

ANNEX E: Harrow CCG (Version 20th Dec 2018)

Local information and implementation plans for Harrow CCG and Harrow Council

1. Executive Summary

Harrow CCG, Harrow Council and our partners CNWL and Barnardo's Harrow Horizons, together with a strong local voluntary sector are utilising CAMHS transformation to build a coalition of early intervention, treatment and support for young people across the borough. 2017-18 achievements across Harrow include:

- Joint commissioning by Harrow of CCG and Harrow Council of mental health services for young people continues to flourish which is supported by a Tripartite Funding Panel; an Emotional Wellbeing Board and a Joint Commissioning Executive.
- Harrow Horizons¹ has improved recruitment so that more young people can be seen promptly.
- Harrow CAMHS has reorganised operations in order to maximise clinical contact and reduce waiting times.
- Young Harrow Foundation published the results of its ground breaking needs analysis 'This Is Harrow' which highlighted the priority Harrow young people afford to addressing emotional wellbeing and mental health needs.
- Harrow has also developed a strong Dynamic Risk Register which brings together multi-agency planning to deliver co-ordinated support and treatment to promote good health and avoid unnecessary admissions for young people with learning disabilities, ASD and mental health concerns.

In addition MIND in Harrow, Mosaic LGBT Youth Centre, Paiwand² and CAAS (Centre for ADHD and Autism), Young Harrow Foundation, local clinicians and Harrow Public Health came together at the recent Heads Up Conference³ to develop plans to improve local collaboration.

2. Harrow's local needs

¹ Early Intervention service commissioned by Harrow CCG and Harrow Council from Barnardo's

² Support for young refugees and asylum seekers

³ 27th Sept 2018 St Dominic's Sixth Form College Harrow

Harrow is an outer North West London Borough with a diverse population⁴ of 247,500 residents⁵. Whilst one fifth of the borough is composed of parkland, Harrow is a vibrant part of the London economy with over 10,000 businesses and a strong entrepreneurial tradition characterised by a thriving small business culture with 91% of companies employing less than 11 staff.

Harrow has 51 schools, 33 GP practices, 62 pharmacies and 9 children's centres supporting an under 19 population of 58,611⁶.

Approximately 18% (8,400) of children in the Harrow live in low income families and by the end of primary school some 20.4% (512) of children are classified as obese. Among adults the rate of TB and recorded diabetes is worse than that seen across the rest of the country and life expectancy is 6.6 years lower for men and 4.3 years lower for women in the most deprived areas of Harrow compared with the least deprived areas.

Public Health England estimates for Mental Health Disorders in Harrow, which are slightly below national and London averages, are as follows:

- Any mental health disorder 3,187
- Emotional Disorders 1,237
- Conduct Disorders 1,920
- Hyperkinetic Disorders 521

Changes since 2016-17

- Harrow's school population continues to rise: 39,877 to 40,266 (1.0% rise)
- Inpatient admission rates for mental health disorders per 100,000 aged 0-17⁷ in Harrow have decreased: 83.7 to 59.6 in line with both regional and national trends.
- Harrow's self-harm hospital admission rates (10-24 year olds per 100,000) have reduced: 74 to 50 (48% reduction).
- Looked after children numbers in Harrow have remained broadly stable (159)
- First time entrants to youth justice system in Harrow aged 10 to 17 (per 100,000) fell between 2016 and 2017: 336 to 225.
- Child protection and safeguarding case conference numbers have risen from an initially low base and now reflect appropriate early recognition and improved risk assessments. Practitioners also report an increase in complexity across cases
- The percentage of pupils with special educational needs (SEN) has increased across Harrow's state funded schools from 12% (4,203) in 2016 to 12.9% (4,630) in 2017. This increase contrasts with the decline witnessed over the preceding three years.⁸

⁴ 1 in 3 residents are BAME background (2011) - Harrow Director of Public Health Annual Report 2018

⁵ 2015 data: Harrow has 80 places of worship representing a range of faiths including Buddhists, Christian, Hindu, Humanism, Islam, Jain, Jewish, Rastafarian, Sikh and Zoroastrian.

⁶ 2015-16

⁷ Health London Partnership – Exec MH Dashboard for London

⁸ Special Educational Needs in Harrow 2017 – London Borough of Harrow

- The numbers of pupils with Education Health and Care Plans (EHCPs) has increased again in 2017 (1,030 pupils with EHCPs in Jan 2017)⁹
- For SEN pupils with a EHCP in Harrow the most common primary need is Autistic Spectrum Disorder.¹⁰

Reducing Inequality

Several steps have been taken to address reducing inequalities across mental health services for young people. As Harrow Horizons has stabilised its workforce, and improved recruitment more young people have had access to early intervention support. Additionally, out of hour's crisis support is now in place with CNWL waking night nursing staff supported by Registrars and on call CAMHS consultants. Furthermore, the integrated Dynamic Risk Register for young people with ASD, LD and challenging behaviour is extending the service offer to vulnerable families. Primary and Secondary Heads have also been engaged in developing options for Mental Health Support Teams in local schools. Finally, voluntary groups in Harrow have established a 'Heads Up' coalition to improve access and co-ordination of support for vulnerable young people across the borough including; young people with ASD, refugees and the LGBT community.

This suit of activities continues to improve early intervention and access to services for vulnerable young people in Harrow and makes an important contribution to reducing health inequalities.

Vision

Harrow CCG, Harrow Council and local partners are highly committed to extending and improving emotional wellbeing and mental health support services for local young people. This objective continues to be championed across Harrow and this summer the CCG and the Council received enthusiastic support from Secondary and Primary School Heads when submitting the Harrow 'trailblazer' proposal to develop Mental Health Support Teams in schools.

To realise local ambitions Harrow CCG shares the NWL STP's aim to improve young people's mental health services by addressing five clear priorities.

Harrow and NWL CAMHS Transformation Priorities:

1. Reducing waiting times for support and services
2. Continuing to develop the specialist Community Eating Disorder Service delivered by CNWL
3. Improving service access and support for vulnerable groups of young people
4. Redesigning the 'whole system' to better address young people's needs
5. Ensuring strong Crisis and Urgent Care pathways are available and equipped to meet need

⁹ Special Educational Needs in Harrow 2017 – London Borough of Harrow

¹⁰ Special Educational Needs in Harrow 2017 – London Borough of Harrow

In addition three enabling work streams are also prioritised:

- Supporting Co-production
- Performance Monitoring and Reporting
- Workforce Development and Training

3. Summary 2017-18 and Key Priorities 2018/19

Reducing Waiting Times

In 2017-18 Harrow CAMHS and Harrow Horizons in combination were able to exceed the year's target of 951 young people being seen by 12%, with 1,069 accessing services. Commissioner and our voluntary sector provider Barnardo's have worked hard to ensure that their access data has been captured and provided to NHS Digital.

Waiting time's data for Harrow CAMHS has shown a steady improvement against 2016-17 and will continues to be a priority to ensure quick and easy access to treatment.

Referral to Assessment Times

	Young people waiting
Under 4 weeks	
2016-17	24
2017-18	10
5 to 11 weeks	
2016-17	23
2017-18	18
Over 11 weeks	
2016-17	7
2017-18	6

Assessment to Treatment

Under 4 weeks	
2016-17	25
2017-18	16
5 to 11 weeks	
2016-17	8
2017-18	8
Over 11 weeks	
2016-17	2
2017-18	2

The numbers of young people waiting for specialist CAMHS and Urgent care have continued to decrease.

Waiting Times: Specialist & Urgent Care

2015-16	120
2016-17	53
2017-18	34

Whilst this is a positive trend waiting times can still be volatile and particularly subject to variations aligned to staffing and recruitment issues which continue to arise from time to time.

Initial recruitment problems for the new Barnardo's Harrow Horizons service has led to some waiting time challenges for the service. Although recruitment has improved easing waiting time delays Harrow Horizons have revised their operating model so that initial assessments and subsequent treatment is now carried out by the same practitioner. Young people waiting for assessment are allocated within the team so that Harrow Horizon's staff can contact young people weekly to re-assess whether their circumstances have changed and immediate intervention is necessary.

The Harrow Horizon's assessment to treatment target is that 80% of young people are seen within 6 weeks. For quarter 2 in 2018 this was achieved with 227 young people treated within 6 weeks. Whilst this is encouraging young people are having to wait too long for an assessment and tackling this issue is a 'next steps' priority.

CYP IAPT or CORC outcome measures were completed at first appointment for 90% of young people. Outcomes were also assessed and captured for 82% (79 young people) at discharge appointments. Where outcome measures are assessed for both entry to and exit from the service, 63% (61/96) of young people were found to have shown improvements.

Developing the Community Eating Disorder Service

A North West London wide Community Eating Disorder Service was launched in April 2016 and Harrow young people are able to access the CNWL team. The service operates a hub and spokes model with the main base at South Kensington Mental Health Centre and a spoke at Northwick Park Hospital in Harrow. Harrow referrals have increased from 19 in the first year, 2016-17 to 38 in 2017-18, an increase of 100%. Urgent referrals seen within one week also doubled from 5 in 2016-17 to 10 in 2017-18. The service was formally evaluated in July 2018 and the full report can be made available if required.

Compliance with national waiting times has shown a slight decline over the two years:

Compliance to routine waiting times (4 weeks)

2016-17	79%
2017-18	78%

Compliance to urgent (1 week) waiting times

2016-17	80%
2017-18	67%

The service is commissioned across 5 CCGs and also numbers are relatively small, these are within expected projections. The service reports that some families have opted for appointments outside the NHS standard which can impact on the data.

Redesigning the System

For many years Harrow young people were only able to access mental health support from the specialist CAMHS team provided by CNWL. However, as a direct result of CAMHS Transformation funds, the Barnardo's Harrow Horizon's early intervention service opened in June 2017. This represents a major re-design of service configurations locally and following a competitive tendering process, Barnardo's, a nationally respected voluntary sector organisation is now a crucial partner.

Initially, the new service experienced some recruitment challenges¹¹. However, during 2017-18 Harrow Horizons has been able to improve recruitment, delivering a stable staff team which has enabled more young people to be seen. There are now 9 clinicians in post plus support from 1.5 WTE agency staff. The service is continuing to search for a suitable candidate for their vacant Team Manager position.

Harrow Horizons received 621 referrals in 2017-18 and although the recruitment issues mentioned above initially restricted capacity, 459 young people were assessed and 379 offered intervention and support. A further 66 young people (10%) were sign posted to alternative services.

Furthermore, 19% of young people were offered appointments outside of Mon to Fri 9.00 to 5.00. All Harrow Horizons staff have now been trained in outcome measures delivery. IAPT or CORC outcome measures were completed for 87% of young people at first appointment and 85% on completion of their intervention. The DNA rate for first appointments in 2017-18 was 13%.

In 2018-19 90% of young people receiving a service have been offered a satisfaction survey and for the second quarter 131 young people (90%) reported an overall positive experience. Barnardo's have also registered with NHS Digital and are able to contribute data to the national Mental Health Data Base.

The 'New Model of Care' collaborative commissioning initiative which is operating across NW London is continuing to reshape service for young people at risk of admission to inpatient units. Length of stay has been significantly reduced and this has released resources from NHS England for local investments.

Improving Support for Vulnerable Groups

¹¹ Experiencing competition for staff from inner London providers able to offer high rates of pay.

Mental health and emotional wellbeing support for particularly vulnerable young people remains a local priority.

ASD, Learning Disabilities and Challenging Behaviour

In relation to young people with Autism, Attention Deficit Hyper-activity Disorder (ADHD), Learning Disabilities and challenging behaviour, Harrow has developed a strong Dynamic Risk Register process for young people. Underpinned by a comprehensive treatment and resource tracker, monthly multi-disciplinary planning meetings are held to co-ordinate care planning, treatment and support for young people at risk. CAMHS Transformation funds have been utilised to develop a social work post which operates across Harrow CAMHS and the local authorities Children and Young Adults Disabilities Service (CYAD). The post has proved to be critical in engaging with families, improving co-ordination with Northwick Park Hospital Emergency Department, Education colleagues, Children's Social Care and health providers.

- 19 young people currently on the Register and RAG rated: 3 high risk; 6 medium risk with active support; 2 risks reduced with care packages in place; 8 young people with improved outcomes but with the possibility of further challenges ahead
- 4 admissions prevented

As a result of the close working with the Harrow Council's Children and Young Adults Disability Service which has a remit up to 25 years, transition planning for these particularly vulnerable group of young people has significantly improved.

For some considerable time inpatient options for young people with neuro-developmental disorders have been very limited. Improvements are now being achieved with new facilities coming on line:

- 2019 opening of 5 beds for young people with learning disabilities at the CNWL unit at Kingswood in Brent
- Establishing 9 beds for young people with neuro-developmental disorders provided by Elysium at their Potters Bar facility

Harrow Looked After Children

Following short comings in service delivery identified with an earlier provider¹², the Looked After Children's (LAC) Nursing Team has been re-procured and is now delivered by new community provider, CNWL. Satisfaction with the new service over the last 12 months has been strong with performance improving. The Harrow LAC nurses meet quarterly with Harrow CAMHS and Harrow Horizons staff to ensure pathways are operating properly and support is co-ordinated.

At the end of 2017/18, Harrow had 159 children looked after by the local authority. CNWL, in partnership with Harrow Council, completed 96% of Review Health Assessments (RHA's) on time, which is an improvement of 3% from the previous year.

In 2017-18, 98.9% looked after children in Harrow completed a Strengths and Difficulties Questionnaire (SDQ) which is higher than the national average.

The LAC Nurses also meet monthly with the Youth Offending Service CAMHS worker.

Harrow Health and Justice

Over the last twelve months Harrow's Youth Offending Team has experienced significant turnover with a new Service Director and Team Manager and the CAMHS practitioner leaving. Combined with changes for Harrow CCG commissioning staff the established pattern of quarterly planning discussions was interrupted. With new personnel now in post and recruitment for the YOS CAMHS worker underway, planning and liaison arrangements have now been re-established.

Harrow YOS has submitted monthly YJLD practitioner returns to NHS England and data from the August, September and October 2018 returns illustrate the work being undertaken:

August: 1 referral, 1 direct YJLD contact, 1 young person with MH issues and 1 care plan initiated
September: 7 referrals, 5 direct YJLD contacts, 4 young people with MH issues and 4 care plans initiated
October: 11 referrals, 3 direct YJLD contact, 3 young people with MH issues and 3 care plans initiated

Prior to the departure of the YOS CAMHS worker the team recorded an increasing caseload over five months:

YOS CAMHS Caseload	
June	9
July	13
August	18
September	19
October	23

¹² 2015-16

6 young people were successfully referred to either Harrow CAMHS or Harrow Horizons.

Ensuring Strong Crisis and Urgent Care Pathways

The Five Year Forward View requires the NHS to deliver effective 24/7 crisis resolution and home treatment services for community mental health services. Across NWL and including Harrow there is a comprehensive 24/7 crisis support service provided by two MH providers, CNWL and West London MH Trust. An Out of Hours Crisis Service is provided for Harrow by CNWL and waking psychiatric nurses, supported by Registrars and on call CAMHS consultants provided cover across EDs, Urgent Care Centres and Section 136 suites.

Further work is required with Emergency staff at Northwick Park hospital to ensure both hospital and out of hours CAMHS and local authority (Emergency Duty and AMPs etc.) collaborate effectively to support young people presenting in crisis. This is particularly important when providing out of hours services for young people with ASD, learning disabilities and challenging behaviours.

As mentioned above, the New Models of Care initiative between CNWL, WLMHT and NHS England (Specialised Commissioning) has made a significant contribution to local crisis and urgent care services by for example:

- Implementation of Clinical Review and Forward Thinking meeting (CRAFT) which take place on admission and plan for discharge
- Stimulating the development of London provision:
 - Opening the new 12 bed Lavender Walk provision adjacent to Chelsea and Westminster Hospitals
 - 2019 opening of 5 beds for young people with learning disabilities at Kingswood in Brent
 - Establishing 9 beds for young people with neuro-developmental disorders provided by Elysium at their Potters Bar facility.

In the last year sadly two young people in Harrow have committed suicide. In both cases a Rapid Response multi-disciplinary meeting have reviewed the circumstances for these young people and the respective service responses. Findings have been appropriately shared with the LSCB through the Child Death Overview Panel.

Work has also been undertaken with local schools and a local charity has been established to promote early recognition and support for young in crisis.

Harrow and Hillingdon CCG's commission a joint Early Onset Psychosis Service which is based in the Hillingdon adult mental health service.

The service works within the Community Mental Health services in Central and North West London NHS Foundation Trust (CNWL). It is a service that provides early detection, assessment and intervention for 14-35 year olds who are experiencing a first episode of psychosis. Its aim is to provide world class, evidence based treatments in order to reduce the impact of the disorder for the individual and their families.

The EIS will work closely with many services and agencies including Primary Care, Community Mental Health Teams (CMHT), Children & Adolescent Mental Health Services (CAMHS), Inpatient wards, Schools, Colleges and Universities to encourage early referral to ensure an early assessment of needs by the team.

The service works closely with the Core CAMHS team and children and young people are assessed by the CAMHS Consultant and referred directly to H&H EIS. CAMHS clients are monitored weekly during the H&H EIS MDT which is held weekly (every Wednesday). Harrow CAMHS have a clinician that provides sessions for the service on a hub and spoke basis.

The service is NICE compliant and meeting the national access and waiting time targets

Transformation Funding Allocations

2017-18

CCG	Eating Disorders 17/18	Transformation Plan 17/18
Harrow	£128,000	£379,696

2018/19

CCG	Eating Disorders 18/19	Transformation Plan 18/19
Harrow	£131,000	¹³ £500,693

Total Local Investment 2018/19

¹³ 379,696 plus 121,000 uplift = 500,693 indicative amount

	Harrow Clinical Commissioning Group	Harrow Local Authority	CAMHS Transformation including Eating Disorders and waiting list initiatives	Totals
2018/19	£1,351,000	£270,000	£631,693	£2,252,693

Local Implementation of Harrow and North West London Priorities

Priority	Progress and outcomes 2018/19	Next Steps
1. Waiting Times	<p>Over the last two years, CNWL have undertaken a considerable amount of work to address waiting time performance. The backlog of children waiting for treatment has reduced massively (see Appendix A). This has enabled CNWL to consistently meet the locally commissioned 18 week target for referral to treatment. This has been achieved through a major transformation project which has focussed on strengthening clinical leadership and partnership approach with operational management, clear job plans and reorganisation of the borough CAMHS services into 3 sub teams: neurodevelopmental, enhanced treatment and emotional / behavioural teams.</p> <p>In addition the service delivery model has changed based on data and national evidence to a more consistent system where the multidisciplinary approach is to review at 6 and 12 sessions whether a young person still requires a service. In order to meet the waiting time target the service has increased productivity</p>	<p>INVESTMENT: £20,000 (Skills mix training)</p> <ul style="list-style-type: none"> • Harrow CAMHS has collaborated with the CCG, Harrow Council, Barnardo's and local school in submitting a Trailblazer application for funding of the 4 Week Waiting Time Pilot. • If successful, Harrow CAMHS and Harrow Horizons, as well as the two additional Mental Health Support Teams for Harrow Schools will be seeking to achieve significant improvements in waiting times. • Barnardo's and Harrow Horizons are undertaking a comprehensive analysis of waiting pressures and through put. Conclusion and recommendations will be implemented as required. • Both Harrow CAMHS and Harrow Horizons will continue to assess and review the impact of the

	<p>through:</p> <ul style="list-style-type: none"> • Increasing capacity for face to face sessions in teams with clear job planning expectations • Increasing patient throughput through roll out of evidence based care pathways • First treatment interventions delivered more quickly <p>The Barnardo's Harrow Horizons service as has been explained above has also been improving waiting time performance by:</p> <ol style="list-style-type: none"> a. a determined focus on successful recruitment and retention b. revising operation process to encourage ownership for young people waiting for the service and regular re-assessment of needs and risks c. careful deployment of short term agency staff <p>Barnardo's are also embarking on fundamental root and branch analysis of both waiting time pressures and service through put and outcomes. The service is designed to provide early support and targeted brief intervention, with sign posting on if more complex issues are identified. Where 'moving on' is compromised (even for appropriate clinical reasons) capacity for new early intervention work across the service can be reduced.</p>	<p>operational changes they have made on waiting times.</p> <ul style="list-style-type: none"> • Performance on waiting times remains a Harrow and NWL priority and will continue to be discussed with providers as part of contract compliance. <p>INVESTMENT Option: £50,000 for additional capacity – dependent on NHS E Finance and Harrow CCG finance clarification.</p>
<p>2. Community Eating Disorder Service</p>	<p>Good progress has continued to be made in developing the Community Eating Disorder Service.</p> <p>As an example, across NWL the service reports that 15 young people were admitted to inpatient units in 2017-18 and that 21 admissions were avoided. Length of stay for inpatients has also reduced from 250 days in 2014-15 to 128 days for 2017-18.</p> <p>Further details and analysis for the Community Eating Disorder Service can be found in the North West London Transformation</p>	<p>INVESTMENT: £131,000</p> <p>Next year's priorities include:</p> <ul style="list-style-type: none"> • Developing a case for change to implement recommendations from the summer 2018 service evaluation • Improve data collection, particularly for goals and outcomes.

	Plan (2018 Refresh).	<ul style="list-style-type: none"> • Strengthen contract management and monitoring. • Engagement with the Quality Network for Community Eating Disorders.
3. Redesigning the System	<p>Service redesign and adopting a whole system approach in Harrow has focused on rolling out the new Harrow Horizon's service provided by our partner Barnardo's. Whilst significant progress has been made and access to service for young people dramatically improved, challenges remain including:</p> <ul style="list-style-type: none"> • Waiting times • Closer engagement with schools • Closer collaboration with Harrow CAMHS and the local voluntary sector <p>The ground breaking Young Harrow Foundation needs analysis 'This is Harrow', linked to the Heads Up collaboration between local voluntary sector groups opens up new exciting possibilities for joint work, seamless services and inter agency co-operation.</p> <p>As mentioned elsewhere is this Harrow plan and the NW London Transformation document, both the New Models of Care initiative and local work on the Dynamic Risk Register (Transforming Care Programme) are contributing to re-shaping and improving the service offer for young people.</p> <p>Additionally, alongside Hillingdon CCG, in Harrow we have commissioning KOOTH to provide confidential on line counselling support for young people attending Harrow College. This new pilot started in September 2018 and will be reviewed to assess whether there is a case for a broader offer across all Harrow schools and colleges. This possibility was included in the Harrow Trailblazer proposal recently submitted the NHS England.</p>	<p>INVESTMENT: £270,000 (Harrow Horizons contract) £5,000 (KOOTH on line counselling)</p> <ul style="list-style-type: none"> • Continue to support the Harrow CAMHS team provided by CNWL and the Harrow Horizon's service delivered by Barnardo's. This support to include the work set out above on waiting times and access. • Work with Harrow CAMHS and Harrow Horizons to ensure clear pathways and communication with schools • Promote communication and collaboration between Harrow voluntary sector providers (Young Harrow Foundation, Mind in Harrow, Mosaic LGBT Youth Centre, Paiwand and the Centre for ADHD and Autism) and Harrow Horizons and Harrow CAMHS. • Appoint to the vacant social work post which supports the Dynamic Risk Register (CNWL have this underway) • Monitor and evaluate the impact of KOOTH with Harrow College.
4. Vulnerable		

<p>Groups</p>	<p>Establishing the Harrow Dynamic Risk Register has made a strong contribution across the borough for young people with ASD, LD and challenging behaviour. This progress will be sustained for 2018-19 and further developed in 2019-20.</p> <p>The Transforming Care Programme (TCP) Care Education and Treatment Review (CETR) process is in place for Harrow young people and operates well.</p> <p>Whilst the improvements cited above have seen significant, the crisis pathway for young people with ASD and challenging behaviour can still be improved. In 2019 ASD training, efforts to strengthen home support and partnership work with Northwick Park Hospital Emergency Unit will be priorities.</p> <p>For Harrow's Looked After Children (LAC), the new CNWL LAC Nursing Service has made good links with Harrow CAMHS and Barbardo's Harrow Horizons. The Harrow Horizons service is commissioned to prioritise the needs of looked after children.</p> <p>In relation to the Harrow Youth Offending Team, after a period of staff and leadership changes, CCG and LA commissioners and the YOT management team are continuing to collaborate to ensure that the mental health needs of local young offenders are recognised early and then met as required. Also, an immediate priority is to recruit to the vacant YOT CAMHS post.</p>	<p>INVESTMENT: £56,000 (Clinical Social Worker – Dynamic Risk Register)</p> <ul style="list-style-type: none"> Using the Dynamic Risk Register work as a foundation in Harrow we will now be reviewing the revising the ASD pathway for young people, in order to explore the opportunities of for developing an integrated service offer. <p>Build on the learning and achievements made by adult service implementing the TCP and incorporate into work for young people (including transitions)</p> <ul style="list-style-type: none"> Continue to engage with Northwick Park Emergency staff (and other stakeholders) to improve the crisis pathway whilst also collaborating with Harrow Council to develop better home focused support and treatment (and alternatives to admission) Build in regular consideration of how the needs of LAC are being met into Harrow Horizon's performance discussions. Ensure quarterly planning and co-ordination meeting are in place for 2019-20 so that the focus on Health and Youth Justice is further strengthened.
<p>5. Integrated Crisis Care</p>	<p>An urgent care and crisis care service is in pace across NW London and support Harrow young people. New local provision is also being developed at Lavender Walk in Chelsea, Kings Wood in Brent and by Elysium at Potters Bar. These new facilities improve options for young people in crisis, facilitate earlier discharge and enable easier family support and access.</p>	<p>INVESTMENT: circa £74,000 (CNWL Crisis Care Out of Hours)</p> <ul style="list-style-type: none"> Prioritise work with Northwick Park Emergency staff to improve crisis support and co-ordination across agencies.

	<p>Further work is required to better support Emergency staff at Northwick Park Hospital and to develop alternatives to admission and treatment at home options. This links to the work also required to improve the crisis pathway for young people with ASD and challenging behaviour. These are priorities for both Harrow CCG and our partners in Harrow Council, CNWL and Barnardo's.</p>	<ul style="list-style-type: none"> • Continue to support the New Models of Care initiative and its objectives of avoiding admissions; care close to home, reduced length of stay; reducing out area placements and reinvesting savings in community services
<p>6. Enablers</p> <p>Co-production</p> <p>Performance</p>	<p>Harrow CAMHS and Barnardo's Harrow Horizons have both undertaken feedback questionnaires in the last twelve months. Harrow CAMHS had 80 questionnaires completed and the full report from the exercise was shared at the October 2018 Clinical Quality Group. Headlines included:</p> <ul style="list-style-type: none"> • Young people felt well treated and their concerns were taken seriously • However, more information could be provided on the services available and this was a issues particularly for parents • Appointments could be offered at more convenient times <p>Harrow CAMHS also have an active users group known as the HUB who have successfully raised funds from local businesses e.g. Sainsbury's refurbished the garden at the front of the Harrow CAMHS clinic.</p> <p>Quarter 2 data in 2018 for Harrow Horizon's user feedback records 131 young people or 90% of those asked, expressing a positive experience. 145 young people completed the survey.</p> <p>Harrow Horizons are now reaching out to gather feedback from GPs in Harrow.</p> <p>Performance monitoring across contract compliance against key</p>	<p>INVESTMENT: £10,000 (Co-production & engagement support)</p> <p>£20,000 (Multi-agency training and support)</p> <ul style="list-style-type: none"> • The Young Harrow Foundation is bringing together a youth panel to guide Harrow collaborative work across the voluntary sector. Building on the feedback from Harrow CAMHS and Harrow Horizons users, we will be strengthening engagement and co-production by making common cause with Harrow Young Foundation and other local voluntary sector partners. • Performance and contract monitoring meetings and KPIs are already in place and will continue. • Building on existing performance structures and the work already cited initiated by the voluntary sector for 2019-20 a collaborative and transparent forum will be put in place to enable easier inter-agency co-operation and planning.

