

Children & Young People's Mental Health: Progress of Long Term Plan and Impact of COVID-19

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Professor Prathiba Chitsabesan

Associate National Clinical Director for CYPMH, NHSE/I

Sarah Brown

*Deputy Head of Mental Health, Children & Young People's Mental Health Programme
Lead, NHSE/I*

NHS England and NHS Improvement



Children and Young People's Mental Health before COVID-19 – where were we?

The current transformation programme started with Future in mind...



Our overall ambition is to enable every child and young person with mental health needs to achieve their goals and life potential.



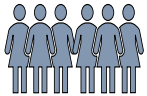
Our principles:

- Evidence Based practice
- Outcomes inform treatment and service development
- Supervision
- Authentic Participation

This requires us to:

- **Build better mental health services** aligned and integrated with the 'whole system' of support.
- **Improve the outcomes and experience** of children and young people and their families/carers
- **Increase access** to effective evidence-based treatment when required, including minimising inappropriate inpatient or secure care
- **Reduce health inequalities** ensuring access for groups and individuals who have historically found it hard to find support
- **Support prevention, early intervention and the reduction of stigma**
- Invest in the **competence and capacity of the workforce**
- **Continue to focus on prevention**, including of self harm and suicide

The NHS Long Term Plan is set in the context of progress to date



- Increased spend on CYPMH
- 20% increase in core CYPMH posts, with a 23% increase in whole time equivalents [WTE] in NHS Trusts
- Children and Young People’s Improving Access to Psychological Therapies [CYP IAPT] programmes rolled out across 100% of the country and is now business as usual with existing and new staff trained to deliver evidence-based therapies



- CYP eating disorder services are making progress towards 95% access target by 2020/21
- The 2018 survey of crisis services shows an increase in comprehensive offer (crisis assessment, brief response and intensive home treatment) being commissioned, as well as significant growth in services operating 24/7 or over extended hours.

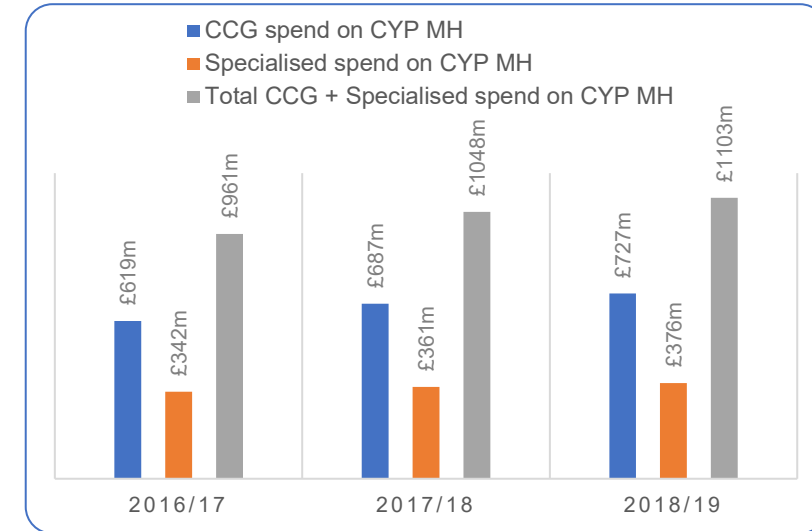


- Over 180 new Mental Health Support Teams [MHSTs] in the process of being established since 2018



- Re-distribution of inpatient beds to provide more beds across a range of needs and in places where previously there were no beds. Roll out of Provider Collaboratives to support place based commissioning.
- For those in the justice system, 13 forensic children and young people’s mental health services [FCAMHS] regional teams established, and SECURE STAIRS evidence-based interventions in all secure settings.

- Almost 560,000 CYP received at least one contact from NHS funded services in 2019/20 391,940 had two or more contacts*. The Five Year Forward View for Mental Health [FYFV MH] target of 35% prevalence access by 2020/21 (based on ONS 2004) has been delivered early at 36.7%, based on ONS 2018 the annual % figure is 34.7%



Future in mind

Promoting, protecting and improving our children and young people’s mental health and wellbeing



Four Week Waiting Times

- Test approaches that could deliver 4ww times for access to NHS support, ahead of introducing new national waiting time standards for all children and young people who need specialist MH services

Eating Disorders

- Boost investment in children and young people's eating disorder services to continue seeing 95% of urgent cases within 1 week, and within 4 weeks for non-urgent cases.

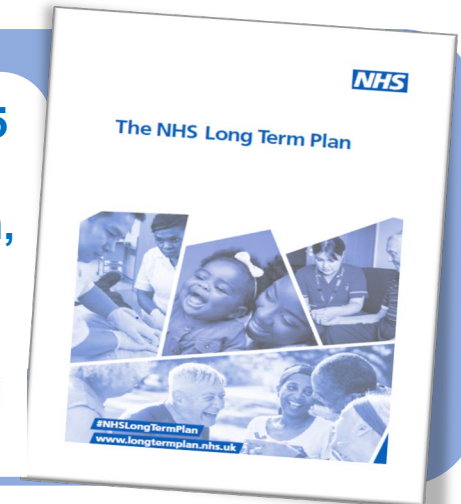
Crisis Services

- With a single point of access through NHS 111, all children and young people experiencing crisis will be able to access crisis care 24 hours a day, 7 days a week by 2023/24

Digital Therapies

- Develop digitally enabled care pathways for children and young people in ways which increase inclusion

Comprehensive offer for 0-25 year olds integrated across health, social care, education, and the voluntary sector to address health inequalities



Whole pathways, including inpatient beds

- Extension of New Models of Care/Provider Collaboratives continue to drive integrated pathways

Access

- MHSTs form part of the commitment that by 2023/24, at least an additional 345,000 children and young people aged 0-25 will be able to access NHS-funded mental health services

Mental Health Support Teams (MHSTs)

- MHSTs working in schools and colleges – early intervention and whole school approach across 20-25% of country by 2023

Wider Commitments

- Additional investment in Youth Justice services
- Reduced waiting times and increased support for children and young people with learning disabilities and/or autism
- 6,000 highly vulnerable children with complex trauma will receive consultation, advice, assessment, treatment and transition into integrated services

Key Interfaces with NHS Long Term Plan objectives

The significant increase in capacity across all of CYPMH will benefit . But there are themes where alignment between health and children's services is particularly important:

- **Addressing Health Inequalities** – Local authorities, and Council members in particular, have connections and access to local communities. This provides insight and information to assist in planning and address issues such as concerns about stigmatisation.
- **Mental health services in education** – this includes Mental Health Support Teams, but there are a wide range of other services operating to support children within education settings. This includes School Nursing, Educational Psychology and Speech and Language Therapy.
- **Managing Complex Cases** – a partnership approach is required to manage children with a range of complexities, including safeguarding, children involved with the Youth Justice system and those with Learning Disability and Autism.
- **Crisis and Emergency Care** – the need to work with our health partners to prevent crisis presentations but to manage them effectively when this is needed.
- **Provider Collaboratives** – working collectively to ensure that young people with the most complex needs can receive effective support as close to their home and community as possible.
- **Health and Justice** – Youth Offending Services see high levels of young people requiring mental health support.
- **Vulnerable groups: Children in Care and Care Leavers, children with Special Educational Needs and Young Carers** – local authorities have statutory responsibilities for many groups of children that have high rates of mental health conditions.

Addressing Vulnerability



A renewed focus on Addressing Vulnerability and Equality, Diversity and Inclusion has been implemented following the poor outcomes experienced by some groups of CYP during the COVID Pandemic and overall surge in CYP MH referrals.

Learning Disability & Autism: supporting development of the Dynamic Support Register process, and co-commissioner and host-commissioning guidance to reflect the MH needs these CYP

Looked After Children and Care Leavers: working cross-department with DFE, DHSC and PHE to engage with review of children's social care, Care Leavers Ministerial Board and pilots looking to improve MH assessments for LAC

Health inequalities and consideration of the MH needs of looked after children/care leavers are 'Key Lines of Enquiry' in assurance of CYPMH Local Transformation Plans

Participation in the SEND review

Health & Justice: reviewing the approach to and development of the service offer for early and effective personality disorder identification, high risk / complex CYP, and the needs of girls in the secure estate

MHIN: investigating links to poor mental health outcomes for CYP and adverse childhood experience (ACE's)

We have renewed our approach to Physical and Mental Health Integration and links with personalised care team to ensure the MH needs of groups of children with co-morbidities are considered throughout the CYP system

Positive Practice: supporting development of gathering and sharing best practice examples e.g. Healthy London Partnership equalities data set and the advice for working with LAC and their MH

The impact of COVID on children and young people's mental health and the support by mental health services in the community

CYP Mental Health – Prevalence 2017 & 2020



- Prevalence of any ‘mental disorder’ (5-16 years):
 - 10.8% in 2017 to
 - 16.0% in 2020
- 1 in 6 children and young people aged 5 to 16 years had **at least one** ‘mental disorder’.
- Prevalence remains greater for **young women aged 17-22 (27.2%) compared with 13.1% of young men**. Age and sex remain important factors.
- The proportion of **those unlikely to have a disorder has stayed relatively stable** (75.4% of all 5-16 year olds in 2017 compared to 74.4% in 2020).
- The data show the rise in probable disorder contrasts with a reduction in those with a *possible* disorder (13.7% of all 5-16 year olds in 2017 compared to 9.6% in 2020).
- 30.2% of children whose parent experienced psychological distress had a probable mental disorder.

Prevalence (and 95% confidence intervals) of any mental disorder in children and young people in England by age and sex, 2020

| | Boys | Girls | All |
|-----------------------|----------------------|----------------------|----------------------|
| 5 to 10 year olds | 17.9 (14.7 to 21.2) | 10.8 (8.3 to 13.3) | 14.4 (12.4 to 16.5) |
| 11 to 16 year olds | 15.3 (12.2 to 18.4) | 20.1 (16.5 to 23.7) | 17.6 (15.3 to 20.0) |
| 17 to 22 year olds* | 13.3 (8.9 to 17.7) | 27.2 (22.5 to 31.9) | 20.0 (16.9 to 23.2) |
| All 5 to 16 year olds | 16.7 (14.4 to 18.9) | 15.2 (13.0 to 17.4) | 16.0 (14.4 to 17.6) |

- For 5 to 16 year olds, **18.8%** of children of White ethnic backgrounds had a probable mental disorder in 2020, compared with **7.5%** of children of Black and Minority Ethnic (BME) backgrounds. Rates of probable mental disorder increased for children of White ethnic backgrounds since 2017 (from 13.1%). Although rates appeared to also increase for children of BME background, this increase was not statistically significant.
- There were no significant differences in the presence of probable mental disorders in 5 to 16 year old children by neighbourhood-level deprivation between 2017 and 2020.

The impact of COVID on children and young people's wellbeing



Disrupted education

Including keeping up with schoolwork, uncertainty over the future, getting good grades in exams, or being worried that exams may be cancelled.

Loss and uncertainty

- Bereavement, relationships, future opportunities
- Lack of predictability/routines

Health inequalities

- Children and young people with certain characteristics have experienced greater negative impacts on their mental health and wellbeing including families living in poverty
- Vulnerable groups (CYP with SEN, neurodisability, pre-existing MH needs, LAC, LGBTQ, BME, key transitions)

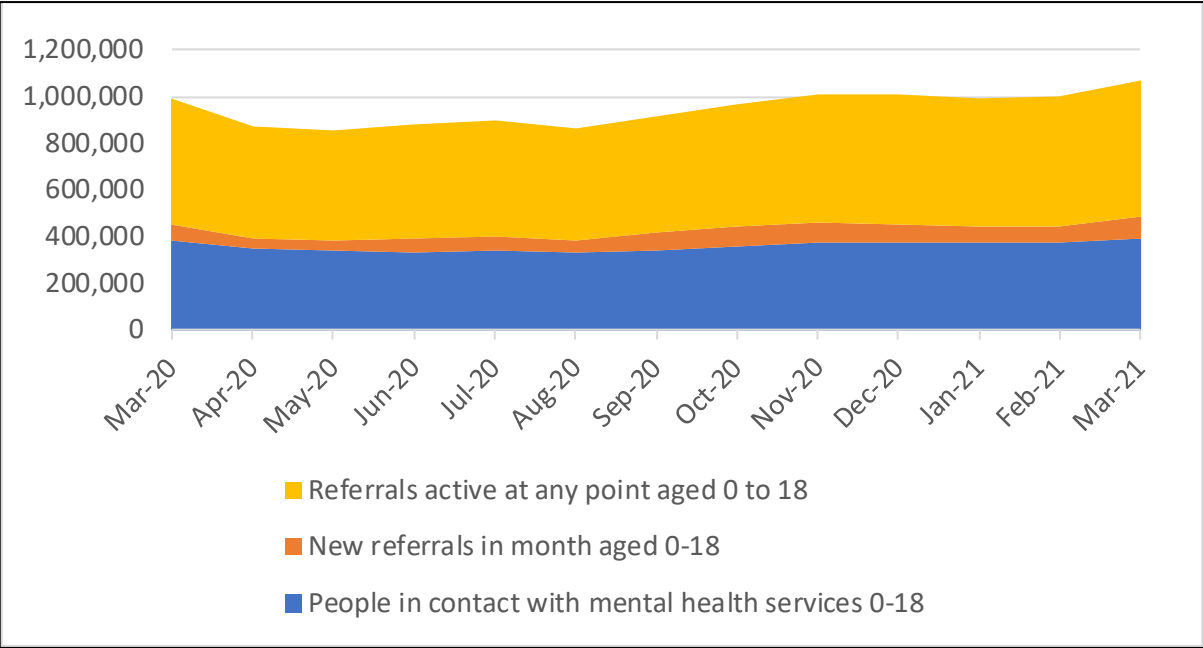
Rise in ACEs

- Parental distress and mental health needs
- Rise in domestic violence
- Economic repercussions

Increased demand for NHS support

Following an initial drop in referrals in 2020, demand for NHS support has increased and numbers in contact are higher than pre-pandemic levels

After an initial decrease, referrals and access rates have risen



| | Mar-20 | Apr-20 | May-20 | Jun-20 | July-20 | Aug-20 | Sept-20 | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 | Mar-21 |
|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|----------------|----------------|
| People in contact with mental health services 0-18 | 384,581 | 350,815 | 338,450 | 335,796 | 338,834 | 332,742 | 343,036 | 357,191 | 372,533 | 378,642 | 376,598 | 374,923 | 389,075 |
| New referrals in month aged 0-18 | 72,532 | 41,411 | 46,262 | 58,890 | 66,239 | 51,357 | 73,158 | 85,575 | 88,662 | 74,196 | 67,412 | 70,460 | 98,112 |
| Referrals active at any point aged 0 to 18 | 532,067 | 479,251 | 472,926 | 488,512 | 494,844 | 483,466 | 500,622 | 524,908 | 546,038 | 554,355 | 550,743 | 551,729 | 583,235 |

MHSDS summary statistics on CYP Mental Health Table 1: Summary of statistics on CYP Mental health from performance MHSDS data March 2020 – Aug 2020

Spending Review - £79m to boost MH support for CYP

- **Mental Health Support Teams**, who provide early intervention on mental health and emotional wellbeing issues within schools and colleges, **will be expanded over 6 times to support nearly 3 million children from the 59 established by last March to around 400 by April 2023.**
- **Funding will also allow around 22,500 more children and young people** with conditions such as anxiety or depression to **access community mental health services**, including talking therapies.
- **Children and young people facing a mental health crisis will continue to get support through 24/7 crisis lines** and will benefit from additional funding to support follow-up crisis treatment at home where necessary.
- **Eating disorder services**, for conditions like anorexia and bulimia, **will also be accessible to an additional 2,000 children and young people** in the community. This follows NHS England's plans to expand rapid access to specialist NHS treatment for young people with eating disorders across England, aiming to contact patients within 48 hours and beginning treatment as soon as two weeks later.

Additional Funding Specialised Commissioning - £40m over 3 years

- **£30m** to support specialised services including inpatient/ day treatment services and home treatment services
 - Particular focus to support CYP with eating disorders
 - Funding will also support training and workforce development
- **£10m** capital funding to support extra beds/units

CYP Mental Health services rapidly increased their use of digital communication in response to COVID-19



Provider / commissioner considerations:

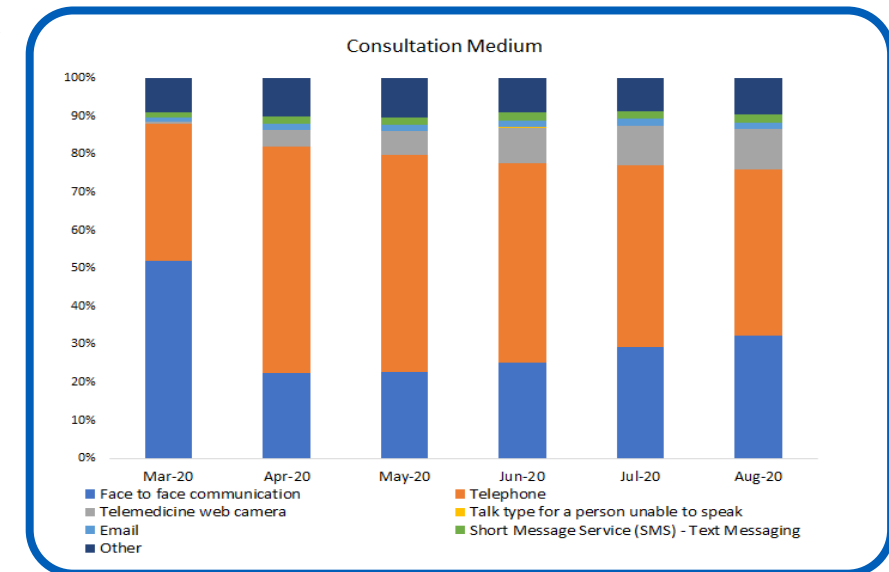
- Rapid adoption of technology is possible
- Usability of product – no perfect swiss-army knife “video consultation” platform at the moment
- User research and good service design approaches aren’t just a luxury for “Business as usual” and can be done, with limitations, in a rapid response to a situation by a multi-disciplinary team

Workforce considerations:

- Better understanding of skills that staff could/should have around using confidently using technology
- Staff confidence is critical alongside access to hardware
- Can’t always continue to do the same therapeutic work, but might be able to do other work

Service user considerations:

- Whilst time together has had some benefits, privacy matters, and is hard to manage for both parents and children / young people
- Digital inclusion is not just about having a smart phone – complex problem
- Blended digital and traditional modes of delivery preferred
- Peer support important – who and how/where
- Parenting support for managing behaviour at home



Mental Health Support Teams: What have we achieved to date?



Mental Health Support Teams (MHSTs) have three core functions:

1. Delivering evidence based interventions for mild to moderate mental health issues:
 - Individual and group low intensity (CBT) interventions for anxiety, low mood and other difficulties
 - Routine use of outcomes including goals
2. Supporting the designated senior mental health lead in each education setting to introduce or develop their whole school/college approach
 - Supporting education leads to map current support and develop plans
 - Training of school staff
 - Supporting teaching and understanding of mental health and wellbeing
3. Giving timely advice to school and college staff, and liaising with external specialist services, to help children and young people to get the right support and stay in education:
 - Ensuring children and young people who need support access it quickly as possible.
 - Requires integrated working across local services including more specialist NHS mental health support, support for Learning Difficulties and Autism, or physical needs, or for issues such as substance misuse.
 - Ensure smooth transition from specialist services.

Mental Health Support Teams are being rolled-out to cover 20%-25% of the country by 2022 (12 months earlier than target)

Over 280 new Mental Health Support Teams in the process of being established since 2018

- 180 of these are active in CCGs across the country, covering 15% of pupils
- 104 more in training and development
- 400 in total expected by 23/24, covering an estimated 3 million pupils (35% of those in England)

A new role – **The Education Mental Health Practitioner** – has been created, with curriculum taught across 13 Universities.

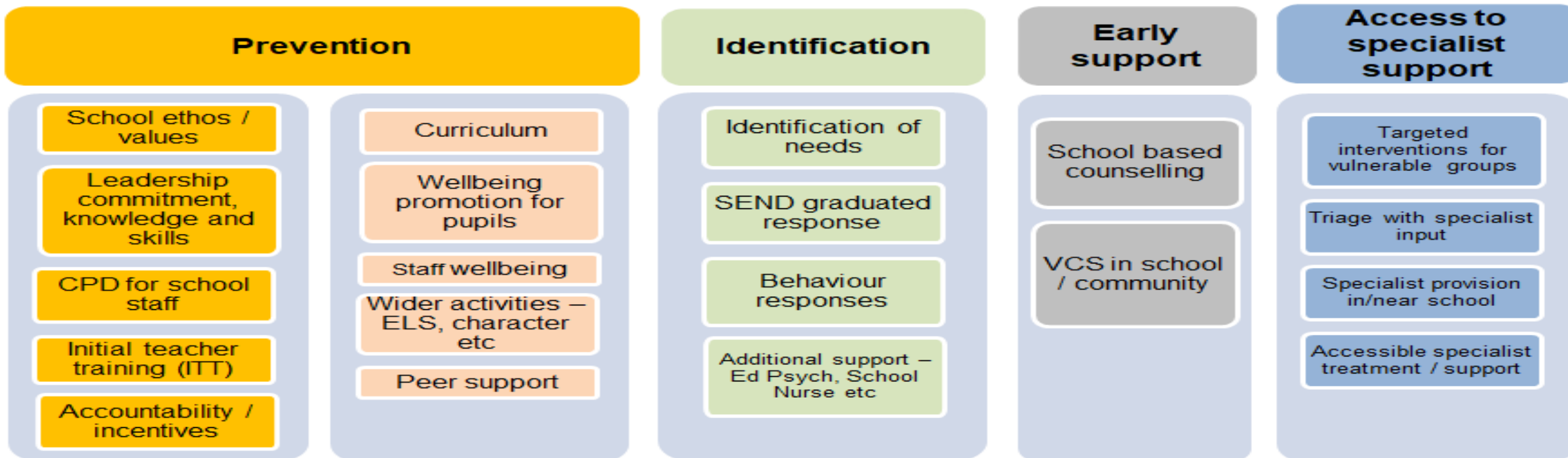
NHS, HEE, PHE and DfE regions are working together with CCGs and STPs schools and colleges and national teams in NHSE, PHE, DfE and HEE

An **MHST Manual** and set of **Operating Principles** has been developed

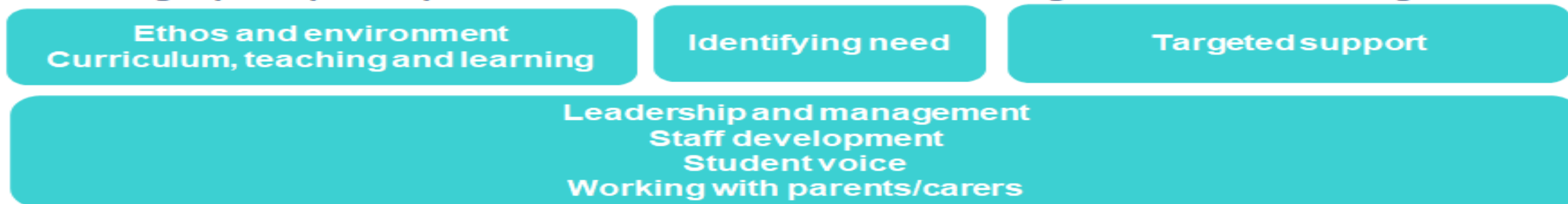
DHSC is commissioning an **Independent Evaluation**

A whole school/college approach

Education settings are in a unique position to help prevent mental health problems by promoting wellbeing, positive mental health and resilience as part of an integrated, [whole school/college approach](#) that is tailored to the needs of their pupils.



PHE's eight principles to promote emotional health and wellbeing in schools and colleges:



Local areas will need to develop comprehensive age appropriate services by 23/4

Depending on the level and nature of local presentations these may be

- Dedicated to CYP
- An all age service
- A Blended service with adults

What is a Comprehensive CYP crisis offer for CYP aged 0-18 years (17 and 364 days)?:

- Single point of access including through 111 to crisis support, advice and triage (24/7)
- Crisis assessment within the emergency department and in community settings (24/7)
 - Crisis assessment and brief response within the emergency department and in community settings, with CYP offered brief interventions (24/7)
 - Intensive Home Treatment service aimed at CYP who might otherwise require inpatient care, or intensive support that exceeds the normal capability of a generic children and young people's mental health community team (7 days a week across locally determined extended hours)

The development of local mental health crisis pathways includes a range of alternative services.

Early results of the latest crisis survey shows an improving picture, with all CCGs having a basic crisis function in place and growth of more intensive support

CYPMH Programme – Responding to Covid-19:

- To support the COVID response, in March NHSE/I asked all local areas to ensure that urgent mental health advice and support is available to people of all ages through freephone, open access NHS 24/7 telephone help lines.
 - Between April and November 2020 the crisis lines received over 100,000 calls from, or on behalf of children and young people.
 - More than two in three CYP calls were resolved on the phone, with less than one in ten needing a blue light response – providing early promise that crisis lines can be an effective A&E diversion model.

CYP Provider Collaboratives

The Provider Collaborative model seeks to bring together commissioning skills with the skills of providing services and people who use them. The result is a clinically and Expert by Experience led approach to planning and delivering services with collaboration between providers.

- For CYP Provider Collaboratives the focus is on:
 - Transforming the care pathway to support more CYP in the community
 - Reducing inappropriate admissions
 - Bringing care closer to home
 - Quality assurance
 - Tackling inequalities
 - Improving outcomes and experience
 - Local decisions about pathways of care – with co-production in commissioning

Phase One CYP Services:

General Adolescent, Psychiatric Intensive Care Units (PICU), Specialist Eating Disorders Units, Low Secure; Low Secure Learning Disability and Autism

Phase Two CYP services:

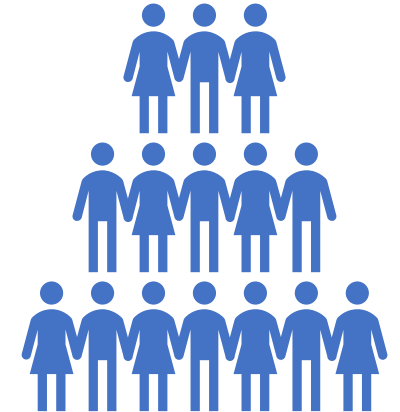
Children's (under 13s), Forensic Community CAMHS, Medium Secure and Deaf



Importance of joint agency system of support



- **Whole system of support** – role of CYPMH strategic partnerships (Local transformation plans), health and well-being boards and now critically PCs and ICS
- **Building on existing programmes** on offers eg family hubs, Supporting Families Programmes, Social Prescribing Pilots, role of VCS and out of school activities
- Importance of **public health initiatives** to build healthy communities and address health inequalities - supporting families to maintain their abilities to cope (Building Back Local; Building Back Better, LGA 2021)
- Involving CYP and families and local communities to **co-produce solutions**
- Consider **mental health and well-being of parents/carers and other adults** and their ability to support and nurture CYP (Improving young people’s mental health: What does a whole-household approach look like?, Centre for Mental Health, 2021)
- **Stepped/graduated support offer** – CYP will present with a range of different symptoms and severity of needs
- **Prevention and early intervention** to support a resilient response and limit the risk of escalation of mental health needs

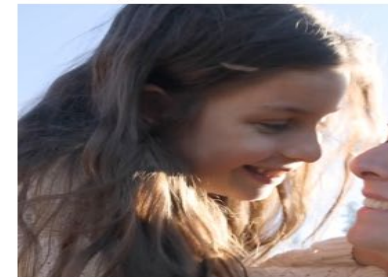


We are also supporting national programmes supporting wellbeing post COVID-19



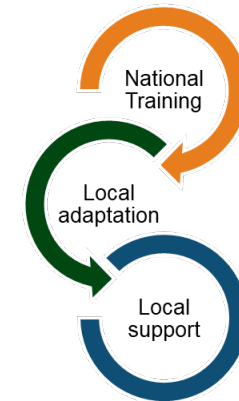
Every Mind Matters: Children and Young People

Public Health England has launched the next phase of the Every Mind Matters campaign, designed to support children and young people's mental wellbeing.



Wellbeing for Education Return

NHS England and Improvement supported Department for Education working with partners to develop the support offer to help as many schools and colleges as possible to provide wellbeing support for children and young people returning to school and further education following the lockdown and summer period.



Advancing Mental Health Equalities



- The Advancing Mental Health Equalities Taskforce, an alliance of leaders and experts by experience from the mental health sector, was formed in February 2020. The Taskforce has identified a suite of short and longer term actions which will support advancements in access, experience and outcomes for communities experiencing inequalities. This includes communities with protected characteristics and other health inclusion groups.
- NHS England and NHS Improvement recently published 8 urgent actions health systems must take to advance equalities in the round. For mental health, the focus is on:
 - Delivering the Long Term Plan commitments for mental health in the round to improve access to support and care in the round
 - Delivering against Data Quality Improvement Plans to improve the collection of protected characteristic data and, to ensure it is flowed to national datasets
 - Delivering the full suite of physical health checks for people with Severe Mental Illnesses
 - Reviewing digital care pathways in mental health and overcoming inequalities in access or experience
- NHS England and NHS Improvement have launched a [longer-term Strategy for advancing mental health equalities](#), which will sit alongside the [Mental Health Implementation Plan 2019/20-2023/24](#). The CYPMH national team is working with other mental health teams to take forward actions to support the strategic priorities: supporting local health systems, data and information, and workforce.
- The Strategy focuses on:

| Supporting local systems to advance equalities | Improving the quality and use of data | Workforce |
|---|--|--|
| <ul style="list-style-type: none"> • Developing the Patient and Carers Race Equality Framework (PCREF) • Investing in advancing mental health equalities via transformation/pilot sites in community mental health care • Sharing evidence where it emerges, and supporting research initiatives • Developing an impact framework for provider collaboratives | <ul style="list-style-type: none"> • Improving the quality and flow of data to national NHS datasets, including the recording of protected and other characteristics attributable to inclusion health groups • Using headline measures of mental health equality to monitor change over time, at both national and local level, and where improvements need to be made | <ul style="list-style-type: none"> • Supporting the development of a representative workforce at all levels, equipped with the skills and knowledge to advance mental health equalities |

Summary



- There has been significant progress in building support for CYP mental health, but we know we need to keep momentum to deliver effective support.
- The Long-Term Plan remains the out best response to the pandemic

COVID concerns

- CYP mental health services first to recover from initial dip in referral and now highest ever level of referrals and rising complexity and acuity.
- Particular concerns for CYP with existing MH needs, in particular Eating Disorders, of BAME communities, those with neurodevelopmental disorders, alongside the risk of others developing MH needs
- Parents and carers are reporting increased stress
- increase risk of ACEs including rise in domestic violence

Services have responded magnificently standing up crisis support and CYPMH has pivoted to remote and digital working.

Our approach to change and to the current challenges has built on learning from previous programmes incidents e.g., Grenfell and Manchester, flooding

- Importance of whole system pathway that includes VCSE and schools/college consultation
- Importance of local leadership
- Staff training to improve knowledge
- Co-production with CYP and their families

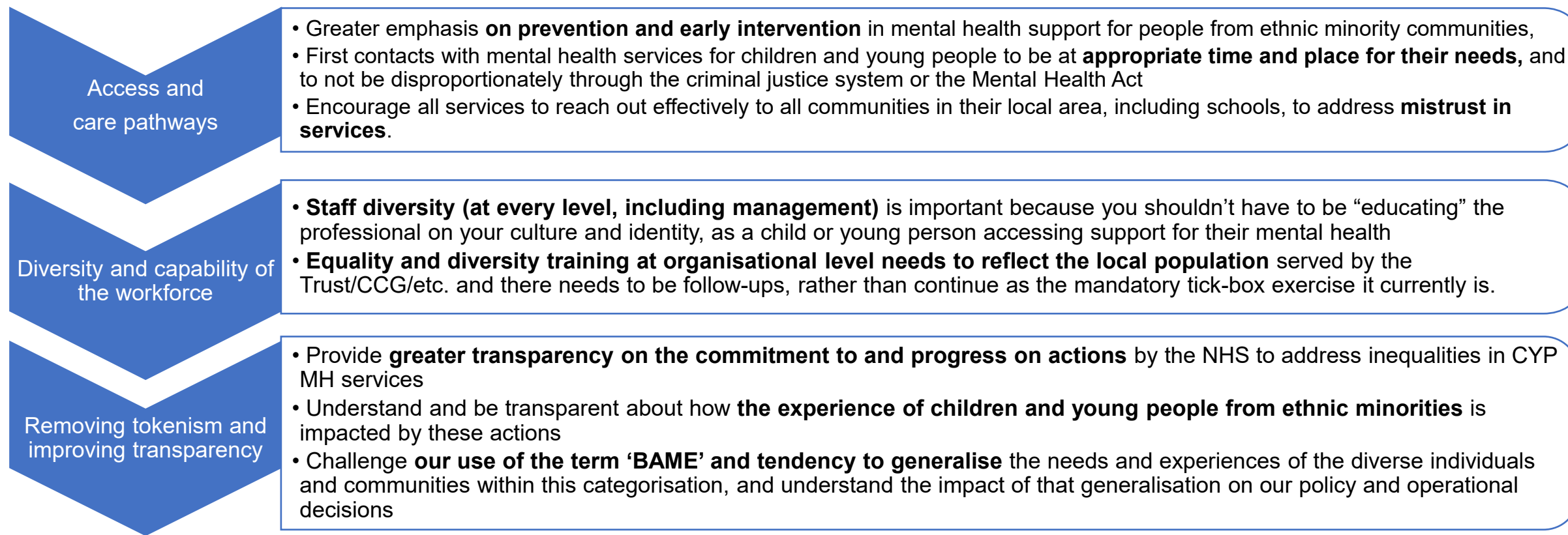
Thankyou for your time and support!

Appendix: Patient Carer Race Equality Framework



- The Mental Health Act Review recommended the NHS develop an organisational competence framework, the ‘**Patient and Carers Race Equality Framework**’ (PCREF), a practical tool which enables organisations to understand what steps it needs to take to achieve practical improvements for individuals of diverse ethnic background.
- The aim is to improve the competency of mental health services so the experience of BAME patients and carers improves; to the end of making services more accessible, and to improve the health outcomes for BAME service users. This forms part of the Advancing Mental Health Equalities Strategy.

To support this, CYP MH national team have worked with Young Minds and Thrive LDN to advise the team developing the PCREF on our priority areas of focus for addressing racial inequalities in CYP MH services



Acronym Buster



ACEs Adverse Childhood Experiences

CCGs Clinical Commissioning Groups

CYP Children and Young People

CYP IAPT Children and Young People's Improving Access to Psychological Therapies

CYPMH Children and Young People's Mental Health

CYPMHS Children and Young People's Mental Health Services

FCAMHS Forensic Child and Adolescent Mental Health Services*
/ Forensic Children and Young People's Mental Health Services

FYFVMH Five Year Forward View for Mental Health

HEE Health Education England

ICS Integrated Care Systems

IHT Intensive Home Treatment

IP Inpatient

LAC Looked After Children

LDA Learning Disabilities and/or Autism

LTP Long Term Plan

MH Mental Health

MHSTs Mental Health Support Teams

NHSB NHS Benchmarking

NHSEI NHS England and NHS Improvement

NMOC New Models of Care

OAPs Out-of-Area Placements

SIT System Improvement Team

VCS Voluntary and Community Sector

WTE Whole Time Equivalents