

Sefton Community Child and Adolescent Mental Health Services (CAMHS) – Update

1. Introduction

The Children’s Overview and Scrutiny Committee has requested an update on the CCG commissioned CAMHS provision following on from the previous report presented in October 2020, which provided a detailed overview of the locally commissioned mental health services, initial impact of covid and system wide response, performance of services and plans for future developments.

This report focuses on the response and performance of Sefton’s mental health services, specifically in light of the ongoing impact of the pandemic and the challenges this presents. It also highlights new and developing services and initiatives which are, and will, contribute to improvements in the mental health offer for the children and young people (CYP) of Sefton; also the system wide changes as health and social care transition into the newly formed Cheshire and Merseyside Integrated Care System (ICS), and the implications for mental health on a ICS footprint and for Sefton CYP and families ‘at place’.

2. CCG Commissioned Services 2021/22

The table below provides an outline of the mental health services commissioned by both Sefton CCGs, including the additional support and investment in response to COVID (to date). Please note that figures remain subject to final confirmation.

Service	Provider	£ p.a. (2021/22)
Online Advice and Support for 10 – 25 year olds (jointly commissioned with LA)	KOOTH	£33,000
School programmes: wellbeing champions, school transition and teachers’ training and support network	Sefton CVS	£48,000
Mental Health Support Teams (MHSTs) for schools and colleges	Alder Hey	£511,000 (*FYE £720k)
Counselling support and drop in	Parenting 2000	£22,965 - baseline 21/22 £39,232 - covid/winter pressure 21/22 (non-recurrent) £31,232 - additional recurrent uplift (22/23)
Counselling support and drop in	Venus – Star centre	£145,278 - baseline 21/22 £48,927 - covid/winter pressure 21/23 (non-recurrent) £33,924 - additional recurrent uplift (22/23)
Support to children and young people (female / male) experiencing / affected by domestic abuse	SWACA	£52,432
Specialist CAMHS (Including Single Point of Access, Crisis Advice & Guidance). In response to covid, 24/7 crisis service implemented 18 months ahead of schedule.	Alder Hey	£3,979,991

Early Intervention Psychosis (14+)	Merseycare	Service 14+, investment not specifically broken down by age range.
Talking Matters Sefton – Talking Therapy (IAPT 16+)	Mental Health Matters	Service 16+, investment not specifically broken down by age range.
Youth Justice – Screening, Information, advice and guidance for Out of Court Disposal	Venus	£63,025
Specialist Community Eating Disorder Service (0-18)	Alder Hey	£245,630
CYPIAPT – workforce development programme	various	Variable ~ £90,000

In addition, there are costs for specialist support staff for individuals in an acute bed, without medical needs, with discharge delayed due to availability of T4 inpatient beds or social care placement. These costs are met by the CCG and AHCH. From January 2021 – January 2022 there were 4 of these cases at AHCH costs ranging from £27,000 – £118,000

NOTE: If a child or young person needs to be admitted for assessment or treatment to a specialist mental health hospital bed, this is commissioned by NHSE and not locally by the CCGs.

3. Impact of COVID and system wide response

Since the onset of the pandemic in March 2020, the impact of COVID on CYP emotional health and wellbeing has been widely reported both at a local and national level. Mental health services have experienced an unprecedented and sustained increase in demand and the number of urgent, high risk and complex cases continues to be a concerning feature. In March 2021, Cheshire and Merseyside modelled a 30% increase in demand for mental health services in the subsequent 2 years, an increase on the initial 15% predicted at the outset of the pandemic. And recent national projections indicate that 1.5 million children and teenagers will need new or additional support for their mental health over the next three to five years.

In response to these ongoing challenges, the wider mental health system and the local Sefton Emotional Health Partnership (formerly the CAMHS partnership) continues to respond, adapt and co-ordinate its services and approaches to support the mental and emotional health and wellbeing (EHWB) needs of Sefton CYP and their families:

3.1 Additional investment

Significant additional ‘COVID recovery’ mental health funding has been released in 2021/22. In May 2021, the government announced an additional £79 million to support recovery and a reduction in waiting times. Of this, Sefton was allocated an additional mental health investment of circa £800k. Similarly, in November 2021, additional NHS admission avoidance/winter pressure monies were made available locally. This has enabled the CCGs to commission a series of additional investment uplifts to increase the capacity of mental health services and reduce waiting times for both Alder Hey specialist CAMHS and third sector mental health services.

This is in addition to the NHS Long Term Plan investment commitments for crisis services and eating disorder services, which have been agreed and will continue to be released.

3.2 Expanding and developing services

- The **24/7 Crisis Care Services for CYP** which were rapidly introduced in response to the pandemic, continue to develop and expand. The NHS Long Term Plan (2019) highlighted the development of 24/7 Crisis Care Services for children and young people by 2023/24. However, as per the NHS England mandate in April 2020, Alder Hey brought forward those plans and mobilised a 24/7 Crisis Care Service at pace to ensure those Sefton CYP most at risk of harm could access care and support. (see section 6).
- Utilising additional investment, specifically the admission avoidance funding released in November 2021, third sector providers Venus and Parenting 2000 have been able to **expand their 'open access' drop in service** to include evening sessions for children, young people and their families, which are provided in a youth friendly non-clinical setting. These sessions provide a mix of psycho-education, therapeutic support, youth mentoring and information advice and guidance. Since the drop-in sessions commenced in January 2022 there have been approximately 53 attendances across both providers, with some young people returning multiple times as they have found the support so beneficial. Parenting 2000 has report that for at least 6 of these young people, the 'open access' service has provided an alternative to A&E.
- All partners and providers continue to **adapt and flex their service offer**, taking into account COVID changing restrictions and individual need. For example, delivering a mix of face-to-face and online digital interventions, extending opening hours and offering group sessions while children young people and their families wait for an assessment or treatment. Whilst the pandemic required services to rapidly develop and adopt a digital offer, the learning and evidence confirms that this works well for many of our children and young people and supports improved access for some, indicating that a blended offer should continue. This learning from new and innovative approaches will continue to inform service delivery and improvements.
- Building on the expansion of digital and online options and in response to COVID, capacity of the **online counselling platform Kooth** was increased and the age range extended to include 19 - 25 year olds (see section 6). Jointly funded by the CCGs and Local Authority, a new contract commenced in January 2021 to include the extended age range.
- The innovative 'one stop' shop **Sefton and Liverpool mental health platform** (sometimes referred to as the CYP1 platform) was launched in May 2021. Functioning as a single point of access, the online platform can be used and accessed by children, young people, family/carers and professionals for information about mental health issues and also to make direct referrals through to services; including self-referrals. The functionality and operability of the platform are continuing to be explored and developed.

The initial development of the platform was led by NHS digital innovations and Alder Hey, in collaboration with mental health partners across both Sefton and Liverpool localities, and included a comprehensive series of co-production workshops and activities for young people and parent/carers. Since its launch in May 2021, the platform has continued to receive positive feedback from users and has gained national recognition, receiving a nomination for a National Health Service Journal Award.

<https://seftonliverpoolcamhs.com/>

- In March 2020 the partnership launched the first **Sefton Young Persons Emotional Wellbeing Toolkit** to support schools and colleges to improve their mental health offer. The Toolkit condenses best practice described in national guidance alongside other literature and provides additional information about local referral pathways and national services. The Toolkit was updated in October 2021 and has been shared with schools to help them to manage with not only the impacts of the pandemic, but more broadly the subject of mental wellbeing in schools. It will be refreshed each academic year. Another

version of the toolkit is being prepared to be targeted directly at children and young people so they can access the information directly.

The toolkit can be found at <https://www.sefton.gov.uk/public-health/mental-health-emotional-wellbeing/> It provides links to a number of services and agencies that support young people to build resilience.

3.3. Strengthening of local partnerships

- Since the start of the pandemic, the **Sefton Emotional Health Partnership** (formerly Sefton CAMHS partnership) has strengthened its membership and approach, specifically in relation to co-ordination and promotion of local services. At the outset of the pandemic, the group developed a 'COVID-19 CAMHS Bulletin' to raise awareness of the local mental health and EHWP offer, ensuring support was co-ordinated and promoted in schools and across all CYP networks. Since then, its work has gone from strength to strength. The bulletin is now produced on a termly basis, ahead of the 3 main school holidays and the partnership has a dedicated communications and engagement group which meets on a monthly basis.

More recently, the group has collectively developed and delivered on a number of projects. Regularly taking advantage of national mental health awareness weeks the group plans and delivers local campaigns to promote and raise awareness of local services. As part of Children's Mental Health Week in February 2022, the group collaborated on the planning and delivery of a Schools Mental Health conference and developed a campaign toolkit to co-ordinate and support communications across the partnership:

<https://drive.google.com/drive/u/0/folders/1zajleUSyoTb5viN481B2eImZINwschOg>

Through this partnership working and increased promotion of the low level early intervention mental health and EHWP services, it is hoped that CYP and their families will be encouraged to seek help earlier and so prevent escalation and referral to specialist mental health services.

- Notably, there has been a consolidation of **relationships between health and education**, particularly since the introduction of Mental Health Support Teams (MHSTs) across Sefton and the establishment of the Education Collaborative Forum (formerly Covid School Cell), which provides opportunities for health to present and discuss mental health matters with head teachers and senior education colleagues in the Local Authority. These relationships have enabled MHST leads and local authority colleagues to develop a coordinated and strengthened mental health training offer for schools, combining the MHST and Department of Education funding and resources to best effect.

The training and resources support education staff to promote mental wellbeing and resilience amongst CYP, teachers, parents and carers', and aid mental health recovery in light of the impact of COVID and lockdowns. By way of example, this includes Mental Health First Aid training, bespoke training for identified mental health leads, further development of the trauma informed prevention work through the Early Help team and a fund to provide additional training for needs which may emerge as education returns to 'normal'.

3.4 Strategic developments

There are a number of strategies and plans that are driving and informing the development of emotional health and wellbeing services in Sefton, both now and as we look to the future.

Some of the local and regional plans which have been recently published or are in development are highlighted below:

- In May 2021 as part of the Mental Health awareness week, Sefton launched its refreshed **Children and Young People's Emotional Wellbeing Strategy**. The strategy is based on the needs based THRIVE framework and focuses on increasing access, building resilience and early identification of the mental health and wellbeing of children and adolescents; to be achieved through school engagement, school-based interventions and partnership working between healthcare, education and the community/voluntary sector. As described in section 3.3 this has underpinned the strengthening of the Sefton Emotional Health Partnership and provided focus for the raft of projects and initiatives it has been developing.
- Aligned to the Emotional Health and Wellbeing Strategy, Sefton has embarked on a whole system approach to the **Start Well early years programme**. The programme aims to strengthen the system strategic oversight and consolidate the whole system core universal offer across the child's journey, refocussing the deployment of shared resources where there is greatest need. The initial mapping exercise has identified a number of system priorities including mental/emotional health and wellbeing, which is a key focus of the initial high level project plan.
- In 2021, NHS England and NHS Improvement undertook a **North West CAMHS review**. The findings were in part informed by the impact of COVID and focus on a number of key recommendations, including the standardisation of the core CAMHS Tier 2/3 offer for all young people, and more specifically for those with a learning disability and/or autism; development of crisis escalation pathways and alternatives to admission; CAMHS workforce capacity and capability; development of parent carer forums and development of a strategy to tackle health inequalities and access to CAMHS.

A North West plan and strategy has been developed to deliver against these recommendations and is being used to inform mental health investment decisions and the plans in development across the Cheshire and Merseyside ICS, including its Mental Health Transformation programme.

- In support of the national and regional **Transforming Care strategies and partnerships**, Sefton health commissioners are fully engaged in the various workstreams to improve the mental health provision and support for CYP with a learning disability and/or autism and their families, including the Cheshire and Merseyside Transforming Care Transformation programme.

Locally this has enabled Sefton to successfully bid for funding to develop and introduce an autism post diagnostic pilot, to extend its Intensive Support Team pilot and more recently to secure funding for a team of key workers.

Over the last 12 months, health commissioners have also been working with partners to improve and strengthen the systems and processes that oversee the local Dynamic Support Database (DSD), including the introduction of monthly tracker meetings. These have been combined with the Local Authority's already established Multi- Agency Panel meetings that reviews and supports a register of complex CYP. This approach supports the synergy that exists between the two registers, as cases will often overlap. The membership includes senior managers from social care, education, SEN team, CAMHS providers and Early Help teams.

Notably, the Multi-agency tracker meetings have been temporarily paused whilst the Terms of Reference undergo review.

For information, the DSD is a register of children/young people with learning disabilities and/or autism who may need higher input from services and who may be at risk of being admitted to a specialist or mental health hospital.

4. CAMHS services

4.1 Overview of Performance

4.1.1 Specialist CAMHS

Throughout 2021 Alder Hey Specialist Mental Health Services have experienced a significant increase in demand following the COVID-19 pandemic. This has resulted in an overall 26% increase in referrals received by the service in 2021 compared to 2019, and further increase has since occurred in January 2022. This is in line with national and local modelling which predicted a 30% increase in demand for children and young people's mental health services over 2021 and 2022. Figure 1 shows the referrals to Sefton CAMHS from January 2019 – January 2022.

Figure 1 – Referrals to Sefton CAMHS at Alder Hey

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	108	123	148	119	116	116	94	53	88	146	130	94	1335
2020	128	134	113	44	55	85	89	89	134	119	155	127	1272
2021	83	111	160	138	178	184	118	90	150	165	163	138	1678
2022	174												174
Percentage difference 2021 vs 2022	110%												
Percentage difference 2019 vs 2022	61%												

There has also been a significant increase in urgent and complex referrals, particularly following the lockdown periods. The service ensures that children and young people requiring urgent assessment receive this as a clinical priority which in turn has resulted in longer waiting times for routine appointments.

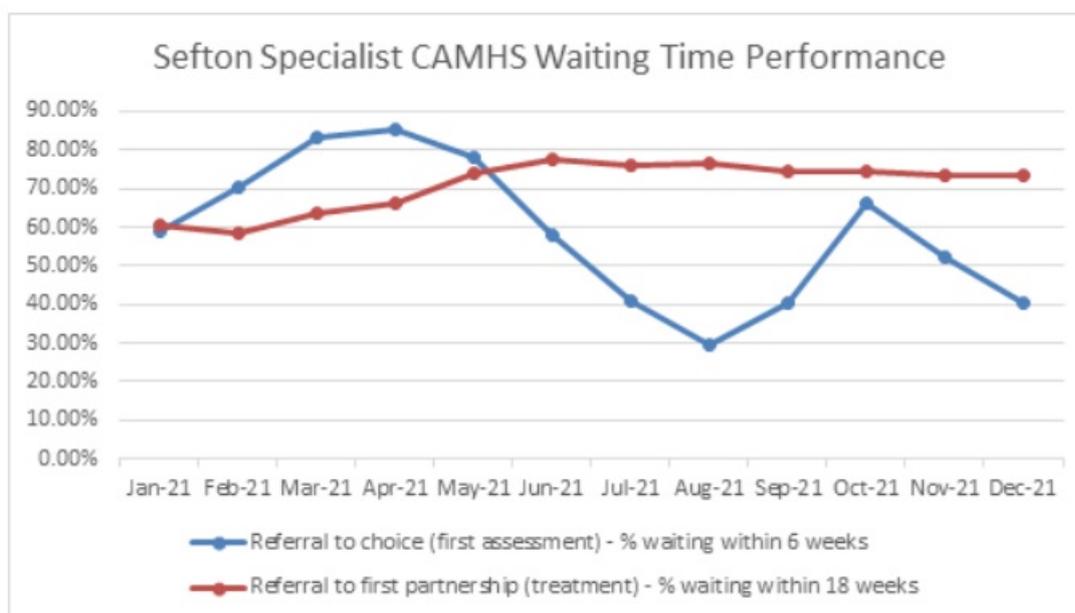
In January 2020 Alder Hey introduced the following monitoring standard with Sefton CCGs to ensure children and young people have access to safe and effective care:

- 92% of children and young people to be assessed within 6 weeks of referral (choice assessment)
- 92% of children and young people to commence treatment within 18 weeks of referral (partnership appointment)

Figures 2 illustrates the challenges with meeting this access standard. For first assessment appointments, the surge in urgent assessments has lengthened the waiting time for routine appointments outside of the 6 week target. There has been a slow increase in compliance for providing treatment within 18 weeks of referral and the service balances clinical priority against children and young people who have waited the longest amount of time.

Figure 2 – Sefton CAMHS Waiting Time Performance

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Referral to choice (first assessment) - % waiting within 6 weeks	59.02%	70.18%	83.33%	85.48%	78.26%	58.14%	40.65%	29.73%	40.15%	66.42%	52.41%	40.51%
Referral to first partnership (treatment) - % waiting within 18 weeks	60.77%	58.49%	63.58%	66.07%	74.11%	77.58%	76.26%	76.41%	74.66%	74.27%	73.68%	73.48%



The service has experienced challenges with meeting these access standards in 2021 for various reasons. The increase in overall referrals and particularly urgent referrals has lengthened the routine waiting time for appointments. As the presentation of children and young people in the service is also now more complex, this has presented challenges with maintain the pre-COVID rate of discharge following the completion of planned treatment.

In addition to this, challenges with workforce has affected the ability to grow capacity in line with demand. Absence due to COVID-19 illness was a factor throughout 2021, and early in 2022 due to the Omicron variant. The service received growth investment in 2021 to mitigate the impact of increased demand however recruitment has been challenging owing to the national shortage of experienced mental health practitioners. This is in line with other local and national CYP mental health providers. There has also been an impact of staff experiencing levels of burnout following lockdown periods, some redeployment to support the 24/7 Crisis Care Service, and an increasingly complex caseload.

To mitigate this staff have worked flexibly, undertaking additional hours where required, to ensure children and young people continue to receive safe and effective care. The service has undertaken a large recruitment drive which is continuing in 2022, including sponsored adverts on social media and recruitment incentives for new employees. The service also utilises agency staff where appropriate to mitigate short term gaps in capacity. The service

has utilised new roles, such as trainee assistant practitioners, to provide contact and treatment to children and young people. A full workforce plan is in development to be completed in 2022 to create a roadmap for developing and sustaining an experienced, high quality workforce.

The service continues to utilise virtual appointments and remote ways of working well, ensuring that impacts of COVID have not affected care and continuity. The service also undertakes weekly check in calls for any children and young people experiencing longer waiting times. This is to ensure that any deterioration in presentation is addressed immediately and an urgent assessment is subsequently booked.

Recruitment to the remaining vacant posts in the service is underway and the service has now commenced capacity & demand modelling. A recovery plan will be shared with Sefton CCG's with an agreed timeframe in place to meet the target of 92% of children and young people waiting 18 weeks or less for treatment. This is subject to no further COVID-19 restrictions and maintaining a steady referral rate.

4.1.2 Eating Disorders Service

There has been a significant surge in demand for Eating Disorder Services nationally, regionally and locally since March 2020, with increasing numbers of young people presenting with deteriorating physical health following the national lockdown periods. At Alder Hey this impact has been seen both with the community setting and the hospital inpatient setting. The service has experienced an unprecedented increase in demand with a 171% referral increase in 2021, demonstrated in Figure 3.

Figure 3 – Referrals to Eating Disorder Service

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
2019	9	4	5	3	7	5	12	1	2	5	4	5	62
2020	4	16	10	2	6	12	9	4	11	8	9	7	98
2021	10	12	12	15	10	24	12	3	17	22	20	11	168
2022	10												10

In addition to increased referral rates the service has also seen:

- An increase in the number of children and young people presenting at their first assessment as being at high physical risk, due to weight loss and requiring a paediatric admission to stabilise their physical health risk and to support refeeding.
- A decline in the health of young people known to the service. The impact of the period of lockdown, with the lack of routine, isolation from peers, increase in opportunities to exercise has significantly affected their eating disorder symptoms with their physical and mental health risk increasing.

This growth in demand, intensity and complexity has impacted of the service ability to meet the national waiting time standards for children and young peoples eating disorder services as shown in Figure 4, which had previously consistently been achieved prior to the pandemic.

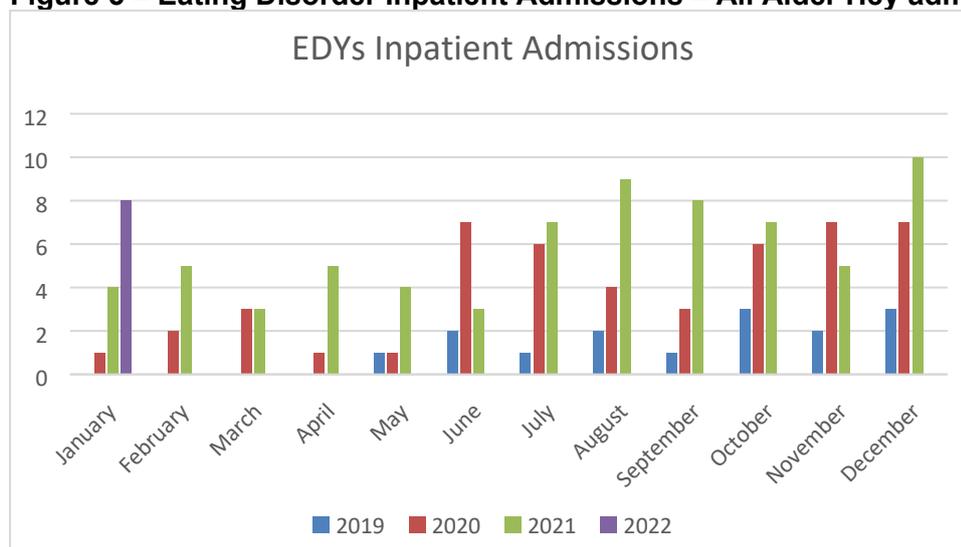
Figure 4 – Eating Disorder Performance

Sefton EDYS - Completed Pathways

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Routine Completed Pathways % Seen within 28 days	90.00%	50.00%	60.00%	33.33%	22.22%	12.50%	16.67%	0.00%	14.29%	12.50%	14.29%	42.86%
Urgent Completed Pathways % Seen within 7 days	100.00%	100.00%	100.00%	100.00%	0.00%	100.00%	0.00%	100.00%	100.00%	100.00%	100.00%	100.00%

Following the pandemic the service has also seen the highest number of paediatric admissions since it commenced, with a 366% increase in acute admissions in 2021 compared to 2019.

Figure 5 – Eating Disorder Inpatient Admissions – All Alder Hey admissions



The average length of stay is currently 16 days, however this is increasing. There are also a number of children and young people with repeated admissions with deterioration of their physical health. The increased presentation of significant eating disorders has placed pressure on acute paediatric beds at Alder Hey, which was already constrained from occupancy and increased acuity post COVID, and a national pressure on both children's and adolescents Tier 4 mental health inpatient beds. The children's Tier 4 Inpatient Unit at Alder Hey has seen a substantial change in the presentation of children admitted to the unit with almost all children having an eating disorder.

To mitigate these challenging circumstances, the Eating Disorder service has utilised new investment in 21/22 to grow their workforce. The service has continued to offer both face to face monitoring and treatment for children and young people that are in the high risk category and have increased the intensity of treatment for this cohort by providing home visits to support meal times. The increase in children and young people that fall into the high risk category has resulted in the service needing to offer support over a seven-day period, using overtime at weekends to support the paediatric ward and to provide telephone support to parents and young people to try to support avoidance of admission. The acute system was also granted monies for Winter 2021 to provide health care assistant (HCA) capacity for admitted patients requiring support with meal times. Some young people require consistent 1:1 HCA support throughout their inpatient and additional staff have been recruited through this funding to facilitate this.

4.1.3 Crisis Care Service

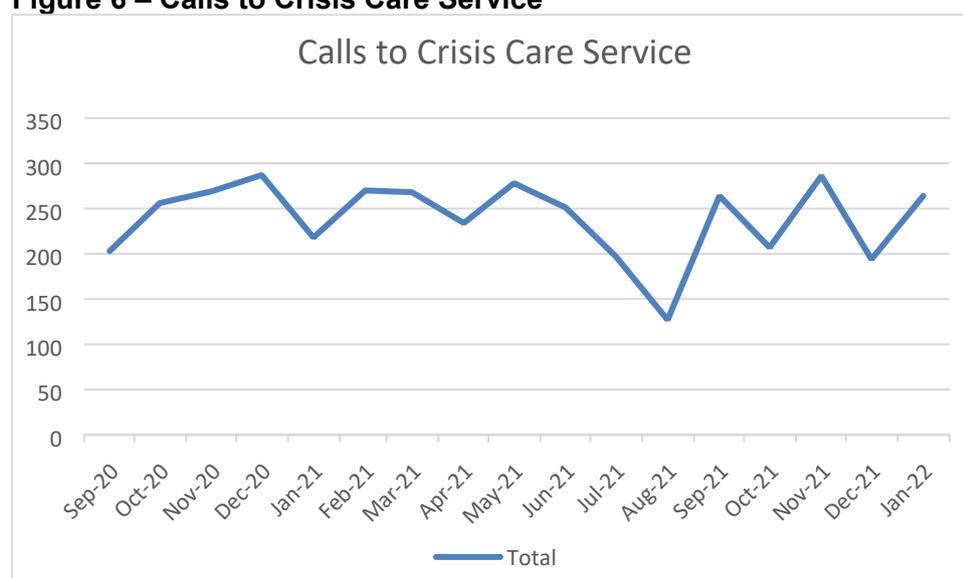
Alder Hey have continued to provide a 24/7 Crisis Care line for children and young people in Sefton and Liverpool since April 2020.

The service offers mental health advice and guidance to children and young people, their families and carer and any professionals supporting children and young people. They also

receive calls from the ambulance service and the police amongst other agencies where a young person is in crisis at home or in a public area. The service offers direct support to Alder Hey and Ormskirk emergency departments, provide face to face and remote assessment for children and young people presenting in crisis. The service also offers access via a Freephone telephone line and text messaging service.

Figure 6 details the calls to the Crisis Care Service relating to children and young people with a Sefton GP.

Figure 6 – Calls to Crisis Care Service



The service has undertaken over 210 ward assessments for children and young people in Sefton since September 2020 and 134 emergency department assessments since January 2021.

The Crisis Care Service received investment in 21/22 as part of the Mental Health Delivery Plan to sustain the 24/7 line and develop a home based intensive treatment service. The Service has recruited a number of new practitioners although recruitment is challenged as with the other specialist mental health services.

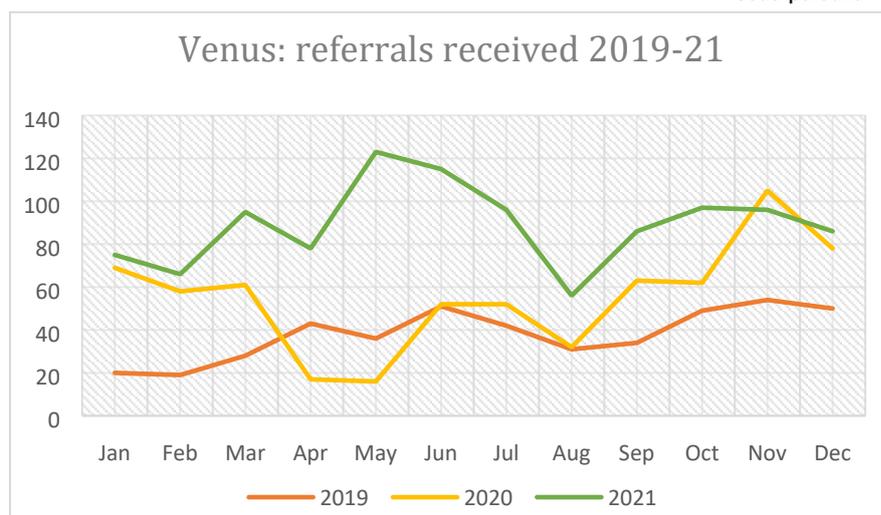
4.1.4 Third sector CAMHS providers

Referral rates

Since 2020 Venus and Parenting 2000 have experienced a significant increase in demand following the outbreak of COVID – for Venus this has resulted in a 134% increase from pre-pandemic as outlined in the table and graph below:

Venus referral rates

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	20	19	28	43	36	51	42	31	34	49	54	50	457
2020	69	58	61	17	16	52	52	32	63	62	105	78	665
2021	75	66	95	78	123	115	96	56	86	97	96	86	1069
2022	93												93



Parenting 2000 have experienced a similar increase as below:

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	26	27	34	23	38	35	38	12	27	47	46	25	378
2020	48	51	30	8	12	24	26	14	12	28	28	22	303
2021	26	28	34	36	54	36	37	22	17	29	44	26	389
2022	52												52

Waiting times for assessment and treatment

Venus figures below show average days waiting for an assessment per month in 2021:

Average days waiting for an assessment - Venus													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Avg days	73	70	98	83	94	90	82	80	92	99	85	124	

And figures below show average days waiting for treatment to begin per month in 2021:

Average days waiting for treatment - Venus													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Avg days	124	136	130	158	145	160	156	155	154	150	168	150	

If a CYP is referred to Venus for routine mental health support today, the estimated maximum wait times are as follows:

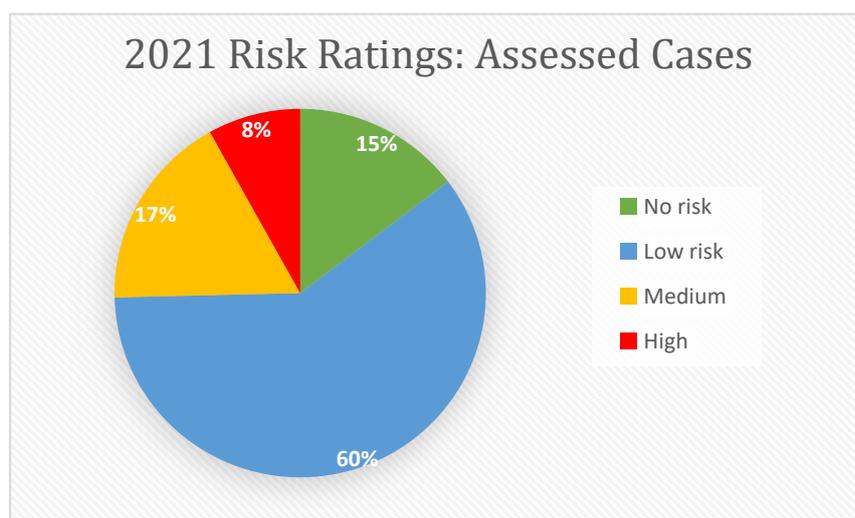
- Referral to assessment – 6 months
- Assessment to treatment – 7 months
- Referral to treatment – 13 months

Assessing and managing risk

As with specialist CAMHS there has been a significant increase in urgent and complex referrals including disorder specific presentations. For all Venus assessments completed in 2021 an average of 17% had identified risk and were therefore prioritised.

Cases with identified risk are prioritised for urgent assessment within 6 weeks. Following this, those with identified high risk commence treatment within 2 weeks and those with medium risk within 10 weeks. This has resulted in longer waiting times for routine appointments and those waiting to start treatment.

Figure below shows percentage of risk for assessed cases in 2021:



Venus hold weekly MDT meetings every Thursday morning, which are attended by a CAMHS representative to support with identifying, prioritising and escalating any high-risk or complex cases.

Those CYP waiting for assessment and/or treatment are also offered alternative support whilst they are waiting, including group sessions and drop in sessions, which have been extended in Q4 2021/22 using admission avoidance funding (see 3.2).

4.2 CAMHS developments

4.2.1 Tier 4 inpatient mental health

As with all mental health services, demand for T4 mental health inpatient beds has escalated during the pandemic and there is a nationally recognised acute shortage, resulting in some young people with significant mental health needs being 'stuck' in acute beds and/or more frequently being placed 'out of area'. Similarly, there are also insufficient specialist placements and/or specialist community provision/support for when young people are ready for discharge, so delayed discharges can also be a common issue.

Whilst NHS E Specialist Commissioning is the responsible commissioner for Tier 4 secure and non-secure Child and Adolescent Mental Health Services (CAMHS) (including eating disorders), when there are no Tier 4 beds available, the local health system must hold and manage the risk and look for alternative solutions. In some cases, this has involved the commissioning of additional specialist mental health support from private providers to contain and keep patients safe whilst they are acute settings.

Similarly, for those young people who present in crisis with challenging behaviour, but who do not have a mental health condition, the Local Authority is challenged in finding specialist community provision and/or specialist placements, as there is a shortage. This can also result in these young people getting stuck in an acute setting as timely and safe discharge is not possible. The trauma and challenges of this situation are exacerbated for those children and young people in care and/or who have a learning disability and/or autism.

Solutions to these system wide provision issues are being considered and there are a number of national, regional and local NHSE workstreams in development, for example:

- Transforming Care – for those young people with a learning disability and/or autism, scaling up of intensive support/home treatment services, introduction of key worker initiative and development of ‘places of safety’;
- National new models of care and admission avoidance strategies, including introduction of ‘Gateway Meetings’

4.2.2 Framework for Integrated Care - north west vanguard

As part of the Cheshire & Mersey ICS and in collaboration with Liverpool, Sefton submitted an expression interest early 2021, with approval received in September 2021.

This new psychology led model aims to build on the current YOT provision and work with CYP who are at risk of being criminally and/or sexually exploited and their families. It aims to embed an enhanced case management and trauma informed, strengths- based approach through training, consultation, assessments and interventions to the most vulnerable CYP with complex needs. It is to be an integrated offer and will enhance existing provision including CAMHS and NHSE Liaison and Diversion.

The target YP are aged 13-19 (with plans to extend 0-18 in latter stages) that:

- Present as at risk of criminal or sexual exploitation
- Missing from home on one or more occasions in the past 90 days
- Missing from education / persistent absence / SEN
- Previous criminal or sexual exploitation concerns
- At risk of admission through MH and ASD/LD processes
- On the edge of care
- At risk of being placed out of city or where placement has broken down

The new staff team will include a Complex Needs Lead, Case Manager and Targeted Support Officers. Subject to final financial profiling there is a plan to establish dedicated Speech and Language therapy and occupational therapy (sensory) expertise for YOT.

The project commenced in November 2021 with recruitment to key project management and clinical leadership posts and the remainder of year one will including scoping the need of the locality and commencing a training programme and interventions for the initial cohort of young people.

4.2.3 4 Week Wait Programme

In April 2021 Sefton and Liverpool submitted a bid to be a late pilot site for the national 4 Week Wait pilot, a programme introduced in the Government Green Paper. This bid was successful and the partnership in Sefton and Liverpool received investment with the aim of reducing waiting times and being part of the consultation into introducing an access standard for children and young people’s mental health.

The project is focusing on how the referral pathways for NHS commissioned mental health services can be streamlined to avoid any unnecessary delays in waiting times, but also to explore what other types of 'help' that young people may benefit from while they wait for an assessment/treatment.

The programme agreed by the 4 week wait steering group includes three workstreams:

1. Process mapping across the partnership to ensure pathways into services and between organisations is streamlined and effective, including reducing administrative burden and time resource and ensuring a young person only needs to tell their story once. This was started in February 2022 and is being followed up by number of co-production events with children, young people and their families.
2. Digital innovation implemented which will introduce automatic same day booking of appointments through the Sefton & Liverpool CAMHS referral platform, providing an immediate response to families and reducing time taken to book assessments
3. Enhancing engagement for young people with greatest need. This workstream includes engaging with children, young people and families around access, including gaining their perception on receiving help from mental health services, increasing guidance and signposting, and aiming to reduce DNA's and cancellations.

The steering group for this project have contracted Aqua consultancy to facilitate the process mapping of the Sefton CAMHS partnership which is currently underway and is due to be completed and an improvement plan created by April 2022. Automatic appointment booking through the referral platform will also commence in April 2022.

The streamlined referral pathways and processes will be trialled throughout 2022/23 and use the functionality and operability of the Sefton and Liverpool CAMHS platform to support with this (see 3.2).

4.2.4 Key workers

As part of the national and regional Transforming Care programme and developments (see 3.4), Sefton was successful in its 'Expression of Interest' to be a pilot site for the key worker initiative, securing £317k over the next 2 financial years to develop and implement its team. With the express aim of preventing a mental health hospital admission and/or a family/placement breakdown, the team of 3 key workers and 1 manager will support Sefton's most vulnerable children, young people and their families with a learning disability and/or autism who sit on the local dynamic support database.

The team will be housed by the local authority and recruitment to the roles will commence in the next few months

4.2.5 Crisis escalation pathways

There has been a strengthening of systems and processes across the local mental health provider landscape, notably in developing crisis escalation pathways for those young people aged 16 – 18 who present in crisis at an adult A&E. A Cheshire and Merseyside wide pathway and protocol has been developed by adult and CYP community and acute trusts, who have also collaborated in the development of Standing Operating Procedures for management of crisis cases in an acute setting. These developments have been the result of a system improvement plan developed in response to the case of a 16-year-old with a learning disability

(formally known as 'YP A'); this young person presented at an adult A&E in mental health crisis and subsequently spent 23 days in an inpatient observation bay.

Whilst all actions in relation to the improvement plan have now been completed, there is a continued focus on the system challenges in responding to the needs of this cohort of CYP when they present in crisis. These are being addressed through the Cheshire and Merseyside Transforming Care and CYP crisis workstreams and are also a key recommendation of the North West CAMHS review (see 3.4).

4.2.6 Self-harm

In response to the requirement for a system wide review of crisis pathways for 16 - 18 year olds, the self-harm workstream has joined with the wider crisis pathway development work to ensure that it is aligned and links with clinical best practice. In addition, the Cheshire and Merseyside self-harm network has been working collaboratively to share good practice and identify opportunities for ICS level developments and training. The network has recently developed a 'Self Harm Practice Guide' which will shortly be available for circulation and a self-harm training programme is being finalised.

5. Mental Health Support Teams (MHSTs)

In 2020 the Sefton Emotional Health Partnership was successful in securing £740k for two Mental Health Support Teams (MHSTs) to work in Sefton schools. The MHSTs work in Sefton schools as part of the system-wide local transformation plan for children and young people's mental health, working in schools and colleges to deliver early intervention for mild to moderate mental health issues and building on the support already available in schools, from local health and care services and VCF organisations.

The focus and location of the Sefton MHSTs has been based on an assessment of the emotional wellbeing needs of children and young people in the area. The MHST based in south Sefton works to counteract high levels of deprivation and health inequality; and the other MHST supports all transition year groups in other areas of Sefton i.e. years 6/7 and years 11/12.

The first two teams will be fully operational by March 2022 and in line with the phased implementation, all 40 schools selected will be engaged and making referrals into the team by this time. During Q4 2021/22 it is anticipated that 140 young people will access the service.

A key strand of the MHST programme, is the collaborative working with schools in the development of their 'whole school approach' to mental health. Local MHST schools have also been actively involved in the Anna Freud Link programme, which focuses on working with school and college staff to pool local knowledge and plan services together. Information about the LINK programme can be found here: <https://www.annafreud.org/what-we-do/schools-in-mind/our-work-with-schools/the-link-programme/mental-health-services/>

One of the key developments of the LINK programme has been the expansion of the Mental Health and Schools network which the CCGs commission and the VCF take a lead on. This provides schools with the space and opportunity to share good practice and to work collaboratively on local approaches to mental health support in school for young people.

In April 2021 the partnership received confirmation that a further bid for a 3rd Mental Health Support Team as part of Wave 8 of the national rollout had been successful. This means that

during 2023 over 50% of Sefton schools/colleges will be supported, which is higher coverage than the majority of local authorities in the north west.

6. Kooth

Online support via Kooth has been available in Sefton for over 2 years and the number of users has grown to 2263 during that time. Following a successful evaluation of the service in the summer of 2020, the service has been re-procured on a 3-year contract, with the option to extend for another year. The age range was extended for those who can benefit from the service from 11 - 18 to 10 - 25 year olds.

A Kooth Stakeholder Management group has also been created to provide oversight and performance management of the service. It meets on a quarterly basis with membership including the three funding partners, schools, and children and young people – meaning the voice of the child is at the heart of making sure the service works for its key demographic.

From January – December 2021 800 new users registered with Kooth. There were 5,215 logins with over 60% being repeat users. More than 200 chat sessions with counsellors and 2,132 messages exchanged with counsellors and users. Nearly 7,200 accessed the forums and 2,376 accessed articles. The most prominent presenting issue during chat sessions has been anxiety/stress for every reporting period during 2021.

7. Access targets

NHS planning for the last few years has included a commitment to increase the number of children and young people being supported by NHS funded community services, this is called an “access target”. It is the percentage of children young people accessing support compared to the suggested prevalence.

	17/18 (Target 30%)	18/19 (Target 32%)	19/20 (Target 34%)	20/21 (Target 35%)	21/22 (Target 35%)
South Sefton	23.3%	29.4%	29.9%	34.6%	48.1% (projected)
Southport & Formby	30.6%	38.1%	33.7%	37.0%	52.3% (projected)
Sefton-wide	26.9%	33.8%	31.8%	35.5%	49.7% (projected)

There has been good progress in increasing access and meeting the access target across Sefton since 2017/18, and despite the impact of Covid-19 on the 2019/20 figures, we are on target to exceed the 35% target for both CCGs in 2021/22.

The year- to- date access rate for South Sefton CCG to the end of November 2021 (latest MHSDS published data) stands at 32%. Based on this, the year-end projected access rate is 48.1% which exceeds the National target and the 2020/21 rate (34.6%). The year- to- date access rate for Southport and Formby CCG is currently 34.9% therefore almost achieving the yearly target with four months of the financial year remaining. Despite the disparity in performance between the two CCGs, the Sefton-wide year end access rate is also projected to exceed the 35% target (49.7% based on data to November 2021).

8. ASD/ADHD services

Alder Hey are commissioned to provide diagnostic pathways for Autistic Spectrum Disorder (ASD) and Attention Deficient Hyperactivity Disorder (ADHD), with a target of providing assessment and conclusion within 30 weeks of referrals. This pathway and target was introduced in April 2020.

There has been a sustained increase in demand for diagnostic assessment for both ASD and ADHD since April 2020 and this continues to impact significantly on capacity in the service and has therefore extended waiting times beyond the agreed timescales. This increased demand has occurred particularly as a result of the two school closure periods in 2020 and early 2021 and an analysis of the source of this increase at school and ward level has been undertaken and shared with the CCG.

There is a strong relationship between the ASD/ADHD diagnostic pathways and specialist mental health services and many children and young people who are seen by CAMHS (both Sefton Specialist CAMHS and the Crisis Care Service) have one or both of these diagnoses. The services work closely together, providing joint psychiatry and psychology capacity to support conclusion of the diagnostic pathway.

9. Engagement and co-production

As outlined in section 3.3 above, the Sefton Emotional Health Partnership has established a dedicated Communications and Engagement Group to develop and drive a coordinated strategy and approach to its communication and involvement with Sefton's CYP and their families.

One of the areas of future focus for the group is the development of an engagement framework or 'tree' which outlines the key groups, channels and processes for engaging a cross section of young people in the discussions and developments of local mental health services. This will include those harder to reach groups and aim to reduce health inequalities and social exclusion.

Currently, the Sefton Young Advisors are the key group supporting community engagement and co-production activities with CYP across Sefton. Managed and recruited by the VCF sector, they are trained consultants aged from 15-23 who support local organisations to engage CYP on a range of subjects and issues, helping the views and opinions of young people to be heard and understood. They are also members of the CCGs' Engagement and Patient Experience Group, the local Thrive Network and the Healthwatch Steering Group.

Some recent examples of how they have supported young people to share their views on mental health services are highlighted below:

- Young Advisors held and facilitated a Mental Health focused SYMBOL meeting (Sefton Youth Making Better Opportunities with Leaders) and make a short animation to capture the voices and opinions of local young people.
- In support of the Education and Mental Health Conference outlined in section 3.3, the Young Advisors collated CYP opinions of local mental health services in a short presentation that was shared at the event.
- Young Advisors have reviewed the Emotional Health and Wellbeing Toolkit (section 3.2) to support the development of a 'youth proofed' version

- Young Advisors are working with Sefton Partners to develop a Youth Voice Network which will support the development of the partnership's engagement framework.

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South Sefton and Southport & Formby CCGs

March 2022