

Young People and Mental Health

1 Purpose

- 1.1 To provide Members with background information due to the Committee being concerned about young people and mental health. Included is the Child Well Being Survey 2016 17 (for pupils aged 7-18 years old) in Appendix A.
- 1.2 In addition members of the Youth Parliament have been contacted for their contribution and todate one response has been received and details of this are also provided.

2 National Context

- 2.1 The Education and Health Committees undertook a joint inquiry into *Children and young people's mental health the role of education*. Their report, published on 2nd May 2017, emphasised the front line role of schools and colleges in promoting and protecting children and young people's mental health and well-being. The Government responded to this on the 11th September 2017.
- The Department for Education and the Department of Health and Social Care published a green paper on '*Transforming Children and Young People's Mental Health Provision'* in December 2017. The consultation ran from 4th December 2017 to 2nd March 2018. The green paper focused on earlier intervention and prevention, especially in and linked to schools and colleges. The proposals included:
 - Creating a new mental health workforce of community-based mental health support teams
 - Every school and college will be encouraged to appoint a designated lead for mental health
 - A new 4-week waiting time for NHS children and young people's mental health services to be piloted in some areas.¹
- 2.3 The Education and Health and Social Care Committees responded and published their report `*The Government's Green Paper on mental health: failing a generation*' on the 9th May 2018. It states the:

'Government's strategy lacks ambition and will provide no help to the majority of those children who desperately need it ... There is also little or no attention to prevention or early intervention ... The suggested speed of delivery will leave hundreds of thousands of children with no improvements in provision for

https://www.gov.uk/government/consultations/transforming-children-and-young-peoples-mental-health-provision-a-green-paper



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several years and with possibly worsened provision if staff leave to join trailblazer areas elsewhere'.

- 2.4 The Government responded to the Committee's report² and their consultation on Transforming Children and Young People's Mental Health Provision³ in July 2018.
 - The Government will trail all three elements in the new trailblazer areas, identifying the first wave to be operational by the end of 2019. They state that they remain committed to rolling out the new approach to at least a fifth to a quarter of the country by the end of 2022/23.
 - In the first wave of trailblazers, they are expecting to have between ten and twenty areas, operational by the end of 2019.
 - Trailblazers will be funded through Clinical Commissioning Groups (CCGs) and they expect the
 education sector to have a central role in the application process and in designing and leading
 delivery.
 - Trailblazers will be selected on a regional basis and NHS England Regional Teams will shortly
 be in contact with the areas that meet a set of qualifying criteria and those areas which apply
 will be asked to demonstrate evidence against further criteria. The first set of trailblazers will
 be announced in autumn 2018.

3 Birmingham Context

3.1 In Birmingham the statutory services are the Council's School Psychology Service, the Birmingham Child and Adolescent Mental Health Service - Forward Thinking Birmingham and the School Health Advisory Service.

Educational Psychology Service Birmingham

3.2 The Educational Psychology Service is the sole provider commissioned by the Council to carry out statutory work in order to identify, assess and monitor children, young people and young adults with special educational needs. In addition to the statutory work, schools, early years settings and other educational establishments are able to purchase an annual subscription package for a visiting Educational Psychologist. This service is available to all maintained settings, academies, and free schools within the Birmingham Local Authority.

Birmingham Child and Adolescent Mental Health Service (CAMHS)

3.3 Birmingham Women's and Children's NHS Foundation Trust is the lead provider of Forward Thinking Birmingham. Forward Thinking Birmingham is the provider of mental health services for children, young people and young adults up to the age of 25 in Birmingham.

³ https://bit.ly/2vbE0bh

² https://bit.ly/2LA5WQ6



3.4 It is a partnership of four organisations:

- Birmingham Women's and Children's NHS Foundation Trust (BWC) is the lead provider and brings together paediatric and women's care in the region. The Children's Hospital delivers community and inpatient mental health services for children and young people up to the age of 18 in Birmingham and the West Midlands for over 15 years.
- Beacon UK specialises in helping people achieve and sustain recovery in community settings.
- The Children's Society works closely with a wide range of community and voluntary organisations to tackle poverty and neglect.
- Priory Group is the leading provider of behavioural care in the UK. In Birmingham, the Priory's Woodbourne Hospital has a team of psychiatrists, psychologists and therapists treating adults and children.

3.5 Forward Thinking Birmingham contract / commissions partners:

- Birmingham Mental Health Consortium (trading as the Living Well Consortium) is the 14-25s Talking Therapies delivery partner.
- Open Door Youth Counselling is a counselling service for 12 to 25 year olds.
- Acacia deliver a holistic support service to families affected by perinatal mental health issues.
- My Place (The Children's Society) provides a befriending service for young unaccompanied asylum seekers and refugees in Birmingham and Coventry through youth groups, as well as providing a place to meet.
- The community hubs offer multidisciplinary mental health services to children and young people (0-25) with mental health difficulties and disorders. Assessment, care and treatment are available from the following locations across Birmingham.

Parkview Clinic, Moseley	Oaklands Centre, Selly Oak
CAMHS Unit in South Birmingham, consisting of three wards at Parkview Clinic for those aged 18 and under	The Oaklands Centre is one of Forward Thinking Birmingham's four community hubs.
Blakesley Centre, Yardley	Birmingham Road, Sutton Coldfield
The Blakesley Centre is one of Forward Thinking Birmingham's four community hubs.	Birmingham Road is one of Forward Thinking Birmingham's four community hubs.
Pause, Digbeth	Finch Road Primary Care Centre, Lozells
Pause is the city centre drop-in service. There is also a weekly pop-up Pause in the Lighthouse Youth Centre in Aston. Pause is run by The Children's Society.	Finch Road is one of Forward Thinking Birmingham's four community hubs.



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- 3.7 The service also has citywide speciality teams who offer specific interventions for eating disorders and neurodevelopmental conditions.
- 3.8 The urgent care teams consisted of a crisis team and a separate Home Treatment team. The crisis and home treatment teams worked across the whole of Birmingham. The crisis team offered a 24 hour, seven day a week service. The crisis team supported children and young people who were experiencing an acute mental health crisis. The team also staffed the health-based place of safety.
- 3.9 The Care Quality Commission (CQC) inspected the service on 26th and 27th July 2017 and during the inspection focused on the under 18 service as provided by Birmingham Women's and Children's NHS Foundation Trust. The specialist community mental health services for children and young people were rated as 'inadequate'.
- 3.10 Elaine Kirwan (Associate Director of Nursing, Mental Health Services); Tim Atack (Chief Operating Officer, Mental Health Services) and James Mullins (Mental Health Improvement Director) Forward Thinking Birmingham attended the Health and Social Care O&S Committee on 20th March 2018. They presented the findings of the CQC inspection report and outlined actions taken to date and planned future interventions to address issues raised in the report.⁴
- 3.11 The next update due to the Health and Social Care O&S Committee is programmed for the 16th October 2018 committee meeting.

School Health Advisory Service, Birmingham Community Health NHS Foundation Trust⁵

- 3.12 The School Health Advisory Service aims to promote and support the health and wellbeing of all school aged children. The service has two key roles:
 - (i) To give confidential advice, care and support to schools, children, young people and their parents.
 - (ii) To protect and promote the physical and emotional health of children and young people, to ensure that they get the most from their education.
- 3.13 The school health advisory service/school nursing service will be delivered to all children and young people and their families where the child or young person is enrolled to attend a mainstream school within Birmingham. This includes academies, community schools, foundation schools, voluntary aided and voluntary controlled, free schools and some independent schools.
- 3.14 Key partners in the delivery of services in Birmingham include Forward Thinking Birmingham, Aquarius and Umbrella. Partnerships have been established with Barnardo's, Spurgeon's and Family Action.

⁴ https://bit.ly/2yHKqUq

⁵ https://bit.ly/2q2csnT



3.15 Confidential drop-in. All mainstream secondary schools are offered a weekly drop in service for young people to see their NHS school nurse in a private and confidential environment within school.

4 Youth Parliament

- 4.1 Members of the Youth Parliament have been contacted for their contribution. To-date one response has been received via a telephone conversation. Below are the comments made:
 - Work to promote mental health issues and provide help needs to take place at the roots within schools. Therefore workers are needed in the schools and also pupils can take time out of lessons rather than waiting for a referral to CAMHS.
 - Bullying, discrimination and poverty is to do with class and background.
 - Addiction: restrictions within the household can help with combating addictions. For instance a child could have restrictions on the time they can spend on the phone from the age they are given the phone.
 - Physical activity: more sports clubs that allow young people to play infrequently can bring young people out of their homes and have fun rather than it being competitive.

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Child Well being Survey 2016-17 (for pupils aged 7-18yrs)

Zareen Syed Intelligence Officer Birmingham Children's Trust





The survey was designed by Dartington SRU and is comprised of a number of recognised standardised measures used by researchers and clinicians across the country (e.g. the SDQ).

In addition, the survey was designed to ensure that the questions cover the main areas of the Every Child Matters Outcomes Framework;

- health
- safety
- enjoyment and achievement
- positive contribution
- economic well-being

Each year schools across Birmingham have been invited to participate in the survey (since 2006/7). The school then invites their pupils to self complete the survey online. After completion, the data is analysed and a school report is sent back showing how the schools findings compare to those of Birmingham and to national averages where available.

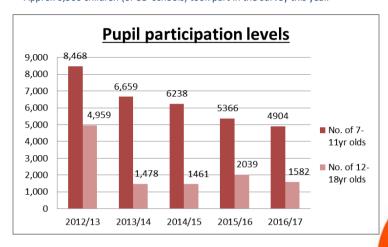
There are two versions of the pupil questionnaire, one designed for 7-11 yr olds and the other for 12-18 yr olds (with 70 and 110 questions respectively). It takes approximately 20-30mins for a child to complete.

This presentation covers the results from children completing the survey in 2016-17. It compares the findings with the results of previous five years and with national data (where available).



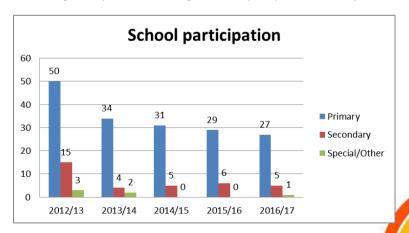
Participation

• Approx 6,500 children (or 33 schools) took part in the survey this year.

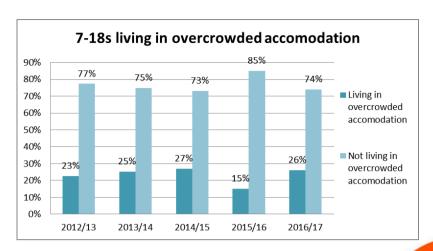


Birmingham City Council

 \bullet On average this equate 1 in 14 Birmingham schools participated in the survey in 2016/17.





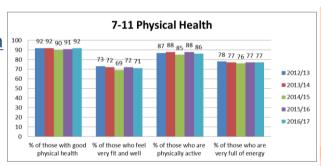


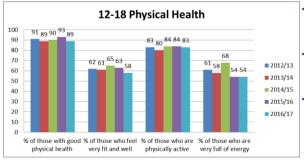
Children living in 'overcrowded accommodation' appear to have increased slightly compared to last year.



1.Physical Health

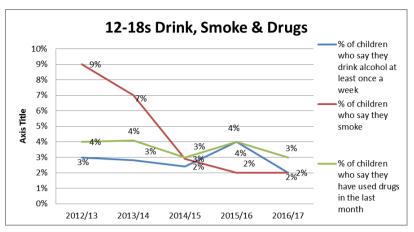
 The overall reported physical health of children age 7-11 has been similar, over the past five years with slightly fewer children reporting to feel less fit, well and physically active compared to last year.





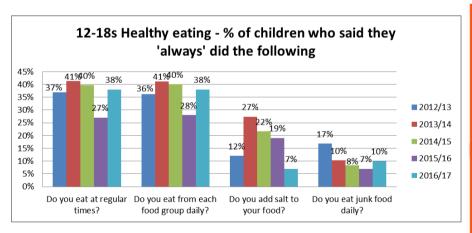
- Number of 12-18s has dropped slightly who feel overall physically healthy.
- Fewer 12-18s reported feeling very full of energy when compared to the 7-11s.
- Slightly fewer number of 12-18s reported to feel fit, well and physically active than previous years.





- 2% of 12-18s said they drink at least once a week.
- 2% of 12-18s said they smoke which is a drop from 4%, last year.
- 3% of 12-18s said they had used drugs in the last month.
- There seems to be a decreased in Smoking, drinking and usage of drugs as compared to last year.

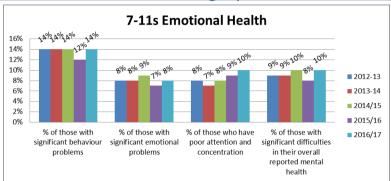




- There has been a significant increase among the children aged 12-18 who eat at regular times and from each of the food groups (meat, milk, bread, fruit and veg)
- A visible decrease is evident from last year with only 7% of children, add salt to their food (after it has been cooked)
- The latest figures suggest that almost 1 in 10 children eat junk food daily (e.g. burgers, chips, crisps, fizzy drinks or sweets) this appear to have increases slightly in comparison to previous years.

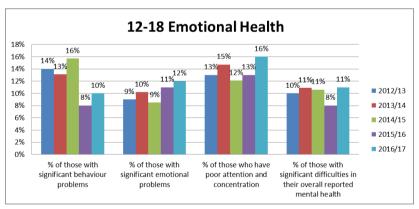


2.Emotional Health & making a positive contribution



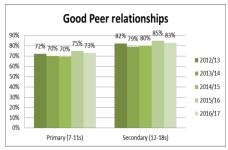
- 14% of children have significant behaviour problems, which is a slight increase compared to previous year.
- Almost 1 in 13 children have significant emotional problems (e.g. anxiety and depression).
- 10% of children have problems with attention, concentration or hyperactivity. Ther
 appears to be a steady increased over the past four years.
- 1 in 10 children have difficulties in their overall reported mental health.

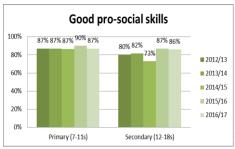




- 10% of children have significant behaviour problems/conduct disorders.
- 1 in 8 children have significant emotional problems.
- Reported poor attention and concentration figures (16%) have increased in 2016/17 in comparison to past years.
- Almost 1 in 9 children have overall difficulties in their mental health, which is also a rise in comparison to past years.
- Note a higher proportion of 7-11s compared to 12-18s have behaviour problems (14% vs. 10%). Overall difficulties are similar in both groups. However, more 12-18s have emotional problems and poor attention and concentration compared to 7-11s.

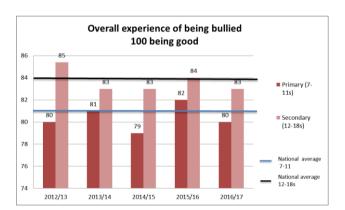






- 73% of 7-11s and 83% of 12-18s have good peer relationships
- 9% of 7-11s and 6% of 12-18s have significant problems with peer relations (e.g. preferring to play alone, not having at least one good friend, being picked on by other children etc.)
- 87% of 7-11s and 86% of 12-18s have good pro-social skills. This is similar to previous years.
- 7% of 7-11s and 14% of 12-18s have significant problems with pro-social skills (e.g. being considerate of others feelings, sharing, being helpful if someone is hurt, being kind and volunteering to help etc.)



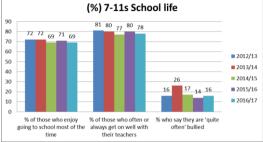


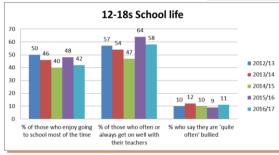
- 'Overall experience of being bullied' in the 7-11s, the scores have dropped slightly in comparison to last year.
- In 12-18s, this was same as national average last year but appear to be slightly worse than the national average in 2016/17.
- In particular, approx. 1 in 6 children ages 7-11yrs and 1 in 9 children ages 12-18yrs are being bullied 'quite often'. This is has increased as compared to last year in both the age groups.



3.Enjoying and achieving and achieving economic well being (%) 7-11s School life

 Over the past few years, children aged 7-11yrs are reporting similar satisfaction with school life, 'enjoy going to school' and 'getting on well with teachers'. However, there is a slight drop in satisfaction in 2016/17.



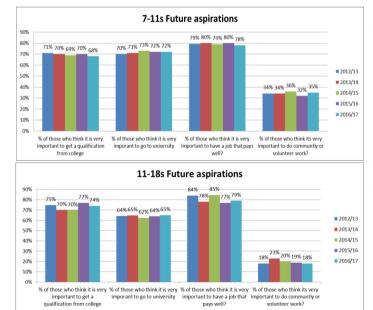


Similarly, slightly fewer 12-18s reported enjoying school and getting on well with their teachers compared to last year.

16% of 7-11yrs and 11% of 12-18yrs are quite often bullied. This

appears to have increased slightly as compared to last year.





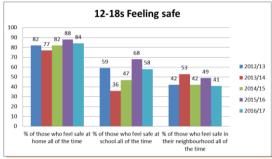
- Over the past five years, children age 7-11yrs have been reporting similar proportions of future aspirations. However, importance of working as a volunteer had generally improved.
- Slightly fewer children aged 12-18s now think 'its very important to go to college' in comparison to last year.
- Over the past three years there has been a steady decrease in 12-18s thinking 'its very important to do community work'.



4.Feeling safe

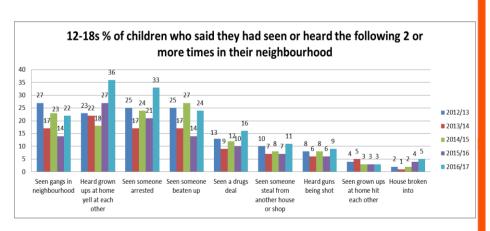
Although over the past few years, children aged 7-11 have reported similar levels of feeling safe at home, school and in their neighbourhood, there appears to be a slight decrease this academic year.





In particular, slightly fewer children aged 12-18 have responded 'feeling save at home, compared to last year and there appears to be a big drop of children ages 12-18 felling 'safe in school and in neighbourhood all of the time' in comparison to last years.





The proportion of children aged 12-18yrs reporting that they have seen or heard
the above has increased in general but proportion of children who said that they
have 'seen gangs in the neighbourhood', 'heard grown-ups at home yell at each
other', 'seen someone get arrested', 'seen a drug deal', 'seen someone beaten up'
and 'seen someone steal from another house or shop', has increased significantly
this academic year



SUMMARY

The trends show:

- •The majority of children reported being physically active. Approximately, 1 in 3 children aged 12-18 is engaged in healthy eating habits. The trend which previously showed the decrease in the percentage of children aged 12-18 who eat junk food daily, in the past few years has changed and shows an increase in the 2016/17 by 3%. Moreover, slightly more children aged 12-18 said that they have used drugs in the last month.
- •For emotional health outcomes, the proportion of 7-11yrs olds with overall conduct disorder and with poor pro-social skills has increased in past academic year. Similarly the percentage of 12-18yrs old with significant emotional problem has also increased during 2016/17. Almost 1 in 9 children aged 12-18 have overall difficulties in their mental health
- •Approximately 1 in 6 children ages 7-11yrs and 1 in 9 children aged 12-18yrs are being bullied. Almost three quarters of 7-11s and just under half of 12-18s have said they enjoy school most of the time.
- •In particular approx. only over one third of children aged 7-11yrs and just under half of the children ages 12-18 feel safe in their neighbourhood. 'Heard grownups at home yelled at each other' was the most commonly witnessed negative event, followed by 'seeing someone arrested', 'seen someone beaten up' and 'seen gangs in the neighbourhood'.

