

HEALTH AND WELLBEING BOARD
25TH MAY 2023

REPORT OF HEALTHWATCH LEICESTER AND
HEALTHWATCH LEICESTERSHIRE

YOUNG PEOPLE'S MENTAL HEALTH SPECIAL PROJECT

Purpose of report

1. The purpose of this report is to present to the Health and Wellbeing Board Healthwatch Leicester and Healthwatch Leicestershire's (HWLL) young people's mental health special project report.
2. The report will include a summary of the recommendations that have arisen from engaging with young people.

Recommendation

3. The Health and Wellbeing Board is requested to note the contents of the report, with particular reference to the recommendations and corresponding action plan.

Policy Framework and Previous Decisions

4. Leicestershire County Council, following the Health and Social Care Act 2012, is required to directly commission a local Healthwatch. The local Healthwatch in turn has a set of statutory activities to undertake. These include, gathering local views and making these known to providers and commissioners, monitoring and scrutinising the quality of provision of local services and membership on the Health and Wellbeing Board. HWLL's Special Projects are one way to gather local views and make them known to providers and commissioners.
5. The Health and Wellbeing Board considered a report in September 2020 that looked at people's experiences of using Children's and Mental Health Services (CAMHS). HWLL also shared its Accessing Mental Health Services during Crisis report in May 2021.
6. There were nine recommendations in the report. The report was shared with service providers. In January 2021, Leicestershire Partnership NHS Trust (LPT) shared recommendations and actions arising from the report (Appendix A).

Background

7. The purpose of HWLL is to promote improvements in local health and social care services – improving outcomes for local people in Leicester and Leicestershire. HWLL believes that the best way to do this is by designing local services around the needs and experiences of local people.

8. Since the COVID-19 pandemic, HWLL had received feedback about young people's mental health services and people waiting to access services. A HWLL Special Project was commissioned to investigate further.
9. The report provides a full analysis of HWLL findings and recommendations (Appendix B). A summary of some of the key highlights are detailed below:

Consultation/ Patient and Public Involvement

10. The project made use of surveys with young people, parents and carers, and professionals. There were a small number of interviews with professionals.
 - a. 220 surveys were completed by young people aged 13-16 years of age and 37 surveys were completed by young people aged 17-19 years of age. There were 11 surveys completed by parents and carers; 23 surveys were completed by professionals and there were three interviews with professionals.
 - b. Although there was a low response rate from some cohorts, the findings across the cohorts show that there are some conclusions that could be drawn, and a series of recommendations given.
 - c. It was felt across the 17-19 year old cohort that their mental health had been impacted by the recent COVID-19 pandemic and this was echoed by parents and professionals in relation to all age groups of young people.
 - d. Although young people said that they were accessing services to support them with their mental health, it was not always clear what those services were, although CAMHS was mentioned by both young people and parents.
 - e. Whilst young people were relatively positive about waiting times for accessing services, there was feedback from parents and professionals of long waiting times, particularly for CAMHS.
 - f. Young people said that they had been provided with support whilst they were waiting to access services, but again this was not backed up by the feedback from parents and carers, who suggested that when young people are waiting to access CAMHS there was little or no support in place for them or the young people they care for.
 - g. Low level support was generally seen positively by young people although there was some comment about a lack of support in school. Parents and professionals felt that there was too little support for those who were seen as having moderate needs that could not easily be met in school but did not meet the thresholds for CAMHS intervention.
 - h. Young people said that they would like more support in many cases but did not know where to get it, this was echoed by professionals who said in their experience young people were not aware where to get help and that messaging needed to be immediate and regular in order for young people to be more aware.
 - i. Whilst young people said that they used things to help themselves look after their mental health, they did not elaborate on what they were using on the whole, and

there was no mention from them about the use of alternatives such as creative therapies. None of the parent cohort referenced the use of alternative provision either, other than paying privately to access talking therapies for their young people.

- j. Whilst young people reaching adulthood were broadly positive about the support they were getting to move to adult services if needed, most of them also said that they were concerned about accessing mental health services in the future. Parents of young people reaching adulthood said that they had not had information on service transition.

Next Steps

11. There are six recommendations in the report. An action plan, against the recommendations has been included within the report (Appendix C).
12. Recommendations have been shared with LPT and HWLL has asked for feedback from LPT and a response to the recommendations and action plan.
13. HWLL has been involved in supporting the CYP MH JSNA chapter revision and has shared its report findings with the Lead Officer.
14. As part of the Enter & View programme HWLL will be undertaking a visit to The Beacon CAMHS Inpatient Unit.

List of Appendices

Appendix A – Recommendations and actions arising from the Healthwatch report concerning child and adolescent mental health services in Leicester and Leicestershire.

Appendix B - Healthwatch Leicester and Healthwatch Leicestershire's Young People's Mental Health Special Project report.

Appendix C – Action Plan.

Officer to Contact

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Relevant Impact Assessments

Equality and Human Rights Implications

15. HWLL is aware that the Public Sector Equality Duty (PSED) applies to all functions of public authorities that are listed in Schedule 19 Equality Act 2010. Schedule 19 list does not include Healthwatch England or Local Healthwatch organisations, however as bodies carrying out a public function using public funding it is subject to the PSED general duty.

16. Voluntary Action Leicestershire (VAL)/ HWLL is committed to reducing the inequalities of health and social care outcomes experienced in some communities. HWLL believes also that health and social care should be based on a human rights platform. HWLL will utilise the Equality Act 2010 when carrying out its work and in influencing change in service commissioning and delivery.