

05 March 2014

Children and Young People's Mental Health issues

Purpose of report

For discussion.

Summary

Paula Lavis, Coalition Co-ordinator for the Children and Young People's Mental Health Coalition has been invited to present to the Joint Board on the key issues facing children and young people's mental health. The purpose of this item is to stimulate discussion between Board Members to further our thinking and to develop our policy position on children and young people's mental health issues.

Key questions and suggested actions are highlighted in **bold**.

Recommendation

Members are invited to discuss the issues raised in the report and to agree actions where this is required.

Action

To be taken forward by officers as directed by members of the Board.

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Children and Young People's Mental Health issues

1. Paula Lavis, Coalition Co-ordinator for the Children and Young People's Mental Health Coalition has been invited to present to the Joint Board on the key issues facing children and young people's mental health.
2. The Children and Young People's Mental Health Coalition brings together leading charities to campaign jointly on the mental health and wellbeing of children and young people. It is made up of 14 charities and has a growing base of supporters. The Coalition was launched in the House of Lords in March 2010 and is hosted by the Mental Health Foundation.
3. The purpose of this item is to stimulate discussion between Board Members to further our thinking and develop our policy position on children and young people's mental health issues.

Overview of key issues

Prevalence

4. Evidence shows that 1 in 10 children and young people have a mental disorder with many continuing to have mental health problems into adulthood.
5. There are some vulnerable groups, who are even more at risk of developing mental health problems. These include:
 - 5.1 children and young people with learning disabilities
 - 5.2 young gay people
 - 5.3 deaf children
 - 5.4 black and asian children
 - 5.5 children in care
6. It is well established that children and young people who experience certain risk factors are at a greater risk of developing mental health problems. These risk factors can be within the child, within the family and within their environment.
7. It is critical we get a better picture of the prevalence and nature of mental health needs that children have around the country, at different ages and in different communities which is currently very out of date.

Funding

8. It has been established that early intervention is both cost and clinically effective. The average UK cost of a child with mental illness during childhood and adolescence is in the range of £11,030 to £59,130 annually per child. Early intervention services have been shown to be very cost effective. For example every £1 spent on the prevention of conduct disorders through social and emotional based interventions in schools gives a total return of nearly £84.
9. Data from YoungMinds based on a Freedom of Information request, has found that of the 51 local authorities asked 34 had significantly reduced their Child and Adolescent Mental Health Services (CAMHS) budget since 2010.

10. These cuts are impacting on the provision of early intervention services. YoungMinds claims that teams of specialist workers such as school nurses, who are trained to identify and treat children with emotional problems, are being disbanded.
11. Cuts to early intervention services are likely to mean that more young people will not receive support when they first need. Other problems include children and young people being placed in hospitals away from home or being placed on adult mental health wards, not because of clinical need, but because of a lack of resources locally.
12. These budget cuts are also being experienced in the NHS. Anecdotal evidence suggests that some services are tightening their service referral criteria, which makes it much harder for young people to access specialist CAMHS services.
13. These cuts are also being felt by voluntary sector organizations, who are often commissioned by local authorities or the NHS to provide mental health provision.

Role of schools

14. Schools are important settings for promoting the mental health and wellbeing of their pupils. Young people are more likely to go to their teacher if they have a mental health problem than their GP or a mental health professional.
15. Teachers are in a good position to help identify emerging mental health problems but teachers often have very little training in mental health, and often little confidence in their ability to promote their pupils' mental health and emotional wellbeing.

National picture

16. The Government has published the mental health strategy 'No health Without Mental Health' and the mental health strategy implementation framework, an 'action plan' detailing 25 mental health priorities and more recently the mental health crisis care concordat. At the January CWB Board, members agreed a proposal that the LGA sign up to the Mental Health Crisis Concordat and its associated actions.
17. Serious concerns have been identified in Tier 4 CAMHS provision and links to community services, in summary this includes:
 - 17.1 serious concerns and variable quality in safeguarding and admissions practice. The links and accountability to local bodies has been lost in the move to national commissioning.
 - 17.2 As a result of the move to national commissioning there is a lack of clear links to services provided by Clinical Commissioning Groups (CCGs) and Local Authorities to support children locally before/ after they enter a Tier 4 unit. The arrangements for admission/discharge from Tier 4 units are not joined up with local services and decisions may not be made on the basis of what is available locally or best for the child.
 - 17.3 In some cases, local services are not informed of a child placed in a Tier 4 unit in their area or of a child from their area placed in another.

17.4 Some children are coming out of Tier 4 provision into the community without support in place; sometimes without even a school place.

18. We are aware that both CQC and NHS England have identified these concerns too and are reviewing Tier 4 CAMHS provision. We are keen to support them to ensure the review is informed by and works alongside local partners who provide other services for these children, particularly local authorities and CCGs.

19. The Children's Health and Wellbeing Partnership (CHWP) is a national partnership that brings together health and local government partners in addition to the Department of Health and Department for Education. The CHWP has identified children's mental health as a key issue and is currently scoping out what work is needed nationally and locally to improve children's mental health and wellbeing outcomes.

Questions

- **Does the paper capture the key issues or are there other issues not mentioned here that you are aware of?**
- **What support and information do local authorities and their partners need to help them improve children and young people's mental health and wellbeing outcomes?**

Opportunities

20. The Health Committee recently announced it is taking evidence on CAMHS; there is an opportunity for the LGA to submit evidence. The inquiry will consider:

- 20.1 The current state of CAMHS, including service provision across all four tiers; access and availability; funding and commissioning; and quality.
- 20.2 Trends in children's and adolescent mental health, including the impact of bullying and of digital culture.
- 20.3 Data and information on child and adolescent mental health and CAMHS.
- 20.4 Preventative action and public mental health, including multiagency working.
- 20.5 Concerns relating to specific areas of CAMHS provision, including perinatal and infant mental health; urgent and out-of-hours care; the use of S136 detention for under 18s; suicide prevention strategies; and the transition to adult mental health services.

Action

- **Should the LGA submit a response to the Health Committee inquiry on CAMHS?**

Recommendation

Members are invited to discuss the issues raised and agree actions where required.