i-THRIVE

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

This is delivered by supporting localities to implement the THRIVE Framework (Wolpert., et al 2016) through their Child and Adolescent Mental Health Services (CAMHS) transformation and service improvement programmes using an evidence based approach to implementation.

The i-THRIVE Community of Practice includes organisations from across 72 CCG areas who are using the THRIVE framework as the basis of their CAMHS transformation and improvement programmes. **47% of the young people in England live within a locality that is a member of the i-THRIVE Community of Practice.**

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

i-THRIVE is enabling improvement on a national scale with over 60 sites across the country sharing learning about the implementation of THRIVE

Creation of the Community of Practice was made possible by the NHS Innovation Accelerator (NIA) programme. The NIA is an NHS England initiative delivered in partnership with England's 15 Academic Health Science Networks (AHSNs), hosted by UCLPartners. By successfully achieving NIA status, i-THRIVE became one of 17 innovations that were identified for scaling up in the NHS due to potential benefit for patients and the health service and robust evidence of economic value.

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

The 10 national accelerator sites and key areas of focus are:
- **Bexley:** 'Thriving', shared decision making, 'Getting Advice and Signposting' and 'Getting Help'
- **Cambridgeshire and Peterborough:** 'Thriving', the whole-system approach, 'Getting Advice and Signposting'
- **Camden:** 'Getting Risk Support' and shared decision making
- **ELFT**; including **Bedfordshire, Luton and Tower Hamlets:** 'Getting Advice and Signposting'
- **Hertfordshire:** whole system engagement, reducing waiting time and 'Getting Risk Support'
- **Manchester and Salford:** increasing access to services, creating a shared understanding of available services
- **Stockport:** integration of services and strengthening joint CAMHS commissioning between CCG, LA and schools
- **Waltham Forest:** 'Getting Advice and Signposting' and 'Getting Risk Support'

These national accelerator sites are working collaboratively to implement THRIVE as part of their CAMHS transformation plans.

The i-THRIVE Community of Practice has now grown from the original ten national accelerator sites in October 2015 to 72 CCG areas as of September 2017.

There are currently 263 individuals in the Community of Practice receiving regular updates about the i-THRIVE programme, the implementation of THRIVE and sharing learning about local implementation. There are a further 200 individuals in the Community of Interest who receive updates on the progress of i-THRIVE.

Overall, around 47% of children and young people in England live within a locality that is a member of the i-THRIVE Community of Practice.

i-THRIVE has successfully secured a number of grants with its Community of Practice members, including The Health Foundation Scaling Up Improvement, The Health Foundation Innovating for Improvement, Health Education England Innovation Award, Health Education North Central London Education grant and UCLPartners Start Up Funding.

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

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

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

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

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

i-THRIVE

i-THRIVE is the implementation of the THRIVE conceptual framework, using an evidence based approach to implementation in order to translate the principles of THRIVE into models of care that fit with local context.

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

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

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

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

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

The i-THRIVE national programme team supports sites locally with implementation and engagement events, the delivery of workshops, providing coaching and advice to tackle barriers to implementation and support for implementation planning.

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

The four i-THRIVE Academy development modules are:
- Shared Decision Making
- Getting Advice: Assessment and Signposting
- When to Stop Treatment: Building Confidence in Letting Go
- Risk Support

Pilots of the four Academy modules were delivered in March and April 2017 to over 200 professionals from 56 organisations. Sites that are implementing THRIVE can now buy in these modules to be delivered locally to their staff.

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

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

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

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

Expected impact of the implementation of THRIVE

We anticipate the following impact as a result of the implementation of THRIVE as a local model of care:
- Effective signposting will increase use of community services, self-care and peer-support networks
- We expect to increase the proportion of young people accessing CAMHS with higher proportional improvement in vulnerable groups due to outreach and the location and accessibility of assessment services (primary care, community and schools)
- Waiting times will reduce
- The mode number of contacts of services will relate better to need
- Engagement with services will improve, with young people being involved in co-designing services, their care and in peer-support networks

- Shared decision making will increase and, as a result, patient experience measures will also improve
- Routine measurement of clinical outcomes will improve and there will be an increase in the use of goal based measures
- The costs of CAMHS services will not be reduced, but efficiency will improve by increased throughput

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

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

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

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

THRIVE and i-THRIVE is aligned to and built on emerging tariff payments and THRIVE is identified within *Future in Mind* as a suggested approach to moving away from tier based services.

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

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

Anna Moore, i-THRIVE Lead at a.moore@ucl.ac.uk
Emma Louisy, i-THRIVE Programme Manager at elouisy@tavi-port.nhs.uk
Rachel James, i-THRIVE Clinical Lead at rjames@tavi-port.nhs.uk

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

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