



**Mental Health Services for Young
People joint Task and Finish Group
Review Report
November 2022**



Essex County Council

**Health Overview Policy and Scrutiny Committee and
People and Families Policy and Scrutiny Committee**

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1. Glossary of Terms

Acronym	Definition
C&M	Communications and Marketing
CAMHS	Child and Adolescent Mental Health Service
CMH	Children's Mental Health
CYP	Children and Young People
DfE	Department for Education
DofE	Duke of Edinburgh
ECC	Essex County Council
EPUT	Essex Partnership University NHS Foundation Trust
EWMHS	Emotional Wellbeing and Mental Health Service
HCRG	Health Care Resourcing Group
HOSC	Health Overview Policy and Scrutiny Committee
ICS	Integrated Care System
MOU	Memorandum of Understanding
MSC	Multi-Schools Council
NELFT	North East London NHS Foundation Trust
PAF	People and Families Policy and Scrutiny Committee
SEND	Special Educational Needs and Disability
SET CAMHS	Southend, Essex and Thurrock Child and Adolescent Mental Health Service
TPP	Trauma Practice Programme
YEA	Young Essex Assembly
YSG	Youth Strategy Group

2. Foreword from Task and Finish Group Chairman

As Chairman of the Mental Health Services for Young People Task and Finish Group, I am pleased to present this report and a series of recommendations.

At Essex County Council's (ECC) Full Council meeting on 10 May 2022, a motion was carried with regard mental health services for young people. The motion stated that a referral be made to ECC's Health Overview Policy and Scrutiny Committee (HOSC) and People and Families Policy and Scrutiny Committee (PAF) to undertake a joint review, with its findings reported back to Full Council in December 2022.



There has been an overwhelming consensus in the oral and written evidence provided to this review that the mental health of children and young people has worsened in recent years. What this review has shown is that there a lot of good, positive and helpful support available to young people requiring mental health support but what is less clear is how they can access this and determining the right service that they need.

It is clear there are significant workforce pressures that have exacerbated issues relating to the delivery of mental health services and that recruiting to fill vacancies is no easy feat.

Besides the single point of access, we have grouped our recommendations in three defined sections which deal with resources, schools, and communications.

It was very pleasing to hear of the work Tendring District Council has undertaken in delivering its Primary School Wellbeing Hubs Project and would encourage other district councils to look at rolling this, or similar, out in their respective areas.

This report captures the work completed and presents conclusions and recommendations for consideration by Council. I would like to thank the members of the Task and Finish Group for their time and effort in completing this work and to all those who gave evidence to the group.

In terms of sharing the groups findings, this report will also be presented to the Essex Health and Wellbeing Board, the Essex Strategic Coordination Group, with all our Essex MPs and the chairs of the relevant House of Commons Select Committee, whose input will be very valuable in progressing some of our findings with central government.

I am pleased to commend this report and its recommendations to Council.

Councillor Carlo Guglielmi, Chairman of the Task and Finish Group

3. Executive Summary

The emotional health and wellbeing of children is just as important as their physical health and wellbeing. Over the years, there has been a growing recognition of the need to make improvements to mental health services for young people and children.

Supporting the mental health of young people, including their families and carers should be a priority and Government, county councils, local councils, health service and the voluntary sector all have an important role to play.

Prior to the Covid-19 pandemic, children and young people were facing a mental health crisis and this steadily worsened. Lockdowns and social distancing requirements have resulted in young people struggling with the loss of normal social structures, along with the need for teaching and assessments to take place virtually. A child who is six years of age would have spent a third of their life living in lockdown.

Research shows that in England, 1.5 million children and young people under the age of 18 will need new or additional mental health support as a direct consequence of the Covid-19 pandemic.

Whilst new NHS ambitions are to increase access rates and decrease waiting times, too many young people will be unable to access the care that they need. New mental health support teams in schools are a valuable opportunity to identify young people who are experiencing problems with their mental health however there is no funding available to roll them out nationally and schools. Schools that are introducing innovative schemes, such as the School Wellbeing Hubs Project in Tendring and Colchester, are having to self-fund.

Mental health support teams in schools, where they have been rolled out, are well-placed to facilitate early intervention for young people as part of a whole school approach.

Mental health services in general, and children and young people's mental health services specifically, have been underfunded in central Government spending reviews over the past ten years. Early intervention is key in identifying needs early and providing preventative, low-level mental health support and advice, which in turn could reduce referrals to more costly, specialist services.

It is reported that half of all mental health problems manifest by the age of 14, and 75% by the age of 24.

Mental health support for young people is an all-society issue. The concerns raised in this report can only be addressed by central Government, county councils, local councils and the health system working together to promote good mental health and prevent new crises emerging.

4. Summary Conclusions and Recommendations

Recommendation 1 – staffing

- a) It currently takes around three years for a person to obtain the relevant qualifications in order to undertake a clinical role within the health service, specifically in mental health. With the current resource pressures NELFT are experiencing, **the group recommends that NELFT undertake an exercise, working with local universities, to see whether it is possible to introduce a fast-track training programme or a more simplified programme to enable vacancies to be filled sooner.**
- b) The group acknowledges that many individuals leave the mental health profession, and this puts significant pressure on the service. **The group therefore recommends that the Secretary of State for Health and the Essex Integrated Care Systems (ICS) Chief Executives undertake an exercise (and consider recent studies/research already undertaken nationally) to understand why individuals are currently leaving the profession and what could be done to retain highly skilled and experienced staff.**
- c) The group recognises that clinical training and placements are essential for medical staff at all levels and it was highlighted that the Colchester Institute has designed a health apprenticeship specifically for the diagnostics hub at Clacton Hospital and so far, there have been 300 places offered with very positive feedback. It is understood there are other good colleges as well as universities involved in this piece of work which supports the Anchor Movement, apprenticeships and jobs for local people. As recruitment and retention is a vitally important issue, greater links to the Essex Anchor Movement would mean a more creative way to address this problem by moving away from traditional approaches and open up a new pool of potential applicants. **Therefore the group recommends that the Essex ICS Chief Executives and the Secretary of State for Health review the organisation of placements for mental health clinical staff and take action to improve this part of the training and development process.**

Recommendation 2

The group recommends to the Essex ICS Chief Executives there be a single point of contact (hub) in Essex for young people, including parents and carers, requiring mental health support to obtain information and guidance on who to contact for help. The hub can then triage and signpost to the relevant service, reducing the pressure on the individuals requiring support. This would present a more streamlined approach and the group feel this should be an independent body with no bias. This can include using existing services currently in place, such as 111, 999 and 0800 1111.

Recommendation 3 – schools

- a) The group recognises that schools play a significant role in supporting young people requiring mental health support and understand current resourcing issues. **It therefore recommends that the Secretary of State for Education makes a plan to and then provides further financial resource to enable them to provide more extra-curricular and enriching activities and appropriate support and resources, which may then prevent people presenting with more complex mental health issues.**
- b) Currently, schools have to invest their Pupil Premium in order to run the Primary School Wellbeing Hubs Project in Tendring and Colchester. Given the early success identified and the benefit it provides to both the children and their families, **the group recommends that the ECC Cabinet Members for Adult Social Care and Health, Education Excellence, Lifelong Learning and Employability and Children's Services and Early Years, lobby the Secretary of State for Education to obtain funding to provide a Primary School Wellbeing Hub in every school in Essex.**
- c) The group recognises and agrees that the Primary School Wellbeing Hubs Project in Tendring has been a success, and that it is everyone's collective responsibility to support young people requiring mental health support. To further enhance the offer, the hub should be extending its services and offer support to the parent/carers of those experiencing poor mental health. Because of its success the Chief Executive of the North Essex and East Suffolk ICB is considering rolling this out in East Suffolk. **The group therefore recommends that the Leader of Essex County Council prepares a letter seeking support from all Essex Leaders and Chief Executive's, requesting that the three Essex (ICS) provide grant funding to enable the scheme running in Tendring to be rolled out countywide.**
- d) The group was reassured to hear that take up of the Council's Trauma Practice Perceptive Programme training is high, with over half of Essex schools engaged. This training helps schools to be able to positively help pupils who require mental health support. **The group recommends that all schools in Essex engage with the Council to complete this training as soon as practically possible. The group also asks that the Cabinet Member for Education Excellence, Lifelong Learning and Employability ensures that Essex County Council has sufficient resources in place to meet the demand.**
- e) The group felt that the evidence provided to them, highlighted a lack of awareness of mental health support across some schools in Essex. **The group recommends that Essex County Council's Education Team**

provide clearer, more concise guidance to all schools in Essex detailing the support available and how it can be accessed.

Recommendation 4 - communications

- a) **The group recommends that ECC Communications Team, undertakes a review of its external Child and Adolescent Mental Health communications plan, specifically around access to the Child and Adolescent Mental Health Service (CAMHS) and referral pathways and prepare an interim report for the Health Overview and Scrutiny Committee at its November 2022 meeting.**
- b) The group recognises it is important to promote the services that are currently available to young people in Essex such as dance, drama and sport clubs, youth clubs and the Duke of Edinburgh award. **The group recommends that the Communications and Marketing team continue its focus on promoting mental health support available to young people and prepare an interim report for the Health Overview and Scrutiny Committee at its November 2022 meeting.**

5. Scope of the Task and Finish Group

A scoping document was agreed by HOSC in July 2022. This is included in the Notes and Evidence section at the end of this report.

6. Membership of the Task and Finish Group

- Councillor Carlo Guglielmi, Tendring Rural West
- Councillor Marie Goldman, Chelmsford Central
- Councillor Lynette Bowers-Flint, Bocking
- Councillor Dave Harris, Maypole
- Councillor Paul Gadd, Saffron Walden
- Councillor Martin Foley, Thaxted
- Councillor Ray Gooding, Stansted
- Councillor Carlie Mayes, Maldon District Council
- Councillor June Lumley, Rayleigh South

7. Summary of main meetings

17 August 2022

Included an initial meet and greet and setting out the groups remit, and an introductory briefing from the Council's Director for Strategic Commissioning and Policy (C&F).

31 August 2022

Meeting to gain an understanding of the mental health services available to young people in Essex and to find out the different types of referral pathways.

7 September 2022

Meeting to gain understanding of the work Healthwatch Essex are doing with the Mental Health Youth Ambassadors and how they link in with the support services that are currently available in Essex.

20 September 2022

Meeting to receive a presentation from Tendring District Council on its pilot project Primary School Wellbeing Hubs that are being run in Tendring and Colchester.

29 September 2022

Meeting to receive multiple presentations and information from ECC services including Education, Communications and Marketing and the Youth Service.

3 October 2022

Meeting between the group to discuss potential recommendations and to agree final wording.

20 October 2022

Meeting with the relevant ECC Cabinet Members to discuss mental health services for young people in Essex.

8. Background to mental health services for Young People in Essex

The North East London NHS Foundation Trust (NELFT) were invited to present to the group however, it was felt that as they had attended a joint HOSC and PAF the week previously their attendance was not required further, although the information presented has been incorporated into this report.

There are a number of services available to promote children and young people's mental health in Essex.

NELFT provides the Child and Adolescent Mental Health Services (CAMHS) in Essex. This is an NHS service that supports children and young people with emotional, behavioural or mental health difficulties.

The Emotional Wellbeing and Mental Health Service (EWMHS) provides NHS support for people under the age of 18 across Essex, with the Essex Youth Service helping young people to get the most out of school, work and life.

EWMHS provides emotional wellbeing and mental health advice and support for young people and their families across Southend, Essex and Thurrock who need support with their emotional wellbeing or mental health difficulties.

The type of support will vary depending on the type of concern and the severity. Types of support include online self-help, crisis support, specialist assessments and face to face therapy, both group and individual.

The Essex Youth Service helps young people (13 – 19) get the most out of school, work and life by running a variety of youth service provision across Essex and supporting community groups to develop local provision.

Both ECC's HOSC and the PAF scrutiny committees have scrutinised mental health services previously, with HOSC receiving an update from both NELFT, who provide mental health support for young people and the Essex Partnership University NHS Foundation Trust (EPUT). The most recent review started in July 2020 and HOSC received further updates in the following September and December 2020. These meetings were focussed around both NELFT and EPUT's response to the Covid-19 pandemic and how it was coping with demand given the restrictions that were in place at the time.

The most recent report HOSC received was in September 2022 where NELFT reported that current challenges included a high number of referrals, challenges with workforce, including recruitment and a shift in change from people requiring mental health support. During the pandemic, NELFT continued to function as normal and maintained, when necessary, face to face appointments with of course, the appropriate infection control measures in place.

9. Understanding the current situation and referral pathways

There are a variety of providers across the County that provide mental health support to young people in Essex. The 'main' provider is NELFT who provide the CAMHS service for people aged 0 – 18 years (up to 25 years of age if SEND).

To access NELFT services, there is a single point of contact call centre which is staffed by clinicians. Children requiring urgent intervention are seen within 4 – 48 hours, depending on the assessed level of need.

Since the re-procurement of CAMHS services within Essex, NELFT are working in partnership with Health Care Resourcing Group HCRG (previously known as Virgin Care) to deliver a Thrive Informed clinical care model. A communication campaign was completed in collaboration with ECC's commissioning colleagues to ensure that Service Information Leaflets were updated and distributed accordingly. NELFT worked with its partnership colleagues HCRG to ensure that all service access information and service delivery were updated on its websites and digital information platforms.

Since the commencement of SET CAMHS (Southend, Essex and Thurrock Child and Adolescent Mental Health Services), a dedicated Professional Consultation line within NELFT's Single Point of Access team has been embedded each weekday morning Monday to Thursday for Schools, GPs and other professional leads. In addition, the service continues to offer a digital alternative via Silvercloud.

As NELFT embed new ways of working in partnership with an additional sub-contracted provider, they continue to engage with system-wide partners and

present a business-as-usual service for our children, young people and their families offering a wider offer of virtual and face to face intervention.

As with any new contract, they had envisaged a delay in waiting times, particularly for its “getting help” model, which is now being delivered by HCRG however, plans are in place to address these waits for treatment to prevent further delays. As the Lead Provider, NELFT continue to engage with its partnership sub-contractor at monthly Contract Monitoring Meetings to discuss service delivery.

Referral processes and contact telephone numbers remain intact and unchanged. Service users receive the same level of service prior to NELFT/HCRG partnership, and all patient experience feedback and concerns will be addressed consistently and promptly across the two organisations. Currently we are experiencing pinch points within the Mid and West Essex teams due to staffing capacity and difficulty in recruitment of clinical staff and medical staff, however both organisations continue to utilise temporary and agency staff to cover gaps in staffing where possible.

Young people can self-refer to CAMHS and in 2021/22, 1061 self-referrals were received. Referrals can also be made by GPs, parents, carers, teachers and other professionals.

Resource remains an issue and NELFT are currently experiencing an increase in demand for its services. An increase in resource would be beneficial however people with the right capabilities need to be recruited. The health system has been undervalued over the years which is now bringing pressures relating to recruitment and retention of staff. It is not simply a case of recruiting new members of staff, they have to undertake formal training and qualification which is currently a three-year course.

NELFT aim to see young people within 12 weeks of referral and people are prioritised according to clinical need and information is provided to those waiting for support and their families around what they can expect. Support needs to be timely in order to support people in crisis and that more engagement is needed to prevent situations escalating in the first place.

Recommendation

It currently takes around three years for a person to obtain the relevant qualifications in order to undertake a clinical role within the health service, specifically in mental health. With the current resource pressures NELFT are experiencing, **the group recommends that NELFT undertake an exercise, working with local universities, to see whether it is possible to introduce a fast-track training programme or a more simplified programme to enable vacancies to be filled sooner.**

Recommendation

The group acknowledges that many individuals leave the mental health profession, and this puts significant pressure on the service. **The group therefore recommends that the Secretary of State for Health and the Essex Integrated Care Systems (ICS) Chief Executives undertake an exercise (and consider recent studies/research already undertaken nationally) to understand why individuals are currently leaving the profession and what could be done to retain highly skilled and experienced staff.**

Recommendation

The group recognises that clinical training and placements are essential for medical staff at all levels and it was highlighted that the Colchester Institute has designed a health apprenticeship specifically for the diagnostics hub at Clacton Hospital and so far, there have been 300 places offered with very positive feedback. It is understood there are other good colleges as well as universities involved in this piece of work which supports the Anchor Movement, apprenticeships and jobs for local people. As recruitment and retention is a vitally important issue, greater links to the Essex Anchor Movement would mean a more creative way to address this problem by moving away from traditional approaches and open up a new pool of potential applicants. **Therefore the group recommends that the Essex ICS Chief Executives and the Secretary of State for Health review the organisation of placements for mental health clinical staff and take action to improve this part of the training and development process.**

10. Healthwatch Essex

Healthwatch Essex are an independent charity set up under the Health and Social Care Act 2012 and undertakes research and engagement to uncover service user experiences of services and use it to help shape health and care.

They are made up of eighteen employees with four teams:

- Communications
- Information and Guidance
- Engagement
- Research

Healthwatch Essex reported that knowledge of its existence could be better, and they attend events and meetings to promote the work it undertakes, but they do not have enough funding for Countywide campaigns and therefore complete targeted, local work instead.

There has been a significant rise in mental health related calls to its service, a number of which related to self-harm incidents, and they run a number of ambassador programmes, including one focussed specifically on mental health.

The programme started two to three years ago and has been commissioned to run for a further two years due to its success.

The group meets on a monthly basis and currently has twenty-two ambassadors in the group ranging in age from 12 – 24 years. The majority have lived experiences of anxiety, depression, OCD and eating disorders.

Successes of the group include them supporting and co-designing a survey on the impact of Covid-19 on mental health. Over 100 responses were received and concluded that in fact young people were worried about the ending of Covid-19 restrictions and felt pressure from family and friends to socialise when they necessarily did not want to. Other feedback also included that it felt overwhelming as there was not a single place for a person to refer themselves to or be referred to, and that the lengthy waiting times after referral, with no offer of interim support, added to anxiety and worry.

Feedback also suggested that the transition from Children's mental health services to adult's is daunting and caused more worry.

Reports and their findings are shared with staff networks, CAMHS commissioners, MIND, ECC, EPUT and NELFT. They are planning to run a further such group on body image later this year.

Improvements around access to information for referrals is needed and should respect people's privacy around not wishing to tell family and friends they need support.

It is important to remember that people requiring support have a choice and want to remain in control and so it does not feel like support is being done to them.

Recommendation

The group recommends to the Essex ICS Chief Executives there be a single point of contact (hub) in Essex for young people, including parents and carers, requiring mental health support to obtain information and guidance on who to contact for help. The hub can then triage and signpost to the relevant service, reducing the pressure on the individuals requiring support. This would present a more streamlined approach and the group feel this should be an independent body with no bias. This can include using existing services currently in place, such as 111, 999 and 0800 1111.

11. Primary School Wellbeing Hubs Project

The Primary School Wellbeing Hubs Project run by Tendring District Council has so far proven to be a great success. Tendring has the second highest suicide rate in the country, with Colchester third and Harlow fifth and there has been a rise in the number of young people in Tendring and wider Essex requiring mental health support.

These hubs are an afterschool provision that run on a 6-week cycle with themed, 1-hour sessions. The sessions are themed around play, art, construction and science and are supported by trained school staff. The aim of the hubs is to build

resilience and self-esteem and to remove barriers around mental health to enable learning. They also help to develop a culture in schools where every child feels comfortable about talking about their feelings.

The project is at its midway point and evaluation so far has shown early signs of improvement for the children and their families. So far, 643 children have participated in a wellbeing hub and over half of the pupils who attended found the sessions very helpful. Twenty-one schools across Tendring and Colchester are participating in this project and in order to run them, they are currently investing their pupil premium to enable these hubs to run. Tendring District Council were awarded funding by the Alliance Investment Fund to enable them to rollout this project wider.

This is an excellent way to prevent anxiety becoming a full-blown mental health issue in many children, and we understand that because of its success the Chief Executive of the North Essex and East Suffolk ICS is considering rolling this out in East Suffolk.

In terms of future funding, the health service have offered further funding once the evaluation has been fully completed in July 2023, but any additional funding would need to be provided by central Government as they are the source for schools funding.

It should be noted that funding should not be directed at deprived areas only, it should be aimed at those children who need support. The pilot scheme, run in Great Bentley, is not classed as a deprived area.

Projects such as these require an injection of investment upfront to show that they will provide a long-term benefit to the wider system.

12. Education Services

There are significant number of children and young people who stop attending school due to mental health issues.

Schools have a huge role to play but are under-resourced, and it is felt if more support can be provided then they will be able to provide the extracurricular and enriching activities to prevent and reduce the number of people who present requiring mental health support.

Education services at ECC are working hard on delivering early intervention with young people and schools to try and regulate behaviours so that stress and anxiety can be managed better in order to prevent more complex support being required.

A learning event took place in June 2018, put together by commissioners from ECC and mental health services supported by the Essex Safeguarding Children Board, to consider some of the learning from the review of suicides in Essex as well as broader themes around mental health and wellbeing. There is a coordinating group led by ECC, tasked with implementing the suicide strategy across Southend, Essex and Thurrock. Part of this work involved training and

campaign work around World Suicide Prevention Day has taken place in September, in conjunction with partner organisations.

Considerable work has been undertaken with professionals so they can more easily identify mental health issues in young people as it has been found that without appropriate support, can lead to disruptive behaviour in schools.

Essex Education, Health and Social Care Service Partners have collaborated to create a suite of resources. These are called 'Let's Talk Social, Emotional and Mental Health'. They provide an introduction to a range of themes that may impact a child or young person's emotional wellbeing and mental health. They may be part of a child or young persons (CYP) presentation if they are experiencing mental ill health. Guidance has also been produced around suicide prevention in schools, which promotes positive emotional wellbeing and reducing the risk of suicidal thoughts and actions.

ECC has committed to an approach named Trauma Perceptive Practice (TPP), to support schools to understand behaviour and support emotional wellbeing. This is fundamentally grounded in the following values:

- Compassion and Kindness
- Hope
- Connection and Belonging.

These values are vitally important and equally apply to the adults in school and to the wider school community. Becoming Trauma Perceptive encourages everyone think and act more boldly, through our values, policies and practice. This is vital in helping to understand how to effectively support children and young people in our schools and beyond, whilst enabling us to create safe places where all can flourish, become resilient and learn.

Schools must adopt TPP as whole school/setting approach to emotional wellbeing and understand behaviour. The headteacher/setting manager must be fully involved from the outset and it is their responsibility to ensure that the approach is embedded and monitored within their school/setting during and after the main delivery.

In Essex, over half of schools are engaged with TPP and demand remains high.

The responsibility of academy schools sits with the Department for Education (DfE) and Regional Schools Commissioners. ECC meets with them both regularly and challenge on issues such as exclusions, poor practice and practice improvements and will try to influence as much as possible. It also meets with all of the academy headteachers across Essex on a yearly basis.

There is also a Headteacher Inclusion roundtable meeting and feedback from this suggests that a lot of academies embrace inclusion however there are some schools who wish to be more inclusive but do not have the trained workforce in order to do so.

It is apparent that not all schools are embracing the help and support available to deal with pupils requiring mental health support and at times leave it too late which means the young person need help then has to be referred for more formal support and care. There is also the issue that some schools simply are not aware of the support and help and available or how to access it. There is a need for ECC to review how it communicates newly formed strategies and support into schools at more pace.

The DfE are rolling out a designated mental health lead in every school in Essex, with a second designated mental health need in secondary schools. It is the belief that schools should be as good at dealing with mental health as they are at safeguarding and there is a concern around the groups of young people who are not engaging with fixed provision that require mental health support.

Recommendation

The group recognises that schools play a significant role in supporting young people requiring mental health support and understand current resourcing issues. **It therefore recommends that the Secretary of State for Education makes a plan to and then provides further financial resource to enable them to provide more extra-curricular and enriching activities and appropriate support and resources, which may then prevent people presenting with more complex mental health issues.**

Recommendation

Currently, schools have to invest their Pupil Premium in order to run the Primary School Wellbeing Hubs Project in Tendring and Colchester. Given the early success identified and the benefit it provides to both the children and their families. **The group recommends that the ECC Cabinet Members for Adult Social Care and Health, Education Excellence, Lifelong Learning and Employability and Children's Services and Early Years, lobby the Secretary of State for Education to obtain funding to provide a Primary School Wellbeing Hub in every school in Essex.**

Recommendation

The group recognise and agree that the Primary School Wellbeing Hubs Project in Tendring has been a success, and that it is everyone's collective responsibility to support young people requiring mental health support. To further enhance the offer, the hub should be extending its services and offer support to the parent/carers of those experiencing poor mental health, and because of its success the Chief Executive of the North Essex and East Suffolk ICB is considering rolling this out in East Suffolk. **It therefore recommends that the Leader of Essex County Council, prepares a letter seeking support from all Essex Leaders and Chief Executive's, requesting that the three Essex (ICS)**

provide grant funding to enable the scheme running in Tendring to be rolled out countywide.

Recommendation

The group were reassured to hear that take up of the Council's Trauma Practice Perceptive Programme training is high, with over half of Essex schools engaged. This training helps schools to be able to positively help pupils who require mental health support. **The group recommends that all schools in Essex engage with the Council to complete this training as soon as practically possible. The group also asks that the Cabinet Member for Education Excellence, Lifelong Learning and Employability ensures that Essex County Council has sufficient resources in place to meet the demand.**

Recommendation

The group felt that the evidence provided to them, highlighted a lack of awareness of mental health support across some schools in Essex. **The group recommends that Essex County Council's Education Team provide clearer, more concise guidance to all schools in Essex detailing the support available and how it can be accessed.**

13. Communication and Marketing

ECC's 'always on' programme of children's mental health (CMH) activity has been mapped by the Communications and Marketing team and agreed by the Mental Health commissioning team. This programme includes key awareness days, milestones, periods of the year where we know we can for more focused/targeted activity (e.g. exams, winter).

This programme is part of the wider all-ages mental health programme of activity, which is focused around eight key audience groups identified as priorities (of which only a couple are relevant for the CMH work). The overarching OASIS plan guides this work and has been reviewed and fed into by the commissioning team.

They work with the commissioning team to develop content and seek their sign off on all messaging and assets before we share them.

ECC also takes the lead for CMH communications on behalf of the ten partner organisations that commission the SET CAMHS. This has previously included developing an overarching communications strategy that sets out its partnership approach and which partners fed into when the group originally came together.

As part of this lead role, Communication and Marketing (C&M) produce toolkits for partners and chairs bi-monthly meetings the toolkit content is discussed as a group for activity coming up over the following three months. Sets of messages are then produced and design assets for partners to use. Partners have the opportunity to feed into these toolkits and also the design brief for the assets. The toolkits are produced to ensure consistency of message across the county and to try and simplify access to information and advice for children and young people.

There is an agreed communications and marketing OASIS plan that is being worked to this year. Within this plan the strategic objectives are:

- To increase the number of CYP, parents and carers appropriately accessing the CAMHS across SET, in order to meet the NHS access target of 35%
- To increase web traffic to relevant local health and wellbeing websites across SET by encouraging CYP, parents and carers to find out about self-care and the early CMH support.

The campaign objectives are:

- To unify the promotion of children's mental health support across Southend, Essex and Thurrock, and implement a consistent 'always on' programme of proactive activity
- To signpost to self-care resources and early help services formally commissioned across the three areas to support children and young people's mental health
- To strengthen relationships with existing stakeholders who have direct contact with CYP to maximise outreach, promote the importance of self-care and support CYP to build resilience
- To simplify the pathway to information, resources and guidance around children's mental health support so that CYP and families can find appropriate help sooner and before reaching crisis point
- To take an integrated approach to activity, recognising the merits of both digital and offline tactics in meeting the specific needs of our audiences.

The communication and marketing timeline is set out as follows for the year ahead:

Timescale	Content
November - January	<ul style="list-style-type: none"> ▪ 'Always on' support messaging ▪ Winter, Christmas and New Year ▪ National Stress awareness day ▪ National grief awareness week ▪ Blue Monday
February – April	<ul style="list-style-type: none"> ▪ 'Always on' support messaging ▪ Children's MH week ▪ Time to talk day ▪ Self-injury awareness day ▪ Launch of new CAMHS contract
May - July	<ul style="list-style-type: none"> ▪ 'Always on' support messaging

	<ul style="list-style-type: none"> ▪ Exam period ▪ Start of summer holidays
August – October	<ul style="list-style-type: none"> ▪ 'Always on' support messaging ▪ Summer holidays and pressures ▪ Exam results ▪ World Suicide Prevention day ▪ World Mental Health day

Focussed campaign activity – education transitions

A need was identified for clear and consistent campaign activity to support young people receiving their exam results this year and planning their next steps, to ensure that young people, parents and carers can access support for mental health where appropriate.

This activity will happen in parallel to ongoing communications and marketing activity to support children, young people and parent's mental health which is aligned to the all-ages mental health transformation programme.

A targeted, paid social media campaign, working with a digital agency and deployed through TikTok and Instagram as key channels for reaching the relevant cohort of young people. The campaign launched on 19 August 2022 and ran for six weeks.

The team will be sharing positive messages around the exam result period, the options available to young people and how they can manage their mental health after receiving their results and as they plan their next steps.

The next 12 months

ECC has been commissioned to deliver the communications and marketing support for the partnership for a further 12 months. They are taking an active management approach, looking to refine and further development the partnership communications and marketing strategy.

A reflection and recommendation piece is underway ahead of agreeing a memorandum of understanding (MOU). In particular this will focus on increased engagement with the steering group from partners and a focus on data and insight which will allow us to develop comms that has more impact and reaches audiences, and ultimately will allow us to evaluate more effectively.

Once the MOU is signed a 12-month communications and marketing strategy will be developed.

Recommendation

The group recommends that ECC Communications Team, undertakes a review of its external Child and Adolescent Mental Health communications

plan, specifically around access to the Child and Adolescent Mental Health Service (CAMHS) and referral pathways and prepare an interim report for the Health Overview and Scrutiny Committee at its November 2022 meeting.

Recommendation

The group recognises it is important to promote the services that are currently available to young people in Essex such as dance, drama and sport clubs, youth clubs and the Duke of Edinburgh award. **The group recommends that the Communications and Marketing team continue its focus on promoting mental health support available to young people and prepare an interim report for the Health Overview and Scrutiny Committee at its November 2022 meeting.**

14. Essex Youth Service

The Essex Youth Service is part of the Essex County Council Education Directorate. The service is an informal education, personal and social development service which supports young people, predominantly aged 13 to 19.

The service has a very wide and diverse offer of direct delivery and supporting the local community to develop and grow sustainable local youth provisions. It engages in any area or activity where a youth work solution may be an advantage.

The service supports communities to develop and grow the Youth Work offer in Essex by helping them to:

- Adult volunteer training and Youth Work qualifications
- DBS (criminal record) checks
- free curriculum support and resources
- help with policies and procedures
- free use of youth service premises
- Health & safety guidance and DL safeguarding support.

There are currently 180 local partnerships in place in Essex.

The Young Essex Assembly (YEA) are an elected youth council and there are 75 YEA members, representing all districts across Essex. They deliver on the priorities identified by young people, create resources, run campaigns, and meet with adult elected members to influence decision making. They also represent Essex young at the UK Youth Parliament and the Youth Select Committee.

The Duke of Edinburgh Award (DofE) is the world's leading youth achievement award for year 9's and up to 25 years old. The Youth Service deliver the DofE Award in Essex on behalf of ECC's Chairman who holds the Operating Authority License.

The Award enables young people to build their peer networks, develop themselves mentally and physically, enhance teamwork, communication, leadership skills and experience an adventurous expedition like no other.

Field Officers provides bespoke support and training to schools and community groups to deliver the Award to their students. The service also delivers 'Open Access' DofE Award programmes from our Youth as well as DofE for All for hard-to-reach young people. So far, 87 schools & community groups deliver under the Essex DofE Licence and currently onboarding a further 8 new schools/colleges.

There are 12 Youth Strategy Group's (YSG's) which are made up of County, Borough and District Councillors and local community leaders. The groups have a countywide budget of £200,000 per year and are chaired by County Councillors. Many have young people as vice-chairs from Young Commissioners or YEA. The aim of the groups are to identify local and countywide priorities through consultations with young people and communities.

The Youth Service also offer mobile youth centre which are used by community groups to deliver youth work sessions in more rural areas, support community events, detached and outreach work.

They also deliver the Young Carers Service supporting pre-school – 19 years (up to 25 with SEND). This is personalised support for young carers and their families, developed with them around their needs which are identified through the assessment process. The Council has a statutory duty to undertake an assessment of needs for young carers and to ensure they are allocated a dedicated Key Worker. Other key under this umbrella includes referrals to counselling services, social care and universal youth provisions.

The Multi-Schools Council (MSC) was created in 2012 with focus to challenge negative perceptions towards children with SEND and mental health needs.

Currently there are 397 schools engaged with the MSC across Essex. Termly meetings are held where young people can engage in sessions and projects which include:

- Autism/ADHD
- Mental Health Awareness
- Global Warming.

Every 3 years key priorities are set based on what young people are raising as concerns. The current priorities are:

- Racism
- Keeping Active
- Animal cruelty.

The key priorities are driven by 87 Ambassadors who are driving change and help other services become more inclusive.

In September 2022 the MSC become part of the Essex Youth Service.

The Employability and Skills Team work with 16 - 18-year-olds who require help to progress into employment, education, or training.

Support includes:

- Careers advice
- CV/Job search
- Interview Skills
- Weekly Job bulletins
- Arrange and attend Careers Fairs and events.

The team also support year 11 Home Educated young people to explore their post 16 options.

The Participation Tracking team ensure ECC adhere to all statutory duties around:

- September Guarantee
- Activity Survey
- Stretch Target Period.

The team fully track all 16 - 18-year-olds throughout the year including college leavers, all NEET and EET situations and cross border referrals.

The Youth Work in Hospital project was commissioned by the Violence and Vulnerability Unit.

It is embedded in A&E departments to support victims of youth violence at “that reachable moment” where they are most likely to accept support. The team also work with young people who are presenting with mental health, emotional wellbeing, or other needs.

Targeted Youth Advisers lead the targeted youth team to deliver support services to young people through 1:1 and groupwork interventions. Support could include:

- Improved school attendance
- Transitions periods
- Understanding the causes and consequences of behaviour
- Emotional resilience and self-regulation
- Increase self-esteem and confidence
- Improve relationships with peers and adults
- Learning skills to overcome personal challenges
- Careers Information, advice and guidance

- Build aspirations and motivation to achieve
- Work placements.

Other targeted youth team work includes 'Good Man and Sisters in Strength' programme, 'Plan B 12-week Employability Traineeship', work experience, Future Ready and Your Future Matters.

The Youth Service staff are embedded in other services across the wider system to enhance the offer to young people and are aligned to:

- Youth Offending – ISS
- Leaving and Aftercare Teams
- Economic Growth
- Multi-Disciplinary Social Care Team
- Probation Service
- A&E department in Hospital
- College Campus.

The service is also part of a number of partnership boards including:

- SETDAB (Domestic Abuse Board)
- MACE (Missing and Child Exploitation)
- Social Care Resource Panels
- OPFCC Violence & Vulnerability Board
- Children's Partnership Board
- Community Safety Partnerships
- Anchor Project Board
- Out of Court Disposal Panel
- Regional Youth Work Unit
- National Youth Agency – Workforce development
- Public Health, Social Care, Police, Local Councils, Housing Providers, Businesses, Training Providers, Schools Colleges, Universities.

15. Acknowledgements

The Task and Finish Group wish to thank all those who provided oral and written evidence at meetings, as well as those who had expressed a willingness to attend sessions but were unable to do so due to other commitments.

16. Notes and Evidence

a. Scoping Document

Essex County Council Health Overview Policy & Scrutiny Committee (HOSC) and People and Families Policy and Scrutiny Committee (PAF)
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This form is a tool that should be compiled at the start of each inquiry to set out clearly the aims and objectives of the committee's involvement in a particular matter and will be completed at the end of the inquiry to confirm what has been achieved. It is an iterative form; and also acts as an audit trail for a review.

WHAT ARE WE LOOKING AT?

Review Topic	Mental Health Services for Young People
Type of Review	Joint Task and Finish Group

WHY ARE WE LOOKING AT THIS?

Rationale for the Review	<p>At its meeting of 10 May 2022, Full Council passed a motion to ask the relevant scrutiny committees to undertake a review of mental health services for young people.</p> <p>This matter falls under the remit of the Health Overview Policy and Scrutiny Committee (HOSC) and the People and Families Policy and Scrutiny Committee (PAF). This review will lead by HOSC, and a report will be provided back to Council by the end of 2022.</p> <p>This area links to <i>Everyone's Essex – Our Plan for Levelling Up the County: 2021 – 2025, including Children and Families and Promoting health, care, and wellbeing for all ages.</i></p>
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WHAT DO WE HOPE TO ACHIEVE?

Indicators of success	<p>What would you wish to see happen as a result of the review?</p> <p>Scrutiny to report back recommendations on how they feel this issue could be addressed.</p> <p>What value can scrutiny bring to the review?</p> <p>Scrutiny can draw on the experience, knowledge, and insight of councillors. Scrutiny can bring a fresh perspective to the issue and take time to consider the services available for young people needing mental health support.</p> <p>Why do you think the desired outcome is achievable?</p> <p>The review is being properly scoped and is supported by the Cabinet Member and key officers.</p>
HOW LONG IS IT GOING TO TAKE?	
Timescales	Review to be completed by and reported back to Full Council by the end of 2022
Provisional Timetable	July 2022 – December 2022
WHAT INFORMATION DO WE NEED?	
Terms of Reference	To review: Mental health services for young people
Key Lines of Enquiry	<p>Understanding the current situation</p> <ul style="list-style-type: none"> • To identify what services are currently available in Essex relating to mental health support for young people • Identify the services that are currently commissioned by Essex County Council • Whether there is anybody being left behind and what is being done to address this <p>Referral Pathways</p> <ul style="list-style-type: none"> • The referral pathways currently available and how service users navigate the system and whether there are any pinch points within these <p>Outcomes</p> <ul style="list-style-type: none"> • Identify how outcomes and successes are measured and whether there is any follow-up to these <p>Healthwatch Essex</p>

	<ul style="list-style-type: none"> Understand how Healthwatch Essex are engaging with Youth Ambassadors
What primary/new evidence is needed?	TBC
What secondary/ existing information is needed?	What have other councils done? Is there any good practice to draw on from elsewhere?
What briefings and site visits might be relevant?	TBC
Other work being undertaken/Relevant Corporate Links	TBC
What is inside the scope of the review?	North-East London NHS Foundation Trust (NELFT) Essex County Council Healthwatch Essex
What is outside the scope of the review?	TBC

WHO DO WE NEED TO CONTRIBUTE/CONSULT? (INITIAL MEETING TO ESTABLISH THIS)

Relevant Portfolio Holder(s) and other Member involvement	Cllr John Spence, Cabinet Member for Health and Adult Social Care Cllr Beverley Egan, Cabinet Member for Children Services and Early Years
Key Officers	Chris Martin, Director of Strategic Commissioning and Policy (C&F) Emily Oliver, Head of Strategic Commissioning and Policy
Partners and service users	North-East London NHS Foundation Trust (NELFT) Healthwatch Essex

WHAT RESOURCES DO WE NEED?

Lead Member and Membership	Cllr Carlo Guglielmi (Lead Member) Cllr Marie Goldman Cllr Lynette Bowers-Flint Cllr Dave Harris Cllr Paul Gadd Cllr Martin Foley Cllr Ray Gooding Cllr June Lumley
Co-optees/Other Invites (if any)	Cllr Carlie Mayes (Maldon District Council)
Lead Scrutiny Officer/Other	Richard Buttress, Democratic Services Manager
Expected Member commitment	To be concluded by the end of December 2022

WHAT ARE THE RISKS/CONSTRAINTS?	
Risk analysis (site visits etc.)	Risk management form to be completed if any site visits are included as part of the review
Possible constraints	To be determined, if any
WHAT WILL BE REQUIRED FROM STAKEHOLDERS?	
Internal stakeholders	Their time to attend Task and Finish Group meetings Information and advice Communications for any potential press release following the review
External stakeholders	Potential time commitment of co-optee Their time to attend Task and Finish Group evidence sessions
WHO ARE WE DIRECTING ANY RECOMMENDATIONS AND ACTIONS TO?	
Recommendations to (key decision makers):	This to be compiled during, and following the review
Reporting arrangements	Task and Finish Group final report to be presented to Full Council by the end of December 2022
Follow-up arrangements	Outcomes to also be monitored by the Scrutiny Board.
ADDITIONAL INFORMATION/NOTES	
Meeting dates (provisional)	TBC

LESSONS LEARNT/SCRUTINY EVALUATION

To be completed in an end of review Workshop* (align to findings of Scrutiny Survey to be attached as an annex). This form should be used in the evaluation of the process adopted by the Scrutiny review Committee/Task and Finish Group and will be used to inform future Scrutiny Reviews.

**Evaluation workshop at the end of the review will typically involve Committee Chairman/T&F chairman, other T&F group members, scrutiny officer, topic proposer and key stakeholders (if applicable)*

DATE OF REVIEW EVALUATION:	
1. Organisation & Planning	
What could have gone better?	Recommendations for future reviews
What were the strengths and weaknesses of the approach used? Proposed and actual start/completion dates: Was the time allocated adequate?	
2. Resourcing	
What could have gone better?	Recommendations for future reviews
Was officer time/resource adequate for this review?	

3. Evidence sessions/site visits	
What could have gone better?	Recommendations for future reviews

4. Stakeholder and Communications	
What could have gone better?	Recommendations for future reviews

5. Report and Recommendations	
What could have gone better?	Recommendations for future reviews
Was the purpose of the review achieved? Has there/is there likely to be any influence on service delivery as a consequence of the review?	

b. Meeting Notes

Notes of the meeting of the Mental Health Services for Young People joint Task and Finish Group, held virtually on Wednesday 17 August 2022 at 3:00pm

Present

Cllr Carlo Guglielmi (Lead Member)
 Cllr Lynette Bowers-Flint
 Cllr Martin Foley
 Cllr Marie Goldman
 Cllr Ray Gooding
 Cllr Dave Harris
 Cllr Carlie Mayes
 Chris Martin, Director, Strategic Commissioning and Policy (C&F)
 Pete Webster, Commissioning Manager, Strategic Commissioning and Policy C&F
 Richard Buttress, Democratic Services Manager
 Freddey Ayres, Democratic Services Officer

Initial Meeting

- The Chairman welcomed members to the meeting and thanked them for putting themselves forward to be a part of this review
- It was explained that this joint Task and Finish Group came as a result of a motion that was carried at May's Full Council meeting
- The group were advised that the HOSC Chairman had previously met with Chris Martin and Emily Oliver to discuss this and has asked the group initially to identify the services currently available and whether there are any gaps

- The group received an outline of what a Task and Finish Group is and its remit:
 - Committees may appoint sub-committees known as Task and Finish Group to which political proportionality need not be applied
 - No member of Cabinet shall be appointed as a member of a Task and Finish Group
 - A decision on whether a policy or scrutiny review will be carried out by the Committee, or a Task and Finish Group will be made as part of the work on the scoping document
 - *The Committee may make a decision about the make-up of the group or volunteers sought subsequently.*
 - *Reports of Task and Finish Groups are developed by the Scrutiny Officer in consultation with its Chairman and approved by the full group.*
 - *Where it is not possible to reach a consensus, attempts will be made to reflect minority views within the report but there is no provision for minority reports.*
 - *Task and Finish Group reports shall be reviewed by the commissioning committee which will decide whether to ratify the findings and/or recommendations.*

- The Chairman set out the groups Terms of Reference and explained how the meetings will be structured:
 - 31 August: Understand the current situation and referral pathways
 - 7 September: Outcomes
 - 16 September: Healthwatch Essex
 - 20 September: Informal meeting with relevant Cabinet Members
 - 27 September: Formal meeting with relevant Cabinet Members

- The group discussed how they would like to understand whether service users are aware of what is available to them
- The outcomes of this Task and Finish Group should be helpful and not necessarily promotional
- The group wish to understand what is defined as children's mental health and what the difference is between mental health conditions and learning disabilities
- A small proportion of young people in Essex use mental health services, there is a large group that need wider wellbeing support
- There has been a post-covid impact which manifests for children in many ways
- A child who is six years old has spent a third of their life in lockdown
- The group wished to amplify the good services that current exist such as dance, drama and sports clubs, Duke of Edinburgh etc, youth clubs)
- There is a national rollout to have mental health practitioners in schools across the country – currently being piloted in Harlow and Colchester.

Notes of the meeting of the Mental Health Services for Young People joint Task and Finish Group, held virtually on Wednesday 31 August 2022 at 11:00am

Present

Cllr Carlo Guglielmi (Lead Member)

Cllr Ray Gooding

Cllr Dave Harris

Cllr Martin Foley
Cllr Paul Gadd
Cllr Lynette Bowers-Flint
Cllr Carlie Mayes
Chris Martin, Director, Strategic Commissioning and Policy (C&F)
Emily Oliver, Head of Strategic Commissioning and Policy (C&F)
Pete Webster, Commissioning Manager, Strategic Commissioning and Policy (C&F)
Richard Buttress, Democratic Services Manager

Understanding the current situation and referral pathways

- There is a single point of access to refer into the Child and Adolescent Mental Health Service (CAMHS) which is provided by the North East London NHS Foundation Trust (NELFT)
- One number to access this countywide service which includes a triaging mechanism, clinical presence and prioritisation process
- Young people can self-refer to CAMHS and do not need to contact their GP, parent, teacher etc
- Risk around immediate and potential harm and is aligned to resource available. People are waiting longer than ideal to receive support
- Resource is a pressure and service is in a post pandemic situation and experiencing an increase in demand
- ECC are communications lead for CAMHS service. There is a communications programme which is shared with all partners
- The new preventative model for early help is provided by the Health Care Resourcing Group (HCRG). It is provided by the NHS via a commissioning collaborative forum (CCF) which is made up of three local authorities and three Integrated Care Boards (ICBs), to which ECC makes a financial contribution towards
- Services are linked into MIND, EWMHS, Barnardos and schools. National rollout of specialist mental health teams in schools impacted by the pandemic and an evaluation has not been completed yet but it is understood to be going reasonably well
- Training programme must be completed before placements are made. ECC are involved in terms of local system commissioners in Essex but the training is not directly commissioned by ECC
- The aim is to see people within 12 weeks however, people are prioritised according to clinical need. Information is provided to young people on what they can expect at the first appointment. There is also support for parents as well.
- People are signposted, where appropriate, to other services such as SilverCloud, Kooth and MindEd
- ECC officers chair the Emotional Wellbeing Group every half-term to connect mental health services and education, including the CCF. Schools receive a lot of information, so it is important this is done in a joined-up way.
- It is too early to see if any changes have been noticed following the creation of ICBs in July 2022
- The group felt there is a need to develop a way to make sure problems do not occur in the first place

- Resilience needs to be built through schools – it is not just about signposting but looking at how to prevent problems in the first place
- ECC provide EWMHS, which is countywide, and also includes voluntary groups. NHS colleagues fund third sector organisations
- There is a balance of where people signposted to ECC provided services and NELFT provided services
- An increase in resource would help but it is difficult to recruit people with the right capabilities. This is a health and care system wide pressure
- Health and social care system has been undervalued in the past ten years which are now bringing pressures around recruitment and retention
- Needs to be effective timely support for people in crisis and that more engagement is needed to prevent situations escalating.

Notes of the meeting of the Mental Health Services for Young People joint Task and Finish Group, held virtually on Wednesday 7 September 2022 at 11:00am

Present

Cllr Carlo Guglielmi (Lead Member)
 Cllr Dave Harris
 Cllr June Lumley
 Cllr Marie Goldman
 Cllr Carlie Mayes
 Cllr Martin Foley
 Cllr Ray Gooding
 Sharon Westfield-de-Cortez, Healthwatch Essex
 Renee Robey, Healthwatch Essex
 Richard Buttress, Democratic Services Manager

Healthwatch Essex – Young Mental Health Ambassadors

- Healthwatch Essex collect lived experiences from service users across the County
- They have seen a significant rise in mental health related calls
- Run various ambassador programmes including one for mental health
- The mental health ambassador programme started 2 – 3 years ago as a result of the Emotional Wellbeing and Mental Health Service (EWMHS) undergoing a re-procurement process
- The group has been commissioned for a further 2 years due to its success and meets on a monthly basis
- There are currently 22 ambassadors in the group ranging in age from 12 – 24
- The majority of ambassadors have lived experience of anxiety, depression, OCD and eating disorders
- They aim to feedback on experiences and shared what could be improved for other people
- NHS, researchers and voluntary groups also join these meetings
- The group supported and co-designed a survey on the impact of Covid on mental health and received 100+ responses

- Identified that young people were worried about coming out of Covid restrictions and felt pressure from family and friends to socialise when they didn't necessarily want to
- They are planning to run a similar project on body image later this year
- Reports from the group are sent to staff networks, CAMHS commissioners, MIND, ECC, ICS's, EPUT and NELFT
- There is no one single place for a person to refer themselves to or be referred to. It can be overwhelming having so many options
- There are currently lengthy wait times after referral and no offer of support in the interim
- Healthwatch inform partners and agencies that they are there and are able to support people with health-related needs
- Knowledge of Healthwatch's existence could be better and attend events and meetings to promote its work, but they have not got funding for a countywide campaign
- Healthwatch currently has 18 employees with four different team – Communications, Information and Guidance, Engagement Team, Research Team
- Improvements around access to information for referral is needed, and respecting people's privacy around not wanting to tell family and friends
- Feedback suggested that the transition from children's mental health services to adult's is daunting which caused more worry
- There is a significant number of children and young people who stop attending school due to mental health issues
- Children who do not speak English as a first language who need mental health support is a barrier to support
- Schools have a huge role to play and are under resources. They need more resource to provide the extracurricular and enriching activities to reduce/prevent the number of people who present with mental health issues
- People said they did not find it comfortable accessing mental health support in schools due to location of the office
- The group enquired as to whether there are schools who willing to get more help for mental health support
- Important to differentiate between SEND support and mental health support so as not to duplicate any support offered
- Healthwatch Essex reported they receive a lot of calls relating to self-harm incidents
- New initiatives for young people are normally fully subscribed very quickly
- It is important to remember that the person has a choice and wants to remain in control and that it does not feel like support is being done to them.
- The Group suggested that targeted funding is aimed at youth clubs

Notes of the meeting of the Mental Health Services for Young People joint Task and Finish Group, held virtually on Tuesday 20 September 2022 at 9:00am

Present

Cllr Carlo Guglielmi (Lead Member)
 Cllr Martin Foley
 Cllr Dave Harris
 Cllr Paul Gadd

Cllr Marie Goldman
Cllr June Lumley
Cllr Ray Gooding
Cllr Lynette Bowers-Flint
Ian Davidson, Chief Executive, Tendring District Council
Anastasia Simpson, Assistant Director, Partnerships, Tendring District Council
Rebecca Morton, Executive Projects Officer, Education, Tendring District Council
Cllr Lynda McWilliams, Portfolio Holder for Partnerships, Tendring District Council
Richard Buttress, Democratic Services Manager

Primary School Wellbeing Hubs project

- There is a rise in mental health issues for young people in Tendring and wider Essex
- Tendring has the second highest suicide rate in the country, with Colchester third and Harlow fifth
- As well as mental health support, consideration also needs to be given to the wellbeing of people
- Tendring District Council have changed its approach and they now have 'Community Leadership' instead of corporate plans
- There are a number of after school activities that help young people and their families
- The 'I am ME' project has been running since 2017
- Primary Schools Wellbeing Hubs project is an afterschool provision that runs on a 6-week cycle with 1-hour sessions
- The sessions are themed around play, art, construction and science and are supported by trained school staff
- The aim is to build resilience and self-esteem in the children and to remove barriers around mental health to enable learning, and helps develop a culture in schools where talking about feelings is the norm
- Evaluation has shown early signs of improvement for the children
- Parent information sessions are also available
- Tendring District Council submitted an application and were awarded funding by the Alliance Investment Fund to rollout the hubs to up to 21 primary schools in North East Essex, and all 21 places were filled by schools across Colchester and Tendring
- Essex University is the evaluation partner, and their final report is due in July 2023
- Mid-July 2022 was the half-way point and evaluation showed:
 - 643 participated in a wellbeing hub
 - Found there was an increase in levels of resilience, self-esteem and decreased anxiety
 - Over half the pupils found the I am ME sessions very helpful
 - The hubs are very low-key intervention in a structured way
 - Pupils into the hubs are referred by workers in the school with the support of parents/carers
 - This pilot has empowered districts to take on enhancing the offer of the mental health support that is already in place

- Public services are collectively responsible for supporting people with mental health issues. It requires a whole system approach to achieve results
- Grant funding is not a sustainable way of providing these services
- A wider rollout of this project would need to be on a district-by-district basis rather than all at once
- Schools are investing its pupil premium to run these hubs as they are classified as after school activities, and this would need to continue in order for these hubs to run
- A whole school approach is taken to encourage pupils to talk about feelings. Particular children of need are identified but the ethos of the schools is there for everyone
- Staffing and resource for the hubs is kept to a minimum in order to keep costs low
- The pilot at Great Bentley primary school would have happened regardless of funding available due to the passion of the headteacher, but the other 21 schools who participated are self-funding at the moment
- School budgets are stretched, and some are having to cancel school trips in order to keep running financially
- The health service have offered further funding once the evaluation has been completed in July 2023, but more funding would need to come from central Government
- Community budgets have been used previously to fund such schemes
- Tendring District Council are the only local council who have a Family Solutions service provided by them
- Organisations can be protective of its own resource and these barriers need breaking down
- An injection of investment is need upfront to show that it will provide a long-term benefit to the wider system
- The pilot has proved that it is not just about deprivation, as Great Bentley is not a deprived area
- Funding should not just be aimed at deprived areas; it should be directed to those children who need support.

Notes of the meeting of the Mental Health Services for Young People joint Task and Finish Group, held virtually on Thursday 29 September 2022 at 9:15am

Present

Cllr Carlo Guglielmi (Lead Member)

Cllr Dave Harris

Cllr Lynette Bowers-Flint

Cllr Marie Goldman

Cllr Paul Gadd

Cllr June Lumley

Cllr Ray Gooding

Clare Kershaw, Director for Education

Andy Allsopp, Head of Profession, Communications and Marketing

Julie Auger, Youth Service Manager

Richard Buttress, Democratic Services Manager

Mental health and education at ECC

- Working on early intervention with young people and schools, trying to regulate behaviours to manage stress and anxiety levels to prevent more complex support being required
- A number of years ago, ECC led a review of teenage suicide and resulted in a multi-agency conference to understand why this was happening
- Outcomes of the review were presented the Safeguarding Board, Health and Wellbeing Board and Children and Young People Strategic Board
- There is a map of services available to support meeting young people's needs which helped understand all of the services out there as this was not clear
- Have undertaken work with professionals on how to identify mental health issues in young people as without appropriate support, can lead to disruptive behaviour in schools
- 'Let's Talk' guidance has been produced
- There has been an increase in anxiety and eating disorders since the Covid-19 pandemic
- Guidance has been produced on suicide prevention for schools
- A whole school Trauma Perceptive Practice (TPP) programme has been created to help schools deal with pupils requiring mental health support
- How schools respond to a heightened anxiety episode is vitally important
- It takes time to train all school in TPP – over half of schools in Essex are engaged. Demand is high but ECC cannot keep up with the demand from a resource perspective
- ECC works with all schools, including academies
- With Academies, responsibility sits with the Department for Transport (DfE) and school's commissioner. ECC meets with them regularly and challenges on issues such as exclusions and will still try to address poor practice
- ECC has a leadership role across Essex and practice improvements are reported to the DfE
- ECC has an annual conversation with academy heads across Essex
- There is a headteacher inclusion roundtable meeting. A lot of academies embrace inclusion, some schools want to be inclusive but do not have the trained workforce to do so
- If Academy headteachers wish to work with ECC but their Trust is not so keen, it is for the headteachers to take up directly with the Trust – ECC have no control
- Not all schools are embracing the support and help available that ECC offer
- Sometimes schools leave it too late to ask for help and normally engage with ECC at the point a child is about to be excluded or moved
- Schools may not be able to access the support it needs to help pupils due to internal and external processes, bureaucracy
- ECC is holding an Educational and Wellbeing conference this school year
- ECC needs to review how it gets newly formed strategies into schools more quickly
- DfE are rolling out a mental health lead in every school in Essex, and the taskforce has designated a secondary lead in secondary schools
- Schools should be as good at dealing with mental health as they are at safeguarding
- 40% of schools have a named designated mental health support team
- There is a need for fully staffed mental health teams

- There is a concern around the groups of young people that are not engaging with fixed provision that require mental health support.

Communications and marketing at ECC

- ECC's 'Always On' programme of children mental health activity has been mapped and agreed by the communications team and the mental health commissioning team
- This includes key awareness days, milestones, particular periods of the year (exams, winter)
- There is a wider all ages mental health programme of activity which focusses on eight key audience groups identified as priorities
- ECC takes the lead for children mental health communications on behalf of 10 partners organisations that commission SET CAMHS
- Sometimes undertake testing with desired audience before being rolled out across the channels
- There is a comms and marketing toolkit for partners which ensures consistency around content to simplify access to information and advice for young people
- The strategic objectives for this year are:
 - Increase the number of young people, parents and carers appropriately accessing the CAMHS across Southend, Essex and Thurrock (SET CAMHS) in order to meet NHS access target of 35%
 - Increase web traffic to relevant local health and wellbeing websites across Southend, Essex and Thurrock to encourage people to find out about self-care and the early mental health support
- The campaign objectives for this year are:
 - To unify the promotion of children's mental health support across Southend, Essex and Thurrock, and implement a consistent 'always on' programme of proactive activity
 - To signpost to self-care resources and early help services formally commissioned across the three areas to support children and young people's mental health
 - To strengthen relationships with existing stakeholders who have direct contact with CYP to maximise outreach, promote the importance of self-care and support CYP to build resilience
 - To simplify the pathway to information, resources and guidance around children's mental health support so that CYP and families can find appropriate help sooner and before reaching crisis point
 - To take an integrated approach to activity, recognising the merits of both digital and offline tactics in meeting the specific needs of our audiences
- The planned timeline for this year are:

Timeline

Toolkits	Timescale	Content
1	November - January	<ul style="list-style-type: none"> ○ 'Always on' support messaging ○ Winter, Christmas and New Year ○ National Stress awareness day ○ National grief awareness week ○ Blue Monday
2	February – April	<ul style="list-style-type: none"> ○ 'Always on' support messaging ○ Children's MH week ○ Time to talk day ○ Self-injury awareness day ○ Launch of new CAMHS contract
3	May - July	<ul style="list-style-type: none"> ○ 'Always on' support messaging ○ Exam period ○ Start of summer holidays
4	August – October	<ul style="list-style-type: none"> ○ 'Always on' support messaging ○ Summer holidays and pressures ○ Exam results ○ World Suicide Prevention day ○ World Mental Health day

- There has been a particular focus recently on suicide prevention across all ages
- There is a £12,000 budget this year to boost social media activity
- Focussed campaigns activity on education transitions
- ECC has been commissioned to deliver the communications and marketing support for the partnership for a further 12 months.
- It can be difficult to engage with young people and channel choice work is important to this
- Linking outputs to outcomes is vital.

Essex Youth Service

- Essex Youth Service is part of the Essex County Council Education Directorate
- The service is an informal education, personal and social development service which supports young people, predominantly aged 13 to 19
- The service has a very wide and diverse offer of direct delivery and supporting the local community to develop and grow sustainable local youth provision
- Engage in any area or activity where a youth work solution may be an advantage
- Youth voice and participation via the Young Essex Assembly (YEA)
- Deliver a young carers service and complete an average of 750 young carer assessments each year, ensuring young carers have a dedicated key worker
- Working towards national young carers in schools award
- Deliver the Duke of Edinburgh Award in Essex – ambition is to have every school in Essex offer Duke of Edinburgh experience
- There are 12 Youth Strategy Groups:

- Countywide budget of £200K per year
- Chaired by County councillors
- Many have young people as vice chairs from Young Commissioners or YEA
- Identify local and County-wide priorities through consultations with young people & communities
- Identify existing provision through community mapping and stakeholder events
- Commission provision to meet local needs
- Mobile Youth Centres are used by community groups to deliver youth work sessions in more rural areas
- Multi-schools council became part of the Essex Youth Service in September 2022 with focus to challenge negative perceptions towards children with SEND and mental health needs
- The Employability and Skills Team work with 16 -18-year-olds who require help to progress into employment, education, or training.
- Youth Work in Hospital project commissioned by the Violence and Vulnerability Unit and is embedded in A&E departments to support victims of youth violence
- Targeted Youth Advisers lead the targeted youth team to deliver support services to young people through 1:1 and groupwork interventions
- 5-week mentoring programmes for young people living in Greater Essex, who are at risk of entering into abusive relationships, are victims of domestic violence or have witnessed domestic abuse within the home
- Supporting young people aged between 15 and 24 years to access work experience placements
- Future Ready is an emotional well-being and NEET prevention programme delivered within school or college settings
- Offer bespoke targeted projects and support to individuals or groups who may struggle to engage with formal learning due to emotional issues, disruptive behaviors or engaging in low levels of crime.