

Children and Young People's Emotional Wellbeing and Mental Health

**Briefing for East Sussex Health Overview and Scrutiny Committee –
3 March 2022**

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Overview of presentation:

- 1) **System wide strategic framework for provision and improvement of emotional health and well being in East Sussex**
 - Local Transformation Plan and Foundations for our Future
 - Thrive Framework
 - Outcomes Framework
 - Addressing Health Inequalities
 - 2021/22 transformation and investment plans
- 2) **Overview of core commissioned services**
 - Early Intervention Support
 - Specialist CAMHS services
- 3) **The Impact of COVID – on our children and young people and on service delivery**
- 4) **Challenges and our response**
- 5) **Performance summary**
- 6) **Next Steps**
 - Delivery of Transformation Plan
 - Summary

System wide strategic framework for provision and improvement of emotional health and wellbeing in East Sussex

Our Ambition

As a system, we are committed to providing a strong start in life for our children and young people. Our strategy is one for our whole population which should support the journey from birth to old age. This includes key objectives across prevention, integration and supporting transition:

- **Prevention:** Supporting a good start in life, including delivering a whole systems approach to healthy weight, and promoting emotional wellbeing and good physical mental health in children and families.
- **Integrated care:** enabling primary, community and acute services: Our vision is to provide more responsive support for children and young people when they experience poor mental health or are in crisis so that they can access services when, where and how they choose, embracing digital and social media.
- **Supporting transition to adult services:** A more joined-up multidisciplinary approach as our children and young people transition to adult services is essential for increasing independence.

Our **ambition** is that by 2025, all people with mental health problems in Sussex will have access to high quality, evidenced-based care and treatment delivered by integrated statutory, local authority and third sector services that are accessible and well connected with the wider community, intervene as early as possible in someone's life journey to prevent mental ill health.

Our **mission** is that we will work together as an Integrated Care System, bringing together patient, statutory, third sector and local authority expertise, to design, develop, commission and oversee high quality, innovative and integrated care and treatment pathways for people with mental health problems.

The Foundations for our Future Programme and key transformation work programmes described in the Local Transformation Plan will support us to meet this ambition and deliver the requirements of the NHS Long Term Plan.

Foundations for our Future

- In 2020 a year-long independent Sussex-wide review of children and young people's emotional health and wellbeing services was commissioned collectively by the three Local Authorities and the NHS in Sussex
- It aimed to respond to feedback and insight from those accessing emotional health and wellbeing services
- The scope included statutory bodies, community and voluntary sector, parents, carers and young people and resulted in an ambitious set of recommendations to improve the service experience across the whole system.
- Foundations for our Future recommendations include improving access, Single Point of Access and Advice, THRIVE, Mental Health Support Teams, digital, improved engagement and communications and workforce developments. They are all strategic priorities in the Local Transformation Plan.



A **Sussex-wide Strategy for Children and Young People's Emotional Wellbeing and Mental Health** is now in development. The strategy will build on and incorporate the Foundations for our Future priorities and priority work streams included in the Local Transformation Plan.

Local Transformation Plan for emotional wellbeing and mental health support for children and young people – Annual Refresh 21/22

The **Local Transformation Plan (LTP)** brings together our collective strategic approach and plans across our three places Brighton and Hove, East Sussex and West Sussex (alongside our local authorities and other partners) and refreshes our previous Local Transformation Plans that were published annually in each of the three places (Brighton and Hove, East Sussex and West Sussex).

Our plan is published on the CCG website - [Local Transformation Plan \(LTP\)](#)

The plan includes:

- Our **strategic direction** and approach
- The **needs** of our children and young people (including the impact of Covid-19)
- How we are achieving against our existing plans
- The **future plans** we have in place - this includes delivering the NHS Long Term Plan deliverables
- How we are addressing **health inequalities**
- How we can assess the impact of our plans - **measures for success**



The LTP has been the backbone of strategic planning for 5 years and needs to be seen in the context Foundations for our Future. The strategic priorities provide the road map for transformational development of children and young peoples emotional wellbeing and mental health support in East Sussex.

Local Transformation Plan 11 Strategic Priorities

1. Implement the **THRIVE** framework across Sussex – Overarching Framework
2. Further develop the **Single Points of Access** for those with Neurodiverse issues
3. Improve **access** to emotional wellbeing and mental health services
4. Further develop and expand **Mental Health Support Teams (MHST)** in schools
5. Continue to develop **Early Intervention in Psychosis provision** (for those aged 14-65)
6. Develop a system-wide integrated and expanded **Eating Disorder pathway**
7. Improve **urgent and emergency support**, including paediatric mental health liaison at the District General Hospital and the Conquest Hospital
8. Strengthening system-wide approach **to suicide prevention and reduction in self-harm**
9. Supporting children and young people with **Complex Needs**
10. Improve support for Young People (16-25) – Supporting **transition to adulthood**
11. Enabling priorities (**workforce, digital and engagement**)

▼ More detail can be found in the Local Transformation Plan - [Local Transformation Plan \(LTP\)](#)

The THRIVE Framework



- A key part of our approach to Children and Young People's Mental Health and Emotional Wellbeing is the introduction of the THRIVE framework; which represents a shift away from the traditional tiered structure of services, instead focusing on the needs of children, young people and their families.
- It aims to talk about mental health and mental health support in a common language that everyone understands.
- The Framework is needs led; meaning that children, young people and families alongside professionals, through shared decision making, define their mental health needs.
- THRIVE places an emphasis on prevention and early intervention. Services offer swift and flexible support with professionals thinking holistically about the needs of the child or young person rather than focusing on a diagnosis.
- This framework will support the transformation emotional wellbeing and mental health support for children and young people in East Sussex.

Developing our agreed outcomes for children and young people and measuring our success

Our Children and Young People's Mental Health and Emotional Wellbeing Strategy will be supported by an overarching outcomes framework which is being developed with children and young people and wider stakeholders. This will help determine what services should be planned and delivered in East Sussex and what services benefit from our Sussex wide approach. Our Foundations for our Future Programme is leading this work, coordinated by a recently appointed Sussex-wide lead focusing on outcomes for our young people together with our Public Health colleagues.

Initial discussion and engagement has highlighted the outcomes below:

- More children and young people have good mental health
- Children and young people are protected from significant harm
- More children and young people recover, meet their potential and achieve their aspirations
- Integrated, aligned and co-ordinated service delivery is in place
- Children and young people, their parents and carers are instrumental in deciding which services they will use, where and when
- Funds are invested to achieve better outcomes
- Early intervention is in place to support children and young people at the point of need
- Time taken to receive a diagnosis and treatment is reduced
- Children and young people experience a seamless transition to adult services or other support services
- More children and young people have positive experiences of care and support
- Children and young people will develop their resilience capability and know how to put this into practice

Addressing Health Inequalities

Reducing health inequalities is at the core of our system. We recognise how, within mental health and children and young people's services, health inequalities have been persistent over many years and are, in some cases, widening. We are continuing to strengthen our approach, within the context of our draft strategic framework to address health inequalities that is structured around six focus areas including early years, children and young people and mental health and learning disabilities.

Equality Health Impact Assessments underpin our work programmes to ensure that our investments are targeted to achieve greatest impact. In addition to specific actions identified in the Equality Health Impact Assessments the following actions have taken place:

- ✓ Established i-Rock Youth Hub in our areas of greatest need; i.e. Newhaven, Eastbourne, Hastings
- ✓ Ensured access to interpreting and translation services to support good access for all local people.
- ✓ SPFT have recruited a transgender, LGBTQ and inclusion training lead, and team equity champions
- ✓ Improving capture and flow of data to help identify and overcome inequalities in access
- ✓ Established Mental Health Support Teams in schools in the areas of highest i.e. The Havens; Eastbourne; Hastings
- ✓ Inequalities Participation Lead appointed to work across the ICS mental health programmes.
- ✓ Introduced a blended approach of virtual and face to face appointments – improving both digital access whilst maintaining direct contact to maximise support to those who don't have access to technology
- ✓ CAMHS Participation East Sussex (see two next slides for detail)

CAMHS Participation East Sussex

It was evident that participation work with young people around Mental Health services was important to continue, despite the pandemic continuing. From March 2021 - December 2021 young people from East Sussex have been making recommendations to inform the work of the East Sussex Mental Health Support Team service by taking part in an online youth forum.

The young people who are members of the forum have lived experience of using mental health services. We have 9 group members, 3 girls, 4 boys and 2 trans young people.

Young People have given their views on:

- How to encourage more boys to access the service.
- What barriers there are to using the service and what the potential solutions to these barriers could be.
- How to have conversations around identity with young people registering for the service.
- How to use social media effectively to promote the service to young people.

These conversations will be continuing until March 2022, with young people in the forum also exploring:

- What the self referral process looks like in schools.
- What the best delivery style for the psycho education workshops in schools could be.
- Reviewing a boys survey that they have created to look at themes around boys referral uptake.
- Continuing to think about how to use social media effectively.

CAMHS Participation East Sussex – Download group

Prior to the pandemic, Download was a monthly 2 hour participation forum meeting in Eastbourne as a central location to cover East Sussex. However during the lockdown, young people said they needed to be able to meet regularly to cope. For many Download members it represents a very important space in which to gradually gain social confidence. CAMHS have therefore held Download forums every week since the 1st April to provide additional support to young people.

Young people have shared their views on accessing online groups:

- Maintaining their own privacy, both within the group (through the use of the chat function, blurring backgrounds or turning cameras off) and within their home environment (recognising that voices can be heard in other parts of the house)
- Ways of introducing new members to the group

In addition, there are now two peers co-facilitating the meeting with the team.

Examples of topics worked on during Download meetings include:

- Coping with loss
- Managing friendships
- Facing an coping with change
- How to manage feeling 'stuck' in life
- Discrimination - how can CAMHS understand how their life is affected by discrimination as they start a journey with CAMHS

Year 1 delivery: 2021/22 Mental Health Transformation Plans and additional investment

The operational delivery of our plans for children and young people are being delivered as part of our ICS Mental Health Collaborative, system wide, transformation programme. To underpin this, we plan to spend a total of £9.87m in East Sussex in 2021/22 on children and young people's emotional wellbeing and mental health services.

The table below summarises our **additional investment** for this year (2021/22) aligned to our strategic priorities outlined in slide 8, to improve access to services (early intervention and specialist) and outcomes and experience for our children and young people in East Sussex.

Priority Area	Investment
Expanding capacity and access, including improving access to CAHMS, Children with Complex Needs, Neurodevelopmental services, and Early Help services	£943,000
Mental Health Support Teams in Schools	£1,104,000
Eating Disorder Services	£130,000
Urgent and Emergency Support	£231,000
Total	£2,408,000

Overview of core commissioned services

Introduction to Core Commissioned Services

The following slides will provide an overview of the core commissioned service offers in East Sussex. *Please note there are further support offers for children, young people and families that are not commissioned by the CCG but provide emotional wellbeing support; e.g. school health.*

The core services are:

Early intervention – getting advice and getting help

- School Advisors in SEND and Mental Health Support Teams
- iRock Youth Hubs in Newhaven; Eastbourne; Hastings
- Primary Mental Health Worker service
- E-motion online counselling
- Single Point of Advice

Specialist Mental Health Support – getting risk support

- Specialist CAMHS



Early intervention – getting advice and getting help (1 of 3)

Schools Advisors

The Schools Advisors in East Sussex SEND provide training, supervision and advice to all schools in East Sussex on all matters relating to emotional wellbeing, mental health and the 'whole school approach' to mental health. Together with Sussex University and young people, evidence based guidance for schools was developed for schools based implementation. <https://www.boingboing.org.uk/schools-mental-health-guide/>

“Our aim is to enhance emotional and mental well-being for all, to enable each child, family and professional to be the best they can be.”

Mental Health in Schools Team (MHST)

Since September 2019, 4 MHSTs have been implemented in East Sussex, covering the Havens; Eastbourne; Hastings (five are planned). The MHSTs focus on the areas of greatest deprivation and need. MHSTs provide brief emotional wellbeing and mental health interventions; provide advice about children's' mental health; and promote the whole school approach to supporting wellbeing and mental health.

- 1:1 interventions in 42 primary and secondary schools and 3 Special Schools. This is increasing in September to 51 schools and 16+ East Sussex College Group.
- Up to ten sessions of CBT approaches on topics such as Low Mood, Anxiety, Phobias, Healthy Eating, Worry and Sleep Hygiene
- Psychoeducation workshops for children and young people of all ages in schools
- Training for school staff on mental health and emotional wellbeing topics
- Supporting schools with Whole School Approaches to Mental Health and Emotional Wellbeing
- Enabling children and young people to get the right support
- Parents and carers of children accessing the service are supported by the EMHPs as much as possible

Early intervention – getting advice and getting help (2 of 3)



i-Rock Youth Mental Health Service

January 2021 – December 2021

Sussex Partnership
NHS Foundation Trust



In this 12 month period i-Rock has provided

1314

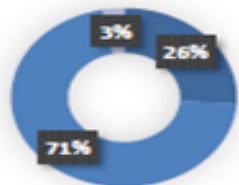
Contacts for young people,

Including 638 completely new young people accessing i-Rock directly.



The most common age of young people accessing i-Rock was **14-17** years; an age at which young people often experience significant life changes.

Gender

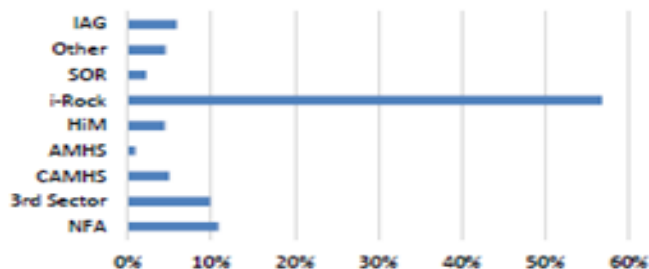


■ Male
■ Female
■ Other



Young people from all BAME groups access i-Rock. 82% White British, 18% BAME, compared to the 5% East Sussex population.

Transitioning into other services



85% of respondents said they 'would recommend i-Rock to a friend.'



4% of young people received the 'fear of failure' brief intervention and **2%** received the 'suicidal thoughts' intervention.

'GP gave feedback that i-Rock was universally seen by the young people who came through as a really positive and helpful place to go.'



'Thank you so much for all your help. B has definitely felt better with your help.'

'We have always, even before COVID-19, signposted our students as we feel that it is an exceptional service that is on offer and we always have good feedback from students who have accessed it.'

Early intervention – getting advice and getting help (3 of 3)

Primary Mental Health Worker Service

- Provided by SPFT, this service delivers short term interventions for young people with moderate mental health issues; for example short term intervention for young people and also support to parents in managing anxiety, low mood and emotional regulation.

E-motion online counselling

- Since 2016, young people in East Sussex access E-Motion, online counselling, provided by Impact Initiatives. Although self referrals are encouraged, the majority are signposted to the service by their GP or School. Approximately 200 young people used the service in 21/22.



Single Point of Advice (SPOA)

- Based at St. Mark's House, Eastbourne, East Sussex SPOA is the joint central point for all Children Service and CAMHS referrals. All emotional wellbeing and mental health referrals for young people in East Sussex for whom further support is indicated are jointly screened for advice or support or specialist service.

Specialist CAMHS (Getting more help/ getting risk support)

Specialist CAMHS services across Sussex are provided by Sussex Partnership NHS Foundation Trust.

Specialist CAMHS provides a range of mental health direct interventions with psychiatry and medication where required as well as an urgent response where there is a mental health crisis services which include:

- Community targeted services for diagnosable mental health issues such as low mood, anxiety, depression, relationship with food, self harming behaviour, PTSD, etc.
- Specialist services for vulnerable groups such as children in care, children with learning disabilities.
- Contribute to the diagnosis of neurodiverse conditions such as ADHD, ASC
- Urgent help Service for those in crisis, at risk of admission or stepping down from admission
- Intensive home treatment services
- Early Intervention psychosis (ages 14 to 65)
- Family eating disorder services
- Day services for those stepping down from inpatient admission
- Child forensic and adolescent mental health services (FCAMHS)
- Specialist inpatient services at Chalkhill

Impact of COVID on children and young people and the services they access

Impact of COVID on Children and Young People – National Picture

The NHS Confederation Mental Health Network - Reaching the Tipping Point (August 2021)

- The report into children and young people's mental health outlines the significant increases in need for mental health support for children and young people across all services – from primary care to NHS specialist mental health services, voluntary sector, independent sector, and digital providers including also pressures on acute trusts and local authorities.
- In particular, the report emphasises:
 - The need for support for eating disorders
 - The need for continued transformation of services (especially support in schools and educational settings)
 - A greater focus on early intervention and addressing the social determinants of mental health
 - The need to respond to workforce challenges and bringing services together across the whole system.

Nationally, the evidence shows that whilst initial stages of Covid-19 pandemic led to a general trend in decreased use of children and young people's mental health services, the number increased with the second wave.

The longevity and frequency of lock-down led to children and young people spending extended times at home with limited access to play or socialisation and face-to-face education; both key and important to childhood development. Children and young people with pre-existing mental health challenges or disabilities, those from low-income families or with experience of trauma and domestic abuse also became at greater risk of developing mental health and emotional issues. These, coupled in some cases, with a delay in seeking support has led to an increased need for services.

Impact of COVID on Children and Young People – Local position

In 2020, we worked with Young Healthwatch to explore young people's experiences of Sussex health and social care services during the Covid-19 pandemic. We have also asked young people: about their preferences towards the future of health and social care services, what have been the biggest challenges faced during the pandemic and how these have affected their lives.

Key impacts were:

- Effects of social isolation, difficulties accessing mental health support for pre-existing conditions during lockdown, and maintaining a routine while schools, colleges, and universities are closed.
- Loneliness, acute and increased anxiety levels, insomnia and difficulties with relationships.
- Anxiety about digital and phone consultations and concerns about expressing themselves in phone or digital consultations. While the majority were happy to receive online support, 26% did not want to engage with remote support.
- Children and young people found it difficult to have privacy at home which was a challenge for video consultations.

[Young people's preferences towards the future of health and social care services in Sussex - Youth Survey 2020](#)

Impact of COVID on Children and Young People – local services

- The impact on the mental health and well-being of young people has been felt across the system, in schools, social care, 3rd sector, primary care as well as the acute sector
 - Schools are reporting an increase in the number of children exhibiting mental health issues in the classroom has risen from 1:10 to 1:6. However, interventions reduced during periods of school closures
 - There has been an increase in the number of number of young people referred into specialist CAMHS services, including the Sussex wide eating disorder service, since the second wave of the pandemic. This has had an adverse impact on access to services and led to increases in waiting times and waiting list sizes together with an increase in service caseloads.
 - There has also been an increase in the acuity and complexity of presentations as evident by the increase in Children and Young People presenting in A&E, the increase in admissions to paediatric wards and the number of patients waiting a Tier 4 specialist CAMHS bed in Sussex.
- System partners working together to identify and manage clinical risk.

Single Point of Access (SPOA)

Children's Services Single Point of Advice

SPOA Contact outcome	Feb 2021	Mar 2021	Apr 2021	May 2021	Jun 2021	Jul 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Year To Date	Rolling year	Previous rolling year
<Unknown>								1					1	1	
								0 %					0 %	0 %	NaN
CAMHS Referral	151	324	194	266	244	230	127	188	164	312	264	374	2,363	2,838	1,987
	18 %	27 %	20 %	23 %	20 %	20 %	16 %	16 %	14 %	23 %	23 %	29 %	21 %	21 %	18 %
Level 1 / 2 Information and Guidance	367	382	396	459	457	426	324	467	545	484	389	379	4,326	5,075	4,713
	44 %	32 %	41 %	39 %	37 %	37 %	40 %	39 %	46 %	36 %	35 %	30 %	38 %	38 %	43 %
Level 3 / 4 MASH	43	81	52	63	81	79	79	92	56	87	101	117	807	931	708
	5 %	7 %	5 %	5 %	7 %	7 %	10 %	8 %	5 %	6 %	9 %	9 %	7 %	7 %	6 %
Level 3 Early Help Referral	86	139	104	134	127	113	66	113	90	114	87	122	1,070	1,295	1,060
	10 %	12 %	11 %	11 %	10 %	10 %	8 %	9 %	8 %	9 %	8 %	10 %	9 %	10 %	10 %
Level 4 MASH	183	266	224	247	316	289	208	343	330	342	284	286	2,869	3,318	2,482
	22 %	22 %	23 %	21 %	26 %	25 %	26 %	28 %	28 %	26 %	25 %	22 %	25 %	25 %	23 %

This table demonstrates the increase in referrals being received and triaged into appropriate services by the integrated single point of Advice in East Sussex in the last 12 months compared to the previous 12 month time period.

Children and Young Peoples Wellbeing Service – waiting times

The service, which is for young people with mild to moderate health needs, has seen an increase in the number of referrals for support. Activity levels have exceeded the indicative plan since March 2021, whilst referrals during the last quarter (October 2021 – December 2021) were on average 17% above the planned target.

There are currently 2018 young people waiting for interventions across the 20 different treatment pathways which are currently offered by the service. The wellbeing services which have seen the greatest increase in referrals, adversely impacting on the waiting times are:

- Autism Spectrum Condition (ASC) See and Treat
- Cognitive Behavioral Therapy (CBT)
- Wellbeing Assessment Age 4-12
- Counselling Age 4-12
- Counselling Age 13-24
- Play Therapy See and Treat

All referrals are subject to clinical triage in SPOA to ensure appropriate prioritisation and pathway.

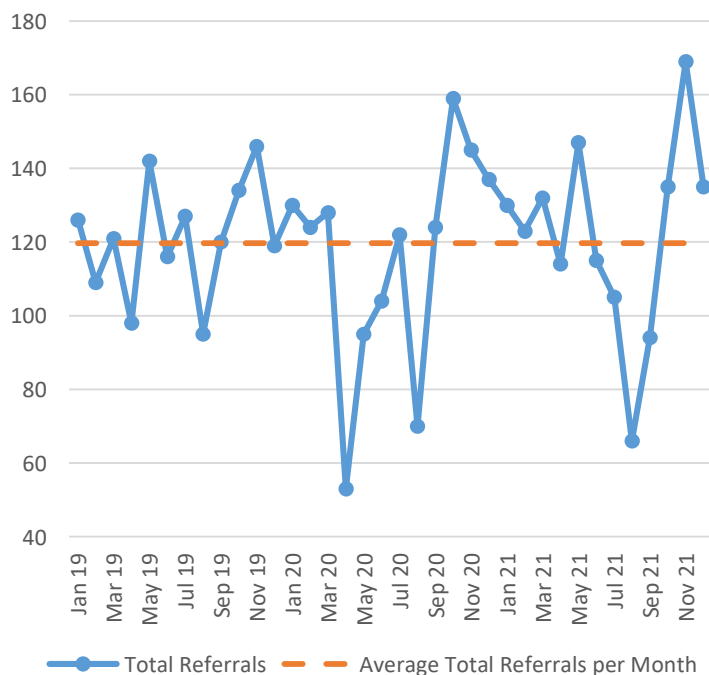
Increased investment has been prioritised this year and proposals to expand services further and respond to the increase in referrals have been put forward as part of the 2022/23 planning process.

Specialist CAMHS - total and accepted referrals

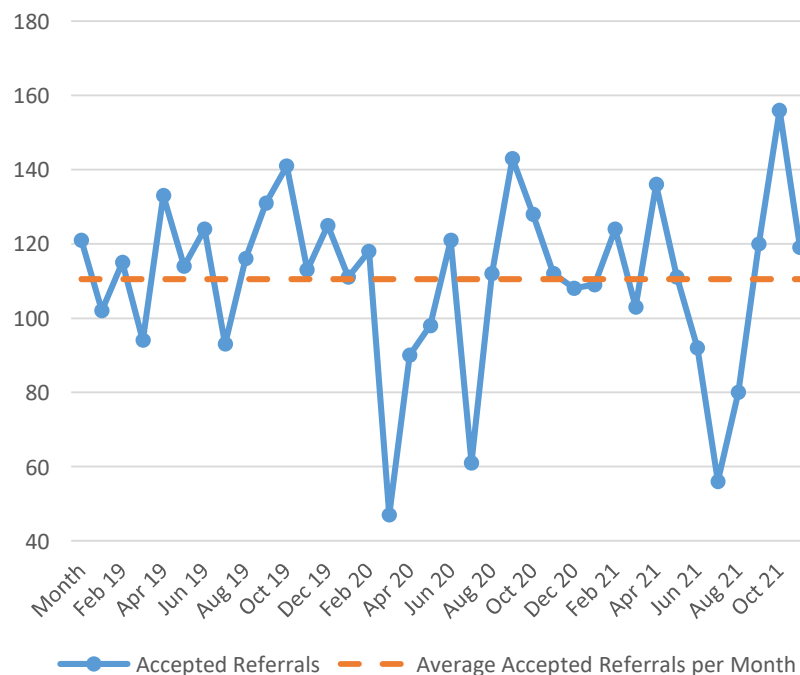
Month	Total Referrals	Change	Accepted Referrals	Change
Nov-19	146	-	141	-
Nov-21	169	16%	156	11%

Referral rates have seen an increase since the second half of 2020 with 11 out of the last 16 months seeing higher than average numbers between September 2020 – December 2021 which has impacted on the number of young people waiting for assessment and treatment.

Total Referrals Since 2019



Accepted Referrals Since 2019

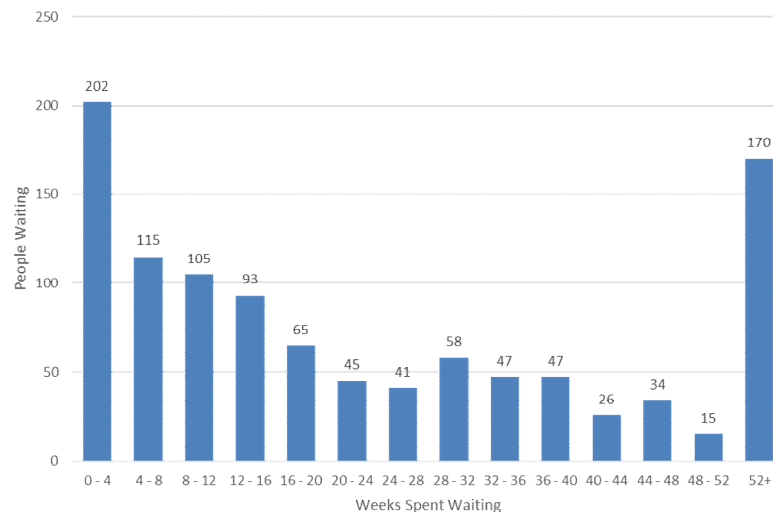


Specialist CAMHS - number of young people waiting for an assessment

These tables detail the total number of young people waiting for assessment for a specialist CAMHS service in East Sussex by weeks waiting.

The table below demonstrates that the number waiting has increased significantly since the autumn 2020 which corresponds with the increases in referral experienced and the need to support the increase in number of young people receiving interventions from within the service.

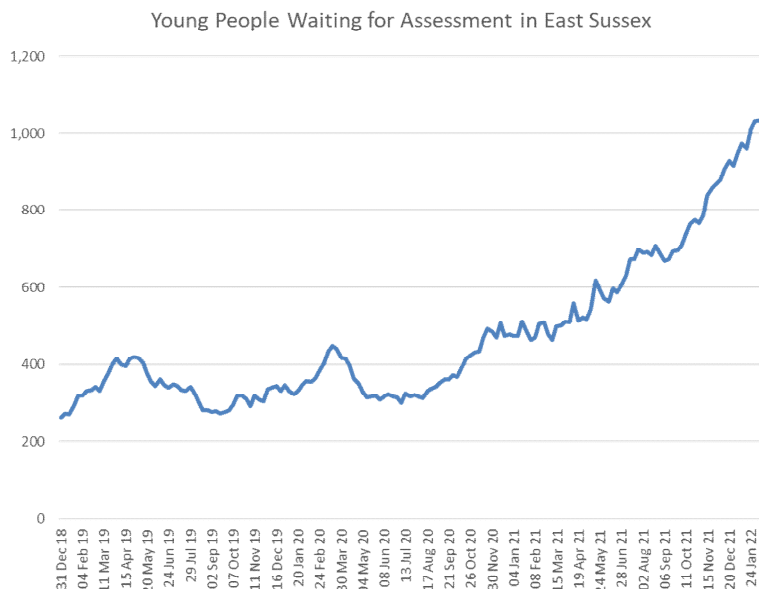
Those waiting the longest are predominantly young people waiting for an autism spectrum condition or attention deficit hyperactivity disorder assessment where we have some of our greater capacity gaps.



There is a significant programme of work with associated investment to expand the capacity of these services and enhance the current neurodiverse pathways.

For children and young people waiting, the Trust has put in place good clinical and quality oversight and measures to support children and young people waiting for care. This includes an online drop-in group for all families who are awaiting an ASC or ADHD assessment.

Proposals to further expand the service capacity have also been included in the 2022/23 planning process.

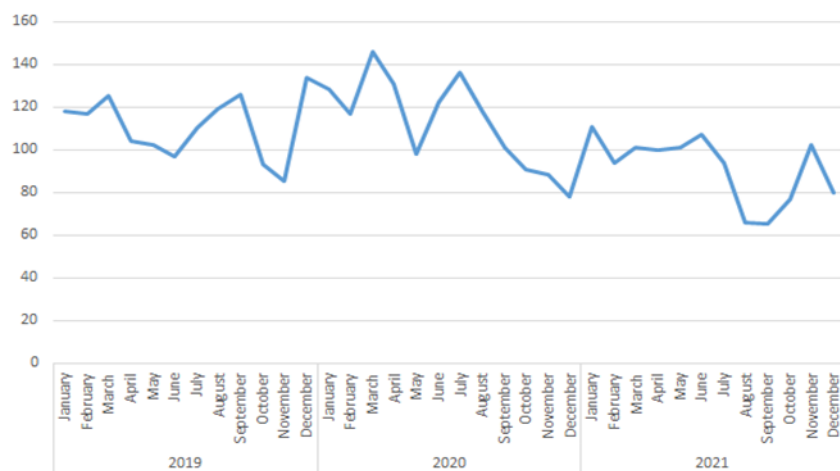


Specialist CAMHS – current treatment caseload & number of discharges

The table on the right shows the overall number of young people who have been assessed and are receiving treatment from an SPFT CAMHS service. In line with national trends, this reduced during the first wave of the pandemic but has seen a significant increase since September 2020. This is due to both the increase in referrals and the slight reduction in discharges from the service since the autumn last year which has had a corresponding impact on the total treatment caseload.

A series of measures have been put in place to respond to this as summarized in slides 32 – 34.

Discharges since 2019



Treatment Caseload Since 2019



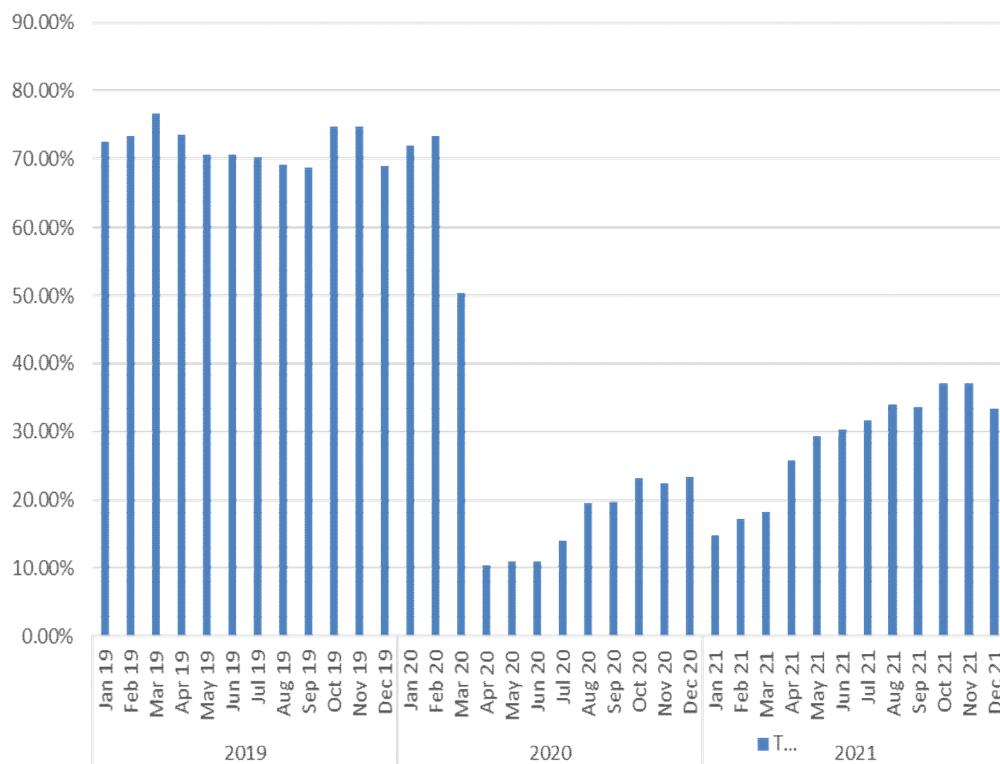
The table on the left shows the number of young people discharged from the service by month since January 2019. As evident from the graph, discharge activity has been trending down slightly, since August 2020.

One reason relates to young people requiring treatment interventions for longer periods of time, reducing the discharge rate.

Specialist CAMHS - percentage of contacts which are face-to-face

The Trust responded very promptly to Covid to provide virtual contacts to ensure continued service delivery.

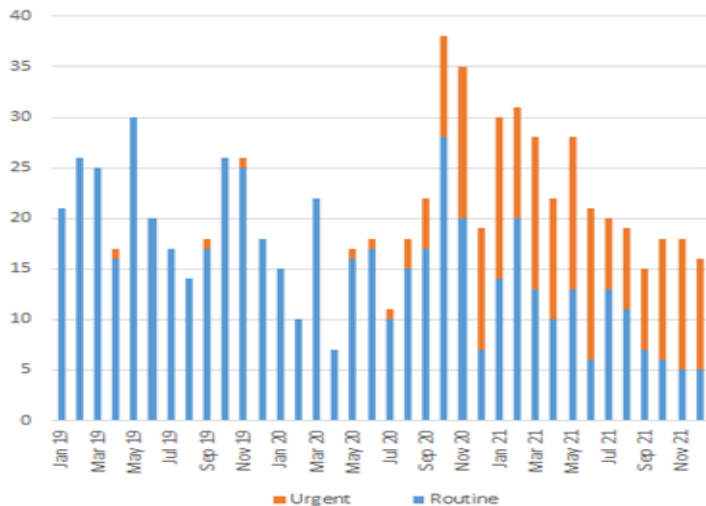
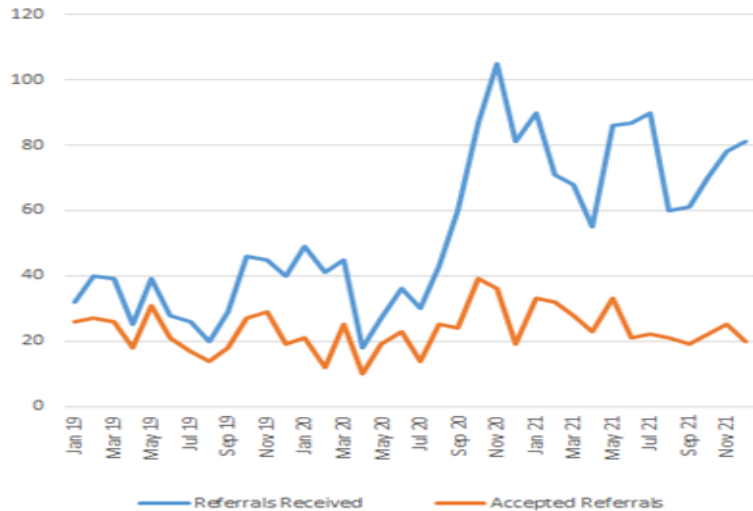
% Contacts Face to Face since 2019



Month	%F2F	Change
Nov-19	75%	
Nov-21	37%	-38%

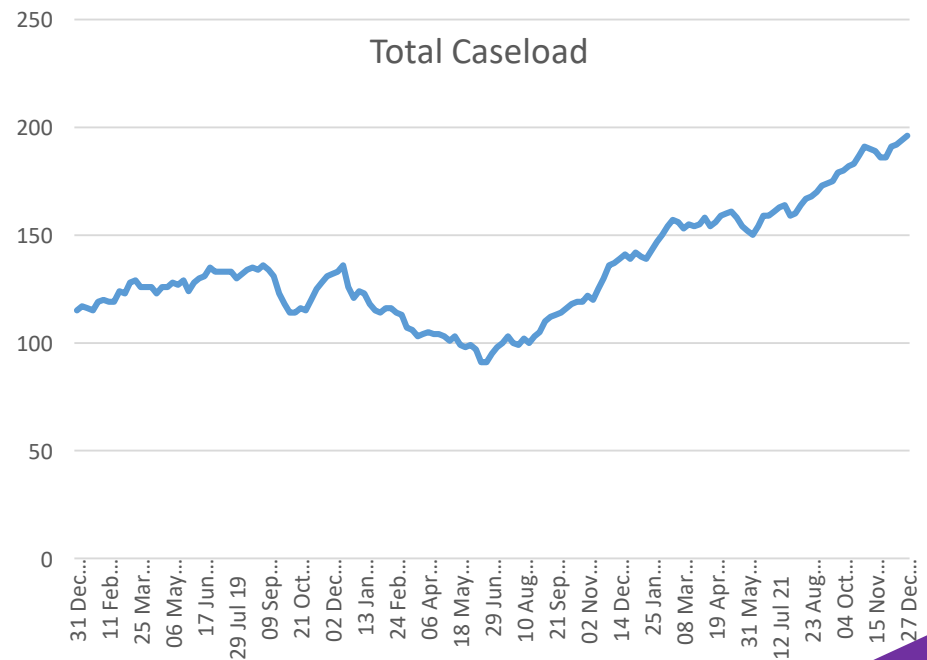
- Face to Face Activity increased when lockdown measures were eased.
- Engagement with young people identified that some have a preference to access virtual appointments.
- The Trust therefore committed to providing a blended approach and will continue to offer choice to young people and ensure that virtual appointments are now integrated into the new normal.

Specialist CAMHS - Sussex Family Eating Disorder Service – Referrals & Caseload



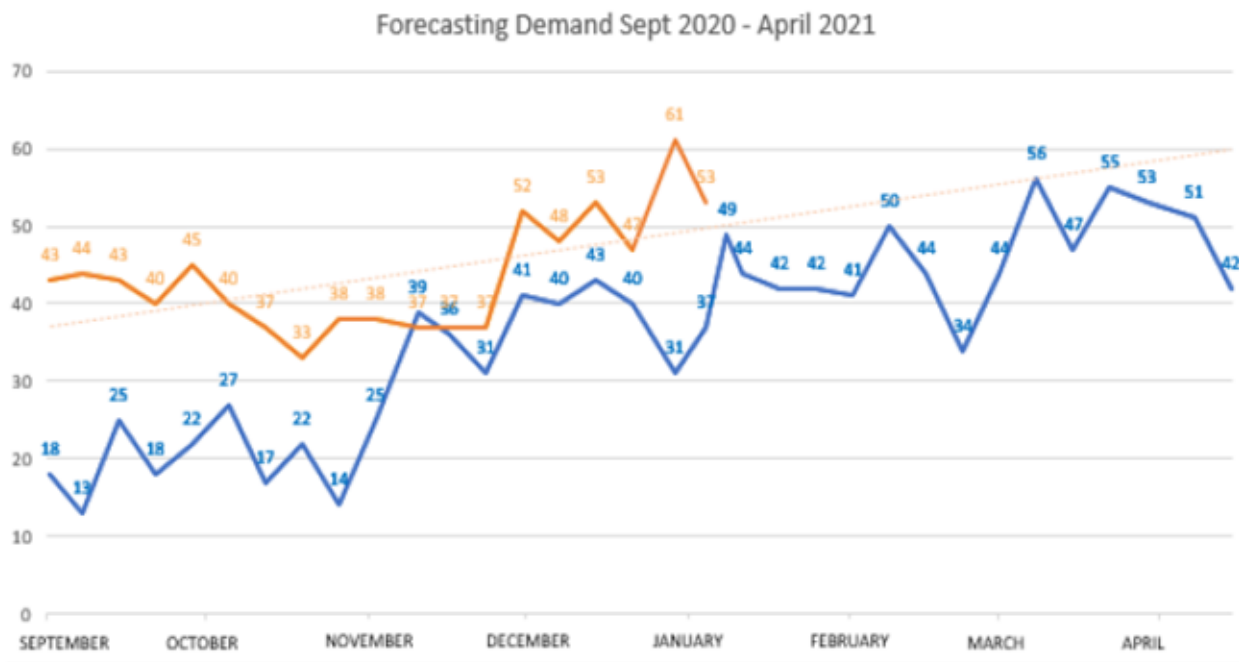
In line with national trends, the service has seen a significant increase in both urgent and routine referrals since late summer which has resulted in a corresponding increasing caseload.

A significant programme of work, and associated investment, has been put in place to both increase the available capacity, embed GP liaison to support referral processes and enhance and improve the current pathway and service offer.



NHSE South East Region – CAMHS Tier 4 inpatient services

The graph shows the increase in referrals for children and young people to access CAMHS Tier 4 services in the South East from September 2021 in comparison to the same period last year, indicating the increasing complexity of children and young people accessing services. It includes young people waiting at home as well as those in an acute hospital bed or already in a CAMHS inpatient setting but waiting for a more appropriate placement. This does not include the no of young people admitted to our acute paediatric hospitals who do not require very specialist T4 inpatient services.



As evident from the graph, this increase in is predicted to continue.

Challenges and Our Response

Challenges

Although plans are in place to develop and increase children and young peoples emotional wellbeing and mental health support there are a number of challenges in delivering the plans:

- Workforce expansion and development – we require a skilled workforce to deliver our plans and we have been unable to recruit to key clinical roles. This issue is recognised nationally and we are working to address the workforce gap.
- Covid-19 has not only had a significant impact on the emotional wellbeing and mental health of children and young people it has also had an impact on service delivery. Both in the way services are delivered (face to face or virtually) and the ability to deliver services when the workforce is reduced due to staff absence.

Services are also dealing with:

- Increased levels and complexity of need – a combination of Covid-19 suppressed and generated activity. This adds pressure to already stretched services and because of the level of need young people are often remaining in the service longer leading to increased case loads. This has led to increased waiting times in particular for Cognitive Behavioural Therapy (CBT) and ASCC and ADHD assessment.
- There has also been an increase in the number of young people presenting in a crisis and requiring acute hospital admission

Summary of our response (1 of 3)

Our 2021/22 transformation and additional in-year investment plans of £2.408m have been targeted to:

- Deliver the NHS Long Term Plan and local priorities
- Address underlying capacity gaps and increase access to services
- Respond to the challenges associated with the adverse impact of Covid-19 on our children and young people and service, in particular
 - Longest waiting lists and length of wait
 - Access to eating disorder services
 - Better supporting young people in crisis

This work has focused on:

- Workforce expansion and development
- Pathway improvements to increase capacity and begin to address the long waits
- Development of new ways of working
- Improved access to information and guidance

Summary of our response (2 of 3)

Examples include:

Workforce Expansion and Development

- Successfully recruited to additional clinical roles to increase our local capacity to deliver services
- Established a SPFT Talent Acquisition Manager to provide expert help around advertising, campaigns etc.
- Increased use of social media, for example i-Rock Instagram Life and Facebook
- Invested in the development of professional leadership, including Neurodevelopment pathway lead
- Introduced new initiatives e.g. Recruit To Train and approved/responsible clinician pilot

Pathway development:

- Streamlined the clinical model for neurodevelopmental pathway in advance of moving towards a new best practice target operating model
- Developed a new stepped care model will include CBT groups as first line of intervention
- Agreed plans to enhance home treatment offer and establish a specialist day service for young people with an eating disorder
- Implemented a new clinical model for children and young people in crisis

Summary of our response (3 of 3)

New ways of working:

- Introduced a blended offer of digital and face to face contacts to ensure continued access to services
- Introduced group sessions to support increases in capacity
- Early Intervention in Psychosis service has adopted the CARMEN project pilot, a finger-prick blood test option for testing for cardio-metabolic side effects of anti-psychotic medication, in order to reduce barriers to physical health assessment for service users and deliver in-house.
- Introduced physical health clinics and group sessions for young people with eating disorders and their families or carers

Communication:

- Extended the Sussex Mental Healthline to people of all age (including young people, their families/carers); SPFT 24/7 triage service people experiencing emotional wellbeing issues and distress/crisis.
- Set up E-Health platform to support young people access right support and interventions;
<https://www.minddistrict.com/ehealth-platform>
- Published a clear [online guide](#) on how to get help from Sussex mental health and emotional wellbeing services in each local authority area, for children and young people with mild to moderate and severe problems.
- Improved information access via our website <https://sussexcamhs.nhs.uk/> which details referral criteria as well as information and advice about help and support for children, young people, families and professionals.

Performance

National access standards for children and young people

There has been an increase in the ambition of a number of national access standards in 2021/22 and new standards have been introduced.

These are summarised in table below. However, national reporting of the new urgent care and 18-25 measures have not yet commenced.

Status	Service Area	21/22 Standard
Existing	Children and young people eating disorders	95% target of people seen within 1 week of urgent referral 95% target of people seen within 4 weeks of routine referral
Existing	Access to CAMHS	35% of YP having 2 contacts within the last 12 months
New	Children and young people under 18	Increase access of under 18s by 292 to 10,085
New	Young people between 18-25	285 CYP accessing 18-25 youth appropriate services
New	Urgent Care	Increase coverage of 24/7 crisis provision from 37% to 57%

Latest validated performance against national access standards for children and young people

This table provides the most up to date validated / reported data against the national standards for children and young people's services.

This demonstrates that performance is compliant for access to CAMHS services, but is worsening for referrals into the Sussex Family Eating Disorder service as at quarter 3, 2021/22.

A range of mitigating actions have been put in place which, together with some successful recruitment have meant that the **in-month** performance improved to **66.7% for urgent referrals** seen within 1 week in November 2021 with a further improvement to **80%** in December 2021.

Measure Name		Sussex				East Sussex	Date
		Current Period	Previous Period	Local Plan	National Plan	Trend	
CYP with eating disorders (ED) (routine)		40.9%	59.5%	47.5%	95.0%	↓	Q2 21/22
CYP with eating disorders (ED) (urgent)		34.3%	43.0%	65.1%	95.0%	↓	Q2 21/22
Access to CAMHS	2 Contact Rate	38.7%	38.1%	37.6%	35.0%	↑	Sept-21
	1 Contact	15,010	14,540	12,509		↑	Sept-21

Next Steps

Priorities and Investment Planning for 22/23

Planning for 2022/23 and 2023/24 is currently in progress and being led through the strategic approach of our Foundations for our Future Programme. This is a multi-agency process, informed by local stakeholder including children and young people and their families and carers. Plans have been developed and a prioritisation is underway to ensure the investment plans best address need, are within our resource allocation, and continue to work towards our collective ambitions. The plans include:

- **Extend Single Point of Access (SPOA East Sussex):** establish Neurodevelopment referrals triage hub; for young people up to age 18.
- **Early Help as part of THRIVE framework** - increase capacity in the Primary Mental Health Service to improve access for children and young people to earlier help and emotional wellbeing support.
- **Eating Disorders** – further expansion of the eating disorders service to increase treatment provision.
- **Specialist CAMHS** – further expansion with a focus on increasing capacity within the neuro-developmental pathway and increasing the provision of cognitive-behavioural therapy (CBT) to continue to reduce waiting times.
- **Urgent and Emergency Support** –develop alternative crisis provisions for children and young people that aim to provide early support to children and young people in self-defined crisis that will complement existing crisis services.
- **Transition (16-25 year olds)** – a focus on care leavers and students as specific programme priorities but with an intention to ensure that all transformation work streams account for improving transition in their development. This will include the piloting of ARRS roles specifically for the 16-25 age range.
- **Suicide prevention and reducing self-harm** – as part of planning for 2022/23 - 2023/24, ensure developments to support suicide prevention and self-harm reduction are incorporated in line with our Sussex wide strategic approach.

So in summary.....

- Our **ambition** is that by 2025, all people with mental health problems in Sussex will have access to high quality, evidenced-based care and treatment delivered by integrated statutory, local authority and third sector services that are accessible and well connected with the wider community, intervene as early as possible in someone's life journey to prevent mental ill health.
- Local Transformation Plans integrated with the ambitions of the Long Term Plan will improve access to and quality of service provision along a pathway of need.
- There is a commitment to working with families to ensure the best outcomes for our families. Learning from families and best evidenced based care will ensure quality future proofed services are developed and sustained.
- The workforce will be skilled and valued supporting recruitment and retention.
- Data sources will be integrated into service development decision making to best utilise resources and understand levels of need.
- Challenges and opportunities will be understood in a context of changing environments and technologies and be inclusive of the needs all service users.
- There is optimism to deliver high quality services with a well trained healthy workforce.