7. Education

8. Co-production & Engagement

9. Wider System Developments

Priority 1: Access to Community Services

Objectives:

Ensure that all children, young people, families and professionals are aware of the local mental health and emotional wellbeing services and access routes.

Actions and Next Steps:

- ❖ Undertake a review of local service provision:
 - ❖ Finalise engagement and consultation with key partners to look at what is working well and the key challenges
 - ❖ Present key themes and areas of focus to senior leadership
 - ❖ Improvement of pathways to ensure children/young people get the right support, at the right time
 - ❖ Develop action plans to look at short-, medium- and long-term goals to meet needs of children and young people
- ❖ Establish regular provider network meetings to look at current issues and solutions and develop relationships
- ❖ Development of a communications plan to improve information, advice, and guidance to accessing services/support

What does good look like?

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| <ul style="list-style-type: none">❖ Children, young people and their families accessing services will have a positive experience of care❖ Professionals, parents/carers, children and young people are aware of the offer locally and what choices are available to them❖ Key partners know how to, and access training to help them feel skilled and equipped to recognise and manage early signs of mental health needs and signpost children/young people | <ul style="list-style-type: none">❖ Seamless transition between services for children and young people❖ Routine referrals are seen within 8 weeks❖ By 2023/24, at least an additional 345,000 children and young people aged 0-25 nationally will be able to access support via NHS funded mental health services and school or college-based MHSTs❖ Information, advice and guidance is easily accessible and understandable |
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Priority 1: Access to Community Services – Update 22/23

What has been achieved?

- ❖ Presented findings of the SWOT analysis to senior leaders
- ❖ Provider network meetings scheduled monthly to discuss issues and share solutions
- ❖ Communication leads across the borough are meeting to now look at coordinated communications and promotions on social media channels
- ❖ Updated information, advice and guidance has been developed (e.g. Household brochure)

Actions and Next Steps:

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| <ul style="list-style-type: none">❖ Undertake a review of local service provision:<ul style="list-style-type: none">❖ Finalise engagement and consultation with key partners to look at what is working well and the key challenges❖ Improvement of pathways to ensure children/young people get the right support, at the right time❖ Develop action plans to look at short-, medium- and long-term goals to meet needs of children and young people❖ Review the environment for children and young people accessing services and how it feels for young people accessing services❖ Improve the clarity of thresholds between different services❖ Support children and young people to attend appointments | <ul style="list-style-type: none">❖ Implement waiting well initiatives to ensure children are supported whilst on the waiting list for support, including waits on the day❖ Improve pathways for vulnerable groups (e.g. LGBT+, children looked after, youth justice)❖ Improve transition from child to adult services❖ Input into the data dashboard, embedding routing performance reporting❖ Further embed the THRIVE model across partnerships in conjunction with Anna Freud Centre❖ 1,738 children and young people receiving 1+ contact from NHS funded community services in 23/24 to meet the Long-Term Plan target |
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Priority 2: Prevention & Early Help

Objectives:

To ensure that children, young people and families get the right support, at the right time, before issues escalate.

Actions and Next Steps:

- ❖ Ensure there is a comprehensive workforce development plan for social, emotional, mental health across the workforce
- ❖ Ensure there is mental health and emotional wellbeing promotion and prevention (e.g., incorporate mental health promotional activities in schools etc.,)
- ❖ Work alongside the Humber Coast and Vale to undertake a digital review of support services for young people and evaluate the impact
- ❖ Review the early intervention and prevention pathways to ensure children access support at the earliest opportunity
- ❖ Review the support on offer to parents/carers and ensure they are aware of where to access service
- ❖ Scope out what is needed within an early year's mental health strategy linked to the early help strategy

What does good look like?

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| <ul style="list-style-type: none">❖ Mental health is everyone's business and is understood by all❖ Children and young people can access digital apps and support effectively❖ Children and young people feel more confident and emotionally resilient | <ul style="list-style-type: none">❖ Children and young people get the right support, at the right time, before issues escalate❖ Parents and carers know where to go to access advice and guidance when supporting their child |
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Priority 2: Prevention & Early Help – Update 22/23

What has been achieved?

- ❖ Gained funding via 'Contain Outbreak Management Fund' to develop a Resilience Programme utilising the survey results from the Adolescent Lifestyle Survey to provide a tailored support offer for secondary schools
- ❖ Humber and North Yorkshire undertook a digital review of support services for young people and evaluate the impact
- ❖ A communications group across all mental health and emotional wellbeing providers has been established to ensure there is consistent messaging
- ❖ One of the sites for 'A Better Start' a programme focused on promoting good early childhood development

Actions and Next Steps:

- ❖ Evaluation of the resilience programme and look at ways to ensure sustainability moving forward
- ❖ Review the early intervention and prevention pathways to ensure children access support at the earliest opportunity
- ❖ Undertake a review of the information, advice and guidance available to children and families
- ❖ Review of the local digital offer, ensuring digital poverty is considered throughout
- ❖ Scope out what is needed within an early year's mental health strategy linked to the early help strategy
- ❖ Implement the 'A Better Start' programme
- ❖ Improved access to self-care resources and service information for children and families
- ❖ Increase and improve the training and awareness for all professionals working with children to support them to identify and intervene to address key mental health issues at the earliest opportunity
- ❖ Implement the recommendations based upon the feedback provided from the digital review undertaken by Mind

Priority 3: Mental Health Support Teams

Objectives:

Continue to improve the mental health and emotional wellbeing support in school and colleges through the implementation of the Mental Health Support Teams across the full borough, to provide early intervention and prevention support within a school and college setting,

Actions and Next Steps:

- ❖ All educational settings will continue to access the Mental Health Support Teams and the monthly consultation sessions
- ❖ Complete an evaluation of the service and implementation to look at next steps
- ❖ Full implementation of the expansion of the MHST through Wave 4 funding
- ❖ Whole school/college approach audits and action plans completed in all settings
- ❖ Development/embedding the whole school/college approaches

What does good look like?

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| ❖ All settings are accessing their assigned Education Mental Health Practitioner and Supervising Practitioner | ❖ Positive feedback from children, young people, families and professionals accessing the service |
| ❖ Children and young people will be able to access mental health and emotional wellbeing support earlier, before issues begin to escalate | ❖ All educational settings will have completed their Whole School/College approach audit and be working toward the recommendations set in the action plan |

Priority 3: Mental Health Support Teams – Update 22/23

What has been achieved?

- ❖ Implementation of Wave 4 funding to expand the offer to the remaining educational settings across the borough to ensure there is equitable access across NEL
- ❖ All educational settings (except one) engaged in the link sessions delivered by Compass GO
- ❖ Service embedded into the local area and positive impact from children and families
- ❖ Additional funding received via Wave 9 in March 2023 to enhance the provision and develop a SEND focused offer
- ❖ Whole school/college approach being implemented within educational settings
- ❖ Quarterly data reports show achievements of target outputs and improved outcomes for children and young people

Actions and Next Steps:

- ❖ Implementation of the actions outlined in the HNY Mental Health Strategic Plan:
 - Key partners, children and families know how to access MHST and what support can be provided
 - Reduce inappropriate referrals to CAMHs from schools through effective MHST consultation model
 - MHSTs are embedded within the wider Early Help model at place and part of new emerging models of care (e.g., Family Hubs to complement existing early intervention mental health services)
- ❖ Complete an evaluation of the service and implementation to look at next steps
- ❖ Implementation of the Wave 9 funding and embed the offer across the borough
- ❖ Undertake an audit of the referrals into CAMHs from educational settings and develop a plan to target specific settings
- ❖ Ensure there is clarity of thresholds between different services

Priority 4: Crisis Support (including suicide prevention)

Objectives:

Children and young people experiencing a mental health crisis will be able to access the support they need in a timely, age-appropriate manner, to improve the experience for children and young people and their families.

Actions and Next Steps:

- ❖ Audit to understand children/young people in crisis working alongside A&E colleagues (e.g. self-harm)
- ❖ Deep dive into local cases of attempted suicide and death by suicide to identify themes and develop local actions for service improvement
- ❖ Findings from audit and deep dive to inform future service delivery and improvements
- ❖ Further development of the crisis and intensive home treatment service to improve the experience for children/young people
- ❖ Finalise North East Lincolnshire's Suicide Prevention Strategy and Action Plan and implement recommendations

What does good look like?

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| <ul style="list-style-type: none">❖ Reduction in the number of children and young people getting to the point of crisis❖ Children, young people and families know where to seek help earlier to prevent issues escalating to the point of crisis❖ Children, young people and families know where to go to seek support in a crisis | <ul style="list-style-type: none">❖ Young people in crisis seen within 1 hour and urgent referrals are seen in 5 days❖ All key partners signed up to the Suicide Prevention Strategy and continue to progress actions |
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Priority 4: Crisis Support (including suicide prevention) - Update 22/23

What has been achieved?

- ❖ North East Lincolnshire's Suicide Prevention Strategy has been developed with an action plan for recommendations
- ❖ Additional funding via the Service Development Fund (SDF) to enhance the staffing within the crisis team
- ❖ Young people in crisis seen within 1 hour and urgent referrals are seen in 5 days
 - ❖ Achieving 98.8% of urgent referrals waiting time of 1 hour *(22/23 Q1-Q3 data)*
 - ❖ Achieving 99.3% of urgent referrals waiting time and urgent referrals seen in 5 days *(22/23 Q1-Q3 data)*

Actions and Next Steps:

- ❖ Review the crisis offer and ensure this meets the need of children, young people and families
- ❖ Audit to understand children/young people in crisis working alongside A&E colleagues (e.g. self-harm)
- ❖ Deep dive into local cases of attempted suicide and death by suicide to identify themes and develop local actions for service improvement
- ❖ Findings from audit and deep dive to inform future service delivery and improvements
- ❖ Further development of the crisis and intensive home treatment service to improve the experience for children/young people
- ❖ Cross reference suicide action plan to ensure the plans complement each others workstreams

Priority 5: Eating Disorders

Objectives:

Enhance the local eating disorder service to respond to the increase in demand in eating disorders due to local need and ensure that there is earlier identification of children and young people requiring support to ensure the best outcomes for young people locally.

Actions and Next Steps:

- ❖ **Enhance the eating disorder service locally to meet the increase in need:**
 - ❖ Increase staff aligned to supporting CYP with an ED
 - ❖ Introduction of the FREED model for 16-25 years to ensure young people are seen quickly
 - ❖ Work closely with local services to support physical health issues, admission into hospital and transition to adult services
 - ❖ Produce an action plan to demonstrate progress made
- ❖ **Support professionals working with children and young people to identify eating disorders earlier:**
 - ❖ Work alongside educational settings and other key professionals to ensure they recognise the signs and symptoms of an eating disorder
- ❖ Audit and review of service developments

What does good look like?

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| ❖ 95% of young people referred for assessment/treatment receive treatment for urgent cases in one week and four weeks for non-urgent cases | ❖ Positive feedback from children, young people, families and professionals accessing the service |
| ❖ Earlier identification of eating disorders to support early intervention and prevention | |

Priority 5: Eating Disorders – Update 22/23

What has been achieved?

- ❖ Enhancement of staffing into the eating disorder team via the Service Development Funding 22/23
- ❖ 3 schools within NEL have been selected to pilot SEED educational toolkit
- ❖ 95% of young people referred for assessment/treatment receive treatment for urgent cases in one week and four weeks for non-urgent cases
 - ❖ Achieving 100% of urgent referrals waiting time (22/23 Q1-Q3 data)
 - ❖ Achieving 89.8% of routine referrals waiting time (22/23 Q1-Q3 data)

Actions and Next Steps:

- ❖ Development of an all-age pathway for children and adults following the transfer of the CAMHs contract to NAViGO from 1st April 2023 as part of the longer-term transformation work
- ❖ Undertake a mapping exercise to understand the provision locally and identify the gaps
- ❖ Development of the FREED model
- ❖ **Support professionals working with children and young people to identify eating disorders earlier:**
 - ❖ Work alongside educational settings and other key professionals to ensure they recognise the signs and symptoms of an eating disorder
- ❖ Review the training requirements for the workforce relating to eating disorders
- ❖ Review the offer for eating disorders across NEL, ensuring that the whole THRIVE model is covered by a range of services (e.g. eating difficulties)

Priority 6: Support to Vulnerable Children & Young People

Objectives:

Ensure support is provided for the most vulnerable children and young people within our borough and aim to reduce health inequalities experienced by young people who are the most susceptible to poor mental health. These include those groups likely to need the greatest support around their mental health and emotional wellbeing:

- ❖ Children who are looked after
- ❖ Children who have experienced trauma
- ❖ Children involved in the criminal justice system
- ❖ Children with autism and/or learning disability
- ❖ Young people transitioning from children to adults' services
- ❖ Children who have become bereaved, or have suffered a significant loss
- ❖ LGBTQ+

Actions and Next Steps:

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| <ul style="list-style-type: none">❖ Review the current trauma pathway❖ Continue to work alongside key partners to enhance the bereavement support locally❖ Review support and skills/knowledge to support children and young people who identify as LGBTQ+❖ Review the current support offer for children who are looked after and develop recommendations to meet demand❖ Work alongside the Humber Coast and Vale ICS to improve support for children and young people involved in the Youth Justice System | <ul style="list-style-type: none">❖ Revalidating and enhancing models for neuro-development❖ Deliver the autism in schools' pilot❖ Promote the key worker programme❖ Raise awareness amongst professionals for the Care Education Treatment Review/Dynamic Support Register process❖ Review the provision for under 25-year old's, to ensure a smooth transition between services |
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What does good look like?

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| <ul style="list-style-type: none">❖ Vulnerable children and young people are supported by an appropriate service in a timely manner❖ Key professionals have the knowledge and skills to support children experiencing a bereavement or significant loss❖ Support is developed and available for children and young people within the Youth Justice System | <ul style="list-style-type: none">❖ Children who are looked after are supported earlier with social, emotional, mental health concerns❖ The CAMHs CLA team have increased input into children and young people's care (e.g., placements)❖ There will be a smoother transition for children moving into adult services, with more young people getting the right service |
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Priority 6: Support to Vulnerable Children & Young People – Update 22/23

What has been achieved?

- ❖ Implementation of the JEFF team, for the health and justice programme. Multi-agency working across Compass GO and the Youth Justice Team to support young people who have mental health issues and are likely to enter the youth justice system
- ❖ Bereavement support implemented via COVID-19 recovery funded, which was a time limited project which has been delivered via St. Andrew's Hospice
- ❖ Additional funding has been gained via the Autism in Schools project to expand the number of educational settings taking part in the pilot
- ❖ A business case has been developed across key partners to seek additional investment into the Children Looked After team which highlights the investment to save model which could be achieved if investment is gained
- ❖ Additional neurodiversity funding has been gained to enhance the current model

Actions and Next Steps:

- ❖ Review of the first year of delivery of the JEEF integrated health and justice team and recommends for the next year of delivery (e.g. amendments required)
- ❖ Development of the Children Looked After and Care Leavers transformational work, feeding into the Programme Board
- ❖ Review support and skills/knowledge to support children and young people who identify as LGBTQ+
- ❖ Review the provision for under 25-year old's, to ensure a smooth transition between services
- ❖ Neurodevelopment model enhancements – task and finish Neurodiversity Way Forward
- ❖ Review the impact of the Autism in Schools project and explore options to ensure sustainability of the programme

Priority 7: Education

Objectives:

Work alongside educational staff to ensure that they have the right skills and knowledge to be able to support children at the earliest opportunity, whilst promoting positive mental health and emotional wellbeing in all aspects of the school environment.

Actions and Next Steps:

- ❖ Implementation of the Anna Freud Link Programme and action plans developed
- ❖ Establishment of the Emotionally Based School Avoidance/Elected Home Educated pilot
- ❖ Continuing to support the Wellbeing for Education Return and COVID-19 recovery plan
- ❖ Encourage educational settings to sign up to the Senior Mental Health Leads Training programme
- ❖ Continue to foster good working relationships with educational staff

What does good look like?

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| <ul style="list-style-type: none">❖ Educational staff recognising the signs and symptoms of mental health and emotional wellbeing concerns❖ Pupils aware of the local offer and where to seek support❖ Educational staff able to consistently refer into the most appropriate service | <ul style="list-style-type: none">❖ Settings engaging in the training opportunities available to them❖ More children and young people reporting positive emotional wellbeing on the Adolescent Lifestyle Survey❖ More children and young people feel able to reach out for support |
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Priority 7: Education – Update 22/23

What has been achieved?

- ❖ Implementation of the Anna Freud Link Programme and action plan developed
- ❖ Establishment of the Emotionally Based Barriers to School Avoidance/Elected Home Educated pilot
- ❖ Continuing to support the Wellbeing for Education Return and COVID-19 recovery plan
- ❖ Encourage educational settings to sign up to the Senior Mental Health Leads Training programme
- ❖ Worked closely with educational staff to ensure continued good working relationships

Actions and Next Steps:

- ❖ Review the Emotionally Based Barriers to School Avoidance and impact, whilst looking at ways to ensure sustainability of the programme
- ❖ Further promotion and push on the Senior Mental Health Lead training (funded via DfE)
- ❖ Hold the Schools Conference – Autumn 2023 to share information
- ❖ Look at ways to reduce duplication with educational settings (e.g. going into schools to deliver training)

Please note other actions are linked to other priorities (e.g. Mental Health Support Teams)

Priority 8: Co-production & Engagement

Objectives:

Ensure that children, young people and families are central to everything that we do, and all decisions are made utilising their views and experiences to improve the services and support available locally.

Actions and Next Steps:

- ❖ Engage with children, young people and families in the development and set up of the Autism in Schools pilot
- ❖ Work alongside the participation worker recruited to Compass GO... to ensure the voice of the child is captured
- ❖ Continue to engage with key stakeholders in the development of service provision
- ❖ Work alongside Youth Offending services and young people to begin shaping the Integrated Health and Justice pilot
- ❖ Continue to work alongside families to shape the neurodevelopmental offer
- ❖ Link into the ICS children's workstream and our local co-production strategy

What does good look like?

- | | |
|---|--|
| <ul style="list-style-type: none">❖ Children, young people and families will feel listened to and valued❖ Children, young people and families will be vital and embedded within all areas of service improvement and re-design | <ul style="list-style-type: none">❖ Ensure all decisions made are informed by the needs of children, young people and families❖ We will work together to develop solutions and feedback on the changes that have been implemented |
|---|--|

Priority 8: Co-production & Engagement – Update 22/23

What has been achieved?

- ❖ Co-produced the name of the Health & Justice service with children and young people, JEFF and also designed the logo and branding alongside focus groups held across the borough
- ❖ Parent forums have been established for Autism in Schools project which shapes the programme and how schools implement changes
- ❖ Link into the ICS children's workstream and our local co-production strategy
- ❖ Work alongside the participation worker recruited to Compass GO... to ensure the voice of the child is captured within all of the on-going service delivery and future developments of the service
- ❖ Held a Mental Health Strategy Workshop which was led by a number of Experts by Experience

Actions and Next Steps:

- ❖ Wave 9 funding for MHSTs to ensure that the SEND offer is co-produced by a number of key partners and children/families
- ❖ Hold a series of co-production and consultation events to shape the transformational elements of the CAMHs contract
- ❖ Educational settings conference being held in September 2023
- ❖ Contribute to the listening events being held by the HNY ICS
- ❖ Continue to work alongside families to shape the neurodevelopmental offer
- ❖ Review language and practice in the system to ensure it is reflective of trauma informed practice
- ❖ Development of the Youth Board to ensure the voice of the child is threaded throughout all of the developments
- ❖ Ensure that we are inclusive and listen to as many young people and families as we can
- ❖ Ensure that strategies are joined up across agencies

Priority 9. Wider System Developments

From the consultation and engagement held, there are wider system developments which have been highlighted as an area which is either a challenge, gap or an opportunity to work differently:



Behaviour Support



Infant Mental Health & Early Years



Trauma Support & Pathways



Family Support



Attachment Issues



Workforce Development

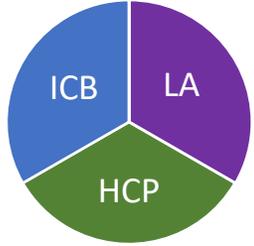
These issues identified require whole system commitment to supporting these agendas as these span across health, social care and education. Therefore, wider discussions will be held to look at these in a multi-agency approach and these priorities held strategically.

Nothing About Us Without Us – Children’s Feedback & Priorities

Young people have set priorities from consultation and engagement and the following actions have been highlighted as the priorities. These align to the CYP Strategic Plan and both work towards the same priorities.

Theme	No.	Action	Priority	Action aligned to
1. Self-help/support whilst you wait	1.1	Directory of support	Priority 2: Prevention and Early Help	Undertake a review of the information, advice and guidance available to children and families
2. Communication	2.1	Regular communication required, including an acceptance letter with contact details for services. Occasional calls/texts if waiting list is long for reassurance and to give updates as to how long they will be waiting	Priority 1: Access to Community Services	Implement waiting well initiatives to ensure children are support whilst on the waiting list for support
	2.4	Communicating when services are running behind or if there are staff shortages ahead of the appointment	Priority 1: Access to Community Services	Implement waiting well initiatives to ensure children are support whilst on the waiting list for support
3. Appointments	3.4	Support to the first appointment e.g. attending with a trusted adult, may not want a parent present	Priority 1: Access to Community Services	Support children and young people to attend appointments
4. Environment	4.1	Offer an alternative waiting space than the waiting room and offer a buzzer. When the professional is ready to see you the buzzer goes off and you can walk in	Priority 1: Access to Community Services	Review the environment for children and young people accessing services and how it feels for young people accessing services
	4.2	A comfy space for appointments and waiting room that feels more homely and less clinical/formal – music playing for example		
6. Transition	6.2	Support when transitioning from child to adult services e.g. CYP worker to support to first adult services appointment or provide detailed information on what to expect	Priority 1: Access to Community Services	Improve transition from child to adult services
7. Workforce	7.1	Ensuring GP’s/professionals have a better understanding of surrounding support services.	Priority 9. Wider System Developments	Workforce development

NEL Joint Committee



NEL Health & Care Partnership Board

NEL Health & Care Partnership Leadership Group

HCP Professionals Forum

NEL Mental Health Sector Network

Health and Wellbeing Board

CYPF Strategic Board

CYP EW & MH Strategic Board

SEND Exec Board

Operational Delivery Board (DBV)

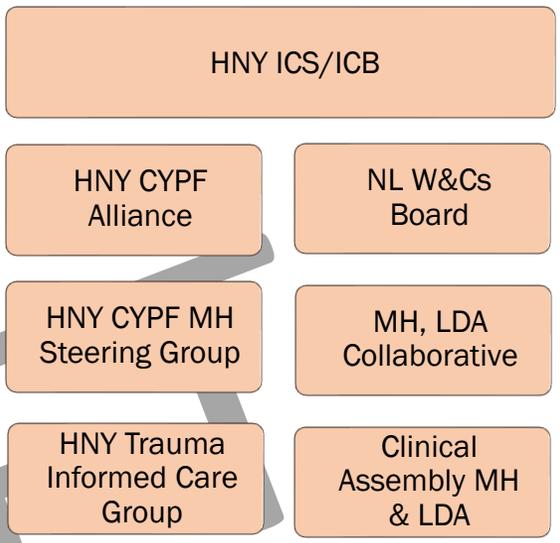
CYP MH Transformation Programme Board

Projects

- Neurodiversity
- Eating Disorders
- PNMH/IMH
- Children Looked After (MH)
- Wave 9 MHST

CYP Mental Health Governance

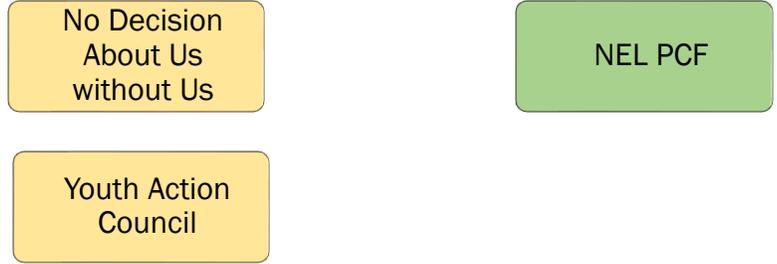
Humber & North Yorkshire



National



CYP and Parent/Carer Forums



Consultation and Engagement Key Themes

A series of engagement and consultation sessions have been held with children, young people and key stakeholders to better understand children's mental health and recommendations for next steps

The following sessions have been held:

- **Strengths, Weakness, Opportunities and Challenges analysis**

- **Digital Children and Young People's Review**



Adobe Acrobat
Document

- **NE Lincs HCP Mental Health Strategy Workshop**

- **Young People's Mental Health Advisory Group - North & North East Lincolnshire**

NE Lincs HCP Mental Health Strategy Workshop

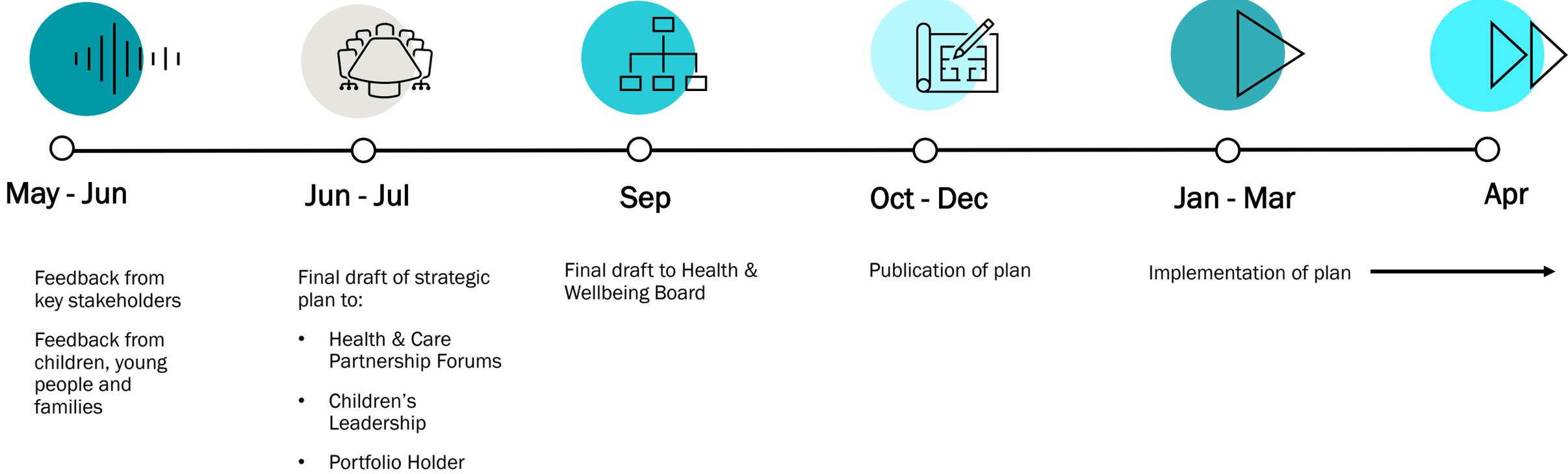
RECOMMENDATIONS			
Service Provision	Wider Community	Schools	Working with Young People & Families
<ul style="list-style-type: none"> • Early intervention • Reduced waiting lists & quicker response times • Self-referral • Wellbeing & resilience • Age appropriate access to services • Increased knowledge for GP's • Increased funding now to save money in the long run/longer-term funding • Improved services for children with eating disorders – commissioned services to meet demand and acuity • Support for 14+ moving to adult services • More therapies for 16-25 years • Peer support • Future planning to support the next generation • Streamlined services & flexible service offer • 24/7 access to advice • Online support (e.g. gaming) • Easier access to GPs • Individualised therapy pathways • Seamless support beginning with early intervention (e.g. Compass Go) & ending with Young Minds Matter (acute support) – fill the middle ground • Commission VCSE/private practice to ensure that all children, wherever they are in the system, have access to mental health services • No child will ever have to wait for mental health care • Eradicate threshold-dependent interventions • See the same professional/consistent worker 	<ul style="list-style-type: none"> • Partnership working • Youth clubs & sport clubs • Community approach for and with children • Activity focussed • Therapeutic activities tailored to interests • Physical wellbeing & activities • Flexible delivery – take the service to young people • Raise aspirations locally • Awareness of what is out there – one directory • Positive mental health messages on social media 	<ul style="list-style-type: none"> • Whole school approach • Holistic approach in schools • Counselling in schools & colleges • Education on mental health in schools • More school nurses & SENDCO's 	<ul style="list-style-type: none"> • Be relatable • Confidentiality & trust, care & empathy • Non-judgemental • Listen the first time/reassurance • Listen to parents & carers • Body image & identity • Social media – filter addiction • Use appropriate language • More comprehensive support & education for parents • MDT approach to include family • Involve young people in decisions • Online games/hubs/information • Mental health literacy education from an early age -> linking to hormones/puberty/growing up. • Match worker to the young person – allow change if not working. • More choice • Gender affirming • Access to support without having to do a parenting course • More accessible information for parents and carers from early years onwards • More practical help – play therapy, Lego therapy – expand on therapies and training

Digital Consultation

RECOMMENDATIONS

Co-production of digital mental health support with children and young people who are representative of communities across the ICS geography	An accessible, 24/7 flexible local service, to compliment Childline and Young Minds national offer, with a variety of support options, resources, and ways to communicate with professionals	Service provider delivered training/briefings on the digital support offer for the professionals already working with children and young people, such as school pastoral workers, youth workers, social workers, etc.
Promotion of digital mental health support through a variety of platforms	Introduction to a service, website, etc. from a trusted source such as school, professionals already involved with the family/young person, etc.	Accessibility/simplicity/engaging concise information with links to further information that is easy to find/navigate
Testimonials from other young people who have accessed the service	Demystifying step-by-step 'walk through' videos/ animations of a young person accessing the service	Trusted mental health professionals who are trained to listen to young people and understand different needs
Help to identify support needs and which service to contact to meet needs, and support navigating the system	Consistency of support, preferably the same person	Share assessment questions prior to the assessment to help alleviate anxiety of the unknown and to help the young person prepare their answers
A privacy 'quick escape' button that users can click on for an immediate switch to another site	Countdown timer that users can set if required – for example if waiting for a call back, a young person could set a timer on the website/app to keep track of the time, while they occupy themselves with distraction techniques, reading, etc. on the site/app	Accurate information about waiting times which is kept up to date
A range of services and resources all under one trusted brand's hub website and/or app; including recommended external links, access to online counsellors, mental health information, forums, articles, free online books, mindfulness activities, distraction techniques and games, videos, audios, podcasts, introductions to services, training for parents, testimonials, online triage, etc.		

Next Steps & Timeline



North East Lincolnshire's Children & Young People's Mental Health & Emotional Wellbeing Strategic Plan

2021
-
2025

This plan was informed by the NHS Long Term Plan, Humber & North Yorkshire – CYP Mental Health Strategic Plan Priorities & local policy & strategies. It has been refreshed & updated in 2023.

Progress & Achievements

- + Undertook comprehensive assurance process to directly award CAMHS contract to Navigo
- + Successfully transitioned CAMH service to Navigo
- + All-age listening event held which included CYP to co-produce mental health strategy
- + Gained funding for projects including Health & Justice, SEND Mental Health Support Team, Resilience, Autism in Schools, bereavement support, EBBSA
- + Funding gained to enhance the neurodiversity model

Rates of a probable mental health disorder in young people:
Aged 7-16 is **1 in 6** Aged 17-19 is **1 in 4**



Mental Health of Children and Young People (MHCYP) survey (2022)



74% of CYP are happy about their life

38% of CYP often feel sad, anxious, depressed or tearful

14% of CYP have 'sometimes' cut/hurt themselves to deal with a problem or stress

Adolescent Lifestyle Survey (2021)

579 children are looked after by the Local Authority
As of 31st March 2023

23% of children live in low income families
Local Authority Health Profile (21/22)

There has been an increase in the number of students who have started Elected Home Education since Covid-19.
NEL: Covid-19 Impact Assessment (2021)

Consultation & Engagement

The following consultation & engagement sessions have been held with CYP & key stakeholders:

- Strengths, Weaknesses, Opportunities & Challenges Analysis**
- Digital CYP Review**
- NEL Health Care Partnership Mental Health Strategy Workshop**
- Young People's Mental Health Advisory Group - NE Lincs & North Lincs**

Our Priorities

1. Access to Community Services

- Presented findings to senior leaders
- Updated advice & guidance developed
- Undertake a review of service provision
- Implement 'waiting well' initiatives
- Improve pathways for vulnerable CYP
- Improve transition from CYP to adult services

2. Prevention & Early Help

- Digital review of support services complete
- Communications group established
- Gained funding for Resilience programme
- Evaluation of Resilience programme
- Increased training for professionals
- Improved access to self care resources

3. Mental Health Support Teams

- MHSTs available to ALL education settings
- Additional funding for SEND focussed team
- All settings receiving link sessions (except 1)
- Complete evaluation to look at next steps
- Audit CAMHS referrals from education
- Ensure clarity of thresholds

4. Crisis Support (Including suicide prevention)

- Suicide prevention strategy developed
- Funding gained to enhance crisis team
- Review crisis offer to ensure it meets need
- Work with A&E to understand CYP crisis
- Further development of crisis & home treatment service

5. Eating Disorders

- Enhanced staffing of Eating Disorders team
- 3 NEL schools involved in SEED toolkit pilot
- Development of an all-age pathway
- Mapping to identify gaps in local service
- Development of the FREED model

6. Support to Vulnerable CYP

- Implementation of the JEFF team
- Bereavement support implemented
- Funding gained for Autism in Schools project
- Transformation work for Children Looked After following business case
- Review 1st year of JEFF project
- Neurodevelopment model enhancements

7. Education

- Emotionally Based Barriers to School Attendance (EBBSA) pilot
- Implemented of Anna Freud Link programme
- Conference for schools to take place
- Review EBBSA impact
- Further promotion of Senior Mental Health Lead training

8. Co-production & Engagement

- Parent forums established for Autism in schools
- Co-produced JEFF branding with CYP
- Workshop held with experts by experience
- Work with families on Neuro offer
- Co-produce CAMHS transformation elements
- Development of a Youth Board

Nothing About Us Without Us!

A number of sessions have been held with young people to decide and set out their top priorities to help improve services. These are:

- Young people led awareness raising & training
- Easier access to service
- Young people leading on work & courses about CYP mental health
- Listen to us more

Our Ambition

What will 2025 look like?

- All CYP, families & professionals are aware of mental health services and how to access
- CYP get the right support at the right time
- Crisis support can be accessed in a timely manner
- Support is provided for the most vulnerable CYP
- Improved eating disorders provision
- Education staff upskilled to support CYP early
- CYP & families at the centre of all decisions

