From: Graham Gibbens, Cabinet Member for Adult Social Care and

Public Health

Andrew Ireland Corporate Director, Social Care, Health and

Wellbeing

To: Children's Social Care and Public Health Cabinet Committee

Subject: Kent Emotional Wellbeing Strategy for Children, Young People

and Young Adults.

Classification: Unrestricted

Date: 21st April 2015

## Summary

This paper provides an update on the Emotional Wellbeing Strategy for Children, Young People and Young Adults and ongoing work associated with the Delivery Plan.

Extensive consultation events took place during 2014 and in early 2015 to understand what a whole system approach to emotional wellbeing should look like. Work is now taking place to implement the associated Delivery Plan; short term actions have been identified and are in progress and longer term work on the pathway, service model and future commissioning plans has started.

Work is continuing with partners to look at how existing resources can be aligned to support this work. There will be a further period of consultation on the model and specification, after which time it is proposed that the procurement will commence in the autumn 2015.

#### Recommendation

Members of the Children's Social Care and Health Cabinet Committee are asked to note the contents of this report.

#### 1. Introduction and Background:

- 1.1. This paper follows the discussion at the Children's Social Care and Health Cabinet Committee in December 2014 regarding the development of the Emotional Wellbeing Strategy for 0-25 year olds.
- 1.2. Emotional wellbeing underpins a range of positive outcomes for children and young people and is a key multi-agency agenda. Nationally and locally, demand is rising for specialist mental health services: 3 children in every class have a diagnosable mental health condition (10%) and there is recognition of the need for a whole-system approach to promote wellbeing, identify need appropriately, and intervene earlier.

- 1.3. Over the last year a huge amount of work has taken place to review and refresh the approach in Kent. The strategy has now been consulted on widely with children, young people and families and a 12-week period of engagement with members of the public, practitioners and partners has taken place. This report summarises the:
  - Final version of the Strategic Framework
  - A multi-agency Delivery Plan
  - Next steps

### 2. Overview of Activity

- 2.1. Development of the Emotional Wellbeing Strategy and supporting Delivery Plan has been driven by a real desire to engage with and listen to the views of children, young people, families and professionals of all backgrounds. In total, around 650 contributions have been received since June 2014 via a range of online surveys, workshops, and engagement events. The amount of interest and quality of responses given by such a wide cross-section of the local population and workforce underline the importance of this agenda, both at a strategic level and in the everyday experience of families in Kent.
- 2.2. The aim of such extensive engagement was to piece together a variety of perspectives in order to understand how best to design a 'whole system' approach: one not only focussed on the quality of commissioned services (crucial though these are), but also on strengthening partnership working at every stage, improving the visibility and accessibility of support, and underlining the role of all partners to promote and protect emotional wellbeing.
- 2.3. In addition to engagement activity, the content of both the Strategy and Delivery Plan has been directed by the findings of a refreshed Emotional Wellbeing Needs Assessment, and from a range of national and local reviews and best practice guidelines.
- 2.4. Contractually KCC commissions and delivers a range of services in relation to emotional wellbeing and is responsible for 2 key contracts relating to emotional wellbeing - the Young Healthy Minds Service and the Children in Care element of the CAMHS contract. The NHS Clinical Commissioning Groups are responsible for commissioning Child and Adolescent Mental Health service.

# 3. Strategic Framework

- 3.1. The Strategy was developed following initial surveys and facilitated discussion groups with children, young people and families and from service providers.
- 3.2. The draft Strategy has been consulted on widely and a12-week period of engagement ran from 20<sup>th</sup> October 5<sup>th</sup> January through the following channels:
  - Online consultation survey, hosted on kent.gov.uk and CCG platforms, with links through the Live it Well website and KELSI. The survey was further promoted through the Schools e-Bulletin, GP bulletins, Members' bulletins, District Council and Voluntary and Community Sector (VCS) networks, Health Watch Kent and Kent Public Health Observatory.
  - Presentation of the draft Strategy and consultation discussions held at a
    wide range of strategic and local multi-agency forums, including Kent Health
    and Wellbeing Board, Health and Social Care Cabinet Committee, Clinical
    Commissioning Groups, Mental Health Action Group Chairs, local Health and
    Wellbeing Boards, patient involvement forums, and Children's Operational
    Groups.
- 3.3. In addition to the discussions held, a range of individuals and organisations responded to the consultation. Overall findings indicated:
  - 100% of respondents identified parents and carers as the primary group needing additional information and support around emotional wellbeing issues.
  - Schools were identified as the second key group needing additional information and support around responding to emotional wellbeing.
  - The structure of the strategy is around four themes; Early Help, Access, Whole Family Approaches, Recovery and Transition, however importantly the underpinning action to promote emotional wellbeing at every opportunity was unanimously welcomed.
- 3.4. Following consultation, a number of amendments have been made to the original Strategy to incorporate feedback received including the addition of content relating to children affected by Child Sexual Exploitation and to target health inequalities. A final version of the Strategy is provided for approval in Appendix 1 of this paper.

## 4. Development and Engagement Activity for The Delivery Plan

- 4.1. In addition to the online consultation, a number of engagement events were held during November and December 2014 to inform development of the supporting Delivery Plan. These included:
  - Practitioner workshops,
  - Further engagement with young people, including the development of a second film sharing young people's views about the most valuable methods of delivering support.
    - A second Emotional Wellbeing Summit (18 December 2014). A number of KCC members attended the summit events.
- 4.2. The draft Delivery Plan summarises findings from the Kent Emotional Wellbeing Needs Assessment, engagement activity, and best practice reviews and outlines a series of recommended actions that together will lay the foundation for a whole-system approach to emotional wellbeing.
- 4.3. The key themes of the delivery plan include
  - Promoting emotional wellbeing how to embed this in all the work that we do and a multi-agency communications strategy.
  - Workforce development programme training for staff particularly in universal settings.
  - Increased availability of consultation from specialist services.
  - A single point of access across emotional wellbeing and mental health services.
  - Enabling children and young people timely access to support; drop-ins or safe spaces in schools.
  - A 'whole family' protocol, defining how parents and carers will be involved and identifying and responding to the wider needs of the family within assessments of the child's emotional wellbeing.
  - Effective implementation of multi-agency tools and protocols to identify children and young people who have been affected by Child Sexual Exploitation (CSE), and rapid access to specialist post-abuse support.

- 4.4. The recommended actions will be achieved through a combination of improved partnership working, particularly in relation to much more and more effective communication, training for universal staff, and also access to consultation with specialist professionals, as well as key procurement activity.
- 4.5. This means that some of the actions can be implemented in the short-term, beginning from March 2015, while others will need to be included within procurement exercises for new services beginning in October 2016 (when existing contracts with providers will expire). Suggested timescales are included within the Delivery Plan, alongside recommended lead agencies.
- 4.6. This is clearly a multi-agency action plan; founded on the vision agreed by partners at the Emotional Wellbeing Summit in July 2014 that emotional wellbeing is 'everybody's business'. The recommended actions will therefore only be achievable with involvement and commitment from a wider range of partners than before for example, in supporting relevant workforce development or embedding it within planned programmes of training.
- 4.7. Work is therefore continuing with partners to identify how existing resources can be realigned to support the 'whole system' approach, recognising that this is intrinsically connected to the success of specialist commissioned services in meeting need. The emotional wellbeing and mental health needs of children in care will be considered as part of this work. A technical group is being drawn together to lead on this element, led by the Clinical Commissioning Groups (CCGs).

### 5. Next steps:

- 5.1. During March July 2015, the following activity is planned:
  - Implementation of short-term actions identified in Delivery Plan
  - Refinement of draft emotional wellbeing pathway alongside emerging 0-25 hub proposals
  - Review existing contracts and re-develop the NHS Child and Adolescent Mental Health contract, including the Child in Care element of the contract and the Young Healthy Minds contract.
  - Formal consultation around the proposed service model to be undertaken (based upon the actions set within this plan and led by CCGs);
  - Market engagement to inform development and costing of the model;

- Technical group to complete resource allocation;
- Partnership development of service specifications for all of the services.
- 5.2. It is anticipated that formal procurement processes will begin in the autumn 2015, subject to approval of specifications.

### Recommendations

Members of the Children's Social Care and Health Cabinet Committee are asked to

(i) NOTE the contents of this report.

#### **Authors**

Karen Sharp Head of Public Health Commissioning Kent County Council

Dave Holman Head of Mental Health Programme NHS West Kent Clinical Commissioning Group

Thom Wilson
Head of Strategic Commissioning
Kent County Council