

The impact of COVID-19 on children and young people's mental health and well-being

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Introduction

The following slides have been prepared for Manchester City Council Scrutiny Committee, following the ask to continue exploring the impact of COVID-19 on children and young people's mental health and well-being.

Within this evidence suggests that children and young people's mental health and wellbeing has been substantially impacted during the pandemic resulting in higher demand and within this acuity (complexity) for CAMHS.

Nationally and regionally there have been increasing calls to understand the mental health and wellbeing impacts for children and young people (CYP). Such an understanding will help to inform how CYP - and those who care for them - can be best supported



CAMHS Observations

- Following the impact of Covid, CAMHS continues to see an increase in volume and acuity (complexity), particularly within certain targeted vulnerable populations, when compared to the general population. Most notably within:
 - Eating Disorders;
 - SEND;
 - Neurodevelopmental conditions (ASD/ADHD); and
 - Looked After Children (LAC).
- CAMHS Community Eating Disorder Services (CEDS) has and continues to see an increase in eating disorders referrals and within this higher acuity, leading to higher admission rates
- Whilst there was some suggestion that the initial start to pandemic may appeared to have been beneficial to some CYP with SEND, increasing evidence now suggests that those CYP with SEND appear to have suffered substantial impacts on their mental health and experienced higher levels of anxiety.
- Under the pandemic and the measure to control the disease there can be seen delays in CYP social development skills and experience requiring a review and change of pathways to manage the delayed social and educational development seen in CYP





CAMHS Observations

CAMHS Data shows:

- 69% increase in Referral received in the last 12 months since pre-covid (Oct 2019).
- 125% increase in CAMHS Caseload as of End of August 2023 compared to Oct 2019 pre-covid
- 11% increase in Paediatric ward referrals in the last 12 months since the start of covid
- 94% Caseload growth from Paediatric wards (as of End of August compared to Oct 2019 pre-covid state)
- 69% increase in A&E/Crisis referrals (in the last 12 months since the start of covid)
- 175% Eating Disorder Caseload growth (as of End of August 2023 compared to Oct 2019 pre-covid state)
- The increase in demand and acuity has led to increase in waiting times shown in 12 month rolling performance. Within this Manchester performance average:
 - 2.1 weeks against the pilot 4-week Mental Health Triage to be seen target;
 - Whilst treatment commencing (denoted by two competed appointments) is 6.4 weeks against an 12-week target

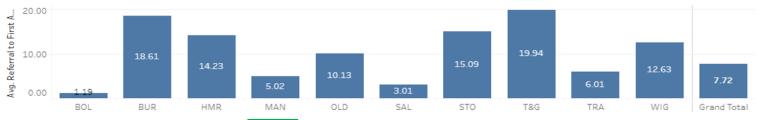




CAMHS Waiting Times Performance

April to August 2023 GM average waiting time to First Appointment

Waited Weeks Referrral to First Appointment by CCG



Waiting times across Grater Manchester localities. Source: the GMICB Tableau Report; performance for referral to first contact from April 2023 to August 2023.

April to August 2023 GM average waiting time to Second Appointment



April to August 2023 GM average waiting time to Second to Third Appointment

8.0 6.0 8.93 8.29 8.46 4.0 4.70 3.80 4.28 2.0 3.78 3.64 3.66 BUR HMR SAL STO T&G TRA BOL MAN OLD WIG Grand Total Manchester CAMHS holds one of the timeliest waiting time positions (only second to Salford) for all 3 completed appointments across the GM ICB, with an average 11.6 weeks against a GM average of 17.59 weeks. However, there are bottlenecks and substantial waits for diagnose for CYP with Autism and ADHD.

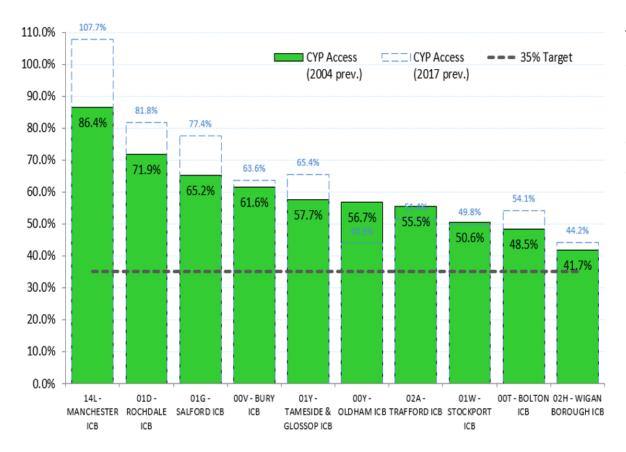


RTT Weeks (2nd Direct Appointment) by CCG

Waited Weeks Second to Third Appointment Wait by CCG

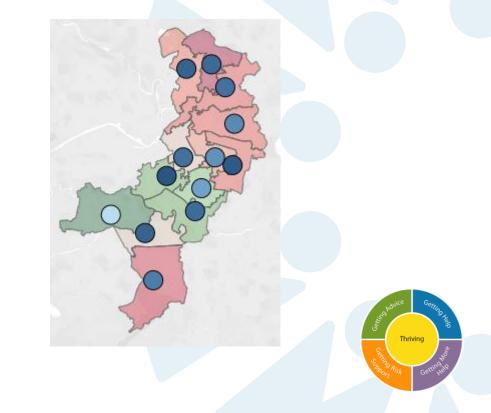


CAMHS Access Performance



Source NHS Digital (MHSDS): Data shows CYP receiving treatment at March 2023 (defined by 2 or more contacts)

The map below shows deprivation v access to CAMHS, overlayed with improvement in access since April 2018. Darker blue areas demonstrates more improvement and redder areas of the map demonstrate areas of more deprivation. Within this a correlation relating deprivation and improved access can be seen.





CAMHS Community Eating Disorder Services (M-CEDS)

- CAMHS Community Eating Disorder Services (CEDS) continues to see an increase in referrals, with 312 referrals received in 2022/23, an increase from 217 on 2021/22. We continue to manage this increased demand successfully against the referral to treatment (RTT) clock.
- MFT CEDS have successfully developed a robust intensive support pathway including a virtual ward for young people at risk of admission. We can now provide a range of treatments in the community that would have traditionally required admission, including nasogastric feeding.
- We are part of GM's MEED (Managing medical Emergencies in Eating Disorders) working group, and are developing robust pathways with the three Adult ED care providers that cover our footprint for as part of a transition working group. We have also developed videos for our referrers within primary care which have been well received across GM. We have also developed a working group to enhance our online offer and website.
- We are leading care for ARFID regionally, providing a range of interventions for families and consultation and training to other providers and referrers. We have developed a regional ARFID network to better share learning and coordinate care.

"I'd like to take this opportunity to say how refreshingly positive and speedy your referral process has been. The referral itself was not too lengthy to complete, the turn around time from submitting the referral to clinic apt was incredibly quick- we are so used to waiting several months or years for an apt! Receiving the diagnosis on the apt day was also areat and mum came away feeling informed and with a support plan. Thank you. 🕑 "





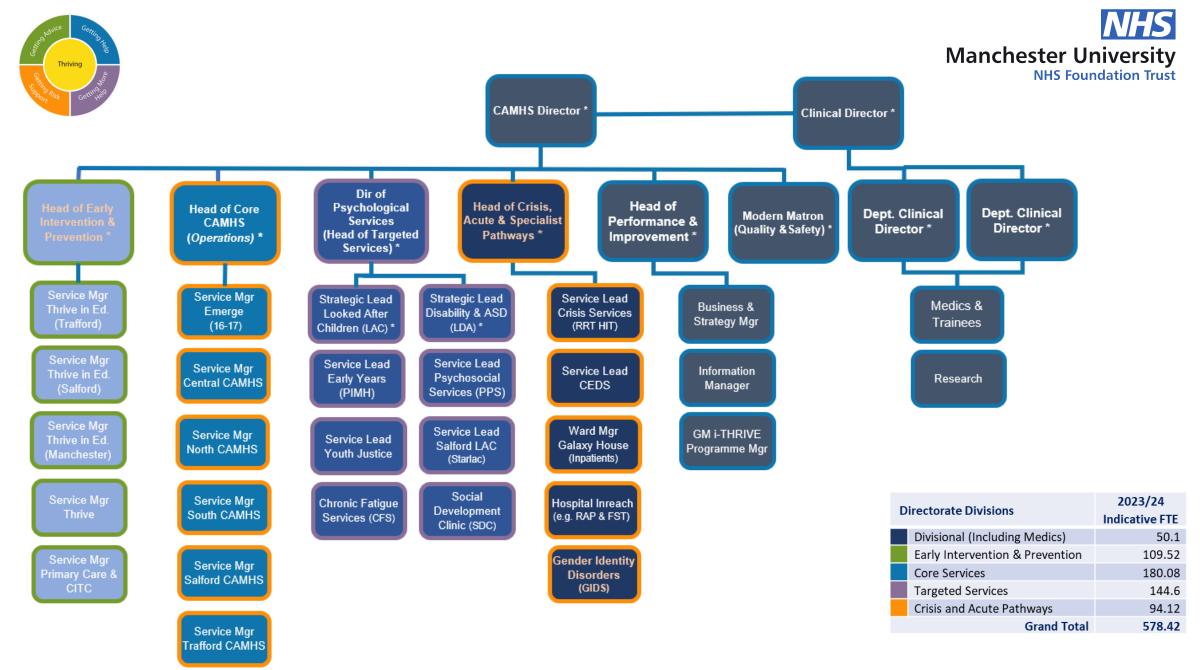
Mental Health Stepped Care Underpinning Integrated Pathways



Stepped care is an evidence based, stage approach to the delivery of mental health services, comprising a hierarchy of interventions - from the least to the most intensive match to the individual's needs

It's about ensuring that people can access the most appropriate services for enough needs take your time it is step up step down was of care as they move along their care journey





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CAMHS Transformation Response

- To date three M-THRIVE Hubs have opened across the City in Central, North and the South locality.
- The Hubs are active 7 days a week (weekend via digital front door), complementing and enhancing the current family and youth support services across all the agencies and communities in Manchester
- Although the Tthrive model of care is not a clinical intervention service it is an enabling support service to get to the right intervention services, right time and right place - building CYP self-esteem and resilience along the way.
- As of August 2023, M-Thrive hubs have supported over 2744 CYP and those who care for them.
 - 14% accepted into CAMHS
 - 56 % of CYP were signposted through helping hand or navigated to.
 - 30% CYP was discharged from M-Thrive following either Navigation sessions or brief interventions (one to ones) being enough at that time.
- The majority of CYP who access M-Thrive are directed by CAMHS, Early Help and schools. The main presenting issues with CYP are low mood or anxiety-based school avoidance.





CAMHS Transformation Response: Manchester Thrive in Education

- Manchester Thrive in Education (Mental Health Support Teams in schools) are led by CAMHS and in a joined-up offer with VCSE partner agencies providing mental health provision in schools and colleges
- The service sits at the "getting help" level of the THRIVE system aimed to increase access to
 psychological therapies on site in education settings for CYP experiencing mild to moderate mental
 health difficulties
- The service is currently working in over 35% of schools and colleges across Manchester offering evidence-based therapy, mental health consultation to key education staff and development of the whole school/college approach to mental health
- In the school year 2022/23, each secondary school will be offered a MHST practitioner in line with the continued expansion of the MHSTs nationally
- To support an improve stepped care Thrive in Education have implemented a crisis pathway from education settings into specialist CAMHS. The team have also worked in partnership with CEDS to develop and pilot a body image project in education settings to provide prevention intervention for eating difficulties



