

**NORTH LINCOLNSHIRE COUNCIL**

**CABINET**

**THE EMOTIONAL HEALTH AND WELLBEING OF CHILDREN AND YOUNG PEOPLE IN NORTH LINCOLNSHIRE – PEOPLE SCRUTINY PANEL REPORT**

**1. OBJECT AND KEY POINTS IN THIS REPORT**

- 1.1 To consider a report of the People Scrutiny Panel in relation to the emotional health and wellbeing of children and young people.

**2. BACKGROUND INFORMATION**

- 2.1 At its meeting on 19 March 2019, the People Scrutiny Panel approved its draft report on emotional health and wellbeing.
- 2.2 The report was referred to Cabinet for consideration of the recommendations with a view with the eventual preparation of an Action Plan.
- 2.3 The Panel agreed to conduct a review into the emotional health and wellbeing of children and young people in late 2018. The review's aims were to ensure that services were sufficiently "joined up" and that services were responsive, sufficient and accessible to children and young people. A copy of the report of the Panel is attached to this report.

**3. OPTIONS FOR CONSIDERATION**

- 3.1 There are no options associated with this report.

**4. ANALYSIS OF OPTIONS**

- 4.1 There are no options associated with this report.

5. **FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

5.1 There may be some financial and resource implications associated with the recommendations when they are implemented.

6. **OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

6.1 Promoting the emotional health and wellbeing of children and young people is a key aim of the council, which is reflected in a number of policies and strategies, including the Joint Health and Wellbeing Strategy.

6.2 The panel's work included accessibility issues, demonstrating commitment to ensure that equalities issues under the Equalities Act 2010 have been considered.

7. **OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

7.1 Not applicable in relation to this current report.

8. **OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

8.1 The Scrutiny Panel consulted as appropriate during its review and details are set out within the report.

9. **RECOMMENDATIONS**

9.1 That the report and recommendations be received, approved and adopted.

9.2 That relevant officers prepare a co-ordinated, multi-agency action plan in response to the recommendations of the report for submission to a future meeting of Cabinet.

DIRECTOR OF GOVERNANCE AND PARTNERSHIPS

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Date: 6 September 2019

**Background Papers used in the preparation of this report – Nil**



# Scrutiny Report

## The Emotional Health and Wellbeing of Children and Young People in North Lincolnshire.

Report of the People Scrutiny Panel  
North Lincolnshire Council  
March 2019



**North  
Lincolnshire  
Council**

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# FOREWORD FROM THE CHAIRMAN



**Cllr Trevor Foster**  
**Chairman-People Scrutiny Panel**

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Mental health and wellbeing has, encouragingly, become a much more prominent issue in recent years. As we know, poor mental health is common in our society and can have a devastating effect on the person and those close to them. Mental ill health is the single largest cause of disability in the UK, contributing up to 22.8% of the total burden. In addition, around one in eight children and young people had at least one mental disorder when assessed.

Fortunately, this increased prominence in the public's mind has led to a prioritisation of

mental health by government and public bodies, and in wider society. The view that focussing on prevention, building resilience, and early help is now common, particularly when working with children and young people. As such, the People Scrutiny Panel agreed to examine how effective and joined-up local systems were. The panel wished to be assured that all of our children and young people were fully supported with their mental health, and that help was available if they needed more specialist care.

The panel began this work with no preconceived ideas, and with an objective to be constructive and proactive. We know that children and young people experience a host of pressures and challenges throughout their young lives, and we sought to understand fully how this could impact on them. I am confident that the panel handled this effectively and diligently, and that the witnesses we spoke to were open, frank and willing to listen to where services could be improved. North Lincolnshire Council has been acknowledged as having the best children's services in the country, but it was refreshing to hear the Director state that there would be no resting on laurels, and that there was always room for improvement. Although the panel were assured by some elements of the work being led by North Lincolnshire CCG when they spoke to us, we were understandably disappointed by their apparent initial reluctance to work with us on this important topic. Fortunately though, this

# FOREWORD FROM THE CHAIRMAN

issue is hopefully now behind us and we can continue to work together.

Like all parts of the country, the situation locally is certainly challenging. However, we found ample evidence that the council, health colleagues, specialist services, teachers, champions and school staff, and countless others were working well and that children were being supported. There was a widespread understanding that our youngsters' preparation for progressing through life was ensuring each child goes into adulthood as mentally well-equipped as possible.

On behalf of the panel, I would wish to re-emphasise that the priority for all partners in the coming months must be to co-ordinate and utilise the ongoing work in order to practically aid and support our frontline staff. Those working on a daily basis with children and young people must have the necessary resources. Only then can they properly support and improve the emotional wellbeing of our young people.

Finally, I would like to thank the panel for their hard work on this complex issue, and also thank the many witnesses we spoke to for speaking so candidly with us. We have made a number of recommendations to improve the situation across North Lincolnshire further and we look forward to them being implemented.

# BACKGROUND

The People Scrutiny panel agreed to conduct a review into the emotional health and wellbeing of children and young people in July 2018. This issue has gained national prominence in recent years, and the panel considered it prudent to ensure that services and support in North Lincolnshire were as comprehensive and joined-up as possible. This work was informed by local evidence and policy, national guidance and research, and input from a range of key stakeholders who are in constant contact with the children and young people of North Lincolnshire.

Given the complexity of this issue, this report represents an overview of the current and planned situation in North Lincolnshire. The panel is aware of ongoing local discussions to make further improvements, greater investment, and to co-ordinate services better. Naturally, the panel will monitor these improvements closely to ensure that they are implemented effectively. However, the panel welcomes these proposals and believes that they have the potential to greatly improve the lives of local children and young people.

In addition, the panel also welcomes the range of programmes, proposals, and guidance published by the government in recent years to ensure parity of esteem between mental and physical health. These build upon the direction within the Government's 2015 Future in Mind initiative, which identified five key themes to transform services across health, education and social care in order to address need.

These themes are:

- Promoting Resilience and Early Intervention
- Improving access to effective support – a system without Tiers
- Caring for the most vulnerable
- Improving accountability and transparency
- Developing the workforce.

The 2017 Government Green Paper 'Transforming Children and Young People's Mental Health' builds further on this, announcing a series of policies to provide dedicated support in schools and colleges, to establish new mental health teams for those with mild to moderate needs, and trial a four week waiting time for access to Child and Adolescent Mental Health Services (CAMHS).

Whilst the situation across the UK is undoubtedly challenging, we are confident that with the additional, ring-fenced £2bn investment for children's mental health first announced by the Chancellor in his Budget in October 2018, the proposals for improving mental health services in schools, and the plans for improved outcomes and integration for mental health outlined in the recent NHS Long Term Plan will significantly improve the situation. This investment and the related proposals will improve accessibility to community based and crisis care, and better integrate mental health services with community and family support, specialist social care, and primary and specialist healthcare.

# BACKGROUND

## The Situation in North Lincolnshire

The majority of children and young people in North Lincolnshire have good mental health. The most recent Adolescent Lifestyle Survey for those in secondary education found that, amongst 13-15 year olds, 91% of boys and around 80% of girls scored their wellbeing from 'average' to 'very high.' Amongst those with low wellbeing, the majority scored 'relatively low' rather than 'very low'. The 'very low' category generally applied to 3-5% of respondents.

When this wellbeing score was broken down into its constituent questions, 85% of respondents reported feeling loved all of the time, often, or some of the time. In addition, 78% felt optimistic about the future, 78% felt cheerful, and 76% felt confident and useful.

The results from a similar survey amongst college-aged (16-18) young people found that their emotional wellbeing was very similar to their 13-15 year old peers. 90% of boys and 80% of girls scored their emotional wellbeing from 'average' to 'very high.' These results are generally in line with national surveys.

The Adolescent Lifestyle Survey states:

There is much debate and concern about whether today's generation of young people is more anxious, depressed and stressed than previous generations. However, in the absence of a large scale national survey, ( the last psychiatric morbidity of children was completed in 2004), the evidence to support this is conflicting, with some studies suggesting no significant increase since 2000,

whilst others suggest an increasing prevalence of mental illness amongst low income children, (Millennium Cohort Study).

Therefore, it appears that North Lincolnshire performs at least as well as other areas, the situation is relatively stable, but there should be no complacency about monitoring the local situation. Thankfully, there is local commitment to continue this monitoring. Importantly, there is clear evidence that poor emotional wellbeing in childhood and adolescence tends to continue into adulthood, so the panel is encouraged that there is acceptance within North Lincolnshire that joined-up support for young people, and the building of coping skills and mental resilience, is very likely to lead to a reduction in people experiencing poor mental health into adulthood in the future.

Much work has been undertaken in recent years to address local need and to integrate services. The panel received evidence and further assurances that this was improving further, and the panel heard of many local approaches taken by statutory services and others to help to support our children and young people.

# FINDINGS

## Local Performance

The latest publicly available data published by North Lincolnshire CCG shows an improving picture for all-age mental health services in general, although further improvement in receiving psychological therapies were required. Limited information on services for children and young people are published, although the CCG's latest performance report identified that improvements were also required on waiting times for the consultation and advice pathway for specialist CAMHS referrals and also Autism Spectrum Disorder (ASD) / Attention Deficit Hyperactivity Disorder (ADHD) diagnostic pathways. The panel is aware that this work is being addressed and that progress is being made.

CAMHS waiting times are measured from referral to assessment, and North Lincolnshire performance data reflects the work done to improve these earlier in the year. The assessment pathway for the core CAMHS service is described as the 'getting help' pathway, and the key measures are as follows:

Percentage of non-urgent referrals seen within 10 weeks against a 95% target  
Percentage of urgent referrals seen within 24 hours / next working day against a 95% target

Despite a dip in non-urgent performance in early to mid 2018, the North Lincolnshire service has shown significant and sustained improvement against both targets, with 100% of non-urgent referrals being seen within 10 weeks throughout Q3 2018/19; and 100% of urgent referrals being seen within 10 weeks consistently since June 2018.

In addition, the CCG has a requirement to increase general mental health spending by at least 2.8%, which they are on target to achieve and exceed.

## Work Led by North Lincolnshire Council

The panel heard much impressive evidence of the ongoing and planned work undertaken by North Lincolnshire Council. Whilst this is across the council, and often in partnership with North Lincolnshire CCG, schools and others, the council often co-ordinate and take the lead in planning and delivering initiatives to support children and young people. Much of this work is delivered via the Mental Health Champions in each school and college, and is within the context of the Thrive principles described on page 11, and the wider strategy. Some examples of work include:

- Supporting emotional wellbeing through music at Oasis Henderson Avenue,
- Establishing an autism and ADHD parent peer support group, and a similar bipolar disorder support group
- Stress-reducing to-do lists,
- Disseminating signposting information about school nursing, Mental Health Champions, Youth Mental Health First Aiders, etc.
- Cyberbullying and Online Safety Q&A sessions on Facebook Live,
- Promoting Mental Health Week at Melior Community Academy,
- Supporting parents and carers via The Talking Shop and Scunthorpe and District Mind,
- Utilising worry dolls and worry stones,
- Creating and distributing resources for

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school staff to empower them to talk about mental health (students and their own),

- Establishing Jen's Special Place, a local support group for bereavement,
- Exam preparation and stress reduction techniques,

In addition, through its commissioning function the council has ensured that children and young people's mental health is taken into account. For example, the council's service specification ensures that all staff working for the sexual health service are trained in mental health, and that there are referral pathways between sexual health and the 0 – 19 Health and Wellbeing service. Another example of joined-up service provision is that all children and young people who attend Accident and Emergency with a mental health issue are referred to the school nursing service provided by RDaSH, which includes dedicated perinatal and Special Educational Needs & Disabilities nurses. This pathway ensures that continued support is provided to all.

The council, working with the Local Safeguarding Children's Board, has developed "Helping Children and Families (Threshold) Document" which provides a vision and framework for ensuring that children and young people receive the right care, at the right level, at the right time. There is an explicit requirement that this support will be at the earliest point and at the lowest 'level' through early help, so that the need for specialist intervention is reduced.

In very general terms, this suggests that

referral to the specialist CAMH Service should only take place where absolutely required, and not as a default. Therefore, efforts have been underway in recent years to address this. Naturally, this requires building capacity at the lower 'advice and guidance' level, and the panel are encouraged that this model more closely fits in with the principles of the Threshold Document.

## The Youth Council

Mental health has been a key priority for the council-facilitated Youth Council for many years. The Youth Council has set up an effective and inclusive sub-group called Positive Steps to co-ordinate local efforts to connect children and young people to service planners, commissioners, and front line staff. Positive Steps also act as a consultative body to ensure that all initiatives and projects are accessible and easy to read and are understandable to all, regardless of age, disability, nationality etc.

The Positive Steps group run a number of projects on topics such as reducing stress and online safety, and they also deliver workshops to young people and Mental Health Champions on issues such as positive body image, the importance of sleep, self-acceptance, and general wellbeing. North Lincolnshire Council provide financial and practical support to the members of the Youth Council to enable them to receive training in young people's emergency mental health first aid, and to network with all key national, regional and local agencies. The Positive Steps group was recently highly commended for Innovator of the Year in the National Positive Practice in Mental Health

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award, and also won the 2018 RDaSH Annual Award for Partnership Working.

The panel has been very impressed with the commitment and passion of the Youth Council members in helping to encourage positive emotional health and wellbeing.

## **Work Led by North Lincolnshire Clinical Commissioning Group (CCG)**

North Lincolnshire CCG are the lead commissioner for many mental health services, although in practice this is often done in co-ordination with other partners, including North Lincolnshire Council. Their work is set in the policy context described earlier in this report, but is also informed by local intelligence, including the Adolescent Lifestyle Survey, the Joint Strategic Needs Assessment, and other research.

The CCG is responsible for drafting and agreeing a Local Transformation Plan, which sets out the local situation and plans services accordingly. This plan runs from 2015-20 but is regularly refreshed. The local plan has identified the following priorities:

- Primary prevention,
- Improving access and supporting universal services,
- Caring for the most vulnerable,
- Eating disorders,
- Crisis / intensive support,
- Workforce development.

Each priority has a detailed rationale, a dedicated timeline and a clear implementation plan.

In addition, the CCG are leading on the successful implementation of an Infant Mental Health programme. A multi-agency Infant Mental Health Alliance has been established and is working on a number of priorities.

Finally, the CCG are currently developing an all-age mental health strategy, which the panel is hopeful will assist with the smooth transitioning from children and young people's services to adult services. The panel looks forward to seeing more detail about this important document in the coming months.

## **Work Led by Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH)**

RDaSH are a key partner in providing CAMHS across North Lincolnshire, and in shaping and delivering the Local Transformation Plan 'North Lincolnshire Children and Young People's Emotional Health and Wellbeing Transformation Plan 2015-20'. RDaSH are also the provider for school nursing across North Lincolnshire.

The service model for CAMHS continues to evolve, with a greater focus on the provision of consultation, advice, guidance and support. This brings the plan into alignment with the approach set out in the Threshold Document, where help will be available at an early stage and at the lowest appropriate level. This frees up specialist services for those most in need.

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## System-Wide Achievements

There have been a number of successes in recent years, led by commissioners, providers and other stakeholders. For example, the Community Eating Disorder service became operational in April 2016, and provides specialist support for those with eating disorders. There is also now an Intensive Home Treatment Service, aimed to reduce the need for tier 4 admissions and enable supported discharge from tier 4 facilities.

## System-Wide Achievements

Clearly, given the contact that schools and colleges have with children and young people, there is great potential to provide support, guidance and advice in these settings. Since April 2017, each school and college in North Lincolnshire has nominated a 'Mental Health Champion' to act as a trusted first point of contact for children and young people. Schools also address mental health issues, both as part of the curriculum and also on an ad hoc basis. At the time of writing, steps are underway to extend these named champions to other health and social care settings.

North Lincolnshire CCG and its partners have worked with educational institutions to implement a 'Thrive' model using the following principles:

## THRIVE model



# Conclusions

The scrutiny panel's overall impression of our children and young people's emotional health and wellbeing is that the situation is challenging, and that, like all other areas, mental health issues or low wellbeing do impact upon a small minority of children and young people. There is the need for constant vigilance and ongoing interaction with our children and young people in order to continue giving them the best support possible.

Despite this conclusion, the majority of problems experienced by children and young people in North Lincolnshire tend to be relatively mild and related to the normal process of growing up in the modern world, and it is important to note that there is good evidence locally that a large majority of young people's emotional health and wellbeing is encouragingly good. However, we must ensure that proportionate services are in place for those that require them. More importantly still, we must equip children and young people with the coping skills, emotional resilience, and the love, support and care necessary to enable them to cope and recover when faced with day-to-day problems or more serious life issues.

The panel is content that, at a strategic level, services are on the right track to increasingly deliver and support children and young people as effectively and efficiently as possible. The panel is content that a shared vision has been agreed in North Lincolnshire, built upon genuine integration, and that future services:

- 1 Are integrated, co-ordinated and accountable,
- 2 Ensure that referrals are minimised and only made where appropriate,
- 3 Are built upon the principles set out in the Threshold Document that the correct help is available at the correct time and in the right place, at the lowest level, in order to reduce and minimise lengthy delays in waiting for referral, assessment and treatment in specialist services.

Despite this, the panel is increasingly clear that integration now needs to move, with a degree of haste, from the theoretical to the practical. Services must become genuinely more integrated rather than characterised by a referral or multi-disciplinary approach, in order to maximise our ability to support our young people at a sometimes-challenging time of life. Services need to operate on a model of person-centred, co-ordinated care, which is strengths based and solution focused. More detail on this is likely to be forthcoming as part of the Integrated Health and Care Plan, which will form a blueprint for integration in the coming months and years. The scrutiny panel will obviously monitor these fundamental, yet timely and essential, developments with interest.

The panel suggests some methods of doing this, but this is a complex issue with many practical, legal, financial and other considerations. Leadership and buy-in from all relevant agencies, organisations and key representatives from across North Lincolnshire will be required. The panel is aware that these discussions are happening

# Conclusions

and look forward to implementation 'on the ground' beginning. However, the panel believes that new methods of planning and delivering support should be within the social model of support specified within the Green Paper referred to on page 6, with a shift away from a medical model. Even with specialist services such as support for eating disorders, Post-Traumatic Stress Disorder, psychosis etc. there is room for greater involvement of the family, carers and wider informal support, rather than one-to-one medical care.

The panel has seen evidence of future plans for further work, including greater joint planning and integration, and believes that the future looks encouraging in tackling this important issue. It is widely accepted that, nationally, mental health services have historically not received the priority that they deserve. However, this situation is changing and the panel is encouraged that North Lincolnshire's Health and Wellbeing Board and the evolving Multi-Agency Resilience and Safeguarding Board have taken particular interest in assuring and joining up services.

The panel was struck throughout its work by the dedication, professionalism and care for children and young people shown by all of those involved in planning and delivering these services. Time and again, members heard stories about front-line staff going 'above and beyond' in the support they give to North Lincolnshire's children and young people. In particular, the members were hugely impressed by the thoughtfulness and innovation involved in some of the council-led schemes to support local children, including

efforts around online safety, support for staff and students alike, and a host of practical measures designed to help children and young people. The panel would wish to thank everyone referred to above, working in a host of roles and services, for this dedicated, selfless and committed care.

# RECOMMENDATIONS AND DISCUSSION

**Recommendation 1:** The panel recommends that North Lincolnshire CCG cease using referral to assessment (being ‘seen’) as an agreed indicator with their providers, in favour of referral to treatment. The panel believe that this is a more meaningful measure, recognising that children and young people in specific need of specialist services require treatment, not assessment. The panel believe that this should begin at the start of the next commissioning cycle.

Discussion — The panel acknowledges, and welcomes, that a sizeable majority of children and young people’s problems and concerns will never require input from specialist CAMH Services. The panel are firmly against labelling those who may be experiencing the day-to-day highs and lows of being a young person nowadays. However, for the minority of those who do require the input of (and not necessarily referral to) the CAMH Service, the length of time between referral and the beginning of treatment is the key measure that people would be most concerned about. The panel is encouraged that the CCG have started planning for this, in line with the proposed waiting time standards for all children and young people referenced within the NHS Long Term Plan.

**Recommendation 2:** The panel recommends that North Lincolnshire Council and North Lincolnshire CCG engage with all schools, colleges and educational establishments to ensure that the roles and responsibilities of Mental Health Champions are understood by all Governors, who can then communicate this to others.

Discussion — The panel had some concerns that some governors remained unaware of who their respective Mental Health Champion was, and the sort of assistance that they could provide.

**Recommendation 3:** To assist with Recommendation 2, the panel recommends that all schools, colleges, and educational establishments within North Lincolnshire nominate a ‘Childhood Resilience Governor’, with a specific role in championing mental health issues and ensuring that building resilience, independence and self-management skills within children and young people is a key, continuing priority in all aspects of school life.. Help is available from North Lincolnshire Council to work with these governors around training, information, and support.

Discussion — The panel feels that a Child Resilience Governor could play a similar role to each school’s Safeguarding Governor, challenging Headteachers and others to ensure that building emotional resilience is a key investment in ensuring healthy, happy children and young people.

# RECOMMENDATIONS AND DISCUSSION

**Recommendation 4:** The panel recommends that clearer criteria for Mental Health Champions be drafted and agreed, and that these be communicated to all schools and colleges. The panel believe that this role should have genuine capacity to take on this responsibility, should have the support of senior leaders within the school or college, and should have access to specialist advice and guidance from the CAMH Service and others if required.

Discussion — it was apparent to the panel that Mental Health Champions were concerned that certain issues were too serious or specialist for them to deal with, and that they were concerned that they would ‘do something wrong’ or refer inappropriately. There appeared to still be some general confusion about where the Champions’ roles “began and ended”. The panel felt that this should be clarified, recognising that there will always be local judgements to be made. There should always be an assumption that the first point of contact made by a young person should almost always be the last and only person that the young person speaks to, whilst recognising that the Mental Health Champion may need to seek advice from others, and in far fewer cases, the direct involvement of CAMHS colleagues.

**Recommendation 5:** The panel recommends that North Lincolnshire CCG, in co-ordination with the council and others, produce and make available a guide for parents and carers on responsible and safe online activity, particularly around social media use.

Discussion — The panel, like many others, is concerned that some aspects of online activity can have a negative impact on children and young people. Of course, the panel notes that the internet can play a hugely positive role in enabling children and young people to connect to others and to seek advice and guidance on a host of issues (including emotional health and wellbeing). This work should build upon the principles behind the Life Central app, and could utilise the existing online safety guides produced by the Youth Council and make provision for regular review and at least an annual refresh.

**Recommendation 6:** The panel recommends to all schools and colleges within North Lincolnshire that ongoing efforts to recruit suitably checked volunteers to work within schools and colleges be given a renewed focus.

Discussion — The value of volunteering to both the volunteer and the institution are well-known. This can assist in providing a friendly face for lower level support, freeing up the Mental Health Champion, and can also assist with general school duties. As with the Mental Health Champions, the key task should be on encouraging self-resilience and self-management of moods and emotions, rather than medicalising any issues.

# RECOMMENDATIONS AND DISCUSSION

**Recommendation 7: The panel recommends that the work of the Infant Mental Health Alliance be prioritised and appropriately funded, recognising the importance of the development of the child from conception to age 2 on the mental health and wellbeing of the child.**

Discussion — The panel were encouraged that work was already underway on this issue, as part of the 1001-day workstream. However, the panel believes that this should form a more prominent part of the Transformation Plan, particularly around the ‘Primary Prevention’ priority. The panel believe that the additional funding announced by the chancellor in October 2018 should be largely directed to this workstream.

**Recommendation 8: The panel recommends that ongoing discussions on integration and the agreement of a strategic, holistic and joined up approach to address the wellbeing of North Lincolnshire’s children and young people should be prioritised, overseen by the Health and Wellbeing Board This should be an element of an overarching plan for children and young people.**

Discussion — The panel acknowledges that work to move away from ‘lead agencies’ towards integration and joint planning should be a key priority for North Lincolnshire in 2019/20. This avoids the potential for inappropriate referrals, independent operation, and disagreements about funding, and ensures that the right services can be delivered in the right place, at the earliest possible time. In addition, the panel feel it

prudent to maintain an overview of progress. Whilst the panel will continue to monitor this issue, the Health and Wellbeing Board, with its statutory duty to promote integration, is best placed to undertake this crucial role, although we would anticipate that other Boards and Partnerships would also be kept informed and involved in local efforts.

**Recommendation 9: As a key part of the integration agenda referred to above, the panel recommends that a workstream and strategy be developed to build workforce resilience in all those who work with children and young people in North Lincolnshire.**

Discussion — The panel believes that building resilience in our workforce is central to ensuring that this resilience can be passed on to local children and young people. Professionals need to be assured and confident in all of their actions, and they need to know that they will be supported and trusted by more senior figures from across their organisation and North Lincolnshire as a whole.

Report of the People Scrutiny Panel  
The Emotional Health and Wellbeing of Children and Young People  
North Lincolnshire