

Compendium of Promising Practice

Collaborative Commissioning Networks

NHS England and NHS Improvement



FOREWORD

In response to Future in Mind, the Five Year Forward View for Mental Health was commissioned by NHS England (now NHS England and NHS Improvement) to outline a strategy for improving mental healthcare provision across England. This strategy was published in 2016, and its recommendations formed part of the NHS England Dementia and Mental Health Programme. NHS England and NHS Improvement's Collaborative Commissioning Networks project commenced in 2016 to deliver on this priority, as part of the NHS England's Children and Young People Mental Health Transformation Programme, under the Health and Justice and Specialised Commissioning Workstream.

The Collaborative Commissioning Networks project aimed to support a collaborative approach to the commissioning of services locally that ensures the full clinical pathway consideration for children and young people transitioning into and out of NHS England and NHS Improvement Health & Justice (H&J) commissioned services. These services include:

- Detention within the children and young people secure estate (CYPSE) in either youth justice or welfare secure settings;
- Sexual Assault Referral Centres (SARCs); and
- Liaison and Diversion (L&D) services and police custody.

The mental health and wellbeing needs of this population of children and young people are often not like those of their peers in the wider community. For example, they may:

- Have a higher likelihood of having been subjected to trauma or severe neglect;
- Have experienced high levels of social disadvantage;
- Have multi-layered, unmet and complex needs;
- Not be accessing services in a timely manner in the first place, despite high levels of need.

The Collaborative Commissioning Networks have provided an excellent test bed of work, with much of the learning being taken forward through the NHS Long Term Plan via the expansion of the Framework for Integrated Care into the community, to better support children and young people with complex needs in the community.

Throughout the life of this project, I have seen the implementation of successful, effective and sustainable services for children and young people, many of which you will read more about in this document. Numerous benefits have been reported nationally, including a better co-ordination of the holistic needs of children and young people; previously unidentified needs now being recognised and met; reduced silo working, improved professional relationships and the continued professional development of staff. Integrated partnership working has enabled collaborative commissioning networks across the country which have improved the mental health and wellbeing needs of this very vulnerable and at-risk group of children and young people, as well as laying the foundations for the expansion of the principles of the Framework for Integrated Care into the community.

Kate Davies CBE

Director of Health & Justice, Armed Forces and Sexual Assault Services Commissioning NHS England and NHS Improvement

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INTRODUCTION

There is a population of high risk, high harm and highly vulnerable children and young people (CYP) in England, who have complex needs across multiple domains and who need access to multiple services to meet those needs. The Collaborative Commissioning Network (CCN) project was established on the premise that these services would be most effective if the organisations commissioning them coordinated their planning activity. This would ensure that the CYP in question receive continuity of care throughout their care pathway and do not fall through the gaps that can exist between services that are commissioned separately.

The intention of the CCN project was to enable local Health and Justice Commissioners to:

- Define the cohort of CYP and their needs:
- Define the current commissioning arrangements and commissioning gaps locally;
- Understand and design full clinical pathway consideration for CYP accessing Health and Justice commissioned services;
- Work together with local partners to coordinate commissioning activities more effectively; and
- Raise the profile and needs of the population with local partners, stakeholders and commissioners by representing the cohort within Local Transformation Plans (LTPs).

As part of the CCN project, 104 initiatives were implemented locally. At a CCN local project level, it was found that the following models and attributes contributed to implementation being successful in addressing gaps in pathways:

- Consultation/ liaison model, whereby a specialist (e.g. psychologist) provides supervision to staff to increase knowledge and confidence in working with this population of CYP;
- Youth workers working directly with CYP and closely with other clinicians, engaging with CYP in creative ways (e.g. music) and via an outreach approach;
- Underpinning most successful projects was effective training and development of the workforce;
- Recruiting additional professionals to support CYP (emotional support or coordination) at the point of accessing Sexual Assault Referral Centres (SARCs);
- Enhanced early intervention work for behavioural and mental health needs with CYP and their families/carers;
- Harmful Sexual Behaviour (HSB) consultation model with a primary emphasis on co-working between different professionals on the CYP's pathway, combined with training and continued professional development;
- Multi-agency support and coordination for CYP as they resettle back into the community;
- Carrying out a local gap analysis to ensure a statutory and enhanced L&D service is offered.

This document is designed to serve as a useful tool to commissioners and showcase the promising practice achieved through this project.



ENHANCING TRAINING AND WORKFORCE DEVELOPMENT

These projects have established training programmes to support staff to better understand the children and young people in their care, and to deliver more appropriate and timely interventions.

The range of workforce development which has been commissioned through this workstream includes trauma informed approaches, harmful sexual behaviour, speech and language, and Adverse Childhood Experiences (ACEs).

1. Embedded Psychological Support – Brighton and Hove

| Area | South East | | |
|---------------------------|--|--|--|
| Site | Brighton & Hove | | |
| Theme | Enhancing Training & Workforce Development | | |
| Start date | September 2017 | | |
| Key contact | South East Health and Justice Team | | |
| Project brief | Embedded psychological support and consultancy advice (one day per week clinical psychologist and 0.8 WTE Assistant Psychologist) via a virtual team to cover the entire area in respect of the MH support to CYP. Adaptive Mentalisation-based Integrative Treatment (AMBIT) training to be delivered to professionals to encourage mental health support around the CYP. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|---|--|
| Programme management and evaluation support. Funding match by Brighton Hove CCG. | AMBIT Training at Anna Freud Centre. Collaboration between CCG, Local Authority, Sussex Partnership Foundation Trust, Mental health and social care workers. Mental Health support for CYP. | Virtual assistance to practitioners working with CYP who need mental health support. | Virtual assistance to practitioners working with CYP who need mental health support. | Better understanding of mental health in the system to signpost CYP to the right intervention and support at the right time. Improved mental health outcomes for CYP. CYP have increased emotional resilience. Project has contributed to local learning regarding efficacy of the service model to inform potential roll out across whole area. |

2. Trauma Informed Training – East Lancashire

| Area | North West | | |
|---------------------------|---|--|--|
| Site | East Lancashire | | |
| Theme | Enhancing Training & Workforce Development | | |
| Start date | November 2019 | | |
| Key contact | North West Health and Justice Team | | |
| Project brief | Training for the Lancashire Youth Offending Team (YOT) Health Practitioners to enable specialist trauma informed clinical and safeguarding supervision for YOT staff, to implement trauma informed ways of working. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|---|
| £12,000 cost for the training. | Collaboration between YOT, East Lancashire CCG, Lancashire Care NHS Foundation Trust and Lancashire County Council. Additional posts recruited. Retraining YOT social workers to carry out individual trauma functional assessments. Co-located health practitioners in YOT providing supervision. | Estimated 600 CYP have the potential to benefit from interventions. | The Trauma Recovery Model training was delivered to Lancashire YOT in Nov 2019 and was provided by Johnny Matthew. For more information visit: www.traumarecover ymodel.com | The service wide trauma training for Lancashire YOT team has contributed to improved knowledge and resilience of the workforce. |

3. YOT based CAMHS Practitioner – Bristol, South Gloucestershire and North Somerset

| Comerce | | | |
|---------------------------|--|--|--|
| Area | South West | | |
| Site | Bristol, South Gloucestershire, North Somerset | | |
| Theme | Enhancing Training & Workforce Development | | |
| Start date | September 2017 | | |
| Key contact | South West Health and Justice Team | | |
| Project brief | CAMHS Practitioner based in Bristol YOT, a commissioned activity to ensure improved MH assessments in YOT. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|--|
| £120,000 cost per annum. | Collaboration and coordination between agencies and practices within the Youth Justice System (YJS). Training for 700 members of staff. | To professionals are better informed about trauma informed practices and have increased knowledge and confidence to use them when working with CYP. Nearly 1000 staff working with CYP known to the YOT will have a shared understanding of trauma informed care and application to practice. Enhanced delivery of clinically informed supervision to large numbers of practitioners. | CYP receive a more consistent and better quality of care. | Trauma informed practices are embedded in practice. Improvement in emotional health and wellbeing of CYP in contact with the Youth Justice system. |

Case study: Simon

BACKGROUND

- Simon (primary school age)
- Concerns around aggressive behaviour at school and home
- Behaviours described as disruptive, aggressive, verbal threats and actua aggression toward his main carer.
- Reported to have set fire to toilet paper in school toilets.
- For the past 7 years Simon has beer cared for a by single grandparent who has had little emotional support and has said he feels that Simon should be in care.
- Not in full time education, specialist provision activity-based focus with plans for gradual return to school.

FORMULATION

- Simon has and continues to experience rejection on many fronts.
- Simon is likely to see the world as a scary place where adults are unpredictable, not always able to keep you safe emotionally and in fact can hurt you (reports of physical chastisement).
- Simon is likely to think that he is 'bad, 'always doing the wrong thing' and therefore any boundary setting (saying no) or smallest criticism is felt as a criticism of whole self.
- This lack of feeling safe is compounded by many years of unclear boundaries.

INTERVENTION

- Regular check in with Keyworker emphasis on Simon's emotional and mental health state.
- PMHS (Primary Mental Health Specialist) support to Parenting Practitioner and school. Offer to support whole school approach (using clinical supervision model) in implementation of Psychologist's recommendations.
- Supported referral to Trauma
 Recovery Centre. PMHS to support
 Simon; Family Intervention Team
 (FIT) worker to work with other
 agencies to support parent, who's
 release from prison is imminent.

4. Trauma, Personality Disorder, and SALT Training – Devon, Torbay, and Plymouth

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|---------------------------------------|--|--|--|--|
| Area | South West | | | |
| Site | Devon, Torbay, and Plymouth | | | |
| Theme | Enhancing Training & Workforce Development | | | |
| Start date June 2018 | | | | |
| Key contact | South West Health and Justice Team | | | |
| Project brief | A peninsular wide workforce development programme has been developed which includes training on trauma recovery, personality disorders, speech and language, adolescent behaviour and dyadic development psychotherapy training. Training rolled out to each of the three YOTs and wider stakeholders within the area. | | | |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach Working in collaboration | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|---|--|
| Training linked to the hiring of additional staff across Devon, Torbay and Plymouth YOTs. £80,000 cost per annum. | Collaboration between Devon YOT, Torbay YOT, Plymouth YOT, Atkinson SCH, New Devon CCG and NHS Trusts. Training for professionals across YOT, CAMHS and Social Care. Consultant support to asses training and outcome gaps. | Workforce development for over 300 professionals to support CYP in the youth justice system (YJS). | Improved access to relevant professionals and improved access to assessments and wider support. Improved input from health into Youth Justice processes (Court reports, YOT casework etc.) Improved cooperation between services in the area. Improved workforce knowledge. | Increase in multiagency working. Improved access to services for vulnerable CYP. Workforce development. CCG's have a better understanding and engaging more with the H&J agenda. Opportunities for stronger pathways between CCN and wider services. |

5. AMBIT Trainer Training and Harmful Sexual Behaviour (HSB) Team Development - Bath and North East Somerset (BANES) and Wiltshire

| Area | South West | | |
|---------------------------|--|--|--|
| Site | Bath and North East Somerset (BANES) and Wiltshire | | |
| Theme | Enhancing Training and Workforce Development | | |
| Start date | June 2018 | | |
| Key contact | South West Health and Justice Team | | |
| Project brief | Adaptive Mentalisation-based Integrative Treatment (AMBIT) train the trainer programme, multi- agency HSB audit, development of an HSB team in both BANES and Wiltshire. This was supported by the recruitment of an HSB Co-ordinator to work across both areas. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|--|
| • £98,750 cost per annum. | Collaboration between BANES YOT, Wiltshire YOT, social care and Wiltshire CCG. Additional post recruited. Support given to CYP who do not meet the CAMHs threshold. | CYP in BANES and Wiltshire YOTs directly benefited from access to a dedicated HSB Senior Practitioner. Multi-agency HSB audit. Development of a virtual HSB team. | Improved access to relevant professionals, improved access to assessments and wider support. Improved input from health into Youth Justice processes. Upskilled staff within YOTs, allowing them to better support CYP. Increased support for parent/carers, enabling them to better support CYP. | Upskilling and raising confidence of the multidisciplinary team surrounding the vulnerable CYP as the practitioner works to support the CYP. CCG's increased understanding and engaging with the H&J agenda. Stronger pathways between CCN and wider services. Improved multiagency working. |

Case study: Samuel

BACKGROUND

- Samuel is a 13-year-old boy with a global learning delay, a history of emotional neglect and complex developmental trauma.
- He is on a Special Guardianship Order (SGO) with his paternal uncle.
- The Children's Disability
 Team referred Samuel
 following incidences involving
 his Uncle's 5-year-old
 daughter.

INTERVENTION

- Weekly sessions were set up, which were shortened in length to respond to Samuel's capacity to maintain attention.
- Assessment tools such as storyboards were used to elicit Samuel's thoughts, feelings and intentions regarding previous incidences where he had sought to sexually abuse younger girls. This allowed a greater understanding of the ongoing risk.

FUTURE PLANNING

- Direct work continues with Samuel and his carers which have, in his carer's view, helped Samuel become clearer about what is safe sexual behaviour and what is harmful.
- There is some ongoing risk that is likely to need support, supervision and monitoring over time given the compulsive element to Samuel's behaviour.

6. Harmful Sexual Behaviour Training - Somerset

| Area | South West |
|---------------------------|---|
| Site | Somerset |
| Theme | Enhancing Training and Workforce Development |
| Start date | September 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | Harmful Sexual Behaviour (HSB) training focusing on early intervention in schools and colleges, and more in-depth training delivered to YOT/ CAMHS workers. HSB Twilight Training was given to parents and carers. This training was combined with the hiring of a Speech and Language Therapist and Clinical psychologist. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|--|
| • £20,000 cost per annum. | Collaboration between YOT, CAMHS, education, parent/carers and voluntary sector. Multi-level HSB training. | A total of 22 training sessions delivered to a range of organisations including schools, colleges and CAHMS. | Improved access to relevant information and training. Improved input from health into Youth Justice processes. Improved cooperation between services in the area, including health and justice and education. | Collaboration between health, justice and education. Upskilling and raising confidence of the multidisciplinary team surrounding the CYP as the practitioner works to support the CYP. Improved care for CYP with more knowledge and understanding of HSB in the youth justice system (YJS). |

7. YOT and L&D based CAMHS Practitioner – Gloucestershire

| Area | South West |
|---------------------------|--|
| Site | Gloucestershire |
| Theme | Enhancing Training and Workforce Development |
| Start date | May 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | CAMHS Practitioner linked to YOT and L&D. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|--|--|
| • £40,000 cost per annum | Collaboration between YOT, CAMHS and social care. Training provided for professionals working with CYP within YOTs, CAMHS and L&D Services. | Staff trained in Non- Violent Resistance to support CYP across multiple pathways. | Improved access to relevant training for staff across agencies. Improved cooperation between services in the area. | Workforce development Opportunities for stronger pathways between CCN and wider services. |

Case study: Toby

BACKGROUND

A 17-year-old male (Toby)
 was referred to the Youth
 Offending Specialist
 Practitioner (YOSP) following
 a Liaison and Diversion
 'health triage'. Toby had been
 arrested after taking drugs,
 requiring hospital admission,
 and assaulting emergency
 workers. There had been no
 prior contact with the police
 or health services up to this
 point.

INTERVENTION

- The YOSP completed a 'Choice' assessment at school. Toby was becoming withdrawn, avoidant of social situations and disengaging from school.
- It was agreed that the YOSP would complete 6-8 'partnership' sessions focused on anxiety management, utilising a CBTinformed approach.

"I found having this support helpful. I have learned many strategies and felt more able to manage" – Toby

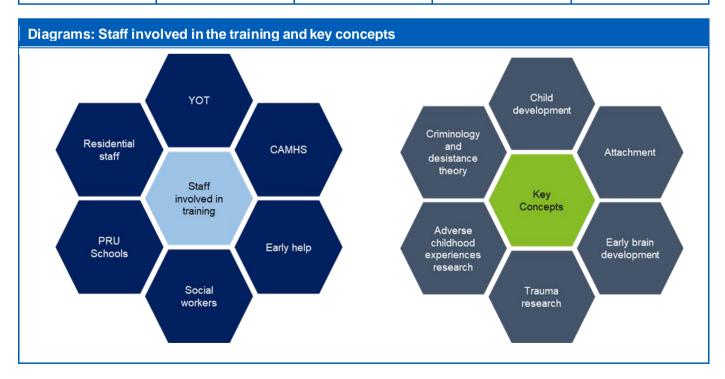
OUTCOME

- Support was offered at the earliest opportunity, even prior to the case coming to the Joint Decision Panel (JDP). The YOSP attendance at the JDP allowed for effective information sharing and a joined-up approach to responding to the offence and coordinating ongoing support.
- Toby engaged well with a CBT-informed intervention to address the symptoms of anxiety and low mood that he had been experiencing. He reported a significant improvement in these symptoms.
- Feedback from both the school and Toby's mother was that they had also seen a significant improvement in his wellbeing.

8. Trauma Recovery Model Training – North Tyneside

| Area | Cumbria & North East |
|---------------------------|---|
| Site | North Tyneside |
| Theme | Enhancing Training and Workforce Development |
| Start date | September 2018 |
| Key contact | Cumbria & North East Health and Justice Team |
| Project brief | Training to YOT and Early Help staff in Enhanced Case Management (ECM) and the Trauma Recovery Model (TRM) as a new way of working. North Tyneside YOT is also co-ordinating the project across all 6 YOTs comprising the Northumbria Police force area. The TRM training feeds into the theoretical model, the ECM training links to the practical delivery of services. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|---|--|
| £51,000 funding for 2018/19 to pay for TRM training for six YOTs. £40,000 funding for 2019/20 to pay for a Clinical Psychologist to work with North Tyneside YOT to support development of the ECM element. | Collaboration between six Northumbria YOTs, five CCGs and five Local Authorities. Enhanced case management and Trauma Recovery Model training for all six YOTs across Northumbria Police Force Area. | YOTs are upskilled in the trauma informed approach. YOTs can provide a better quality of care and support to CYP. | Improved knowledge of ECM and TRM by practitioners. Since the training, YOTs have introduced the TRM approach to all cases - approximately 85. Improved pathways for CYP in the youth justice system (YJS) due to a trauma informed approach. | CYP get appropriate trauma informed intervention to assist their mental health. CYP are likely to have better outcomes. More CYP receive more appropriate interventions earlier on in the pathway. |



9. Trauma Recovery Model Training – North Cumbria

| Area | Cumbria and North East |
|---------------------------|---|
| Site | North Cumbria |
| Theme | Enhancing Training and Workforce Development |
| Start date | October 2018 |
| Key contact | Cumbria and North East Health and Justice Team |
| Project brief | Training to YOT and Early Help staff in Enhanced Case Management (ECM) / Trauma Recovery Model (TRM) as a new way of working. Project spans the entire county and links with Morecambe Bay CCG for South Cumbria. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|--|--|
| £23,000 funding for 2018/19 to support the training. | Collaboration between YOT staff, CAMHS psychologists and Strengthening Families practitioners, local authorities, Cumbria Partnership, Morecambe Bay CCG, North Cumbria CCG and Cumbria County Council. Training sessions for staff. | ECM and TRM training for North and South Cumbria. Upskilled staff. | Improved knowledge of ECM and TRM by practitioners. Improved pathways for CYP in youth justice system (YJS) due to a trauma informed approach. Reduced referrals to CAMHS. | CYP received trauma informed interventions to support and improve their mental health. Increased numbers of CYP received appropriate interventions earlier in the pathway. |

Diagram: Feedback YOT and Early Help Staff

"The project has been effective in improving the methods of engagement with young people and the focus of criminal justice interventions. The partnership working between Cumbria, Northumberland, Tyne and Wear NHS FT and Cumbria YOS has been excellent, with meaningful relationships, communication lines established, and regular project review meetings. In terms of consistency, the same leads from both organisations have stayed involved.

Feedback has been collated throughout the project, not just from young people but also from partners agencies involved in the ECM process. This feedback so far has highlighted the positive impact of ECM for those agencies already involved with these complex cases."

10. Trauma Recovery Model Training – HAST and Darlington

| Area | Cumbria and North East |
|---------------------------|--|
| Site | Hartlepool and Stockton on Tees (HAST) and Darlington CCGs |
| Theme | Enhancing Training and Workforce Development |
| Start date | October 2019 |
| Key contact | Cumbria and North East Health and Justice Team |
| Project brief | Training to YOT and Early Help staff in Enhanced Case Management / Trauma Recovery Model as a new way of working. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| • £52,000 funding for 2019/20. | Collaborative working between all YOTs across Durham and Tees Valley, Early Help, CAMHS and Speech and Language Therapy services. Training sessions for staff. | Increased skill base within the workforce. Case discussions were initiated to review cases using trauma informed care principles as a framework. | Increased confidence of staff in working with CYP who have experienced trauma. | More CYP received timely support. CYP get the right trauma informed intervention to support their mental health. Upskilled staff. |

Feedback from children and young people

"The Clinical Psychologist was nice and friendly; I don't think I needed loads of help... I know I could have been better at using the time, but the bits I did use were good thanks. Just being a Dad is what I want to spend my time on."

"Helpful, liked the creative stuff, liked that it was organised, like I knew what to expect each time. I felt everyone cared about me and wanted me to talk about stuff; they weren't disappointed in me, which felt good too. I felt safe. Thanks a lot."

"I like the sessions with the Clinical Psychologist, she's kind. I like I'm getting more sessions, it's good to talk"

ACEs Adverse Childhood Experiences

11. ACE's Training for YOS, SALT Practitioner, and HSB Practitioner – Stoke and Staffordshire

| Stanore | 251 III C |
|---------------------------|--|
| Area | West Midlands |
| Site | Stoke & Staffordshire |
| Theme | Enhancing Training and Workforce Development |
| Start date | April 2018 |
| Key contact | West Midlands Health and Justice Team |
| Project brief | Adverse childhood experiences (ACEs) training for YOS & other staff and emotional coaching. Intensive work in the YOS to develop attachment / trauma informed approaches, which consider the effects of ACEs on CYP. Additionally, a project officer recruited to complete detailed pathway mapping for CYP H&J pathway and training needs assessment, and a Speech and Language Therapist was recruited to support the service. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|---|--|---|
| Additional posts were funded. £121,440 cost per annum. | Collaboration between Staffordshire and Stoke CCGs, Stoke on Trent YOT, Staffordshire YOT, NSPCC, Local Authorities and Midlands Partnership Foundation Trust. Recruitment of a project officer. Training sessions conducted. | An estimated 15 CYP in youth justice system (YJS), including within the CYPSE were supported each year. | Reduced incidents of anger, aggression and violence. Addressing HSB in a timely manner to prevent further possible HSB. Commissioning arrangements now focus on reducing the barriers to access. | Improved mental health, school attendance, less family/placement break down. Increased understanding of ACEs and Speech, Language and Communication difficulties Increased engagement with services. Improved links between YOT and SARC to support identification of those at risk of becoming offenders in relation to HSB. |

ACE's - A need for a radical culture change? Adverse Childhood Experiences (ACEs) are traumatic events that affect children while growing up, such as suffering child DEATH **Early Death** maltreatment or living in a household affected by domestic violence, substance misuse or mental illness. There are nine key ACEs (3 Non Communicable Disease, Disability, Social Problems, Low Productivity direct and 6 indirect) experiences that have an impact on childhood development and their Life Course response to stress. Evidence suggests Adopt Health Harming children exposed to 4 or more adverse **Behaviours and Crime** experiences are more likely to participate in risk taking behaviours and find it more difficult Social, Emotional and to make changes and consequently, have **Learning Problems** poorer health outcomes. In summary the more ACEs a child Disrupted Nervous, Hormonal and Immune Development experiences the more likely they are to experience health implications as a result of poor health behaviours which can result in

Excerpt from West Midlands ACEs Scoping Report

early death.

BIRTH

12. Trauma Informed Training - Kent

| Area | South East | | |
|---------------------------|--|--|--|
| Site | Kent | | |
| Theme | Enhancing Training and Workforce Development | | |
| Start date | September 2018 | | |
| Key contact | South East Health and Justice Team | | |
| Project brief | Trauma informed training for 700 practitioners working with the Health and Justice cohort of CYP. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| • £126,000 cost per annum. | Collaboration and coordination between agencies and practices within the youth justice system (YJS). Training for 700 staff. | To professionals are better informed about trauma informed practices and have increased knowledge and confidence to use them when working with CYP. Nearly 1000 staff working with CYP have a shared understanding of trauma informed care approaches and application to practice. Enhanced delivery of clinically informed supervision. | CYP within the YJS receive more consistent and better quality care. | Trauma informed practices are embedded within Health and Justice. Improvement in emotional health and wellbeing of CYP who are in contact with the YJS. |

Project aims for developing trauma informed practice

Aims of developing trauma informed practice

The project has the following aims:

- 1. To develop a **skilled adolescent workforce** who are able to **recognise and support children and young people** either in or at risk of entering the youth justice system who have **experienced trauma**, and in particular complex or multiple traumas.
- 2. To allow **organisations** working with the identified cohort of young people to be safe spaces; **equipped** and able to **support children and young people**, families and staff to recognise and manage primary and secondary trauma.
- 3. Children and young people within the cohort will report that they **feel safe** when with organisations who are trauma informed and children and young people within the cohort will report **increased confidence in their future**.
- 4. **Staff** working with young people in the cohort report that they are **confident** to work with children and young people around trauma and have the **support** necessary to help them **manage the impact of trauma**.
- 5. To **test** a scheme for workforce development **and organisational adaptation** which can be applied to **wider children and adult services.**

13. CAMHS Referral Training, Suicide Prevention Training, CBT Training - Hereford and Worcestershire

| 1101010 | Taria Wordestersine | | |
|---------------------------|---|--|--|
| Area | West Midlands | | |
| Site | Hereford & Worcestershire | | |
| Theme | Enhancing Training and Workforce Development | | |
| Start date | April 2018 | | |
| Key contact | West Midlands Health and Justice Team | | |
| Project brief | Training provision for West Mercia youth justice system (YJS) staff to including training for referral to CAMHS, STORM suicide prevention and self-harm training, cognitive behavioural therapy practitioner training and additional capacity to meet MH needs of looked after children. Speech and Language Therapy (SALT) input into Youth Justice to provide training and consultation to staff. | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| • | Developing the work | loice | | |
|--|--|---|---|--|
| INPUTS What was contributed to the programme? • CCG identified one off | ACTIVITIES What was implemented? • Collaboration between | OUTPUTS What tangibles resulted from activities? • Looked after children | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? • Successful early |
| funding in 2018-19 so funding was only required for 2019-20 for SALT input. £29,000 cost per annum. | West Mercia Youth Justice Service, Herefordshire & Worcestershire CCGs, 2gether NHS Foundation Trust and Herefordshire Council. Provision of training for Youth Justice staff. SALT based at Youth Justice Service half a day a week to provide training and consultation to staff. Additional capacity in Herefordshire to work with Looked after Children not meeting the threshold for CAMHS. | that did not meet the CAMHS threshold have been supported with their emotional wellbeing and mental health. All Youth Justice staff across Herefordshire and Worcestershire have attended training on self-harm, depression, anxiety, PTSD and psychosis. Youth Justice Staff have received training and support from SALT. | numbers of referrals from Youth Justice to SALT services. Enhanced direct service provision offer. Increase in confidence and awareness of Youth Justice staff in emotional wellbeing, mental health and SALT issues. | intervention has reduced the likelihood of CYP developing more complex mental health issues and/or reduced further contact with the YJS. Improved communication between YOT and CAMHS to support interventions. Improved communication and understanding between YOS and SALT. |

14. Trauma Informed Training – Yorkshire & Humberside

| Area | Yorkshire & Humberside |
|---------------------------|--|
| Site | Area wide |
| Theme | Enhancing Training and Workforce Development |
| Start date | September 2018 |
| Key contact | Yorkshire & Humberside Health and Justice Team |
| Project brief | Trauma informed training delivered to 150 YOS and Liaison and Diversion staff, to enable them to deliver trauma informed practice. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|--|
| Direct programme funding. | Collaboration between YOT, PCC, L&D service, CSAAS and Barnardos. Training provided by Homeless Link to youth justice practitioners and other professionals. | Training sessions for staff about the effects of trauma on vulnerable CYP. | A consistent approach from practitioners. Enabled staff dealing with vulnerable CYP to offer an approach which addresses the potential causes of their offending and how this has impacted on their presenting behaviour. | Greater collaboration between YOT, police services and other partner agencies to understand the effects of trauma on vulnerable CYP. |

Delegate feedback from the training events

"Covered a lot in a short period, but covered it well"

"very dynamic and inclusive"

"this was the best and most relevant humanistic class training I have had for ages"

"very good and detailed training, it made me feel validated in how I practice my role"

15. Harmful Sexual Behaviour Training - Wakefield

| Area | Yorkshire & Humberside |
|---------------------------|--|
| Site | Wakefield |
| Theme | Enhancing Training and Workforce Development |
| Start date | October 2019 |
| Key contact | Yorkshire & Humberside Health and Justice Team |
| Project brief | Coordination and provision of Technology Assisted Harmful Sexual Behaviour (TAHSB) Training for YOT staff |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|--|---|
| TAHSB was identified as a gap in learning within the Emotional Wellbeing Pathway. £2,500 for 2-day course and resources. | Two-day external training providing guidance on how to structure professional judgements and case formulation; to be used to form part of a holistic and comprehensive assessment. | Enhanced skills and knowledge of YOT Practitioners. Reduction in the likelihood of further high-risk behaviour. Timely assessments and intervention to reduce emotional distress due to the length of time investigations and assessment scan take. | Capacity to undertake assessments with CYP who exhibit harmful sexual behaviour using technology. Access to more appropriate interventions for CYP who offend online. Better outcomes for CYP who display harmful sexual behaviour and their families. | Further protection for victims and a reduction in potential victims of harmful sexual behaviour. Improvements in partnership working. |

16. Dialectical Behaviour Therapy Training for YOT staff - Wakefield

| Area | Yorkshire and Humber | | |
|---------------------------|--|--|--|
| Site | Wakefield | | |
| Theme | Training and Workforce Development | | |
| Start date | November 2019 | | |
| Key contact | Yorkshire and Humber Health and Justice Team | | |
| Project brief | Dialectical Behaviour Therapy (DBT) training for YOT staff. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|---|---|
| Training delivered by affiliates of the Association of Psychological Therapies (APT) who are a leading provider of Dialectical Behaviour Therapy training. | Delivery of Dialectical Behaviour Therapy (DBT) to practitioners from the YOT and partner agencies. Improved access to psychological therapies. | The training enabled skilled practitioners to provide DBT with CYP in or at risk of entering the youth justice system (YJS) and are assessed as meeting the clinical threshold for therapeutic intervention. Strengthened the current emotional wellbeing provision. Improved access to psychological therapies. | The course covered the delivery of effective DBT for CYP including confusion about self, impulsivity, lack of emotional control, interpersonal problems, family problems and dilemmas, high-risk behaviours, including suicidal behaviour and non-suicidal self-injury. | Strengthened emotional wellbeing provision for CYP. Greater multiagency working between agencies including Wakefield YOT, High Well School (specialist school for CYP with severe social, emotional and mental health issues), Wakefield Children's Social Care and Change, Grow, Live (CYP substance misuse service) |

17. SALT Practitioner, Psychologist, Resilience Training - Dorset

| Area | South West |
|---------------------------|--|
| Site | Dorset |
| Theme | Training and Workforce Development |
| Start date | April 2017 |
| Key contact | South West Health and Justice Team |
| Project brief | The recruitment of a Band 6 SALT Therapist (part time), a Band 6 nurse in Dorset YOS, and Psychologist for one day per week. Training for staff in nonviolent resistance (NVR) and Eye Movement Desensitization and Reprocessing (EMDR). |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|--|---|
| • £60,930.perannum. | Collaboration and coordination between Dorset YOT, Dorset CCG and CAMHS. Training and workforce development for staff. Additional roles and capacity created. | CYP assessments and interventions. Training programmes for the YOT. Increased assessments within L&D. Consultation with other practitioners to explain how to adapt their work for SLCN. | Practitioners in the youth justice system (YJS) are more aware of CYP mental health and SLCN. Practitioners have improved response to trauma. CYP have more joined up pathways in H&J because of improved understanding of SLCN. Improved documentation for service users. Improved links with community speech and language services. | Improvement in quality of care for CYP. CYP are more likely to sustain education, employment and relationships. Improved pathways through the YJS system for CYP. Improved communication with community services such as the CYP's school. Improved communication with parents / carers to support CYP's needs. |

Case study: Ben

REFERRAL

Ben met with the Speech and Language Therapist on two dates to complete an assessment of his language skills. The assessment sessions took place at a library, which was a quiet, neutral setting. Ben had previously met with the Speech and Language Therapist to attempt an assessment at his mum's home address; however, Ben refused to participate.

Ben identified he finds remembering things difficult and said he doesn't listen in lessons as they are "boring".

EXPRESSIVE LANGUAGE (VOCABULARY)

Ben struggled to use language to explain and will often answer "don't know" to questions. In assessment tasks, he found it difficult to link ideas using connective language (i.e. Instead, because, though). When using longer or more complex sentences, Ben made grammatical errors. These difficulties will present as a poor ability to give a coherent account of what has happened, or to justify his actions. Ben may give minimal responses in these situations.

RECEPTIVE LANGUAGE (UNDERSTANDING)

Ben's ability to retain and understand spoken language is significantly below the level expected for his age. Ben's most significant area of difficulty is listening to and remembering information from longer stretches of spoken information. During assessment he found it very difficult to answer any questions relating to information he had recently heard. Ben struggled to follow verbal instructions with more than three steps, however, he was good at identifying when he needed help and could ask for repetitions or clarification in a 1:1 setting. He reported he would be less likely to do this in the classroom.

SUMMARY AND RECOMMENDATIONS

Ben presented with a mild-moderate Developmental Language Disorder (DLD) however, he has become competent at using strategies that mask his difficulties. He will need support to participate in classroom learning and further recommendations have been outlined in a report.

18. Trauma Recovery Model Training - Dorset

| Area | South West |
|---------------------------|--|
| Site | Dorset |
| Theme | Training and Workforce Development |
| Start date | April 2017 |
| Key contact | South West Health and Justice Team |
| Project brief | Training to YOT and Early Help staff in Enhanced Case Management / Trauma Recovery Model as a new way of working. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|---|
| Direct programme funding. | Collaboration between YOT, CAMHS, CCGs and social care. Workforce development and training in TRM. | Local YOT is upskilled in a trauma informed approach. Local YOT is able to provide a better quality of care and support to CYP. | Improved access to relevant professionals, improved access to assessments and wider support (Substance misuse, Speech and Language) for vulnerable CYP. Improved input from health into Youth Justice processes (Court reports, YOT casework etc.) Recognition of the needs of CYP and how trauma impacts on behaviour. Improved sharing of information between practitioners which ensures better support for CYP. | CCG's have increased understanding and are more engaged with the H&J agenda. Stronger pathways between CCN and other wider services. More CYP receive more appropriate interventions earlier in the pathway. Reduction in offending rates and increased opportunity to sustain educational/employment placements. |



ENHANCING YOT PATHWAYS

The projects within this section have focussed on enhancing pathways within Youth Offending Teams to better support children and young people that may have found it challenging to access appropriate services previously.

Some examples of pathway enhancements include additional speech and language provision; additional mental health expertise to support both children and young people and the staff working with them; and an increased focus on the effects of trauma within this cohort via Trauma Counsellors and Wellbeing Practitioners.

19. YOT based CAMHS Practitioner – Swindon

| Area | South West |
|---------------------------|--|
| Site | Swindon |
| Theme | Enhancing YOT Pathways |
| Start date | September 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | The recruitment of a CAMHS Practitioner in YOT (0.8 FTE) and a SALT Practitioner. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|--|
| • £48,750 cost per annum. | Collaboration between Swindon CCG, Swindon YOT, CAMHS, Youth Services and education providers. A suite of training to support vulnerable CYP. | CYP known to the YOT, including those transitioning into / out of the CYPSE have benefitted by being able to access speech and language and mental health support. | Improved cooperation | A consistent approach across multiple agencies for supporting vulnerable CYP who have experienced trauma. CCG's have increased understanding and are more engaged with the H&J agenda. Stronger pathways between CCN and other wider services. |

Case study: Marnie

Name: Marnie Age: 17 yrs.

Background: Marnie is a young person that has difficulties with emotional regulation and impulsivity. These difficulties may have risen from his systemic experiences (physical abuse by his mother,

"I really appreciated CAMHS YOT Liaison support at my court hearing" - Marnie

social care involvement over the years, difficulties in his relationship with mum and dad, parents strained relationship, and mum's poor mental health). Marnie became involved with a criminal peer group at the age of 12 and is thought to be involved in gangs and drug dealing.

Request for Service: Marnie was referred by his YOT worker due to impulsive behaviour, increased feelings of anger, and lack of impulse control.

Intervention: In September 2019, the CAMHS YOT Liaison joined Marnie at court proceedings to aid engagement and promote the message that professionals care. Marnie was appreciative of the gesture and support during the court hearing, as was his Dad who was also present in court.

Outcome and Impact: Marnie engaged well with staff during. This further supported his attendance in college, participation in positive social activities (such as martial arts and going to the gym), reduced contact with the police and reduced engagement in pro-criminal behaviour.

Unfortunately, Marnie lost his place at college and began to re-engage with pro-criminal peers. Having a previously positive therapeutic relationship with staff has been beneficial in Marnie's ability to re-engage with the service. The CAMHS YOT Liaison attended court proceedings with Marnie to aid engagement and promote a more open assessment of his needs. The service will continue to support Marnie to access other professionals to support his mental health needs, as well as working closely with his YOT worker and family to support him.

20. YOT based Speech and Language Therapist - Bath and North East Somerset (BANES) and Wiltshire

| Area | South West | | |
|---------------------------|---|--|--|
| Site | Bath and North East Somerset (BANES) and Wiltshire | | |
| Theme | Enhancing YOT Pathways | | |
| Start date | June 2018 | | |
| Key contact | South West Health and Justice Team | | |
| Project brief | The recruitment of a Speech and Language Therapist based in Wiltshire YOT. | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Working in collaboration | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|----------------------------------|---|---|---|
| • £18,750 cost per annum. | Additional post recruited. | A SALT informed workforce. CYP have greater access to SALT support. | Improved access to relevant professionals, improved access to assessments and wider support. Increased understanding of speech and language needs by adults surrounding the CYP. CYP are able to communicate more effectively with the YOT. | Improved cooperation between services in area. CCG's have increased understanding and are more engaged with the H&J agenda. Stronger pathways between CCN and wider services such as FCAMHS, CAMHS, L&D and schools. Increase in multiagency working. |

Case study: Ben

Background

Ben was 17 years old upon accessing the SALT service; he had recently been diagnosed with an Autism Spectrum Condition at 16 years old, which was considered to be a late diagnosis. Ben had a vocational placement at a local college arranged and responded well to positive reinforcement. Ben interacted well with others in one-on-one conversations and was polite.

Communication Strengths and Needs - Receptive

Strengths – Ben's core language skills were within the normal limits and he engaged well with the YOT, regularly taking part in arranged activities.

Needs – Ben needed information broken down into simple phrases and questions. Ben had a below average short-term memory.

Communication Strengths and Needs - Expressive

Strengths – Ben was confident, asking clarification questions when required. Ben interacted well in both one-on-one and small group settings.

Needs – Ben needs additional time to process instructions and sentences, and to retrieve words to respond. Ben found generalisations challenging to understand.

21. YOT based CAMHS Practitioner and SALT Practitioner - Newbury, North & West Reading, South Reading, Wokingham

| Area | South East |
|---------------------------|--|
| Site | Newbury, North & West Reading, South Reading, Wokingham |
| Theme | Enhancing YOT Pathways |
| Start date | April 2017 |
| Key contact | South East Health and Justice Team |
| Project brief | Recruitment of 0.5 WTE Band 7 SALT Therapist and a 0.3 WTE Band 7 CAMHS Worker across three YOTs in Berkshire. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|--|
| • £53,600 cost per annum. | Collaboration and coordination between Speech and Language Service, L&D Team, Social Care, police, courts and magistrates. Training and workforce development. | Assessments and interventions for CYP. Training programmes for YOT, members of SWAAY (specialist provider of support for CYP displaying sexually harmful behaviour), police, courts, magistrates, schools and units for people with behavioural issues. | Practitioners in the YOT are more aware of CYP mental health and SLCN. CYP have improved access to appropriate care. More CYP receive interventions more quickly. | Improvement in the overall quality of life of the CYP. |

Case study: Kyle

Background: Kyle is a 12-year-old transgender male who enjoys Irish dancing. Kyle is pansexual, and has difficulty making friends.

At risk of homophobia At risk of transphobia Past experience of self-harm Cyber bullied / bullied at school At risk of grooming

Introduction:

Kyle was introduced to Breakout Youth through a school TAF (Teacher and Family) meeting and presented with several difficulties. He is a lonely young person who struggles with making long lasting friendships. He has spent a lot of time online and has formed concerning relationships. He has also taken part in group self-harm – posting photos and videos of himself cutting his arms. Kyle has come out to his family about his gender and sexuality however his name and pronouns are not currently used at home.

The Plan:

During the initial meeting it was agreed that Kyle would start the New Forest Breakout group to socialise with more children and young people like himself in a secure and supportive setting. The aim was for Kyle to meet friends who he could interact with long term that empower him to speak more freely about his gender identity and explore what this means for him whilst supported by Breakout Youth Project Workers. The service also worked with Kyle's school to facilitate sessions around internet safety due to Kyle previously struggling with grooming, harassment and peer pressure online.

The Outcome:

Kyle has attended the group, has opened up more and has started to make friends. He stated that he enjoys he groups and has made friends with other transgender children and young people there. Over the sessions Kyle has grown more sociable and the impact of support from his peers has had a positive impact.

22. YOT based SALT Worker - Bracknell & Ascot, Slough and Windsor, Ascot & Maidenhead

| Maidoili | |
|---------------------------|---|
| Area | South East |
| Site | Bracknell & Ascot, Slough and Windsor, Ascot & Maidenhead |
| Theme | Training and Workforce Development |
| Start date | April 2017 |
| Key contact | South East Health and Justice Team |
| Project brief | Recruitment of SALT to work one day a week, upskilling staff, completing assessments, and delivering direct interventions in East Berkshire YOT. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|---|
| • £48,031 perannum. | Collaboration and coordination between SYMBOL (SALT provider), Social Care, police, courts and magistrates. Training and workforce development. | Assessments and interventions for CYP. Training programmes for YOT. 80 CYP accessed the service Revision of YOT documentation to make more appropriate for CYP with SLCN. | Practitioners in the YJS are more aware of CYP's mental health and SLCN. CYP have improved access to care. More CYP receive interventions more quickly. | Improvement in quality of life of CYP. Improved pathways through the YJS for CYP. |

Case study: Henry

Background:

Henry was seen for two initial assessment sessions. When formally tested his expressive and receptive language skills were at the low end of average although he spoke coherently and was able to describe with some detail.

At the same time Henry was also attending assessment sessions for a diagnosis of autism, which he has recently received. Henry was keen to talk about his difficulty with social communication. He identified that starting and maintaining conversations on an individual and group basis was an area of need.

Henry was seen for four intervention sessions focusing specifically on initiating and maintaining a conversation on an individual level. This then developed further by focussing on group situations. The SALT used a variety of training resources to support Henry's understanding and awareness, then put this into practice with role playing potential situations.

Outcomes:

- Henry reported he felt more confident with initiating conversations.
- Henry reported that he felt more confident when thinking of questions and offering stories to keep a conversation flowing.
- Henry reported that he had enjoyed the sessions and gained valuable skills from them.
- Henry's Reparation Worker reported an increase in confidence both within sessions and whilst out in the community.
- Henry's Caseworker remained aware of the work completed and was able to continue this throughout the rest of Henry's court order.

23. YOT based Wellbeing Practitioner - Hampshire

| Area | South East |
|---------------------------|---|
| Site | Hampshire |
| Theme | Enhancing YOT Pathways |
| Start date | April 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | X2 Wellbeing Practitioners to work within the YOT. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|--|--|
| • £20,000 per annum. | Collaboration and coordination between local Hampshire schools, the five Hampshire CCGs, Hampshire YOTs, CAMHS and Breakout Youth (service provider). Additional role(s) and capacity created. | 1:1 sessions and interventions for CYP. Care plans and techniques for CYP. Special support for LGBT CYP. | Improved access to relevant professionals, assessments and wider support. CYP are better able to self-manage their mental health needs and have improved coping skills. CYP have quicker access to other practitioners. CYP respond better to other interventions. | CYP feel more secure and have better emotional health and well-being. CYP have increased confidence. |

Case Manager Feedback from YOT Therapeutic Wellbeing Officer, Annual Report 2018

"The Therapeutic Wellbeing Officer provided insightful reflections and a thorough therapeutic oversight to improve our work with the young person. The young person was better able to describe and recognise their emotions. The young person returned to education (at a skills centre) and obtained a voluntary job at a local mental health charity shop and completed their Referral Order. The young person managed to consistently engage with mental health support from the practitioner, providing increased confidence with being able to access mental health support."

24. YOT based Trauma Counsellors – Hampshire

| Area | South East |
|---------------------------|--|
| Site | Hampshire |
| Theme | Enhancing YOT Pathways |
| Start date | April 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | Trauma Counsellors - Break4Change (B4C) in YOT. Accredited programme focused on supporting parents/carers on extreme behaviours exhibited in their children whilst working with CYP in a separate group to identify how they might change their behaviours to prevent abusive and violent behaviour in the future. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|--|
| • £64,000 per annum. | Collaboration and co- ordination between the 5 Hampshire CCGs, Hampshire YOTs, Hampshire Court bases. | Family therapy and systematic intervention. One 2-hour session per week for 10 weeks per case. | Parents/carers are better able to manage their CYP's violent behaviour and developed consistent strategies to manage. CYP see a more consistent approach and understand consequences of their behaviour. Trauma informed approaches provided effective interventions across the pathways for CYP. | Increased and improved support to CYP experiencing complex difficulties. Reduction in offending/reoffending behaviour. Collaboration between multiple agencies to support CYP. A consistent approach across multiple agencies for supporting vulnerable CYP who have experienced trauma. |

Goals and plans for a 13 year old girl

| | Goal | Plan |
|--------------------|---------------------------------------|--|
| Wellbeing | Improve overall wellbeing. | Introduce self-care strategies to daily routine. |
| Emotional Literacy | Learn to recognise and name feelings. | Psychoeducation on what feelings are and their purpose, linking feelings to thoughts and behaviours. |
| Anger | Having fewer arguments. | Psychoeducation about anger, as well as recognising triggers, warning signs and coping strategies. |
| Depression | Having fewer 'feeling down' days. | Psychoeducation on low mood. |

25. SALT Practitioner - Suffolk

| Area | East of England |
|---------------------------|---|
| Site | Suffolk |
| Theme | Enhancing YOT Pathways |
| Start date | April 2018 |
| Key contact | East of England Health and Justice Team |
| Project brief | Access to SALT for CYP within YOTs. Speech and Language Therapists (SLTs) from the Inclusion Service provide 180 days of Speech and Language Therapy, which equates to approximately 1 day per week of dedicated time in each team. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|--|---|
| £68,333 cost per annum. Business Support equivalent to 0.2 WTE. | Collaborative working between Suffolk and North Suffolk CCG, YOT and Speech therapists. Support to other practitioners working with CYP. Onsite support in schools and with families of CYP. | Revised documents, such as Youth Conditional Caution documents, to ensure accessibility for CYP. 1:1 Speech and Language interventions for CYP. Collaborative consultative work with YOT practitioners. | Increased ability of CYP to navigate the Justice system. Increased ability of YOT to understand the cohort who have SLCN. Reduced waiting time for speech and language referral and intervention. Increased evidence of YOT and SALT working together. Reduced referral times for SLCNs. | Reduced reoffending rates and reduced severity of re-offence. Improved school outcomes for CYP. Better pathways for CYP within the YJS. |

Case study: Alex

YOT Primary Health Care Worker contacted the YOT practitioner with concerns regarding Alex's health needs, reporting that Alex does not currently have a diagnosis. The Worker reported that he had a history of Autism Spectrum Condition (ASC) traits but did not meet the criteria for ASC. Alex had language needs and a poor working memory, however did not meet the criteria for dyslexia. Alex had no hearing or medical diagnosis to relate to his behaviour or learning needs, however it was reported by his Mum that he often needed information repeated and faced difficulties with problem solving.

Indirect therapy: a universal approach for all working with Alex, including recommendations for practitioners and supporting resources for Alex. This was provided in the form of an SLT report.

- Break down spoken instructions into small chunks and write them down systematically.
- Ensure regular 'moving breaks' this could involve games or standing up and moving around in between pieces of work to help Alex stay focused.
- Model answers and give Alex examples when he has not understood a task.
- Support Alex to unpick spoken and written clues when problem solving with visual prompts.

26. YOS and Community based CAMHS Practitioner – Dudley and Walsall

| Area | West Midlands | | | |
|---------------------------|---|--|--|--|
| Site | Dudley & Walsall | | | |
| Theme | Enhancing YOT Pathways | | | |
| Start date | January 2019 | | | |
| Key contact | Midlands Health and Justice Team | | | |
| Project brief | Recruitment of two 0.5 WTE Band 7 CAMHS Practitioners to work with community teams and YOS. Both roles support those CYP who transition into and out of the CYPSE. | | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Care for the most vulnerable Working in collaboration Improving transition | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|--|
| £66,319 cost per annum. | Mental health assessments on all CYP known to the YOT service to identify those who have underlying mental health difficulties. Provision of a streamlined pathway into CAMHS should it be required so that CYP do not have to wait. Anger management groups established. Co-work with ADHD clinic to complete assessment profiles to support a diagnosis if required. | 15 CYP were referred into ADHD clinic for full assessment or to receive group or 1:1 work. 17 CYP were assessed in Dudley and 13 CYP were assessed in Walsall for underlying mental health issues. | Increase in targeted mental health interventions such as CBT, anger managements, emotional regulation techniques etc. Increased support for CYP to function in the community post discharge and have equal opportunities to access to healthcare services. Improve early intervention. Improved personcentred care that provides the right treatment and support. | Improved early intervention reducing the likelihood of CYP developing more complex mental health issues. Improved communication between CAMHS and YOS to support interventions. Greater integration of services driven by better partnerships. Improved outcomes for CYP and a reduction in inequalities. Improved care. |

27. CAMHS Support to YOS - St. Helens

| Area | North West |
|---------------------------|--|
| Site | St. Helens |
| Theme | Enhancing YOT Pathways |
| Start date | October 2018 |
| Key contact | North West Health and Justice Team |
| Project brief | A dedicated Barnardo's worker for three days per week based in the YOS to support the staff around training requirements and complex issues. The worker also supported CYP victims of crime within the role. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|---|
| £26,000 per annum. Additional match funding to extend the length of the programme. | Collaboration between YJS partners, CCG, children's social care, drug and alcohol services, and Barnardos. Additional post recruited. | 120 CYP have benefited from interventions in the form of face to face or via telephone counselling. CYP able to access online support from Barnardo's on-line counselling. Worker carried out both mental health assessments and interventions for CYP. The building and environment were adapted to create a therapeutic setting. | More timely access to appropriate assessments and support for this vulnerable group of CYP. Identification of previously unidentified or unmet needs, allowing for quicker intervention. Swifter and easier access to CAMHS professionals for case discussion. Parents/carers benefited from consultation with the therapist. | Reduced first time entry to the YJS. Reduced re-offending. Reduced use of custody. Increase in multiagency working. YJS staff more knowledgeable and informed about CYP. More support for victims to make them more likely to be willing to engage in restorative justice. Children are able to access the right mental health support at the right time, reducing risk of them going into crisis and improving their emotional and mental health and well-being. |

Case study: Tom

- Tom attended 12 sessions. He was referred into the service with behavioural concerns, which stemmed from underlining issues of anger.
- Tom had a diagnosis of attention deficit hyperactivity disorder (ADHD) and autism spectrum condition (ASC).
- · Creative ways of working in the session were implemented.
- Tom was originally seen in school and due to his passion for music; the sessions were arranged within a music classroom that he felt comfortable and relaxed in.
- Tom played musical instruments within the sessions, as sitting still for long periods was overwhelming for him.
- Playing musical instruments ensured the sessions were more informal and child led.
 Furthermore, the use of creative lyric writing helped aid the discussion around Tom's thoughts and feelings.

28. ACE's Trainer Training for YOS - Wirral

| Area | North West |
|---------------------------|---|
| Site | Wirral |
| Theme | Enhancing YOT Pathways |
| Start date | October 2018 |
| Key contact | North West Health and Justice Team |
| Project brief | Recruitment of a part time CAMHS clinician into the YOS in Wirral, and the provision of training for the YOS on Adverse Childhood Experiences. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Care for the most vulnerable Working in collaboration Improving transition |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|---|--|
| Match funding provided by YOS to co-deliver ACEs training. | 0.5 WTE CAMHS Clinician in YOS. Training in ACE awareness. An additional member of staff trained to deliver 10-week ACE Recovery Toolkit programmes to parents/ carers who have experienced ACEs and/ or whose CYP have experienced ACEs. | Timely and appropriate assessment for CYP open to the YOS. 400 staff trained in identifying ACEs. | CYP in the YJS received more support (and more timely support), thereby improving outcomes for CYP. The funding of ACEs awareness training contributed to a wider discussion within the local authority and health system regarding ACEs, including funding to train people to support both adults and children who have experienced ACEs (ACEs Recovery Toolkit Training). | Reduced first time entry to the YJS. Reduced re-offending. Reduced number of family breakdowns, social care interventions and school exclusions. Raised attainment of CYP. |

29. SLCN Therapist – North Yorkshire & City of York

| Area | Yorkshire and Humber |
|---------------------------|---|
| Site | North Yorkshire & City of York |
| Theme | Enhancing YOT Pathways |
| Start date | February 2019 |
| Key contact | Yorkshire and Humber Health and Justice Team |
| Project brief | Recruitment of a Speech and Language Communication Needs (SLCN) Therapist across the area. The role involves providing training, advising staff, and providing direct clinical services for CYP. The model enables important interventions at key points in the CYPs journey, for example influencing judicial sentencing or re-integration to education. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|--|
| • £67,686 cost per annum. | Training delivered to YOT staff by SLCN Therapist employed as part of the project. | Estimated 240 CYP across local YOT have a speech and language communication need and have benefited from the service. | Enabled CYP to have a better understanding of the YJS by explaining things in a way that they understand, given their specific needs. Increased ability for service to identify CYP with a speech and language deficit so that appropriate plans/support can be put in place. | Reduction in offending. Previous unmet needs relating to speech and language are identified and appropriate support can be identified. |

Feedback from a parent of a CYP who accessed the service

"The SLCN Therapist provided strategies such as always using Tom's name prior to giving him something to do, repeating what was asked and not asking too many things in one go.

Since June, my son and I have adopted these strategies and seen a lot of improvement in his understanding and retention of information. This has helped me to help him and I am grateful for the advice and guidance"

- Parent

30. YOT based SALT worker - Bradford

| Area | Yorkshire and Humber |
|------------------------|--|
| Site | Bradford |
| Theme | Enhancing YOT Pathways |
| Start date | August 2019 |
| Key contact | Yorkshire and Humber Health and Justice Team |
| Project brief | Speech and Language Therapist (SALT) based in the YOT to ensure a speech and language communication need (SLCN) informed workforce. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|--|
| • £62,136 cost per annum. | Training delivered to YOT staff by SALT worker employed as part of the project. Purchase of communication resources. | Estimated 240 CYP in the YJS have a SLCN and have benefitted from the service. Resource enabled staff to appropriately adapt interventions to the needs of the CYP. | Enables the CYP to have a better understanding of the YJS by explaining things in a way that they understand, given their specific needs. Able to identify CYP with a SLCN so that appropriate plans/support can be put in place. | Reduction in offending. Previous unmet needs relating to speech and language are identified and appropriate support can be identified. |

31. YOT based SALT worker - Calderdale

| Area | Yorkshire and Humber |
|------------------------|--|
| Site | Calderdale |
| Theme | Enhancing YOT Pathways |
| Start date | September 2019 |
| Key contact | Yorkshire and Humber Health and Justice Team |
| Project brief | Speech and Language Therapist (SALT) based in the YOT to ensure a speech and language communication need (SLCN) informed workforce. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|--|---|
| • £56,993 cost per annum. | Training delivered to YOT staff by SALT worker employed as part of the project. Additional post recruited. | Estimated 240 CYP in the youth justice system (YJS) have a speech and language communication need (SLCN) benefitted from the service. | Enables the CYP to have a better understanding of the YJS by explaining things in a way that they understand, given their specific needs. Able to identify CYP with a speech and language deficit so that appropriate plans/support can be put in place. | Reduction in offending Previous unmet needs relating to SLCNs are identified and appropriate support can be identified. |

32. YOT based SALT worker - Leeds

| Area | Yorkshire and Humber |
|------------------------|--|
| Site | Leeds |
| Theme | Enhancing YOT Pathways |
| Start date | March 2019 |
| Key contact | Yorkshire and Humber Health and Justice Team |
| Project brief | Speech and Language Therapist based in the YOT, ensuring a SLCN informed workforce. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|--|
| £59,482 cost per annum. | Collaboration between YOT and NHS Trusts. Additional posts recruited. | Practitioners interacting with CYP are better informed about SLCNs | Enables the CYP to have a better understanding of the YJS by explaining things in a way that they understand, given their specific needs. Able to identify CYP with a speech and language deficit so that appropriate plans/support can be put in place. | Previous unmet needs relating to speech and language are identified and appropriate support can be identified. |

33. Trauma-based Psychology in YOT - Leicester

| Area | Midlands |
|---------------------------|--|
| Site | Leicester, Leicestershire and Rutland |
| Theme | Enhancing YOT Pathways |
| Start date | November 2018 |
| Key contact | Midlands Health and Justice Team |
| Project brief | Introduction of trauma-based psychology in YOT, including formulation, therapy and staff training. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was | ACTIVITIES What was | OUTPUTS What | OUTCOMES What was | IMPACT What were |
|---|--|---|---|---|
| contributed to the programme? | implemented? | tangibles resulted from activities? | the effect of the activities? | the wider implications? |
| Mapping events commissioned across the whole of the East Midlands £30,000 for region. £97,000 cost per annum. | Collaboration between Leicester and Leicester Foundation Trust, All CCG's in STP area, NHS Leicester City CCG, NHS West Leicestershire CCG, NHS East Leicestershire and Rutland CCG. Additional posts recruited and new service developed. | Services are made available that were previously unavailable for this cohort of CYP. All YOT Staff are trained in a trauma informed approach enabling a supportive and consistent approach. Service provision to CYP. | Stronger multi agency ways of working. CYP receive a supportive and consistent quality of care. Increased awareness of cohort. Staff use a more trauma informed approach in working with CYP. CYP receive a service where previously they had no service. | Improved outcomes for CYP. Potential to remodel overall services. Potential changes to commissioning. Improved pathway. |

34. SALT Support and Trauma-based Psychology into YOT – Nottingham and Nottinghamshire

| Area | Midlands |
|---------------------------|---|
| Site | Nottingham and Nottinghamshire |
| Theme | Enhancing YOT Pathways |
| Start date | February 2019 |
| Key contact | Midlands Health and Justice Team |
| Project brief | Speech and Language Therapy (SALT) support and trauma-based psychology input for CYP known to the YOT. This includes staff training, developing the approach for SALT assessment for CYP known to the YOT and to look at potential pathways and re-commissioning. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|--|---|
| £55,000 cost per annum. Mapping events commissioned across the whole of the East Midlands £30,000 for region. | Collaboration between Nottingham and Nottinghamshire YOTs, Local authorities, all CCG's in the area and Nottinghamshire Foundation Trust. Additional posts recruited, and increased capacity. | Systems for SALT interventions developed within the YOT. YOT staff are upskilled about SLCN in their cohort. SALT Assessments and Interventions for CYP. | Stronger multi-agency ways of working within the community. CYP with SLCN access quicker referrals. CYP with SLCN find it easier to navigate the YJS. Remodelling of service provision with the YOT. | CYP have improved outcomes. CYP have improved health and well-being and better relationships. Stronger pathway is in place. More services are available. Changes and improvements in commissioning. |

Data on the need for speech and language support and feedback from a Case Manager

82% of children known to youth justice services had one or more reasons to be referred to speech and language therapy but only 18% had been referred meaning 64% had not been referred when they required a referral.

- "Getting a different perspective from the Speech and Language Therapist provided a potential way in supporting the young person and parent and allowed me to reflect more on my own approach"
- Case Manager

35. Trauma-based Psychology in YOT - Nottingham

| Area | Midlands |
|---------------------------|--|
| Site | Nottingham and Nottinghamshire |
| Theme | Enhancing YOT Pathways |
| Start date | January 2019 |
| Key contact | Midlands Health and Justice Team |
| Project brief | Trauma based psychology input for CYP known to YOT using a consultation and training model. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|--|---|
| • £103,500 cost per annum. • Mapping events commissioned across the whole of the East Midlands £30,000 for region. | Collaboration between Nottingham and Nottinghamshire YOTs, Local authorities, Nottinghamshire Foundation Trust and all CCG's in the area. Additional posts recruited and increased capacity. | Trauma informed training sessions for the team. Trauma informed support and consultation to other professionals. Creation of MDTs to support care of CYP. Training for all YOT staff about the effects of trauma. Training for Children's Services staff. Consultation made available for staff. | Stronger multi-agency ways of working within the community. Trauma informed approaches to provide more effective intervention across the pathway for CYP. Trauma-informed approaches embedded throughout the service. Access to support for staff. Increasingly skilled staff. | CYP have improved outcomes. Potential to remodel services across the YOT based on outcomes. Potential to link in with personalised budget pilots. |

Recognish delonRecording Potential Trauma Audit 2019 - Conclusion

- Staff have an awareness of trauma and are recording this commonly with the standard assessment (AssetPlus) despite there being no dedicated section or focused questions around trauma within the assessment.
- Staff knew certain events were important but potentially struggled to know how best to make sense of these and in turn were unlikely to record appropriate tailoring of interventions.
- Improvements in staff knowledge and application of knowledge around trauma would be beneficial and support for staff to consider the links between trauma, mental health, wellbeing and offending is required.
- 100% of staff would recommend a formal consultation to a colleague.

36. Psychologist based in YOT - Somerset

| Area | South West |
|---------------------------|---|
| Site | Somerset |
| Theme | Enhancing YOT Pathways |
| Start date | June 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | Psvchologist based in YOT (0.5 FTE). |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Whole system approach Developing the workforce |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| • £20,000 cost per annum. | Collaboration between Somerset YOT, Somerset CCG and Somerset Partnership NHS Trust. Additional Psychologist post recruited. | CYP in the Somerset YOT directly benefited from access to a dedicated Clinical Psychologist. | Reduction in waiting times and improved access to relevant professionals, Improved access to assessments and wider support. Earlier identification of psychological needs of CYP in the YOT. Improved input from health professionals into YJS. | Improved cooperation between services in the area. CCG's have a better understanding and are engaging more with the H&J agenda. Stronger pathways between CCN and other H&J and wider services such as FCAMHS, CAMHS, L&D and SARC. |

Case study: Charlie

Background

Charlie is a 17-year-old looked after child who recently received a three-month Youth Conditional Caution (YCC).

Psychological Support

Charlie met with the psychologist on a voluntary basis due to him reporting difficulties managing his emotions; particularly anxiety and frequent anger. Charlie had also experienced difficult childhood events, including instability, abandonment and witnessing violence. Following the psychology assessment, Charlie was offered psychology intervention sessions to develop his assertiveness skills and build upon strategies to manage difficult events and feelings.

Outcome

Charlie has continued to engage with the psychology intervention on a voluntary basis, despite his YCC now coming to an end. Charlie has fed back to the psychologist and other professionals that having a safe space to discuss his difficulties and receive validation and reassurance has been very helpful, in terms of him building confidence and his ability to manage stressful events and relationships. Alongside this, Charlie has made positive progress in other areas of his life. He has started an apprenticeship and has recently moved from residential accommodation to semi-independent accommodation due to positive behaviour and progress made.

37. SALT based in YOT - Plymouth

| Area | South West |
|---------------------------|--|
| Site | Plymouth |
| Theme | Enhancing YOT Pathways |
| Start date | June 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | Speech and Language Therapist based in YOT (0.5 FTE). |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|---|
| • £21,667 cost per annum. | Collaboration between Plymouth YOT, Livewell NHS Trust and New Devon CCG. Additional post recruited. | A SALT informed workforce, including police and schools. CYP have greater access to SALT support. | Improved access to relevant professionals. Improved access to assessments and wider support. Increased understanding of SLCNs for practitioners working with CYP and the impact this has on the YJS. CYP able to communicate more effectively with YJS. | Improved cooperation between services in area. CCG's increased understanding and engagement with H&J agenda. Stronger pathways between CCN and other H&J and wider services such as FCAMHS, CAMHS, L&D, schools and SARC. |

Case study: Callum

Referral

Callum (16 years old) was referred for a speech and language assessment by his YOT Worker after being given an Intensive Referral Order.

Callum had no previous diagnosis; however, he did have a history of significant trauma including neglect and substance misuse. When YOT staff began working with him they raised concerns including the pace at which he spoke and the intensity of his presentation.

Formulation

Callum's speech and language skills were age appropriate; however, there were areas of concern around his presentation. Callum had a complex background and had experienced trauma. Previously, he had not wanted to engage with CAMHS.

Following the assessment, Callum was referred to a neurodevelopmental team meeting at CAMHS for advice. Based on the information given, a neurodevelopmental assessment was recommended following queries around ADHD. There were also queries over his drug use and how he might be self-medicating. Neuro CAMHS received the referral for assessment and agreed to work alongside YOT CAMHS to support Calum.

Assessment

A Speech and Language assessment was arranged for Callum and carried out over three sessions. Initially, he engaged well and formal assessment was carried out. During this time, he scored age appropriate in most areas of his understanding. However, he struggled to retain spoken language and would often 'switch off. By the third session he no longer wanted to engage with the assessment as he felt he was 'intelligent' and the assessment made him feel like 'he was stupid'. It was agreed that the assessment would stop and information would be passed to his YOT Worker.

Achievements

- Although Callum disengaged from the speech and language assessment, ongoing support was identified.
- Accessing neurodevelopmental needs meetings was helpful to gain further advice and support for Callum.

38. SALT based in YOT - Torbay

| Area | South West |
|---------------------------|--|
| Site | Torbay |
| Theme | Enhancing YOT Pathways |
| Start date | June 2018 |
| Key contact | South West Health and Justice Team |
| Project brief | Speech and Language Therapist based in YOT (0.5 FTE). |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|--|
| £21,667 cost per annum. | Collaboration between Plymouth YOT and the CCG. Additional post recruited. | A SALT informed work force. Improved access to SALT support for CYP. | Improved access to relevant professionals. Improved access to assessments and wider support. Increased understanding of speech and language needs by practitioners working with the CYP. CYP able to communicate more effectively with the YJS. | Improved cooperation between services in the area. CCG's have a better understanding of the cohort and are engaging with the H&J agenda. Stronger pathways between CCN and other H&J and wider services such as FCAMHS, CAMHS, L&D, schools and SARC. Increase in multiagency working. |

Case study: Peter

Referral

Peter was referred whilst Police considered appropriate action following allegations of sexual touching of a child. He had been removed from his mother's care due to neglect earlier in the year. The Therapist was asked to assess if Peter had any specific communication difficulties that may be contributing to reduced understanding and inappropriate, harmful behaviour. Peter was 12 years old and presented as a chatty, friendly child, willing to engage and talk about subjects of interest to him.

Speech and Language Findings

Listening and working memory: The assessment showed that Peter had a good short-term auditory memory. However, it was more difficult for him to access his working memory and manipulate verbal information while in temporary storage. In practical terms, it may appear that Peter 'is not listening' however he requires extra processing time.

Vocabulary knowledge: Peter showed relatively low vocabulary knowledge, however was able to use specialist subject knowledge and vocabulary with some unusual use of learnt phrases.

Strategies

Strategies were shared with Peter's school in respect of his working memory, vocabulary boosting, and listening and information retention. For example:

- Allow extra time: show him you are listening while he is processing what he hears.
- Simplify language, reduce the length and complexity of sentences and chunk information.
- Use Visual support; use pictures, diagrams, models, colour coding and bullet points etc.
- Encourage similar visual methods of recording information, for example mind maps.

Achievements

Overall, Peter has generally good language skills although some areas present him with difficulties. It should be remembered that his ability to process and use language is likely to be compromised in times of stress. By his second session, Peter's living arrangements had broken down so a plan was formulated for him to return to his mother. Collaboration between Social Services and CAMHS took place to support the planning for this move and for Peter to start at a new school with appropriate support in place.

39. Child Psychology Support to YOT – North Durham, Durham Dales, Easington, and Sedgefield

| aria oca | 5 |
|---------------------------|--|
| Area | North East |
| Site | North Durham, Durham Dales, Easington, and Sedgefield |
| Theme | Enhancing YOT Pathways |
| Start date | February 2018 |
| Key contact | North East Health and Justice Team |
| Project brief | Expansion of the Child Psychology service into the YOT for victims and perpetrators of sexual assault and / or harmful sexual behaviour. This involved training to YOT staff also. |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|--|---|
| £44,000 cost per annum. | Collaboration between the YOT staff, TEWV NHS FT, as well as the local authority and CCGs. Training sessions for staff. | Improved CYP experiences through interacting with more experienced staff. Training sessions. Over 80 CYP benefit from the service per year. | Over 100 staff upskilled. More CYP who are victims or perpetrators of sexual assault will receive psychological inputs. Expansion of current reach of staff who are now upskilled. | Improved outcomes for CYP. Improved quality of assessment and confidence/abilities within staff to deliver of low-level interventions. Improved pathways for CYP. Improved quality of work with high-risk CYP. Feedback shows '60%' rated the service as 'outstanding', previously this was only 30%. |

Feedback from Durham and Darlington YOT staff

"It's essential in terms of understanding CYPs problems and the importance of their mental health needs"

"I feel that Clinical Psychology has added another thread to the service. This is a specialist area and highly important in the understanding of CYPs behaviour in positively moving forward with them"

"Excellent resource – great to have this expertise in-house. I have seen practical benefits in terms of support for staff regarding individual cases"

40. Health and Wellbeing Workers in YOS - County Durham

| Area | North East |
|---------------------------|---|
| Site | County Durham |
| Theme | Enhancing YOT Pathways |
| Start date | January 2018 |
| Key contact | North East Health and Justice Team |
| Project brief | X3 Health and Wellbeing Workers into the YOS to work across Durham and Darlington. The Health and Wellbeing workers work with a Consultant Clinical Psychologist to identify appropriate resources CYP within the YOS, supporting the development of a library of health resources. |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|--|
| £87,000 cost per annum. | Collaboration between YOT staff, local authority and CCGs. Additional roles recruited. Training of workforce. | More CYP receive more appropriate assessment and interventions. CYP are offered support with wider health and wellbeing needs, as well as support to access other health services as required. CYP receive action screening and full health screening. | Reduced onward referrals. Improved health and wellbeing outcomes. More CYP supported in keeping appointments with health professionals. CYP are encouraged to undertake more positive activities. | Improved health outcomes for cohort. |

Youth Offending Service Manager Report - duties of Health and Wellbeing Workers

HEALTH & WELLBEING WORKERS DUTIES

- Covering PACE duty (offering support in stressful environment of Police custody).
- Supporting Youth in Mind (Youth Lived Experience group) activities and support for individuals.
- Health screening for every CYP within the YOS. This ensures the service has an accurate understanding
 of health needs of the cohort.
- Supporting with assessment and interventions for approximately 30% of the CYP who have been screened.
- The role is developing as we gain a greater understanding of the mental health needs of CYP within the YOS. The Health Team are instrumental in the development of the Emotional Resilience Pathway. The team work closely with the Consultant Clinical Psychologist and are the main deliverers of emotional resilience work with CYP. The team works with CYP who don't meet the CAMHS threshold, or who are on the waiting list for CAMHS.

41. YOT based Specialist Trauma Counsellors – Hampshire

| Area | South East |
|---------------------------|--|
| Site | North Hampshire, Fareham & Gosport, South Eastern Hampshire, West Hampshire and North East Hampshire & Farnham |
| Theme | Enhancing YOT Pathways |
| Start date | August 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | X2 Specialist Trauma Counsellors based within Hampshire YOT. |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|--|---|
| £20,000 cost per annum. | Collaboration and coordination between Isle of Wight (IOW) & Hampshire OPCC, 5 CCGs, Bamardo's, CAMHS and Hampshire YOT. Additional role(s) created. Training and workforce development. | Appropriate and timely Assessments and interventions for CYP. Specialist counselling for CYP with trauma. | Improved access to relevant professionals. Improved access to assessments and wider support. | Early intervention prevents trauma developing into poor mental health. Reduced reoffending behaviour. A consistent approach across multiple agencies for supporting vulnerable CYP who have experienced trauma. |

Case Study: Joe

Background

Children's Services made a referral for Joe and his Mum, Kelly as he had disclosed that his Mum had hit him. Joe was diagnosed with Oppositional defiant disorder (ODD and was also displaying violent behaviour towards his Mum and siblings. It was clear to the Trauma Counsellor that Joe's behaviour was having a significant impact on the family. Going out as a family was described as a 'military operation', as Joe would sabotage the outings by running off, assaulting his siblings and generally causing disorder.

<u>Assessment</u>

During the programme, it was identified that the 'Consequences and Rewards Strategy' would be likely to work best with Joe. During the first session Kelly informed the facilitator that Joe had assaulted her 15 times in one day. Kelly was reluctant to call the police as she did not want to jeopardise her son's future, but she acknowledged that there was often no consequence for poor behaviour. The Trauma Counsellor advised Joe's Mum and Dad to use consequences with Joe. She also advised them and Joe that if he assaults anyone, they must report it to the police.

One of the sanctions Joe's parents gave him was that he had to wait to buy a scooter with his birthday money. Joe explained to the Trauma Counsellor that he felt he was behaving well and was working towards getting the scooter early if he continued to be good. He acknowledged that this was something positive to work towards. The following week, Joe's Mum informed the Trauma Counsellors that his behaviour had been a lot better and there had been no instances of assault. Joe had been verbally abusive, but there had n't been any physical assaults. All involved felt this was a significant step forward.

<u>Outcome</u>

Joe's Mum confirmed that he had not assaulted her or anyone else since the first assault which took place at the beginning of the programme. She confirmed that she was using the strategies that the Trauma Counsellor had taught her, and she felt these appeared to be working. She felt the 10-week programme helped both herself and Joe's Dad to reflect on their boundary setting and have the confidence to follow through with consequences.

42. Healios Autism / ADHD Screening and Assessment for the YOS - Hertfordshire

| Area | East of England |
|---------------------------|--|
| Site | Hertf ordshire |
| Theme | Enhancing YOT Pathways |
| Start date | October 2019 |
| Key contact | East of England Health and Justice Team |
| Project brief | Healios is a digital healthcare company who provide on-line assessments, face to face assessments and interventions. CYP can connect to psychological therapists over a video link. They will ensure screening and assessment for Autism and ADHD for CYP known to CAMHS and YOS. Post-diagnostic support is also provided where required. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Improving support to parents/carers |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| Analysis to understand CYP's experience of current pathways in place to access ADHD and Autism Assessments. Development of a new care pathway for this specific cohort. £87,500 cost per annum. | Face to face sessions for staff to explore existing pathways and barriers to access. Development of a care pathway that is clinically safe and robust in terms of governance. Training for staff on the pathway, including the on-line model and referral process. | A clear and defined clinical pathway for CYP to access ADHD and Autism Assessments with minimal waiting times. | Improved relationship between CAMHS and YOT. Increased awareness and understanding of the needs of this cohort. | CYP havie their mental health needs identified and met earlier in the pathway Reduction in offending behaviour. Improved access to mainstream services. |

43. Healios Autism / ADHD Screening and Assessment for the YOS - Norfolk

| Area | East of England |
|---------------------------|--|
| Site | Norfolk |
| Theme | Enhancing YOT Pathways |
| Start date | August 2019 |
| Key contact | East of England Health and Justice Team |
| Project brief | Healios is a digital healthcare company who provide on-line assessments, face to face assessments and interventions. CYP can connect to psychological therapists over a video link. They will ensure screening and assessment for Autism and ADHD for CYP known to CAMHS and YOS. Post-diagnostic support is also provided where required. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Improving support to parents/carers |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| Analysis to understand CYP's experience of current pathways in place to access ADHD and Autism Assessments. Development of a new care pathway for this specific cohort. £87,500 cost per annum. | Face to face sessions for staff to explore existing pathways and barriers to access. Development of a care pathway that is clinically safe and robust in terms of governance. Training for staff on the pathway, including the on-line model and referral process. | A clear and defined clinical pathway for CYP to access ADHD and Autism Assessments with minimal waiting times. | Improved relationship between CAMHS and YOT. Increased awareness and understanding of the needs of this cohort. | CYP havie their mental health needs identified and met earlier in the pathway Reduction in offending behaviour. Improved access to mainstream services. |

44. Music to My Ears Support Work - Surrey

| Area | South East |
|---------------------------|---|
| Site | Surrey |
| Theme | Enhancing YOT Pathways |
| Start date | March 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | 'Music to my ears' uses music as an engagement tool for CYP. Support workers provide a designated point of contact for each CYP. They are experienced youth workers who carry out one to one work, group work and family work. The Support Workers focus on building relationships with the CYP and act as a consistent adult and mentor. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| £127,000 cost per annum. | Collaboration between the third sector (Catch 22), CAMHS, Substance Misuse Services (SMS), YOT, Police and Family Services. Support and creative sessions with CYP Musical content creation. | 70 CYP engaged with the service over the year (an increase from planned 40). Comprehensive care plans for referred CYP. Strong supportive mentoring for CYP. Training and workforce development within the YOT on how to creatively engage with CYP affected by trauma. | Improved reintegration into the education system. Improved care planning for CYP including pathways to the right professionals (i.e. SMS, CAMHS and homeless prevention). Improved emotional health and wellbeing of CYP Increased self-efficacy of CYP. | Improved educational outcomes for CYP. CYP engaged in positive creative activities. Increased emotional resilience for CYP. Reduction in offending and reoffending behaviour. Improved pathway consideration for CYP. |

Case study: Connor

Connor was referred to the service after displaying violent behaviour in and out of school. Connor was struggling to manage his anger and had spoken to his GP about these issues.

Connor was hesitant about working with services as he had no trust in them no positive experiences to date. Connor met with his Support Worker on a joint visit with a police officer. They explored some of the reasons why Connor was becoming involved in violent behaviours.

Using knowledge of music and more general urban culture, the worker managed to engage Connor. Conversations about music led to wider discussions about the importance of positive lyrics and furthermore, his aspirations for the future.

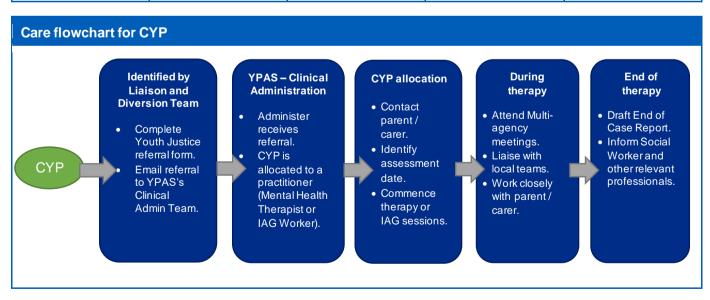
Information gained from these engagements was used to support Conor's school in developing a "time out and reporting" system for him to use when he felt angry or was being provoked by peers. This gradual work restored Connor's trust in school, as well as leading him to developing a new peer group out of school.

Since Connor began working with the project, he has completed and passed his GCSE's and been accepted into a local technical college. He hasn't been in contact with the police, therefore they no longer consider him to be "of interest" to them in regards to crime prevention.

45. Mental Health Therapist Support - Liverpool, South Sefton, Southport, and Formby

| Area | North West |
|---------------------------|---|
| Site | Liverpool, South Sefton, Southport, and Formby |
| Theme | Enhancing YOT Pathways |
| Start date | January 2019 |
| Key contact | North West Health and Justice Team |
| Project brief | X2 Mental Health Therapists who provide evidence based psychological and therapeutic support to CYP referred through the Out of Court Disposal route. X1 Information and Guidance (IAG) Worker engaging and supporting CYP to access mental health and wider support. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Working in collaboration Improving support to parents/carers |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|---|
| £106,929 cost per annum. | Collaboration between CCGS, Venus Charity, L&D, Alder Hey CAMHS, Young Persons Advisory Service (YPAS), Liverpool and Sefton YOT, Police and third sector agencies. Additional posts recruited. Training for YOT Social Workers to carry out individual trauma informed assessments. | CYP are offered support with wider health and wellbeing needs, as well as support to access other health services as required. CYP have the potential to benefit from interventions. | mental health support | Improved joint working between L&D, CAMHS, YOT, Police and third sector agencies. Prevention of mental health needs escalating and need for high cost provision and support. Supports the prevention of re-offending. |



46. CAMHS Therapist Support to YOS - Cheshire

| Area | North West | | |
|---------------------------|---|--|--|
| Site | Halton, Warrington, West Cheshire, South Cheshire & Vale Royal and East Cheshire | | |
| Theme | Enhancing YOT Pathways | | |
| Start date | January 2019 | | |
| Key contact | North West Health and Justice Team | | |
| Project brief | X3 CAMHS Therapists working across the patch with CYP in the YJS. There is a focus on improving the pathway between community and custody for CYP. This ensures that specific needs and vulnerabilities are assessed and that CYP receive ongoing health intervention across the pathway. | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Working in collaboration Improving support to parents/carers | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|---|--|
| Additional funding from CCGs. £128,341 cost per annum. | Collaboration between Cheshire Youth Justice Services and CCGs. Additional posts recruited. Mental health, SALT and sensory processing training. | All CYP benefit from the training and consultation offer, with up to 70% being offered direct support and intervention. | Consistent access to health services that support two of the primary areas of need for this cohort of CYP that complement the universal health offer in each area. More timely access to appropriate assessment and support for this vulnerable cohort of CYP. Identification of previously unmet need. | Reduced first time entry to the YJS. Reduced re-offending. Reduced use of custody. Provision embedded within local provision. Reduced variation in access to a bespoke health offer across the police footprint. Reduction in nonattendance at school and direct clinical interventions. |

Case study: Tom Benefits Why was the intervention Case Management Tom's Profile: successful? Tom now attends school Difficulties flagged by the SLCN 12 years old. regularly. Tom is a valued member of the Tom had significant SLCN that screen related to receptive Supported in had never been identified. language, expressive language These were a factor in his mainstream school community and is often and social communication. difficult behaviour both at school. seen supporting younger pupils. Information from screen used to home and in the community. No previous His parents feel he is much more support ADHD diagnosis. When SLCN were recognised settled and easier to live with at referral to Support for those working with and support put in place Tom home as he is less angry and Speech and Tom regarding communication was able to interact with his Language strategies, which are now in world in a much more positive The police have confirmed he is therapy. way. This included recognising not currently a cause of concern Advice given to family to underlying in the community. support their understanding of neurodevelopmental issues Tom's SLCN. and finding an educational situation where he could thrive.

47. SLCN Therapist – North Yorkshire and City of York

| Area | Yorkshire and Humber |
|---------------------------|--|
| Site | North Yorkshire and City of York |
| Theme | Enhancing YOT Pathways |
| Start date | February 2019 |
| Key contact | Yorkshire and Humber Health and Justice Team |
| Project brief | x1 Speech and Language Therapist to provide training and advice to staff, as well as direct clinical services for CYP. The model enables important interventions at key points in the pathway, for example influencing judicial sentencing or re-integration to education. |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach Working in collaboration |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|---|
| £67,686 cost per annum. | Additional SALT post recruited. Training delivered to YOT staff by SALT worker. | CYP are able to access appropriate and timely support. | Enables CYP to have a better understanding of the YJS by explaining things in a way that they understand, given their specific needs. Services are able to identify CYP with SLCNs so that appropriate plans and support can be put into place. | Reduction in re- offending. Previous unmet needs relating to speech and language were identified and appropriate support given. |

48. Tailored Youth Worker Support and Whole System Psychological Support – Derby and Derbyshire

| | la Delbyshire |
|---------------------------|--|
| Area | Midlands |
| Site | Derby and Derbyshire |
| Theme | Enhancing YOT Pathways |
| Start date | October 2018 |
| Key contact | Midlands Health and Justice Team |
| Project brief | Health and wellbeing workers (X3) have been introduced into the pathway to work with CYP known to the YOT. The service supports CYP with their emotional health and well-being, integration into the community, activities, accessing training and assisting with access to other services. The Workers take a holistic approach and tailor each intervention to the needs of the individual CYP. Additional trauma-based psychological support is provided across the whole system and multiple pathways. Trauma Informed training has been provided to all children's services |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|---|---|--|
| £207,500 cost per annum Additional training was commissioned by CCG. SALT jointly commissioned by YOS and PCC. Social care support Work beginning on HSB. Mapping events commissioned across the whole of the East Midlands £30,000 for region. | Collaboration between YOTs, PCC, CCGs and Local Authorities. Additional posts recruited. Tablets purchased for staff. Training of all children's services staff. ACE conferences. | Significant numbers of referrals and interventions. Services available to CYP that were not available previously Health and wellbeing service provided Psychological support for CYP provided. CYP now have access to personal Health Budgets | Joint working and partnership. Removal of duplication of services. This cohort is now a priority and all aspects of the pathway are being improved. Support for multiagency staff in regard to trauma informed approaches. Improvement in CYP relationships, self-confidence, health and wellbeing. | Reduced reoffending. CCN funding encouraged Derbyshire and Derby to take a system wide approach to training to support CCN work. Positive changes in commissioning and contracting. Increased awareness and priority of this cohort. CYP outcomes improved as evidenced by increased scores on the youth star. |

Feedback from children and young people

"I feel happier in myself because of the things we have done and for the first time ever I felt like my views and worries were taken seriously"

"I found it helpful doing the memorial mosaic for my grandad because it helped me get my emotions out"

"I enjoyed getting out in the community, visiting new places and being outside"

49. SALT Support Programme – Milton Keynes

| Area | East of England |
|---------------------------|--|
| Site | Milton Keynes |
| Theme | Enhancing YOT Pathways |
| Start date | January 2018 |
| Key contact | East of England Health and Justice Team ¹ |
| Project brief | Early support programme aimed at CYP who have been in contact with police but have no further action or a Community Order. The programme enables SLCN assessment and support, ensuring staff work in a multi-agency and holistic way to provide support and increase resilience in the CYP. The programme also includes workforce development and training of court staff. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|---|---|
| £30,000 cost per annum. Additional match funding provided. Mapping events commissioned across the whole of the East Midlands. £30,000 was prided for the whole region bring partners together and promote collaboration. Holistic elements are provided by a range of service providers-SMILE, voluntary sector, youth faculty and the YOT. | Collaboration between Milton Keynes YOT, Milton Keynes Local Authority, local schools, and the local voluntary sector. Workforce training. | A SALT informed workforce. CYP are assessed for SLCNs and receive appropriate intervention. Engagement with schools to work with CYP as part of Early Support. | Change in police approach because of awareness of CYP's SLCNs. Improved pathways for CYP. Services have become more accessible as providers better understand their needs. Development of multiagency ways of working to support CYP. | CYP have improved relationships, self-esteem and confidence. Improved education and employment outcomes. Improved health and well-being. Reduced reoffending. |

Honorary Fellowship - Royal College of Speech and Language Therapists

On 25 September 2019 Diz Minnit, Operational Manager for Milton Keynes Youth Offending Team, was awarded an Honorary Fellowship from the Royal College of Speech and Language Therapists.

The award was presented by Her Royal Highness the Countess of Wessex, in recognition of the excellent work Diz has done to champion the communication needs of children in the YJS. Diz was nominated by fellow speech and language therapists who credit him for many of the advances in speech and language therapy over the last decade.



50. YOS-based SALT provision and Trauma-based Psychology Input - Lincolnshire

| Area | Midlands |
|---------------------------|---|
| Site | Lincolnshire |
| Theme | Enhancing YOT Pathways |
| Start date | October 2018 |
| Key contact | Midlands Health and Justice Team |
| Project brief | Trauma-based psychology and speech and language therapy funded to work with CYP within the YJS. This work supported a wider remodelling of services within the area to develop a whole systems trauma based adolescent risk model – Future4Me. The remodelling led to a change in the commissioning of SALT services, to provide enhanced services for CYP at risk of offending also. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|--|--|
| £126,168 cost per annum. Significant levels of funding from the local area supports the Future4Me structure. Mapping events commissioned across the whole of the East Midlands. £30,000 was provided for the region to promote collaboration. | Collaboration between Lincolnshire YOT, Lincolnshire Local Authority, CCG, Lincolnshire Partnership Foundation Trust and police. Additional posts recruited. Children's Services redesigned into a trauma informed model. | A SALT informed workforce. CYP have greater access to SALT support. Trauma informed services. CYP receive psychology input. Support to staff to ensure psychological approach. | CYP receive appropriate and timely services. Improved outcomes for CYP. CYP have support with speech and language. Increased and improved joint working. | Increased skill level within the workforce. New model of service. Positive changes in commissioning for CYP. |

Lincolnshire Partnership Coundation Tust Referrer Feedback and model of service Joseph Offending Service Victim Support Officers "Prior to this service being provided, we had little or no insight into a child's health concerns or conditions. **Psychologist** These are significant factors that Band 7 Psychologist Community Health Services Forensic Psychology often have a huge impact on YOS CAMHS Link Worker cognitive abilities, decision making LAC Team and actions. The information which is SALT Link Worker * LAC Link provided allows us as practitioners to better understand behaviour of CYP within the community, home and educational settings." - Referrer CHISVA Other Agencies

51. Liaison and Diversion Post and SLT Training - Hounslow

| Area | London |
|---------------------------|--|
| Site | Hounslow |
| Theme | Enhancing YOT Pathways |
| Start date | April 2017 |
| Key contact | London Health and Justice Team |
| Project brief | X1 Liaison and Diversion Screening Worker to work within the YOT to input into Out of Court Disposals and Risk Management Panels. X1 Speech and Language Therapist to work partnership with the YOT. Additional work includes SALT training for YOT staff, regular SALT clinics, CAMHS reflective supervision for YOT staff and youth counselling outreach. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|--|---|
| Year One and Two: £11,650 for targeted outreach for youth counselling, training and consultation from SLT. Year Three: £50,000 for a full time SLT worker in the YOT £58,000 for the Liaison and Diversion Practitioner | Collaborative working between Hounslow CCG, Mental Health Trust, Hounslow Youth Counselling Services, YOT, Children's Social Care, CAMHS, NHS Trusts. Additional posts recruited, and additional capacity. Training of workforce. | CYP are screened for mental health and physical health risks at the earliest point in the pathway. CYP are provided access to appropriate referral pathways. CYP have voluntary access to low level mental health support. CYP SLCNs are screened and assessed. YOT better understands SLCN. | CYP receive improved support to address their health issues. CYP have shorter referral pathways. CYP are diverted more accurately, from the YJS or within the YJS. The project has led to business cases for additional CAMHS and SALT support in the YOT. | CYP receive help to address their health inequalities. Reduction in reoffending behaviour. CYP have shortened engagement with the YJS Decision makers have appropriate and relevant information to make informed decisions. |



ENHANCING CYPSE PATHWAYS

These projects have been designed to support children and young people as they transition in and /or out of the children and young people secure estate (CYPSE).

This includes co-ordinating service provision and supporting children and young people to navigate service pathways to ensure support, access to appropriate services and continuity of care.

52. Transition Worker - Lincolnshire

| Area | Midlands |
|---------------------------|--|
| Site | Lincolnshire |
| Theme | Enhancing CYPSE Pathways |
| Start date | September 2018 |
| Key contact | Midlands Health and Justice Team |
| Project brief | A bespoke wrap-around package of support for CYP placed at Lincolnshire Secure Unit (LSU) and their families via a dedicated Resettlement Worker. The worker begins working with the CYP three months prior to discharge and continues for six months or more upon release. The Resettlement Worker works with all CYP placed at LSU within a 150-mile radius, for those subject to both welfare and justice placements. The worker helps with transition both to the community and to other secure settings and provides support regarding placements, activities, relationships, education and training, work and family |
| Strategic deliverables | Promoting resilience, prevention and early intervention Care for the most vulnerable Improving support to parents/carers Improving transition |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|--|--|
| • £50,000 cost per annum | Collaboration between YOT, CAMHS, SECURE STAIRS, SALT, Occupational Therapists, Social Care and other community support services. Additional post recruited and capacity increased. | Pre-release sessions include budgeting and independent living skills to increase confidence. Post-discharge continuous engagement through 1:1 sessions on the phone and in person. Engagement with family members. Links with other professionals and practitioners in the community to support CYP. | Stronger multi agency ways of working within the community. Reduced anxiety related to release and community placement for CYP. CYP have a positive and consistent relationship they can rely on. Increased chances of ETE for CYP. Families better prepared | Reduced re-offending. Improved self-esteem for CYP. Improved relationships for CYP. Improved family situations and improved confidence of families and carers. |

Poem written by a child who accessed the service

INFLICTING HURT AND PAIN
THAT WAS MY GAME
MAKING THEM CRY AND RUN
AND ALL JUST FOR MY FUN

IT WAS ALL A SHOW OF POWER EVERY MINUTE, EVERY HOUR TARGET THEIR HUMILIATION THEIR TEARS MY SALVATION

I KNOW NOW I WAS WRONG SO NOW I'M WRITING THIS SONG THE BULLY IN ME HAS DIED AND FOR MY VICTIMS I HAVE CRIED

53. Speech and Language Therapist within YOT and Secure Children's Home-Bristol

| Area | South West |
|---------------------------|---|
| Site | South Gloucestershire and Bristol |
| Theme | Enhancing CYPSE Pathways |
| Start date | May 2017 |
| Key contact | South West Health and Justice Team |
| Project brief | Speech and Language Therapist based in YOT and outreach to Vinney Green SCH (0.6 FTE). |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|--|---|
| £62,500 cost per annum. | Collaboration between Bristol YOT, Bristol Community Health, Vinney Green Secure Unit and local CCG. Additional post recruited. SLCNs training delivered by SALT to professionals working with CYP. | A SALT informed workforce. CYP have greater access to SALT support. | Improved access to relevant professionals, assessments and wider support. Increased understanding of SLCNs by adults surrounding the CYP. CYP able to communicate more effectively with YOT. Introduction and development of a 'communication passport'. | Improved cooperation between services in the area. CCG's have a better understanding of the needs of the cohort and increased engagement with H&J agenda. Stronger pathways between CCN and other H&J and wider services such as FCAMHS, CAMHS, L&D and SARC. Improved multiagency working. |

Case studies: Tom and George

Tom, 16 years old

- Tom was at risk of being permanently excluded.
- A SLCNs assessment identified severe language difficulties and recommended additional support.
- Following this, extra support was put in place and an Education Health Care Plan needs assessment was initiated. Tom was not excluded, and his school applied for additional support. The school ensured that Tom's needs were recognised at college the following year.
- The professionals working with Tom acknowledged that supporting him to remain in education was an important protective factor against re-offending.

George, 13 years old

- George was assessed as having moderate language difficulties.
- He was due for further police interviews which had previously been unsuccessful due to him being 'uncooperative and aggressive'.
- Assessment markers were placed to alert police officers of his SLCNs and how they can apply strategies to support interviews.
- George and his parents were also provided with a short profile of difficulties and strategies to support this process.
- The SLCNs assessment results were also shared with the education officer who ensured these previously unidentified needs were supported within school.

54. Speech and Language Therapist within YOT and Secure Children's Home -Devon

| Area | South West |
|---------------------------|---|
| Site | Devon |
| Theme | Enhancing CYPSE Pathways |
| Start date | October 2017 |
| Key contact | South West Health and Justice Team |
| Project brief | Speech and Language Therapist based in YOT and Atkinson Secure Children's Home (SCH). |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Whole system approach |

| • | Whole system approa | ach | | |
|---|--|--|--|--|
| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
| • £21,667 cost per annum | Collaboration between Devon YOT, Virgin Care and New Devon CCG. Additional post recruited. Every CYP receives a SALT assessment. | A SALT informed workforce - this includes the police and local schools. CYP have greater access to SALT support. | Improved access to relevant professionals, assessments and wider support. Increased understanding of SLCNs by adults surrounding the CYP. CYP are able to communicate more effectively with the YOT. | Improved cooperation between services in the area. Stronger pathways between CCN, H&J and other wider services such as FCAMHS, CAMHS, L&D and SARC. Increase in multiagency working. |

Case study: Millie

Referral

Millie was referred for an assessment of her speech, language and communication needs at the request of parents, and with the support of those working with Millie. Her parents had long felt there was an underlying cause for Millie's social difficulties and challenging behaviour at school. During the self-assessment task, the only communication activity which Millie was confident and not anxious about was 'talking with family'. All other communication situations were very difficult, Millie finds it hard to understand and remember what people have said, how others are feeling and humour.

Strategies

Identifying Millie's very significant communication difficulties and diagnosing a Developmental Language Disorder allowed a change to occur. Millie's parents were able to see that the anger and frustration experienced by Millie were valid responses to her situation and that the more upset she was the more her language and means of expressing herself diminished. They were able to adapt their behaviour to become more supportive. There was discussion of just how difficult education must have been for Millie since the beginning.

Speech and Language Findings

A full assessment was undertaken and her scores on formal assessment were well below the average range. She had great difficulty understanding social communication both verbal and non-verbal, often resulting in inappropriate responses and behaviours. At college she coped with the academic demands by spending hours working to keep up, often feeling very isolated. At home, Millie's parents described her behaviour as challenging as she would become angry very quickly, which often led to conflict.

Outcome

As a result of this diagnosis a meeting was held with college staff so that they could begin to adapt the learning environment. Also, Millie was able to use evidence of the condition to get extra time on her driving theory test.

The specific knowledge of Millie's condition will enable appropriate future planning and help Millie to understand why she struggles to achieve what seems easy for her peers.

55. Complex Case Manager - Cambridgeshire and Peterborough

| Area | East of England |
|---------------------------|---|
| Site | Cambridgeshire and Peterborough |
| Theme | Enhancing CYPSE Pathways |
| Start date | October 2018 |
| Key contact | East of England Health and Justice Team |
| Project brief | Recruitment of a Complex Case Manager (CCM). The post tracks CYP across the region who are in-between services. This post identifies where CYP are within the pathway, in order to bring together relevant professionals to co-ordinate service provision and ensure access to appropriate services. The post advocates for CYP ensuring professionals are meeting their needs to prevent them from falling through pathway gaps. i.e. between community and CYPSE. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Working in collaboration |

| | Working in collabora | LIOTI | | |
|--|---|---|---|---|
| | | | | |
| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
| Programme management and evaluation support Year 1: £93,672 cost per annum Year 2: £125,676 cost per annum | Creation and appointment of a new role of Complex Case Manager. Collaborative working between YOT, CYPSE, YOT, Sexual Assault Referral Centre, Rape Crisis, Liaison & Diversion and Cambridgeshire & Peterborough NHS Foundation Trust. | Assessment and care plans for CYP transitioning into and out of the YJS. Mental health advice and multiagency liaison for CYPs in the YJS and Pupil Referral Units. Improved access to treatment and support. | Transitions for CYP between secure settings and the community are coordinated, safe and effective. CYP are linked to the right professional services at the right time. CYP get support with relationship building, safety planning and emotional regulation. | CYP needs are advocated for to ensure relevant professionals are meeting their needs and they do not fall between pathway gaps. |

Case study: Kelly

Kelly's Profile

- 16 years old Substance misuse
- Emotional dysregulation and anger
- Behavioural issues
- Known to CAMHS
- Has a YOT Worker

Kelly's Adverse Childhood Experiences

- Witnessed domestic violence from age 1.
- Physical and emotional abuse.
- Neglect
- Poverty
- Paternal mental health difficulties.
- Sexual assault by a group of males, which was filmed and distributed, at age 13.
- Separation of parents at age 15, and subsequent rejection by
- Rape by ex-boyfriend at age 15.

CCM involvement to date

Re: Services

· Liaison with other agencies involved, including attendance at risk management meetings.

Re: Kelly

- · x11 sessions offered, attendance at x10.
- Assessment and lifeline complete.
- Relationship building and engagement.
- Psychoeducation on impact of and reactions to trauma, strategies for managing arousal and flashbacks.
- Safety planning Stabilisation and grounding.
- · Emotion regulation and imagery.

Outcomes

- Kelly has developed a strong attachment, despite her fears that she would not be able to.
- She has experienced emotionally triggering events and has managed these without selfharm or violence.
- Enrolment in and regular attendance at an educational course.
- Positive feedback received from Kelly and YOT.

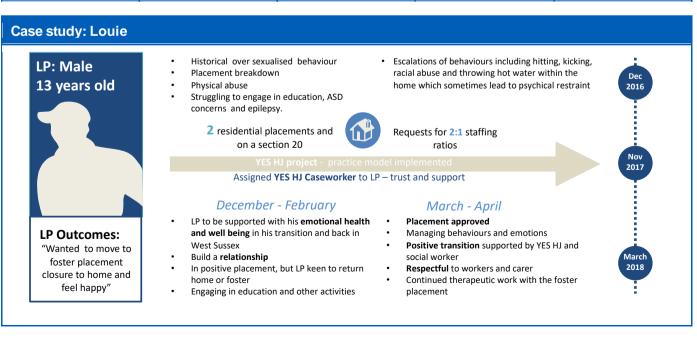
Plan - continue to develop resilience, emotional regulation and coping skills; prioritisation of her own wellbeing and safety.



56. Sticky Support Workers – West Sussex

| Area | South East |
|---------------------------|--|
| Site | West Sussex |
| Theme | Enhancing CYPSE Pathways |
| Start date | November 2017 |
| Key contact | South East Health and Justice Team |
| Project brief | X2 'Sticky Support Workers' to work with CYP placed within the CYPSE on both welfare and justice placements. Support begins in custody or care setting and continues upon reintroduction into the community. The workers provide individual interventions, group work, peer support and advocacy. The workers also support CYP to build family resilience and social networks. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|---|
| • £105,000 cost per annum. | Additional capacity. Collaborative working between the Complex High-Risk Adolescent Project, Youth Emotional Support (YES) Services, Children's Social Care, YOT, CAMHS and West Sussex CCGs. | Pre and post custody support to CYP in the form of: 1:1 intervention Family support Group work Peer support and advocacy | CYP are better able to manage their own risks by a co-ordinated bespoke package of specialist services around them. A more timely and successful return to the community. CYP feel able to engage with and achieve specific outcomes to support them to remain in the community. Reduction in CYP missing episodes and unauthorised absences. | Reduced offending/reoffending by the cohort. Improved post transition life outcomes. CYP have better emotional wellbeing and resilience. Improved ETE outcomes. |





ENHANCING SARC PATHWAYS

These projects work to ensure the pathways for children and young people accessing Sexual Assault Referral Centres (SARC) are more joined up.

The aim for this vulnerable cohort of children is to enable a holistic and child-focused response to their trauma, their mental health and wellbeing needs. This includes therapeutic counselling and assessments that transition with the child, identify needs and ensure access to appropriate services.

hancing SARC Pathways

57. Senior Mental Health Practitioner in SARC for CYP – Aylesbury and Chiltern

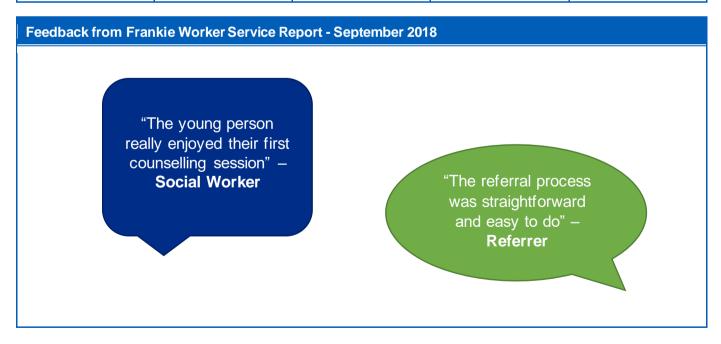
| Area | South East |
|---------------------------|--|
| Site | Aylesbury and Chiltern |
| Theme | Enhancing SARC Pathways |
| Start date | July 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | Senior Mental Health Practitioner in the SARC to work specifically on the CYP Pathway. The offer includes training for SARC staff to identify emotional and mental health needs. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|--|
| • £58,200 cost per annum. | Collaboration and coordination between SARC, Social Care, CCGs, Buckingham CAMHS and the CHISVA (Child Independent Sexual Violence Advisor). Training and workforce development. Additional role created. | CYP in SARC receive support and intervention for their mental health needs. Other professionals receive training to understand the mental health needs of the cohort. CYP receive timely access to services. | Improved access to counselling and therapeutic interventions for CYP who are victims of sexual abuse. Improved pathways and information sharing between professionals working with CYP. | CYP have better mental health outcomes. CYP have greater self- efficacy and emotional resilience. |

58. Frankie Workers - Portsmouth

| Area | South East |
|---------------------------|---|
| Site | Portsmouth |
| Theme | Enhancing SARC Pathways |
| Start date | October 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | Frankie Workers provided outreach therapeutic counselling service to children and young people who were traumatised through being exploited, trafficked or sexually abused. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Whole system approach |

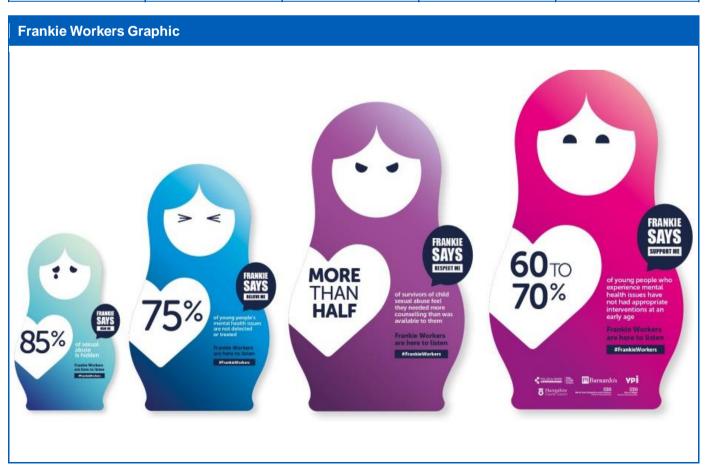
| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|---|---|---|
| • £24,895 cost per annum. | Collaboration and coordination between the Portsmouth CCG, Portsmouth YOT, Portsmouth City Council, SARC, Barnardos, Police and Children's Services. Additional role: Frankie Worker. Continuous training and peer support of Frankie Workers. | 1:1 face-to-face and therapeutic support for CYP for up to 18 weeks. | Improved access to counselling and therapeutic interventions for CYPs who are victims of sexual abuse. Improved links with community through presence of counsellors in meetings. | Increased and improved support to CYP experiencing complex difficulties. CYP have more appropriate trauma informed support to meet their mental health needs. |



59. Frankie Workers – Isle of Wight

| Area | South East | | | |
|---------------------------|--|--|--|--|
| Site | Isle of Wight (IoW) | | | |
| Theme | Enhancing SARC Pathways | | | |
| Start date | October 2018 | | | |
| Key contact | South East Health and Justice Team | | | |
| Project brief | Frankie Workers to provided outreach therapeutic counselling service to those aged 0 to 18 years who are traumatised as a result of being missing, exploited, trafficked or sexually abused. | | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Whole system approach | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|---|--|
| Matched funding from OPCC. £17,406 cost per annum. | Collaboration between loW & Hampshire OPCC, NHS England, Barnardos, Hampshire CAMHS, SARC Teams and IOW Local Authorities. Additional role: Frankie Worker. Continuous training and peer support of Frankie workers. | 1:1 face-to-face and therapeutic support for CYP for up to 18 weeks. Improved links with social care for CYP and for family members. | Improved access to counselling and therapeutic interventions for CYPs who are victims of sexual abuse. | Increased and improved support to CYP experiencing complex difficulties. CYP have the right trauma informed support for their mental health needs. Increased self-esteem of CYP. |



60. SARC-based CYP Crisis Worker - Lancashire

| Area | North West | | | |
|------------------------|--|--|--|--|
| Site | Lancashire | | | |
| Theme | Enhancing SARC Pathways | | | |
| Start date | December 2018 | | | |
| Key contact | North West Health and Justice Team | | | |
| Project brief | X1 CYP Crisis Worker in the SARC to provide wraparound support to vulnerable CYP and support them to access additional services. | | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|---|---|
| £20,551 cost per annum. | Collaboration between Early Intervention Team, Child Protection Team, SARC, Lancashire Teaching Hospitals NHS Foundation Trust and CCGs. Additional post recruited: Crisis Worker. Welfare checks carried out by Crisis Worker. Directory of Services in the community that a CYP can access, created by the Crisis Worker. | 210 CYP benefit from the intervention per year. | CYP have an opportunity to be involved with services that have a positive influence on their lives. CYP benefit from social prescribing. CYP gain confidence. Co-produced care plan developed for each CYP. | CYP who have experienced ACEs are able to communicate their wishes, aims and what is important to them Referrals are made to help facilitate their wants and needs. Agencies are made aware of the specific needs of CYP. |

Case study: Molly

A 15yr old girl, Molly, attended the SARC for an examination. The CYP Crisis Worker made initial contact with the girl upon arrival and was present during her examination. During the welfare call, the CYP Crisis Worker spoke to Molly's Mum who reported that her daughter seemed fine and that there were no issues. However, when speaking to Molly it was apparent that she was not happy. As Molly started to build up a rapport with the worker, she felt able to disclose how unhappy she was and that she did not feel able to speak to her Mum. She also disclosed some issues around self-harm.

The CYP Crisis Worker spent time talking to Molly on the phone and was able to establish that her mum was often out at work leaving Molly and her siblings at home alone. After several failed attempts to contact Molly's Mum to discuss the needs of her daughter, the worker liaised with the police about her concerns and requested they carry out a welf are visit. The welfare visit was carried out and Molly's parents were made aware of the situation. Molly unfortunately ended up self-harming, was seen in hospital and admitted to a young person's mental health facility. On discussion with the Molly's Social Worker, the CYP Crisis Worker was informed she had made the right call in requesting a police welfare visit. This ensured Molly's parents were fully aware of their daughter's situation and mental health needs.

61. Mapping of Psychological Support for CYP following SARC engagement – West Yorkshire

| Area | Yorkshire and Humber | | | |
|------------------------|--|--|--|--|
| Site | West Yorkshire | | | |
| Theme | Enhancing SARC Pathways | | | |
| Start date | твс | | | |
| Key contact | Yorkshire and Humber Health and Justice Team | | | |
| Project brief | Mapping psychological support pathways for CYP in West Yorkshire post-engagement with the Child Sexual Assault Referral Centre (SARC). | | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|--|---|---|
| Specialist support in collating and analysing information. | Mapping of existing psychological and therapeutic support available for CYP following sexual assault, abuse or exploitation. | Therapeutic services have been identified. Identification that services can be patchy, difficult to access and fragmented. | 'Doorstep services' - an actual place to attend as oppose to online support – works best for CYP. | Increasing public and professional awareness of the complex effects of childhood sexual abuse. Reference guide for commissioners to use in planning services. |

Strategic Director for Sexual Assault and Abuse Services

Conclusion

We all want our children to have a happy childhood, but the reality is that all children and young people are at risk of being sexually abused or exploited, regardless of age, gender, social status or where they live.

The critical element of success in developing services for children and families where sexual abuse has taken place is that a whole system approach is adopted, which involves all partners including health, education, social care and the voluntary and charity sectors working together to meet the holistic needs of the child.

At a time when mental health services in the UK are under scrutiny, we should take the opportunity to acknowledge and celebrate that there are psychological services available within West Yorkshire for children and young people who have experienced sexual abuse. This report suggests how we could offer a more integrated pathway for children and their families using a systems approach.

The benefits of adopting a trauma informed recovery model and the importance of a one-to-one trusting relationship with a practitioner are both a crucial and fundamental determinant in helping a young person recover from child sexual abuse and exploitation.

The recommendations suggested within the report consolidate the key messages from research and the clinical evidence available when providing services for this vulnerable group of children.



ENHANCING LIAISON AND DIVERSION PATHWAYS

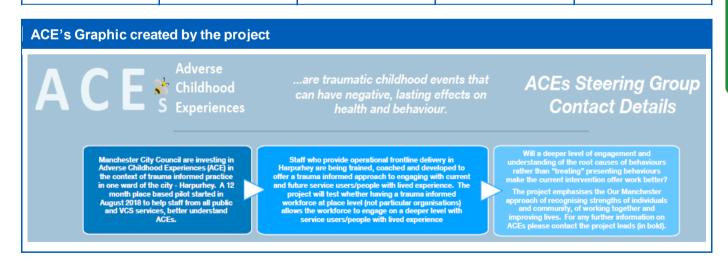
These projects enhance the pathway for children and young people, adding capacity and expertise to the system. This has led to an increase in the identification of needs, particularly those which are not currently being met i.e. speech, language and communication needs.

Liaison and Diversion (L&D) Services aim to improve overall health outcomes for children and young people, as well as support the reduction of re-offending. Services aim to identify vulnerabilities which helps to ensure the right support is put into place as early as possible.

62. Enhancing Liaison and Diversion Pathways – Greater Manchester

| Area | North West |
|---------------------------|---|
| Site | Greater Manchester |
| Theme | Enhancing Liaison and Diversion Pathways |
| Start date | January 2019 |
| Key contact | North West |
| Project brief | A full pathway uplift that improves the identification of mental health needs of CYP in contact with the YJS. The aim is to enhance pathways for this cohort of CYP who may otherwise face barriers to accessing services and develop bespoke solutions that best support the needs of CYP. The project also supports and promotes trauma awareness within the workforce. |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Whole system approach |

| deliverables | Whole system appro | ach | | |
|--|--|--|---|---|
| | | | | |
| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
| Programme management and evaluation support. £978k per annum. | Additional mental health workers and SALTs across the Greater Manchester Liaison & Diversion and Youth Offending Teams footprint. Mapped the pathways from both a professional and CYPs perspective. Mapped the data flow through the pathways. Piloted SALT enhancement in 4 Greater Manchester Districts. | Fully scoped pathways. Better use of data and information to inform service design and delivery. Trauma/adversity sensitive training programme for those working in the YJS. An agreed plan for commissioning future services for CYP (aligned to the NHS England Long Term Plan). | A developed evidence base to secure recurrent funding in relation to commissioning future services. Provision of mental health services for CYP within the YJS. An embedded Greater Manchester wide approach to developing a trauma-informed workforce. | A platform to deliver Greater Manchester's key devolution ambitions, by delivering public services aligned to local needs. Support of Greater Manchester's Public Service Reform Plan delivery. Support of Greater Manchester's ambition to improve CYP's mental health provision. Support trauma awareness in the workforce. |



63. L&D Practitioner - Lancashire

| Area | North West |
|------------------------|--|
| Site | Lancashire |
| Theme | Enhancing Liaison and Diversion Pathways |
| Start date | September 2018 |
| Key contact | North West Health and Justice Team |
| Project brief | X3 Full Time Band 6 CYP Liaison and Diversion (L&D) Practitioners in each locality of Lancashire (East Lancashire, Central Lancashire, and North Lancashire). |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|---|--|---|
| Programme management and evaluation support. £133,923 cost per annum. | Collaboration between YOTs, Early Action Teams, CAMHS, Lancashire NHSFT Safeguarding Teams, Pastoral Teams, Education, Leaving Care Teams and FCAMHS. Monthly multi-agency team meetings. Additional posts recruited. | Estimated 864 CYP benefit from additional support per year. CYP have co-produced a self-referral to relevant services. CYP have co-produced information leaflets, posters and a CYP friendly environment within police custody. | Decrease in the level of staff anxiety through opportunities for both formal and informal supervision and peer support. A CYP centred multiagency approach to service delivery. | Improved level of CYP experience across all teams. Improved information sharing between professionals, including the sharing of information between youth courts and custody. Supports families as well as CYP. |

Case Study: Kai

Background

Kai was seen in police custody by a Liaison and Diversion Officer. Kai had a significant history of offending and is open to the YOT with a community behavioural order in place. Kai is a looked after child living in a home placement with his parent. Kai had been missing from home, and when located, had been arrested for criminal damage and breach of order. There were also concerns of escalating drug use.

Assessment

The effects of drug use on mental and physical health was discussed with Kai. He confirmed that he is aware it is problematic and agreed to explore support options for reducing and eventually stopping use. Kai agreed to a referral to Young Addaction Substance Misuse Service. The worker spoke with Kai about his reluctance to accept support and engage with professionals. Kai agreed he needs support with his emotional health but said he does not like to open up. He feels the reason he was placed in foster care was because he opened up about his emotional and mental health. Kai was reassured that it is recognised that he has experienced trauma throughout his life and that revisiting this must be very difficult.

Intervention

- · Kai was seen in custody and some of his issues were explored.
- Engagement with his Social Worker led the L&D Practitioner to learn more about Kai. The Social Worker advised of her concerns with Kai's drug use, poor engagement and missing from home episodes, believing he is increasing his risk taking.
- The L&D Worker completed a referral to Young Addaction Substance Misuse Service as planned.
- The L&D Worker completed a referral to FCAMHS which was accepted.
- A professionals meeting was arranged for multi-agency partners.

64. CAMHS Post – Kingston and Richmond

| Area | London | | | | |
|---------------------------|--|--|--|--|--|
| Site | Kingston and Richmond | | | | |
| Theme | Enhancing Liaison and Diversion Pathways | | | | |
| Start date | April 2018 | | | | |
| Key contact | London Health and Justice Team | | | | |
| Project brief | An overall hub of support for CYP, which comprises of: A CAMHS Worker to support the mental health screening and support for CYP. A Youth Worker who is a rap artist, who uses the medium of rap music to help CYP tell their life stories. An Early Intervention Worker to promote engagement and early intervention and develop mentoring capacity within the YOT. A Family Therapist to provide direct and indirect interventions. | | | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Whole system approach | | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|---|--|
| £1,000,068 total cost per annum across 29 London projects. | Collaboration between Kingston CCG, Achieving 4 Youth, YOT, Children's Social Care, CAMHS, NHS Trusts. Training of workforce CCN funding has been used to enhance the whole pathway for CYP. All CYP, whether in contact with the YJS or not, are referred to the Hub. | CYP have access to a holistic wrap around service to meet their emotional and wellbeing needs. CYP are able to access more appropriate referral pathways. CYP engage in creative or physical 1:1 session with Youth Workers. CYP are able to access family therapy. | CYP receive better help to address their health issues. CYP are diverted more accurately, from the YJS. Increased capacity and resilience within the hub to provide support CYP before they come into contact with the YJS. CYP receive support for their emotional wellbeing and resilience. Evidence of clinicians and youth workers working creatively together. | CYP receive help to address their health inequalities. Reduction in first time offenders. CYP have shorter engagement with YJS. Improved CYP resilience. |

Qualitative data: Summary of research themes and implications for best practice document

Relatability, Availability, Familiarity (RAFt): How to build an effective mental health service for young offenders

Theme 2 - Practitioner role

YOT Managers and Mental Health Professionals tended to describe consultation as the most prominent feature of their work within the YOT. Many reasons were provided. The most prevalent were around upskilling staff through psychoeducation, supporting their confidence and offering containment in holding complex cases. Interviewees tended to assert that importance of mental health professionals empowering staff to deliver interventions independently.

It was acknowledged that given the limited resources and the fact that Mental Health Professionals will not have capacity to be involved in all cases it is beneficial for them to support staff to work systemically when engaging with children and young people. In summary, within a consultation a Mental Health Professional should work in the following way:

... "very systemic and very much about trying to creatively engage these children and young people, and trying to think of children and young people in a broader system, not just that child or young person in the room"

65. Cross-pathway Community Practitioner – Wandsworth

| Area | London |
|---------------------------|--|
| Site | Wandsworth |
| Theme | Enhancing Liaison and Diversion Pathways |
| Start date | January 2018 |
| Key contact | London Health and Justice Team |
| Project brief | The recruitment of one Community Mental Health Practitioner to work across the integrated community youth justice pathway for children and young people, which includes the Liaison and Diversion Service and YOT. |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|--|---|--|
| £1,000,068 total cost per annum across 29 London projects. | Collaboration between Wandsworth CCG, YOT, Children's Social Care, CAMHS, South West London & St George's Mental Health Trust. Additional role recruited. | CYP are screened for mental and physical health risks at the earliest point in their youth justice journey. Wandsworth YOT Police have a dedicated Mental Health Practitioner to support out of court disposals, which aim to move CYP away from the YJS. Community linkages including with schools. | CYP receive better help to support their health and wellbeing needs. Shorter referral pathways for CYP. CYP are diverted more accurately, from the YJS or within the YJS. CYP affected by gangs and knife crime now have a dedicated Mental Health Practitioner who can work with them. | CYP receive help to address their health inequalities. Reduction in reoffending behaviour. CYP have shorter engagement with the YJS. YJS decision makers have appropriate information to make informed decisions. |

Quote from HMIP Inspection of Wandsworth YOT - March 2019

"Health provision in the YOT is excellent and includes a speech and language therapist, a YOT nurse, two mental health workers and two psychologists."

Enhancing Liaison and Diversion Pathways

66. Cross-pathway Practitioner – Greenwich

| Area | London | | | |
|---------------------------|---|--|--|--|
| Site | Greenwich | | | |
| Theme | Enhancing Liaison and Diversion Pathways | | | |
| Start date | July 2018 | | | |
| Key contact | London Health and Justice Team | | | |
| Project brief | X1 Liaison and Diversion Practitioner to provide early assessment and intervention across the community youth justice pathway. The role is part of a wider service for early intervention in the community which covers arrest through to resettlement. | | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Developing the workforce Whole system approach | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|--|---|---|--|
| £1,000,068 total cost per annum across 29 London projects. | Collaboration between Greenwich CCG, OXLEAS, YOT/YOT, Children's Social Care, CAMHS, South West London & St George's Mental Health Trust. Collaboration between Greenwich, Lewisham, Bexley CYP L&D. Additional roles recruited. | CYP are screened for mental health and physical health risk at the earliest point in their youth justice journey. More joined up pathways for CYP across boroughs with a focus on effective coproduction of services. | CYP receive better help to support their health and wellbeing needs. Shorter referral pathways for CYP. CYP are diverted more accurately, from the YJS or within the YJS. | CYP receive help to address their health inequalities. Reduction in reoffending behaviour. CYP have shorter engagement with the YJS. YJS decision makers have appropriate information to make informed decisions. Reduction in first time offending due to early intervention and support. |



ENHANCING SUB THRESHOLD PATHWAYS

These projects aim to improve the pathways for children and young people who do not meet the threshold for existing services and as such are unable to access the required support. This includes specialist outreach support and trauma pathway enhancement.

67. F: CAMHS Post - Oxfordshire

| Area | South East |
|---------------------------|--|
| Site | Oxfordshire |
| Theme | Sub-threshold |
| Start date | April 2018 |
| Key contact | South East Health and Justice Team |
| Project brief | X1 Band 7 within the regional F:CAMHS Team to support the families of CYP accessing the service. X1 session of team supervision per week is provided by a Psychiatrist also. |
| Strategic deliverables | Improving access to effective support Developing the workforce Whole system approach |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|---|---|
| • £76,000 cost per annum | Collaboration and coordination between FCAMHS, L&D, Social Care, County Council Housing and YOT Training. Workforce development. Additional role created. | 1:1 sessions with CYP and family. Creation of care and risk management plans. Liaise and refer to other services based on presented needs. | Improved access to mental health and substance misuse services for CYP. More robust multiagency working to provide holistic care. Positive relationships in CYP's life. | Parents and professionals around the CYP understand their needs better and are better able to support them. Access to mental health services and care for excluded CYP. |

Case Study: Theo

Background Information

Theo was adopted at birth, alongside his full biological brother. Theo accessed the service after becoming a looked after child following a deterioration in behaviour at home. There were concerns about Theo's mood and his parents felt unable to manage him at home. They wanted to continue to support him, however felt he needed a placement within the Housing Pathway.

Behavioural Concerns

- Smoking cannabis
 - Using drugs including Class A (cocaine, MDMA, ketamine) in the home with peers
- Verbally threatening and aggressive towards parents
- Breaking into the home when parents were away and using it for drug use.
- Stealing money from parents.

Approach

My role was to try to engage Theo in an assessment process where I would assess his mental health, risk and quality of life. When I first tried to engage with Theo, he was placed in a housing project. Although he had consented to seeing me, he was not present for the first two visits; it was felt this was likely to have been an avoidance technique.

The placement deteriorated quickly as Theo started to engage in offending behaviours such as arson, selling drugs and robbery. A gradual approach was taken with Theo given his ambivalence, however I soon identified anxiety as the key presenting issue.

Theo engaged brilliantly in future sessions. He was able to answer questions, complete routine outcome measures and engage in psychoeducation about the presenting issues.

Outcome

Upon turning 18 years old, I felt a further assessment was required in respect of Theo's low mood and anxiety. I felt medication needed to be considered and I wanted to explore options for some longer-term therapy around his mood and anxiety. Theo agreed with this and consented to me referring him to the Adult Mental Health Team.

I completed the referral, which included providing a detailed clinical summary and speaking with the team on the phone. Theo made it clear he felt hesitant about attending an assessment at a community hospital. As Theo and I had built up a positive relationship over time, I agreed to attend the appointment with him. This decision was made with Theo's parents and supported by the fact that he had not left the house in months.

I took Theo to his appointment and he engaged well. There was a Consultant Psychiatrist and a Mental Health Practitioner present at the assessment. Although he struggled at times, Theo was able to answer their questions well. Theo agreed to trial medication and to attend CBT and activity-based therapy.

68. SWIFT: Trauma Pathway Lead Social Worker – East Sussex

| Area | South East | | |
|---------------------------|--|--|--|
| Site | East Sussex | | |
| Theme | Enhancing vulnerable young people pathways | | |
| Start date | October 2018 | | |
| Key contact | South East Health and Justice Team | | |
| Project brief | X1 Senior Social Worker to lead the trauma pathway for East Sussex. The pathway provides direct work, consultation and workforce development. Referrals are accepted from a range of agencies based on the presenting need of the CYP. | | |
| Strategic deliverables | Care for the most vulnerable Developing the workforce Whole system approach | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|--|--|---|--|
| £66,000 cost per annum. Matched funding from x3 CCGs of £40,000. | Collaboration and coordination between various agencies and practices within the YJS. Training and workforce development. Additional role recruited. | The Senior Social Worker works directly with CYP who present with the need for a trauma informed approach. 1:1 sessions and an Integrated Care Plan for CYP. The Senior Social provides consultation and training to other practitioners in the system. | Practitioners are better informed about trauma pathways. CYP with presenting needs receive trauma informed interventions. More rapid access to trauma informed interventions. | Improved recovery of CYP. Increased emotional resilience of CYP. |

Case Study: Emily

Background

Police raised Emily's case with the Head of Service due to the level of ongoing risk which was not reducing. Emily is one of nine children, has a long history of neglect and is a looked after child (Section 20). She has been in numerous foster placements and residential homes since 2016. These have included placements both in and out of the county. Emily has also spent a period in secure accommodation.

Emily's allocated Social Worker spoke with Emily about the trauma pathway. Emily agreed she would like to meet with the practitioner to find out more.

Assessment

At the initial meeting Emily presented as hyper vigilant and child-like; hiding behind the door wanting to engage in a game similar to 'peekaboo'. Emily struggled to remain still, moving around the room, avoiding eye contact and at times facing away from the practitioner. Emily agreed she would like to work with the practitioner to "see how things go." Since the referral, Emily has been seen by the practitioner five times and has attended all weekly appointments offered to her.

Alongside weekly appointments, psychoeducative work began with Emily around the impact of trauma on the brain and it's functioning which she showed a keen interest in. Emily engaged in drawing her 'window of tolerance' and a discussion around what triggers her and pushes her outside of this window.

Outcome

Emily's engagement has been positive throughout and she is beginning to trust in the therapeutic relationship more. She continues to present as a vulnerable young person who is at risk, particularly within intimate relationships. Emily has recently stated she is realising that perhaps things can be different for her in the future. This sense of hope for a different future is significant for Emily and one, which will continue to be encouraged throughout the remainder of her time working with the SWIFT Trauma Pathway.

Sub threshold

69. Harmful Sexual Behaviour Pathway Development - Birmingham

| Area | Midlands | | |
|------------------------|---|--|--|
| Site | Birmingham | | |
| Theme | Sub-threshold | | |
| Start date | May 2017 | | |
| Key contact | Midlands Health and Justice Team | | |
| Project brief | X1 Autism Specialist Practitioner and x1 Assistant Psychologist to develop the pathway for CYP who sexually harm and their families. Capacity has been increased in the HSB Team (situated within the YOT), with a specific service offer for CYP on the autistic spectrum and / or those who have learning difficulties. | | |
| Strategic deliverables | Care for the most vulnerable Developing the workforce Whole system approach | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|--|---|---|---|--|
| Additional support from Birmingham and Solihull CCG (Birmingham only), and Sandwell and West Birmingham CCG (West Birmingham only) £59,077 cost per annum. | Collaboration between Birmingham and Solihull CCG, Birmingham Children's Trust, YOT and Barnardos. Specialist service to address harmful sexual behaviour, particularly for those with autism and/or learning difficulties. Additional posts recruited. | The service can support 30 CYP and their families per year. Implementation of a triage system for assessment. | An increase in the number of CYP receiving therapeutic intervention using various models and approaches (Good Lives model, CBT, Family intervention and psychoeducation). More robust and timely assessments to inform Crown Prosecution Service decision making. | Reduction in the number of CYP mislabelled as sexual offenders. Increase in multiagency working and information sharing to support CYP who sexually harm. Creation of a more informed community about the issues facing CYP who sexually harm. |

70. POWER Project - Early Intervention - Southend, Essex & Thurrock

| Area | East of England | | |
|---------------------------|--|--|--|
| Site | Southend, Essex & Thurrock | | |
| Theme | Sub-threshold | | |
| Start date | August 2018 | | |
| Key contact | East of England Health and Justice Team | | |
| Project brief | The POWER (Presenting Opportunities with Emotional Resilience) project provides targeted early intervention across the area. POWER practitioners offer direct support to children and young people aged 8-13 known to the police, and their parents / carers. Practitioners help them develop ways of coping with challenging situations at home, at school and in their local communities. The project carries out workforce development and training for staff in mental health identification, intervention and prevention. | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Improving transition | | |

INPUTS What was contributed to the programme?



ACTIVITIES What was implemented?



OUTPUTS What tangibles resulted from

activities?



OUTCOMES What was the effect of the

activities?



IMPACT What were the wider implications?



- Support from other Services to complement CCN funding.
- £353,725 cost per annum.
- Essex County Council and Essex YOT supported via project management, information management and the Head of Service.
- Essex Police supported with identification and information sharing.
- Collaborative working between CCG, Essex Police, Schools, Thurrock Council, Southend Council and Essex County
- Comprehensive programme to promote POWER to mainstream schools and raise awareness of indicators where early intervention can positively impact CYP.

Council and YOTs.

- Enhanced early intervention in reducing the prevalence of emotional well-being issues, offending
- behaviour and school
 exclusions through
 direct interventions
 with parents, carers
 and schools.

 Support to schools to
 develop effective
- supporting CYP.
 Training for other professionals in contact with CYP.

methods of

- CYP have an improved attitude to school, and schools are better able to integrate CYP with complex needs.
- CYP and their families have a better ability to self-manage their well-being.
- CYP are more resilient to challenging circumstances.
- Professionals have better visibility of CYP challenges and an understanding of where the behaviour comes from.

- Improved school outcomes: CYP remain in schools and are able to avoid permanent exclusion.
- CYP are less likely to come to the attention of Essex Police.
- CYP are less likely to be at risk or present risks to others.
- Schools are more likely to take a holistic view of needs.
- Schools are more likely to consider the impact of childhood trauma on emotional development and behaviour.

Children and Young People Now Award 2019

Children and Young People Now Awards 2019

The POWER (Presenting Opportunities with Emotional Resilience) project was nominated for, and won, the Youth Justice Award at the CYP Now Awards 2019.





71. Systemic Family Therapy - Bedfordshire

| Area | East of England | | | |
|---------------------------|--|--|--|--|
| Site | Bedfordshire | | | |
| Theme | Sub-threshold | | | |
| Start date | October 2018 | | | |
| Key contact | East of England Health and Justice Team | | | |
| Project brief | Systemic family therapy for CYP and their families. The service works with CYP of secondary school age who exhibit anti-social behaviour at home and/or in the community, including offending, physical and verbal aggression, mixing with anti-social peers and truanting from school. The service is targeted at CYP excluded from mainstream school for behavioural difficulties across the county. | | | |
| Strategic deliverables | Improving access to effective support Care for the most vulnerable Working in collaboration Improving support to parents/carers | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|---|--|---|
| • £108,758 cost per annum | Collaboration between YOT, Local Authorities, Schools, Substance Misuse Services and Family Therapists. Additional posts recruited. | Systemic family therapy sessions for CYP. Referrals for substance misuse support where needed. | CYP and their families are more resilient and better able to selfmanage the behaviour and difficulties. CYP and their families have the right level of support from professionals for their substance misuse difficulties. | CYPs are more resilient CYPs may be able to re-join the mainstream school setting. CYPs are less likely to need further H&J intervention. |

Case Study: Amber

Background

Amber is a 16-year-old girl who was referred by her Social Worker due to anger issues and impulsive behaviours.

Amber was known to Social Services for concerns around child sexual exploitation and her parent's inability to safeguard her. She has a volatile relationship with her mother, which has resulted in her going missing from the family home on a number of occasions.

Amber attends alternative provision and although her behaviour in school is usually settled, there have been times when escalation of emotional dysregulation has resulted in the use of physical restraint by the school.

<u>Assessment</u>

On meeting the practitioner, Amber expressed that she was depressed and self-harming. She reported that she frequently lost her temper and had difficulties with impulse control. She would then experience dissociative states, during which she became unaware of the impact of her behaviour on others. Although after these episodes Amber was sad and remorseful, these feelings did not prevent a reoccurrence some days later.

<u>Outcome</u>

Support for Amber centred on mentalisation, which helped her understand herself, her emotions and how she responds to things around her. This supported her to develop a better sense of herself, insight into her difficulties and improve her emotional regulation.

Supporting Amber required a joint effort with multi-agency partners. Amber was supported to complete her GCSE exams, followed by a local apprenticeship.

Sub threshold

72. CAMHS and YOS Specialist Outreach Support - Northamptonshire

| Area | East Midlands | | | |
|---------------------------|--|--|--|--|
| Site | Northamptonshire | | | |
| Theme | Sub-threshold | | | |
| Start date | October 2018 | | | |
| Key contact | East Midlands Health and Justice Team | | | |
| Project brief | X2 Mental Health Practitioners based within CAMHS and YOS (one practitioner in each team) to provide specialist outreach support to CYP with emotional wellbeing needs, impacted functioning and who don't meet threshold criteria. The service is aimed at CYP who have committed an offence and are at risk of entering the CYPSE in the future. | | | |
| Strategic deliverables | Promoting resilience, prevention and early intervention Improving access to effective support Care for the most vulnerable Working in collaboration | | | |

| INPUTS What was contributed to the programme? | ACTIVITIES What was implemented? | OUTPUTS What tangibles resulted from activities? | OUTCOMES What was the effect of the activities? | IMPACT What were the wider implications? |
|---|---|--|--|--|
| £69,457 cost per annum. Matched Funding from PCC. Mapping events commissioned across the whole of the East Midlands £30K for the region. Matched funding of £219,000 for 3 years from the PCC for X2 additional CAMHS posts arising from the success of CCN. | Collaboration between Northamptonshire and Corby CCG, Northamptonshire Foundation Trust, Northamptonshire YOT and Police. Additional CAMHS workers recruited. | 1:1 sessions with CYP. Consultative and / or training sessions with other professionals. Strong links developed between Police, PCC, CAMHS and YOT. Training delivered. Co-production of service design commenced. | Stronger multi-agency ways of working within the community. Improved self-esteem, self-regulation and health and wellbeing for CYP. Increased access to professional services for CYP. | Improved outcomes for CYP. Reduced reoffending. Increased awareness of cohort. |

ANNEX A: GLOSSARY

ACEs Adverse childhood experiences

AMBIT Adaptive mentalisation-based integrative treatment

CAMHS Child and adolescent mental health service

CBT Cognitive behavioural therapy

CCG Clinical commissioning group

CCN Collaborative commissioning network

CHISVA Child independent sexual violence advisor

CN Clinical network

Community FCAMHS Community forensic child and adolescent mental health service

CSAAS Child sexual assault assessment service

CYP Children and young people

CYPMHTW Children and young people's mental health transformation workstream

CYPSE Children and young people's secure estate (of which NHS England directly

commissions the healthcare for young offender institutions, secure training centres

and secure children's homes across England)

DBT Dialectical behavioural therapy

DDP Dyadic development psychotherapy

EMDR Eye movement desensitisation & reprocessing

ETE Education, training and employment

F:CAMHS Forensic child and adolescent mental health service

FIT Family intervention team

FTE Full time equivalent

'Gaps' A consistent and sustained divergence, difference or disparity within vulnerable

children and young people pathways.

HEE Health education England

HSB Harmful sexual behaviour

H&J Health and justice

H&J Areas There are seven health and justice areas across England (North East, North West,

Midlands, East of England, South East, South West, London)

KPIs Key performance indicators

LA Local authority

LTPs Local transformation plans

L&D Liaison and diversion

MDMA Methylenedioxymethamphetamine (commonly known as ecstasy)

MH Mental health

NHSE&I National Health Service England and National Health Service Improvement

NSPCC National Society for the Prevention of Cruelty Children

NVR Non-violent resistance

OPPC Office of police and crime commissioners

| PCC | Police and crime commissioner |
|---------------|--|
| PRU | Pupil referral unit |
| SALT | Speech and language therapy |
| SARC | Sexual assault referral centre |
| SCH | Secure children's home |
| SECURE STAIRS | Framework for integrated care for children and young people in secure settings |
| SMS | Substance misuse service |
| STC | Secure training centre |
| STP | Sustainability and transformation plan |
| WP | Workstream project |
| WTE | Working time equivalent |
| YCS | Youth custody service |
| YJB | Youth justice board |
| YJS | Youth justice system |
| YOI | Young offender institution |
| YOS | Youth offending service |
| YOT | Youth offending team |
| | |