

## **Manchester's Transformation Plan for Children and Young Peoples Mental Health and Wellbeing**

The integrated commissioning strategy, across Manchester City Council (MCC), Manchester Health and Care Commissioning (MHCC) and its partners, sets out the joint commitment of all key partners to improve the lives and life chances of all children, young people and families in Manchester.

The ambition is to commission, deliver and effectively manage an integrated health and early help services for children, young people and families, contributing towards improved population health and safe, effective and affordable services.

The Manchester CAMHS transformation programme is part of a wider children and young people's Mental Health 5 year transformation programme (to 2020/21) with a core purpose to ensure the system provides the best support for all children and young people and the right support at the right time that focuses on: prevention, early identification, early intervention and self-care.

The Strategic goal of the Manchester Health and Care Commissioning (MHCC) commissioned and Manchester Foundation Trust's (MFT) children and young people's mental health and wellbeing redesign programme is to deliver a cohesive iTHRIVE model of care for children and young people that focuses on: prevention, early identification, early intervention and self-care.



**Manchester Health & Care Commissioning**  
A partnership between Manchester City Council and NHS Manchester CCG



**MANCHESTER CITY COUNCIL**



**NHS Manchester**  
Clinical Commissioning Group

---

**Future in mind**  
Promoting, protecting and improving our children and young people's mental health and wellbeing




**The National Context**

- Fragmented and requirements to change

**Future in Mind**

- Prevention, Resilience, Early Intervention
- Access for our most vulnerable children- a system without tiers
- Workforce
- Data

**Five Year Forward View for Mental Health**

- Access
- 7 day flexible community offer

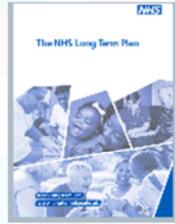
**Manchester's Transformation Plan**  
*Right support, right time, all of the time*

- Manchester ambition to 2020/21

**NHS Long Term Plan**

- Strategic plans to 2023/24

The i-THRIVE Programme

### 'Profile of need in Manchester'

Over half of all mental ill health starts at 14 years old and 75% developed by 18 years old. We want CYP to feel safe, grow up happy and have good social, emotional and mental wellbeing. We want the CYP to thrive in education, emotional and personal lives.

### Where are we now and our ambitions to 2020/21

In December 2015 we published our **Transformation plan** for Children and Young Peoples Mental Health and Wellbeing. The plan was produced in response to the Government select committee report "Future in Mind". **We secured additional investment from NHSE for five years** to enable us to plan with confidence for increased resources, to improve capacity and capability for local Children and Young Peoples Mental Health Services. The Transformation Plan is refreshed and updated each year and the latest draft iteration was published on the MHCC website on 31<sup>st</sup> March 2020.

In February 2016 a further Select committee report "The Five Year Forward View for Mental Health" was produced. Along with Future in Mind, these documents are the strategic foundation to plan our transformation work in Manchester with confidence.

### National Context

Some key issues raised include; Mental Health should be treated as important as physical health; People facing crisis should have access to **MH Care 7 days per week; Early intervention and quick access to help.**

### NHS Long Term Plan

The **NHS Long Term Plan** published in December 2018 outlines that NHSE have an ongoing commitment to invest in Children's and Young People's Mental Health through the long term plan with a continued focus on expanding access to meet the needs of more children, eating disorders, the development of Mental Health support embedded in schools, improving Health and wellbeing for people with Learning Difficulties and Autism and support for intensive, crisis and forensic community support.

These NHS Long Term Plan strategic commitments by NHS England provide the basis and confidence for Manchester Health and Care Commissioning to develop and sustain the new model of delivery 'm-thrive' for Manchester Children and Young People.

The Manchester Local Transformation Plan aligns closely with the Greater Manchester Health & Social Care STP/ICS strategic plan, Greater Manchester Children and Young People's Health and Wellbeing Strategy, Manchester's Inclusion Strategy, Manchester Locality Plan and 'Our Manchester – Our Children'.



Manchester Health & Care  
Commissioning  
A partnership between  
Manchester City Council  
and NHS Manchester CCG



MANCHESTER  
CITY COUNCIL



**NHS**  
Manchester  
Clinical Commissioning Group

## Where we want to be by 2020/21

- 35% prevalence - 7 day offer
- Crisis care pathway offer established
- Local Transformation Plan priorities
- The Green Paper – Mentally healthy schools



### Where we want to be by 2020/21

#### Prevalence

Ensure that at least 35% of children with a diagnosable mental Health condition are supported through an integrated response within the community and targeted support is available for the most vulnerable.

#### 7 day offer (working towards and developing)

We will work with our partners across Greater Manchester to support the development of common standards and pathways and commission at scale where this will achieve positive outcomes for our young people. (i.e. Crisis Care Pathway)

The **GM Crisis Care Pathway** Steering Group was tasked with: ‘developing a GM wide integrated, multi-agency, mental health crisis prevention, assessment and support pathway for children, young people and those who care for them, which is available 7 days a week’.

**Medical on call:** an on call rota will be set up to make sure clinicians are available 24 hours a day, seven days a week

**Rapid response teams:** The new 'central RRT team' (covering Manchester and Salford) provides risk assessment and management to young people who are experiencing a mental health crisis.

**Assessment centre:** this provides a central point for arranging mental health hospital-based care for a young person. It will help to help to bridge the gap between hospital and community child and adolescent mental health service teams to make sure young people experience joined up care

**Safe Zones:** A specific location whereby Children and Young People can take refuge and see clinicians outside of a medical setting – Manchester Youth Zone

**Enhanced community child and adolescent mental health services:** this will be an extension of the existing community child and adolescent mental - this could include, for example, evening and weekend appointments

**All Age mental health liaison provision:** these teams work and are based in all the acute Manchester hospitals (A&E departments) to provide rapid support to people of all ages that are experiencing a mental health crisis. This is fully operational now in all Manchester hospitals which is commissioned by MHCC to Greater Manchester Mental Health for delivery.

#### Local Transformation Plan priorities to 2020/21 (some of the highlights)

- **Produce and embed our Thrive local offer for Manchester**, supporting delivery of a flexible 24/7 community mental health and wellbeing response to children's mental health and wellbeing
- **Promote a whole school approach** to help children develop the resilience and self-esteem they need to make healthy lifestyle choices
- **Reduce the incidence of inappropriate presentations to Accident and Emergency**
- **Support the development of a Greater Manchester workforce strategy linking to FYFV and Long Term Plan**

#### The Green Paper (December 2017) 'Transforming children and young people's mental health provision'

Plans for schools and the NHS

- A mental health lead in every school and college
- We want every school and college to have a designated lead in mental health by 2025. The designated lead will be a trained member of staff who is responsible for the school's approach to mental health.
- **Mental health support teams** working with schools and colleges
- Shorter waiting times - The government wants to reduce the time it takes to get treatment from children and young people's mental health services. Some of the areas with new mental health support teams will try out ways of bringing this time to 4 weeks (quicker for young people who need very urgent help).
- Further roll out of the '**Mentally Healthy Schools**' programme following successful trailblazing pilot in GM linked to Green Phase 3 was rolled out in

Manchester (agreed with GM) .The Mentally Healthy Schools Partnership is made up of Youth Sport Trust, 42<sup>nd</sup> Street, Place2Be and Alliance for Learning.

The **Integrated School Health service** commissioned by MHCC to and delivered by MFT CAMHS:

**1. Training**

Each school is offered an initial 1 day training course jointly delivered by M-thrive partners including CAMHS , the School Health service and healthy schools SHS  
The aim of the session is to inform school leads on how to access CAMHS directly and obtain consultation support from the CAMHS service where specific mental health concerns present in connection with individual pupils.

**2. Liaison**

The service will offer all schools ½ termly cluster meetings, led by Service Managers and CAMHS Practitioners , to provide a forum for the school cluster to discuss mental health issues and scenario's with the following outcomes

**3. Consultation**

The service provides each school with a named CAMHS Lead and phone access to discuss referrals and mental health queries

# Current Access rates to CYP Mental Health Services

## Summary of Access Rate to CYP Mental Health Services

Access rate target 34%



Latest Data  
Period covered

Mar-20  
2019\_20

2 - Percentage of CYP with a diagnosable MH condition receiving two or more contacts in the reporting period.

Parent	Region	Level	Code	Name	Actual number of CYP receiving treatment (last 12 months)	Total number of CYP with a diagnosable mental health condition	Percentage access rate (last 12 months)	Variation from standard
England			England	ENGLAND	391,940	1,066,433	36.8%	2.8%
			Region	NORTH WEST	57,080	146,064	39.1%	5.1%
	North West	STP	E34000007	Greater Manchester	27,350	59,099	46.3%	12.3%
Greater Manchester	North West	CCG	00T	NHS Bolton CCG	1,840	6,484	28.4%	-5.6%
Greater Manchester	North West	CCG	00V	NHS Bury CCG	1,715	3,877	44.2%	10.2%
Greater Manchester	North West	CCG	01D	NHS Heywood, Middleton and Rochdale CCG	2,960	5,086	58.2%	24.2%
Greater Manchester	North West	CCG	14L	NHS Manchester CCG	5,925	12,364	47.9%	13.9%
Greater Manchester	North West	CCG	00Y	NHS Oldham CCG	2,085	3,965	52.6%	18.6%
Greater Manchester	North West	CCG	01G	NHS Salford CCG	2,840	5,445	52.2%	18.2%
Greater Manchester	North West	CCG	01W	NHS Stockport CCG	2,790	5,400	51.7%	17.7%
Greater Manchester	North West	CCG	01Y	NHS Tameside and Glossop CCG	1,870	5,485	34.1%	0.1%
Greater Manchester	North West	CCG	02A	NHS Trafford CCG	1,200	4,593	26.1%	-7.9%
Greater Manchester	North West	CCG	02H	NHS Wigan Borough CCG	2,030	6,400	31.7%	-2.3%

## Current Manchester Performance, impact and outcomes

In Manchester, between 2011 and 2017, the overall population of children and young people aged 0-16 years increased by 21.4% (n. 119,822) and the child and young people population is expected to grow by a further 25.2% by 2027.

Manchester CAMHS **access rates** are positive in comparison and in respect of the Five Year Forward View targets. As at 31<sup>st</sup> March 2020, in respect of access and actual number of Children and Young People receiving treatment against a national target of 34%, Manchester is achieving an access rate of **47.9%**, which is higher than England 36.8% and also the North West at 39.1%.

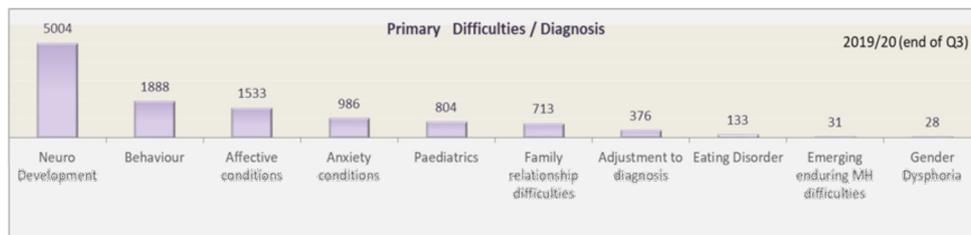
In Quarter 1 of 2019/2020, 83.5% of children and young people who were referred to CAMHS were accepted into the service. Based on the assumption that a total of 12,364 CYP would be accessing mental health service within Manchester in this financial year, Manchester CAMHS has an access rate of 20.6% for Q1. This model recognises that 79.4% of children with a mental health issue may not be getting timely support. The ambition of Manchester Thrive is to engage with these children and young people early, prevent escalation and ensure that when children access provision they are supported through integrated pathways and enabled to Thrive.

The statistics provided are from the latest NHS England Mental Health Services Dataset.

## Current waiting times in Manchester



## Presenting Issues and Outcomes



### Performance, impact and outcomes

Current **waiting time** figures provided as at 31.12.2019 from MFT. outline the average wait times for 1<sup>st</sup> & 2<sup>nd</sup> appointments.

Improvements for Manchester are highlighted in particular the proportion of CYP that wait 12 weeks or less from referral to first appointment and average waiting time from referral to NICE concordat treatment commencing which has reduced to 4.1 weeks in 2019/20.

### Presenting Issues and Outcomes at Community CAMHS

**Neuro Developmental:** ADHD Assessments, Autism Spectrum Disorder, Neuropsychological Issues

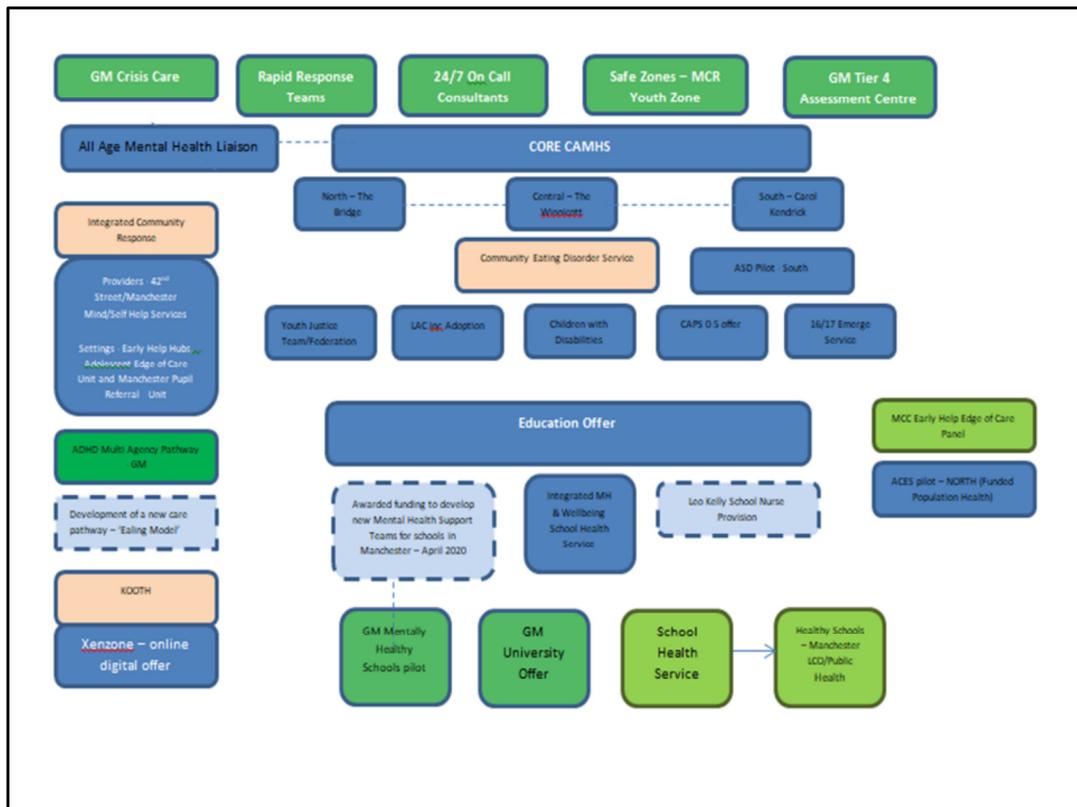
**Behaviour:** Behaviour difficulties/non-compliance, Challenging Behaviour - YP with LD, Suicidal ideation

**Affective conditions:** Low mood, depression

Measurement of patients by MFT CAMHS will record the proportion of those in treatment who have initiated Goal based outcomes (GBO) within 10 working days

at start of any intervention/treatment and % of those that show positive distance travelled to their GBO after 6 months and at discharge.

Anecdotally our CAMHS provider still reports a greater level of complexity in presenting issues, suggesting that pathway work is supporting young people to access the most appropriate part of our emotional health and wellbeing offer.



## Children and Young People's Community Mental Health picture in Manchester

In Manchester we continue to provide provision to enable all children and young people and their families who experience Mental Health problems or who may be vulnerable and at greater risk of developing Mental Health problems through a range of community CAMHS services and VCSE sector organisations;

- No Wrong Door – Alonzi House Hub Mental Health Support
- CAMHS LAC
- CAMHS LD - Consultation and Therapeutic Service for Looked After Children
- Virtual LD team with support to those LAC placed out of the city to try and maintain them in residential placements
- Manchester Adoption Psychology Service
- Children with Disabilities team
- Specialist care – ADHD (increased recurrent investment approved in latest business case to enhance workforce in Manchester in 2020)
- Specialist Care – Autism (Pilot in south has reduced wait times from 12 months to 5 months – latest business case approved recurrent funding to expand citywide in 2020)
- Children's and Parents Service (CAPS)
- 16-17 CAMHS Emerge
- Integrated Community Response Service (latest business case has approved

the pilot extension to 2021)

- CAMHS Youth Justice Service – Manchester

In 2019 both referrals received and accepted by Manchester CAMHS have continued to rise however, significant developments have happened during 2019 with **iTHRIVE** Implementation with coproduction and roll out of a 'redesign model' across Manchester in 2019/20 – m-thrive. This is covered in more detail later in this report.

**Investment** continues to grow for children and young people's mental health in Manchester. In 2019/20 MHCC investment totals **£10,326,504** which includes CAMHS Outpatients - (locally agreed tariff), CAMHS Block – (targeted services) and CAMHS Transformation compared to £7,905,139 in 2016/17.

A programme of work continues in Manchester for Children and Young People with complex packages of care and additional needs. During 2019 we developed and are trialling a new **dynamic Support database** for children with Learning Disability, Autism and Mental Health problems, consistent with the requirements of the Transforming Care Agenda.

There is also development of an integrated services specification and outcomes for LAC nursing and CAMHS LAC.

Further to receipt of Transformation funding from Greater Manchester Health & Social Care Partnership in 2020 we will develop a work programme which will mirror the **Ealing Model**. The implementation of the Ealing Model is a key work stream of the Children's transformation programme and will report to the Transformation Accountability Board.

A 12-month place-based pilot for **Adverse Childhood Experiences and Trauma Informed Approaches** was delivered in Harpurhey, north Manchester to test whether development of an ACE-aware, trauma-informed workforce allows for engagement with service users/people with lived ACEs on a deeper level. This led to more effective interventions and better outcomes for the individual, family and community and as a result of the project being received positively and starting to evidence impact, this approach and way of working is being extended to other areas of the city.

The three **Early Help Hubs** continue to provide a coordinated response to a targeted need for early help, wrapping services around a family.

Many of the families the service works with have experienced ACEs and have poor mental wellbeing. Early Help and CAMHS managers also attend the weekly 'Edge of Care Panel' and seek to work together to identify holistic interventions for young people and improve joint working practices.

Manchester has a continuum of educational provision for children and young people aged 0-25 with SEND including social, emotional and mental health (SEMH) needs.

The **Virtual School** provides Educational Psychology consultation for education settings and social workers in Manchester, to support them in understanding the emotional well-being needs of young people. The Local Authority commissions **outreach support** for early years' settings and mainstream schools from special schools. This support is designed to help staff identify need, develop strategies and practices to better support pupils with SEND.

We continue to commission '**Healthy Schools**' which is part of the School Health Service within Children's Community Health Services and works with schools to improve the health and wellbeing of pupils across Manchester.

The **Link Programme** is a major national initiative which is being rolled out over four years starting from September 2019. All CCGs are encouraged to take part and every school and college in England will be invited to participate. The programme is funded by the Department for Education and was delivered by the Anna Freud Centre and our training partners in Manchester at The Etihad Stadium via two full-day workshops, which brought together education and mental health professionals from across the Manchester area.

NHSE will continue to make provision for newly commissioned (by NHSE) **Mental Health Support Teams** (MHSTs) specifically for Manchester in 2020 (through approval of Manchester Expression of Interest application for large investment) , to provide extra capacity for early intervention and ongoing help within a school and college setting which will link to developments in Manchester during 2020 aligning to the NHS Long Term Plan.

Collaboration between MFT CAMHS and MCC Director of Education will plan the development of MHSTs, recruitment and training of *Education Mental Health Practitioners* (EMHP) and target specific schools with the greatest need within Manchester during 2020 to enable a clear joint assessment of need in the education setting, carried out in conjunction with school/college leadership colleagues.

## Wider Community Children's Mental Health Developments

- Recurrent funding for the Children and Young People's Community Eating Disorder Service
- Autism pilot in South to be made recurrent and expand for the whole of Manchester
- ADHD specialist non medical leads investment for CYP
- CAMHS School Nurse investment into Hospital School
- CAMHS Occupational Therapist – extra capacity LCO
- Investment for suicide prevention training

7

The Community Eating Disorder Service (CEDS) is a nationally mandated 'must do' specialist provision, which has been funded through FYFV Transformation monies as a pilot but now we will invest recurrently to ensure we meet national requirements and also align to the Long Term Plan objectives relating to CEDS.

There is a specific waiting time national standard for the Community Eating Disorder Service. The national standard is to ensure that by 2021, 95% of young people in need of an eating disorder service will be seen within four weeks, and one week in urgent cases. In both circumstances for urgent and routine referrals, Manchester performance is higher than the Greater Manchester and NHS England averages and performs at 100% of the waiting time national standard.

ADHD investment supported by MHCC to add clinical leadership to meet the GM specification. Creation of local ADHD non-medical leads to; ensure release of Consultant Psychiatrists time, establish closer working with GP's and offer cluster clinics within schools/neighbourhood settings. This will require re-banding of 3 CAMHS Practitioners from Band 7 to Band 8a.

The Autism pilot in south with additional transformation investment has seen a reduction in waits from 12 months down to 5 months. MHCC have sanctioned additional investment to roll out this success to the rest of Manchester.

Funding has been approved by MHCC to invest for a CAMHS School Nurse into Hospital School and recruitment of a CAMHS Occupational Therapist to provide additional support and provision. This will provide wider system benefits and earlier intervention and support for the CYP.

The occupational therapist will assess and provide psychosocial and sensory interventions at home, school or in the community, working with the child or young person to set achievable goals, which will give them positive life outcomes.

Manchester Hospital School is a maintained special school and teaches on the wards at most Manchester hospitals. All students at the school are placed by health professionals, not the Local Authority, because their health needs prevent them from accessing education in a mainstream school setting. Currently school nurse provision provided to the school equates to half to one day per week. The additional funding will provide **full time support** each day per week.

We continue to work with local and GM partners to support the implementation of the GM suicide prevention strategy and **Manchester local suicide prevention plan** and specifically to support the action plan for Children and Young People developed from the Manchester Safeguarding Partnership learning circle on suspected suicides of CYP in Manchester.

Data from the Public Health Outcomes Framework (PHOF) shows that the suicide rate in Manchester has reduced significantly in recent years. The latest published data for the period 2016-18 shows that the suicide rate in Manchester (8.7 per 100,000) is now lower than the England average of 9.6 per 100,000. However, this figure masks an increase in the number of suicides among people living in Manchester over the last calendar year from 30 deaths in 2017 to 45 deaths in 2018

MHCC have commissioned a number of training places to the education, health and care workforce in suicide prevention which will be implemented in 2020.

### Wider Community offer

- Integrated Community Response Pilot (extended for minimum 12 months to map against new thrive model of care)



- Digital offer from Kooth for Manchester



- TransAction 'Under 17s Trans Health Service Pilot'



**Integrated Community Response Service** pilot commissioned to an alliance of VCSE providers (42<sup>nd</sup> Street, Manchester MIND and Self Help Service) has been extended for 12 months to map against the new thrive model of care for Manchester and also the GM crisis care pathway provision. This will include a independent and formal review of the service. The current pilot to continue to provide excellent, rapid low level psycho social support and a step down model to prevent CYP escalating into crisis and attending A&E and the onto mainstream CAMHS. Targeted settings to continue at Alonzi House (Edge of Care Unit), Manchester Pupil Referral Units and the Early Help Hubs. The service had a full independent service review conducted last summer (commissioned to Anna Freud Centre) who articulated the benefits to the system and CYP and concluded that the service should continue to grow.

**42nd Street** supports young people aged 11 to 25; 42nd Street's bespoke 'young people' focused provision provides continuity and choice for a significant proportion of young people, including young adults experiencing mental health difficulties. 42nd Street has worked very hard on their infrastructure over the past 2 years implementing PCMIS and is now flowing data to the Mental Health Data Set (MHSDS) and contributing towards the National CYP Access targets.

**KOOTH** is a 24/7 early help offer using digital platforms including online counselling and therapies, moderated secure chat room facilities, messaging services, and information resources 24/7. The service is open 7 days a week and the messaging, self-help features, information & forums are available 24 hours a

day. The one-to-one counselling is available to children and young people from 12 noon to 10pm, Monday to Friday and 6pm to 10pm at weekends.

A blended delivery model includes full time integration officer who've ensured the offer is fully integrated across the Emotional Health and Wellbeing system including Manchester's early help hubs, high schools, CAMHs and social care. There has been concerted and dedicated activity by KOOTH throughout the city, with schools, GPs and youth organisations being the initial targets, with colleges latterly being approached. The service is commissioned for young people up to the age of 18 years.

Key highlights from data submitted as part of the contract delivery show over 52,000 logins to KOOTH, with 3692 chat sessions completed and 5724 direct messages initiated. A key highlight shows the engagement with Black And Minority Ethnic and hard to reach communities, which has resulted in 29% access registrations for the demographic which is far higher than mainstream CAMHS services

TransAction 'Under 17s Trans Health Service Pilot' has been commissioned in 2019 by MHCC with **The Proud Trust**. The project will help further develop research into the needs of trans young people and put forward recommendations for changes in services. Young people from the group will be trained to help deliver training/ inputs at events/training for professionals and to help raise awareness about the needs of trans and non-binary people.

## MHCC iThrive Grants Programme



MHCC commissioned **Young Manchester** with grant funding of £319,613 to deliver a **grants programme** to March 2021 that has engaged the VCSE sector and schools in supporting the mental health and wellbeing of children and young people in Manchester.

The purpose of the MHCC Thrive Grant Fund is to improve the mental health and wellbeing of children and young people with emotional health and wellbeing, mental health, learning disability and neuro disability challenges.

Applications were invited from the VCSE sector and schools and were required to address at least one of the objectives below:

- Enhance and complement the Thrive offer in the city for children and young people
- Increase awareness of support to professionals (health, education and social care) children and young people, and families and carers
- Promote uptake in support to children and young people with mental health, learning disability and neuro-disability needs
- Focus on self-care, enabling our children, young people and families to manage their own health

Applications were reviewed by a young persons' panel, an assessment panel and

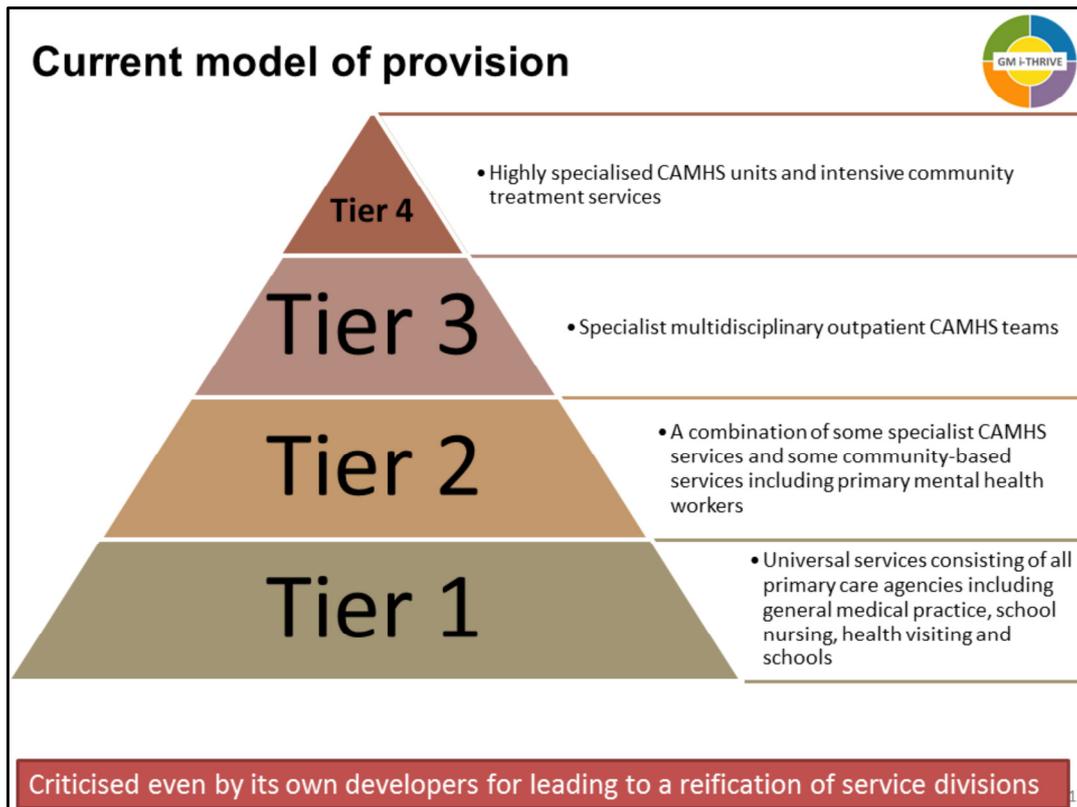
endorsed by the Programme Board. A longlist was achieved through consensus, encompassing the ranks, scores and comments of adult panel members, as well as the views of the young people's panel. A short list was selected with reference to the highest scoring ranked bids, whilst also considered as a portfolio - balancing for geography, spread of activities and meeting needs of diverse/ underrepresented groups.

Additional grant funding has recently been commissioned by MHCC to Young Manchester (March 2020) to facilitate further grant awards to schools and the VCSE sector based on existing panel recommendations.



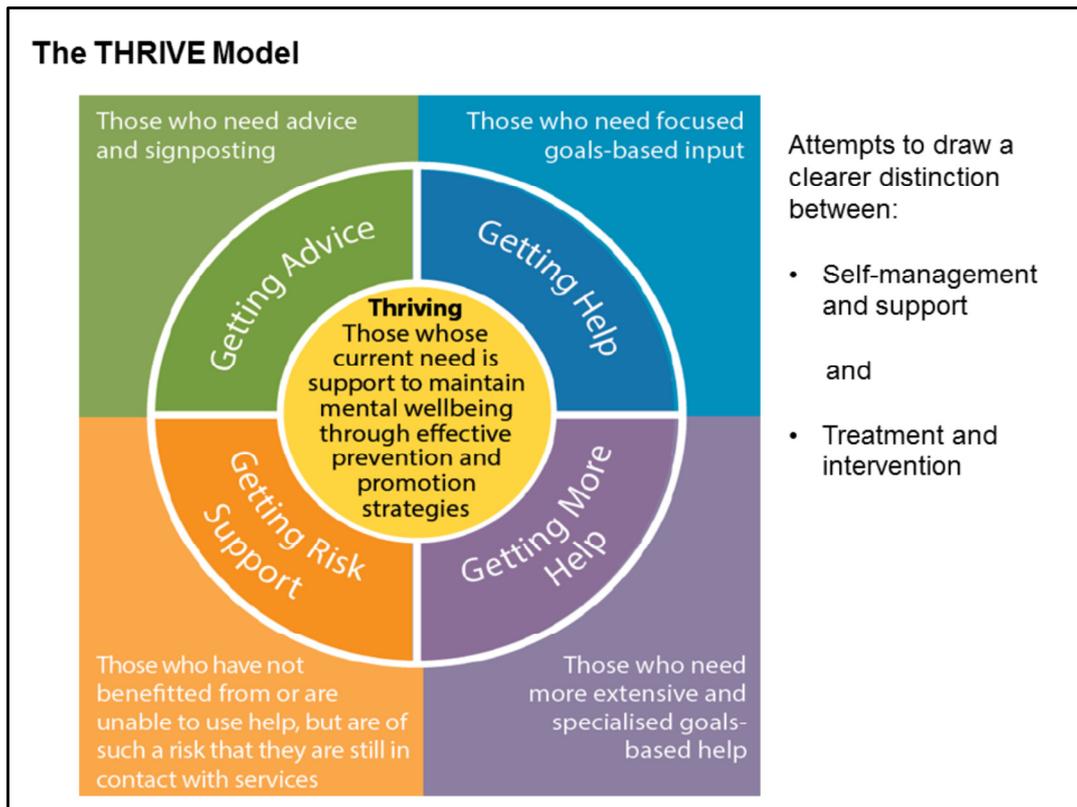
Manchester's Local Transformation Plan 2020/21 ambition works on a macro and micro level. Macro in that we are working with system partners to coproduce and implement a new delivery model of placed based care - '**M-thrive**'. Micro in that we are testing new types of service models within this model for specific groups of Children and Young People with complex and additional needs, Children and Young People with Autism and Learning Difficulties, Eating Disorders, Adverse Child Experiences, Edge of Care and who display oversexualised behaviour.

To ensure the successful delivery of our Children and Young People's Mental Health and Wellbeing Redesign Programme we have engaged with and captured the voices of our children, young people, their families and all other stakeholders.



The current 'tiered' system does not work effectively as a pathway for children and young people accessing emotional and wellbeing support.

It is very clear that implementing the i-Thrive model of care represents a very different way of conceptualising emotional wellbeing and mental health care. The predicted future demand and the feedback from our children, young people and their families about the priorities of care, leads to a conclusion that care needs to be more accessible at the earliest point of need so that we enable our children and young people to thrive.

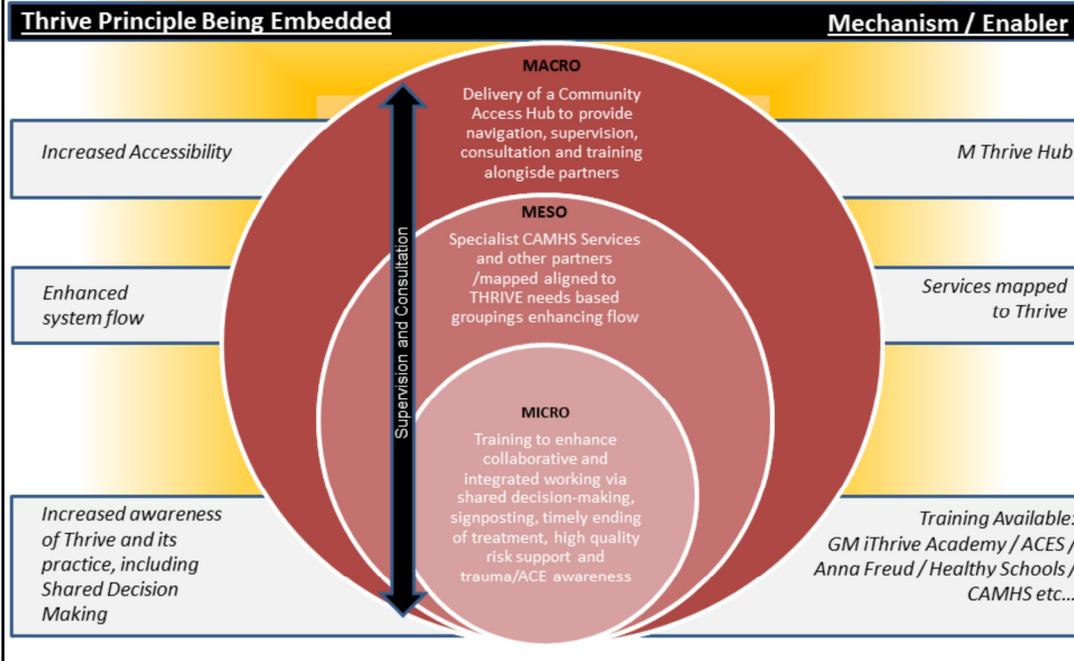


The THRIVE framework has been translated into a model of care called i-THRIVE. Manchester University NHS Foundation Trust’s CAMHS is one of ten i-THRIVE accelerator sites across England to implement the model. It is the vehicle to help us to develop a holistic, needs-led approach to service delivery, moving from a tiered system of provision to one where children, young people and their families are understood in terms of their current need as opposed to being defined by service thresholds and boundaries.

The implementation of the i-THRIVE model will enable a revitalisation of supportive, needs led, asset based approaches rather than the current tiered “escalator model” of care. The tiered model of care has been criticised as it can have the effect of creating barriers between services and fragmenting care, with service provision only being delivered for those who are regarded as having the highest risk, severity, and complexity.

- Getting Advice and Getting Risk Support – where Mental Health Services are offering Support
- Getting Help and Getting More Help – where Mental Health Services are offering Treatment

**Delivering THRIVE across the system**



## Thrive Hub Offer

The strategic vision is to establish a **Manchester THRIVE Hub** as a single point of entry, a front door, to Manchester's Emotional Wellbeing and Mental Health offer. This will involve having a Manchester THRIVE Hub Team based in three locality THRIVE centres across Manchester, i.e. Central, North and South locality.

District based hub in each of the Localities; Central, North and South Manchester.

Online / Digital Hub to support and compliment the locality offer.

Multi-agency team with 1 identity – M-Thrive Team.

Service available seven days per week, that will compliment and enhance the current youth support services and will be aligned with GM Safe Zone to create the extended access and flexibility alongside the Youth centres.

Extended opening hours - 8am to 8 pm (exact hours TBC)

Open Access – drop in/call in for a conversation rather than a paper referral.

Single seamless pathway into the Emotional Health and Wellbeing services in Manchester; NHS, Children's Services, Third Sector organisations overseen by the M-Thrive team.

This system wide model which will cover the whole of the city will provide emotional health and wellbeing, mental health promotion and prevention including in universal settings within all the neighbourhoods, educational settings and primary care networks.

The strategic vision is to establish a Manchester THRIVE Hub as a single point of entry, a front door, to Manchester's Emotional Wellbeing and Mental Health services. This will involve having a Manchester THRIVE Hub Team based in three locality THRIVE Hubs across Manchester, i.e. Central, North and South locality.

The implementation of thrive hubs will look to enable improved access, including sustainable reductions in waiting times whilst improvements in productivity and efficiency.

M-Thrive Hub will pull in resources from existing service provision, not limited to but including;

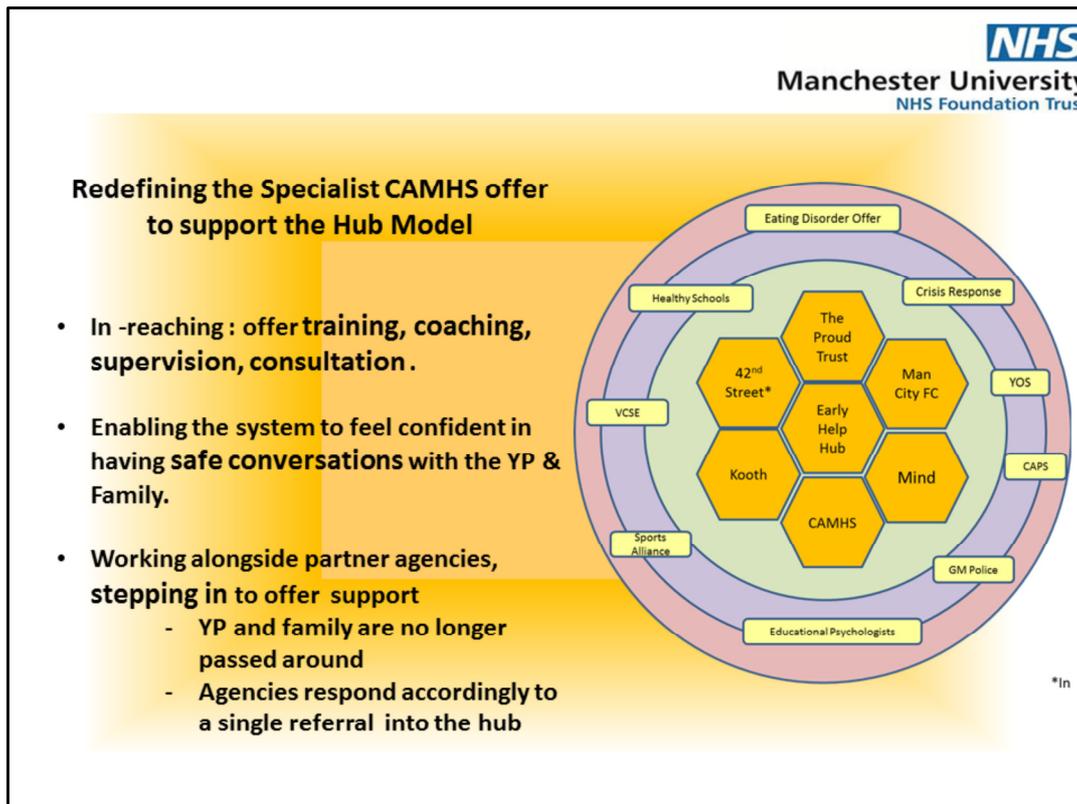
- Integrated Community Response Team, including Manchester MIND and Self Help Intervention Workers
- Kooth Outreach and Community Workers
- Early Help Hub Practitioners
- Creation of access and integrated pathways to:
  - The Proud Trust
  - Healthy Schools
  - Early Help Hubs
  - Children's Services
  - MFT CAMHS
  - 42nd Street
  - GM Crisis Services
  - The Princes Trust
  - Unicef
  - City in the Community (CITC)
  - Kooth
  - Manchester Mind
  - Self Help Services
  - Existing partners within each youth

The model will reflect a fully integrated multi agency approach which will work to establish a multi-agency, **single point of entry** to emotional wellbeing and mental health services, namely a 'M-THRIVE Hub' across each of the current 3 sectors for Manchester, namely South, Central (East and West sites) and North. These hubs will also out reach to all neighbourhood providers and structures.



City Wide services wrapping around the hub to provide a truly holistic mental health and emotional wellbeing offer to children, young people and families as a single point of access.

An M-THRIVE Partnership Board has been established, named Manchester THRIVE Partnership Board, the aims of which is to; steer and monitor the implementation of the CYP Mental Health and Wellbeing Redesign Programme, set parameters, ensure cohesion of the different strands of work and monitor progress against agreed objectives.



Specialist services will offer training and consultation through this model to the system to help prevent escalation at a local level and support people to maintain interventions.

It is intended that the hub will align with iTHRIVE principles to ensure that the system around CYP in at a neighbourhood level is more informed and confident in working with those CYP when they present with emotional health needs. One projected outcome is the release of capacity within existing specialist CAMHS teams who are already working with high demand and excessive caseloads.

Earlier diversion of support and intervention to community based services should allow clinicians within specialist CAMHS to focus on utilising high levels skills to offer interventions in a more timely manner with fidelity. Improving the appropriateness of referrals into specialist CAMHS will allow clinicians to move towards holding more optimum case-loads.

It is projected that this will enhance experience for both CYP and staff in specialist CAMHS, with more routine, goal-focused and evidence-based treatments being offered to more CYP who can benefit from this input.

## Thrive Hub Team

M-THRIVE navigators will ensure that children, young people and their families access the right offer for their needs;

The Thrive team will work alongside community place based services not traditionally acknowledged for their role in the improvement of good mental health and wellbeing, to enhance their offer. The aspiration is that young people and families will no longer be removed from their community, schools or colleges.

The Thrive team will enable services that families currently access to provide the appropriate support, prevent escalation or the need for a referral, improve access and reduce stigma.

The Thrive team ethos will be around enhancing and enabling services that CYP and families access to have safe conversations, to build capacity, build confidence of individuals ability to deal with mental health aspects and build the safety of the community.

The Thrive Team will offer consultation and training to support ACE informed communities in ensuring young people and families have the best opportunity to Thrive.

Shared resources across all agencies

A full business case was developed by MFT CAMHS alongside the Thrive Partnership Board (multi agency system partners from across Manchester. This has been formally approved by board members from Manchester Health and Care Commissioning in March 2020 and over the coming months we will see the development of the new hubs and workforce which is being led by MFT CAMHS.

## Children's Mental Health during Covid and future plans

- CAMHS service update during covid
- Different offer of provision i.e, video link with families
- Recovery planning from MFT CAMHS
- Additional provision during covid – Shout 24/7Text Service and Blue Ice App
- Improved crisis offer with Rapid Response Teams
- New Investment for Mental Health Support Teams in Schools

19

All Manchester CAMHS teams have duty open risk cases – Managing the list of children and young people at risk that are either continuing to be seen or have phone contact  
New cases are telephoned triaged to then be rated\* of face to face/phone or hold

\*rating all of the current caseloads into 1 – discharge 2 face to face 3 phone call and 4 can wait.

No issues have been advised from MFT CAMHS at this time during the crisis and MHCC are currently in liaison with the service to review the impact of COVID on access and waits. Quarterly performance meetings continue with CAMHS to look at live performance data/ demand /capacity and the MFT recovery plans.

CAMHS have also begun to video link families, and in cases where it is clinically necessary, have provided home visits using full PPE. It is widely accepted that following this pandemic there is likely to be influx of referrals to the service, from families that have delayed referring due to the pandemic.

Particularly during the COVID-19 Pandemic, patients and families are requesting text messages or FaceTime contact rather than telephone calls, as they feel more comfortable communicating this way. Similarly, it is often important that

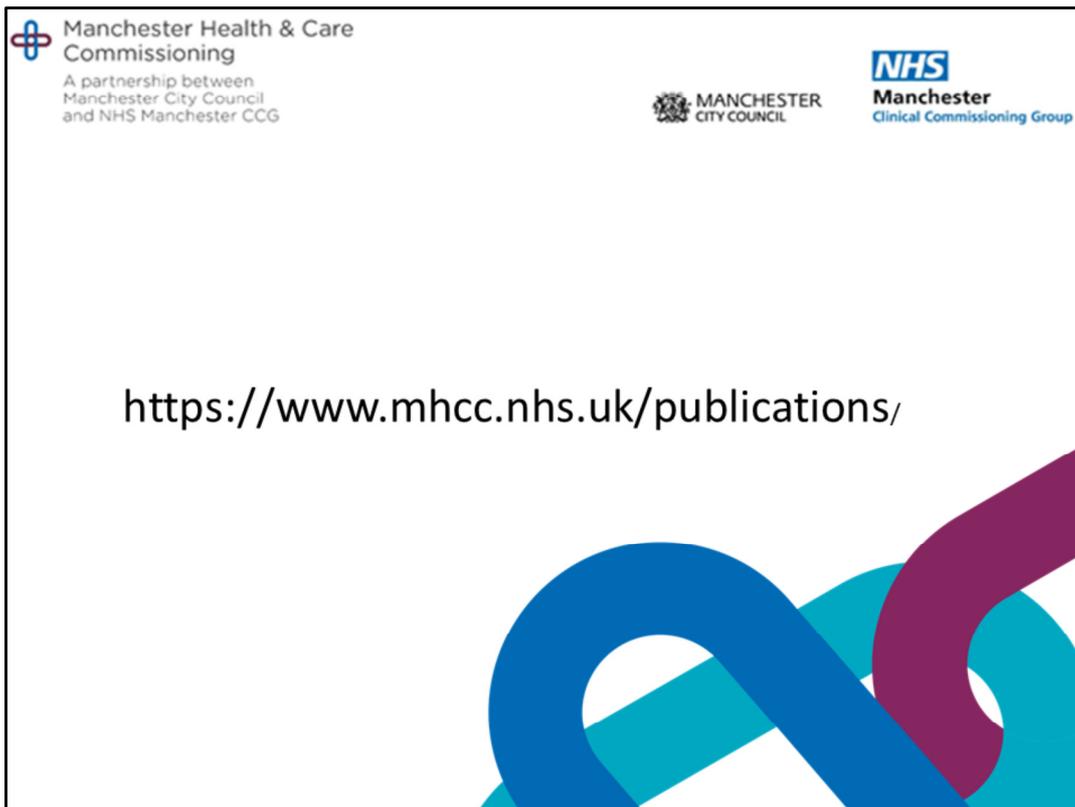
practitioners can visibly see patients in order to aid clinical assessment and FaceTime/Video Calling is a useful tool.

The Blue Ice App is a GM commissioned service which allows CAMHS clinicians to prescribe the 'App' to CYP who have self-harm issues. A limited number of licences have been commissioned by GM and the service is being tested in all localities.

Initially GM had launched the SHOUT 24/7 crisis text line for 16+. After discussion we agreed to open this up to all-age in line with SHOUT nationally which meant that all CYP in Manchester had access to the free service provision.

The pathway improvements for Rapid Response Team meant that access was mobilised for NHS111 and also direct referrals with the newly commissioned All Age Mental Health Liaison Teams based in each Manchester Acute Hospital A&E departments.

A major development for Manchester is that we have recently been approved (April 2020) for new funding from NHSE to develop new Mental Health Support Teams for schools in the city. This will increase direct MH support for schools with new Education Mental Health Practitioners and dedicated CAMHS clinicians. The mobilisation plans are currently being developed with CAMHS and VCSE providers and the intention for Manchester is to align to the new thrive hubs to provide a coherent offer for CYP, families and schools.



Link to latest publication of Manchester Child and Adolescent Mental Health and Wellbeing Transformation Plan 2019/20 Refresh document.

<https://www.mhcc.nhs.uk/publications/>