Draft Coventry and Warwickshire Children and Adolescents Metal Health Services (CAMHS) Local Transformation Plan 2023/2024

Publish date 31 October 2023

Contents

What is the Local Transformation Plan?
How we developed this plan
The Vision of Professionals and Children and Young People
Our Vision
Overarching Ethos of this plan...
Key Principles of this plan...
Whole System Working
What needs to improve?
What our priorities will be for 2023/2024
Coventry and Warwickshire – Our Area
Population Growth from 2011 - 2021
Child Population
Demographics and Characteristics
Children and Young People's Emotional and Mental Health Needs
Emotional and Mental Health Needs
Achievements to date
Improvements to the system
Coproduction and Participation – Rise & Trauma Vanguard
Coproduction and Participation - Other Services
Health Inequalities
Health Inequalities – What has been done so far
Health Inequalities – What has been done so far
Workforce
System overview
Early intervention / prevention – Low Level offer
Early intervention / prevention – Targeted offer
Early intervention / prevention – Targeted offer
Eating Disorders
Crisis
Crisis – NHS 111
Crisis helpline
Crisis – next steps
Access and Outcomes – CYP Access Rate
Access and Outcomes – Eating Disorders
Early Intervention in Psychosis
Health and Justice – Warwickshire
Health and Justice – Coventry
Learning Disabilities and Autism
Learning Disabilities and Autism
Finance
Current Governance
Next Steps...
Produced in Partnership with...

What is the Local Transformation Plan?

This document is Coventry and Warwickshire's Local Transformation Plan (LTP) for improving Children and Young People's Mental Health and Emotional Wellbeing.

It sets out how commissioners, providers and partners across Coventry and Warwickshire will work together to ensure that services across these areas will be developed and improved to meet children and young people's mental health and emotional well-being needs in a range of settings appropriate for them – school, community or hospital.

This plan provides information on mental health provision in Coventry and Warwickshire; the progress made over the last year, the governance arrangements, our ambition for 2023/24 onwards and potential future activities. In addition to this, it seeks to reinforce the system wide commitment to improving and transforming mental health and wellbeing services for children and young people.

How we developed this plan

Coventry and Warwickshire Partnership Event

- To help in developing this plan, a workshop was held with partners from a wide variety of organisations on Thursday 21st September.
- This workshop gave people an opportunity to discuss the current system, current issues that they felt were important regarding children and young people's mental health and emotional wellbeing and to look at what priorities should be taken forward for the next LTP in 23/24.

Consultation with Professionals, Children and Young People and their families

- In addition to the workshop a consultation exercise via a survey was undertaken which was utilised at the workshop and informs this plan.
- Questions were asked about the vision for the plan, what people felt worked in the current system and what they felt could be improved.

The Vision of Professionals and Children and Young People

Following an online survey consultation with 28 professionals and 14 children and young people across Coventry and Warwickshire, the word clouds below show the most common words included in respondents' vision for the future of the mental health system.

Common themes across both include support, better understanding, early intervention and a child centered approach.

Professionals

Children and Young People

Our Vision

"Coventry and Warwickshire's emotional wellbeing and mental health provision will help children and young people to live positive and fulfilling lives. This means listening and understanding what matters most to children and young people and then being responsive, compassionate, and empathetic to their needs. Our priority is to support children and young people to build their own strength and resilience in life, at the earliest opportunity."

Overarching Ethos of this plan...

Key Elements of this plan are:

- Importance of early intervention and prevention.
- Offering a range of support that is non-medicalised.
- Listening to children and young people to find out what matters most to them.
- Utilising a trauma informed approach.

Communities are central to supporting our young people. Weaving a trauma informed approach through all our work is essential. We recognise trauma is experienced and expressed in many ways. Our services need to be responsive at every level of support, using evidence to inform our offer.

The 2023/24 plan will seek to build on the work of the trauma vanguard programme to develop local level services to support children before they are at risk of crisis. The local trauma vanguard is a model of care which has been co-designed with young people. It is a non-medical model which recognises that behaviour is best understood in the context of trauma and connects young people to their communities. The model utilises youth practitioner workers who work with young people who are at risk of entering crisis or on the edge of care. Several enhanced offers are also available utilising a social prescribing model. The outcomes of the model are, amongst others, to reduce the number of children entering care, being excluded from school and being admitted to hospital in a crisis. We will also examine how to maximise the trauma informed approach across our full range of offer.

Key Principles of this plan...

Some other underpinning principles of this plan include:

- **Understanding of need** - ensuring that we fully understand the mental health and emotional wellbeing needs of children and young people in Coventry and Warwickshire.
- **Provision of choice** - children and young people can access advice and information about ways to support their emotional wellbeing and mental health through a variety of means including digitally, through their peers, the community and in educational settings.
- **Access to support** – be able to access the appropriate healthcare at the right time and in a timely manner, reducing the amount of time a child or young person must wait for this support.
- **Appropriate support** – ensuring provision is right for the child's needs and circumstances. For example, ensuring support is stepped up for a child's transition between children's and adult's services and that non-medicalised support is offered where needed.
- **Consistent levels of support** - aim to provide continuity of care, with no gaps in provision and the child or young person only needing to tell their story once in their journey through the system.

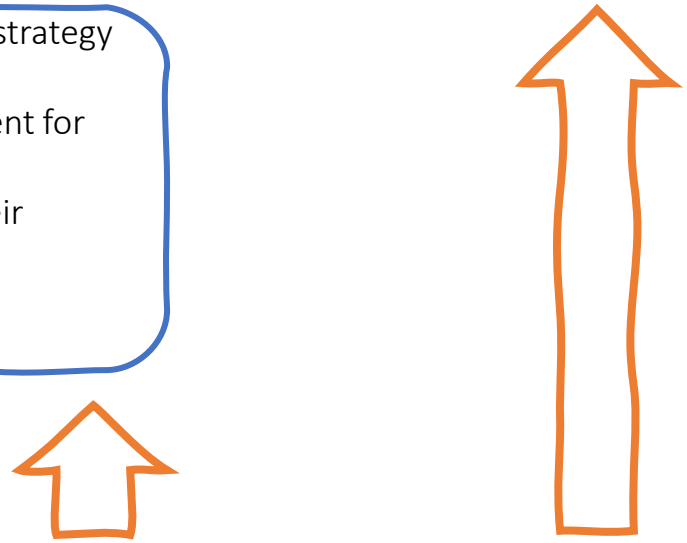
Whole System Working

Coventry and Warwickshire Integrated Health and Care Delivery Plan has set out aims it wants to achieve by 2028. The plan also sets out what it will focus on in the next two years, which are:

- Children and young people's mental health and emotional wellbeing.
- Mental health inequalities and public mental health.
- Suicide prevention.
- Community mental health transformation.

Coventry Health and Wellbeing Board strategy sets out the priorities of:

- People are healthier and independent for longer.
- Children and young people fulfil their potential.
- People live in connected, safe, and sustainable communities.



Warwickshire Health and Wellbeing Board strategy sets out the priorities of:

- Help children to have the best start in life.
- Help people's mental health.
- Reduce health inequality.

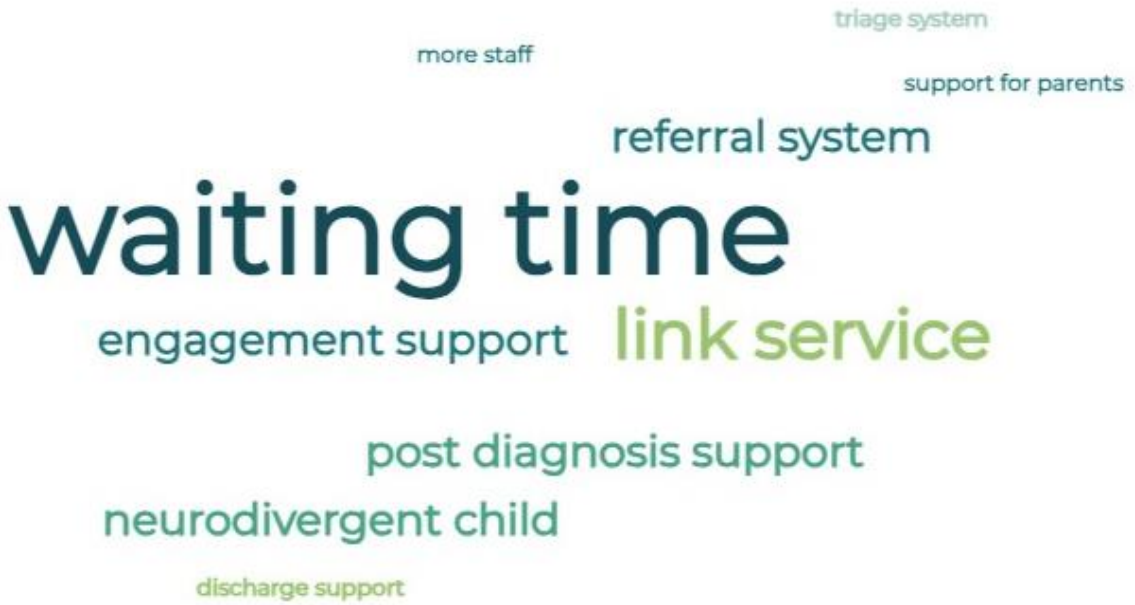
Priorities set out in this CAMHS Local Transformation Plan aligns to both Coventry and Warwickshire's Health and Wellbeing strategies.

What needs to improve?

We asked professionals and children and young people what improvements they believe are needed within the mental health system.

Waiting times appeared as a priority for both groups, as did post-discharge support, support for both children and young people and parents following a neurodiverse diagnosis and upskilling parents and carers to support their children who may have mental health needs.

Professionals



Children and Young People

What our priorities will be for 2023/2024

National Priority

Meet the constitutional targets set by NHS England: 35% access rate / Eating Disorder urgent and routine access rate.

National Priority

Develop an offer to support children and young people up to the age of 25. This to have a focus on the 18-25 offer and also building on the existing peer mentoring service for people transitioning from CAMHS.

Local Priority

Implement the i-Thrive Framework within the system.

Local Priority

Improve the waiting times in accessing mental health services, with a focus on non-medicalising support.

Local Priority

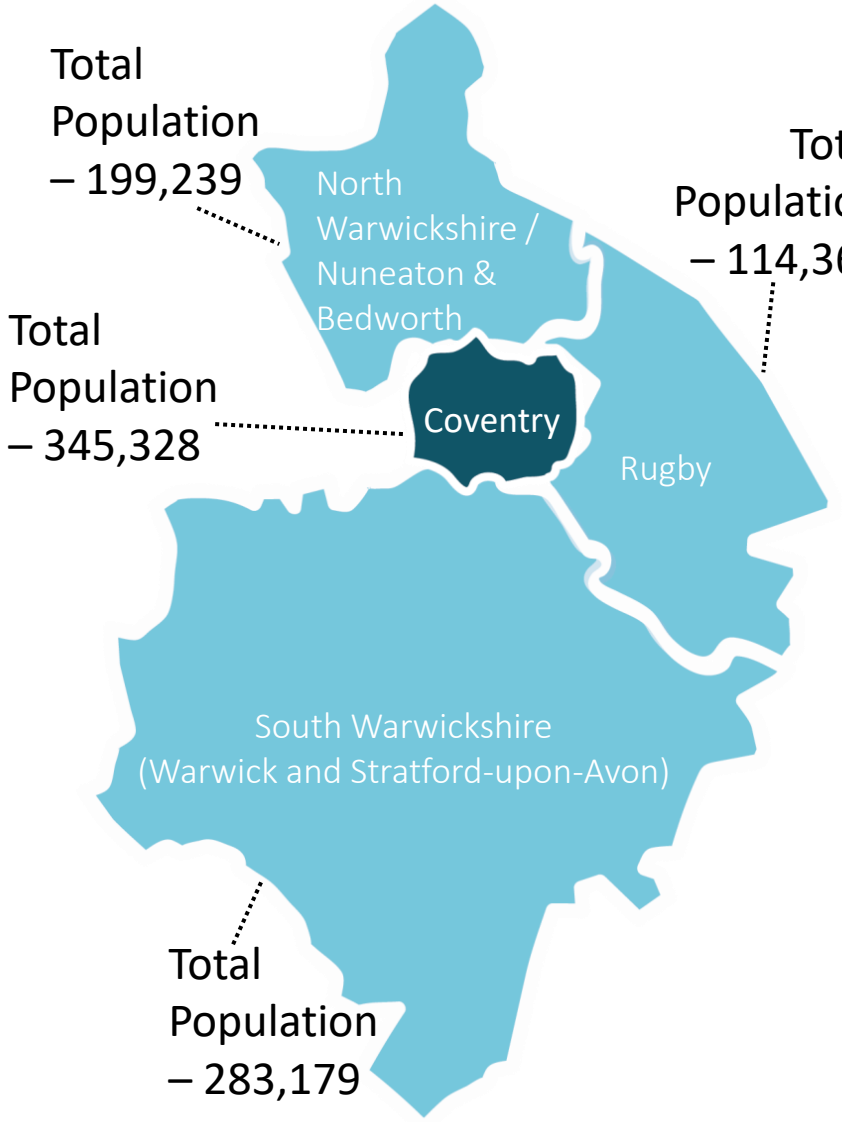
Develop a system wide data-dashboard to further understand local need and demand.

Local Priority

Focus on the early intervention & prevention offer, building on the work under the Positive Directions offer (Vanguard project).

Coventry and Warwickshire – Our Area

- The Coventry and Warwickshire Integrated Care System is made up of four places: Coventry, Rugby, North Warwickshire and South Warwickshire.
- The North Warwickshire area includes Nuneaton & Bedworth Borough.
- South Warwickshire is comprised of Warwick District and Stratford-upon-Avon District.
- This area has a total population of 942,112, with 195,892 being under 18 years old.



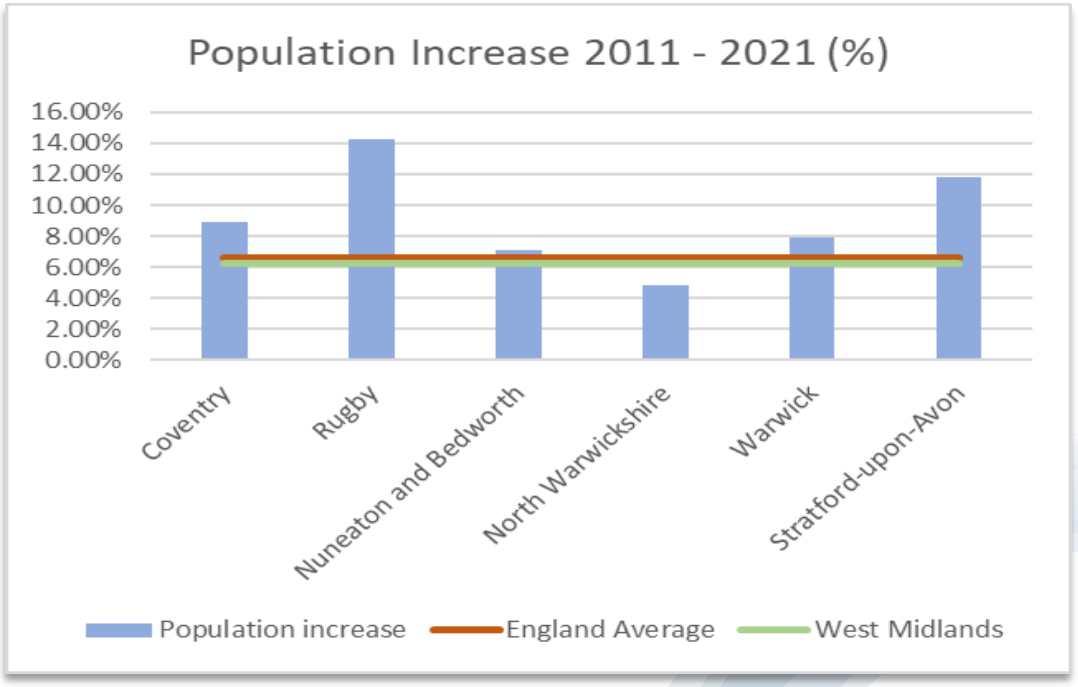
Area	Population Density out of 30 West Midlands Areas
Coventry	4th
Nuneaton and Bedworth	10th
Rugby	12th
Warwick	16th
North Warwickshire	24th
Stratford-upon-Avon	27th

Source: ONS Census 2021

Source: ONS Census 2021

Population Growth from 2011 - 2021

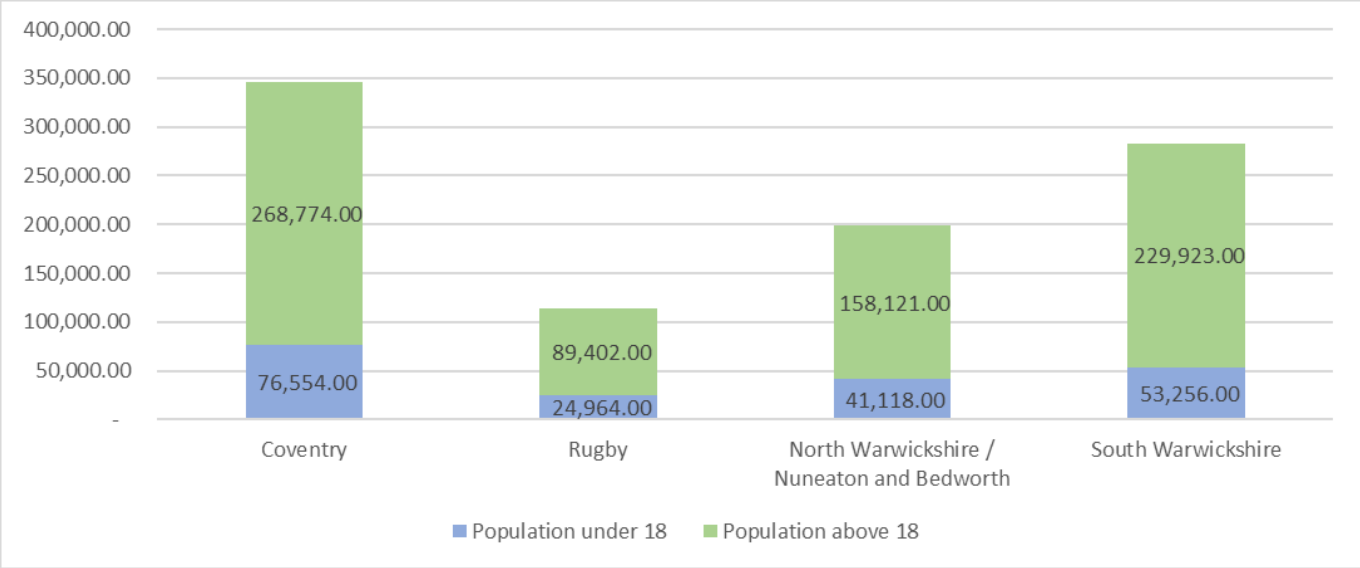
- The population across Coventry and Warwickshire has increased since 2011.
- Across the region, the highest level of growth has been in the 65 and over age group, except for Coventry where the highest level of growth was in the under 15 age group.
- The lowest rate of growth across the region was in the 15-64 age group.
- The only area to show a decrease in any category is North Warwickshire, where the population aged 15-64 decreased by 0.3%.
- North Warwickshire is also the only area to have growth below the England and West Midlands averages.



Age Group	Coventry	Rugby	North Warwickshire	Nuneaton & Bedworth	Warwick	Stratford-upon-Avon
Under 15	9.9%	14.6%	1.7%	8.2%	6.9%	8.5%
15 to 64	8.7%	12.9%	-0.3%	3.1%	4.6%	6.9%
65 and over	9.0%	19.4%	24.7%	22.8%	21.5%	27.5%

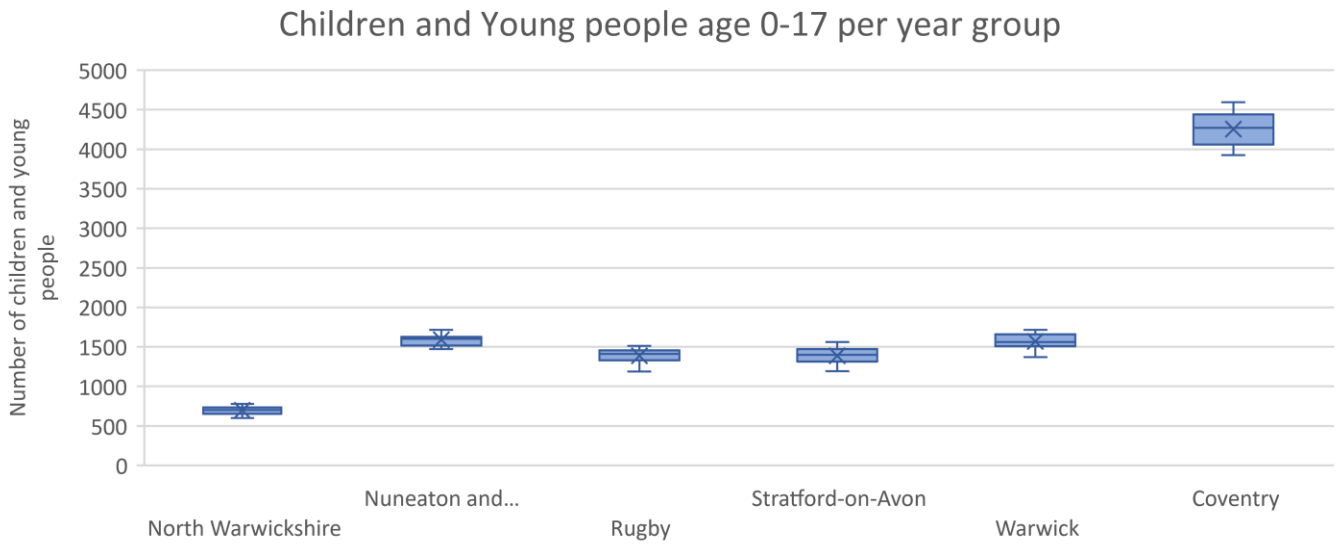
Source: ONS Census 2021

Child Population



On average, the proportion of under 18-year-olds in each area is 21% of the population.

The children of Coventry and Warwickshire make up 2% of the country's under 18 population.



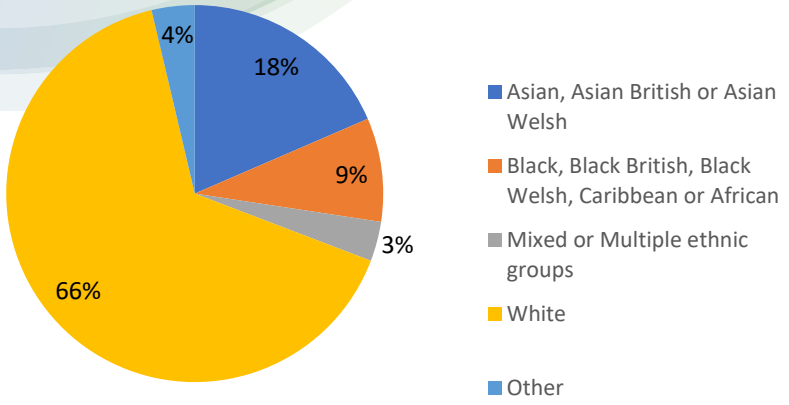
This graph shows the numbers of children and young people across age groups, with the solid box showing the average number of children per year of age and the lines showing the minimum and maximum numbers within a certain age group.

This shows a consistent spread across each year of age for each area, with the highest and lowest populated groups remaining close to the average and no visible outliers in terms of a high or low population age group outside of the average

Source: ONS Census 2021

Demographics and Characteristics

Coventry



With over a quarter (34%) of its residents coming from a minority ethnic group, Coventry has a greater level of diversity when compared to Warwickshire (22%).

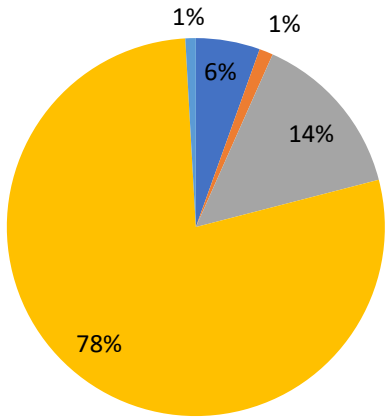
Coventry also has a higher level of deprivation than Warwickshire with over half (55%) of its households being deprived in at least one dimension in comparison to Warwickshire's rate of 47.4%.

Top 3 Main languages:
Coventry
1st English (274,880)
2nd Polish (7,719)
3rd Panjabi (7,498)

Warwickshire*
1st English (538,508)
2nd Polish (7,253)
3rd Romanian (5,638)

*Warwick's second main language is Panjabi (2,009)

Warwickshire



Household Deprivation across 4 dimensions: Employment, education, health and disability, and household overcrowding.

Area	Household not deprived in any dimension	Deprived in 1 dimension	Deprived in 2 dimensions	Deprived in 3 dimensions	Deprived in 4 dimensions
Coventry	45% (60,360)	34% (45,659)	16% (21,411)	4.6% (6,219)	0.4% (491)
Warwickshire	52.6% (133,179)	32.6% (82,569)	12% (30,302)	2.7% (6,844)	0.1% (370)

Children and Young People's Emotional and Mental Health Needs

During our consultation of professionals and children and young people, we asked them to identify what they believed to be the most common mental health need for children and young people.

Anxiety was the most prevalent need, followed by depression and neurodiversity (ASD / ADHD). School based issues also appeared in responses from both groups.

Professionals

Children and Young People

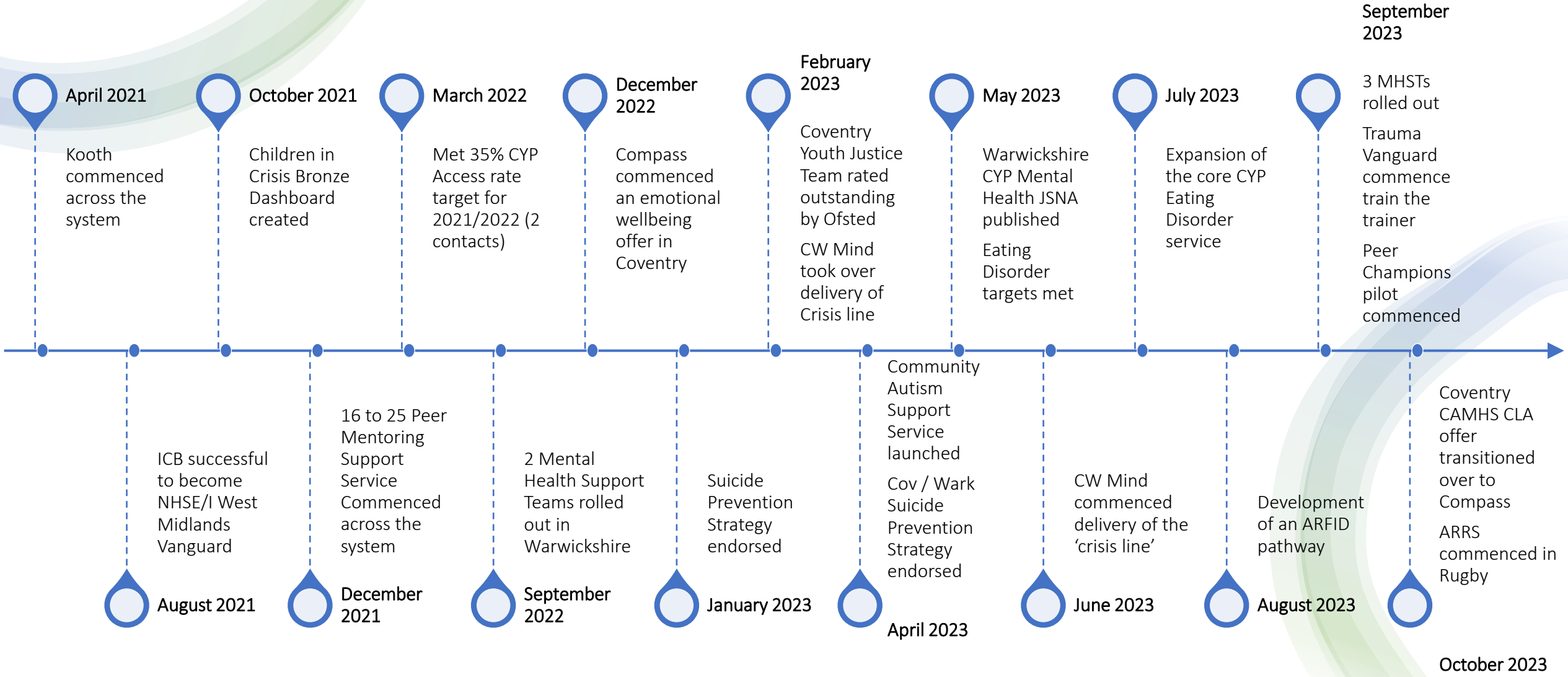
Source: Public Health Fingertips

Emotional and Mental Health Needs

As the table below shows, the current prevalence of emotional and mental health needs is widespread. The estimated number of children and young people with mental disorders (aged 5 to 17) is an average of 12% across Coventry and Warwickshire, and this increases drastically when looking at the needs of looked after children, especially in Coventry where this exceeds regional averages. While Coventry's number of hospital admissions as a result of self-harm (per 100,000) falls below the regional and national averages, Warwickshire exceeds both, as well as exceeding the average % of school pupils with social, emotional and mental health needs.

Indicator	Time Period	Coventry	Warwickshire	Regional	England
Estimated number of children and young people with mental disorders – aged 5 to 17	2017/18	6538	10,125	-	-
% of school pupils with social, emotional and mental health needs	2021/22	2.7%	3.4%	2.8%	3.0%
% of looked after children whose emotional wellbeing is a cause for concern	2021/22	35% (130 looked after children)	26% (52 looked after children)	34%	37%
Hospital admissions as a result of self-harm (10-24 years) - Per 100,000	2021/22	295.8 per 100,000 (225 admissions)	572.6 per 100,000 (575 admissions)	397.8 per 100,000	427.3 per 100,000
Hospital admissions as a result of self-harm (10-14 years) - Per 100,000	2021/22	271.8 per 100,000 (60 admissions)	589.7 per 100,000 (205 admissions)	354.4 per 100,000	307.1 per 100,000
Hospital admissions as a result of self-harm (15-19 years) - Per 100,000	2021/22	436.2 per 100,000 (105 admissions)	853.2 per 100,000 (275 admissions)	565.6 per 100,000	641.7 per 100,000
Hospital admissions as a result of self-harm (20-24 years) - Per 100,000	2021/22	177.7 per 100,000 (55 admissions)	295.0 per 100,000 (95 admissions)	283.9 per 100,000	340.9 per 100,000

Achievements to date



Improvements to the system

We asked professionals and children and young people what improvements they had seen in the mental health system since the publication of the last LTP refresh.

In both groups, there was a lack of knowledge of the recent improvements that have taken place, while some children and young people also felt that no improvements had been made in the system. Professionals felt there was a good breadth of services and communication between them had improved, and specifically noted the success of the Rise Youth Justice Service project. Children and young people did feel that awareness of mental health and openness to talk about issues had improved, and friendly staff in a wider variety of services were a success.

Professionals

Children and Young People

Coproduction and Participation – Rise & Trauma Vanguard

The **Rise** service utilises several ways to capture the views of children and young people to help shape their services. The **Young Ambassadors** scheme was launched earlier this year and aimed to enable users of the service to share their ideas via forums, consultations and being involved in the design of communications and social media content for the service.

The **Rise Young Voices** proof of concept project was set up to trial working with a voluntary sector organisation to work with children and young people in a variety of ways to engage them in the work of Rise. **Youth workers** have also been employed through the Mental Health Support Teams (MHST) model and utilised to capture views of pupils about mental health and their emotional wellbeing needs.

Children and young people told us "Don't label me bad, don't label me mad" as part of coproduction for the **Trauma Vanguard programme**. There was a clear message that these children wanted to be listened to and connected to their communities to be enabled to do what matters most to them to improve their situation.

Coproduction and Participation - Other Services

Grapevine, a local voluntary and community organisation, is assisting in the development of work for services focussed on **16–25-year-olds**. A Walk and Talk and an Ideas Factory have been held to discuss ideas for services for this cohort. Ideas from these events will be developed through 23/24.

Coventry and Warwickshire Mind have integrated co-production into all they do. They enable children and young people to sit on interviewing panels for services, they also have an advisory board of children and young people who influence communications for and delivery of services. They use peer workers and experts by experience in all of their programmes and services.

Compass have engaged with children and young people to co-produce the name and branding of its new service: Compass Shine. Compass have also led on the planning and imminent delivery of Child Friendly Cov initiative to develop and implement peer mentor/champions within schools – initial 4 as a pilot. Both primary and secondary schools across the City have agreed to take part in the project which will be evaluated later in the reporting year.

Health Inequalities

Local population data has been reviewed and analysed within this LTP (from slide 10). This highlights where there is likely to be health inequalities across the patch.

Further work is required to develop a better understanding of local demand compared to known health inequalities. It is imperative to link in with the **Core 20 Plus Five work** being undertaken in the system for mental health.

Stronger and more localised data sets are needed to further understand the demographics on those young people accessing mental health services, such as:

- Age
- Gender
- Ethnicity
- Location if service users and deprivation level.

Heat tool will then be undertaken on each of the commissioned services, to inform next steps and how we can further tackle health inequalities.

Health Inequalities – What has been done so far

This is some of the work happening locally to help support and tackle health inequalities within our system

CW Mind

- Community support offer to ensure fair access for all.
- Services on the GP Gateway / Primary Care Network (PCN).
- Close links with ForeverFit, a local gym in Coventry to tackle physical health and wellbeing to help improve mental health.
- Reasonable adjustments are implemented and fed into adaptations needed so that needs are considered when a service user receives medical care.
- Committed to levelling the playing field for autistic individuals by promoting equal access to mental health services.
- Actively challenge any discrimination autistic children may face when seeking mental health services.

Coventry Warwickshire Partnership Trust

- Working on creating full datasets for each service area such as MHST and Eating Disorders which captures service user population and demographic characteristics.
- Engagement projects which aim to reach hard to reach children and young people e.g MHST engagement utilising VCS .

Compass

- Community support offer, based within Family Hubs in Coventry, to ensure fair access for all.
- Open access support via self-referral or a professional referral.
- Localised support target.

Health Inequalities – What has been done so far

Kooth

- Population data and demographics are obtained and reported on.
- Seeks to focus on children and young people where there are higher health inequalities i.e., LGBTQ+ communities.

Coventry

- Coventry is a Marmot City: https://www.instituteofhealthequity.org/resources-reports/coventry-marmot-city-evaluation-2020
- By using service data, a more targeted support approach will be applied through the Mental Health surge working group ensuring emerging needs are proactively responded to, where possible.

Warwickshire

- A local Joint Strategic Needs Assessment (JSNA) was concluded in May 2023, which had a focus on children and young people mental health.
- Data from this will help inform future commissioning and to inform areas of focus.

Total FTE Mental Health Workforce
NHS England: 142,754
Midlands: 26,452

Workforce

Coventry and Warwickshire Partnership Trust Quality Account 2022-2023

Within our children and young people's mental health services, the emotional needs of children and young people remain high as we recover from the impact of the global pandemic. Teams continue to work hard to support children and young people across Coventry and Warwickshire.

Achievements include:

- Several prizes at the CWPT Q awards including the RISE eating disorders team winning the Collaboration award.
- Recognition of Navigation Hub Practitioners at Warwickshire County Council's Early Help Conference where they were given the Partnerships award
- RISE Coventry Youth Justice practitioners and senior management taking part in the HMI Prison service review of the Coventry Youth Justice offer. The health component was noted in the overall feedback with the overall judgement of outstanding.
- The Think Family Outreach team won the Nursing Times National Workforce award, and were recognised unanimously by the judges for having an innovate and creative approach to supporting care.

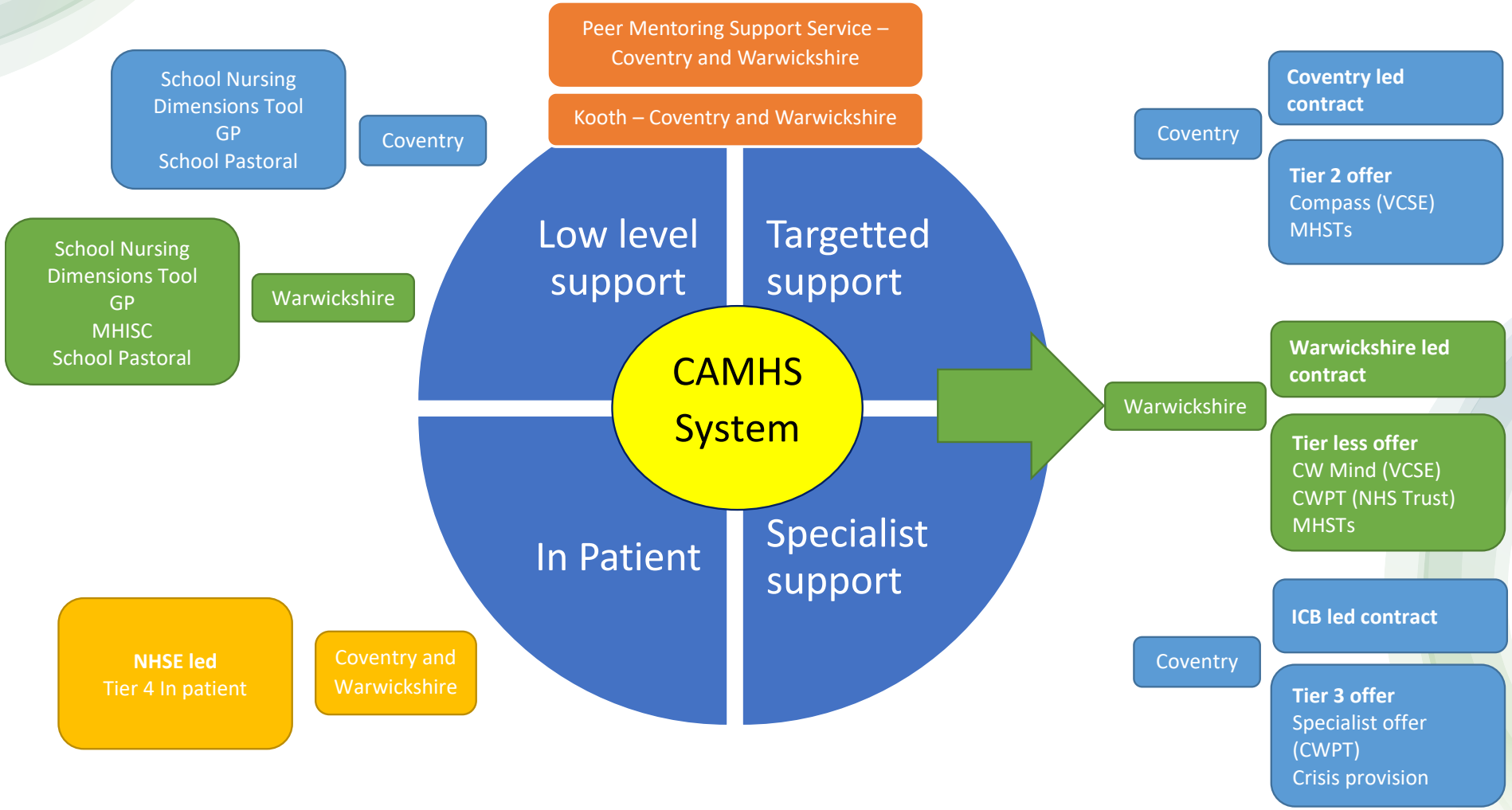
Current challenges across the system, both on a national and local level, includes workload / caseload and recruitment challenges, particularly to Band 6/7 practitioners.

A broad range of training on mental health is available to professionals across services and schools. This includes

- Services own internal training
- Multi-Agency learning events
- Virtual training modules
- Wider conferences and forums
- National NHS Webinars
- Positive Pathways trauma informed training, practice educators and train the trainer sessions.

System overview

The diagram below is a simple version of the local emotional wellbeing and mental health system



Early intervention / prevention – Low Level offer

The table below provides a brief description of some of the low level offers available

Low level support offer		
Service	**Location**	**Offer**
Dimensions tool	Cov & Wark	The Dimensions of Health and Wellbeing is a free online tool providing self-care information to support adults, children and young people. You can rate yourself or another person against several dimensions related to health and wellbeing. Website: Dimensions tool
School Nursing	Cov & Wark	Named school nurse in each school to help CYP take responsibility of their own health. Chat Health is also provided, which is a free service for 11- to 19-year-olds to send confidential text messages to school nurse for information and advice. Coventry: Coventry Family Health and Lifestyle Service Warwickshire: Warwickshire (Connect for Health)
Educational Psychologists	Cov & Wark	Educational Psychologists work in partnership with parents/carers, school staff and other professionals to promote the learning and mental health of children and young people from birth to 25 years. Coventry: Coventry Educational Psychology Service Warwickshire: Warwickshire Educational Psychology Service
School Pastoral	Cov & Wark	This is pastoral support that individual schools will be purchased directly, usually through a counsellor.
GP	Cov & Wark	Support children and young people and their families to complete the Dimensions tool. And signpost children and young people onto appropriate services such as CAMHS to support their wellbeing.
Mental Health Interventions for School Children (MHISC)	Warwickshire	MHISC is a framework of providers delivering individual needs led early interventions to address mild to moderate emotional wellbeing and mental health issues, to improve the mental health and resilience of children within Warwickshire schools who are open to the Early Help assessment process.

Early intervention / prevention – Targeted offer

The table below provides a brief description of some of the Targeted support offers available

Targeted support offer		
Service	**Location**	**Offer**
Rise	Cov & Wark	Rise is a family of NHS-led services providing emotional wellbeing and mental health services for children and young people in Coventry and Warwickshire. Website: Rise
Compass Shine	Coventry	Support to children & young people aged 5 to 18 years, and up to 25, if they have a SEND need or are a Care Leaver, with a low to moderate level of need. Support is also provided to parents, carers & professionals who are worried about a child or young person's mental wellbeing. Website: Compass Shine
Kooth	Cov & Wark	Online (Digital) anonymised emotional wellbeing and mental health support offer for children and young people aged 11 to 25. On the platform young people can share / read articles, patriciate in discussion boards, share their thoughts and feeling, and access trained accredited counselling via chat or messaging function. Website: Kooth
Positive Directions	Cov & Wark	Funded by NHS England via the Vanguard programme, the programme supports local children and young people with a range of complex needs, including some of the most vulnerable, who have been subjected to child exploitation and other significant trauma. It is a non-medical model which recognises that behaviour is best understood in the context of trauma and connects young people to their communities. Website: Positive Directions

Early intervention / prevention – Targeted offer

The table below provides a brief description of some of the Targeted support offers available

Targeted support offer		
Service	**Location**	**Offer**
Peer Mentoring Support Service (PMSS)	Cov & Wark	This is an early intervention/prevention service providing peer mentor 1:1 and group support with the goal of enabling a smoother transition from children's mental health services into adult support or community services. Service is for 17-to-25-year-olds. Website: Peer Mentoring Support Service
Mental Health Support Teams (MHSTs)	Cov & Wark	MHSTs work alongside educational setting to develop the emotional wellbeing and mental health of its pupils. Direct intervention is provided to young people presenting with mild to moderate level of need. There are currently 11 MHSTs in the system, 4 in Coventry and 7 in Warwickshire, which are currently in 132 schools and colleges. This will increase as the latest wave (9) in being rolled out. A further MHST will be coming into the system from September 2025, bringing the total to 12 MHSTs in the system. Website: Mental Health Support Teams
CAMHS Children Looked After (CLA)	Cov & Wark	The service provides dedicated offer to children looked after, to support their emotional wellbeing and mental health needs. In Coventry this is delivered by CWPT in partnership with Compass via an integrated offer. In Warwickshire, this is delivered by CW Mind. Website: CAMHS CLA
Primary Mental Health Team (PMHT)	Cov & Wark	The Primary Mental Health service gives general advice, guidance, consultation and group training for those who work with children, such as school-linked professionals or social care roles. Website: Primary Mental Health Team

Eating Disorders

Progress and Challenges over the past year...

- Impact of Covid is still being felt with raising demand for the service.
- Focussed time to map the full CYP pathway to help understand hot spots, gaps and areas of need. This then enabled us to target specific priority areas and ensure a responsive approach.
- Priority was given to developing a step up and step down offer – as a result an integrated pathway offer was commissioned with First Steps to support children and young people with these needs.
- A further priority has been increasing the waiting time standards - work around workforce and positive recruitment has led to the sustainable achievement of the access and waiting times standards.
- An Avoidant Restrictive Food Intake Disorder (ARFID) offer (not the final offer) has been developed with engagement with system partners shaping this. More data and intelligence needs to be gathered to inform the focus of this offer in the future.

Plans for 23/24...

- Continue to develop a sustainable offer to enable the service to meet the access and waiting time standards.
- Maintain the Eating Disorders dashboard so that consistent data can be collated and trends and patterns in service delivery can be demonstrated with a focus on finding out more about any inequalities and access to the service.
- Progress the ARFID offer and begin data collection to utilise to inform the phasing of the offer.
- Engage with children and young people who have accessed the Home Treatment interventions and seek their views about the service to feed into an evaluation.

Crisis

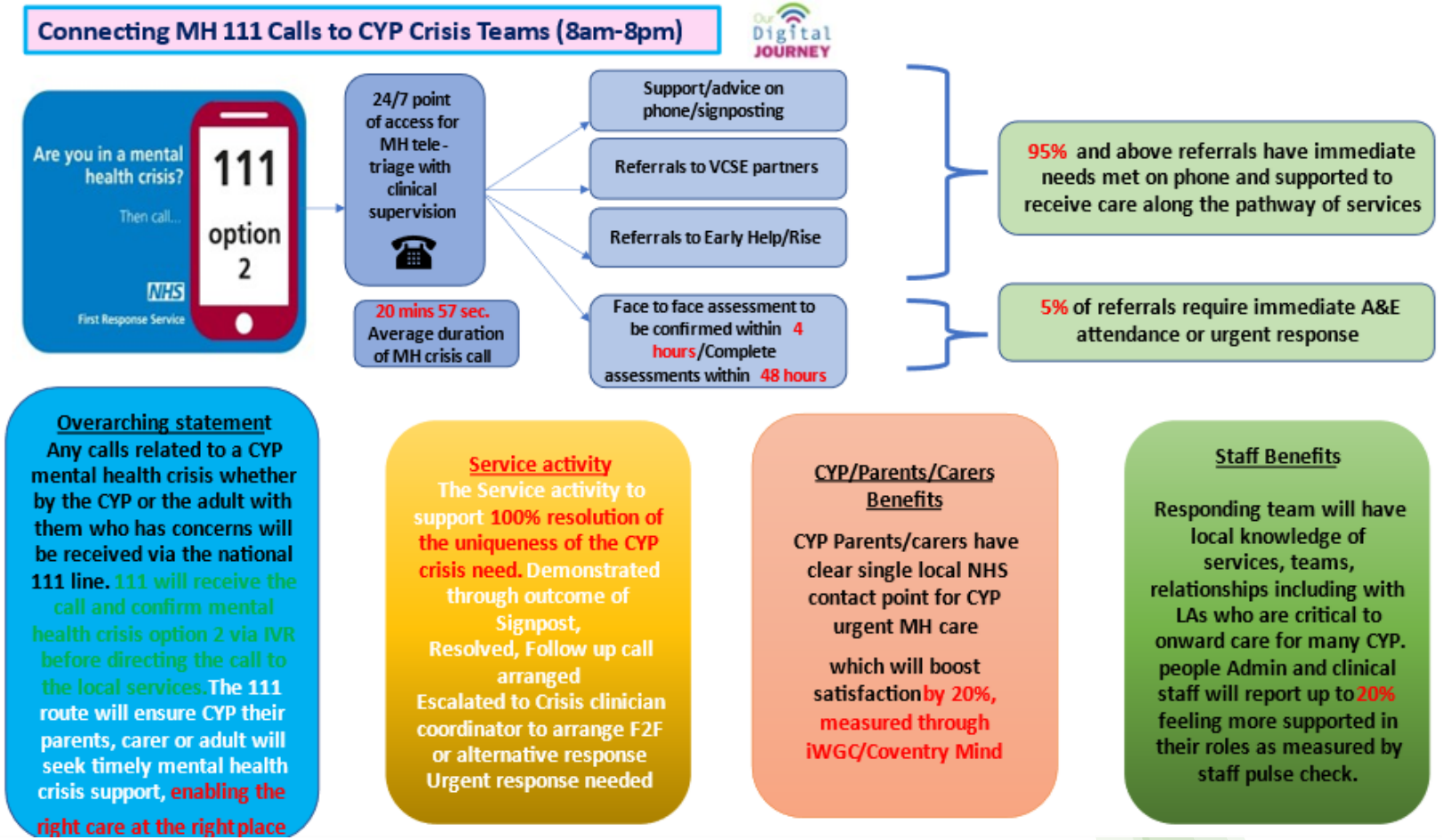
Progress and Challenges

- Given the urgent requirement to set up the crisis line in response to the pandemic, children and young people's engagement was not possible. However, as the service has continued local intelligence and theme of crisis calls has developed an understanding on the workforce required to meet the needs. This has informed the development to an integrated offer with CW Mind within the crisis helpline.
- The need for multiagency approach to support the unique crisis of each child and young person has enabled plans of care and support at such vulnerable times to be better. Challenges of escalations have been responded to through a dedicated values based Guiding Principles approach for all Health, social care and commissioning staff involved in crisis care however the availability of social care placements, MH inpatient beds and intense crisis care (alternative to admission) has limited availability at times to respond.
- In line with NHSE LTP trajectory, CWPT are on track to deliver the ambitions for the 4 key functions described by the Long Term Plan. The governance however due to the span of crisis care when viewed as a pathway remains a challenge. When presenting in crisis, children can often require a range of support that is seen as holistic, and it is often the case that the crisis is not a singular need. The multiagency approach supported by the Guiding Principles has built a foundation of this need however there is more work to be done regarding early help, prevention and or course where needed longer term recovery. It's important to recognise the need as a system to be more connected with Education and reasonable adjustments within Education especially with the high number of children and young people presenting with Neurodiverse needs.
- Integrated MH Local Authority Social Workers (AMHP's) (Cov and Warks) embedded into the Crisis team
- Multiagency Dashboard has been developed, providing the system with intelligence of the presenting needs/themes to support responsiveness not reactiveness.
- System workshops with multiagency buy in and system agreed actions.

Crisis – NHS 111

Progress and Challenges

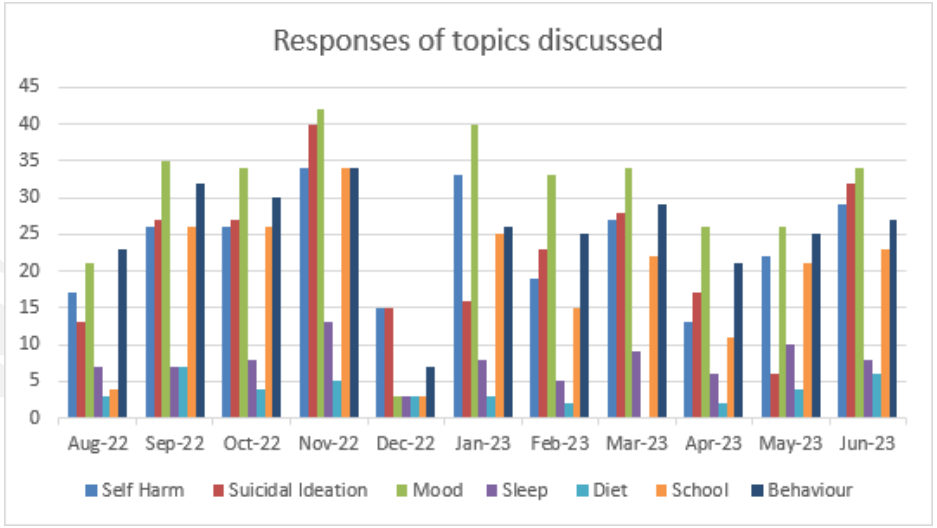
- Work is underway to align the mental health crisis helpline within NHS 111.
- This has proved challenging however in preparation a model diagram has been developed to outline the pathway.

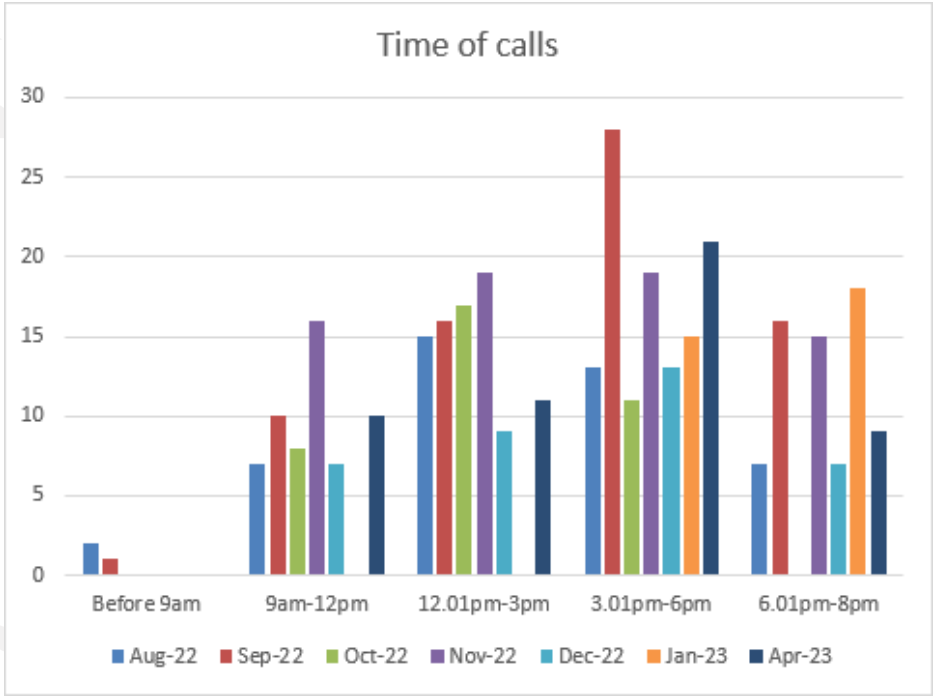


Crisis helpline

Progress and Challenges

- A data snapshot details the presenting issues of those accessing the crisis line, and the time-of-day calls are made, per month.
- The most prominent presenting need is around mood, suicidal ideation, and self harm, with behaviour playing a part too.
- Calls into the crisis line mainly occur between 12pm and 6pm, with very little during the night.
- Caveat – the data provided is unvalidated data and based on locally collected data, due to the Care Note outage between August 2022 and March 2023.





Crisis – next steps

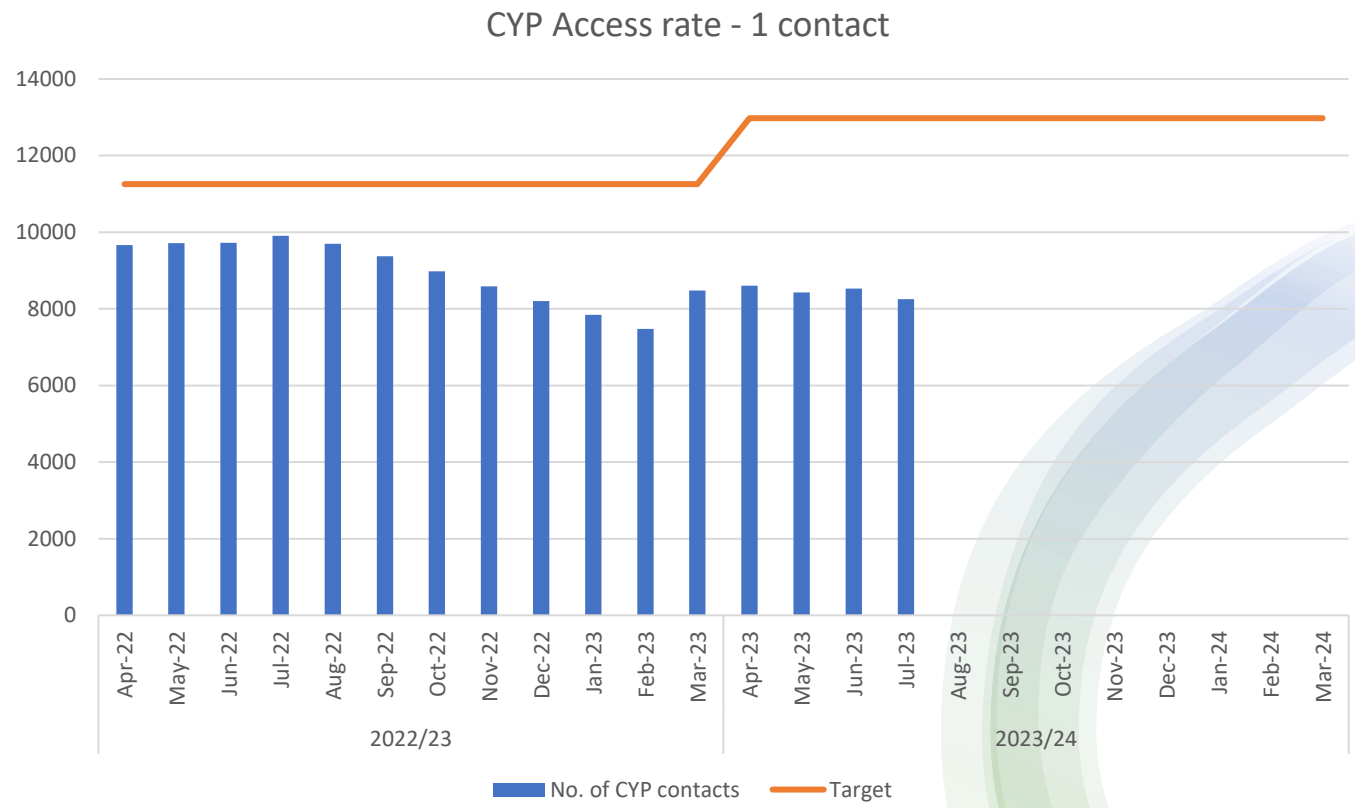
Next steps

- Working closer with leaders (local) in education to understand the needs and pressures within schools especially for children and young people with neurodiversity needs.
- Further investment in MHST's and to review the impact following the 5-year programme.
- Place based (Primary Care Networks) conversations walking alongside GP's and understanding the needs within Primary Care – further expansion of Additional Roles Reimbursement Scheme (ARRS) programme.
- Work towards increasing intervention and early opportunities, increasing access and prevention to crisis services
- Opportunity to explore the need for a true alternative to hospital admission: Day provision multiagency delivered.
- Review of the governance to ensure all are included and/or consulted.
- Ensure children and young people's participation throughout the journey.

Access and Outcomes – CYP Access Rate

CYP Access Rate

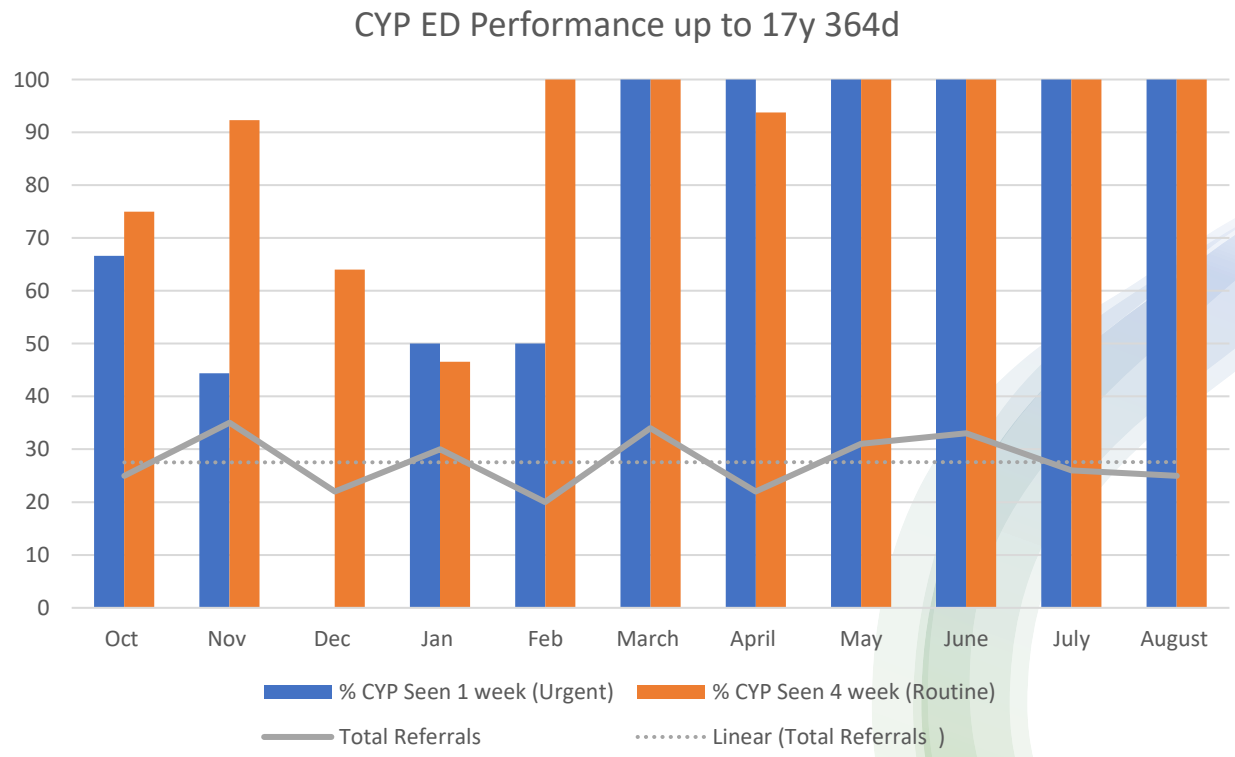
- NHSE set a target for local areas to meet
- The target increases each year. Target for 2023/2024 is 12,972.
- The target is based on the number of 1 contacts over a 12-month rolling period.
- Based on the latest confirmed data (June 2023) the system are around 4,450 contacts short.
- There are a number of factors that have played a part in not reaching this target, which includes:
  - Care Notes outage from June 2022 to February 2023 – this meant no data was submitted through MHSDS during this period
  - Change in Tier 2 service providers in Coventry.



Access and Outcomes – Eating Disorders

CYP Eating Disorders

- NHSE have set a target for local areas to meet
- Target is:
  - 95% of ‘urgent’ referrals are seen within 1 week
  - 95% of ‘Routine’ referrals are seen within 4 weeks.
- Following investment and expansion of the offer, the targets have successfully been met from March 2023.



Early Intervention in Psychosis

Coventry and Warwickshire Early Intervention in Psychosis Service (EIP) delivers the full package of NICE recommended care to children and young people aged 14 or over with First Episode Psychosis (FEP) or an At-Risk Mental State (ARMS).

Pathways

- The FEP pathway is 3 years in which people are offered the full package of NICE recommended care, including a focus on CBT for Psychosis; education support; Family Intervention (FI); Carer Focused Education and Support; and physical health assessment and interventions.
- The ARMS pathway is 1-2 years of active treatment to prevent or delay transition to psychosis, and a further 1 year of active monitoring. The core of the pathway is CBT but includes FI, education support and physical health assessment and interventions.

Workforce

- CYP MH retain clinical responsibility whilst working closely or alongside colleagues in EIP who deliver psychosis or ARMS specific interventions.
- All EIP staff are trained in safeguarding level 3 which includes children and young people, and all EI psychologists have training and experience in working with children and young people.
- EIP team managers continue to meet regularly with Rise. Rise also attend the EI HCP meeting providing strategic input to the service.
- EIP have updated and revised their operational policy to a Standard Operating Procedure which includes joint working arrangements with CYP MH services.
- EI teams are audited annually in the National Clinical Audit of Psychosis (NCAP) and additionally the RC Psych Early Intervention in Psychosis Network (EIPN) peer review. Both include CYP specific standards.

Health and Justice – Warwickshire

Warwickshire Youth Justice Service is a multi-agency partnership, which brings together Police, Probation, Social Care and Health resources, with the statutory remit of preventing offending by children and young people aged 10-17. Children involved in the youth justice system, whether harmed by others and or because of their own behaviour are some of the most vulnerable in Warwickshire. The service works directly with those children subject to court orders and those who receive out of court disposals. The service is about to relaunch an early intervention service which will extend the work that begun last year, with the introduction of the home office funded turnaround scheme, which aims to work with children at an earlier stage to prevent children entering the criminal justice system.

The service benefits from 2 specialist mental health practitioners and a full time Speech and Language Therapist.

This year the service has also been part of the NHS Coventry and Warwickshire Trauma Vanguard which has enabled further resources through the addition of the positive directions practitioners to support children and young people with emotional wellbeing needs as a result of trauma. This cohort of children would not traditionally be involved with RISE Clinicians or necessarily attract a mental health diagnosis. A social prescribing youth work style intervention rather than clinical approach is currently being trialed.

Over the following year the Youth Justice service will focus on the following:

- Prevention of Serious Youth Violence
- Prevention of and improved intervention for children who present with harmful sexualised behaviours.
- **Embedding the ARC Trauma Informed Model and improving the interventions offer for children**
- Focusing on Core Good Practice – including reviewing all policies, procedures and agreements

Good Practice

- Diversity of approach and an outreach style of practice by the mental health practitioners supports engagement of this traditionally "hard to reach" cohort. This is now further extended by the addition of positive directions practitioners who will work with those within community, those transitioning from the secure estate and those from global majority ethnic groups who may face additional barriers.
- Addition of a SALT practitioner now further supports engagement of children and young people. The addition of a SALT practitioner provides YJS with the ability to "unmask" speech language and communication difficulties, that children have experienced for many years prior to their entrance into YJS.
- **A child first, trauma informed approach to work with children and their families underpins understanding of children's offending behaviours and is being extended through use of the ARC framework.**
- A close working relationship particularly with the co-located Family Adolescent Support Team and embedding of the service within the broad Warwickshire children and families service, supports YJS ability to address multiple needs of children and young people that are open to YJS
- **YJS has been supported this year with the addition of a dedicated participation practitioner, funded through the NHS Vanguard, to support children's voice within the Youth Justice system to be heard and to influence practice and design of services.**

Health and Justice – Coventry

Coventry Youth Justice Services (known as Youth Offending Teams) were established under the Crime and Disorder Act 1998 with the principal aim being to prevent offending behaviour by children. The Act imposed a duty on each local authority together with its statutory partners, Police, Health, and Probation, to ensure that adequate Youth Justice Services are available in their area.

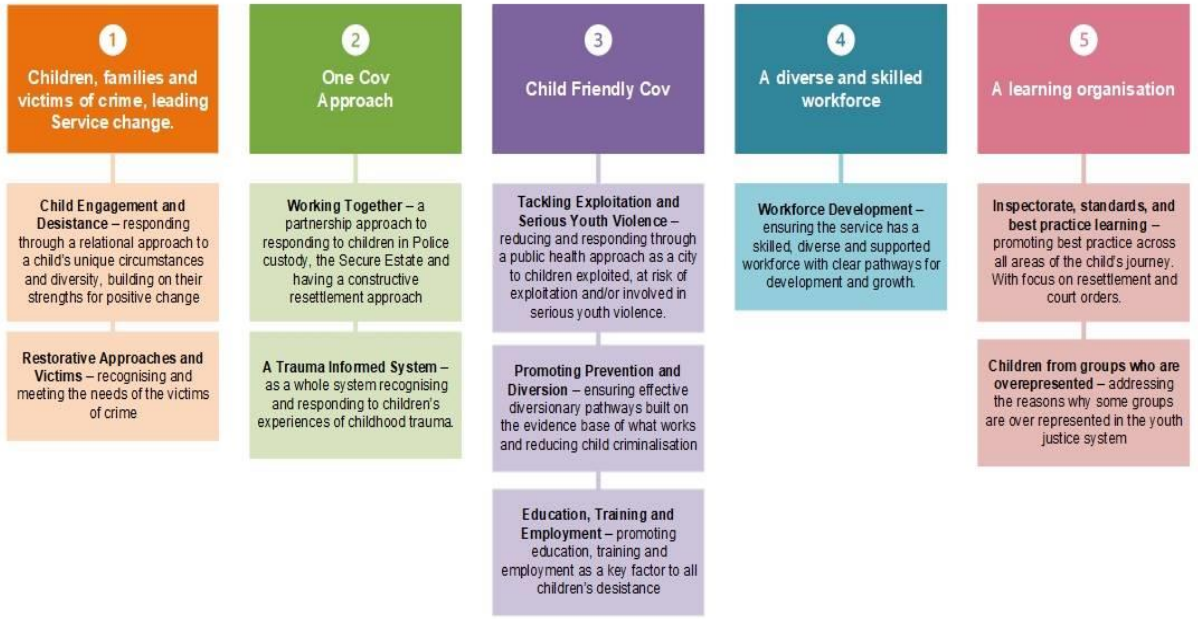
The key tasks of the service are:

- Management and delivery of community sentences.
- Assessing and delivery of Out of Court Disposal interventions.
- Assessing and delivery of diversion2 support to children at risk of
- entering the Youth Justice System.
- Management and delivery of secure estate sentences and resettlement.
- Servicing the Youth Court and Crown Courts (in terms of provision of the court team, Bail & Health Assessments, provision of Pre-Sentence Reports and Stand-down Reports).
- Parenting services and management of Parenting Orders.
- Victim services.
- The service will benefit from the home office funded Turnaround Scheme, which aims to work with children at an earlier stage to prevent children entering the criminal justice system.

Achievements over the last year:

- OFSTED rated OUTSTANDING
- A further reduction from last year for the number of children entering the formal youth justice service and in increase in diversionary work
- The lowest reoffending rate in 4 years at 18.3%
- Only one custodial sentence.

Priorities over the coming year – Link to Coventry Youth Justice Plan here: Coventry Youth Justice Plan



Learning Disabilities and Autism

Overview of the service

A range of services are commissioned to meet the needs of children and young people who have learning disabilities and/or are autistic (LDA) - these services complement the local mental health support offer which is also available for children and young people with LDA diagnoses. The Joint Autism Strategy for Coventry and Warwickshire underpins the work in this area. Across Coventry and Warwickshire, children and young people with learning disabilities and those who are autistic, and who are at risk of admission to a mental health hospital are supported by a Keyworker Service to ensure a coordinated support offer that is reasonably adjusted to meet their needs and to prevent avoidable hospital admission and facilitate discharges.

To realise its commitment to reducing waiting times for diagnostic assessment the system has continued to fund additional assessment capacity to complement the Coventry and Warwickshire Partnership Trust delivery of autism diagnostic assessments, reducing waiting times month on month. Those awaiting a diagnosis, already diagnosed, or self-identifying as autistic and those who care for/support them are able to access a newly commissioned Community Autism Support Service (CASS) offering a range of services including 1:1 support, peer mentoring, group support and access to a range of training opportunities. These services are further supplemented by a continuously evolving, co-produced, information and advice offer.

Achievements made over the past year:

- Keyworker Service recommissioned and implemented
- Community Autism Support Service recommissioned and implemented
- Significant reduction in waiting times for autism diagnostic assessment
- Roll-out of an 8 module Autism training package across CWPT's RISE services
- Neuroliaison offer providing support into RISE services to offer advice on reasonable adjustments and signposting for neurodivergent children
- Completed self-assessment using "green light tool-kit" to check how well mental health services are meeting the needs of people with a learning disability and / or autism.
- Successful differentiated diagnosis pilot project highlighting opportunities to consider the involvement of education professionals within the autism diagnostic process
- Launch of Information and Advice e-booklet and printable versions https://dimensions.covwarkpt.nhs.uk/News.aspx?NID=26
- Review of Dimensions tool from a neurodivergent perspective, to inform refreshed content

Learning Disabilities and Autism

Highlight or plans for the next year in terms of development or priorities:

- Continue to address waiting times for autism diagnosis.
- Evaluation of impact following year 1 of the CASS service.
- Further develop the post-diagnostic support offer.
- Launch of easy-read version of information / advice e-booklet.

- Continuation of the differentiated diagnosis project, extending into RISE services to test feasibility.
- System-wide roll out of Oliver McGowan training.
- Implementation of green light toolkit action plan.

- Development of co-produced information / advice animations.
- Continued involvement of experts by experience in all workstreams, ensuring the local developments are co-produced.

- Supports with annual health checks for all Learning Disability and Autism service users.
- Frequently submits the reasonable adjustment adaptations needed to add to care notes, care plans / new system to Transforming Care so that needs are considered when a service user received medical care.
- Supports service users to get the support they need.
- The Keyworker Service Manager, the Parent Peer Keyworker, and two service users spoke Infront of Parliamentary select committee on mental health inequalities for autistic children.
- The Key Worker Service has been advocating for autistic and learning disability CYP and challenging other services. They are working to ensure that CYP receive the appropriate mental health support and services they need. This advocacy involves engaging with other service providers, healthcare organisations, and local authority to raise awareness of the unique challenges faced by autistic CYP
- The Key Worker Service is committed to levelling the playing field for autistic individuals by promoting equal access to mental health services. The specialist keyworks are actively involved in developing and implementing strategies that address the specific needs of autistic individuals, such as providing tailored support and reasonable adjustments.

Finance

In 2022/23 Coventry and Warwickshire ICB funded a combined total of circa £13.6m of mental health services for children and young people.

The combined spending profile of circa £15m for 2023/24 is presented in the below tables.

Coventry Finances table

		2020/21	2021/22	2022/23	2023/24
ICB	Core CAMHS	£3,126,000	£4,935,200	£5,830,350	£9,943,576*
	Tier 2 Services	£0	£115,000	£241,850	£246,203
Coventry City Council	Tier 2 Services	£413,000	£469,000	£436,600	£483,650
Total		**£3,539,000**	**£5,519,200**	**£6,508,800**	**£10,673,429**

*The system transformation values are inclusive of the Coventry Core values

Warwickshire Finances table

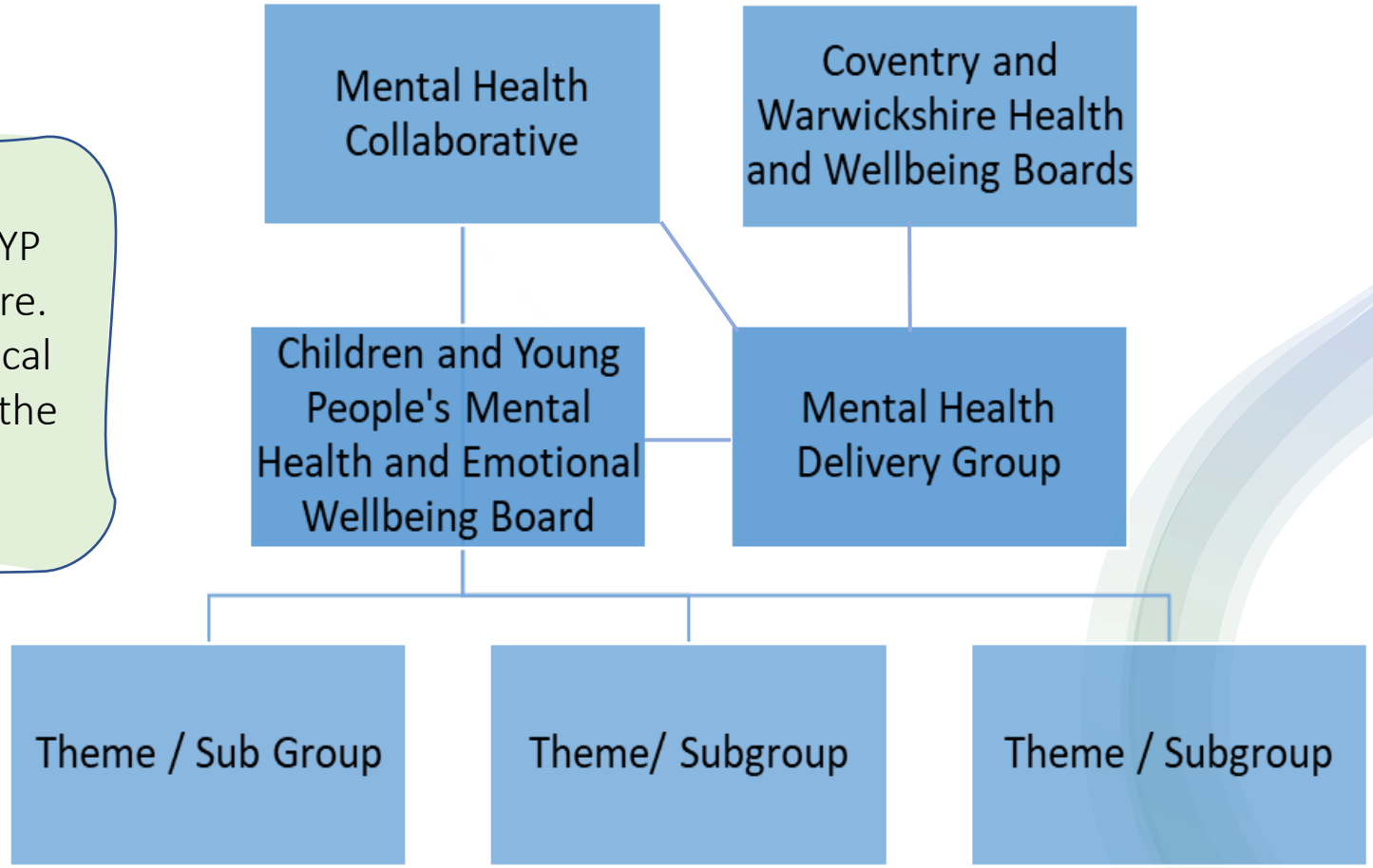
		2020/21	2021/22	2022/23	2023/24
ICB	Core CAMHS	£3,556,700	£3,581,500	£3,671,200	£3,762,951
	Acute admissions	£10,000	£10,000	£10,300	£10,548
Warwickshire County Council	CAMHS	£757,000	£757,000	£757,000	£606,923
	Youth Justice Service	£103,000	£103,000	£103,000	£103,000
Total		**£4,426,700**	**£4,451,500**	**£4,541,500**	**£4,483,422**

Transformation funding

	2020/21	2021/22	2022/23	2023/24
Transformation Funds	£1,881,000	£1,634,500	£1,705,950	£0
Transformation Eating Disorders	£371,500	£898,000	£937,250	£0
Total	**£2,252,500**	**£2,532,500**	**£2,643,200**	**£0**

Current Governance

This diagram shows the current CYP mental health governance structure. Work is underway to review the local governance so this may change in the future.



Next Steps…

formulation of a delivery plan which will include the following key deliverables…

Key Deliverable	Key Actions
Early Intervention / prevention	• Build on the Trauma Vanguard programme - look at ways to enhance and expand the model into Coventry and Warwickshire. • Continue to provide a range of early intervention and prevention services through different providers (e.g., Kooth, PMSS, MHST).
Recommissioning of Children and Young People's Mental Health services	• Utilise HEAT tool on future commissioning options. • Recommission and develop services with a focus on prevention, early intervention and non-medicalised support that can be delivered in the community.
Development of a comprehensive 0-25 offer	• Establish support for children and young people moving between services aged 16-25 years old.
Data Dashboard	• Develop a children and young people's mental health data dashboard capturing data from services from across the whole system.
Health Inequalities	• Utilise data dashboard to cross reference areas most in need with services provided. • Utilise HEAT tool on commissioned services to inform next steps and further work around health inequalities.
Eating Disorders	• Implement the ARFID offer and respond and shape the service in response to data coming from the service as it is implemented .

Produced in Partnership with…