

Kent MP quarterly briefing note: Quarter one April to June 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

Children's System Covid-19 response

NHS Kent and Medway Clinical Commissioning Group (K&MCCG), in partnership with Kent County Council (KCC) developed a Covid-19 response system within the first quarter of this year. All providers, commissioners and partners engaged in meetings three times a week to keep a real-time track of issues relating to children and families during this time. Providers have been required to attend and report on issues relating to service provision, workforce capacity and welfare and risk. All issues had a direct escalation route to the Kent and Medway Covid Response mechanism.

Children's mental health Covid-19 response

During quarter one, the commissioners and NELFT focussed on maintaining service levels where possible and where safe to do so. The key points, relating to quarter one, are as follows:

- Workforce arrangements to work from home with appropriate equipment was achieved quickly and a virtual appointment system was set up within the first two weeks
- Children and young people with high clinical risk were prioritised and face-to-face appointments were continued (where safe to do so)
- Referrals into the service for mental health interventions dropped significantly in quarter one, while referrals for the Neurodevelopment and Learning Difficulties Service (NLDS) were maintained
- Clinical harm reviews of over 4,000 cases were undertaken by NELFT across both the mental health service and NLDS during this time, as part of a multi-provider response to serious incidents (this was aligned with KCC social care and other partners undertaking a similar approach to children identified as vulnerable)
- All children on caseload were contacted by NELFT to make them aware that help and interventions were still available to them.

With regards to the wider commissioner and partner system response during this time, actions were undertaken to ensure that there was a consistent approach to messaging and support. These included:

- 'Here for You' - a joint CCG and NELFT social media campaign, which was created for and shared with schools to promote via their own social media channels, sharing eight key messages about services in Kent supporting young people's mental health needs, these were: the Single Point of Access, Kooth, Shout, Moodspark, Release the Pressure, ChatHealth, Big White Wall and information on domestic abuse
- A ['central hub' for information regarding mental wellbeing during the coronavirus pandemic hosted on the KCC website](#), regularly updated with the latest partner information and [information for families and children](#)
- Distribution of over 3,000 copies of the [Handbook for Families](#) to those waiting for an autism or ADHD assessment
- Funded the roll out of Kooth (online counselling service) across the whole of Kent so all children can access support online
- The CCG and KCC have also jointly commissioned the production of 'crisis cards' for frontline workers to give to families and individuals detailing the mental health support and services available. These are currently being designed but will be shared with SECAMB, the Police, pharmacies, GP surgeries and partner organisations

Covid-19 recovery response for children and young people's mental health

During quarter one, commissioners have developed a Covid-19 'recovery response' for children and young people's mental health. The current focus of 'recovery' is to establish evidence-based modelling regarding the impact of Covid-19 and to plan accordingly to meet the demand. The recovery work is cross-sector with all partners involved and is currently focussed on the following:

- **Autism and ADHD pressures:** the rate of referrals into services did not drop during Covid-19, however the rate of diagnostic assessments did due to the clinical licence for some assessments being invalidated if used virtually or with personal protective equipment (PPE). There are five providers across Kent and Medway that are commissioned to deliver diagnostic assessments and they have been working with commissioners to put recovery plans in place.
- **Suppressed/latent demand:** these are the children and young people who did not access NELFT's services during quarter one that are likely to do so over the coming months. Work is under way to model that demand, prepare for any surge and seek additional funding for increased capacity.
- **New demand:** this is the demand that is expected to have been 'created' by the lockdown itself. Specific focus is being given to children and young people experiencing anxiety and/or trauma (including traumatic bereavement).

Mental Health Support Teams (MHSTs) in schools

In May 2020, the Medway and Thanet areas were informed that they had both been successful in a bid to receive NHSE/I funding to develop Mental Health Support Teams (MHSTs). Each locality will host two teams under the management of NELFT. This builds on the two North Kent Trailblazer teams and Canterbury and Maidstone's 'Wave Two' teams (a total of six teams in all). Recruitment is under way for the staff needed, and they will begin a year-long training programme in November 2020.

[NELFT update](#)

COVID-19 update

To manage our response to Covid-19, we maintained a Gold/Silver/Bronze control and command approach, with local daily management meetings to ensure key messages and arising issues were discussed and resolved.

Throughout the pandemic, our children and young people's mental health services (CYMHS) across Kent remained open and ran as business as usual, in line with national guidance for critical health services. To support our patients and keep our staff safe, we utilised technology with telephone and video consultations for one-to-one and group therapy. We continued to deliver face-to-face consultations based on clinical risk and need and maintained the safety of staff and patients by ensuring our settings were compliant with PPE and Covid-19 regulations.

Although we saw a decrease in referrals to the service at the start of lockdown, this has steadily increased as schools have re-opened and lockdown measures have eased. We are prioritising and supporting the in-depth, system-wide work following the unfortunate increase of serious incidents in Kent since the start of lockdown. We are now focussing on the recovery and restoration phase of our Covid-19 response and have established our priorities and begun work on key areas. Formal monthly performance scrutiny has remained in place with our commissioners.

Inpatient mental health unit update

NELFT successfully took over the provision of in-patient mental health services for children and young people at the Kent and Medway Adolescent Hospital (KMAH), formerly provided by South London and Maudsley NHS Foundation Trust (SLAM), in Staplehurst, on 1 April 2020.

KMAH is our first mental health inpatient unit in Kent and means we can provide more comprehensive care for some of our patients, who we are already treating as outpatients or in the community. We have started building work on a Section 136 suite, which will be used as a place of safety for patients who are brought to our unit by the police. We will update you on the progress in our next quarterly briefing.

NELFT CYPMHS performance activity data – April to June 2020 (Q1)

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 April to June 2020 by CCG locality
- **Appendix 2** focuses on the length of waiting times for assessment and treatment by week and CCG locality area over the same period.

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

Access, referrals and caseload management

The service continues to manage a significantly high patient caseload of over 11,600 children and young people. Close caseload monitoring, continual review of individual clinical risk on the waiting list and local data cleansing initiatives have contributed to the reduction in the overall caseload.

The number waiting for the first assessment has increased as referral to the service remained high and a number of patients did not attend their appointments due to Covid-19 and families' reluctance to meet face to face.

We reviewed all the caseloads in Q1 as part of our risk stratification process during Covid-19 which resulted in discharges of appropriate cases. Services remain business as usual, with service users being contacted regularly and/or seen face-to-face, based on clinical need and escalation.

Table 1 summarises key activity across the service over the last six months.

Kent CYPMHS & Neurodevelopmental and Learning Disability Service		
Jan 20 - Jun 20		
	Q4 2019/20	Q1 2020/21
Total Caseload (NLDS & CYPMHS)	12,373	11,670
Caseload - NEURO ONLY	7,467	7,077
Caseload - CYPMHS ONLY	3,907	4,593
Referrals received - CYPMHS	5,467	3,696
Referrals received - Neuro	607	885
Number waiting for first assessment - CYPMHS	406	1,031
Number waiting for routine treatment - CYPMHS	1,586	1,756
Number waiting for treatment - Neuro	3,504	3,237
Number of discharges (inc Neuro)	4,396	5,383

Appendix 2 – Key notes

- Improved position for service users waiting over 18 weeks for NLDS due to the implementation of a Neurodevelopmental SPA function to include early screening and triage for ASD/ADHD. Referral volume remains high throughout the period, which has impacted on less than 18-week waits across the service.
- Both ADHD and ASD face-to-face diagnostic assessments continued but were limited to high risk cases due to COVID-19 during the quarter. Locality mental health teams and neurodevelopmental services offered virtual assessments but were unable to complete some of these assessments due to schools not being open and not being able to supply additional information required to support the assessments.

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

Children & Young Peoples Mental Health Service (CYPMHS) - Waiting Times				
East Kent: Referral to Assessment (RTA)				
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q4 (Jan 19 - Mar 20)	141	12	1	154
Q1 (Apr 20 - Jun 20)	494	9	35	538
	↑	↓	↑	↑
West Kent: Referral to Assessment (RTA)				
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q4 (Jan 19 - Mar 20)	213	38	1	252
Q1 (Apr 20 - Jun 20)	453	39	1	493
	↑	↑		↑
East Kent: Referral to Treatment (RTT)				
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q4 (Jan 19 - Mar 20)	534	102	9	645
Q1 (Apr 20 - Jun 20)	731	57	60	848
	↑	↓	↑	↑
West Kent: Referral to Treatment (RTT)				
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q4 (Jan 19 - Mar 20)	683	230	28	941
Q1 (Apr 20 - Jun 20)	688	191	29	908
	↑	↓	↑	↓
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
Q4 (Jan 19 - Mar 20)	332	494	1936	2762
Q1 (Apr 20 - Jun 20)	517	341	1643	2501
	↑	↓	↓	↓
West Kent: Referral to First Assessment & Treatment				
	Under 18 weeks	Over 18 weeks	Over 52 weeks	Total
Q4 (Jan 19 - Mar 20)	117	182	443	742
Q1 (Apr 20 - Jun 20)	232	103	401	736
	↑	↓	↓	↓

A significant increase in Did Not Attends (DNAs) over the reporting quarter has impacted waiting times for children and young people waiting to be seen within 18 weeks. This is due to families' reluctance to engage during the pandemic, however the service has since fully embedded digital offers for assessment and treatment by telephone and video.

The service was able to reduce waits for those waiting between 18 and 52 weeks however, due to non-engagement from families and new ways of reporting since COVID-19 (i.e. virtual treatment based activity) not being reflective within data, those waiting over 52 weeks have increased within the locality.

Key highlights on Referral to Treatment and Referral to Assessment

- Referral volume increases year on year
- Trajectories in place since September 2018 to monitor waiting times
- Overall reduction in long waiting times since transfer
- Improved position on NLDS waiters
- Weekly review of longest-waiters caseload, which is monitored through clinical harm review and clinical risk assessment contact with families/service users
- Continual data cleanse and review in place
- This quarter has seen a decrease in those waiting between 18-52 weeks.

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