

HOSC/17/17**Committee** Health Overview and Scrutiny**Date** 20 March 2017

**MENTAL HEALTH SERVICES FOR CHILDREN AND YOUNG PEOPLE IN ESSEX
- TASK AND FINISH GROUP FINAL REPORT**

Report by Cllr Andy Wood, Lead Member:

Recommendation:

The Committee is asked to:

- (i) receive the Final Report of the Task and Finish Group that looked at Mental Health Services for Children and Young People in Essex;
- (ii) consider timing and arrangements for reviewing the implementation of the recommendations;
- (iii) consider appropriate recipients of the report and publicity arrangements;

Background:

The Committee established a Task and Finish Group to look at mental health issues for children and young people in Essex. The Group's focus has been on the perception, awareness, signposting and accessibility to services aimed at children of school age. In addition the Group were interested to see how the wider system worked and to explore some of the issues around the level of co-ordination and joined-up working between agencies.

Final Report

A summary report and a full report of the Group have been produced. Both documents are attached as Appendix 1. The short summary report will be the main public interfacing document (when a press release is issued) with a link within the summary report to the full report.

There is an Executive Summary and Conclusions (pages 4-5) and a list of all the Recommendations on pages 6-9 in the main report which can give a quicker overview of the full report's findings and conclusions.

The full report details the approach taken towards the review, work undertaken and the evidence obtained. The Group spoke to North East London Foundation Trust

(NELFT), Healthwatch Essex, Head Teachers, school pastoral staff, Essex County Council commissioning officers and some community and voluntary bodies.

In addition, members of the Group individually (or in pairs) visited local schools and two youth projects. The Group also considered written evidence requested and received from some of the contributors.

Service Transformation

The Group report on the challenges facing NELFT in operating a new contract to provide emotional wellbeing and mental health services that focus on more low intensity early interventions through a single point of access. Higher than anticipated referrals and on-going caseload has made this transformation more difficult.

The Group are encouraged by a reduction in waiting times recently but a longer period of time is needed to identify if there is a consistent downward trend in waiting times. In particular, the Group have recommended that Essex commissioners should be aspiring to an Essex waiting time (that is significantly lower than the NICE guideline and the current contractual target) so that Essex can be a 'national lead' and best in class.

The Group stress that reconfigurations can take time to 'bed-in' and it is important to remember that NELFT are less than 18 months into a five year transformation plan. NELFT remain in a period of substantial change and transformation and the Group have been impressed by their commitment and drive to carry out this change.

Members were encouraged by many initiatives and practices which were in place in schools, or being tried, to engender an environment of emotional wellbeing. At the moment, the community and voluntary sector believe there is an unharnessed opportunity for them to supplement the services being provided by NELFT for schools.

The Group have concluded that they would like to see closer working with the community and voluntary sector to assist even greater focus on prevention, early intervention and community resilience and have made specific recommendations on this.

The Group makes nine recommendations:

RECOMMENDATIONS TO COLLABORATIVE COMMISSIONING FORUM

Recommendation 1 (Page 13 of the full report): *Essex County Council and local health commissioners should develop a strong pan-Essex all-age brand for holistic mental health services that pulls together all agencies.*

Recommendation 2 (Page 19 of the full report): *There should be a clear aspiration for a defined, acceptable 'Essex waiting time' for access to the EWMHS service that is considerably less than the current national and*

contractual standards (i.e. considerably less than 12 weeks from referral to assessment and 18 weeks from referral to first treatment).

Recommendation 3 (Page 22 of the full report): *That the commissioners explore the opportunities within the voluntary sector for further early intervention initiatives to build community resilience.*

RECOMMENDATIONS TO NORTH EAST LONDON FOUNDATION TRUST

Recommendation 4 (Page 19 of the full report): *(i) The provider of the Emotional Wellbeing and Mental Health Service should develop and demonstrate a clear strategy to further reduce waiting times for assessment and first treatment under the EWMHS service; and (ii) indicate the extent of any potential for collaborative working with other agencies to assist this.*

Recommendation 5 (Page 19 of the full report):

- (a) *That regular performance reporting to commissioners should be expanded to include:*
 - (i) *A breakdown of the concentration of referrals from different source (particularly highlighting differences between schools);*
 - (ii) *How long those clients who do have to wait beyond the NICE guideline of 18 weeks actually do wait for first treatment?*
 - (iii) *The numbers exceeding the 'acceptable Essex waiting time' (see recommendation x above); and*
 - (iv) *A qualitative analysis of the outcomes achieved from early intervention illustrating the patient focussed benefits;*
- (b) *That key performance data be publicly available ;*
- (c) *That the Essex HOSC should receive performance reports twice yearly (or as otherwise directed).*

Recommendation 6 (Page 22 of the full report): *The provider of the EWMHS service should demonstrate a strategy and plan for closer collaborative working with the voluntary sector, including linkages for re-signposting and cross referrals that can be located in community settings (including schools) thereby relieving some of the pressures on the referral process.*

Recommendation 7 (Page 17 of the full report): *That NELFT should develop clearer communication of service thresholds and provision not only with service users but also with partnership organisations.*

RECOMMENDATIONS TO ESSEX COUNTY COUNCIL

Recommendation 8 (Page 21 of the full report): *The continued shortage in Essex of specialist mental health clinicians should be emphasised to the Cabinet Member for Economic Growth, Infrastructure and Partnerships and the Essex Employment and Skills Board, with a view to it being included in the wider Essex strategy addressing skills shortages across the county.*

Recommendation 9 (Page 24 of the full report): *The Cabinet Member for Education and Lifelong Learning should: (i) ensure that all Essex Schools understand and develop the best practice established by some schools using early intervention, access to pastoral help, peer mentoring, liaison with outside agencies, whole school training and supportive ethos; (ii) Arrange a summit or more locality based mini- summits on mental health for all Essex Schools to share this and other learning and best practice (this could be an extension of the meetings with Head Teachers that NELFT has held in some areas recently) and (iii) a school mental health network be established (again this could be locality based) for school mental health champions to share information and experience on a regular basis.*