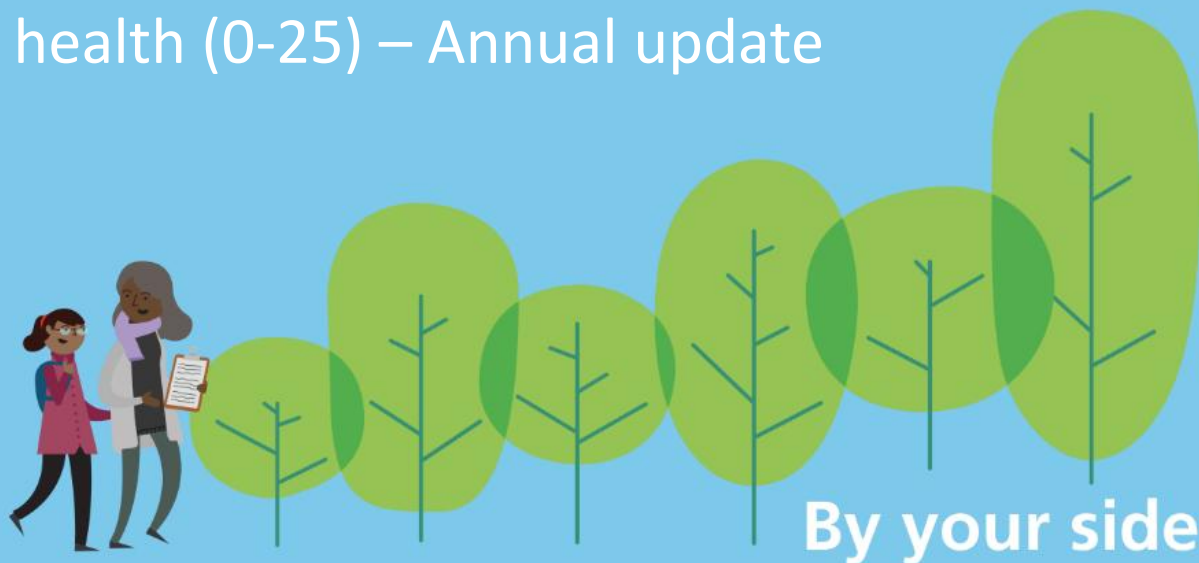
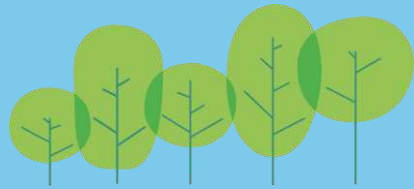


Health Overview Scrutiny Committee

Young person's mental health (0-25) – Annual update

October 2022





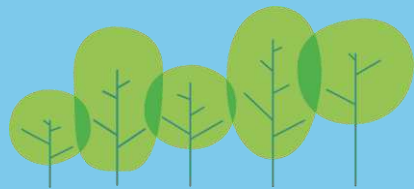
Contents



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1. Demand and capacity update*
2. Access to services (waiting times)*
3. Key innovation or service improvements
4. Next steps (the year ahead)

*Please note, we have been affected by a national cyber incident since August 2022 so in some reports we are only able to show part year summary (till August)

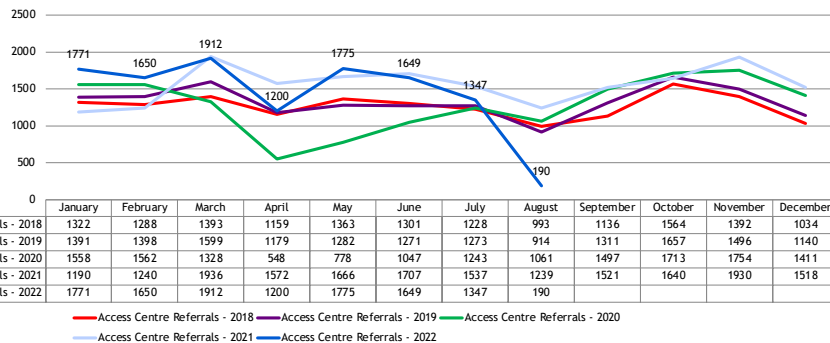


Demand & capacity

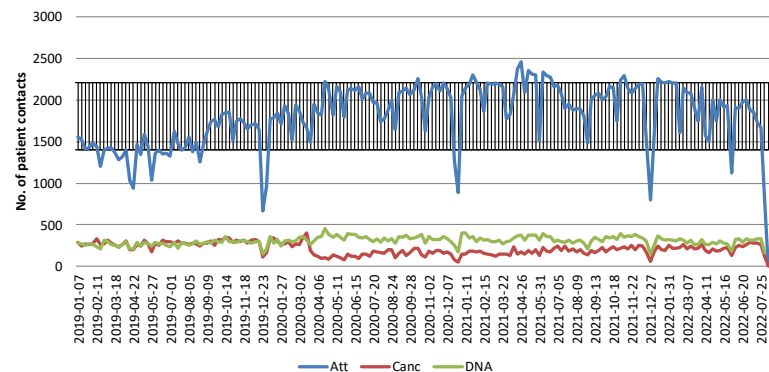


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Referrals into FTB

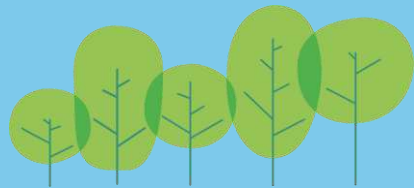


FTB - Community activity levels



- The post pandemic growth in demand for our services is evidenced in our referral data
- This year we have seen demand greater than every corresponding month of last year except in April*
- After two years of disrupted demand we are now seeing normal referral trends in our data
- We have maintained our capacity, with activity only dropping below 'normal' levels at peak holiday times

*August and July data affected by national cyber incident and June had the jubilee BH reducing demand naturally

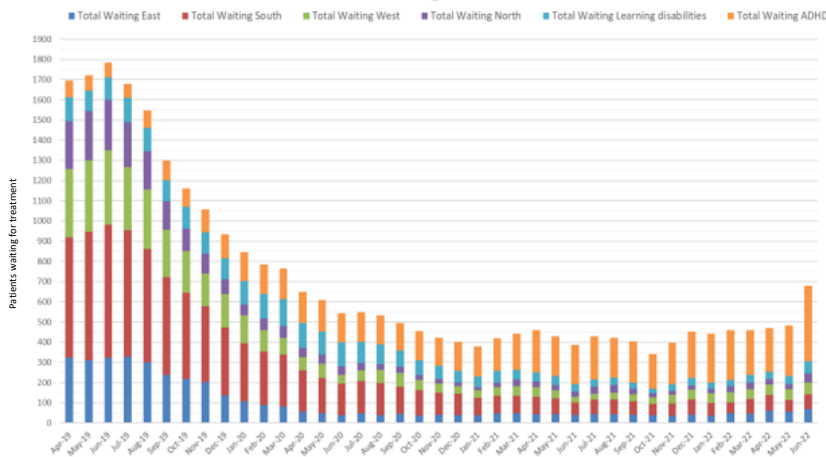


Access & waiting times

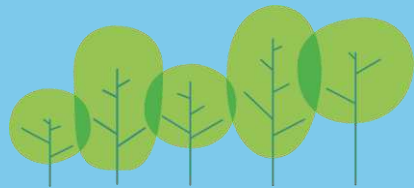


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External Waiting list Position

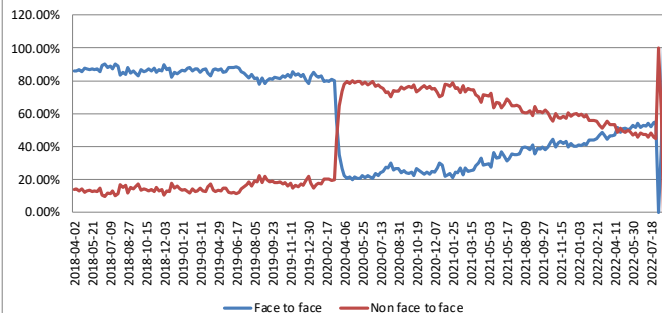


- The no. of patients waiting for treatment to start has remained historically low this past year
- As demand has increased we have recently started to see some service waiting lists grow
- The service that has the greatest demand change is ADHD (orange data points on chart) which now accounts for >50% of our total waiting list
- All other areas have seen small growth on their waiting lists but are coping well
- Our south hub (based in Selly Oak) remains our busiest core team with over 40% of activity going through there

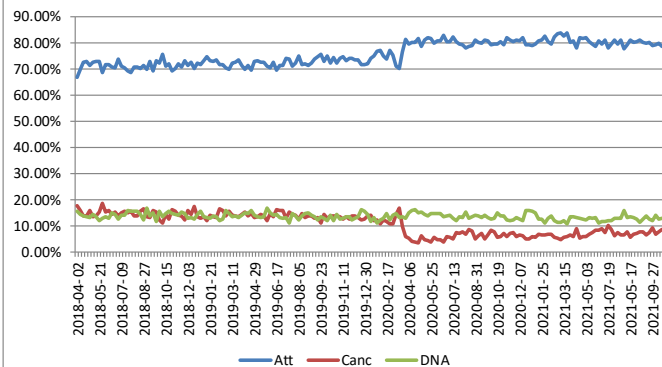


Access & waiting times

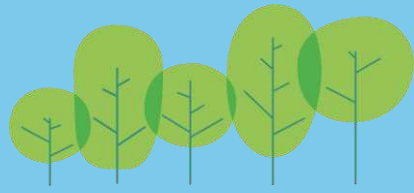
Type of contact (Face to face or Digital)



Percentages



- Access to our teams switched rapidly to non-face-to-face (virtual) contact with the onset of the pandemic
- This remained the most common method of seeing patients with a gradual reversal of this trend taking place this April
- Comfortingly, we have maintained our activity levels and kept our cancelled appointment rates historically low
- Investment into services has helped here (60+ extra staff in our team this year) - virtual appointments provided capacity but are reducing as more service users request face to face contact.

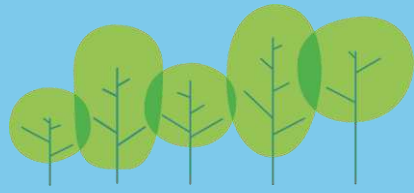


Urgent care pathway



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- Urgent care Mental health demand has grown following the pandemic as predicted
- This may be down to a couple of factors:
 - Lack of engagement with services these last couple of years
 - Additional challenges in society in post-pandemic world
- This results in:
 - Greater caseload of patients being cared for by our crisis & home treatment teams
 - More patients presenting in A&E departments
 - Increased pressure on inpatient bed capacity and patients being admitted into out of area beds
- Actions to resolve this are being worked up through a series of task and finish groups which will:
 - See our bed management teams join force across the city
 - Explore securing extra beds in the short term
 - Assess how we can reduce length of stay to improve length of stay (but we do well here)

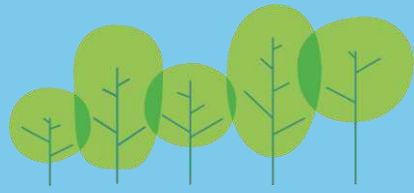


Key updates



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- Tier 4 inpatient CAMHS – lead provider and commissioning function
- Community Mental health transformation programme
- Further growth in clinical capacity
- Capital works at Parkview clinic
- CAMHS PDU & Place of safety
- Peer support workers roll out
- Suicide prevention
- Pharmacy delivery service



Next steps



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- Mental health provider collaborative across the ICB
- The final year of investment under MHIS
- As with last year's update – Winter is currently a big focus
- Recovery from national cyber attack
- International recruitment