



# Northumberland

## County Council

### **FAMILY AND CHILDREN'S OVERVIEW AND SCRUTINY COMMITTEE**

**8<sup>TH</sup> SEPTEMBER 2022**

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#### **Meeting the Mental Health Needs of Children and Young People in Northumberland**

Report of Joint Interim Director of Children's Services, Graham Reiter

Cabinet Member: Councillor Guy Renner Thompson

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#### **Purpose of Report**

The purpose of the report is to provide a current overview of support for children and young people with mental health needs and to outline future plans.

It offers a summary overview of the support available through the graduated response for mental health for children and young people from the following services:

- KOOOTH (Online resource commissioned by NE & NC ICB)
- Public Health School Nursing Service (NCC)
- Mental Health Support Teams within the Trailblazer schools
- Primary Mental Health Team (PMHW, Northumbria Healthcare NHS Trust)
- High Incidence Needs Teams (Northumberland Inclusive Education Services, NCC)
- Northumberland Emotional Wellbeing Support Team (NEWST, NCC)
- Children and Young People's Service (CYPS, Cumbria, Northumberland Tyne and Wear NHS Trust)

#### **Recommendations**

It is recommended that the Family and Children's Overview and Scrutiny Committee:

1. Note the contents of the report.
2. Recognise the support now on offer for children and young people in Northumberland.
3. Note future plans and identify any potential issues for further consideration if appropriate.

## Link to Corporate Plan

This report is relevant to:

- The Northumberland SEND Strategy 2021-24
- The Northumberland Children and Young Peoples Plan 2019-2022
- Northumberland Children's Mental Health Strategic Plan (currently under review)
- Northumberland's Learning Disability and Autism 3-year plan
- The NHS Long Term Plan

## National Context

It is recognised nationally that the complexity of children's mental health has been increasing and this is more evident following the impact of COVID. The Office for Health Improvement and Disparities updated the [COVID-19 mental health and wellbeing surveillance report](#) in April 2022 and found that the pandemic has substantially affected **some** children and young people's mental health and wellbeing.

- This impact was in different ways and at different stages of the pandemic
- Those particularly affected were
  - Girls and young women
  - The disadvantaged
  - Those with special educational needs and / or disabilities (SEND) and / or those with pre-existing mental health needs
- Impact was different according to gender
  - Boys reported more symptoms of behavioural and attention difficulties
  - Girls had higher levels of emotional difficulties, poorer wellbeing and anxiety

These national findings are reflected in Northumberland, with an increase in need being seen across all services who offer support for mental health.

## Key Issues

1. **Accessing the right support at the right time.** There is an ongoing challenge in ensuring support is available when required from specialist mental health services, while also maintaining a focus on earlier identification of needs, supporting young people at the earliest opportunity to access the support required by the right professionals, at the right time.
2. **Increased demand for support.** Referrals for emotional health and wellbeing support were rising prior to 2020, however COVID 19 has added increased pressure. The number of children and young people requiring low level support provided by a number of services following early identification has increased significantly.
3. **Staff recruitment and retention** has impacted on service delivery. There is a need to understand the impact this has on the workforce and the delivery of

interventions working collaboratively across education, health, social care and the private and voluntary.

## Background

Support for children and young people's mental health is often described using the Thrive Model. This report describes the position of different services who provide mental health support to the majority of children and young people described against the level of interventions below. It does not describe all forms of mental health support available. Moving between the tiers of intervention is described as the 'graduated response'

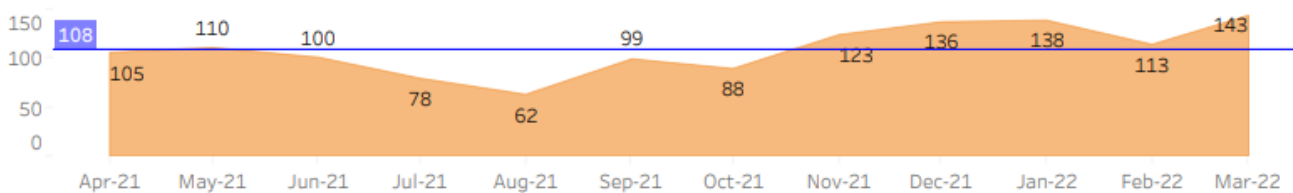
- **Coping** – those who need advice and signposting
- **Getting help** – those who need focussed goal-based input
- **Getting more help** – those who need more extensive and specialist goal-based help
- **Accessing specialist help** – those whose mental health places their wellbeing at risk

## KOOTH (Coping)

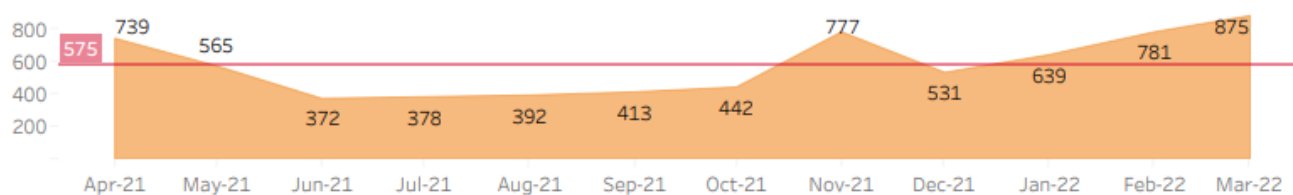
Kooth is a confidential and anonymous service available on any web enabled, internet connected device including laptop, smart phone or table and is available 24/7, 365 days a year to provide self- help resources, static forums and magazine articles and links where necessary to crisis support. It is available to young people aged 11-25 years who can access the support directly.

Kooth includes 1-1 scheduled and drop in live counselling options with qualified professionals, which take place between 12 noon until 10 pm Mon – Fri and 6pm – 10pm Sat/Sunday 365 days a year. Children and young people can receive up to six sessions of counselling support from Kooth, before either moving on or being signposted / referred to other mental health support. In addition on Monday, Wednesday, and Friday there is a live moderated forum which takes place in the early evening, safeguarded and monitored by trained staff.

## Number of unique service users accessing Kooth Apr 21 – Mar 22



## Number of logins per month Apr 21 – Mar 22



Kooth is accessed on average 68% of the time by young people outside 9-5 hours. In the counselling sessions, anxiety and stress was the most common issue young people sought support for, followed by self harm for girls and friendships for boys.

## **PUBLIC HEALTH SCHOOL NURSING (PHSN) (Coping)**

The Northumberland 0-19 service (Public Health School Nursing element) contributes to the graduated response by providing a county wide offer of support to children and young people aged between 5 and 19 years (and up to 25 years for those with a special educational need or disability) who have low to moderate emotional wellbeing and mental health needs.

There are currently 22 whole time equivalent members of the school nursing skill mix team including two locality managers, public health school nurses, staff nurses and support workers. As of September 2021, there were 163 schools, academies and free schools in Northumberland and the 5-19 population is estimated to be 49,800.

The service has very recently undergone a restructure and the whole-time equivalent staff assigned to the 5-19 service has increased. The service will also be a 0-19 service in the future facilitating flexibility across the service.

When the graduated response was developed, it was intended that school nursing would provide support for children and young people whose needs were in the “coping” sector of the THRIVE model. That is, they needed advice and signposting with initial concerns based on early onset problems which were impacting on one area of the child’s functioning.

Public Health School Nursing, provide:

- Chat Health. A confidential text messaging service that enables children and young people (aged 11-19) to contact their school nursing team.
- Signposting to online and other resources, if appropriate
- Face to face support for children and young people with low mood, anxiety, early onset of self-harming behaviours, regulation of emotions, self-esteem and confidence difficulties.
- This includes a health assessment, signposting and a plan of care as appropriate with goal setting. Interventions are short term with review after 3-6 sessions and onward referral if necessary.

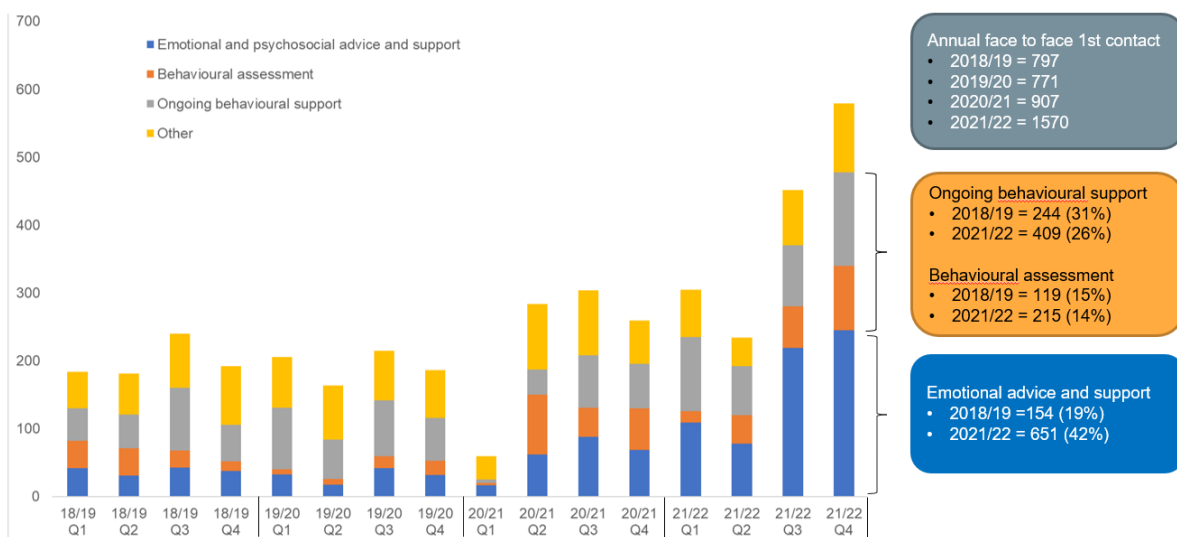
## Increased Demand for Support Since 2020

Since 2020 there has been a marked and sustained increase in the number of referrals to school nursing for emotional and mental health advice and support as shown in the figure below. This situation is not peculiar to Northumberland and is mirrored in other 0-19 services elsewhere. Alongside the increase in demand, there have been challenges with timely recruitment to posts with vacancies within the team at different points over the past two years.

Emotional advice and support accounts for an increasing proportion of face-to-face contacts and in 2021/22 the number of first contacts with a school nurse for emotional advice and support was four times higher than in 2018/19.

In addition, approximately 40% of face-to-face school nursing contacts are for behavioural assessment or ongoing behavioural support and the number of referrals has also increased. These are frequently referrals for observation of behaviour in school and subsequent assessment which have been requested to support a referral to CYPS.

### Number of face to face first contacts with a school nurse, 2018/19 to 2021/22



### Impact on School Nursing Waiting Times

The surge in demand for emotional wellbeing and mental health support has impacted on waiting times for children and young people, who have been triaged and are waiting for an intervention. All referrals are triaged by a school nurse within 2 working days of receipt. Safeguarding, Child in Need and those identified with priority mental health needs receive an urgent response. As of 31 March 2022, the maximum waiting time for those needing an intervention ranged from 12 weeks in the North and West localities to up to 26 weeks in the South East. Referrals for safeguarding are not placed on a waiting list and only a proportion of children are waiting for emotional or mental health support.

There has been a marked surge in referrals of children experiencing low-level anxiety and low mood. This is particularly apparent in primary school age children, with some as young as 5 years old reported to be suffering with symptoms of anxiety. The service has also experienced a high volume of referrals for emotional health and wellbeing support for children undergoing assessment with CYPS for Autism and ADHD.

### Response to Increased Demand

A range of measures have been implemented since July 2021 to manage waiting times and all those waiting to be seen have recently been re-triaged.

Upon acceptance of a referral for anxiety/low mood/self-harming behaviour telephone contact is always made with the child's parent or carer. This ensures that a robust safety plan is developed, and parents/carers are fully informed around any actions to be taken should the child's presentation deteriorate. A letter is also sent to parents/carers advising

that the service is operating a waiting list and how to contact the service if needed. This letter includes information about online and other resources including Kooth and Young Minds which parents/carers/young people can access.

School nurses frequently receive referrals for young people with more complex needs which fall within the “getting help” category of the THRIVE model and graduated approach.

Referrals are received for children with needs affecting different aspects of their lives, including multiple factors related to lifestyle and often, parental behaviours. In response, the intensity of support required by some children and young people has increased. This sustained increase in referrals to school nursing and higher level of need is currently the focus of a system wide response across all partners.

### **MENTAL HEALTH SUPPORT TEAMS (MHST) (Coping, getting help)**

Mental Health Support Teams have been established following the successful bid for monies through the NHS national Trailblazer programme.

#### Aims of Provision

- Deliver evidence-based interventions for mild to moderate mental health issues.
- Support the designated SMHL (Senior Mental Health Lead) in each education setting to introduce or further develop their whole school/college approach.
- Provide timely advice to school and college staff, and liaise with external specialist services, to help children and young people to get the right support and stay in education.

The Mental Health Support Teams are operational in 54 schools and settings across

- Hexham and Blyth school partnership (wave 1 funding)
- Ashington and Bedlington schools (wave 3 funding)

The teams delivered low level intensity interventions to 327 young people in the period of September 2021 to February 2022.

Mental Health Support Teams consist of:

EMHPs (Educational Mental Health Practitioners) who provide low intensity interventions for children and young people with mild to moderate mental health needs. Their work is supported a Peer Mentor who provides support to EMHPs in delivering interventions.

EMHPs deliver:

- Co facilitation of the ‘Friends’ group-based programmes with the Primary Mental Health Workers and school-based staff.
- Co design and co facilitation of the school-based lesson plans with the Primary Mental Health Workers and school-based staff.
- Co design and co facilitation of psycho-education workshops for children, young people, parents, carers with the Primary Mental Health Workers, Early Help Family Workers and Health Staff.

- Whole school development work

Mental Health Support Teams can also access the following input from existing services that is funded additional to their core offer:

Primary Mental Health Workers, who provide:

- 1:1 individual evidenced based intervention with children and young people within the trailblazer schools.
- Clinical and case management supervision for the Educational Mental Health practitioners within the service.
- Supervision and support to the Be You Peer Education Worker.
- Co facilitation of the FRIENDS and ROAR training programmes. (FRIENDS programme supports children to remember and use strategies to manage anxiety, ROAR programme supports schools staff to identify signs and symptoms of mental health distress in children, young people and staff and understand what they can do in school to support them).
- Co design and co facilitation of the school-based lesson plans with the Educational Mental Health Practitioners and schools-based staff.

Mental Health Support Teams delivered low level intensity interventions to 327 young people in the period of September 2021 to February 2022.

Information about support for emotional health and wellbeing and the work of the Mental Health Support Teams in Northumberland is available at the 'Be You' website. This was co-produced and launched as part of the MHST work to provide advice and guidance to children, young people, families, and practitioners around supporting mental health and wellbeing. In 2021 the website had been accessed 1300 number of times.



Weblink : [About Us | NHS Trailblazers \(beyounorthumberland.nhs.uk\)](https://www.beyounorthumberland.nhs.uk)

### **PRIMARY MENTAL HEALTH WORKER (PMHW) (Getting help)**

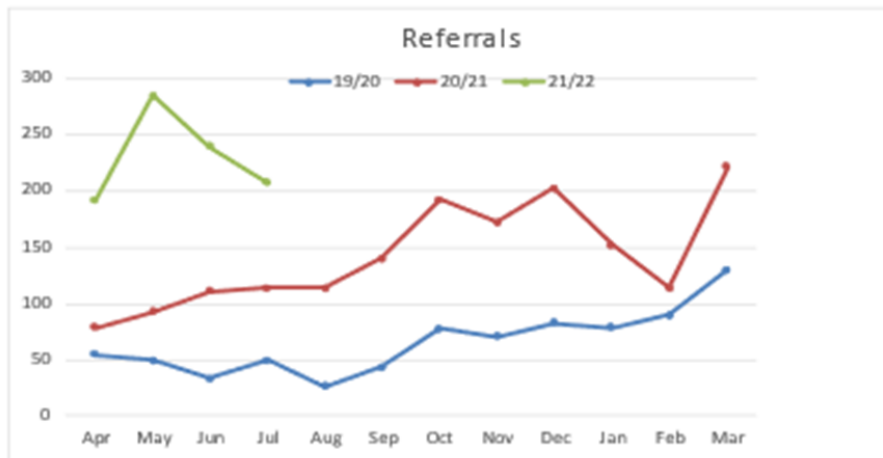
The PMHW team provide a targeted early intervention and prevention mental health service to support children and young people and the adults who support them across Northumberland.

PMHW provide:

- assessment, formulation, and higher level evidenced based interventions on a one-to-one basis
- telephone consultation line to provide advice, guidance and signposting to professionals and parents/ carers
- liaison support through the multi-agency early help hub processes, providing a mental health perspective on advice and signposting to ensure that the right service is accessed at the right time



- teaching and training to raise awareness of children’s mental health with colleagues in a range of universal services across education, health, social care, youth and community and voluntary services



The PMHW Team have seen a significant increase in the number of referrals received over the previous years. The service has experienced difficulties in recruitment and retention of the current workforce which is currently being addressed with a review of the staffing structure. Both these components have impacted on the waiting times which have increased, with the current average wait being July 2022, 8.6 weeks to assessment and 9.7 to treatment.

**HIGH INCIDENCE NEEDS TEAMS (HINT) (Coping, Getting help)**

These teams sit within the Northumberland Inclusive Education Services (NIES) in NCC and consist of specialist advisory teachers and support workers with specialist knowledge of supporting children with additional needs in schools. The services that support children and young people’s mental health are:

- Emotional Wellbeing and Behaviour Support Service
  - provides support and advice to schools and young people. The service supports children and young people who are displaying challenging behaviour due to underlying social and emotional needs.
- Autism Support Team
  - offers school-based support to children and young people with social communication difficulties or a diagnosis of Autism.

Both teams have seen an increase in demand over the previous two years.

Emotional Wellbeing and Behaviour Support Team (EWB)

	2019-2020 (SLA in place)	2020-2021	2021-2022 (up to 30/06/22)
Number of referrals	191	254	376
Number of schools that referred into Service	69	99	118
Number of training courses delivered	4	26	34
Number of schools receiving training	10	97	36
Number of delegates (reach number)	165	378	373
Number of MAPA/SIT training courses delivered	17	16	11
Number of schools receiving MAPA/SIT training	24	21	14
Number of delegates (reach number) SIT/MAPA	159	152	116

### Autism Support Service

	2019-2020 (SLA in place)	2020-2021	2021-2022 (up to 29/06/22)
Number of referrals	261	364	461
Number of schools that referred into Service	85	103	120
Number of training courses delivered	18	32	45
Number of schools receiving training	12	104	37
Number of delegates (reach number)	172	304	643
Number of Cygnet training courses delivered	8	12	14
Number of delegates (reach number) Cygnet	45	111	120

- To note: access to support services became free at point of delivery in September 2020, prior to this, support was purchased through Service Level Agreements with individual schools.
- Not all Local Authorities have teams of specialist advisory teachers to support schools.

Both teams are currently at capacity. For a period of time over the past month, the Autism Support team has been offering a telephone consultation line only, which has proven to be successful for managing first contact with schools and in some cases has resolved queries around best ways to support particular young people. The specialist teachers and support workers have been unable to carry out individual assessments. Autism Family Support Workers appointed in January have been fully occupied with casework related to children and young people struggling to attend school due to anxiety. The referral pathway for this starts with the Children Missing Education panel (CME). As the Summer term progressed, EWB Team have had very limited capacity to undertake school visits for newly referred children and young people and have prioritised those at imminent risk of exclusion.

### **NORTHUMBERLAND EMOTIONAL WELLBEING SUPPORT TEAM (NEWST)** (Getting help)

Four Specialist Practitioners, one Clinical Psychologist and one Assistant Psychologist have been recruited to Northumberland Emotional Wellbeing Support Team (NEWST).

This service is embedded within children's social care.

The aims of the service are to:

- help systems understand and meet the emotional and mental health needs of the young person.
- provide an integrated approach to supporting vulnerable young people and their families.
- promote stability, resilience, and confidence in the system around a young person.
- enable young people with complex needs to thrive.

The team began accepting referrals in January 2022 and as of the end of April 2022 had provided system support to 94 children in 71 families. The team will develop a programme of training for all professionals in topics relating to mental health over the coming year.

There is ongoing evaluation of the impact of NEWST which will be reported on in the future

**CHILDREN AND YOUNG PERSONS SERVICE (CYPS)** (Getting more help, Accessing specialist help) (This service is sometimes known as CAMHS in other areas)

The Children and Young People's Service provides a single service to all children and young people aged 0-18 years living in Northumberland who present with mental health difficulties. This includes children and young people who may have learning difficulties and those living in a range of difficult and challenging circumstances.

CYPS provides:

- Assessment, diagnosis and intervention on a range of mental health issues.
- Intensive response and home-based treatment for those children and young people whose mental health is causing significant concern.
- An intensive Eating Disorder Service to support children and young people on the eating disorder pathway who are at risk of an inpatient admission.
- A comprehensive transition support package to those young people who are approaching their 18th birthday and may need continuing support as adults.
- Training, consultation, support and advice to front line staff working in targeted services for children.

The service delivers support for the majority of children and young people through three main pathways:

- Specialist mental health support for children and young people experiencing complex, severe, or persistent mental health problems provided by a multidisciplinary team.
- Neurodevelopmental Diagnostic pathway provide specialist assessment, treatment, support and advice via a Multi-Disciplinary Team for Attention Deficit & Hyperactivity Disorder (ADHD) and Autism
- Learning Disability Pathway who provide specialist assessment, treatment, support and advice via a Multi-Disciplinary Team to young people who present with high levels of challenging behaviour that are having a significant impact upon their functioning for young people with moderate to complex needs

Referrals into all three pathways have increased up to 80% over the past year, which has impacted on waiting times. Alongside the increase in referrals, there have been challenges with timely recruitment to posts with vacancies within CYPS at different points over the past two years.

However, although waiting times have increased, they remain strong, with CYPS in Northumberland being one of the most responsive services in the North East.

As of June 2022	Average waiting time to assessment	Average waiting time to treatment
Mental Health pathway	1 week	2 weeks
Neurodevelopmental pathway	5 weeks	6 weeks
Learning Disability	2 weeks	2 weeks

Northumberland CYPS has a single point of access providing telephone consultation for advice/guidance and support to other services as required and referral access to CYPS. This has proven to be a positive implementation for professionals, and families who have reported consistency, helpful and prompt responses. In addition, Northumberland CYPS also offer 'Consultant connect' which is direct advice and consultation to GP's who have signed up to this service.

## Summary

There are currently pressures on services that support children and young people's mental health that are system wide and are impacting at all levels of the mental health graduated response. These pressures are not unique to Northumberland and are being experienced by services across the country.

In addition to the pressures identified at the beginning of the report, the ongoing impact of COVID-19 has impacted on staff absence.

While this report has highlighted the challenges currently within the system, it is important to note that Northumberland is in a strong position to address these:

- Strong culture of collaboration around the commissioning, planning and delivery of services to support children and young people's mental health across organisations (cited by Ofsted & CQC in SEND Revisit letter).
- Average waiting times for access to CYPS is on average 4 weeks to assessment and 5 weeks to treatment. While this has increased over the past year, it remains the lowest waiting time in the North East.
- NCC have identified the need for specialist advisory teachers to provide support to schools in meeting needs and made the services free at point of delivery as from September 20. This has removed inequalities of access and resulted in more support for individual learners and more schools receiving training, support and advice to meet the needs of children and young people. It should be noted that not all Local Authorities have central teams that provide support to schools and settings in this way.

There is robust monitoring of performance across the graduated response which is regularly reviewed with system leads. Discussions are ongoing across all services who

provide support across the graduated approach to ensure that those with the highest levels of need are seen promptly and waiting list times are addressed. Examples of initiatives being employed to support access to services at this time of increased referrals include:

- Use of telephone helplines to enable children, young people, their families and the practitioners who support them to gain access to timely advice
- Services working together to manage need across the graduated response and ensure referrals go to the right service at the right time
- Close monitoring of waiting lists and workforce pressures to identify when actions need to happen

## **Future Plans**

The Emotional Health and Wellbeing Group is a multi-agency group of system leads from across NCC, North East and North Cumbria ICB in Northumberland, CNTW, Northumbria Healthcare Trust, Voluntary agencies and Northumberland Parent Carer Forum. This group leads the Northumberland response to meeting the needs of children and young people with mental health needs.

An Emotional Health and Wellbeing Strategy is currently in development which describes the vision for meeting the needs of children and young people with mental health needs in Northumberland over the next three years, and how challenges will be addressed. This is due for consultation at the beginning of the Autumn Term 2022 and clearly sets out the actions that will be needed across the system to meet the challenges identified within this report.

## **Implications**

Covid, whilst bringing opportunities to explore new ways of working has brought challenges with increase in referrals, staff absence and the effects on staff wellbeing which will continue for the foreseeable future.

Evidencing outcomes and impact across the system, different recording systems / monitoring times and baselines, early help impact can take time to evidence and may take several years to start to make a positive impact.

Difficulty in recruitment within the county to support workforce growth and skills mix. Rurality and geography have impacted on service development and equitable, effective and efficient use of resources.

<b>Policy</b>	A Draft Emotional Health and Wellbeing Strategy will be circulated in September 2022.
<b>Finance and value for money</b>	Performance of mental health services is reviewed regularly by the organisations who commission services through governance routes.
<b>Legal</b>	None
<b>Procurement</b>	n/a
<b>Human Resources</b>	n/a
<b>Property</b>	Services that support children and young people's mental health are delivered in a range of locations across different providers and different organisations. This can range from children and young people's homes, schools, hospitals, clinics etc.
<b>Equalities</b> (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	All organisations supporting children and young people's mental health support equal access to services.
<b>Risk Assessment</b>	Individual organisations have robust risk assessment systems in place to ensure that risk is identified and supported.
<b>Crime &amp; Disorder</b>	Mental health and Youth Offending populations overlap.
<b>Customer Consideration</b>	The views of children and young people and their parents / carers are central to developments and improvements through ensuring all developments are co-produced.
<b>Carbon reduction</b>	n/a
<b>Health and Wellbeing</b>	This details support for children and young people with mental health needs.
<b>Wards</b>	n/a

## **Report Sign Off**

	Full Name of Officer
Monitoring Officer/Legal	Suki Binjal
Executive Director of Finance & S151 Officer	Jan Willis
Relevant Executive Director	Graham Reiter & Audrey Kingham
Interim Chief Executive	Rick O'Farrell
Portfolio Holder	Guy Renner-Thompson

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