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Ask for: Kay Goldsmith Date: 20/11/20

Dear Member

# **HEALTH OVERVIEW AND SCRUTINY COMMITTEE - TUESDAY, 24 NOVEMBER 2020**

I am now able to enclose, for consideration at next Tuesday, 24 November 2020 meeting of the Health Overview and Scrutiny Committee, the following report that was unavailable when the agenda was printed.

## Agenda Item No

Children and Young People's Mental Health Service - update (Pages 1 - 10)

CYPMHS Q2 2020 update

Yours sincerely

Benjamin Watts General Counsel





# Kent MP quarterly briefing note: Quarter two July to September 2020

Children, young people and young adults' emotional wellbeing and mental health in Kent (This quarterly briefing note provides a regular update for all MPs in Kent. Please note this is not for media use or for use in any other publication.)

# **Commissioner update**

## Covid-19 response and recovery

NHS Kent and Medway Clinical Commissioning Group (K&MCCG), in partnership with Kent County Council (KCC), have continued to respond to the Covid-19 pandemic through tracking of pressures and risk and system-wide response (as described in the quarter one briefing).

Since the start of Covid-19, our national and local understanding of the impact of Covid-19 on children and young people has increased. Both Young Mind's survey<sup>1</sup> and NHS Digital's 2020 survey<sup>2</sup> reported that high proportions of young people said their mental health (83%) or life in general (40%) was a little or much worse due to the pandemic. Headstart Kent<sup>3</sup> conducted a survey specific to Kent's young people and reported that a third would not contact mental health services even if they felt they needed support. Over half of children and young people said their anxieties; worries, anger, sadness, and loneliness were either much or a little worse during lockdown.

The commissioning and provider response to the increased demand has included:

- Securing increased investment to meet identified need across a number of pathways including crisis response, specialist bereavement, and unaccompanied asylum seeking children
- Increased system communications on where to find support such as the crisis cards and bulletins to schools and GPs.
- Specific attention has been paid to the children and young people's suicide prevention work stream, with a number of actions undertaken, including review of the self-harm and suicides prevention strategy, implementation of a children and young people's suicide prevention network and clinical harm reviews of all children and young people waiting assessment.

As part of Kent and Medway children and young people's Covid-19 response, a dashboard has been developed to monitor the demand and capacity within the children and young people's mental health system and observed a decrease in use from April which has gradually increased since. This dashboard and other modelling work has helped to inform the investment in the second half of 2019/20.

Young Minds Corona virus report, 2020, https://youngminds.org.uk/media/3708/coronavirus-report\_march2020.pdf

NHS Digital CYP MH survey, 2020 https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/publications/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statistical/mental-health-of-children-and-information/statisti young-people-in-england/2020-wave-1-follow-up

3 Headstart Kent HeadStart Resilience Program, Resilience Mid-Point Survey Results, May 2020

## **NELFT** update

#### Covid-19 key updates (July to September 2020)

Our teams have been working hard to provide care and support to patients, their families and carers during an unprecedented and difficult time. This period saw a continual rise in the number of referrals to our service and no placements within our new inpatient unit, which has impacted the capacity within our Single Point of Access (SPA) and crisis teams to meet demand. We are working closely and continuously with the commissioners in Kent and Medway to ensure we manage this caseload safely, prioritising patients who are high risk.

- Our services continued to operate as business as usual, utilising digital technology where appropriate such as telephone and video consultations for assessments and treatment, including group work
- We adapted our reporting mechanisms to now capture virtual contact for patients' initial appointments, reviews and treatment. We have continued to review our data throughout the pandemic
- Face to face consultations continued based on the patient's clinical need, both in the community and within our Covid-19 secure clinics
- We set up 'Our Future Focus' tactical incident groups to ensure we strategically plan and action our recovery and restoration requirements
- Trajectories remained in place to monitor treatment waiting times
- We conducted a weekly review of the longest waiters caseload (which is monitored through our Clinical Harm Review and Clinical Risk Assessment data)
- We increased our offer of group therapy and support by providing sessions virtually for a range of mental health, wellbeing and neurodevelopmental conditions
- Preparation and planning commenced in anticipation of an increase in Covid-19 in the county

#### Kent and Medway Adolescent Hospital (KMAH)

Following the successful transfer of our first mental health inpatient unit for children and young people in Kent on 1 April 2020, we are now reviewing the leadership and clinical pathways within the unit to ensure our service and care aligns with our existing mental health service and support in the community. Building work continues on the bespoke Section 136 suite within the unit and is due to be completed at the end of November 2020.

## NELFT CYPMHS performance activity data: July/September 2020 (Q2)

This briefing is accompanied by two key appendices.

- **Appendix 1** provides a full, detailed breakdown of referral and caseload activity for the quarter period from July to September 2020 by locality.
- Appendix 2 focuses on the length of waiting times for assessment and treatment by week and locality area over the same period.

The data within both appendices are provided in line with MP specification and have been shared quarterly since October 2018.

#### Appendix 1: access, referrals and caseload management

Referral volume to our service significantly increased from July to September due to the impact of lockdown and the subsequent return to schools in July. East Kent received the highest volume of referrals via our Single Point of Access (SPA) service (3,109 referrals in Q2 vs 2,139 referrals in Q1) with over 1,000 referrals received per month in July and September when pupils returned to school. West Kent also experienced high referral volumes via the SPA (2,330 referrals in Q2 vs 1,694 referrals in Q1)

There has however been a reduction in the number of children and young people waiting for assessment and treatment as staff have been able to increase contact with patients through the use of virtual contact for assessment and treatment, and there has been a reduction in caseloads.

Our clinical staff and operational leads continue to efficiently, proactively and collaboratively monitor and manage the caseloads, risk and longest waiters with commissioners and the wider system.

Table 1 summarises key activity across the service from April to September 2020

Kent CYPMHS & Neurodevelopmental and Learning Disability Service  Jul 20 - Sept 20						
	Q1 2020/21	Q2 2020/21				
Total Caseload (NLDS & CYPMHS)	11,670	11,635				
Caseload - NEURO ONLY	7,077	6,736				
Caseload - CYPMHS ONLY	4,593	4,899				
Referrals received - CYPMHS	3,696	5,439				
Referrals received - Neuro	885	1,358				
Number waiting for first assessment - CYPMHS	1,031	375				
Number waiting for routine treatment - CYPMHS	1,756	964				
Number waiting for treatment - Neuro	3,237	2,821				
Number of discharges (inc Neuro)	5,383	5,480				

#### Appendix 2: Key notes

There was a reduction in referral to assessment, and referral to treatment waiting times across East and West Kent during this period. Services used virtual group therapy to deliver low-level clinical interventions for children, young people and their families.

Table 2 below is a summary of Appendix 2 and compares performance from July to September against the previous quarter.

Children & Young Peoples Mental Health Service (CYPMHS) - Waiting Times

	Eas	t Kent: Referral t	o Assessment (R	TA)
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q1 (Apr 19 - Jun 19)	183	9	35	227
Q2 (Jul 20 - Sep 20)	183	7	1	191
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	Ea	st Kent: Referral	to Treatment (RT	Π)
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q1 (Apr 19 - Jun 19)	731	57	60	848
Q2 (Jul 20 - Sep 20)	405	25	5	435
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	Wes	st Kent: Referral	to Assessment (R	TA)
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q1 (Apr 19 - Jun 19)	453	39	1	493
Q2 (Jul 20 - Sep 20)	166	18	0	184

	We	est Kent: Referral	to Treatment (R	TT)
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q1 (Apr 19 - Jun 19)	688	191	29	908
Q2 (Jul 20 - Sep 20)	406	111	12	529
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Neurodevelopmental and Learning Disability Service (NLDS) - Waiting Times

	East Kent: Referral to First Assessment & Treatment					
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total		
Q1 (Apr 19 - Jun 19)	517	341	1643	2501		
Q2 (Jul 20 - Sep 20)	510	303	1324	2137		
	1	1	1	1		

	West Kent	t: Referral to First	t Assessment & T	reatment
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q1 (Apr 19 - Jun 19)	232	103	401	736
Q2 (Jul 20 - Sep 20)	202	109	373	684
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#### Additional information:

- We have continued to provide development and training to our staff across all clinical pathways
- A Positive Behaviour Support group work is now in place for parents and carers waiting for a neurodevelopmental assessment
- Brief Observation of Symptoms of Autism (BOSA) has been embedded within our neurodevelopmental pathways to support ongoing assessments for diagnosis and treatment
- NELFT was awarded Mental Health Support Services (MHST) contracts across North Kent, Thanet and Medway providing additional support for children and young people within the school setting
- We commissioned Togetherall (formally known as Big White Wall), an online therapy platform for over 16 year olds, which provides a range of therapy courses. Between July and September 2020 81 new registrations were received
- Collaborative working with the CCG and Adult Mental Health Services has supported the transition of over 18 year olds from our services to the adult services for Neurodevelopmental support and care

## Patient feedback

Between August and September 2020 NELFT carried out a survey to measure the success of our virtual and online offers which we implemented during pandemic. The survey also allowed us to further engage with our patients and their families and improve our services going forward. A number of patients and families/carers fed back that our virtual offer was good, but not personal, and therefore they found it difficult to engage in.

#### Feedback also included:

- "My consultant and interpreter both are so good. My experience with this service is excellent."
- "It isn't like face to face, but it seems to be effective."
- "At the time it was difficult, but I'm in a lot better place now."

We are continuing to gather patient experience feedback, engage with our service users and their families, and work with services to improve the quality of care we provide virtually in preparation of an increase of Covid-19 cases in Kent and Medway.

# For further information on content, please contact:

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Appendix 1			
Quarter 2 July - September 2020			
ASHFORD	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	1203	1148	1180
Total Number of Referrals Received	214	158	226
Total number waiting for first full assessment - RTA (No Neuro)	7	4	9
Total number waiting for routine treatment - RTT (No Neuro)	30	21	43
Total number waiting for neurodevelopmental assessment	449	408	439
CANTERBURY & COASTAL	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	2086	1850	1885
Total Number of Referrals Received	287	245	308
Total number waiting for first full assessment - RTA (No Neuro)	30	30	84
Total number waiting for routine treatment - RTT (No Neuro)	127	121	183
Total number waiting for neurodevelopmental assessment	614	481	480
SOUTH KENT	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	2095	2041	2025
Total Number of Referrals Received	326	245	339
Total number waiting for first full assessment - RTA (No Neuro)	20	16	51
Total number waiting for routine treatment - RTT (No Neuro)	77	76	121
Total number waiting for neurodevelopmental assessment	695	649	634
THANET	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	1659	1620	1644
Total Number of Referrals Received	248	242	271
Total number waiting for first full assessment - RTA (No Neuro)	19	19	47
Total number waiting for routine treatment - RTT (No Neuro)	41	51	88
Total number waiting for neurodevelopmental assessment	579	567	584
DARTFORD, GRAVESHAM & SWANLEY	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	1256	1225	1243
Total Number of Referrals Received	270	190	254
Total number waiting for first full assessment - RTA (No Neuro)	41	28	59
Total number waiting for routine treatment - RTT (No Neuro)	166	160	181
Total number waiting for neurodevelopmental assessment	230	208	220
SWALE	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	447	433	461
Total Number of Referrals Received	106	98	131
Total number waiting for first full assessment - RTA (No Neuro)	3	5	13
Total number waiting for routine treatment - RTT (No Neuro)	19	14	27
Total number waiting for neurodevelopmental assessment	93	93	108
WEST KENT	Jul-20	Aug-20	Sep-20
Total Number of Active Patients (caseload)	2139	2104	2199
Total Number of Referrals Received	419	399	463
Total number waiting for first full assessment - RTA (No Neuro)	57	43	112
Total number waiting for routine treatment - RTT (No Neuro)	235	240	321
Total number waiting for neurodevelopmental assessment	352	345	356
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arter 2 July - September 2020										
ASHFORD										
REFERRAL TO FIRST FULL ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	TOT
Jul-20	6	1	0	0	0	0	0	0	0	7
Aug-20	3	1	0	0	0	0	0	0	0	4
Sep-20	9	0	0	0	0	0	0	0	0	9
ASHFORD										
REFERRAL TO TREATMENT	0-4 weeks									TOT
Jul-20	19	6	4	0	0	1	0	0	0	30
Aug-20 Sep-20	13 39	3	3	0	0	1	0	0	0	43
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ASHFORD										
NEURODEV ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	TO
Jul-20	10	23	17	26	11 13 Weeks	5	31	45	281	44
Aug-20	8	25	18	26	10	5	30	38	248	40
Sep-20	56	20	17	24	9	5	28	38	242	43
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CANTERBURY AND COASTAL										
REFERRAL TO FIRST FULL ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	TO
Jul-20	13	2	5	2	1	5	2	0	0	3
Aug-20	10	7	5	2	1	4	1	0	0	3
Sep-20	69	5	4	2	0	3	1	0	0	8
CANTERBURY & COASTAL										
REFERRAL TO TREATMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	TO
Jul-20	15	5	29	30	9	26	8	3	2	12
Aug-20	8	24	32	27	7	16	5	2	0	12
Sep-20	91	28	26	23	3	6	5	1	0	18
CANTERBURY & COASTAL										
NEURODEV ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	TO
Jul-20	8	20	22	22	8	5	33	48	448	61
Aug-20	7	39	25	18	8	4	31	36	313	48
Sep-20	38	30	24	18	8	2	29	36	295	48
SOUTH KENT COAST										
REFERRAL TO FIRST FULL ASSESSMENT	0-4 weeks							31-52 weeks		TO
Jul-20	17	0	0	0	0	1	1	0	1	2
Aug-20	10	4	0	0	0	0	1	0	1	1
Sep-20	47	2	0	0	0	0	1	0	1	5
SOUTH KENT COAST										
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Aug-20	12	29	61	11	5	4	17	16	5	$^{+}$
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DARTFORD, GRAVESHAM & SWANLEY										t
NEURODEV ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	;
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Aug-20	3	23	9	13	5	9	7	19	120	
Sep-20	25	16	9	11	5	9	6	19	120	ļ
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REFERRAL TO FIRST FULL ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	;
Jul-20	2	1	0	0	0	0	0	0	0	Ť
Aug-20	2	3	0	0	0	0	0	0	0	t
Sep-20	12	1	0	0	0	0	0	0	0	t
SWALE										ļ
REFERRAL TO TREATMENT	0-4 weeks		9-12 weeks		17-18 weeks		23-30 weeks			; -
Jul-20	12	5	0	2	0	0	0	0	0	1
Aug-20	9	4	0	1	0	0	0	0	0	1
Sep-20	23	3	0	1	0	0	0	0	0	+
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NEURODEV ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	; -
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Aug-20	3	5	5	3	3	2	22	8	42	Ť
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Aug-20	14	3	4	3	0	0	9	10	0	t
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Jul-20	33	15	22	26	7	15-22 Weeks	37	69	11	+
Jui-20 Aug-20	25	49	23	23	7	11	37	62	8	+
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NEURODEV ASSESSMENT	0-4 weeks	5-8 weeks	9-12 weeks	13-16 weeks	17-18 weeks	19-22 weeks	23-30 weeks	31-52 weeks	52+ weeks	;
Jul-20	10	18	15	19	5	6	21	22	236	T
Aug-20	7	40	17	18	4	5	20	20	214	
Sep-20	30	34	16	18	4	4	19	20	211	т