

Report for: Children's Scrutiny Panel - February 2025

Title: Children's Mental Health and Wellbeing

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Ward(s) affected: N/A

1 Describe the issue under consideration

1.1 This report is a background paper providing an update on work in Haringey to support the mental health and mental wellbeing of children and young people in Haringey, in the context of the post-pandemic period which has been characterised by increasing complexity and demand for mental health services.

2 Recommendations

2.1 Members of the Children, Young People and Schools Scrutiny Panel to note the report and discuss its content.

3 Background information - changing needs

3.1 The Council updated its children's mental health needs analysis in December 2024.

3.2 The key findings are highlighted below:

- Nationally there has been a marked increase in mental health referrals and complexity among children and young people, with over a 50% increase overall since 2019. The latest complete dataset refers to 812,070 referrals to CAMHS in 2019 which rose to 1,200,000 in 2022 and continues to rise. The position in Haringey reflects the national picture showing there has been an increase in young people neurodiverse struggling with their wellbeing and mental health.
- The highest levels of needs were identified in the 13 – 25 age groups
- The highest levels of needs were identified in the children in need, child protection and special educational needs (SEND) cohorts
- Children with a primary SEND need identified as having social, emotional and mental health (SEMH) were identified as a priority group. In this group there were a significantly higher number of males.

- 2.4% (890 from 37,112) of school-aged pupils in Haringey were identified with SEMH needs. The prevalence is higher in secondary schools at 3.1% (415 from 13,377) than primary schools 1.9% (451 from 23,735)
- Overall, there were similar levels of need amongst males and females.
- Around 2,000 referrals for mental health support were made to CAHMS in the last 12 months with around 50% coming from Schools and 35% from the GPs.
- The Child and Adolescent Mental Health Services' (CAHMS) Caseload: the service is currently managing 1,613 active cases, up from 972 in February 2023.
- Wait Times: 336 children are awaiting their first appointment, with 95 waiting over the service target of 13 weeks (28%)
- 214 cases are waiting for a second appointment (usually when treatment may begin), with 66 waiting over 13 weeks (31%)
- 51% of cases commenced treatment within 26 weeks, against an 85% target.
- 239 cases have been waiting over 40 weeks to begin treatment, marking an 28% increase since October 2023.
- Around 95% of all referrals were for anxiety.
- Over a third of all referrals are for children and young people who live in the most disadvantaged areas of Haringey.

3.3 Despite increased investment in Children and Young People's mental Health services, the system is continuing to experience growing demand, this has meant waiting times continue to be too long.

3.4 Several key factors have been identified as contributing to the significant rise in mental health issues among children and young people and their parents. The changes we have seen locally in relation to mental wellbeing are mirrored regionally and nationally.

- COVID-19 pandemic exacerbated mental health problems for children and young people considered at least in part, to be due to their experience of increased isolation, disruption of routines and a developing sense of anxiety about health and the future.
- The cost-of-living crisis and austerity measures have led to reduced access to support services and heightened stress and anxiety among families, particularly in the most disadvantaged areas. This has contributed to need rising by an estimated 33% in recent years in North Central London, especially among young people.
- Digital and social media exposure have also been linked to higher rates of anxiety, depression and body image issues amongst children and young people.

4 North Central London Integrated Care Board (NCL ICB)

4.1 Child and Adolescent Mental Health Services (CAMHS) delivered by the NHS and voluntary sector partners are commissioned by the ICB. The mental health service transformation is driven by a commitment to improve access, responsiveness and quality of care for children and young people facing mental health challenges. There is a focus on addressing health inequalities, developing a single neurodevelopmental service pathway, increasing access and reducing waiting times.

Significantly, the NHS continue to implement and invest in a 'core offer' for CYP mental health services, moving to a consistent level and offer of services across NCL and reducing variations in investment and service levels across NCL. In addition to the "core offer" additional investment via the ICB inequalities fund has been made into Haringey's Voluntary, Community, and Social Enterprise (VCSE) for community provision focussed on 20% most deprived areas including Open Door leading work with Deep: black (an award-winning social enterprise based in Haringey) and Tottenham Hotspur Foundation. The project was shortlisted for a Health Service Journal award in 2024.

4.2 See Appendix 1 for the fuller list of mental health services.

5 NCL Population Health and Integrated Care Strategy:

<https://nclhealthandcare.org.uk/our-working-areas/population-health/>

5.1 The strategy was developed by and with partners (NHS, local councils including Public Health, Social Care and Voluntary, Community, and Social Enterprise (VCSE)) in the local Integrated Care System (ICS) and aims to:

- Reduce health inequalities.
- Focus on prevention, early intervention, and proactive care.
- Work together as a system.
- It includes an explicit focus on CYP mental health and more broadly on CYP with SEND and targeting black and minority ethnicity children facing greatest inequalities or deprivation.

6 Continued service improvements in Haringey to date

6.1 A full review of Local Authority commissioned services has been undertaken over the past 12 months aligned with a refreshed needs and gap analysis of the children's mental health pathway and commissioned services. The review looked at the impact of commissioned services and value for money on investment in Council funded children and young people's mental health (CYPMH) contracts in 2024, and how closely they aligned with identified need in the Council's priority cohorts.

6.2 As a result of this initial review £181,000 of existing spend on specialist CAMHS (provided by North London NHS Foundation Trust, formerly known as Barnet, Enfield and Haringey NHS Trust, has been redirected to provide an in house multi-disciplinary emotional wellbeing team (MDT). The roles within that team are currently in the process of being recruited to. Once in place the team will form part the emotional wellbeing interventions arm of the Transitions HIT service, to deliver a "Whole Household Approach" model of early intervention and prevention for "Getting Help" and "Getting More Help" (tiers 1 and 2) and provide a holistic offer of transition support alongside Lead Professionals in Social Care, Early Help, SEND, Education and YOS to provide a co-ordinated multi-disciplinary joint response.

6.3 There has been further investment in the Parent Infant Psychology Service (PIPS) provides direct therapeutic work up until the infant's second birthday, over the first 1001 days. The PIPS' offer is a key component in the support for families and staff within the Family Hubs. This involves one to one working directly with families and their infants, providing group sessions and training to Family Hub staff to improve awareness and understanding of positive parent-infant relationships.

6.4 PIPS are now delivered as part of the borough wide Family Hub offer by the Whittington Health NHS Trust, which currently serves as a well-established delivery partner for the PIPS commissioned through the NHS North Central London Integrated Care Board (ICB)

6.5 After a successful pilot period of operation through 2024/25, a report has been drafted to extend the existing contract with the Whittington Health NHS Trust for a further 12 months, in line DfE's Family Hubs and Start for Life programme grant funding allocations, whilst work continues to review the wider mental health pathway.

6.6 The Borough Partnership in Haringey, which is the leadership forum for officers from the Council, NHS partners and the voluntary sector in Haringey focusing on health and wellbeing, agreed that, across all ages, mental health is a key priority in 2024/25. The adult mental health delivery plan is being implemented and a new, shared plan for Children and Young People will be brought forward for agreement in March 2025.

6.7 The Council and its partners use the Children and Young People's Wellbeing Board to discuss mental health priorities and progress (chaired by the Assistant Director for Social Care and Director for North London Foundation Trust (NLFT) CAMHS Service) and reports to the Start Well Board (chaired by the Director of Children's Services)

6.8 In 2024/25 the boards committed to several priority pieces of work. These included:

6.9 Improving wait times for assessment and treatment. As previously stated, 51% of cases commenced treatment within 26 weeks, against a local target of 85%. The aim is to reduce wait times to below the national 18-week target.

6.10 Maintaining a focus on recruitment and workforce development so that all investment translates into available capacity.

- Investment in the Education Psychologist service which has led to an increase in the parent/carers consultations available.

6.11 Progress in 24/25 has included:

- NLFT CAMHS Staff have improved staff retention: reducing turnover from 24 WTE (Whole Time Equivalent) (21.6%) in February 2023 to under 5 WTE (5%)

in October 2024, now maintaining a full complement of approximately 90 WTE staff.

- **ADHD Services:** A dedicated ADHD team has been put in place and is actively addressing assessment backlogs, with the longest wait currently now reduced. Staff are working hard to reduce this further with the recent addition of Saturday clinics.
- **Partnerships:** Relationships with local Voluntary and Community Sector Enterprises (VCSE) and SEND parent groups have been strengthened, enhancing community and parental engagement
- **CAHMS New Appointments:** The team has grown with the addition of Nurse Medicine Prescribers, three specialty doctors, and a consultant psychiatrist, strengthening our capacity to deliver high-quality mental health care.

7 Achievements

7.1 Greater engagement with children and families to understand their experience and the needs in the community.

7.2 NLFT held a series of community engagement events and a targeted stakeholder event in May 2024 to set out their vision for the service moving forward.

7.3 After significant consultation with parents, schools, and wider stakeholders on Emotionally Based School Avoidance (EBSA) a conference was held. EBSA Pathway guidance was disseminated to schools to support implementation. A service mapping exercise was completed for existing services, which was then disseminated to schools as part of a toolkit to help roll out the new Graduated Response Pathway. A new graduated SEMH Pathway designed to support children, was finalised and launched in the 2024/25 autumn term of this academic year.

7.4 Building connections between services; defining a clearer, entire system offer which is easier to navigate comprehensive and effective.

7.5 In addition to the service mapping exercise, NLFT clinical leads led iThrive discussions to promote and improve whole system-based approaches to the management of risk and consider what could be done to improve system resilience.

7.6 Change in Inpatient Services: Simmons House temporarily closed in 22 December 2023. NCEL (North Central East London) Provider Collaborative commission this service and held a consultation to discuss the interim arrangements e.g. increase the beds at the Beacon Centre (Barnet based in-patient service) and an outreach service to support young people in their homes. Other improvements in the Home Treatment team and the Beacon Centre day services have meant that young people are not being placed outside of London for inpatient services.

8 ITHRIVE

8.1 The iThrive Framework is being used for transforming mental health support and is gradually being adopted within Haringey. NCL ICB Local Transformation Plan is aligned with iThrive and the framework is being implemented. iThrive provides a needs-based model that promotes prevention, early intervention, and holistic care across sectors.

8.2 The iTHRIVE Framework is an integrated, person-centered, and needs-led approach to delivering mental health services for children, young people, and families. Developed collaboratively by the Tavistock and Portman NHS Foundation Trust and the Anna Freud National Centre for Children and Families, it conceptualizes need into five categories:

1. Thriving: Children and young people who are managing life's challenges without additional support.
2. Getting Advice and Signposting: Those seeking guidance or brief assistance to maintain mental well-being.
3. Getting Help: Individuals requiring focused, evidence-based interventions.
4. Getting More Help: Those needing more extensive or specialized support.
5. Getting Risk Support: Young people who are unable to benefit from traditional interventions but remain a concern due to high-risk behaviours.

8.3 The framework emphasizes promoting mental health, preventing issues, and empowering families through shared decision-making.

9 Commissioning Responsibilities within the iTHRIVE Framework

9.1 Commissioning, the process of planning, purchasing, and monitoring services, involves various organisations:

9.2 Integrated Care Boards (ICBs): ICBs have taken over functions previously held by Clinical Commissioning Groups (CCGs). They are responsible for allocating NHS budgets and commissioning services for their populations.

9.3 Local Authorities (LA's): LA's commission public health services and social care, playing a crucial role in service delivery of early intervention, prevention, and community support.

9.4 In the context of the iTHRIVE Framework, both ICBs and local authorities collaborate to ensure a comprehensive mental health support system. For instance, services under "Getting Advice and Signposting" might be commissioned by local authorities focusing on early help, while "Getting More Help" services could be commissioned by ICBs addressing specialized interventions. The exact distribution of responsibilities varies by locality and is often determined through joint commissioning arrangements.

10 Implementation of the iTHRIVE Framework in Haringey

10.1 Haringey has adopted the iTHRIVE Framework to enhance its mental health services for children and young people.

10.2 Haringey's Early Help Strategy incorporates the iTHRIVE model, aiming to build resilience in children and families through early intervention and support. This approach focuses on reducing harm, increasing social inclusion, and promoting trauma-informed practices.

10.3 Through these initiatives, Haringey demonstrates a commitment to delivering mental health services that are integrated, person-centered, and responsive to the diverse needs of its young population.

10.4 See Appendix 1: Service mapping of locally available mental health support services.

10.5 The North London NHS Foundation Trust (NLFT) CAMHS transformation programme has focused on early intervention and prevention driving growth in the Help and More Help domains of iThrive:

- a. A new 0-5s service was fully recruited to and embedded into early years settings, complementing Haringey's existing programmes of support, and addressing some of the gaps within the current support as referred to in 3.3 MDT development.
- b. A Single Point of Access (SPOA) – Centralised Referral System for CAMHS: Over the past 12 months, NLFT have implemented a Single Point of Access (SPOA) for CAMHS across three boroughs.
- c. This centralised system streamlines referral processes, with all referrals now directed through one central contact for ease of access, offering assessments and brief interventions. The model, based on iTHRIVE principles, ensures a “no wrong front door” approach and is currently working with the MASH and Early Help with plans for further integration with social care and third-sector providers.

10.6 The level of mental health and mental wellbeing support in schools as part of the Advice and Help offer has been increased further in 2024. The ‘trailblazer’ of support which initially went into Haringey's East schools, has now been expanded into all Haringey schools, with an additional mental health support team from the NLFT, working together with the Council and local charities. This support targets issues such as anxiety, depression and the issues that drive them. The Trailblazer programme is a national children and young people's mental health programme which Haringey is part of, with funding from NHS England and The Department for Education. As a trailblazer site Haringey established Mental Health Support Teams (MHSTs)

10.7 The trailblazer offers:

- a) Evidence-based support for mild to moderate mental health concerns.

- b) Consultation and guidance for school leaders to adopt a holistic mental health approach.
- c) Timely advice and referrals for students in need.
- d) Targeted work: Groups, 1:1 parent intervention in primary schools, 1to1 adolescent Intervention in secondary schools.
- e) Universal school support: Webinars, workshops, drop ins (teachers and parents), community outreach support, assemblies, coffee mornings, whole class groups.

10.8 Inequalities Fund Investment – Additional investment from the ICB inequalities fund has been made into Haringey's VCSE to extend the Trailblazer into further community provision. Haringey received £250,000 per year via the Inequalities Fund, and this is focussed on 20% most deprived areas, providing therapeutic work specifically and partnerships with schools via arts and sports: Open Door led the work with deep: black and Tottenham Hotspur Foundation. The project was shortlisted for a Health Service Journal award in 2024.

11 Increased investment in community mental health teams and in the voluntary sector

11.1 NCL ICB invested from 3 major pots of investment agreed recurrently from 24/25 to support the delivery of the Mental Health Core Offer for Children & Young People:

- I. Investment into the NDD diagnosis pathway - increasing capacity and standardising the pathway
- II. Investment into community CAMHS services - increasing capacity
- III. Investment into the NCL Waiting Room - our digital offer to provide support, advice and signposting whilst waiting for services or seeking additional support.

11.2 NLFT Wellbeing Hub Service: Initially piloted in Haringey, the Wellbeing Hub now reaches across community organisations and GP surgeries, providing accessible mental health services. The team is focused on enhancing community outreach, involving faith groups, and creating materials to increase service awareness and accessibility.

11.3 Community-Based Initiatives to Destigmatise Mental Health: Recognising the stigma surrounding mental health in underserved communities, work began with Black and ethnic minority churches to raise awareness and reduce stigma. In addition to this, there is now active engaging with Muslim communities to establish similar services in local mosques, extending this initiative to reach even more diverse community groups.

11.4 Home Treatment Team – Crisis Management: Designed for youth facing mental health crises, this service provides intensive in-home care as an alternative to hospitalisation, aligning with evidence-based practices for managing self-harm and suicidal behaviour

12 Further Work in development

12.1 The council will continue to review its existing services and, where necessary, revise existing services or recommission new services to more accurately reflect the priority areas identified in the refreshed needs and gap analysis. The Children and Young People's Wellbeing Board has been reconstituted and is focussing on finalising and implementing the draft CYP Mental Health Plan.

12.2 NCL ICB and NCL Directors of Social Care have recognise the need to prioritise support for children in care. As part of this work, a review of the existing governance arrangements, membership and reporting of KPIs will be undertaken during 2025.

12.3 Continue system wide engagement events to confirm progress against targets and develop improved pathway and referral planning.

12.4 The ICB will continue its work to implement the Mental Health Core Offer for Children and Young People, building on investments and transformation in previous years. This will be done in collaboration with NHS providers and other stakeholders, including the VCSE, local authorities as well as hearing from our children and young people and their families / carers.

12.5 Neurodevelopmental (ND) Assessments: There are ambitious aims and a commitment to both implement a ICB standardised Neurodevelopment pathway for CYP over a 2-year period and moving the age range to match that of the early year's education curriculum of 0-6 years rather than 0-5 years. The pathway is for children and young people presenting with neurological differences including Autism, Attention Deficit Hyperactivity Disorder (ADHD), and Tic/Tourette's. North London Foundation Trust CAMHS will be pivotal to these developments across the collaborative as the neurodevelopmental pathway progresses. The ICB work with partners, seeks to develop a single pathway, expand staff expertise and improve access to assessments and family support pre and post diagnosis.

12.6 This Neurodevelopment work is particularly important in Haringey because there are currently three separate providers. There is also a separate ADHD service which may potentially mean that CYP will wait for an autism assessment and then a separate ADHD assessment. Enfield and Barnet CAMHS services have a care pathway for both ASD and ADHD.

12.7 Refreshed Mental Health and Wellbeing Plan (2025-2028). Initial engagement events have highlighted several priority areas that include but are not limited to;

12.8 Early Intervention and Prevention

- Parenting and attachment support: Integrate CAMHS programmes with Council-led evidence-based parenting initiatives, specifically targeting babies and young children newly taken into care.

- Community-based delivery: Embed mental health services in schools, youth centers, and family hubs.
- Upskilling the workforce: Equip universal service staff with mental health support training, such as Mental Health First Aid.
- I-Thrive2 Model: Embed within Early Help, Single Point of Access and mental health services.
- Positive Behaviour Support: Embed approaches into Early Help Service, Disabled Children's team, CAMHS Learning Disability Service and Special Schools.
- First 1,000 Days in a child's life: Ensure parental mental health, especially maternal mental health is considered and supported within early years settings, maternity and community health services.

12.9 Access and Treatment

- Shorten waiting times: Expand capacity and use interim support like peer groups and digital tools while young people are awaiting treatment.

12.10 School Support

- Anchor Project and Autism Education Trust: Scale up whole-school mental health initiatives.
- Critical incident response: Enhance links between schools, Educational Psychology Service, CAMHS and voluntary sector.

12.11 Transition to Adult Services

- 0–25 model: Implement a seamless, age-spanning approach, as piloted in Birmingham and Norfolk.
- Voluntary sector involvement: Increase capacity for young adults who fall short of adult mental health thresholds

13 Contribution to the Corporate Delivery Plan 2022-2024 High level Strategic outcomes

13.1 The work outlined in this report particularly supports the following Council high level outcomes:

- a) Best Start in Life; the first few years of every child's life will give them the long-term foundations to thrive.
- b) Happy Childhoods; all children across the borough will be happy and healthy as they grow, feeling safe and secure in their family networks and communities
- c) Successful Futures; every young person whatever their background, has a pathway to success for the future.

14 Carbon and Climate Change

Not applicable

15 Statutory Officers comments (Director of Finance (procurement), Head of Legal and Governance)

Not applicable

16 Equality

16.1 Inequality is a major contributor to mental ill health, and the experiences of support people receive. Commissioners monitor access and uptake of services against protected characteristics and services compliment that with hearing the experience of young people and families accessing their services.

16.2 CAMHS services now have a profile which is now much more closely matched to the borough population than was the case previously, reflecting efforts to be more inclusive and accessible to those who need it regardless of background.

16.3 The offer of services includes a diversity of providers – e.g. NHS, Council, schools-based, community-based charities – as well as means of access – including digital support via [Kooth](#), self-referral and professional referral.

17 Use of Appendices

Appendix 1- Service mapping list.

18 Background papers

North Central London Children and Young People's Mental Health and Wellbeing Transformation Plan:

<https://nclhealthandcare.org.uk/wp-content/uploads/2022/04/CYP-MH-Transformation-Plan-Final.pdf>

NCL Population Health and Integrated Care Strategy
<https://nclhealthandcare.org.uk/our-working-areas/population-health/>

Outcomes Framework

The **NCL Outcomes Framework** <https://nclhealthandcare.org.uk/our-working-areas/population-health/ncl-outcomes-framework/> has been developed to assess variation of need, support prioritisation, and identify where we can make a difference by working together as a system. The framework will be refreshed annually.

