

**TO: HEALTH AND WELLBEING BOARD
03 MARCH 2016**

**UPDATE ON THE CCG AND ADULT SOCIAL CARE FUNDED EMOTIONAL HEALTH
AND WELLBEING PROJECT
DIRECTOR OF CHILDREN, YOUNG PEOPLE AND LEARNING**

1 PURPOSE OF REPORT

- 1.1 To update the health and Wellbeing Board on the CCG Innovation Fund and Adult Social Care funded schools project.

2 RECOMMENDATION

That the Health and Wellbeing Board (HWBB):

- 2.1 **Notes the project plans and the progress to date.**

3 REASONS FOR RECOMMENDATION

- 3.1 To disseminate the project intentions and progress to a group of key stakeholders to ensure the work aligns with other linked development work being undertaken through the Mental Health Transformation Fund.

4 ALTERNATIVE OPTIONS CONSIDERED

- 4.1 None.

5 SUPPORTING INFORMATION

- 5.1 This project makes a contribution to developing Tier 1 and 2 services to contribute to achieving the vision described in the Ascot, Bracknell, Maidenhead, Slough and Windsor Local Transformation Plan for Children & Young People's Mental Health and Wellbeing which aspires to ensure that

- No children and young people will have a preventable mental health issue
- If they do, they will not wait to get the help they need.

- 5.2 The project particularly contribute to these objectives from the Transformation Plan

- Promoting positive mental health and resilience, and developing resilience for life
- Children and young people providing support and help for each other (peer support)
- Prioritising services to meet the needs of vulnerable groups of children and young people
- To ensure professionals and the community are able to identify when children and young people are distressed and are able to support appropriately
- Everyone who comes into contact with children and young people is appropriately skilled and trained
- Increase awareness and acceptability of mental health
- Equipping professional with tools to manage risk so all feel confident to do their job.

- 5.3 The funding provides pump-priming to undertake five tasks which include
- A/ Develop a cross organisation evidence-based Autistic Spectrum Disorder strategy which identifies a continuum of provision for children and young people in schools
 - B/ Sponsoring two schools to gain National Autistic Society autism friendly accreditation and become beacon schools in Autistic Spectrum Disorder to provide a community resource for other schools in Bracknell Forest and Ascot CCG area, modelling improved in-school support for children and young people pre and post diagnosis
 - C/ Auditing the existing panels (Early Intervention Hub, Young People at Risk Panel, Common Point of Entry) and processes through which children and young people with challenging behaviours which may be indicative of mental health difficulties and/or identified mental health difficulties are referred in order to develop greater cohesion and consistency and improving appropriate referral to tier 2 services
 - D/ Develop a critical mass of trained professionals and local residents to be trainers in Youth Mental Health First Aid and roll out training in the medium to long term
 - E/ Providing a critical analysis of emotional health and wellbeing case work, evaluating whether earlier identification and access to less specialist support could have prevented the need for this specialist service.

The activities and an update (please also see Appendix A)

5.4 **A focus on autism**

Recent data from CAMHS (autumn 2015) showed of a total waiting list of 499 young people, of which 135 were waiting 12 weeks or more for an ASD diagnosis. Nationally, there is an increase in referrals for a diagnosis of ASD from GP and other services. This links to the increase in public understanding of ASD and parents proactively seeking out diagnosis and resources for ASD. There is evidence that inappropriate referrals to CAMHS have increase waiting times. The LA is developing its ASD provision and has recently opened a specialist centre, Rise@GHC, based in Garth Hill College secondary school. This is in addition to an early years resource, Rainbow, which is based at Great Hollands primary school, the Autism Spectrum and Social Communication (ASSC) Service which provides support for pupils in their school setting, early years and primary phase and a commissioned service from Berkshire Autism Service for parents.

- 5.5 The CCG agreed that the benefits of developing an evidence based, multi-agency strategy were clear. The process would enable an audit of existing practice across schools, examination of the data, a consideration of the current deployment of resources, planning to strengthen provision by building on existing good practice and identifying if there is a need for new provision by a multi-disciplinary reference group.

This group has now been established and includes representation from headteachers, CAMHS and Berkshire Healthcare Trust. Three consultation events are planned between now and the summer, and a final draft strategy due July 2016.

5.6 This strand of the project will also provide specialist consultancy support to two mainstream schools to work on accreditation by the National Autistic Society as 'autism friendly' and will be used as beacons of good practice locally. A qualitative analysis of the benefits to a small number of pupils pre and post ASD diagnosis of attending an Autism Friendly School will be undertaken.

5.7 This accreditation mark is concerned with organisational development and sustainable change and therefore accreditation takes in the region of one year to obtain. Within the life-time of this project (April 2016) it is proposed to agree the action plan and key priorities and provide initial training for staff and other members of the school community. Following the final report of this project it is proposed to provide half yearly monitoring reports to key stakeholders including the CCG. This work will result in a better understanding of ASD and the principles of supporting a young person with ASD so that even if a diagnosis has not been made school staff and other agencies can confidently support the child/YP. The participating secondary school is Garth Hill College. As there is an anticipated need to establish a primary provision similar to The Rise@Garth, a robust selection process is underway with primary schools to identify which one will benefit from this sponsorship and has the physical space to develop a resource base in future years. More information about the NAS accreditation is included in Appendix B.

5.8 **Auditing Panel processes**

The LA currently has an Early Intervention Hub and Young People at Risk Panel. These panels are used when there are concerns about a child or young person and provide an opportunity for a multi-agency group to consider the evidence and make recommendations about appropriate placement and /or additional support. Most of the cases considered have a mental health dimension, if not in the child then certainly in the family. In addition, the Fair Access Panel is used when a child or young person is at risk of being excluded from school for poor behaviour and again there is frequently known to be an underlying mental health issue.

5.9 The purpose of auditing of these mechanisms/hubs and panels is to ensure they are complementary and to assess if the client pathway through the processes is easy to navigate. A key question to address is as the Panels have been set up incrementally, do the referral systems work as a cohesive whole system to ensure children and young people can access the support they need.

5.10 **Development of Youth Mental Health First Aid capacity locally to enable the roll out training in the medium to long term**

A need for training across the community to reduce the stigma of mental health, upskill adults who come into contact with children and young people is appropriately skilled and trained and equip professional with tools to manage risk so all feel confident to do their job has been identified. This strand of the project will organise the delivery of training in Youth Mental Health First Aid, evidence based training

package which includes components on all the key mental health concerns. This upskilling will be of benefit in the individual's own organisation whilst providing a resource to deliver training locally in the medium to long term. The project will also sponsor three individuals to undertake a 5 day Train the trainer course.

5.11 The three sets of two day courses, each for 16 participants have been booked and these start in March, with the first course already oversubscribed.

5.12 **A critical analysis of case work, evaluating whether or not earlier identification and access to less specialist support could have prevented the need for this specialist service**

The funding has enabled the piloting of a targeted mental health post, a family systemic therapist who has been undertaking case work amongst her duties. This worker is gathering of qualitative evidence, through a critical analysis of case work, evaluating whether or not earlier identification and access to less specialist support could have prevented the need for this specialist service. This analysis will provide an insight the client journey through the various referral processes and an evidence based view on if and how the outcome could have been different and less costly in relation to service provision had identification taken place earlier.

5.13 **Project outputs**

- An ASC strategy for Bracknell Forest and Ascot schools
- Two schools (one primary and one secondary) with an action plan in place to achieve accreditation under the National Autistic Society Autism Friendly programme and a commitment to sharing good practice with other schools
- 50 members of school staff trained in Level 1 ASC awareness
- 48 professionals/active members of the community trained in Mental health First Aid and 3 staff trained as Trainers in the programme
- 15 clients supported by the Systemic Family Therapist
- A report which includes
- An audit of existing panels (Early Intervention Hub, Young People at Risk Panel, Common Point of Entry) and makes recommendations for improvement
- An analysis of cases referred to the Systemic Family Therapist identifying opportunities for earlier intervention
- An overview of project activities.

5.14 In conclusion a range of activity is being undertaken and a detailed report will be available for consideration in August 2016.

Contact for further information

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APPENDIX A

WHAT KEY THINGS WOULD THE PROJECT HOPE TO ACHIEVE?

<p>What are the expected benefits of implementing this idea? (e.g. cost savings, reduced activity?) By April 2016</p>	<p>How will this be measured? (e.g. audit, survey, change in activity levels)</p>	<p>Who will benefit? (e.g. patients, commissioners)</p>
<p>AUTISM FRIENDLY SCHOOLS</p> <ul style="list-style-type: none"> Two school communities will have made improvements in 'autism friendliness', raised awareness of the implications of autism across the school community and have committed to policy. 	<ul style="list-style-type: none"> Baseline audit completed in two schools on registration Improvements in the schools against the baseline audit of existing Mapping existing provision against the 8 principles of good practice of a whole school approach model to sustainable change (from Promoting children and young people's emotional health and wellbeing: A whole school and college approach, Public Health England and The Children and Young People's health Coalition, 2015). This will identify gaps and advice will be given on development work, progress will be monitored Project plans for continuation of activity post-project support in place in both schools Identification of benefits to children and young people pre and post ASD diagnosis identified Cost benefit analysis of potential savings Number of staff trained in ASC awareness (60 is the target) 	<ul style="list-style-type: none"> School leaders and staff in being better able to meet needs Children and young people attend the schools, this includes those with diagnosed ASD as well as those that do not meet the threshold for diagnosis Parents and carers through improved support of their children when in school and a higher level of expertise to work with them in providing support at home Other schools through having modelling of good practice and opportunities for practice-based professional development
<p>ASD STRATEGY</p> <p>Development of an ASC strategy for schools</p>	<ul style="list-style-type: none"> Evidence base for the strategy drawn from an audit of existing school practice and data analysis. The success of the strategy will be measured in relation to how it addresses identified poor practice, gaps and communication An attached action plan will be monitored and evaluated 	<ul style="list-style-type: none"> Schools communities The LA through improved deployment of resources Children and young people Families
<p>TRAINING THE TRAINERS</p> <p>A critical mass of professionals and members of the local community with a high level of knowledge and skills in how to promote mental health, forming a supportive peer group, acting as advocates in the local community to challenge stigma and create a positive</p>	<ul style="list-style-type: none"> Numbers of people trained (target is 30) Number of session delivered Staff and others undergoing training will demonstrate increased levels of knowledge and confidence in delivering YMHFA to others Increased awareness of the impact of own MH, benefits to self and the setting 	<ul style="list-style-type: none"> Staff trained Schools Community Children and young people with ASD Possible reduction in CAMHS referrals

<p>mental health promoting ethos, available to run training locally at minimum cost.</p> <p>Participants will have increased levels of knowledge and confidence in talking to young people about their emotional health and well being and increased awareness of the impact of their own mental health.</p>		
<p>AUDITING AND CASE WORK ANALYSIS</p> <ul style="list-style-type: none"> • A deeper understanding of the strengths and weaknesses of the existing referral processes and panels • An analysis of the how the different referral systems inter-relate to each other and could be used more effectively to step down cases through referral to Tier 2 services • Evidence based recommendations for improvement • Improvements to the client journey • This work will also inform the development of a blended face-to-face and online counselling model for Bracknell Forest, as included in the CAMHS transformation plan. This model includes a 'system navigation function, early triage and help for EH&WB 	<ul style="list-style-type: none"> • Number of cases supported by the Systemic Family Therapist and outcomes of these cases • Improvements to existing referral processes and systems • Recommendations that can result in an increase in step down of cases/referral to Tier 2 services 	<ul style="list-style-type: none"> • Clients • LA and partners • Possible reduction in number of referrals to CAMHS

Appendix B



Autism friendly accreditation

Achieving Accreditation

The Autism Accreditation programme is a continuing accreditation process. It supports services in the interpretation of the Autism Accreditation standards and advises them on creating quality action groups to assist the process. Services carry out a self-audit process against our standards, using set criteria, until they are ready to undergo a formal review that consists of verification of the audit, observations of practice and discussions with key stakeholders by a team of professional peers.

The review team is unable to consider as evidence towards accreditation, unsolicited information provided by a third party outside of the review process. Autism Accreditation has no jurisdiction over the services that volunteer to be registered, and persons who have concerns about a service may be best advised to follow the complaints procedure of that service provider.

Key principles

The Autism Accreditation aims to set and encourage high standards of provision for autistic adults and children based on a personalised model of support. Whilst methods should be evidence-based and reflect what has been shown to have had positive outcomes for autistic people the research has also shown that there is no 'one size fits all' approach and therefore it is essential that approaches are tailored for the individual.

Autistic people are entitled to receive practical support if they require it to help them overcome the challenges they face in a society which very often fails to recognise or accommodate their needs. That support needs to be rooted in an understanding that autism is an integral part of who a person is, not just a disorder to be treated or suppressed so that the autistic person can present as more 'normal'. Rather, support needs to work with a person's autism rather than against it. We need to move away from a culture that assumes that professionals know best but rather values autistic people as the true experts.

Support should build upon the individual's strengths, assets, interests and talents and enhance their self-esteem and sense of self-worth. It is not about doing things for the autistic person but rather providing them with the tools, skills and confidence to enable them to take control over their own lives. This process should start from their earliest years and should be the terms of reference by which the quality and impact of support is measured.

Excellent schools and services for autistic people do not work in isolation but rather seek to share and promote good practice to ensure that the community in which the people they support live and work is more inclusive.

Criteria

A service that meets the Autism Accreditation Standards should be able to demonstrate that:

- It is committed to providing effective support which is personal-centred and rooted in an appreciation of current knowledge and understanding of autism.
- It seeks to understand each autistic person as an individual whose autism is an integral part of who they are and who have their own unique qualities, abilities, interests, preferences and challenges.
- It enables each autistic person to carry out meaningful tasks and activities by employing a range of autism specific and personalised approaches and methods.

- It demonstrates that autistic people are supported to achieve outcomes that have a positive and significant impact on their lives.

This evidence is evaluated using autism-specific criteria, which are applied to each area of the organisation reviewed.

The accreditation process

