



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

Children and Young People's Trauma Informed Care Programme

# Annual Report

2022-2023





# Contents

Foreword	3
Introduction	4
Our Approach	5
Delivering Transformational Change across the System	8
Test and Learn Sites	13
Case Studies	16
Coproduction	19
Programme Next Steps	27
Programme KPIs	28
Core Team	29

---

## *Our Pledge*

---

*"We will work collaboratively to ensure that Children and Young People, who have or may have experienced trauma or adversity, are supported to thrive. We will do this by working across the system so everyone is supported to respond helpfully, consistently, and compassionately"*

---

# Foreword



## **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

The Mental Health, Learning Disabilities and Autism Collaborative has worked hard since its inception to bring together a diverse range of partners to deliver system change and improved access and outcomes for Children and Young People across Humber and North Yorkshire. The successful EOI to NHSE (Health and Justice) to secure the funding for this Trauma Informed Care partnership programme is an excellent example of this. The programme brings together the expertise of a range of partners to deliver transformational system change to improve the care of our most vulnerable young people.

The programme will ensure that all professionals involved recognise and respond appropriately to signs and symptoms of trauma, resist re-traumatisation and acknowledge the differences between and within communities. It also provides opportunities to test new models of care for those young people at risk of entering the criminal justice system.

Within this programme, as in all our work as a Collaborative, we continue to always put the people our services support first, we value every person as an individual and respect their own aspirations and priorities. That is why we have ensured that coproduction with Children and Young People is at the heart of this programme so we can continue to learn from those with lived experience to build on our successes and address any areas of improvement.

This report shares the progress made by the Humber and North Yorkshire Children and Young People's Trauma Informed Care programme in its first full year of delivery and provides strong foundations on which to build as the programme progresses in its delivery of the 10 year partnership strategy.

# Introduction

In 2021, an opportunity arose to bid for funding from NHS England's National Health and Justice Team, to develop a systems approach to enhancing support for vulnerable Children and Young People who have or may have experienced trauma or adversity and those at risk of encountering the Youth Justice System. Led by the Mental Health, Learning Disabilities and Autism Collaborative, partners from across the Humber and North Yorkshire Integrated Care System (formerly known as Humber, Coast and Vale) including Health, Local Authorities and the VCS worked together to develop this bid and ensure that its aims and implementation aligns with - and compliments - the broader transformation work already underway across the geography. Our bid was successful and we are one of 12 Vanguards delivering this work across the country. This work will be a 10-year programme which commenced in 2022 with ringfenced funding for the programme from NHSE.

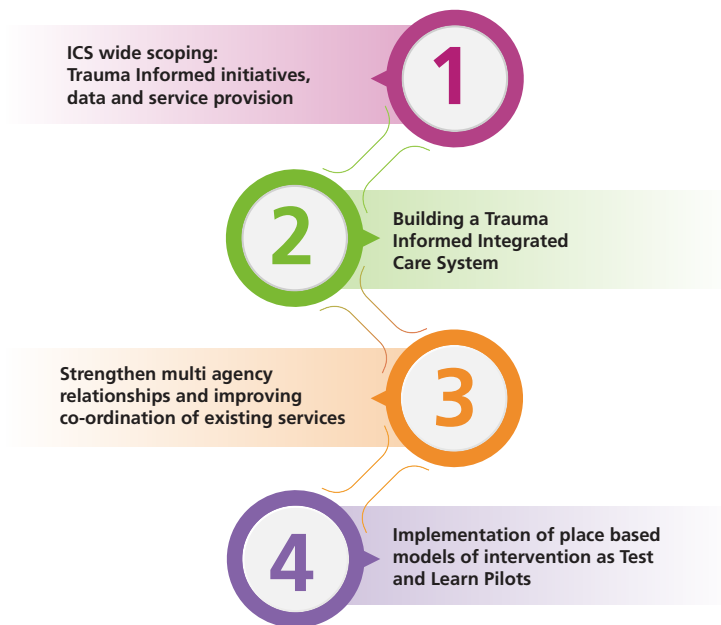
The model of the Programme has two main aspects. One is delivering system change across the Partnership to develop and embed a consistent Trauma Informed approach across all partners working with vulnerable Children and Young People at risk of offending. The other is to test new interventions (known as Test and Learn sites) which divert young people from becoming first time entrants into the Youth Justice System.

Children and Young People are often described as hard to reach or hard to engage when often it is the services and systems around the child and their family which are hard to access and engage with. This work will ensure that all services working with vulnerable Children and Young People at a universal, targeted and specialist level are able to provide a consistent Trauma Informed approach to the care they provide and ensure improved accessibility, support and outcomes. It will also ensure that both strategically and operationally organisations are supported to become truly Trauma Informed.

This annual report shares the progress made in mobilisation and delivery of the programme over its first year.

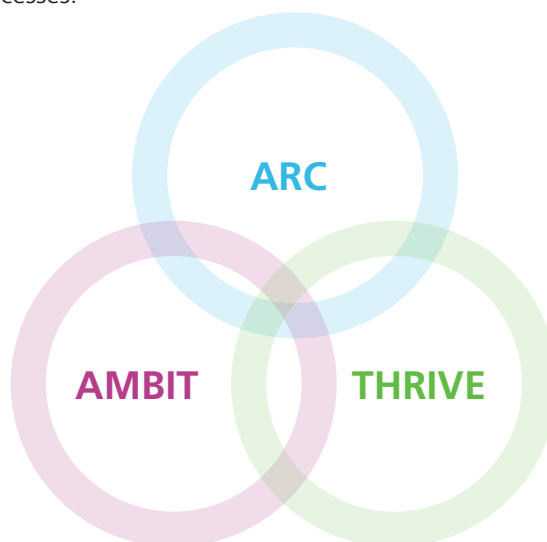
## The Programme

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. In order to meet the objectives of the framework, our phased implementation will focus and build on the following four key areas:



## Our Approach

There are three complementary, evidence-based models of care already in place for Children and Young People with complex vulnerabilities in Humber and North Yorkshire. The Programme Strategy will ensure that the programme of work carried out over the next ten years by the Children and Young People's Trauma Informed Care Programme uses these approaches to deliver a consistent and effective system of support for Children and Young People who have or may have experienced trauma. By training and supporting professionals and listening to the voices of Children and Young People, we want to prevent traumatic experiences from seeding challenges that lead young people into the Youth Justice System - or escalate their involvement with these processes.

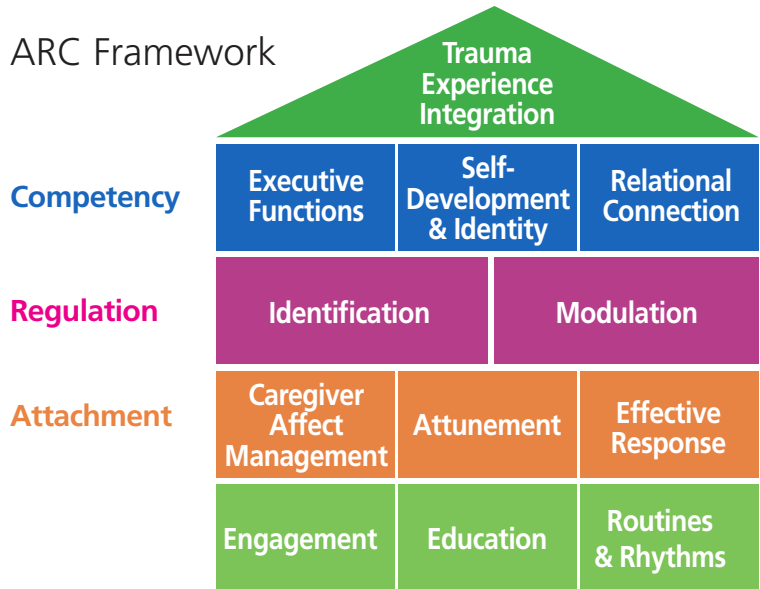


# ARC

The Attachment, Regulation and Competency (ARC) framework offers a structure of the core components of intervention and provides a set of interventions to support Children and Young People who have experienced complex trauma, but also offers a structure by which organisations can become Trauma Informed and deliver an integrated system of Trauma Informed care. ARC training provides staff with a consistent understanding of how to recognise and respond appropriately to signs of trauma. The Core Team are currently mapping the ARC learning outcomes against other existing training although many partners are already using ARC e.g. Humber Teaching NHS Foundation Trust.

**Attachment, Regulation and Competency (ARC)**  
 A set of clinical interventions used to address complex trauma, and a framework for building Trauma Informed organisations/systems, is being developed to organisations within the partnership to enable them to become Trauma Informed.

## ARC Framework



# AMBIT

AMBIT is a mentalisation approach for teams supporting Children and Young People with complex needs. It offers professionals a framework to contextualise Children and Young People's actions within their experiences, feelings and beliefs and helps professionals co-ordinate information and integrate delivery of interventions to meet these needs. Mentalisation approaches are particularly effective when supporting Children and Young People who have complex needs, are socially excluded or reluctant to engage with professional interventions.

**Adaptive mentalization based integrative therapy (AMBIT)**  
 A 'Mentalization based' approach aims to support the strengthening of multi-agency teams delivering interventions to disengaged youth with complex needs. The objective being to strengthen relationships between multi-agency professionals and support integration of services/interventions to improve the experience for Children and Young People or their family. Thereby increasing the likelihood of engagement with professional interventions.



# THRIVE

The THRIVE framework provides an overarching structure to delivering mental health support to Children, Young People, and their parents/carers. It conceptualises five categories of support, into which all services and all Children and Young People (whatever the complexity of their need) fall. By stressing that Children and Young People will move between different categories over time, (and may require services from multiple categories at the same time), it encourages professionals to consider the link between presenting needs and current circumstances, rather than focussing on a static diagnosis. THRIVE helps different organisations within our local system to understand their role in improving Children and Young People's mental health and encourages them to collaborate to plan, implement and review co-ordinated packages of care.

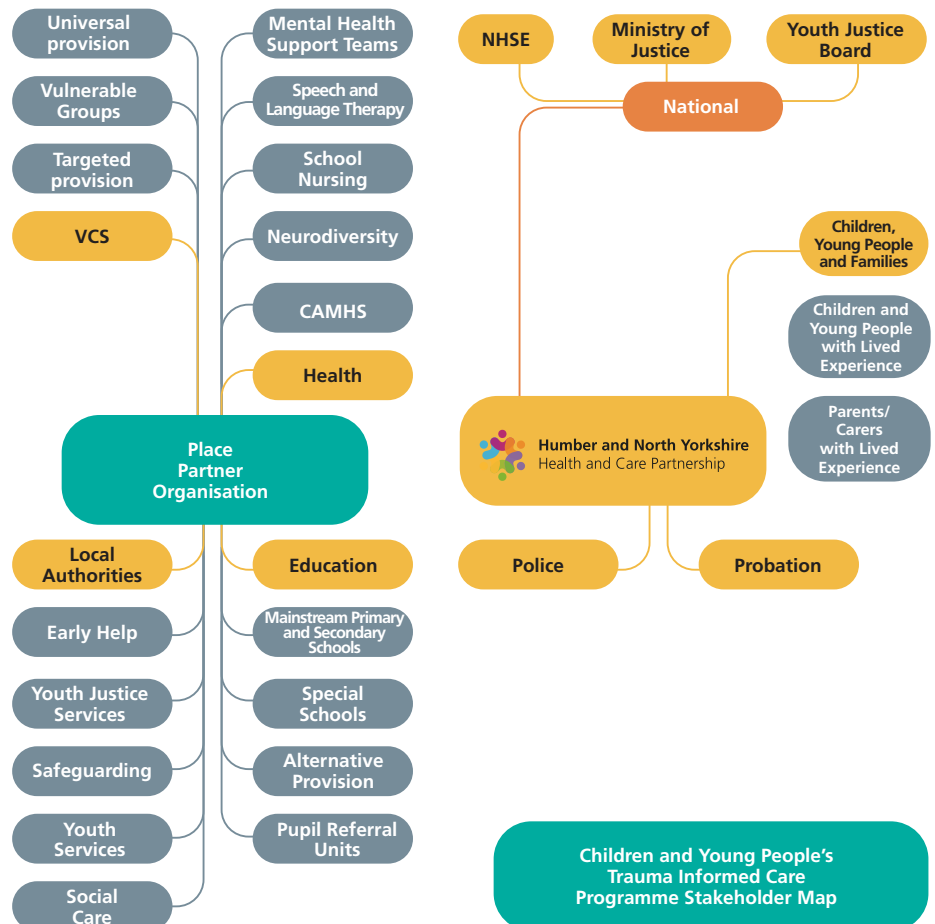
## Thrive

A framework that provides a structure to delivering mental health support to Children Young People and their parents/carers it consists of five categories of support into which all services and all Children and Young People fall whatever the complexity of need. Services are aligned to each domain according to the level of support they provide.



# Stakeholder Map

Over the 10 years of the Programme we aim to work with many varied organisations and services across all 6 places in our ICS (North Yorkshire, York, East Riding, Hull, North and North East Lincolnshire):



## Target Cohort

The target cohort are Children and Young People aged 10-19 who are at risk of becoming first time entrants or of reoffending in the Youth Justice System:



## Delivering Transformational Change across the System

### Communities of Practice

8 Communities of Practice have taken place

73 People have attended Communities of Practice

19 Organisations have engaged in Communities of Practice

Communities of Practice provide a space for practitioners to connect with each other. These personal connections facilitate dialogue and increase insight into the role and function of other services. Communities of Practice create formal and informal opportunities for collaboration and assist in modelling collaborative interagency processes. It supports the move from working in silos to sharing knowledge and solving shared problems. The use of collective knowledge and involvement in the community creates better practice.

The sharing and integration of different practitioner knowledge and experience, along with a common shared interest in the subject matter, can support the development of creative solutions and new knowledge about responding to people with complex needs. This supports the personal and professional development of the community's members.

We now have several Communities of Practice up and running: Leadership, Practitioner, Group Leads and Volunteers, ARC Champions and Test and Learn Pilot Community of Practice.

We have also set up NHS Futures pages to work alongside each Community of Practice. This platform is a collaboration platform that empowers everyone working across the 6 places to safely connect, share and learn. Within the platform we work to harness and share resources and good practice on implementing a trauma informed approach.



# Organisational Toolkit

## System Change

7 Organisations are working collaboratively with the Core Team to undertake the Trauma Informed Care Organisational Toolkit

The aim of our training and Communities of Practice is to help and support organisations to progress through the 4 stages below and ultimately become fully 'Trauma Informed.'



Staff understand trauma, its effects, and that behaviour is the adaptation that children needed to make to survive.



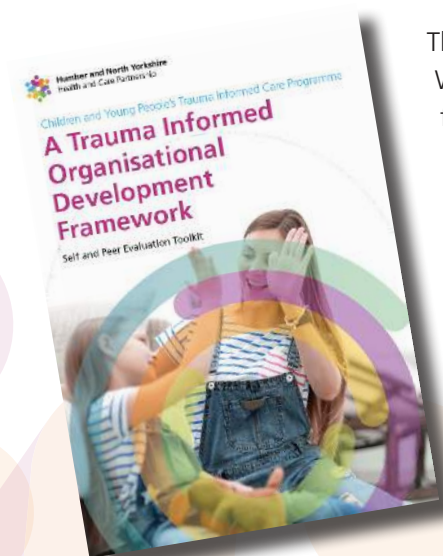
The workplace can operationalise some concepts of a Trauma Informed approach.



Individuals and the organisation recognise and respond to trauma, enabling changes in behaviour and strengthening resilience and protective factors.



The culture of the whole system, including all work practices and settings reflects a Trauma Informed approach.



The Organisational Toolkit has been introduced to services across all six places. We have worked collaboratively with partners to support organisations to move from being Trauma Aware through to being fully Trauma Informed. This work has begun to build, embed and work to sustain a Trauma Informed Integrated Care System and develop a consistent joint approach and common language across the ICS. By working collaboratively with partners, we are starting to review and update all policy and documentation to reflect Trauma Informed perspectives, language, and concepts. Being Trauma Informed is not an initiative. We want it to be a way of being, and a part of our culture.

## Feedback from Services using the Organisational Toolkit

"It helped to identify gaps and areas for improvement, underlined some of the things we are proud of such as all Youth Justice staff being trained in Trauma Informed practice"

"Undertaking the Organisational Toolkit audit was helpful in understanding where we have been, where we are now and where we want to be going forward"

"I think the toolkit has helped us as a team reflect on the process of becoming Trauma Informed – it's not a straight yes or no answer and it has enabled us to reflect on where we are along that process"

"The self-assessment tool has given our MHST the opportunity to reflect, review and plan how we can move towards becoming a more trauma-informed service. Ultimately, when we look to increase our Trauma Informed approaches this will have a positive impact on the community we serve and our own colleague's wellbeing"

"We have identified goals for our service going forward and have the support of the Humber and North Yorkshire Health and Care partnership in our continuous development"

"It has highlighted the different components of trauma-informed working, both on a direct basis but also as an organisation, and thus helped us think about approaches to develop these areas (or at least where we can start)"

"The Organisational Toolkit has been instrumental in helping the Trusted Relationships service to self-assess and baseline where we currently are on the Trauma Informed journey"

"We look forward to continuing over time the review of the self-assessment and we are determined and dedicated to utilise the tool to change practice for the better"

"The Organisational Toolkit has also acted as a catalyst to begin to develop a set of next steps in order that the service continues to progress through the trauma informed continuum"

"North Yorkshire Youth have found the organisational toolkit to be a valuable asset in helping us to think about where we are on the trauma informed journey and in identifying a plan of action for our continued progress towards becoming a fully trauma informed organisation. This tool, coupled with input from Communities of Practice Manager and other members of the core team, have allowed us develop our thinking around key topics such as our organisation's youth voice and staff wellbeing and have enabled us to prioritise our next steps. The toolkit has also generally helped us to identify examples of our current practice that reflect trauma informed ways of working, which we have found to be very motivational for our onwards journey"

"It has also highlighted the lack of explicit connection between trauma and risk/offending, and how we can start to develop people's awareness and understanding of this"

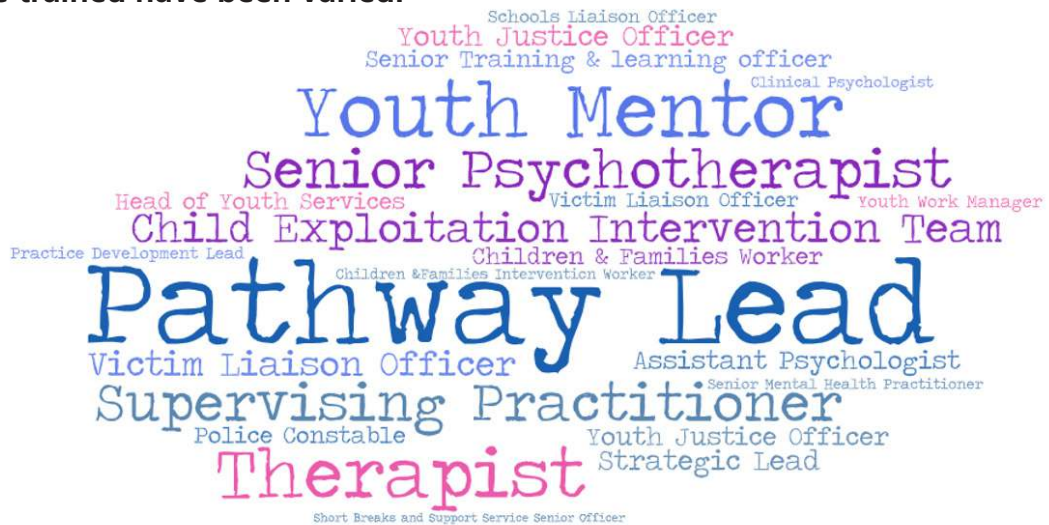
# Training

By training and supporting professionals and listening to the voices of Children and Young People, we have begun to prevent traumatic experiences from seeding challenges that lead young people into the Youth Justice System - or escalate their involvement with these processes.

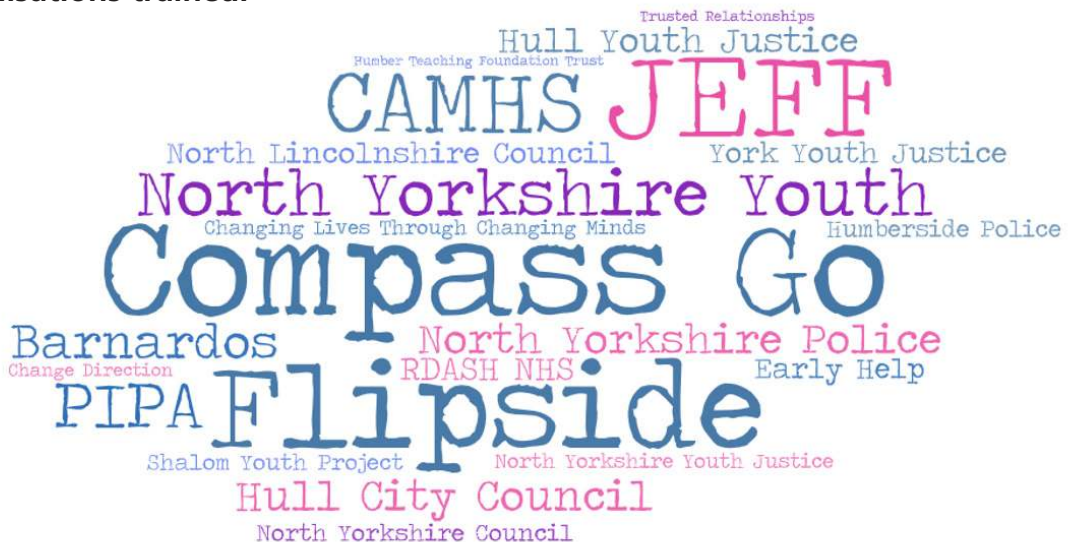
To date we have trained 238 professionals. 21 People have attended ARC Leadership Training and 36 people across all 6 places are working proactively as ARC Champions. ARC Champions are fully equipped to deliver training and up to date information internally within their own organisations. All ARC Champions will be provided with up-to-date information and resources relevant to their training role giving services the opportunity to become Trauma Informed.



## Roles of those trained have been varied:



## Some Organisations trained:



## Training Feedback:

"Trauma in practice is now a standing agenda item in team meetings, sharing how we have put learning into practice. Also, informs peer and personal supervision"

"I have been able to be more flexible in my formulation of work with Children and Young People's meaning I have been more creative with the work"

"We are looking to change forms including our team group supervision form, to incorporate more discussion around trauma and to make it more Trauma Informed for staff"

"Our organisation has taken on a more Trauma Informed approach not just with the young people we work with but also with its own staff, for example in supervisions. Myself I have used some of the techniques showed to us in helping to calm a young person and also in the language I use and the approach I take"

"Used the framework in discussions with foster carers, social workers and young people when thinking about the best way to support young people who have experienced complex trauma"

"Developed a best practice log to capture examples of trauma informed working, attend 6-weekly practice development sessions in house and lead on updating the team on Trauma Informed developments"

"I don't work directly with children and families, but I discussed content with colleague to consider how we can weave the important messages about trauma into our existing training, to reach a wider audience"

"I have shared my learnings and thoughts about the training in a team meeting"

"Talked to my manager about some ideas to incorporate being Trauma Informed into our documents and practice"

"Sharing practice and training with colleagues, becoming a champion to support the embedding into the service delivery"

"Taken on board the information and used this to inform my plan or work with families Discussed in supervision and highly recommended to colleagues"

# Test and Learn Sites

The overall Trauma Informed approach covers the whole of HNY HCP ICS with Test and Learn pilots delivering interventions directly to Children and Young People. Our 3 Test and Learn Sites, whilst are different to each other to address needs at place, they all demonstrate services and organisations collaborating and working together.

## Hull

Hull is the VCS led Flipside project where The Warren and Cornerhouse work together to deliver the service. This is a holistic model that delivers a range of trauma informed interventions including 1 to 1 therapeutic intervention and 1 to 1 and group diversion interventions to Children and Young People to prevent them becoming first-time entrants to the youth justice system. The service has integrated into existing structures e.g., multi-Agency diversion panels which include a wide range of partners including Youth Justice service, Police and Social Care.



Year 1:  
238 Appropriate referrals

Year 1:  
230 New young people accessing the service

## North East Lincolnshire

North East Lincolnshire is The JEFF (Journey to Enrichment, Fulfilment, and Friendship) project which is aimed at prevention and early intervention for Children and Young People who may be at risk of becoming involved with the criminal justice system. The project aims to engage hard to reach Children and Young People and support them in accessing key local services. This includes The Young & Safe team, Compass Go and We Are With You. There is also a key role in the project for the wider Voluntary and Community Sector (VCS) which consists of various local organisations providing a safe place and positive activities for Children and Young People accessing the project. Each organisation will have a nominated champion who will be trained in identifying Children and Young People who may need the support of the project. This is a joined-up approach with key organisations working together to provide a wraparound system of holistic support.



Year 1:  
91 Appropriate referrals

Year 1:  
76 New young people accessing the service

# North Yorkshire

North Yorkshire is a tiered partnership service of coordinated early help/intervention provision, including clinically informed positive support for children engaging in risk-taking behaviour and/or with complex needs. Delivery is through a flexible, decentralised partnership model targeting areas of high need within the county and applying a shared model of systemic, relational, and trauma-informed practice. VCS led targeted prevention & diversion outreach will reduce entry to the criminal justice system; proven trusted relationships mentoring will support and safeguard young people who have complex needs and are vulnerable to exploitation; and statutory case management will be enhanced by the expertise of embedded clinical practitioners. A bespoke digital app called 'Xchange' has been created as part of the Mind of My Own suite of practice tools, to further capture the voice, wishes and feelings of the Children and Young People. This is being developed with young people and piloted in North Yorkshire but is being rolled out to the other places in our ICS and will also become available nationally to other Vanguard and offered to all Youth Justice services across the country to improve young people's ability to contribute to their case records and care planning. The app is accessible to young people with communication challenges, including those for whom English is not their first language, those with speech and language issues, dyslexia, or who are neurodiverse. Initial feedback from staff and from young people is very positive.



Year 1:  
158 Appropriate referrals

Year 1:  
158 New young people accessing the service

Year 1 Programme Total:

487 Appropriate referrals

464 New young people accessing the services

## Quotes about the Test and Learn sites

"Thank you so much for your support, it's been stressful but I'm really proud of myself"

"Since I started going to the gym with Flipside I haven't been excluded from school"

"Since I started going to the gym with Flipside I haven't been excluded from school"

"I'm very happy with A's progress and things have been much better since he has been working with JEFF Project. A was staying in and stopped going out with his friends due to struggling with his Grandad's death. A is now going out again and he has not been in trouble at school even though he was on the brink of exclusion. School reports significant improvement in his behaviour/conduct."

"A's behaviour has improved at home and although he has kicked off once or twice, they are so much less often than before and not to the same extent. The police have not been called once since he has been on the project"

"Your support has worked because you talked to him like a human being"

"A's mood, confidence and aspirations have improved since working with the JEFF project. A has not self-harmed since working with the project, other than one occasion when she first started working with her practitioner"

"The conversations have been good, and the strategies have helped me sleep and not get angry as much. has been helpful and caring, we have had a lot of fun together. It's been really good; I would do it again if I needed help with my mental health."

"The work you're doing with mum is really helping. She seems calmer when I talk to her and her daughter is consistently engaging with her YJS order"

"Now I have my panic under control I am now able to drive normally again, which means I have been able to get back into work and I have even started studying again at the learning shop. I am motivated again to get into working on the wind turbines."

"That was really helpful, making me think about what we can change and influence and what is realistic"

"James listened really well and never spoke over me. He has cared for me. Whenever I moved school, James supported me all the way through."

"I just wanted to say a huge thank you to you for the part you played in helping A get their friendships back on track. I was so very proud of them for realising their different attitudes with certain mates and I know you've been a part in helping them get there. Your dedication to keeping those kids right even when they make it incredibly hard work is nothing short of epic"

## Case Study North Yorkshire

### **Scenario: Setting the scene and who did you engage with?**

Child A, 13, was referred into Change Direction for having low self-confidence and was known for violent and aggressive outbursts in school, at home and in the community. This behaviour presented itself because of the trauma experienced by Child A growing up. Child A had been removed from Mum's care and placed into the care of other family members. Child A suffered with a high level of separation anxiety and remained in fight or flight mode daily.

### **Actions: What did you do?**

In the first meeting, Child A said that they would never speak to anyone about things that were serious in their life. The Youth Mentor explored Child A's interests and hobbies. As a result of this initial work, the Youth Mentor was able to build a positive rapport with Child A and spent some time playing football. This developed trust and allowed time to build a relationship. Over the course of the next few meetings, Child A began speaking to the Youth Mentor about things from their past and would often ask when they were going to see the Youth Mentor next.

Over the next few months, the Youth Mentor worked with Child A on anger management by enabling the young person to recognise trigger points and put in place self-regulation tools. The Youth Mentor worked with school to get the young person a time out card so when they had a trigger point they could leave the classroom before the situation escalated. The Youth Mentor also worked with carers to help them to understand the effects of the trauma the young person had been through and how the Young Person was feeling when things were triggered for them.

The Youth Mentor supported Child A through many things such as creating a safety plan for when Child A was self-harming and made comments about taking their own life. The Youth Mentor also supported Child A whilst transitioning schools, which was a time of high anxiety for this young person.

### **Success: What was the impact?**

Child A has transitioned to a new school and is doing much better there.

Child A no longer self-harms.

Child A can regulate their anger much better than they could in the past.

Some great progress had been made, and family members have told the Youth Mentor that they are grateful for the work that has been done with them. They recognised the value that mentoring gave this young person.

### **Issues: What barriers and challenges did you face and how did you overcome these?**

#### **Unexpected changes in circumstances:**

Child A makes good progress but will often fall back when things in life get more difficult. Recently, a significant member of Child A's family had passed away. Needless to say, this has had an enormous negative effect on Child A, and this is something the Youth Mentor, school and family are trying to work on collaboratively to give coping strategies and support in regard to the mental wellbeing of Child A.

### **Lessons Learnt: What would replicate moving forward?**

#### **What would you do differently based on the learning?**

This young person's story highlights not only the genuine need for mentoring support, but also the nature of the type of young people Change Direction are working with. There are many other young people like Child A that need longer interventions and require an even higher level of support, particularly around their mental wellbeing. Mental health services are already stretched, and with long waiting lists sometimes young people cannot access the support they need quickly. Change Direction allows young people to get professional support whilst waiting for additional intervention from specialist services.

In this particular case study, the work with the family and school was paramount to success for the young person and this would be replicated moving forward.



## Case Study Hull

### **Scenario: Setting the scene and who did you engage with?**

The young person self-referred themselves into the Flipside project after seeking support to stop them getting into trouble within the community – the young person was known to Hull Youth Justice service after previously accessing them due to ongoing issues within the community and at home. The young person is a 12-year-old boy who attends an alternative provision in Hull. He has had social care involvement and has witnessed domestic violence previously. The young person has difficulty self-regulating their emotions and has poor decision making. The young person also has a medical diagnosis of ADHD to which, he is awaiting medication. The young person can be easily influenced and is vulnerable to child criminal exploitation.

### **Actions: What did you do?**

Using a Trauma Informed approach, I assessed the needs of the young person to identify the best form of support that was bespoke to the young person. This included working within the community and in the educational environment. This allowed a positive working relationship to be built on trust – together, we created an action plan to address any presenting problems for the young person. This included using elements of CBT to challenge any negative thoughts that the young person was having. We also identified the young person's hobbies and interests within the community. He outlined that he enjoyed fishing as this made him calm and relaxed.

The young person shared that he can become 'triggered' due to sensory overload in lessons – the young person shared that they felt that staff members did not understand how he felt when he was heightened. Using this information, it allowed myself, the young person and the school to have a mediation meeting to understand everyone's point of view – this proved to be successful as the young person felt valued and listened to, creating a sense of belonging.

### **Success: What was the impact?**

To date, the young person has engaged extremely well and the effects of having support from the Flipside project is proving to be successful – the young person has not been in trouble with the police or engaged in anymore criminal activities within the community. Furthermore, the young person's relationship at home with his family has dramatically improved. His mum has reported that he appears to be calmer, and more respectful.

He is attending school most days and is managing his emotions better.

The young person has also started going fishing and has acquired a new friendship group which is more positive.

### **Issues: What barriers and challenges did you face and how did you overcome these?**

Initially the young person thought that the Flipside project worked directly for the police, and he did not understand that we were a youth service from the voluntary sector. The young person was concerned about that his friends thinking that he would be 'grassing' on them. Through being consistent, and honest with the young person, he eventually lowered his guard – the young person understood that any safeguarding information needed to be shared however, anything that he discussed would be confidential

### **Lessons Learnt: What would replicate moving forward?**

The Trauma Informed approach works very well and allows transparency between the worker and the young person – this is something that I will continue to do in my practice as it allows the young person to take ownership of their support to which, they can evidence themselves. I will also continue to prioritise the relationship building within the support as I firmly believe this is crucial to successful support.

I would take a leaflet from Flipside to give to the young person on my initial visit.

## Case Study North East Lincolnshire

### **Scenario: Setting the scene and who did you engage with?**

The young person is a 15-year-old who lives with his Father and siblings. He has had a tough time with family relationship difficulties and has suffered with low mood and mood swings due to this. The mood swings have made it difficult for him to manage his emotions and behaviours and has led to him being excluded from school. He also had physically assaulted two other young people on two occasions leading to him becoming involved with the out of court diversion team. He had previously enjoyed attending the skate park but since he had been struggling with his mood this reduced and he was spending more time in the community in parks with his peers. I engaged with the young person on his own, he preferred not having his other family members involved and he was seen in the local Community Family Hubs on a weekly basis and within school after returning following the summer holidays.

### **Actions: What did you do?**

During the sessions with the JEFF project, the young person was given coping strategies to help him manage his moods and challenge some of his negative thoughts. He was also supported to access positive activities based on his interests which mainly included going to the local skate park. After the first few sessions staff reported an improvement in his mood and he also informed us his sleep pattern was improving and he was regulating better. We provided some free vouchers to the local ghetto skate park which he eventually began accessing himself over the summer and as a result is slowly coming out of the low mood vicious cycle. This also kept him busy and he stopped hanging around the local parks as often. Further, into the intervention we supported the young person with promoting positive activities he could access for himself at home. He set himself goals to use his Dad's exercise bench and eat more healthy so he can get fitter. He also asked for his own scooter for his birthday which he can use at the free local skate park. He also set himself a goal to go into the Army Recruitment Centre to help him discuss his future options of joining the Army now that he is in Year 11.

### **Success: What was the impact?**

The young person's sleep, family relationships and mood all improved as a result of the intervention. He also went back into mainstream school and reported an improvement in his behaviour, no detentions unlike previously and better attendance. He told us he enjoyed school more since not feeling as tired and having more motivation.

### **Issues: What barriers and challenges did you face and how did you overcome these?**

The challenges we faced were mainly geographical. When the young person started going out more which was when his mood improved, he would be too far away from where our session was located and because we are not allowed to pick him up in our vehicles due to policies he was not able to attend a few sessions as he could not get there. He did not have the funds for a bus or taxi. This could be due to either forgetting or last minute events during the summer holidays. We would send him text reminders to help him to remember on the morning of his appointment. We would also see him in the family hub most local to his home. In future, weather permitting and if appropriate we may drive to him and initiate a walk and talk.

### **Lessons Learnt: What would replicate moving forward?**

I would continue to explore more positive activities based on the young person's interests and hobbies as this was most successful in this case. Especially those that are free to access. Send the young person reminders the day prior and if they are very unorganised with meetings again on the morning of their appointment to help them remember. Maybe encourage the young person to utilise their own ways to record important appointments as a new life skill. Meet the young person at the Army Recruitment Centre to support him in attending.



# Coproduction

Never has coproduction been higher on the national agenda, and finally there is growing widespread understanding of the value and importance of lived experience in planning and shaping provision to meet the needs of all Children and Young People. However, this work takes time, resources, and flexibility, as well as adequate staffing and support. It is also important to ensure that we acknowledge and reward Children and Young People's commitment, time, and contribution, to ensure ethical engagement. It is key that decision-makers understand the complexities of this work and what a commitment to true coproduction really means, to ensure we avoid tokenism. It also requires planning, adaptability, and collaboration to remove barriers to participation and engagement to maximise the impact and benefits of coproduction.

Working with Children and Young People to transform mental health services and other support services working with vulnerable Children and Young People is incredibly exciting and has the potential to create meaningful change and improvement. An often-overlooked outcome of this work is that coproduction can be an early intervention, as Children and Young People learn more about mental health and wellbeing, feel valued, find a purpose, make new friends, learn new skills, and build trusting relationships with professionals.

Coproduction is one of our 6 ICB priorities for Children and Young People's Mental Health, and a key aspect of the Children and Young People's Trauma Informed Care Programme.

The key focus of our current coproduction work has been identified through our partnership and aims to:

- 1. Establish** a Children and Young People's ICS wide engagement and coproduction strategy and workplan for Children and Young People's Mental Health, which builds on and complements existing place-based activity, to capture and measure the engagement of Children and Young People and the impact of this
- 2. Implement** and coordinate regular communities of practice/networks with place-based engagement and coproduction leads/workers across the ICS partners, to ensure consistency of approach and peer to peer support and learning between services and partners
- 3. 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
- 4. 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, boards etc.



## Progress so far

### **1. Establish a Children and Young People's ICS wide engagement and co-production strategy and workplan for Children and Young People's Mental Health**

Over the last year we have worked with Young Minds (the national Children and Young People's Mental Health Charity) to map existing engagement and coproduction activity with Children and Young People across our 6 places. This work started with an initial workshop with key partners last summer, who identified the need for this work, and since has involved the delivery of a participation audit and extensive scoping calls with a wide range of engagement and coproduction partners to understand existing place-based needs, structures, partnerships, mechanisms for participation, strengths, challenges, areas for development and examples of best practice, etc.

Some key findings so far include:

- There is already a lot of good participation happening across the Humber and North Yorkshire ICS
- There are a few organisations in particular that shared great participation practice
- Participation audit respondents were from a mix of NHS/Health, Local Authority services and the Voluntary and Community Sector
- The responses spread the breadth of all six places with the highest number of responses from Hull and the lowest from North Yorkshire, which may reflect the varying levels of capacity and activity across the 6 places
- There is good evidence of participation from lots of different groups of young people, including those that are likely to experience marginalisation, but further support to engage these groups would be beneficial for organisations and services
- Some organisations could benefit from support to gain a greater understanding of participation in order to start their journey or begin again following organisational change
- There are areas where participation could be further enhanced with support to evaluate power dynamics in order to reach more young people experiencing marginalisation and open up opportunities for participation at more strategic levels
- Organisations would benefit from support around understanding power in participation and the opportunity to reflect on and understand more about the participation they are already doing and how to enhance it. In the analysis we ended up recategorising a lot of the participation happening e.g. respondents were categorising their work as strategic when it was operational, or that young people were leading on work when actually it was more contributory or collaborative. Supporting people to see where the gaps in the participation are could help them consider how they can enhance their participation and find opportunities to give more power to young people

A report on the mapping will be produced in the summer of 2023 and work is progressing to develop an ICS wide strategy and workplan by October 2023. This will ensure we have a system wide approach based on best practice and build on existing work at place, to ensure all organisations working with Children and Young People embed coproduction within their work.

## 2. Implement and coordinate regular communities of practice/networks with place-based engagement and coproduction leads/workers across the ICS

In December 2022 we held our first Children and Young People's Mental Health engagement event which was attended by 41 engagement and coproduction leads, and other relevant professionals, from across Health, Local Authorities and VCS organisations from across all 6 places in our ICS. At the event we worked together to coproduce the development of the network.

Over the next few months, the network grew to include over 170 staff members involved in engagement and coproduction. This network will:

- Build on existing engagement with Children and Young People
- Share learning, resources, and good practice
- Identify common themes and avoid duplication
- Identify/Action common goals implemented by all
- Develop consistency of approach to coproduction with Children and Young People
- Facilitate peer support and challenge
- Improve links and joint working between Education, VCS, Health, Local Authority, etc.
- Maximise capacity and efficiency within the system



## Quotes from Partners

It was an absolute pleasure to participate in the Nothing About Us Without Us event. It was engaging, thought provoking and inspiring and the amazing attendance figures, from both young people and professionals, demonstrate the commitment to participation in the ICS areas. I'm excited to take the next steps on this project and work with people who are so passionate and dedicated to ensuring young people are an integral part of service development and improvement.

Kim Markham-Jones  
Trainer Consultant  
Young Minds

It was great to see so many services represented at the event and working together to consider ways to improve young people's participation across Humber and North Yorkshire. It was a good opportunity to network with one another and hear the voices of young people in the things that matter to them – they did a great job!

Darren Clarkson  
Young Person's Participation and Engagement Coordinator  
KIDS

It was brilliant. I personally left feeling overwhelmingly inspired, positive and motivated. The young people were brilliant, and I really enjoyed that the whole day was inclusive of all and focused and involved the young people. It was a breath of fresh air to go to such an informative, welcoming event that really catered to everyone's needs.

Assistant Education Mental Health Practitioner  
With Me In Mind

I found the event useful and a great opportunity to hear young people's voices around mental health services and how we can all as professionals move forward. It was a springboard for us all to start really working together and improving mental health services for our young people. It was also a great opportunity for us as professionals to link up work that we're already working on.

Dave Brown  
Volunteer Voice Supervisor and  
Senior Youth Outreach Worker  
ERVAS

Voice/co-production roles within local authority can often feel isolating, more often so when your role is specific to a group of young people such as those with SEND. Despite having good connections within York, SEND voice work is only allocated to one person, and I feel roles that focus on voice and co-production need huge amounts of creativity and often it can feel that you have exhausted options/ideas or simply just can't think of a solution. When the co-production leads network starts, Clair's role will have found a creative but supportive role in ensuring that those who work alone always have someone to bounce ideas from, to learn new things and not to get stuck in ruts. We had a discussion about how useful it would be even if others in the call are not specific to SEND, however I personally feel it will be a great way of developing new ideas that I can then amend to make it accessible and enjoyable for the young people I work with.

Laura Brown  
Local Offer and  
Participation Officer  
City of York Council

### 3. 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

True transformation demands a shared dedication of a united community, so a huge part of my work relies on my ability to build trusting relationships and harness energy for change to effectively mobilise groups, identify shared goals, and lead people on a journey of collaboration. I accept resistance to change as part and parcel of that process, so I'm staggered to have this level of investment from a huge number of partners with such an appetite and willingness to work with me and each other, to be vulnerable and honest about their struggles and challenges, to support and learn from each other, and challenge their own practice and understanding of participation and coproduction. I feel honoured to be trusted by so many partners to work alongside them to develop existing practices, troubleshoot barriers, and establish partnerships to cooperatively improve outcomes for Children and Young People. This collective commitment to a whole system approach has enormous potential to create long-term impact but must be matched by an investment in adequate staffing and resources to be sustainable.

Clair Atherton  
Children and Young People's Engagement and Coproduction Manager  
Mental Health, Learning Disabilities and Autism Collaborative

This work is ongoing and will be delivered through the professionals network meetings/communities of practice, which are in development, and through bespoke pieces of work identified by place/partners to support and empower them to embed coproduction within their own work and organisations. Some bespoke packages of support have already been provided to progress work at place. For example in North Yorkshire we are supporting the Youth Justice service to implement and embed participation and coproduction mechanisms. We have also identified training needs with courses planned to be delivered over the summer of 2023, including:

- 1 x Introduction to Participation and Involving Young People
- 1 x Involving Young People Facing Marginalisation and Barriers
- 1 x Involving Young People in Governance
- 1 x Creating a Participation Strategy and Evaluation Framework

I met Clair through attendance at the City of York Safeguarding Partnership Voice and Influence Subgroup. Clair's approach to the conversation stood out as meetings like this can naturally become quite inward thinking. Clair's approach and contribution encouraged the meeting to reconnect with the purpose for our attendance and our mandate. I met Clair separately to follow up her offer of talking through ways of working and engagement opportunities. It is refreshing to find someone in a senior role with such passion for meaningful engagement with young people and with such a will to help them make a difference with their contributions. I look forward to tapping into Clair's experience and feedback in the future.

Chris James  
Lead Worker - Young Adult Carers &  
Young Carers Team  
York Carers Centre

Working with Clair offers and provides support with our youth volunteering project by providing me an opportunity to work with her and the now larger network of people who I was provided contact details to from Clair. The support that has been provided has proved vital with the youth volunteering project and Clair works hard to help provide more information, contacts and anything that has been needed and I look forward to our continued partnership for the future.

Matthew Boast  
Healthwatch Hull

It's been fantastic having Clair in post to support the youth voice work being undertaken by Volunteer Voice and the East Riding Youth Voice steering group, particularly in regard to progressing the young people's priority focused on improving mental health and emotional wellbeing, which I feel will benefit hugely from Clair's knowledge and experience.

Detty Tyler  
Children and Young People's Services Coordinator  
East Riding Voluntary Action Services (ERVAS) Ltd

#### 4. 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, boards etc.

In December 2022, 24 Children and Young People from across Humber and North Yorkshire attended the “Nothing About Us Without Us” Children and Young People’s Mental Health engagement event to coproduce the development of a Humber and North Yorkshire wide Children and Young People’s advisory group.





Over the next few months, the group grew to include over 200 young people aged up to 25, with lived experience of needing/accessing mental health support, from a diverse range of backgrounds and needs representing communities across Humber and North Yorkshire, living in urban and rural areas, including LGBTQ+ young people, neurodivergent young people, young people with Special Educational Needs and Disabilities, young carers, care experienced young people, young people of colour, and young people from other underrepresented groups. All events/meetings are coproduced with young people to ensure they are accessible, and that young people are leading on what is discussed to ensure the issues that matter to and impact on them are addressed.

## TOP PRIORITIES

Nothing About Us Without Us

Humber and North Yorkshire's Young People's Mental Health Advisory Group's Top Priorities for Improving the Mental Health of Children and Young People across Humber and North Yorkshire: -

1

Young people led awareness-raising and training, on the signs and symptoms of mental health problems, and issues impacting young people's mental health, including LGBTQ+, racism, etc.

2

Easier access to services

3

Young people leading on work and courses about children and young people's mental health, to ensure their voices are heard, their lived experience is valued, and they are not 'shrugged off' by professionals

4

Listen to us more

The advisory group of young people with an interest in/lived experience of mental health challenges, will meet frequently in their local area and twice a year across Humber and North Yorkshire, to influence mental health strategy, policy, and practice.

The group's agreed aims are:

- To inform decision making about young people's mental health services
- To make a change
- To hold services accountable
- To improve awareness and understanding of mental health
- To ensure that young people's experiences and opinions are embedded in decision making processes from start to finish

The young people's advisory group will also inform decision making by relevant steering groups such as the Humber and North Yorkshire Health and Care Partnership Children and Young People's Mental Health Steering Group and the Strategic Alliance and Operational Steering Group.



## Quotes from Young People

I had such a great time on Monday at the event and am pleased to say I was part of the start of this important project. It was so refreshing to see professionals and young people working together to start to make a change to ensure that decisions about youth mental health are made with us. Looking forward to seeing this opportunity progress.

Young Person

I learned that many opinions may be different, but you can still join together as a community to make something work.

Young Person

We got to meet new people from different places who want to also have our voices heard and all worked together to try and change it.

Young Person

It was an amazing experience not only as a young person, but to see so many professionals listening to a group of young people.

Young Person

I would like to say Clair is one of the most amazing people I've met in a long time. She is so passionate about her job and is there for young people every step of the way throughout. Since volunteering with Clair, she has really changed my life and has given me so many opportunities to be part of things I never thought I'd be a part of. She makes young people feel valued and that we are important. She has changed my life for the better and has had an influence in what I want to do as a career.

Young Person

What I liked about this was that young people were included from the very beginning because that doesn't usually happen. I'm involved in different groups, and we only ever get invited to be involved once the professionals have already decided what they want. It's exciting to be involved like this and I look forward to our next meeting.

Young Person

I know what it's like to not feel like I have a voice and to not be listened to by services for my mental health. I have had my journey, and now I want to help other young people with theirs by helping these services improve so Children and Young People can get the help they need. It's taken me years to get where I am today and if someone had said that I'd be a part of this group helping make services better I wouldn't have believed them. I see all my friends moving on with their lives and I think to myself 'What am I doing?' but now I look at myself and see that I am actually doing so so well, and I am making such a positive difference on the other people and how much I have grown in confidence. I've had my down times and there'll be more, but I know that no matter what I am still making a difference and I'm getting somewhere in life.

Young Person

The Engagement and Coproduction lead has also led on some large system wide consultations with Children and Young People on improving access to digital support (in partnership with Hull and East Yorkshire Mind), and also on developing an improved support offer for those Children and Young People who are admitted to Acute Paediatric wards with poor mental health. Both these pieces of work have involved surveys, focus groups, and working with a wide range of young people to develop recommendations for action by partners. We are tracking how these recommendations are implemented and feeding back to young people, so they know their contributions have made a difference.

Working with Clair is great, and her dedication to giving young people a voice is so valuable. Through our CYP Digital Review, it has been really useful to have a set individual focused on gathering input and feedback so that we can share recommendations with wider partners across the ICS, so that collectively, we can make a difference to local young people.

Jack Moore  
Marketing & Communications Manager  
Hull and East Yorkshire Mind

**Programme  
next steps/  
moving  
forward**

Work with the partners in the non-Test and Learn site areas to build relationships and support them on their Trauma Informed journey

Further develop the three locality Young People's Mental Health/Trauma Informed Care Advisory Groups

Expand and multiply Communities of Practice so they will be accessible to all areas

Further develop the training offer to provide training models for different roles and responsibilities (including both ARC and AMBIT)

Develop a Trusted Adult Campaign and Training in partnership with the Humberside Violence Reduction Unit (VRU)/Police and Crime Commissioner

Establish a fourth Test and Learn site for the Programme

Provide bespoke packages of support to further embed quality coproduction

Hold the first annual Trauma Informed conference in March 2024

Work in partnership with VCS organisations to provide Trauma Informed training to the education sector and schools

Provide guidance to partners on implementing engagement and coproduction practices within the Youth Justice Services

Establish external independent programme evaluation by CORC (Child Outcomes Research Consortium)

# Programme Key Performance Indicators (KPIs)

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

(Framework for Integrated Care (Community) for Humber and North Yorkshire Health and Care Partnership (ICS))

### Our Pledge

We will work collaboratively to ensure that all professionals working with children and young people who have or may 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.

#### Priority 1

Ensure strong programme governance and clear, effective programme management

#### KPI 1

Collaboration across the system takes place. Demonstrate proactive partnership engagement in the high level, multi-agency strategy group (Alliance), with clear governance structure to oversee the implementation of the programme

#### Priority 2

Make evidenced-based decisions, rooted in a clear understanding of local needs and resources

#### KPI 2

Numbers of staff/volunteers that have completed and shown positive outcomes from the Trauma Informed training which is relevant to role and responsibility. Regular reviews of the ongoing development of Trauma Informed policy and practice, and sharing of learning and best practice through Community of Practice engagement. Case Studies to evidence Trauma Informed Care in practice

#### Priority 3

Build a Trauma Informed Integrated Care System that improves outcomes for Children and Young People (CYP)

#### KPI 3

Numbers of staff/volunteers that have completed and shown positive outcomes from Trauma Informed training which is relevant to role and responsibility. Regular reviews of the ongoing development of Trauma Informed policy and practice, and sharing of learning and best practice through Community of Practice engagement. Numbers of organisations using self-assessment toolkit to evidence and improve policy and practice

#### Priority 4

Strengthen multi-agency relationships and improve co-ordination of service delivery

#### KPI 4

Number of organisations engaging in Trauma Informed Care Community of Practice  
Number of organisations working collaboratively with the Core Team to undertake TIC self-assessment toolkit

#### Priority 5

Pilot and evaluate place-based models of Trauma Informed intervention for children and young people who are at high risk of becoming first time entrants into the Youth Justice System

#### KPI 5

Test and Learn KPIs and NHSE dataset  
Annual Equality audit of Children and Young People involved in Test and Learn services  
Case Studies

#### Priority 6

Ensure genuine engagement with children, young people and their parent/carers and maximise opportunities to co-produce interventions

#### KPI 6

Numbers of Children and Young People involved in engagement and Coproduction Advisory Groups  
Number of organisations at place supported to improve engagement and coproduction  
Number of organisations engaging in Children and Young People Coproduction Communities of Practice/networks  
Annual Equality audit of Children and Young People involved

## The Core Team

The Programme Team are part of the Mental Health, Learning Disabilities and Autism Collaborative



**Alison Flack,**  
Mental Health, Learning Disabilities  
and Autism Collaborative  
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. Alison is a trustee of the Warren which form part of Flipside in Hull (one of our 3 Test and Learn sites).



**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.



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

Cat 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.



**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.



**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 and young people to thrive and be recognised as partners in influencing change, and actively promotes a culture of 'nothing about us without us'.



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

Lisa provides administration support to the Children and Young People's Trauma Informed Care Programme and the wider collaborative. She has previously worked in a strategic Children and Young People's Mental Health Programme and is excited to be working with people who are passionate about improving the mental health of children and young people.



**Nicky Windle,**  
Clinical Lead

Nicky joined the team on a part time basis, working also in the national Quality Transformation Team for Mental Health Learning Disability and Autism. Nicky has worked within the NHS for 24 years, and previously worked as a clinical lead for the national Children and Young People's quality improvement taskforce. This taskforce was stood up to specifically address quality within Children and Young People's In Patient Mental health following poor quality care and recommendations from regulators, investigations and reviews of care and treatment. Nicky also has long term experience as a clinician and a qualified nonmedical prescriber alongside working as a Matron within In Patient Child and Adolescent services within an integrated trust. With the huge increase in Children and Young People presenting within acute paediatric settings, Nicky worked alongside Health Education England and e-learning for healthcare to provide resources to front line staff to help better understand and care for Children and Young People's mental health and support families in distress.

Nicky's role within the team is to lead, support, and collaborate systemically with partners to understand, implement, and evaluate Trauma Informed practices and formulation. Trauma can be experienced at all levels including within organisations and Trauma Informed practice when delivered in context, with equity, with motivation for change and true impact as an outcome has the potential to reroute young lives and support mentally healthy systems and organisations.

If you would like to find out more information about the work of the Children & Young People's Trauma Informed Care Programme please get in touch.

Email: [hnf-tr.hnymhpmo@nhs.net](mailto:hnf-tr.hnymhpmo@nhs.net)  
Visit our Programme website [here](#)

