2.3 Local Context – Croydon’s Growing Population of 0–25 Year Olds .......... 38
2.4 Estimated Numbers of Children and Young People with Mental Health Disorders within Croydon ................................................................. 39
2.5 Addressing the Needs of Children and Young People ........................................ 42
   2.5.1 Emotional Wellbeing and Mental Health Services ...................................... 42
   2.5.2 Services for Those at Higher Risk of Mental Health Problems ..................... 42
2.6 Gaps in Provision and Expansion Plan .......................................................... 49
3 Local Transformation Plan (LTP) Ambition 2018–2020 .................................... 51
   3.1 Whole System of Care ............................................................................. 52
      3.1.1 Achievements to Date and System Development .................................... 52
   3.2 Pathways of Care .................................................................................. 54
      3.2.1 Staying Well - Mental Health Promotion and Prevention ....................... 54
      3.2.2 Manage Well .................................................................................. 56
      3.2.3 Greatest Need ................................................................................. 59
   3.3 Special Considerations ............................................................................. 62
      3.3.1 Linking with Adult Mental Health Services ........................................... 62
      3.3.2 Developing the 0–25 Children and Young People Pathway by 2023/24 62
   3.4 Improving Access and Waiting Times ...................................................... 63
      3.4.1 Sustainable Increases in Access and Reductions in Waiting Times ....... 63
      3.4.2 Improvements in Productivity and Efficiency ...................................... 65
   3.5 2019/20 Action Plan .............................................................................. 65
4 Data - Access and Outcomes ......................................................................... 69
   4.1 Key Data Areas Measured by NHS England .............................................. 69
      4.1.1 Submission of the NHS Digital Mental Health Services Data Set (MHSDS) ............................................................ 69
   4.2 Monitoring and Using Data on Key Ambitions .......................................... 69
      4.2.1 Improving Data Quality, Access and Flow ......................................... 69
      4.2.2 Using Data ..................................................................................... 70
   4.3 Local and Regional Data Reporting .......................................................... 70
      4.3.1 Local Children and Young People’s Dashboards ................................. 70
      4.3.2 Enhancing Local Delivery ................................................................. 71
5 Health and Justice ......................................................................................... 71
   5.1 Crisis Care Related to Police Custody ...................................................... 71
   5.2 Croydon Child Sexual Assault (CSA) Referral Centres and Services ........ 72
   5.3 Liaison and Diversion (L&D) Services ...................................................... 73
5.4 Youth Offending Service (YOS) ................................................................. 73
  5.4.1 Emotional Wellbeing and Mental Health Assessments .................. 73
  5.4.2 Recording Data from Youth Justice Services ............................... 73
5.5 South London Community Forensic Children and Adolescent Mental Health Services (Community FCAMHS) ................................................................. 74
5.6 SLaM Mental Health Services in Croydon for Those with Complex Needs . 75
5.7 Co-production with Young People in Contact with Youth Justice Services . 75
6 Eating Disorders ..................................................................................... 75
  6.1 Eating Disorder Provision in Croydon ............................................. 75
  6.2 CCGs Partnering in the Eating Disorder Cluster ................................ 76
  6.3 Performance against the Eating Disorder Access and Waiting Time standards ........................................................................................................... 77
6.4 How Additional Funding in 2019/20 is being Invested to Further Enhance and Develop Provision ......................................................................................... 79
6.5 National Quality Improvement Programme ........................................ 79
7 Urgent and Emergency Mental Health Care ........................................... 80
  7.1 Croydon Crisis Provision ..................................................................... 80
    7.1.1 Crisis Team & Medic on Call System ....................................... 80
    7.1.2 South London Partnership CAMHS Programme Crisis Services .. 80
    7.1.3 Locally Agreed KPIs, Access and Waiting Time Ambitions and the Involvement of Children and Young People and their Families, Including Monitoring their Experience and Outcomes ............................................. 81
  7.2 Further Crisis Care Transformation .................................................... 81
    7.2.1 Further Enhancing Community Crisis Care Provision – South London Partnership Future Plans from 2019 ................................................................................. 82
8 Early Intervention for Psychosis ................................................................. 83
  8.1 Full Age-Range Service, Including All Children and Young People Aged 14 Years or Over Experiencing a First Episode in Psychosis (EIP) .......... 84
    8.1.1 Croydon CAMHS .................................................................... 84
    8.1.2 OASIS .................................................................................. 85
    8.1.3 COAST ................................................................................ 85
  8.2 Offer of NICE Recommended Treatment within 2 Weeks of Referral .... 85
8.3 Improving EIP Services ........................................................................ 86
9 Mental Health in Schools ........................................................................ 86
  9.1 Transparency and Governance ......................................................... 87
  9.2 Joint Assessment of Need in the Education Setting - by Children and Young People Mental Health Services and School/College Leadership .......... 88
9.3 Schools Based Support........................................................................................................... 89
  9.3.1 Supporting Senior Mental Health Leads to Introduce, Develop and Support a Whole School/College Approach ......................................................... 89
  9.3.2 Trailblazer Programme .................................................................................................. 90
  9.3.3 Other Initiatives ............................................................................................................ 94

10 Workforce ............................................................................................................................ 95
  10.1 Current Staff Establishment ............................................................................................ 95
  10.2 Workforce Planning ........................................................................................................ 96
    10.2.1 Workforce Modelling ............................................................................................... 98
    10.2.2 Expanding and Training the Workforce ................................................................. 98
    10.2.3 Engagement with Key Organisations ...................................................................... 100

Appendix 1: FCAMHS Information Leaflet .............................................................................. 102
Foreword

We are pleased to refresh the Croydon Children and Young People’s Local Transformation Plan (LTP) as we pursue our journey of improvements in emotional wellbeing and mental health services for the children and young people of Croydon, along with their families and carers, whom we serve.

This 2019 LTP details Croydon’s ongoing response to the government’s “Future in Mind” policy document (2015) and to ambitions detailed within both the Five Year Forward View for Mental Health (2016) and The NHS Long Term Plan (2019). It sets out how we are continuing to meet the challenges of, and taking opportunities to enhance, emotional wellbeing and mental health services for children and young people.

We are delighted that Croydon’s Health and Wellbeing Board adopted emotional wellbeing and mental health of our children and young people as one of their top three priorities and that they remain committed to monitoring our progress towards delivery of this plan during its lifetime.

There is a recognition that achieving good provision of services to address the emotional wellbeing of children and young people is, by its very nature, complex and multi-faceted, involving wide ranging systems and structures, including schools, health services, social care, and leisure. We are continuing to build on existing partnerships and services as we strive to develop even more innovative solutions to meet the challenges we know lie ahead.

This refresh of the LTP makes use of the feedback we have received from our children, young people, their families, carers and communities who receive services. We are committed to further improving their engagement and participation to shape the future pattern of service delivery. We will do this because we know it is a crucial step in ensuring our solutions work for the people who use them.

Building resilience from the early years is key to giving every child the very best start in life, and population based prevention is a key theme in this plan. When problems arise, every child and young person who needs help should get the right support, at the right time, close to where they live in their locality and their own community.

We will ensure that all staff and other groups working with children and young people strive towards the ambition to place emotional wellbeing on an equal footing with support and intervention for physical health, taking proactive action to make this happen. We are working with schools and colleges to ensure the emotional wellbeing of students is a significant priority in this plan. A key principle underlying this LTP and the way we are taking the work forward, is that young people’s emotional health really does need to be everybody’s business.

We will continue to shape, develop and co-produce the Local Transformation Plan over its lifetime. This Plan is a ‘living document’ and we will ensure improved quality
and reach of services delivered, building on intelligence and evidence-based practice, to ensure better emotional wellbeing and mental health for all children and young people, their families and carers has a strong focus on supporting the needs of the most vulnerable children and young people across our borough.

Croydon CCG Clinical Lead, Children’s Services                  Dr John French
Chair, Governing Body Croydon CCG                              Dr Agnelo Fernandes
Chair of Croydon Health & Wellbeing Board                      Cllr Louisa Woodley
Executive Summary

Introduction

Childhood is a crucial time for laying down good foundations of life long mental health. Half of all adults with a lifetime mental illness (excluding dementia) have experienced symptoms by the age of 14, and three-quarters have experienced symptoms by the age of 18. This makes early engagement with parents, carers and children and young people crucial if we are to achieve the most positive outcomes for people across their lifetimes.

For those experiencing mental health support needs, early intervention has been shown to be effective and can improve life chances and outcomes – including physical health, educational attainment, work prospects, relationships with friends, family and the community, and ultimately overall wellbeing.

There is overwhelming evidence that early intervention is cost effective, with national social return on investment studies showing returns of between £1.37 and £9.20 for every £1 invested.¹

Poor mental health can be both a cause, and a consequence of, health inequalities. Children living in low-income families have a three-fold increased risk of developing a mental health problem (Future In Mind, 2015). This, in turn, has a significant impact on their long-term life outcomes, with the finding that people with a serious mental illness die 16-25 years earlier than the general population.²

This Local Transformation Plan sets out Croydon’s continuing multi-agency approach to improving children and young people’s emotional wellbeing and mental health. It is part of our wider improvement journey that is increasing the focus on early intervention and early help, offering the right help, at the right time, and in the right location.

What We Achieved in 2018-19

- Worked with colleagues across South East London to ensure Eating Disorder services continued to meet all nationally mandated access and waiting times targets

- Further developed the Single Point of Access for emotional wellbeing and mental health referrals across NHS and voluntary sector partners, creating a more streamlined process for referrers and ensuring young people receive appropriate contact as quickly as possible


• Improved support for young people in transition from children and young people’s to adult mental health services, especially where multiple agencies are involved

• Strengthened the working of our Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board, supporting representation from across our community, including parent carers, voluntary sector and NHS providers, schools, statutory services, and developing a greater emphasis on discussion through workshops to ensure all voices contribute to our decisions

With strong partnership working and investment through the CCG, Croydon Council and NHS England, good progress has been achieved in children and young people mental health services across all areas, however there is still more that we must do.

Local Need

Services in Croydon face very clear demographic pressures. The Croydon Observatory tells us:

• Croydon has the second largest child population in London at an estimated 96,751 (in 2018) for children and young people under the age of 18 years and by 2026 it is projected that this number will grow to approximately 103,930 (an increase of circa 7% from 2018 figures). The biggest expected increase in the under 18 population is in those aged 5 and above, which is projected to grow by 10% from 67,870 to approximately 74,690 by 2026

• An estimated 14,835 children live in low income families (HMRC, 2016); this rate of 16% is below the London (19%) and England (17) averages but is still too many

• As at 31 March 2019, there were 819 children in care in Croydon, a rate of 86 per 10,000, higher than London (50 per 10,000), and England (65 per 10,000). 265 of these children (32%) were unaccompanied asylum seeking children

Mental Health of Children and Young People in England survey, 2017 revealed rising needs:

• 1 in 10 primary and 1 in 7 secondary school children had at least one mental health disorder

• A quarter of 17-19 year old girls have a mental health illness, with half of these self-harming or attempting suicide

Children and Young People’s Emotional Wellbeing and Mental Health Services

Children and young people who have difficulties with their emotional or behavioural wellbeing may need help with a wide range of issues at different points in their lives. Parents and carers may also need help and advice to deal with behavioural or other problems their child is experiencing.
Parents, carers and young people can receive direct support through both universal and specialist child and adolescent mental health services.

Current services cover a range of options to address different needs:

- Universal: Early Help - support for families experiencing difficulty with a range of issues including sleeping, fussy eating, school engagement, anti-social behaviour, and emotional wellbeing
- Targeted: Support delivered in schools, community centres, and specialist NHS locations
- Targeted: Counselling, Advocacy and Advice via unplanned drop-in, planned face-to-face, and digital sessions
- Targeted: Additional services developed for young people in youth offending support, and children looked after, including unaccompanied asylum seeking minors
- Specialist assessment and intervention for emotional, behavioural and mental health concerns that are moderate to severe. This includes support for eating disorders, psychological distress, self-harm, assessment for neuro-psychiatry, neuro-developmental disorders, and young people experiencing a mental health crisis

Transformation Priorities

National Context

As detailed in the NHS Mental Health Implementation Plan 2019/20-2023/24 (July 2019), NHS England has identified a number of key priorities for children and young people’s mental health. This follows and builds on from the Future in Mind Policy for Children’s Mental Health in 2015. The national priorities are ambitious and far reaching:

- By 2020/21

A significant expansion in access to high quality mental health care:

- Nationally at least 70,000 additional children and young people each year will receive evidence-based treatment; this will be equivalent to 35% of those with a diagnosable mental health condition accessing the treatment they need (as a stepping stone to achieving Parity of Esteem with physical health access)
- Develop a crisis response that is suitable to meets the needs of under 18 year olds
- 95% of children and young people with eating disorders will be able to access treatment (within 1 week for urgent cases and 4 weeks for routine cases)
By 2022/23
- Children and young people’s mental health plans will be aligned to those for children and young people with learning disability, autism, special educational needs and disability (SEND), and health and justice

By 2023/24
- Nationally, a further 345,000 children and young people aged 0-25 years will access support via NHS-funded mental health services and school/college-based Mental Health Support Teams
- A comprehensive offer will be available for 0-25 year olds - reaching across mental health services for children, young people and adults
- The 95% Eating Disorder target will have been maintained
- 100% coverage of 24/7 age-appropriate crisis care services, via NHS 111, including:
  - 24/7 mental health crisis provision for children and young people that combines crisis assessment, brief response and intensive home treatment functions
  - Complementary and alternative crisis services to A&E and admission (including Voluntary, Community & Social Enterprise (VCSE) / Local Authority provided services) within all local mental health crisis pathways
  - Mental health professionals working within ambulance control rooms, Integrated Urgent Care services, and providing on-the-scene response in line with clinical quality indicators
  - All general hospitals to have mental health liaison services
- All services to have suicide bereavement support services providing timely, appropriate support to families and to staff
- 15 new clinics nationally will provide NHS specialist treatment for people with serious gambling problems – to include piloting provision for under 18s
- 20 high-need areas nationally to have established new specialist mental health provision for rough sleepers
- Local systems to offer a range of self-management apps, digital consultations and digitally-enabled models of therapy

Regional Context
Croydon CCG is part of the South West London (SWL) Sustainability and Transformation Partnership (STP) footprint. We work with other South West London clinical commissioning groups, provider trusts, local authorities and patient representatives across the six boroughs as part of the SWL Health and Care
Partnership. Together we have agreed the top health promotion and prevention priority is to champion and improve children and young peoples’ mental health and emotional wellbeing, and we have committed to working as a system to improve the support that children and young people with mental health needs receive.

At a regional level, the South West London response to the NHS Long Term Plan incorporates the ambitions and plans set out in this Local Transformation Plan. These include the expansion of access to NHS-funded community services, the continuous improvement of our eating disorders services, improving transition through alignment with Croydon’s adult mental health programme to deliver a comprehensive offer for 0-25 year olds, and the development of a 24/7 crisis care pathway for children and young people.

Children’s mental health has its own dedicated programme under the overarching SW London mental health portfolio, through which projects are delivered collaboratively.

Croydon’s main provider of specialist mental health services is South London and Maudsley NHS Foundation Trust (SLaM). As SLaM works across three other boroughs, all located within the South East London (SEL) STP footprint, Croydon also works with colleagues within SEL STP.

Local Policy Context

Croydon has been undergoing a transformation process across a number of policy and service areas that contribute to the emotional wellbeing of children and young people living in the borough or registered with a Croydon GP.

Croydon Council’s Local Strategic Partnership (LSP) brings together many organisations and communities involved in decision making which affects the wellbeing of those who live, work, learn, and visit the borough.

‘One Croydon’ is a partnership between the local NHS, Croydon Council and Age UK Croydon. It has launched a new five-year plan to support residents to stay well for longer by making services more accessible in the heart of their communities. There is a commitment to developing similar partnership working for children and young people services.

The Local Strategic Partnership (LSP) and the Croydon Health and Wellbeing Board (HWBB) have agreed that children’s emotional wellbeing is a top priority for action across the whole system, involving stakeholders for all agencies and partners. It is included as a priority commitment in all key strategic borough documents:

- **Croydon’s Health and Wellbeing Strategy** published in 2019 has eight priorities, one of these is giving children and young people a better start in life and includes a mental health commitment

- **Croydon Health and Care Transformation Plan 2019/2020 - 2024/2025** - developed by One Croydon commits to giving children a better start in life. One of its strategic outcomes is improving the mental health of children and young people in the early years
The Director of Public Health’s Annual Report 2018 recognised the importance of the first 1000 days of a child’s life, from before conception to two years of age, in building emotional wellbeing and resilience and in laying the foundations of lifelong mental and physical health. Recommendations are continuing to be taken forward.

Youth Plan - Croydon’s LSP is committed to a multi-agency Youth Plan to tackle the priorities that were identified by young people at the Youth Congress meetings held in 2017 and 2018. This work is ongoing.

Promoting population resilience, intervening early and targeting support at those with sub-optimal mental health and emotional wellbeing requires a whole systems approach. In addition to the strategies, plans and reports mentioned above, there are many others that support the borough’s efforts to improve mental health and emotional wellbeing.

There is a growing recognition of the importance of an all-ages preventative approach to improving mental health. This is demonstrated through the Council’s Corporate Plan commitment to develop an All-Ages Mental Health Strategy in 2020. This work has commenced.

Our last Local Transformation Plan refresh introduced four overarching priorities, developed by the Health and Wellbeing Board (HWBB) at workshops in December 2018 and January 2019. The work is strategically led by the multi-agency Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board. The Chair is the CCG Clinical Lead for Children’s Services.

The four priorities are:

- **Engagement** with children, young people, their families, carers and communities. Those who have lived experience of mental health problems and families who support children and young people with mental health needs, to be placed at the heart of services.

- Working with and supporting schools and colleges to promote the emotional health and wellbeing of all their students.

- **Pathways**: navigating through the system with the right access at the right time in the right place. This means that children and young people who have mental health problems such as emotional disorders, eating disorder, autism and many others get the right support and help when they need it.

- **Strategic join up and wider work**: maximise the resilience of the population through working with non-mental health services, providing information, and through improving wider determinants such as housing.

As we continue on a journey of improvement for all children and young people in Croydon, further commitments and plans are developing. These include:

- Exploration of how the successful partnerships for older people within the One Croydon Alliance can be developed to support children and young people is underway.
• Transformation of how we think about the boundaries between services is underway, with a shifting approach towards an integrated place-based locality model across universal and targeted services

• The planning for an All-Ages Mental Health Strategy is underway.

**What the Local Transformation Plan is Delivering in 2019/20**

Key initiatives include:

• Increased access to services and reduced waiting times – through additional investment towards achieving access and waiting time targets as set in the Five Year Forward View for Mental Health and The NHS Long Term Plan

• Increased counselling services for unaccompanied young refugees and asylum seekers - delivered by a voluntary sector partner

• Expansion of digital online counselling services across our voluntary sector partners

• Developing an approach to sustaining services currently supported by non-recurrent funded initiatives and to mainstreaming transformation funding beyond 2020/21

• Work with the South West London Sustainability and Transformation Partnership (STP), Croydon Council and the voluntary sector to review and improve the effectiveness of interventions, ensuring they reach more children and young people and that they achieve even better outcomes for our most vulnerable young people

• Review of investments in pre and post-diagnosis support for children and families living with complex communication and autism related needs

• Further development of our neurodevelopment pathway

• Set up of the Croydon Trailblazer Programme to create three Mental Health Support Teams (MHSTs) in 35 schools and one college: to work with teachers, children and young people, and their parents to develop whole school approaches to improving support for emotional wellbeing and mental health

• Commissioning of the National Youth Agency (NYA) to deliver training for young people to become Young Commissioners who are involved in the recommissioning of the Community Fund

• Work to produce an easy read version of the Croydon Local Transformation Plan (developed with local children and young people). An art competition was run with year 7 & 8 school pupils. This has helped with their further understanding of emotional wellbeing and mental health, of what the causes can be, and of the services available where they can access support

• Croydon Council has re-joined the British Youth Council (BYC) and there are 2 UK Youth Parliament Members for Croydon (UKYP)
Transformation Governance and Transparency

In line with national guidance, Croydon CCG is responsible for overall leadership, management and strategic coordination of this Local Transformation Plan (LTP) on behalf of the local Children and Families Board, the Health and Wellbeing Board and other partnership groups.

Day to day LTP work is overseen by the Children’s Integrated Commissioning Team, which plays a key role in helping to join up the local system of commissioning in Croydon on behalf of the CCG and Council.

In order to take this work forward, the Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board is our cross-sector partnership with responsibility for ensuring that an inclusive multi-agency response is planned and delivered to meet the emotional wellbeing and mental health needs of children, young people, their families and carers. This partnership board is a multi-stakeholder group that comprises representatives from across the borough including: health, local authority, NHS providers, public health, the voluntary sector, schools, parents and carers.

The Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board reports to, and receives direction from, the Children and Families Board and has a dotted line to the Croydon Health and Wellbeing Board (see structure).

Engagement of Children and Young People

Croydon is committed to improving participation of children, young people and their families as agents for change, for example:

- Our youth engagement team already works in youth settings, and in the wider community, with the aim of improving outcomes for all young people in the
borough. They lead on youth consultation through varied forums, and also support youth work for LGBT+ young people in Croydon. There are also links to work around domestic abuse, exploitation and family justice

- Following a successful Council-led Youth Takeover Challenge in November 2018 (when one of the top priorities for discussion was emotional wellbeing and mental health of children and young people) a further Youth Takeover Challenge took place in November 2019

- A specification is in development to create a range of youth engagement events, including those who are hard to reach, and those who have lived experience of intensive mental health services. This will occur over the coming three years to create an ongoing dialogue for service improvement

**Funding**

Additional funding through NHS England’s investment for Local Transformation Plan initiatives since 2016/17, means that by 2020/21 there will have been £1,598,000 more funding for children and young people services in Croydon.

This funding has seen the creation of new services, expanding access to counselling, advice and advocacy with more locations and later opening hours, introducing digital counselling via text chat and video sessions, developing specialist services for BAME and refugee groups, and providing group sessions in schools.
1 Transparency and Governance

1.1 Governance Arrangements

The Local Transformation Plan (LTP) sets out Croydon’s multi-agency approach to improving children and young people’s emotional wellbeing and mental health.

In line with national guidance, Croydon CCG is responsible for overall leadership, management and strategic coordination of this LTP on behalf of the local Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board, the Health and Wellbeing Board, and other partnership groups.

Day to day LTP work is overseen by the Children’s Integrated Commissioning Team, which plays a key role in helping to join up the local system of commissioning in Croydon on behalf of the CCG and Council.

1.1.1 Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board

In order to take this work forward, the Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board is our cross sector partnership with responsibility for ensuring an all-inclusive multi-agency response is planned, and delivered, to meet the emotional wellbeing and mental health needs of children, young people and their families and carers.

The partnership board is a multi-stakeholder group that comprises representatives from across the borough including: health, local authority, NHS providers, public health, the voluntary sector, schools, parents and carers (during 2019, the membership and terms of reference of the partnership board have been reviewed in order to increase its strategic reach).

The Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board reports to, and receives direction from, the Children and Families Board and has a dotted line to the Croydon Health and Wellbeing Board (see structure).

Croydon Council’s Local Strategic Partnership Structure
The Croydon Health and Wellbeing Board (HWBB) regularly brings together work strands at the Croydon and South West London levels - most recently through a joint presentation at the October 2019 Croydon HWBB on mental health support in schools.

1.2 Policy and Planning Context

This Croydon LTP aligns with national, regional and local policies and plans as detailed in the following sub-sections.

1.2.1 National Policy

Mental Health Policy

Over the last few years, the government has developed and renewed its commitment to strengthen and transform support provided to children and young people with emotional wellbeing and mental health problems. The key national policy documents include:

- **Future in mind**: Promoting, protecting and improving our children and young people’s mental health and wellbeing (Policy for children and young people’s mental health) - 2015
- **NHS The Five Year Forward View for Mental Health** - 2016
- **Transforming Children and Young People’s Mental Health Provision: a Green paper** - 2017
- **NHS Long Term Plan** - 2019

Considering each of these in turn:

- **Future in mind** identified five key proposals to make it easier for children and young people to access high quality mental health care when they need it:
  - Promoting resilience, prevention and early intervention
  - Improving access to effective support
  - Care for the most vulnerable
  - Accountability and transparency
  - Developing the workforce

It further proposed the development and agreement of Local Transformation Plans for Children and Young People’s Mental Health and Wellbeing to clearly articulate the local offer.

- **The Five Year Forward View for Mental Health** identified children and young people as a priority group for mental health promotion and prevention. It called for quick access to good quality care. It highlighted waiting times should be substantially reduced, significant inequalities in access should be addressed and support should be offered while people are waiting for care. It identified a series of priority actions to be achieved by 2020/21. For children
and young people, this included a commitment that **nationally, by 2020/21, at least 70,000 more children and young people should have access to high-quality mental health care when they need it**

- **Transforming Children and Young People’s Mental Health Provision** set out proposals to improve mental health support in schools and colleges. It committed the NHS to fund Mental Health Support Teams (MHSTs) linked to groups of schools and colleges to provide additional to support those with mild to moderate needs. It committed to roll out Mental Health Support Teams to at least a fifth to a quarter of the country by the end of 2023

- **The NHS Long Term Plan** renewed existing commitments and put forward new proposals including:
  - 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
  - A new approach to young adult mental health services for people aged 18-25 that will support the transition to adulthood. This includes a proposal to extend the current service models to create a comprehensive offer for 0-25 year olds that reaches across mental health services for children, young people and adults
  - The 95% children and young people Eating Disorder referral to treatment time standards achieved in 2020/21 to be maintained
  - From 2022/23 children and young people’s mental health plans to be aligned with those for children and young people with learning disability, autism, special educational needs and disability (SEND), children and young people’s services, and health and justice
  - 100% coverage of 24/7 age-appropriate crisis care, via NHS 111, including:
    - 24/7 mental health crisis provision for children and young people that combines crisis assessment, brief response and intensive home treatment functions
    - Complementary and alternative crisis services to A&E and admission (including in Voluntary, Community and Social Enterprise (VCSE)/Local Authority provided services) within all local mental health crisis pathways
    - Mental health professionals working within ambulance control rooms, Integrated Urgent Care services, and providing on-the-scene response in line with clinical quality indicators
    - All general hospitals to have mental health liaison services
  - All services to have suicide bereavement support services providing timely, appropriate support to families and to staff
- 15 new clinics nationally will provide NHS specialist treatment for people with serious gambling problems – to include piloting provision for under 18s
- 20 high-need areas nationally to have established new specialist mental health provision for rough sleepers
- Local systems to offer a range of self-management apps, digital consultations and digitally-enabled models of therapy

*Other Strategic Reforms and Plans for Children and Young People*

This LTP also aligns with other key strategic reforms and plans for children and young people overall, for example plans regarding Transforming Care, Special Educational Needs and Disabilities (SEND) and Youth Justice.

The Transforming Care Programme is about making health and care services better so that more people with a learning disability, autism or both (including those with a mental health condition such as severe anxiety, depression, psychotic illness or personality disorder) can live in the community, close to home, with the right support. The vision for the future of the programme is for people with learning disabilities and/or autism to achieve equality of life chances, live as independently as possible and have the right support from mainstream health and care services.

In line with the NHS Long Term Plan, the programme has evolved into the Learning Disabilities and Autism Programme and continues to focus on reducing inpatients, preventing admission and building capacity locally.

1.2.2 Regional Strategies, Plans and Programmes

There are many regional strategies, plans and programmes which have been taken into account in the development of Croydon’s local transformation priorities and this LTP. This section details those that are considered to be key to the transformation of children and young people’s emotional wellbeing and mental health services.

*Healthy London Partnership Children and Young People’s Programme*

The aim of the Healthy London Partnership Children and Young People’s Programme, which brings together the NHS in London (Clinical Commissioning Groups and NHS England), the Mayor of London, Greater London Authority, Public Health England, London Councils and Health Education England, is to achieve better health and care for all Londoners. The partnership aims to improve children and young people’s mental health services to help children and young people stay emotionally and mentally well.

In 2017/18, London CCGs identified the following priority themes for the Healthy London Children and Young People’s Mental Health Programme:

- Crisis care – to support commissioners/providers to implement the Healthy London Partnership Children and Young People Mental Health Crisis Care guidance
Regional Sustainability and Transformation Partnership (STP) Plans

This Local Transformation Plan aligns to two STPs’ Sustainability and Transformation Plans:

- **South West London STP** - Croydon is part of the South West London (SWL) Health and Care Partnership comprised of organisations that provide health and care in six south west London boroughs. The partnership, which is made up of the NHS, local councils and the voluntary sector, has developed a Sustainability and Transformation Plan. One of its aims is for children and young people to have the best start in life so they achieve their full potential and have good mental health into adulthood.

Specifically, the Partnership:

- Have agreed the top health promotion and prevention priority is a joint commitment to champion and improve children and young peoples’ mental health and well-being

- Are committed to working as a system to improve the support that children and young people with mental health needs receive

- Are working with teachers, school counsellors, GPs, mental health, local authority and social care professionals, children and young people advocates and the voluntary sector to deliver a range of joint actions to ensure consistent early and effective support for emotional wellbeing

- Have agreed (through their Health and Wellbeing Boards, CCG Governing Bodies, school governors and trustees in participating schools, and CAMHS Partnership Boards) to work in partnership with children, young people, parents and carers in the boroughs to deliver these actions

- Want to ensure interventions are needs based and reflect the voices of children and young people

- Plan to develop integrated pathways that will ensure a joined up approach to working - to deliver evidence based early interventions in universal settings.

The Partnership’s recent response to the NHS Long Term Plan incorporates the ambitions and plans set out in this Local Transformation Plan, including:
- The expansion of access to NHS-funded community services
- The continuous improvement of eating disorders services
- Improving transition through alignment with Croydon's adult mental health programme to deliver a comprehensive offer for 0-25
- The development of a 24/7 crisis care pathway for children and young people.

Children's mental health has its own dedicated programme under the overarching SW London mental health portfolio, through which projects will be delivered collaboratively to achieve the ambitions set out in both the Long Term Plan response and this Local Transformation Plan.

- **South East London STP**

South London and Maudsley NHS Foundation Trust (SLaM) is the main provider of mental health services within Croydon and it also provides services across several boroughs within the South East London STP footprint. As several of Croydon’s mental health services are common to all of these boroughs this LTP therefore also aligns, in part, to the South East London STP Plan.

**South West London (SWL) Transforming Care Partnership (TCP)**

The SWL TCP, which is comprised of South West London (SWL) CCGs, Local Authorities and NHS England Specialised Commissioning, is delivering the SWL Transforming Care Strategy – the main elements of which are shown in the following diagram.

**South West London Transforming Care Strategy**

- **Reduce long term inpatient care**
  - Reduce long term inpatient care through improved admission prevention interventions and enhanced discharge pathway planning and implementation.

- **Improve quality of life and/or care**
  - Improve the quality of life and/or care through improved care facilities and care delivery, focus on repatriation to home borough (where appropriate) and increase involvement in care and treatment decisions.

- **Enable community living**
  - Ensure the right support is in place to enable and enhance community living experience through community services and support.
The Transforming Care Programme continues to focus on reducing inpatients, preventing admission and building capacity locally.

**South London Partnership (SLP) Plans**

The SLP is a collaboration of five London boroughs politically led by the Leaders of the five councils – Croydon, Merton, Sutton, Kingston upon Thames and Richmond upon Thames.

One of their priorities is ‘supporting the integration and transformation of health and care services to increase health and wellbeing for our residents’. The SLP team support the boroughs in working with health partners across South West London to shape and implement the South West London Sustainability and Transformation Plan (SWL STP).

### 1.2.3 Local (Croydon) Strategies and Plans

Croydon has been undergoing a transformation process across a number of policy and service areas that contribute to the emotional wellbeing and mental health of children and young people living in the borough or registered with a Croydon GP.

*Croydon Health and Care Plan 2019/20 – 2024/25*

‘One Croydon’, which is a partnership between the local NHS, Croydon Council, and Age UK Croydon, has launched a five-year plan, the Croydon Health and Care Plan 2019/20 – 2024/25. It includes a ‘Better Start in Life’ Pathway Programme (which will implement this LTP) to support residents to stay well for longer by making services more accessible in the heart of their communities (i.e. locality-based care). The Plan outlines a fresh vision for how health and social care will be delivered across the borough, particularly for those with the greatest need, to transform the health and wellbeing of local people. It emphasises three clear priorities:

1. A focus on prevention and proactive care: supporting people to stay well, manage their own health and maintain their wellbeing by making sure they can get help early

2. Unlocking the power of communities: connecting people to their neighbours and communities, who can provide unique support to stay fit and healthy for longer

3. Developing services in the heart of the community: giving people easy access to joined up services that are tailored to the needs of their local community

The Health and Care Plan builds on a number of successful schemes already in place in Croydon.

Of note, a plan is in place for the six CCGs within South West London to merge in April 2020 and, when they do, the Local Health and Care Plans of each will form the foundation of the proposed new SWL CCG’s Health and Care Plan.

**Other Borough Plans and Priorities**

The Croydon Health and Wellbeing Board (HWBB) and the Local Strategic Partnership Board (which the HWBB is a sub-committee of) have agreed that
children’s emotional wellbeing is a top priority for action across the whole system (involving stakeholders for all agencies and partners).

In October 2018, the Croydon HWBB identified “improving the mental health of children and young people” as one of its three high-level children’s priorities, and made a commitment to “improve services for children and young people across the whole pathway from promoting resilience and prevention through to crisis support, including a strong focus on vulnerable adolescents.” Of note, the priorities are interlinked, with poor mental health leading to lower levels of economic success and greater involvement in crime.

Following on from this, the priority ‘Improving the mental health of the children and young people of Croydon’ is included in all key strategic borough documents:

- **Croydon’s Health and Wellbeing Strategy** published in 2019 has eight priorities, one of these is giving children and young people a better start in life and includes a mental health commitment

- The **Director of Public Health’s Annual Report 2018** recognises the importance of the first 1000 days of a child’s life, from before conception to two years of age, in building emotional wellbeing and resilience and in laying the foundations of lifelong mental and physical health.

- **The Youth Plan** - Croydon’s LSP is committed to a multi-agency Youth Plan to tackle the priorities that were identified by young people at the Youth Congress meetings held in 2017 and 2018.

Promoting population resilience, intervening early and targeting support at those with mental health difficulties and low emotional wellbeing requires a whole systems approach. In addition to the strategies, plans and reports mentioned, above there are many others that through collaboration and implementation, support Croydon borough’s efforts to improve mental health and emotional wellbeing, for example:

- Croydon Partnership Early Help Strategy 2018-2020
- Special Educational Needs and/or Disabilities (SEND) Strategy 2018-2021
- Public Health Approach to Violence Reduction (June 2019)
  - Vulnerable Adolescents Thematic Review – Croydon Safeguarding Children Board - February 2019
  - CCG Operating Plan and Business Plans
  - Local Strategic Partnership and Health and Wellbeing Board Plans
  - Children’s Improvement plan following Ofsted inspection

There is growing recognition of the importance of an all-ages preventative approach to improving mental health demonstrated through the council’s corporate plan commitment to an all-ages Mental Health Strategy.
1.3 Croydon’s Local Transformation Priorities

The transformation of children and young people’s emotional wellbeing and mental health services is happening within the context of wider whole health and care system changes.

1.3.1 Health and Care System Changes

There have been significant changes in the local Croydon health and care system over the last few months, with a view to bringing elements of children’s health and social care closer together so that the outcomes for children and young people are improved.

How boundaries between services are thought of is being transformed - with a shifting approach towards an integrated place-based locality model. This will create a stronger focus on the wider determinants, such as housing, employment and education that have a profound impact on mental health and emotional wellbeing. These changes in the system will create a stronger environment to integrate pathways and promote resilience within the population.

Work has also commenced to develop an all-ages mental health strategy. This will incorporate wider strategic work for children and young people.

1.3.2 Children and Young People’s Emotional Wellbeing and Mental Health
Local Transformation Priorities 2019/20

At a Health and Wellbeing Board (HWBB) workshop on children and young people’s mental health and emotional wellbeing (held in December 2018 to explore this topic), and at the February 2019 HWBB meeting, the following four priorities were agreed:

1. **Engagement** with children, young people, their families, carers and communities. Those who have lived experience of mental health problems and families who support children and young people with mental health needs, to be placed at the heart of services

2. Working with and **supporting schools and colleges** to promote the emotional health and wellbeing of all their pupils

3. **Pathways:** navigating through the system with the right access at the right time in the right place. This means that children and young people who have mental health problems such as emotional disorders, eating disorder, autism and many others get the right support and help when they need it

4. **Strategic join up and wider work:** maximise the resilience of the population through working with non-mental health services, providing information, and through improving wider determinants such as housing

The intention was that these priorities will determine the direction of travel over the next three years and the priorities have therefore been incorporated into this refresh of the Local Transformation Plan.
1.3.3 Sharing Innovation as Best Practice

The local Croydon offer includes innovative ‘best practice’ such as a digital offer for children and young people rather than visiting mental health services in person (therefore avoiding stigma and promoting mental health prevention and treatment).

The digital offer is focussing on digitally enabled self-care by empowering patients in the management of their care. The digital platform is available on any web-enabled, internet connected device (including laptop, smart phone, and tablet) 24/7, 365 days a year. It includes features such as messaging, static forums and magazine articles. Specifically, the digital offer is:

- Connecting the patient and allowing them to exchange information via connected digital apps of their choice
- Reducing reliance on traditional face to face models of care in primary care and outpatient settings in favour of digital alternatives
  - The SWL STP’s Digital Programme is identifying opportunities for delivering care through digital means. Kooth has been commissioned to deliver online counselling across schools in SW London as part of the Mental Health in Schools trailblazer offer. The service gives children and young people easy access to an online community of peers and a team of experienced counsellors. Access is free of the typical barriers to support: no waiting lists, no thresholds, no cost and complete anonymity.
  - Croydon has invested in its digital offer to children and young people with Off the Record’s on line counselling service.
  - In addition a national programme, the award winning NHSGo, is available to all children and young people aged 16 - 25 years in London:
    - It is free to download on iTunes and Google play and users can also visit www.nhsgo.uk to see all of the content online
    - It provides advice to children and young people, using NHS Choices content on conditions, rolling content on topical matter, a service finder and information about rights for children and young people
    - There have been 75,000 + downloads
    - Over 800,000 in app page views (most popular topics are mental health and sexual health)
1.4 How the System Tracks and Improves Progress in Activity, Outcomes and Experience of Care

Croydon CCG regularly monitors performance against key children’s and young people’s mental health performance indicators to check progress is being made towards achieving national, regional and local targets e.g. using the Five Year Forward View for Mental Health Dashboard (published quarterly) to monitor progress against delivery of the Five year Forward View for Mental Health.

1.4.1 How the System Tracks whether the Cohort is Receiving Support Appropriate to their Needs and Measures the Effectiveness of this Support

Patient experience is measured through use of the Friends and Family Test.

Mental health service providers are contracted to use and report outcome measures to commissioners to monitor the appropriateness and effectiveness of the support they provide.

There are a number of different outcomes measures in use within Croydon currently and they vary by provider. Examples include:

1. The Children’s Global Assessment Scale (CGAS)
2. Strength and Difficulties Questionnaires (SDQ’s)
3. CYP-IAPT outcome measures
4. Specific disorder related measures (Spence Anxiety Scale - Anxiety; Angold Mood & Feelings Questionnaire – Depression; CY-BOCS – OCD etc.)
5. Patient Reported Outcome measures (PROMS)
6. Patient reported Experience Measures (PREMS)
7. Goal GBO
9. CORE 10: 16 + Year Olds
10. RCADS (Revised Children’s Anxiety & Depression Scale): an NHS/IAPT approved tool
11. Goal Based Outcomes
12. Outcome Rating Scale (ORS) can be completed by 13-18 year olds and can be used to monitor young people’s feedback on progress
13. Session Rating Scale (SRS) is a tool used to measure key areas of effective therapeutic relationships
14. CGAS scores by team for patients discharged from the team in the last 12 months
Of note, there is an action, as part of this LTP refresh (refer to Section 3.5) to set outcomes measure for emotional health and monitor progress toward improved outcomes as a result of the delivery of the Local Transformation Plan.

1.5 Summary of Baseline and Latest 2018/19 Out-turn Figures (Where Available)

The following sections detail finance, workforce and activity figures.

1.5.1 Finance

The historic and planned expenditure (including the amount contributing to transformation delivery) is detailed in the following tables.

### Historic and Planned NHS Expenditure Statement

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Core non-LTP Expenditure (£000s)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SLaM Community</td>
<td>2,521</td>
<td>2,521</td>
<td>2,521</td>
<td>2,521</td>
<td>2,521</td>
</tr>
<tr>
<td>Eating Disorders SLaM</td>
<td>81</td>
<td>81</td>
<td>81</td>
<td>81</td>
<td>81</td>
</tr>
<tr>
<td><strong>Total non-LTP spend (£000s)</strong></td>
<td>2,602</td>
<td>2,602</td>
<td>2,602</td>
<td>2,602</td>
<td>2,602</td>
</tr>
<tr>
<td><strong>Additional Expenditure (£000s)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SLaM CAMHS LTP</td>
<td>388</td>
<td>389</td>
<td>494</td>
<td>727</td>
<td>736</td>
</tr>
<tr>
<td>Non-SLaM CAMHS LTP</td>
<td>471</td>
<td>305</td>
<td>433</td>
<td>579</td>
<td>593</td>
</tr>
<tr>
<td>CYP Delayed Discharges Prevention (Non Recurrent)</td>
<td>119</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CYP Liaison &amp; Diversion (Non Recurrent)</td>
<td>0</td>
<td>79</td>
<td>40</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>CYP Waiting Lists (Non Recurrent)*</td>
<td>0</td>
<td>0</td>
<td>110</td>
<td>81</td>
<td>0</td>
</tr>
<tr>
<td>TBC - To invest in CAMHS LTP</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>500</td>
</tr>
<tr>
<td><strong>Total Additional Expenditure (£000s)</strong></td>
<td>978</td>
<td>773</td>
<td>1,077</td>
<td>1,346</td>
<td>1,829</td>
</tr>
<tr>
<td><strong>Total spend (£000s)</strong></td>
<td>3,580</td>
<td>3,375</td>
<td>3,679</td>
<td>4,029</td>
<td>4,431</td>
</tr>
</tbody>
</table>
## Historic and Planned Local Authority Expenditure

<table>
<thead>
<tr>
<th>Historic &amp; Planned Council Allocation &amp; Expenditure Summary</th>
<th>2016/17 £000s</th>
<th>2017/18 £000s</th>
<th>2018/19 £000s</th>
<th>2019/20 £000s</th>
<th>2020/21 (£000s)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Service</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children’s Services</td>
<td>567</td>
<td>927</td>
<td>927</td>
<td>927</td>
<td>582</td>
</tr>
<tr>
<td>Voluntary Sector</td>
<td>305</td>
<td>305</td>
<td>305</td>
<td>305</td>
<td>305</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>872</td>
<td>1,232</td>
<td>1,232</td>
<td>1,232</td>
<td>887</td>
</tr>
</tbody>
</table>

The overall total budget for Children and Young People’s Emotional Wellbeing and Mental Health during 2019/20 is therefore £5,261,000.

### 1.5.2 Workforce

#### Current Staffing

The following table details the current workforce within mental health services in Croydon.

**Total Number WTE - Full Workforce (as at 31st March 2019)**

<table>
<thead>
<tr>
<th>Workforce</th>
<th>WTE</th>
<th>Comment(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCG commissioned CYPMHS workforce for all pathways</td>
<td>52.45</td>
<td>Includes face-to-face &amp; online.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>For SLaM includes 6.7 WTE admin staff and 3.5 WTE assistant psychologists.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>This does not include the CYP IAPT funded posts through Child Wellbeing Practitioners (CWPs) / Recruit To Train (RTT).</td>
</tr>
<tr>
<td>CCG commissioned CYPMHS workforce vacancies for all pathways</td>
<td>11.7</td>
<td>SLaM includes 10.6 newly funded posts from Q4 2018 still being recruited to.</td>
</tr>
<tr>
<td>Any additional WTE CYPMHS information held including in Voluntary, Community and Social Enterprise (VCS) and Local Authority (LA) provision</td>
<td>15.87</td>
<td>Includes young carer support, outreach SLaM: 4.2 WTE are included above as part of the workforce. Not all LA investment is linked with specific staff but rather funds specific interventions that can be delivered by a number of staff from within the core establishment.</td>
</tr>
</tbody>
</table>

Additionally, following successful bids, Mental Health Support Teams (MHST Teams) are currently being recruited in Croydon. Following successful completion of the Educational Mental Health Practitioner (EMHP) Diploma course at Kings College...
London, trainees will be offered posts as qualified practitioners, thus enhancing service access both in 2021 when they qualify, and for the future. The CAMHS service will also benefit from additional band 6, 7 and 8a posts recruited to the MHSTs.

As part of implementing the South West London STP, recruitment infrastructure is being increased to support the planned expansion of the CAMHS workforce to meet increased and improved access to services as part of the NHS Long Term Plan.

Current Skill Mix

The present skill mix includes: Medical Staff, Counsellors, Counselling Managers, Trainee Counsellors, Clinical Supervisors, Qualified Nurses, Clinical Psychologists, Allied Health Professionals, Social Workers, Therapists and Psychotherapists.

Consideration is being given, within the workforce strategy, as to what further career pathways may be able to be created for the future workforce.

Plans to Increase Skill Mix Capabilities

The Healthy London Partnership (HLP) published a Children and Young People’s Mental Health Workforce Strategy in May 2019 and a South East London system workforce plan is being developed to target the local population to grow the integrated community workforce with a focus on including the following roles:

- Peer Support Workers
- Physicians’ Assistants
- Social Workers
- Occupational Therapists
- Nurses
- Mental Health Practitioners

Training will promote flexibility to work across all ages (where possible) and to be able to support physical health needs.

In addition, opportunities are being taken to widen consideration of careers within mental health and CAMHS in particular, through employment of apprentices in administration roles and nursing associates on inpatient wards.

Workforce planning during 2019/20 will include a review of skill mix.

1.5.3 Community Based Mental Health Services Activity

Access and Waiting Times

Access

Population access rates for children and young people aged under 18 years of age accessing / that will access treatment, and waiting times for treatment, from 2016 to 2021 are detailed in the following tables.
Of note, Croydon has three main providers of community-based mental health services for those with mild to severe mental health difficulties and treatment interventions are delivered face to face or online.

Activity figures do not include the children and young people who are choosing to access interventions via Kooth (a digital counselling service).

**Five Year Forward View Access to Treatment Targets and Activity for 0 - 18 Year Olds in Croydon – 2016/17 to 2020/21**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated total number of individual children and young people aged 0-18 with a diagnosable mental health condition. Based on a prevalence rate of 1:10 having significant mental health need in the population</td>
<td>8,855</td>
<td>8,855</td>
<td>8,855</td>
<td>8,855</td>
<td>8,855</td>
</tr>
<tr>
<td>Target percentage of children and young people aged 0-18 with a diagnosable mental health condition who were / are receiving treatment</td>
<td>30%</td>
<td>30.5%</td>
<td>32%</td>
<td>34%</td>
<td>35%</td>
</tr>
<tr>
<td>Number of individual children and young people aged 0-18 targeted to receive treatment funded community services</td>
<td>2,656</td>
<td>2,700</td>
<td>2,833</td>
<td>3,011</td>
<td>3,100</td>
</tr>
<tr>
<td>Total number of individual children and young people aged 0-18 that actually received treatment funded community services in the reporting period</td>
<td>2,700</td>
<td>2,400</td>
<td>2,347</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Difference in target and actual number of children and young people that accessed services</td>
<td>+44</td>
<td>-300</td>
<td>-486</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Access to treatment activity did not achieve the baseline target in 2018/19 – it fell 486 short of the target of 2,833 target (i.e. a shortfall of approx. 17%). The main reasons for the shortfall were a combination of the following:

- Staffing shortages – SLaM experienced difficulty with recruiting to additional neuro-developmental assessment specialist posts funded by NHSE during Quarter 3 2018/19. These posts have been successfully recruited to during Sept 2019

- Data recording and data cleansing was needed to make sure that all the contacts were being counted accurately by the three main local contracted providers delivering commissioned services

Croydon CCG now receives a four borough data monitoring report on a monthly basis and meets with SLaM managers to discuss issues and to put actions in place to address them.
The access to treatment and waiting time position reported at the end of September 2019 has improved - as shown in the following figure and table.

**2019/20 Access to Treatment Performance 2018/19 to 2019/20**

![Graph showing access to treatment performance comparison to 2018/19 results.](image)

**Summary of 2019/20 Access to Treatment Target Position for 0 – 18 Year Olds in Croydon Reported to NHSE as At the End of September 2019**

<table>
<thead>
<tr>
<th></th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>Aug</th>
<th>Sept</th>
<th>Total for Q1 &amp; Q2</th>
<th>Projected Outturn at the End of March 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual</td>
<td>358</td>
<td>328</td>
<td>263</td>
<td>231</td>
<td>158</td>
<td>256</td>
<td>1,594</td>
<td>TBC</td>
</tr>
<tr>
<td>Target</td>
<td>251</td>
<td>251</td>
<td>251</td>
<td>251</td>
<td>251</td>
<td>251</td>
<td>1,506</td>
<td>Baseline target</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3011</td>
</tr>
<tr>
<td>Difference</td>
<td>+107</td>
<td>+77</td>
<td>+12</td>
<td>-20</td>
<td>-93</td>
<td>+5</td>
<td>+88</td>
<td>TBC</td>
</tr>
</tbody>
</table>

**Waiting Times for Treatment**

The following figure details waiting times for treatment over the period 2018/19 to 2019/20.
2019/20 Waiting Times for Treatment

For access and waiting times for Eating Disorders and Early Intervention in Psychosis services please refer to sections 6.3 and 8.2 respectively.

1.6 Allocation and Use of Funding

Croydon CCG and partners are committed to using CAMHS Local Transformation funding to improve outcomes for children and young people who need support with their mental health and emotional wellbeing - including increasing access for those with less needs and reaching our more vulnerable groups.

The CAMHS Local Transformation funding supports initiatives that are in line with local authority priorities and we will ensure this work remains aligned.

1.6.1 Main CCG and Local Authority Commissioned Services

The following is a brief outline of the main CCG and Local Authority services commissioned.
Due to Croydon’s financial position, we are unable to confirm additional funding for CAMHS beyond 2020/21, without a ring-fenced directive from NHSE.

1.7 Modelling of Current Mental Health Provision and Plan of Investment across the Whole System Pathway

Croydon is working collaboratively with the six South East London boroughs to improve efficiency of services through better partnerships, community based outreach, provision of care for children and young people close to their home and reduced waiting times.

Commissioners and providers will come together, in early 2020, to engage in a System Dynamic Modelling Tool workshop, supported by the regional team. This Tool has been recommended as a vehicle for engaging commissioners and providers in a system-wide overview of local need and services, in order to improve service efficiency. It is a vehicle for addressing these issues within a framework that supports evidence-informed planning and investment into services. This approach will present opportunities for support and shared learning, resulting in more efficient service planning and the delivery of better outcomes for children and young people.

1.8 Engagement with Children, Young People and their Parents and Carers

The Local Transformation Plan provides the framework to involve all partners, services and service users on the journey to whole systems improvement.

The Voice of the Community is part of the LSP Governance structure as shown in the following figure.
One Croydon Alliance also supports the wider engagement process through the Service User Reference Group as detailed in the following figure.

In addition, each of the Croydon mental health service providers have a patient participatory group which engages with children and young people who use services to inform service development and areas for service development are discussed and fed back to commissioners to inform commissioning and improve services. For example:

- Croydon CAMHS - engages with young people through their Youth Advisory Group
• Croydon Drop In - engages with children and young people through their young people’s participation group and, in July 2019, a booklet was published for parents, carers and professionals, available in both paper and electronic formats. Written and illustrated by young people aged 13-20, it gives a voice to their experiences, helping to guide the adults in their lives to support them in ways they find most beneficial. The work was funded by the council and developed by a local voluntary sector provider, Croydon Drop In (CDI), and their young people’s participation group

• Croydon’s Youth Disability Team - supports young people with more complex disabilities and physical needs to have a voice in decision making processes, particularly in relation to their education and care needs

Croydon also has a number of other participatory forums and consultation opportunities for children and young people. These include:

- The Council’s youth engagement team – which works in youth settings and the wider community. The team lead on youth consultation through varied forums, and also support youth work for LGBT young people in Croydon. There are also links to work around domestic abuse, exploitation and family justice. It aims to improve outcomes for all young people in the Borough

- Croydon Council’s Takeover Challenge – during which young people take over the directors and heads of services roles within the council and partake in decision making

- Croydon Young Mayor and Deputy Mayor initiatives

- Locality Youth Forums

- The Youth Congress

All groups are inclusive and young people are representative of the diversity of Croydon.

Croydon is committed to improving participation of children, young people and their families as the agents for change through their engagement and participation to support the ongoing development of services that meet the preferences and lived experiences of those who access delivered services.

As part of this refresh of the Local Transformation Plan there is an action to consult with more children and young people about their experiences of mental health services in order to improve their participation and engagement through delivering a consultation event which aims to:

- Improve participation of children, young people and their families as the agents for change

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o Ensure that children and young people consulted are reflective of the diversity of the borough

o Ensure that children and young people, their families and carers, are at the heart of mental health services

o Create an evaluation report showing outcomes and potential impact

o Develop more effective engagement processes in order to identify gaps and understand the needs of underrepresented communities

o Explore best practice on sharing of engagement services

The engagement event will include consultation on service planning, service delivery and evaluation, treatment and supervision and feedback to inform commissioning and services.

Key Planned and Recent Engagement Activities

Current Year (2019/20)

1. **The second Croydon Young Mayor and Deputy Mayor will be elected in March 2020**

2. **Takeover Challenge 2019 (21st Nov)** - the Director of Public Health’s role was taken over by a young person

3. **On-going Award Winning ‘Choose Your Future Campaign’** – during Sept and Oct 2019 there has been a focus on ‘mental health matters for young people’ in line with World Mental Health Day

4. **Young Commissioners are taking part in the Tendering and Re-commissioning of the Council Community Fund (Oct-Mar 2019/20)** - this is key to decision making about services delivered for young people in their communities

5. **Further Consultation** – we propose to offer an opportunity for a partner organisation from the voluntary sector to carry out further consultation and research and gather evidence from children and young people on their participation and co-production in services
1. **On-going Award Winning ‘Choose Your Future Campaign’** – encouraging young people to choose their future based on choices they make

2. **2018 Croydon Takeover Challenge** – In November 2018 the Council hosted 130 young people as part of a Takeover Challenge. One of the top priorities for discussion was emotional wellbeing and mental health and a workshop was facilitated by Public Health for children and young people about emotional wellbeing

### 2 Understanding and Addressing Local Need

#### 2.1 How this LTP is Addressing Local Need

Croydon’s Local Transformation Plan aims to address the needs of the whole population through not only providing services for those with mental health problems, but also promoting initiatives and programmes that promote wellbeing and population resilience and that target support to those who are at higher risk of developing mental health problems. In doing so, this LTP draws on a local understanding of need.

#### 2.2 Why Supporting Good Mental Health in Children and Young People is Important

Childhood is a crucial time for laying down the foundations of life long mental health and wellbeing. Half of all adults with a lifetime mental illness (excluding dementia) will experience symptoms by the age of 14 and 75% will experience symptoms by the age of 18. Childhood and adolescence is therefore a crucial time for services to engage with children, young people and their parents.

For those experiencing mental health problems, early intervention is effective and can improve life chances and outcomes (including physical health, educational attainment, work prospects and relationships with friends, family and the community). There is overwhelming evidence that early intervention is cost effective, with national social return on investment studies showing returns of between £1.37 and £9.20 for every £1 invested\(^4\).

Poor mental health is both a cause, and a consequence, of health inequalities. Children in low income families have a three-fold increased risk of developing mental health problems\(^5\). People with a serious mental illness die 16-25 years earlier than the general population.

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Mental ill-health begins in childhood, persists in adulthood and has the potential to impact the next generation as shown in the following diagram\(^6\).

Children and young people experiencing mental ill health are more likely to have worse outcomes both as children and in later life as adults:

- Children with mental disorders are much more likely than other children to have had time off school
- Children with emotional disorders and those with conduct disorders have been found to be much more likely than other children to have had unauthorised absences\(^7\)
- They are twice as likely to have special educational needs and tend to be behind with their schooling

2.3 Local Context – Croydon’s Growing Population of 0-25 Year Olds

The size of the 0 to 18 years and 0 to 25 years populations, and their projected growth, sets the context for the level of mental health need.

Croydon has the second largest child population in London at an estimated 96,751 (in 2018) for children and young people under the age of 18 years and by 2026 it is projected that this number will grow to approximately 103,930 (an increase of circa 7% from 2018 figures). The biggest expected increase in the under 18 population is in those aged 5 and above, which is projected to grow by 10% from 67,870 to approximately 74,690 by 2026.

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\(^6\) Croydon Public Health

As at 31 March 2019, there were 819 children in care in Croydon, a rate of 86 per 10,000, higher than London (50 per 10,000), and England (65 per 10,000). 265 of these children (32%) were unaccompanied asylum seeking children.

2.4 Estimated Numbers of Children and Young People with Mental Health Disorders within Croydon

This section gives detailed information about the prevalence of mental health disorders and those who are at increased risk in Croydon. The size of these populations influences how we deliver services at a population level as well targeting those most at risk and providing additional support to people with greater need.

National estimates of need were updated in 2017, by a national survey of mental health in children and young people which looked at diagnosable mental disorders in children and young people aged 2 – 19 years. The previous survey took place 13 years earlier in 2004 and looked at a narrower age range 5 – 15 years.

The 2017 survey showed only a modest increase in the overall proportion of people aged 5 to 15 with diagnosable conditions from 10.1% to 11.2%. There was some variation by type of disorder - emotional disorder rates increased, while other disorder types were stable. The 2017 survey gave important insights into the pattern of mental illness within the population. It showed that:

- The proportion of mental illnesses between boys and girls changes during childhood – at aged 2 to 4, it’s more common among boys, at ages 17 to 19, girls are twice as likely as boys to be diagnosed (see following figure)
- Mental health conditions become more common with age.
- Young women were a high risk group. Approximately one quarter of girls aged 17 to 19 (23%) were found to have a mental disorder and, of these, over half (57%) reported having self-harmed or made a suicide attempt.
- One in twenty (5.0%) 5 to 19 year olds met the criteria for two or more mental health disorders.
The national survey grouped disorders into four broad types and the prevalence of each is shown in the following figure.

The following table displays the estimated prevalence of common mental health disorders in Croydon. It is based on national prevalence estimates applied to current population data. In some cases, two different age specific rates have been applied to relevant population subgroups to give a total for the 0-25 age group.
Table to Show Current and Projected* Estimated Prevalence of Mental Health Conditions for Children and Young People in Croydon

<table>
<thead>
<tr>
<th>Condition</th>
<th>Estimated Prevalence</th>
<th>2017 (0-25 yrs)</th>
<th>2021 (0-25 yrs)</th>
<th>2023 (0-25 yrs)</th>
<th>2025 (0-25 yrs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional disorders</td>
<td>3.6% of 5-16 yr olds</td>
<td>4,598 (1 in 28)</td>
<td>4,880</td>
<td>4,958</td>
<td>5,047</td>
</tr>
<tr>
<td>Conduct disorders</td>
<td>5.6% of 5-16 yr olds</td>
<td>7,153 (1 in 18)</td>
<td>7,591</td>
<td>7,712</td>
<td>7,851</td>
</tr>
<tr>
<td>Hyperkinetic disorders</td>
<td>1.5% of 5-16 yr olds</td>
<td>1,916 (1 in 67)</td>
<td>2,033</td>
<td>2,066</td>
<td>2,103</td>
</tr>
<tr>
<td>Autism spectrum disorders</td>
<td>0.9% in 5 - 16 yr olds</td>
<td>1,150 (1 in 111)</td>
<td>1,290</td>
<td>1,310</td>
<td>1,334</td>
</tr>
<tr>
<td></td>
<td>1.1% in 18 and older (to 25yr)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eating disorders</td>
<td>0.30% in 5 - 16 yr olds</td>
<td>5,859 (1 in 22)</td>
<td>4,898</td>
<td>5,000</td>
<td>5,215</td>
</tr>
<tr>
<td></td>
<td>13.2% in 17 - 24 yr olds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-harm</td>
<td>10% in 5 - 16 yr old</td>
<td>12773 (1 in 10)</td>
<td>13,555</td>
<td>13,771</td>
<td>14,019</td>
</tr>
</tbody>
</table>

*Modelled based on research prevalence estimates applied to current population data.

There is recognition that there are many children and young people who may be experiencing mental health problems that are causing difficulties but do not meet the thresholds for diagnosis.

There is also significant co-morbidity. Approximately 1 in 4 children with a mental disorder, and just under 1 in 3 with autism spectrum disorder, also have another of the main types of clinically recognisable mental health disorder, most commonly conduct disorder.

During 2017/2018, 174 of Croydon’s children and young people aged 10-24 years were admitted to hospital as a result of self-harm. This is a directly standardised rate of 263.6 per 100,000 population aged 10-24 years and is higher than the London rate (209) but lower than the England rate (421) per 100,000 population aged 10-24.

In 2018, there were 1,403 school aged children in Croydon identified as having social, emotional and mental health needs. This is 2.24% of children in Croydon’s primary schools and 2.09% of secondary school children in Croydon, and equates to approximately 763 and 463 children respectively.

Those with mental disorders were more likely to engage in risky behaviours such as misuse substances, particularly smoking and drug taking. In 2018/19 there were 139 young people in treatment (for substance misuse) locally.
2.5 Addressing the Needs of Children and Young People

2.5.1 Emotional Wellbeing and Mental Health Services

The following table details current mental health services (in bold) plus other services commissioned by other parts of the system that provide emotional support and wellbeing.

### Emotional Wellbeing and Mental Health Services in Croydon

<table>
<thead>
<tr>
<th>Aim</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stay Well</td>
<td>Universal services such as Health Visiting (signposting to mental health services)</td>
</tr>
<tr>
<td></td>
<td>Healthy Schools Programme</td>
</tr>
<tr>
<td></td>
<td>Primary Care</td>
</tr>
<tr>
<td>Manage Well</td>
<td>Counselling – Croydon Drop In</td>
</tr>
<tr>
<td></td>
<td>Counselling – Off the Record</td>
</tr>
<tr>
<td></td>
<td>IAPT for Children and Young People</td>
</tr>
<tr>
<td></td>
<td>Mental Health Support Teams in Schools and Colleges</td>
</tr>
<tr>
<td></td>
<td>Kooth</td>
</tr>
<tr>
<td></td>
<td>Early Help</td>
</tr>
<tr>
<td></td>
<td>Family Nurse Partnership</td>
</tr>
<tr>
<td>Greatest Need</td>
<td>Eating Disorder Service</td>
</tr>
<tr>
<td></td>
<td>Early Intervention in Psychosis (EIP)</td>
</tr>
<tr>
<td></td>
<td>Crisis Care</td>
</tr>
<tr>
<td></td>
<td>Inpatient – 8 bed PICU</td>
</tr>
<tr>
<td></td>
<td>Forensic CAMHS</td>
</tr>
</tbody>
</table>

2.5.2 Services for Those at Higher Risk of Mental Health Problems

There are many risk factors for poor mental health in children and young people. The following figure sets out both risk factors and protective factors at individual, family, school and community levels.
Protective factors lead to greater resilience whereby there is a stronger ability within a person and their community to positively adapt to life’s inevitable ups and downs.

There are a number of groups of children who are at a higher risk of experiencing mental health problems including those:

- Who have experienced four or more adverse childhood experiences
- In the care system – i.e. looked after children - 60% of looked after children (including unaccompanied asylum seeking children) have some form of emotional or mental illness
- With special educational needs, autism and attention deficit hyperactivity disorder
- In the youth justice system
- With adverse family circumstances, such as parental mental illness, parental separation and parents in prison. Around a 1/4 of children with mental disorders had a parent with serious mental illness. Maternal depression is associated with a 5 fold increased risk of mental illness for the child
- In low income households and areas of higher deprivation

The following table details some of these risk factors and their prevalence within Croydon, in comparisons to London and England for data that is available.
<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Measure</th>
<th>Latest Data</th>
<th>Croydon</th>
<th>Croydon in comparison to London</th>
<th>Croydon in comparison to England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood poverty</td>
<td>Children in poverty (under 16) % of children aged under 16 living in low income families</td>
<td>2016</td>
<td>16.1%</td>
<td>Statistically better</td>
<td>Statistically better</td>
</tr>
<tr>
<td></td>
<td>Children in poverty (under 20) % of dependent children aged under 20 living in low income families</td>
<td>2016</td>
<td>16.3%</td>
<td>Statistically better</td>
<td>Statistically better</td>
</tr>
<tr>
<td>Family homelessness</td>
<td>Rate per 1,000 applicant households with dependent children or pregnant women accepted as unintentionally homeless and eligible for assistance</td>
<td>2017-2018</td>
<td>4.0</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td>Children looked after</td>
<td>Children in care Rate of Looked After Children per 10,000 population aged under 18.</td>
<td>2018</td>
<td>83</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td></td>
<td>Number of Unaccompanied Asylum Seeking Children (UASC) looked after children</td>
<td>2018</td>
<td>295</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td></td>
<td>Children in care (excluding UASC)</td>
<td>2018</td>
<td>212</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td></td>
<td>Child Protection Plans Rate per 10,000 of children under 18 who were the subject of a child protection plan at any point in the year.</td>
<td>2018</td>
<td>108.5</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td></td>
<td>Child in Need episodes Rate per 10,000 of children under 18 with an episode of need at any point in the year.</td>
<td>2018</td>
<td>822.1</td>
<td>Statistically worse</td>
<td>Statistically worse</td>
</tr>
<tr>
<td>Children with Special Educational Need</td>
<td>Primary school pupils with SEN % of pupils in primary schools with statements, EHC plans or receiving support</td>
<td>2018</td>
<td>13.4%</td>
<td>Statistically similar</td>
<td>Statistically similar</td>
</tr>
<tr>
<td></td>
<td>Secondary school pupils with SEN</td>
<td>2018</td>
<td>12.9%</td>
<td>Statistically better</td>
<td>Statistically better</td>
</tr>
</tbody>
</table>
Mental health issues are both a cause, and a consequence, of health inequalities and therefore Croydon are giving additional support to those at high risk.

A wide range of services and initiatives are in place to address the health inequalities.

**Deprivation**

A higher proportion of the population who are children and young people are in the North and East of the borough where there is also higher levels of deprivation.

The rate of family homelessness in 2018 in Croydon, (4.0 per 1000 households), is significantly worse than London and England, and Croydon has the 5th highest rate when compared to statistical neighbours.

The planned integrated place-based locality model will create a stronger focus on wider determinants, such as housing, employment and education that have a profound impact on mental health and emotional wellbeing. These changes in the system will
create a stronger environment to integrate pathways and promote resilience within the population.

**Black and Minority Ethnic (BAME) Backgrounds**

Croydon has a diverse population with just over 60% of 0-25s from black and minority ethnic (BAME) backgrounds. Generally, Black and Minority Ethnic groups are more likely to be diagnosed with mental health problems and admitted to hospital, experience a poor outcome from treatment and more likely to disengage from mainstream mental health services, leading to social exclusion and to a deterioration in their mental health.

Among Croydon’s population, BME communities tend to be under represented in Tier 3 and Tier 4 Mental Health services. There is also lack of engagement with services of children and young people known to the Youth Offending Team and Tier 4 mental health services in Croydon.

Off the Record offers BAME mental health outreach counselling (including for those impacted by serious youth violence).

**LGBTQ+ Children and Young People**

In general, people identifying as lesbian, gay, bisexual and/or transgender may be at greater risk of experiencing mental health conditions than people who identify as heterosexual due to a range of factors, including discrimination and inequalities.

The proportion of the UK population identifying as lesbian, gay or bisexual (LGB) increased from 1.5% in 2012 to 2.0% in 2017. Of all age groups, people aged 16 to 24 years were most likely to identify as LGB in 2017 (4.2%) and regionally, people in London were most likely to identify as LGB (2.6%).

The youth engagement team support youth work for LGBTQ+ young people in Croydon. There is a needs assessment for people who identify as LGBTQ+. The results of this assessment help to identify gaps in support. The council commissions Metro to deliver the Bridge LGBTQ youth club which includes a peer support group for young people age 11 – 25 years identifying as LBGTQ. In addition, the organisation Rainbow Across Borders supports LGBTQ asylum seekers in Croydon.

**Adverse Childhood Experiences (ACE)**

Adverse Childhood Experiences (ACE) are experiences that children have, that impact negatively on later childhood and adulthood. Although not all ACEs will occur within the first 1000 days of life, evidence shows that children who experience four or more of what is known as ACEs have been found to be:

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- 8 times more likely to have committed acts of violence between the ages of 18 and 69
- 30 times more likely to have made a suicide attempt\(^\text{10}\)
- 41% more likely to experience low mental well-being

There are a number of recommendations from the Director of Public Health 2018 report\(^\text{11}\) which prioritises workforce training; particularly on a trauma informed approach, to equip staff to support children, young people and their parents to identify, manage and prevent ACEs. The borough is currently developing a trauma informed approach.

**Unaccompanied Asylum Seeking Children (UASC)**

Croydon has a disproportionately high number of unaccompanied asylum seeking children (UASC) as part of it's looked after children (LAC) cohort.

As at 31 March 2019, 265 (32%) of the children in care in Croydon were unaccompanied asylum seeking children. This is due to the Home Office being located within the borough.

The voluntary sector organisation; Off the Record is commissioned to provide specialist counselling provision for young refugees and asylum seekers (predominantly UASC) aged 11-25 years. Counselling is accessible through self or professional referral and offered at community bases and local colleges working through interpreters where required. In addition, the service delivers workshops and counselling for new arrivals through a partnership with the Virtual School.

**Children Looked After**

As at 31 March 2019, there were 819 children in care in Croydon, a rate of 86 per 10,000, higher than London (50 per 10,000), and England (65 per 10,000). 265 of these children (32%) were unaccompanied asylum seeking children.

During 2017/18, 1028 children in Croydon under the age of 18 were the subject of a child protection plan at any point during the year. This is a rate of 108.5 per 10,000 children which is statistically higher than the London rate (88.4) and the England rate (99.8) in England.

There is currently work taking place to develop a needs assessment for Children Looked After to inform commissioning plans for this vulnerable group. The assessment will assist with determining and addressing the mental health support required for looked after children including children and young people in need, children and young people subject to child protection and care leavers.


Care Leavers

During 2017/18 there were 442 children who ceased to be looked after by the local authority at any point in the year. This is a rate of 46.6 per 10,000 children, which is statistically higher than the London rate (27.3) and England (25.2). There were 673 care leavers aged 19-21 years who were previously looked after by the council for 13 weeks or more, after their 14th birthday.

The needs assessment being developed for Children Looked After will assist with determining and addressing the mental health support required for care leavers.

Adopted Children

During 2017/18, 11 children in Croydon were adopted which is 2% of the total LAC who left care in the same year. Adopted children and young people follow the standard route of accessing mental health support within Croydon.

Children in Need

During 2017/18 there were 7,791 children identified as in need of local authority services to achieve or maintain a reasonable standard of health or development. This is a rate of 822.1 per 10,000 children, which is statistically higher than the London rate (644.5) and England rate (594.1).

The needs assessment being developed for Children Looked After will assist with determining and addressing the mental health support required for children and young people in need.

Disabled Children and Young People - including those with a Learning Disability, Autism or Both

Croydon population data from 2017 suggests there are potentially 10,094 children and young people (aged 0-25) in the borough with disabilities.12

The prevalence of special educational needs and disability (SEND) within the school population is slightly higher than the London average and Croydon’s statistical neighbours average but similar to the proportion seen across England.

In January 2019 there were 9,876 children with SEN in primary and secondary schools, which is a 25% reduction from 2010 (a similar reduction to both London and England). In January 2019, a total of 2,999 children and young people living in Croydon had an Education, Health and Care (EHC) Plan, 76% more than in 2010. The joint strategic needs assessment and SEND strategy (2019 -2021) particularly addresses the mental health support needs of children and young people with SEND.

Croydon CAMHS has a small dedicated team providing care and treatment for children and young people with learning disability and neurodevelopmental

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disorders, including ASD (Autism Spectrum Disorder), and ADHD (Attention Deficit Hyperactivity Disorder), FAS (Foetal Alcohol Syndrome).

Croydon CCG continues to work with South West London (SWL) CCGs, Local Authorities and NHS England Specialised Commissioning as part of the SWL Transforming Care Partnership (TCP) to focus on making sure support is provided to people with a learning disability and/or autism in the community, to do this it will improve services for people in times of crisis and provide training in positive behavioural support.

Intervening early, and admission prevention, is particularly important for children and young people to prevent long term inpatient care in adulthood. To date, the TCP has supported a reduction in the number of children and young people (CYP) with a learning disability and/or autism in hospital and are working to ensure that not more than five are admitted at any given time.

Croydon CCG also work with South East London CAMHS, SEND leads and social care to ensure that Transforming Care is at the forefront of transformation planning, and that a consistent approach to transformation is taken across the SEL STP footprint. Commissioning to improve community capacity gained momentum during 2019/20 and the use of Root Cause Analysis (RCAs) has helped inform commissioning. Services for older young people with autism and/or mental health conditions has been identified for development and is supportive of the transition from children and young people to adult services. The TCP has therefore:

1. Identified the need for a children and young people lead (0-25) to support patient care, case management, and benchmarking and admission prevention
2. Commissioned training for families, carers and frontline staff on Positive Behaviour Support (PBS) and Autism Awareness
3. Scoped opportunities for community services to engage with ongoing Transforming Care market management and housing work streams to support the development of community services for children and young people in SEL
4. Sought to engage community and voluntary sector organisations to raise the profile of the Transforming Care programme and share their service offer with care co-ordinators and in parallel, raise awareness of existing services via Local Offer websites
5. Committed to working with the TCP Forum to include children and young people’s views and to ensure the Forum is representative of SEL’s diverse population

2.6 Gaps in Provision and Expansion Plan

There is an on-going need to address identified gaps with regards to children and young people’s mental health service provision which include:

- Promotion of resilience and prevention at all ages
- Early intervention
- Targeted support for those with low mental health and emotional wellbeing
- Improving access and waiting times to treatment
- Community based care - close to where families live
- Support for people whilst waiting for care
- Co-ordinated care for children and young people with learning/intellectual disabilities and autism
- Transition services i.e. for 18 – 25 Year olds
- 24/7 crisis care
- Mental health support for those with mild to moderate mental health needs in schools and colleges

As described in Section 1.2.1, NHS England has identified a number of key priorities for children and young people’s mental health in the Five Year Forward View for Mental Health that must be achieved by 2020/21. This follows and builds on from the Future in Mind Policy for Children’s Mental Health in 2015. Key priorities for the next 18 months include:

- A significant expansion in access to high quality mental health care for children and young people
- Nationally at least 70,000 additional children and young people each year to receive evidence-based treatment, a rate of 35% of those with a diagnosable mental health condition

To address current staff vacancies and meet the nationally proposed expansion, the national mental health workforce plan recommends that at least 1,700 therapists and supervisors need to be employed to meet the additional demand by 2020/21. The illustrative trajectory for the necessary growth in therapists was published at the national level (England region). South West London has produced the trajectory up to 2020/21 of SWL population based share as well as CCG level contribution to 1,700 additional therapists. The collaboration across South West and South East London will ensure streamlined care pathways, consistent and robust cross boundary commissioning arrangements and collaboration between secondary care providers, South West and South East London CCGs and NHS England.

The Five Year Forward View for Mental Health Implementation Plan, as well as Stepping forward to 2020/21, recommends that at least 3,400 existing CAMHS staff be up skilled in CYP IAPT therapies. To implement local plans to transform children and young people’s mental health, SWL STP has produced the trajectory to meet the national target of 3,400 current staff being trained by 2020/21 based on SWL population and CCG contribution to ensure the sustainability of psychological therapies workforce.

Following the publication of the Future in Mind and the development of the Local
Transformation Plan, additional funding has been made available each year to enhance mental health and emotional well-being services for children and young people.

To reduce the need for children and young people to attend A&E and to be admitted to in-patient care, there is an aim to work to prevent crises, and when they happen, to stop them from escalating by providing support as early as possible in the local community by increasing capacity of community-based services.

3 Local Transformation Plan (LTP) Ambition 2018-2020

Good emotional wellbeing and mental health is essential to enable children and young people to enjoy life, to achieve their goals and to make a successful transition into adulthood.

The Government made clear its commitment that mental health services for people of all ages should have parity of esteem with physical health services and the responsibility for this rests with all agencies. Child and adolescent mental health services must play an integral part of this for children, young people and families/carers in Croydon.

In keeping with Future In Mind, the transformation of services in Croydon constitutes a move away from a system defined in terms of the services and/or organisations provided (the ‘Tiered’ model) towards one built around the needs of children, young people and their families/carers.

The strategic planning approach being taken to transformation (improvement) of children and young people’s emotional wellbeing and mental health in Croydon is summarised in the following diagram.
3.1 Whole System of Care

Emotional wellbeing and mental health services in Croydon are benefitting from a whole systems approach to improvement with a recognition that each service component is a key element along a pathway of support. For example, some children and young people will be well supported by universal services, whilst others will need extra support, and others still will require high intensive support or crisis care.

Mental health provision for children and adolescents in Croydon is complex. As in other boroughs, it is commissioned at a local and national level and has multiple funding streams including the NHS CCG, Local Authority, Schools and NHS England.

In addition, there are multiple relationships and interfaces with a large number of public and third sector agencies - these include: Off The Record, Croydon Drop In, mainstream school provision via Head Start, Children Looked After and Youth Offending Teams, Children’s Centres, Primary Care General Practitioners, and Adult Mental Health Services (for children in transition).

3.1.1 Achievements to Date and System Development

The following figure details Croydon’s transformation journey to improve emotional wellbeing and mental health services for children and young people since 2016.
Further details regarding services that have been the focus for improvement to date are available in the following sections:

- Section 5: Health and Justice
- Section 6: Eating Disorders
- Section 7: Urgent and Emergency Mental Health Care
- Section 8: Early Intervention in Psychosis
Section 9: Mental Health in Schools

There is, however, a general acknowledgement that the system can still be further strengthened and that more integrated working in future will be required.

The aim is for children and young people to have the right evidence-based care in the right place, at the right time, and for them to spend the shortest amount of time in intense care. This will enable them to step down to the most appropriate, lowest level of support required. Key objectives include: increasing access to services, reducing waiting times for treatment, and preventing children and young people’s needs from escalating to require higher intensity mental health services (where possible).

This LTP draws on the local needs analysis (detailed in Section 2) and engagement and consultation findings (detailed in Section 1.8) to enable it to meet the needs of the people of Croydon.

3.2 Pathways of Care

Navigating through the health and care system in Croydon with the right access, at the right time, and in the right place (through mapping and improving pathways of care) is one of this LTP’s 4 transformation priorities determining the direction of travel over the next three years (refer to Section 1.3.2).

Care pathways within Croydon are aligned to the LTP strategic planning framework (detailed in the previous section).

3.2.1 Staying Well - Mental Health Promotion and Prevention

Families and communities have a primary role to ensure that children and young people are emotionally healthy and that this is maintained throughout their adult lives. Commissioned emotional wellbeing services aim to be preventative - to work with children, young people, their families and carers as early as possible to reduce the need for higher intensity services. Similarly the community voluntary and faith sector have an important part to play in supporting children, young people and families and often add extra social value through the fund raising and support they offer outside of public sector contracts.

Universal Settings

Some children are already being well supported by universal services that promote wellbeing. Universal services are provided as a right to all children including our most vulnerable children and those with additional, intensive or specialist needs.

Most children and families/carers will never come into contact with statutory or specialist services - the basic needs of all children can usually be met by their family and community and faith networks together with universal services such as maternity services, health visitors, school nurses, GP practices, health care, early years, schools and education services, housing and youth services. These services are also well placed to recognise and respond when extra support may be necessary, so that support is addressing family vulnerabilities early - this may be because of the child’s changing developmental, health and wellbeing needs or because of parental or family circumstances.
In addition, Croydon’s children and young people have access to the award winning national digital programme NHSGo – a confidential health advice and information service for 16-25 year olds which includes a Guide on Emotional and Mental Health. It is free for them to download on iTunes and Google play or they can also visit www.nhsgo.uk to view all of the content online.

**Schools and Colleges**

Schools and colleges play a major role in supporting emotional wellbeing for children and young people in Croydon. Section 9 details emotional wellbeing support available in schools and colleges.

**Primary Care**

Clinical Leadership Groups and networks are consulted with to inform commissioning intentions for emotional wellbeing and mental health services within Croydon.

One Croydon’s 2019/20 – 2024/25 Health and Care Plan (refer to Section 1.2.3) includes an aim to improve access to services and provide care closer to families’ homes (when appropriate) to prevent mental health problems and ensure early intervention for those with mental illnesses. As part of this, greater support will be provided in primary care. Delivering preventative and proactive care for the whole population, and engaging the community directly, requires community services to be organised around localities. The Vision for such ‘Integrated Community Network Plus’ delivery in Croydon is shown in the following figure.

Croydon is developing integrated primary, community health and social care - linking with other services such as housing and the voluntary and community sectors to provide localised services to support neighbourhoods of 30,000 - 50,000 populations. Wider health and care models of care will be developed around GP networks.
Models of care will focus on a range of services that go beyond working jointly and which will work in an integrated way. The workforce will be multi-skilled to work across traditional, but sometimes artificial, professional boundaries and also joint locality management teams.

3.2.2 Manage Well

Early Intervention

Early Help

Early help is currently provided to reduce the need for statutory interventions for emotional and physical wellbeing whenever it is possible and safe to do so.

Children, young people and their families must be offered help when needs and/or concerns are first identified. Where special needs and disabilities are identified, early help is based on the following principles:

- Early identification and intervention
- Effective integrated support for children with complex needs
- Children, young people and their families are listened to
- Agencies work together with shared responsibility
- Safe-guarding and welfare of the child/young person is paramount
- Helping families to help themselves

If housing, family or other domestic circumstance is thought to be contributing to educational need, agencies will work together to provide support.

A local guidance document sets out Croydon’s Partnership approach to Early Help for everyone who works with children, young people, their families and carers in Croydon. It is about ways of working together, sharing information and making sure that children and families are always the main focus and concern when providing effective support to them. The focus is to help children and their families become stronger and more resilient, so that they can identify what is difficult and find solutions before the problems become so complex that specialist statutory social work help is required.

The Family Nurse Partnership

The Family Nurse Partnership is a maternal and early years public health programme using a psycho-educational approach. It provides on-going, intensive support to young, first-time mothers and their babies (and fathers/ other family members, if mothers want them to take part) and is offered to first time parents aged 19 years or under. Structured home visits, delivered by highly trained nurses, start in early pregnancy and continue until the children’s second birthdays. The delivery of the Healthy Child Programme is encompassed within the Family Nurse role.

The programme is preventative and has the potential to transform the life chances of the most disadvantaged children and families in Croydon, helping to improve their
social mobility and break the cycle of intergenerational disadvantage. Health in pregnancy, and the quality of the caregiving babies receive during the first years of life, can have a long lasting impact on a child’s future health, happiness, relationships and achievement of their aspirations.

**Targeted Support in Schools and Colleges**

A schools based counselling service, using evidence-based interventions, is offered to schools and local community sites and staffing capacity has been increased to support and develop additional schools-based counselling through enhanced CAMHS LTP funding.

In addition, Kooth has been commissioned to deliver online counselling across schools in SW London as part of the Mental Health in Schools trailblazer offer.

Section 9 details mental health support available in schools and colleges.

**Primary Care Networks**

As previously described, in Section 3.2.1 (Staying Well - Mental Health Promotion and Prevention), there is an aspiration to deliver locality- based health services for children and young people which will include mental health services.

**Community Based Emotional Wellbeing and Mental Health Services**

**Open Access Counselling**

Two organisations are the principal source of counselling support, using evidence-based interventions, for young people in Croydon. Across the two organisations, support is available to young people aged 10-25. Both services see young people from anywhere in the borough, and offer a range of evidence-based modalities of interventions which fall within the remit of CYP IAPT.

The current service offers are as follows:

- Croydon Drop-In (CDI):
  - Immediate drop-in assessment and counselling support from bases in the centre and north of Croydon for young people aged between 10-18 years (although younger children may be seen if necessary)

- Off the Record:
  - CYP IAPT open-access humanistic counselling services for 14 – 25 year olds (initial sessions are largely offered through open-access weekly walk-in sessions)
  - A Specialist Compass counselling and psycho-educational work service open to young people who are refugees, asylum-seekers and migrants aged from 11 years. Counselling is offered, through interpreters where necessary, by a small team of specialist therapists
  - BAME mental health outreach counselling (including support for those impacted by serious youth violence)
- Multi-disciplinary support (including assessments and mental health interventions) for young people aged 7 – 25 years with care responsibilities at home

Schools also offer various types of in-house support for pupils who have emotional or mental health needs. It is not possible to completely map these due to schools’ varied levels of engagement with the Local Authority, but known provision includes:

  o Nurture groups, either formal or informal
  o Counselling – either bought in or in-house, with various levels of expertise or availability
  o Commissioned support from CAMHS or other agencies

**Digital Counselling**

Off the Record offers online, real-time or message-based counselling delivered through a dedicated secure online counselling site using trained online counsellors. Groups being targeted to access on-line support are:

  o Children and young people with emotional wellbeing and/or emerging mental health problems - many of whom require a low level/targeted/short-term intervention
  o CYP who are hard to reach and do not engage with services through traditional routes

The digital platform is available on any web-enabled, internet connected device (including laptop, smart phone, tablet) 24/7, 365 days a year. It includes features such as messaging the team, static forums and magazine articles.

**Mental Health Support Teams in Schools and Colleges**

Mental Health Support Teams have started to provide evidence-based interventions in schools and colleges for children and young people with mild to moderate mental health difficulties through targeted support in Croydon. An online counselling service (Kooth) has also been successfully commissioned and a self-help service as part of the Thrive model.

The Mental Health Support Teams have been delivering staff workshops to support the implementation of the whole school approach in Croydon. The “empowering parents empowering community” (EPEC) peer parenting programme aims to develop parental resilience and hub staff have been identified who will be trained to train parents as parent group leaders. These parent group leaders will recruit and deliver EPEC parenting as part of a core trailblazer offer for schools.

In addition, the Mental Health Support Teams have been delivering evidence based parenting groups in primary schools to support parents with mild to moderate mental health conditions such as anxiety, conduct disorders and social communication difficulties.

Section 9 further details mental health support available in schools and colleges.
Learning Disability, Autism or Both and Complex Behaviour

Early intervention support is available for Children and Young People with Learning Disabilities and/or Neurodevelopmental Disorder.

Mental Health Support for Children Looked After

A team is being developed to offer mental health support to children looked after. The service will commence on 1st April 2020.

Parent Infant Partnership (PIP) Service

Croydon Drop in offers a Croydon Best Start PIP service for parents-to-be and parents of babies up to 24 months working in the home and in a variety of community settings, such as Locality Hubs, Children Centres, Croydon Special Care Baby Unit and voluntary sector settings. The service aims to provide help for families to strengthen parent-infant bonds and build positive relationships.

3.2.3 Greatest Need

Community Based Services

Croydon Children and Adolescent Mental Health Service (Croydon CAMHS)

A CAMHS specialist service for children and young people up to the age of 18 years, in Croydon who present with significant mental health difficulties is currently provided by South London and the Maudsley NHS Foundation Trust (SLaM). Referrals are accepted from primary, secondary and tertiary child health or mental health services, education, voluntary agencies, the Youth Offending Team and social care professionals. Referrals are made with the referees' knowledge and agreement.

The child or young person will typically exhibit persistent and significant disturbance of functioning where there is a likelihood of one of the following:

- Psychotic illness
- Affective disorder
- Anxiety disorder or phobia
- Obsessive Compulsive Disorder (OCD)
- Developmental disorders (childhood Autism, Asperger's Syndrome)
- Attention Deficit Hyperactivity Disorder (ADHD)
- Post-traumatic Stress Disorder or traumas related to child protection issues
- Severe behavioural disturbance with underlying treatable condition
- Eating disorders
- Deliberate self-harm

Referrals are also accepted where it is thought that family functioning severely impairs the social and emotional development of the child.
The children and young people are assessed and those with moderate to severe, acute or enduring mental disorder are treated using evidence-based practices in clinics and/or other community settings. Interventions may be individual, family or group therapies, and may include:

- Cognitive Behaviour Therapy
- Interpersonal Therapy
- Brief Solution Focussed Therapy
- Assertive Outreach
- Behavioural Therapy/Modification
- Creative Therapies
- Medication
- Play & Art Therapy
- Psycho-education, including carers
- Individual Psychodynamic Psychotherapy to adolescents and their families
- Substance Abuse Counselling
- Family Therapy

Recent service improvements include:

- Activity expectations being scrutinised at the individual clinician level and it is anticipated that the current trajectory of improvement will be maintained through robust collaborative work and the Local Transformation Plan process
- A range of activity to support improvement in DNAs
- Increasingly involving young people in development and change of the service. Work is being carried out with young people to have them sit on the CAMHS Executive Group
- Going at risk to recruit additional clinical staff in the expectation that a central team will be developed to respond promptly to peaks in service demand or vacancies
- A Schools Engagement and Delivery Service (SEaDS) – a CAMHS service provided in schools for those with mild to moderate mental health difficulties and problems that is that offers, consultation, direct work, training etc
- The further development of EPEC (Empowering Parents, Empowering Communities) for the teenage population

In addition, to help ensure posts in Croydon are attractive to applicants, the SLaM service has a number of recruitment and retention initiatives:

- Development posts for nurse prescribers
- Rotational posts
- Recruiting permanently to fixed term posts

CAMHS staff also continue to work with partners in education and social care to ensure that escalation and discharge planning are symbiotic and work in unison. This work links to the Ofsted Improvement Plan for Croydon Children’s Social Care. CAMHS staff will work locally with partners in Adult Mental Health and Social Care to ensure that young people in residential care transition either back to the community or to adult residential care in a timely and seamless manner.

**In-Patient and Day Treatment Services**

SLaM CAMHS specialist services are providing in-patient care for children and young people when required. The South London Partnership (a provider collaborative) has successfully delivered a new model of care for children and young people’s inpatient care providing additional local beds and more community-interventions which significantly reduced occupied bed days outside the borough. In April 2018 SLaM opened a new eight-bed adolescent PICU (Psychiatric Intensive Care Unit) for patients from across the partnership, increasing local capacity.

It is acknowledged that the latest research establishes and confirms that young people and children in crisis are often better served by integrated, holistic care in the community than by inpatient care. To that end, a key objective that runs throughout this Local Transformation Plan is to prevent escalation of need in young people such that they should require in-patient and other specialist and highly specialist services commissioned through NHS England. The aim is to ensure that by 2020/21, inpatient stays are appropriate, minimum length of stay and close to home. The number of avoidable admissions will continue to be reduced though a balanced approach to early intervention, ensuring that escalation pathways are vigorously scrutinised by a multi-disciplinary team to ensure that treatment plans are in the best interest of the child or young person.

The Child and Adolescent Eating Disorder Service provides an intensive day treatment service for children and young people with anorexia nervosa.

**Other Specialist Mental Health Services**

Other key specialist mental health services offered in Croydon are described in detail in following sections within this LTP:

- Section 5: Health and Justice
- Section 6: Eating Disorders
- Section 7: Urgent and Emergency Mental Health Care
- Section 8: Early Intervention in Psychosis
3.3 Special Considerations

3.3.1 Linking with Adult Mental Health Services

SLaM has a transitions protocol in place between adult and children/young people services and will implement a collaborative approach to improving transition going forwards.

Building on the recent Transition CQUIN, transition projects are underway to further support this work. SLaM CAMHS are taking part in a national NSHi Improving Healthcare transition collaborative, which will initially develop transition processes for two pathways in Lewisham CAMHS; Early Intervention in Psychosis and Learning Disability/Neurodevelopmental, prior to broadening the initiatives across pathways and boroughs. This quality improvement collaborative is a joint project, with both CAMHS and Adult Team members working together from the outset. Consideration is also being given to the development of a transition passport to support the young person through the process.

Support for parents and carers around the transition of their young person is also being further strengthened, with signposting to resources such as Young Minds.

3.3.2 Developing the 0-25 Children and Young People Pathway by 2023/24

The South West London Health and Care Partnership does not currently have a comprehensive service that covers children and young people aged 0-25 years. However, examples of good practice across SW London include transition workers in Croydon working with the Early Intervention in Psychosis team - with good processes in place generally to support transition from CAMHS to adult services.

To achieve the ambition, a South West London 0-25 Working Group will be set up, which will link to the adult community Transformation Steering Group and the children and young people Crisis Working Group given the patient flow between these services. The timelines will complement the work in each of these other areas, with flexibility to ensure services are not being organised or set up in isolation of each other.

Work will be undertaken, with children and young people and families, to extend current service models in South West London to create a comprehensive offer that reaches across mental health services for children, young people and adults and delivers an integrated approach across health, social care, health and justice, education and the voluntary sector.

0-25 Timeline

<table>
<thead>
<tr>
<th>2019/20</th>
<th>2020/21</th>
<th>2021/22</th>
<th>2022/23</th>
<th>2023/24</th>
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<tbody>
<tr>
<td><strong>Sep-Dec 2019:</strong></td>
<td>Apr-Sep 2020:</td>
<td>Apr-Dec 2021:</td>
<td>Mobilise 0-25 offer</td>
<td>Full implementation of 0-25 offer</td>
</tr>
<tr>
<td>• Review prevalence across SW London for under-5s</td>
<td>• Review pathway for children and young people with co-morbid</td>
<td>• Pilot models of delivery in chosen sites</td>
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</table>
2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24
---|---|---|---|---|---
• Map existing under-fives pathway and services | presentations (LD/Autism) | Jan-Mar 2022: | • Review pilots and prepare for wider mobilisation
• Baseline activity for 18-25s in line with national request | • Review existing pathway/transition arrangements for children and young people turning 18 | | |
• Align Local Transformation Plan funding to strengthen under-5s services | Oct-Dec 2020: | | |
Jan 2020: | | | |
• Establish 0-25 Working Group | Jan-Mar 2021: | | |
| | • Consult on preferred models for delivery | | |

For under-5s, the focus will be on existing CAMHS services operating alongside universal services (such as health visiting and children’s centres) and specialist services, such as perinatal mental health. A clear pathway for children with comorbid presentations, such as learning disabilities or autism, will be ensured. This will be an integrated approach across health, social care, education and the voluntary sector.

For 18-25 year olds a Croydon specific service model will need to be developed that meets local needs. Core principles will include co-production, needs-based care and developmentally appropriate care. There will be a focus on partnerships and joint working across CAMHS and adult services.

3.4 Improving Access and Waiting Times

3.4.1 Sustainable Increases in Access and Reductions in Waiting Times

Increased access and reduced waiting times is a key initiative that this LTP is delivering during 2019/20 – through additional investment towards achieving access and waiting time targets as set in the Five Year Forward View for Mental Health and The NHS Long Term Plan.

Regional transformation funding was received in December 2018, and more recently in October 2019, for activities to support sustainable improvements in access, outcomes and waiting times for CAMHS, Croydon Drop In and Off the Record. This is supporting a range of projects in Croydon including:
- Project Management Office capabilities and informatics systems to support development and monitoring of waiting lists
- A new Croydon Drop In database compliant with MHSDS requirements

Section 1.5.3 details access and waiting targets and activity. Although access to treatment activity did not achieve the baseline target in 2018/19 as it fell 486 short of the target of 2,833 target (i.e. a shortfall of approx. 17%), the main reasons for the shortfall have since been addressed:

- Staffing shortages – SLaM experienced difficulty with recruiting to additional neuro-developmental assessment specialist posts funded by NHSE during Quarter 3 2018/19. These posts have been successfully recruited to during Sept 2019
- Data recording and data cleansing was needed to make sure that all the contacts were being counted accurately by the three main local contracted providers delivering commissioned services. For example, SLaM has been working with their teams to ensure that correct access definitions are used, and that activity is accurately coded and reported on Trust systems (refer to Section 4.2.1)

However, Croydon CAMHS service is currently not meeting its access target and efforts continue to improve SLaM’s overall performance in this area, for example:

- Regular ongoing monitoring at a local and senior management level - service performance against targets is included in management reports produced by the Trust’s Performance and Contracts Department which are submitted to CAMHS Senior and Executive Directors on a monthly basis
- A list of those individuals requiring one or two contacts in the current financial year has been generated by the Trust Contracts and Performance Manager and circulated to Service Managers to take forward with their teams to facilitate appropriate targeting of relevant individuals
- Each service’s access performance is published on the CAMHS Trust reporting system and refreshed daily to reflect the current percentage, trajectory and actual numbers of contacts required to achieve the annual target
- A review of CAMHS referral documentation and processes is underway in order to standardise the approach across the community teams, ensure a consistent level of information is received from referrers and streamline the process for staff, young people, their parents / carers and professionals. It is envisaged that once the review recommendations have been implemented, the improvements to the process will impact positively on performance in relation to waiting times and access targets as the average length of time between referral and assessment will be reduced

The waiting time initiatives introduced to CAMHS to date have proved successful:
• The use of opt in letters is now regular practice in community services and has also helped to identify individuals who no longer meet the referral criteria, for example, those who have moved away to another CCG area

• Arrangements are in place to introduce Saturday clinics to the Croydon service, in an effort to significantly reduce the waiting times for the 52+ weeks cohort. Each clinic will be delivered by a multi-disciplinary staff team along with administrative support

• Monitoring of waiting times takes place on a weekly basis at huddle meetings attended by Service Managers, Directors and senior clinicians. Actions taken to improve performance since the previous week, and those planned for coming weeks are discussed along with a review of progress for each service. Any blocks or challenges to improving waiting times are highlighted and solutions proposed to take forward for review at the following weeks’ meeting

Additional activity has been reported for April to September 2019 and a subsequent uplift in the performance position for CCGs that commission services from SLaM and the voluntary sector.

3.4.2 Improvements in Productivity and Efficiency

As detailed in Section 1.7, Croydon is working collaboratively with the six South East London boroughs to improve efficiency of services through better partnerships, community based outreach, provision of care for children and young people close to their home and reduced waiting times.

In early 2020, commissioners and providers will attend a System Dynamic Modelling Tool workshop supported by the regional team. The aim is to use the Tool in a system-wide overview of local need and services, in order to improve service efficiency. This approach will present opportunities for support and shared learning, resulting in more efficient service planning and the delivery of better outcomes for children and young people.

3.5 2019/20 Action Plan

This LTP has four overarching priorities. Three were developed by Croydon’s Health and Wellbeing Board at a workshop in December 2018 and the fourth was confirmed and added at a HWBB meeting in early January 2019.

The following table details actions planned during 2019 and 2020 and the partners involved in each action.
<table>
<thead>
<tr>
<th><strong>Action</strong></th>
<th><strong>Specific</strong></th>
<th><strong>Measurable</strong></th>
<th><strong>Completion Date</strong></th>
<th><strong>Partners Involved</strong></th>
<th><strong>Agency Funded By</strong></th>
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<tr>
<td><strong>Priority 1: Pathways</strong>: navigating through the system with the right access at the right time in the right place</td>
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<tr>
<td>Map and improve pathways of care including transition points into Adult Mental Health Services.</td>
<td>• Implement the priority actions as developed by the Children and Young People Mental Health and Emotional Well Being Partnership Board.</td>
<td>• Programme of pathway reviews in progress. • Feedback from service users is used to evaluate changes.</td>
<td>Jan 2020. June 2020.</td>
<td>Children and Young People’s Mental Health and Emotional Wellbeing Partnership Board.</td>
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<td></td>
<td>Priority 2: Engagement with children, young people, their families, carers and communities</td>
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<tr>
<td>Engagement with children, young people, their families, carers and communities.</td>
<td>• Develop a plan for engagement and begin implementation building on Croydon wide initiative such as the Youth Congress. • Develop an easy read version of the Local Transformation Plan. • Art competition run with year 7 &amp; 8 school pupils to gain an understanding of their interpretation of the plan.</td>
<td>• Evidence that engagement is influencing plans. • Clearer understanding of emotional wellbeing and mental health and what this means to them. • Knowledge of local services available. • Artwork featured in Local Transformation Plan.</td>
<td>June 2019 and ongoing.</td>
<td>Children and Young People Mental Health and Emotional Wellbeing Partnership Board. SW London STP. Parents in Partnership.</td>
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<td></td>
<td>Priority 3: Working with and <strong>supporting schools and colleges</strong> to promote the emotional health and wellbeing of all their pupils.</td>
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<td>Co-produce and implement, with schools, a consistent offer of emotional wellbeing and mental health services.</td>
<td>• Address the gaps identified from the recent mapping exercise carried out to identify mental health and emotional wellbeing services.</td>
<td>• School cluster leads for wave 1 and 2 in place and overseeing staff training. • Mental Health First Aid training delivered in schools.</td>
<td>Sept 2019 and ongoing.</td>
<td>Children and Young People Mental Health and Emotional Wellbeing</td>
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<td>Action</td>
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<td></td>
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<td>• Empowering Parents, Empowering Communities (EPEC) training roll out.</td>
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<td>Partnership Board.</td>
<td>SW London STP.</td>
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<td></td>
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<td>• Mental Health Support Teams (MHSTs) in schools in mobilization phase.</td>
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<td>Priority 4: Strategic join up and wider work</td>
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<td>Maximize opportunities to improve population resilience and mental</td>
<td>• Strengthen opportunities to influence wider agendas.</td>
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<td>wellbeing with those empowered to influence services and the wider</td>
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<td>determinants such as housing, community cohesion, etc.</td>
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<td>• Strengthen the partnership boards and network meetings to ensure there</td>
<td>• Strengthen the partnership boards and network meetings to ensure there is effective working and collaboration between the Clinical Commissioning Group (CCG), Local Authority (LA) and providers.</td>
<td>Jan 2020.</td>
<td>Children and Young People Mental Health and Emotional Wellbeing Board Partnership Board.</td>
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<td>• Work with service providers to better record the number of children with Special Educational Needs and Disability (SEND) who have mental health and emotional wellbeing needs and how services are contributing to Education, Health and Care Plans (EHCPs) and improved outcomes for these children.</td>
<td>April 2020.</td>
<td>SW London Sustainable Transformation Partnership.</td>
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<td>• Set outcomes measure for emotional health and monitor</td>
<td>June 2020.</td>
<td>SE London Integrated Care System (ICS).</td>
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<td>Action</td>
<td>Specific</td>
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<td>Completion Date</td>
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<td></td>
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<td>progress toward improved outcomes as a result of the delivery of the Local Transformation Plan.</td>
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4 Data - Access and Outcomes

4.1 Key Data Areas Measured by NHS England

4.1.1 Submission of the NHS Digital Mental Health Services Data Set (MHSDS)

There is a system-wide recognition of the importance of all NHS -commissioned and jointly-commissioned services submissions of data to the NHS Digital Mental Health Services Data Set (MHSDS). Data submissions made by the commissioned services provide an insight into performance, what outcomes are actually being delivered and how the service continues to fit in with the overall mental health provision within Croydon. Data submissions also support the tracking of progress against national policy future targets as detailed in the following table.

<table>
<thead>
<tr>
<th>Five Year Forward View Mental Health ambition by 2020/21</th>
<th>Long Term Plan ambition by 2023/24</th>
</tr>
</thead>
<tbody>
<tr>
<td>• At least 70,000 additional children and young people each year will receive evidence based treatment</td>
<td>• 345,000 additional children and young people aged 0-25 to have access to support via NHS-funded mental health services or college based Mental Health Support</td>
</tr>
<tr>
<td>• Increase access to meet the needs of at least 35% of those with diagnosable mental health conditions</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Five Year Forward View Mental Health ambition by 2020/21</th>
<th>Long Term Plan ambition by 2023/24</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Achieve a target of 95% of children and young people with eating disorders accessing treatment within 1 week for urgent cases and 4 weeks for routine cases</td>
<td>• The 95% CHILDREN AND YOUNG PEOPLE eating disorder referral to treatment standards achieved in 2020/21 will be maintained</td>
</tr>
</tbody>
</table>

4.2 Monitoring and Using Data on Key Ambitions

4.2.1 Improving Data Quality, Access and Flow

SLaM has developed a number of quality improvement initiatives for CAMHS that are being prioritised in 2019/20. A SLaM Deputy Director has been nominated to lead on quality improvement areas in relation to service performance being prioritised in 2019/20 – with a particular focus on access, flow and data. Several of the initiatives have already been implemented with others scheduled in the coming months.

Regular South East London meetings with the borough’s key providers, South East London Sustainability Transformation Programme (STP) and commissioning leads are also helping to ensure good progress is made on the CAMHS access and waiting time target which also supports collaborative working. There has been a focus on ensuring data collection improvements continue to be made to capture the non-NHS contribution which is still causing some issues. In addition, as mentioned in Section 3.4.1 SLaM has been working with their teams to ensure correct access definitions are used, activity is accurately coded and reported on Trust systems. This exercise has resulted in additional activity being reported for April to September and
a subsequent uplift in the performance position for CCGs that commission services from SLaM and the voluntary sector. However, not all services are able to report activity data especially services delivered in schools.

In addition, a project has commenced to modify the SLaM electronic Patient Journey System (ePJS) to enable improved recording and reporting of CAMHS data. Once the new system is implemented, the monitoring of activity and outcomes will be enhanced and will enable Service Managers to obtain a real time detailed or summary overview of individual and / or team performance. The new system will include mandatory fields to ensure data entry capturing essential information, for example ethnicity and increase user capacity by removing the need for multiple entries of the same information for different purposes, as is currently the case.

4.2.2 Using Data

To facilitate the performance monitoring process the following steps are followed:

1. Providers submit monthly and quarterly data to the commissioner
2. Data is reviewed by the commissioner
3. A Task and Finish Group within the Local Authority and CCG reviews the data
4. Monthly and quarterly contract monitoring meetings are held with individual providers to discuss the activity and performance data submitted

Where queries arise, providers are asked to respond:

- To any discrepancies within the data
- With a mitigating exercise

Commissioners hold quarterly contract monitoring meetings with providers and raise questions on performance, and problem solve, putting plans of actions into place as required and monitoring progress.

In addition, regular South East London meetings with the borough’s key providers, the South East Sustainability Transformation Programme (STP), and commissioning leads, are helping to ensure good progress is made on the CAMHS access and waiting time target. However workforce challenges continue with difficulty in retaining band 6 and 7 staff, team leader roles and recruitment to deliver waiting list initiatives.

4.3 Local and Regional Data Reporting

4.3.1 Local Children and Young People’s Dashboards

A Children and Young People Mental Health Dashboard has recently been developed which is being used to compare data across the 4 CCGs commissioning services from SLaM. It has been agreed jointly to ensure performance in areas is accurately reported on, and the provider prepares a monthly report across the 4 commissioning CCG’s (one of which is Croydon CCG).
4.3.2 Enhancing Local Delivery

Work is on-going with South East London (SEL) partners to achieve the 5 year ambition of 35% access to mental health services annually, with the target for 2019/20 set at 34%. To do this SEL partners are working together to see how access can be improved and will be completing a demand and capacity exercise using the NHS System Dynamic Modelling Tool.

A South East London (SEL) CAMHS meeting now takes place every 2 months enabling a learning collaborative approach with commissioners, providers and the STP to share best practice within SEL and elsewhere.

Croydon CAMHS is making better use of data to:

- Understand any disparity and inequity of access, outcome and experience
- Provide targeted awareness raising and identification of the gap in provision for people with protected characteristics under the Equality Act 2010; with a focus on black, Asian and minority ethnic communities (BAME)
- Develop action plans to address the gap in services for people where there is evidence of unmet need
- Compile a Croydon directory of effective support for children and young people and their parents, carers with mental health needs

5 Health and Justice

There is full pathway within Croydon for children and young people in contact with Health and Justice Services which includes the following elements:

- Crisis care related to police custody
- Sexual assault referral centres (SARCs)
- Liaison and diversion (L&D) services
- Youth offending service (YOS)
- Forensic CAMHS
- Transitioning to and from Children and Young People’s Secure Estate – there are a number of establishments e.g. at Feltham and Cookham Wood for children and young people to be placed on welfare and youth justice grounds (with dedicated mental health support provided within the facilities)

5.1 Crisis Care Related to Police Custody

Urgent mental health assessments in police custody are undertaken by the on-call CAMHS Consultant within SLaM’s CAMHS Crisis Team or out of hours support.

The number of seriously mentally unwell children and young people being taken to police custody suites is very small and the L&D service also provides some support
for them there. It is important there is a pathway for these rare, but very vulnerable, children and young people as police custody suites are not suitable.

5.2 Croydon Child Sexual Assault (CSA) Referral Centres and Services

The CSA emotional support service, currently provided by the National Society for the Prevention of Cruelty to Children (NSPCC), is for all children and young people registered with a General Practitioner within the catchment areas of Croydon who meet the referral criteria. Referrals into the Early Emotional Support Service are usually made by the local Multi-Agency and Safeguarding Hub (MASH), Children’s Social Care Teams or the Police. Social workers also sometimes phone the team for advice to discuss cases. Due to an increase in awareness of the service with children’s social care teams, referrals in Croydon have increased.

The current pathway ensures all children and young people aged 0-18 years receive a holistic service following suspected or disclosed child sexual assault. The service is comprised of:

- Medical examination and sexual health screening
- Mental health assessment and brief intervention
- Onward referral to appropriate local counselling or therapy as required

Staff are located at the Croydon NSPCC Service Centre and services are provided at these offices or somewhere more convenient, and local, to the child/young person and parents/carers.

Appointments for paediatric assessments are organised at a time convenient to the child/young person and their family rather than in regular clinics. The Children’s Services Practitioners, who are trained in a NICE evidenced based / NSPCC therapeutic approach for this cohort of young people, carry out mental health and emotional wellbeing assessments and provide support. The early emotional support service model offers:

- Up to 6 sessions involving practical and emotional support, advice, case management and assessment
- An in-depth functional assessment of a young person's strengths, difficulties, and risk and resilience
- Onward referral to appropriate services where appropriate

The service links with the local Croydon Paediatric CSA Services - the Children’s Services Practitioner either attends the paediatric CSA assessment at Croydon University Hospital or arranges a speedy follow-up.

Croydon children and young people also have access to other sexual assault referral centres - for example the Haven SARC which provide 24/7 services and see approximately 2,000 children and young people per year, with 700 of these being under the age of 18.
Work continues to improve and strengthen referral pathways into Child Sexual Assault Paediatric Services. Referrals out of the Early Emotional Support service transfer to the ‘Letting the Future In’ or ‘Protect and Respect’ services. External referrals are also made to the relevant services such as CAMHS and specialist support services for survivors of sexual violence, domestic violence or Child Sexual Assault.

5.3 Liaison and Diversion (L&D) Services

The L&D pathway for Croydon includes the following:

- A Police custody suite in Croydon (L & D provided by SLaM)
- Croydon Magistrates Court (L & D provided by SLaM)
- Croydon Youth Offending Service (YOS)
- Forensic CAMHS service

A CAMHS L&D worker is co-located with YOS and the police custody suite and young people on the edge of offending are assessed in custody or at the YOS office at the first opportunity.

All children and young people in contact with the L&D service have a screening mental health and emotional wellbeing assessment. If a mental health need is identified the young person is referred on to CAMHS with their consent, for a full mental health assessment or network meeting (if more appropriate). The appointment will be documented on CAMHS and NHS England records.

5.4 Youth Offending Service (YOS)

The Croydon YOS is based in the Turnaround Centre - a purpose built venue that brings together a range of partner services to help ensure young people in Croydon can achieve their full potential.

The service works with young people in custody with identified mental health needs in close liaison with Croydon CAMHS. It is accessed on average by 600 young people a year with a range of complex needs. It also links with the young person’s resettlement plans on release from custody.

5.4.1 Emotional Wellbeing and Mental Health Assessments

All young people who present at the YOS are assessed using the Asset Plus assessment tool which covers emotional wellbeing and mental health. If a mental health need is identified the child or young person is referred to the YOS CAMHS Team.

The average age of young people using the YOS remains 15 to17 years with a small, but significant, number of 13 to 15 year olds having been involved in serious offending. 90% of the young people accessing this service are male and over the last 3 years there has been a 6% drop in females coming into contact with the service team. There is a disproportionate number of young people who are BME (71%) but
not as significant as nationally reported. Of note, BME have been 7% points over-represented in the Youth Justice System as compared to the background population.

The most prevalent offences in 2018/19 were the same as in 2017/18:

- Violence against the person (including robbery and possession of knives)
- Drugs offences
- Theft
- Motoring
- Public order offences

In terms of wellbeing, where a child is identified as having other complex needs they will be referred on e.g. to Single Point of Contact (SPOC) Multi-agency Safeguarding Hub (MASH), Early Help and Education and/or commissioned voluntary sector organisations (Off the Record and Croydon Drop In).

5.4.2 Recording Data from Youth Justice Services

The YOS service has an information system in place to record service data e.g. re-offending rates, first time entry into the Youth Justice System, and children and young people in contact with youth justice services.

A flag is put on to the system for cases who are also known to CAMHS and YOS intervention plans will include keeping CAMHS appointments, whilst the CAMHS Care Plans will acknowledge the children or young people are known to YOS and what is being worked on.

5.5 South London Community Forensic Children and Adolescent Mental Health Services (Community FCAMHS)

FCAMHS is a Specialist Forensic Community Child and Adolescent Mental Health Service for young people and their families to work with professionals in South London. It provides advice, consultation, assessment and some limited short-term interventions. The service can also provide training for local professionals and it is a multi-disciplinary service including Consultant Adolescent Forensic Psychiatrists and Psychologists.

In South London, FCAMHS is provided in partnership, through South London Mental Health Partnership (SLP), hosted by the South London and Maudsley NHS Foundation Trust (SLaM) on behalf of the three trusts also in the partnership i.e. Oxleas and South West London and St George’s NHS Trusts. The service aims to be accessible to community mental health teams as well as other services working with young people and their families (such as Youth Offending Service, Social Care etc.). The service has been accepting referrals since September 2018. Appendix 1 details an FCAMHS Information Leaflet.

Young people requiring the FCAMHS service will often have multiple and complex needs and be known to professionals from multiple agencies. The service also
provides consultation/assessments of complex young people for whom secure inpatient admission is being considered.

Input from FCAMHS depends on a number of factors and degree of need or risk, as well as what services are available locally. It is expected that the child or young person will be open to their local CAMHS specialist service which will co-ordinate care and provide risk management and emergency care planning.

5.6 SLaM Mental Health Services in Croydon for Those with Complex Needs

The SLaM Adolescent At-Risk & Forensic Service (AAFS) is a national and specialist, flexible and responsive service offering evidence-based assessment, consultation and treatment for young people who are engaged in, or present significant risk of offending behaviour. This can include, but is not limited to, serious violence, fire-setting and/or sexually harmful behaviour. Young people who present significant risk of harm to self are also seen, for example those exposed to harm through risk-taking behaviour or exploitation. Many clients will present with emerging personality and/or neurodevelopmental disorders.

The service often treats young people who have exhausted the resources of their local CAMHS and still need assistance. Referrals are accepted from within SLaM, Greater London Boroughs and Nationally.

5.7 Co-production with Young People in Contact with Youth Justice Services

A youth forum is run by Croydon Council’s Central Locality Team which gives young people a say in, and the opportunity to be involved in, planning activities and services. Membership and participation in this Youth Forum is open to young people using the Turnaround Centre to access the YOS.

6 Eating Disorders

6.1 Eating Disorder Provision in Croydon

Referrals to Croydon CAMHS for a possible eating disorder are immediately redirected to the Maudsley Centre for Child and Adolescent Eating Disorders Service (MCCAEDS).

This South London Partnership driven Child and Adolescent Eating Disorder Service provides community based eating disorder assessment, treatment and care for children and young people with severe physical and psychological problems relating to eating disorders. The service also provides intensive day treatment for children and young people with anorexia nervosa. It covers a population of approximately 1.8 million people (encompassing seven boroughs in South London including Croydon).

The MCCAES pathway is shown in the following figure.
6.2 CCGs Partnering in the Eating Disorder Cluster

In 2014, SLaM established a pilot study in South East London to facilitate rapid assessment and flexible tailored treatment for young adults in the early stages of their illness. The MCCAEDS has had a longstanding and highly successful arrangement in which seven CCGs have been partnered: Croydon, Bexley, Bromley, Greenwich, Lambeth, Lewisham and Southwark.

The impact of this community-based service was audited in 2015 and data showed 80% of children and young people receiving treatment were discharged having recovered from their eating disorder after an average of one year of treatment. More recently, the service received 144 new referrals during Q1 and Q2 of 2019/20, of which some 84% of cases were accepted into the service.

MCCAEDS is one of the most accessible child and adolescent eating disorders services in the country. Since February 2016, it has been open to self-referrals by young people and parents in addition to referrals by any professionals working with a young person (including non-medical professionals e.g. teachers, school nurses and social workers). Self-referrals can be made via a dedicated phone line, staffed by senior clinicians, open from 9am - 6pm or by making an online referral using the following link https://www.maudsleycentre-cyp-eatingdisorders.co.uk/. Parents or professionals worried that a young person may have an eating disorder can phone and receive guidance and support.

13 https://www.national.slam.nhs.uk/services/camhs/camhs-eatingdisorders/

6.3 Performance against the Eating Disorder Access and Waiting Time standards

Initial and ongoing assessments provide baseline information to ensure effective performance monitoring against national access and waiting time standards, which are regularly reported to the NHS England and CCG commissioners.

Future in Mind (2015) set out to establish access and waiting time standards for Eating Disorders and MCCAEDS has continued to work hard to deliver against its ambitious targets and plans for innovation. The service has shown considerable improvement in waiting times since the baseline was established in 2015.

In Q1 2016/17 performance against waiting time targets for urgent and routine referrals were 40% and 38% respectively. In Q1 and Q2 2018/19, performance against waiting time targets were at 100% for all seven boroughs for both urgent and routine referrals. For current performance across the seven boroughs, please see the two following tables (confirming Croydon was fully compliant with meeting targets).

Table 1. Access and Waiting Time Targets by CCG

Q1: 1 April to 30 June 2019

<table>
<thead>
<tr>
<th>Borough</th>
<th>All referrals</th>
<th>Urgent referrals (7 days)</th>
<th>Routine referrals (28 days)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Received</td>
<td>% accepted</td>
<td>Received</td>
</tr>
<tr>
<td>Croydon</td>
<td>7</td>
<td>57.14%</td>
<td>1</td>
</tr>
<tr>
<td>Bexley</td>
<td>6</td>
<td>66.66%</td>
<td>0</td>
</tr>
<tr>
<td>Bromley</td>
<td>12</td>
<td>75.00%</td>
<td>1</td>
</tr>
<tr>
<td>Greenwich</td>
<td>8</td>
<td>87.50%</td>
<td>1</td>
</tr>
<tr>
<td>Lambeth</td>
<td>15</td>
<td>86.66%</td>
<td>2</td>
</tr>
<tr>
<td>Lewisham</td>
<td>11</td>
<td>81.81%</td>
<td>1</td>
</tr>
<tr>
<td>Southwark</td>
<td>13</td>
<td>100%</td>
<td>0</td>
</tr>
<tr>
<td>Grand Total</td>
<td>72</td>
<td>81.9%</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>n=59</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 2. Access and Waiting Time Targets by CCG
**Q2 1 July to 30 September 2019**

<table>
<thead>
<tr>
<th>Borough</th>
<th>All referrals</th>
<th>Urgent referrals (7 days)</th>
<th>Routine referrals (28 days)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Received</td>
<td>% accepted</td>
<td>Received</td>
</tr>
<tr>
<td>Croydon</td>
<td>8</td>
<td>75%</td>
<td>0</td>
</tr>
<tr>
<td>Bexley</td>
<td>5</td>
<td>80%</td>
<td>0</td>
</tr>
<tr>
<td>Bromley</td>
<td>18</td>
<td>100%</td>
<td>1</td>
</tr>
<tr>
<td>Greenwich</td>
<td>11</td>
<td>91%</td>
<td>1</td>
</tr>
<tr>
<td>Lambeth</td>
<td>9</td>
<td>89%</td>
<td>0</td>
</tr>
<tr>
<td>Lewisham</td>
<td>9</td>
<td>56%</td>
<td>0</td>
</tr>
<tr>
<td>Southwark</td>
<td>12</td>
<td>92%</td>
<td>0</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>72</strong></td>
<td><strong>88%</strong></td>
<td><strong>2</strong></td>
</tr>
</tbody>
</table>

**Overall Summary For the MCCAEDS Service - for all 7 Boroughs**
The following table reports the total number of referrals for each referral type, % of these where the waiting time target was met, and the range of waiting time.

<table>
<thead>
<tr>
<th></th>
<th>2018/19</th>
<th>2019/20</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Q1</td>
<td>Q2</td>
</tr>
<tr>
<td></td>
<td>Apr-Jun</td>
<td>Jul-Sep</td>
</tr>
<tr>
<td><strong>Emergency &lt; 1 day</strong></td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>N % range</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Urgent &lt; 7 days</strong></td>
<td>6</td>
<td>12</td>
</tr>
<tr>
<td>N % range</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Routine &lt; 28 days</strong></td>
<td>57</td>
<td>45</td>
</tr>
</tbody>
</table>
### 6.4 How Additional Funding in 2019/20 is being Invested to Further Enhance and Develop Provision

The MCCAED service continues to work on creating a new website for young people, parents and professionals. Clinical staff have recently filmed video clips for the website resource pages which explain different interventions available to young people and their families when mainstay treatments require an additional approach tailored to meet the unique individual or family circumstances. Once licenses and permissions are finalised this helpful new resource will be launched - most likely towards the end of 2019.

NHS England funding has recently been granted to MCCAEDS to be the London Region pilot site for the National avoidant restrictive food intake disorder (ARFID) pilot project for adaptations to the CYP-ED pathway. MCCAED also now have funding via King’s College London to act as national trainer for this exciting initiative led by a World expert in the field.

In addition, the CAEDS service is working closely with colleagues across all three Mental Health Trusts, as part of the South London Partnership (SLP) and the following priorities are being considered when working with children and young people that are affected by an eating disorder:

- Reducing demand for inpatient beds
- Enabling young people to be supported closer to their home and community
- Greater integration of community and inpatient services
- Improving the consistency of eating disorder care across the three trusts in the partnership
- Enhancing the collective eating disorder service offer across the partnership

### 6.5 National Quality Improvement Programme

The SLAM Child and Adolescent Eating Disorders Service is a member of the Royal College of Psychiatrist’s Quality Improvement Network for Community Eating Disorder Services for Children, Young People and their Families (QNCC-ED).
7 Urgent and Emergency Mental Health Care

The urgent and emergency care offer for children and young people in crisis in Croydon is detailed in the following sections.

7.1 Croydon Crisis Provision

7.1.1 Crisis Team & Medic on Call System

Croydon has a dedicated, extended hours CAMHS Crisis Team that works in the A&E Department at Croydon University Hospital and provides seven day follow-up of service users in the community - more sessions are offered if required (for up to two months).

The Crisis Team is made up of specialist nurses and clinicians, with dedicated Consultant Psychiatry support, who provide assessment and management plans for children and young people in mental health crisis (aged up to 18 years) who present at Croydon University Hospital A&E Department. The service operates 9am-10pm Monday-Friday and 9am-5pm on Saturdays and works closely with A&E staff and with the local specialist CAMHS service to facilitate the safe discharge and community follow-up of young people seen in crisis, or to facilitate timely admission where this is needed.

A SLaM on-call doctor provides cover outside of the CAMHS Crisis Team’s hours of operation.

The combination of the extended hours Crisis Team and medic on call system in SLaM provides 24 hour CAMHS provision for crisis assessment in Croydon University Hospital A&E.

7.1.2 South London Partnership CAMHS Programme Crisis Services

During 2017, NHS England accepted the submission of the South London Mental Health and Community Partnership (SLP) for New Models of Care CAMHS Wave 2 programme and set up a partnership of South West London and St. George’s Mental Health NHS Trust, Oxleas NHS Foundation Trust, and South London and Maudsley NHS Foundation Trust (SLaM).

The operation of New Models of Care began on 1st October 2017, with the partnership taking responsibility for a £20m Tier 4 CAMHS commissioning budget and working closely with NHS England.

Key features of the SLP CAMHS Wave Two New Care Models Programme have been to strengthen community and preventative services and improve consistency and efficiency of inpatient capacity management. Initiatives have included:

- Enhanced and new Community Crisis Services: nurse-led and multi-disciplinary teams are established for each Trust covering their localities. The services intervene in community settings including referrals from Community Mental Health Teams, first response outside core working hours, and in A&E
departments, to provide assessment, initial interventions and support and aim to prevent A&E attendance and admissions, and de-escalate crisis situations

- Telephone crisis support
- Service development featuring co-design and co-production with service users and their families/carers. Crisis care services have been tailored drawing on insights from young people

Alongside local Community Teams (including the Croydon CAMHS Crisis Team as described previously), the following teams support crisis provision across the South London Partnership:

- Enhanced Treatment Team (ETS) - this operates 9am-5pm Mon-Fri and offers intensive interventions 5 days a week for ~12 weeks. It facilitates discharge from in patient units or provides intensive interventions to prevent admission where possible
- CAMHS Response Team - the CAMHS Response Team, set up in October 2017, operates 9am-10pm Mon-Fri and 9am-5pm Sat and Sun. It provides short-term, intensive interventions 7 days a week for ~2 weeks and also assists with A&E assessments (generally out of hours). The team can offer weekend visits to young people under the care of the ETS team if needed and dependant on capacity

7.1.3 Locally Agreed KPIs, Access and Waiting Time Ambitions and the Involvement of Children and Young People and their Families, Including Monitoring their Experience and Outcomes

The South London Partnership Crisis and Intensive Interventions Workstream has made progress in working across the Trusts to agree a common set of KPIs and Outcomes. Currently data is captured in different formats across the 12 boroughs which is a constraint to achieving a common data set. Initiatives in place to help with this include:

- SLaM CAMHS development of a consistent recording of crisis assessments and key data on the electronic patient journey system (EPJs)
- SLP Data Lake project to automate reports
- Developing standardised crisis proforma

7.2 Further Crisis Care Transformation

The South London Mental Health and Community Partnership (SLP) is leading on reviewing crisis support through its Crisis and Intensive Interventions Workstream across South London.

In addition, the South West London (SWL) Mental Health Programme has begun reviewing the provision of acute hospital CAMHS Emergency Care Services (CECS) alongside the South London Partnership Crisis and Intensive Interventions
Workstream which has provided funding to extend the CECS hours of operation. As part of the Long Term Plan delivery programme, the need for acute psychiatric liaison for SWL children and young people and enhancing provision as necessary will be identified.

7.2.1 Further Enhancing Community Crisis Care Provision – South London Partnership Future Plans from 2019

Further improvements will include:

- **Digital technology:**
  
  - Crisis support including secure messaging, online, text messaging: based on input from young people on their preferences for these channels

- **Training:**
  
  - Delivery of service user co-designed training to professionals to improve young people’s experience in Emergency Departments. The training programme for A&E/ all physical health care staff will include how to provide empathic care and avoid unwittingly reinforcing unhelpful behaviours. This project, planned for trial with King’s College Hospital, was proposed by young people during SLP CAMHS Service User Group meetings which covered all elements of the Crisis Pathway. Young people who had experienced negative experiences at A&E department suggested the best way to improve was to share their experience and how language, behaviour and environments made them feel when presenting at A&E. The programme will be developed by young people and co-delivered to include video, face-to-face training, simulation, online and paper resources and tips.

- **Enhancing capacity and skills of South London Partnership Trusts’ CAMHS Crisis Care teams to:**
  
  - Support young people back into education / employment
  
  - Reduce incidences of repeat self-harm. Crisis teams are to be equipped with DBT-based skills to help them manage these issues, and enable quicker access to evidence based interventions
  
  - Intensive outreach across SLP area to enable timely engagement with therapeutic work

- **Developing community partner capacity:**
  
  - Scoping the benefits of working with existing youth services such as clubs or activity centres as hubs from which support workers, mentors and peer advisors can provide telephone guidance in a crisis. Co-location of CAMHS teams in the community hubs, to see young people needing assessment or support from crisis services, avoiding A&E...
attendance and subsequent negative experience. The Community hub model would host a range of services at a local level and could incorporate ‘respite’ crisis facilities for when the young person (existing service users) cannot be effectively cared for at home and requires professional support in a different environment to reduce A&E attendances and potential admissions

- Crisis containment: specific, targeted resources for support within the community, such as mental health support cafés specifically designed for children with ASD and Minecraft Asperger clubs

- Improved inpatient pathways and processes - planned assessment packages for further development include:
  - A three-day admission package when young people present in crisis - additional work is needed to build and provide the best community package
  - A one-night admission package for a one-night stay for those engaged with crisis teams, to offer containment and respite at a challenging time for the young person and family. The crisis team will support intensively from the next day to facilitate discharge and prevent further admissions

- Consistent ward Standardised Operating Procedures (SOPs) for example there will be ‘Welcome meetings’ (including inpatient and community care teams as well as family / carers and any other appropriate professionals) for those admitted for treatment to identify the focus of the admission, the family's role and engagement with services, the family's expertise on what may help the young person through this crisis and clarifying the goals and steps needed towards being able to leave hospital

- Wider scope and developments also include further support and training for schools to help support speedier return and resumption of studies after a crisis

As part of the SWL SLP Crisis and Intensive Interventions workstream, the whole crisis pathway for south London children and young people is being reviewed with the aim to develop consistent and equitable access to services that provide an effective intervention to children and young people presenting in crisis or needing intensive intervention to manage or prevent further crisis presentations.

8 Early Intervention for Psychosis

An important element of local young people’s mental health services is Early Intervention in Psychosis (EIP) as evidence shows that early detection, diagnosis and treatment of psychosis improves lifetime health outcomes.
8.1 Full Age-Range Service, Including All Children and Young People Aged 14 Years or Over Experiencing a First Episode in Psychosis (EIP)

The following services provide early intervention in psychosis (EIP) within Croydon:

- Croydon CAMHS - for children and young people aged under 18 years
- Oasis (Outreach and Support in South London) - for young people aged 14 - 35 years experiencing psychological distress who are at risk of developing psychosis
- COAST - a community service for adults aged 18 to 65 years provided by SLaM and Off the Record

These services are described further in the following sections.

8.1.1 Croydon CAMHS

In line with the EIP National Access Standards, referrals for young people under 18 yrs referred to Croydon CAMHS with a possible first episode of psychosis (or where psychosis is subsequently suspected) are initially screened by clinicians to ensure that high risk cases are expedited as appropriate, i.e. a clinical decision is made based on the referral information and clinical need of the young person.

Following assessment, young people diagnosed with, or suspected of having, psychosis are allocated a care coordinator to meet with them to monitor adherence and side effects from any prescribed medication and their physical health (including advice around diet and lifestyle). The frequency of meetings is based on assessment of clinical need and in agreement with the young person and family.

With respect to their care plans, all young people and families / carers are offered a family intervention focusing on reducing stress vulnerability and reducing the impact of high expressed emotion in the family context. Young people are also offered individual therapy in the form of Cognitive Behavioural Therapy (CBT) for psychosis. The frequency and duration of treatment is agreed in collaboration with the young person and family and is dependent on clinical need and therapeutic progress.

Clinical staff within the psychosis treatment pathway work closely with the multidisciplinary team and inpatient services (if a young person is admitted into hospital) to ensure there is clear communication between professionals, services and continuity of care by the local CAMHS team post discharge. The team also liaise with social care and other agencies when appropriate, which is particularly important where young people cannot be discharged home but may require specialist residential or educational provision.

For young people aged 16 to 18 years, an EIP transition worker (who works across CAMHS and COAST) is allocated as the care coordinator to:

- Facilitate rapid and smooth assessments
• Ensure consistency of care and smooth transition to the over 18 EIP COAST service

• Ensure the delivery of NICE-recommended packages of care as required by the National Standards

This ultimately ensures that, as a service, Croydon CAMHS is compliant with the NICE guidelines for assessment and treatment of first episode psychosis and that best practice is also applied to other young people with psychosis.

There is currently an established Croydon CAMHS working party (comprised of a Consultant Psychiatrist, the CAMHS-COAST Transition Worker as well as clinicians who offer evidenced based interventions for psychosis), to formalise the CAMHS EIP pathway, as described above. This is in response to an audit of NICE guidance compliance which identified gaps in service provision. Following changes being made to improve the service for young people with psychosis, a re-audit will be undertaken to evidence an improving service provision.

8.1.2 OASIS

The OASIS Service is provided by SLaM. It offers specialist assessments and intervention for young people (14-35 years old) who are at risk of developing psychosis (prodromal phase of psychosis).

This service provision, in conjunction with the local EIP service, meets the EIP National Standards requirement and is contributing to national guidance for “at risk mental state” (ARMS). OASIS contributes to the EIP rapid access target as the team are co-located with local EIP teams, facilitating joint assessment within two weeks.

8.1.3 COAST

COAST provides care for people aged 18-65 years who live in Croydon, and help people when they first begin to develop the symptoms of mental illness. The service provides a prompt assessment, treatment and advice to help people to maintain their health and to prevent them reaching a crisis point.

The team includes a CAMHS transition worker, a role split between the CAMHS and EIP services that facilitates rapid and smooth assessments and transfers and ensures the delivery of NICE-recommended package of care as required by the National Standards.

8.2 Offer of NICE Recommended Treatment within 2 Weeks of Referral

The table below shows the provider performance across the four boroughs services by SLaM.
### SLaM Reported Referrals with Suspected First Episode Psychosis or at 'Risk Mental State'
Starting a NICE-Recommended Care Package within 2 Weeks of Referral (Q1 17/18 – Q2 19/20)

<table>
<thead>
<tr>
<th></th>
<th>Q1 17/18</th>
<th>Q2 17/18</th>
<th>Q3 17/18</th>
<th>Q4 17/18</th>
<th>Q1 18/19</th>
<th>Q2 18/19</th>
<th>Q3 18/19</th>
<th>Q4 18/19</th>
<th>Q1 19/20</th>
<th>Q2 19/20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of referrals to and within the Trust with suspected first episode psychosis or at 'risk mental state' that start a NICE-recommended package care package in the reporting period within 2 weeks of referral</td>
<td>9</td>
<td>17</td>
<td>17</td>
<td>10</td>
<td>11</td>
<td>22</td>
<td>18</td>
<td>23</td>
<td>17</td>
<td>6</td>
</tr>
<tr>
<td>Number of referrals to and within the Trust with suspected first episode psychosis or at 'risk mental state' that start a NICE-recommended care package</td>
<td>13</td>
<td>20</td>
<td>21</td>
<td>16</td>
<td>16</td>
<td>25</td>
<td>21</td>
<td>31</td>
<td>27</td>
<td>8</td>
</tr>
<tr>
<td>Actual %</td>
<td>69%</td>
<td>85%</td>
<td>81%</td>
<td>63%</td>
<td>69%</td>
<td>88%</td>
<td>86%</td>
<td>74%</td>
<td>63%</td>
<td>75%</td>
</tr>
<tr>
<td>Target %</td>
<td>50%</td>
<td>50%</td>
<td>50%</td>
<td>50%</td>
<td>55%</td>
<td>55%</td>
<td>55%</td>
<td>55%</td>
<td>56%</td>
<td>56%</td>
</tr>
</tbody>
</table>

### 8.3 Improving EIP Services
The SLaM EIP teams (including COAST and OASIS in Croydon) are conducting further work in monitoring the delivery of the eight NICE Quality Standards with the support of NHS England and London Health Partnership. In addition they are developing EIP interventions, particularly CBT for Psychosis and Behavioural Family Therapy (BFT), in line with National Standards for 2020/21.

### 9 Mental Health in Schools
Schools play a major role in supporting children and young people needing support with mental health and emotional wellbeing. Working with, and supporting, schools and colleges to promote the emotional health and wellbeing of all their pupils is one of the four priority areas of this Croydon LTP (refer to Section 1.3.2).
9.1 Transparency and Governance

The SWL Health and Care Partnership (HCP) Programme has well established governance arrangements in place with a focus on building relationships and partnership working with different parts of the system. The programme ensures connection with different strategic strands using the CAMHS partnership board as a delivery vehicle. A memorandum of understanding sets out ways of working and a collective commitment to the whole school approach – and has been signed by all providers, commissioners and school governors and trustees in all participating schools.

Recognised changes to be made in the governance arrangements at different levels will be worked through in 2020. The following diagram shows the relationship between the programme and the wider governance arrangements.

The South West London (SWL) Health and Care Partnership is developing integrated pathways to ensure a joined up approach to delivering evidence based early interventions in universal settings – for example, the Anna Freud Centre’s Mental Health Services and Schools Link Programme and a forum (the Wellbeing Forum) has been set up whereby schools and services come together in order to discuss and review mental health issues. The Forum meets termly with a flexible agenda set by members.
Joint Assessment of Need in the Education Setting - by Children and Young People Mental Health Services and School/College Leadership

The Healthy London Partnership Mental Health in Schools Project (agreed by the London Health Board in April 2018) undertook a mapping exercise of mental health in schools with the aim of supporting a survey of services for children in schools through the local authority, CCGs and Mental Health Trusts to support better understanding of the current provision across London. From this the expectation was to:

- Develop a Key Line of Enquiry for Local Transformation Plans within London, supported by NHS England
- Develop a self-assessment tool for CCGs to measure their progress in developing services through the Local Transformation Plan and their oversight through Health and Wellbeing Boards
- Develop an online toolkit, which will be a best practice guide for school leaders, governing bodies and commissioners in health and local authorities
- Investigate the availability of suitable apps for use by children and young people and whether these can be promoted to assist children and young people’s understanding of health issues
- Hold an event through the Greater London Authority to launch and publicise the toolkit

Responses were received from 27 out of 33 local authority areas (a return rate of 82%) and key findings were:

- There was evidence of a considerable range of activity to support emotional wellbeing and mental health within schools in the majority of areas
- The nature of activity varied considerably between boroughs. There were a wide range of initiatives, sometimes within the same geographical area
- There was variation in how much knowledge and awareness, of services provided and commissioned by schools, the CCG and Local Authority held
- Commissioning arrangements remained complex, particularly at the lower ranges of intervention
- Many initiatives were at early stages in their evaluation of effectiveness
- There was limited data about the numbers of children and young people who are accessing services currently through schools and colleges

Recommendations included:

- Clinical Commissioning Groups and Local Authorities should work together to understand the overall services available to children and young people at schools and colleges
• The self-assessment tool developed by Healthy London Partnership is available to assist with this. This process should be overseen through Health and Wellbeing Boards

• Clinical Commissioning Groups, Local Authorities (including colleagues from Public Health) School Forums should work together to clarify commissioning responsibilities for services to children and young people at schools and colleges

• Providers from NHS and Voluntary Sector Organisations should be engaged in this work. A commissioning tool has been developed by Healthy London Partnership to assist with this

• Commissioning Guidance for schools should be developed. This should include Guidance on how to evaluate services. A working group of Commissioners and school leads should be convened to draw up this Guidance

• As interventions are evaluated, information should be shared across London. The Mental Health in Schools online toolkit should be maintained and updated as a method of sharing information

This work has been further recognised by the Government in their Green Paper ‘Transforming Children and Young People’s Mental Health’ and Consultation Response. There are three key proposals:

• Incentivising schools/colleges to train a Designated Senior Lead for Mental Health

• Creating new Mental Health Support Teams to provide extra capacity for early intervention and on-going help

• Trialling a four week waiting time for access to specialist NHS children and young people’s mental health services

It is planned for these proposals to be established across 20-25% of England by 2023.

It is also important to note that Mental Health Support Teams are designed to provide additional capacity and support and to complement existing services, not to replace them.

9.3 Schools Based Support

9.3.1 Supporting Senior Mental Health Leads to Introduce, Develop and Support a Whole School/College Approach

In January 2019, the pilot of a system-wide Whole School Approach was mobilised in Croydon and it is delivering against a local action plan signed off by the local CAMHS Partnership Board.
• **Ethos and environment** - The schools have made progress to develop a mental health school environment, this has been underpinned by all pilot schools developing a mental health policy.

• **Curriculum and teaching** - The schools have improved emotional literacy in primary schools by using Emotional Literacy Support Assistants (ELSAs) in Croydon to improve social and emotional learning in primary schools.

• **Student Voice** - Students have given their feedback on the school action plans, schools have worked with CCG engagement leads to do this work. They have also been involved in the procurement of the online counselling and self-help service. Insight work with students has been completed that will inform the language to use to describe mental health and wellbeing. This insight work will be used to further develop campaigns and in any information developed for children and young people. The cluster schools in Croydon have agreed to participate in a research project to gain in-depth insights from children and young people working in partnership with the communication team and the organisation that did the original insight work.

• **Staff development and support** - All key pastoral staff in the pilot schools have been trained in mental health first aid. There is an intention to extend this offer to other teaching staff in schools. The schools have engaged their staff in identification of additional support which has resulted in schools delivering programmes such as yoga and mindfulness to support staff.

The capacity and capability of staff in education settings will be further developed in 2020/21 by providing opportunities for them to access national training for the senior mental health leads and local training opportunities focused on the inequalities of health they are trying to address.

Opportunities to develop a supervision framework that will not only support staff in education but everyone else who is delivering evidence based interventions in schools are being explored. This will ensure that in 2020/21 there is a coherent supervision framework for the programme.

**9.3.2 Trailblazer Programme**

The schools and colleges priority area of Croydon’s Local Transformation Plan was significantly strengthened in July 2019 when South West London was awarded £4.3m for their Trailblazer bid to set up Mental Health Support Teams (MHSTs) to improve mental health in schools. This was in addition to the existing £1.8m awarded in 2018. As a result, Croydon will receive approximately £850k benefit from the total of the South West London bids.

As part of the South West London Trailblazer award, Croydon was successful in bids for three MHST clusters:

• Inclusion

• Reducing serious youth violence
The award, announced in July 2019, means extra support for 18,000 students, their teachers and parents across 35 Croydon schools: primary, secondary, special education need schools and one of Croydon’s three further education colleges. Recruitment has been based on geographic and demographic profiles and targeted at those with greatest need so that the programmes can maximise a reduction in health inequalities.

**Targeting MHST Resources at the Areas of Greatest Need within the South West London STP**

Across the six boroughs in South West London (which Croydon is part of) there are approximately 222,000 children and young people in school. The boroughs have mixed demographics characterised by some areas of high affluence and some areas that have some of the poorest communities with high levels of index of multiple deprivation in some of the super output areas.

<table>
<thead>
<tr>
<th>borough</th>
<th>CYP school population</th>
<th>% CYP with Special Educational Needs 2018</th>
<th>16-17 CYP not in Education, Training or Employment (NEET) 2017</th>
<th>CYP accessing support for learning difficulties/disabilities (EHC)</th>
<th>School children from Black, Asian and Minority Ethnic (BAME) all schools percent</th>
<th>Neonatal intensive care system rate per 100,000</th>
<th>Reoffending rate % 2013</th>
<th>Looked after children 2018 rates per 10,000</th>
<th>Secondary Fixed term exclusions per 100 pupils 2016/17</th>
<th>Permanent Exclusion rate (all schools 16/17)</th>
<th>Children in need (all LINC as 31st March 2018 rate of episodes per 10,000)</th>
<th>Sources of Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Croydon</td>
<td>57,000</td>
<td>14.50%</td>
<td>7.9</td>
<td>2,663</td>
<td>43.8</td>
<td>589.2</td>
<td>54%</td>
<td>83</td>
<td>7.8</td>
<td>0.07</td>
<td>573.4</td>
<td>458.9 344.2 328.4 380.0 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>Merton</td>
<td>34,000</td>
<td>16.2</td>
<td>2.6</td>
<td>1,518</td>
<td>33.9</td>
<td>282.6</td>
<td>25%</td>
<td>33</td>
<td>7.8</td>
<td>0.06</td>
<td>456.9</td>
<td>456.9 344.2 328.4 380.0 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>Kingston</td>
<td>26,201</td>
<td>11.7</td>
<td>2.8</td>
<td>1,042</td>
<td>22.1</td>
<td>222.2</td>
<td>100%</td>
<td>33</td>
<td>3.2</td>
<td>0.06</td>
<td>344.2</td>
<td>344.2 328.4 380.0 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>Richmond</td>
<td>27,028</td>
<td>12.5</td>
<td>3.7</td>
<td>1,220</td>
<td>10.7</td>
<td>184.9</td>
<td>90%</td>
<td>23</td>
<td>7.2</td>
<td>0.05</td>
<td>328.4</td>
<td>328.4 380.0 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>Sutton</td>
<td>39,000</td>
<td>12.5</td>
<td>4.3</td>
<td>1,586</td>
<td>29.0</td>
<td>265.6</td>
<td>100%</td>
<td>45</td>
<td>4.4</td>
<td>0.05</td>
<td>380.0</td>
<td>380.0 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>Wandsworth</td>
<td>36,000</td>
<td>17.3</td>
<td>9.1</td>
<td>1,854</td>
<td>39.4</td>
<td>379.3</td>
<td>40%</td>
<td>49</td>
<td>5.2</td>
<td>0.09</td>
<td>387.2</td>
<td>387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2 387.2</td>
</tr>
<tr>
<td>London</td>
<td>38,000</td>
<td>14.4</td>
<td>5.8</td>
<td>53,975</td>
<td>40.9</td>
<td>262.5</td>
<td>16.7</td>
<td>49</td>
<td>7.5</td>
<td>0.09</td>
<td>319,919</td>
<td>319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919 319,919</td>
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<tr>
<td>England</td>
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<td></td>
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</tr>
</tbody>
</table>

**Table 1: Inequalities data for South West London**

These variations within boroughs and across boroughs result in inequalities in health including:

- High numbers of children and young people have special education needs and disability. The majority of these children have Education and Health Care Plans (EPHCP)
- The population of 16-17 year olds not In Education, Training or Employment (NEET) is above the England average in Croydon and Wandsworth
There are pockets of high crime and first-time entrants to the criminal justice system, in Croydon (586/100,000) and Wandsworth (379/100,000) both of which are higher than the London rate

There are high levels of children in need in some areas of South West London in particular Croydon (873/100,000) and Wandsworth (867/100,000)

There are high levels of risky behaviour (particularly in areas of high affluence which is linked to poor emotional resilience)

The South West London (SWL) Health and Care Partnership have been successful in attracting over £6m trailblazer funding. There are 3 trailblazer waves (2018/9; 2019/20 wave 1 and 2019/2 wave 2) delivering across 10 sites which are based in the wards that reflect these inequalities in health.

Current sites, which include 3 sites in Croydon, are either focused on building emotional resilience or addressing a particular inequality in health.

Croydon CAMHS’s Integration with Mental Health Support Teams

The local Croydon CAMHS Service will work in partnership with educational settings to provide services in schools and colleges.

The trailblazer programme in Croydon will create approximately three MHSTs and includes 16 new posts, including eight new roles of Emotional Wellbeing Practitioners (EWP) who will be supported by a one year university course, and clinical supervisors.
With a senior mental health practitioner as team leader, they will work with teachers, children and young people, and parents to develop whole school approaches to improving support for emotional wellbeing and mental health that will build emotional resilience, improve inclusion, and lead in turn to a reduction in issues such as bullying, youth-on-youth violence, and the need for referral on to specialist mental health services.

Eight schools volunteered to be early adopters. They joined a South West London forum and over the past eight months they have:

- Developed the role of Designated Senior Lead for Mental Health in each school, to support this long-term area of work
- Undertaken an audit of their policies and systems to understand their existing support for emotional wellbeing and mental health of their population – updated these policies
- Established a supportive network ready to provide peer-to-peer support, share ideas, and develop solutions to issues as they are identified throughout the two-year life cycle of the Trailblazer award

In addition, at least two staff from each school have completed Mental Health First Aid training.

The first four Emotional Wellbeing Practitioner trainees are in post. They commenced the university course in October. The second four Emotional Wellbeing Practitioners will commence their course in January 2020. Recruitment for all other trailblazer staff is underway.

Once trained, the MHST will offer consultation to teachers so that they get timely advice and support on management strategies that will ensure children and young people get the right support and stay in education.

It is anticipated that further opportunities will be available in the coming years to submit further bids to expand this programme into more Croydon schools and colleges. At this time, our vision is that all our children and young people will benefit, based on the formal evaluation of the initial Trailblazer locations.

The cluster school model will be expanded to include the provision in education settings by the Child and Wellbeing Practitioners where appropriate to bridge the gaps in those schools that currently don’t have access to mental health support teams.

Through work with the Links Programme there is a plan to build relationships between school staff and those in specialist CAMHS, social care early help and specialist teams and strategic education so that schools and colleges feel supported and the advice they receive is consistent and cohesive. The outcome of these discussions will feed into the cluster action plan for all the clusters in 2019/20 with some of the delivery being done in 2020/21.
Fidelity to National Prescribed Functions of MHST

The South West London Trailblazer Programme is based on the whole school approach and how MHST will support schools deliver their whole school approach action plans which are based on the school’s self-assessment of need.

This is in keeping with the national guidance on implementing mental health support teams. They work with teachers, parents/carers and children and young people to embed the whole school approach in education settings.

9.3.3 Other Initiatives

In addition to the MHST work described above, other initiatives are also underway across Croydon’s wider school and college population, including:

- Healthy schools programmes - providing training for schools and parents on emotional health and wellbeing, and developing mental health policies within schools
- Support Engagement and Delivery in Schools (SEaDS) programme - provides a mental health Link Worker in schools
- CUES ED programme - delivers lessons and activities to primary school children to build their emotional wellbeing and resilience
- Suicide prevention training - to raise awareness amongst professionals working with young people
- Croydon Drop-In (CDI) offers schools-based counselling for young people aged between 10-18 years
In addition, there are various private or voluntary organisations that support schools in their work around children’s mental health and emotional wellbeing. These include the Palace for Life Foundation, Mentivity, and the local Black and Minority Ethnic Forum.

10 Workforce

10.1 Current Staff Establishment

The Croydon’s Children and Young People’s (CYP) Emotional Wellbeing and Mental Health workforce, in place as of 31st March 2019, is detailed in the following table.

**Croydon Children and Young People’s Emotional Wellbeing and Mental Health Workforce**

<table>
<thead>
<tr>
<th>Croydon Workforce</th>
<th>Total number WTE</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCG commissioned CYPMHS workforce for all pathways</td>
<td>52.45</td>
<td>Includes face-to-face &amp; online For SLaM includes (admin of 6.7 WTE and assistant psychologists of 3.5 WTE). This does not include the CYP IAPT funded posts through CWP / RTT</td>
</tr>
<tr>
<td>CCG commissioned CYPMHS workforce vacancies for all pathways</td>
<td>11.7</td>
<td>SLaM includes 10.6 newly funded posts from Q4 2018 still recruiting to.</td>
</tr>
<tr>
<td>Any additional WTE CYPMHS information regarding Voluntary and Community Sector (VCS) and Local Authority (LA) provision</td>
<td>15.87</td>
<td>Includes young carer support, outreach SLaM: 4.2 WTE are included above as part of the workforce. Not all LA investment is linked with specific staff but rather funds specific interventions that can be delivered by a number of staff from within the core establishment.</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>68.32</strong></td>
<td></td>
</tr>
</tbody>
</table>

The number of WTE voluntary sector community clinical workforce providing counselling services is further broken down as follows.
Croydon Drop In = 4.25
Off the Record = 6.1

<table>
<thead>
<tr>
<th>Part-time paid Counsellors x 8</th>
<th>Counselling Manager x 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteer Counsellors x 11</td>
<td>Trainee counsellors x 16</td>
</tr>
<tr>
<td>Counselling Manager x 1</td>
<td>Paid counsellors x 8</td>
</tr>
</tbody>
</table>
| Clinical Supervisors x 4        | (Posts work across the 14-25 age range with 0.7 WTE funded through local authority and the rest funded equally between CCG (Children and Young People) & CCC (Adult).)

In addition, the estimated WTE staff providing mental health interventions in educational settings who are commissioned directly by schools is 4.04 WTEs.

10.2 Workforce Planning

Workforce planning within Croydon aligns to wider STP Workforce Planning. In this regard, the South West London STP is refreshing the multi-agency workforce plan that aligns with priorities under the Mental Health Five Year Forward View and Stepping Forward and progress is reported regularly.

The STP’s rationale for development of the CAMHs workforce is to:

- Continue expanding access to community mental health services, including the new Mental Health Support Teams in schools
- Deliver a comprehensive offer for 0-25 year olds across children and young people and adult mental health services
- Maintain the waiting times standards for eating disorders services
- Provide 24/7 coverage for mental health crisis care for children and young people that combines assessment, brief response and intensive home treatment functions by 2023/24
- Ensure that children and young people’s mental health plans will align to those for children and young people with learning disability, autism, special educational needs and health and justice

To increase access to NHS-funded community services across the system additional resources have recently been committed including the use of Child Wellbeing Practitioners. Across South West London there is a strong track record of delivery with Children and Wellbeing Practitioners (CWPs). The sector has CWPs from every cohort and has established funding for Band 5 posts across every borough with a CWP team. CWP teams are also working collaboratively with trailblazer teams to share learning and resources. Providers and CCGs apply in partnership for funding to create CWP training posts at band 4, which come with resource to provide supervision and support. These posts constitute a sub-service, equipped to see
young people who wouldn’t otherwise reach local thresholds for CAMHS; they are
distinct roles, and not assistants to existing therapists.

The following tables detail South West London Health and Care Partnerships
workforce areas of focus, planned actions and dependencies with other
programmes.

**South West London Workforce Action Plan**

<table>
<thead>
<tr>
<th>Area of Focus</th>
<th>Current Position</th>
<th>Planned Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating Disorders</td>
<td></td>
<td>Scoping exercise to be undertaken to determine staffing resources required for</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Eating Disorders</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scoping exercise to determine what training programmes need to be developed</td>
</tr>
<tr>
<td>Crisis Line</td>
<td></td>
<td>Undertake scoping exercise to determine staffing and training requirements for a</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24/7 crisis line</td>
</tr>
<tr>
<td>Development of Roles</td>
<td>A SLaM bid has</td>
<td>Assess possible expansion of the CAMHS Emergency Care and Assertive Outreach</td>
</tr>
<tr>
<td></td>
<td>been approved</td>
<td>Teams to provide 24/7 cover for a range of mental health problems and to keep</td>
</tr>
<tr>
<td></td>
<td>locally and</td>
<td>young people at home. Establish number of staff required to enable this</td>
</tr>
<tr>
<td></td>
<td>forwarded on to</td>
<td>expansion</td>
</tr>
<tr>
<td></td>
<td>HEE to deliver a</td>
<td></td>
</tr>
<tr>
<td></td>
<td>series of</td>
<td></td>
</tr>
<tr>
<td></td>
<td>training courses</td>
<td></td>
</tr>
<tr>
<td></td>
<td>to target Early</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Intervention and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prevention of</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
<td></td>
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<tr>
<td></td>
<td>Conditions for</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Children and</td>
<td></td>
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<tr>
<td></td>
<td>Young People in</td>
<td></td>
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<tr>
<td></td>
<td>Primary Care.</td>
<td></td>
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<tr>
<td></td>
<td>A ‘Minding the</td>
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<tr>
<td></td>
<td>Gaps’ training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>course will</td>
<td></td>
</tr>
<tr>
<td></td>
<td>target transitions between adults and children and young people</td>
<td></td>
</tr>
<tr>
<td>Mental Health in Schools Teams</td>
<td>MHSTs are mobilising in Croydon, with a Whole School Approach for a new MHST in Croydon.</td>
<td>Continued use of Child Well Being Practitioners, and further funding has been identified to increase these roles across SWL. Mobilisation of Wave 2 to begin in January 2020.</td>
</tr>
</tbody>
</table>

**Dependencies with Other Programmes**

<table>
<thead>
<tr>
<th>Programmed Involved</th>
<th>Subject Area</th>
<th>Responsibility for Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Mental Health</td>
<td>0-25 provision</td>
<td>Joint delivery</td>
</tr>
<tr>
<td>Emotional Wellbeing &amp; Resilience</td>
<td>Mental Health School Teams</td>
<td>Emotional Wellbeing &amp; Resilience Programme</td>
</tr>
</tbody>
</table>
Programmed Involved | Subject Area | Responsibility for Delivery
--- | --- | ---
Learning Disabilities | Children and young people with complex needs with a primary LD need | Learning Disabilities
Urgent and Emergency Care (UEC) | NHS 111 24/7 crisis provision | Children and Young People Programme

10.2.1 Workforce Modelling

As detailed in Section 1.7, in early 2020 commissioners and providers will attend a System Dynamic Modelling Tool workshop supported by the regional team. The aim is to use the Tool in a system-wide overview of local need and services, in order to improve service efficiency. This approach will present opportunities for support and shared learning, resulting in more efficient service planning and the delivery of better outcomes for children and young people.

The table below shows modelling already carried out for future workforce requirements to achieve full coverage of mental health support teams in schools and colleges in South West London.

<table>
<thead>
<tr>
<th>Workforce assumptions for MHST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Team make up</strong></td>
</tr>
<tr>
<td>Admin band 4</td>
</tr>
<tr>
<td>EMHP band 4/5</td>
</tr>
<tr>
<td>band 6</td>
</tr>
<tr>
<td>band 7</td>
</tr>
<tr>
<td>band 8a</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
<tr>
<td><strong>Admin</strong></td>
</tr>
<tr>
<td><strong>EMHP</strong></td>
</tr>
<tr>
<td><strong>band 6</strong></td>
</tr>
<tr>
<td><strong>band 7</strong></td>
</tr>
<tr>
<td><strong>band 8a</strong></td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>

10.2.2 Expanding and Training the Workforce

Regional Workforce Strategies and Plans

In the recent South West London STP response to the NHS Long Term Plan, future workforce needs have been identified in relation to the initiatives to expand the mental health workforce and to up skill staff in CYP IAPT therapies (as detailed in Section 2.6).

The Healthy London Partnership published a children and young people’s mental health workforce strategy in May 2019. South East London (SEL) will use this as a
template to develop a strategy with support from Health Education England and Healthy London Partnership. There will be a focus in SEL on what the South London partnership (SLP) can offer to support recruitment and retention.

More generally across SEL a system workforce plan is being developed to target the local population to grow SEL’s integrated community workforce, focusing on new roles, peer support workers, physicians’ assistants, social workers, OTs, nurses and MH practitioners. Training will promote flexibility to work across all ages where possible and to be able to support physical health needs.

**Croydon CAMHS Workforce Plans**

Croydon CAMHS (SLaM) is contributing to the national target for an additional 1700 therapists and supervisors by 2020/21, and for upskilling of staff in children and young people IAPT. Specific initiatives include recruiting Child Wellbeing Practitioners, and Educational Mental Health Practitioners and upskilling staff in post graduate CYP IAPT (Increasing Access to Psychological Therapies):

- **Child Wellbeing Practitioners (CWPs)** - CWP teams are well-established in Croydon. Band 5 CWP practitioners in place are able to take responsibility for a caseload of children and young people with mild to moderate conditions. The strategy aims to ensure that once trained, CWP practitioners will be offered posts as qualified practitioners in CAMHS. CWPs undertake certificate level training for 1 year, hosted by either University College London (UCL) or Kings College London (KCL).

- **Educational Mental Health Practitioners (EMHPs)** - Following successful bids, Mental Health Support Teams (MHSTs) are currently being recruited. Following successful completion of the Educational Mental Health Practitioner (EMHP) Diploma course at Kings College London, trainees will be offered posts as qualified practitioners, thus enhancing service access both in 2021 when they qualify, and for the future. As described in Section 9 each Mental Health Support Teams (MHSTs) will include 16 new posts - eight new roles of Emotional Wellbeing Practitioners supported by a one year university course and clinical supervisors. Recruitment has been based on geographic and demographic profiles and targeted at those with greatest need so that the programmes can maximise a reduction in health inequalities. The first four Emotional Wellbeing Practitioners commenced the university course in October 2019. The second four will commence their course in January 2020. Recruitment for all other trailblazer staff is underway.

- **Children and Young People’s Increasing Access to Psychological Therapies (CYP IAPT)** - Croydon CAMHS has introduced CYP IAPT. Staff are being trained to deliver evidence-based interventions by taking part in the children and young people IAPT workforce capability programme (with staff being released to attend training courses). The staff complete a 2 Year Postgraduate Diploma in CYP IAPT Therapy the following modalities: CBT, SFP (all delivered at KCL) IPT-A, ASD/LD, 0-5s (all delivered at UCL). Staff
have successfully completed various trainings and retention of their posts has then been prioritised. Having CYP IAPT trained staff has improved the frontline delivery of therapeutic support. ‘Recruit to Train’ posts are part of a Health Education England (HEE) initiative to fund new workforce capacity for delivering evidence-based interventions.

The number of Croydon CAMHS staff in post has increased by 25% (by 12.6 WTE – from 51.27 to 63.87) over the past year (from 30 September 2018 to 30 September 2019). Of note, there were 3 WTE locum staff filling vacancies as of September 2019. The significant increases in staffing since April 2019 has been due to new investment. The SLaM workforce plan includes:

- Actions needed to recruit and retain in all professions and training and development for staff
- Actions needed with respect to individual hard-to-recruit posts, for example consideration is being given to recruitment incentives for CAMHS community team leader posts.
- Recruitment milestones which are tracked
- Training and development for staff

All staff who engage with children and young people receive the necessary education and training to provide safe and effective clinical and emotional care, including training for mental health staff in increasing physical health skills and for physical health staff in responding to mental health need. Training includes how to support vulnerable children and young people, such as those with learning disabilities, as well as those who are looked after children. Relevant statutory and mandatory training as well as professional competencies are built into current educational provision and personal development.

The plan is managed and monitored through the Education, Development and Workforce Committee which meets every two months.

**Voluntary Sector Workforce**

During 2019 Croydon has expanded the range of Tier 2 services available, with specialist services delivering to BAME young people, refugee & asylum-seeking minors, outreach services, extended hours counselling, and a local digital platform and further expansion of the workforce is planned during 2019/20.

**10.2.3 Engagement with Key Organisations**

The South West London STP is engaging with schools and colleges and is on track to deliver Mental Health in Schools Teams. Two Mental Health Support Teams are being developed in schools. The local school digital counselling service has also been expanded.

To achieve a successful Trailblazer offer, the following will need to be achieved:
• Integration of working between health and social care ensuring the workforce plans are aligned and support the delivery of CAMHS local transformation plans

• Work with Health Education England (HEE) to train a new Emotional Wellbeing Practitioner workforce to deliver the evidence based practice as part of the Mental Health Support Teams

• Engagement with local providers to ensure development of a new competency framework for the senior staff that will form part of the Mental Health Support Teams - this will enable recruitment widely from health, education and social care professionals

• Work with local providers to agree a cohesive SWL supervision framework to ensure a consistent approach across all mental health support teams

• Work with education and social care to ensure all staff are trained in mental health first aid to improve understanding of mental health and wellbeing

• Work with parents and the voluntary sector to improve capacity and capability on parenting resilience training.

• As there is a recognition that there are different cultures in health and education, work will be carried out with school clusters and CAMHS Partnership Boards to commission organisational development work to ensure development of a shared language and a value system that is conducive to collaborating

• The relationship between MHST supervisors and cluster leads will need to be developed in a way that allows for joint accountability of the team between the employing authority and the cluster
Appendix 1: FCAMHS Information Leaflet

We will summarise a formal consultation and assessment in writing, and include the agreed plan with clear roles and responsibilities.

Referrals are accepted from:
- CAMHS Tier 3 and Tier 2 services
- Local Authorities (Children’s Social Care)
- Youth Offending Teams
- CAMHS Inpatient Facilities
- Youth Justice services
- Education

If the referral is not from a local CAMHS team, and the referral is accepted, we will provide the information to the young person’s local CAMHS team.

We facilitate a joint approach to the referral from relevant mental health providers including, when possible, joint assessment and working.

About FCAMHS
FCAMHS is an NHS England project that aims to provide forensic assessment and provision for young people across the country.

Here in South London, FCAMHS is provided by the South London Mental Health Partnership, which includes South London and Maudsley NHS Foundation Trust, Oxleas NHS Foundation Trust and South West London and St George’s NHS Foundation Trust.

Evaluation and feedback
We added written feedback as part of the NHS England evaluation of FCAMHS.

We also welcome verbal feedback from professionals and young people.

Where to find us
South London Forensic CAMHS
Michael Rutter Centre
Maudsley Hospital
De Crespigny Park
Denmark Hill
London
SE5 9AZ

Call: 020 3328 8853
Email: SouthLondonFCAMHS@slam.nhs.uk

Open: Monday to Friday 9am to 5pm

Consultations and assessments occur at agreed locations that are accessible to the local professional network and to young people and their families.

Ask us if you need this information in a different language or format.

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What is FCAMHS?
We are the Forensic Community Child and Adolescent Mental Health Service for South London.

Our multi-disciplinary team provides advice, consultation and training for staff and local health and social care professionals.

We also provide assessment and some short-term interventions for young people and their families.

Which young people do we support?
Our remit is to improve the outcomes of young people who present with high-risk mental health and forensic issues – such as being at risk of, or having a history of, offending, or being involved in the youth justice system.

The young people we work with often have multiple and complex needs and are known to professionals from multiple agencies.

Who can contact us and what do we offer?
You can contact us if you are a community mental health team or any other service that works with young people under 18 and their families – such as youth offending teams and social care. See back page for more information about how to refer to us.

Ask us if you have questions about a young person’s mental health or neuropsychiatric difficulties including, risk of or moderate learning disability and autism who present with high risk.

We also provide consultation and assessment of complex young people if secure inpatient admission is being considered.

Our input depends on several factors including the degree of need or risk and what local services are available.

If we provide assessment or treatment, we expect the young person to be open to their local Tier 3 CAMHS, and that local CAMHS would coordinate care and provide risk management and emergency care planning.

We provide:
- Telephone advice
- Consultation with local mental health teams and other services that work with young people and their families (such as YOT, social care)
- Expert guidance of local assessments and interventions
- In some cases, forensic assessments and time-limited interventions.

The mainstay of our service is consultation.

If we work directly with a young person or family, they will be a trained mental health professional with specialist forensic expertise, such as an adolescent forensic psychiatrist or psychologist.

What can you expect?
A member of FCAMHS will have a short initial discussion with you – either face-to-face or by phone. This discussion will either lead to:
- Agreement that local advice such as supporting or helping access to more appropriate services have met your goals.
- You being asked to complete a referral form for a formal consultation and/or assessment, and to forward background documents from involved agencies.

Consultation and assessment
We provide a consultation with the local professional network, and in some cases will guide local assessment or conduct a forensic assessment.

Assessment and consultation will be informed by the goals, expectations and hopes of the referral and the young person and their family.

We also consider the knowledge and expertise of local professionals, the relevant evidence base, local, regional and national resources, and attend to safety.

Our agreed plans aim to contribute to positive outcomes for the young person and their family.