



## Report to the Children, Young People and Family Scrutiny & Policy Development Committee Monday 19<sup>th</sup> December 2016

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**Report of:** Jayne Ludlam Executive Director Children, Young People and Families (SCC) & Margaret Ainger, Clinical Director Children, Young People and Maternity (Sheffield CCG)

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**Subject:** **Sheffield's Emotional Wellbeing and Mental Health Transformation Programme, in response to Future in Mind.**

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### Report Overview

This report provides the Children, Young People and Family Scrutiny & Policy Development Committee with an update on the progress of Sheffield's Children and Young People's Mental Health Transformation Plan. The report has been presented to the Committee to enable it to scrutinise the plan, examine areas of challenging implementation and to support the transformation programme going forward.

Sheffield's transformation plan has been developed in response to a national government document called Future in Mind (2015). Future in Mind describes how children's mental health services need to be transformed around five areas:

- Access and Waiting Times.
- Accountability and Transparency.
- Caring for the Most Vulnerable.
- Developing the Workforce.
- Early Intervention and Resilience.

This report describes what we are doing in Sheffield to transform children's mental health services in these areas. The first part of the report describes the overall transformation programme, whilst the second part focuses specifically on the work that has been undertaken in schools. This approach was agreed after a meeting with the Committee's chair. Originally the Committee requested a report focusing on work in schools. However it was agreed that an overview of the whole transformation programme, as part of the report would be helpful, in order to set the context of the work that is taking place in schools.

### **Key Points**

A range of transformation programmes are taking place – over 25.

- Sheffield's Transformation Plan has been identified as one of the top 18 in the country.
  - Progress has been made across a range of areas since funding was awarded in January 2016, including the Healthy Minds Framework, the development of a suicide prevention pathway and the reduction of waiting times for specialist CAMHS services.
  - Sheffield has strong engagement of children and young people in the programme and a growing relationship with parents and carers.
  - However a number of challenges remain including shortage of clinical staff to recruit nationally, historic underfunding in children's mental health services, competing priorities for limited funding, commissioning issues between NHS England and local areas and the pace of change required for services which are facing increased demand.
  - There is a commitment and need to improve performance/quality issues within the current EWBMH provider (SC NHS FT) – CAMHS, as a result of the CQC judgement (October, 2016) for the Sheffield CAMHS provision.
  - Work in schools is a key element of the transformation programme, with the Healthy Minds Framework due to be rolled out to over 40 schools in 2017.
  - Commissioners are continuing to work with a range of providers and services to ensure that mental health support is enhanced for all Sheffield schools, as well as the schools which receive the Healthy Minds Framework.
  - Priorities for the next year include roll-out of the Healthy Minds Framework, redesign of specialist CAMHS services, integration and/or alignment of the transformation programme across other work areas such as Inclusion and Early Help and the provision of a section 136 suite at Becton to prevent children and young people ,who experience a mental health crisis, from being held in a police cell.
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**Type of item:** The report author should tick the appropriate box

Reviewing of existing policy	
Informing the development of new policy	<b>x</b>
Statutory consultation	
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Community Assembly request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	<b>x</b>
Other	

**The Scrutiny Committee is being asked to:**

See section 6 Recommendation

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**Background Papers:**

- [2013-14 Emotional Wellbeing and Mental Health Needs Assessment.](#)
- [Emotional Wellbeing and Mental Health Transformation Plan.](#)

**Category of Report:** OPEN

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**Report of the Executive Director Children, Young People and Families  
(SCC) Jayne Ludlam & Clinical Director (Sheffield CCG), Margaret Ainger**

**Sheffield's Emotional Wellbeing and Mental Health Transformation  
Programme in response to Future in Mind**

**1. Introduction/Context**

The decision to focus on emotional wellbeing and mental health follows the Scrutiny Committee's annual meeting held with young people in April 2016. This report outlines delivery of our local Future in Mind Local Transformation Plan (LTP) to redesign and improve services to support children and young people's emotional wellbeing and mental health (EWBMH). It includes a particular focus on early intervention and support in school settings to develop children and young people's resilience and support low level mental health issues.

Future in Mind is a national report which was completed by the Children and Young People's Mental Health Taskforce, in conjunction with the Department of Health, Department for Education and NHS England (NHSE) in March 2015. The report provides recommendations to make it easier for children, young people and parents/carers to access health and support when needed and to improve how child and adolescent mental health services (CAMHS) are organised, commissioned and provided. In Sheffield, CAMHS is provided by Sheffield Children's NHS Foundation Trust.

Across the country Clinical Commissioning Groups (CCGs) were given the opportunity to develop LTP's in order to access funding to deliver Future in Mind at a local level. In providing this opportunity to CCG's, there was an expectation from NHSE that LTP's would be developed jointly between CCG's and local partners such as local authorities. In Sheffield, our existing joint working relationships enabled the plan to be developed jointly between Sheffield CCG and Sheffield City Council, with the input of wider partners such as the voluntary sector, schools and children and young people.

In October 2015, Sheffield submitted its LTP to NHSE and following a rigorous assurance process was successful in receiving £1.3million per year for the next five years (subject to quarterly assurance monitoring via NHSE) to deliver our transformation programme, starting in January 2016.

This report describes the focus and priorities within our LTP and progress to date, with a specific focus on the development of our early intervention/school based work.

## 2. Future in Mind

### 2.1. Future in Mind Programme Delivery

Delivery of our Future in Mind programme has been underway for just over twelve months, commencing in October 2015. Following the assurance process by NHSE our Sheffield LTP has been cited to be amongst the top 18 plans (Education Policy Institute, 2016 - <http://epi.org.uk/wp-content/uploads/2016/08/progress-and-challenges.pdf>)

To help us develop our LTP, we completed a comprehensive needs assessment (<https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/JSNA.html>) for children and young people's emotional wellbeing and mental health locally.

This helped us identify gaps and priorities so as to ensure that redesign and transformation is implemented where needed and where it will have the greatest impact. We estimate that:

- 50% of mental illness in adult life (excluding dementia) starts before age 15 and 75% by age 18.
- In Sheffield it is estimated that approximately 7,000 children between the ages of 5-15 years have a clinically recognisable mental health disorder.
- 36% of Y10 young people in Sheffield have had feelings so bad that they couldn't cope at least once (Every Child Matters Survey)
- We also know that levels of self-harm and eating disorders are increasing in Sheffield

We also completed a self-assessment process against the priorities for Future in Mind as we developed our LTP, in order to identify areas for development. The results of our self-assessment are on page 39 of our LTP (<https://goo.gl/TkW4MQ>)

Consequently, we developed our Future in Mind Transformation Vision:

***In Sheffield we want every child and young person to have access to early help in supporting their emotional wellbeing and mental health needs. As a city we want to develop children and young people's resilience and coping strategies. We will transform the quality and availability of our services from early help through to specialist provision. We want services to be delivered in the community, closer to home, targeted to the most vulnerable and for fewer children and young people to require specialist mental health services.***

In order to deliver this vision, our transformation plan focuses on five key priorities:

- Access and Waiting Times.
- Accountability and Transparency.

- Caring for the Most Vulnerable.
- Developing the Workforce.
- Early Intervention and Resilience.

We have aligned our priorities to the themes of Future in Mind to ensure that we deliver Future in Mind’s recommendations. Each priority area has a defined work stream which oversees and progresses the areas of work associated with each priority. Each workstream has a range of professionals from different organisations and a named lead officer/manager who is responsible for the progress of the group. The focus of each workstream is outlined in the infographic.

We also have a robust governance structure which means that each workstream feeds directly into our local Emotional Wellbeing and Mental Health Executive Group which is jointly chaired by Sheffield City Council (Director of Children and Families) and Sheffield CCG (Head of Commissioning, Children, Young People and Maternity).

The Emotional Wellbeing and Mental Health Executive Group then report’s its progress to the Children’s Health and Wellbeing Transformation Board, and ultimately the Health and Wellbeing Board.

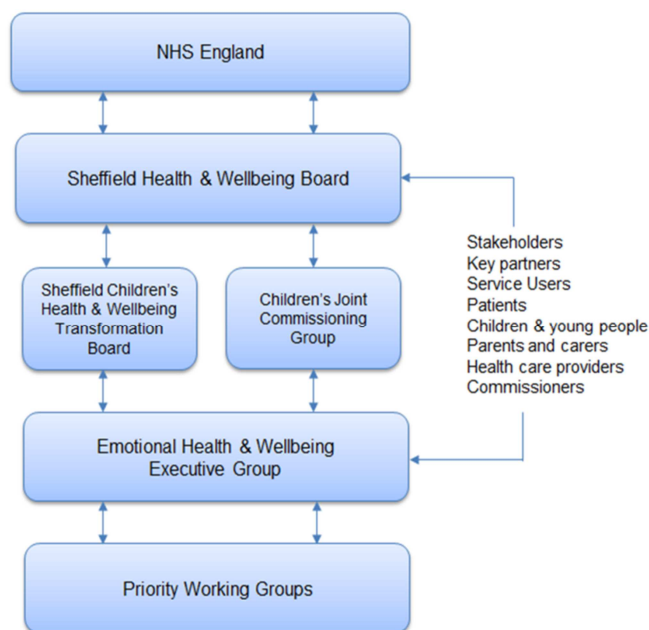


Figure 1 Overview of governance structure

## 2.2 LTP Work Stream Priorities



Figure 2 Areas of work for each priority area

## 2.3 Consultation and Engagement

Development of our LTP has been in partnership with children, young people, parents and carers. It has also included addressing priorities and concerns previously identified via the Healthier Communities & Adult Social Care Scrutiny & Policy Development Committee when it considered CAMHS in 2014. We have developed a number of approaches to facilitate and embed consultation and engagement in our transformation programme:

- Attendance at the student health and wellbeing board to engage and work with both the University of Sheffield and Sheffield Hallam University.

- Consultation with young people on a range of areas including the development of the Let's Talk Directory, the refresh of the LTP and the re-specification of CAMHS.
- Delivery of workshops to progress areas of programme, for example we have held three workshops on eating disorders to give stakeholders the chance to contribute to the development of an eating disorders specification for Sheffield.
- Development of the Young Commissioners programme with Chilypep which allows young people to take part in the commissioning process.
- Engagement with school governors through Learn Sheffield.
- Engagement with the Parent Carer Forum (PCF) through PCF leads and articles in the PCF newsletter. We are prioritising the expansion of our parent/carer engagement in 2017 which will include a Future in Mind workshop, and a survey to illicit the views of parent/carers on children's mental health.
- Engagement with the school sector through Learn Sheffield, the CAMHS School Link Pilot, the Interchange pilot and wider school based work that is delivered through Inclusion and MAST.
- February 2016 stakeholder engagement which allowed approximately 100 people from across the city to contribute to the development and delivery of the plan.
- March 2016 Health and Wellbeing Board public meeting where members of the public attended and discussed the progress of the transformation plan and issues that need to be addressed.
- Representation of children and young people on all workstreams and attendance of Chilypep at the Emotional Health and Wellbeing Executive Group.
- Children and young people have been involved in the development of our transformation plan and have articulated that work in schools is required to reduce stigma and promote support for pupils. We have recently launched a local campaign to raise awareness of mental health issues. <https://www.facebook.com/NotTheOnlyOneSTAMPoutstigma>

### **3. Transformation progress (including a specific focus on delivery of work in school settings)**

Our LTP refresh provides a comprehensive overview of progress for each of the Future in Mind Priority Work Streams. This document has previously been shared with the Scrutiny Committee and can be accessed via the following link:

<https://www.sheffield.gov.uk/caresupport/health/future-in-mind-transformation.html>



The following aims to provide a more detailed update on the development of work a number of priority areas, followed by a section focusing on the progress of work in school settings which is driven forward via the Resilience, Prevention and Early Intervention work stream.

### **3.1 Improving Access to Emotional Wellbeing and Mental Health Services (including waiting times)**

One of the key challenges is to improve how and when children, young people and families access mental health services. As a city we have high use of inpatient CAMHS beds in comparison to other local areas. For some children and young people clinical inpatient treatment is essential. However locally we need to develop a range of specialist support services for children and young people with acute mental health needs. Our transformation plan focuses on establishing a community based model of care to reduce the need for young people to stay in hospital. This includes the development of our Supportive Treatment and Recovery (STAR) Service with phase one due to be delivered from March 2017 by SC NHS FT

The STAR Service, previously called Home Intensive Treatment Service, aims to deliver clinical support in community settings, with the aim of preventing a child or young person requiring tier four CAMHS support. In the tier system, STAR is often referred to as tier 3.5, as it aims to provide a short period of intense community support for approximately 12 weeks for those children in young people in tier three, who are at risk of being referred to tier four.

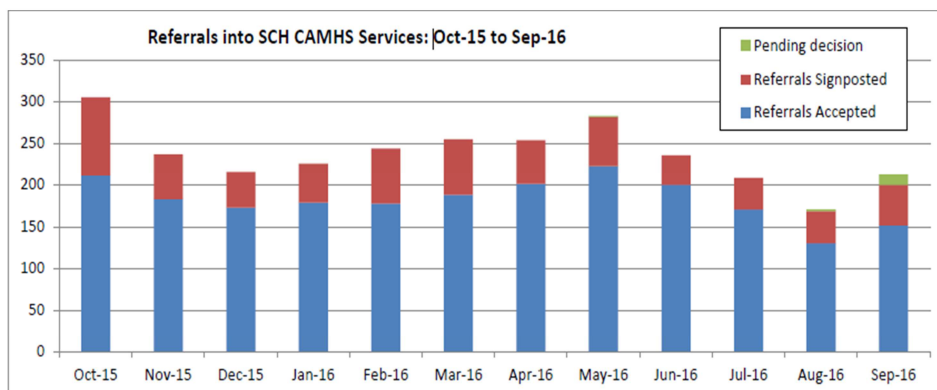
Phase one of our STAR Service will support children and young people with the condition of deliberate self-harm. This cohort of children and young people has been selected following an analysis of referrals into tiers three and four of CAMHS, which identified this group as having high needs which the STAR would be able to support effectively.

Sheffield has committed to ensuring 'parity of esteem' meaning that children and young people should have equal access to emotional wellbeing and mental health services as they do for physical health services. There is a significant focus on reducing waiting times for access to CAMHS with a commitment that all referrals are seen within 18 weeks (as for physical health referrals). As of end of September 2016, 12.4% of patients were waiting 18 weeks or more for their first appointment. This is an improvement from the position at the end of May 2015 (referenced in the 2015 Transformation Plan), which showed that 25% of patients were waiting more than 18 weeks for their first appointment. By the end of October 2016, the number of patients waiting 18 weeks or more has reduced to 5.46%.

CAMHS Monitoring Report - as at 30th September 2016

1. Referrals into Service:

Month	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Total
Total Referrals Received	305	237	216	226	244	255	254	283	236	208	171	212	2,847
Referrals Accepted	211	183	173	179	178	188	201	223	200	171	131	152	2,190
Referrals Signposted	94	54	43	47	66	67	53	59	36	37	38	48	642
Pending decision	0	0	0	0	0	0	0	1	0	0	2	12	15



In the last 12 months:  
 76.9% Referrals Accepted  
 22.6% Referrals Signposted  
 0.5% Pending decision

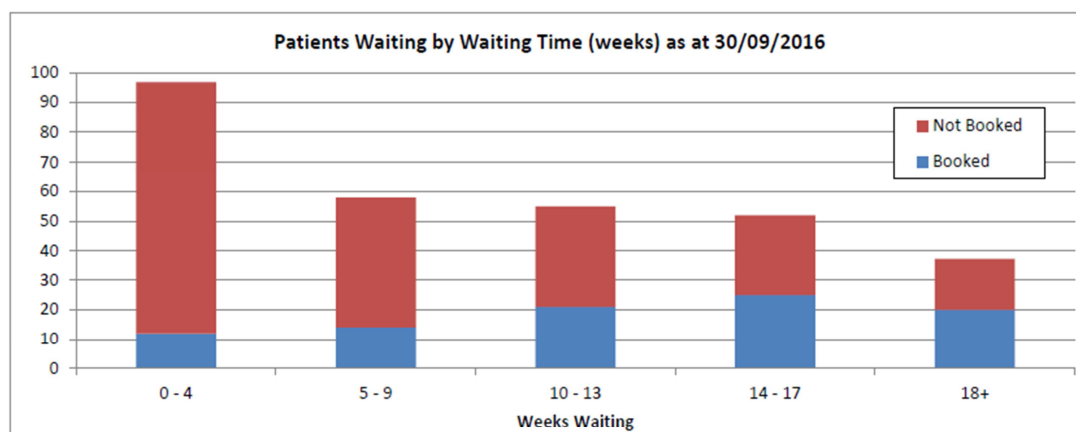
Figure 3 Referrals into SCH CAMHS Services Oct 15-Sept 16

CAMHS Monitoring Report - as at 30th September 2016

6. Patients waiting by Weeks waiting:

Weeks waiting	0 - 4	5 - 9	10 - 13	14 - 17	18+	Total	%
Booked	12	14	21	25	20	92	30.8%
Not Booked	85	44	34	27	17	207	69.2%
Total	97	58	55	52	37	299	100.0%
%	32.4%	19.4%	18.4%	17.4%	12.4%	100.0%	

The longest waiter is for the Community CAMHS Teams (Tier 3 Common Mental Health Conditions) and has currently waited 34 weeks.



45.9% of those waiting 18 weeks and over have not an appointment booked

Figure 4 Waiting time for Community CAMHS Team as at 30th September 2016

3.2 Eating Disorders

Future in Mind includes a specific focus on the treatment and redesign of services to support children and young people with eating disorders. Each financial year a specific financial allocation from our Future in Mind central

funding is ring fenced to be prioritised for improving eating disorders services which is subject to NHS assurance processes.

To develop our eating disorder specification for Sheffield, we are currently running three multi-agency workshops to engage Sheffield's numerous eating disorder providers in the development of the new specification. This approach is enabling us to produce a service specification for Sheffield which has been co-created with eating disorder providers and children and young people. We are aiming to have a service specification approved by the end of February 2017.

### **3.3 Crisis Care - improve crisis response**

Building work on the new section 136 suite at Becton will be by the end of December 2016. We have agreed a staffing model for the new provision with Sheffield Children's NHS Foundation Trust and a mobilisation plan has been agreed by partners and stakeholders. We anticipate this service will be in place at the latest by April 2017, with staff due to be in place at the start of March 2017 (to undertake four weeks of training prior to the suite opening). In the interim, an arrangement for the provision of a section 136 health place of safety for 16 and 17 year olds continues to be in place, through Sheffield Health and Social Care Trust. There have been no young people detained in a police cell under a section 136. We are also in the process of securing revenue funding for our innovative 'Crisis Café'; due to launch in 2018, this will be based at Star House in Sheffield city centre.

### **3.4 Parenting**

Sheffield currently delivers a range of parenting support to families, predominantly using two evidence based models which are reported as having amongst the strongest evidence based outcomes. These are the Triple P Positive Parenting Programme and the Webster Stratton Incredible Years models. Both programmes are based on social learning theory and cognitive behaviour therapy and offer a strong emphasis on relationships and communication between parent / carer and child, and building resilience in children. These approaches are endorsed by Future in Mind are an important element of our early intervention work.

Sheffield has also adopted a mixed model of evidence-based parenting delivery in order to best respond to multiple and changing needs of families. In addition to the two main programme suites, we have added programmes that cater for specific target groups such as, the "You and Me Mum Programme" for parents who have experienced domestic abuse.

This supports Future in Mind by enabling access at the earliest point and working with parents to promote emotional wellbeing. In addition, the delivery of a 'population' based approach seeks to effect a cultural change in the perception of parenting as a universal offer that supports and places value on parents in their role.

### 3.5 Workforce

Our workforce group is focusing on the development of a workforce development plan for Sheffield. This plan would apply to anyone who works with children and young people and would stipulate what mental health training that professional requires. The training required will vary depending on the level of contact that professional would have with children and young people, and their typical skill level. Figure 3 shows the draft workforce development model, with different levels of training depending on a professional's knowledge of mental health.

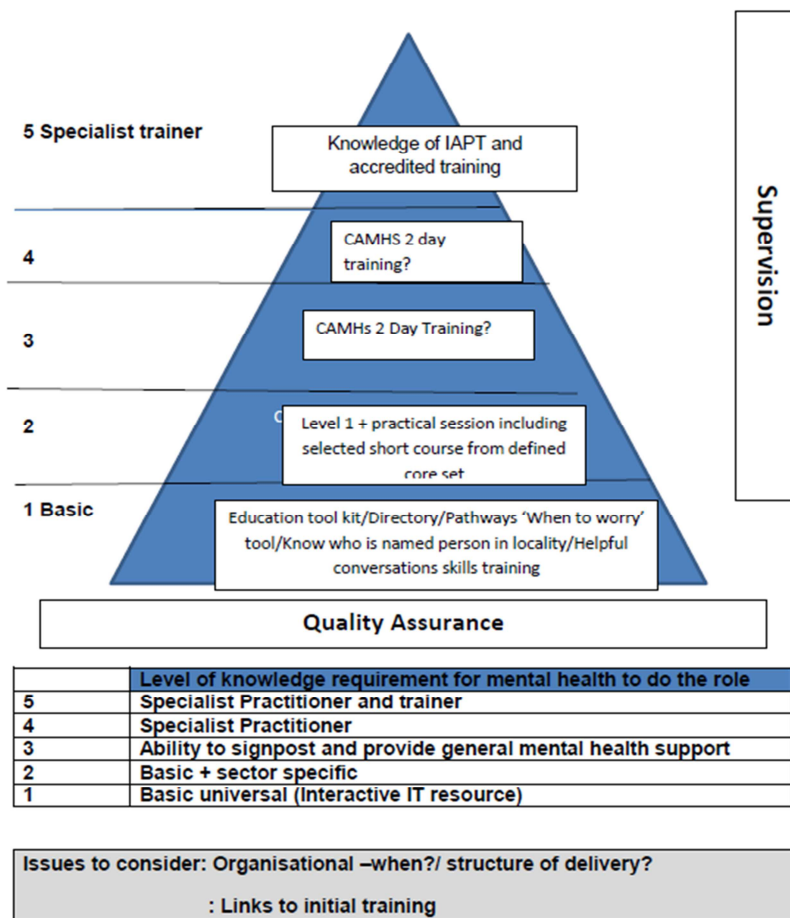


Figure 5 Draft workforce development model

Sheffield CAMHS also continue to be active members of the Children and Young People – Improving Access to Psychological Therapies (CYP-IAPT) programme, which forms part of the Transformation Plan. Dr Claire Pearson, is the service lead for Sheffield CYP-IAPT, and is also the clinical lead for CYP-IAPT in the North-East collaborative and a member of the National CYP-IAPT programme.

This year, Sheffield was part of a pilot to include Tier 4 in the CYP-IAPT transformation programme and was one of the few services in the country to take up this offer; Tier 4 has had two staff train on the service leads programme, one person trained as a systemic practitioner and two members of

staff train on the enhanced evidence based practise course (EEBP). In Tier 3 CAMHS we have had trainees in CBT, IPT and systemic practise this year. We have also trained two staff as IPT supervisors

Sheffield CAMHS have also formed a CYP-IAPT partnership with Sheffield City Council which has allowed Sheffield City Council to have two trained practitioners in parenting and four in EEBP, all with supervision from Tier 3 CAMHS this year. We continue in our partnership with Chilypep in terms of user involvement and this continues to be successful.

In the past few months, NHSE have launched the Principle Wellbeing Practitioner (PWP) programme. If Sheffield secures a place on this programme, we will have a number of PWP staff who will be funded by NHSE for one year. PWP's are low level mental health intervention workers, specialising in anxiety and depression. We are exploring a number of options for how PWP's could operate in Sheffield. If we are successful in securing PWP's, they will form part of our CYP IAPT programme and wider workforce transformation.

### **3.6 Transition**

The Emotional Wellbeing and Mental Health team has recognised that the local transition process requires further review and that improvements need to be made. There is a proactive multiagency Transition Group lead by the Emotional Wellbeing and Mental Health team. Local transition policies are to be audited for compliance and effectiveness between November to January 2016 and a transition specification is to be developed which will build on previous work and be undertaken by February 2017.

We have listened to, involved and learnt from young people and their families and understand what they want from their care. We have mapped their journeys and experiences to inform the process through Chilypep. We will utilise the existing national guidance to ensure young people are appropriately supported through their transition, we continue to develop services that are tailored to meet the needs of young people transferring from children's health services and include extra training for health care staff in caring for young people. We need to ensure GPs and other key professionals are more involved at an earlier stage in planning for transition across all age ranges.

### **3.7 Children and Young People's Suicide Prevention Pathway**

The care for the most vulnerable work stream has prioritised the development of the young people's suicide prevention strategy, producing a draft document which is out for consultation until the end of November. This includes the local vision for safeguarding young people through an early intervention and prevention strategy of developing emotional wellbeing support in schools and through a partnership approach to a range of services for vulnerable young people, including the development of a YIACS (Youth Information Advice and Counselling Service) a one-stop-shop for young people up to the age of 25 supporting access a range of health and wellbeing provision.

The strategy provides resources for professionals, young people and those affected by attempted or completed suicide. STAMP (young people's mental health ambassadors, supported by Chilypep) has contributed to the consultation and development of the strategy which is due to be launched in March 2017. Workforce training will be provided by Sheffield Safeguarding Children Board and CAMHS, including thresholds and referral pathways. Resources will be designed and developed for young people including information on where to access support in a crisis.

## **4. Work in Schools**

### **4.1 Context**

Transforming mental health support in schools is a long standing goal for Sheffield. In 2013-14 the first Interchange pilot was delivered in Park Academy. This pilot tested the impact of providing mental health counselling in schools. This pilot evaluated well, and a number of initiatives have been piloted following this to further test the best way to support mental health in schools. As a city, we have now endorsed the Healthy Minds Framework as the approach that we want to roll-out to schools. This section provides an overview on the various areas of work that is taking place in schools and our next steps.

### **4.2 Interchange Pilot**

From September 2015-July 2016 Sheffield City Council delivered the Interchange pilot in localities A, C and F2 (encompassing over 40 schools). This pilot scaled up the offer at Park Academy and was externally evaluated by the University of Sheffield. Elements of the pilot evaluated well, such as the counselling service provided and the support from all professionals to develop the model. However, the evaluation also found that a "whole-school approach" to mental health support was required. A whole-school approach means that mental health support is embedded across a school and is integrated into the daily lives of staff and pupils. This was not provided as part of the Interchange offer – which focused specifically on providing additional counselling support, rather than looking at the whole school system. Consequently, the decision was taken to end this pilot at the end of the school year in July 2016.

### **4.3 CAMHS School Link Pilot**

Sheffield is one of 22 areas in the country (and one of two in Yorkshire and Humber) who are implementing a national pilot scheme called CAMHS School Link, as part of our transformation programme. This is a national funded pilot by the Department for Education, the Department of Health, with match funding from Sheffield CCG.

The pilot involves 'in reach' from Child and Adolescent Mental Health Services (CAMHS) into schools, with funding used to deliver training and release CAMHS/school staff to take part in the pilot. Ten schools (4 secondary and 6 primary schools) have been taking part in the CAMHS School Link pilot.

The 22 pilot areas have all taken different approaches to delivering the pilot. In Sheffield, we have established a multi-agency steering group and we have used the pilot itself to develop and test our Healthy Minds Framework. This framework advocates a whole-school approach to mental health support that brings CAMHS staff, school-based staff and other professionals closer together to support children and young people. Section 4.4 explains this further.

#### 4.4 The Sheffield Healthy Minds Framework

The Healthy Minds Framework supports schools to make changes, develop a whole school model and create an emotionally healthy environment for children, young people and staff. Schools progress through the bronze, silver and gold elements of the Healthy Minds Framework, as outlined in figure 4.

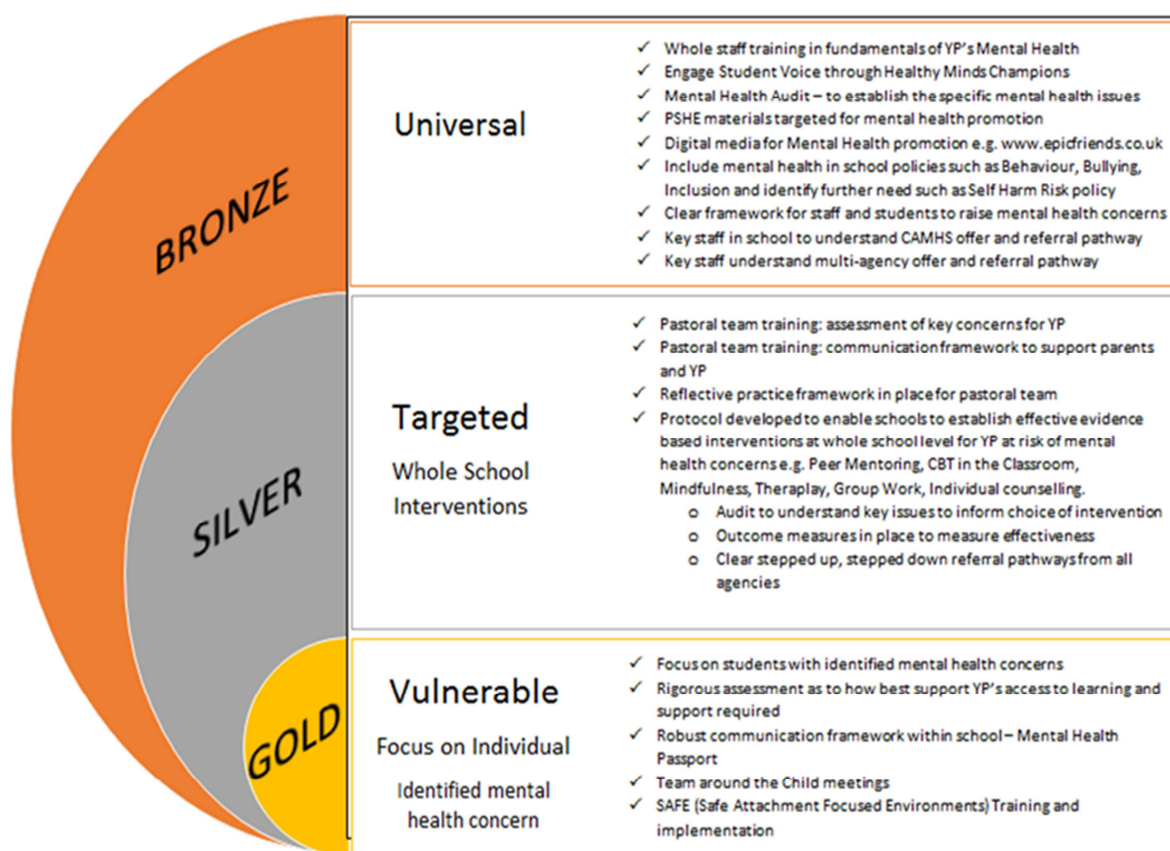


Figure 6 Sheffield's Healthy Minds Framework

The Healthy Minds Framework has been recognised nationally as good practice, with members of the pilot team speaking at numerous national events and also sharing learning with other areas. This success led to Sheffield being selected as one of the areas for specific focus in the Department for Education's external evaluation. The overall aim of the Healthy Minds Framework is to ensure that low level mental health needs are identified as early as possible and support is provided, whilst higher level mental health needs are supported into specialist services as effectively as possible. The Healthy Minds Framework goals<sup>1</sup> include:

<sup>1</sup> Please note these goals have not yet been formally agreed with the provider for the roll-out of the Healthy Minds Framework.

- Development of joint working relationships between schools and CAMHS professionals to support mental health in school.
- Improving relationships between schools, CAMHS and other agencies to enable joined up mental health support for children and young people.
- Improving understanding of the referral system for all professionals involved in schools.
- Reducing the number of did not attend's (DNA's) in CAMHS (for children/young people who attend a school where the Healthy Minds Framework has been implemented).
- Upskilling of school staff to enable them to manage mental health in schools as appropriate.
- Support schools who are commissioning additional mental health support to commission the support needed for their school population.
- Reducing the number of inappropriate referrals from areas with the Healthy Minds Framework.
- In the longer term, reducing the number of referrals into specialist CAMHS from areas with the Healthy Minds Framework.

Through our LTP we have committed funding to 'roll out' our Healthy Minds Framework and to sustain it. In the first instance the Healthy Minds Framework will be expanded to cover a further 40 schools, using a locality based model of delivery. SC NHS FT will be working closely with commissioners and schools to phase the 'roll out' of the programme and to enhance the reach of the work to as many schools as possible. There is a commitment to continue to roll out this work in a phased manner as the evaluation progresses and impact is demonstrated. We are also working with agencies such as Learn Sheffield, Inclusion Services and MAST services to identify how schools, who are not part of phase one of the roll-out, can also receive additional mental health support.

#### **4.5 Training for Schools**

Alongside the development of the Healthy Minds Framework, we have also commissioned free mental health training which every school has access to. This training was commissioned following a needs analysis and feedback from schools as focuses on three areas:

- Mental Health First Aid.
  - Provided by Chilypep, aims to equip school staff with the skills to support children and young people with mental health conditions, by giving them the skills to spot and support mental health problems as early as possible.
- Attachment Training.
  - Provided by Hope Attachment, this aims to give school staff improved capacity to support looked after children in school.



- Flower 125 Health Programme.
  - Provided by Flower 125, this programme aims to give school staff comprehensive training in supporting the health of children and young people in school – particularly emotional wellbeing and mental health.

All of this training has been provided free to schools for 2016-17, commissioner are currently working with schools and Learn Sheffield to identify how training can continue to be provided on a consistent basis in a future. The work of our developing the workforce workstream will also inform the future direction of this work.

#### **4.6 Let's Talk Directory**

In response to feedback received during the CAMHS School Link Pilot that it wasn't clear what emotional wellbeing and mental health services were available in the city, we commissioned the [Let's Talk Directory](#). This directory provides information on a range of services in Sheffield and the mental health conditions they support. This directory has been well received by schools and young people; it is the most downloaded item from the CCG's website in the past two months. We are planning to update the directory in January 2017 from the feedback we have received. In the longer term, we are exploring how we can improve existing directories such as the Sheffield Directory (Local Offer), to provide a single reliable place that professionals, children and young people can use to find what mental health services are available.

#### **4.7 Next Steps**

- Roll-out the Healthy Minds Framework in 2017.
- Work with Learn Sheffield, Inclusions Services, MAST and the voluntary sector to ensure that schools without the Healthy Minds Framework also have improved mental health support.
- Identify a single location for to list all emotional wellbeing and mental health services for children and young people.

### **5. What does this mean for the people of Sheffield?**

Successful delivery of the Future in Mind Transformation Programme should lead to improved mental health support and outcomes for the people of Sheffield. Benefits for the people of Sheffield include:

- A workforce which can provide consistent support for the emotional wellbeing and mental health needs of Sheffield's children and young people.
- Clear and reliable information on the mental health services that is available in Sheffield, with straightforward pathways to access support.
- Enhanced support and care for vulnerable children, including those at risk of committing suicide, those who are looked after and those of who

have multiple health needs such as learning disabilities and mental health.

- Improved support in schools, leading to improved emotional health and wellbeing in the school population.
- Redesigned specialist mental health services which are built around the needs of children and young people, and are more responsive to the needs of Sheffield.
- Reduced waiting times for specialist mental health services.
- Services that Sheffield people access will be more joined up, with Sheffield CCG and Sheffield City Council working closer together than ever before.
- Through our engagement approach, the people of Sheffield have a voice in the transformation programme and on-going delivery of services.

## **6. Recommendation**

The Committee are asked to:

- Consider the progress of the transformation programme so far.
  - Provide views on the areas of work.
  - Provide comments/feedback on how this work could be further developed.
  - Raise concerns if any areas of emotional wellbeing and mental health for children and young people do not appear in the LTP, but the Committee believes they should be.
  - Support the transformation programme going forward by using the group's influence to help support work with local, regional and national partners.
-