



Humber and North Yorkshire  
Health and Care Partnership

# Humber and North Yorkshire Health and Care Partnership Mental Health, Learning Disabilities and Autism Collaborative Programme

Annual Report  
2021-22



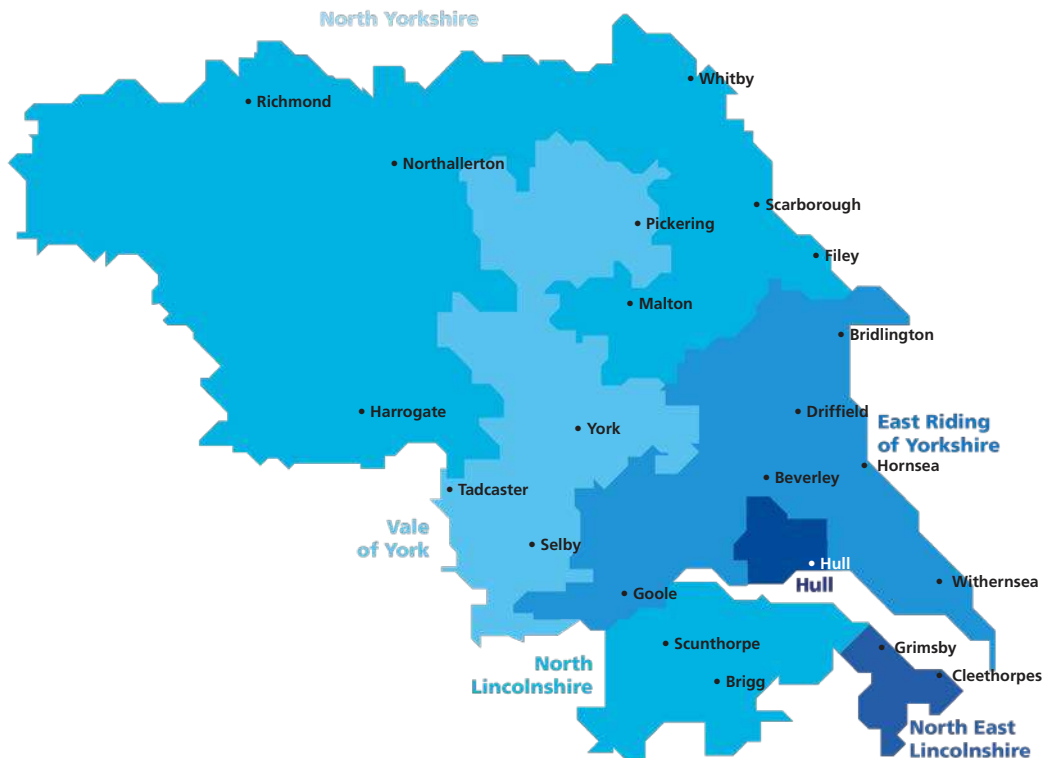


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## About Us



Humber and North Yorkshire Health and Care Partnership is an Integrated Care System (ICS) of organisations that are responsible for planning, paying for and providing health care services. The area we serve comprises of six local 'places': Hull, East Riding, North Lincolnshire, North East Lincolnshire, North Yorkshire and Vale of York. We serve a population of 1.7 million people, all with different health and care needs.

Our partnership aims to join up services to better support our population and make the best use of the resources we have available. Through this approach we are now able to plan collaboratively across our six local places to ensure that Mental Health, Learning Disabilities and Autism services are meeting the needs of our populations, are available to all who need them and that investment decisions are aligned to longer term strategic goals, supported by evidence-based needs.

These organisations, however, only represent part of the health and care system across our area. Across Humber and North Yorkshire there are around 230 GP practices, 550 residential care homes, 10 hospices, 180 home care companies and thousands of voluntary and community sector organisations all helping to keep our local people well. We need to all work together to provide the best services for our local populations.

We would like to thank all our partner organisations across Humber and North Yorkshire, including our provider; Local Authorities; Voluntary, Community and Social Enterprise organisations; and colleagues within our six local 'Places' for their continued hard work in delivering care to the people in our area, and their support in producing this report.



## Introduction



**Michele Moran**

**Chief Executive, Humber Teaching NHS Foundation Trust; Board Member for Mental Health, Learning Disabilities and Autism, Humber and North Yorkshire Integrated Care Board**

For a number of years now, health and care organisations working in the Humber and North Yorkshire patch to deliver Mental Health, Learning Disabilities and Autism services have been working increasingly closer together. Through the development of our emerging Integrated Care Board and our collaborative programme of work, we have taken this approach even further throughout 2021/22.

2021/22 has been another challenging year for the health and care sector, as we continue to respond to the challenges of the Covid-19 pandemic, drive to improve our services and support our populations and staff in relation to mental health, learning disabilities and autism.

We are extremely proud of several successes achieved throughout 2021/22. You can learn more about our priority workstreams later in this document, but some key achievements are highlighted below.

- **Children and Young People's framework for integrated care** - Following a successful expression of interest to NHS England, Humber and North Yorkshire Integrated Care System became one of 10 national vanguards sites to secure funding for a 10-year programme to develop a Children and Young People's Framework for Integrated Care. The work is a system approach to all partners working with children and young people, clinical and non-clinical and aims to provide a consistent approach to vulnerable young people ensuring they are not retraumatised. The aim is to get the system approach right for trauma informed care and one of the impacts will be to reduce young people involved in the criminal justice system.
- **Suicide Prevention** - Despite the pandemic, we have found a way of supporting those who have been bereaved or affected by a suicide through the development and delivery of a new 'postvention' service, and additionally we have become one of the only areas in the country to evaluate the impact of this. Suicide rates in Yorkshire and the Humber reduced significantly in 2020.



- **Maternal Mental Health Service** - We have implemented a new maternal mental health service that will deliver an integrated psychologically led service for women and families with moderate to severe or complex mental health difficulties relating to maternity context/experience. This approach to maternal mental health care will improve knowledge and confidence within the pathway, and deliver evidence based mental health interventions for women experiencing baby loss, those affected by IVF or women who are separated from their babies at birth due to court proceedings. Previously there was no dedicated specialist support in the patch for this cohort of patients. Women will be identified earlier and able to access support in a timely way. This will lead to reduced trauma symptoms, post-traumatic stress disorder, and anxiety during future pregnancies, leading to improved outcomes for both mother and baby and improved relationships within the family.
- **Learning Disabilities and Autism** - since the remit of the Collaborative Programme expanded to include Learning Disabilities and Autism there has been a detailed review of the Learning Disabilities Transforming Care Partnership. This will provide more opportunities to join up care for people with learning disabilities and autism.
- **Community Mental Health** - Our programme continues to develop and further funding has been secured to support work linking community mental health services closely to other community services, such as GPs, social care and therapy services as part of the "Primary Care Network" approach.
- **Resilience Hub** - The team have provided care for over 1500 health and care staff, volunteers and immediate family members as well as supporting over 1000 people within teams through team-based support and training.
- We have established **24/7 open access telephone support** implemented for people experiencing mental health crisis, enabling rapid access to support and advice needed.
- We are also very proud to say that we have been working with the NHS Leadership Academy and have hosted several graduate management trainees within our programme, so are taking an active role around investing in the future of our NHS workforce.

Mental health is now rightly at the forefront of the health and care sector's efforts to maintain the health and wellbeing of the people we serve and we will continue to work together to make the best use of the collective resources available to our system, through its partners, to support delivery of not only the national objectives but also the things that we know will make a difference to our local populations moving into 2022/23 and beyond.





## Our Priority Workstreams



### Learning Disability and Autism

Work continued throughout 2021-22, to ensure that we achieved our set priorities. As part of the NHS response to the Safeguarding Adults Review (SAR) concerning the deaths of Joanna, Jon and Ben at Cawston Park, a national review confirmed by Claire Murdoch, National Director for Mental Health, was required to be undertaken to check the safety and wellbeing of all people with a learning disability and autistic people who are being cared for in a mental health inpatient setting.

The partnership, with dedicated project support from an NHS graduate management trainee, established an oversight and assurance panel to review all the people to assure itself that they were safe and well, or that appropriate measures were taken if there were concerns.

- 68 reviews were completed
- 64 adults
- 4 children and young people

17 review panels took place between January and February, and an additional 3 reassurance panels were arranged for those cases that the panel rated "as not at all confident" in the safety and wellbeing of the individual.

A national action plan is being developed for 22/23 for ICBs to follow up on thematic reviews.

#### Successes 2021/22

- A new dedicated Programme Lead has been appointed
- The ICS hit its target for the Learning Disability Annual Health Checks in 2021/22
- Work continued to reach targets to support discharges from inpatient settings
- Across the Humber and North Yorkshire footprint effective dynamic support registers are in place for adults, children and young people.
- Relaunching of the Learning Disabilities and Autism steering group

#### Priorities 2022/23

- There will be a continued focus on inpatient discharges and reconfiguration
- There will be a focus on the delivery of the Oliver McGowan Training
- There will be a focus on transition
- There will be a continued focus on the Safety and Wellbeing reviews in 2023



## Children and Young People's Mental Health

### Successes 2021/22

- Selected as one of 10 national vanguard sites to develop and deliver the 10 year system wide Children and Young People's Trauma Informed Care (TIC) Programme to provide early intervention and support for children and young people who are vulnerable or at high risk.
- Trained 150 multi-agency staff across our partnership in Trauma Informed Care
- Successfully worked with partners at place to establish additional NHSE funded Mental Health Support Teams in Schools to improve early intervention and prevention.
- Developed an ICS wide 3 year Children and Young People's Mental Health Strategic plan

Over the last year we have expanded our Children and Young People's Mental Health Steering Group to include a wider range of partners across our ICS including Public Health and Children's Services in Local Authorities and VCSEs, as well as continuing to work with health providers, strategic health leads at place and our specialist provider collaborative. This group has led on the development of a 3-year Children and Young People's Mental Health Strategic plan and annual work plan which builds on and complements place based plans and the plan by the specialist provider collaborative (inpatients). This plan will drive progress to address NHS Long Term Plan priorities as







well as Humber and North Yorkshire system wide priorities and challenges with the aim to ensure a robust offer across the Thrive Framework at place to deliver improved mental health outcomes for children and young people.

This will ensure an integrated system wide approach to service improvement and development. This is an inclusive plan with all priorities also applying to children and young people with learning disability and autism who require mental health services

The Strategic plan and this associated workplan will ensure our partnership can:

- Provide joined up care at right time in right setting (including online and face to face provision)
- Improve focus on population health management including predictive prevention and early intervention to help people stay healthy and reduce demand on clinical services.
- Reduce Mental Health Inequalities and impact of poor health on wider outcomes
- Address unmet need and local variations
- Promote closer working, collaboration, and co-operation with partners who support children and young people and families to ensure more cohesive, and streamlined care is provided.
- Ensure engagement and co-production with children and young people with lived experience is at the heart of every process

### **Priorities for 22/23**

To create a robust offer across the Thrive Framework at place, to deliver improved mental health outcomes for children and young people, which includes:

- improved prevention and early intervention to help people stay healthy and reduce demand on clinical services.







- Improved/expanded access to Mental Health services for those who need them
- Systems approach to Trauma Informed Care
- Effective management of risk
- Improved engagement and coproduction with children and young people
- Improved workforce development

Following the pandemic, we have seen an increase in mental health issues for children and young people across the system with both increased levels of need and acuity for key issues, such as eating disorders, as well as new emerging issues such as anxiety related school-based avoidance and Avoidant/Restrictive Food Intake Disorder (ARFID).

We are working with partners at place to address these issues and priorities in a number of ways, including:

- Working with partners at place to ensure new and established Mental Health Support Teams in schools are developed, mobilised, and delivered effectively and meet local need
- Reviewing and further developing effective early intervention pathways/services to address key children and young people's mental health issues at the earliest opportunity through effective support for lower-level mental health presentations and reduce escalation/crisis.
- Improving clarity of thresholds/pathways for professionals as well as children and young people and parents/carers – graduated response for support and development of consistent no wrong door model
- Establishing a task and finish group to improve processes to ensure seamless transition from children and young people's to adult services – needs led not age led
- Establishing children and young people's Mental Health Primary Care Integration pilots to test and support improved service integration, care navigation and access to appropriate mental health support for children and young people presenting at primary care settings.
- Development of a children and young people's data dashboard – this will develop and embed routine performance reporting from place-based providers which builds on the current NHS Long Term Plan performance targets to provide a clear picture of successes and challenges by service and by pathway including outputs, outcomes and waiting times
- Digital scoping of alternatives to face-to-face models of support to provide a blended offer moving forward building on the learning from the pandemics. This includes consultation and engagement with children and young people, and families.
- Establishing a task and finish group to develop improved joint packages of care between health and social care to prevent admission to inpatient units (where possible) and prevent delayed discharge.
- Coordinating the development of a forward plan to reduce children and young people's admission to acute paediatric wards for Mental Health issues to implement effective solutions to address the needs and challenges



## Children and Young People's Trauma Informed Care Programme



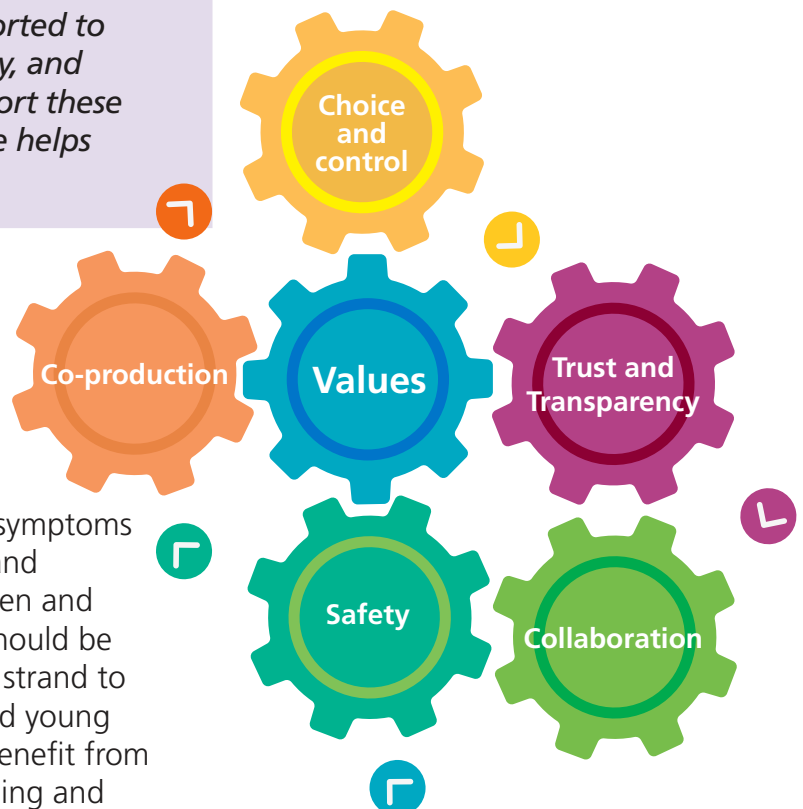
Following our successful bid to NHSE in 2021, Humber and North Yorkshire has become one of 10 national vanguard sites developing a system wide 10 year Children and Young People's Trauma Informed Care Programme.

### *Our Children and Young People's Trauma Informed Care Partnership Pledge*

*"We will work collaboratively to ensure that all professionals working across the system with children and young people who have experienced trauma, can be supported to respond appropriately, consistently, and compassionately, so that the support these children and young people receive helps them to thrive."*

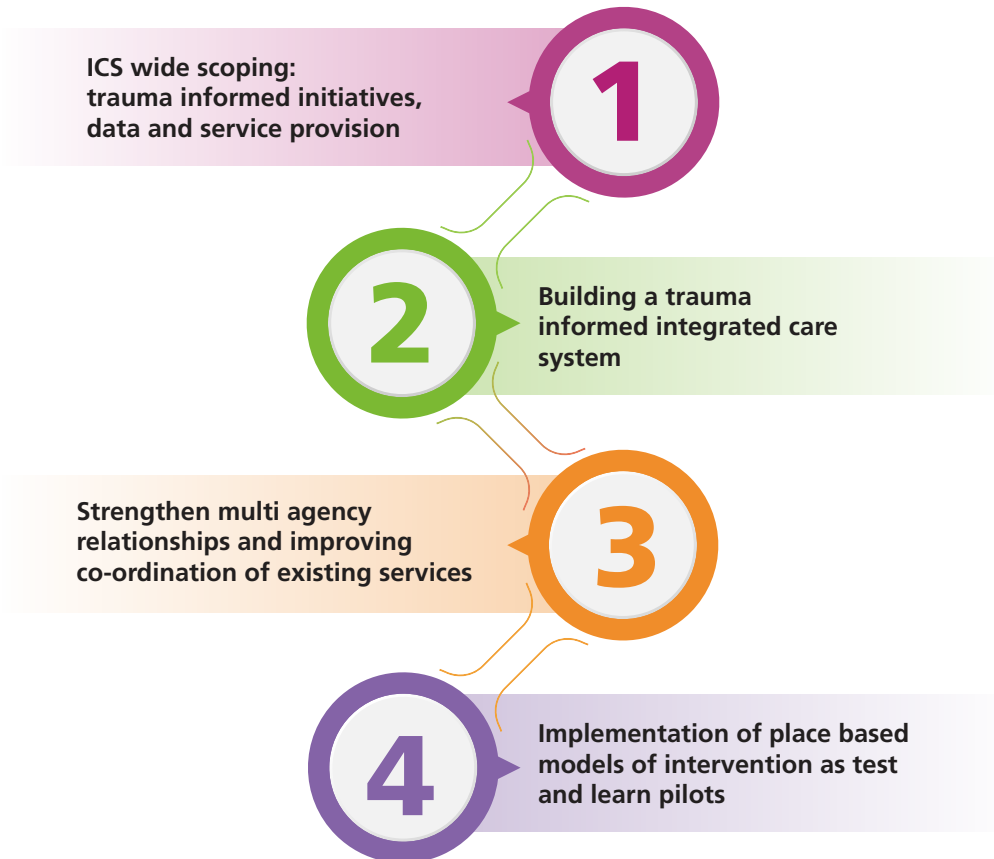
### **Our Values**

The purpose of our underpinning values is to ensure that all professionals involved in this programme of work recognise and respond appropriately to signs and symptoms of trauma, resist re-traumatisation and acknowledge the differences between and within communities. These values should be embedded within each programme strand to support a culture where children and young people, (and their parents/carers), benefit from and are actively engaged in developing and improving services.





Our Children and Young People's Trauma Informed Care Programme is a collaboration of partners from across our six places within Humber and North Yorkshire. The model aims to build on existing infrastructure to strengthen pathways and collaborative working while testing new models of delivery to improve outcomes. To meet the objectives of the framework, our phased implementation will focus and build on the following four key areas:



The programme will:

- Work collaboratively with partners to support organisations to move from being Trauma Aware through to being fully Trauma Informed.
- Build, embed and sustain a Trauma Informed Integrated Care System (ICS) and develop a consistent joint approach and common language across the ICS.
- Develop 'communities of practice' to enable the sharing of good practice and learn and contribute to the development of our Trauma Informed culture and partnership.
- Develop and design a tool kit and a knowledge and skills framework to recognise the range of roles that workers may have in relation to providing services to children and young people who have lived through traumatic experiences.
- Influence key strategic plans and documents across Humber and North Yorkshire Integrated Care System to explicitly name trauma – and the commitment to develop 'trauma informed practice'.
- Develop a training plan, informed by our scoping, to support the implementation of the knowledge and skills framework.

To deliver the programme, we have created the Children and Young People's Trauma Informed Care Partnership. This partnership will be made up of all statutory and non-statutory agencies and partners across Humber and North Yorkshire that are involved in the provision of services for children and young people with complex needs. As part of the developing governance model, an operational Steering Group and a Strategic Alliance have been established.



## Community Mental Health Transformation

The Community Mental Health Transformation Programme encourages public sector, voluntary and community and social enterprise organisations to work together with local people who have experience of mental illness (including carers and families), to transform how people with serious mental illness access services in their local communities and receive care and support. The transformation of community mental health services programme is now in its second year across Humber and North Yorkshire.

Through strong partnership working and an inclusive and co-produced approach, we have successfully progressed our improvement plans linked to transformation of community mental health services, and this includes the development of new models to deliver Severe Mental Illness (SMI) Physical health checks and Individual Placement Support.

### Successes 2021/22

- Enhanced partnership working including establishing robust links with colleagues across the local authority, Voluntary, Community and Social Enterprise Sector, Primary and Secondary Care.
- New specialist roles – across Adult Eating Disorders, Early Intervention in Psychosis, Complex Emotional Needs (Personality Disorder Services)
- Investing in the Voluntary, Community and Social Enterprise Sector (VCSE) – new investment to create VCSE Alliances and new community supporting roles including Peer Support, Involvement Workers, Social Prescribers, Mental Health Coaches etc.
- Stronger integration between Primary and Secondary Care – the recruitment of new jointly funded First Contact Mental Health Practitioners into most Primary Care Networks across Humber and North Yorkshire. These new roles have strengthened links across services, improved relationships, and increased access to mental health services, reducing waiting times and outcomes. They have also strengthened links with the VCSE, providing more and better options for people within their own communities.
- Stronger and closer working with Local Authorities – In Rotherham, Doncaster and South Humber, recruitment of a mental health housing navigator to offer ongoing support around homelessness issues and ongoing support to maintain a tenancy and liaise with housing providers. This role also helps reduce people from going into crisis as a result of pressures from landlords, who may have little knowledge of how mental health can affect an individual and the impact it has on various aspects of day-to-day living.
- 100% coverage within the Primary Care networks – Physical health checks for people with a Severe Mental Illness are conducted within GP practices demonstrating successful co-location and new roles now in place to help coordinate this approach.
- Mental health access function (Rotherham, Doncaster, and South Humber), has been transitioned into the primary care network. New ways of working include extended triage, initial outputs include reduced waits, improved transition between Primary Care and Secondary care. Increased support and management of patients in Primary Care, reducing pressure in secondary services.





- Workforce design including recruitment to new roles within Personality Disorder pathway and Early Intervention in Psychosis pathway (including psychology, therapy, and clinical support). We are exploring new roles and new ways to provide and commission a new transformed workforce including roles that work across the whole system.
- Rehabilitation – We have established an individual placement team (Rotherham, Doncaster, and South Humber) and Pathways to Recovery Teams (York) to support patients with mental health needs using evidence-based strategies regarding supported accommodation and to find and maintain employment as part of their wider recovery.
- Place Based Approach – Developed and matured a place-based approach to planning the transformed services involving stakeholders from across the whole system, including people with lived experience and carers.
- Community Mental Health Hubs – In York, we have designed and are now starting to prototype a new way to access and provide mental health services in the community. Similar developments are being designed across the whole ICS area.
- Lived Experience Director – New role (North Yorkshire and York) to consolidate the co-production agenda across the ICS and ensure that people with lived experience are at the centre of transforming services.

### **Priorities 2022/23**

- Further investment and development of Eating Disorder Services including new system-wide roles and services to support those waiting for services to begin.
- The continued development of new Community Mental Health Hubs across all areas, both physical and virtual.
- Development of clinical pathways and service models within community services which will include psychological therapy enhancements and links within care pathways.
- Further workforce development is a priority across the whole system with links to the psychological model.
- To start to tackle the challenge of lack of interoperability of information systems across the whole system.
- Integrate peer support workers with clear governance and support structures in place.
- Establish a Lived Experience Parliament (North Yorkshire and York) to further support the involvement and support to be involved for people with lived experience and their Carers.
- Continue the development of place-based planning and implementation of transformed services.
- Further Development of the First Contact Mental Health Practitioners including new Mental Health roles in Primary Care for example Mental Health Occupational Therapists, Mental Health Physiotherapists, Psychology Assistants, CAMHS Practitioners etc.



'I was very reluctant to get help for my mood as I didn't want to be in a service so was good to know it's at the surgery otherwise probably wouldn't have got help'

'The GP referred me to FCMHP after experiencing low mood, anxious feelings, feeling emotional, stress, feeling overwhelmed. Through her questioning/discussions with me, this enabled me to learn effective strategies to prevent/deal with how I was feeling. Reflections on my lifestyle then have created real change and I feel in such a better place.'



'Excellent Service.'

'It is great that they are in post and are making such a difference already... proving a great asset to ourselves'



'The FCMHP we have in post is really making a difference. A conversation about getting another one as soon as possible after April and whether or not we could have a third would be much appreciated'

'I can recognise when I need to do more for myself when these feelings creep back in. I now can see the value of putting me first rather than always other people/work/family etc. I cannot thank her enough for the help/ the strategies she has given me.'



'Made me feel at ease, professional and sorted everything out in record time.'

'One patient who had been especially anxious at first presentation particularly commented on the exercises you had given him, which he initially thought would not be beneficial. He now finds himself using the exercises on a daily basis and feels they have set him up for the future.'



People 'are all delighted that we are able to offer them such a prompt appointment (usually within a week of their first contact) and that they are able to choose for themselves between a telephone call or a face-to-face. Even if they choose a telephone appointment it's reassuring our patients are getting a 'real person' to speak to which makes a huge difference to how they cope with their problems.'



## Severe Mental Illness

Work continued throughout 2021-22 focussing on improving the delivery of physical health checks for people with a severe mental illness. The programme was successful in bidding for funding to run a remote monitoring project across the entire Humber and North Yorkshire footprint. There has been excellent engagement with this across all areas, with places sharing learning from successful models they have implemented. In East Riding, the Health Trainers pilot of health check delivery by social prescribers in partnership with primary care has seen a significant increase in the uptake of health checks, and a reduction in 'did not attend' (DNAs). Similarly, in North East Lincolnshire a dedicated team deliver the health checks primarily in the patient's own home, making it more accessible for all patients to receive.

### Successes 2021/22

- Successfully awarded funding for a remote monitoring project, delivering physical health checks with point of care testing devices
- Significantly increased the number of physical health checks delivered across the region. Delivery increased from 17% of the SMI register population at quarter 4 of 20/21, to 48% of the register at quarter 4 of 21/22.
- Set up a task and finish group looking at technology enabled physical health checks as part of the remote monitoring programme, and focussing on data quality and digital reporting solutions.

### Priorities 2022/23

- Continue into year 2 of the remote monitoring programme
- Expand delivery of physical health checks into residential homes in North East Lincolnshire
- Prioritise resolving the coding and data quality issues
- Meet national target of 7,523 annual physical health checks



## Resilience Hub

The Humber and North Yorkshire Resilience Hub launched in February 2021 to support all health, care and emergency service staff and their families. We offer a range of advice and support, working with individuals as well as teams to develop and promote personal resilience in a kind and supportive way, recognising the impact of not only the Covid-19 pandemic, but also prolonged periods of stress. We deliver:

- Individual psychological interventions
- Wellbeing plans
- Developed pathways of care
- Bespoke support to teams through trauma-informed facilitation, training, and reflective practice
- Support Groups (over 500 alumni so far) for example: bereavement, menopause and long covid (which was the first of its kind to be developed, nationally)
- Wellbeing webinars for example: work stress management and personal resilience self-compassion

## Successes 2021/22

- The team have provided care for over 1500 health and care staff, volunteers and immediate family members as well as supporting over 1000 people within teams through team-based support and training.
- 98% of staff who have used the service would recommend it to friends, families or colleagues, and the service is rated an average of 4.9 stars out of 5.
- The Hub have also developed and launched an App (HNY Our People) in collaboration with the Humber and North Yorkshire Health and Wellbeing Team as part of the Integrated Care Partnership. HNY Our People has had nearly 1000 downloads in its first 3 months. The App is designed to maintain and improve the wellbeing, physical and mental health of staff by providing a range of self-help materials and podcasts. A personal, digital wellness coach called 'Charley' can create a personalised wellness programme and help create small daily habits that can boost wellbeing.
- The Hub has also been nominated and commended in the Bright Ideas Awards and the Positive Practice in Mental Health awards.





### Service User Feedback:

93.5% of service users would rate the Hub service 5\* out of 5, and 98% of service users stated they would recommend the Hub to family, friends, or colleagues.

*I have had an extremely positive experience with the Hub, counselling etc. is not something I have engaged in previously, but I would definitely recommend the Hub. I don't feel as though I have been left without any support as I have been advised that I can return to the Hub should I need any further support. Thank you to all those involved in helping me to work through my grief and improve on my journey."*

*"I feel the help I have received has been vital to me getting better. Thank you."*

*"Thank you for being there for me in my darkest times."*

*I just want to say thank you for being there when I needed it most. For listening being attentive and helping me with very difficult decisions which have shaped my ideas about what I am able to achieve and to accept the things that I can't change. Thank you"*

*"A number of colleagues/friends have since referred themselves as I found it helpful and they were happier with a word of mouth recommendation. The speed with which I was helped was beneficial and makes you feel as a healthcare staff member that you are valued enough to be listened to."*

*"Valuable service and I feel comforted to know it is there and I can access it again if needed."*

*"Just all I can say is a great service with excellent and caring staff."*

*"Here when I didn't know where else to turn."*

*"I really have found this to be a bit of a life saver, and have really found the support I have received helpful."*

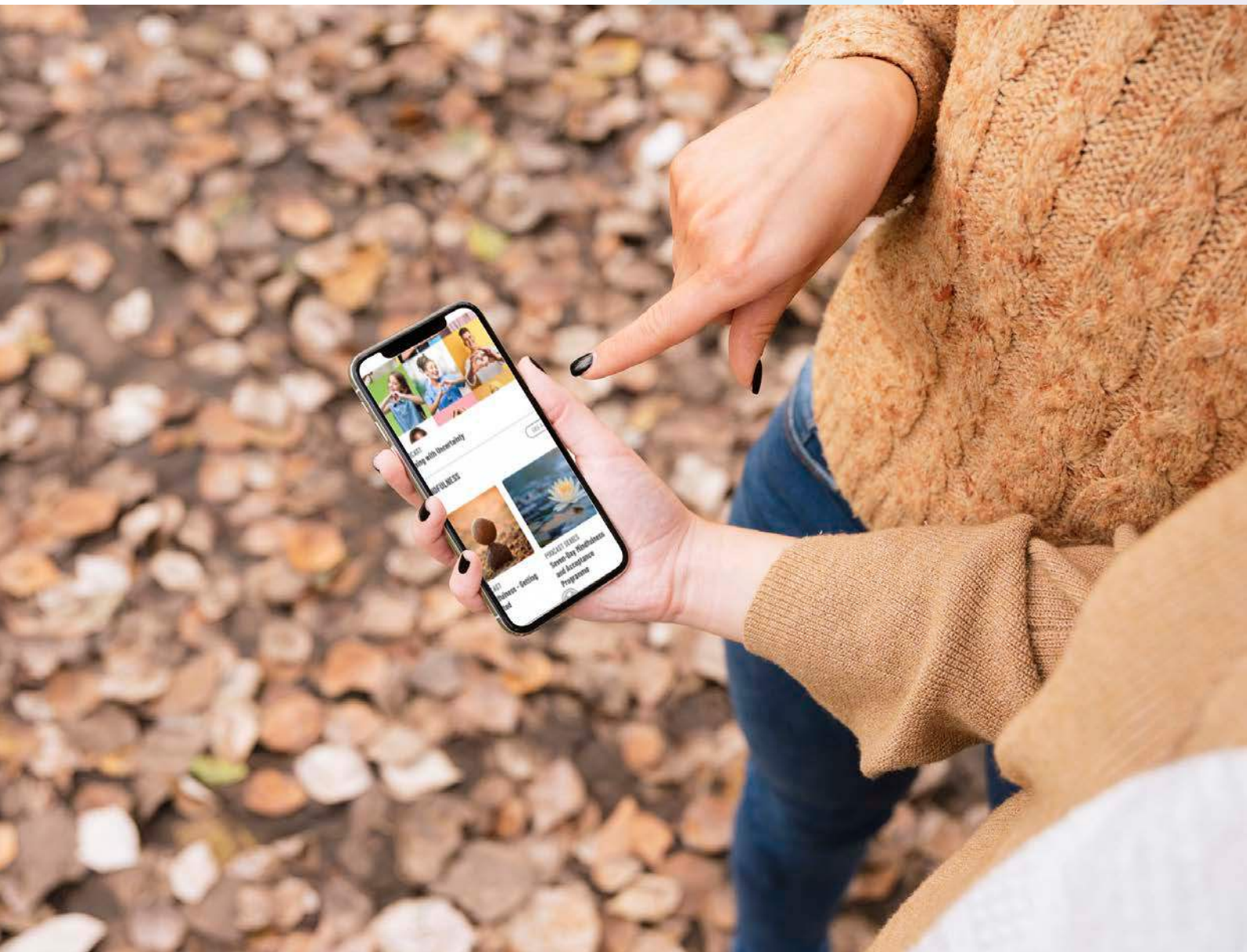
*"I will be eternally grateful for the support I had at a time when I felt very unwell. I will encourage others to access this service should they need it."*

*"I found the support group extremely helpful, I felt listened too, understood and I could also relate to others going through a similar journey."*



### Priorities 2022/23

- Launch of the Resilience Hub Staff Wellbeing Fund for the voluntary, community and social enterprise sector, enabling further collaboration across the region to increase mental health and wellbeing support to staff.
- Expansion of Trauma Informed Care workstream to develop further collaborations across region and increase availability of trauma-specific support for staff and their families. This is in accordance with NHS England guidance to provide critical incident response and coordination for psychological care.
- Continued development of Long Covid support for staff – through peer support programme and Long Covid Neurological care through cognitive rehabilitation. Sharing learning and expertise and continued collaboration with other Resilience Hubs, NHS England, Long Covid service to improve support available to staff within and beyond Humber and North Yorkshire.
- Increase Team Support and Leadership Support available to all health, care, and emergency service teams from Resilience Hub, working with organisations to create psychologically safe workplaces for all staff.







## Suicide Prevention



Reflecting on the last year, this programme has continued to develop and deliver much needed services to the Humber and North Yorkshire population, despite the continuing challenges of recovery following the pandemic. We recognise that Yorkshire and the Humber have some of the highest rates of suicides in both males and females in England, but we believe the work that has taken place has contributed to this reducing significantly in 2020, as evidenced by the Office of National Statistics.

Despite the pandemic, we have found a way of supporting those who have been bereaved or affected by a suicide through the development and delivery of a new 'postvention' service, and additionally we have become one of the only areas in the country to evaluate the impact of this. We could not have achieved this without the valuable input provided through engagement with people with lived experience, families, carers, clinicians, and the support of our partner organisations, all of which is central to the work we do.

We are delighted to have trained 19,000 people in how to spot the signs, speak about suicide, and signpost others to help and support through the #TalkSuicide training. Most importantly, the number of people accessing the training continues to grow, and we know that the more people that are trained, the more likely we are to save lives.

The programme has also strived to make sustainable changes and embed them into practice, such as real-time surveillance. This has been done collaboratively with partner organisations, ensuring that as a system we are able to quickly respond to a suicide, and support those that are left behind. The importance of this cannot be underestimated as we know that these loved ones are more likely to be at risk of suicidal thoughts themselves.



We need to celebrate the relationships, ideas and actions that have taken place with people with lived experience, our community, grass roots projects and local Voluntary, Community and Social Enterprise organisations which have influenced the programme as well as ensuring it stayed focused; listened to what people need to prevent suicides; and has endeavoured to set up groups and services in order to do just that.

### Successes 2021/22

- Receiving a High Sheriff Award
- Development of Emotional Wellbeing hub
- Development of Cluster and Contagion response
- Training 19,000 local people
- Shortlisted for Best Not for Profit, Working in Partnership at the HSJ Awards
- In 2020 Yorkshire and the Humber's suicide rates reduced significantly compared with 2019 (these were the only significant changes in English regions when comparing 2020 with 2019)

### Priorities 2022/23

- Children and Young People
- Women
- Long Term conditions
- Develop Self-Harm response
- #TalkSuicide campaign
- Men

For more information on the work of the suicide prevention programme, please read the 2019-2021 Progress Report, found here:

<https://humberandnorthyorkshire.org.uk/wp-content/uploads/2022/10/Suicide-report-2022-websize.pdf>







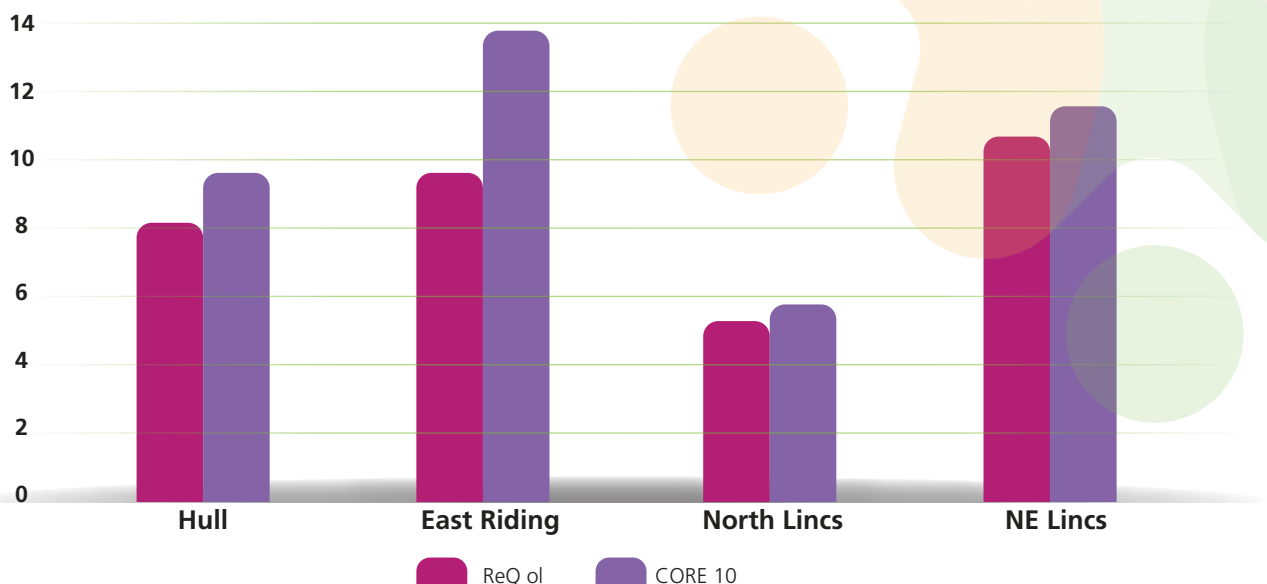
## Perinatal Mental Health and Maternal Mental Health



### Successes 2021/22

- Continued to deliver high quality care to women and families throughout the Covid-19 pandemic
- Expanded capacity within services in line with investment which involved recruiting new members of staff
- The service covering Hull, East Riding, North and North East Lincolnshire redesigned their service to enable them to receive direct referrals from professionals which resulted in referral rates doubling in the first six months
- Increased offer of psychological interventions which includes infant mental health
- Co-design and deliver Perinatal Mental Health Module with Hull University
- Involved in numerous research project with Hull and York Universities including research on infant mental health
- Re-launch of the Every Mum Matters website ([www.everymumatters.com](http://www.everymumatters.com))

High rates of recovery for women receiving interventions; the graph below displays the mean (average) improvement score of the women under the care of the team over the last 12 months. For example, on average women in Hull improved by +8 points on the





CORE 10 and +9.75 on the ReQoL. In effect women generally move from moderate/severe levels of psychological distress (CORE 10) to mild or low levels of psychological distress; the equivalent with the ReQoL is the same but the outcome improving is Quality of Life and Functioning.

- Two bespoke training packages have been developed for the wider workforce to support knowledge and confidence in supporting women who are bereaved and when to refer on for specialist support.
- A detailed Health Inequalities plan has been developed to ensure services can meet the needs of all communities, but particularly women from Black, Asian, and Minority Ethnic communities who are disproportionately affected in the maternity experience

### **Priorities 22/23**

- To increase the number of women receiving a service from the specialist perinatal mental health services and maternal mental health services
- To introduce and grow peer support across the services
- To continue to implement the health inequalities plan
- To work in line with national guidance to provide assessment and signposting to dads and partners
- To increase the offer of psychological therapies
- Extend the offer up to 24 months post-partum for perinatal mental health services
- To work with the Local Maternity System (LMS) to review and develop guidance and protocols for Birth Afterthoughts clinics
- To continue to work with Local Authorities to support delivery of services for mild to moderate perinatal mental health issues and parent-infant relationships
- The Maternal Mental Health Service (MMHS) is due to go live on the 4th of July 2022 across the ICS, supporting women and families experiencing post-traumatic stress disorder and trauma following baby loss.
- The Maternal Separation Service due to go live on the 4th of July 2022 work alongside the Maternal Mental Health Service in North East Lincolnshire to provide psychological and social support to women who are at risk of or who have been separated from their babies at birth due to safeguarding concerns.

*"I'm so sad to say goodbye, but I want to say a huge thank you. Thank you for teaching me new skills to help me forever to see new angles. I'll hopefully continue to learn, grow and challenge myself, the tools you've given me will make my future much brighter. I've gone from some incredibly dark days to reigniting a spark inside, learning to be much kinder to myself. Thank you so much, you are so appreciated, your work is so important and I'm so grateful for everything. Some people arrive and make such a beautiful impact on your life, you barely remember what life was like without them. Thank you for the amazing person you are, for all that you do and the difference you make. You are truly appreciated."*



## Urgent and Emergency Care Mental Health



### Successes 2021/22

- All Places have 24/7 crisis line access for all ages and are working towards becoming accessible via 111 by the end of March 2023.
- Dedicated programme support from an NHS Graduate Management Trainee to improve capacity to undertake benchmarking of current services.
- We have secured additional funding across Humber and North Yorkshire to expand access to crisis alternatives.
- Evaluation of the Humberside Police Right Care, Right Person initiative is showing signs of improving relationships between Health, Care and Criminal Justice Services.
- A dedicated Programme Lead was appointed and is working closely with the Acute Urgent Care Collaborative to ensure fully integrated working and that parity of esteem between physical health and mental health is maintained.

*“They got my wife involved and checked whether she was supported too –[mental health support] has to be about the family and the Support Line made her feel a valuable commodity –they had a personal touch”*

*“If it wasn’t for the support line, I wouldn’t have a wife or a family”*





- We have developed an Urgent and Emergency Mental Health Steering Group to bring together all partners to establish priorities, align plans where possible and share best practice across the ICS footprint. In addition to this, we have commenced a Service-User Urgent and Emergency Care Mental Health Steering Group which helps to set the agenda for the other group and allows for sharing of priorities and actions. This is built on the work of an existing Crisis Involvement and Action Group in Hull and East Riding.
- There has been a further successful pilot of a Mental Health Response Vehicle via the Yorkshire Ambulance Service, and recruitment is underway for the addition of a Mental Health Practitioner to join the paramedic crew. Further funding is available, and plans submitted for a further two vehicles in the ICS footprint. A mental health provider response vehicle has been running on the South bank and with a positive impact on the population it serves.

### **Priorities for 2022/23**

- Building on the work of the Service-User Urgent and Emergency Care Mental Health Steering Group we will be developing a regular public facing newsletter and are aiming to develop an accessible webspace to ensure the public can fully contribute to the design and delivery of our services.
- We are working with all partners and the public to improve approaches to care for people who need the most frequent support.
- We are continuing to work collaboratively to address inequalities in mental health and ensure our population can access the right support for their emotional well-being and mental health, from prevention and early interventions, to crisis support.
- We will continue building local and regional communities of practice to inform further development of easily accessible crisis alternative services, including development of a local Voluntary, Community and Social Enterprise market of mental health providers.

### **David's Story**

David was conveyed to a Safe Space by our MHRV on a Saturday afternoon following a welfare concern call to police around David sleeping in his car.

The crew provided David with hot food and discussions with him identified that he:

- had been sleeping in his car for 5 weeks
- had a number of physical health problems but no access to his medication
- was a victim of psychological and physical domestic abuse
- is a veteran
- had had a suicide plan with intent to carry out that night

Following conveyance, our MHRV crew secured a 7 day prescription for David's medication and delivered these to Safe Space. Safe Space then worked with other agencies to support David, securing accommodation with somewhere safe to shower, clean clothes and ongoing social and advocacy support – although there is still a long journey for David ahead.

David describes being overwhelmed by the support he received and describes feeling safe. He states very clearly that Saturday would have been the day he died if it had not been for the police, Yorkshire Ambulance Service and Safe Space working together to support him at a time he had given up hope. He states that he used his army training to stay alive in his car but was going to use the same training to end his life.

[Mental Health Response Vehicle Evaluation Report, August 2019. Yorkshire Ambulance Service](#)





## Dementia



### Successes 2021/22

- The ICS has secured funding for 10 clinicians to undertake additional training in Dementia Diagnosis, and a further 10 places will be funded in 2023 to help reduce waiting times for assessment.
- Dedicated programme support from an NHS Graduate Management Trainee to develop an ICS-wide Dementia Strategy.
- A dedicated Programme Lead was appointed and is working closely with all partners.
- Funding has been secured for a pilot of the Dementia Diagnosis tool DiaDem (Diagnosing Advanced Dementia Mandate) within care homes with full support of the Yorkshire and Humber Clinical Networks.
- Flow Coaching Academy Support has been approved and provides support from NHSE to improve flow through pathways and improve the patient experience.
- We have developed an ICS Wide Dementia Steering Group to bring together all partners to establish priorities, align plans where possible and share best practice across the ICS footprint. In addition to this we have developed a dedicated space on the NHS Futures Platform to share resources.
- Quality Improvement Project planned to undertake data cleansing work and environmental audit within GP practices.
- There is a real drive from all partners to share learning and support all developments to ensure that our population are able to receive the best care and support possible.



### Key Priorities 2022/23

- We want to work with people with dementia to co-produce all of our plans and services – they are the experts in what they want!
- Care partners are a key priority in all of our work as we recognise, they are a significant asset and make up a significant proportion of the unpaid workforce. We want to make sure that carers have access to care and support in a timely manner that promotes their well-being as well as the people with Dementia that they work with.
- We are continuing to develop the ICS-wide strategy using the 'Well' approach – Preventing Well, Diagnosis Well, Living Well, Aging Well, Ending Life Well.
- We are working with all partners to improve the access to support pre and post diagnosis and whilst undergoing assessment.
- We are working to reduce the length of wait for assessment and diagnosis of Dementia to ensure people have diagnosis as early on as possible.
- We are reviewing pathways and support for people with Young Onset Dementia and for people with a Learning Disability to improve equity amongst all of our population.
- We continue to work towards ensuring as many people as possible are able to achieve a timely diagnosis and the right support, as well as annual health checks following this.
- We want to ensure we have Dementia friendly communities in all of our Places.
- We want to move away from 'signposting' and towards 'warm handover' to support people in making connections with the relevant services – this is what the people using services have told us will be more helpful.







## Individual Placement Support



In 2021/22 services continued their work to put everything in place to support people with serious mental illness to find and maintain employment. This work has been embedded in all areas across the Humber and North Yorkshire patch, and our teams have worked hard to recover and improve on outcomes following the impact of the pandemic. We continue to achieve a good level of job starts and outcomes.

All services currently work with Individual Placement Support (IPS) Grow to ensure that services fully align to the nationally agreed IPS Grow provision model. Fidelity reviews were conducted to identify areas of good practice, and areas for improvement, and this has supported the work in 2021/22.

### Priorities 2022/23

- To continue to build on the work of the fidelity reviews, and maintain alignment with the IPS Grow model
- To work more effectively with the emerging primary care networks to ensure pathways are joined up and people are supported for as long as they need support.



## Engagement and Co-production



Families and carers are our 'experts by experience', and they are key in the development of our work, and their input is fundamental to every stage of our process. Their input is highly valued across our programmes, and we are proud to have a strong track record of engagement and co-production across our workstreams.

To ensure we take into account the wide range of views of our 'experts by experience', service users, carers and staff at every stage of pathway development and service implementation we hold local engagement events, and encourage involvement at our steering groups. This helps to ensure strategic decisions are well-informed, reflect the needs of our population, and models of care are co-produced.

Below you can find testimonials from our Crisis Involvement Group for Hull and East Riding, and other examples are included throughout the report.

We believe it is vital to continue to work with people who have first-hand experience of both using and delivering mental health, learning disabilities and autism services to co-produce the solutions that will support people in the our area for years to come.

*"I have been on my mental health journey for 26 years now. I love to learn and I want to be involved in improving the Crisis service because I have grandchildren and I want the service to be right should they ever require the service in the future"*

*"This group allows people to feel that they are being heard"*

*"to be given a chance to be heard is like a gift from god-I am from Brazil and it was very different there –the social responsibility in this country is something I didn't experience before so something I am very grateful for"*

*"The home based treatment team, the crisis pad and the support through the 0800 line have been outstanding, the new system is life saving"*

*"connection, helpful, trust, respect, safe, listening, teamwork"*

*"Personally rewarding and a chance to give back"*

*"It was amazing to be heard and tell our side of the story"*

*Crisis Involvement and Action Group Hull/ East Riding, June 2022*





## Children and Young People's Engagement and Coproduction



We want to ensure that effective engagement and coproduction with children and young people with lived experience is embedded within all that we do across our partnership from policy to practice.

We have recently recruited a Children and Young People's Engagement and Coproduction manager who will work to ensure we build on and complement existing work at place while ensuring the voice of children and young people from across our diverse communities are heard and responded to.

This will include ensuring:

- Robust systems are in place across the partnerships to ensure children and young people with lived experience are able to influence provision across the Thrive Framework
- Engagement and Co-production with children and young people with lived experience features throughout every process
- Shared learning and strategic support is available to Places though understanding of successful developments and joint challenges and gaps.
- Integrated and co-ordinated approach including sharing findings from previous engagement across places to build on findings rather than repeat and duplicate consultations.
- Partners working in Children and Young People's Mental Health at Place have the skills and knowledge to embed engagement and coproduction in all processes.



The main priorities of this role are to:

- Establish a children and young people's ICS wide engagement and co-production strategy and workplan for children and young people's mental health, which builds on and compliments existing place-based activity, to capture and measure the engagement of children and young people and the impact of this.
- Implement and coordinate regular communities of practice with place-based engagement and coproduction leads across the ICS partners to ensure consistency of approach and peer to peer support and learning between services and partners.
- Provide consultancy, advice, and guidance to a wide range of place-based services and partners to support organisations to embed evidence-based practice to enable sustainability of delivery. This includes developing and sharing resources, skills, and knowledge across the ICS.
- Recruit, train and support a team of young volunteers with lived experience from across the ICS geography, who will act as advisory groups to relevant steering groups and boards.

### **Examples of Engagement and Coproduction**

Recently the children and young people's engagement and coproduction manager worked with Hull and East Yorkshire Mind to undertake an ICS wide digital scoping consultation with children and young people across our 6 places to understand alternatives to face-to-face models of support to provide a blended offer moving forward building on the learning from the pandemics. This included a survey with children and young people and families, and then follow up focus groups which included children and young people from groups at risk of poorer mental health e.g. LGBT young people, as well as children and young people from areas of high levels of multiple deprivation, and also those in rural areas.

Some of the recommendations from young people included:

- A range of services and resources all under one trusted brand's hub website and/or app
- Testimonials from other young people who have accessed the service on websites
- Step-by-step 'walk through' videos/animations of a young person accessing the service to support with demystifying access
- Accessible, simple, engaging, and concise information with links to further resources that are easy to find or navigate to
- Provide a portal for users to save any correspondence or online forms, to be able to keep track of what has been discussed and agreed with mental health professionals
- Additional training on LGBTQ+ for all mental health professionals and volunteers, as young people consulted with recognised gaps in knowledge and understanding of the nuances and challenges of this community
- Trauma-informed training for all mental health professionals and volunteers as set out by the ICS Children and Young People's Trauma Informed Care Programme
- Recognise young people as experts of their own experience, value their feedback, and embed it into continued service improvement

We are now working with partners at place to look at how we action these recommendations and the others in the report so we can feedback on progress to the young people who developed them.





## Clinical Engagement



### **Mental Health, Learning Disabilities and Autism Clinical Assembly**

The Humber and North Yorkshire Health and Care Partnership Mental Health, Learning Disabilities and Autism Clinical Assembly has been active for just over two years. The aim is to promote clinical engagement across the collaborative between clinicians of all disciplines and from all partner organisations (including NHS providers, primary care, local authority, and voluntary organisations). At a review last year clinician feedback indicated they regarded the role of the Clinical Assembly as networking, information sharing and quality improvement towards system consistency.

We reported in last year's annual report about the assemblies that had taken place between July 2020 and September 2021. From September 2021 to September 2022 eight assemblies have been held with many of the topics being clinician requested.

These have included:

- Whole system and Whole lifespan approach to Autism
- Mental Health Inequalities
- Update on the Eating Disorder work programme
- Whole system approach to Dementia (which included a presentation about the multidisciplinary approach to frailty at the Jean Bishop Centre in Hull)
- Updates from the other collaborative programmes across the ICS (e.g. an update about urgent care pathways and from the Cancer Alliance)
- An opportunity to meet system leaders at a Mental Health Question time.



For all assemblies we have welcomed experts in the field from within and outside our ICS, showcased innovative models of care, and have used question and answer sessions to encourage rich and vibrant dialogue. Attendances at the assemblies has varied from 50-100 people. One of the most popular was the Mental Health Question Time where questions were submitted to system leaders who included Stephen Eames (CEO, Humber and North Yorkshire Health and Care Partnership), Teresa Fenech (Executive Director of Nursing and Quality, Humber and North Yorkshire Health and Care Partnership), Brent Kilmurray (CEO, Tees, Esk and Wear Valley NHS Foundation Trust, and Chair of the Mental Health Learning Disability and Autism Collaborative Programme), Nigel Wells (Executive Director of Clinical and Professional, Humber and North Yorkshire Health and Care Partnership), Helen Kenyon (Place Director, North East Lincolnshire) and Alison Flack (Programme Director, Humber and North Yorkshire Mental Health Learning Disability and Autism Collaborative Programme).

There was genuine and lively interactive discussion with a request for this session to be repeated next year. A recurring theme and request from clinicians is for more integration of services across physical and mental health, primary and secondary care, health and education and health and social care to improve outcomes.

A review of the Clinical Assemblies that occurred during the past 12 months will be held in October 2022 to gain clinician feedback and to help shape the 2023 programme, which is being finalised. Planned topics and speakers include:

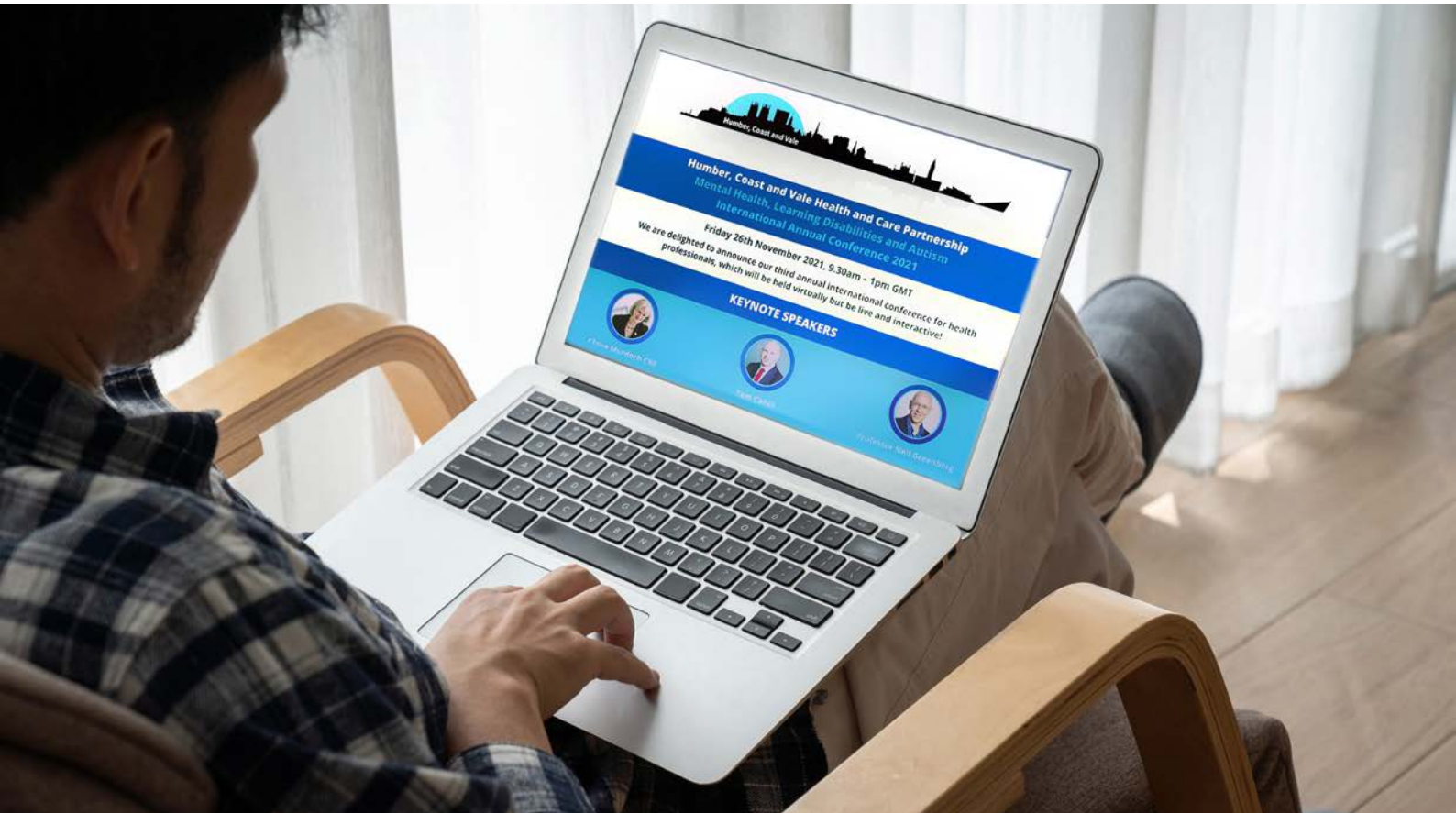
1. An update about the ongoing work within the ICS to improve the physical health of people with Severe Mental Illness with a focus on smoking cessation. Speakers will include Prof. Simon Gilbody.
2. Neurodiversity: what should services look like?
3. Update on the newly published National Suicide Prevention Plan. Speakers to include Prof Louis Appleby. This assembly will include an update about the suicide prevention work ongoing within the ICS.
4. Mental Health Question Time with system leaders.
5. A joint assembly with the Primary Care Collaborative focusing on CMHT Transformation and PCNs.

In addition to the Clinical Assembly programme, clinical leads in Learning Disability and Autism, and in Primary Care have recently been appointed to help further facilitate engagement, information sharing and good practice.





## The Humber and North Yorkshire Mental Health, Learning Disabilities and Autism International Conference 2021/22



On the 27th November 2021, over 300 colleagues joined guest speakers in attending the Humber and North Yorkshire Health and Care Partnership's virtual mental health, learning disabilities and autism annual conference.

The Partnership's third annual international conference, entitled 'Looking after our People and Growing for the Future: Developing a Trauma Informed, Resilient Workforce' focussed on understanding our workforce, building resilience during a pandemic, caring for our workforce, and looking after our frontline staff, with significant engagement from delegates through interactive question and answer sessions.

The event featured the following keynote speakers:

- Claire Murdoch CBE (National Director for Mental Health, NHSE/I) – provided an update on the national picture for mental health.
- Tom Cahill (National Director for Learning Disability and Autism, NHSE/I) – provided an update on the national picture for learning disabilities.
- Professor Wendy Burn CBE, Consultant Psychiatrist, Past President of the Royal College of Psychiatrists, Leeds and York Partnership NHS Foundation – talked about Covid-19 and the impact it has had on mental health in the UK
- Professor Neil Greenberg, Professor of Defence Mental Health, Kings College London – talked about moral injury and wellbeing
- Dr Jo Jordan, Clinical Lead, Humber and North Yorkshire Health and Care Partnership Staff Resilience Hub – shared the experience of, and success of, setting up our Staff Resilience Hub



Other speakers included: Professor Stephen Eames CBE, System Lead and Independent Chair for the Humber and North Yorkshire Health and Care Partnership; and Michele Moran, Senior Responsible Officer, Mental Health and Learning Disabilities Collaborative Programme, Humber and North Yorkshire Health and Care Partnership, and Chief Executive, Humber Teaching NHS Foundation Trust.

Michele Moran shared on the successes and priority areas we have focussed on in the last year, which include:

- Appointing Kooth, an online counselling platform for children and young people to access emotional wellbeing and mental health support and launching Qwell for Men– a free, anonymous online counselling and emotional wellbeing service for men aged 18+
- A successful bid to NHSE/I to gain funding to support the development of a Keyworker Service- that provides all children and young people with autism and/or learning disabilities admitted to or at risk of admission to a mental health inpatient unit, an allocated keyworker.
- Being selected as 1 of 10 areas in England to develop a pilot maternal mental health service – which will help an estimated 300 women in the region access specialist mental health support.
- Over 10,000 people across Humber and North Yorkshire receiving suicide awareness training in the last year
- Adult Mental Health – Older Peoples Mental Health and Dementia, Improving Access to Psychological Therapies (IAPT), Urgent and Emergency Care
- Launching the Mental Health Resilience Hub to provide vital mental health and wellbeing support services for front line and care staff affected by the Covid-19 pandemic across the region.





## Performance

In 2021/22, delivery of health and care services has continued to be a challenge following the pandemic. Below you can see Humber and North Yorkshire's performance against some of NHS England's core indicators.

Indicator	Target	March 2022
<b>Children and Young People</b>		
Children and Young People's Access (1+ contact)	<b>19,447</b>	<b>18,215</b>
Children and Young People's Eating Disorder Waiting Time – routine	<b>95%</b>	<b>57.6%</b>
Children and Young People's Eating Disorder Waiting Time – urgent	<b>95%</b>	<b>56.9%</b>
<b>Adult Mental Health</b>		
Dementia Diagnosis rate	<b>66.7%</b>	<b>57.5%</b>
IAPT Access	<b>4,010</b>	<b>2,915</b>
IAPT Recovery rate	<b>50%</b>	<b>55%</b>
Individual Placement Support	<b>950</b>	<b>565</b>
Perinatal Access	<b>n/a</b>	<b>670</b>
SMI Physical Health Checks	<b>7523</b>	<b>5,992</b>
OAP Bed Days (Inappropriate Only)	<b>n/a</b>	<b>1,555</b>
Community Mental Health Access (2+ Contacts)	<b>15,900</b>	<b>14,510</b>
EIP Waiting Times	<b>60%</b>	<b>49.3%</b>
Discharges Followed Up Within 72 Hours	<b>80%</b>	<b>89%</b>
Acute Admissions with No Prior Contact (Black, Asian and Minority Ethnic)	<b>n/a</b>	<b>22%</b>
Admissions With No Prior Contact (White British)	<b>n/a</b>	<b>13%</b>

We have some areas where we are performing well against these indicators, such as:

- Supporting people who have been discharged from inpatient settings.
- The quality of our IAPT services and supporting people through recovery from common mental health problems.
- Children and young people's access to mental health services

However, we also have some significant challenges to address including improving the level of physical health checks being done in primary care for people who have severe mental illness, increasing the rate of dementia diagnosis and reducing waiting times for children and young people requiring support with eating disorders.

We have plans in place to address these areas, and are working hard with our partners to achieve them through collaborative and innovative work.



## Finance



The Partnership team successfully secured and delivered against investment amounting to £26.5m in 21/22. £18.6m was secured for new and one-off schemes commencing in year with £7.9m being a continuation of schemes from prior years.

The funding was used across the full geography and was utilised as part of ICS wide programmes of work and/or aligned with local need dependant on scheme.

The Humber and North Yorkshire Health and Care Partnership was proud to be selected as only 1 of 10 National Vanguard sites to host the Health and Youth Justice pilot schemes across the country, with mobilisation commencing in late 2021.

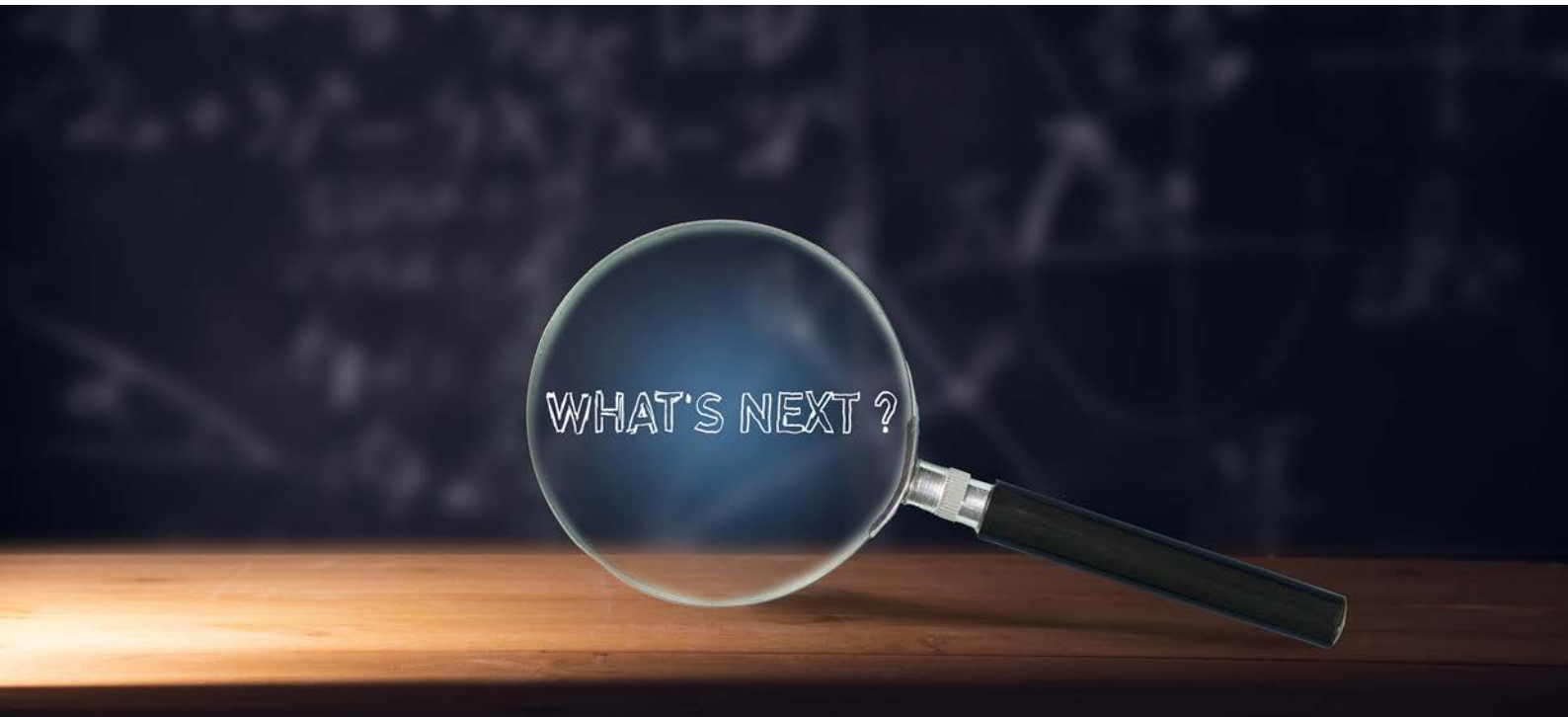
<b>Scheme type</b>	<b>£m</b>
Adult Crisis and Liaison	6.0
Community Mental Health	3.3
Discharge	3.2
CYP Community Crisis and Liaison	3.1
Mental Health Support Teams	2.8
Youth Health and Justice	1.1
Staff Support	1.0
DWP Employment Advisors	0.9
APT	0.9
Maternal Mental Health	0.7
Digital Schemes	0.6
Memory Assessment Services	0.6
Other Smaller Schemes	2.3
<b>Total HNY Investment</b>	<b>26.5</b>

The Partnership will continue to work together to identify future funding or investment opportunities to maximise patient care for our population.





## What Next?



Working in collaboration with our partners we will continue to implement the priorities as laid out in the NHS Long Term Plan for mental health, learning disabilities and autism highlighted in this report, and we will also focus on:

- Improving dementia access rates
- Implementation of the Health and Youth Justice Integrated Framework
- Reporting standards and data quality

We will also be:

- Continuing our work around understanding our workforce challenges and putting plans in place with partners to address them.
- Continuing to work towards our strategy and our delivery plan for 22/23
- Addressing our performance challenges through jointly agreed recovery plans, where this is necessary



## Meet the Team



**Michele Moran,**  
Senior Responsible Officer

Michele is a Nurse, Midwife and Health Visitor by background and has more than 35 years' experience of front-line roles in NHS management and care. Michele was appointed to the role of Chief Executive at Humber on a permanent basis in February 2017. Prior to this Michele was Chief Executive in Manchester for four years. Michele served as Deputy Chief Executive/Chief Operating Officer/Chief Nurse at Leeds and York Partnership NHS Foundation Trust for seven years.

Michele has extensive experience across all sectors in the NHS, with substantial experience in integrating systems and is an advocate for integrated care, speaking at many national conferences on collaboration in care. Michele is Chair of the Yorkshire and Humber Clinical Research Network.

Michele is committed to putting patients at the heart of everything that we do and supporting staff health and wellbeing. A qualified nurse, mental health nurse and midwife, Michele also has a Master's degree in Health Services Management from the University of Manchester.

Michele leads the Mental Health, Learning Disabilities and Autism Collaborative alongside leading the design of the collaboratives in Humber and North Yorkshire and is a partner representative on the Humber and North Yorkshire Integrated Care Board.



**Alison Flack,**  
Programme Director

Alison plays a pivotal role in the Humber and North Yorkshire Health and Care Partnership Mental Health, Learning Disabilities and Autism Collaborative Programme as the Programme Director. She is passionate about ensuring our partners across the patch work together collaboratively to improve mental health outcomes for everyone in our area. Alison has a wealth of experience working at a senior level in health and care organisations and is proud to be part of a team transforming and improving mental health services for our communities.



**Pete Beckwith,**  
Chief Finance Officer

Pete's role as finance lead for the partnership sees him coordinate the sharing and reporting of financial information across partners. This includes the coordination and monitoring of investments to support national planning priorities. Pete is passionate about directing investments to the most beneficial areas to ensure people receive high quality treatment and support.



**Doug Flockhart,**  
Head of Performance  
and Programme Delivery

Doug has worked in health and care organisations across the Humber and North Yorkshire patch since 2007. He became increasingly interested in the wider health and care system, particularly what can be achieved when partner organisations work collaboratively. Over the past few years, Doug has focused on integration and system development work, taking up a programme lead role in the Humber and North Yorkshire Health and Care Partnership Mental Health, Learning Disabilities and Autism Collaborative Programme in 2018. Mental Health is now rightly receiving the focus and attention it deserves and, through the work of our programme, Doug wants to ensure all of our residents have access to the support they need in a way that works for them and their families.



**Clair Atherton,**  
Children and Young  
People's Engagement and  
Coproduction Manager,  
Children and Young People's  
Trauma Informed Care  
Programme

With a background in community and youth work, Clair has extensive experience of engaging vulnerable groups across a range of sectors and specialises in coproduction with children and young people. Before joining the team Clair worked on a Strategic Children and Young People's Mental Health Programme, involving young people with lived experience in the development of services, campaigns, training, and resources, and supporting partners across education, Local Authority, health, and the Voluntary and Community Sector to develop and embed effective coproduction practices. Clair is passionate about creating opportunities for children.





**Ben Baines,**  
HR Graduate  
Management Trainee

Ben is a Graduate Management Trainee who has worked on a variety of projects across the different programmes whilst on placement with the team. Ben enjoyed working with partners across the ICS to ensure the recent Safety and Wellbeing Reviews were carried out to the deadline. He has also been involved in developing a new ICS Dementia Strategy, and co-formed a Task and Finish Group working to improve community provision for people with a Learning Disability and/or Autism.



**Erika Cawthorne,**  
Learning Disability and  
Autism Programme Lead

Erika recently joined the team from within the NHS. Erika's background is in learning disability nursing, working within a children's neurodiversity service, and she is passionate about working to improve the lives of children, young people, and adults, with learning disability and autism. With a strong clinical background and lived experience of learning disability and autism, Erika is determined to work collaboratively to make a difference to some of the most vulnerable people in our communities.

Erika's role within the team is to provide leadership to the learning disability and autism programme. Erika will be leading on transformation of the programme and will work closely with all partners across the Humber and North Yorkshire footprint. She will also ensure that there are connections with the other programmes of work, that have a direct link to this programme. Erika is responsible for developing and agreeing the key objectives of the programme, and working on behalf of the ICS and represent the collective views of the ICS.



**Rebecca Cracknell,**  
Administration Assistant

Rebecca provides administration support to various programme leads across the partnership. Rebecca has only been in her role for a short time but is already enthused by the service that Humber and North Yorkshire provide and look forward to playing a small part in developing the services in the future.



**Emily Davey,**  
Programme and  
Performance Manager

Emily recently completed the General Management Training Scheme with the NHS Leadership Academy, during which she undertook placements within the Mental Health, Learning Disabilities and Autism Collaborative Programme, and Community and Primary Care. Emily is passionate about improving mental health services for people across the region, and in particular is focussed on working with partners to improve the physical health of people with a severe mental illness.



**Lisa Hudson,**  
Senior Administration  
Assistant, Children and  
Young People's Trauma  
Informed Care Programme

Lisa is a new member of the team, providing administration support to the Children and Young People's Trauma Informed Care Programme and the wider team. She has previously worked in a strategic Children and Young People's Mental Health Programme and is looking forward to continuing to work with those who are passionate about improving the mental health of children and young people.



**Cat Jones,**  
Programme Partnership  
Manager, Children and  
Young People's Trauma  
Informed Care Programme

Cat recently joined the team from outside the NHS, with a background in education and more recently working on a strategic Children and Young People's Mental Health Programme within a Local Authority. Cat has extensive experience in driving initiatives within schools during her time as a Senior Leader and Headteacher, and also implementing national policy and practice change across the schools in a city. Cat has taken on the role as Programme Partnership Manager of the Children and Young People's Trauma Informed Care Programme. Cat and the Core Team will focus on working collaboratively to ensure that all professionals working across the system with children and young people who have experienced trauma, can be supported to respond appropriately, consistently, and compassionately, so that the support these children and young people receive helps them to thrive.



Jo is passionate about working within our communities to reduce the stigma around suicide, and to support individuals and organisations to prevent suicides from occurring.

Favourite quote: "Never doubt that a small group of citizens can change the world; indeed, it's the only thing that ever has." - Steve Jobs.

**Jo Kent, Suicide**

Prevention Programme Lead



With a background of engagement and organisational development, Katy joined the team to provide strategic direction on workforce and culture. She is passionate about working collaboratively and believes this is the best way to shape how we move forward as one workforce. Being part of the ICS enables her to support positive change on a wide scale, work with lots of great organisations and support amazing people that look after the needs of our local populations.

**Katy Marshall,**

Strategic Workforce and Cultural Lead



Stella is a consultant psychiatrist with over 30 years' experience of working in mental health services. In collaboration with Dr Steve Wright, she is focusing on improving clinicians' engagement with the work of the ICS and has established the Mental Health, Learning Disability and Autism Clinical Assembly. In addition, she contributes to the wider programme and strategic work.

**Dr Stella Morris,**

Clinical Lead



Jack joined the team on a secondment from Hull and East Yorkshire Mind in January 2020. He supports the Suicide Prevention Programme and helps to promote free suicide prevention training available at [www.talksuicide.co.uk](http://www.talksuicide.co.uk). Since February 2020, over 12,000 individuals have completed the free training across Humber and North Yorkshire. Jack is passionate about working with a range of partners to raise awareness of mental health and help to prevent suicide.

**Jack Moore,**

Communications and Engagement Officer (Suicide Prevention)



**Lynnette Robinson,**  
Mental Health  
Programme Lead

Lynnette leads on the Community Mental Health transformation, including the specialist area of developing the annual physical health check for patients with Severe Mental Illness (SMI).

Lynnette set up and supports the Humber and North Yorkshire Resilience Hub which centres on Covid-19, our regional mental health response which support key workers who have experienced distress related to Covid-19 pandemic by providing early help, and intensive evidence-based therapeutic interventions in a timely way.



**Gail Teasdale,**  
Children and Young  
People's Mental Health  
Programme Lead

Gail joined the collaborative in November 2021 after 20 years leading on system change and commissioning services for Children and Young People's health at place across local authority children's services, public health and CCGs. Her work to improve outcomes for Children and Young People has been recognised as national best practice by the Department of Health, Department for Education, Local Government Association and the National Children's Bureau. Gail leads the Children and Young People's Mental Health Programme, working with a wide range of partners at place including VCSEs, Local Authorities, and Health commissioners and providers. The programme has developed and is delivering the strategic plan for Children and Young People's Mental Health to improve prevention and early intervention, improve access to services and outcomes and reduce inequalities. Gail is passionate about ensuring that the voice and influence of children and young people with lived experience is embedded throughout our work. With effective engagement and coproduction we can ensure all children and young people can access the right support, in the right place at the right time.



**Georgie Thrippleton,**  
Perinatal Mental Health  
Programme Lead

Georgie is passionate about improving mental health support for mothers and families in the perinatal period. By ensuring mother's mental health needs are met early, this greatly improves outcomes for babies and improves relationships. Georgie wants to work with women, families and all partners to reduce the stigma surrounding mental health as new parents as mental illness at this time is very common and with the right support outcomes for families are positive.





**Kelly Toes-Smith,**  
Administration Team Lead

Kelly provides administrative support to the programme. She feels lucky to be part of a passionate team and to have the opportunity to support the various workstreams. Kelly enjoys being able to assist the programme leads and help contribute to improving the mental health care for the local community.



**Gemma Willingham-Storr,**  
Programme Lead for Urgent and Emergency Mental Health and Dementia

Gemma is a Learning Disability Nurse and DBT Therapist by background and has worked in the NHS for 14 years. Gemma is very passionate about making sure that everyone is able to access help and support when they need it and without barriers. Having worked in clinical practice across Mental Health and Learning Disability Services for the last 14 years, Gemma has seen first hand some of the challenges faced by our population. Gemma is keen to make sure that people are at the heart of all that we do and that their voices truly contribute to the way in which our services work. Gemma also wants to fully support our workforce and embrace their experiences and contributions to transformational change. We are all in it together.



**Katy Winfield,**  
Community of Practice Manager, Children and Young People's Trauma Informed Care Programme

With over 20 years' experience of working within health service settings, supporting vulnerable and socially isolated individuals, Katy has a broad understanding of their needs and a passion to make a positive impact. Katy thrives when engaging with communities and services that work to make a positive difference. Katy brings an extensive amount of knowledge and experience working within a clinical setting and supporting staff to achieve positive outcomes, with service user groups experiencing health inequalities. She has managed services and contracts, and implemented service change, over several years, which will support her future success within her role of Community of Practice Manager of the Children and Young People's Trauma Informed Care Programme.



**Debbie Wilson,**  
Senior Administration  
Officer

Debbie provides support to the Humber and North Yorkshire Partnership (Mental Health, Learning Disabilities and Autism) Senior Management Team. She enjoys the variation in her role, and the opportunities to play a part in helping to shape the future of mental health, learning disabilities and autism services across the Humber and North Yorkshire.



**Nicola Wood,**  
Finance and Performance  
Manager

Nicola enjoys supporting the programme with the monitoring and reporting of the funding coming into the system. She enjoys working with partners across the system to ensure funding is invested to achieve the best outcomes for our population. Mental Health and Learning Disabilities are subjects close to her heart after seeing the impact that the challenges surrounding accessing the right services, not only in the NHS but in the wider social care and local authority sector, has placed on her loved ones over her lifetime. She believes that good Mental Health is a priority for all and rightly deserves de-stigmatisation. Nicola is looking forward to the continued success of the programme as it begins its next chapter within the ICB.



**Dr Steve Wright,**  
Clinical Lead

Steve is a psychiatrist with Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust and the medical lead for early intervention services. Alongside his role as a clinical lead for mental health in Humber and North Yorkshire, he is clinical lead for Adult Mental Health with Yorkshire & Humber Clinical Networks, chairing the community mental health transformation regional collaborative. He has worked in early intervention services since their introduction, supporting their increasingly preventive role. In recent years he has also been working with international collaborators to promote a "whole person, whole life, whole community" approach to mental health including developing a system-wide learning partnership with Trieste in Italy.



**Humber and North Yorkshire**  
Health and Care Partnership

If you would like to find out more about the work of the Humber and North Yorkshire Health and Care Partnership, please get in touch.

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