

Committee Name and Date of Committee Meeting

Health Select Commission – 24 November 2022

Report Title

Rotherham Child and Adolescent Mental Health – Annual Update to Health Select Commission

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Suzanne Joyner, Strategic Director of Children and Young People's Services

Report Author(s)

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Ward(s) Affected

Borough-Wide

Report Summary

Rotherham Child and Adolescent Mental Health – Annual Update to Health Select Commission provides a further update regarding the Local Area SEND inspection in association with children and young people's mental health, Kooth digital mental health support, CAMHs pathways including progress in relation to implementing the re-designed neuro-developmental pathway and phase 3 of the SEND sufficiency strategy.

Recommendations

Health Select Commission is asked to:

Note the progress made to implement strategies to support children and young people to have good mental health and emotional wellbeing.

Include a further update on Children and Young People's mental health and wellbeing on the forward plan for 2023.

List of Appendices Included

Appendix 1 Case Study – With Me In Mind

Appendix 2 Case Study - Kooth

Background Papers

Consideration by any other Council Committee, Scrutiny or Advisory Panel

None

Council Approval Required

No

Exempt from the Press and Public

No

Rotherham Child and Adolescent Mental Health – Annual Update to Health Select Commission

1. Background

- 1.1 In October 2018, November 2019, December 2020 and November 2021, Health Select Committee received reports with updates on the work across the child and adolescent mental health system, with a focus on the improvement journey of the Child and Adolescent Mental Health Service. The focus in 2021 was on the Local Area SEND inspection in association with children and young people’s mental health, the impact of the Covid-19 Pandemic on children and young people’s mental health and wellbeing, a progress update for the neuro-developmental pathway and SEND sufficiency.
- 1.2 In 2022 there is an opportunity to provide a further update regarding the Local Area SEND inspection in association with children and young people’s mental health, early support for children and young people’s mental health and wellbeing post pandemic including the Mental Health Support Teams and Kooth, a progress update on the neuro-developmental pathway and SEND sufficiency.

2. Key Issues

2.1 Local Area SEND inspection

- 2.1.1 Between the 5th and 9th July 2021 Ofsted and CQC visited Rotherham to judge the effectiveness of the local area in implementing the SEND reforms.
- 2.1.2 Inspectors spoke with children and young people with SEND, parents and carers, and officers. They went on visits, looked at a range of information including the local area’s self-evaluation and performance data and considered 481 responses from parents and carers.
- 2.1.3 The inspection considered how we identify and support children and young people with their mental health and emotional wellbeing in relation to their education, health, and care needs.
- 2.1.4 The inspection identified four areas of significant weakness.
- The variability in the quality of EHC plans, including the contribution of health and social care partners.
 - The effectiveness of the graduated response to identify and meet children and young people’s needs, especially in key stages 1 and 2.
 - The quality of provision for children and young people’s preparation for, and transition to, adulthood.
 - Communication with all parents and carers of children and young people with SEND about the local offer, and the accessibility of the very valuable information included within the local offer.

Senior Leaders, supported by a DfE and NHSE advisor, produced a Written Statement of Action (WSOA) to Ofsted and CQC that explains how the local area will tackle areas of significant weakness. The progress made towards these areas in relation children and young people's mental health and emotional wellbeing is included in this report.

- 2.2
 - The variability in the quality of EHC plans, including the contribution of health and social care partners.
- 2.2.1 The designated clinical officer has completed an audit of health advice being submitted and how this translates into individual EHCPs. This has informed a focused action plan which the DCO will now implement. All providers, including CAMHS have been asked to embed quarterly audit into practice to ensure ongoing monitoring. As part of this activity there has been additional training and support provided to CAMHS practitioners.
- 2.2.2 A resource of 'what a good one looks like' has been developed to provide further support for Health staff. (September 2022).
- 2.2.3 Of 35 records audited by the DCO, 6 children and young people were identified as being on the CAMHS waiting list for neurodevelopmental assessment and 4 were actively involved with CAMHS and information was submitted by a CAMHS practitioner. The general quality of these 4 submissions was good with a clear description of the child or young person presented in a succinct and clear way. In all 4 cases a clear description of needs was provided with an explanation of how these had been determined. In 3 out of 4 cases the implications for school were clearly explained. All recommendations are included in the action plan and CAMHS are engaged in implementation.
- 2.2.4 It was noted that there were a small number of cases where CAMHS had not been approached for a report but where SEMH needs were identified in the EHC referral made by the school. It is recommended that CAMHS are automatically approached for advice whenever SEMH is mentioned, to reduce the risk of missing important information.
- 2.3
 - The effectiveness of the graduated response to identify and meet children and young people's needs, especially in key stages 1 and 2.
- 2.3.1 School SEMH leads are involved in developing a Co-production and Inclusive Practice toolkit which highlights best practice under each of the Cornerstones accessible via the SENDCo electronic resource and the Genuine Partnerships website.
- 2.3.2 An Inclusion Event to share best practice, including DfE was held on 01.07.2022 and the Team Around the School Inclusion Event on 07.07.2022 shared lessons learnt to develop multi agency working going forwards as proactive support for SEMH.

- 2.3.3 Aspire Pupil Referral commissioned to deliver both primary and secondary SEMH outreach from September 22 with full contract and KPIs in place including termly reviews and a number of key inclusion measures.
- 2.4
- The quality of provision for children and young people’s preparation for, and transition to, adulthood.
- 2.4.1 The local area have agreed to complete a gap analysis of support service, health services and provision for young people in preparation for and transition to adulthood. This will be based on the NDTi PfA minimum standards. This will identify areas which require development work or where there are commissioning gaps. Transition pathways for Rotherham’s Preparing for Adulthood Cohort for four prioritised Health Services will be clearly defined and communicated.
- 2.4.2 One of the 4 prioritised health services is CAMHS. A CYPS Practice learning day helped to identify gaps in the transition pathway for mental health the report and action plan is being developed.
- 2.4.3 There is also a meeting set up to do a learning disability transition pathway for Health (which will build on the one that already exists within RDASH but will be broader and include therapies etc).
- 2.4.4 Support and challenge for the local area takes place both through individual meetings and formal monitoring meetings. Formal monitoring meetings take place every 4-6 months.
- 2.5 **Children and Young People’s mental health and emotional wellbeing Support**
Rotherham CAMHS use the Thrive model to deliver services.



- 2.5.1 The THRIVE Framework thinks about the mental health and wellbeing needs of children, young people, and families through different needs-based groupings:
- Getting Advice and Signposting,
 - Getting Help,

- Getting More Help, and
- Getting Risk Support.

2.5.2 The Thrive Approach is an intervention that has its basis in neuroscience, attachment, and child development to help support the child's overall social and emotional development

2.6 **Getting Advice and Signposting**

2.6.1 **With Me In Mind** (Rotherham's Mental Health Support Team delivery) started in 2019, the first two MHSTs cover 23 identified settings and approximately 16,000 pupils. In 2022 With Me in Mind has successfully expanded into a further 16 schools and 8020 pupils as part of Wave 6 of the national MHST roll out. With the expansion, Rotherham MHSTs cover 52% of the education settings across the borough.

2.6.2 With Me In Mind provide **evidence-based interventions** for children with mild to moderate mental health difficulties. (Low mood/anxiety disorders/worry management/parent led CBT for children under 12). Working in partnership with education provision and their identified senior mental health lead, developing the **whole school approach** to mental health - including workshops, assemblies, staff training, staff supervision, parent workshops, personal, health and social education (PHSE) support etc. They also provide timely **advice and consultation** to schools and colleges, including home educated students, about individual children's emotional health and signpost to appropriate services to ensure that young people get the right support.

2.6.3 A case study demonstrating the impact of the support is attached at Appendix 1 (With Me in Mind Case Study).

2.6.4 **Participation and Engagement – Ambassador Programme**
Enabling Student Voice, the Student Wellbeing With Me in Mind Ambassadors promote the service and raise awareness around mental health amongst their peers. 70 Ambassadors have been recruited across 75% of the schools covered. Ambassadors receive training around 'What is With Me In Mind', confidence building and basic mental health awareness. They have opportunities to contribute towards social media, e-newsletters, focus groups and wellbeing events.

2.6.5 Wherever possible young people are involved at every stage of service delivery and measuring outcomes, so they feel they are listened to in regards what is important to them when discussing mental health. The Ambassadors were instrumental in the development of the 'My Mind' form in consultation with primary and secondary students. This has now been rolled out for use across Rotherham and is recognised in national MHST meetings as an example of good practice.

2.6.6 **Social media**

In a timely response to Mental Health Awareness week in May, the WMIM newsletter was re-established. Editions are released to all our schools and social platforms.

2.6.7 There has been a 70% increase in social media followers.

2.6.8 **Access to materials**

Parent materials are now available in the three most common languages within Rotherham.

Kooth

2.6.9 KOOOTH is a digital mental health support service jointly commissioned by Rotherham MBC and NHS South Yorkshire Rotherham Place.

2.6.9 Kooth.com is an innovative online counselling and support service which is now available to all young people and young adults across Rotherham aged 11-25.

2.6.10 It is a safe, confidential and anonymous way for young people and young adults to access emotional wellbeing and early intervention mental health support. Offering personalised support with short waiting lists and no thresholds, users can access:

- Live one to one text based counselling sessions
- 24hr messaging service
- Clinically approved articles
- Peer to peer support through pre moderated discussion forums
- A Daily Journal

2.6.11 Fully trained BACP Accredited counsellors and emotional wellbeing practitioners are available until 10pm each night, 365 days per year, providing a much needed out-of-hours service for emotional support in an accessible way. A case study demonstrating the impact of the support is attached at Appendix 2 (Kooth Case Study).

2.7 **Getting Advice Pathway**

2.7.1 The Child and Adolescent Mental Health Services (CAMHS) getting advice pathway provides Single Point of Access (SPA) Consultation and Advice. Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) is the main provider of CAMHS to children and young people in Rotherham.

2.7.2 GPs continue to make the most referrals (approximately 45%) into the SPA consultation and advice service, followed by Education Services (approximately 20%).

2.8 **Getting Help Pathway (Getting Help, Getting More Help)**

2.8.1 The CAMHS Getting Help pathway provides Specialist assessment and brief interventions. Rotherham, Doncaster and South Humber NHS

Foundation Trust (RDaSH) is the main provider of CAMHS to children and young people in Rotherham.

- 2.8.2 The number of inappropriate referrals has reduced since the highest point in August 2021. The service continues to work with referrers to support a better understanding of the pathways.
- 2.8.3 The length of time children remain open for assessment and intervention has increased. 70% of children start assessment and intervention within 18 weeks, the longest wait is 31 weeks.
- 2.8.4 The return to face to face appointments has seen an increase in the number of children and young people who did not attend their CAMHS appointment with CAMHS (7.8%), this is a national trend.
- 2.8.5 A range of practitioners including Clinical Psychologists, Family Therapists, Art Therapists, CBT Therapists and Psychotherapists provide psychological therapies. This means we can provide a wide range of therapeutic approaches with individual, systemic and group formats. Challenges around sickness, covid and recruitment have resulted in longer waits for these interventions. The position is improving; with the pathway now being fully staffed and sickness improving.

2.9 **Crisis and Intensive Community Support** (Getting Risk Support)

- 2.9.1 The CAMHS crisis pathway is currently under development. Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) is the main provider of CAMHS to children and young people in Rotherham. For urgent and emergency presentation a crisis service offers advice, assessment and intensive community support for a short period of time as required. This works to avoid hospital admission and supporting those stepping down from specialist in-patient services.
- 2.9.2 RDaSH continue to consistently respond to triage urgent referrals for CAMHS within 4 hours for an emergency and 24 hours for children and young people with an urgent need.

2.10 **Neuro-developmental pathway**

- 2.10.1 The CAMHS neuro-developmental pathway provides diagnosis for Autism Spectrum Disorder and Attention, Deficit and Hyperactivity Disorder. Since October 2018 it has been apparent that the diagnostic capacity was not sufficient to meet demand. Identifying sufficient capacity to meet demands for Autism diagnosis is a national issue due to increasing awareness, demand and a challenging workforce position. In response to this national trend, the NHS Long Term Plan proposed that ASD/ADHD waiting times would be monitored through the Mental Health Standardised Dataset (MHSDS); this will give a clearer national comparison of referrals and waiting times.

- 2.10.2 Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) is the main provider of Neurodevelopmental Assessments (specifically the differential diagnosis of ASD and ADHD) in Rotherham for Children and Young People. The Trust also provides a post-diagnostic service for Children and Young People diagnosed with ADHD.
- 2.10.3 South Yorkshire Integrated Care Board (SY ICB formally Rotherham CCG until July 2022) worked closely with the RDaSH CAMHS service to understand the demand and capacity issues across the system. Stakeholders from education, early help and social care and health and the voluntary and community sector have all been involved with this work. In August 2020 investment in the re-design of the pathway was approved. The new pathway aims to ensure that children who present with neuro-developmental difference have their needs met and are supported to thrive at the earliest opportunity and regardless of whether they have a formal diagnosis. Implementation of the new pathway began in December 2020 and continues to be embed.
- 2.10.4 In 2021 Rotherham CCG's Governing Body approved a proposal to substantially invest in the neuro-developmental diagnostic pathway to implement a trajectory to reduce the waiting time for assessment to 18 weeks by 2025.
- 2.10.5 In line with the financial investment and trajectory, the Neurodevelopmental Assessment Service and have recruited to additional posts and in partnership, transformed the way services are delivered.
- 2.10.6 The service has increased the number of children assessed for a neurodevelopmental disorder whilst providing an excellent standard of assessment. In November 2021 94% of the children on the waiting list had waited longer than 18 weeks. This reduced to 86% at the beginning of February 2022 and is now 83% (November 2022).
- 2.10.7 To date, the increase in assessments has not reduced the waiting list in line with the trajectory. Data shows a significant increase in referrals during the last 12 months, despite the partnership working and changes to referral processes.
- 2.10.8 A substantial amount of clinical time is lost due to inappropriate and inadequate referrals. The experience for the children and families is unsatisfactory as they are waiting for an assessment which, following screening, is deemed not appropriate.
- 2.10.9 Further work is required with partners across the system to ensure referrals to the pathway are appropriate and include all relevant information. It is important that the system around the children promote the right support for children and their families at an earlier stage and not based on a diagnosis.

Improving the quality and reducing inappropriate referrals will increase the available clinical time for assessment. This should enable increased activity to reduce the number of children waiting for assessment in line with the trajectory.

2.11 **SEND Sufficiency**

- 2.11.1 Social, Emotional and Mental Health is recognised as a category of need in the SEND Code of Practice, and, as such is a consideration for the Council in terms of its duties to provide sufficient educational places for children with special educational needs and disabilities.
- 2.11.2 In November 2020 Cabinet approved proposals to develop designated educational provision for children designated SEMH. The opening of Elements Academy, part of the Ethos Academy Trust based at the former Dinnington College Campus successfully concluded Phase 3 of the SEND Sufficiency Programme.
- 2.11.3 The new school opened in September for the new school year. It will be the only one of its kind in the borough and will meet the growing need for specialist provision, underlining Rotherham Council's on-going commitment to bolster places for children with special educational needs and meet increasing demand.
- 2.11.4 On the 17th of October Cabinet approved the SEND Sufficiency Development Phase 4 proposals. Work is now underway to progress the development of 10 resource bases in mainstream schools' settings. The proposed profile of provision informed by current SEND needs and provision mapping would be to create 100 places:
- 2 Primary phase Social Emotional Mental Health resource base provisions – 20 places in total
 - 2 Secondary phase Social Emotional Mental Health resource base provisions – 20 places in total
 - 2 Primary phase Communication and interaction resource base provisions -20 places in total
 - 2 Secondary phase Communication and interaction resource base provisions -20 places in total
 - 2 Secondary Moderate Learning Difficulty resource base provisions -20 places in total
- 2.11.5 The second aspect of SEND sufficiency phase 4, is to support School Access Issues (in both Mainstream Schools and Special Schools). Capital investment will support schools to meet a wider level of complex needs, including Social Emotional and Mental Health needs, in individual settings. Capital funding will be made available for both Mainstream and Special Schools which will be available through application and assessment.

3. **Options considered and recommended proposal**

- 3.1 Health Select Commission is asked to:
- 3.2 Note the progress made to implement strategies to support children and young people to have good mental health and emotional wellbeing.
- 3.3 Include a further update on Children and Young People's mental health and wellbeing on the forward plan for 2022.

4. Consultation on proposal

- 4.1 Engagement has been led by NHS South Yorkshire Rotherham Place with Rotherham, Doncaster and South Humber CAMH Services, CYPS Commissioning, CYPS Education and Inclusion. This has informed the development of the report.
- 4.2 The Lead Member for Children and Young People and Lead Member for Adult Social Care and Health have been engaged.

5. Timetable and Accountability for Implementing this Decision

- 5.1 A further update on Children and Young People's mental health and wellbeing will be included on the forward plan for 2023.

6. Financial and Procurement Advice and Implications

- 6.1 There are no direct financial implications within this report.
- 6.2 There are no direct Procurement implications arising from this report.

7. Legal Advice and Implications

- 7.1 Section 19 of the Children and Families Act 2014 states that when Local Authorities carry out their functions under this act in relation to disabled children, young people and those with special education need (SEN), they must have regard to the views, wishes and feelings of the child/young person and those of their family, providing information to enable them to participate in those decisions, to support the child/young person to achieve the best possible educational and other outcomes. Giving consideration to this report and the provisions detailed, it is also noted that consultation has been undertaken in line with the SEND Code of Practice (January 2015) in reviewing such provisions and therefore there are no direct legal implications arising from this report.

8. Human Resources Advice and Implications

- 8.1 There are no direct HR implications within this report.

9. Implications for Children and Young People and Vulnerable Adults

9.1 Implications to vulnerable children and young people are covered within the report.

10. Equalities and Human Rights Advice and Implications

10.1 Key considerations are referenced within the report, Children and Young People with Social, Emotional and Mental Health, including neurodevelopment are disproportionately represented across a range of education and inclusion measures

11. Implications for CO₂ Emissions and Climate Change

11.1 There are no direct implications for CO₂ Emissions and Climate Change within this report.

11.2 Improving access to services including education within the borough will limit students travelling. This would support reduced emissions of CO₂.

12. Implications for Partners

12.1 Children's Social, Emotional and Mental Health, including neurodevelopment sits across all Place based partners and stakeholders as a priority.

12.2 Key partners including children, young people, parent/carers, schools, education sector, health, social care, and other SEND related partners are directly accountable stakeholders. This work fits within the Rotherham SEND improvement journey.

13. Risks and Mitigation

13.1 Ongoing growth in the number of children and young people with Social, Emotional and Mental Health, including neurodevelopment is reflected in both regional and national datasets. The continued growth in this area has direct resource implications across all SEND partners in Rotherham.

13.2 Rotherham is currently subject to ongoing monitoring of the Written Statement of Action, Safety Valve (in association with SEND Sufficiency) and the neuro-development pathway trajectory. Risks and Mitigation are incorporated into planning and delivery for each programme.

Accountable Officer(s)

Name, Job Title

Approvals obtained on behalf of:-

	Named Officer	Date
Chief Executive		Click here to enter a date.
Strategic Director of Finance & Customer Services (S.151 Officer)	Named officer	Click here to enter a date.
Assistant Director of Legal Services (Monitoring Officer)	Named officer	Click here to enter a date.
Assistant Director of Human Resources (if appropriate)		Click here to enter a date.
Head of Human Resources (if appropriate)		Click here to enter a date.

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