



Digital Innovations through COVID-19

National i-THRIVE Programme

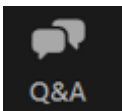
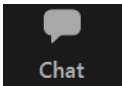
*“If we keep on doing what we have been doing, we are going to
keep on getting what we have been getting”*



Welcome and house keeping



- Welcome from Dr Rachel James, Clinical and Programme Director of the National i-THRIVE Programme.
- **Please note: this webinar will be recorded.** Only the presenters will be visible, and following the webinar we will send a link to enable you to share with colleagues who may not have been able to join.
- If you need to communicate a technical issue please use the chat function, this is monitored by one of the team and we can attend to this ASAP.
- If you have a question or reflection on the content of the presentations please submit this using the Q&A function, and indicate who you would like to address it to. You can select to submit anonymously if you do not want your name to be included.



Please input your question

☐ Send Anonymously

- If you have any questions or reflections you would like to share following the webinar please feel free to send them to the i-THRIVE National Programme team at ithriveinfo@tavi-port.nhs.uk
- You will be sent the slides following the webinar.

Agenda



Time	Item	Presenter
10:00	Welcome	Rachel James
10:10	Introduction to Digital Innovation within the NHS	Rose McCarthy
10:25	Top tips for remote working: Learning from the National i-THRIVE Programme	Neelam Solanki
10:35	Level Up: Safe steps to secondary school programme	Laverne Antrobus, Rachael Humphries
10:55	Comfort break	
11:00	NHS Digital – NHS England and Improvement	Nadia Yegorova- Johnstone, Hilary Tovey, Emma Storey
11:40	Q&A with presenters	All
12:00	Close	Rachel James



Introduction to Digital Innovation within the NHS

Rose McCarthy
Clinical Trainer, National i-THRIVE Programme

*“If we keep on doing what we have been doing, we are going to
keep on getting what we have been getting”*



Introduction



- Rapid change to a digital NHS delivery
- Building on technologies already developed
- Need for a system change?

Smartphones and Wearables



- 78% of people in the UK own a smartphone, rising to 95% among 16-24 year-olds ([OFCOM, 2018](#))
- Apps – Increase Accessibility and Reduce Stigma
 - NHS App
 - Kooth
- Large scale research – Improve Outcomes
 - In 2016 more than 4,000 people enrolled for a Parkinson's disease study ([100 for Parkinsons](#))
 - In 2018 more than 400,000 people enrolled for a atrial fibrillation study ([The Apple Heart Study](#))

Reference: The King's Fund (2020): *The digital revolution: eight technologies that will change health and care.*

Virtual Communication Aids



- Telemedicine – Shared Decision Making and Partnership Working
- Digital Therapeutics – Accessibility and Outcome-Informed
- Computerised CBT - Accessibility and Outcome-Informed

Reference: The King's Fund (2020): *The digital revolution: eight technologies that will change health and care.*

Staying Connected



- Peer to Peer support networks – Reducing Stigma, Common Language
 - MedHelp
 - PatientsLikeMe
 - HealthUnlocked
 - Facebook
- Data Donors – Accessibility and Reducing Stigma



Top Tips for Remote Working

Neelam Solanki
National i-THRIVE Programme

“If we keep on doing what we have been doing, we are going to keep on getting what we have been getting”

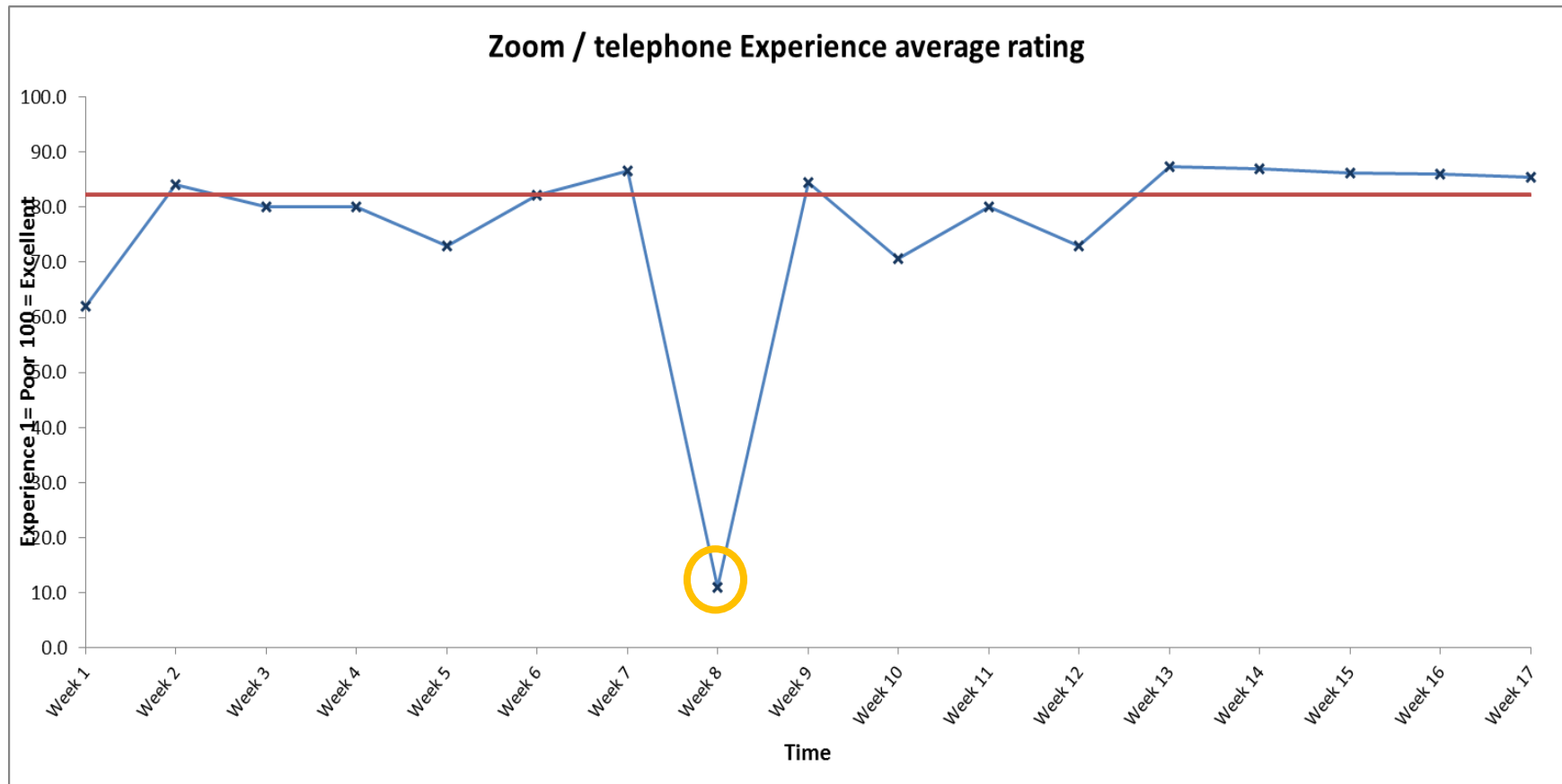


Quality Improvement: The i-THRIVE Programme Teams' Remote Working Project



100 - 90	Superior	The experience was better than face-to-face appointments
90 - 81	High quality	The experience was at least as good as face-to-face appointments
80 - 71	Good quality	Some very minor difficulties but generally good quality and useful
70 - 61	Small issue	A small issue in just one area, such as sound quality or timing of session
60 - 51	Several small issues	Issues occurring in more than one area, such as finding a private space or occasional glitching
50 - 41	Bigger problem	Major impairment to success in one domain, such as not being able to hear or see properly or frequent talking over one another
40 - 31	Several bigger problems	Major impairment to success in more than one domain
30 - 21	Severe difficulties	Some contact was made but it was not sustainable and the contact had to end in an unplanned way
20 - 11	Extreme difficulties	It was not possible to start or continue the meeting
11 - 1	Impossible	It was not conceivable to work in this way

Run chart of 1-100 average ratings across 17 week period



Top tips and key considerations



1. Consider the time and cost implications of travel
2. Balance face-to-face work with remote meetings
3. Prioritise Zoom security
4. Choose your Zoom account type accordingly
5. Breaks!
6. Consider potential technological Issues
7. Be agile
8. Get creative



LEVEL UP: Safe Steps to Secondary School

- FUNDED BY THE YOUTH ENDOWMENT FUND (YEF) AND EVALUATED BY THE ANNA FREUD NATIONAL CENTRE (AFC)
- SUPPORTS YEAR 6 CHILDREN MOVING TO SECONDARY SCHOOL WHO MAY BE AFFECTED BY YOUTH CRIME.
- AIMS TO EQUIP THESE CHILDREN WITH THE SOCIAL AND EMOTIONAL SKILLS REQUIRED TO NAVIGATE, AND FEEL CONNECTED TO THE SAFE, SUPPORTIVE AND ENGAGING ASPECTS OF THEIR COMMUNITIES.

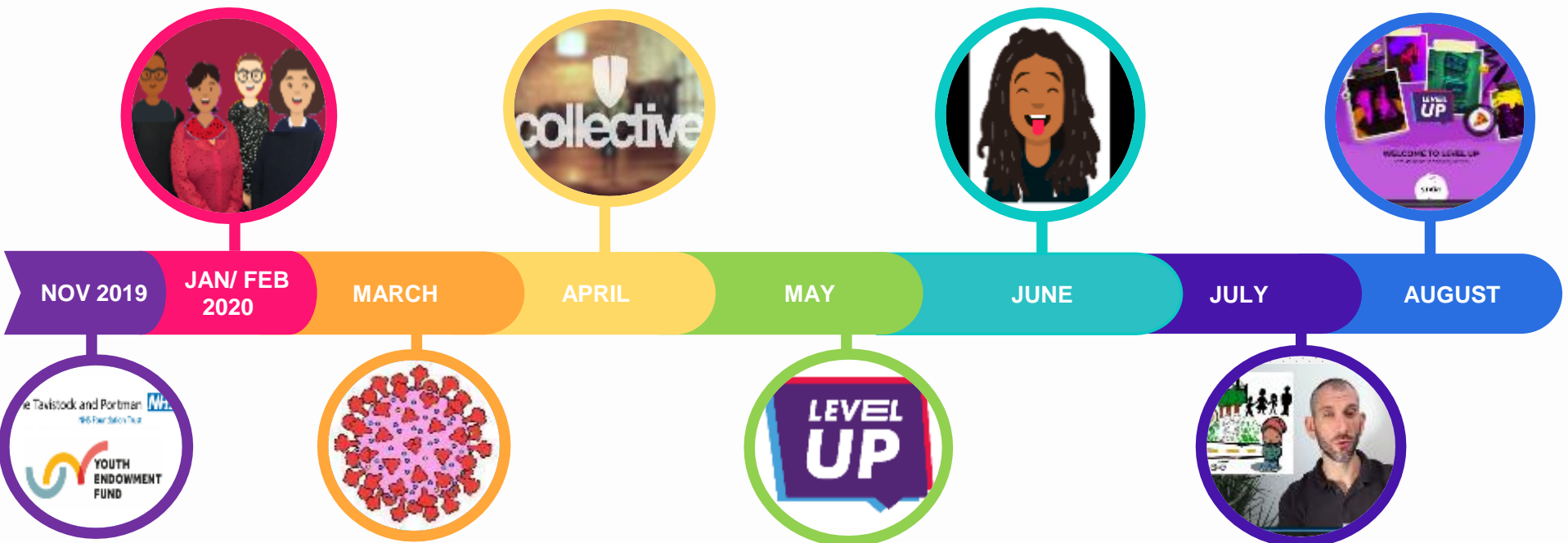
Watch the Level Up [Sneak Peek](#)

Who we are:



- ▶ **Laverne Antrobus** Consultant Child and Educational Psychologist & Team Manager
- ▶ **Rachael Humphries** Specialist Community Nurse & CYP IAPT Systemic Family Practitioner
- ▶ **Dr Jessica Powell** Child, Community & Educational Psychologist
- ▶ **Dr Natalie Kseib** Clinical Psychologist
- ▶ **Jamie Williams** Art Therapist & CYP IAPT Systemic Family Practitioner
- ▶ **Nicola Moses** Lead Team Administrator
- ▶ **Andreea Constantin** Team Administrator

- Recruiting the team
- Initial plans and outline of the programme; booklet, summer holiday group sessions
- Identifying primary schools
- Consult with Tavi & YEF; decide to deliver intervention online
- Plan for challenges of online working including feasibility, accessibility & risks
- Search for suitable design agency
- Deadline for primary schools to submit teacher SDQs
- Continue developing online sessions with Collective over teams
- Co-production sessions start over zoom
- Groups / activities launched!
- Manage technical difficulties with activities/ accessing zoom
- Send parent sound cloud links, art tutorial videos and supplies



- Bid won for Camden, Haringey & Islington
 - First draft of the booklet completed
 - First contact with primary schools and community organisations identified
 - Lockdown due to Covid-19 (23rd March); schools shut; decision as to whether program is postponed or delivered online
- Inform commissioners and primary schools that programme will be delivered remotely
 - Convert draft booklet into online activities
 - Meet with YEF and Anna Freud over teams
 - Meet with Collective for the first time over teams
 - Enlist a co-production group of year 6/7 students
- Enrol parents of selected pupils onto programme; collect outcome measures
 - Continue running co-production sessions, allocate groups and plan group sessions
 - Write and record videos & parent podcasts

How Level Up aligns with the THRIVE Framework for system change

Thriving

- ▶ Level Up targets children who meet the following criteria;
 - ▶ are under the radar of statutory services,
 - ▶ have a Strengths and Difficulties Questionnaire (SDQ) total difficulty score between 6-18,
 - ▶ struggle with peer relationships,
 - ▶ make risky or poor decisions,
 - ▶ and whose parents or carers are worried about their transition from primary to secondary school.
- ▶ As outlined above, the programme engages with children and their families providing a holistic range of prevention and promotion strategies that meet their needs both at home and in an education setting.
- ▶ An independent evaluation of the programme is being undertaken by the Anna Freud National Centre for Children and Families, which will provide evidence on the success of the prevention and promotion strategies and influence the national roll-out of the programme.



Getting Advice and Signposting

- ▶ Although impacted by COVID, an integral part of the programme is building on the strengths, resources and resilience of the community by providing advice and signposting to community groups for emotional health and wellbeing support.
- ▶ By sharing information about what is available to children and their families in their community, Level Up is empowering children and families to find the best ways of supporting their mental health and wellbeing.
- ▶ A key aim of the programme for its second year is to maintain links with other services such as Mental Health in Schools Teams (MHST), Early Intervention for Psychosis Services (EPS), Youth Early Help and SENCO forums, and engage with more community organisations linking in with other services.



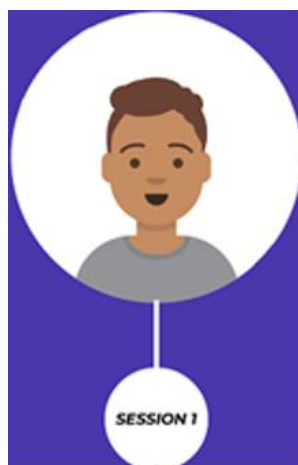
How Level Up aligns with the THRIVE Framework for system change

Partnership Working

- ▶ A great amount of work has been carried out by the programme to build and maintain effective partnership working across the system to support the children and families that they are working with.
- ▶ This includes supporting transition by making contact with secondary schools in September to inform them which pupils took part in the programme, and to hand over any necessary additional information.
- ▶ A testament to the relationship building that has happened in the first year of the development programme is that several of the schools have signed up to take part in the second year of the programme.

Needs-led

- ▶ Co-production was key to shaping the content and 'look and feel' of the online activity aspect of the programme which ensured that the voice of children was central and the offer was needs-led.
- ▶ Feedback from the co-production sessions included:
 - ▶ "Didn't mind the amount of text, but reduce the amount on each page so that it doesn't feel overwhelming."
 - ▶ "Learnt that he is part of more communities than he thought of."
 - ▶ "Learnt that he can talk to many more people than just the police."



HOW GOOD ARE YOU AT TENNIS?

- ☐ A-ma-zing
- ☐ I'm pretty good
- ☐ Let's just say... I'm still learning...

DO YOU HAVE ANY PETS?

☐ Yes

☐ No

☐ I used to...

NEXT >

HOW MANY BROTHERS AND SISTERS DO YOU HAVE?

NEXT >

HOW MESSY IS YOUR BEDROOM?

☐ Spick and span

☐ You can juuuust about see the floor

☐ Total Bomb Site.

NEXT >

Drag if you love it
Drag if you don't

FOOTBALL

Drag if you love it
Drag if you don't

ATHLETICS

WHICH OF THESE DO YOU LIKE TO DO?

(tick as many as you want)

- ☐ Sprinting
- ☐ Long-distance running
- ☐ Long jump
- ☐ High jump
- ☐ Throwing things as far as I can
- ☐ Relay races

Drag if you love it
Drag if you don't

TENNIS

ARE THERE ANY OTHER SPORTS YOU LIKE?

DO YOU LIKE ENGLISH?

Hate it! Love it!

HOW DO YOU FEEL ABOUT SCHOOL? DROP THE SLIDER WHEREVER FEELS RIGHT.

AND HOW ABOUT MATHS? DO YOU LIKE IT... OR NOT SO MUCH?

Hate it! Love it!

HOW WELL DO YOU THINK THE FOLLOWING WORDS DESCRIBE YOUR PERSONALITY?

POLITE FRIENDLY CLEVER

LONELY ANGRY CHEEKY

NAUGHTY BRAVE

Hate it! Love it!

WOULD YOUR FAMILY DESCRIBE YOU AS...

BRAVE LONELY CLEVER

FRIENDLY FUNNY CHEEKY

Nope Yeah, totally



LEVEL UP

RACHAEL

SESSION ONE, COMPLETE

THANKS FOR TAKING PART IN LEVEL UP, FRED. IT'S BEEN GREAT GETTING TO KNOW YOU.

WE'LL SEND YOU A TEXT OR EMAIL WHEN YOUR NEXT LEVEL UP SESSION IS READY IN A FEW DAYS.

In our 1st year we learned that ...

- ▶ First contact with schools and parents really important for parental engagement
- ▶ Children and parents responded well to the group sessions
- ▶ Groups of 4-5 children and parents worked particularly well
- ▶ Mixed and same primary school groups worked well
- ▶ Some children and parents needed additional support to get on-line
- ▶ Some siblings and family friends joined in place of parents or helped to translate
- ▶ Session 2 – The 'Thinking brain and the alarm brain' concept landed well with both parents and children
- ▶ Some children would have preferred to complete online activities as a group rather than independently
- ▶ Glitches with online activities to be ironed out
- ▶ Consider Zoom etiquette/rules/expectations i.e. camera on or off, parent presence.
- ▶ Parental engagement is important

In our 2nd year we aim to ...

- ▶ Work closely with primary schools to identify children and engage parents
- ▶ Increase number of children and parents completing the programme
- ▶ Streamline screening, referral and on-boarding process
- ▶ Review and update session content, where necessary
- ▶ Better understand what technology (laptops/internet) families can access
- ▶ Maintain links with other services such as MHST, EPS, Youth Early Help, Outreach Teachers and SENCO forums etc.
- ▶ Engage with more community organisations

Child & Parent Feedback

"I liked that there were little tasks
[for the children] to do"
Parent

When you talk in a group, you
get to express your feelings
and you get to feel part of a
community

Year 6/7 child

It helps to think about
secondary school with
people that have already
been through it.

Year 6/7 Child

It gets rid of the
butterflies in your
tummy

Year 6/7 child

"A huge thank you"

Parent

The team are "actually quite good listeners"

Year 6/7 Child

The website was good, particularly
the different kinds of questions that
it asked.

Year 6/7 Child



Comfort break

10:55-11:00

“If we keep on doing what we have been doing, we are going to keep on getting what we have been getting”



Digital transformation in Children and Young People's Mental Health Services

Nadia Yegorova-Johnstone, CYP MH National Team NHSE&I

Hilary Tovey, Head of Digital Mental Health, Deputy Head of Mental Health NHSEI

Emma Storey, Project Manager, Digital Mental Health, NHSEI

NHS England and NHS Improvement



Overview

1. Digital transformation and why it's important to Children and Young People's Mental Health services
2. NHSX and NHSEI CYP MH Digital Transformation work to date
3. Testing our next steps with you and opportunities to work together

1. Digital transformation and why it's important to CYP MH

What do we mean by digital?

NHS Long Term Plan policy ambition (by 2024):

- 100% of mental health providers meet required levels of **digitisation** and are **integrated** with other parts of the health and care system, for example through a local shared health and care record platform.
- Local systems **offer a range** of self-management apps, digital consultations and digitally-enabled models of therapy.



Self-management apps, digital consultations and digitally-enabled therapy for personalised MH care



Digital options for accessing care to support swifter referral and build NHS.uk information which signposts to NHS and non-NHS services



Tools to support decisions on care using machine learning to identify need, understand individual crisis/suicide risk and support caseload management



Digital assessment and records across primary and secondary and physical and mental health; users can access their own information



Electronic prescribing and medicines administration improving safety across inpatient and community MH settings



Clinical and business intelligence to reduce variation, support innovation and inform planning and identify best practice



Tools to make best use of assets and resources to show available beds and manage out of area placements; e-whiteboards and 'at a glance' boards

What does this mean for CYP services?

“We need a digital front end**”

*or: portal, platform, app, single front door etc...

By ‘digital’ we do not mean an app or a website...

- We mean embracing the mindset, culture, business models, process and technology of the Internet era to respond to people’s raised expectations.
- We have the opportunity to rethink the ways that we deliver services, using technology to create new models of care to meet the needs of those that use services and the staff that work within them.

Services

End to end experiences designed into a meaningful journey for users.

Sub services/products

Individual products, transactions, interactions which make up a service

Service patterns

Repeatable and reusable ways similar services work

Capabilities

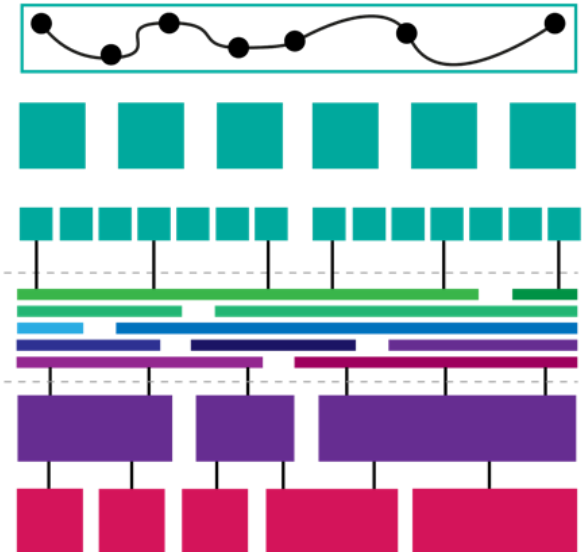
Discrete, reusable building blocks that deliver those things

Technology

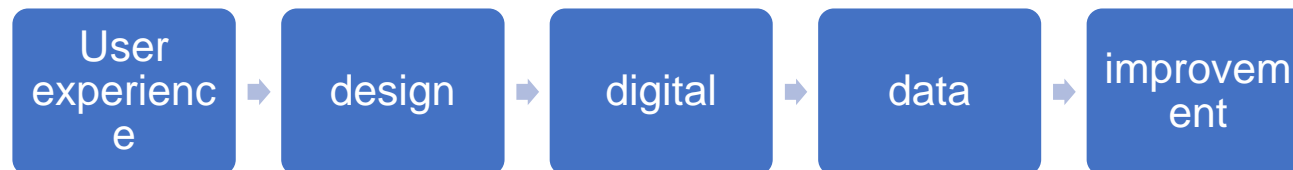
Common systems which are scalable, interoperable, usable and flexible

Data

Secure, accurate, well managed, supporting many services equitably

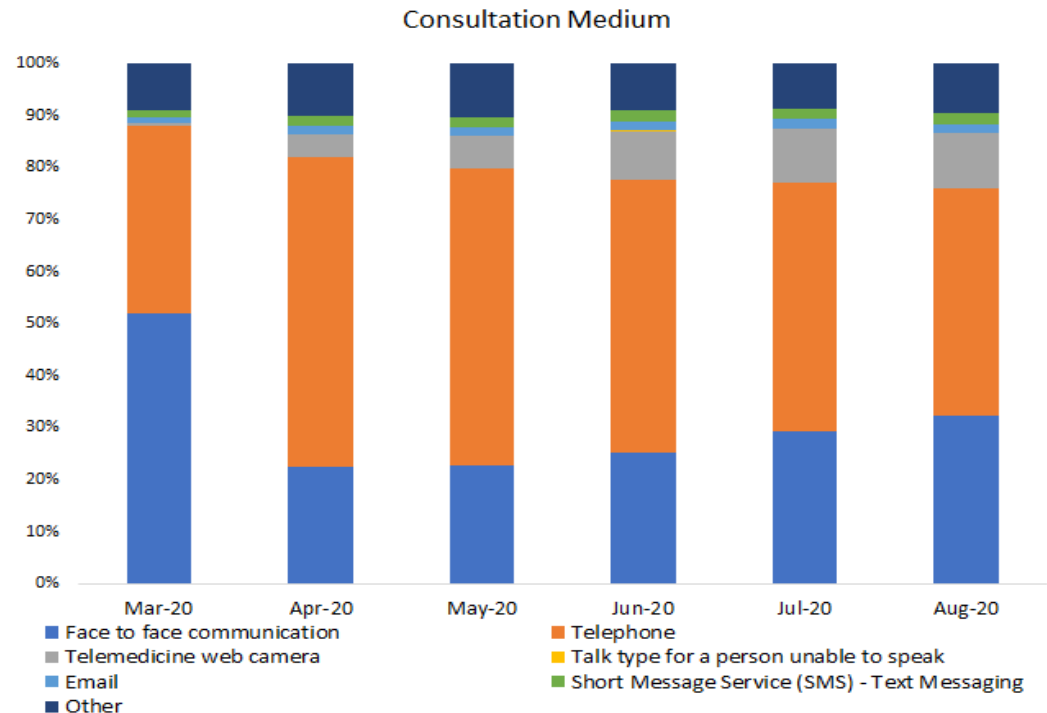


‘Good’ digital transformation starts with user centred design



The pandemic has challenged CYPMH to accelerate the digital transformation agenda

- The initial drop in referrals during Covid is beginning to rise, as is the acuity and complexity.
- We saw a rapid move to virtual consultations – see table to the right.
- Rapid commissioning of technologies in certain localities
- Tailored offers from digital mental health products and services around anxiety related to COVID/lockdown – e.g. ThinkNinja



Source: Mental Health Services Dataset

What we have learned during Covid-19



Service user considerations:

- Whilst time together has had some benefits, privacy matters, and is hard to manage for both parents and children / young people
- Digital inclusion is not just about having a smart phone – complex problem
- Blended digital and traditional modes of delivery preferred – and providing choice for service users between the different modes will be important as we move forward
- Peer support important – who and how/where
- Parenting support for managing behaviour at home

Workforce considerations:

- Better understanding of skills that staff could/should have around using confidently using technology
- Staff confidence is critical alongside access to hardware
- Can't always continue to do the same therapeutic work, but might be able to do other work



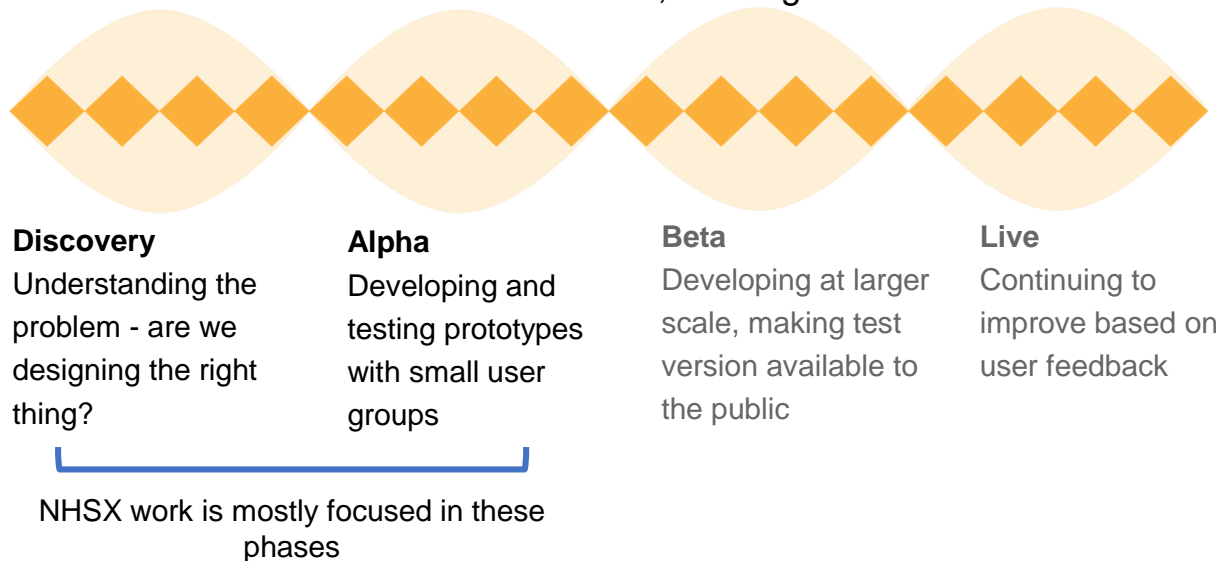
Provider / commissioner considerations:

- Rapid adoption of technology is possible
- Usability of product – no perfect swiss-army knife “video consultation” platform at the moment
- User research and good service design approaches aren't just a luxury for “Business as usual” and can be done, with limitations, in a rapid response to a situation by a multi-disciplinary team

2. NHSX and NHSEI digital transformation work to date

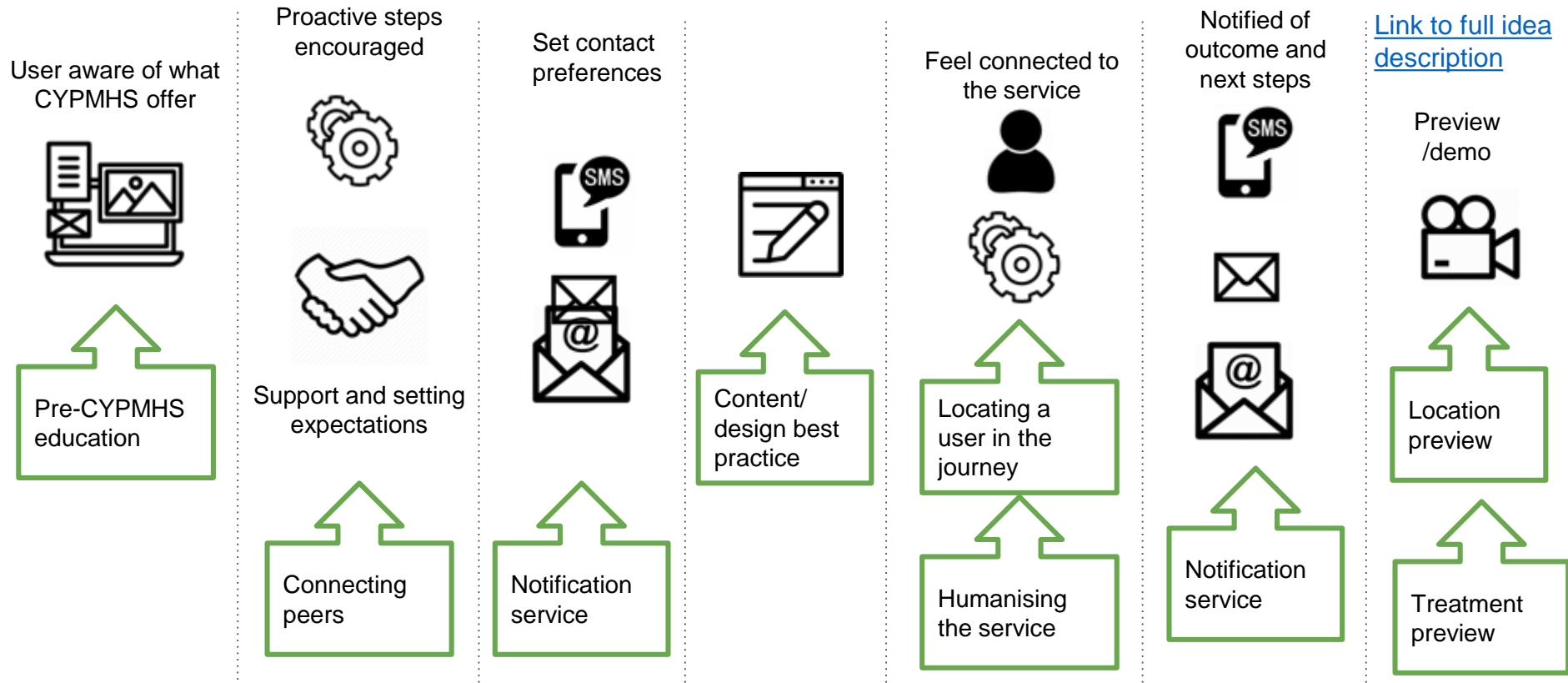
Since 2019, NHSX has been working with NHSEI to accelerate digital transformation within CYPMH services

- This work has involved testing and documenting new reusable service design approaches through work with local pilot NHS trusts.
- The longer term goal of this work is to develop a model for supporting the improvement and transformation of end to end services with more NHS trusts.
- This has become increasingly important for supporting local services in their response to the COVID-19 pandemic and in the inclusive restoration of services, building back better.





...and defined a target 'end state' for a digitally enabled pathway from referral to first appointment



Then in Alpha, we funded, supported and worked in partnership with local NHS trusts to test these ideas in reality

North West Boroughs: Support people with eating disorders, including online therapy and supportive information.

Alder Hey: Review existing pathways and identify areas for change. **With NHSX support**

Worcestershire: Development of standard outcome measures for digital CYPMH services.

Oxford: Evaluation of the impact of using guided self help via Sleepio as waiting list initiative.

Swindon: Series of films to be used across the UK

Camden: Development of their digital offering via their CAMSDEN website.

Oxleas: Virtual support to young people, such as content, video or apps. **With NHSX support.**

Surrey and Borders: Digital service for self-referral integrated with GP and MH EPR systems and online referral tracking. **With embedded NHSX team.**





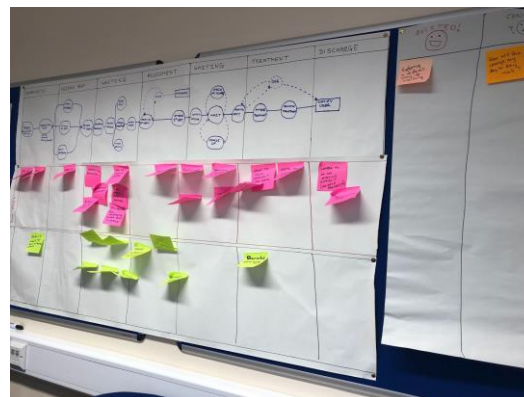
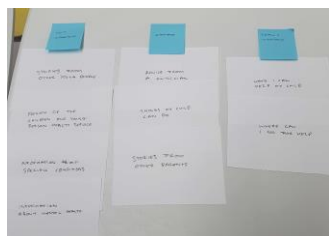
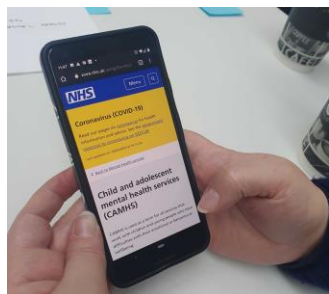
User research and co-design

The team carried out user research and co-design sessions throughout the 8 weeks on site. Some of these were individually and as a group.

This included work with children, young people, their families, professionals, GPs and partner organisations

These interviews were to test the needs as well as the prototyped solution with end users.

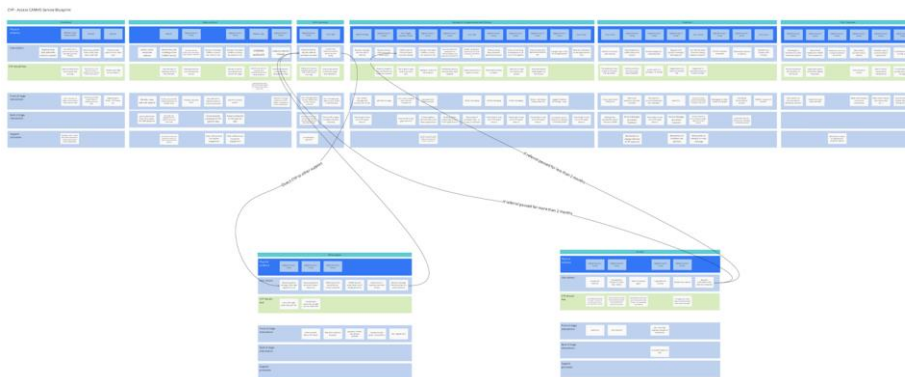
The team also worked with stakeholders in the trust to show them ideas, ideate, challenge ideas.



	Awareness		Setting help				Make request for help				Visiting			Get help	
Steps															
Desired state	I'm concerned about my child	Easily find the right place online to get help	Determine online the level of my CYP's need - crisis, treatment, other help	Explain treatment options and timescales	Enter my details, my CYP's details and why I am contacting CYPHS	Choose preferred communication method	Create Account	Receive notification of referral info received	Given appointment date & info about the consultation	Receive advice about how to help CYP before appointment	Updated via health of progress, any a treatment charges	Be able to change or cancel referral / appointment	Consultation appointment with Clinician	Forward plan agreed	
Outcomes		Child it was easy to find. Reassured I am in the right place	Reassured by friendly and welcoming content that my CYP will be treated well	Able to make decision whether to continue, referred by options and likely wait times	Method of reporting details is easy, clear instructions		Reporting that I will be able to check progress within the account	Encouraged that my submission has effectively been received and that it will be attended to			Child that we've not been forgotten. Reassured that something's happening				
			Direct people out of CYPHS if CYPHS does not meet need	Direct people out of CYPHS if question if does not meet need		Digital by default, to enable Go-Apply	Account enables 'your space where professionals, therapist, CYP etc can collaborate	Initial direct contact to CYP start of their 'parent-referred' journey	Info provided to child directly too. Video, map of location,	Updates could be received additional info from teacher, mental additional info from GP	Child has ability to cancel appointment themselves too				

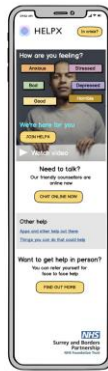
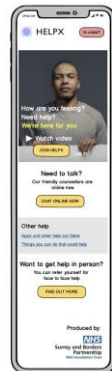
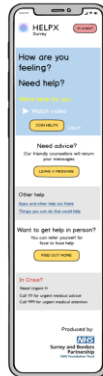
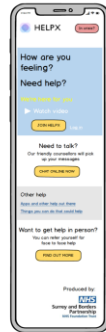
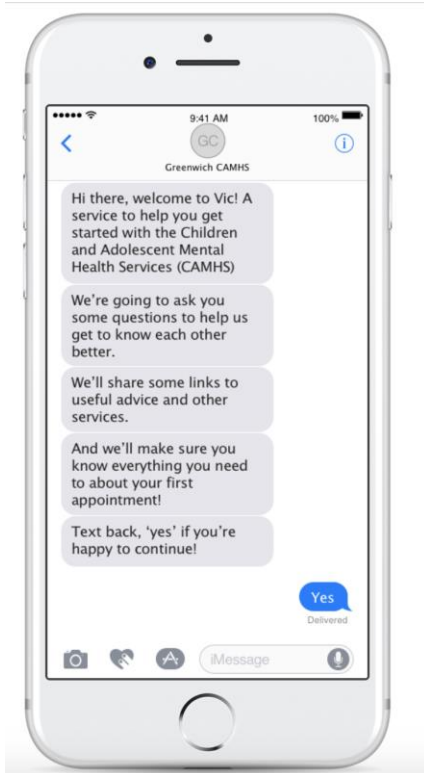
Journey maps

The team created journey maps for CYPs and parents to show how the current service operates and find areas of improvement and what the future state could look like.



The service blueprint

The service blueprint illustrates how the future journey for accessing the service will function and be supported. The blueprint describes the steps a CYP will make while accessing services, including the digital and physical touchpoints they will use during their journey and suggestions for how the service elements they encounter are supported by the trust, technology and other resources.



Prototypes

We created prototypes and clickable demos to get rapid user feedback and to iterate quickly.

1 For an SMS service that would:

- Ask questions related to assessment, learning more about the young person ahead of the appointment
- Give daily messages to track progress
- Providing useful information and resources over the waiting period

2 Parent request a call back from a mental health professional to reduce parent's wait time and CAMHS-SPA backlog

3 Parent entry point for referrals and access to other support methods and resources

4 CYP self-referral entry point

5 Service for CYPs to understand their point in the referral journey and access other resources and support

The learning from work on the ground with these trusts has contributed to a proposed service model which we are developing further

Vision as a model for doing

Hypotheses to test

Measures for impact

Patterns to build with

Design principles to guide decisions

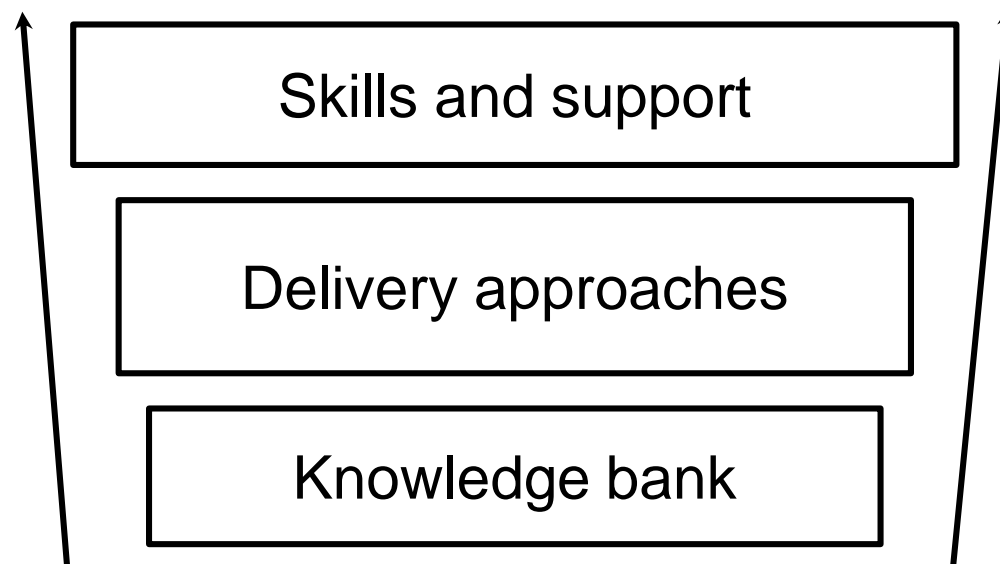
Prototyping to make ideas, concepts and ways of working real

Team & leadership development to support change

Engagement to communicate with stakeholders

3. Testing our next steps with you and opportunities to work together

We are planning to build out and scale these approaches for CYP MH digital transformation



Discussion

From your experience of leading transformational change and spreading best practice across children and young people mental health services:

- How can we most effectively engage with services through this work?
 - Which roles/members of staff should we be targeting?
 - What is the role of STPs/ICSs in your view?
- Of the resources and approaches we have talked through, which aspects do you think sound most valuable? What are the gaps or limitations?
- What is an effective way for us to roll out skills development and support for services?

Thank you for listening and contributing your thoughts.

If you would like to be involved with this work or to find out more, please contact:

- Nadia Yegorova-Johnstone, Programme Manager, CYP MH Team, NHSEI, nadia.yegorova-johnstone@nhs.net
- Emma Storey, Project Manager, Digital Mental Health, NHSEI, emma.storey@nhs.net

Questions and reflections



- Please insert any questions or reflections you have in the chat box.



Mentimeter

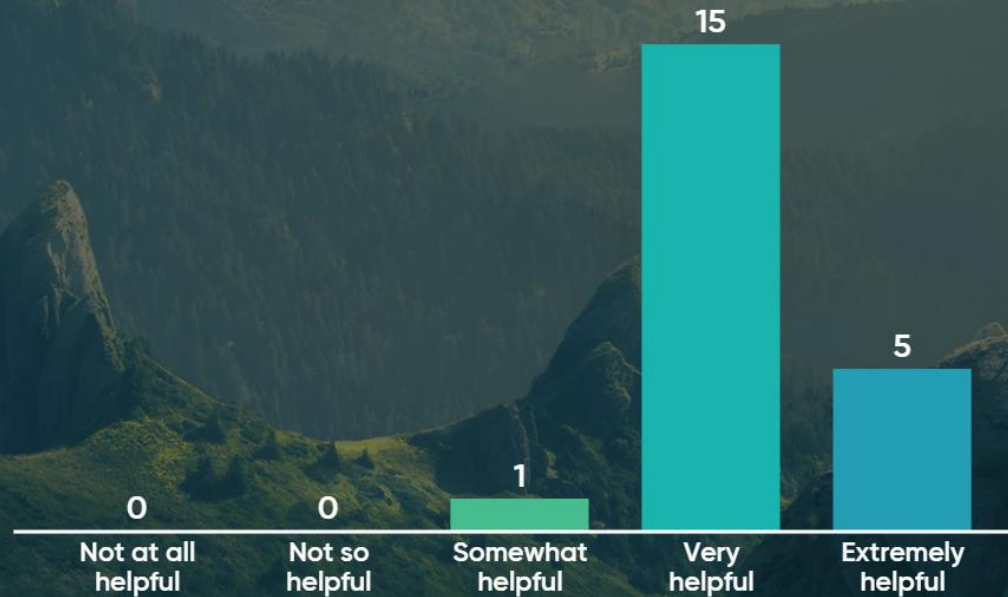


- Please visit www.menti.com and insert the code: **44 98 89**



Mentimeter

How helpful was this webinar for you?



Are there any particular areas that were helpful?

Level Up

Hearing examples

Learning about the Level Up work

Being able to hear updates and chat/raise issues

The last presentation - opportunities

Outcome measures

Hearing how some of the other teams dealt with the trans into digital work

Really great to hear about implementation stories, hearing about level up was great. Digital stuff also great

I thought all the presentations were helpful!

discussion around how we can implement technology effectively

Are there any particular areas that were helpful?

digital work

Level Up's detail was great and hearing more about the help that's coming from NHSE/X is really encouraging

That there will be a recording available! :)

about level up was great. Digital stuff also grrat

Outcomes related information

Level Up transition and lovely feedback - this really does work

discussion around how we can implement technology effectively into our work and give us tips around this. Also the level up work is amazing

Being mindful of diversity issues. We have to have a blended approach to our work. f2f still v important

Are there any areas that could be improved?

I like the idea of breakouts around topics with quick tasks and discussion

It would be good to start mapping what is happening in different ICS areas - lessons learned and new projects

Digital outcomes and CORC

Unsure, this was really enjoyable

N/A I would like to see the network meet regularly to track the progress. Happy for webinars to be extended and for break outs

Really good presentations, a bit of interaction and discussion would be good

Would prefer this to be on the Microsoft Teams platform! :)

Not that I can think of, well designed and informative in a new way of working for everyone

Maybe it was my Zoom settings but not able to see who else in the meeting which would have been

Are there any areas that could be improved?

Digital outcomes and CORC session would be very helpful as this is a major issue for our service too.

Really good presentations, a bit of interaction and discussion would be good

Maybe it was my Zoom settings but not able to see who else in the meeting which would have been helpful.

Session on how to improve engagement with users who use/offered virtual session in place of face to face

For more information: i-THRIVE



www.implementingthrive.org

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