

## Health and wellbeing board

Rep: Kim Shutler, Chair VCS Assembly

25.2.20

### Children and Young People's MH

- Agreed a system review of Children and Young People's MH:
  - o Coherent pathway and clear communications for children and families
  - o Address waiting lists
  - o Provide parents with peer and external support
  - o Communications
- Key to note that the scope of the review is much broader than CAMHS
- Subgroup has been set up including Helen Ionannou as VCS Rep (Youth in Mind)
- Waiting lists are in 2 parts:
  - o Children waiting for assessment
  - o Children waiting for treatment
- Additional support offered to people on waiting lists including digital, training and therapy support
- Parents: a training package has been developed and will piloted shortly. Rollercoaster Foundation also doing some work to establish peer support network.
- Current access in school has been via School Nurses but with changes to 0-19 contract this needs to change.
- There is a clear action plan with tight timescales and a number of rapid improvement weeks are being undertaken. CYP and families have been involved throughout the process.
  - o Referral to assessment process (currently 256 days) – ambitions are to get this down to 14 working days. The new processes were implemented the week after the rapid improvement week.
  - o Every person to receive some communication within 5 working days – where appropriate this is a conversation with the child themselves.
- There is 650 people in the current backlog of waiting list. There is work going on as a system to review the people on this waiting list – checking in with children and families to understand in more detail what the needs are and whether CAMHS is the most appropriate support.
- Trailblazer work in schools – Bradford identified as one of 40 sites. We have 2: Bradford and Craven. Team have been recruited to and aim to deliver support and guidance within schools. Staff will be based with Born in Bradford.
  - o CCG have added in additional funding to enable the full city area to be covered (28 schools), and to also look at the 0-5 age range to support early intervention.
- Centre for Mental Health have been doing a review (3 phases) (Dec 19-March 2020)
- As of Dec 2019 there were 1236 children in care, almost half have a diagnosable MH disorder
- 1 in 12 5-19 yr olds have neurodevelopmental needs this equates to 10,111 CYP in Bradford
- 1 in 8 CYP 5-19 have a diagnosable MH disorder (nationally it is 1 in 10)
- Noted that there has been a lot of investment through Future in Mind (national policy) but this came with specific requirements for increased funding in some areas but others have not had the investment needed.
- New Long Term Plan looks at how we take a broader view and expand to 0-25 offer so that transitions are better covered.
- One of the ongoing challenges is getting a better understanding of current and future demand. One of the reasons is that we don't have a consistent data set across the system.
- Adverse Childhood Experiences action plan is being developed by Public Health.
- We now have an Intensive Home Treatment for CYP which is helping to reduce the number of CYP admitted to hospital out of area, and to reduce length of stay.
- Overall budget for CYP MH in Bradford and Craven has increased by 34% since 2015/16 but this has been focused on investment not necessarily reaching CAMHS core services.
- Overall Bradford Districts spend per head is lower than the national average currently.
- Identified that we need to agree at a system level some collective routine outcome measures.

- Highlighted that we need to make sure that general services are more autism informed so this is embedded throughout the universal offer.
- VCS provision within this was highlighted as very positive. Providers have reported that they are also experiencing increasing demands and operational challenges with workforce also challenges making onward referrals.
- Noted that there are challenges in terms of workforce and difficulties across the system in terms of recruitment and retention. I raised that there has been some good practice in terms of mental health alternative workforce eg peer support, youth workers etc but this needs to be scaled up at a system level. Susan Hinchcliffe (Leader of the Council) noted that there is a role for politicians in terms of government lobbying – eg around nursing bursaries. Brendan Brown (CEO Airedale Hospital) who leads the Workforce programme noted that we have been historically in danger about being too elitist with expectations of very highly qualified people for roles where this is not necessarily needed.
- Sasha Bhat (CCG/BMDC MH Commissioner) noted that we need to think holistically and upskill staff across the board.

### LGBTQ+ Inclusion Charter

- Andrea Allez (Chair) and Ann-Marie from Equity partnership (VCS) came to present on an inclusion charter.
- This is a focus on the customer facing side of organisations so differs from other charter marks eg. Stonewall and Rainbow which focus on workforce or individuals.
- Equity have done some research work on Trans Hate Crime.
- Referenced some recent research by Stonewall showing that hate crime and discrimination still issue
  - o 1 in 5 LGBTQ people reported that they have experienced hate crime in past 12 months
  - o 2 in 5 for trans people
  - o 1 in 8 trans employees have been physically attacked by a customer or other employee
  - o Half of trans people have thought about taking their own lives in the past year
- Key aspects:
  - o Environment is safe and welcoming for LGBTQ people
    - Including welcome sign, specific resources, non-gender toilets
  - o Staff undertake specific training
    - 80% of staff and volunteering to undertake
    - Regular refreshers
    - Staff and volunteers willing and able to challenge discriminatory behaviour
  - o Organisational development:
    - LGBTQ inclusive standards included in policies and procedures
    - Specific focus on inclusion
    - Monitoring and evaluation to support improvement
  - o Comms and engagement
    - Efforts made to engage with LGBTQ community
    - Support co-production of services
    - Promotion of LGBTQ specific services
    - Feature services within LGBTQ comms/media
- This is focused on the whole organisation ie not just focused on employers
- The 'ask' is to conduct a small scale pilot with VCS and statutory organisations
  - o £10,000 for the pilot (3 organisations) – 1 year programme
- There was significant support in the room for this work with some questions about how we might scale this up.

### 2040 vision for our District

- Build on 2020 vision
- Aim to set the direction for the whole District, and whole partnership vision (not just BMDC)
- To be agreed by Oct 2020 and owned by Health and Wb Board
  - o Engagement
  - o Evidence

- Existing policy framework
- Focus on what people like about where they live now, what they would like 2040 to be like and how they feel they can contribute
- Emerging themes:
  - Seizing economic opportunities
  - World class life-long learning
  - Healthier happier District
  - Cleaner and greener District
  - Friendly city: altruism and civic pride
  - Civic participation and democracy
  - Child friendly
  - Housing and homelessness
- Save the date! 8<sup>th</sup> June there will be a big summit!