Review of Child and Adolescent Mental Health and Emotional Wellbeing Services in Southwark
September 2018

Executive Summary
1. Executive Summary

This review was jointly commissioned by Southwark Clinical Commissioning Group (CCG) and Southwark Council, with involvement from a wide range of stakeholders including children, young people, parents and carers.

We would like to thank all those who gave their time, documents, and thoughts to this review, and assurance is given that attempt has been made to take account of all the information and views offered.

There has been a sustained increase in presentations of mental-ill health amongst children and young people across England; whilst across South East London, the level of mental health needs of children and young people in Southwark are consistently amongst the highest.

The prevalence rate currently in use, i.e. 1 in 10 children and young people having a diagnosable mental health condition, is based on an Office for National Statistics (ONS) survey carried out in 2004. The ONS will be carrying out a further survey later in 2018. Given the reported increase nationally in children and young people presenting with emotional/mental health difficulties, it is likely that the prevalence figure is higher than the one currently being used, and which is being used by the NHS England (NHSE) Transformation programme aimed at increasing access to services for children and young people with a diagnosable condition.

Whilst the review found evidence of numerous good and excellent support services across Southwark, we also identified significant challenges. The evidence suggests that local services for children and young people are currently stretched. Central government grants to the local authority that have helped support Child and Adolescent Mental Health Services (CAMHS) funding in the past have now ceased and increases in Transformation funding through NHS England to the CCG have significant targets of their own attached.

The access target set by NHSE in the 2016 Five Year Forward View for Mental Health is that 35% of children and young people with a diagnosable mental health condition should be able to access NHS services by 2020/21 (against the 2015 baseline). This target demonstrates the continuing lack of parity between mental and physical health. There are data capture issues. For example the figures only capture children and young people who are seen and treated directly; help provided indirectly through other professionals and parents/carers is not captured, and this means that the percentage may be understated in terms of actual activity. Southwark is currently at 24%, better than most Southeast London boroughs but a long way from where we would wish to be.

In comparison with other neighbouring boroughs, Southwark funding for CAMHS is generous and specialist services in Southwark are seen to be achieving correspondingly more; they have lower waiting times and more appointments offered, and are strongly valued by those who access them.

Funding comparison with other areas is difficult because the only published spend relates to CAMHS, not to other services. Benchmarking against the three other boroughs served by SLaM shows Southwark having the highest spend per head of prevalent population, the second lowest cost per appointment, (more appointments being offered) and considerably more appointments offered per whole-time equivalent staff (see Appendix L).

There is evidence that access to local inpatient beds for children and young people is improving. The New Models of Care programme being managed by the South London
Partnership (see Appendix F) is demonstrating success in reducing the need for children and young people to be placed a long way from their homes: the below graph shows bed days for South London children and young people placed outside the South London Partnership (SLaM, Oxleas NHS Foundation Trust and St Georges Mental Health NHS Trust) - the steady decline indicates success both in preventing admission and in placing children locally when they are admitted.

Both Southwark CCG and Southwark Council are committed to improving services and outcomes for children and young people, working with key local partners including South London and Maudsley NHS Foundation Trust (SLAM), our primary provider of CAMHS services, and with our local voluntary and community sector, youth justice, early years and schools.

In too many areas of England, services are locked into a “vicious circle” where increasing demand for high-acuity, specialist help leaves fewer and fewer resources available to help children and young people not yet at this level of need, building up greater demand for the future.

We recognise that we will need to work differently. This will mean investing in universal and targeted services that help promote mental wellbeing and prevent mental-ill health, in a way which improves support for children and young people whilst also relieving growing demand and pressures on our specialist services.

Engagement with families (Appendix B) indicated that a holistic/family approach to provision is wanted:

“Organisations should work more closely together to provide a more holistic service for children and young people and meet all of their needs, including considering a family approach where it is needed/relevant to the child’s needs. Feedback indicated that there is a lack of holistic support for CYP and their parents/carers – services are not connected in any way and don’t work together to support the needs of the young person “
Specialist CAMHS services will always be an important part of the support and care we offer. However, working with colleagues and communities across Southwark, this review has also sought to identify new opportunities to promote overall emotional wellbeing. These involve changing the way our services and systems work with each other and those they support.

There is a need to strengthen early intervention (“early” meaning prevention of escalation as well as primary prevention) and increase efficiency across the system to ensure that maximum benefit is derived from investment made.

All parts of the system-universal provision funded by the council and schools, targeted provision for vulnerable groups such as Looked After Children, young offenders, or children with Special Educational Needs and Disability (SEND)-are linked and any change in financial support to one part of the system affects the whole. Budget reductions in universal services can be expected to impact on specialist ones.

In the long term, the preferred service design, taking into account what was said by all stakeholders during this review, would be a strong locality-based service offer, inclusive of both SLaM CAMHS, the voluntary sector, social care Early Help and children’s community health services and aligned with adult mental health services and primary care as well as schools. As the Bridges to Health and Wellbeing population-based commissioning programme (Appendix M) progresses, this needs to be held as the desired goal. It is recognised that pathways and provision are currently too complex to allow for this and CAMHS staffing insufficient for it to be able to operate in this way. It is suggested however that a road map be created with steps along the way to achieving this, using Bridges to Health and Wellbeing as the vehicle.

The first steps will be to adopt a common language and a common conceptual framework for children and young people’s emotional wellbeing and mental health in Southwark. It is suggested that I-thrive (Appendix G) could provide this. There is no suggestion that this would need to be adopted as a model for SLaM CAMHS structure or mode of operation, it could simply be used as a means of giving all stakeholders a common language and framework within which provision can be located in a non-tiered way.

To achieve this, we are recommending that:

1. **The Council and CCG continue to work together to take a Southwark-wide approach to funding and developing children and young people’s services**, with a focus on joining-up existing support, removing areas of duplication, and using opportunities to invest jointly in new preventative services that promote emotional wellbeing for all our children and young people and which provide intervention to avoid escalation into crisis necessitating hospital attendance or admission. A locality based integrated community service offer would be the desired long-term goal.

2. **With the ongoing support of SLAM, identified opportunities to improve the efficiency of our acute and specialist services** (including reducing rates of Did Not Attends – DNAs – and user cancellations and improving the current workforce mix) are used to deliver greater access to help now, and to mitigate projected increases in demand in the future.

3. **Transformation programmes are reviewed in line with the recommendations of this review**, to ensure that all available funding is being directed towards those activities which children, young people, families, carers and frontline professionals are telling us
will have the greatest impact, with a particular focus on universal and targeted services for those who do not currently reach the thresholds for accessing help.

**Our recommended approach is to consider the future development of mental health and wellbeing services in Southwark in 3 related domains:**

A. **System transformation**: where significant system-wide change is required to improve access, simplify and streamline pathways for young people, parents and professionals, and improve the transition to adult services

B. **Service improvement**: where there is scope for improvements to existing services for specific client groups.

C. **Cross-cutting organisational change**: issues relating in particular to workforce, and IT that affect a wide range of services.

Together with recommendations on investment:

- Current spend needs to be maintained to cope with current need

- Future funding, unless ring-fenced for a specific purpose, should be targeted at prevention and early intervention as opposed to specialist services.

- Open-access online and face-to-face non-specialist services provided by qualified counsellors.

- Behaviour support for children and young people with neuro-developmental disability (including learning/intellectual disability) and challenging behaviour is an area requiring investment- families struggle to cope as young people become older and more challenging and help which is provided early to enable parents/carers to better manage challenging behaviour can help avoid family breakdown and assist transition to adulthood. Such support programmes are normally provided by a team including nurses, therapists and psychologists. This group of children are, if their families become unable to cope any longer, most likely to require high-cost care packages.

The process of this review has already effected change; in no part of the system are we starting from scratch.

However, after a significant amount of engagement and analysis work (as reflected in the appendices to this report) there remain challenges in producing specific recommendations around current community-based services, where data and outcomes are not yet captured at the level of detail of CAMHS services provided by SLAM.

Further work will be required to establish a comprehensive framework for understanding and investing in better outcomes for all our children and young people, across all service areas.

There are nonetheless already clear areas where we can have an immediate impact, with strong support for both for making existing specialist services even better, whilst ensuring that services supporting broader emotional and mental wellbeing are effectively prioritised and funded.