
**Children, Education and Communities Policy
and Scrutiny Committee**

3 May 2022

Children's Mental Health – Review of Referral System

Purpose

1. This is the final report of the Scrutiny Task Group appointed to review the above with the aim of acquiring a better understanding of the current mental health referral system for young people in York. The primary objectives being to assess how it worked and recommend any appropriate improvement to outcomes for young people and their families.
2. The report makes recommendations to this Committee to put forward to the Executive.

Background to the topic

3. One in six school-age children in the UK has a diagnosable mental health problem. This is an alarming rise from one in ten in 2004 and one in nine in 2017 (NHS Digital 2020.) Two thirds of children with a mental health problem have had contact with professional services with teachers being the most commonly cited source, 48.5 % (NHS Digital, 2018).

[CYP mental health fact sheet 2021.pdf \(centreformentalhealth.org.uk\)](#)

4. Councils have a range of duties and responsibilities to promote the health and wellbeing of children and young people (CYP) in their area. These include the prevention of mental illness via reducing known risk factors, the promotion of mental health and its protective factors and where appropriate, assessment and treatment under the Mental Health Act 1983.
[A whole household approach to young people's mental health: A 'must know' guide for local councillors | Local Government Association](#)

5. The Local Government Association held an online national workshop on 22 March 2021 where the voice of young people was captured by the following question:

‘What would be your ‘top ask’ of local councillors / decision-makers?’

The answers were as follows:

- Invest in youth services.
- To have a holistic approach to include CYP’s academic / employability needs.
- Provide 1:1 counselling.
- Highlight positive role models / mental health advocates / local champions.
- Make services inclusive for all.

Background to the review

6. In February 2020 scrutiny officers wrote a scoping report to agree the terms of reference for a review into youth mental health focussed on issues surrounding self-harm.

7. The scrutiny topic was then put on hold due to the covid-19 pandemic and revisited in the summer of 2021 with a renewed focus on the effect of the covid-19 pandemic as well as the referral process for children and their families for issues around mental health.

8. It became clear that part of the problem around the referral process was the difficulty in collecting relevant and comparable data from the numerous different agencies involved in supporting children and young people. This difficulty makes it more complex to spot where limited resources need to be placed at any one time by the different agencies involved.

9. The scrutiny sub-committee interviewed a range of individuals and groups to gain information around the areas outlined above. Interviewees included the following:

- A young person from Show Me That I Matter (the Children and Young People in Care council).
- The manager of the Clinical Commissioning Group (CCG).
- The council’s senior Educational Psychologist.
- The School Well-Being Service.
- Children and Adolescent Mental Health Service (CAMHS)

- City of York Council's Inclusion Officer.
- The 'Not in Education, Employment or Training' (NEET) report was used for information as well.

10. The Chair of Children, Education and Communities (CEC) Policy and Scrutiny Committee approached the Chair of Health and Adult Social Care (HASC) Policy and Scrutiny Committee, who agreed to put the suggestion of a Joint Scrutiny to his committee. This resulted in Cllr. Vassie and Cllr. Heaton joining the review group.

11. A Joint Committee of the CEC and HASC Policy and Scrutiny Committees was therefore commissioned and took place on 28 February 2022 to highlight the findings of the group and receive reports from council officers regarding the mental health provision for young people in the City. This meeting was also addressed by York Mind and young people working with York Mind.

12. This work has led to the following findings:

- There is a surge of demand for mental health services mainly affecting Primary Care and the Voluntary Sector.
- Eating disorders are on the rise amongst children in York.
- Complexity and acuity of referrals has increased and this is putting a lot of pressure on secondary care clinical staff.
- The impact of covid-19 will last for a long time.
- Data is not yet available: public health data hub is working on a health dataset across the City with the intention of demonstrating data at ward level.
- Data on numbers of referrals/ types of cases across York is not routinely available from the specialist CAMHS provider.
- Pressure to achieve academically can have a detrimental impact on young people's mental health in York.
- Young people feel that waiting times for services are too long and that this in itself has a negative impact on their mental health.
- Social media impacts on young people's perceptions of themselves and others and this can have a negative impact on their mental health.

- Children and Young People in Care felt that their situation led to additional stress and that a lack of consistency of social workers exacerbated this problem.
- Mental Health provision is not provided by one body but by multiple in different ways and as such there is little clarity over which bodies are responsible for delivering what service and this can lead to children being passed between different services without a clear plan or understanding as to why.
- There is a paucity of data. The current arrangements for data collection and analysis by with Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) means it is difficult to see the patient improvement journey and this could be important to attract more funding to the area.
- There is no common data set – NHS/CCG, CYC and VCS sectors all have their own – again this could be important to attract more funding to an area.
- The school-wellbeing service is supporting a lot of low level cases and is now working over-capacity.

Options

13. In terms of this review, the Committee can:
- A. choose to accept all of the recommendations presented to it; or
 - B. amend or remove any of the recommendations it wishes; or
 - C. decide to reject all of the recommendations if it wishes.

Analysis

14. Option A represents a plan to provide additional support to the mental wellbeing of children in York, option B could add to the original recommendations and not detract from them, whereas option C would achieve nothing.

Council Plan 2019-2023

15. The recommendations contained within this report will meet the aims of the Council Plan which are to improve the quality of life for residents by supporting good health and well-being and by providing a better start for Children and Young People in York.

Implications

16. **Financial** - There are several opportunities to provide funding to support children and young people outlined below, this could be done by CYC alone or with the help of NHS or other relevant bodies.

- Additional investment in the school well-being service: the Schools Forum will be asked in May to reinvest £105K into the service (their funding contribution ends in March 2023), and there is scope for further broadening of the offer as a pathway with the well-being in mind team
- Supporting CAMHS and Occupational Therapy support with the aim to reach into community setting/schools – with the aim of developing stronger relationships around mental health and developing a community offer. One post would cost around £37K plus 30% oncosts.
- Increasing investment in York Mind counselling to make it sustainable (~£60k): currently they are funded for 16-23, short term funds have been put into the service to expand this to the 13-15 age group.
- Development of a website for good self-help – York Mind is currently funding this, in co-production with children and young people. This will need oncosts servicing and it would be worth working with York Mind to explore what is needed to make this sustainable.

Human Resources (HR) None

Equalities - An EIA (Equalities Impact Assessment) will be developed for the Executive Report.

Legal None

Information Technology (IT) None

Crime & disorder None

Sustainability None

Other implications - The more investment in place for prevention services the more likely it is that CYC and partners will save money in the long term.

Risk Management

17. Whilst there are no direct risks associated with the recommendations of this review, it would be fair to say without early intervention to address the mental health issues identified in the course of this review, there is a risk that young people will continue to feel overwhelmed, anxious and stressed. This may impact on their educational achievements, lifestyle choices and future outcomes.

Recommendations

18. Members are asked to consider the recommendations below and provide any necessary feedback or comments to support the outcomes of the Joint Scrutiny.
 - i. That the Executive Members for Health and Adult Social Care and Children, Young People and Education work with the newly formed Integrated Care Board (ICB) as the responsible commissioning body, Integrated Care Partnership and the City of York Health and Care Alliance which has been operating in shadow form for 2 years in anticipation of the ICB setting up (and should have powers and a budget delegated from the ICB) ,TEWV, CAMHS and council officers in public health, as well as any other relevant bodies, to produce an appropriate data set including key performance indicators and key risks on Children's mental health in the York area. This data set should then be reported to the Executive Members and the members of the Children, Education and Communities Scrutiny Committee on a quarterly basis.
 - ii. That the Executive Members, identified above, work with the newly formed ICB and ICS, TEWV, CAMHS and council officers in public health as well as any other relevant bodies to implement a common child reference number system across all services in York.
 - iii. That the Executive member for Children, Young People and Education looks to invest in early help, prevention services and peer support interventions, as recommended by participants at the joint scrutiny review such as the York Mind Project to develop a website for good self-help
 - iv. That the Executive member for Children, Young People and Education works with commissioners to support enhancing and redesigning pathways. To invest in opportunities to commission services that would reduce the 'bottle neck' when children report

mental ill-health and have to wait for long periods without support before it is made available to them. This could be done by providing financial support to CAMHS, School Wellbeing Service and York Mind Counselling services.

- v. That CYC's representative on the ICB makes the case for significant investment in Children's Mental Health Services in York building on the iThrive model.
- vi. That CYC, in partnership with relevant stakeholders, develop a Children's Mental Health Plan for York, as part of the development of an All Age Mental Health Strategy for York. The All Age Mental Health Strategy recognises the importance of parental mental health on the well-being of the child.

Reason: To support the mental health and wellbeing of children and young people in York and to meet the aims of the Council Plan.

Contact Details

Authors:

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Cllr R Webb

Chief Officer Responsible for the report:

Not applicable - Member Scrutiny Review

Report
Approved

n/a

Date 03 May 2022

Wards Affected:

All

For further information please contact Democratic Services.

Background Papers None

Abbreviations

CYP	Children and Young People
CAMHS	Children and Adolescent Mental Health Service
CCG	Clinical Commissioning Group
NEET	Not in Education, Employment or Training
CEC	Children, Education and Communities Policy and Scrutiny Committee
HASC	Health and Adult Social Care Policy and Scrutiny Committee
TEWV	Tees Esk Wear Valley
CYC	City of York Council
VCS	Voluntary and Community Sector
ICS	Integrated Care System
ICB	Integrated Care Board