

Children and Young People Mental Health and Emotional Wellbeing Plan

Transformation Plan Refresh – 24/25 and 25/26

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Abbreviations Used In This Document

Abbreviation	Explanation
ADHD	Attention Deficit Hyperactivity Disorder
ASD	Autistic Spectrum Disorder
CYP	Children and Young People. Note throughout this plan we have tried to write Children and Young People in full.
CAMHS	Child and adolescent mental health services
ICB	Integrated Care Board
ICS	Integrated Care System
LGBT	Lesbian, Gay, Bisexual and Transgender
Local Care Partnerships (our Places)	Local care partnerships including NHS providers, voluntary and community sector partners, and local authority partners in Bexley, Bromley, Greenwich, Lewisham, Lambeth and Southwark
MHSDS	Mental Health Services Data Set
MHST	Mental health support teams
SEL	South east London. Covering boroughs Bexley, Bromley, Greenwich, Lewisham, Lambeth and Southwark.
SLAM	South London and Maudsley NHS Foundation Trust
SLP	South London Mental Health and Community Partnership Provider Collaborative
THRIVE	The THRIVE Framework for System Change .
VCSE	Voluntary, community and social enterprise organisations

Introduction

Introduction (1/2)

What is this document about?

This document describes how as a local system we plan to improve the emotional wellbeing and mental health of all children and young people (CYP) across South East London Integrated Care System (ICS). This document was first published in 23/24 and has been refreshed for 2024/25 and 2025/26.

This document is split into three key sections:

- The first section sets out our position as an ICS in developing and delivering children and young people's mental health and emotional wellbeing services as of March 2024. This section provides a summary of our local need and demographics, our current service offer, and any challenges we are experiencing in providing the best care possible to our children and young people.
- The second section sets out our vision for children and young people's emotional wellbeing and mental health service transformation and our core service improvement priorities for 2024/25. The ambitions build on those outlined in the 2022/23 and 2023/24 transformation plan.
- The third section outlines our plans for delivery of our ambitions, i.e. the specific actions we will undertake across the ICS and through our Local Care Partnerships to deliver improvements for children and young people's mental health and emotional wellbeing services.

This plan was signed off by the South East London Integrated Care Board (ICB) on 17th July 2024.

Introduction (2/2)

How have we developed this document?

Since 2015, each local system has been expected to set out how they would use their resources and investment to improve children and young people's mental health across the 'whole system'. Our previous plans, referred to as our CAMHS Transformation Plans, have historically been heavily focused on mental health services provided by NHS Trusts. As an ICS we decided to take a different approach to describing our transformation objectives regarding children and young people's mental health:

- 1. Broadening our view of children and young people's mental health services:** As an ICS we work in partnership with health, local authority and other organisations (such as the voluntary sector) in south east London. This plan, therefore, reflects our intentions as a system, acknowledging that children and young people's mental health needs may best be served by different therapeutic offers in and outside of statutory services and that the needs of children and young people may first be identified by professionals across health, social care and educational settings. For this reason, our plan considers provision across a range of services including Children and Adolescent Mental Health Services (CAMHS), voluntary, community and social enterprise organisations (VCSEs) and local authority partners.
- 2. Expanding the delivery timeframe of our plan:** We recognise that in order to make sustainable, transformational change to services and continually improve outcomes for our Children and Young People, our transformation plan needs to focus on a longer time frame. Therefore, the first iteration of this plan was developed and published in March 2023 and included an overarching vision with high level delivery ambitions to take us up to the end of 2025/26; this version reflects on progress in delivering on the first iteration of the plan and includes updated deliverables/priorities.

The plan has been produced based on locally coproduced plans developed by Local Care Partnerships and provides a high-level summary across the ICS. Each of our Local Care Partnerships holds an action plan for their local partners. In developing our ICS plan we have taken into consideration national policy objectives and expectations including the ambitions for children and young people's mental health services within the NHS Long Term Plan, as relevant to our ICS.

Understanding Our System

Our Demographics

South east London has a population of just over two million people who live across six boroughs (Bexley, Bromley, Greenwich, Lambeth, Lewisham, Southwark); approximately 400,000 are under 18 and 600,000 are under 25. Bromley has the largest children, young people and young adult population of the south east London boroughs, and Bexley has the smallest.

- South east London is home to an ethnically diverse population with significant variation between boroughs. **The proportion of people who are Black or multi-ethnic ranges from 19% in Bromley to 46% in Lewisham.**
- South east London has a higher-than-average proportion of residents who identify as lesbian, gay, bisexual, and transgender (LGBTQ). **Lambeth and Southwark have the second and third largest LGBT population in England.**
- Poverty and deprivation are key determinants in poor mental and physical health outcomes. One in five children live in low-income homes. **Four of the six boroughs (Lambeth, Southwark, Lewisham and Greenwich) rank among the 15% most deprived local authority areas in the country.**
- **All south east London boroughs are above the estimated national modelled level of children in households with all 3 of so called 'toxic trio'.** The national estimated rate is 8.7 per 1000 0–17-year-olds versus 12.9 in Southwark (highest number of ACE-related indicators above national average in London), 12.2 in Greenwich, 12 in Lambeth, 11.9 in Lewisham, 10 in Bexley, and 9.5 in Bromley (accounting for an estimated 4,500+ children in south east London).



Figure 1: Map of south east London boroughs

Mental health need in South East London

Most lifetime mental disorders develop during childhood and adolescence with 50% of mental disorder beginning by the age of 14 and 75% by age of 18. Mental health needs can continue into adult life, impacting the individual throughout the life course, without the right support. In south east London there are at least 50,000 8-19 year olds living with mental health needs.

- The most recent national [survey of mental health in children and young people](#) in England found that 1 in 5 CYP aged 8-16 year olds have a 'probable mental disorder' in 2023 compared to 12.5% in 2017, and 23% of 17–19-year-olds had a 'probable mental disorder' in 2023 compared to 10.1% in 2017 highlighting the continuing legacy of the COVID-19 pandemic.
- The likelihood of developing a mental disorder will be impacted by physical, social, economic and environmental conditions, coupled with individual characteristics and behaviours, which means the national population prevalence figures cannot be universally applied to the boroughs; however, applying NHS Digital figures would indicate that there may be around 50,950 8-19 year olds living with a probable mental disorder living in south east London.
- The total number of CYP living with a mental health need across the boroughs is likely much higher once you include mental health need in those under 8 years old and account for increased mental health need associated with areas of higher deprivation in inner London Boroughs.

	Bexley	Bromley	Greenwich	Lambeth	Lewisham	Southwark
No. of CYP aged 8-16 (2021 census)	29,552	37,418	32,367	26,958	30,962	28,559
No. of CYP aged 17-19 (2021 census)	8,171	9,719	9,603	9,232	9,333	10,724
Estimated prevalence 8-16 (20.3% NHSD, 2023)	5999	7596	6571	5472	6285	5797
Estimated prevalence 17-19 (23.3% NHSD, 2023)	1904	2265	2237	2151	2175	2499
Total estimated population with mental health needs (8-19)	7903	9860	8808	7624	8460	8296

Our Current Mental Health and Emotional Wellbeing Offer

Children and Young People’s Mental Health services in south east London are provided by two NHS trusts (Oxleas NHS Foundation Trust and South London and Maudsley NHS Foundation Trust) and a number of voluntary sector and independent providers.

There are a range of mental health and emotional wellbeing services delivering evidence-based care to children and young people from universal services focused on early identification and prevention through to specialist inpatient services.

However, there is not always parity in provision of services across boroughs in south east London. While some variation in services is warranted based on local need, there are some services we would like to scale up or improve the offer of for all children and young people in South East London. In addition, not every borough has a single point of access for children and young people’s mental health services. This can result in confusion for referrers and create delays in young people and families finding the right service.

We are working on developing clear end-to-end pathways of care from mental health promotion and early intervention (including improving integration with primary care) through to specialist inpatient care.

As part of this work, services in our system are working towards implementing [the THRIVE Framework for System Change](#). That means that our pathways and care offer is being organised to follow the THRIVE framework: Getting Advice, Getting Help, Getting More Help, Getting Risk Support.

e.g. universal provision, early intervention, mental health promotion

e.g. targeted low intensity provision



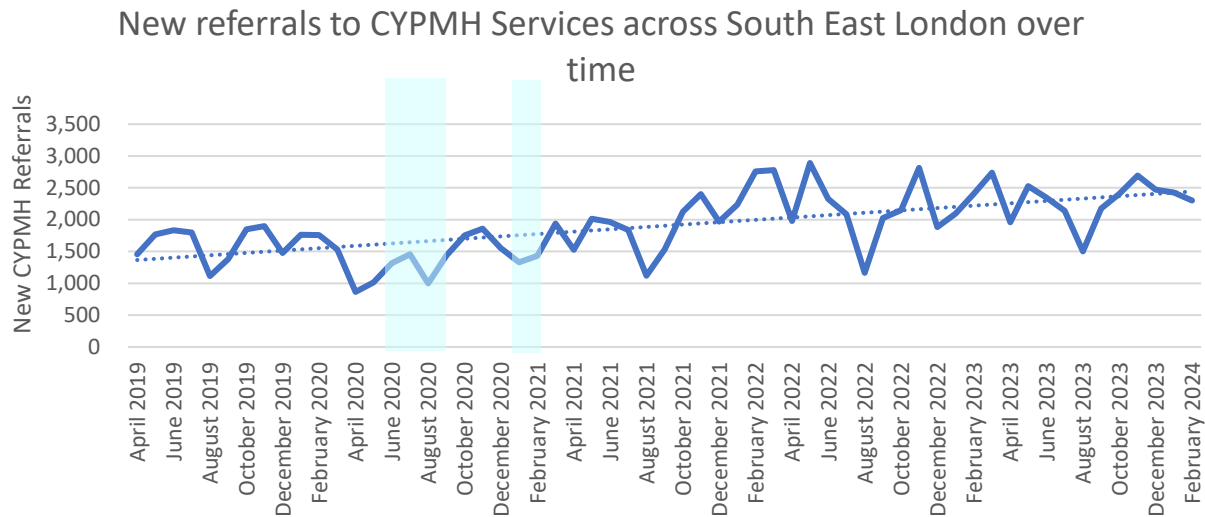
e.g. interagency collaboration (e.g. AMBIT)

e.g. specialist CAMHS and inpatient services

Demand for Our Services

Demand for children and young people’s mental health and emotional wellbeing services is at its highest level in south east London. Although rates of referrals have now begun to stabilise across most pathways post the Covid-19 pandemic, services are struggling to respond to the higher levels of demand and complexity of presentations in the face of ongoing national workforce challenges.

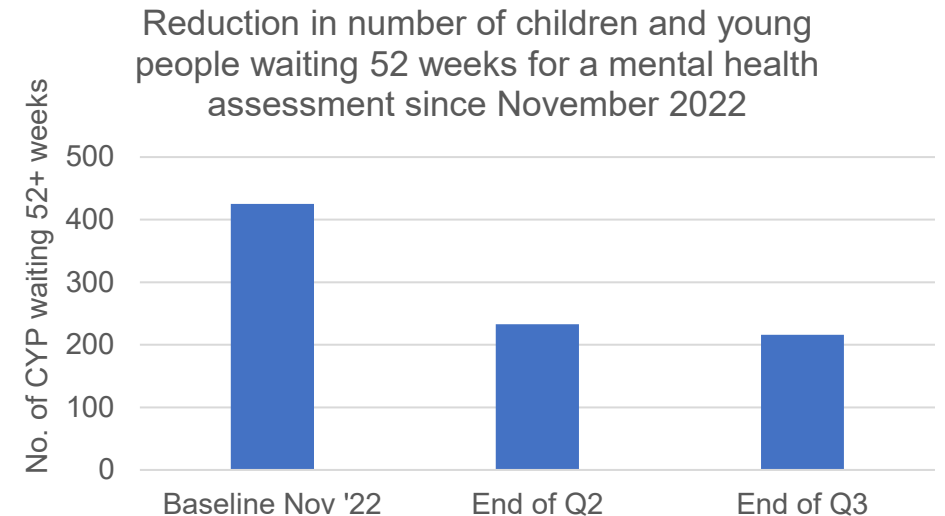
- Many teams and services experienced significantly higher rates of referrals after the national lockdown (for example, there was a four-fold increase in urgent referrals to the children and young people’s eating disorder service), which are largely now stabilizing although some pathways continue to experience significant pressures (for example, neurodevelopmental pathways and specialist avoidant restrictive food intake teams) .
- Services report that children and young people presenting now have a greater number of co-existing needs which may benefit from longer term therapeutic support, which means young people are not being discharged at the same rates as before.



Access to services

We continue to increase access to children and young people’s mental health services across South East London; however, with the rise in demand for services and the increased complexity of those presenting, we continue to experience delays in timely access to care and challenges for children, young people and their families who may need interim support.

- While access to children and young people’s mental health services continues to increase, we are aware that there are many who are waiting to access care or are not engaged with services. Specialist CAMHS services currently support around 30% of children and young people with a mental health need. Voluntary sector services, primary care, Talking Therapies and mental health offers in schools provide additional support, but little data is available to understand how many children receive mental health support through these other services.
- Increased demand, complexity, and workforce shortages mean that many children and young people are now having to wait a long time to access care. Reducing waiting times for access to children and young people’s mental health services is a priority for south east London.
- At the start of 23/24 there were too many children and young people waiting more than 52 weeks for a mental health assessment with CAMHS. Significant reductions have been made in reducing waiting times in some pathways/services; however, many children and young people are still waiting too long to access care and support.



Our Workforce

We have invested significant resource into the expansion of the mental health workforce in South East London over recent year, however, nationwide there are challenges in recruiting and retaining staff for certain roles and South East London is also experiencing these pressures.

- Across south east London there has seen an increase in the number of professionals invested in to provide mental health and emotional wellbeing support to children, young people and their families both in NHS and voluntary sector services. New key areas of expansion include the establishment of Mental Health Support Teams (MHST) across each of the six boroughs.
- We are listening to feedback to children, young people and their families about the types of professionals they find it helpful to engage with and we are trialling and developing new models of care.
- However, the NHS is facing significant workforce challenges and staffing for children and young people's mental health services in south east London are no exception. Retention of the mental health workforce has experienced challenges over the past years, but this has been exacerbated following the Covid-19 pandemic and has worsened through the cost of living crisis.
- Vacancy rates vary by provider, team and staff group, with some staff groups experiencing large vacancy rates. For example, at Oxleas NHS Foundation Trust highest vacancy rates are reported for psychological therapists whereas for Oxleas NHS Foundation Trust, vacancy rates are highest for nursing posts. Despite expansion of MHSTs across south east London, recruitment and retention in these teams is a key challenge for the system. As of March 2024, there were 13 Whole Time Equivalent (WTEs) vacancies of Education Mental Health Practitioners, and in total across all MHSTs there are vacancies that equate to the total of three teams worth of vacancies. This significantly impacts on the number of children and young people that can be supported through these services. We continue to actively engage in national and regional training and education programmes to further develop this workforce. .

Inequalities in Access, Experience and Outcomes

South east London has a highly diverse population and we are aware that not all children and young people and their families have equal access to, outcomes and experiences of mental health care across the ICS, often on the basis of ethnicity. As a system, we aim to commission services that are anti-racist, anti-discriminatory and inclusive to the diverse needs of our communities.

- ICBs are expected to tackle inequalities in outcomes, experience and access. This plan aims to deliver care improvements to benefit any child and young person aged 0-25 across south east London accessing mental health and emotional wellbeing services.
- We are working to ensure that all commissioned children and young people's mental health services pay due regard to the needs of individuals with respect to their identity (protected characteristics as outlined in the Equality Act) and make efforts to support to the most vulnerable (such as those often socially excluded).
- Data from the NHS Mental Health Services Data set, which has known data quality issues for our providers, indicates that as of March 2024, 20,240 children and young people accessed treatment for their mental health in south east London over the preceding year. Available data indicates:
 - Males experience longer waits to access care compared to females. There is a marginally higher proportion of males on the CAMHS caseloads compared to females (53% vs 47%). These trends are thought to be due to the higher proportion of males being referred to neurodevelopmental pathways, where the longest waits are currently experienced across south east London CAMHS teams, and where people may be maintained on team caseloads for longer periods of time (e.g. for ongoing medication titration, for example).
 - While access by ethnicity varies by borough, there does not appear to be evidence to suggest that across south east London Black children and young people are under-represented in CAMHS, but children and young people of an Asian background may be. Further investigation is warranted to explore this including by considering the prevalence of different groups (the NHS Digital 2023 population-based survey found that White children and young people were more likely to report mental health needs than children and young people of other ethnicities) and Place based variation.

Note: Data availability on access by other protected characteristics is limited. We are working with providers to improve their data recording and validation across protected characteristics so that we can better understand whether there are any inequalities in access to and outcomes of care for certain groups.

Delivery of the Long Term Plan Ambitions for our ICS

We have seen an increase in children and young people’s access, including through Mental Health Support Teams; however, levels of access are still lower than planned. This is due to several factors including (i) ongoing challenges in workforce recruitment; (ii) increased acuity of presentations meaning services are not discharging young people at the rate previously; and (iii) data quality issues meaning that some provider activity is not being reported via the national data set.

Children and young people’s eating disorder service access recovered strongly following a low after the Covid-19 pandemic, returning to >95% for both urgent and routine referrals in 23/24. Staffing changes have meant that there will be an anticipated drop in activity at the start of 2024/25 but a plan is in place to ensure access returns to planned levels in-year.

	Ambition for our ICS 23/24*	Ambition for our ICS 24/25	Delivery
CYP access (1 contact, rolling 12 months)	27,390	24,017	19,995 (of which 1,705 MHSTs) (Jan '24)
CYP Eating Disorder waits urgent (quarterly)*	>95% receive NICE concordant tx in 4 wks of 1 st contact		**
CYP Eating Disorder waits routine (quarterly)*	>95% receive NICE concordant tx in 1 wk of 1 st contact		66%

During 23/24 we also made plans to deliver on the national ambition for every local area to have a crisis home treatment team across all of south east London. While this service was already available to residents of Lambeth, Lewisham and Southwark, in 24/25 this will be available in Bexley, Bromley and Greenwich.

*Ambition for our ICS is in line with the national standard, as per the NHS Long Term Plan

** National data for urgent waits currently not published for south east London.

Our System Investment To Date

CYPMH Transformation Plan - Summary
South East London ICS

	South East London ICS				
	2020/21 £	2021/22 £	2022/23 £	2023/24 £	2024/25 £
NHS Provider contracts					
CAMHS	£16,149,866	£17,582,630	£19,654,336	£22,844,286	£23,876,468
CAMHS Eating Disorder	£1,908,561	£1,992,273	£2,637,072	£2,735,435	£2,757,318
CAMHS Mental Health block contract baseline - SLaM	£18,058,427	£19,574,903	£22,291,407	£25,579,721	£26,633,786
CAMHS	£12,437,146	£13,350,447	£14,804,741	£16,468,412	£17,292,942
CAMHS Mental Health block contract baseline - Oxleas	£12,437,146	£13,350,447	£14,804,741	£16,468,412	£17,292,942
Perinatal - SLaM	£3,724,277	£4,057,749	£5,237,192	£5,837,916	£5,884,619
Perinatal - Oxleas	£1,438,981	£1,980,024	£3,066,027	£3,383,177	£3,410,242
Perinatal - Total	£5,163,259	£6,037,773	£8,303,219	£9,221,093	£9,294,862
Contract Budgets Sub Total	£35,658,831	£38,963,123	£45,399,367	£51,269,226	£53,221,590
Other ICB Spend					
Borough Based Budgets	£910,260	£1,219,196	£1,941,163	£2,286,716	£2,890,993
CAMHS Transformation Funding	£766,367	£1,021,870	£760,394	£800,380	£1,035,645
Kooth	£482,400	£482,400	£475,081	£458,333	£488,780
ICB Contribution to LA	£1,352,400	£1,352,400	£1,302,083	£1,353,468	£1,357,031
Empowering People, Empowering Communities (EPEC)	£0	£0	£177,650	£260,950	£296,592
Health & Justice Liaison & Diversion	£508,000	£511,000	£459,207	£511,000	£513,353
Borough Budgets Sub Total	£4,019,427	£4,586,866	£5,115,576	£5,670,848	£6,582,394
ICB Recurrent Baseline Funding	£39,678,259	£43,549,989	£50,514,944	£56,940,073	£59,803,984
Early Intervention and access	£714,696	£0	£0	£0	£0
Service Development Funding - CYPMH, Eating Disorders & MatMH	£0	£7,128,400	£5,061,000	£7,846,000	£9,016,291
Service Development Funding - Mental Health Support Teams	£1,944,721	£3,848,702	£5,397,122	£7,528,000	£9,296,000
Health and Justice (CSA)	£0	£160,000	£160,000	£40,000	£160,000
Community Violence Reduction Programme	£0	£835,000	£972,000	£972,000	£485,000
Other Non Recurrent Funding	£112,000	£0	£0	£0	£0
ICB Non Recurrent Funding	£2,771,417	£11,972,102	£11,590,122	£16,386,000	£18,957,291
ICB Sub Total	£42,449,676	£55,522,091	£62,105,065	£73,326,073	£78,761,275
Council - NHS and Other providers	£6,474,833	£7,878,998	£7,719,164	£8,429,474	£9,367,338
Council - Other Grants	£239,382	£200,000	£200,000	£779,330	£1,353,234
Council Sub Total	£6,714,215	£8,078,998	£7,919,164	£9,208,804	£10,720,572
TOTAL	£49,163,891	£63,601,089	£70,024,229	£82,534,878	£89,481,847

- The South East London ICS has continued to invest in children and young people's mental health services in line with the expectations of the NHS England Analytical Toolkit as needed to deliver the NHS Long Term Plan (LTP).
- For 2024/25, we continue to receive Service Development Funds and to invest as a minimum at the level of system growth through the Mental Health Investment Standard. This plan provides a blueprint for how this investment will be used in coming years.

Our Ambitions & Priorities

2022/23 – 2025/26

Our Vision

Our vision

Children and young people in south east London access high quality mental health and emotional wellbeing support when they need it. We will work to continually improve outcomes and suppress the impact of health inequalities, giving every child the opportunity to go on to become a happy, healthy adult.

- We recognise that our mental health services are facing challenges in responding to the increases in demand for children and young people's mental health services, the complexity and diversity of needs of those presenting, while experiencing workforce/staffing shortages.
- As an ICS we are committed to working in partnership with health, local authority and other organisations to create improvements for our children and young people in each service or organisation that they interact with across South East London.
- Our Local Care Partnerships, which bring together health and local authority services in our boroughs, are working to develop initiatives that are intended to be relevant to their diverse communities and current system offer with a view to bringing about more meaningful change.

Underlying Principles

1. Reducing inequalities and improving equity in access, outcomes and experience of care
2. Working together in partnership
3. Collaborating with people and communities
4. Focusing on learning, improvement and innovation

Our Objectives

The objectives of Children and Young People’s Mental Health transformation are aligned with the delivery objectives of South East London ICS. The ICS aims to improve outcomes, tackle inequalities, enhance productivity and support social and economic development through partnership working, underpinned by principles of engagement, participation, subsidiarity and delegation.

South East London ICS Objectives (4/6)



Improving care for disadvantaged groups



Ensuring rapid access to high quality specialist services when people need them



Joining up care across health and other services



Preventing illness and helping people to live healthier, happier lives)

South East London Children and Young People Mental Health and Wellbeing Plan Objectives

Actions that focus on addressing inequalities, building on the ICS’ Health Inequalities Report on children and young people’s mental health

Reducing waiting times for community CAMHS and specialist services (e.g. children and young people’s eating disorder services)

Enhancing prevention through developing new models of care centred re: primary care and service integration including VCSE integration and our offer within education settings.

Strengthening partnerships across health and social care through Place for our most complex pathways and supporting those in crisis

Our Underpinning Cross Cutting Activities

Workforce

Partnership working

Engagement

Data

What will success look like?

▶ A cohesive system of emotional and mental health support for those between 0-25 is developed, ensuring that services are joined up and can be easily accessed across south east London through the implementation of single point of access and no wrong front door, with services offered according to need in alignment with the iTHRIVE framework.

▶ Improvements in waiting times for accessing children and young people's mental health services and access to more support while people wait.

▶ More equal access, experiences and outcomes of mental health care across all our population groups through the ensuring all our offers pay due regard to the needs of children and young people for each of the protected characteristics outlined in the Equality Act, and of groups/communities relevant to the local community, including those that often experience health inequalities such as those in or transitioning from care, living in deprivation, with autism or ADHD, and those who do not speak English as a first language.

▶ Fewer children and young people escalate into crisis and require inpatient admission, but for those that do; good quality care will be available quickly and will be delivered in a safe place, as close to home as possible.

▶ Parents are able to access more support for their own mental health and that of their children to identify issues early, find solutions themselves, provide advice and access help.

▶ Good emotional health and wellbeing is promoted from the earliest age and poor emotional health is prevented when possible.

Developing Our Transformation Priorities

Addressing inequalities in children and young people's mental health services is key priority for our ICS. In support of this, an ICS-wide consultation and quality improvement process has been completed to identify priority areas of focus for addressing inequalities in mental healthcare for children and young people and their families in south east London.

- Through 2021/22, a structured consultation process took place with over 50 organisations across our Local Authorities, Trusts, Primary and Community Services, Voluntary & Community Sector, and Schools to identify priority areas for improving inequalities in mental healthcare for children and young people in south east London.
- Key areas that were raised by the system regarding our population were:
 - Differences in how children and young people of different ethnicities access services in South East London
 - Fewer black and mixed heritage children accessing services than likely need them
 - Differences in how children and young people of different ethnicities with behaviour that challenges are supported
 - Differences in when individuals of different ethnicities present to mental health services
 - Risks to Black and mixed heritage children of parents with poor mental health through failures to support them and their families effectively
- We understand that inequalities are often multi-faceted and deeply rooted, and that robust partnership working across multiple organisations is needed to understand issues and advance health equalities for children, young people and their families across south east London. This supports our rationale for developing a system wide transformation and delivery plan for children and young people that encompasses NHS, local authority and voluntary sector partners.

While stakeholders participating in the consultation identified areas of need predominantly relating to service access and offers for different ethnicities, through delivering our transformation programme, and working with system partners, we are embedding thinking about how to consider the needs of children and young people for any relevant protected characteristics outlined in the Equality Act, and other groups that often experience health inequalities.

Transformation areas to advance mental health equality

To demonstrate South East London ICS's commitment to advancing mental healthcare equality for children and young people and their families across London our transformation plan is organised into the 10 priority areas identified through our consultation. These priorities formed the building blocks for our delivery plan in 2022/23 and 2023/24. We will be looking to further develop these areas in 2024/25 and 2025/26.



Reductions in waiting times



Improving care transitions for 16-25 year-olds



Making CYP mental health services more accessible



Parental mental health



Enhancing mental health and wellbeing offer in schools



Supporting children and young people experiencing trauma and distress



Prevention, early intervention and improved offer for Young Offenders



Eating disorders



Accident and Emergency presentations



Crisis presentations & stepdown

Children and Young People's Mental Health Core Offer for 2023/24

In 23/24, from the 10 priority areas of transformation, a core offer of initiatives that were going to be delivered across all 6 boroughs was agreed.

A core offer defines common standards, outcomes and characteristics of care that we will secure consistently for our residents through locally based service offers and solutions, and inclusive of equity of access.

The core offer, outlined to the right, had 6 areas of focus; the ICS' top priority over 2023/24 was to make notable reductions to waiting times for access to children and young people's mental health services and this continues to be our ongoing key area of focus.



Update on delivery 22/23 - 23/24

Delivery highlights from 2023/2024

Waiting times for CYP eating disorder services recovered to be within the national standards and an early intervention pilot was rolled out in Bromley schools (over 120 sessions with 500 participants)..

The total number of children and young people waiting over 52 weeks for a mental health assessment in community CAMHS halved across south east London over the course of 2023/24. Oxleas NHS Foundation Trust began publishing CAMHS waiting times in line with public engagement feedback and South London and Maudsley NHS Foundation Trust developed a virtual waiting room through the MyHealthE app with access to webinars, leaflets and other service information.

Mental health support teams continued to expand (increasing the number of schools that engaged to 50% of SEL schools) and increased the delivery of whole school approaches to mental health.

Specialist primary care youth clinic offering holistic emotional wellbeing and physical health support piloted in Lewisham delivered positive outcomes, winning an “Innovation in Health” award.

Oxleas NHS Foundation Trust developed a new CAMHS transition model through consultation with young people, parents/carers and practitioners to begin piloting in 24/25.

The Empowering Parents Empowering Communities programme is now successfully running in all six boroughs in SEL and has been received well by local parents and communities. Over 40 Parent Group Leaders trained and 50 parents completed Being a Parent programme.

Black Thrive engaged over 300 children, staff and families to develop ideas for early intervention and prevention initiatives for Black and mixed heritage primary school children as part of the National Community Connectors Programme.

All Places assessed their offer against the iTHRIVE framework and developed action plans.

”This course is the best ever and has helped me personally a lot by sharing and learning from real life experiences and getting helpful advice.”

Feedback from parent who attending Being a Parent programme run by Home Start, Greenwich

“I’m more patient, and apply all the knowledge that I got about positive parenting. I talk about feeling with my kids and husband too.”

Feedback from parent who attended Parent Group Leader training in Bexley

Delivery challenges from 2023/2024

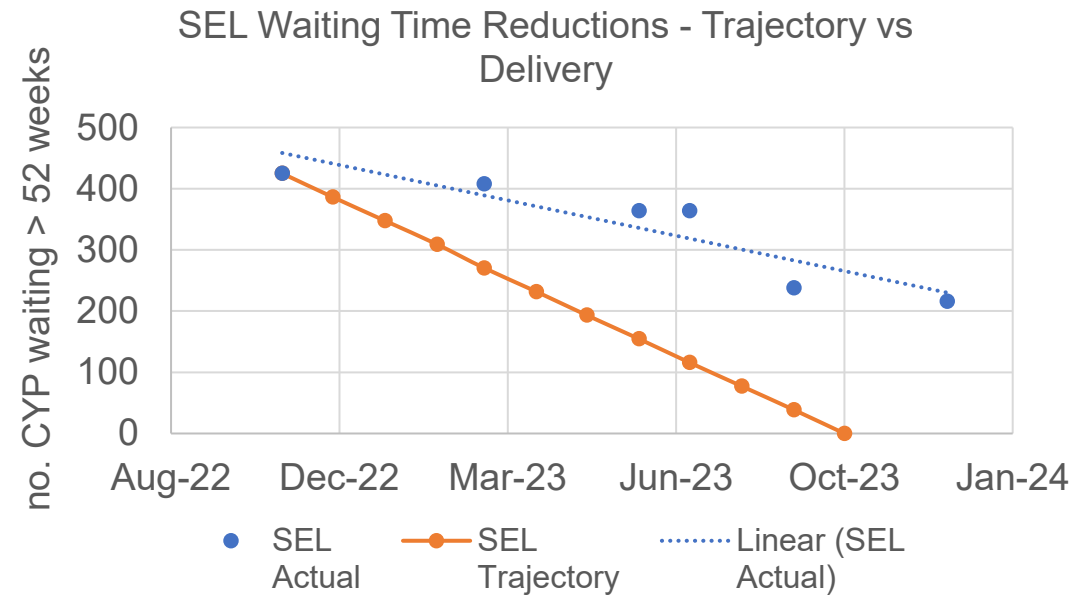
While the number of children and young people waiting 52 weeks or more for their mental health assessment in CAMHS reduced by 50% between November 2022 and October 2023, we did not meet our ambition to eliminate all 52 week waits. Progress in eliminating the number of children and young people waiting 52 weeks or more for their mental health assessment was variable by borough and by pathway. Significant progress was made in Bexley and Bromley boroughs; however, across all boroughs there continue to be long waits experienced for neurodevelopmental pathways. National workforce recruitment and retention challenges have impacted progress.

Further it is estimated that just over a third of CYP with a 'probable mental disorder' are accessing mental health services across SEL (predominantly through CAMHS), which means there is a gap in access to other emotional wellbeing and mental health support offers (e.g. early intervention/prevention).

The pace of roll-out of some initiatives has been variable across south east London. While Bromley has rolled out an integrated Single Point of Access between Bromley Y and Oxleas NHS Foundation Trust, progress in other boroughs has been slower, but delivery of a Single Point of Access remains a priority in most boroughs. Further, while Black Thrive undertook listening exercises in select schools across south east London there were challenges and delays in agreeing on early intervention and prevention initiatives to pilot.

Data collection and reporting remains a challenge which makes it difficult to understand the population needs, outcomes and impact of mental health support offers. A key priority is to better understand access and inequalities and the impact of our offers, such as Mental Health Support Teams in schools, to ensure they are as effective as possible.

System resource and capacity to deliver on transformational change initiatives continues to be a challenge.



Our Delivery Aims and Objectives for 2024/2025 and 2025/2026

Transformation Priority (1/10): Reductions in waiting times

Intended outcomes and benefits of transformation

- We increase access to children and young people's mental health services (including mental health support teams) in line with local plans.
- We make further reductions to the length of time that children and young people wait for a first contact to mental health services. We will aim to:
 - Increase the proportion seen within 4 weeks of referral
 - Deliver a reduction in the number of children and young people waiting a long time for assessment each quarter.
- We will increase access to care and support for children, young people, and families while on the waiting list for CAMHS.

Progress in delivering transformation over 2023/2024

- Reductions in waiting times for CAMHS were made but there was variation by borough and by pathway. Waiting times for access to generic CAMHS services have reduced at a faster rate than waiting times for access to neurodevelopmental pathways, which have seen high levels of demand.
- South London and Maudsley NHS Foundation Trust CAMHS front door teams established to support children and young people having a meaningful contact from CAMHS sooner.
- Oxleas Foundation Trust began publishing CAMHS waiting times in line with public engagement feedback and South London and Maudsley NHS Foundation Trust developed a virtual waiting room through the MyHealthE app with access to webinars, leaflets and other service information.

Plans for 2024/2025 and 2025/2026

- Providers to continue to eliminate longest waits, and also aim to increase proportion receiving a meaningful contact in 4 weeks.
- Undertake a review of the neurodevelopmental assessment and treatment pathway to explore new models of care that may help to reduce waiting times for ADHD assessment.
- In collaboration with South London Listens, and Place based engagement groups, understand, and implement, initiatives to support people while they are on the waiting list for CAMHS services. This may include access to more parental support.
- Offer assessments to those on the waiting list for gender services.
- Respond to national waiting time guidance and improve data quality.

Transformation Priority (2/10): Care transitions for those aged 16-25

Intended outcomes and benefits of transformation

- Young people receive age-appropriate care that is tailored to their needs
- Young people have better experiences transition out of CAMHS either to adult mental health services or other community assets.

Progress in delivering transformation over 2023/2024

- Oxleas NHS Foundation Trust undertook a scoping, with lived experience, to develop a proposed model for improving care transitions between CAMHS and adult mental health services. The proposal recommended piloting (1) providing the option to young people that they could stay in CAMHS until 19 or to access adult mental health services from 17 (2) transition support workers.
- South London and Maudsley NHS Foundation Trust transition workers in place.
- Adult eating disorders team implementing transition model that provides an additional support offer to those referred in under 25.
- Greenwich investment in additional Care Leaver support through CAMHS.

Plans for 2024/2025 and 2025/2026

- Oxleas NHS Foundation Trust to begin implementation of new transition model in one borough, and transition policy to be updated.
- Integrated Care Board to deliver on initiatives as outlined in the London Care Leavers Compact, acknowledging the need for greater mental health support.
- Offer to 18-25 cohort to be explored through the Violence Reduction Vanguard stocktake.
- South London and Maudsley NHS Foundation Trust transition policy to be updated.

Transformation Priority (3/10): Making Services More Accessible

Intended outcomes and benefits of transformation

- There is more equal access to mental health and emotional wellbeing services for children and young people across south east London.
- Service access is needs led and children's health outcomes are as good as those for the most socially advantaged group. Specifically:
 - All Places have a digital Single Point of Access (SPA), which enables needs led access to the right services without referrals and arbitrary thresholds (i.e. no wrong door approach)
 - iThrive framework embedded as a way of working across all system partners and across all six Places.

Progress in delivering transformation over 2023/2024

- Borough progress in developing SPAs has been variable. Bromley successfully launched their integrated SPA (Oxleas NHS Foundation Trust and Bromley Y). Core offer for CYPMH SPA developed and mapping of models of SPAs in other areas undertaken to inform planning in each Place.
- Bexley CAMHS service redesign to move towards a needs-led approach to access through the removal of diagnostic led pathways.
- All Places coordinated stakeholder workshops on iTHRIVE to undertake the iTHRIVE and develop priority area action plans.
- Analysis of CAMHS access and waiting times by demographics undertaken.

Plans for 2024/2025 and 2025/2026

- Greenwich, Lambeth, Lewisham, and Southwark all to mobilise development of SPA for each borough.
- Continue piloting new models of care that reduce barriers to access by offering youth friendly evening drop-in services delivered in collaboration between primary care, South London and Maudsley NHS Foundation Trust and VCSE providers.
- All Places to continue to embed iTHRIVE and undertake provision mapping against iTHRIVE framework. Bromley and Greenwich CAMHS to plan iTHRIVE service redesign.
- Continue to monitor access and waiting times to CAMHS by demographics and respond to any trends.

Transformation Priority (4/10): Parental Mental Health

Intended outcomes and benefits of transformation

- Children that live with a parent with an untreated mental health need are more likely to experience mental health challenges themselves.
- We aim to increase the number of parents who are supported with their mental health through prevention, early intervention and more specialist services. Specifically:
 - Across south east London access to services is increased through specialist perinatal mental health services, Maternal Mental Health Services, Empowering Parents Empowering Communities.
 - Family Hubs are developed in Greenwich, Lambeth, Lewisham, and Southwark.

Progress in delivering transformation over 2023/2024

- Maternal Mental Health Services launched across all of the south east London boroughs.
- Empowering Parents, Empowering Communities now rolled out across all boroughs; over 40 Parent Group Leaders trained and 50 parents completed Being a Parent programme.
- Mapping of perinatal mental health provision undertaken to explore equity in offers available across boroughs.
- Clinical lead appointed by South London Partnership to drive forward improvements in community perinatal mental health services.
- Family Hub development in Lambeth, Lewisham, Southwark, Greenwich.

Plans for 2024/2025 and 2025/2026

- Continue to embed Empowering Parents, Empowering Communities in all boroughs. Expand Being a Parent to a child with Autism in Greenwich.
- Continue to embed Family Hub offer.
- Develop the south east London strategy for perinatal mental health (and parent-infant health)
- South London Partnership Provider Collaborative community perinatal mental health services work plan to support improvements in delivering on national perinatal mental health ambitions, such as increased access.
- South London Listens programme and Place based groups to undertake community engagement including parental support offer needs for those on the CAMHS waiting list (linked to South East London SEND ambitions).

Transformation Priority (5/10): Mental Health and Emotional Wellbeing Support in School

Intended outcomes and benefits of transformation

- The mental health and emotional wellbeing support offer available in schools across south east London is expanded to new areas and enhanced to support the promotion of good mental health and wellbeing and provide early intervention where needed.
 - Waves 1-10 of Mental Health Support Teams (MHSTs) are fully operational, recruited to and engaging with schools with greatest need.
 - Further waves of MHSTs are rolled out on time, with fidelity to the model to enable access to support and onward referral as per the Long Term Plan.
- Explore access to digital interventions to support early intervention and prevention.

Progress in delivering transformation over 2023/2024

- South east London was awarded 4 new MHSTs in wave 12: Bexley, Greenwich, Lambeth, Lewisham. MHSTs continued to expand; there was an increase in the number of schools that are linked to an MHST (~250 schools, over 50% of pupil population covered) and the number of children and young people receiving a direct contact or support through the whole school approach.
- Black Thrive engaged over 300 children, staff and families to develop ideas for early intervention and prevention initiatives for Black and mixed heritage primary school children through the National Community Connectors Programme.
- Pilots of Myhappymind in Bexley and Lumi Nova in Bexley and Greenwich.

Plans for 2024/2025 and 2025/2026

- Prepare for roll out for the 4 wave 12 sites (from January 2025 in the training phase). MHST workshop to be convened to discuss MHST model and impact in schools.
- Explore opportunities for further roll out of digital interventions Myhappymind and Lumi Nova.
- Initiatives recommended through Black Thrive coproduction exercises to be rolled out in select schools. Additional engagement exercises to be undertaken with school students, staff and parents to further define new scalable solutions.
- Greenwich review of mental health in schools offer to identify opportunities for a more equitable offer.

Transformation Priority (6/10): CYP Experiencing Trauma and Distress

Intended outcomes and benefits of transformation

- South east London boroughs are above the estimated national modelled level of children in households with all 3 of so called 'toxic trio'. The ICB is committed to its duties in child protection and respond to this need.
- We aim for our service offers to be trauma-informed and culturally relevant (understanding the impact of Adverse Childhood Experiences, racism and discrimination) and will pilot models will of care to support engagement, specifically, those from Black and mixed heritage families and marginalised communities.
- There is improved understanding of the context in which children and young people presenting with challenging behaviour and more access to appropriate support.

Progress in delivering transformation over 2023/2024

- A model for a South London Child Sexual Abuse (CSA) Hub was developed in partnership with stakeholders. New emotional wellbeing service commissioned.
- Violence reduction Vanguard continued to increase access across the 6 boroughs, including rolling out a training programme.
- South London Partnership Provider Collaborative (SLP) work programme explore options to support Complex Care cohort of young people who may be looked after children and experience delayed discharge from Accident and Emergency Departments or inpatient units.

Plans for 2024/2025 and 2025/2026

- Barnardo's emotional support and advocacy service to mobilise, followed by establishment of single point of access CSA Hub providing access to holistic medical support and advocacy.
- Initiatives recommended through Black Thrive coproduction exercises to be rolled out in select schools. Additional coproduction and listening exercises to be undertaken using adapted approach with appreciative inquiry to develop collective solutions.
- Procure a youth worker pilot for CYP who attend Accident and Emergency Departments following self-harm.
- SLP to continue to explore options for supporting complex care cohort.

Transformation Priority (7/10): Youth offending and youth violence

Intended outcomes and benefits of transformation

- Across each Local Care Partnership, there will be clear pathways and support mechanisms in place that promote prevention, early risk management and access to appropriate mental health interventions for young offenders/those in contact with the criminal justice system.

Progress in delivering transformation over 2023/2024

- Southwark review of Youth Offending Service (YOS) and pathway leading to an expansion of the offer.
- South East London Community Multi-Systems Violence Reduction Vanguard working with YOS service and other pathways to increase access to those affected by or at risk of serious youth violence.

Plans for 2024/2025 and 2025/2026

- Review of the South East London Community Multi-Systems Violence Reduction Vanguard following initial 2-year pilot (3 years in total). This will include completing a stocktake in partnership with stakeholders to explore strengths, explore model fidelity, and learning from other Vanguards to develop a proposal for future implementation.
- Undertake work with place to review the pathways and intervention offer available at place and review the structures in place for multi-agency work.

Transformation Priority (8/10): Eating Disorders

Intended outcomes and benefits of transformation

- Children and young people experiencing disordered eating are identified early and able to access specialist services in timely manner and closer to home when they need it, specifically:
 - National waiting time standards for routine and urgent cases are met consistently, reducing the number of children and young people in crisis due to their eating disorder.
- We increase continue to increase the number of children and young people who are reached by early intervention and prevention initiatives rolled out to schools.

Progress in delivering transformation over 2023/2024

- Recovery of waiting times for urgent and routine appointments for CYP eating disorder services.
- Successful roll out of pilot early intervention model in Bromley, including: (1) Over 500 children engaged in roll out of universal school-based programmes (Happy Being Me in secondary school and Me and My Body in primary school) (2) Delivery of short-term interventions and supervision and consultation from South London and Maudsley NHS Foundation Trust specialist eating disorder service.
- Development of an autistic spectrum condition pathway and group offer to parents.

Plans for 2024/2025 and 2025/2026

- Continue efforts to maintain access to CYP eating disorder services, acknowledging known staffing/workforce challenges and significantly high levels of demand for avoidant restrictive food intake disorder services, and autistic spectrum conditions prove offer to CYP with and their parents.
- Continued roll-out of the Bromley early intervention and prevention eating disorders pilot. Undertake evaluation of impact and explore potential for scaling to other boroughs.

Transformation Priority (9/10): Accident and Emergency Department Presentations

Intended outcomes and benefits of transformation

- Children and young people who present in crisis to Accident and Emergency Departments receive timely and age-appropriate care and wait no longer than is necessary in Accident and Emergency Departments, specifically:
 - Timely access to a bed where required
 - Timely discharge and onward referral to appropriate support where required

Progress in delivering transformation over 2023/2024

- Multiagency discharge and escalation protocol rolled out across partners in Greenwich reviewed and updated.
- South London Partnership CAMHS Complex Care work programme engaging social care colleagues to scope innovations nationally and develop collective solutions to support young people who experience delayed discharge from A&E and inappropriate admission often associated with family or placement breakdown.
- Stakeholder agreement to take forward a model of youth workers in A&E departments to support those who present following self-harm and with suicidal ideation agreed.

Plans for 2024/2025 and 2025/2026

- Following stakeholder agreement to test and develop a youth worker model in Accident and Emergency Departments for CYP who have self-harmed, coproduce specification with CYP and their families and undertake procurement for pilots in select Accident and Emergency Departments.
- Remaining boroughs/Trusts to roll out multiagency discharge and escalation protocol.

Transformation Priority (10/10): Crisis Care

Intended outcomes and benefits of transformation

- Fewer CYP escalate into crisis, but for those that do; good quality care will be available quickly and will be delivered in a safe place enabling them to recover as quickly as possible i.e. across south east London we will observe a reduction in (1) number of children and young people presenting in crisis to Accident and Emergency Departments (2) need for psychiatric inpatient units (3) delayed discharges in emergency departments and inpatient units
- Delivery of the Long Term Plan ambition to ensure comprehensive coverage of 24/7 crisis provision for CYP which combines crisis assessment, brief response and intensive home treatment team functions.

Progress in delivering transformation over 2023/2024

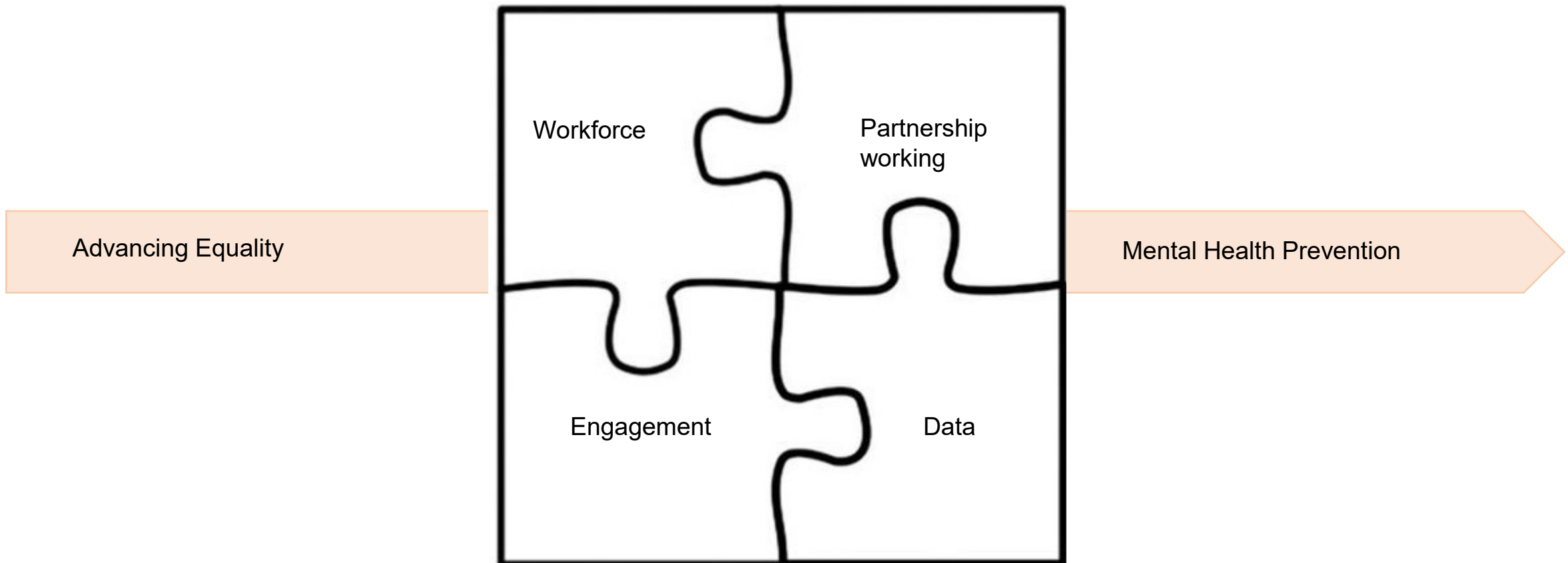
- Successful launch of 111 press 2 for mental health, offering CYP and families an additional access route to mental health support and advice.
- Development of a model for a home treatment team for boroughs of Bexley, Bromley and Greenwich. Implementation delayed due to recruitment challenges but planned in 24/25.
- South London Partnership mapping and gap analysis of crisis offer undertaken to explore opportunities for improving equity, which includes exploring options/working toward an extension in operational hours to meet the NHS Long Term Plan.

Plans for 2024/2025 and 2025/2026

- Oxleas NHS Foundation Trust Home Treatment Team function to be rolled out in Q1 24/25
- South London and Maudsley NHS Foundation Trust to launch CYP Crisis House by December 2024.
- Greenwich establishment of a community focused team for young people experiencing a crisis in their mental health and mobilisation and review of the new clinical support into the Adolescent Assessment Residential and Resource Centre.

Delivery Plan: Cross Cutting Activities

Delivery of our Children and Young People's Transformation Plan is underpinned by a number of cross-cutting activities. Advancing mental health equality (as outlined through our 10 delivery priorities) and enhancing prevention (through developing new models of care, linked to primary care and improved VCSE integration) are the golden threads running through.



Delivery Plan: Cross Cutting Activities

Workforce

In delivering our transformation plan we aim to improve the capacity and capability of both clinical and non-clinical roles provided by a mixture of NHS, local authority and voluntary and community sector providers from 2022/23 onwards.

Staffing expansion for 2024/25 is outlined in the south east London mental health submission of our Operating Plan. The final number and complement of staff to be recruited in 2024/25 is yet to be finalised; we anticipate there will be an expansion in 24/7 crisis care staffing (notably through development of a Home Treatment Team function in Bexley, Bromley and Greenwich boroughs), Mental Health Support Teams (with further roll out of waves), and staff to support with transitions between children and young people's mental health services and adult mental health services.

In alignment with our wider ICS workforce plans, our providers are planning and delivering initiatives to:

Delivering initiatives to boost retention:

- Creating opportunities for career progression
- Providing staff wellbeing offers
- Promote the South London Partnership Passport, which enables staff to work flexibly across the three NHS Trusts across South London

- Improve workforce diversity so staff reflect local communities (e.g. holding local recruitment fairs)
- Building cultural competency (SLAM is a Patient and Carer Race Equality Framework site and drawing on culturally competent community assets such as through our NHSE 3-year funded community multi-systems violence reduction Vanguard)

- Improve workforce capability and competence. Providers will increase access to training where needs are identified (for example workforce support and training to increase the reporting of clinician and patient reported outcomes in Southwark)

Delivery Plan: Cross Cutting Activities

Partnership Working

Our transformation plan aims to bring together partners to deliver better outcomes for children and young people across south east London. There are numerous ways we propose to do this.

Leveraging Opportunities for System-Wide Working

- As an ICS, we will bring together partners from across our Places to develop and monitor delivery of the plan, and identifying opportunities for working at scale across the ICS ('once' for our population).
- We will work together with partners to agree common standards and outcomes for services across South East London, supported by local delivery.

Enabling Local Delivery through Local Care Partnerships

- Our borough based Local Care Partnerships (including health and care services), in collaboration with public health teams, will be responsible for determining need (including early intervention/prevention needs), developing transformation priorities and delivering these as per our ICS commitment to delegation and subsidiarity. This should mean that delivery best reflects the need of local populations.

Mental Health Provider Collaboration

- Our Provider Collaborative (South London Mental Health and Community Partnership, which brings together Oxleas NHS Foundation Trust, SLAM NHS Foundation Trust, and St George's Mental Health NHS Trust) will continue to deliver a transformation programme for its services used by children and young people and for the perinatal mental health offer.

Interdependent work programmes and strategies

- There are shared objectives and cross-cutting work programmes in this transformation plan with the following: (1) Learning Disability and Autism and Special Educational Needs and Disabilities e.g. addressing waiting times for ADHD/ASD (2) Children and young people's physical health programme e.g. mental health champions in acute trusts, emotional wellbeing support for CYP awaiting elective surgery.

Delivery Plan: Cross Cutting Activities

Engagement

- ICBs are expected to promote the involvement of patients, their carers, and representatives in care decision making.
- As an ICS we continue to develop our approach to engaging with service users (children, young people and their families), communities, and voluntary sector partners through specific programme activities and Place based groups to ensure engagement is meaningful and relevant to services in that community.
- We are committed to improving transparency and engagement with our communities. This is demonstrated by:
 - Publishing our Children and Young People’s Mental Health and Emotional Wellbeing Transformation Plan on our ICS website
 - Publishing waiting times for Children and Young People’s Mental Health Services provided by Oxleas and SLAM –this was a commitment Trusts made further to the South London Listens Programme.

Over 23/24, in collaboration with Black Thrive, over 300 children and young people, school staff and parents/carers were engaged in select primary schools across south east London to help inform the planning of early intervention and prevention initiatives for mental health and emotional wellbeing for Black and mixed heritage children as part of the National Community Connectors Programme.

Community engagement is ongoing through the South London Listens programme across South London to inform thinking about children and young people’s mental health and parental mental health support needs. In 2024/2025 South London Listens will lead engagement on the support offer available to children and families while they are waiting to access CAMHS services.

In 2024/2025, we consulted with young people who have experience of accessing Accident and Emergency Departments following self-harm to help shape the development of a pilot model of care. The pilot aims to roll out Mental Health Youth Workers who can sit with young people while they wait, understand their needs, help advocate on their behalf and meet with them for 6-8 sessions following discharge.

Delivery Plan: Cross Cutting Activities

Data

There is an expectation that Integrated Care Boards and Local Authorities understand the health needs of their populations, including the wider determinants of health, and that ICBs deliver improved outcomes in population health and tackle inequalities in outcomes, experience and outcomes. In order to deliver on these expectations, it is recognised that:

- Local Care Partnerships need to have access to data to support them in making decisions about services to best support local populations.
- To make real change in advancing mental health equality we need to improve our data quality on protected characteristics and mental health outcomes so that we can better measure the impact of our services and our transformation activities

Highlights from 22/23 and 23/24:

- Progress was made in data quality and provider reporting with two of SEL's largest voluntary sector providers beginning to flow data to the Mental Health Services Dataset (MHSDS).
- A children and young people's mental health dashboard was also created for the ICB to enable Place commissioners to have more ready access to MHSDS data at a Place based level.

Over 2024/25 and 2025/26 we will:

Continue to work with all NHS funded service providers to submit data to the Mental Health Services Data Set. We recognise that some of voluntary sector providers have limited capacity to report data into the national database and we will explore opportunities to support them directly in 2024/25.

Work with our providers to improve data quality, reporting on each of the protected characteristics as outlined in the Equality Act so that we can improve our monitoring and evaluation of service access. Improve use of paired outcome measures to enable us to monitor the impact of our approaches and consider this by protected characteristic.

Work to improve a children and young people's mental health data dashboard with consistent metrics across providers that is aimed at our Local Care Partnerships to enhance conversations on local delivery and understand impact and system needs. This includes outcome reporting support the transformation programme moving forwards.

Key Programme Risks for 2024/2025 & 2025/2026

Key delivery risks and mitigations (1/4)

WORKFORCE			
Key risk	Due to	Mitigations	RAG
<p>There is a risk that services are not staffed with the right number and mix of professionals who have the right skills and competencies to deliver high-quality, evidence-based and age-appropriate care resulting in the transformation objectives of this plan not being met, specifically:</p> <ul style="list-style-type: none"> • Waiting time standards are not met for community CAMHS and Eating Disorder services • Children and young people do not receive the specialist support they need e.g. young adults cannot access specialist support with transitions 	<ul style="list-style-type: none"> • National mental health workforce shortage and challenges with recruitment and retention • System financial position impacting ability for all partners to release funding for workforce expansion • Challenges in recruiting to clinical staff across Bexley, Bromley and Greenwich boroughs due to internal competition within South East London ICS over London weighted roles. • Inequitable funding for VCSE partner jobs for matched NHS posts. • Lack of access to supervision capacity, workforce training, staff engagement. 	<ul style="list-style-type: none"> • New models of care to be piloted to diversify workforce (e.g. voluntary sector partners delivering care, supervised by NHS services) • Initiatives to support workforce retention (1) career progression e.g. preceptorship programmes (2) continue to promote access via existing forums to the staff wellbeing offers • Oxleas NHS Foundation Trust and South London and Maudsley NHS Foundation Trusts are accredited living wage employer. • Oxleas NHS Foundation Trust recognition on Sunday Times Best Places to Work and HSJ's Trust of the Year 2023. • Local transformation and delivery plans to understand workforce requirements developed and progress monitored. • Dedicated mental health transformation workforce capacity invested in 2023/24 to support services in developing new and alternative models of care as we move forward. • Development of integrated SPAs included in this plan to make best use of all available resource. 	<p>RAG</p>

Key delivery risks and mitigations (2/4)

IMPROVING ACCESS AND ADDRESSING INEQUALITIES

Key risk	Due to	Mitigations	RAG
<p>There is a risk our transformation plan (which has identified priority areas to address inequalities) fails to achieve impacts in addressing inequalities in access, experience and outcomes for children and young people and their families across South East London</p>	<ul style="list-style-type: none"> • Incorrect identification of priority areas of focus as a result of lack of data on which populations and communities to support. • Wrong models developed in response to the priority areas identified meaning programmes are not impactful. • Offers developed are not sufficiently adapted or tailored to meet the needs of the local populations and or those who experience the biggest inequalities in access, experience and outcome of care. 	<ul style="list-style-type: none"> • Plan has been developed in line with the findings of a 12 month ICS wide engagement and health inequalities exercise, with system engagement from all partners. • Increased focus on available data to understand inequalities in access, through development of data dashboard, for example, and asking providers to update periodically on demographic profile of those waiting the longest for access to CAMHS. • Programme to develop links with the development of the ICS' Core20Plus and population health management approaches. This will include identifying highest levels of mental health need and access to services generally, supporting the development of local neighbourhood based integrated care teams. • Learning from the South London Listens Programme to be built into the programme and included within the transformation plan. 	<p style="background-color: yellow;">RAG</p>

Key delivery risks and mitigations (3/4)

PARTNERSHIP WORKING			
Key risk	Due to	Mitigations	RAG
<p>There is a risk that partnership working at Place (i.e. between providers, NHS and Local Authority) and across the system is not sufficiently mature to support the development, delivery and oversight of the range of transformation activities outlined in this plan.</p>	<ul style="list-style-type: none"> No agreed focus on CYP across different system partners and as a result, conflicting and competing priorities across system partners. Different stages of maturation in partnership working and inability to move resources across the system. 	<ul style="list-style-type: none"> Each Place establishing local partnership forums, bringing together a network of stakeholders, for children and young people’s mental health to review delivery of transformation plan objectives alongside other local priorities, Place based delegation of budgets to Local Care Partnerships where all partners come to agreement about funding decisions for community CYP services, as per the Integrated Care Board’s operating framework. This action is aligned to the implementation of the iTHRIVE framework principles, which at the macro level recommend joint budgets between partners. 	

Key delivery risks and mitigations (4/4)

INVESTMENT			
Key risk	Due to	Mitigations	RAG
<p>There is a risk that investment available for CYP mental health transformation programmes in south east London is not sufficient to cover the breadth of the activities proposed in the plan and/or not sustained</p>	<ul style="list-style-type: none"> Funds available for transformation activities are limited due to system financial pressures of Trusts and ICS. Reduction in local authority and schools budgets having an impact on broader mental health and wellbeing initiatives that may increase demand on NHS provision. 	<ul style="list-style-type: none"> Integrated Care Board commitment to delivery and investment of the Mental Health Investment Standard and Service Development Funds resulting in sustained increased investment into mental health services. Consideration of where investment into CYPMH transformation is best placed, acknowledging workforce recruitment challenges nationally, and the value of investing in VCSE offers. Ongoing use of demand and capacity models to understand resource needs and for setting realistic ambitions for waiting list reductions. Place based delegation of budgets to Local Care Partnerships where all partners come to agreement about funding decisions for community CYP services, as per the Integrated Care Board's operating framework. This action is aligned to the implementation of the iTHRIVE framework principles, which at the macro level recommend joint budgets between partners. 	<p>RAG</p>