



## Appendix B

Central Bedfordshire Children's Trust Board

### **Title of Report: Ensuring Good Mental Health and Wellbeing for Children in Central Bedfordshire Council**

**Meeting Date:** 5<sup>th</sup> December

**Presented by:** Dr. Sanhita Chakrabarti

Lead Clinician Bedfordshire Clinical Commissioning Group

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### **Recommendation**

1. That the Board considers an update on a range of activities taking place across organisations and partners to improve emotional resilience and mental health and wellbeing in children across Central Bedfordshire.
2. This update includes reference to the work of the multi-agency partnership task and finish group - set up following the Children's Trust Board meeting of 6th June 2016.
3. This update includes a short reference to the indirect impact of being overweight on children's mental health and the difficulties in resolving overweight prevalence in families.

### **Background**

4. The Director of Public Health's Report on Mental Health in 2014 identified the need to improve mental health and wellbeing for all children to prevent the long lasting negative impact of mental illness. The report identified action in key areas: ensuring the best start in life; strengthening emotional resilience and wellbeing; detecting and treating illness early and ensuring

children have access to high quality services to support them and their families to become more resilient.

5. The recommendations were to:

5.1 Ensure excellent maternal mental health.

5.2 Help children to become more resilient.

5.3 Increase the early identification of children who are at risk of poor mental health.

5.4 Ensure children, young people and their carers receive high quality, safe, accessible, equitable and timely mental health services.

**To ensure excellent maternal mental health**

6. Maternal mental health disorders following childbirth are common and often serious. Pregnancy and childbirth are major life events, with potential consequences on maternal mental wellbeing. Women may develop mental illness for the first time during the perinatal period or may experience an exacerbation of a pre-existing illness. The risk for severe mental illness is higher in women with pre-existing mental illness.

**Update:**

7. Q2 data suggests 67.7% of mothers received maternal moods assessment by health visitors. The ambition is to increase the proportion of mothers receiving maternal moods assessment to >90% by the end of Q3.

8. Evidence based pathways are now established to support mothers who have been identified to have a mental health issue in the antenatal and postnatal period. Adult mental health services provided by East London Foundation Trust will support mothers when they are identified to have mental health problems. Adult mental health services will fast track any referrals for mothers who need support for their mental health needs.

9. Bespoke training will be made available to health visitors, children's centre staff and community midwives to enhance skills around early identification of mental health problems in mothers; the effect on the mother/baby attachment;

and support for mothers with low grade mental health problems. This is planned for January 2017 and 20 professionals across the system have been identified.

10. An infant psychotherapist post has been established within the CAMHS service to support mothers and babies who have been diagnosed to have attachments issues.

### **To help children become more resilient**

11. Children need to build skills early in life to be able to increase their resilience for future life events. This will help to prevent behavioural problems (including substance misuse) and mental illness. Resilience results in the ability to be autonomous, problem-solve and manage emotions. There are several aspects that work within the life course of a child to make them emotionally resilient. Below is an update on all areas of work that are geared to make our children resilient.
12. 68.5% of children are found to be “school ready” therefore achieving a Good Level of Development by the end of the Early Years Foundation Stage (2016 provisional results).
13. In Q1 2016 92% of Year R children received a comprehensive School Entry Health Assessment. These are conducted by school nurses. In Q2 66% received a Year 6 Health Assessment. As a result of a significant number of issues identified through the Year 6 Health Review, clinics are now being run in some schools to support young people’s emotional wellbeing.
14. To date the School Nursing Service supported 38 children and young people in Central Bedfordshire through the Tier 1 /2 Emotional Health and Wellbeing Support Pathway (numbers are monitored quarterly). A total of 11 children and young people were referred on to CHUMS/CAMHS in Q2.
15. 40 schools are participating in a feedback project to measure the impact of actions taken following the results of their SHEU survey report. These actions involve the development of plans to improve self-esteem and emotional resilience in children attending their schools.
16. Aspire program is a 14 week coaching workshop programme with 12 month tracking aimed at vulnerable young people. This delivers

measurable, improved outcomes in behaviour, education and health and wellbeing and provides a holistic, needs led model of approach for vulnerable children in schools and other settings. Four Aspire programs are being delivered for children in Central Bedfordshire. There is particular work to deliver the programme to Looked after children.

- 17.**All Secondary/Upper school, college and primary schools within Central Bedfordshire will have a CAMHS worker who will be responsible for mental health training of staff and parents in school. They will run consultation clinics in school for children who have been identified to have issues with mental health.
- 18.**A multi-agency partnership group has been set up to develop a strategy to improve emotional resilience and mental health and wellbeing for all children across Central Bedfordshire. A series of meetings have been planned so that a system wide response can be developed for children in all educational settings, families and vulnerable children and their families. A multi-agency group comprising of head teachers from schools, members of CCG, front line practitioners from school nursing, health visiting, Children and mental health services, looked after children, youth offending service, voluntary sector and parent carers forum have come together to support development of this strategy. So far two meetings have taken place and further meetings are planned with focussed work on looking at specific case studies of children and families to enhance the early intervention offer from all partners. The final strategy will be ready by April 2017. However, a lot of work is underway to embed evidence based interventions in service contracts for 2017/18 for maternity services, health visiting service and CAMHS services geared to improving emotional resilience in children. The group has heard presentations on the evidence of interventions that help children and families become more emotionally resilient. Partners have already identified a portfolio of enabling approaches and programs to help children and families across Central Bedfordshire such as the role of CHUMS to work with families early to promote emotional literacy. National expert Dr. Ann York, National Professional Advisor for CAMHS, Dr. Cathy Lavelle, Clinical Director East London Foundation Trust (Bedfordshire) are working as advisory partners

to the group to help with learning from the national best practice.

19. A programme is being developed in partnership with head teachers of primary and secondary schools which schools can practically deliver. This is based on recently published national guidance published by Department of Education. Particular training programmes such as Social and Emotional Aspects of Learning (SEAL), mental health first aid are being considered.

### **Excess weight in children and impact on children's mental health**

20. Being overweight as a child or adolescent has been found to have an adverse effect on a young person's self-esteem, self-image, and self-concept, with physical appearance and athletic/physical competence being most affected. Obesity has also been associated with depression in adolescents. The health-related quality of life of severely obese children treated in clinical settings has been reported to be particularly poor and has been found to be similar to those diagnosed with cancer.
21. Longitudinal studies have also found that depression can predict obesity in adolescents and young adults. Some research studies indicate that obesity in adolescence may lead to depression in adulthood, and that adolescent depressive symptoms, especially among girls, may put individuals at risk for the onset of obesity later in life.
22. Studies suggest in obese children and adolescents' weight loss is found to increase in general self-esteem or quality of life. Weight management programmes have the potential to equip obese young people with positive self-evaluations that may enhance their future well-being, even if weight loss is not apparent in the short-term.
23. In Central Bedfordshire, A healthy lifestyle programme for young families called HENRY which includes physical activity, healthy eating and parenting support is made available through children's centers. This program is free and is open to all families. In addition there is Beezeebodies, which is a family weight management programme for 5 to 15 year olds and their families. Groups are run for the following age groups - 5 to 8, 7 to 11 and 12 to 15. The programme is delivered through 17 weekly sessions, which are run in:
  - Houghton Regis / Dunstable

- Leighton Buzzard
- Sandy / Biggleswade

**24.** The programme covers: advice and ideas about how to live a healthy lifestyle, help to manage your child's weight, sessions for parents / carers and child / young person, ways to enhance children's self-confidence, practical healthy eating sessions including quick, easy and cheap recipe ideas, advice about portion sizes, activities like basketball, street dance and tennis.

**25.** The latest excess weight data for Year R and Year 6 children will be available for this Children's Trust Board meeting.

### **To help vulnerable children becoming resilient**

**26.** Risk factors for onset and exacerbation of mental ill-health in children and young people can be wide ranging and include:

- i) child-related factors such as genetic background, low birth weight, physical health problems, neurodevelopmental disorders (e.g. Autism or ADHD) and substance misuse.
- ii) parent-related factors such as maternal stress during pregnancy, poor parental mental health, unemployment and social deprivation; environmental factors incorporating a wide range of adverse life events including physical, emotional or sexual abuse and family breakdown.

**27.** A combination of any of the above factors can potentially amplify the detrimental effect on a child's mental health and wellbeing.

**28.** It is therefore important to support our vulnerable children to develop emotional resilience to achieve their potential.

### **Looked after children**

**29.** The Strength and Difficulty Questionnaire is used with looked after children as a measure of wellbeing. SDQs are completed on all Looked after Children and Young People aged 4-16 who have been looked after longer than a year. The year to date figure (as of October 2016) shows 105 children completing SDQs - with an average SDQ score for Central Bedfordshire children of 13.82. A low SDQ score is good and Central Bedfordshire is performing better than statistical neighbours (14.6 2014/15) and just below the national (13.9

2014/15) average. Work continues to support this group of vulnerable children.

30. A pilot project in one of the social work teams has been established to use Education and self-completed SDQs alongside Carers' SDQs. Clinicians from CAMHS service are now embedded in the Corporate Parenting Service including co-location with Social Work, Fostering and Adoption Teams so that comprehensive assessment and response is available to all looked after children.

### **Future in Mind steering group across CCG and local authority**

31. From April 2016 additional investment has been made available to Bedfordshire CCG from national Future in Mind Transformation Funding. The following services have been developed across Bedfordshire and Luton with this transformation funds:

- A community Eating Disorder Service for children and young people.
- A seven day Crisis Assessment Team to support children and young people presenting to Bedfordshire hospitals and to provide alternative routes to emergency CAMHS support.
- CAMHS worker(s) embedded within Central Bedfordshire Early Intervention Team.
- CAMHS psychologist embedded within the local Child Development Teams to improve access to appropriate assessment for Autism and related neurodevelopmental conditions.
- Single Point of Entry (SPOE) to all CAMHS has been established by East London Foundation Trust. Every referral received into the service is screened for risk by a qualified clinician on a daily basis before being discussed at the SPOE. High risk referrals are responded to the same working day. The SPOE panel then meets weekly and consists of a cohort of managers and senior clinicians from both CAMHS and CHUMS who discuss and agree outcomes for all referrals into the services. After each case has been considered, all suitable cases are accepted into the most clinically appropriate service/team and then allocated an individual clinician. An initial assessment date is then agreed and a letter inviting the family to the clinic is distributed explaining the assessment. If the panel

recommend alternative interventions by other services more appropriate at this stage then the referral is signposted on the same day to another service for consideration (i.e. parenting, children's health or local authority support).

- The benefits of this model ensure a consistent approach to managing referrals is maintained and has improved record keeping and communication sharing with our tier 2 partners.
- All schools and colleges which have year 9 pupils and above within Central Bedfordshire will have a named CAMHS worker who will be responsible for mental health training of staff and parents in school. They will work in partnership with schools and where necessary, run consultation clinics in school for children who have been identified to have issues with mental health.
- All schools with year 8's and below will have named CHUMS staff to offer training to school MH leads and run consultation clinics.