

Birmingham City Council

Health and Adult Social Care Overview and Scrutiny Committee

Date: 23 January 2024



Subject: Scrutiny Inquiry on Children and Young People’s Mental Health: Is Birmingham meeting young people’s mental health needs?

Report of: Cllr. Mick Brown, Chair Health and Adult Social Care Overview and Scrutiny Committee

Report author: Fiona Bottrill, Senior Overview and Scrutiny Manager
fiona.bottrill@birmingham.gov.uk
07395884487

1 Purpose.

- 1.1 There were an estimated 220,635 children aged 5 to 18 years in Birmingham in 2018, this equates to 19.3% of the total population of the city. (Birmingham Children and Young People Joint Strategic Needs Assessment 2019) The scale of mental health need for children and young people has been reported nationally and had been a high-profile issue since the Covid-19 pandemic:
- The (Mental Health of Children and Young People Survey 2017) that nationally, one in eight children and young people aged 5 to 19 years have at least one mental disorder. The prevalence of mental health problems rises with age, with 9.5% of children aged 5-10 years experiencing a mental disorder compared to 16.9% of those aged 17-19 years old. Emotional disorders are the most prevalent type of mental health problem experienced by those aged 5-19 years old (8.1% of all children), followed by behavioural disorders (4.6%) and hyperactivity disorders (1.6%).
 - In Birmingham the estimated prevalence of mental health disorders in children and young people (5-16 years) is 10.3% (England 9.2%, West Midlands 9.7%) (Birmingham Children and young People Joint Strategic Needs Assessment, 2019)
 - Mental health problems affect about 1 in 10 children and young people. They include depression, anxiety and conduct disorder, and are often a direct response to what is happening in their lives. Alarming, however, 70% of children and young people who experience a mental health problem have not had appropriate interventions at a sufficiently early age

(Birmingham Children and Young People Joint Strategic Needs Assessment, 2019)

- After schools closed due to COVID-19 and ways of accessing GPs changed, new referrals to CYPMHS fell sharply (by 35% in April 2020 compared with the year before). However, about a year later, these reached a new high of 100,000 per month. (Health Foundation February 2022)

- 1.2 The Scrutiny Inquiry was established in October 2022 by the Health and Social Care Overview and Scrutiny Committee jointly with members from the Education and Children’s Social Care Overview and Scrutiny Committee. The terms of reference for the inquiry asked the question “How well are children with a diagnosed mental health condition supported across the mental health system with timely access to appropriate services and what is the service offer and pathways for children and young people in psychological distress without a diagnosed mental health condition to access appropriate support?”

2 Recommendations

- 2.1 It is recommended that:
- 2.2 Following consideration at City Council on 9 January recommendations R01 to R05, set out in Appendix 1, be noted.
- 2.3 Recommendations R06 to R24, set out in Appendix 1, are approved and the Integrated Care Board requested to co-ordinate the NHS response to these recommendations.
- 2.4 Recommendation R25, as set out in Appendix 1, is approved.

3 Background

- 3.1 The Inquiry on Children and young People’s Mental Health was agreed as part of the Scrutiny Work Programme for 2022/23 and due to the range and depth of engagement this work continued into 2023/24. The Task and Finish Group considered evidence from 19 organisations and services, met with children and young people, parents and carers and undertook an online survey. The report attached as Appendix 1 provides a summary of the evidence received.

4 Options considered and Recommended Proposal

- 4.1 The Scrutiny Inquiry identified the themes from the evidence set out below:
- Governance and mental health need
 - Support for parents and carers
 - Responding to mental health crisis in the community
 - Mental Health Act assessments
 - Service Provision and Communication

- Resources for Children and Young People's NHS Mental Health Services
- Quality of NHS Mental Health Services
- Early Intervention
- Schools' response to mental health
- Young people admitted to UHB due to lack of beds / placements.
- Primary Care / Local Services
- Communication about Access to Services, Diagnosis and Support (for Parents)
- Information Sharing and Confidentiality
- Place of safety
- Increase in Referrals for Autism and ADHD
- Understanding Individual Need, Identity and Circumstances
- Dual Diagnosis (Mental health and substance misuse)
- Workforce

4.2 Section 4 of the report attached as Appendix 1 sets out the recommendations agreed by the Inquiry Task and Finish Group.

4.3 The Governance Review of Birmingham City Council by the Centre for Governance and Scrutiny set out that the scrutiny work programme should focus on the Council's improvement and recovery priorities. The work of this inquiry aligns with the priority to ensure safe and effective delivery of key services supporting vulnerable people.

5 Legal Implications

5.1 The Health and Adult Care Overview and Scrutiny Committee terms of reference under the National Health Service Act 2006 include the local authority's statutory health scrutiny function to make recommendations to NHS organisations. City Council is recommended to endorse the recommendations to NHS organisations (Recommendations 6 – 25) in addition to approving recommendations to the City Council's Executive (Recommendations 1-5)

6 Financial Implications

6.1 The Inquiry recommendations recognise the financial pressures the Council is facing and set out that the implementation of recommendations will be within existing resources and capacity available. There is no request for additional resource or capacity to implement the recommendations.

7 Public Sector Equality Duty

7.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act;

- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

7.2 The Committee should ensure that it addresses these duties by considering them during work programme development, the scoping of work, evidence gathering and making recommendations. This should include considering: How policy issues impact on different groups within the community, particularly those that share a relevant protected characteristic; Whether the impact on particular groups is fair and proportionate; Whether there is equality of access to services and fair representation of all groups within Birmingham; Whether any positive opportunities to advance equality of opportunity and/or good relations between people are being realised.

7.3 The Committee should ensure that equalities comments, and any recommendations, are based on evidence. This should include demographic and service level data and evidence of residents/service-users views gathered through consultation.

7.4 During the Inquiry, evidence showed that there were gaps in the recording of ethnicity of young people who had been referred to the NHS services provided Forward Thinking Birmingham. Recommendation 22 sets out that Forward Thinking Birmingham should work with referring organisations to ensure that the ethnicity is included in referrals, and this is monitored to ensure that the service is reaching and meeting the needs of different communities on the city.

7.5 Evidence considered also reported that LGBT people are more likely to experience poor mental health and also that there has been an increase in the number of cases seen in primary care relating to gender identity. Recommendation 21 sets out that that the Integrated Care Board and Mental Health Provider Collaborative develop a robust service offer for LGBTQ+ young people.

8 Other Implications

8.1 How are the recommended decisions consistent with the City Council's priorities, plans and strategies?

8.2 The strategic importance of addressing children and young people's mental health is reflected in the Council's Grand Challenges relating to Health and Wellbeing and the City Council's Corporate Plan priorities:

- Champion Mental Health
- Support and enable young people to Thrive
- Protect and Safeguard vulnerable citizens

9 Background Papers

- 9.1 Birmingham City Council Corporate Plan [Council Plan and Budget | Birmingham City Council](#)

10 Appendices

- 10.1 Appendix 1: Is Birmingham meeting young people's mental health needs? Scrutiny Inquiry on Children and Young People's Mental Health