



## Progress Report 2018-2019

By Greater Manchester i-THRIVE Programme Team

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## Foreword

*It hardly seems possible that we are approaching the halfway point of the Greater Manchester (GM) i-THRIVE Programme.*

*The programme was initially proposed over 3 years ago, as a partnership between Greater Manchester and partners/model-developers at the Anna Freud National Centre for Children and Families and the Tavistock & Portman NHS Foundation Trust in London. Having received the go ahead from the GM Health and Social Care Partnership to develop the programme team in Dec 2017, we began implementation in earnest in September 2018. From this point it feels like we've not stopped expanding, innovating and refining our understanding of how implementing the THRIVE Framework for system change (Wolpert et al., 2019) can transform the system for supporting the emotional health and well-being of Children, Young People (CYP) and their families across Greater Manchester. Through the development of a shared vision, language and values all localities across Greater Manchester have embraced the principles of the THRIVE Framework, and continue to grapple with the exciting challenge of transforming systems supporting the emotional health and well-being of CYP in order to break down barriers for CYP and families.*

*The many achievements and developments of the programme so far are outlined in detail within this report. These are just some of the key developments to date, of which all stakeholders working with the emotional health needs of CYP in Greater Manchester should feel immensely proud:*

- A collective vision and motivation to transform services and systems around CYP and their families, as evidenced by the THRIVE Framework featuring as a cornerstone to all GM Local Transformation Plans, with some locality CYP Mental Health Partnership Boards, re-named as 'THRIVE Partnerships'.*
- All localities represented at regular meetings by i-THRIVE Leads*
- All localities engaging actively in ongoing multi-sector training in the principles of the THRIVE Framework, with continued sign-up and interest in expanding training across locality systems*
- The development of i-THRIVE (implementing the THRIVE Framework) training leads with multi-sector representation helping us to expand the pool of people with expert skills and knowledge in training others in the principles of the THRIVE Framework*
- Continued investment in the GM i-THRIVE Community of Practice bringing together partners across the system to share good practice, ideas, and innovation to keep to the programme moving forwards for all localities in GM*

*It has been a pleasure working with such a dynamic, creative, and thoughtful programme team in developing the GM i-THRIVE Programme, and this drive to innovate has led us in many exciting and novel directions. We also have a dynamic and engaged i-THRIVE Steering Group, which also includes invaluable support from our National i-THRIVE Programme team colleagues.*

*I am very proud of all the achievements of partners, stakeholders and champions across the CYP Mental Health system in Greater Manchester, and as a programme team we're excited to see where the next 12 months takes us as we develop, refine, and expand the GM i-THRIVE programme.*

*Thanks to you all for your support!*

**Dr Paul Wallis**

**GM i-THRIVE Programme Clinical Lead**

### **What is the report?**

The progress report for implementing the [THRIVE Framework for system change](#) (Wolpert et al., 2019) across Greater Manchester (GM) intends to set out the journey so far in GM including what has gone well and what we need to focus on in the future. It aims to share good practice, data, answer frequently asked questions and become a helpful document in what needs to happen in the future to ensure the THRIVE Framework is embedded across Greater Manchester.

This (a little over 1-year) report sets out the activities, achievements, and learning that has taken place since the establishment of the GM i-THRIVE Programme team circa June 2018 until December 2019.

It also explains the longer term plan for future sustainability of the GM i-THRIVE Programme, and next steps for the programme over the next year.

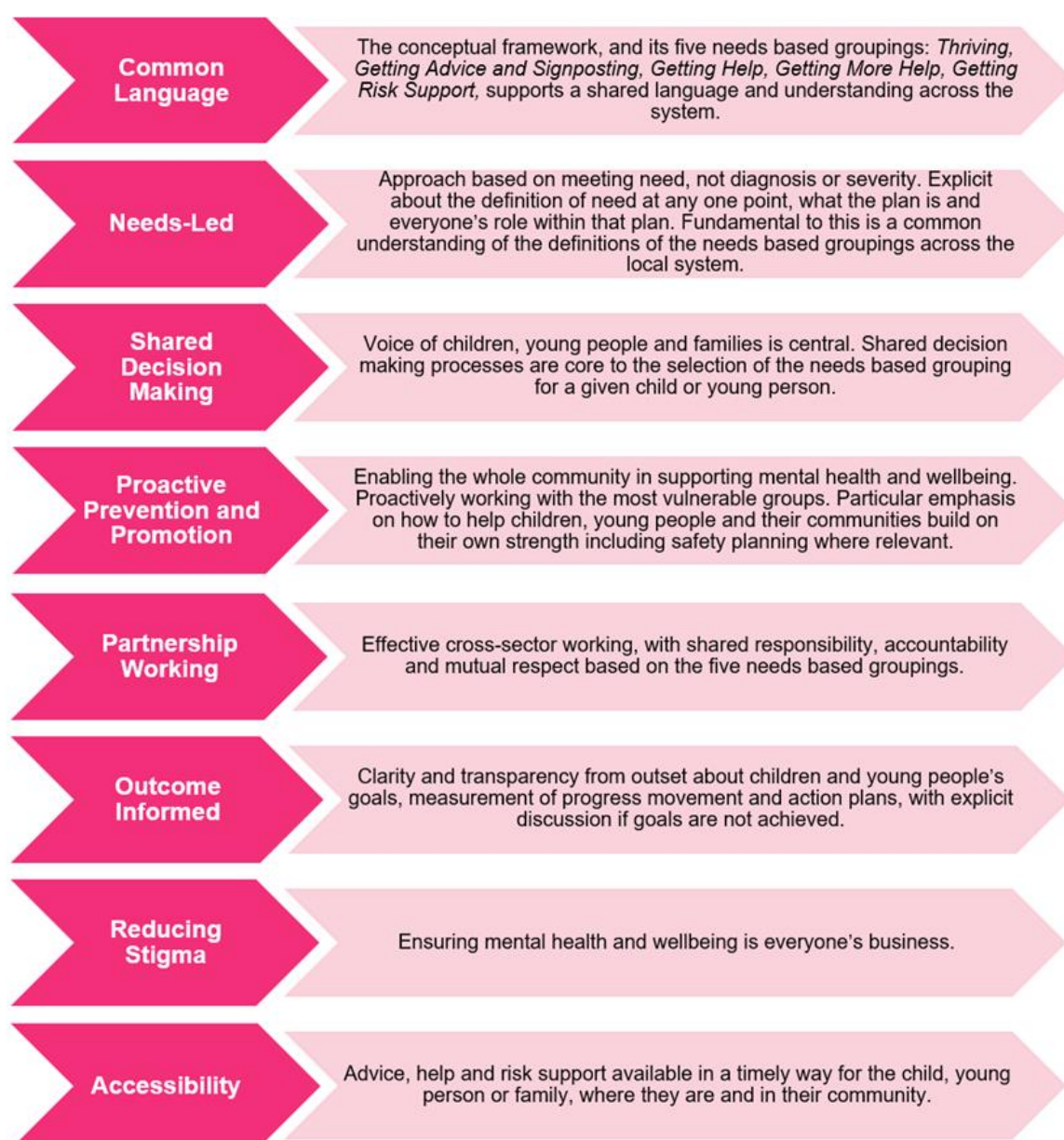
### **What is the THRIVE Framework?**



The THRIVE Framework seeks to re-conceptualise the multi-agency system supporting Children and Young People's (CYP) psychological and emotional wellbeing. In contrast to the tiered model of healthcare that has prevailed for the past 20 years, the THRIVE Framework emphasises cross agency and system-wide factors as key to ensuring that children and young people thrive, and that good quality care for psychological and emotional well-being is provided to CYP across all sectors. The THRIVE Framework endorses multi-agency definitions of mental health promoting practices (MHPPs). The implementation of the THRIVE Framework - known as i-THRIVE - provides a mechanism to deliver a population/whole-system approach to promote "Thriving", and seeks to improve outcomes and deliver better value for money in relation to children and young people's mental health and wellbeing.

The THRIVE Framework encompasses service values and principles that enable self-help/management, access to advice and signposting, early intervention, and Getting Help and More Help without a prolonged journey of escalation through different services. The THRIVE Framework recognises that CYP mental health services are only a small part of a bigger system in ensuring appropriate and safe risk support.

## Key principles of the THRIVE Framework:



## What is the GM i-THRIVE Programme?

GM i-THRIVE is a programme working to implement the THRIVE Framework and its principles across all 10 Greater Manchester (GM) localities.

Working with the GM workforce, children, young people and families, and all other stakeholders, we are aiming to improve mental health support and provision across GM, and have the whole system working in a 'THRIVE-like' way.

The programme team is made up of:

- Clinical Lead
- Programme Manager

- Project Coordinator
- Assistant Psychologist
- Data Coordinator
- Arts & Mental Health Programme Manager

The GM i-THRIVE Programme works in partnership with the National i-THRIVE Programme, sharing the aim: *To improve CYP mental health outcomes by supporting localities to implement the THRIVE Framework for system change through transformation and service improvement programmes using an evidence based approach to implementation.*

### Our aims

- Via whole system workforce development create a service culture, principles, and service delivery, which reflect an asset based approach to the provision of help. Revising care pathways to ensure care is delivered for CYP & their families at the right level, at the right time and in the right place.
- Extend GM's Local Transformation Partnerships' ability to collaborate and benefit from economies of scale.
- Engagement with senior leaders/managers at local and GM level to develop senior management "sign up" and support/permissions to enable middle and front line managers to implement the THRIVE Framework in a whole system approach.
- Deliver training which improves the core competencies and confidence of staff working with children and young people in all settings and sectors.
- Consolidate learning through the development of THRIVE Framework informed supervision in each agency, supported by action learning groups/networks for supervisors providing support for front line staff to embed new ways of working into daily practice.
- To identify, monitor and evaluate how far local services have adopted the values and principles of the THRIVE Framework. To complete this via surveys and the outcomes framework.
- To share and highlight good practice nationally and within GM to support localities to work through challenges in implementing a whole system transformation via THRIVE leads meetings, THRIVE Framework workshops, and our community of practice.
- Create and distribute tools and facilitate workshops to support localities and their implementation of the THRIVE Framework.

*See appendix A for our Frequently Asked Questions about the GM i-THRIVE Programme*



## The THRIVE Framework in GM localities

The GM i-THRIVE Programme team work with each of Greater Manchester's 10 Local Transformation Partnerships (LTPs), the GM Future in Mind Implementation Group, and locality THRIVE leads to enable the delivery of the Greater Manchester Children and Young People's Mental Health Transformation Programme.

GM localities:



To support the implementation of the THRIVE Framework in each GM locality, the following has been provided/put in place:

- A THRIVE locality lead- responsible for implementing the THRIVE Framework in their individual locality
- Regular meeting between locality lead and GM team- to give updates, discuss issues and share good practice
- A bi-monthly THRIVE leads meeting- to discuss challenges and share ideas between all leads
- Funding and facilitating local THRIVE Framework events and workshops
- Funding for Subject Matter Experts
- A GM i-THRIVE Community of Practice event twice a year- to host workshops to support implementation and share good practice across GM





# THRIVE Framework across Greater Manchester- tell us your achievements



## Bury

Our THRIVE Framework offer has resulted in discussions of possibly implementing a single point of access which would involve cross sector working and community resources involved

We are implementing a new neurodevelopment pathway for ASD & ADHD which has been modelled around the THRIVE Framework offer, go live date is 1st April

We are evaluating a pilot for Social Emotional Mental Health which was modelled around the THRIVE offer, evaluation is very positive, with key focus on early intervention

Currently in the process of completing a CYPMH needs assessment to support with the development of our Low level THRIVE Framework offer. We have recruited to the Subject Matter Expert role.

## Rochdale

#THRIVE continues to be an instrumental part in implementing thrive working as a single point of access working across agencies.

Alignment of pathways have resulted in Healthy Young Minds staff working in a THRIVE-like way

Joint working approach across sectors to be a main priority to enable THRIVE-like working including work with CYP

## Manchester

The THRIVE Partnership Board has been responsible for engaging the wider system, identifying gaps and developing a proposed delivery model. These have now temporarily been replaced by a monthly operational THRIVE Framework meeting to support the delivery of the hub model.

Held 2x engagement events where various organisations across the system came together. A range of speakers from organisations provided updates on progress across the city. The theme for the day was 'What does Thriving look like?' Attendees were asked to reflect on the proposed model, clarify expectations and identify potential challenges/gaps to consider.

Started development of the hub model. The strategic vision is to establish the Manchester THRIVE Hub as a single point of entry, a front door, to Manchester's Emotional Wellbeing and Mental Health services. This will involve having a Manchester THRIVE Hub Team based in three locality THRIVE Hubs across Manchester (locations TBC). Within each of these Hubs, there will be a designated THRIVE Team to help strengthen the locality in which they work, develop integrated pathways and enable more effective signposting as there will be a local awareness of resources available.

Working with Digital agency 'Cyber' to run workshops for stakeholders to design the digital platform. The purpose of this platform will be to support the community hub model and allow for supported navigation online, signposting to appropriate organisations and self-help resources. Following the second stakeholder workshop, it was agreed that this resource would be designed primarily for professionals to use and encourage young people to engage with.

Work has begun on developing a Participation framework by means of tracking groups represented at the Board and in the development of the model. This framework will aim to identify any gaps in the model regarding the 'young person's voice' and address these by exploring existing mechanisms for engagement. Young Manchester have been approached to support with the engagement work using the GM i-THRIVE Programme funding for subject matter experts.



# THRIVE Framework across Greater Manchester- tell us your achievements



## Trafford

Implementation of the THRIVE Framework been focused on developing a Single Point of Access (SPOA): Initial meeting held which looked at MHS Improvement, SPOA in other areas, and gathered attendees feedback

Began engagement sessions with CYP including an engagement session with Trafford YouthWatch to gain their views and further sessions planned

Currently developing an online survey to gather the opinions of CYP and Professionals

## Tameside

- Establishment of a full multi-agency THRIVE Partnership which includes representatives of many local agencies. THRIVE Framework thinking and language is now routinely being used in many of these agencies.
- Wide use of mood and emotional difficulties Getting Advice and Signposting and Getting Help resources that have been developed in previous years. Further multi-agency training delivered to support the understanding and confidence in using these resources.
- Multi-agency engagement in developing a THRIVE Framework based pathway for neurodevelopmental difficulties

## Wigan

Multi agency referral hub pilot successfully running since April 2019. So far 28 cases have been discussed with all being re-diverted to appropriate services across the network. This has improved the conversation rate of referral to treatment from 30% to 60% on current data. This also supported a positive impact on CAMHS wait times as part of a recovery business.

By implementing the THRIVE Framework across the team. Wigan CAMHS have implemented a tier less system across the service. The leadership team have worked with front line staff to implement changes and embed a new way of working.

Over 200 young people attended the Mental Health and Me event organised by Wigan and Leigh Youth Cabinet in May to have their say on the future of local mental health support services in Wigan. More than 2000 11 to 17 year olds also took part in a survey about their mental health and wellbeing, and their feedback will inform our on-going plans for i-THRIVE. More than 100 young people at the follow up event in October heard about the changes that are starting to be made based on what young people are telling us, and our pledge to keep on listening.



# THRIVE Framework across Greater Manchester- tell us your achievements



## Oldham

Work has taken place to look at the THRIVE Framework from the perspective of CYP, with Oldham Youth Council on designing the i-THRIVE wheel using bees as a way to describe the model

Currently putting together a narrative which will explain the needs-led groupings to CYP, their families and carers which will be presented to Oldham Youth Council based on the bees concept

Joint working approach across sectors to be a main priority to enable THRIVE- like working including work with CYP

## Bolton

Bolton CCG and Bolton's Healthy Minds Youth Project Group have co-developed a local anti-stigma campaign for children and young people. This reflects the 'Getting Advice and Signposting' needs-based group of the THRIVE Framework by providing a dedicated microsite [www.bekindtomymind.co.uk](http://www.bekindtomymind.co.uk) where children and young people (in addition to parents/carers and professionals) can see what services are available in Bolton to support mental health and wellbeing.

In October 2019, Bolton launched their new Children's Integrated Health & Wellbeing Service (0-19 service) which is underpinned by the THRIVE Framework. Pathways within this new integrated service are developed in conjunction with the THRIVE Framework needs based groupings

## Stockport

Design of the local Infant Parent Mental Health Pathway – a multi-agency pathway which fully embeds the THRIVE Framework

Establishment of i-THRIVE manager post in Pennine Care

Local i-THRIVE workshop –helped better understanding of the difficulties with referral pathways into HYMs

Development of two multiagency group interventions using a cascade training and delivery model. The Hope Group was designed and delivered initially by HYMS team, then moved to a shared delivery with schools staff and has now developed to schools based delivery with consultation/supervision support from HYMS school links workers.

Multi-agency task and finish group working focusing on integrating mental health teams and offers into multiagency contact centre

## Salford

Developed Emotional Health & Wellbeing directory – To support and improve confidence and knowledge of frontline staff / volunteers

THRIVE Network –The network is made up of professionals who work or volunteer with Salford CYP. 3 network sessions held a year, providing updates on new initiatives and projects, combined with workshops to upskill. A distribution list of over 400 people who receive regular email bulletins, ensuring the workforce is linked into i-THRIVE work

Our Training programme has focused on youth MHFA, suicide awareness and LGBT+ awareness, with training offered across a range of levels from 60 minute briefing sessions to 2 day intensive training. Full evaluation takes place following the training with follow up evaluation after 6 months



## THRIVE leads feedback

What improvements/changes have you seen as a result of THRIVE-like working?



Staff are motivated to embed and understand changes of thrive working

Positive feedback from families as the on-going referral processes are completed on their behalf.

Developed a pathways meeting to allow cases to be discussed and **place young people on the correct treatment pathway.**

Working well re Infant Parent Mental Health

Beginning of increased engagement in the children's mental health agenda, in a solution finding way, from a variety of on mental health agencies. A decrease in adversarial relationships and **move towards true integrated working**

Access to mental health interventions for some groups of CYP delivered closer to home, moved from hospital based delivery to **community/school based delivery**

Pathways are being redesigned with a thrive approach to ensure there is support available across all levels of need in line with the thrive groupings

What has gone well when implementing the THRIVE framework?



Multi-agency engagement

**Reduced wait times**

Young people coming into the service being placed in the correct pathway for their needs

Ability to share framework with teams of practitioners from across agencies

Presentations have been well-received

Sharing of practice and being able to give **tangible examples of system changes** that bring about Thrive like working to life, it enables people to understand the changes needed more fully.

Thrive has really helped to understand gaps in provision when you begin to map services in line with the level of need they support.

The model is very easy to understand and allows services to think differently about the support they provide in order to **meet a young persons needs**

Support from GM team has been good—always responsive and willing to come to localities

What has helped with implementing the THRIVE framework?



**Supportive and accessible GM team**

GM program team guided local workshops

Being able to give clear messages that CYP mental health is not always treatable and that CAMHS are not always the answer to supporting families with a child with an emotional health and well-being difficulty

GM presentation resources--consistent GM slide deck has been helpful as it ensures the messages are the same across localities

Access to informal support and reflection from other Thrive Leads and GM team

Free training to professionals has helped to get a system-wide interest in Thrive

Funds allocated to localities to hold workshops is really helpful. It provides a good opportunity to bring agencies together and ensure a consistent approach

The Subject Matter Expert resource will be fundamental to our progress with implementing thrive

The results from the GM i-THRIVE surveys will be helpful to understand the impact and provide a baseline.

What you would like to see in future from the GM programme team?



Supporting our work with system transformation re school age pathways, single point of access

Locality based and adapted training

GM based pathway development for getting help and getting more help levels of need

Stronger links to schools

Quality checking all new programmes and pathways are using Thrive language and designed in reference to the model

Continued support to engage partner agencies and address challenges to this and local sustainability

Strong focus on risk support

A continuation of sharing good practice across GM. Thrive is being implemented slightly different across each locality so understanding the different approaches is useful

A different approach to how we get professionals onto the training

Support to deliver briefing sessions in localities which picks out elements of the training but shorter and more locality specific

Support with producing quantitative & qualitative data

## Implementation stories

The GM i-THRIVE team has been exploring the THRIVE-like working going on across the GM conurbation. We've met up with those pioneering really innovative THRIVE-like service changes, and produced case studies to showcase the work and share learnings.

These stories range from focussing on the specifics of how to support children and young people in each needs based grouping to looking across the whole system when designing services.

See <http://implementingthrive.org/greater-manchester-i-thrive/> to find all GM implementation stories

**Salford's Emotional Health: Directory of Services for Children and Young People**

The GM i-THRIVE Programme team spoke with Jane Roberts from Salford Clinical Commissioning Group (CCG), about Salford's Emotional Health Directory of Services for Children and Young People. This is a great example of meeting the needs of children, young people and families, who fall within the 'Getting Advice and Signposting' needs based grouping of the [THRIVE Framework for system change](#) (Wolpert et al., 2019).

**What was the problem you were trying to solve?**

**Jane Roberts:** There wasn't a single place for children, young people and their families in Salford to access information about services available locally and regionally, to support emotional health and wellbeing needs. There was a need for clear, consistent and relevant information on services providing information, advice and support for children and young people's emotional health and wellbeing. To enhance equitable access, there was an understanding that the format of this information needed to be easily accessible to professionals, volunteers, families, children and young people.

**Oldham's whole system offer for children and young people requiring support with emotional regulation**

The Greater Manchester i-THRIVE Programme team caught up with Consultant Clinical Psychologist, and Joanne Needham, Operational Manager at Oldham's Minds, Pennine Care NHS Foundation Trust to gain an understanding of the problem you were trying to solve?

Oldham's Minds (HYMs) - young people's mental health service

**Tameside and Glossop's offer to children and young people who require emotional health and wellbeing**

The Greater Manchester i-THRIVE Programme Team caught up with Dr Paula Hull, Consultant Clinical Psychologist, at Healthy Young Minds in Tameside and Glossop about the problem you were trying to solve?

**Developing a Consultation Care Pathway to better support Children and Young People in Stockport's Specialist Schools**

The GM i-THRIVE Programme Team spoke with Dr Rosie Noyce, Clinical Psychologist and Dr Carla Innes, Clinical Psychologist at Stockport's Healthy Young Minds (HYMs), Pennine Care NHS Foundation Trust about the development of the Consultation Care Pathway in Stockport.

**Stockport's Learning Difficulties (LD) Care Pathway**

The transforming care agenda aims to improve the lives of children, young people with learning disability and/or autism who display challenging behaviours, including those with a mental health condition.

**Stockport's mental health providers aim to better support children and young people (C&YP)**

Stockport's mental health providers aim to better support children and young people (C&YP) with mental health conditions. The vision statement, national service model 2015, states: "Children, young people with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition have the right to the same opportunities as anyone else to live satisfying and valued lives and, to be treated with the same dignity and respect... get the support they need to live a healthy, safe and fulfilling life."

**Fig 1: Tameside and Glossop's Provision for Children and Young People with Mood and Emotional Difficulties (MEPD)**

Tameside and Glossop's Mood and Emotional Disorder Pathway was developed to help support professionals working with children, young people and their families with emotional health and wellbeing difficulties.

**Transforming Care**

Transforming Care is a national programme to improve the lives of people with mental health problems. It aims to ensure that people with mental health problems are treated with dignity and respect, and that they have the opportunity to live a healthy, safe and fulfilling life.

# Subject Matter Experts

The scale and scope of children and young people's agencies across GM is huge: there are in excess of 1,350 education settings, 10 Local authority children's services, 10 safeguarding systems, 4 CAMHS providers, 3 adult mental health providers, Youth Offending Teams, VCSE organisations, and community health services.

It was clear there was a need for support in implementing the THRIVE Framework across these systems, and providing expertise in shaping these various and complex systems around CYP and their families. To provide this, the GM i-THRIVE Programme team facilitated the funding of Subject Matter Experts (SME).

Funding for SMEs was divided equally amongst the localities, with each locality deciding how best this role should be used in their area. SMEs are now in place for all localities, being utilised differently in all areas.

## Bury, Oldham, Rochdale, Tameside & Stockport (Pennine)

- Utilised the funds to ensure equal access for all boroughs within Pennine care. 2x posts have been recruited to: 1 to cover the north sectors of Oldham, Bury and Rochdale and 1 for the south sectors of Tameside and Glossop, and Stockport.
- The aims of these roles are based on established implementation plans;
- All agencies are fully mapped aligned with the THRIVE Framework needs based groupings
- A prioritisation and gap analysis implemented.
- A review of skills and capacity.
- To support the delivery and development of training and roll out across partnerships.
- The post holders have a mixture of clinical expertise and project management expertise. They both have extensive experience of engaging and working with agencies to achieve an agreed goal.

## Bolton

- The SME funding was awarded to Bolton Lads and Girls Club in partnership with Fortalice. Both organisations have pre-existing links with education settings in Bolton which will be essential to the roll-out of the THRIVE Framework within Schools. An SME worker will be selected from both BLGC and Fortalice ensuring there is sustainability within the work programme.
- The initial role of the SMEs will be to engage and consult with Education staff, parents/carers and children and young people to establish their knowledge of wider mental health support within Bolton. This will be mapped onto the THRIVE Framework needs based groupings in order to produce a gap analysis of mental health provision.
- Another piece of work is to deliver briefing sessions to education staff to allow them to understand the Thrive Framework.

## Manchester

- Engagement has taken place with an external organisation, Young Manchester, to support with facilitating engagement with CYP in order to expand reach of consultation and design work. The Manchester THRIVE Partnership Board is looking to commission a bespoke piece of work with Young Manchester.
- Work has also taken place with Young people at Galaxy House – therapy through music. (Music Project with Children). This work was the result of an unmet needs analysis which has been contributing to the model development.
- Participation framework is under development and links have been made with the proud Trust cohort / Manchester youth council and CAMHS participation groups to support SME roles.

# Subject Matter Experts

## Salford

- Subject matter expert funding will be to further develop 4 specific areas of work: Education, Children's Services, VCSE & C&YP and family/carers.
- Education: funding to be used to backfill 2x headteacher champions who will deliver training for primary and high school staff.
- Children's Services: Currently have 2 subject matter experts in this area. The plan is to deliver 4x lunchtime active sessions (speed dating, resources pick and mix and lunch offer). These sessions will be 1 session per locality/neighbourhood designed to share learning so staff can embed skills for THRIVE-like working.
- VCSE: to be delivered in year 2 of SME funding.
- CYP and Parent/Carer Engagement: Working with Healthwatch to consult CYP around the 'you said we did' response to our We Statements to report in the Local Transformation Plan.
- Plans in place to set up a Co-commissioner Group of CYP that can be consulted on an annual basis so the groundwork to create this group will take place in this period facilitated by the SME opportunity.

## Trafford

- There are two key areas where the Subject Matter Expert would be able to make a significant impact in Trafford. The first is around working with our Early Help Hubs to help embed THRIVE-like practice in their work with families presenting with particular emotional well-being and mental health difficulties. The second is around embedding the THRIVE Framework in schools. It is key that schools and early help services are able to appropriately signpost children, young people and families.
- Agreed to recruit a Band 5 x 1 WTE Assistant Psychologist to act as the THRIVE Framework SME with schools for a 12 month period, they will be based in Trafford CAMHS.

## Wigan

- The Locality has decided to opt for an SME in the Youth Justice System. It is hoped that within the model early contact with Youth Justice services will prompt a THRIVE-like person centered response to the underlying needs of the Children and Young People.
- SME has now been identified from youth justice team and programme of work is currently being agreed.





## Arts, Culture and Mental Health



We know that there's more to managing mental health than clinical psychological care, and there is a growing evidence base to show that participating in cultural and arts related activities promotes resilience, supports emotional well-being, and can help with overcoming mental health problems.

To ensure we're embracing the impact of arts-on-prescription programmes, and offering a more rounded psycho-social service, Dr Kat Taylor, joined the GM team as Arts, Culture and Mental Health Programme lead in April 2019.

Kat's role looks at sharing information and expertise across Greater Manchester on arts, culture and mental health, working with children and young people to participate in developing arts and mental health programmes, working with the localities and all agency workforces to offer support on arts programmes and how these can be part of the i-THRIVE offer.

We're excited to break new ground with our Arts and Culture programme. Working with arts partners in Greater Manchester, we're helping kick-start some of the changes needed for more flexible, relevant and enjoyable mental health support for young people.

Since April 2019, the team has been working closely with organisations and individuals from the arts and cultural sector to develop a clear vision for innovative and evidence-based partnerships. We have taken significant steps towards understanding current provision, sharing good practice, implementing projects and developing an evaluation framework. Some key pieces of work are:

### Evaluation Framework

GM i-THRIVE in partnership with GMCA (Great Places), 42<sup>nd</sup> Street, Arts Council England, Mahdlo, Youth Zone, University of Manchester, z-arts, Lime arts, Contact Manchester, and other key stakeholders have established a working party to develop a framework to evaluate our arts and culture programme. The evaluation framework will provide a standardised means of collecting and reporting on data.

While there have been hundreds of studies on the role of culture and the arts in supporting wellbeing, no standard means of collecting and reporting data and outcomes are in place. We hope to set this standard with the framework, which in turn allows findings from evidence-based practice to have a meaningful impact that commissioners can work with.

## **Proof of concept project**

GM i-THRIVE in partnership with GMCA (Great Places) will fund four pilot projects in GM CAMHS teams. We're offering CAMHS the chance to get support and funding to deliver cultural or arts based interventions with partners in the arts and culture sectors.

These activities, alongside our new evaluation framework, will allow us to demonstrate the impact of cultural and arts-led options for children and young people.

## **Arts-based provision surveys**

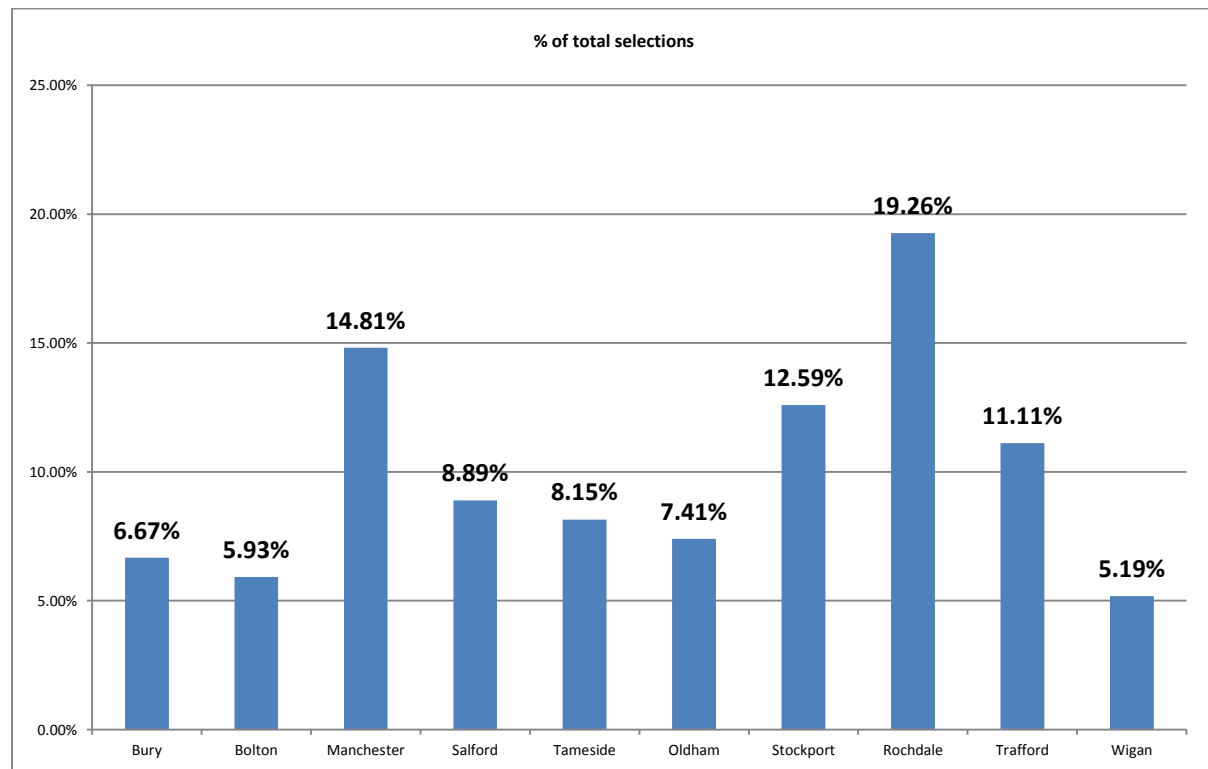
We've collected information on arts-based provisions in Greater Manchester via two surveys. The first survey for Arts and Culture organisations working on a mental health project in Greater Manchester, and the second survey for CAMHS teams/practitioners interested in collaborative work with arts and culture organisations.

The survey responses aim to capture the collaborative working of mental health providers and arts and culture organisations, to identify areas of good practice and the areas we can work with for development.

## The current picture: Our surveys

### CAMHS Survey

We conducted a survey across the whole GM CAMHS workforce to understand the current maturity of the implementation of the THRIVE Framework and identify areas of good practice and the areas for development. We received a total of 104 respondents across GM CAMHS:

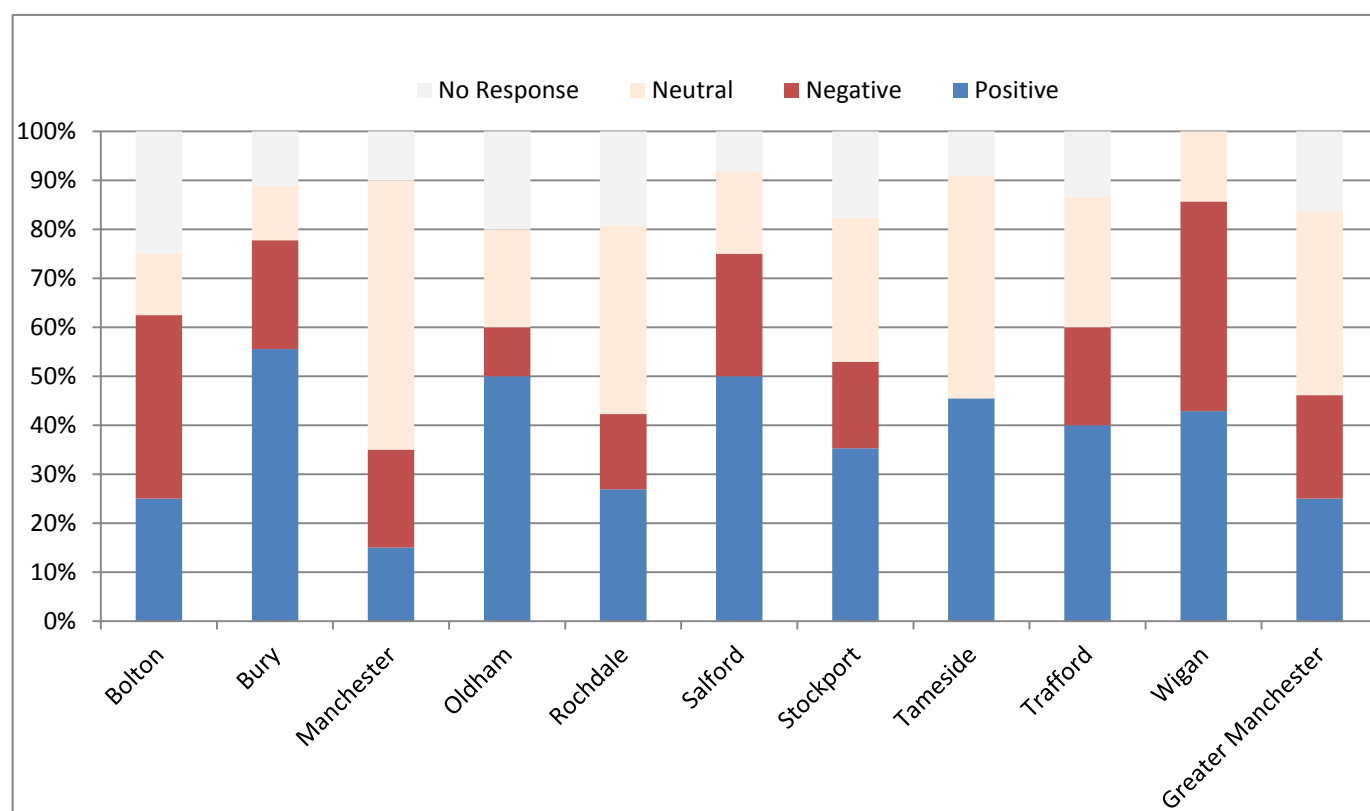


### *Response rate by locality*

### CAMHS Survey key findings

- When respondents were asked whether they knew what mental health services were available to CYP, over 90% selected Strongly Agree or Agree.
- When asked whether they were confident signposting CYP to other services, over 75% selected Strongly Agree or Agree.
- Over 66% selected Strongly Agree or Agree when asked if they were confident carrying out shared decision making.
- Over 75% selected Strongly Agree or Agree when asked if they were confident having conversations related to ending treatment.
- A little over 53% selected Strongly Agree or Agree when asked if they felt confident delivering the key aims of the THRIVE Framework.

- When asked which i-THRIVE Academy training sessions would be most beneficial to their current work, the most popular selection were Getting Risk Support, Getting Advice and Signposting and Shared Decision Making.
- 25% selected Strongly Agree or Agree when asked whether they believed the THRIVE Framework is embedded into everyday practice.



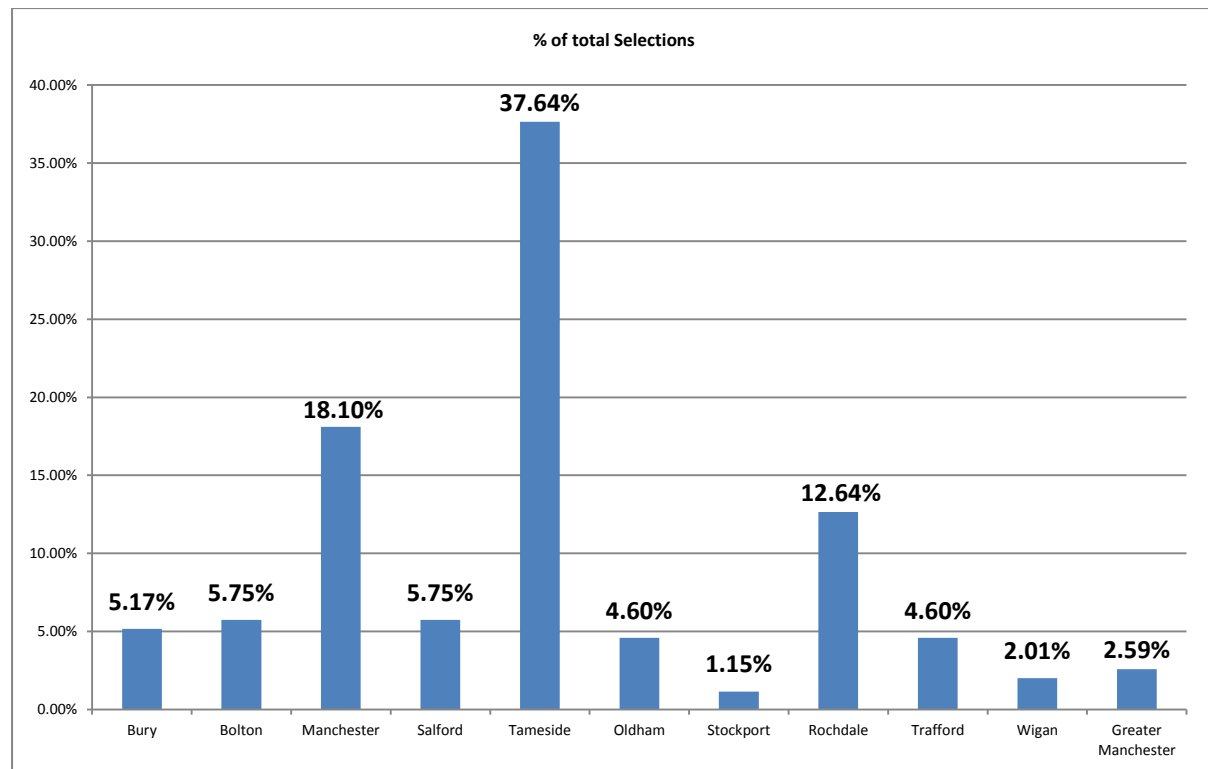
*CAMHS response to Q23: In my locality, the THRIVE Framework is embedded into everyday practice.*

*See appendix B for the full report of findings from the CAMHS workforce survey*

## Wider workforce survey

We conducted a survey across the whole GM children's mental health workforce to understand the current maturity of the implementation of the THRIVE Framework and identify areas of good practice and the areas for development.

We received a total of 319 respondents across the workforce

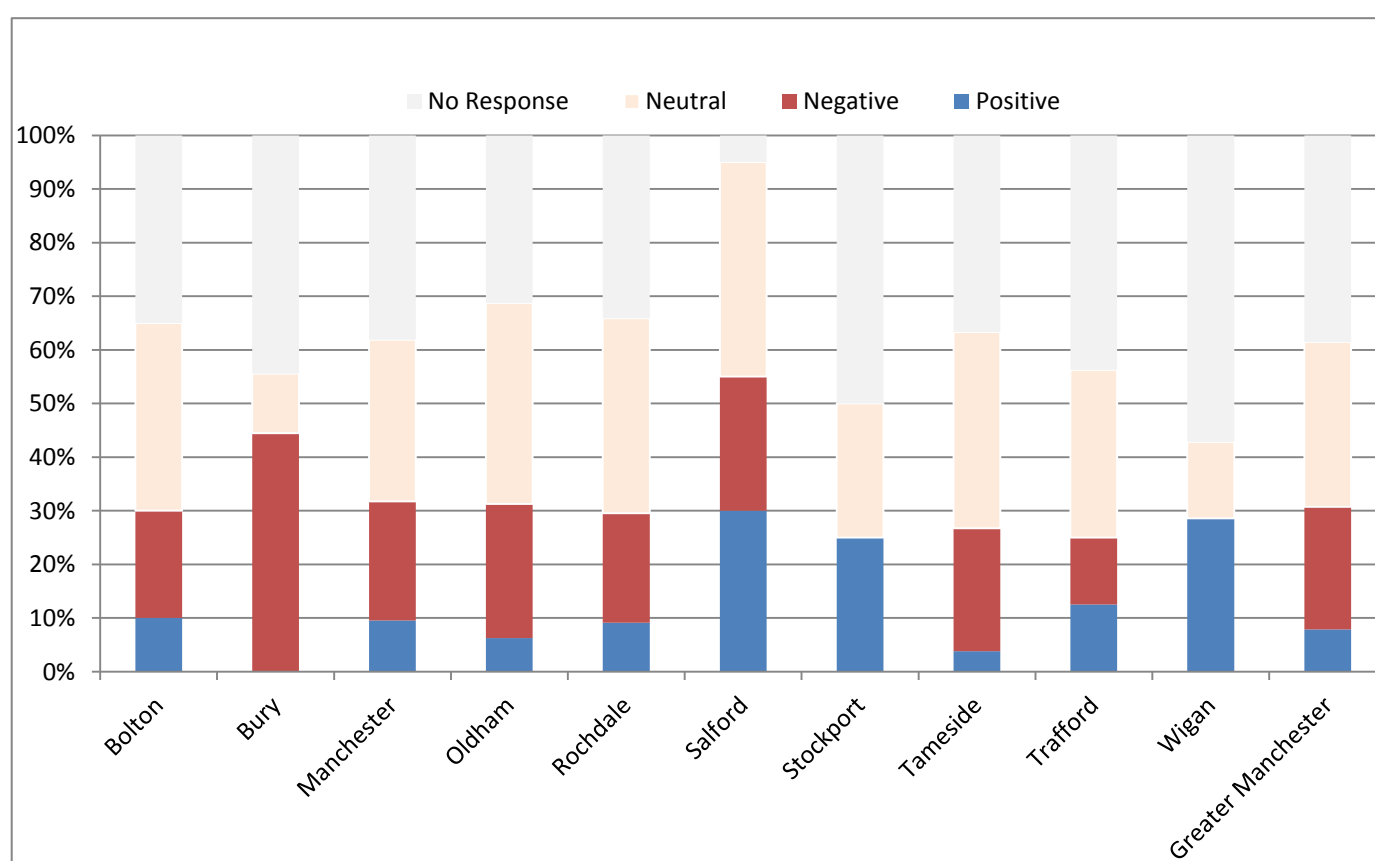


### *Response rate by locality*

## Wider workforce survey key findings

- Over 40% rated their knowledge of the THRIVE Framework as Not well at all or Not Well, suggesting additional work is necessary to ensure the key principles of the THRIVE Framework are made available to the wider workforce.
- Over 60% selected Strongly Agree or Agree when asked if they knew what mental health services were available to CYP.
- Over 56% selected Strongly Agree or Agree when asked if they were confident signposting CYP to mental health services.
- Over 30% selected Very Familiar or Familiar when asked if they were familiar with the different emotional health and wellbeing support pathways. This suggests improvements can be made in signposting the wider workforce to the available pathways in each locality.

- Over 50% selected Strongly Agree or Agree when asked if they believed they worked in an environment that supports CYP with their emotional health and wellbeing.
- 19% selected Very Confident or Confident when asked if they were confident delivering the key aims of the THRIVE Framework. This suggests more training and resource need directed to the wider workforce to ensure the principles and aims of the THRIVE Framework are understood.
- When asked which i-THRIVE Academy training sessions would be most beneficial to their current work, the most popular selection were Shared Decision Making, Getting Advice and Signposting and Getting Risk Support.
- 10% selected Strongly Agree or Agree when asked whether they believed the THRIVE Framework is embedded into everyday practice.



*Wider workforce response to Q23: In my locality, the THRIVE Framework is embedded into everyday practice.*

*See appendix C for the full report of findings from the wider workforce survey*

## GM i-THRIVE Academy

The GM i-THRIVE Academy has been established to provide training across all sectors on the THRIVE Framework learning and development modules developed by the National i-THRIVE Academy: <http://implementingthrive.org/ithrive-academy/>

### The 4x modules are:

- Shared Decision Making
- Getting Advice and Signposting
- When to Stop Treatment: Building Confidence in Letting Go
- Risk Support

These modules have been created to deliver the key competencies required to deliver care in a THRIVE-like way.

Between Jan 19—Oct 19, we held training in all 4x academy modules. A total of **140** professionals attended 1 or more of these training days.

We held additional training days in Risk Support and Getting Advice and Signposting. These training days reached a total of **157** professionals.

In total, **297** professionals from across the system of support for children and young people's mental health have received training in at least 1 of the modules.

The initial ambition of the GM i-THRIVE Academy in its first year was to provide:

- 1x day training for each module
- Training to all 10 GM localities
- Using train the trainer system
- 60 individual attendees to receive training in each module. Totalling 240 people trained.
- Cross sector representation at training
- 1x follow up day to share learning/project outcomes
- Action learning set event follow up

*See appendix D table 1 which outlines how we have achieved this initial ambition, or where we have made alternative plans as we learn what training offer works better.*

## GM led training

We have recruited training leads that are Greater Manchester based, for 2 of the training modules. This allows us more flexibility with the training dates we can offer, along with having trainers who are familiar with working in CYPMH in Greater Manchester specifically.

We have so far recruited:

2x Training Leads in Getting Advice and Signposting



### 3x Training Leads in Risk Support

All training leads have met with their national counterparts and developed their own versions of the training to suit a GM audience.

**4x** GM led training days in the **Getting Advice & Signposting** module have taken place. These extra training dates have been attended by a total of **71** attendees.

**4x** GM led training days in the **Risk Support**. These extra training dates have been attended by a total of **86** attendees.

Plans are also in place to begin running GM led sessions in the module **When to Stop Treatment**, run by the GM i-THRIVE Programme Clinical Lead Paul Wallis, along with a CAMHS representative in each provider area.

**Shared Decision Making** module is owned by OpenTalk and therefore requires purchase of the training. We are unable to have our own GM lead for this module.

## Training Evaluation

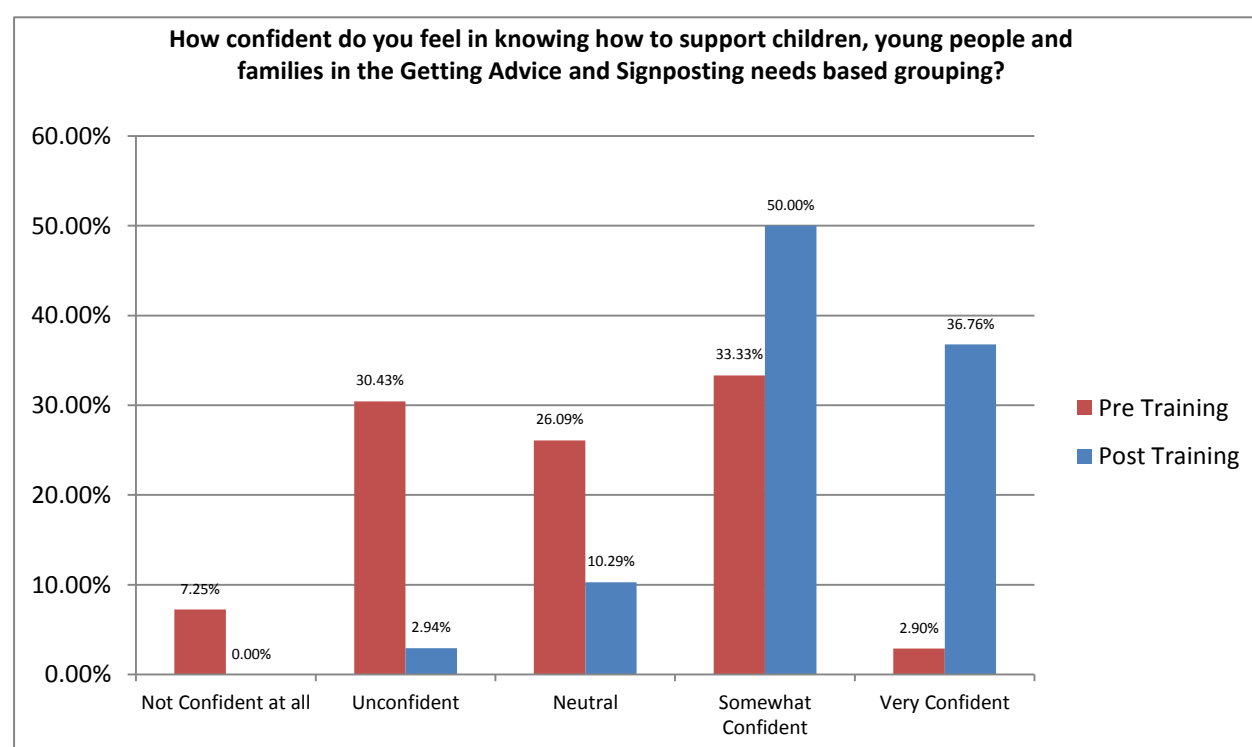
### Shared Decision Making: January 2019

- Formal evaluation not undertaken
- Projects put in place in majority of localities that used the learnings from training to improve shared decision making within teams
- Project example: Bolton 5-19 CYP integrated health and wellbeing service developing discussion prompt cards
- Project example: An Oldham-focused options grid, based on the Shared Decision Making principles

### Getting Advice and Signposting: September 2019

We surveyed training attendees on their confidence in offering Getting Advice and Signposting pre-training and post-training.

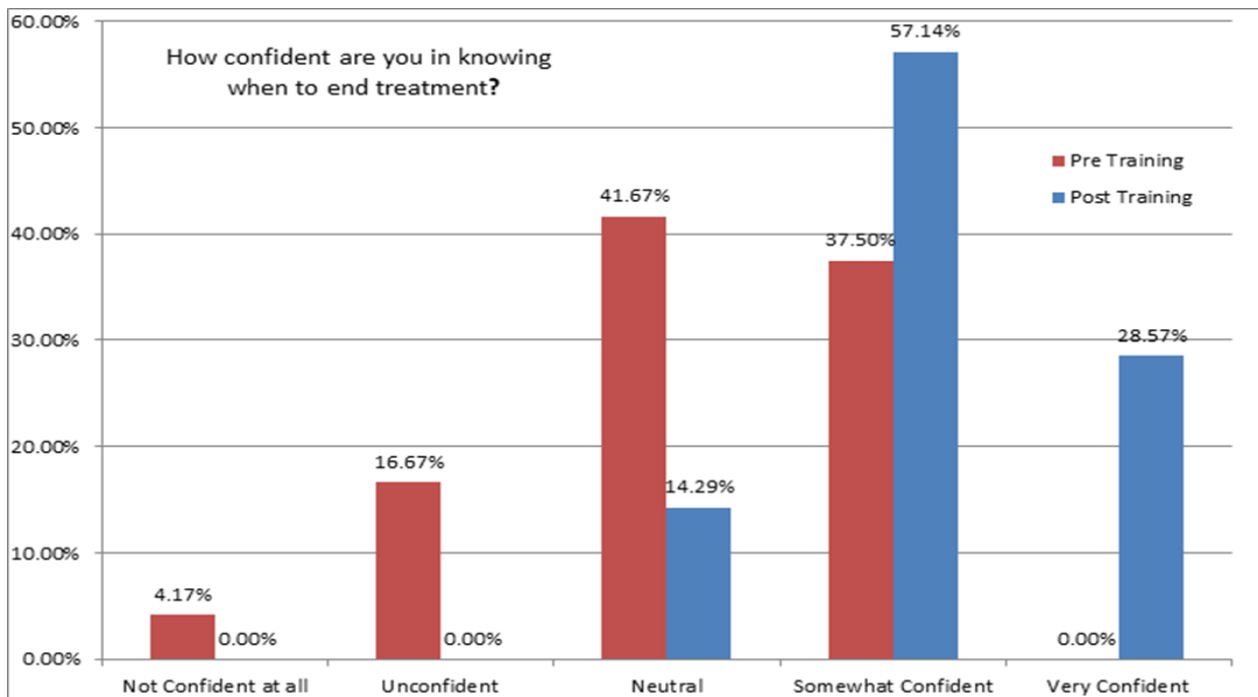
Overall we saw improved confidence levels in knowing how to support children, young people and families in the Getting Advice and Signposting needs based grouping:



### When to Stop Treatment: October 2019

We surveyed training attendees on their confidence in knowing when to end treatment pre-training and post-training.

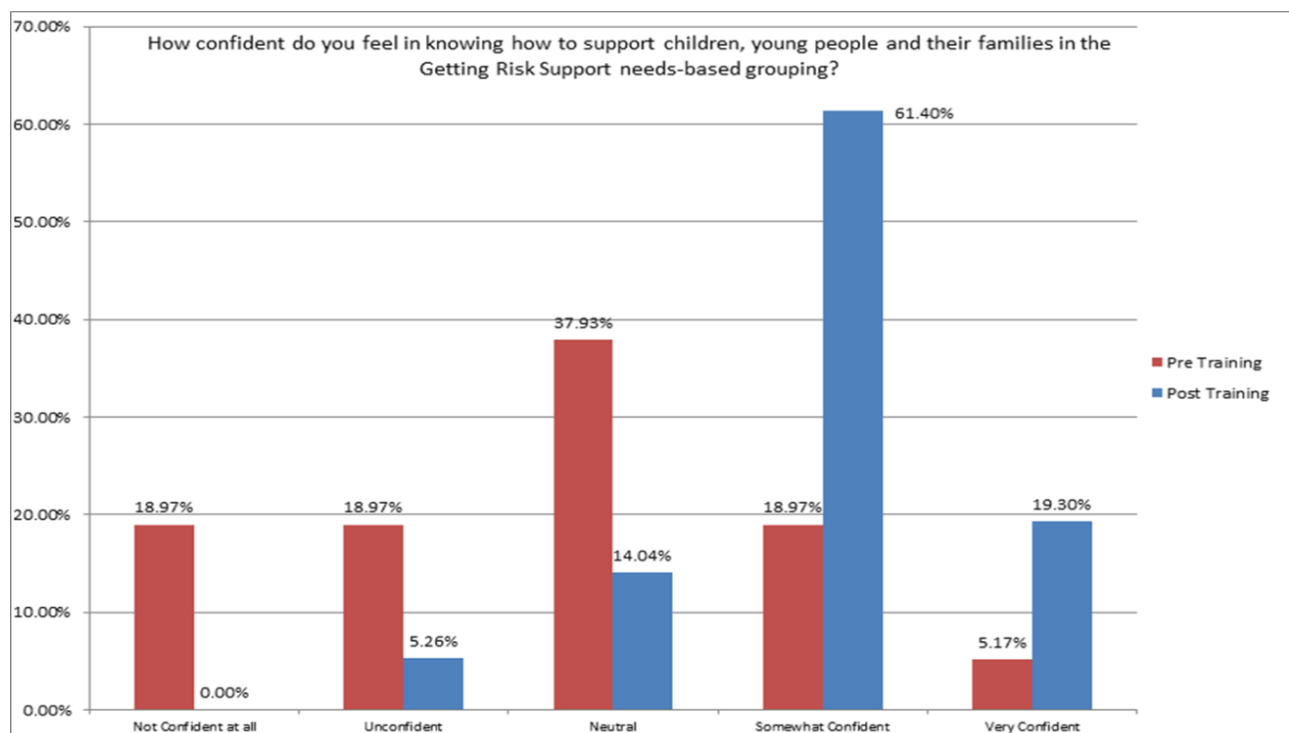
Overall we saw improved confidence levels in knowing when and how to end treatment with children and young people.



### Risk Support November/December 2019

We surveyed training attendees on their confidence in offering Risk Support pre-training and post-training.

Overall we saw improved confidence levels in knowing how to support children, young people and families in the Risk Support needs based grouping:



## Training Learnings

See appendix D table 1 which outlines how we have achieved our initial ambition, or where we have made alternative plans as we learn what training offer works better.

See appendix D table 2 for training attendance breakdown of types of workforce sector that have attended training.

By reviewing the evaluation and attendance numbers, we are taking forward the following learnings:

- Improve communications surrounding training- create more materials to advertise/sell training
- Increasing number of training dates offered
- Host at more local venues
- Plan for future engagement with young people on training
- Improved engagement with sectors with limited training attendance: schools, VCSE and non-CAMHS health (such as GPs)

## Training next steps

### Getting Advice & Signposting training

The GM training leads will run 10 training days in 2020

### Risk Support Training

The GM training leads will run 4 training days in 2020

### When to Stop Treatment training lead

GM led sessions will be run by the GM i-THRIVE Programme Clinical Lead Paul Wallis, along with a CAMHS representative in each provider area.

We aim to run 4 training days in 2020

### Shared Decision Making training

Shared Decision Making training is provided by Kate Martin from OpenTalk.

We will provide 4 training days in 2020

### eLearning modules

We are aiming to roll out eLearning early 2020. The aim of this e-learning is to provide an overview of the THRIVE Framework which supports face-to-face training. Our aim is that this eLearning is accessible across the wider workforce.

### i-THRIVE Grids Training

The Tavistock and Portman NHS Foundation Trust, the Anna Freud National Centre for Children and Families and the Dartmouth Institute for Health Policy and Clinical Practice developed and translated eight new i-THRIVE Grids a shared decision making tool to support children and young people at key decision points along their CAMHS journey.

Plans are in place to develop Greater Manchester specific versions of these grids, aiming for completion by March 2020. Following this, we will begin running training across GM to use these grids effectively.

### Supervision & Consultation and Neurodevelopment modules

These two modules are in development aiming to launch a first training day for Supervision & Consultation in spring 2020 and Neurodevelopment in summer 2020.

### Intentional Peer Support Practitioners

We are planning to offer peer support training to 36 young people across Greater Manchester.

During the Core Training participants learn to:

- Seek ways to connect, become aware of disconnects, and work to reconnect
- Explore how we have “come to know what we know”
- Strive for mutuality in relationships
- Stay curious, question assumptions, and own judgements and opinions
- Open up new ways of listening
- Use experience to relate and build trust
- Name and negotiate power in relationships
- Approach crisis as an opportunity to grow
- Share risk and responsibility
- Focus on the quality of relationships instead of fixing one another
- Pay attention to the impact of clinical and labelling language
- Understand how trauma affects lives
- Keep the energy in relationships moving towards what we want
- Understand peer support in the context of social change and social justice

## Programme Spread

### Community of practice

At time of writing, our community of practice consists of **301 members**, including:

All Gm Nhs Provider Trusts  
Education  
Gm Combined Authority  
**Camhs**  
Gm Health & Social Care Partnership  
**Commissioners** Youth Justice  
Representation From All 10x Gm Localities  
Voluntary Sector  
& Much More!

We have hosted **3x GM i-THRIVE Community of Practice events** attended by **over 300 people**.

These events bring together cross-sector colleagues, showcase the THRIVE-like work going on around the region, and explore the THRIVE Framework and it's concepts with the GM wide audience.

Those interested can [sign up](#) to our community of practice, where members receive our newsletter and invitations to our GM i-THRIVE Community of Practice events.

### Communication and engagement

Our communication strategy recognises that in order to embed THRIVE-like practice into Greater Manchester, a culture change is necessary. By conveying clearly and consistently what the THRIVE Framework is, we set a standard for how it is used and talked about across our stakeholders. The aim being that stakeholders to feel able to articulate the THRIVE Framework in the same way, and therefore bring the THRIVE Framework into everyday practice. We have targeted communication activities:

Webpage: <http://implementingthrive.org/greater-manchester-i-thrive/>

Twitter: [@gmithrive](#) 302 followers at time of writing

GM i-THRIVE Community of Practice: 301 members at time of writing

Newsletter: reaches all community of practice members bi-monthly

## Evaluation of programme

Alongside our comprehensive outcomes framework, the GM i-THRIVE Programme and GM Crisis Care have commissioned two PhD students to conduct evaluation research focusing on if and how these transformation programmes are improving access, timeliness and care whilst broadening the options and choices for support for children, young people and those who care for them. This may include an assessment of whether the transformation programmes offer value for money (cost benefit analysis). The research aims to, but is not limited to, answer the following on the GM i-THRIVE Programme:

- Has implementing the GM i-THRIVE Programme broadened the mental health offer to children, young people and families?
- Has implementing the GM i-THRIVE Programme improved access and accessibility to children and young people's mental health service provision, including NHS CAMHS?
- Do children and young people feel like they have a choice in what, where, and how they access support for mental health?
- Are children, young people, and those who care for them, reporting an improved experience in access and receiving care?

## Key learnings

Throughout this report, we have noted the learnings from each area of work and how we have responded to them. The following are summarised learnings from each of area of work:

### Communication and Engagement

- The importance of spending time communicating and engaging with the whole system cannot be underestimated. This takes longer than first thought and requires a very proactive approach to building relationships and a shared understanding.
- Shared understanding of THRIVE Framework is important there have been times where the Framework was described differently and this can lead to confusion.

In response to the above, we developed a suite of materials to support THRIVE leads in presenting and articulating the THRIVE Framework in their localities. We also supported workshops and presented at various boards and conferences across all localities.

### Training

- Full numbers attending training has been difficult to achieve across the conurbation.



- Implementing what people have learnt has been limited due to the system change not happening yet and the whole system vision not being realised by all involved. Another barrier was those people who attended weren't trainers themselves so teaching others about the training would be difficult – they also needed management support and capacity to be able to do this.

In response, the GM i-THRIVE Programme team are developing a workforce strategy to support localities in embedding the training and making it sustainable. We have also recruited training leads for some of the training to enable flexibility of delivering more training, editing the training so it speaks to a GM audience and flexibility of where training is delivered. We will also be exploring e-learning options.

### **Buy in and ownership of whole system**

- Attendance at training and strategic vision of embedding the THRIVE Framework across a whole system is variable. It has often been seen as a health transformation rather than the combined view that everything impacts on mental health and wellbeing therefore it is a whole system change.

In response we updated our Communication and Engagement Strategy and reviewed our stakeholder mapping to ensure the right methodology is being used to engage key influencers. We also attended the GM Directors of Children's Services (DCS) group to highlight the importance of Local Authority engagement and ownership which was well received and GM DCS fully endorse implementing the THRIVE Framework. There is still more work to be done as buy-in and ownership from the whole system is still not evident in some localities.

### **Next steps**

- Continue supporting localities with whole system transformation using the THRIVE Framework
- Roll out more GM i-THRIVE Academy Training
- Ensure training becomes sustainable including e-learning options
- Offer training to young people to become Peer Support Practitioners
- Undertake an analysis of the wider workforce and their skills and training in regards to mental health
- Continue to support sharing good practice and work through issues via THRIVE leads meetings, one to ones, community of practice and newsletters
- Share models for supervision and consultation that help implement the THRIVE Framework, especially Getting Advice and Signposting and the offer to our more vulnerable groups
- Extend our knowledge and evidence the impact of arts and culture on mental health
- Further define the 'Thriving' needs based grouping offer
- Support GM implementation of their Locality Transformation Plans via:

- Examine the THRIVE Framework implemented across the life span (all age THRIVE) by undertaking a workshop to get GM agreement on principles and explore the THRIVE Framework as an all age framework
- Explore Special educational needs and disability (SEND) and the THRIVE Framework
- Explore the THRIVE Framework, and Trauma and Adversity

## Appendix:

Download the appendices here:

<https://mailchi.mp/2beade45a0c4/gmithriveprogressreport>

A: Frequently Asked Questions about the GM i-THRIVE Programme

B: Full report of findings from CAMHS workforce survey

C: Full report of findings from wider workforce survey

D: GM i-THRIVE Academy training numbers. Table 1 outlines how we have achieved training ambition, or where we have made alternative plans. Table 2 shows training attendance breakdown.

You can get in touch with the GM i-THRIVE Programme team via:  
[gm.thrive@mft.nhs.uk](mailto:gm.thrive@mft.nhs.uk)

