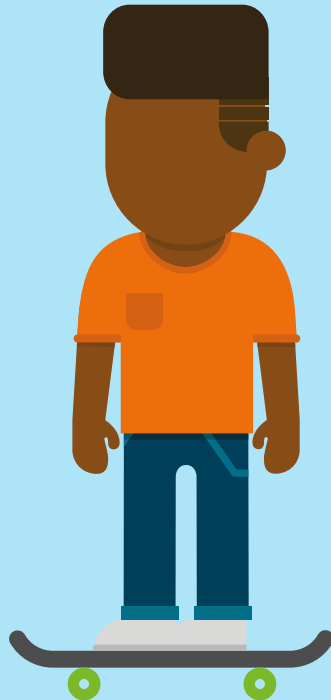


2016–2020

Future in Mind: Leeds[©]

A strategy to improve the social, emotional, mental health and wellbeing of children and young people aged 0–25 years.



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Foreword

In Leeds we recognise that what we experience in childhood significantly impacts on our adult lives. We know that by ensuring Leeds babies have the best start in life we support the development of secure attachment and therefore emotional wellbeing throughout the lifespan (WAVE, 2013). Future in Mind (2015) reminds us of how half of all mental illnesses start before the age of 14 years and 75% start by age 18 years. Across the Leeds partnership we have developed this strategy and the underpinning Future in Mind: Leeds Local Transformation Plan as a comprehensive city-wide approach to improving the social, emotional and mental health of our children and young people.

This strategy and plan brings together in a unique and ambitious programme the NHS-led Future in Mind Local Transformation Plan and the Leeds City Council response to children in the city with Special Educational Needs and Disability (SEND) relating to Social Emotional and Mental Health Needs.

We endorse the commitment across the Leeds partnership to work together on this critical agenda. We recognise that this is an area requiring a partnership focus and transformation across the health, education and care system. We are proud to note the recent additional investment in the city. Future in Mind (2015) funding is continuing to support the transformation and redesign of early support and services (across NHS CAMHS, clusters and the third sector) and this year Leeds City Council has committed £45 million to create world class specialist education provision to support children and young people with SEND Social, Emotional and Mental Health needs.

A key strength of this strategy is how it is led by the voice of the Leeds children and young people and their families. We welcome the focus on building protective and resilience factors, including supportive parenting, a secure home life and a positive learning environment. We support the recognition of the need to help build children and young people's emotional resilience, support their information needs and availability of self-help resources, in addition to the ability to access local evidence-based mental health services quickly, when specialist help is needed.

Through this work we are proud to jointly recommend our whole system strategy; Future in Mind: Leeds. A strategy to improve the social, emotional, mental health and wellbeing of children and young people aged 0–25 years.

We aspire to create a city in which children and young people develop the necessary skills to be resilient, engage in learning, achieve and can make a contribution to their communities at all stages of development.

We would like to take this opportunity to thank those involved in bringing this strategy to fruition and are looking forward to evidence of improved outcomes for children and young people with regards to their social, emotional and mental health needs.

Councillor Mulherin

Executive Board Member for Children & Families

Matt Ward

Chief Operating Officer, NHS Leeds South & East CCG

Introduction

Future in Mind: Leeds

A strategy to improve the social, emotional, mental health and wellbeing of children and young people aged 0–25 years

The Leeds ambition is to be the best city in the UK for children and young people to grow up in.

Leeds is becoming a child friendly city and is investing in children and young people to create a compassionate city with a strong economy. The Children and Young People's Plan, 2015–2019, outlines the priorities and obsessions to help achieve the Leeds' ambition.

Our vision for this strategy is to develop a culture where talking about feelings and emotions is the norm, where it is acceptable to acknowledge difficulties and ask for help and where those with more serious problems are quickly supported by people with skills to support their needs.

To do this, a joined-up, city-wide approach is crucial; improving the social, emotional, mental health and wellbeing of our children and young people can only be achieved by working collaboratively.

This strategy and its implementation plan reflect the commitment of partners in the city to work together to achieve our vision.

It is an innovative and adventurous partnership, working across health, education and social care.

Within the strategy, you will find our shared priorities, our shared approach and how we will know we have made a difference to the lives of children, young people and their families in the city.

Underpinning this strategy is a positive and universal focus on wellbeing. We will build resilient communities to support social, emotional and mental health through a city wide continuum of support, thereby preventing and reducing the need for specialist interventions.

This high level strategy is supported by the more detailed implementation plan, which is our Future in Mind: Leeds Local Transformation Plan. Key strategies and plans that sit alongside this are the Best Start Plan, the Special Educational Needs and Disabilities Strategy and the all-age Mental Health Framework.

The Future in Mind Leeds strategy is driven by a relentless focus on the question:

“What is it like to be a child or young person growing up in Leeds and how do we make it better?”



Mental health and wellbeing

Being in a state of wellbeing means we are able to cope with everyday life, feel good or okay about life most of the time and behave in a way that does not have a negative impact on ourselves or others; this helps us to fulfil our potential.

The World Health Organisation (WHO) defines mental health as a state of comprehensive physical, mental and social wellbeing that accordingly applies at both a personal and collective level. For individuals this would, on a mental health front, involve a state in which one:

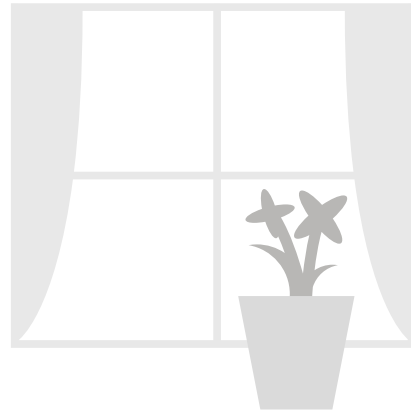
“Realises his or her abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”

WHO, 2001



“The capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual wellbeing that respects the importance of culture, equity, social justice, interconnections and personal dignity”

N. Joubert & H. Raeburn, 1997



A more expanded statement describes mental health as:

Children and young people may need support for a limited period, when life events create challenging times. For others there is a need for more sustained help. This may relate to difficulties in a child or young person's life, for example family breakdown, problems with friendships, or bullying. It may relate to traumatic experiences, e.g. bereavement, abuse, or violence. It could also be associated with having special educational needs (SEN), e.g. autism, or relate to a specific mental health condition, such as anorexia nervosa. Often it is a combination of factors. Research identifies how some vulnerable groups, such as those who have been removed from their birth family and placed in the care of the local authority, are at higher risk of mental ill health.

The most vulnerable groups of children and young people who may be at risk of developing social emotional and/or mental health problems:

- Are looked after children.
- Are in the justice system.
- Are excluded from school.
- Are new to the country and particularly asylum seekers.
- Are living in poverty.
- Have special educational needs.
- Have experienced trauma.

Supportive parenting, a secure home life and a positive learning environment in schools are key protective factors in building and protecting mental wellbeing at this stage of life. Individuals who have a secure and supportive childhood and adolescence and are able to exercise emotional control and social skills, are subsequently better able to deal with the choices and challenges that they will encounter throughout their life (World Health Organisation, 2012).

Protective factors consist of individual, family and school/community factors, which all interrelate. So for example a good attachment as a baby with your parent, or carer develops your ability to self-regulate your emotions and make friends in childhood. This research is covered in more depth in the Future in Mind: Leeds, Health Needs Assessment (2016) and has informed the priorities of our strategy.

Resilience is a concept that refers to being able to 'bounce back' from adversity or difficult life events. Resilience can be increased by a positive interaction between the protective factors at the individual, family and community level.

This strategy includes initiatives to prevent mental health problems in childhood; it identifies the need for universal support for children and families (early in the life of a child); and recognises the importance of early intervention (early in the life of the problem). The strategy also recognises the need for more targeted services for some vulnerable children and young people and the need for swift access to more specialist help when needed.



Some key local facts

Leeds is an expanding city, with a growing population of over 761,000 people.

This population continues to change in size and composition, which creates an incredibly vibrant, diverse city which is welcomed and celebrated. As the second largest local authority, Leeds is consistently updating its services to meet shifts in demand. Some key local facts are:



16%
have English as an additional language

253,000
aged 0–25

186,000
children and young people under 20

Over **10,000**
births a year

Of our school-aged children and young people:

19%
are eligible for free school meals

29%
are from Black, Asian or Minority Ethnic groups

16%
have Special Educational Needs and/or a Disability

School attendance has improved to record levels but over 1,000 primary school children and over 2,200 secondary school children still miss **15%** of school time.

20.7% of children come from 'low income' families, compared to **18.6%** nationally. Of the 28,000 children in Leeds living in poverty, 64% come from a working family.

92% of Leeds primary and secondary schools are rated good or better.

In accordance with national reports, Leeds service data indicates a rising demand for services for emotional and mental health needs and a rising presentation at emergency departments of young people who have self-harmed.

22% of the Leeds population (167,607) live in the 10% most deprived areas in the country.

For our young people who do not achieve 5 good GCSEs, there is a **1 in 4** chance that they will not be in education, employment or training two years later.

Leeds has a higher incident rate for domestic abuse per **1,000** of the national population.

Over the past decade, whilst overall attainment has risen in schools, the performance gap between pupils from more and less advantaged backgrounds in the UK has remained prevalent.

The Future in Mind: Leeds, Health Needs Assessment (2016) is a comprehensive document and should be read in conjunction with this strategy. Some of its key findings show the complexity of the picture for the young people of Leeds. The Public Health England Public Health Profiles are a useful resource to give us the estimated prevalence of mental health disorders in 5–16 year olds (2014), including emotional disorders, conduct disorders and hyperkinetic disorders.

Indicator	Period	Data quality	England		Leeds	Leeds population estimates	
			Yorkshire & the Humber	Leeds	2014	2020	
Estimated prevalence of any mental health disorder: % population aged 5–16	2014		9.3*	9.7*	9.5*	9,584	10,752
Estimated prevalence of emotional health disorders: % population aged 5–16	2014		3.6*	3.7*	3.5*	3,733	4,188
Estimated prevalence of conduct disorders: % population aged 5–16	2014		5.6*	5.9*	5.8*	5,851	6,564
Estimated prevalence of hyperkinetic disorders: % population aged 5–16	2014		1.5*	1.6*	1.6*	1,614	1,811
Prevalence of potential eating disorders among young people: Estimated number of 16–24 year olds	2013		*	-	15,604*	184,007	182,292
Prevalence of ADHD among young people: Estimated number of 16–24 year olds	2013		*	-	16,163*	16,274	16,122
Children who require Tier 3 CAMHS: Estimated number of <17	2012		-	-	2,905	2,976	3,214
Children who require Tier 4 CAMHS: Estimated number of <17	2012		-	-	120	123	133
Child admission for mental health: Rate per 100,000 aged 0–17 years	2014/15		87.4	69.3	49.2	790	846
Young people hospital admissions for self-harm: Rate per 100,000 aged 10–24	2010/11–12/13		352.3	368.2	450.8	7,446	7,744

There is a much lower rate of CYP admitted for mental health issues compared to the national figure, but a much higher rate of hospital admissions for self-harm.

The picture for Leeds in terms of indicators that serve as protective factors for good mental health and development is not good.

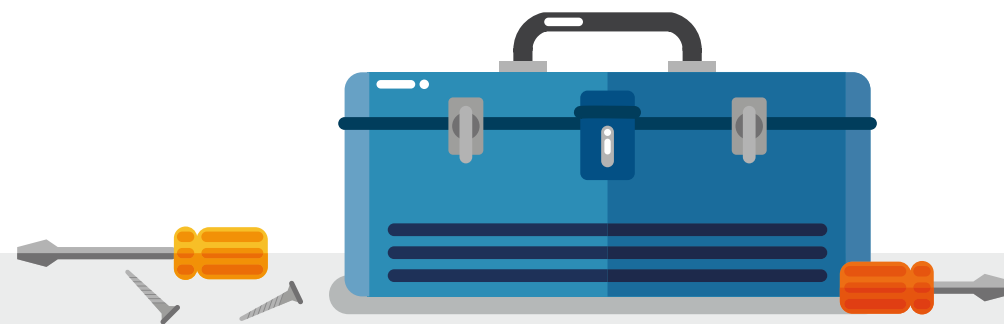
Leeds is lower than the national average for:

- Breastfeeding.
- Achieving a good level of attainment at Early Years Foundation Stage.
- Achieving 5 or more A* to C grades at GCSE level, including Maths & English.
- Taking part in an hour of moderate-to-vigorous physical activity per day.

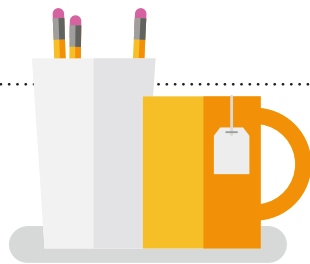
Leeds is higher than the national average for:

- Rates of domestic abuse.
- Self-reported rates of tobacco, cannabis and alcohol use in 15 year olds.
- The number of children who are Looked After.
- Rate of children in need.

The information hides a great variation across Leeds due to its mixed deprivation and populations.



Local reviews



During 2015, partners in the city reviewed the current system of local support and services for children and young people's mental health and wellbeing. The results of these reviews, which included the significant involvement of children, parents and professionals, has supported the development of the Future in Mind: Leeds strategy, priorities and plan. The key issues identified were:

- A lack of clarity of what support and services are available and how to access them.
- A request from young people to have more local support as early as possible and for teachers to receive relevant training.
- Having to wait too long for some services, such as Child and Adolescent Mental Health Services (CAMHS), without any support or contact whilst you waited.
- Variation in the quality and quantity of support and services available in different parts of the city.
- The lack of a coherent vision and system of connected support and services across the partnership.
- Concern about the quality and range of specialist education provision for those with social, emotional and mental health needs.

- Recognition of some gaps in services, for example joined up support during mental health crisis and support during transition to adult services.
- A lot of unknowns, due to poor connection of data systems and a lack of shared outcome measures.

Strengths were also identified, such as the city-wide cluster offer built from the support of partners to deliver the Targeted Mental Health in Schools (TaMHS) model. Also satisfaction was very high once children and young people were in any of the local services.

National policy

'Our children deserve better: programmes and early help for children and young people suggest that this can both change lives and reduce spending incurred in later life due to unmet needs' (Chief Medical Officer, 2012)

National policy increasingly reflects the importance of improving children and young people's mental health and wellbeing. A national taskforce led by the Department for Health and NHS England led to the creation of the 'Future in Mind' report (March 2015), which resulted in the need for local areas to develop Local Transformation Plans. These received ring-fenced additional funds, with Leeds in receipt of circa £1.5 million. In addition to this:

- NHS England are increasing the number of inpatient beds for those children and young people who need this level of support, which will be beneficial for Yorkshire and the Humber.
- The Education Committee Inquiry (2016) identified how children who are looked-after face significant challenges in getting access to mental health support.
- The Department for Education (DfE) has published guidance for schools such as 'Mental Health and Behaviour in Schools (2014) and the 'Blueprint for counselling services, (2015)'.

- The DfE also launched initiatives such as the MindEd website to support professionals to identify signs of mental health problems in children and to get them the support they need.
- The 2014 Children and Families Act introduced reforms to services for children and young people with all kinds of Special Educational Needs and Disabilities (SEND), including mental health needs.
- The term Social, Emotional and Mental Health needs (SEMH) replaced the term 'behaviour difficulties' in the SEN code of practice (2014). The reforms sought to empower families in decision-making about the services they use, and to speed up and simplify access to support.



What will we do?

1.

Develop a strong programme of prevention that recognises how the first 1001 days of life impacts on mental health and wellbeing from infancy to adulthood. In Leeds this is delivered through our Best Start Plan.

2.

Work with young people, families and schools to build knowledge and skills in emotional resilience and to support self-help.

3.

Continue to work across health, education and social care to deliver local early help services for children and young people with emotional and mental health needs who require additional support.

4.

Commit to ensuring there is a clear 'Leeds offer' of the support and services available and guidance on how to access these.

5.

Deliver a Single Point of Access for referrals that works with the whole Leeds system of mental health services so that we enable children and young people to receive the support they need, as soon as possible.

6.

Ensure vulnerable children and young people receive the support and services they need, recognising that this is often through mental health practitioners working alongside education, social care or third sector colleagues in multi-disciplinary teams (current examples in Leeds being The Market Place, the Therapeutic Social Work Service, and Youth Offending Service).

7.

Ensure there is a coherent city-wide response to children and young people in mental health crisis.

8.

Invest in the transformation of our specialist education settings to create world class provision.

9.

Work with children and young people who have mental health needs as they grow up and support them in their transition into adult support and services.

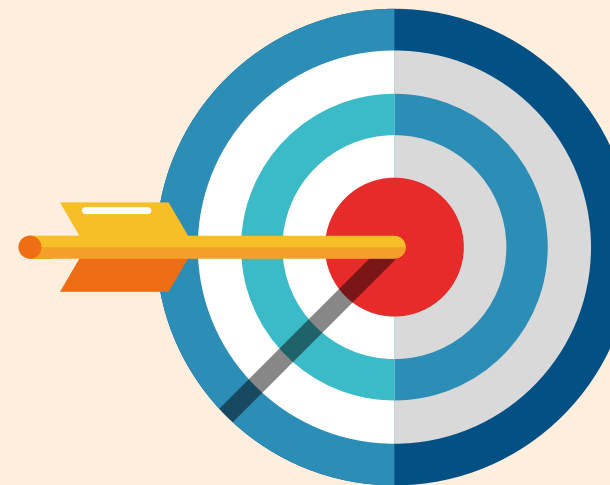
10.

Establish a city-wide Children and Young People's Community Eating Disorder Service in line with national standards and access targets.

11.

Improve the quality of our support and services across the partnership through evidence-based interventions, increased children and young people participation and shared methods of evidencing outcomes.

The Future in Mind: Leeds Local Transformation Plan is the implementation plan underpinning this strategy and should be read alongside it.



Behaviours and cross-cutting themes

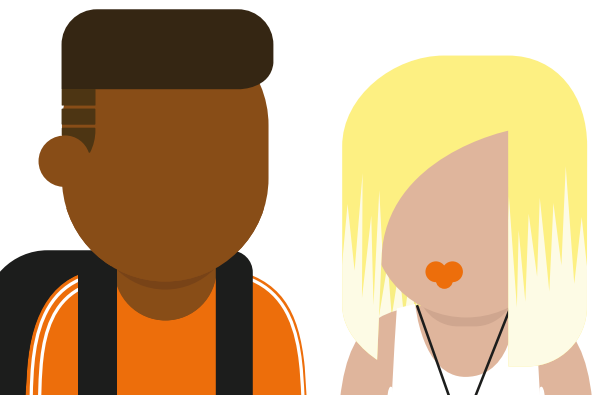
Our local reviews, which captured the views of Leeds children, young people, families and professionals, have informed our strategy and plan.

The three behaviours that underpin everything:

- We will listen to the voices of children and young people in supporting and planning their care.
- We will work restoratively: doing things with children, young people and families instead of to them, for them or doing nothing.
- We will regularly check that the support is helping and making a difference.

Cross-cutting themes:

- We recognise that improving the Social Emotional and Mental Health of children and young people in Leeds needs everyone to play their part.
- We will work together to plan and deliver our strategy and make best use of our collective resources to improve the experience and outcomes of children and young people with social, emotional mental health and wellbeing support needs.
- In direct response to the request from children and young people we will maximise the opportunities digital technologies offer us, whilst safeguarding children and young people from some of the risks the internet poses.



Accountability

To help make this happen we have a Health and Wellbeing Board, Children and Families Trust Board and a Leeds Safeguarding Children Board. They bring together strategic partners from the main organisations working with children and young people to make sure we are doing what we should to deliver our Children and Young People's Plan and to keep children safe.

We also have strong local partnerships. There are 25 clusters around groups of schools, a Special Inclusive Learning Centre cluster and Area Inclusion Partnerships that have membership from; schools, governors, children's social care, police, Leeds City Council youth service, Youth Offending Service, children's centres, housing services and locally elected members.

Integral to the delivery of the strategy is a clear governance structure (Appendix A).

We recognise the pressures on the public purse and this strategy requires us all to work together to make best use of the Leeds pound. Our strong focus on prevention and developing emotional resilience, and our emphasis on supporting staff groups across our educational settings is critical to this. This not only makes economic sense but also improves the experience and outcomes of our children and young people.

In addition to this, having our local early help and targeted services as integral to the wider network of services in the city ensures that children and young people in need of specialist help are seen more quickly.



How will we know we've made a difference?

The ambition of the Leeds Children and Young People's Plan is to become the best city for children and young people to grow up in, a 'child friendly city' where:

- All children and young people are safe from harm.
- All children and young people do well at all levels of learning and have skills for life.
- All children and young people enjoy healthy lifestyles.
- All children and young people are happy and have fun growing up.
- All children and young people are active citizens.

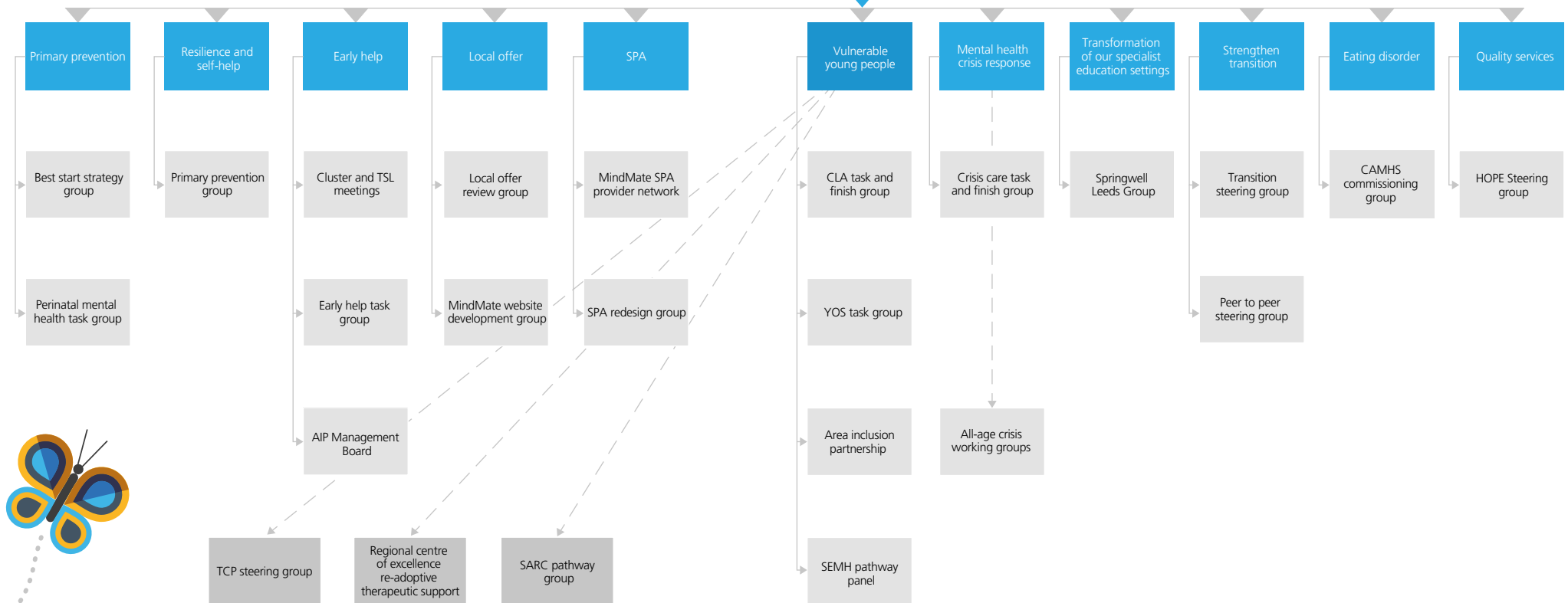
Alongside these ambitions the Future in Mind: Leeds Local Transformation Plan has a series of indicators that will measure our achievement on each of the priorities. Using these and other key indicators a dashboard is being developed for the Future in Mind: Leeds Programme Board. The Board will use this dashboard to measure the success of the strategy. This will be supported by the local work with the Child Outcomes Research Consortium (CORC). CORC are the UK's leading organisation that collects and uses evidence to improve children and young people's mental health and wellbeing.

Critical to the delivery of this strategy is working with and listening to children and young people and their families. This is reflected across all priorities in the Local Transformation Plan. Ultimately the voice of the child and young person will inform us if we have been successful.



Governance structure

This is supported by embedded processes for co-production with children and young people and their families, a communication plan and workforce development plan.



Glossary

A&E: Accident and Emergency department	LD: Learning Difficulties
ACE: Adverse Childhood Experiences	LGBT: Lesbian, gay bisexual and transgender
AIP: Area Inclusion Partnerships	LTHT: Leeds Teaching Hospitals NHS Trust
AMHS: Adult Mental Health Services	LTP: Local Transformation Plan
ARMS: At Risk Mental State	LYPFT: Leeds and York Partnership NHS Foundation Trust
BME: Black and minority ethnic	Mindwell: The adult information portal website
CAMHS: Child and adolescent mental health services	MM: MindMate
CBT: Cognitive Behavioural Therapy	MST: Multi-systemic Therapy
CBTp: Cognitive Behavioural Therapy for psychosis	MM SPA: Mindmate Single Point of Access
CCG: Clinical Commissioning Group	NCCMH: National Collaborating Centre for Mental Health
CEDS: Community Eating Disorder Service	NEET: Not in education, employment or training
CEDS-CYP: Children and Young People's Community Eating Disorder Service	NHS: National Health Service
CLA: Children who are looked after	NICE: National Institute of Clinical Excellence
CORC: Child Outcomes Research Consortium	NHSE: NHS England
CORE 24: the core 24 hour a day service standards for people experiencing a mental health crisis	OMG: One Minute Guides
CSWS: Children's Social Work Service	PHSE: Personal, Health, Social and Economic
CSWS EDT: Children's Social Work Service Emergency Duty Team	PNMH: Perinatal mental health
CYP: Children and young people	S136: Section 136 assessment suites
CYP-IAPT: Improving Access to Psychological Therapies for young people	SDQ: Strengths and Difficulties Questionnaire
CYPP: Leeds Children and Young People's Plan	SEMH: Social, emotional and mental health
DfE: Department for Education	SEN: Special educational needs
DH: Department of Health	SEND: Special educational needs and disability
ED: Eating Disorder	SILC: Specialist Inclusion Learning Centres
EIP: Early Intervention in Psychosis	SPA: Single Point of Access
FE: Further Education	STP: Leeds Sustainability and Transformation Plan
G&S: Guidance and Support multi-professional meeting	TaMHS: Targeted Mental Health in Schools Project
HOPE: Harnessing Outcomes, Participation and Evidence	TCP: Transforming Care Programme ¹
HWBB: Health and Wellbeing Board	Tier 4: Inpatient beds for young people
HNA: Health Needs Assessment	TMP: The Market Place, a city centre-based third sector organisation
IMHS: Infant Mental Health Service	TSWS: Therapeutic Social Work Services
FIM: Future in Mind	York MBSR: York Mindfulness Based Stress Reduction
LCC: Leeds City Council	YOS: Youth Offending Service
	UNICEF: United Nations International Children's Emergency Fund
	WHO: World Health Organisation

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<http://www.leeds.gov.uk/docs/CYPP.pdf>

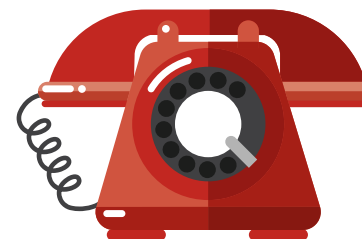
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http://www.leeds.gov.uk/docs/SENDStrategy2014_2017.pdf

Leeds Sustainability and Transformation Plan, 2016–2021
<https://www.leedssouthandeastccg.nhs.uk/news/west-yorkshire-harrogate-sustainability-transformation-plan-launched/>

World Health Organisation, 2012, can be found at:
http://www.who.int/mental_health/mhgap/risks_to_mental_health_EN_27_08_12.pdf



¹ TCP aims to improve services for people (all age) with learning disabilities and/or autism, who display behaviour that challenges, including those with a mental health condition.