

CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE



Report subject	Children and Young Peoples (CYP) Mental Health (MH) Transformation update
Meeting date	15 September 2025
Status	Public Report
Executive summary	<p>[The CYP Mental Health Transformation Programme ("Your Mind Your Say") has progressed into the Mobilisation and Implementation phase following full business case approval and Phase 1 funding. Built around the THRIVE Framework, the programme represents a strategic, co-produced model for delivering integrated mental health support across NHS Dorset, Local Authorities, VCSE partners, and schools.</p> <p>Key priorities include mobilising early help and crisis response teams, expanding community (VCSE) access, Governance has been identified to ensure oversight and alignment with BCP's Early Help Strategy and the Families First Pathfinder.</p> <p>Funding has been approved, with future investment prioritised for MHST expansion. A Population Health Management dashboard will support outcome tracking and equity monitoring.</p> <p>CYP and family voices remain central, with feedback mechanisms embedded throughout. Interdependencies such as the Neurodevelopmental Review and Tier 3.5 services are acknowledged but remain outside the programme's direct scope. Crisis alternatives are under review, with youth worker pilots informing future service design.</p> <p>This transformation marks a significant shift in how mental health services are commissioned and delivered for children and young people in BCP</p>
Recommendations	It is recommended that members note the content of this report.
Reason for recommendations	N/A

Portfolio Holder(s):	Cllr Richard Burton – Portfolio holder for Children, Young People, Education and Skills.
Corporate Director	Cathi Hadley – Corporate Director Childrens Services BCP
Report Authors	Kelly Tilbury Project Support Officer – NHS Dorset
Wards	PAN Dorset – all wards/PCNs
Classification	For Update.

Background

1. A large-scale system transformation programme known as ‘Your Mind Your Say’ has been in progress focusing on co designing and producing with system partners, alongside CYP and their families, a new model of care for improving the emotional and mental health of CYP.
- 1.2. During 2023 NHS Dorset and partners co-ordinated a series of co production modelling workshops, to shape the future of children and young people’s mental health (CYP MH) care. The outcome of these workshops was that the new model must:

- Have different entry points so no wrong door
- Be needs led not diagnostically driven
- Have no referral barriers/thresholds
- Have no family told “you are not ill enough”
- Ensure families are welcomed with enquiry and discussion as to right solution for CYP and family
- Ensure family and CYP at centre with their expertise share and combined with ours
- Ensure choice and control for families
- Be integrated and co-located where needed and where possible
- Allow families where possible only tell their story once and build on it as needed
- Be able to self-referral and can return to service as needed without referral
- Have information and guidance at entry with openness about any waiting and while waiting be able to access other types of help as part of the offer for example sport or music or activity-based support
- Respond to crisis in a timely manner and ensure following on support

- 1.3. A comprehensive business case was developed to outline the case for change, the model localised to Dorset, financial phasing, the benefits and outcomes that CYP and their families will see with these changes. The business case has now been fully ratified, supported and phase 1 of funding has now been approved.

Options Appraisal

2. NA – Business case already approved at system level.

Summary of financial implications

3. N/A funding is applied via NHS funding streams – the approval of the Business case and its attributed funding has positive connotations for system partners.

Summary of legal implications

4. NA BCP responsibilities

4.1 NHS Dorset/ICB has a legal duty to meet the health needs of Dorset's population. The Joint Forward Plan commits to improving CYP emotional wellbeing, integrating with Local Authorities, and addressing inequalities. The 2025/26 Annual Operating Plan guidance requires ICBs to ensure CYP mental health services are fit for purpose, with timely access, 24/7 crisis response, and expanded MHSTs (Mental Health in schools Teams) in schools.

Summary of human resources implications

5. It is expected that implementing the new THRIVE model will support the integration of health and social care services, with staff co located and working alongside each other. These changes will improve the way services are delivered along with the location of the services. The offer will be dispersed and integrated where possible. Teams will require a base alongside space to work in the other agreed locations. This is a crucial change because the aim of the whole programme is to ensure help at the very earliest opportunity with very few referrals or exclusion criteria. The Thrive model is 0-25, however as the Business case has been modelled on ages 0-18years, the transition element of the work, will be absorbed as part of ongoing improvement across Children's and adults' services.

Summary of sustainability impact

6. If we do not transform CYP MH services, it will further exacerbate the current challenges for CYP and their families and increase pressures on the rest of the system (admissions, Out of Area placements, A&E attendances). To ensure the benefits are realised, transforming the way CYP MH services are delivered, to a needs focused and integrated approach is key.

Summary of public health implications

7. The main benefits to CYP and their families will be better access to timely support for their mental health needs, to promote improved health and wellbeing, and life changes. The main benefits to the system are improved productivity & efficiency with integrated working and potential for a reduction in high-cost specialist care with earlier intervention.

7.1 Individual Benefits

- Improved mental health supports better physical health, relationships, and education.

- Easier access to support via multiple routes (GP, hubs, digital, localities).
- Timely, needs-matched responses, building resilience.
- CYP and families make informed choices and feel ownership of care.
- Wider support options and improved outcomes lead to better life chances and care experiences.

7.2 System Benefits

- Better inclusion and educational outcomes.
- More integrated, productive working across services.
- Improved staff experience and reduced duplication.
- Shared language and framework across partners.
- Early help reduces demand for intensive services.
- Lower need for specialist placements and MH Act interventions.
- Fewer crisis presentations, reduced inequalities, and suicide rates

Summary of equality implications

- 8 NHS Dorset has completed a System Quality and Equality Impact Assessment (SQEIA), which has been reviewed and approved at the SQEIA panel in April 2025.

Summary of risk assessment

- 9 Culture change has been highlighted as a key risk and strategic priority. Led by Dorset Healthcare with system partner support, workstreams have been exposed to support with culture change activity. The Mobilisation and Implementation Governance (MIOG) plan outlines the governance and key workstreams that will continue the development and expand the culture work required across all partners to deliver this transformation. This includes robust public facing, stakeholder and current workforce communications and engagement strategy.

KEY LINES OF ENQUIRY UPDATES

1. Questions to be Answered by This Work

KLOE	Summary
1. Is the programme on track?	Mixed progress. Successes in co-production and neighbourhood model. Future needs include integrated front door development with BCP and Early Help transformation. Test & Learn phase underway.
2. How is system integration working?	Council, VCSE, and schools are engaged. INT programme is an interdependency, not a direct workstream. Voluntary sector access expanding via ACSS, KOOTH, Discovery.

KLOE	Summary
3. Crisis alternative development (e.g. cafes)?	Initial project group formed Jan 2025. Paused to align with Phase 1 integration of Getting Help and Risk Support. Youth worker pilots in BCP/Dorset linked to Emergency Departments for preventative support.
4. ND Review progress and transition at 18?	Neurodevelopmental (ND) Review is separate with distinct governance. THRIVE model supports up to age 25 with no wrong door approach.
5. Has additional funding materialised?	Yes – Phase 1 funding approved via Business Case. Financial plan in development for mobilisation tracking.
6–10. What is included in Phase 1 funding?	<ul style="list-style-type: none"> - Getting Help Workforce (BCP/DHC) - Getting Risk Support Workforce (BCP/DHC) - MHST Wave 11 (DHC) - Community support expansion (VCS i.e KOOTH ACSS) - Discovery project (VCS – DMHF)
11. Is the residential tier coming online?	Tier 3.5 is an interdependency, not a direct workstream of CYP MH transformation.

2. Data and Information Requests

Request	Update
Funding levels	All NHS-funded. CYP MH Full Business Case presented at Triple Lock (13 June 2025). Future MHST expansion prioritised in financial planning.
Financial breakdown	Phase 1 includes: <ul style="list-style-type: none"> - Community Support & Services - Discovery Project - MHST Wave 11 - CAMHS Redesign (Getting Help, More Help, Risk Support, Leadership, Medical)

Request	Update
CYP & families feedback	“Your Mind Your Say” initiative embedded CYP/family voice. Comms plan includes dedicated feedback resource. Input informs KPIs and benefits tracking.
Gap analysis & BI support	Business intelligence resource to be allocated. Public Health Management dashboard (PowerBI) will monitor health inequalities, KPIs, outcomes, and service use feedback.

3. Governance and Assurance Framework

From August 2025, the programme moves into Mobilisation and Implementation phase. A revised governance structure will be in place to ensure oversight, assurance, and progress. This includes:

- Continued design meetings with senior leads at BCP.
- Approval of a shared visual of purpose for BCP
- Subgroup meetings focused on specific cohorts (e.g. Children in Care, Care Experienced, Preparing for Adulthood)
- Alignment of timescales with BCP Early Help Strategy to support joint working and co-location

The Families First Pathfinder (FFP) programme now intersects both BCP’s Early Help transformation and NHS Dorset’s CYP MH transformation. Joint planning is underway to align workstreams and ensure cohesive delivery

Background papers

None – Background papers are classified as confidential, containing exempt information, not suitable for the public domain.

Appendices

There are no appendices to this report.