

OPEN

## **Children and Families Committee**

**13 November 2023**

**Mental Health Spotlight Review: Working together to protect, promote, prevent, empower and intervene early for all involved.**

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**Report of: Matt Tyrer, Director of Public Health**

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**Report Reference No: CF/29/22-23**

**Ward(s) Affected: All**

### **Purpose of Report**

- 1 To update the Children and Families Committee on emotional and mental wellbeing need seen in children and young people across Cheshire East, and the support currently available to support this need.
- 2 To outline the next steps to be taken in addressing the need seen across Cheshire East.
- 3 This report marks a fresh perspective and assessment approach further to the Spotlight Review on Children's Mental Health Services received by the Cabinet in October 2020, and the previous Joint Strategic Needs Assessment review on children and young people's mental health published in 2016. Since these reviews, there has been considerable changes to the health and care infrastructure and further impacts from the COVID-19 pandemic.
- 4 The review 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 recommendations presented are underpinned by the outcomes detailed

in Cheshire East Children and Young People's Plan (2022 – 26), which focuses on providing CYP access to help when they need it, to prevent problems from getting worse.

## Executive Summary

- 5 There has been evidence of increasing levels of mental health need and demand in children and young people across Cheshire East over the last four years. There is also evidence of increasing rates of some factors that increase the risk of poor mental health, as well as potential erosion of some of the factors that provide our children and young people with resilience and good mental health and wellbeing. Of particular note, there is considerable mental health and wellbeing need amongst the adults who support them professionally and at home.
- 6 Furthermore, there is a growing body of evidence that the COVID-19 pandemic has negatively impacted not only on mental health in some of our residents, but also on the risk factors that lead to mental health problems if not addressed early. Also, these impacts have not been experienced equally across our population.
- 7 The report highlights key findings from the Joint Strategic Needs Assessment (JSNA), reflects on progress since the previous spotlight review and proposes next steps promoting the best possible health and wellbeing across all our children and young people.

### RECOMMENDATIONS

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

1. To note and endorse the findings and recommendations of the latest spotlight review.
2. To continue to champion mental health and wellbeing as a priority across all agendas.

## Background

- 8 The World Health Organisation (WHO) defines mental health as 'a state of mental well-being that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being

that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in'<sup>1</sup>

- 9 It is estimated that around 50% of all lifetime mental health problems start by the mid-teens, and three quarters by the mid 20s<sup>2</sup>.
- 10 There has been increasing focus on emotional and mental wellbeing in our children and young people of recent years and particularly since the start of the COVID 19 pandemic, both nationally and locally<sup>3</sup>. In July 2022, the National Institute for Health and Care Excellence (NICE) published guidance on social, emotional and mental wellbeing in primary and secondary education<sup>4</sup>.
- 11 This review highlights the findings and recommendations from our recent Joint Strategic Needs Assessment (JSNA) review into emotional and mental wellbeing in children and young people across Cheshire East (Appendix A). This marked a refreshed consideration of key priorities and scope in relation to mental wellbeing and was developed through extensive collaboration across the Council, the NHS, the Volunteer Community and Social Enterprise sector and local schools. In addition, this spotlight review also reflects upon the recommendations from the previous mental health spotlight review in 2020 and provides an update on progress in relation to each recommendation (Appendix B and Appendix C).
- 12 Health and Wellbeing Boards have a duty to produce JSNA for their area. JSNAs are assessments of the current and future health and social care needs of the local community. These are needs that can be met either by the local authority or by the NHS or other partners. JSNAs are informed by a wide range of sources including research, evidence, local insight, and intelligence to help to improve outcomes and reduce inequalities. They also consider wider factors that impact on their community's health and wellbeing, produce recommendations, and

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<sup>1</sup> World Health Organization. Strengthening mental health promotion. Geneva: WHO; 2001. Cited within Office for Health Improvement and Disparities (2022) Wellbeing and mental health: Applying All Our Health. Guidance. 28 February 2022. Available Wellbeing and mental health: Applying All Our Health GOV.UK Mental health (who.int) int) (Accessed 5 April).

<sup>2</sup> Public Health England (2019) Mental health and wellbeing JSNA toolkit: Guidance. 5. Children and young people. Updated 25 October 2019. Available from: <https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/5-children-and-young-people> (Accessed 28 June 2022)

<sup>3</sup> Parkin et al. (2022) Support for children and young people's mental health (England). Research Briefing. Published Wednesday, 01 June, 2022. Available from: <https://commonslibrary.parliament.uk/research-briefings/cbp-7196/7196/> (Accessed 29 June 2022)

<sup>4</sup> NICE (2022) Social, emotional and mental wellbeing in primary and secondary education. [NG223]. 6 July 2022. Available from: Recommendations | Social, emotional and mental wellbeing in primary and secondary education | Guidance | NICE (Accessed 5 April 2023).

identify where there is a lack of evidence or research<sup>5</sup>. The programme is overseen by the JSNA Steering group, which includes representation from across the Council, the NHS and the VCFSE sector.

- 13 The JSNA steering group agreed emotional and mental wellbeing to be a key priority within the Joint Strategic Needs Assessment work programme, and it formed one of the first deep dive reviews in the JSNA work programme since the emergence of COVID-19.
- 14 The JSNA review was produced through the Children's and Young People's Emotional and Mental Wellbeing JSNA Working Group, including representation from the following:
  - (a) Cheshire East Council: Early years, education, public health, commissioning, educational psychology and communities.
  - (b) NHS: Cheshire and Merseyside Integrated Care Board, designated safeguarding nurse; Healthy Child Programme representatives.
  - (c) Voluntary, Community, Faith and Social Enterprise.
  - (d) Schools: representation on the working group and then additional representation via a larger school representatives group.
- 15 The working group contributed to the development of the scope; analysis; and narrative development.
- 16 Additional conversations and engagement regarding the scope was carried out via the:
  - (a) Education Recovery Group
  - (b) The Children and Families Directorate Equality, Diversity and Inclusion Group
  - (c) The Emotionally Healthy Children and Young People service recommission project Group
- 17 The working group agreed that the review should address the following questions:
  - (a) What is the emotional and mental wellbeing need in children and young people in Cheshire East by geography and by protected characteristics where possible?

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<sup>5</sup> Gov.UK. Statutory guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies. Available from: Statutory guidance on joint strategic needs assessments and joint health and wellbeing strategies ([publishing.service.gov.uk](https://publishing.service.gov.uk)) (Accessed 21st November 2022)

- (b) What are our assets in support emotional and mental wellbeing and how effective and consistent are they?
- (c) How are we identifying children earlier? How are we supporting early years provision to identify complex needs early?
- (d) How are we supporting children in crisis?

**18 Key findings from the review (please review Appendix A for further details and references)**

Children and young people's emotional and mental wellbeing in Cheshire East

- (a) Many children and young people experience good mental wellbeing. However, in England the rates of probable mental health disorder for children and young people aged 7-19 increased from 11.8% in 2017 to 19.8% in 2022. This means that in Cheshire East in 2022, there may have been somewhere between 8,606 to 13,525 children and young people with a probable mental health disorder.
- (b) Between 2021-2022 services such as, CLASP, Visyon and Just Drop In have seen an increase in the number of children and young people needing to use the services. More girls than boys are using these services.
- (c) Between 2021-2022 poor mental health was the most common reason for children and young people needing one on one tuition in their home or in other settings due to being unable to attend school.
- (d) Prevalence of mild to moderate mental health conditions seen in general practice ranged from:
  - (i) 1.6%-3.0% in 0-17 year olds
  - (ii) 17.8%-21.3% in 18-24 year olds
- (e) In Cheshire East during 2021/22 there were 450 admissions for self-harm in children and young people aged between 10 and 24. This is 130 more admissions than the previous year. The admission rate has been consistently higher since 2013/14 in Cheshire East compared with England. There is also variation across the geography of Cheshire East, with pockets of significantly higher rates in the north, central and south of the Borough.

What might be contributing to poor mental health?

- (f) Poverty can be associated with poor mental wellbeing (please see the poverty JSNA for more information) JSNA Food and Fuel Poverty: Spotlight review ([cheshireeast.gov.uk](http://cheshireeast.gov.uk)).
- (g) Wards in Crewe and Macclesfield have a high proportion of children eligible for free school meals over the past few years. However, there has been an increase in eligibility in wards such as, Wrenbury, Audlem and Handforth over the past 4 years.
- (h) The COVID-19 pandemic has had a negative impact on physical and mental development for some children and young people.
- (i) The number of children and young people with Educational Health Care plans has been steadily rising year on year with a growth of 63% in the last three years.
- (j) The rate of young people being admitted to hospital as a result of substance misuse in Cheshire East is higher than the England and North West average.
- (k) The rate of domestic abuse related incidents and crimes increased across Cheshire East more rapidly than across England as a whole.
- (l) It was estimated that between April 2017 and March 2018 that 17% of young people aged between 10 and 15 years old in England in the previous 12 months, were bullied in a way that made them frightened or upset.
- (m) There has also been an increase in the number of adults in Cheshire East reporting a “high anxiety score” with 23.3% of people reporting this. Similarly the rate of adults being diagnosed with depression is also increasing in Cheshire East, which is important to consider given the number of adults that care for or work with children and young people.

Important factors that can maintain good mental health and wellbeing

- (n) Good education is an important factor for maintaining a positive emotional and mental wellbeing. However, the uptake of free early years education in 3 and 4 year olds is very high, but uptake is lower in our eligible 2 year olds. Also, the rate of absences across secondary school aged children was higher than the national average. On average, educational attainment across

Cheshire East is good, however, educational attainment is worse in children experiencing deprivation.

- (o) It is also important to consider the 5 ways to wellbeing:

Connect- Connecting with the people around us is a great way to remind ourselves that we're important and valued by others.

Be active- We know that there's a link between staying active and positive mental health and wellbeing. By making sure we are regularly moving our bodies, we can look after our mental and physical health at the same time.

Take notice- Taking notice of our thoughts, emotions and surroundings is a great way to stay present and pay attention to our needs. Taking notice of things we're grateful for, big or small, is a great way to boost our mood and appreciate our surroundings.

Keep Learning- Learning new things is a good way to meet new people and boost our self confidence, which in turn improves our mental health and wellbeing.

Give- Research has found a link between doing good things and an increase in wellbeing.

- (p) Digital media brings with it potential risks and benefits to mental wellbeing.

### Support for mental wellbeing

- (q) There is a wide variety of services and support for individuals' mental wellbeing.



- (r) There is also additional support for schools to support children and young people with their mental wellbeing. However, needs assessment suggest that:

- The current offer can be overwhelming.

- There are too many people trying to do too many roles.
  - Regarding special educational needs coordination very confusing system with extensive paperwork jumping through hoops rather than actually doing the job in hand.
  - There are capacity challenges training space, timetable, curriculum pressures.
  - There are obstacles referring a young people into CAMHS and them getting swift and immediate support.
  - There is inconsistency in the support available across schools dependent upon staff skills/funding etc.
  - Schools feel they are increasingly expected to manage support beyond the experience of a school intervention/workshop.
- (s) The review has highlighted is that it can be difficult to find the right support at the right time and sometimes there are ways to get children and young people help earlier before things have progressed in the first place.

## Recommendations

The overarching recommendations from the review is the need for:

- (i) **Holistic approaches** that encompass the physical and mental wellbeing needs of the child, their families and professionals that work with them.
- (ii) **Early intervention on risk factors for mental health problems and mental health presentations.**
- (iii) **Robust approaches to promote protective factors and resilience**
- (iv) Consideration of **root causes** as part of mental health presentations.
- (v) **Integrated care** that is **easy to navigate** and that **empowers** children and their families.
- (vi) **Care for all with greater support to areas in greatest need.**

More detailed recommendations include:



- (t) When considering children and young people's mental wellbeing we need to consider the wellbeing of; the **child/young person, the household and the professionals** (across education, health, the local authority and the community).

We need support and empower children, their families and professionals:

- To **promote wellbeing and resilience**, and take pride in this rather than waiting to react. (for example through improving the uptake of the 2 year old early education, supporting implementing the whole school framework and promoting school attendance)
- To **support risk factors early**. (for example, bullying; SEND; LGBTQ+; trauma; parental mental health; parental substance misuse; and cost of living) We also need to better understand the difference in mental wellbeing in genders.
- To **consider and communicate the risks and benefits of digital media**.
- To **manage poor emotional wellbeing early**- for example, self care for **anxiety**.
- To improve **navigation** to support when there are mental health and wellbeing problems or **risk factors** for mental health and wellbeing problems.
- To **consider mental health when physical health problems and risk factors present, AND to consider physical health and risk factors when mental health problems present**.
- To ensure provision of **appropriate support for schools to implement evidence-based tools** and resources to create an emotionally healthy school environment across all age groups.
- A **universally proportionate approach** that recognises and supports those areas in greater need with more intensity BUT recognises the need that is everywhere.
- **Continue to refer to CAMHS** where necessary, rereferring if needed.

- **To continue to feed into the further developments** of the CAMHS service as a result of the North West CAMHS review.
  - Continue to promote **suicide prevention training** in schools including **R;pple**.
  - Promote use of the **NICE guidance** on assessment and management of self harm and prevention of its recurrence across all key partners.
  - To expect that these **changes will take time**.
  - To further **evaluate** our approaches.
- (u) The Health and Wellbeing Board has agreed to holding a conference on the JSNA in light of the extent and range of recommendations included in this, and other recent JSNA reviews. The conference will aim to build consensus about the best approach to prioritisation of these recommendations over the short and longer term.
- (v) In addition, to address the above recommendations, we need to identify key forums for action, progress tracking and rationalise conversations and progress across these. This includes the:
- Education Reference Group
  - Family Hubs Steering Group
  - Emotionally Healthy Children and Young People Recommissioning Steering Group, which will become the Healthy Young Minds Alliance Partnership
  - Cheshire and Merseyside forums including the Beyond Programme and the Gateway Programme.
  - Health and Wellbeing Board
  - Children and Young People's Trust
  - The Youth Council
  - Mental Health Partnership Board and the All Age Mental Health Plan
  - Investing in Children and Young People Partnership

- Learn from other JSNAs including: Crewe; poverty; and substance misuse reviews.
- Identify and monitor some key measures in the longer term including through the Cheshire East Joint Outcomes Framework.

There are particular opportunities to act on these recommendations through: the recommissioning of the **Emotionally Healthy Children and Young People's Service (Healthy Young Minds)**; the development of family hubs, further roll out of the **Mental Health Support Teams**; further development of a schools directory and **Wellbeing for Education support**.

## Consultation and Engagement

- 19 The JSNA review was aligned to coproduction and engagement activity for the new Emotionally Healthy Children and Young People's Service. This involved engagement with a large range of stakeholders, including parent/carers, education providers, professionals (including health, social care, police) and most importantly children and young people.
- 20 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 in relation to the Emotionally Healthy Children and Young People's Service. 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

- 21 The recommendations reflect our JSNA review findings and meet strategic priorities by aligning with the 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).

## Implications and Comments

### *Legal*

- 22 Local authorities and the Integrated Care Boards have a joint statutory responsibility to produce joint strategic needs assessments through the Health and Wellbeing Board, under the Health and Social Care Act 2012.

### *Finance*

- 23 There are no financial implications or changes required to the Medium-Term Financial Strategy (MTFS) because of the recommendations in this report.
- 24 The health inequalities highlighted by this work do have the potential to result in a greater level of demand for council services in the future. However, information found in these reviews will help with planning and targeting of preventative services, therefore helping to ensure that expenditure to address these inequalities is incurred in line with the councils MTFS. Any future new investments being made will require compensating savings in order to not adversely affect the current MTFS. In addition, partnership working on the JSNA review recommendations will help to optimise usage of available resources across both the Council and the wider health and care system.
- 25 Any costs linked to JSNA production and ongoing monitoring are funded by the Public Health ringfenced grant.

### *Policy*

- 26 It is intended that the findings and recommendations from this review will inform future strategic development across a wide variety of workstreams within Cheshire East Place, including, but not limited to:
- The recommissioning of the **Emotionally Healthy Children and Young People's Service (soon to be renamed Healthy Young Minds)**
  - **The development of family hubs**
  - **Further roll out of the Mental Health Support Teams**
  - **Further development of a schools directory**

- **Further development of *Wellbeing for Education* support.**

### *Equality, Diversity and Inclusion*

- 27 An Equality Impact Assessment has been completed in parallel with the joint strategic needs assessment.

### *Human Resources*

- 28 There are no direct Human Resources implications at this stage of the briefing, as resourcing is being drawn from the existing team.
- 29 JSNA reviews are part of the JSNA, which is a statutory duty. The resources required to provide further updates will be drawn from the existing Public Health Intelligence Team. The current process is being streamlined using Microsoft products which will make it less labour intensive. If there are any changes proposed as a result, the HR implications may need to be addressed. It is important to keep under review whether existing resources (employees) are doing what they are contracted to do and that there is no shift in job description. Any changes in requirements of the work and resources to undertake that work will be reviewed and dealt with in line with CEC policies and procedures.

### *Risk Management*

- 30 The JSNA aims to identify avoidable harms within local communities that can be addressed by working together to better understand the local challenges and need and identifying gaps and opportunities to address them.

### *Rural Communities*

- 31 The JSNA considers variation of health and wellbeing across Cheshire East, including at smaller area level. This supports us in our understanding of health and wellbeing in our rural communities.

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

- 32 The focus of this review was children and young people, who were extensively engaged with as part of this review. Promoting the mental wellbeing of our children and young people is vital in optimising the health and wellbeing of our entire population and in addressing health inequalities.

*Public Health*

- 33 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*

- 34 Recommendations made to address inequalities will include consideration of the wider determinants of health and may include approaches that reduce our carbon footprint or mitigate the consequences of climate change.

<b>Access to Information</b>	
Contact Officer:	Dr Susan Roberts, Consultant in Public Health <a href="mailto:Susan.roberts@cheshireeast.gov.uk">Susan.roberts@cheshireeast.gov.uk</a>
Appendices:	Appendix A –Emotional and mental wellbeing in children and young people joint strategic needs assessment-Executive Summary  Appendix B- An update on individual recommendations from the Mental Health Spotlight Review-February 2020  Appendix C-Children’s Mental Health Services. Spotlight Review – Children and Families Overview and Scrutiny Committee. February 2020.
Background Papers:	