

# Report

Agenda Item No. 8 Date: 10 November 2022

# To the Chair and Members of the Health and Wellbeing Board

To understand the Post-Covid impacts on Children to include Children's Mental Health Strategy Update including Resilience

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Lani Mae Ball	All	No
Cabinet Member,		
Children, Young		
People and Schools		

### **EXECUTIVE SUMMARY**

- 1. The purpose of this report is to provide the Chair and Members of the Health and Wellbeing board with an overview of continuing impacts upon children and young people following the Covid pandemic. It will also provide an update on the response from key services.
- 1.1 The pandemic has continued to have an impact upon our children and young people. This has continued to be seen particularly in the areas of mental health and has disproportionately affected the development of younger children. Whilst there have been improvements in some areas, notably the reduction in the number of young people presenting as emergencies and in some trends around referrals to mental health agencies, there is a growth in those who are being identified by schools and those awaiting neurodevelopmental assessments.
- 1.2 The robust partnership response in this area is already demonstrating an impact, with a growth in service accessibility and coverage and an improving response from schools. The Children and Young People's Mental Health implementation strategy is on schedule to deliver a host of

changes before the end of year. These include the introduction of the Kooth app, which allows young people to access services virtually, and has already had over 3900 log-ins, our continued work with schools and the introduction of the 'Healios' system which is helping to reduce waiting times for neuro developmental pathways. The strategy team are currently working with children and families to identify a new set of actions for March 2023.

# **EXEMPT REPORT**

**2**. There are no exemptions.

### **RECOMMENDATIONS**

- **3.** It is recommended that the Health and Wellbeing board note:
  - The continuing impacts upon children and young people following the coronavirus pandemic.
  - The continuing work of key services, which are already having an impact in key areas including Mental health services for children and young people.
  - Agree to the governance of Doncaster services across our CYP population including the co-ordination of a number of Doncaster strategies to avoid duplication and to ensure a targeted approach of provision.

### WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

- 4. The Covid-19 pandemic has had a notable impact on all citizens of Doncaster and has put added pressure on all aspects of people's lives from their health and livelihoods through to their relationships and childcare. In this environment it has been, and continues to be, vitally important that partners effectively deliver services in a way that supports all its residents including its most vulnerable children and young people as effectively as possible. Continued momentum in these areas is vital in order to ensure that long-term recovery is maintained for children and families who have been unduly affected by the pandemic.
- 4.1 As we approach the winter months and the impact of global economic uncertainty. Our services need to collobrate more now than ever before to ensure all of our Children and their families feel adequately supported.

#### BACKGROUND

It is clear that the period of the Covid pandemic has created some significant impacts upon children, young people, families and the settings they engage with. These are particularly poignant in terms of mental health and child development. These impacts are detailed below.

# Children and Young People's Mental Health: What are the concerns?

- 5.1 Children and Adolescent Mental Health (CAMHS) services have seen increasing referrals for support since the start of the pandemic. Over the last year, there has been a national increase in referrals to both Mental Health Support Teams (With Me in Mind, Doncaster) and Children and adult Mental Health Service (CAMHS). In comparison, referrals to CAMHS prior to lock down were 4 times less than the current position. We have seen reductions in some key areas, but there continues to be a higher level of need than pre-pandemic. The monthly average for referrals into specialist Children and Adolescent Mental Health Services (CAMHS) increased from four in 2020 to six in 2021 for urgent referrals and from nineteen in 2020 to twenty seven in 2021 for non-urgent referrals. In 2022 the average number of specialist referrals reduced to an average of one per month, the urgent referrals have reduced to two per month and nonurgent to just over nineteen per month. Waiting times, overall, are being met by the service for each pathway.
- 5.2 In relation to our school-based Mental Health Support Teams (MHST), the service went live in lockdown so we have no comparable data, although we know referrals into the service mirrored those in CAMHS. What has been noticed is the complexity of referrals made to both MHST/CAMHS compared to pre-COVID, this is due to environmental factors, including trauma, isolation and deprivation.
- 5.3 The school system has seen increasing numbers of young people who have been identified as having Social Emotional and Mental Health (SEMH) needs. The percentage of Doncaster school pupils with SEMH needs increased from 2.47% in 2020 to 2.61% in 2021 to 3.14% in 2022.

  Mainstream education settings currently have 159 pupils with an EHCP with SEMH as a primary need, having grown from 154 in 2021.
- This growth has been reflected in the number of children awaiting a neurodevelopmental assessment. The monthly average for the number of children waiting for an ADHD assessment increased from 76 in 2020 to 116 in 2021. As at the end of June 2022, there were 100 children waiting for an ADHD assessment.
- 5.5 The Social Emotional and Mental Health (SEMH) Pro-active, Monitoring and Support Group (P, M & S) is a multiagency group who monitor trends and cases around young people who have presented at emergency department with mental health issues. The monthly average for the number of cases discussed by the SEMH proactive monitoring and support group increased from 15 in 2020 to 19 in 2021 and has then reduced to 14 in 2022. This reduction has been the consequence of reduced repeat referrals and the impact of earlier intervention approaches. Most of these referrals have been more around family dynamics and historical trauma, with reduced concerns surrounding school issues. There is a strikingly disproportionate gender imbalance in these referrals, with females making up 75% of the cohort. Whilst the majority of cases are in the 14-16 age range, there has been a rise in 17 year olds.
- 5.6 Our Children and young people have been surveyed and asked their views about how the current situation feels for them. These views have been continuously used to develop and renew our priorities. The current

priorities for young people and children include developing anti-bullying responses in schools, ensuring that services intervening earlier, reducing in-school pressures and prioritising mental health in our schools and settings. These views are incorporated into our plan and will be reviewed throughout the winter period.

# Children and Young People's Mental Health- What are we doing?

- 5.7 The Children and Young People's Mental Health strategy focuses on four key areas, which were identified as priorities by children and young people. These are:
  - Improve Access to Doncaster Services.
  - Address Systemic Inequalities
  - Raise Capacity and Capability within Mainstream Schools.
  - Reduce Waiting Times for Neurological Pathways.
- 5.8 Since the launch of the strategy, the priorities have been discussed with a wide number of partners and stakeholders, including the school mental health summits in May, which were attended by the majority of schools and all local agencies. We have also made the mental health strategy the focus of other key networks, such as the Inclusion and Special Needs networks and Designated Safeguarding leads. Children and young people have also fed in their views through a survey and these have been shared widely. An implementation plan, with appropriate governance has since been developed to support this, with senior leaders from the partnership attached to each of the four priorities to ensure clear accountability. We have also undertaken the following activity since the last update:
  - We have used our school summits to publicise resources and training and have developed a network of mental health leads and mental health first aiders. Schools have also identified their priorities, which are now embedded in the implementation plan. We have met with members of the local mental health community in order to identify how we strengthen access to support for children who are home educated. We are holding an event with all home educators in order to publicise how to access services and to gain a stronger understanding of the needs of this community.
  - We have conducted mental health reviews in the first tranche of twenty schools. We are currently working with schools on developing consequent action plans. We have extended this intervention to the next wave of schools in September.
  - The council have met with Maple Medical centre in order to create a feasibility study regarding the expansion of this provision. We are collaborating on this at the current time.
  - All of the actions related to Special Educational Needs are
    proceeding through the new Special Needs Board and its associated
    working groups. There is a clear implementation plan in place.
    Through this work, we will be developing 30 in borough Social,
    emotional and Mental Health places on school sites during this
    academic year. There is also a plan to increase training for school
    staff at all levels and to create a new early intervention funding
    system in localities so that schools can access guidance and funds
    without the need to apply for an Education, Help and Care plan. A

- long-term sufficiency plan will set out how we will meet rising levels of need over the next seven years.
- A new borough-wide anti-bullying strategy is currently in draft form. A steering group has been set up with schools.
- In order to widen access to services, the Kooth app, which allows young people to access mental health services virtually, has been launched to provide local resillience. Schools have supported in promoting this, and the second publicity campaign commenced in September, through social media and school assemblies across the secondary sector including those who have not already engaged.. Kooth build and deliver a product that preserves anonymity and removes the barrier of stigma and access. Accessibility is at the heart of the product design and clinical delivery. Kooth uses outcomes to prove what works and use data to constantly provide a more tailored and personalised experience. The service we have commissioned puts diversity and inclusion at its heart ensuring that locally we remove barriers to great mental health services for all people regardless of race, age, gender, sexuality or socioeconomic situation.
- The Kooth service went live on 1<sup>st</sup> March 2022. Since it has commenced there have been:

Kooth	Q1	Q2	YTD
New registrations	533	526	1059
Logins	1951	2022	3973
Users	560	592	1152
Chat Sessions	79	97	176
Chat Users	61	58	119
Messages	1250	1678	2928
Message Users	249	314	563
% Would Recommend	91%	91%	91%
Total Delivered Hours	439	479	918

- 'On the Level', an innovative approach to engaging young people around mental health though a live interactive show has been broadcasted to all secondary schools in the borough. The show helps young people increase awareness of their own mental health, gives practical strategies and drives engagement to digital mental health services e.g. 'Kooth'. The engagement event provided a platform for young people to think differently about their Mental Health and allowed them to participate interactively.
- In regards to neurodevelopmental pathways, the 'Healios' service has been commissioned for digital assessments for ADHD from April 1<sup>st</sup> 2022 and ASD from 1<sup>st</sup> June 2022. The digital assessment service will dramatically cut the waits on referral to assessment of approximately 4 months from the longest face-to-face wait of approximately 2.5 years.
- Within the face-to-face clinical pathways, providers across Doncaster came together to look at how we could reduce the wait and improve the quality of referrals through the clinical pathways. Some early next steps include

- An offer from Education Psychology to look at how they could be funded to support clinical gaps
- Changes made to the General Developmental Assessment (GDA) referral following feedback from attendance at the Special Educational Needs Co-ordinators (SENCO) network
- Letters send to General Practitioner (GPs) to remind them of the clinical process
- 9000 leaflets distributed to teachers across Doncaster to aid in the referral process.
- The DfE (Department for Education) and National Literacy Trust (NLT) funding has been invested through the Early Years Inclusion Team to continue to develop the Doncaster Talking Together speech and language pathway. As we move through 2022, joint commissioning arrangements will begin to look at further scope and provisions that are needed, rebasing appropriately.
- Focus groups have taken place in a number of schools aimed at understanding how young people from disadvantaged groups can improve their access to mental health services.
- Both MHST/CAMHS have continued to develop during lockdown a
  digital offer for parents/children/young people with access to an eclinic, this platform provides consultation and guidance immediately
  and can appropriately signpost. If a child/young person requires
  MHST/CAMHS with consent, the said person can be directly referred
  via the clinician, without the need to seek guidance from a General
  Practitioner (GP) or agency.
- With Me in Mind (The MHST provision) have worked with colleagues in Public Health to address the health inequalities for Black Asian and Minority Ethnic (BAME), Gypsy, Roma and Traveller (GRT), home educated and Lesbian Gay, Bisexual and Transgender (LGBT+) communities. It is widely acknowledged that these groups experience poor access to mental health services whilst presenting with at time complex mental health problems. With Me in Mind recruited to an engagement participation officer who is working alongside the young advisors and is in the process of recruiting pupil ambassadors from education providers across Doncaster to further understand difficulties pupils face in their communities.
- CAMHS continue to offer a 'no wrong door' policy and self- referrals are widely accepted through their Single Point of Access, rather than seek a GP appointment. MHST/CAMHS have continued to provide/offer a blended approach to treatment/assessment throughout the last year, with the vast majority of patients choosing face to face.
- MHST have been successful in attracting Wave 8 funding for the continuation of the project and are in the process of recruiting four trainee Education Mental Health Practitioners who will begin their training at Sheffield University in Feb 2023, with mobilization commencing 6 months following this in yet to be identified education providers. This will roughly equate to the MHST covering about 55% of pupils within Doncaster. In addition to this the MHST have been successful in recruiting two practitioners who will begin their Cognitive Behavioural Therapy and Systemic Training at Northumbria University in February 2023, this will provide additional therapies to the MHST model.

- 5.9 Our early help casework and parenting interventions are making a demonstrable difference to both adult and children's wellbeing. This work is crucial to building family resilience and strategies for improving wellbeing. Between April and June, 92.8% of Family Stars evidenced an improvement in parental confidence to support their families, with the biggest increase in confidence being around managing boundaries and parental wellbeing. Over the same period, the My Star tool has demonstrated that 75% of children and young people receiving this support have increased confidence in all areas. A similarly positive impact has been seen from the Solihull Parenting Programmes, where data has shown a significant decrease in parent- child conflict for those accessing this support, which will impact positively on young people and children's mental health.
- 5.10 The Children and Young People's Mental Health Strategy Group are monitoring progress and impacts against the implementation plan, whilst also engaging with children, young people and other stakeholders regarding key priorities for the 2023 strategy. The group will present these priorities and demonstrate impact against this plan to Health and Wellbeing board in March 2023.

# **OPTIONS CONSIDERED**

**6.** This section is not applicable.

# **REASONS FOR RECOMMENDED OPTION**

**7.** This section is not applicable.

# IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

Great 8 Priority	Positive Overall	Mix of Positive & Negative	Trade- offs to consider – Negative overall	Neutral or No implications	
Tackling Climate Change	✓				
Comments Not directly covered in this report.					
Developing the skills to thrive in life and in work	<b>✓</b>				

access education, developing language, academic, and work skills. This will, in turn, support the prospect of accessing a successful working life.				
Making Doncaster the best place to do business and create good jobs	✓			
Strong family support will enable economy. The expansion of our of high quality jobs in Doncaster	health team			
O Building opportunities for healthier, happier and longer lives for all	✓			
Increasingly focused delivery of services for families and young people will help families to lead increasingly happier and more successful lives, as we recover from the pandemic. Improving capability in schools and settings will enable young people to learn the skills required to lead healthier and more independent lives.				
Creating safer, stronger, greener and cleaner communities where everyone belongs				✓
This report does not directly cover this area.				
Nurturing a child and family-friendly borough	✓			
The areas covered in this report are very much in line with our nurturing and chid friendly ambitions. We will look to support young children with their health and communication needs, whilst also supporting children and young people and families to gain early support. Our strategies have been founded upon the lived experience of children and families and will continue to do so as we approach the next phase of delivery.				
Building Transport and digital connections fit for the future	✓			
The Mental Health strategy includes the commissioning of online services, which will enable young people and families to access support quickly. These online platforms will enable more efficient and focussed service delivery.				

The work described in this report will support children and young people to

Promoting the borough and its cultural, sporting, and heritage opportunities				✓
This report does not directly cover this area.				
Fair & Inclusive	✓			
Strong targeted support for children and families are keen to ensuring fairness				

Strong targeted support for children and families are keen to ensuring fairness and inclusivity. Our mental health and early help strategy aim to ensure intervention and support at the earliest possible times. We are working with our schools to develop inclusive, responsive and supportive environments. We will work to ensure that pro-active approaches allow pathways through services and provision that are tailored to the needs of specific children, young people and families.

# **RISKS AND ASSUMPTIONS**

9.

- The primary risk is that continued demand will adversely affect the stability of many family environments and thereby create economic and social instability. We are mitigating this through the delivery of our Mental Health and Early Help strategies, both of which are devoted to ensuring that support can be identified at the earliest possible moment. Through our Local Solutions approach, we will be able to identify and respond to problems in families at an early point and focus resources on resolving such difficulties. Our Mental Health strategy work will deepen its focus on the lived experience of children and young people as it reviews priorities and identifies key work for 2023.
- Whilst we are seeing some reductions in the severity of need in many areas, there is also a risk that demand increase. We are mitigating this by focussing our services in schools and the community at an earlier point in order to stop the escalation of need. We are building up the capability of school staff to respond better to trauma and are focussing mental health team support in schools where patterns of need are greatest. We have built a register of first aid leaders within the school system in order to ensure stronger networking and sharing of practice. We continue to recruit to mental health teams. Our new online platforms will offer increasing opportunities to access support without time lags.
- There is a possibility that the increase in referrals through the clinical pathway outweighs the extended digital offer for those on the neurological pathways. We will mitigate this by working closely with schools to map out provision, ensuring links between Early Help and Pathway infrastructures.
- It is also possible that schools will not comply/ engage with the
  recommendations. We are mitigating this by involving schools closely with
  our priorities through system engagements and individual meetings,
  alongside the existing offers of support and training. We will continue to
  engage with the school system through planned summits and network
  events alongside targeted conversations with schools.

• It is possible that recruitment will be difficult to our new mental health positions. We will mitigate this by working across Team Doncaster to flex capacity, looking at a one system approach.

### **LEGAL IMPLICATIONS**

10. There are no specific legal implications arising out of this report, further specific advice can be provided in relation to any issues arising from the Committee.

# **FINANCIAL IMPLICATIONS**

11. None to declare

#### **HUMAN RESOURCES IMPLICATIONS**

12. There are no direct HR implications associated with this report.

### **TECHNOLOGY IMPLICATIONS**

13. There are several references to the use of new technology in this report, including the Talking Together website, Kooth app and Healios digital assessment service for ADHD. Any requirements for technology to support the delivery of services should be considered by the Technology Governance Board (TGB), where applicable.

### **HEALTH IMPLICATIONS**

14. The impacts of the COVID pandemic on children development and mental health is summarised in the report. The effects of lockdown and much reduced service provision has potentially led to delayed development of some children,

The integrated 2-year review is one such mechanism that should be capitalised on to ensure the best outcomes for children and their families. The report outlines an array of services available to children and young people suffering from poor mental health. These services are vital to ensuring children and young people receive appropriate help, however a shift in emphasis to promoting good emotional wellbeing and protective factors support good mental health would be more effective in stemming the tide of children experiencing these difficulties

### **EQUALITY IMPLICATIONS**

15. The Council's duty under section 149 of the Equality Act 2010 when exercising its functions to advance equality of opportunity and foster good relations between those who have a protected characteristic and those who do not share that protected characteristic, ensure fair access to learning and opportunities for all Doncaster's children and young people. This report sets out how we will ensure that access to services at all levels is being improved despite the challenges of the pandemic.

#### CONSULTATION

- 16. There has been consultation through our engagements with parents, children and young people, schools and settings cross the last two terms of this academic year. These have included:
  - Young Advisers surveys and face-to-face consultation events with young people and children.
  - School networks, 'summits' and conferences. We have also conducted meetings in a large range of schools in order to understand school pressures and needs.
  - Early Help strategy consultation events.
  - Meetings with parents groups including those families who have children with Special educational needs or who are home educating.
  - Parent / carer and young people representatives attend all of the mental health strategy groups and workshops.

### **BACKGROUND PAPERS**

17. None to declare

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