

Findings of the children and young people's mental health and wellbeing needs assessment and recommendations

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Purpose of Briefing:

To present the findings and recommendations of the children and young people's mental health and wellbeing needs assessment

1. Background

- 1.1 It is estimated that 3,838 children and young people in Milton Keynes (9.0%) have a diagnosable mental health disorder and require specialist support. The majority of children and young people, regardless of level of need, can benefit from preventative approaches to support and maintain mental wellbeing.
- 1.2 Children and young people with poor mental health are less likely to have good physical health, positive relationships, good education attainment, and employment prospects. They are also more likely to smoke and to misuse alcohol and drugs. As highlighted in [Public Health England's national report](#) there is a strong case for prevention in children and young people's mental health:
 - Fifty per cent of mental health disorders manifest themselves by the age of 14, and 75% by the age of 25
 - There is, on average, a 10-year delay between children and young people first experiencing symptoms and receiving help
 - Seventy-five per cent of children and young people don't receive the support they need.
- 1.3 A local children and young people's mental health needs assessment has been completed with a focus on prevention, early intervention and access to appropriate services.
- 1.4 Children and young people, service users and system partners have had the opportunity to input to the needs assessment and review the findings and recommendations through mixture of focus groups, stakeholder events and partnership meetings.

2. RECOMMENDATIONS

- 2.1 The Health and Wellbeing Board is asked to:
 - Consider the findings of the health needs assessment
 - Endorse the recommendations, incorporating them within the delivery framework of the new MK Together partnership structures

	RECOMMENDATIONS FOR THE SYSTEM
SY1	Mental health training needs to continue to be improved across the system, including raising awareness and breaking the stigma. Professionals from across the system including front line staff should be encouraged to access training and professional development opportunities, with a particular focus on those working with vulnerable children and young people .
SY2 MK	Further work is needed to understand and address the gaps in low level support , including how to better manage low level need to prevent needs escalating and reduce demand on specialist services . This includes identifying how we better align Universal services, Early Help and the Primary Care Front Door.
SY3	There needs to be up to date and easily accessible information for children, young people and their families as well as health, education and care professionals on how to promote mental wellbeing and how to access support if needed .
SY4	Opportunities for peer support for children, young people and their families should be expanded in schools and community settings.
SY5 MK	Ensure the forthcoming Mental Health School Team compliments the existing pathways and relationships, including with the school nursing teams.
SY6MK	Ensuring those nearing their 18th birthday receive the appropriate support and achieve good outcomes should continue to be a shared priority. We need to: <ul style="list-style-type: none"> • Work towards a flexible 0-25 pathway for mental health support • Ensure care and support provided to YP is appropriate to their level of understanding and life circumstances and that commissioned service contracts have the flexibility to enable this • Strengthening flexible, multi-agency working through joint commissioning and improved use of the “all about me” document. • Review changes that have been made based on the voice of young people who have transitions from children’s to adult services, and where action still needs to be taken.
SY7	We need to get better at demonstrating that the voice of CYP is heard and that action has been taken to improve access to support for mental health and wellbeing
SY8MK	A whole systems framework (e.g. i-Thrive) should be developed which clearly identifies where system partners fit into the support pathway.

RECOMMENDATIONS FOR SCHOOLS AND COLLEGES	
SC1	Schools and colleges should continue to build pupil resilience through whole school approaches to mental wellbeing , including promoting teaching staff wellbeing. Where schools and colleges are not engaging with the local support and services that are available, this should be identified and addressed .
SC2	Bullying is a risk factor for poor mental health. Schools and colleges should evaluate whether current anti-bullying policies and approaches (including measures to address online bullying) are effective and in line with evidence based practice .
SC3MK	Options should be identified and agreed to provide robust data on prevalence and trends of bullying, resilience and wellbeing in children and young people

RECOMMENDATIONS FOR CHILD & ADOLESCENT MENTAL HEALTH SERVICES	
CA1	There should be an audit of referrals to Child and Adolescent Mental Health Services (CAMHS) that are not seen by CAMHS but are not accepted and/ or signposted to alternative support . The audit should assess the effectiveness of signposting. The results of the audit should form the basis of agreed actions and processes to ensure that those not meeting CAMHS thresholds have timely access to appropriate support .
CA2MK	Improving quality of referrals: engage with primary care to understand what they need to manage mild to moderate mental health conditions in children and young people, as well as when and how to make an effective referral to CAMHS. Work with schools to understand what they need to improve effectiveness of referrals.
CA3MK	More transparent reporting of waiting times from referral to assessment and referral to treatment – including the range in addition to average waiting time.
CA4MK	CAMHS service user engagement should be strengthened , to improve how we listen to and respond to the voice of young people in relation to service design and delivery.