

GREATER MANCHESTER CHILDREN'S HEALTH AND WELLBEING STAKEHOLDER FORUM

WORKING TOGETHER AND DEVELOPING AN INTEGRATED APPROACH TO IMPROVE OUTCOMES FOR CHILDREN AND YOUNG PEOPLE

THURSDAY 28 JANUARY 2021



EXECUTIVE SUMMARY

The Greater Manchester (GM) Child Health and Wellbeing Stakeholder Forum was held on the 28th January 2021 to explore the meaning and development of integrated care across health and other sectors with the voice of children, young people and families as an integral part.



Over 100 delegates joined from a range of GM services such as physical, mental and public health, primary, secondary and tertiary care services, research, Local Authorities, Greater Manchester Combined Authority (GMCA) and Greater Manchester Health and Social Care Partnership (GMHSCP), Youth Services, Education and Youth Justice. The VCSE sector, children, young people (CYP) and family voice representatives and some delegates from other parts of England joined the event to hear of the steps being taken in GM to integrate care given to CYP and families and to give their views in shaping future work on integration.

There were national presentations from the clinical and CYP voice leads and CYP expert youth advisers, NHS England and Improvement (NHSEI) CYP Transformation Team. They summarised the CYP Transformation programme and the importance of CYP Voice within it. The Forum also heard about the experience of the Children and Young People's Health Partnership (CYPHP), Lambeth and Southwark. The CYPHP has taken a research and population-based system wide approach to target CYP and families who need the most care and is evaluating effectiveness and experience of their interventions.

There were presentations from GM to outline the evolving GMHSCP governance arrangements linked to the future for NHSEI Integrated Care systems and the May 2021 Mayoral election which will be followed by a GM strategy refresh. The role of the GMCYP Steering group was explained. There are 2 key programmes underway - the Greater Manchester Child Health and Wellbeing (GMCH&WB) Framework and the GM Children and Young People's Plan. These programmes link to other CYP programmes across physical and mental health, social care, education, youth justice and the VCSE sector. These factors make 2021 the right time to join up and develop one GM CYP plan, particularly in an era of Covid 19 responses and recovery plans. The GMCH&WB Framework adaptation to Covid 19 and its physical health programme and the use of the innovative digital tool, the ASSURE app used in one Local Authority to join up information around families who need support were presented. There was a very powerful CYP voice session in which delegates heard about the GM system wide work underway to capture the range of CYP and family voice activity and embed their voice in future CYP plans, the Youth Inspectors' and Youth Guarantee Programmes and a key example of evaluation, the 'so what' as to what matters to young people during their school years called the GM Wellbeing programme.

The last presentation by a parent of a 16-year-old girl with additional needs, encapsulated the need for change and in so doing has set the challenge to the GM CYP system - ***What difference will all this make to the lives of CYP?*** She emphasised the importance of having trust in services, listening and using the lived experience of CYP and families, and on an operational note, joining up the services to minimise fragmentation, poor communication and time wasting to have a much more holistic approach to care.

Here are some of the comments from the meeting chat with respect to CYP and family voice and professionals.

CYP Voice

- It is a very complicated world to navigate for parents and if this seems complicated can you all imagine trying to navigate this world as a parent or young person with additional needs
- Use CYP and family lived experiences
- Find out what is important to CYP right at the start
- Collaborate, listen, act on voice of CYP
- Needs to be more flexibility in approaches used to listen to CYP and families
- CYP must trust the system and not feel let down
- Include CYP who can't communicate and use language that everyone can understand

- There is definitely not enough pro-active and preventative support for families, children and young people.
- Crisis intervention is not a good care model
- Support SEN students as so many SEN students end up with poor mental health as they don't have the correct support
- English for Speakers of Other Languages (ESOL) students struggle greatly in terms of digital barriers and poverty; you are more at risk of digital exclusion if you have a learning disability or need adapted or access equipment; only 6% of CYP with disabilities have a job; hear more about supported internships and employment
- Arguing over who is responsible for funding each part of a package of care is a waste of time – the family just want things to happen!
- Integrated care across GM - the 'So what' Question needs to be answered

Professionals

- Fabulous to see such rich representation from across the system!
- Be united around a common purpose and we must listen to our CYP – what do they want and need
- Don't homogenise CYP
- Lived experience presentation was inspiring – listen and listen
- Enhance integration around the prevention agenda
- Working in isolation can do more harm than good'
- Much more input from VCSE required
- More inclusion of CYP, hearing their voice and involving in service improvement
- Can we use the Population Health System intervention tool?
- How well do the 3 workstreams on Health, Local Authority and Crime and Justice work with the VCSE sector?
- Strong advocacy is required
- Important role for youth workers
- GM Youth Guarantee – excellent progress made in 6 months
- Link in with GM Moving refresh – opportunities for integration with physical and mental health. Would love to engage this group in GM Moving refresh
- What about therapy services e.g. Physiotherapy and occupational therapy across GM to ensure children and young people who need this to stay well - are CYP still receiving support?
- Partnership working is key and happy to be connected with anything/anyone as needed
- Thank you - brilliant and inspirational work going on nationally, regionally and across GM and the golden thread in all of this is to collaborate, listen and act on the voice of the young people

And a final comment from one of our speakers ***'Today makes me proud to call Manchester 'home'.'***

The MS teams chat box function gave delegates the opportunity to connect and comment and this detail should be taken into account in planning next steps. This is included under each presentation summary.

The results from the interactive session were made up of a combination of the responses from delegates during and after the live event. Here are some of the opportunities and challenges for the GM system, how we can improve how we work together and how we can take a whole system approach across GM.

Opportunities

- Use of data and information to improve outcomes
- Joined-up working/ same agenda/ joined up services
- Population health approach/ prevention and early intervention
- Focus on CYP in the criminal justice system
- Listen to and value our CYP
- Building on existing good practice
- Covid as a catalyst for action

Challenges

- Making the case for change
- Sufficient resources for post-covid challenges
- Communication between stakeholders
- ICS proposals

Improving how we work together across GM

- Listen to our CYP
- More people with lived experience involved
- More consistent offer to children in the Criminal Justice System
- More research into health needs
- Joined up approach to commissioning
- Governance that recognises shared aims to improve HWB of our CYP
- Equal footing for all stakeholders
- Focus on out of hospital
- Standardisation of pathways

Whole system approach

- Listen to and hear CYP/ parents and carers
- Agree the right priorities together
- Focus on prevention
- For children in Criminal Justice System
- Support to assess the impact of Covid 19
- GM Communications Strategy
- Joined-up commissioning and collaborative provision of services
- Create a trauma-responsive system
- Less 'medical model' and diverse pathways across health and care
- Use paediatric workforce as an opportunity for development
- Share good practice

NEXT STEPS

The event showed how much can be done in a short time to capture the views and recommendations of a sector wide stakeholder group. This report will be circulated and used throughout the GM System to inform and influence the evolving GM governance, the refreshed plan for CYP and their families and an integrated approach to health and care. By the time this report was published key points have already been fed back to the GMCYP Steering Group and the GM Child Health and Wellbeing Executive Board responsible for the delivery of the GMCH&WB Framework.

The report will also inform the GM CYP Voice Task group's work programme and the GM CYP Physical Health Programme which will be implementing the National CYP Transformation plan deliverables, in partnership with other parts of the GM system CYP programmes such as Mental Health, Early Years, SEND, Vulnerable children and families and the VCSE sector.

Some specific actions came out of the event Specifics:

- Stakeholders have made personal pledges to improve integrated working
- Support roll out of the ASSURE app across GM and with inclusion of Youth Justice and CAMHS services
- Explore the use of a Population Health System Management tool in targeting CYP and families who require the most need of care and health services and evaluating its effectiveness as well as CYP and family experience
- Discuss with GM Moving about using the Stakeholder Forum for a future event

INTRODUCTION

After much discussion as to whether, with the current pressures due to Covid 19, the Greater Manchester Child Health and Wellbeing (GMCH&WB) Stakeholder Forum should take place, a meeting with presenters prior to the event confirmed that **now more than ever** this event needed to go ahead. Comments from presenters such as Diane Modahl, Lead for CYP Youth Guarantee who said, 'we owe it to our children and young people' and from Lauren Barclay, Youth Worker, Youth Focus NW who said 'our children and young people need hope going forward' set the objectives loud and clear.

Dr Carol Ewing, Chair of the Greater Manchester Child Health and Wellbeing Stakeholder Forum, opened the event and described the need more than ever for colleagues to work collectively and collaboratively. Carol also stated that 'Covid 19 is integral to everything we are thinking and doing in this event'.

AIM OF THE EVENT

This virtual GMCH&WB Stakeholder Forum event explored the Greater Manchester (GM) and national approaches to the integration of services for children and young people (CYP). It reflected upon the progress made against the objectives of the GM CYP Health and Wellbeing Framework, whilst considering the impact of Covid 19 and the future opportunities and work required for the GM response to the global Covid 19 pandemic. Delegates heard from national experts and how the potential opportunities for integrated working in Greater Manchester could be aligned with the objectives of the NHSEI Children and Young People's Transformation Programme. The voice of children, young people and families was centre stage throughout the event. Delegates were also sent an information pack and several pertinent weblinks to GM CYP plans, policies and relevant research.

THE OBJECTIVES OF THE DAY WERE TO

- Identify opportunities and challenges across all sectors in the development of an integrated care model of care
- Challenge ourselves as to what we and the system can do better to develop and implement the model
- Achieve these objectives by working with CYP, parents and carers

TARGET AUDIENCE

The target audience was made up of people with a passion for improving the lives of CYP by professionals and by aiming to work collaboratively and involving CYP and their parents and carers every step of the way.

Despite being in the midst of a Covid 19 pandemic and with the likelihood of delegates having to leave during the event due to other commitments, over 100 stakeholders initially joined from Greater Manchester and beyond to hear and interact with ongoing work to further develop integrated care. Attendance at the event included a mix of young people, parents, carers, providers and commissioners of health, care and youth justice service staff, education professionals and voluntary sector organisations.

AUDIENCE PARTICIPATION

During the session, participants were encouraged to post questions in the chat box as well as in 'Mentimeter'. During and after the event, they were also asked to make a pledge as to what they would commit to, to progress the ambition of providing truly integrated children's services.

PRESENTATIONS

NHSEI CYP Transformation Programme

Dr Matthew Clark, Consultant Paediatrician and Speciality Lead, East Sussex Healthcare NHS Trust, National Speciality Advisor CYP

Dr Clark set the scene with a presentation about the National Children and Young People Transformation Programme and the clear commitment that NHSEI had made through the Long-Term Plan and the CYP Transformation Programme to improve outcomes for children.

He alluded to the fact that although children and young people had been relatively 'spared' from Covid 19. They had made extraordinary sacrifices, for example, in terms of their education, healthcare and pharmaceutical interventions to support their care.

He stated that last year, NHSEI focussed on ensuring that the Long-Term Plan commitments were delivered on, and that there was (and is) a safe level of CYP services available.

Children and young people are commonly affected by three Long Term Conditions (LTCs), asthma, diabetes and epilepsy, as well as obesity, with asthma rates of admission in England some of the worst in Europe. It is recognised that Emergency Departments are not necessarily the best places to care for these patients. The national CYP Transformation Programme aims to:

Integrate Improve Include

There are 10 workstreams for the CYP Transformation Programme. Whilst most child health professionals are familiar with integrated working in a vertical way e.g. primary and secondary care, integration requires working vertically and horizontally too e.g. across Health, Education and other Local Authority Services.

James Connell, CYP Voice Manager, NHSEI

James has been working for the past 12-14 months on the recognition of CYP Voice within plans and in 2019 appointed two CYP Expert Advisers, Bradley Gudger and Gabrielle Mathews, as well as four Youth Board Members; Mike Jones, Bridget Bould, Samya Sarfaraz and Christopher Barton.

Models of engagement and involvement include:

- The NHS Youth Forum
- Closer inter-team working with the Mental Health, Learning Disability and Autism teams
- Parents and Carers- there are plans to enhance this by enabling parent/ carer voice at Boards and in Programmes

There are two Patient and Public Voice (PPV) partners on the national CYP Asthma Programme and James is looking to develop similar for the CYP Obesity Programme.

Brad Gudger, Youth Expert Adviser, NHSEI

Brad introduced himself as a Youth Expert Adviser and shared his own personal story of contracting leukaemia in 2013, his relapse in 2017 and his vast experience as a user of NHS services in the last 6 years. He is the founder of an app 'Alike' which is to support young people impacted by cancer. As well as representing young people in the UK, he works internationally as an advocate too. He also lobbies to reduce the environmental impact of the NHS. Brad strives to ensure all young people are included in any decision-making.

Gaby Mathews, Youth Expert Adviser, NHSEI

Gaby spoke about how she and Brad are role models for young people and that part of their role is to ensure CYP are confident advocates for themselves. She stated that co-production with CYP can be really helpful when developing policies and making strategic decisions. To be effective it is important to find out what is important to CYP.

MS Teams discussion:

- *The National CYP Transformation CYP voice coordinator's email address was shared so that ongoing connections and discussions can continue james.connell@nhs.net*
- *We tend to think of young people up to 25 in UK but in Europe it's up to 30. Are we heading in the same direction?*

Developing a whole system approach to improve services for children, young people and their families in Greater Manchester (GM)**Jane Shuttleworth, Strategic Support and Co-ordination, GMCA**

Jane described the complex governance structure for Children and Young People's programmes in the Greater Manchester Combined Authority (GMCA) and the Health and Social Care Partnership (GMHSCP). She focussed on two key plans that the architecture supports: the GM CYP Plan (2019 – 2022) and the GM CH&WB Framework (2018- 2022). These plans may be refreshed following the GM Mayoral Election this year. The 3 key areas to bring together to further develop partnership working are Health, Local Authority and Crime and Justice.

MS Teams discussion:

- *If this seems complicated can you all imagine trying to navigate this world as a parent or young person with additional needs*
- *How well/easily are VCSE sector organisations integrated into the three systems and 16 workstreams described either in GM or localities/neighbourhoods? Perhaps a question for later?*

Dr Alison McGovern, Programme Lead, GMEC Maternity and Children's SCNs, GMHSCP

Alison described progress against the GM Children's Health and Wellbeing Framework (GM CH&WB) in the light of the impact of Covid 19. In the past year and since the onset of the pandemic, services have seen children who are more ill when they present to services. GM communications with the public and child health staff helped to ensure that worried parents and carers sought medical attention for their children if concerned. More recently, Paediatric Inflammatory Multisystem Syndrome (PIMS-TS) has been noted as a result of Covid 19, as has a potential link to an increase in numbers of children with diabetes and being more ill when presenting in some areas. There has been an increase in the numbers of children requiring CAMHS services and a change in the types of admission to acute services.

As a result, the GM CH&WB Framework deliverables were reframed, expedited and flexed:

REFRAMED:

The Youth Agreement: Plans to develop an 'Youth Inspector' programme was changed to a digital offer.

The resilience of the paediatric workforce during the pandemic has been supported through ongoing monitoring and aiming to ensure a sufficient workforce to care for our children, e.g. by supporting mutual aid and new ways

of working across Trusts although it has been necessary at times to transfer child health staff to adult areas and community paediatric staff to acute areas.

Innovations that came about because of the Covid 19 pandemic have been captured and shared.

The Personal, Social, Health and Economic (PSHE) education toolkit has become a digital offer.

EXPEDITED:

The digital bed bureau to monitor acute paediatric bed usage including CAMHS across GM was implemented at pace.

An electronic version of the Systemwide Paediatric Observations Tracking digital tool (ESPOT) is being tested as a pilot in 2 GM hospitals with the support of Health Innovation Manchester - this is part of the national NHSEI pilot SPOT programme.

Preventing Avoidable Admissions: Innovations and spread, particularly for the Children's Community Nursing teams and their offer e.g. virtual clinics were rapidly implemented.

Mental Health digital access was expedited.

FLEX:

It became clear that Covid 19 is a complex disease with a range of longer-term impacts on CYP. The CYP Integrated Health Programme team has prioritised the development of a Children's 'addendum' to a GM Adult Long Covid specification due to the complexities of CYP presentations and illness compared to adult presentations. This is near completion.

Similarly, as pressure on GM health services increased, the CYP Integrated Health Programme responded by garnering the support of paediatricians to support the NHS 111 service.

MS Teams discussion:

- *What is happening with Therapy services i.e. physiotherapy and occupational therapy across GM to ensure children and young people who need this to stay well are still receiving support?*

Beccy Bibby, Assistant Director, Early Help and School Readiness, Salford City Council

SALFORD ASSURE

Beccy Bibby from Salford LCO gave a brief overview of the Salford Assure web platform and its triangulation function. Assure is a web-based platform developed by IT colleagues and co-designed by Local Authority and Health teams. It enables visibility of CYP during the first lockdown (March to June 2020), and information-sharing about, and with, CYP and families who fell below the social care threshold.

The three parts to the platform are:

- Dashboard- this is a high-level view of need and support
- The overview of which services are involved with children, young people and families
- The individual CYP view which shows support packages in place

By triangulating the information, this highlights children and young people and their families who fall below the social care level of support. These are discussed with a multidisciplinary team (MDT) where support packages can be planned.

Schools, Local Authority and Health services can input information including attendance data etc. to inform the best support package to put in place.

The next steps for Assure are:

- Mainstream the platform across GM- get wider engagement and spread
- Involve CAMHS, Youth Justice and Community Safety (Partnership)

MS teams chat highlights:

- *This makes perfect sense and would really benefit the children in my school*
- *ASSURE is a great piece of innovation; sounds really interesting*
- *There is definitely not enough pro-active and preventative support for families, children and young people*
- *Crisis intervention is not a good care model*

An integrated model of care – ‘What does good look like’ and translating the model into practice

Dr Ingrid Wolfe, Director, Children and Young People's Health Partnership (CYPHP), Lambeth and Southwark Consultant Paediatric Public Health; Evelina London Children's Healthcare, GSTT

Ingrid is also the chief investigator for the evaluation of the CYPHP programme.

Ingrid described the experiences of Lambeth and Southwark in London in developing integrated services for CYP. Physical, mental and social challenges needed to be met and the barriers to meeting these challenges included:

- Prevention and Early Intervention are not done well
- There is disconnect between primary and secondary care; and between health and social care
- There is a failure to apply ‘what we know’ to practice

CYPHP has improved outcomes by applying targeted, preventative holistic care which was enabled by use of a Population Health Management System (Evelina) Framework tool which meant that professionals could know more about children’s health and lives.

The Evelina framework can be applied to any condition or risk factor, helping to reduce inequalities and proportionately accessing CYP with higher needs. The framework relies upon proactive outreach and is based on a population health management system approach.

Since implementation there have been improvements in the care of children with asthma, constipation, eczema and epilepsy. A large proportion of the children with asthma also had unmet health needs i.e. those children who had not yet presented to healthcare settings and had not yet been diagnosed, received treatment. Mental and emotional health and wellbeing (Children’s Global Assessment Scale/ CGAS) was addressed together with physical health.

There was subsequently a reduction in urgent care activity and at least cost-neutrality was achieved. Early findings from the service evaluation, which is running concurrently with a Randomised Controlled Trial (RCT), suggest that savings are doubled relative to the cost, and that there are improvements in patient confidence and satisfaction.

The tools that enable development are data, technology and a population health management workforce team. The Evelina framework is commissioned across Lambeth and Southwark.

CYPHP is writing a recipe book and Dr Wolfe is happy to be contacted at Ingrid.wolfe@kcl.ac.uk

MS Teams discussion

- *Can we link in this work regarding the population health tools which Ingrid is describing in GM?*
- *This approach to anticipatory care is crucial*
- *Sounds as if we could link in the ASSURE app in this approach*
- *Being able to self-refer when you have a child with complex needs would be very time saving; Something teenagers can engage in with themselves too would be good. My girl never puts her phone down. Ownership of information needs to sit with families, children and young people*
- *Royal Manchester Children's Hospital (RMCH) would be happy to support further developments along these lines in GM*
- *It would be great to link this into our wider GM system work*

CYP Voice- Co-production with children, young people and families- what a good, integrated service feels like
Jacob Botham, Programme Manager Troubled Families, GMCA

Jacob introduced the session by stating that ‘timing is important’ and we mustn’t lose sight of children and young people within the Covid 19 pandemic because of the social consequences and the harms that may come from this.

The challenge is in how we connect into and co-ordinate existing CYP voicework networks. The GM Children's Board will provide an opportunity at the beginning of each meeting to hear CYP voice. It's essential to resource CYP voice work properly.

Highlights from MS Teams chat:

- *We need to give all children and young people a voice including those who don't have one*
- *Strong advocacy is key here too*

Stuart Dunne, CEO, Youth Focus North West

Stuart talked about the variety of CYP Voice methods and practice in GM and that GM as a system and on a local basis must maximise opportunities for CYP input. He, Carol and Jacob have already begun to map the plethora of CYP voice activities in GM - currently there is an open consultation with 40 organisations/ services involved in phase 1. Further information will be circulated and any ideas for CYP voice opportunities can be submitted to Stuart Dunne.

MS Teams discussion:

- *Don't forget special schools and colleges and the teaching assistants and staff who support children and young people in mainstream schools*
- *Link with FE colleges and Sixth Forms*

Lauren Barclay, Youth Worker, Youth Focus North West

Lauren gave an overview of one of the CYP Voice opportunities within GM, 'Bee Counted' which is a young health inspector programme. This was developed from Objective 1 of the GM CH&WB Framework 'to develop all relevant plans and policies with children, young people and their families reflecting the realities of their experiences and based on a Children's Charter' (now called Youth Agreement).

To date, 11 young people have been trained in the programme. The GM Youth Agreement (2018) provides the basis for the questions in a survey which is conducted with participating organisations. The young inspectors rate the organisations for each section of the survey which is conducted by speaking to several staff in the service and viewing areas such as waiting rooms and clinic areas. A report with recommendations is written following the inspection and shared with the service. The initial plan was to visit services to conduct inspections but due to the pandemic, inspections will be conducted virtually.

MS teams discussion:

- *Do any of the inspectors have a disability or additional needs and inspect services like equipment, speech and language, specialist services?*
- *Really good to have young people and youth workers involved in this process*
- *RMCH happy to support the youth inspectors work*
- *Would like to find out more and consider being involved as a VCSE service. I'll get in touch once emails shared*
- *Such a simple idea - but sounds great - having a view from our YP and what matters to them is so important - be great to look at how we could include you in the plans for design of the new hospital at North Manchester General Hospital and in particular the CYP services*
- *Taking in parent/carer view and connected to the strategy refresh- what is the relationship and balance between 'health and wellbeing creation' and 'health system and services' in the work? and the thinking around the prevention agenda?*

Diane Modahl, DM Sports Foundation

Diane is the CEO of the Diane Modahl Sports Foundation which encourages behaviour change to enable CYP to reach their potential.

The GM Mayor, Andy Burnham, asked Diane to lead a taskforce to address CYP issues arising from the Covid 19 pandemic. A consultation took place in July 2020 and more than 5,000 CYP participated. The consultation

highlighted that employment, jobs and the Covid 19 pandemic were the biggest concerns for our CYP. A Youth Advisory Group was formed to hold the taskforce to account on the consultation.

Four task force groups were formed to address the issues highlighted by the consultation:

- Keeping Connected
- Staying well
- Making effective transitions
- Remove economic inequalities

The [GMACS website](#) was repurposed to become a central point for CYP to access opportunities.

A digital campaign was launched on Friday 22nd January as it was found that 15-20,000 CYP across Greater Manchester did not have access to IT equipment and/ or the internet. Businesses and organisations were approached and more than £188,000 was raised which will be distributed to schools and colleges where there is a need. The taskforce, under Diane's leadership, has been extended for a further year.

MS teams discussion:

- *Only 6 % of young people with a learning disability have a job - how to make employment accessible to all*
- *This greatly turns up the volume of the children and young peoples' voices*
- *I think schools in GM need to know more about the job opportunities in GM e.g. Media City; construction/engineering so that we can support young people into these careers. It could be through medium to long term plans such as shifts in our curriculum or shorter term like careers opportunities. My school is in Salford. I know vaguely about Media City and construction but most of my info on this comes from TV documentaries!*
- *Are supported internships and supported employment pathways on this website?*
- *You are more at risk of digital exclusion if you have a learning disability or need adapted or access equipment*
- *English for Speakers of Other Languages (ESOL) students struggle greatly in terms of digital barriers and poverty*
- *You have come a long way in a short time*
- *RMCH will support in any way we can*
- *They need to support SEN students so many SEN students end up with poor mental health as they don't have the correct support*
- *Looking forward to responding to what young people have said during Diane's work in the refresh of GM Moving Plan, and the ongoing work around CYP physical activity and sport. Also, keen to connect colleagues here into that. If you are interested in shaping it, contact hayley@gmmoving.co.uk*
- *We work closely and are part of the AoC Mental Health leadership group and this has been powerful in terms of impact*

Professor Neil Humphrey, University of Manchester

Professor Humphrey is working with the Greater Manchester Combined Authority and other partner organisations on a GM Young People's Wellbeing Programme, which was originally planned pre-Covid 19. The group is planning to undertake a cohort study over the next three years, starting in Autumn 2021, which aims to survey CYP to understand and improve what life is like for them in GM. There will be feedback to schools and others who support CYP and youth engagement. Co-design with CYP runs throughout the project.

Highlights from MS Teams chat:

- *<https://capmh.biomedcentral.com/articles/10.1186/s13034-020-00341-7> children and young people's experiences of completing mental health and wellbeing measures for research: learning from two school-based pilot projects*
- *Background In recent years there has been growing interest in child and adolescent mental health and wellbeing, alongside increasing emphasis on schools as a crucial site for research and intervention capmh.biomedcentral.com*

- *It has been great to hear what is going on in the much wider (i.e. beyond mental health) system and some great innovation. Partnership working is key and happy to be connected with anything/anyone as needed*

Deanne Shaw, Parent/ Carer representative

Deanne shared a very personal account of her and her 16-year-old daughter Amber's experiences of services. Amber has additional needs which means that a range of services is involved in her care and educational provision. These services often work in isolation from each other with Deanne acting as the conduit between them all. Deanne described the system that she and Amber have to navigate on a daily basis.

Some services work with different age groups e.g. some will work with children up to 16 years old and others up to 18 years old. Services often sit within different organisations within Health and Local Authorities. Deanne described how she has to ensure that each service knows who is involved with her daughter's care e.g. informing occupational and physiotherapy therapy services that her daughter is attending Bolton College. She shared a story that when Amber was 14 years old, she was impacted by services not communicating or working in a joined-up way. This left Amber and herself very upset and disappointed, and led to a loss of trust in the services involved.

Amber just wants to do many of the things her friends do such as go shopping and join a gym.

MS teams discussion:

- *Well done Deanne, technical problems are a nightmare, you've handled it so well*
- *Don't know how you manage, Deanne. I struggle to pay dinner money and make it to parent's evening on time*
- *Great challenge to us Deanne; CYP trust in the system - key point*
- *Deanne - You use a really good word 'Trust' we should be very mindful of that as we expect CYP/families/carers to all work with us - thank you for the reminder*
- *Good advice Deanne*
- *Wonderful points about language. As a newcomer I find terminology depersonalising and obstructive*
- *Great practical advice Deanne*
- *Powerful Deanne! So grateful to be able to listen to yours and Amber's experience and advice for the system*
- *Fantastic presentation!*
- *Deanne, that gave a real insight-thanks*
- *Great and powerful presentation and messages*

FINAL COMMENTS FROM STAKEHOLDERS

- *Great to hear about the brilliant work across GM. Makes me proud to call MCR home*
- *GM Moving is very keen to integrate the GM Moving refresh with the mental health/wellbeing work that's going on too*
- *We tend to 'homogenise' children and we need to work towards outcomes from a CYP perspective. Parent carer's presentation stating was 'inspiring'*
- *There needs to be a more flexible approach to listening to CYP and parents/ carers'*
- *The afternoon has been uplifting and we were all united around a common purpose, with the imperative to integrate so strong. Working in isolation can do more harm than good*
- *How do we join up our conversations so we can be more holistic in our thinking? There appears to be low attendance from the VCSE Sector, and this felt like a gap*
- *We need to do more work to ask CYP what they want and need, they are all very different with individual and group needs. The timing is right, and we need to move on with energy*
- *Money does matter but from Amber's and my perspective, we don't care who pays. We just see that there are many people working out of one building, not that they are all different organisations with different funding streams. The patient/ carer just wants things to happen and not for them to be tied up in the*

disagreements between services over 'who should pay for what'. CYP and families need to be able to have trust in services

- *Transparency and better understanding of what meets people's needs and not just the system*
- *Great presentations throughout the afternoon*
- *Been a really useful session, thank you*
- *Excellent session - thank you everyone*
- *Thank you. I have really enjoyed joining you*
- *A propos trust, you've made impressive progress building trust among the team - that's important progress for the next steps*
- *Very interesting session, thank you*
- *Thanks for some thought provoking presentations*
- *Thanks so much for this session. Really great presentations and joined up work*
- *It has been really interesting. Well done all round*
- *More inclusion of CYP, hearing their voice and involving in service improvement. - Absolutely - Which would also help with the prevention agenda*
- *Really good discussions*
- *Would love to engage this group in GM Moving refresh- will plan that next week with our CYP lead who couldn't make it this afternoon*
- *Prevention is key and what is prevention to individuals, children young people and families?*
- *Thank you, brilliant and inspirational work, going on nationally regionally and across GM and the golden thread in all of this is to collaborate, listen and act on the voice of the young people*
- *Great afternoon, thank you to all the speakers and contributors - it has given me so much to think about and how the charity I work for can collaborate*
- *Deanne Shaw - my twitter handle is @1985Deanne I tweet along on there about Amber's story and our journey*
- *Listen - 2 ears, one mouth!! Thanks all*
- *Thank you for a very informative afternoon*
- *Thanks everyone. Great stakeholder forum*

BREAKOUT SESSIONS

Three breakout sessions were planned to address 3 questions about integrated services. Instead, this was changed to a plenary session so that delegates could interact with colleagues. Responses and pledges were collated after the event. The questions were as follows.

As we develop and implement an integrated model of care:

What are the opportunities and challenges?

Mentimeter

We have wider and more accurate information about the health needs of children locally and our joint desire to improve their health is strong - so let's use this to improve health outcomes

Children in the criminal justice system have multiple health needs, many of which have not been recognised or addressed - let's prioritise addressing these much earlier

We need to improve the flow of information on the health needs of those young people who end up in custody when they are admitted and released.

Opportunities: • To develop a more pro-active and integrated approach to children's health and social care commissioning. • The opportunity to develop a population approach to prevention and early intervention, particularly when commissioning at a

working together with the same agenda both an opportunity and a challenge

We have excellent examples of integrated services eg. Salford's Assure- let's build on that and encourage adoption and spread across GM.

integration a massive agenda and a brilliant opportunity to get things joined up an all round care machine!

Now is the time for Greater Manchester to join up its services for children and young people and listen to what matters to them

Every challenge should be turned into an opportunity

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What are the opportunities and challenges?

Mentimeter

Sometimes making the case for change can be a challenge but we only have to look at the outcomes for our children, young people and their families to make us overcome the barriers ahead - we owe it to them to improve their outcomes and life goals

We have a history in Greater Manchester of working together across our GM area and in spreading the word of good local practice examples

Children and young people need to be valued and supported on an equal basis to adults, particularly through the Covid 19 pandemic. I

If we work together across health, care, education, youth justice and the voluntary sector to embed preventative measures throughout childhood this will help children and young people to have improved health and wellbeing in their adult lives

Opportunities - the last 12 months has demonstrated that "we" can work differently & effectively across the city- networks contacts need to be maintained Challenge - pace and vision - sufficient resource for post covid that doesn't prevent ambition

The opportunities to share good working practice and replicate it should be grasped, we need to use Covid as a trigger for action for consistency

Challenges are the ICS proposals we need to retain the focus on early intervention and prevention and tackle systemic issues such as Child poverty and Trauma

The opportunities are they is a lot of people who want change to happen, and some change is happening. Challenges are that change is happening on silos. Communication is poor and needs to be further developed between services and families.

Work needs to be developed on communication their is poor communication between health education and social care partners.

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What can we do to improve how we work together across GM?



<p>A more consistent health offer to children in the Criminal Justice System rather than the postcode lottery which currently exists</p>	<p>More research into the health needs and services in Greater Manchester for children in the criminal justice system</p>	<p>• Develop a more joined up approach to integrated commissioning at a strategic and tactical level • Develop an agreed vision, with clarity on what good looks like and a strong focus on prevention and early intervention as well as an understanding o</p>
<p>Let's address the governance and recognise that we have shared aims to improve the HWB of our CYP. We need to be more open with each other about sharing information and resources to get the best outcomes.</p>	<p>equally opportunity to get round the table and listen to what others thing the integrated system should be likework together, no just position power but also listening what all the services can contribute.determine priorities by concensus</p>	<p>By listening to our children, young people and families, we can identify where the gaps are. We can also listen and work with them to find solutions to working together more effectively.</p>
<p>The ICS will provide opportunities for consistency but need to focus on the out of hospital ie. where people live and the systemic issues affecting families</p>	<p>Standardise discharge documentation across GM and Specialist centres outside of GM</p>	<p>Have more people with lived experience who feed back to a wider network.</p>



What needs to happen as a whole GM system?



<p>A health needs assessment across all Youth Justice Services with a view to building a more consistent offer to children in the criminal justice system</p>	<p>• It would be good if GM could support the development of a local (combined) self-assessment of the here and now and some horizon scanning with the awareness of the impact of covid-19• It would be helpful if we had a GM comms strategy (clear steer)</p>	<p>Let our CYP and their parents/ carers be at the heart of what we do and guide the way. We are missing a valuable resource and insight if we don't listen to and hear what they have to say.</p>
<p>work on what matters most for all, listen so people will talk and talk so people will listenopportunities to be involved, determine what are the right priorities, action planning, no one person can sort it out we need to work together shared agenda</p>	<p>There needs to be a commitment from the very top of the GM system across health, care and sector partnerships to enable more joined up commissioning and collaborative provision of services for children, young people and their families .</p>	<p>A focus on the prevention agenda, creating a trauma responsive system in GM, look at the way our systems create trauma for families and stop it!</p>
<p>neurodiverse pathways across health and care with full post diagnosis support for all ages across health, employers and education settings. The current system is a very medical model and is rife with hurdles and prejudicial assumptions</p>	<p>Consider paediatric and children's workforce as a collective opportunity for development</p>	<p>think less in a system centred wayshare good practise more lived experience in the room strategic co production</p>



What is your pledge from today? Don't forget to include your name

Mentimeter

support and develop quality care a service improvement for children and young people	Steve Davies (Stockport) I will support the youth council, the SEND young people and the Children in Care Council to ensure that local health services and organisations are listening to young people and their families.	I will ensure that this network are invited and included in the conversation as we refresh the GM Moving Plan and in our ongoing work across the system with CYP.
We will develop a multi agency single point of access for children and young people's mental health - Stockport CCG	An idea from today was to hear YP or family voice at the start of meetings. I would like to introduce this idea to our local meetings. Philippa Robinson Tameside and Glossop CCG	I pledge to live out strategy and collaboration and not use them as words but as actions.
Muna Abdel Aziz: Exploring a Better Fairer Greener childhood in Salford	To look for more innovative ways to build in youth voice to developing personalised PSHE curriculum for life (Laura Stuart, GMCA)	Lucy Hurst Wigan CCG To continue to make local decisions based upon the voice of the child using child friendly content Also to link in more with other areas to learn from what works and what hasn't

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What is your pledge from today? Don't forget to include your name

Mentimeter

More inclusion of CYP hearing their voice and involving in service improvement. Asking the question 'what does the child want?'. Jessica Oakes CCNT Tameside & Glossop	To work with health colleagues in Greater Manchester to develop a better offer for children in the criminal justice system and to achieve better outcomes	Picking up on one of the challenges noted above. In Bolton we will review the immediate and longer term impact of the pandemic on health, educational and other key outcomes for children and young people, building this into our sustainability plans.
to be open minded get involved listen so people talk establish what need to be done and by when, get the right measurables so we can prove best outcome stake onboard the integration of services, its not position power it is all with the same agenda	Dr Carol Ewing. I will play my part in ensuring that the voice of children, young people and families is heard and used to shape and evaluate the future GM CYP plan.	Kath Bromfield (national network of parent carer forums) to help more people to work with the Parent Carer Forums who's membership is over 25,000 parent/carers in GM and 90000 nationwide so that a wider voice is heard and they become closer partners

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SUMMARY AND CLOSE

Chris McLoughlin, Director of Children's Services, Stockport Council and Co-chair of GM Children's Health and Wellbeing Executive Board (GM CHWBEB)

Chris McLoughlin thanked all delegates and speakers for their attendance and participation, noting that there had been 14 inputs into the afternoon by way of speakers and presentations.

She stated that in a gloomy world, this has presented us with opportunities to be united with a common purpose of improving children and young people's outcomes. There is power in integration and collaboration. There are opportunities for refreshing our strategy for CYP. As leaders we should listen more than we should talk.

Chris thanked Carol Ewing for chairing and for her contribution to the event.

ACTIONS AND NEXT STEPS

- Some stakeholders have already made connections during the event, have made pledges and are taking the learning back to their respective organisations.
- Questions raised in the event will be posed to the respective organisations.
- Dr Carol Ewing will report on the event to the GM CYP Steering Group 2.2.21.
- CYP leads will explore the use of population-based management system tool to identify CYP and families who need most and target and GM will keep connected to Dr Ingrid Wolfe and CYPHP going forward.
- A request will be made to the GM system to support the roll out of the ASSURE app across GM and with inclusion of CAMHS and Youth Justice services.
- The report will be used to support and shape the evolving GM CYP plan and GM Future Directions. governance and the meaning of integrated care and services. As part of this work, the report will feed into the work of the GM CYP Voice group and will be sent to all relevant CYP Boards Involved In improving the health and wellbeing of CYP.

Accompanying documents:

- Agenda and accompanying information
- Slide presentations
- Bibliography of presenters

GET IN TOUCH

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