HEALTH AND WELLBEING BOARD 26 July 2016

Title: Child and adolescent mental health needs assessment				
Report of the Public Health Team				
Open Report	For Decision			
Wards Affected: All wards in the borough	Key Decision: Yes			
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Sponsor:

Matthew Cole, Director of Public Health

Summary:

The mental health of our children and adolescents is of critical importance to Barking and Dagenham. The borough's future is dependant on having a mentally healthy population. It is crucial that our children and young people have access to universal wellbeing services and CAMH services when they need them.

Children's mental health is a national issue and is being addressed at a national and local level. Nationally this view is being directed through government strategy and policy The Five Year Forward View for Mental Health (2016) and Future in Mind (FiM) (2015). In Barking and Dagenham we have undertaken a children and adolescent services (CAMHS) needs assessment and have put in place a Children and Young People's Mental Health Transformation Plan (CYP MH TP). This paper presents the needs assessment and focuses on current services provided to CAMHS and gaps in those services.

A requirement of NHS England was the development of a CYP MH TP to underpin the delivery of FiM. To support this process additional money was allocated to Barking and Dagenham CCG as part of Barking, Havering and Redbridge CCG.

The CYP MH TP details the five key themes that identified nationally for specific development and investment in 2015/16, in addition to specific investment in eating disorders services and perinatal mental health.

From the needs assessment the Director of Public Health recognises that there are 14 areas where, through the CYP MH TP and other commissioning processes, services can be redesigned locally in Barking and Dagenham to better meet the needs of our children and young people. Some of the redesign is addressed in the CYP MH TP, see accompanying paper. However, while we do have money to invest in children and adolescent mental health we have done the analysis and recognise that there are still gaps in service delivery. The needs assessment provides robust information on need so that partners can prioritise how resources are allocated. The needs assessment will inform the CYP MH TP and how investment is prioritised in a time of austerity.

The gaps identified in CAMHS by the need assessment are:

- While there is good Tier 1 and Tier 2 intervention there is a lack of co-ordinated universal effective prevention and early intervention available for children and young people with emerging emotional difficulties.
- Inconsistent responses to early parenting problems are increasing the number of children presenting with emotional and behavioural difficulties later in childhood.
- Many practitioners in universal and primary care services feel they lack both the skills and confidence to intervene effectively with those families who have children and young people who are experiencing escalating mental health problems.
- Services provided to children and adolescents are sometimes missing the signals of risk. Missing signals of risk results in missed opportunities for families.
- Families and staff are not always aware of what support and services are available to support mental wellbeing and deal with mental health problems.
- Improvements in pathways will reduce demand; however, within specialist services there are some capacity issues.
- Data collection to inform outcomes and service performance needs to be enhanced.

The needs assessment is available at http://moderngov.barking-dagenham.gov.uk/ieListDocuments.aspx?Cld=669&Mld=8815&Ver=4. From the needs assessment the Board can:

- Understand the mental health needs of children and young person's living in Barking and Dagenham.
- Understand the services that respond to these needs currently.
- Understand the gaps in current provision.
- Build a model of response to the identified needs based on robust evidence.

Recommendation(s)

It is recommended that the Health and Wellbeing Board:

- Endorses the findings of the Child and Adolescent Mental Health Needs Assessment.
- 2. Endorses that the findings be used to support the commissioning of Children and Adolescent Mental Health Services for the residents of Barking and Dagenham.

Reason(s)

Mental wellbeing and good mental health of children and adolescents is critically important nationally and locally. This has been recognised in national and local policy and strategy. It is essential that good evidence based practice is in place in Barking and Dagenham to ensure that we can support good mental health in our future generation, particularly as we move into a time of transformation in the way in which services are delivered.

The CAMHS needs assessment supports the evidence-based transformation of services and prioritisation of investment for Barking and Dagenham.

1.0 Introduction

Children's mental health is an important issue and is being addressed at a national level and locally in Barking and Dagenham. Nationally a transformation is being directed through government strategy and policy the Five Year Forward View for Mental Health (2016) and Future in Mind (2015).

In order to better understand the emotional wellbeing and mental health needs of our children and adolescents, the London Borough of Barking and Dagenham (LBBD) commissioned a CAMHS needs assessment. The scope of the needs assessment was to deliver the following four things:

- 1) To understand the mental health needs of the children and adolescents living in the borough.
- 2) To understand the services that respond to these needs currently.
- 3) To understand the gaps in current provision.
- 4) To build a model of response to the identified needs based on robust evidence.
- 1.1 Keeping mentally healthy is as important as keeping physically healthy

Barking and Dagenham recognises the importance of this as a borough. Also this view has been promoted through government strategy and policy, particularly in The Five Year Forward View for Mental Health (2016) and FiM (2015).

- 1.2 A requirement of NHS England for the delivery of Future in Mind was the development of a CYP MH TP for CAMHS. To support commissioning to improve CAMHS based on the CYP MH TP additional money was allocated to Barking and Dagenham CCG as part of Barking, Havering and Redbridge CCG. While is welcomed the resource does not completely meet the identified need in the needs assessment.
- 1.3 **The CAMHS needs assessment provides local information** that we will use to give clear, evidence-based guidance on the gaps in current CAMHS and priorities for investment.
- 1.4 In presenting this evidence-based prioritisation we also take into account the national recommended model as set out in Future in Mind.
 - Theme 1: Building resilience and promoting prevention.
 - Theme 2: Developing a Wellbeing Hub.
 - Theme 3: Maximising use of digital resources and guided self support.
 - Theme 4: Better support for children, young people and families with mild/emerging behaviour difficulties.
 - Theme 5: Better support for looked after children and those leaving care.
- 1.5 The local strategic direction for emotional wellbeing and mental health in Barking and Dagenham reflects national policies. There is an emphasis on resilience-building, early help, better support for the most vulnerable children, and service transformation, these are being addressed through the CYP MH TP. The transformation plan is a five year plan to close the gap on children and adolescent mental health and wellbeing in Barking and Dagenham. The plan addresses building resilience and promoting prevention. This will be delivered through the development of a wellbeing hub; maximising the use of digital resources and quided self-support; better support for children, young people and families with

mild/emerging behaviour difficulties; better support for looked after children and those leaving care; and a new service model for eating disorders.

2.0 Overview

Good mental health is more than the absence of mental illness; it is a positive sense of well-being. This includes the ability to play, learn, enjoy friendships and relationships, as well as deal with the difficulties experienced during childhood, adolescence and early adulthood.¹

- 2.1 It is important to have support in place to develop mental health resilience in universal services such as children's centres, schools, youth clubs etc. This also means that all parts of the system that work around the child, adolescent and family have a part to play in promoting their mental health and supporting them when they are experiencing difficulties.
- 2.2 In addition to services that build resilience it is essential that when children and adolescents need mental health intervention that children, adolescents and their families have access to good quality Tier 2, Tier 3 and specialist Tier 4 services.

3.0 What did the CAMHS needs assessment find?

The numbers of children and adolescents having mental health problems in Barking and Dagenham are high compared to other London boroughs and other England boroughs:

- 3.1 The number of children with diagnosable mental health problems will increase by 2020 to 8,044.
- 3.2 The Barking and Dagenham population scores very highly on the key risk factors for child mental illness. These include those living in poverty, Looked After Children, those in contact with the criminal justice system, those with a learning disability, children whose parents have their own mental health problems, and children living in situations of domestic violence. Barking and Dagenham also has a disproportionately high number of first time offenders.
- Taking all the above factors into consideration, at least 8,044 children and young people may need support for their mental health in Barking and Dagenham in 2020. The number of children may increase to more than 8,044. This is a significant increase from the current figure of up to 7,188.
- 3.4 The report particularly found that the borough is already providing a significant amount of activity around mental health resilience and prevention. The report details the excellent work that is already being delivered in building reliance Tier 1, Tier 2, Tier 3 and Tier 4 services.

4.0 How do the cost and outcomes of CAMH services for Barking and Dagenham children benchmark with other areas?

Using ChiMat and NHS England benchmarking data we were able to compare the cost of CAMH services across North East London (NEL). The services include services provided to Barking and Dagenham residents.

4.1 In 2012-13 Tier 1-3 and Tier 4 CAMH services in North East London were in the highest 25% of costs across the UK by 2014-15 the cost of services had decreased

¹ NPC (2008) Heads up. Mental Health of Children and Young People.

- in comparison to other providers and were close to the average cost of CAMH services in England.
- 4.2 When compared with other areas of England the cost outcomes provided for Barking and Dagenham children benchmark well with other areas. The exceptions are we have poorer comparative cost outcomes for first time entrants to the youth justice system and numbers of hospital admissions for alcohol specific conditions.
- 4.3 It should be noted that cost and outcome data is based on individuals who are accepted by CAMH services for treatment. This will be in Tiers 2 and 3. Cost and outcome data is not currently available for Tier 1, prevention.

5.0 What local CAMH services are provided?

The services available to children and young people in Barking and Dagenham were mapped across four tiers²:

- **Tier 1** prevention and resilience building activities, which are typically picked up by schools and colleges, paediatricians, health professionals and 3rd sector services.
- **Tier 2** services available within school, children's centres (via mental health workers up to the 31 March 2016), drop in centres and 3rd sector services.
- An integrated Tier 2/3 CAMH service provided by North East London NHS Foundation Trust (NELFT), including a Crisis Response Team (sitting between Tier 3 and Tier 4).
- A Tier 4 inpatient service (Brookside CAMHS Tier 4 and Willow High
 Dependency Unit) commissioned by NHS England. Due to unavailability of local
 beds, some young people from Barking and Dagenham go to in-patient units in
 different parts of the country. This service is currently unavailable due to
 building work, the service is being commissioned for our residents in other
 areas of the UK while the building work is completed.
- 5.1 Children's centres, schools, youth clubs etc., universally accessed services in Barking and Dagenham report that they are involved in building mental health resilience in some way. This is not a universal service, and is provided formally through BAD and also via PHSE in some, but not all, schools. Services provide opportunities to discuss mental health concerns, or by ensuring that children and young people have someone to talk to 'in general'3.
- There is a plethora of promotion, prevention and interventions occurring in schools, including counselling, PHSE, anti-bullying approaches, amongst many more. Although there is a plethora of service, the service provision is again not universal. Professionals working at Tier 1 also indicated a range of emotional and practical support provided to support low level mental health needs including one-to-one work, home visits, reminders to attend appointments, consultation with CAMHS, counselling and referrals to other agencies. In schools it included pastoral support, mentoring support, groups, signposting, and support for parents.
- 5.3 Tier 2, or targeted services, are most likely to be involved in the provision of early intervention, or working with those children and young people who have specific risk factors for higher rates of mental health problems. Barking and

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² Mental health services are currently structured in tiers, a key recommendation of the CYP MH TP is to remove the traditional tiers and have a single point of access to services

³ Facilitated staff workshops held in October 2015

Dagenham has a well-embedded weekly Multi Agency Panel (MAP) which manages referrals to early intervention services which anyone can refer to. It also provides advice and consultation, including whether a child should be referred for CAMHS intervention.

- 5.4 Tier 3, or specialist CAMHS referrals to community CAMHS average 103 per month and 94 are accepted. 59 new first appointments on average are conducted per month. About 340 children and young people are seen per quarter. Children and young people are seen on average, for 7.85 appointments, 76% of those discharged from the service did so on clinical advice. There is an all-age eating disorder service.
- 5.5 Barking and Dagenham has Tier 4 services, that is, a crisis response team (not 24 hours) and in-patient care within the borough. However, beds are commissioned nationally and sometimes children and young people have to go out of the borough to access in-patient care as local beds are full. This is standard procedure; however, out of borough placements only used when absolutely necessary.

6. Gaps in service provision

Analysis suggests there are gaps in services provided and these gaps should have priority in future development:

- 6.1 While there is good Tier 1 and Tier 2 intervention there is a lack of coordinated universal effective prevention and early intervention available for children and young people with emerging emotional difficulties. This appears to be contributing to the escalation of need with growing numbers of referrals to high cost services such as specialist CAMHS or social care services. Disinvestment in this service has contributed to this outcome.
- Inconsistent responses to early parenting problems are increasing the number of children presenting with emotional and behavioural difficulties later in childhood. This has a significant impact on a range of outcomes including relationships and education. Underlying issues such as domestic violence, the quality of attachment in infancy are potential root causes which need to be better addressed to ensure the risks to children are managed.
- 6.3 Many practitioners in universal and primary care services feel they lack both the skills and confidence to intervene effectively with those families who have children and young people who are experiencing escalating mental health problems. This is reported as a particular issue for teenagers.
- 6.4 Services provided to children and adolescents are sometimes missing the signals of risk. This because staff in these services have not always been developed to recognise signs and symptoms of mental health problems.
- 6.5 **Missing signals of risk results in missed opportunities for families**. When this happens needs are escalated and families are 'funnelled' up tariff receiving more intrusive levels of intervention that are less likely to be successful.

- 6.6 Families and staff are not always aware of what support and services are available to support mental wellbeing and deal with mental health problems. A gap in professionals' knowledge of mental health support available to children and young people is identified by practitioners, parents and young people themselves.
- 6.7 Improvements in pathways will reduce demand; however, within specialist services there are some capacity issues. These capacity issues are impacting on waiting times and that there is a need for some demand and capacity planning.
- 6.8 **Data collection to inform outcomes and service performance needs to be enhanced.** This is recognised by Department of Health's Task Force Report, *Future in Mind: Promoting and improving our children and young people's mental health and wellbeing.*
- 6.9 Some of the gaps identified above have been addressed through the CYP MH TP.

7.0 Recommendations based on the CAMHS needs assessment

From the needs assessment, 14 areas have been indentified. These are areas where services transformed in the future can be redesigned to improve outcomes. The 14 areas are:

- 1) Introduction of the adapted Thrive model into Barking and Dagenham services.
- 2) Alignment of governance and information to support the delivery of the Local Transformation Plan.
- 3) Resilience Building in all service tiers of service.
- 4) Emotional wellbeing and mental health in early years.
- 5) Emotional wellbeing and mental health age 5-12.
- 6) Emotional wellbeing and mental health in schools.
- 7) Emotional wellbeing and mental health in adolescents.
- 8) Primary care services.
- 9) Specialist services Tier 3 and 4.
- 10) During transition.
- 11) Partnership working.
- 12) Participation and active involvement.
- 13) Workforce development and resilience building.
- 14) Targeted services.
- 7.1 Recommendations for redesign in each area are included in Attachment 1. The full CAMHS needs assessment is available at http://moderngov.barking-dagenham.gov.uk/ieListDocuments.aspx?Cld=669&Mld=8815&Ver=4
- 7.2 The CYP MH TP was written in parallel with the CAMHS needs assessment. The findings and recommendations of the 2015 Mental Health needs assessment and the 2015 JSNA were used to inform the CYP MH TP. The findings of the CAMHS needs assessment will inform forward plans and how investment is prioritised.

8.0 Financial Implications

Implications completed by: Katherine Heffernan, Group Manager, Finance.

In respect of resource, there isn't enough to cover the full range of recommendations from the needs assessment. However, prioritisation of resource would need to be undertaken by the partners based on the needs assessment. Additional resource from central government has been identified for implementation of the CAMHS transformation plan.

8.1 Legal Implications

Implications completed by: Lindsey Marks Principal Solicitor Children's Safeguarding.

There are no direct legal implications arising from this report.

8.2 Risk Management

None.

Background Papers Used in Preparation of the Report:

Barking and Dagenham: CAMHS needs assessment http://moderngov.barking-dagenham.gov.uk/ieListDocuments.aspx?Cld=669&Mld=8815&Ver=4

List of Attachments:

Attachment 1: Prioritised areas for action: Barking and Dagenham Child and Adolescent Needs Assessment