

NASP Webinar Series: How social prescribing can help young people waiting for Child and Adolescent Mental Health Services (CAMHS) support

Thank you for joining us. The webinar will begin shortly.



Housekeeping

- Please note we are recording this webinar (you will be sent the slides and the link to the recording, and they will be on NASP's website too.)
- Please submit questions via the **Q&A function**. We will hold a Q&A session at the end of presentations.
- Please use the **chat function** for introducing yourself and networking. If you have any technical issues, please raise these in the chat, and a member of the NASP team will assist.
- BSL Interpreters will be on screen throughout. Closed Captions are available (turn these on at the bottom of your screen)





Chair:

Anthea Terry, Head of Evidence at the National Academy for Social Prescribing

Speakers:

Professor Daisy Fancourt, Social Biobehavioural Research Group at University College London **Dr Daniel Hayes**, Social Biobehavioural Research Group at University College London.

Liza Jarvis, Children and Young People (CYP) Social Prescribing Lead at Streetgames.

Laura Buglass, Primary Mental Health Specialist at South Tyneside and Sunderland NHS Foundation Trust.

Toby Sweet, CEO at Sunderland Counselling Service.

Wellbeing While Waiting Evaluating social prescribing in CAMHS

Professor Daisy Fancourt and Dr Daniel Hayes,

Social Biobehavioural Research Group at University College London the social biobehavioural research group

Wellbeing While Waiting

Evaluating Social Prescribing in CAMHS

In partnership with the Anna Freud National Centre for Children and Families, National Academy for Social Prescribing and the Social Prescribing Youth Network

Generously funded by the Prudence Trust



Aims and Objectives

To increase Social Prescribing referrals in CYP by developing a new Social Prescribing care pathway within CAMHS

Primary Objective: mental health, wellbeing and social experiences of CYP

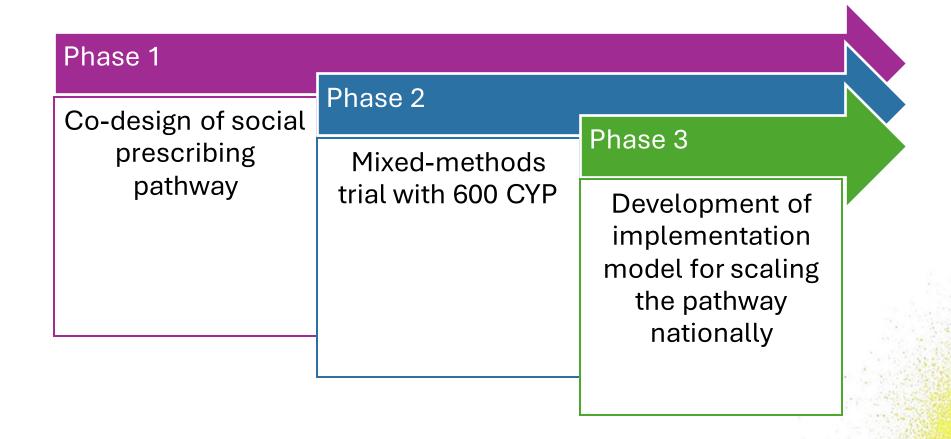
Secondary objectives:

- ➤ Mental health, wellbeing and social experiences of parents/guardians
- > Service-level outcomes within CAMHS
- The acceptability, suitability, feasibility, uptake, fidelity, costs and potential for long-term success





Project phases



Trial design

- Setting: Up to 12 CAMHS sites across England.
- Schedule: Recruitment May 2023 to December 2024
- > Participants: CYP who:
 - 1. are aged 11-18 years old
 - 2. have capacity to give assent (11-15 year olds) or consent (16-18 year olds)
 - 3. who have been on the waiting list for CAMHS treatment for less than one month.
 - 4. who would be RAG-rated as green/low amber.
 - 5. we <u>will not</u> recruit CYP with eating disorders, psychosis or severe and complex difficulties (judged by the assessing clinician).
- Control group: CYP on the waiting list for CAMHS treatment at each site prior to the Social Prescribing being launched.
- Data collection: Questionnaires and interviews with CYP, parents/guardians, CAMHS staff and Social Prescribing Link Workers.





Data Collection

Assigned to SP (or control)
Referred to Link Worker

CYP assessed for eligibility CYP provides informed consent

Link Worker co-designs prescription CYP starts attending sessions

Questionnaires from CYP Clinical diagnoses

Session Feedback Questionnaire Goal based outcomes Service data on SP meetings Questionnaires from CYP Social prescribing with Link Worker ending Questionnaires from CYP
Interviews with CYP, parents, staff
Mental health from CAMHS
Interventions received in CAMHS
Retention on CAMHS pathway
Mental health from CAMHS
Interventions received in CAMHS
Retention on CAMHS pathway

Our vision

To have a fully developed and tested model for embedding Social Prescribing within CAMHS waiting lists that can be implemented for all CYP across CAMHS nationally





Developing Social Prescribing Pathways in CAMHS

Learning from the research team from across sites



Considerations when developing social prescribing pathways in CAMHS

- > Four different models of social prescribing in CAMHS were developed
 - > CAMHS 'In house' Link Workers/Social Prescribers
 - Link Workers/Social Prescribers via charity and third sector organisations
 - ➤ Link Workers/Social Prescribers via Primary Care
 - ➤ Remote link Workers/Social Prescribers
- > 7 Principles of pathway design when working with CAMHS sites
 - Co-production, stakeholder engagement and buy-in
 - Allocating a budget
 - Establishing SP referral processes and CYP monitoring
 - Recruiting and managing link workers
 - Developing CYP communication processes and materials
 - Creating a youth advisory group
 - ➤ Launching the SP pathway



Considerations when developing social prescribing pathways in CAMHS

- ➤ Co-production, stakeholder engagement and buy-in
 - Forming a steering group
 - Making the case internally
- Allocating a budget
 - ➤ Link Worker/Social Prescriber recruitment
 - Allocating a personalised care budget to young people
- Establishing SP referral processes and CYP monitoring
 - Establishing referral/eligibility of young people for social prescribing
 - Managing information sharing
 - Establishing LW boundaries



Considerations when developing social prescribing pathways in CAMHS

- Recruiting and managing Link Workers/Social Prescribers
 - ➤ Hiring Link Workers/Social Prescribers
 - Support and training for Link Workers/Social Prescribers
 - Remote social prescribing
- Developing CYP communication processes and materials
 - Youth (and family) friendly documentation
- Creating a youth advisory group
 - Establishing meaningful collaboration and involvement
- Launching the SP pathway
 - Hosting a kick off-meeting within CAMHS
 - Small iterative changes to pathway to ensure pathway fits needs of service and young people





Social Prescribing Youth Network (SPYN)

Liza Jarvis, Children and Young People (CYP) Social Prescribing Lead at Streetgames





Liza Jarvis

Social Prescribing Youth Network (SPYN)







Our Involvement in Wellbeing Whilst Waiting

StreetGames have been at the forefront of Youth Social Prescribing for many years, being involved in research, developing the SPYN network and creating resources to support others to implement social prescribing for children and young people.

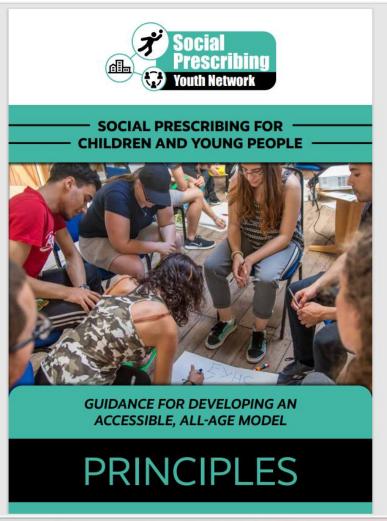
For WWW we provided the practical implementation support and guidance in 4 key ways;

- Area Steering Groups
- Principles Document later via the toolkit
- Communities of Practice (COP's)
- Youth Advisory Group (YAG)



'Principles' document



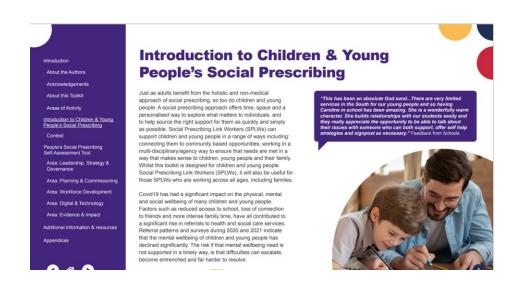


- 2019 commissioned by NHSE to look at CYPSP in England designed by a range of stakeholders, National Academy of Social Prescribing, NHSE, Social Prescribing Network, and researchers with expertise in this field.
- This resulted in the development of the 'Principles' document which sets out 7 key areas to think about when setting up social prescribing for CYP;
 - 1. Governance and accountability
 - 2. Ethos
 - 3. Design and Planning
 - 4. Referral process
 - 5. The Link Worker Role
 - 6. In Scheme data gathering
 - 7. Outcomes and Impact

Children and Young People's Social Prescribing Toolkit

- Developed by the South West Integrated Personalised Care Team and StreetGames as a quality improvement tool.
- Over the last 3 years we have been collaborating with partners and CYP Social prescribing Link Workers to develop a toolkit on the essentials when delivering CYP social prescribing
- The toolkit is now finished and is live on the Streetgames website







Community of Practice



The COP's bring together all areas to share experiences of the project, highlight issues where they need help or to work through an issue and to build collaboration across the country.

Run every 6-8 weeks via Teams

We have also focused on specific issues relevant to the project:

- Personal budgets
- Youth Advisory/Engagement (April)
- Professional boundaries (June)

We have also supported some areas with peer support and reflective practice in this new area of development





Youth Advisory Group

- The involvement of young people in the project development is essential to making sure we get this right for other young people in the future.
- The Youth Advisory Group (YAG) has been established to enable feedback, involvement and codesign
- Led by a Youth Engagement Officer at StreetGames
- Participants recruited from each area with spaces for 1-2 young people from each
- Meet every 6-8 weeks via Teams, but communication and activity takes place between these meetings
- Development of the 'Do's and Don'ts' checklist











Thank You!

Social Prescribing Youth Network (SPYN)

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SPYN@streetgames.org

Social prescribing pathway in Sunderland Community CAMHS

Laura Buglass, Primary Mental Health Specialist at South Tyneside and Sunderland NHS Foundation Trust

Toby Sweet, CEO at Sunderland Counselling Service





Social Prescribing Pathway in Sunderland Community CAMHS

Toby SweetChief Executive (SCS)

Laura Buglass
Primary Mental Health Specialist (STSFT)



Some background

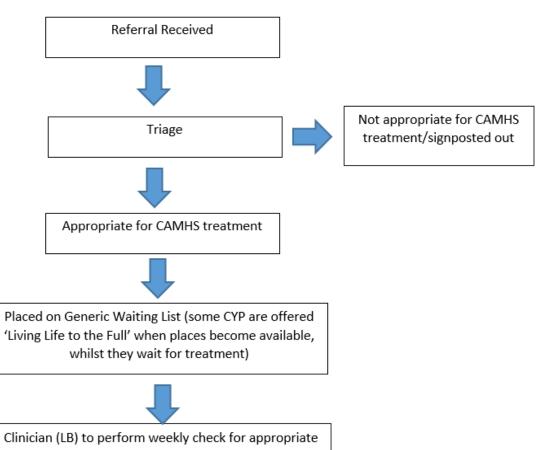
- SCS and STSFT have jointly provided Sunderland Community CAMHS since 2006 – long history of collaboration
- Sunderland commissioners initially approached SCS in 2021 to explore social prescribing pathway
- Lots of work behind the scenes finance, service design, partner / system support & buy in
- Always envisaged as pilot project to demonstrate effectiveness and impact – initially focussed on those waiting for CAMHS formal treatment
- Based within both CAMHS & SCS wider SP team
- During 2022, agreed to join UCL research study
- Recruitment challenges took two rounds to get the right people
- Go live from summer 2023

Setting up Social Prescribing Pathway

First steps:

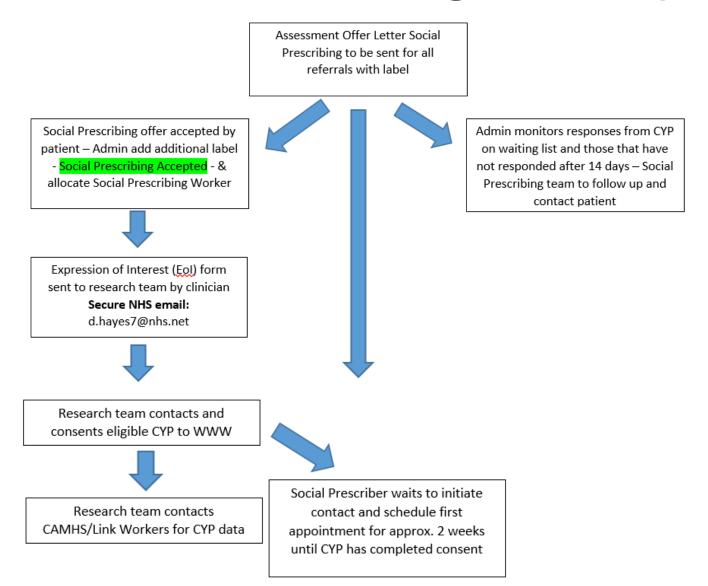
- Identify who will be offered social prescribing
- Decide what the pathway will look like
- Establish pathway on clinical system
- Identify roles and responsibilities screening referrals, updating logs etc.
- Recruitment

New Social Prescribing Pathway



Clinician (LB) to perform weekly check for appropriate Social Prescribing cases (only CYP RAG-rated green, on waiting list for treatment for less than 1 month (can also be on waiting list for a diagnostic assessment if also on waiting list for psychological treatment), do not have a diagnosis of eating disorders or psychosis) and add label (Social Prescribing Offered)

New Social Prescribing Pathway



New Social Prescribing Pathway



Patient to remain on Generic Waiting List during all <u>Social</u> prescribing



Social Prescribers to complete clinical contacts and ensure intervention box (Social Prescribing) is always completed for all contacts)



Concerns/safeguarding incidents reported to CAMHS (e.g., during supervision with clinicians)



If CYP deteriorates, determined on a case-by-case basis whether they continue to receive social prescribing and remain in the study or leave and return when appropriate

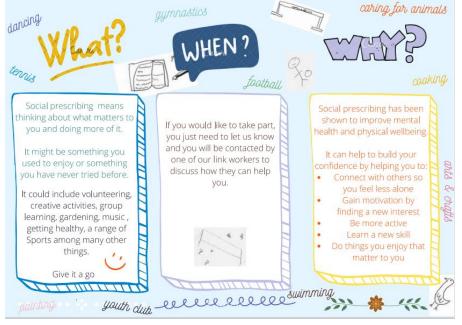
Setting up Social Prescribing Pathway

What else was needed:

- Set up admin support
- Induction for Social Prescribers multiple teams to "join"
- Service specific training for Social Prescribers
- Ensure policies and procedures are in place
- Line management and supervision
- Documents
- Leaflet

Social Prescribing Leaflet





Challenges Setting Up New Pathway

- Understanding of social prescribing
- Clinical system
- Out of hours
- Geography
- Long term sustainability

- Parental and child mental health issues
- Processes for allocating enabling grants
- Communication processes



Successes

- Short waiting time
- Long term benefits
- Positive impact
- Benefitting whole family
- Information gathering
- Newsletter



Activities so far...

Wellbeing walks Lego club Gardening **Employability** Art activities Art galleries Games Photography Grass roots football project Climbing wall Youth groups Music projects

What do our Social Prescriber's Say?

It's really rewarding when you can see the young people really appreciate it

I enjoy the variety of the role and making a difference to the young people

It's lovely to offer some relief to the young people from their everyday problems, even if for a short time

I enjoy the challenge of finding activities to help young people socialise and get them out from behind screens



What do the young people say?

It was easy to talk and I felt confident and safe

It's nice to have somebody to talk to, it makes me feel calmer

She didn't want to go at first but she really enjoyed the visit to Homegrown

(Social Prescriber)
was approachable
and listened to my
problems









It really helped to reduce my daughters anger at home

Our top tips

- Partnership working brings benefits; NHS and VCS bring different strengths
- Phone calls are better than letters
- Community mapping and making links with other services/ charities/projects is important
- There may be unexpected benefits
- Building good relationships with others in the community (schools/ venues) can help when booking appointments
- Sharing knowledge among social prescribers and the wider team helps more young people to benefit
- Huddles have provided opportunities to discuss any issues and resolve them quickly

Thank you for listening



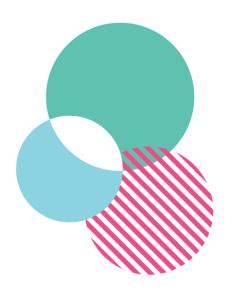
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National Academy for Social Prescribing

Get in touch

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