i-THRIVE

The i-THRIVE programme aims to improve children and young people's mental health outcomes.

This is delivered by supporting localities to implement the THRIVE Framework (Wolpert, et al 2016) through their CAMHS transformation and service improvement programmes.

The i-THRIVE Community of Practice has been created and includes organisations who are using the THRIVE framework as the basis of their CAMHS transformation and improvement programmes. 30% of the young people in England live within a locality that is a member of the i-THRIVE Community of Practice.

i-THRIVE is delivered through a partnership between the Anna Freud National Centre for Children and Families, the Tavistock and Portman NHS Foundation Trust, the Dartmouth Institute for Health Policy and Clinical Practice and UCLPartners.

i-THRIVE is enabling improvement on a national scale with over 40 sites across the country sharing learning about the implementation of THRIVE

Creation of the Community of Practice was made possible by the NHS Innovation Accelerator (NIA) programme, funded by NHSEngland and The Health Foundation and supported by UCLPartners. By successfully achieving NIA status, i-THRIVE became one of 17 innovations that have been identified for scaling up in the NHS, which required demonstration of evidence of the potential benefit for patients and the health service and robust evidence of economic value.

The approach initially included a competition for 10 initial NIA accelerator sites who would begin to implement THRIVE in their localities from October 2015 onwards.

The 10 national accelerator sites and key areas of focus are:
- **Bexley** ('thriving', shared decision making, 'getting advice and signposting' and 'getting help').
- **Cambridgeshire and Peterborough** ('thriving', the whole-system approach, 'getting advice and signposting').
- **Camden** ('getting risk support' and shared decision making)
- **ELFT;** including **Bedfordshire, Luton and Tower Hamlets** ('getting advice and signposting').
- **Hertfordshire** (whole system engagement, reducing waiting time, 'getting risk support')
- **Manchester and Salford** (increasing access to services, creating a shared understanding of available services)
- **Stockport** (integration of services, strengthening joint CAMHS commissioning between CCG, LA and schools)
- **Waltham Forest** ('getting advice' and 'getting risk support')

These national Accelerator Sites across England are working collaboratively to implement THRIVE as part of their CAMHS transformation plans.

The i-THRIVE Community of Practice has now grown from the original ten national accelerator sites in October 2015 to 44 CCG areas.

There are currently 225 individuals in the Community of Practice receiving regular updates about THRIVE, the implementation of THRIVE and sharing learning about local implementation. There are a further 200 individuals in the Community of Interest who receive updates on the progress of i-THRIVE.

Overall, around 30% of children and young people in England live within a locality that is a member of the i-THRIVE Community of Practice.

i-THRIVE has successfully secured a number of grants with its Community of Practice members, including The Health Foundation Scaling Up Improvement, The Health Foundation Innovating for Improvement, Health Education England Innovation Award, Health Education North Central London Education grant and UCLPartners Start Up Funding. These are enabling the development of education and training programmes, the development of shared decision making tools and the i-THRIVE Implementation Toolkit, plus the full evaluation of the implementation of the i-THRIVE model across four localities across North East London Foundation Trust.

i-THRIVE is the implementation of THRIVE – a conceptual framework for child and adolescent mental health services

THRIVE: a conceptual framework for CAMHS was developed by a collaboration of authors from the Anna Freud National Centre for Children and Families and the Tavistock and Portman NHS Foundation Trust.

The THRIVE framework is an integrated, person centred and needs led approach to delivering mental health services for children, young people and families. It proposes to replace the tiered model of children's mental health care with a conceptualisation of a whole system approach that addresses the key issues in children's mental health care and is aligned to emerging thinking on payment systems, quality improvement and performance management. It conceptualises need in five categories; Thriving, Getting Advice and Signposting, Getting Help, Getting More Help and Getting Risk Support. Emphasis is placed on prevention and the promotion of mental health and wellbeing and tries to draw a clearer distinction between treatments on the one hand and support on the other. Children, young people and their families are empowered through active involvement in decisions about their care through shared decision making, which is fundamental to the approach.

THRIVE Elaborated Second Edition (Wolpert et al, 2016) can be downloaded here: THRIVE Elaborated Second Edition

Further information can be found here: http://www.annafreud.org/service-improvement/service-improvement-resources/thrive/

i-THRIVE

i-THRIVE is the implementation of the THRIVE conceptual framework, translating the THRIVE core principles into models of care that fit local contexts. Key to this process is the use of evidence based approaches to implementation.

i-THRIVE supports the provision of services using a whole-system, or place-based, approach to the delivery of child mental health services. This involves taking a population approach to delivery of care; enabling integration across health, care, education and third sectors, and a central focus on delivering improved outcomes for children and young people.

Choice and personalisation of care are core values and these are delivered in part through systematic implementation of shared decision making. To support this, a range of validated measures, tools and educational programmes have been developed by partners and are included in the i-THRIVE Implementation Toolkit, including the CollaboRATE measure, Option Grids and shared decision making training.

i-THRIVE involves:
- Implementing a novel approach to assessment using shared decision making that works with young people and their families to identify their needs, determine which THRIVE group they fit into and set goals, then decide on their preferred location and modality of care.
- Using validated tools to support implementation of shared decision making.
- Creating a comprehensive and integrated network of community providers, facilitated by the Youth Wellbeing Directory, a digital signposting service.
- Implementation of local peer-support networks.
- Utilising goal based measures.
- Shared outcomes measurement across health, care, education and the voluntary sector.
- Implementing a multi-agency (health, social care, criminal justice system etc) approach to risk management and the use of THRIVE plans identifying a single individual and agency as responsible for coordinating care.

The i-THRIVE Programme includes various elements to support sites with implementation:

i-THRIVE Community of Practice: A learning community who share best practice and progress in implementing the model. They meet three times a year to learn from each other as well as to access support and development from members of the i-THRIVE team and latest thinking from the THRIVE authors.

The i-THRIVE national programme team supports sites locally with implementation and engagement events, the delivery of workshops, coaching and advice to tackle barriers to implementation and support for implementation planning. The i-THRIVE Community of Practice is now spreading to Northern Ireland and Scotland, with the THRIVE Authors and i-THRIVE national team supporting organisations to develop an approach to implementing THRIVE.

i-THRIVE Academy: Funded by Health Education England, the Academy supports sites by providing education and training for those leading on their local transformation, as well as through developing a range of training modules specifically helpful for sites implementing THRIVE. It identifies key competencies required to deliver care in a THRIVE-like way and translates these into learning and development modules and resources.

The development modules are: (1) Shared Decision Making; (2) Getting Advice – Assessment and Signposting; (3) Risk Support – Managing Risk across the System; (4) When to Stop Treatment – Building Confidence in Letting Go. Pilots of the four Academy modules are running across March and April 2017 in three sites with 300 spaces for professionals from across the system.

i-THRIVE Implementation Toolkit: An evidence based set of tools to assist sites with service redesign and the implementation of THRIVE. The toolkit includes implementation project plans, baselining tools, gap analysis and prioritisation support, workshop plans to introduce i-THRIVE to clinicians and to lead them through the re-design process, and outcome and measurement frameworks.

i-THRIVE Illustrated: Key to successful implementation is effective local adaptation of the core principles of THRIVE into existing models of care. Examples of how sites and have taken the THRIVE conceptual framework and translated it into a local model of care are shared through i-THRIVE Illustrated. The experiences and learnings from these sites will provide guidance for other sites and localities also looking to adopt i-THRIVE.

i-THRIVE Evaluation: Includes the evaluation of the impact of implementing THRIVE within localities, as well as the effectiveness of the translation and implementation process.
A full scale evaluation funded by NIHR CLAHRC North Thames began in February 2017 to assess the impact of implementing THRIVE in the ten accelerator sites. This will be complete by the end of December 2018. The i-THRIVE Evaluation aims are:
- To evaluate whether i-THRIVE implementation can be replicated at other sites
- To evaluate the effects of implementation of i-THRIVE when compared to sites without i-THRIVE
- To evaluate whether more effective implementation of i-THRIVE is associated with greater improvements in CAMHS services

Evaluation also includes a full independent evaluation across four localities in North East London Foundation Trust through the Scaling Up Improvement grant awarded by The Health Foundation.

Annual baselining/benchmarking for all Community of Practice members to demonstrate their improvements as a result of using the approach is available through the THRIVE Assessment Tool and further tools to aid evaluation are in development to help sites to capture the impact of THRIVE and the implementation methods. The impact on health outcomes, patient experience, access, waiting times, patient choice and engagement with services are all included, as well as frameworks for evaluating successful implementation.

Expected impact of the implementation of THRIVE

We anticipate the following impact as a result of the implementation of THRIVE as a local model of care:
- Effective signposting will increase use of community services, self-care and peer-support networks
- We expect to increase the proportion of young people accessing CAMHS with higher proportional improvement in vulnerable groups due to outreach and the location and accessibility of assessment services (primary care, community and schools)

- Waiting times will reduce
- The mode number of contacts of services will relate better to need
- Engagement with services will improve, with young people being involved in co-designing services, their care and in peer-support networks
- CollaboRATE measures the quality of the decision making process, as well as whether the decision is subsequently implemented; both of which we would expect to improve. As a result, patient experience measures will also improve
- Routine measurement of clinical outcomes will improve and there will be an improvement in the use of goal based measures
- Costs of CAMHS services will not be reduced, but efficiency will improve by increased throughput

The NIHR CLAHRC North Thames funded evaluation of i-THRIVE is expected to be complete by the end of 2018.

How i-THRIVE supports the delivery of national strategic objectives within CAMHS and Local Transformation Plans

i-THRIVE and the THRIVE framework have been developed to align with and to support established system transformation and quality improvement methodology.

i-THRIVE encapsulates many of the key strategic requirements for delivering CAMHS over the next few years. The NHS Five Year Forward View emphasises services being person-centered, the importance of early intervention, taking a whole system approach and enabling self-care, all of which are core to the THRIVE framework and in the delivery of the i-THRIVE programme.

The i-THRIVE model is aligned to emerging tariff payments and is identified within Future in Mind as a suggested model of care.

i-THRIVE has been developed drawing on the experience of CYP IAPT and CAPA, building on rather than replacing the actions and themes identified in those programmes.

To find out more about i-THRIVE please contact the national programme team:

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If you are interested in joining the i-THRIVE Community of Practice or would like to find out more about how it could support you and your team please contact Ilse Lee, i-THRIVE Senior Research Assistant at ilse.lee@annafreud.org.

Further information about i-THRIVE and examples of successful implementation in sites can be found at www.implementingthrive.org. For the latest news and updates you can also follow us on Twitter: @iTHRIVEinfo.