

OPEN

Adults and Health Committee

25 September 2023

Commissioning Children and Young Peoples Emotional Health and Wellbeing Service

Report of: Shelley Brough, Acting Director of Commissioning

Report Reference No: AH/07/2023-24

Ward(s) Affected: All

Purpose of Report

- 1 The Emotionally Healthy Children and Young People Service (EHCYP) was commissioned in 2019 to deliver early help support, training and interventions to children, young people their families and professionals. This service is currently being recommissioned with a new contract start date of 1st April 2024. This report details the engagement and coproduction that underpins commissioning intentions and provides evidence to demonstrate the need to invest in early help emotional wellbeing support services for children and young people (CYP).
- 2 The commissioning work undertaken aligns with the priority within Cheshire East Council Corporate Plan: ‘a Council which empowers and cares about people’. It also aligns with the Joint Local Health and Wellbeing Strategy for the population of Cheshire East 2023/2028: ‘our children and young people experience good physical and emotional health and wellbeing’. The model presented is underpinned by the outcomes detailed in Cheshire East Children and Young People’s Plan (2022 – 26), which focus on providing CYP access to help when they need it, to prevent problems from getting worse.

Executive Summary

- 3 Cheshire East Council has commissioned the EHCYP service since 2019. The service aims to equip educational settings with the tools and knowledge required to prevent CYP emotional health needs escalating and allow them access to support at the earliest opportunity. The

service has trailblazed significant advances in terms of detection and management of CYP mental health in schools, but there remains a lack of capacity in early help therapeutic services.

- 4 Since the original EHCYP commission in 2019, there has been evidence of increasing levels of mental health need and demand in CYP across Cheshire East. Furthermore, there is growing body of evidence that the COVID-19 pandemic has negatively impacted not only on mental health in some of our younger residents, but also on the risk factors that lead to mental health problems if not addressed early.
- 5 This report details the journey of coproduction and explores current need and demand for services, upon which commissioning intentions will be based. The report highlights key findings from the Joint Strategic Needs Assessment (JSNA) and couples this with qualitative feedback gathered during an extensive engagement exercise, which ensures that the resulting service model creates system change to accurately reflect need and significantly improve outcomes for CYP and their families.

RECOMMENDATIONS

The Children and Families / Adults and Health committee is recommended to:

1. To approve recommission the EHCYP programme with a focus on early help and prevention for children and young people, to ultimately reduce demand on statutory social care and mental health services
2. To delegate authority to the Director of Commissioning to award the contract(s)

Background

- 6 The EHCYP service was commissioned in 2019 for 4 years following the success of the Emotionally Healthy Schools (EHS) Programme, its predecessor. The aim of the service was to achieve efficiencies by integrating education settings with children's specialist mental health providers, to create a clearly defined universal and targeted offer. Additionally, the EHCYP service extended its reach into early years education and primary care, as well as providing a digital offer and parenting support.
- 7 In 2019, the EHCYP service was awarded to Cheshire and Wirral Partnership (CWP) who subcontracted to locality-based therapeutic support providers: Just Drop In (north), Visyon (central) and CLASP (south). Additionally, Kooth were commissioned to deliver borough-wide digital access to online counselling and support.

- 8 The contract was awarded with an initial 2-year term, with two possible 1 year extensions. Funding was enhanced for the first two years to focus resource on training and development in education settings to embed an infrastructure which empowers professionals to recognise and respond to emotional harm or mental health concerns. In years 3 and 4, funding was lower as the service shifted focus to providing therapeutic interventions for CYP and their families, including counselling and group-based support.
- 9 The EHCYP service model used a 'train the trainer' approach to develop sustainable structures within education settings, where the emotional health of CYP is front and centre commissioned. The service aimed to provide schools with improved access to early support and specialist mental health advice, in addition to access to a menu of evidence-based policies, procedures and tools to increase CYP resilience. The service also pioneers a whole-school approach to creating emotionally healthy environments and facilitated multi-agency working to encourage a system-approach to early help. Work in schools was significantly affected by the Covid-19 pandemic whilst referrals for CYP individual support rose exponentially during lockdown, so extra resource was provided to therapeutic support providers.
- 10 In 2017, the government outlined its ambitious plans to address CYP mental health in 'Transforming Children and Young People's Mental Health Provision: a Green Paper'. The EHCYP model was designed to complement two main commitments within the programme:
 - Establishing Mental Health Support Teams (MHSTs) in education settings, including Educational Mental Health Practitioners who deliver evidence-based interventions onsite and provide a link to other CYP mental health services
 - Provide Senior Mental Health Lead (SMHL) training for every eligible educational setting in England by 2025
- 11 In Cheshire East, we have 34 MHST's situated in Crewe and Macclesfield settings (areas experiencing the highest levels of deprivation) with another three waves planned. 66% of Cheshire East schools have a trained SMHL and a network has been established to share best practice and create a sustainable model for improving wellbeing in education.
- 12 Despite this investment, the increase in demand and complexity in CYP presentations has resulted in long waiting lists for preventative therapeutic interventions, resulting in a domino effect into specialist and crisis services. Between April and June 2021, the EHCYP service provided therapeutic support to 220 CYP. Within the same quarter in

2022, this figure rose to 294. Providers are seeing increased complexity in presentations, with one provider commenting that over 50% of referrals contained a 'cause for concern'.

- 13 Whilst many CYP across England experience good mental wellbeing, in 2022, an estimated 18% of children aged 7 to 16 years and 22% of young people aged 17 to 24 years had a probable mental disorder (the 2021 census shows there are 85,292 children aged 0-19 years living in Cheshire East). Overall prevalence rates for children and young people aged 7-19 increased from 11.8% in 2017 to 19.8% in 2022, meaning that in 2022, there was somewhere between 8,606 to 13,525 CYP in Cheshire East with a probable mental health disorder¹.
- 14 Data supplied internally shows that mental wellbeing is a key factor within assessments for CYP and families presenting to social care. 25% of children in need present with mental health issues, rising to 28% for CYP on a Child Protection Plan. Similarly, 44% of parents with a child in need cite mental health concerns, rising to 59% of parents involved in child protection arrangements. During 2021/22, emotional wellbeing was a cause for concern in 36% of children in care across Cheshire East, which is higher than recorded in 2014/15². Addressing CYP and familial emotional wellbeing at the earliest opportunity will have a long-term effect of reducing demand on statutory services.
- 15 The legacy created by the covid-19 pandemic should not be underestimated, with research showing that 80% of CYP with existing mental health needs agree that their condition has worsened since lockdown (YoungMinds, 2022). The most significant impact was felt by CYP who were transitioning between schooling stages. Since returning to 'normality', CYP feel pressured to "go back to the way things were", but state they have lost their "identity", with this especially felt in migrant communities.
- 16 Good education is an important protective factor for emotional and mental wellbeing; however, mental health is the leading cause for school absence and medical needs tuition. In the academic year 21/22, Cheshire East's Medical Needs Tuition Team supported 106 CYP, of which 76% were referred due to poor mental health³. CYP told us that social isolation and disjointed transitions have increased their anxiety

¹ Mental Health of Children and Young People in England 2022 - wave 3 follow up to the 2017 survey. Official statistics, Survey. 29 November 2022. Available from: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2022-follow-up-to-the-2017-survey#:~:text=Key%20findings,between%202020%2C%202021%20and%202022> (Accessed 22 December 2022)

² *Department for Education* 'Office for Health Improvement & Disparities. Public Health Profiles. [26/07/23] <https://fingertips.phe.org.uk> © Crown copyright [2022]

³ Email correspondence (Tuition Team Manager, 09/02/23)

around school, but there is a distinct lack of support for emotionally based school non-attenders.

- 17 As of January 2022, there were 3,412 CYP in Cheshire East with an Education, Health and Care Plan (EHCP), of which 23.7% were attributed to social, emotional and mental health⁴. The NHS Long Term Plan promises additional resource for mental health and wellbeing in schools, but the scale and speed of the planned improvements is simply not sufficient, so we must take steps locally to create clear pathways for schools to access bespoke support.
- 18 School staff report that screening tools and resources for addressing CYP emotional health are in abundance, but there is a lack of repository for evidence-based, tried and tested tools. Similarly, they told us that there is a lack of support for risk management and safety planning for CYP exhibiting self-harm and suicide ideation. According to Labour Force Survey estimates, across Great Britain education staff have a significantly higher than average rate of work-related stress, depression or anxiety⁵. To reduce future demand on services, school staff need to be provided with the tools needed to support themselves and the children in their care.
- 19 Between 2012/13 and 2021/22 across Cheshire East, there has been an increase in the proportion of adults reporting a 'high anxiety score' (23.3%). As of 2021/22 the proportion of adults thought to be diagnosed as having depression by their GP is approximately 14%. Rates have increased since 2012/13⁶. Parents/carers tell us that their own mental health struggles are often dismissed when addressing their children's emotional wellbeing, so we plan to create a service that takes a 'whole family approach'. There is limited support to empower and build confidence in parents/carers, with missed opportunities to provide coping mechanisms that could transform the familial dynamic and improve emotional wellbeing without therapeutic interventions.
- 20 Poverty can be associated with poor emotional wellbeing in CYP and their families. Wards in Crewe and Macclesfield have a high proportion of children eligible for free school meals, however, there has been an increase in eligibility for other wards, including Wrenbury, Audlem and Handforth over the past 4 years⁷.

⁴ Cheshire East Council (2022) Single SEND Forecast Data document. May 2022. Available from: [single-send-forecast-data-document-v1.0-final-may-2022.pdf](https://www.cheshireeast.gov.uk/single-send-forecast-data-document-v1.0-final-may-2022.pdf) (cheshireeast.gov.uk)

⁵ Source: HSE (2022) Work-related stress, anxiety or depression statistics in Great Britain, 2022. Available from: <https://www.hse.gov.uk/statistics/causdis/stress.pdf> (Accessed 2 February 2023).

⁶ Annual Population Survey (APS), Office for National Statistics (ONS). Office for Health Improvement & Disparities. Public Health Profiles. [30th June 2023] <https://fingertips.phe.org.uk> © Crown copyright [2023]

⁷ Spring (January) School Census, Public Health Intelligence Team © Crown Copyright and database right 2022. Ordnance Survey 100049045

- 21 Since 2015/16, Cheshire East has seen higher rates of children under 18 years admitted to hospital for mental health conditions than the England average⁸. The current rate of admissions for a mental health condition in CYP in Cheshire East is 133.9 per 100,000. There has also been an increase in rates of substance misuse hospital admissions, with the Cheshire East rate significantly worse than the England average⁹.
- 22 In Cheshire East, hospital admission rates for self-harm in CYP aged 10-24 years have been increasing since 2013/14 and are worse than the England average. During 21/22, there were 450 admissions for self-harm in CYP aged between 10 and 24, which is 130 more admission than the previous year. Compared to our statistical neighbours, Cheshire East has the highest rate (725.3 per 100,000) of 10–24-year-olds being admitted to hospital as a result of self-harm¹⁰. Without increased resource and investment upstream to address issues early and prevent escalation, the demand on hospitals will continue to increase. There is a lack of preventative advice and health promotion available in schools and the community, so this service will seek to shift the balance and increase capacity in vital upstream support.
- 23 CYP were clear about the factors impinging on their mental health, which include bullying, social media, domestic abuse and lack of physical activity. 58% of CYP respondents to Our Vision survey¹¹ had either experienced or witnessed bullying (Vision, 2021) and 12.6% of 11- to 16-year-olds reported they had been bullied via social media (NHS Digital, 2022). Despite this, only 8 out of 144 Cheshire East schools are currently engaged with the KiVa programme and only 14 calls were received by the SCiEs team during an 11-month period¹². CYP identifying as LGBTQ+ highlighted challenges of not getting support until in crisis, being at risk of bullying and feeling expected to fit in. Only 45.1% of children aged 5-16 years old are "active" and meeting the Chief Medical Officer recommendations for physical activity¹³.
- 24 Access issues are felt by service users and professionals alike, with general feedback during our engagement including the words "confusion", "inequality" and "overwhelming". 1 in 5 children with a probable mental disorder wait more than 6 months for contact with a

⁸ Office for Health Improvement & Disparities. Public Health Profiles. [20/09/22] <https://fingertips.phe.org.uk> © Crown copyright [2022]

⁹ Office for Health Improvement & Disparities. Public Health Profiles. [20/09/22] <https://fingertips.phe.org.uk/profile/child-health-profiles/data#page/0/gid/1938133228/pat/6/par/E12000002/ati/402/are/E06000049> © Crown copyright [2022]

¹⁰ Office for Health Improvement & Disparities. Public Health Profiles. [18/3/22] <https://fingertips.phe.org.uk> © Crown copyright [2022]

¹¹ Survey conducted with CYP living in Sandbach, Middlewich, Congleton, Holmes Chapel and Alsager

¹² Email Correspondence Education COVID response and Project Manager (31/01/23 & 02/02/23)

¹³ Sport England. Active Lives Survey. Children and Young People data. Available from: <https://activelives.sportengland.org/Home/ActivityData> (Accessed 12 January 2023) © Sport England 2023

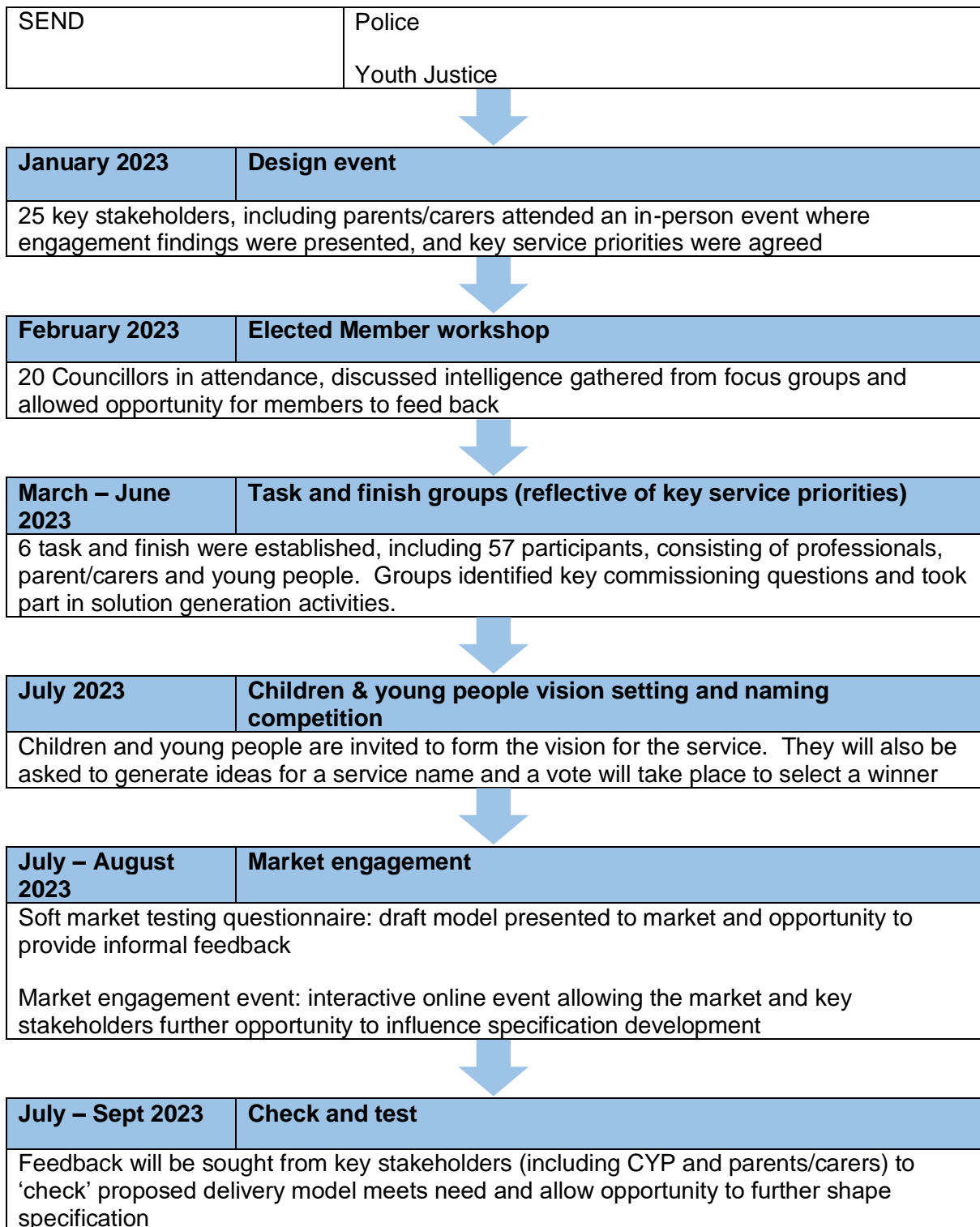
specialist (Public Health England, 2019), which is compounded by the inconsistency in eligibility thresholds across the system. We know that 5.5% of children aged 0 to 5 have a probable mental disorder and anecdotally our partners are telling us that children presenting for support since the pandemic are getting younger and more complex, so we need to create an equitable service which provides a clear pathway to support for CYP of all ages. Parents/carers of CYP with Special Educational Needs and Disabilities (SEND) we engaged with expressed frustration about unnavigable pathways and silo working.

- 25 To deliver sustainable improvements to outcomes for CYP, we should adopt a whole-system, preventative, public health approach that spans all departments and takes a holistic approach to addressing CYP mental health and emotional wellbeing. Respondents during our engagement told us that services operate in isolation, are fragmented with their own agenda and there is often a requirement to tell their 'story' more than once. We intend to create transformational change across the system by inspiring a shared vision and encouraging services to work as an alliance to reduce duplication and increase partnership working.

Consultation and Engagement

- 26 The proposed model for the new EHCYP service has been entirely coproduced with a large range of stakeholders, including parent/carers, education providers, professionals (including health, social care, police) and most importantly CYP. The commissioning activity is underpinned by 'Together in Cheshire East' and Cheshire East's 'Live Well for Longer Plan'. Highlights of our journey of coproduction are detailed below, with further detail and an overview of the proposed service model available in appendix A:

Sept 22 – Jan 23	Engagement	
36 focus groups were held, with 346 participants. Insight-based discussion focussed on the following questions, seeking a breadth of intelligence from a wide range of stakeholders: 'Children & young people's mental health and emotional wellbeing is like what?' 'At its best, what does children and young people's mental health and emotional wellbeing look like?'		
Children and young people	Stakeholders	
Primary School Secondary School Further Education Alternative Education Young Carers Youth Clubs Children in Care LGBTQ+ Migrants	Children and Families Service Commissioned Providers Early Years Education Further Education Providers Headteachers	Primary / Secondary School staff Health (GPs & 0 – 19 Service) LGBTQ+ SEND VCFSE Sector Out of School / Tuition team



27 Feedback from CYP, parents/carers and stakeholders during the coproduction journey has been very valuable, and they have been offered the opportunity to remain engaged in this process into procurement and contract management. We have worked with the Cheshire East Participation Team and other forums throughout the

recommissioning process, so relationships have been developed and will remain through the lifetime of the contract.

Reasons for Recommendations

- 28 This recommission will allow us to improve emotional health support available to CYP and create an innovative, flexible service that embodies true early intervention. This meets strategic priorities by aligning with Cheshire East Corporate Plan (2021 – 2025), Cheshire East’s Children and Young People’s Plan (2022 – 26) and The Joint Local Health and Wellbeing Strategy for the population of Cheshire East (2023 – 2028).
- 29 Data gathered as part of the CYP Emotional and Mental Wellbeing deep dive JSNA clearly demonstrates a significant need amongst CYP for this service. This need has intensified in recent years due to the pandemic, which has resulted in an increase in risk factors and erosion of protective factors in CYP mental health. The evidence strongly highlights the increasing pressure this creates on other children and families’ services including social care, school absenteeism and SEND. The service would help address these issues through an evidence-based early intervention approach, aligned to the i-Thrive Model¹⁴ (developed by Anna Freud National Centre for Children and Families and Tavistock and Portman NHS Foundation Trust in 2014). This will ensure that resource is targeted toward CYP who need advice, signposting and focused goal-based input:

¹⁴ [i-THRIVE | Implementing the THRIVE Framework \(implementingthrive.org\)](https://www.implementingthrive.org/)



Figure 1: Thrive framework for system change, 2019

- 30 CYP, their families and professionals have been engaged extensively throughout the commissioning process, resulting a coproduced model which accurately reflects need and demand, and addresses gaps in services.

Other Options Considered

- 31 Decommissioning the service (do nothing): this would decrease resource and capacity in early intervention and prevention CYP mental health and emotional wellbeing service, which would lead to increase pressure on secondary and crisis mental health services. By providing less therapeutic interventions and support to schools and professionals upstream, the complexity of presentations will continue to increase, and demand will increase for NHS services.

Option	Impact	Risk
Decommissioning the service (do nothing)	Lack of resource for early intervention and preventative mental health and emotional wellbeing support for CYP	Complexity and risk in CYP mental health will continue to increase and crisis service will be come overwhelmed

Implications and Comments

Legal

- 32 EHCYP services are classified as health and social care services for the purposes of Schedule 3 of the Public Contract Regulations 2015. If the value of the proposed contract over its entire term exceeds the applicable threshold for services of this nature (£663,540K) the contract will be awarded in accordance with the “Light Touch Regime” procedure as set out under Regulations 74 to 76 of the Public Contracts Regulations 2015.
- 33 Above threshold, light touch contracts are advertised using either a contract notice or a Prior Information Notice (PIN) and both notices must be submitted to the Find a Tender (FTS) website. The Council should also ensure that all of the procurement documents are made available to interested bidders on the online procurement portal at the time that the contract notice is published. If the Council publishes a contract notice, the opportunity should be published on Contracts Finder.
- 34 There are no specific procurement procedures for above threshold Schedule 3 services and therefore Contracting Authorities are free to exercise their discretion and create their own rules provided that these rules
- (a) Ensure that the contracting authority complies with the principles of transparency and equal treatment of all potential bidders
 - (b) Allows the contracting authority to take into account the need to ensure quality, continuity, accessibility, affordability, availability comprehensiveness of services and the specific needs of different categories of service users.
- 35 The contract award rules used by the contracting authority may also be based on the tender representing the best price-quality ratio.

Section 151 Officer/Finance

- 36 The EHCYP service is detailed within the Peoples Commissioning Team Plan and currently has an annual budget of £527,655.98.
- 37 The proposals recommended within this report will not directly impact on the Council's Medium Term Financial Strategy (MTFS) as the service is fully funded via the Public Health grant. However, efficiencies made through an early intervention and prevention model will impact upon wider Council spend on specialist CYP mental health services.
- 38 We are currently exploring additional external funding streams to enhance the value of the contract and increase therapeutic delivery, which will again reduce spend on specialist mental health services.

Policy

- 39 At this stage there are no policy implications identified.

An open and enabling organisation	A council which empowers and cares about people	A thriving and sustainable place
Listen, learn and respond to our residents, promoting opportunities for a two-way conversation Promote and develop the services of the council through regular communication and engagement with all residents	Support all children to have the best start in life Ensure all children have a high quality, enjoyable education that enables them to achieve their full potential	Thriving urban and rural economies with opportunities for all

Equality, Diversity and Inclusion

- 40 An Equality Impact Assessment has been completed in parallel with the extensive consultation and engagement exercise (Appendix B)

Human Resources

- 41 It is likely that TUPE would apply for staff from the existing provider dependent on the outcome of the procurement exercise, so support will be sought from Legal when required.

Risk Management

- 42 Recommissioning of the service follows a project management approach which includes the identification of risks. Any significant risk will be controlled and escalated for action where appropriate.

Rural Communities

- 43 CYP, parents/carers and professionals from rural communities were key contributors throughout our engagement and coproduction journey. Our findings showed inequality in service availability and accessibility in our rural areas, so the new service will work alongside Cheshire East Rural Action Plan to ensure equitability across the borough.

Children and Young People including Cared for Children, care leavers and Children with special educational needs and disabilities (SEND)

- 44 Time was invested into speaking with cared for, care leavers and CYP with SEND (plus their parents/carers). They told us that having a trusted adult and a space to feel safe is important in supporting their mental health and emotional wellbeing. We learned that complicated pathways and long waiting lists leave many CYP in 'limbo' for extended periods of time. A conference led by Cheshire East Youth Council (Taboo Conference, 2021) found that careful planning of the school environment and training staff to understand how to respond to any young person who is struggling to cope with their emotional wellbeing are of paramount importance. This service will encompass recommendations from those with lived experience as a golden thread to increase inclusivity and equality.

Public Health

- 45 Commissioning intentions for the new EHCYP service will be underpinned by early help and prevention. The service is aligned to the Joint Local Health and Wellbeing Strategy Cheshire East 2023-2028 and performance management will be guided by the Joint Outcomes Framework. Service design will be informed by the JSNA (Tartan Rug) and wider Marmot Communities developments in Cheshire East.

Climate Change

- 46 The design and delivery of the EHCYP service will be underpinned environmental and sustainability considerations. The service specification will contain specific requirements for providers to work collaboratively to generate efficiencies and use innovative solutions to minimise the environmental impact of delivery. The tender process will include social value questions, including one specific to the environment.

Access to Information	
Contact Officer:	<p>Katy Ellison, Project Manager (Thriving and Prevention)</p> <p>Katy.ellison@cheshireeast.gov.uk</p>
Appendices:	<p>Appendix A – Engagement findings in detail</p> <p>Appendix B – Equality Impact Assessment</p>
Background Papers:	<p>Cheshire East Corporate Plan</p> <p>The Joint Local Health and Wellbeing Strategy for the population of Cheshire East (2023 – 2028)</p> <p>Cheshire East’s Children and Young People’s Plan (2022 – 26)</p> <p>Together in Cheshire East</p> <p>Cheshire East Live Well for Longer Plan</p> <p>Cheshire East Joint Strategic Needs Assessment</p> <p>Transforming Children and Young People’s Mental Health Provision: a Green Paper</p>
