What next for Transformation Plans?

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October 2015
“There is now a welcome recognition of the need to make dramatic improvements in mental health services. Nowhere is that more necessary than in support for children, young people and their families. Need is rising and investment and services haven’t kept up. The treatment gap and the funding gap are of course linked.”
Simon Stevens  
*Future in Mind*  2015

“*If you always do what you’ve always done, you’ll always get what you’ve always got.*”
Henry Ford
Future In Mind Overview

The Government’s aspirations are that by 2020 we would see:

- Improved crisis care: right place, right time, close to home
- Improved transparency and accountability across whole system
- A better offer for the most vulnerable children and young people
- Improved public awareness less fear, stigma and discrimination
- Timely access to clinically effective support
- More evidence-based, outcomes focussed treatments
- More visible and accessible support
- Professionals who work with children and young people trained in child development and mental health
- Model built around the needs of children and young people, and a move away from the ‘tiers’ model
- Improved access for parents to evidence-based programmes of intervention and support
Learning from our history

CYP IAPT

Future In Mind

CYP and parents’ voices

Special Educational Needs reforms

National Programmes of support

Third sector and Professional voices and research

Chief Medical Officer report

Accreditation and quality systems QNCC Bond

Child outcomes research consortium

Choice an Partnership Approach

National Service Framework

Every child matters National Advisory Council

Targeted mental health in schools

Chimat MindEd

NICE
Empowering young people enables them to:

1. Take control of their care
2. Establish treatment goals
3. Choose the route to health that’s best for them
4. Achieve the best possible outcome for them
Recent announcements to improve access to services

**Autumn Statement 2014: £30m recurrently**

- Develop evidence based community Eating Disorder services for children and young people: capacity in general teams released to improve self-harm and crisis services.

**Budget Announcement Spring 2015: £1.25b over the next 5 years**

- Build capacity and capability across the system so that by 2020, 70,000 more children and young people are treated per year will have access to high quality mental health care when they need it.
- Roll-out and extend the Children and Young People’s Improving Access to Psychological Therapies transformation programmes (CYP IAPT)
- Improve perinatal care
- Pilot a joint mental health training programme for single points of access in specialist CAMHS and schools, testing it over 15 CCGs.

Implementation of these announcements will be via **Transformation Plans**
What did we set out to do with LTPs?

• Inspired by the Crisis Care Concordat
• Improve outcomes for children and young people with mental health problems
• Issues and solutions proposed in Future in Mind centre stage in the short, medium and long term
  • joint working across agencies – strategic and operational
  • Maintain and increase the momentum of Transformation begun by the CYP IAPT programme to build reflective services with genuine participation and shared decision making
• Ensure visible transparent use of existing and new resources and change
Transformation plans will need to

Be Transparent – publishing
- Baseline investment by local commissioners
- What services are provided including workforce information
- Referrals received, accepted, waiting times

Demonstrate Service transformation in line with principles covering
- Range and choice of treatments and interventions available;
- Collaborative practice with children, young people and families and involving schools;
- Use of evidence-based interventions; and regular feedback of outcome monitoring to children, young people and families and in supervision.

Monitor improvement
- Development of a shared action plan and a commitment to review, monitor and track improvements with appropriate governance structures.
LTP = a good CYP MH Strategy

**Cover the spectrum of services**
- Including community eating disorder services
- Focus on prevention to interventions, for existing or emerging mental health problems
- Transitions between services.

**Include local leadership and governance arrangements**
- To secure a whole system approach to delivery at local level

**Demonstrate collaborative commissioning within and across sectors**
- To promote effective joint working and establish clear pathways.
- This includes working with collaborative commissioning groups in place between NHS England specialised commissioning teams and CCGs

**Demonstrate that schools are given the opportunity**
- To contribute to the development of Transformation Plans.

**Be coherent with local priorities**
- And with the child mental health requirements in the existing joint planning guidance.
The process

Our aim was to balance the need to get the money out with an appropriate assurance process given the timescale

- Initial letter to CCGs and communications from LGA and ADCS
- Jointly developed guidance regarding submission of Local Transformation Plans and resources attached, plus A/W standards for Eating Disorder
- Focus on areas building on what was already in place
What did we ask for?

- An overall, brief vision
- A self reported statement to point assurers to key areas of interest such as
  - Baseline information
  - Participation
  - Governance
  - Sign off
  - CYP IAPT
  - Other schemes
  - Robust financial planning
Tracker that set out and monitored the new spend wherever it came from

- What are you spending new investment on?
- Where the new funding comes from – e.g. new money, CYP IAPT, schools, local authority
- Who are you trying to reach?
- The evidence base for this intervention
- What outcomes do you expect?
- Planned spend broken down by quarter - so if you have invested already in anticipation you can show it
- What main KPIs agreed by the partnership, the baseline, target, date the KPIs will be achieved
- Actual spend broken down by quarter
- Monitoring to show if area is on target in further quarters
Sign off and submission

• Sign off:
  • CCGs – as the money flows via the NHS
  • A representative from the Health and Wellbeing Board – demonstrates partnership is in place
  • NHS England Specialised Commissioning - demonstrating whole pathways

• Two submission windows
  • First submission for those ready quickly  September 18
  • Second submission - two months after guidance launch October 16
What happened?

• Clinical Networks with LA partners swung into action immediately Future in Mind was published
• Local commissioners from Health, Social Care and in some case Education came together in meetings across the country
• Support from other stakeholders e.g. YoungMinds
• East Midland CN and LA partners produced a self assessment toolkit for all 49 proposals that went viral
• Products developed to support assurance from the centre and from local teams led by Directors of Commissioning
• Masterclasses for assurance teams in NHS England and support agencies
Issues arising in the planning stage

- Workforce planning - across all sectors
- Variable leadership, commissioning and collaboration
- Joint commissioning including with NHS England
- Not all areas appear to have read FiM – e.g. lack of understanding CYP IAPT = transformation not separate service
- IT planning - need to comply with requirements to be able to flow data and use outcomes in the room
- Working across the life course
- Anxiety about spending the money in the best possible way - including procurement
Things to celebrate over the last three months

• Complete focus in many local areas working together
• Visible leadership in many areas and determination
• Creativity and seizing opportunity to do things differently

• Focus of the system behind local areas – Public Health England, CYP IAPT Learning Collaboratives, Clinical Networks, Local Authority and NHS England working together
• Raised profile locally and nationally
Where are we now?

- To date we have counted in 137 plans covering all 209 CCGs
- Different clusters for Eating Disorders
- Assurance underway is a bespoke process led by DCO teams with additional clinical support
- One of three options
  - Immediately assured
  - Assured subject to small changes
  - Requires significant redrafting
Using the information - short term

- Assurance, allocation and monitoring
- Identifying areas that need extra support from Clinical Networks and CYP IAPT collaboratives
- Analysis of
  - Declared baselines
  - Key themes e.g. crisis, vulnerable young people
  - KPIs selected – will help inform national KPI development
- To inform planning guidance and technical guide for NHS
Using the information - medium term

- Opportunity to review other plans and learn
- NHS assurance moves into the planning framework – embedding CYP MH as core business
- Clinical networks, Health Education England and CYP IAPT collaboratives working together to deliver focussed support and shared learning with extra support including LA expertise
- Re-publication annually of Transformation plans – so opportunity to refine, develop and change
- Gather further evidence re outcomes and outputs through the MHMDS allows us to consider further A/W, levers, develop KPIs that are relevant
Supporting delivery

• Strategic Clinical Networks
• CYP IAPT – Transformational Programme expansion
• Participation examples MyApt [www.myapt.org.uk](http://www.myapt.org.uk) and Parents say – Young Minds [www.youngminds.org.uk](http://www.youngminds.org.uk)
• NHS England CAMHS Transition to AMHS and other services, model service specification and transfer of care protocol
• NHS England model specification for Targeted and specialist 2/3 plus service standards *Delivering With Delivering Well* based on CYP IAPT principles included by CQC, QNCC and BOND quality and assurance networks
• Specialised Commissioning and co commissioning committees
• Joint single point of contact with DfE and other DfE programmes
• Partnership working across Departments and Agencies
• Range of resources such as Mental Health Intelligence Network, Chimat, MindEd
• Eating Disorders access and waiting times standard
Coming soon NHS England

- EIP Commissioning guide – includes CYP
- Liaison mental health and UAEC work stream
- Transforming Care
- Crisis and urgent care guide in development
- Life course Mental Health Taskforce - due to report in the Autumn - builds on *Future in Mind*
- Support for Transformation nationally building on the CYP IAPT change agents - discussions with individual SCNs
- Testing CAMHS currencies
Local Transformation Plans

- Richest source of data we have had about what is happening
- Transparency locally and nationally this year and beyond
- Opportunity to build on what we have that works to create reflective and collaborative service development and commissioning
- Our goal now is to maintain momentum and use the next period to consolidate and drive change
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