

Trafford's Local Transformation Plan

Children & Young People's Mental Health & Wellbeing

2022-2023



Contents

Contents	2
1. Introduction	3
National and Greater Manchester Strategic Mental Health Context.....	3
Trafford Strategic Linkage.....	4
Trafford’s Vision for Children & Young People’s Mental Health	5
2. COVID-19.....	6
3. Mental Health Needs of Children & Young People in Trafford	7
Prevalence of Mental Health Conditions in Trafford.....	13
Specific Disorders.....	14
Summary.....	16
4. Trafford’s Current Service Offer	18
Thriving.....	18
Getting Advice	19
Getting Help.....	22
Getting More Help.....	27
Getting Risk Support.....	31
Adult Services.....	33
5. Activity, Resource and Funding	35
Activity & Key Performance Indicators.....	35
Workforce Information	39
Summary.....	40
6. Stakeholder Engagement	41
Service Engagement	41
7. Local Transformation Plan	42
Promoting Resilience, Prevention and Early Intervention	42
Improving Access to Effective Support.....	42
Care For The Most Vulnerable	43

1. Introduction

- 1.1 In 2022 Clinical Commissioning Groups across Greater Manchester merged to form, the Greater Manchester Integrated Care System (ICS). NHS England requires ICSs to work with their partners to develop an annual Local Transformation Plan (LTP). First published in 2015, LTPs are strategic documents describing the whole system change required locally to increase access to mental health support for children, young people and their families.
- 1.2 This refreshed plan outlines Trafford's ambition for the mental health and wellbeing of its children, young people and families. There are 5 key priority areas within our LTP these are:
 - Improving Access to Effective Support.
 - Caring For the Most Vulnerable.
 - Accountability and Transparency.
 - Shaping the Workforce.
 - Promoting Resilience, Prevention, and Early Access.
- 1.3 The Health and Well-being Board oversees this Transformation Plan, as does the respective ICS and Local Authority Senior Management Teams. The implementation of the Local Transformation Plan is reported to a number of boards including the Children's Commissioning Board and SEND board. These Boards are made up of a wide variety of stakeholders including representation from health, education, social care and VCSFE.

National and Greater Manchester Strategic Mental Health Context

- 1.4 Trafford sits as one of the ten local authorities in the Greater Manchester (GM) region. Working through collaboration, greater financial flexibility and harnessing innovation on a large scale. This document should be read in conjunction with the wider Greater Manchester LTP published by the Greater Manchester Health and Social Care Partnership (GMHSCP) to acknowledge all the additional progress delivered at scale across each of the 10 localities. [appendix-c-gm-ltp-update-report-2021.pdf \(partnersinsalford.org\)](#)
- 1.5 Nationally, a number of key documents provide the basis of our LTP and future ambitions around children and young people's mental health.
 - **NHS Long Term Plan**, which prioritises a number of areas, including children's mental health.
 - **Building the Right Support**, a plan to develop community services for people with a learning disability and/or autism.
 - **Covid-19 Mental Health and Wellbeing Recovery Action Plan**, a government report looking at the impact of the pandemic on children and young people.
- 1.6 There have been a number of GM plans produced that provide an umbrella for our work on children and young people's mental health via our transformation plan and form part of Greater Manchester's Sustainability Transformation Plan. This includes the Greater Manchester Strategy Our People, Our Place, its programme of Health and Social Care reform and more specifically the GM Children and Young People's Plan (2019 – 2022).
- 1.7 The GM strategy Our People Our Place and the GM Children and Young People's Plan (2019 – 2022) both contain elements which address the mental health needs of children and young people. Specifically, under Priority 9 Healthy lives, with quality care available for those that need it the GM strategy states that they are

seeking to improve the way residents look after their mental health and are supporting improvements to mental health services.

1.8 The GM Children and Young People's Plan (2019 – 2022) is designed to align with the Greater Manchester Children and Young People's Health and Wellbeing Framework (2018 – 2022). This framework sets out 10 objectives to improve physical and mental health & wellbeing for children and young people. This includes:

- Objective 3 – Mental health and resilience.
- Objective 5 – Working with schools to improve all children's safety, physical and mental health and especially those with special needs.

1.9 This integrated strategy is driven by the Greater Manchester Mental Health Strategic Board. A number of groups report into the board, including:

- Joint Programme Planning and Delivery Group.
- GM MH Finance Review Group.
- GM Children & Young People's Community Mental Health Board.
- GM Children & Young People Crisis Care Board.
- GM CYP MH Clinical Network.
- GM Children & Young People Mental Health in Education Board.
- GM Children & Young People Mental Health Workforce Steering Group.
- GM Trauma Informed Steering Group.
- Children & Young People's Community Eating Disorder Network.
- GM Special Educational Needs and Disabilities (SEND) and Children & Young People's Learning Disability Autism (LDA) Board.
- GM CYP Cared For/Care Leaver MH Steering Group.
- GM CAMHS Tier 4 Lead Provider Collaborative.

Trafford Strategic Linkage

1.10 From April 2022, Trafford CCG along with the Greater Manchester health and social care system transitioned to the GM Integrated Care System.¹ This means that organisations that support health and care needs will be working within a refreshed partnership to coordinate services, further building on the devolved model of health and social care and strong focus on collaborative working that has been developed in Greater Manchester over the last five years.

1.11 Trafford Local Care Organisation (TLCO), delivers a range of community health services for children and young people, provided by NHS Manchester Foundation Trust (MFT). The Child and Adolescent Mental Health Service (CAMHS) is joined with Manchester and Salford CAMHS services as part of Royal Manchester Children's Hospital which is also a part of MFT.

1.12 In Trafford, there has been a range of activity happening over recent years to transform mental health services for children and young people. Trafford's wider work continues to focus on mental health, including

¹ [Integration and innovation: working together to improve health and social care for all \(HTML version\) - GOV.UK \(www.gov.uk\)](#)

via:

- Trafford's corporate plan, Our Trafford Our Future 2021 – 2024 describes Trafford Council's vision and priorities for the borough and the priorities we have identified as an organisation as being key to the delivery of that vision. This Local Transformation Plan sits under priority 2 'Trafford has improved health and wellbeing, and reduced health inequalities.
- [The Trafford Together Locality Plan 2019 – 2024 was refreshed in 2021](#). The Plan incorporates the NHS Long Term Plan and sets out the aspiration to improve and reform health and social care for people of all ages who live and work in Trafford. The plan holds three aspirations:
 - Better lives for our most vulnerable people.
 - Better wellbeing for our population.
 - Better connections throughout our communities.
- [Trafford Carers, Family, and Friends Strategy 2022 - 2026](#). The strategy recognises the role of Young Carers through effective early help and ensures they are able to enjoy their childhood and to develop, thrive, and fulfil their potential. This strategy also recognises and commits to meeting the standards set out in the Greater Manchester Parent Carer Standards.

1.13 One of the priority areas in the Locality Plan is '**mental health**', through the implementation of the **Mental Health Transformation Strategy** we will:

- Ensure Trafford's core mental health services, community and inpatients are resilient and fit for purpose.
- Reform and redesign our mental health and wellbeing offer to Trafford's citizens.
- Establish early intervention and preventative approaches.
- Reduce mental health inequalities.

1.14 In addition to a specific mental health priority, the priority 'Children's' also builds in mental health as a priority. The Plan articulates our ambition for children in Trafford:

- To enable all children and young people to thrive and achieve their full potential.
- Our children and young people to be valued and equipped with skills for employment and life.
- Our children and young people to have the best start in life.
- Our children and young people to be safe in their homes and communities.

1.15 The Start Well Board is a partnership Board that oversees the work streams that aim to deliver our ambition for children. There are 6 key areas that the Board considers – Education, Early Help, Early Years (0-5), SEND, health and commissioning. A key priority of the Board over the next 18 months is the review of mental health services for children and young people.

Trafford's Vision for Children & Young People's Mental Health

1.16 Our vision is to ensure that children and young people in Trafford receive the right type of support, in the right place, at the right time that is high quality, personalised and effective to support healthy emotional development and help them to become thriving adults.

1.17 Having a clear offer is a central principle of this plan, as delivering high quality, effective and sustainable services for children and young people is the only way in which rising demand and need can be addressed. We strongly believe in the benefit of early intervention and how it improves and enhances the development

of a child. It reinforces boundaries, identifies children and young people at risk and supports timely diagnosis. Early intervention improves outcomes for children, families and communities and for this reason is a core aspect of this plan.

- 1.18 The idea that mental health is everybody's business has been key to our approach in the development of needs-led comprehensive mental health services for children and young people. Development of the local workforce through information, sharing and a comprehensive training offer remains a key priority of this plan.
- 1.19 In Trafford, our transformation will primarily take place through the implementation of the THRIVE model across our wider system of education, health, social care, and community provision (details of this model are described in Chapter 4).

2. COVID-19

- 2.1 In response to COVID-19 Trafford worked with partners in the Voluntary, Community, Faith, Social Enterprise sector (VCFSE) to rapidly mobilise community hubs to support our most vulnerable residents. A COVID – 19 Child Health group was set up and identified key priorities which included Mental Health, Emotional Wellbeing and Safeguarding. Further subgroups were set up around Mental Health and for children and young people with complex needs. A system approach was put in place, COVID- 19 forced a new way of working and brought together better joint working across Education, Health and Social care as one system in responding to the needs of children and young people across Trafford.
- 2.2 We are progressively seeing the impact of the pandemic for our children and young people across all mental health services and wider health services from early years to young people transitioning to adulthood. Demand for all health services continues to grow, children and young people continue to present with higher risks to themselves and others.

3. Mental Health Needs of Children & Young People in Trafford

3.1 This chapter presents a demographic profile of Trafford's children and young people as well as mental health prevalence. It brings together the most recent mental health data available, including the latest Public Health England Children & Young People's Mental Health & Wellbeing profiles. However, at a Trafford population level, mental health data is limited. Some of the data presented are local estimates or projections based on national data, although local data has been used wherever possible and is aligned with [Trafford's Joint Strategic Needs Assessment \(JSNA\)](#) which includes a needs assessment for 0 to 19 year olds and our [SEND JSNA](#) which includes a needs assessment for 0-25 year olds with Special Educational Needs and Disabilities.

Key Demographics

3.2 There are an estimated 74,170 children and young people (CYP) aged 0-25 years living in Trafford. This amounts to around 1 in 3 (31.2%) of the total population and is proportionally higher than in England (31%).

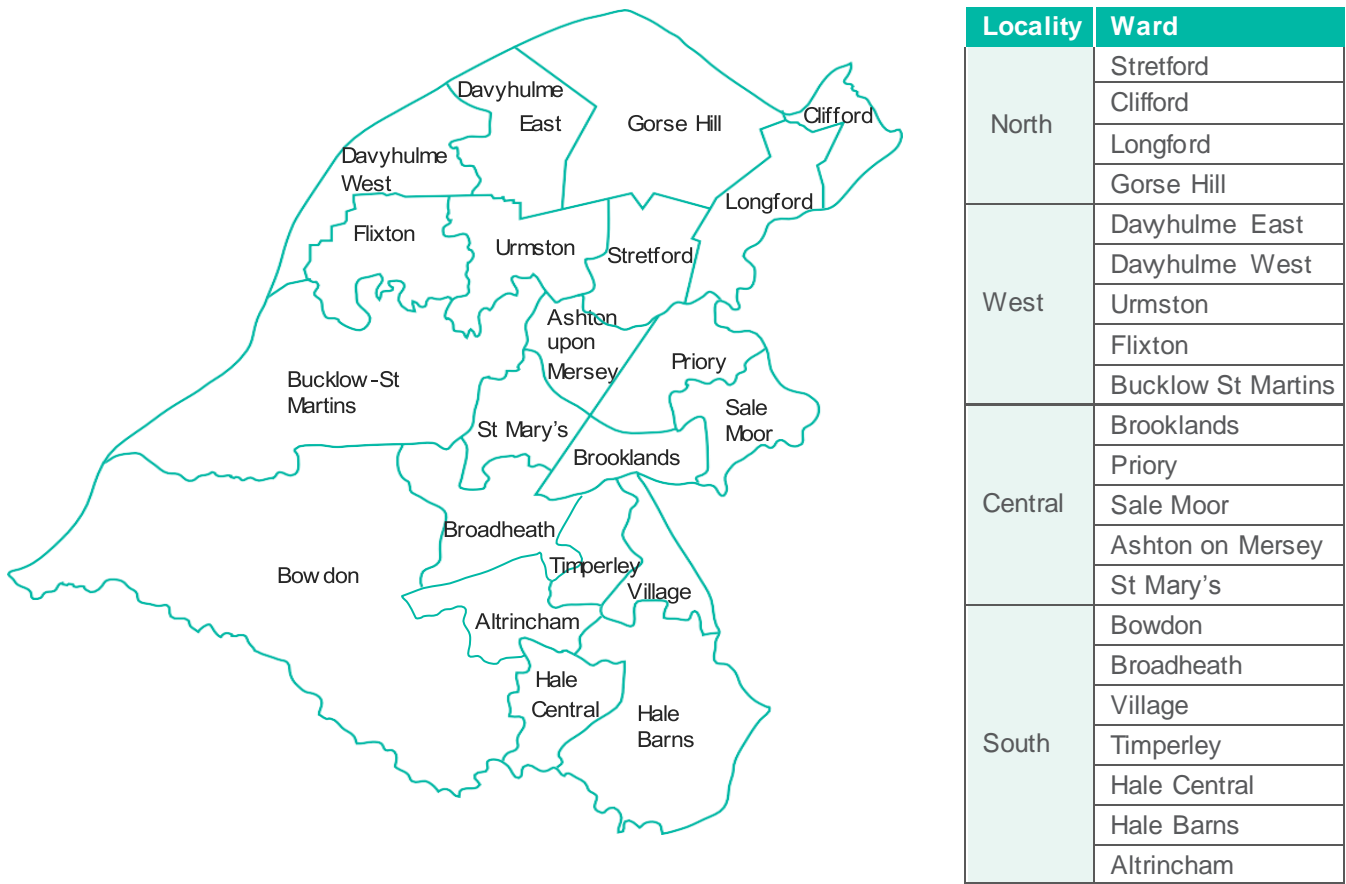
Table 1: Age structure of Trafford's children and young people population compared to England²

Age	Trafford			England	
	Number	% of child population	% of total population	% of child population	% of total population
Under 1 year	2,416	3.3%	1.0%	3.4%	1.1%
1 to 4 years	11,647	15.7%	4.9%	15.0%	4.7%
5 to 9 years	16,558	22.3%	7.0%	20.2%	6.3%
10 to 14 years	16,917	22.8%	7.1%	19.6%	6.1%
15 to 19 years	13,630	18.4%	5.7%	17.8%	5.5%
20 to 25 years	13,002	17.5%	5.5%	23.9%	7.4%
Total population (0-25 years)	74,170	100.0%	31.2%	100.0%	31.0%
All ages	237,579	-	100.0%	-	100.0%

3.3 Trafford is divided into four localities. Of the estimated 61,168 0- to 19-year-olds living in Trafford, more than a third (34.3% or 20,995) live in South locality, 14,243 (23.3%) in Central, 13,211 (21.6%) in North, and 12,719 (20.8%) in West. The wards in each area are shown in the image below.

² [ONS Mid-2020](#) population estimates for local authorities.

Figure 1: Trafford Neighbourhoods and Wards



At the 2011 Census, more than a fifth (22%) of 0–19-year-olds in Trafford belong to a non-white ethnic group, which is higher than the proportion for all ages (14.5%).³ Of this 22%, Asian and Asian British make up the biggest proportion in Trafford, at 11%. The proportion of children belonging to black and minority ethnic groups is growing, with more recent data from the 2021 school census⁴ showing that around a third of children belong to a Black & Minority Ethnic (BAME) group. NHS Digital reported that for CYPs between 6 and 23 years old the rates of probable mental disorder were 22.5% in mixed or other, 18.9% in White British, 8.4% in Asian/Asian British and 8.3% in Black/Black British.⁵ An evidence review found that for some BAME groups there was reduced access to cognitive behavioural therapy (CBT), persisting ethnic inequalities in compulsory admission and poorer treatment related outcomes than for other groups.^{6 7}

Social Determinants of Mental Health

The following areas cover a range of issues that can impact upon children’s mental health and wellbeing:

Education

3.4 Trafford has 64 primary schools, 19 high schools, seven special schools, two alternative provision and one

³ ONS (2011), Census, <https://www.ons.gov.uk/census/2011census>

⁴ GOV.UK (2022). School census. Schools, pupils and their characteristics, Academic Year 2021/22, <https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics>

⁵ NHS Digital. (2021). Mental Health of Children and Young People in England 2021— Wave 2 follow up to the 2017 survey. https://files.digital.nhs.uk/97/B09EF8/mhccyp_2021_rep.pdf

⁶ NHS Race and Health Observatory (2022). Ethnic Inequalities in Healthcare: A Rapid Evidence Review . <https://www.nhsrho.org/>

⁷ Mental Health Foundation (2015), Black, Asian and minority ethnic (BAME) communities, <https://www.mentalhealth.org.uk/a-to-z/b/black-asian-and-minority-ethnic-bame-communities>

Further Education college. Early child development and educational attainment are strong determinants for future health and wellbeing. School readiness overall in Trafford is the best in the North West: in 2018/19 three quarters (74.7%) of children achieved a good level of development at the end of reception. This is significantly above the England average of 71.8%. However, when considering only those children with free school meal (FSM) eligibility, Trafford fares slightly less favourably (56.0%), which is lower than England (56.5%) and the lowest among a group of statistically similar authorities.⁸ This is an improvement on the 2017/18 figures of 50.3% in Trafford compared to 56.6% nationally.

- 3.5 Furthermore, the proportion of young people achieving grades 4 or above in their GCSE English and Maths in 2021/22 is 52.4% among Trafford pupils known to be eligible for FSMs, compared to 82.4% among all who were not eligible or whose status was unknown.⁹

Poverty

- 3.6 Children and families from the lowest 20% of household income are three times more likely to have common mental health problems.¹⁰ Based on the Income Deprivation Affecting Children domain of the 2019 Indices of Deprivation, 36 (26.1%) of Trafford's 138 Lower Super Output Areas (LSOAs)¹¹ are ranked among the 10% least deprived in England, whilst five (3.6%) are ranked among the 10% most deprived.¹² ¹³ Of the five Trafford LSOAs ranked in the 10% most deprived in England, two are in Bucklow-St-Martins ward, one in St Mary's, one in Clifford and one in Sale Moor. In the 2015 Indices of Deprivation, eight (5.8%) of Trafford LSOAs ranked in the 10% most deprived in England for Income Deprivation Affecting Children so, on this measure, the 2019 proportion represents a relative improvement. Based on data for 2016-20 life expectancy is 9.5 years lower for men and 8.3 years lower for women in the most compared to the least deprived areas of Trafford; an improvement for women from the previous figures gap (2015-17) 9.5 for men and 8 for women¹⁴.
- 3.7 In 2018/19, there were 6,473 (12.8%) children under the age of 16 estimated to be living in poverty in Trafford. This compares favourably with the national average (18.4%) but is higher than the previous year's figure (11.8%). Two-thirds (39.5%) of these children are in lone parent families. There is a wide variation across wards with 3.3% of children in low-income families in Hale Central in the South, to 30.8% in Clifford in the North; and even wider variation between LSOAs. National analysis has shown that children's mental wellbeing has been found to be worse in families where there had been disruption even after taking into account their increased risk of disadvantage.¹⁵
- 3.8 In 2018, 8.6% (3,533) of Trafford school children claimed FSM, significantly lower than the England average (13.5%). Both of these figures have risen, as of May 2021 the Trafford rate was 14.1% (5,953) which is still lower than the national average (20%). Those children eligible for FSM, a proxy indicator for deprivation,

⁸ Public Health England (2018), Fingertips Child Health Profiles, Children & Young People's Mental Health & Wellbeing <https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh>

⁹ Gov.UK (2022). Department for Education, Academic Year 2021/22: Key stage 4 performance

¹⁰ ONS (2005), Mental health of children and young people in Great Britain, <http://digital.nhs.uk/catalogue/PUB06116>

¹¹ LSOA is a boundary of geography: typically made up of 1500 people.

¹² Trafford Datalab (2019). Relative deprivation in Trafford. <https://www.trafforddatalab.io/analysis/loD2019/report/>

¹³ Indices of Deprivation 2019 and 2015

¹⁴ Office for Health Improvement and Disparities. www.localhealth.org.uk

¹⁵ CPRU (2022). At a glance: association between exposure to child maltreatment and parental domestic violence and abuse and health, behaviours and labour market outcomes. https://www.ucl.ac.uk/children-policy-research/sites/children_policy_research/files/at_a_glance_cost_of_child_maltreatment.pdf

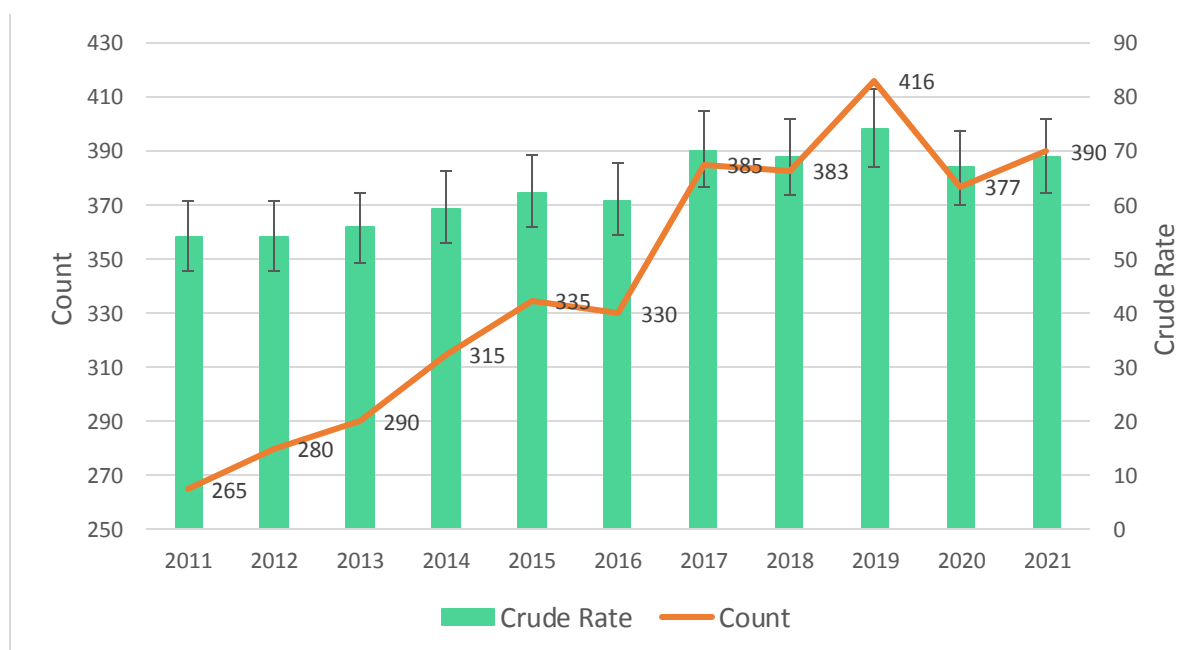
have been highlighted in a recent report by the Department for Education as “a group of concern” for poor mental health outcomes.¹⁶

Groups of Children Who Are Particularly Vulnerable to Poor Mental Health

3.9 All children and young people can be vulnerable to developing mental health issues, but we know that for some CYP the likelihood of developing poor mental health and well-being is far greater. **Children Looked After (CLA)** are more likely to suffer from mental health issues than those that are not in care. The Office of National Statistics estimate that in England, 12% of Care Experienced Children aged 5-17 have emotional disorders, 37% have a conduct disorder and 7% have a hyperkinetic disorder. In Trafford, CAMHS has a specialist clinical psychology service in place to support the mental health needs of Looked-After Children.

3.10 Trafford has seen a rise in the number of CLA of 47% between 2011 (265) and 2021 (390), most of the increase but not all in line with the growth of the Trafford population as represented in the graph below. The rate of CLA in 2021 of 69 per 10,000 (population aged under 18 years) was comparatively slightly higher than the national average (65) and higher still than our statistical neighbours (57.5) but significantly below the North West rate (94). In Trafford 28% of CLAs have emotional wellbeing that is a cause for concern which is lower than the North West (33.6%) and England (36.8%), however the rate for Trafford has shown little significant change in the last few years.

Figure 2: Count (line) and Crude Rate of Children Looked after in Trafford 2011-2021



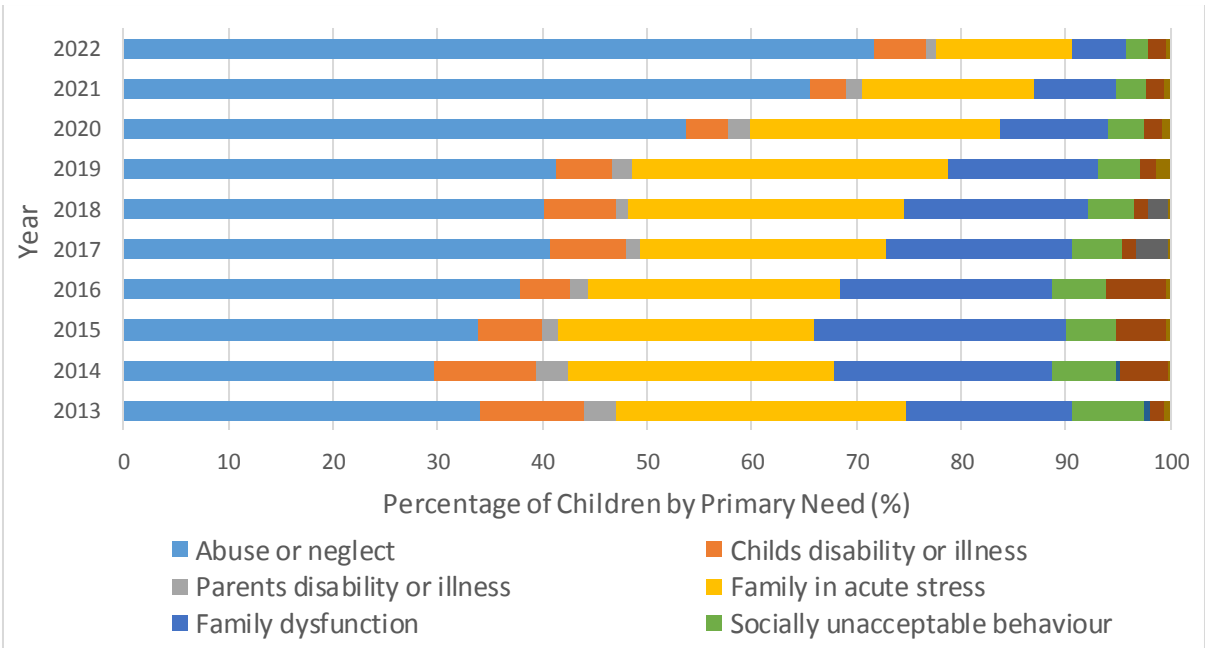
3.11 The Children’s Society survey of secondary pupils across the 2020/21 academic year using all 4 ONS personal wellbeing measures (happiness, life satisfaction, life is worthwhile and feeling anxious) found that disabled young people reported poorer mean scores than the non-disabled across all 4 measures, but

¹⁶ Department of Education (2022). State of the nation 2021: children and young people’s wellbeing: Research Report. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1053302/State_of_the_Nation_CYP_Wellbeing_2022.pdf

particularly large for 'feeling anxious'.¹⁷ NHS Digital's Mental Health of Children and Young People (MHCYP) survey identified a large gap between those aged 6-16 who were children with **Special Educational Needs and Disabilities (SEND)** (56.7%, 2021) and those who were non-SEND (12.5%, 2021) when looking at the rate of probable mental disorder, and a significant increase in the rates for each group between 2017 and 2021. In Trafford there has been an increase in 'Social Emotional Mental Health' needs in pupils with an education, health and care plan (EHCP) or SEN support between 2017 and 2020, up from 15.0% and 13.9% to 21.1% and 15.9%, respectively.

3.12 In addition, a child can be considered a **Child in Need (CiN)** under Section 17 of the Children's Act if their health or development is threatened or they have a disability. Children in need are vulnerable to mental health issues as a result of exposure to frequent, intense and poorly resolved inter-parental conflict which heighten the risk of emotional problems such as anxiety and depression, as well as behavioural issues such as conduct disorders. As of 31st March 2022, Trafford had 1,573 Children in Need, a rate of 277.8 per 10,000 or 1 in 36 children which is lower than England (334.3 per 10,000). The most common primary need category was 'abuse or neglect' (1,127 or 71.6% of CiN), 'Family in acute stress' (205 or 13% of CiN), and 'Family dysfunction' (81, or 5.1% of CiN). The proportion of Children in Need because of abuse and/or neglect has increased substantially over the last 3 years, as presented in the graph below, with this now being the primary cause for nearly three quarters of Children in Need. Children who are the subject of a **child protection plan** have been identified as at risk of abuse and/or neglect, and there is strong evidence to suggest that this has a detrimental effect on mental health and wellbeing. Those in residential care were shown to be significantly more likely to have a mental health issue than those in foster care. Research has also shown that **adopted children** are more likely to suffer from mental health issues, than those that are not. Links between child migrants and mental health issues are also well documented and this is especially the case with **Unaccompanied Asylum Seeking Children**.

Figure 3: Proportion of Children in Need in Trafford by Primary Need 2013-2022

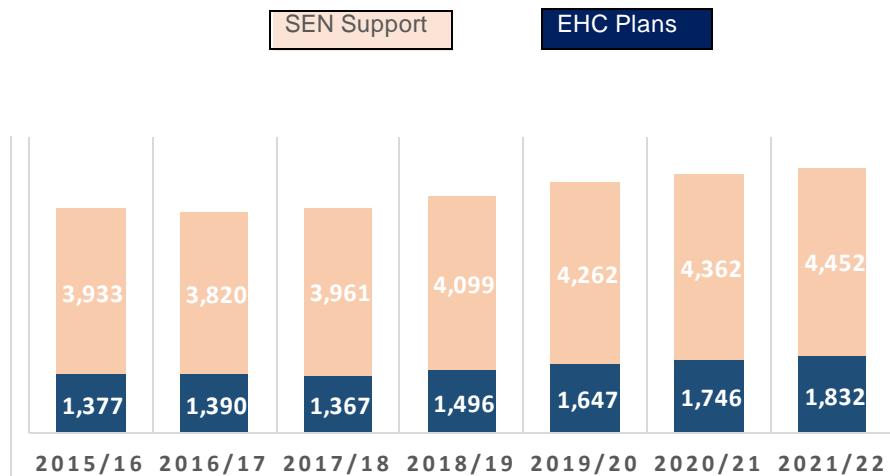


¹⁷ The Children's Society. (2021). The Good Childhood Report 2021. <https://www.childrenssociety.org.uk/information/professionals/resources/good-childhoodreport-2021>

- 3.13 **Care leavers** will often have significant mental health issues, with nearly half suffering from poor mental health. Care leavers are between four and five times more likely to attempt suicide in adulthood. It is widely recognised that leaving the care system is a time of great disruption and this is arguably more acute for care leavers with mental health concerns. As of August 2021, Trafford had 184 Care leavers, with 70% aged 18, 19 or 20 years old. A small-scale needs assessment conducted by Trafford's Children's Commissioning team in 2018 looked at the needs of externally placed care leavers, the study showed that 80% of externally placed care leavers had at least one mental health issue and 73% two or more. The most common issues were around Low mood / Depression (53%), Anxiety, and Trauma (both 47%).
- 3.14 Children entering the **youth justice system** are commonly from disadvantaged and deprived communities who may have experienced abuse and neglect which can lead to mental health problems. Trafford has one of the lowest rates of first-time entrants to the youth justice system in the North West, 80.8 per 100,000, much lower than the national average of 146.9 per 100,000. Trafford Youth Justice (TYJ) offers all young people a holistic health needs assessment to screen for any additional health needs, including mental health. 72% of TYJ cases assessed presented with mental health and/or emotional issues. Examples of this were anger, low mood, ADHD, hearing voices and unusual visions. 78% of these young people's offences were considered to be directly or indirectly related to their mental health issues. As a part of the youth justice offer, Trafford commission health practitioners to support children and young people. This includes a Youth Justice nurse, a CAMHS mental health support worker and a speech and language therapist.
- 3.15 The NHS Long Term Plan sets out the need to increase the amount of mental health provision for those aged 18-25. In response to this, mental health services in Trafford provide support to a range of ages, with 42nd Street commissioned to support those aged 13-25 years and the Kooth service being extended to support those aged 19- 25 years.

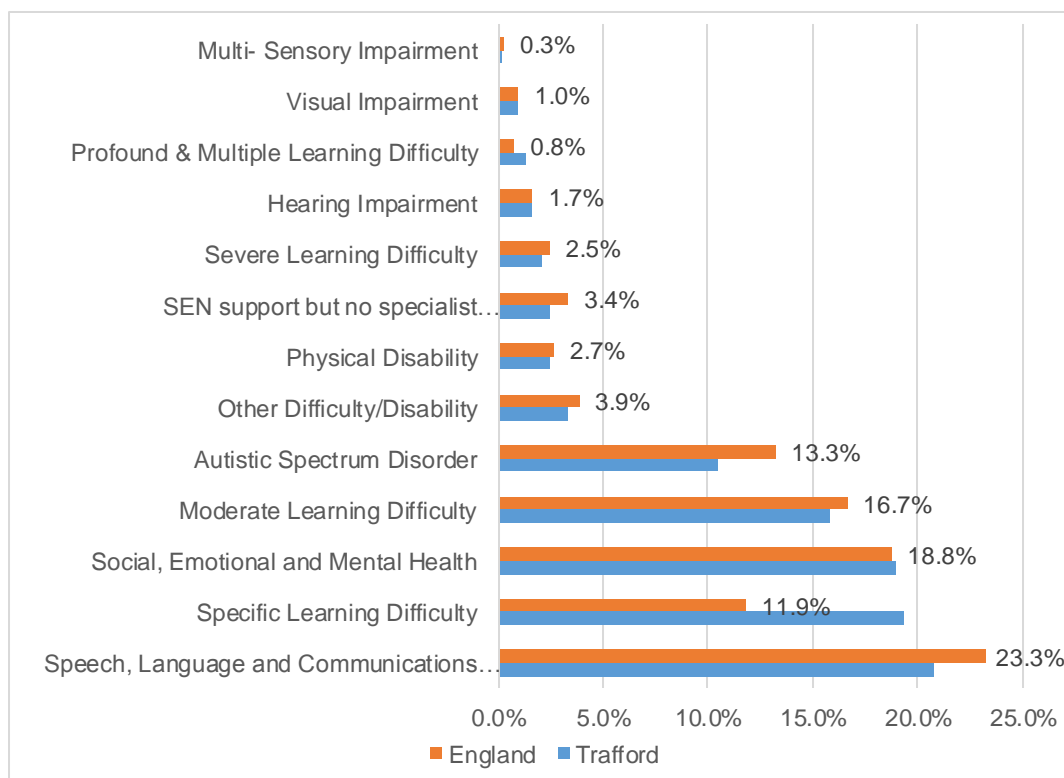
Special Educational Needs and Disabilities (SEND)

- 3.16 Children with Special Educational Needs and Disabilities (SEND) may have a range of issues that affect their ability to learn. Those with SEND are six times more likely to have a mental health disorder than those that do not. There are currently 6,284 Children and young people aged 0-25 years old with SEND in Trafford. The number of pupils with an Education Health Care Plan (EHCP) in Trafford schools in 2021/22 was 1,832. This represents 4.1% of all pupils which is slightly higher than the average for England (3.9%) and the average for Trafford's statistical neighbours (3.9%).
- 3.17 A further 4,452 Trafford pupils were in receipt of SEN support. This represents almost 1 in 10 (9.8 %) of all pupils but is lower than England (12.5%) and the average for Trafford's statistical neighbours (11.8%).
- 3.18 The table below shows the number of pupils in receipt of either SEN support or an EHC plan from 2015/16 to 2021/22 in Trafford. Year on year this has increased for both types of support, with the exception of 2017/18.



3.19 Trafford has seen a significant increase in the % of children over the past four years accessing SEN support or with an EHCP with speech and language communication needs, showing a 2% increase from 2017 to 2021 for children with an EHCP and an increase of 3% for children accessing SEN support. There has been an overall increase for social, emotional mental health for children with an EHCP and children accessing SEN support since 2017. An increase can also be seen in children with ASD. All other primary needs have plateaued or decreased slightly for children with an EHCP or receiving SEN support.

3.20 The chart below shows the primary need in pupils with SEND (EHCP or SEN support) in Trafford compared to England (Jan 2022).



Prevalence of Mental Health Conditions in Trafford

3.21 It is estimated that 8.4% of children aged 5 to 16 in Trafford have a mental health disorder.¹¹ Applying this to the estimated number of 5 to 19-year-olds living in Trafford (ONS, Census 2021) this equates to an estimated 3,800 children in Trafford with a diagnosed mental health condition. It should be noted, however, that this is

an estimate and the following Public Health England data estimates are “modelled”. This means that it is based on national estimates, which are then adjusted for local factors known to influence the prevalence of mental health disorders (in this case, age, sex and socio-economic classification).

3.22 There are three main categories of mental health disorder:

- **Emotional disorders** are one of the most common mental health problems suffered by children and includes issues such as anxiety and depression.¹⁸ The number of children aged 5-19 in Trafford with emotional disorders is estimated to be 1,641 (3.3%) slightly lower than the England level of 3.6%.
- **Conduct disorders** which include defiance, aggression and anti-social behaviour. Children who have conduct disorders are twice as likely to leave school without qualifications and four times as likely to be drug dependent.¹⁹ There are an estimated 5.6% of children aged 5-19 in England with conduct disorders, with Trafford having a lower figure of 4.9%.
- **Hyperkinetic disorders**, such as attention deficit hyperactivity disorder (ADHD), are associated with issues around inattention and over-activity. Hyperkinetic disorders are usually evident in the first five years of a child’s life and can include an impairment of cognitive functions along with delays in motor and language development.²⁰ Around 1.3% of Trafford’s children aged 5-19 are estimated to have a hyperkinetic disorder, which is just under the England level of 1.5%. This would therefore mean that there are around 684 children in Trafford affected. ADHD can lead to lower educational attainment, lower earnings and interpersonal difficulties.²¹

Specific Disorders

3.23 The following table provides a breakdown on specific mental health conditions.

Trafford estimates of specific mental health issues alongside rate/percentage –References: ASD²², Anxiety, and Depression¹¹

Type	Estimated Incidence	Current Trafford estimated no. children
Autistic Spectrum Disorders (pupils)	1.1%	476
Anxiety Disorders (5-10)	2.2%	352*
Anxiety Disorders (11-16)	4.4%	722**
Depression (5-10)	0.2%	32*
Depression (11-16)	1.4%	230**

*Applied to 4-9 years of age as available from Census 2021

**Applied to 10-14 years of age as available from Census 2021

3.24 In 2022, 568 children in Trafford state-maintained schools had autism as a primary Special Educational Need, representing 13.1 per 1,000 pupils, which is similar to the England rate (13.7 per 1,000). Other national population studies have found varying prevalence of autistic spectrum disorders, but the latest estimate is 1.1%. This would give a higher estimate of 476 pupils with ASD in Trafford.

¹⁸ ONS (2005). Mental health of children and young people in Great Britain

¹⁹ Public Health England (2016), The mental health of children and young people in England

²⁰ World Health Organisation (2010), International Statistical Classification of Diseases and Related Health Problems 10th revision (ICD-10), <http://apps.who.int/classifications/icd10/browse/2016/en>

²¹ Public Health England (2016), The mental health of children and young people in England

²² National Autistic Society (2018), Autism facts and history

Eating Disorders

3.25 Eating disorders are a serious mental illness, they are typically characterised by a preoccupation with food, weight, body shape and harmful eating patterns. The three most common eating disorders are anorexia nervosa, bulimia and binge eating disorder.

Population range	Estimated Incidence	Trafford population	Estimated affect Trafford population
11 – 16 Years	13%	19,629	2,552
17 – 19 years	58%	7,496	4,348
Total	25%	27,125	6,900

3.26 NHS digital have estimated that the proportion of young people with a possible eating disorder has increased significantly since 2017. 13% of 11–16-year-olds and 58.2% of 17–19-year-olds are now estimated to be affected.²³ This compares to 6.7% of 11–16-year-olds and 44.6% of 17–19-year-olds with a possible eating disorder in 2017.

3.27 Trafford has increased its investment in its Community Eating Disorder Service to help maintain the national waiting times standard. More information on the waiting time standard and Trafford's performance against this can be found in section 5.

3.28 Trafford has higher numbers of children and young people with eating disorders compared to our neighbouring local authorities.

Hospital Admissions

3.29 Children and young people in mental health crisis typically present at Wythenshawe Hospital, or Royal Manchester Children's Hospital. We are aware that some children and young people may also be taken to Salford Royal Hospital or North Manchester.

A&E/urgent care Location	2020-21 Full year
Wythenshawe Hospital	81
Royal Manchester Children's Hospital	30
Manchester Royal Infirmary	0
Trafford General Hospital	18
Other	3
Grand Total	132

3.30 **Self-harm** involves the deliberate damage or injury to a part or parts of a person's body. There is a significant and persistent risk of future suicide following an episode of self-harm.²⁴ During 2019/2020, there were 140 hospital admissions of 10–24-year-olds as a result of self-harm. The rate for Trafford (372.2 per 100,000) is better than England (439.2 per 100,000), and low compared to similar authorities.

²³ [Mental Health of Children and Young People in England 2021 - wave 2 follow up to the 2017 survey - NHS Digital](#)

²⁴ Public Health England (2016), The mental health of children and young people in England. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/575632/Mental_health_of_children_in_England.pdf

3.31 According to age group, 15–19-year-olds are at higher risk than 10–14-year-olds and 20–24-year-olds. The table below shows the different age groups and estimated values comparing Trafford with regional and national estimated values with 2019/2020 figures. Admissions of 15–19-year-olds and 20–24-year-olds are lower than the regional and national comparisons however for 10–14-year-olds, the comparative data in Trafford is significantly lower.

Age groups hospital admission as a result of Self Harm 2019/2020	Trafford	Greater Manchester	England
10 – 24 Years old	372.2	509.9	439.2
10 – 14 Years old	90.3	326.8	219.8
15 – 19 Years old	641.3	744.3	664.7
20 – 24 Years old	373.0	461.7	433.7

Perinatal/Parent and Infant Mental Health

3.32 A key indicator for the mental health and wellbeing of children is that of mothers. Perinatal mental health problems are some of the most common complications of pregnancy, affecting up to 20% of all pregnancies.²⁵ It is therefore estimated that of the 2,413 Trafford births in 2021, 482 pregnancies would be affected by perinatal mental health problems.²⁶

Rates of perinatal psychiatric disorder per thousand maternities ²⁷

Type	Rate per thousand	Trafford Estimate per thousand
Postpartum psychosis	2/1000	5
Chronic serious mental illness	2/1000	5
Severe depressive illness	30/1000	75
Mild-moderate depressive illness and anxiety states	100-150/1000	250-376
Post-traumatic stress disorder	30/1000	750
Adjustment disorders and distress	150-300/1000	376-752

3.33 Research has shown that if the mother is in the top 15% for symptoms of anxiety or depression while pregnant, her child has double the risk of a probable mental disorder by the age of 13.²⁸

Summary

- There are 74,170 children and young people living in Trafford, which represents around a quarter of Trafford's total population. This figure is expected to grow by around 5% by 2029.
- Vulnerable children and young people including CLA, those from BAME communities and children & young people with SEND are much more likely to suffer from mental health issues than those that are not.

²⁵ Joint Commissioning Panel for Mental Health (2012): Guidance for commissioners of perinatal mental health services, https://www.rcpsych.ac.uk/pdf/perinatal_web.pdf

²⁶ Live births in England and Wales : birth rates down to local authority areas (2019) <https://www.nomisweb.co.uk/query/construct/summary.asp?mode=construct&dataset=207&version=0>

²⁷ Joint Commissioning Panel for Mental Health (2012): Guidance for commissioners of perinatal mental health services, https://www.rcpsych.ac.uk/pdf/perinatal_web.pdf

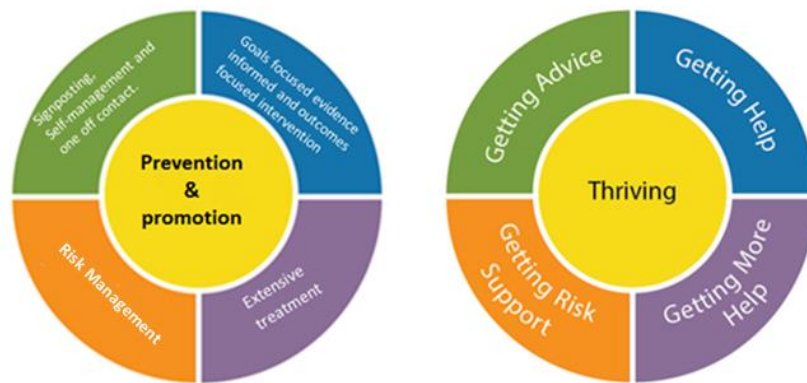
²⁸ Talge, Neal, Glover (2007) Antenatal maternal stress and long-term effects on child neurodevelopment: how and why? Journal of Child Psychology & Psychiatry

- It is expected that over the next 10 years the population of Trafford will increase by circa 5.5% which if the SEND population increases by the same percentage as for the previous year 0.6% this would equate to an estimated overall SEND population of 6083 over the next 10 years.
- The estimated prevalence of mental health disorders has increased since 2017 from 1 in 9 (11.6%) to 1 in 6 (17.4%). Applying this to the estimated number of 5- to 14-year-olds living in Trafford, equates to an estimated 5,821 children diagnosed with a mental health condition. Prevalence of mental health disorders in those aged 17-19 has also increased to 1 in 6 (17.4%). Applying this to the estimated number of 15–19-year-olds in Trafford equates to an estimated 2,371 young people.
- We know that despite significant investment in preventative services, referrals to Trafford CAMHS continue to rise in both numbers and degree of complexity. An increase in capacity within both early help and specialist services will be required.
- Early help is critical to supporting achieving the best possible outcomes and preventing or deescalating need. The approach needs to be formed from the principle of intervening as early as possible, preventing the escalation of need and risk of poor outcomes.
- Given the significant inequalities in deprivation within the borough, those living in areas of high deprivation are at risk of higher levels of ill health because of differences in the wider determinants, such as housing, education and employment. One of the main aspects to consider going forward is the impact of COVID-19, therefore any medium to long term plan will need to consider those most effected.

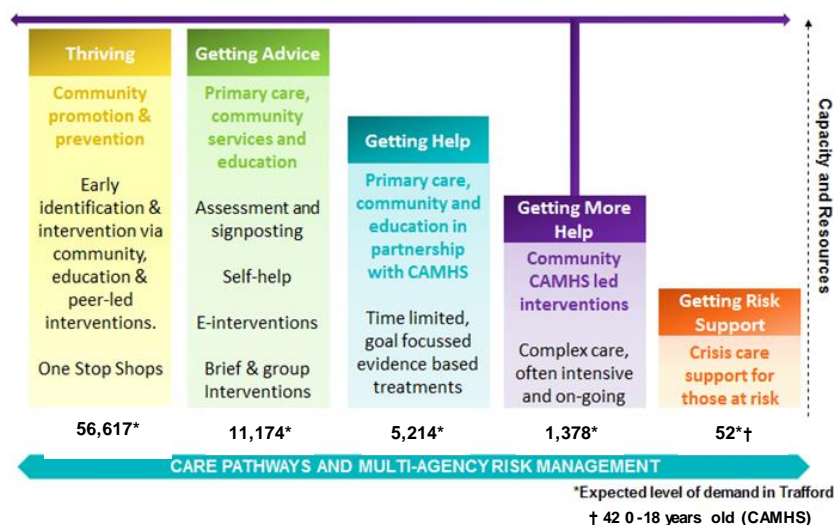
4. Trafford's Current Service Offer

This section outlines the different types of support that exist for children and young people in Trafford.

- 4.1 Trafford has followed the recommendations of 'Future in Mind' delivering its services in line with the THRIVE model. 'Future in Mind' recognised that children and young people do not neatly fit into tiers and that the THRIVE model is better able to describe their needs.
- 4.2 There are five groups that are distinct in terms of the needs and choices of the individuals within each group and the resources required to meet these needs and choices. THRIVE aims to draw a clearer distinction between treatment and support. The image to the left describes the input offered for each group. The image to the right describes the state of being of people in that group.



- 4.3 The model was developed to address a number of issues facing services offering mental health support. Most children and young people were previously being seen by specialist services in the 'Getting More Help' group. The model aims to ensure that children and young people receive timely support in accordance with their needs. The next image aims to demonstrate how Trafford puts a clear focus on the 'Getting Advice' and 'Getting Help' quadrants rather than just focusing on 'Getting More Help'.
- 4.4 It is important to note that not all services sit within just one THRIVE group, with many crossing over. Where this is the case, this section aims to demonstrate the different offers that exist within the same service.



Thriving

- 4.5 The 'Thriving' group encompasses the majority of children and young people. Individuals in this category are

fundamentally managing, though some people may still benefit from some general rather than specific interventions, which focus on prevention and promotion. There are a range of organisations in Trafford, both commissioned and non-commissioned, that are able to provide this level of support, including access to self-help and community initiatives that support emotional wellbeing.

4.6 Trafford has a strong Voluntary, Community, Faith and Social Enterprise (VCFSE) sector, supported by Thrive Trafford²⁹, we have a broad range of providers delivering universal services on a locality or borough wide basis. A large proportion of these community services can be found on the Trafford Directory alongside our commissioned services: www.trafford.gov.uk/servicedirectory. The directory allows residents to search by key word or postcode to discover the services that are available in their local area. The Trafford Service Directory now has a specific page on mental health which offers support aligned to the THRIVE model: [Service Directory: Young People's Mental Health & Wellbeing](#). This directory has been expanded significantly following a service mapping exercise of children's mental health and wellbeing services.

Getting Advice

4.7 Much like 'Thriving', the 'Getting Advice' group consists of early intervention, with the difference being that it involves low level support around signposting, self-management and minimal contact. It is for those with mild or temporary difficulties and those with fluctuating or ongoing severe difficulties who want to manage their own health rather than through goal-based specialist input.³⁰ Support in this group is provided by practitioners, who are not mental health specialists, working in universal services such as GPs, Health Visitors, school nurses and voluntary agencies. Practitioners offer general advice and support for less severe problems, contribute towards mental health promotion, identify issues early in their emergence and refer children and young people to more specialist services if needed. Some of these services are preventative and as such, it is expected that many of these will positively impact on wider pathways. In Trafford there is a wide variety of activity within 'Getting Advice' as detailed below:

Support Offer	
GPs	<ul style="list-style-type: none"> GPs are able to refer families to a wide range of interventions and services. This may include social prescribing (where activities such as sport are used as a way of improving wellbeing).
Health Visitors	<ul style="list-style-type: none"> The Health Visiting service work together with parents and carers to ensure that children aged 0-5 have the best start in life and are able to achieve their full potential. The service offers holistic support to all families which includes post-natal and emotional wellbeing screenings, developmental reviews, and information and guidance to support parenting and healthy choices. Trafford Health Visiting team provide advice and support to Trafford parents with children aged 0-5 years old through a confidential NHS text messaging service known as Parent Line.
School Health	<ul style="list-style-type: none"> Trafford School Health team provide information, advice, drop-in support, and referral on a range of health-related issues including mental health and wellbeing, sexual

²⁹ The Trafford Partnership commission 'Thrive Trafford' to provide infrastructure support to the VCSE sector. Thrive Trafford's role is to develop, grow and sustain the sector, and they also have a role in coordinating volunteer support.

³⁰What is iTHRIVE (2019), <http://implementingthrive.org/wp-content/uploads/2019/08/THRIVE-Framework-description-slides-FINAL.pdf>

	<p>health, and weight management. The service can be accessed directly by children, young people, and parents directly or via professional referral.</p> <ul style="list-style-type: none"> • Trafford School Health team service promotes the health and wellbeing of school-aged children aged between 5-19. The service delivers a range of health promotion activities and interventions across primary and secondary education settings. • Following the disruption of covid-19 pandemic, from November 2022, all secondary schools in Trafford will see the return of the School Nurse drop-in session where pupils can attend and talk about any mental health and emotional wellbeing related issues they might have. • Trafford school health team provide advice and support to young people through a confidential NHS text messaging service known as Chat Health. • Holistic health assessments are completed for all children when they start school and early detection and intervention put in place, as needed.
<p>Schools</p>	<ul style="list-style-type: none"> • All schools have a pastoral lead offering direct support to pupils and families. • There are many schools in Trafford who have previously implemented the Social and Emotional Aspects of Learning approach or are one of the 30 schools signed up to Trafford's 'Feel Good Schools' programme which promotes and supports a whole school, classroom and individual approach to emotional health and wellbeing. • Schools should also now: have an awareness of mental health support in schools via a whole school approach; know how to identify and support children and young people who have had Adverse Childhood Experiences; know how to build resilience in pupils via low-cost interventions. • Trafford are currently involved in the Mental Health Support Teams (MHST) in approximately one third of primary and secondary schools across the borough. MHST schools have a mental health practitioner based in the school one day per week. • Trafford have also been successful to pilot 'Autism in Schools'. This has been initially trialled in 3 schools and will run alongside the MHST programme.
<p>Early Help Hubs</p>	<ul style="list-style-type: none"> • The 0-11 year's hubs in Stretford and Partington aim to provide access to a range of parenting, behaviour management and family support services, as well as providing targeted community groups and courses. Examples of this include baby club, Incredible Years and Riding the Rapids parenting programme. In addition to this, the hubs maintain strong links with community health services and wider partners to support achieving positive outcomes around child development, school readiness, parenting skills and aspirations, child and family health, and child and family life chances. • Talkshop is an advice, support and information centre for young people aged 11 to 19 (up to 25 with additional needs or care leavers). The Talkshop offer a confidential service. This enables us to offer a safe and non-judgemental environment for young people to seek the help they need. Talkshop is the main hub for Trafford's Youth Engagement Service where young people can access services including those delivered by Youth Workers, Connexions, Early Break, MFT The Northern

	<p>Contraceptive, Sexual Health and HIV Service, the Proud Trust, 42nd Street, and other partners.</p>
<p>Trafford Council Commissioned Services</p>	<ul style="list-style-type: none"> Targeted, community based commissioned services provide support to children, young people and their families across the borough. Whilst these services are not mental health specific, they contribute to the wider mental wellbeing agenda as they support social, emotional and developmental needs. Services include, family support, evidence-based parenting programmes, mentoring, young carers service and domestic abuse services. Family support services offered within the VCFSE sector form part of the wider mixed model of family support on offer, leading sustained, positive behaviour change. Trafford Council employs three Senior Family Support Practitioners who provide support for families needing intensive family support A number of Trafford's mental health services within the 'Getting Help' section also provide support in the 'Getting Advice' section too. For example, Kooth is Trafford's online counselling service, but it also has message boards and articles where young people can go to get advice and information. As well as this, 42nd Street's group work also provides support in the 'Getting Advice' segment.
<p>Education of Vulnerable Children Service</p>	<ul style="list-style-type: none"> The service provides advice to professionals and parents in relation to addressing barriers to accessing education of compulsory school age children, including those educated other than on a school roll.
<p>Parents/Carer Support</p>	<ul style="list-style-type: none"> Many of the services above provide support for parents/carers, but there are also a number of specific services and organisations in Trafford. For example, both the Trafford Parent Carer Forum and Trafford SEND Information Advice and Support Service (SENDIASS) provide support for parents/carers of children with SEND. As well as this, Trafford Sunrise (details below), provides parent workshops on a variety of mental health topics. Chatty Café is also a great space for SEND parent carers to meet other people, get information and advice and take a break. Online Parenting Course - Currently available to all parents in Trafford is the log in for The Solihull Parenting Programme. The Solihull Approach aims to improve emotional health and wellbeing by supporting relationships. The courses are written by CAMHS professionals with other health and education workers. They are evidence based and accredited by the DfE. Chat Health – A new Health Visiting NHS text messaging service has been set up to support parents, carers and families of children under the age of 5 in Trafford with questions and queries about their health and wellbeing.
<p>Early Years</p>	<ul style="list-style-type: none"> Trafford have been making progress against the Early Years Social, Emotional Development & Wellbeing (SEDW) Pathway. An audit of Trafford's universal, targeted and specialist assessments and interventions for promoting 0-5s social, emotional development and wellbeing has been completed in collaboration with partners from across education, health and Early Help. This audit highlighted a lot of activity within this area across different services, however the need for a co-ordinated approach, with greater transparency for families and professionals, was identified due to the lack

	<p>of a clearly articulated SEDW pathway. Co-production with families will form an important part of the development of this pathway.</p> <ul style="list-style-type: none"> • The proposed SEDW pathway will aim to meet the following objectives: <ul style="list-style-type: none"> ○ Improve standardisation across services in relation to assessment and intervention for social and emotional development in 0-5s. ○ Increase clarity and transparency for families and professionals regarding the support available across services. ○ Promote the use of evidence-based assessment and intervention across services. ○ Meet the needs of a diverse range of Trafford families through place-based offers of support.
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4.8 Access to some of these services is via the weekly multiagency Early Help Panel for the four areas of Trafford, North, South, Central and West; whose purpose is to ensure the most appropriate support is provided at the earliest possible opportunity as part of a holistic whole family approach. Mental health is consistently one of the top five reasons families across Trafford require support and so a representative from CAMHS feeds into the panel to inform discussion and decision making. Commissioned services are also represented at panel and these include emotional health and wellbeing, parenting courses, family support, and mentoring.

4.9 In addition to the above service offer, Trafford Team Together (TTT) finds support for children and families living in Trafford or attending a Trafford school to prevent small worries turning into bigger problems. TTT also finds support for children and families recovering from crisis. TTT is currently available in Trafford North and West and will be developed in the South area Autumn 2022 and in Central area Spring 2023. This is not a service, but a model bringing together different working cultures to effect change through a community-based approach. It's an opportunity to work with children and families to hear what's important to them. Schools are a key partner in the model.

Getting Help

4.10 The 'Getting Help' grouping involves supporting children and young people who need a specific intervention focused on agreed mental health outcomes. Support is mainly provided by specialists working in the community and in primary care settings and can be delivered by primary mental health workers, psychologists, specialist parenting workers and counsellors working in general practices, paediatric clinics, schools and youth services. Support can also be provided by those not specifically trained to be a mental health provider.

4.11 The work at this level includes building capacity and capability within 'Getting Advice', in relation to early identification and intervention with children's mental health needs and providing a range of support, advice, assessment and treatment to children, young people and their families. Support may be across a number of sessions. 'Getting Help' provision includes the following mental health provision commissioned by the ICS, local authority and directly by schools:

Support/Offer	
Trafford CAMHS	<p>Trafford CAMHS is part of the offer for those who need focused goals-based input. Help will typically be offered for 10-12 sessions and developed in response to need with a clear shared understanding of the aims of the intervention. This may include an evidence-based treatment along defined treatment guidelines and could also involve:</p> <ul style="list-style-type: none"> • Work with key partner agencies to develop an overall response to children's mental health between universal and specialist services.

- First appointments via telephone triage or face to face appointment in order to identify the right intervention for the young person and family.
- Consultation and advice to universal professionals from mental health specialists.
- Links to multi-agency Family Support Teams, Early Help and Youth Services.
- Parent workshops.

Under the Thrive Framework the support CAMHS may offer is

Signposting and Advice

There are many things that are known to be effective to help our mental health. On receipt of a referral or after triage, a member of the team may send you information of a service more appropriate to meet your needs or discuss this with you after an initial appointment. Parents and carers may also be offered a workshop to help you understand more about the difficulty you are experiencing and how to cope.

Getting Help

There are lots of different types of therapy that can help when we are struggling to cope with the ups and downs of life. CAMHS offer a number of psychological therapies that can be delivered over a series of weekly or fortnightly sessions and would usually take place over 12 weeks. Therapy may also be offered via group work. Help will be delivered by a CAMHS clinician or a children and young people’s wellbeing practitioner. One of the main groups of talking therapy is CBT or Cognitive Behavioural Therapy which aims to teach you how to cope with problems by changing the way you think about them.

Getting More Help

These are therapies that are more spread out and may take longer to complete. These include help like Family Therapy, which will actively involve members of the family as part of the treatment or Dialectical Behaviour Therapy (DBT), which offers help to understand and accept intense feelings and learn skills to manage them.

Getting Risk Support

This is where CAMHS will work together with other people and professionals to provide support for those young people who are finding it difficult to keep safe and are not yet able to participate in the getting help or getting more help that is on offer.

THRIVE in Education

- MHSTs are a relatively new service designed to help meet the mental health needs of children and young people in education settings (ages 5-18). They are made up of senior clinicians and higher-level therapists, and Education Mental Health Practitioners (EMHPs).
- Children and young people with mild-moderate mental health needs will be supported with clear referral pathways in place for those who require more intensive, specialist support.
- A MHST will support identified senior leaders in schools to develop their whole school approach to mental health and emotional wellbeing.
- MHSTs are an important part of a system approach to mental health and supporting the reduction of health inequalities experienced by groups who are more at risk of developing mental ill health such as those from socially disadvantaged backgrounds and BAME communities by working in partnership with education, health, social care and VCSFE communities.
- MHSTs are present in a third of schools across Trafford, both primary and secondary.

School Commissioned Provision	<ul style="list-style-type: none"> • Many schools employ counsellors directly or commission support such as play therapy, mentoring or bereavement support as needed. A number of schools commission additional support from CAMHS or VCFSE services such as 42nd Street. • Some schools in Trafford purchase targeted mental health services from Trafford CAMHS on an individual basis. These services are commissioned directly by the school.
42nd Street	<p>42nd Street provides mental health support for those aged 13-25. The service aims to:</p> <ul style="list-style-type: none"> • Engage with young people under stress. • Provide interventions that promote spirit and recovery using the recovery model. • Ensure that the voice of young people influences the development of the service offering. • Give young people chances for personal development and growth. • Improve awareness of the mental health needs of young people. • Challenge the stigma associated with mental health. <p>The service focuses on giving individual, time limited, therapeutic support. This ranges from group sessions to one-to-one psycho-social support and counselling. It is delivered from the organisation's city centre base as well as through other community venues in Trafford and is available during normal office hours, as well as two evenings a week.</p> <p>The type of support 42nd Street provides cuts across most of the THRIVE categories. Much of their counselling support would come under 'Getting Help', but the more complex psycho social work would fit in the 'Getting More Help' category. The service also has a number of groups where young people can go to 'Get Advice'.</p> <p>Young people, parents/carers and professionals are able to self-refer to this service by telephone, website or email.</p>
Kooth.com	<p>Kooth is a free, safe, confidential and non-stigmatised way for young people to receive counselling, advice and support on-line. The service in Trafford is commissioned jointly by Trafford ICS and Council for young people aged 10-25, providing access to counsellors until 10pm each night, every day of the year, as well as peer support via fully moderated forums. The service can be accessed directly at www.Kooth.com.</p> <p>Kooth's therapy team are qualified counsellors and psychotherapists, clinically supervised in house and independently. The team work closely together to ensure the best outcome is achieved for the young person and have clear pathways into other services, ensuring the young person gains the right information and is signposted to the most appropriate provision.</p>
Qwell.com	<p>Qwell is an online emotional wellbeing and mental health support service for adults in Greater Manchester aged 26+. It is commissioned by the Greater Manchester Health & Social Care Partnership, it is free for adults to use and is self-referral, meaning there is no need to visit a GP to access the service.</p> <p>Qwell is completely anonymous, it takes just a few minutes to sign up to the site where you can then speak to fully qualified counsellors, therapists and mentors until 10pm, 365 days per year. There are also forums, a magazine and a range of activities where you can get peer-based advice; these are fully moderated by Qwell staff to ensure a safe and supportive environment.</p>
Trafford Sunrise (Just Psychology)	<p>Trafford Sunrise is provided by Just Psychology and supports children aged 5-12 years and their families with emotional health and wellbeing needs. The service was commissioned jointly by Trafford ICS and Trafford Council following learning from a pilot programme that highlighted much higher level of needs than anticipated and a gap in 'Getting Help' support for children under 13 years of age.</p> <p>Trafford Sunrise provides support for children in coping with stress, learning how to relax and promoting emotional wellbeing. The service provides effective, evidence-based group support and 1-1 support is offered on an exceptional basis determined by clinical need. Group sessions offer space where children and families can practice their coping skills and make new friends. Support is provided across 6 sessions that occur weekly.</p>

	The service also provides parent/carer workshops, which parents/carers can just turn up to without booking. They cover a variety of topics such as anxiety and bullying.
Action for Children	Action for Children work with and support young carers in Trafford providing practical and emotional support. The service offers a range of support including one-to-one support, needs assessments for young carers and their families, opportunities to meet other young carers, advocacy and much more.
Trafford Carers Centre	Trafford Carers Centre work with other services to ensure that young carers are identified and supported. The service offers statutory carers assessments and offers a range of support to ensure that young people are not negatively affected by their caring role and have their needs and wants met.
Silver Cloud	Silver Cloud is a new digital offer that has been commissioned by Greater Manchester. Silver Cloud will run as part of the service offer of MHST and some of our VCSE partners. It is a CBT based offer for children and young people 14 and over. Silver Cloud is expected to go live in Autumn 2022.
Chat Health	Chat health is a safe and easy way for young people in Trafford to speak to a School Nurse. Chat Health is a confidential NHS text messaging service, which offers advice and support to young people aged 11-16 on a wide range of health and wellbeing issues including mental health, bullying, self-harm, alcohol, drugs, healthy eating, smoking, sex, relationships and more.
Parent Line	Parent Line is a confidential NHS text messaging service offering advice and support to Trafford parents and carers of children ages 0-5. Trafford Health Visitors can help with, parenting advice and support, sleep, continence, immunisations, mental health, minor illness, speech, behaviour, temper tantrums, infant feeding, diet and exercise, school readiness, child development and more.
Oral Health Improvement Service	The Oral Health Improvement Service provides evidence-based programmes and training to a range of community settings including oral health sessions in children's centres for young parents, Supervised Toothbrushing Programmes in early years setting and reception classes, and many others. The team also supports several local and national campaigns such as National No Smoking Day, Dry January, Mouth Cancer Awareness Month, Stoptober, and Disability Awareness Day.
Specialist Weight Management Service (SWMS)	SWMS is a community-based service which delivers the Trafford Lifestyle Programme designed to support people with a Body Mass Index (BMI) of 30 or more (people from a black or minority ethnic background can be referred from 27.5 BMI or more) to succeed with gradual permanent weight loss using a lifestyle approach. The service offers a tailored weight loss programme which develops lifestyles to support physical and mental well-being. A multi-disciplinary approach is used that includes dietitians, nurses, physiotherapy, team secretary and referral to psychology. The service also provides a Bariatric Education Course for patients wanting Bariatric Surgery, who meet the criteria for Bariatric Surgery and who have successfully completed the Trafford Lifestyle Programme.
Home Start	Home-Start (ages 0-18, up to 25 with SEND) support any family living in Trafford with a child of any age who may be going through difficulties. Their support workers and volunteers deliver family support in the home and community venues. The service focuses on families experiencing or being at risk of domestic abuse, separation, imprisonment, isolation as a result of cultural/ language barriers and debt and food poverty.
Sleep Tight	Sleep Tight offer 1 to 1 sleep support clinics via telephone or Zoom to families with children and young people aged 2 to 18 to improve their sleep. Appointments last one hour and a double appointment can be booked for those with additional needs.

- 4.12 There are a number of services in Trafford supporting families with different complexities. The role of the **Senior Family Support Practitioner** is to provide support for families that require intensive family support. Each area team has an IAPT (Improving Access to Psychological Therapy) trained Senior Family Support Practitioner that focuses on providing support to families at an early intervention level by providing multi-agency working through the Early Help Assessment (EHA). Referrals are received from a variety of professionals including CAMHS, social care, health, education and other early help services. The majority of referrals relate directly to both emotional wellbeing and conduct disorder.
- 4.13 The Senior Family Support Practitioners also complete thorough assessments to assess parents' suitability to access parenting courses, such as Incredible Years, an evidence-based parenting programme that runs over 14 weeks to strengthen parental competencies. It is accessed through Trafford's Early Help Panel and runs 6-10 times per year giving practical methods that encourage families to address their problems in a way that results in positive change and prevents further problems arising. Other parenting courses include Riding the Rapids and Escape.
- 4.14 Trafford also has a Family Focus service for children at risk of going into care. This service has been in place since March 2017 and offers 6-8 weeks of direct intervention to support a child to maintain a placement or return back to their family. Young people are offered support developing resilience and skills for staying safe and succeeding through family sessions or direct 1 to 1 work.
- 4.15 The Early Help Intervention Workers provide a whole family support package where children and young people are high at the safeguarding tier thresholds but do not require a statutory intervention by Social Care. The Intervention Workers use the Early Help Assessment and Plan to identify priority areas and to bring together a team of multiagency professionals around the child and family. Emotional wellbeing and very challenging behaviour may often feature as areas of need in the cohort group. These cases are allocated through identification of the need for intensive and coordinated Early Help when cases are referred to Children's First Response service (formerly Multi Agency Referral Assessment Team).

Support for Victims of Child Sexual Exploitation

- 4.16 For young people at risk of or involved in Child Sexual Exploitation (CSE) there is support through a range of services, mainly delivered from Trafford Talkshop. This includes sexual health services, counselling, missing from home interventions, youth work and dedicated CSE mentoring. The mentoring element is delivered by two dedicated workers: a CSE coordinator and a CSE Mentor. Both workers build a trusting relationship with young people and use informal education methods to encourage and empower young people to recognise their potential and achieve their goals. Talkshop also offers the 72 hour Missing from Home Independent Return Interview and follow up mentoring support.
- 4.17 This provision is supported by a variety of Complex Safeguarding forums, including the monthly Complex Safeguarding Panel which is attended by a range of professional's (including CAMHS) covering all localities across Trafford and providing a confidential space to share information and intelligence ensuring a holistic approach to the safety for young people affected. The workers also participate regularly in the Police Challenger meetings and work closely with the integrated Police and social care Challenger and Shine teams. The Talkshop Team Leader chairs the Complex Safeguarding Quality Assurance meeting.

Perinatal and Parent and Infant Mental Health Care

4.18 Perinatal care and Parent Infant Mental Health (PIMH) services in Trafford are delivered by both the Health Visiting Service and CAMHS. Our Perinatal Pathway sets out an overarching approach for managing perinatal mental health support and recognises the importance of the parent infant relationship, and hence the early emotional development of the infant. The pathway is for prospective parents, their children and family, starting before birth and continuing until the child's fifth birthday. It includes a process for screening and assessing perinatal mental health needs in order to identify need and provide timely support. The pathway details the range of community and specialist mental health provision for parents and infants.

Health Visiting Service

4.19 Health visiting and School Health are integral to the delivery of the 0-19 Healthy Child Programme (HCP) in Trafford. The services are provided by Manchester Foundation Trust (MFT). The services provide specialist knowledge in community and public health, child health, health promotion and education.

4.20 Trafford health visiting service has increased the number of specialist HV's with a number of key roles supporting our most vulnerable families which include; 1 WTE Specialist Health Visitor in Parent – Infant Mental Health (PIMH) and 1 WTE specialist homeless families Health Visitor. In addition, each Health Visiting Team has a Parent Infant Mental Health Champion (a Health Visitor with a special interest in PIMH). New born Behaviour Observations (NBO) are currently being carried out with approximately 95% of new births across Trafford.

4.21 Health Visitors are trained in identifying and addressing the emotional and mental health needs presented by parents and their infants during the perinatal period (and beyond). They provide screening assessments through the Edinburgh Postnatal Depression Scale (EPDS), listening visits offered in response to early detection of perinatal distress and more targeted support through the Baby and Me programme delivered by the Specialist PIMH Health Visitor and the Trafford Infant Parenting Service (TIPS).

4.22 In addition, Health Visiting and School Nursing teams would offer bespoke parenting support as required.

4.23 Home Visitors are routinely trained in ICON (abusive head trauma). This encourages conversations around baby's crying being part of normal development and how to cope during this time. ICON is also a public health and safeguarding initiative to educate parents and carers to never shake a baby.

4.24 Health Visiting teams and School nursing teams are all accessing reducing parental conflict training provided by Trafford Council.

Voluntary, Community, Social, Faith and Enterprise (VCSFE)

4.25 Home Start Trafford & Salford delivers the Baby Bond project which focuses on engaging with parents earlier to offer more intensive support to nurture the parent-infant bond. Staff and volunteers have received specialised PIMH training in order to embed the principles of supporting secure early attachment into their core practice.

Getting More Help

4.26 The 'Getting More Help' category involves support for more serious issues that may require extensive or intensive treatment. Much of this support is provided by CAMHS. The service is commissioned by Trafford ICS and Trafford Council for children and young people up to the age of 18 with complex emotional/mental health difficulties who are registered with a Trafford GP. This may include:

- Moderate to severe emotional and behavioural difficulties.
- Possible psychotic symptoms.

- Possible depressive episodes and severe adjustment reactions.
- Threatened or actual self-harm in the context of a mental health issue.
- Anxiety disorders, developmental trauma and post-traumatic stress disorder (PTSD).
- Obsessive compulsive disorder (OCD), tics and Tourette's syndrome that interfere with functioning.
- Eating disorders.
- Attention Deficit Hyperactivity Disorder (ADHD) – through the multi-service ADHD Pathway.
- Mental health difficulties associated with chronic illness.
- Assessment of Neurodevelopment (ND) difficulties including autistic spectrum disorders – through the multi-team Autism & Social Communication Pathway.
- Complex comorbid presentations where diagnosis is unclear, social and biological factors are hard to separate or second opinions are needed.
- Attachment disorders and need for parenting interventions or systemic work.
- Psychological consequences to medical conditions or learning difficulties.
- Severe school refusal as a result of a mental health issue.
- Disorders co-morbid with substance misuse, or those linked to substance misuse (e.g. dual diagnosis).

4.27 Trafford CAMHS is a multi-disciplinary team made up of psychiatrists, nurses, psychologists, therapists, mental health practitioners, assistant psychologists and family support workers. The work of the service involves the assessment and management of children and young people through the use of evidence-based therapeutic intervention. This includes providing advice and consultation to other professionals in relation to children's mental health and wellbeing, as well as training and supervision.

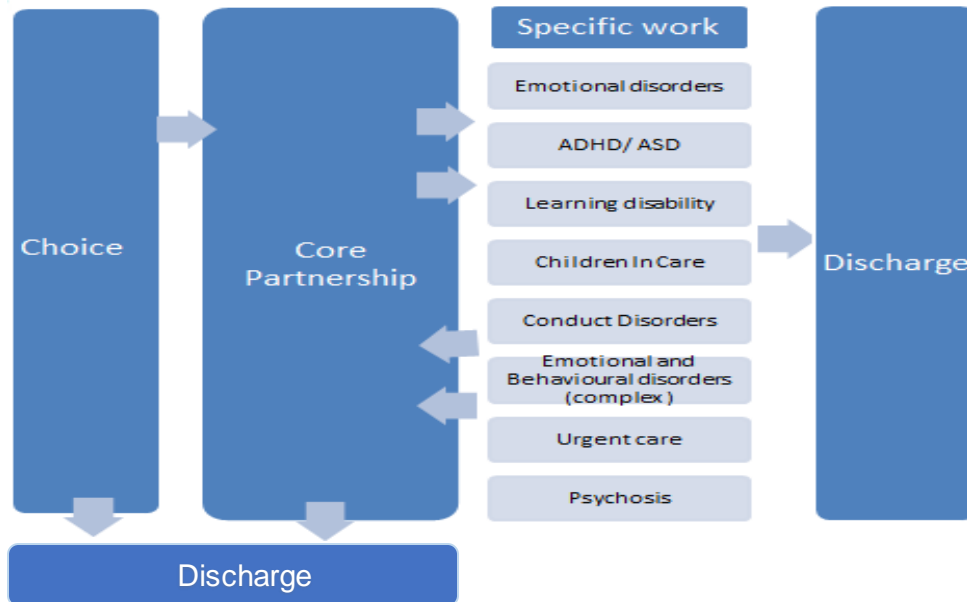
4.28 Referrals to the service are accepted from professionals working with the young person and their family including: GPs, health professionals, educational psychologists, social workers and Trafford Youth Justice. All referrals are screened within 24 hours, or one working day, by the Trafford CAMHS duty clinician and the following action is taken:

- If the situation is deemed urgent, the child or young person will receive follow up and assessment within seven working days.
- If a different organisation would be better able to meet the child's needs then they are signposted on.
- If the situation is not urgent, but it appears that they may be appropriately supported by CAMHS they are sent a 'Choose and Book' letter.

4.29 The first appointment is referred to as a 'Choice Appointment', part of a nationally recognised service delivery model called the Choice and Partnership Approach (CAPA) introduced by the service in 2016. This approach is goal focused and looks at making shared decisions with the child or young person and their family. The Choice appointment gives the child or young person and their family an opportunity to discuss their situation and what they feel is needed. This face-to-face approach leads to more successful signposting on to other agencies and

enables improved risk management. If further interventions and specialist support are needed, the child or young person will be offered core Partnership intervention within the service.

4.30 Once a child or young person enters Partnership, they will work collaboratively to develop goals that will be reviewed before discharge. For the majority of cases this will be 10-12 sessions using evidence-based practice with a focus on developing strategies for coping. Each person accessing Partnership will have a named clinician who will be their main point of contact. This person will be responsible for assessment, treatment and review of the interventions with the young person and family.



Eating Disorders

4.31 MFT Community Eating Disorder Service (CEDS) offer community support to children and young people up to the age of 18 years with suspected or diagnosed eating disorder including early intervention. The team is made up of psychiatry, eating disorder therapists, dieticians and family therapy. In addition to direct face-to-face work with families, the team also provides supervision and consultation to practitioners within Trafford CAMHS to support the work with young people and families that they are care co-ordinating.

4.32 Referrals into the service are screened and triaged within one working day in accordance with the NHS England National Access and Waiting Time Standards. Depending on the severity of the physical symptoms, the referral is then screened as either Urgent (and the young person will be seen within seven days) or routine (the young person will be seen within four weeks). At the point of triage, if some of the physical parameters are not known, the GP would be contacted to carry out a physical health check and physical risk assessment. At the first assessment appointment, a primary diagnosis of an eating disorder is established, and if this is the case, NICE concordant treatment interventions would then be offered.

Care Experienced Children

4.33 CAMHS has a specialist clinical psychology service in place to support the mental health needs of Looked-After Children. The service is integrated within the Children in Care social work team and supports developmental trauma, abuse and attachment difficulties using a systematic response. The children in care social work team carry out annual health assessments for all children in care in Trafford and the clinical psychology service reviews and supports all those scoring 18 or higher on the Strengths and Difficulties Questionnaire (SDQ).

Trafford Infant Parent Service

4.34 The Trafford Infant Parent Service (TIPS) was initially set up as an 'Early Attachment' service within CAMHS. Accepting referrals of infants (with their parents who may be within the perinatal period) up to the age of 5. The aim of the service will be to focus on promotion, prevention and treatment. The service will raise awareness of the importance of the parent-infant relationship by offering training, support and consultation to professionals, and liaising with professionals and services in the community. The service will also offer a clinical service to families, where there are concerns with the parent-infant relationship which need specific attention and intervention.

Safeguarding

4.35 For children and young people who have mental health needs with a safeguarding concern, CAMHS offers a consultation clinic to allow social workers and others to work in a more organised way around mental health needs. This allows them to develop a plan to ensure that the identified mental health needs of children and young people are being met.

4.36 CAMHS is a member of the monthly Complex Safeguarding panel (formally Sexual Exploitation and Missing - SEAM) panel which deals with approximately 50 child sexual exploitation cases per annum. Referrals to the Complex Safeguarding panel can be made by any professional through the borough's multi-agency Children's First Response team (formally MARAT). CAMHS attend case conferences and child in need meetings and contribute to multi-agency safeguarding plans.

4.37 Where young people are, or are at risk of, committing sexual violence, the lead professional working with the young person would arrange a joint strategy meeting with relevant professionals and assign an AIM (Assessment, Intervention and Moving On) trained social worker to carry out an AIM assessment. This may lead to specialist provision being purchased from Barnardo's to work with the young person if required. CAMHS are also able to refer to the Forensic Child & Adolescent Mental Health Service (FCAMHS) for risk assessment and recommendations, where appropriate.

Youth Justice

4.38 A link worker from Trafford CAMHS is based in the Trafford Youth Justice (TYJ) service one day per week and provides one-to-one assessments, mental health interventions, consultation with staff and liaison with CAMHS staff, delivering training around mental health issues to staff and volunteers. The TYJ also has its own Mental Health Support Worker who provides 1 to 1 support and mental health interventions for those young people who don't meet the criteria for CAMHS. This post also supports TYJ parents on an individually assessed basis. The TYJ Mental Health Case Worker has recently trained in Trauma and Post Traumatic Stress Disorder (PTSD).

4.39 The TYJ benefits from a fast-track agreement, whereby the CAMHS link worker sees at YJ young person as a priority within short time scales. Trafford TYJ has a mental health consultation approach. This involves offering one or two sessions with the young person's key worker or case manager and the TYJ Mental Health Case Worker/CAMHS Link Worker using Cognitive Behavioural Therapy (CBT) techniques, with a follow-up session when the young person has completed their intervention with the key worker. This has been successful in engaging young people who might not have wanted to attend a formal CAMHS assessment.

Early Intervention in Psychosis

4.40 Greater Manchester Mental Health (GMMH) is commissioned by Trafford ICS to provide an early intervention in psychosis service for 14–65-year-olds. The service consists of a multi-disciplinary team, including a Team Manager (CPN – Community Psychiatric Nurse), clinical psychologists, care coordinators (combination of social workers and Occupational therapists), Consultant psychiatrist, Occupational therapist and support, health &

wellbeing practitioners.

- 4.41 The service accepts referrals from any source, including self-referrals, carers' referrals and any service in the community including schools. All referrals are assessed using a Positive and Negative Syndrome Scale (PANSS) in addition to a comprehensive assessment. The service is specifically for people with potential psychotic experience. Those not meeting the threshold for the service are referred to CAMHS, IAPT or 42nd Street as appropriate to their needs. EDIT (Early Detection & Intervention Team) offers CBT for those at risk of developing psychosis to reduce the risk of transition into psychosis.
- 4.42 Young people accessing this service under the age of 18 will also have a CAMHS consultant for joint working and any necessary prescriptions. The service has greater scope to work with a child in crisis but sometimes joint assessments with CAMHS are required. It has a joint protocol with the Learning Disability service and works together on some cases. It also liaises closely with Early Break regarding young people presenting with substance misuse.
- 4.43 As at the end of October 2022, there were 20 young people under the age of 18 reported to be on the Trafford Early Intervention caseload and with a further 8 on the Early Detection Intervention Team pathway, giving a total of 28.

Getting Risk Support

- 4.44 There are a small number of young people and families who may not benefit from or are unable to utilise offers of getting help but remain a risk to themselves or others. These young people are likely to have contact from multiple agencies including social services and youth justice. Risk management plans should be multi-agency and acknowledge that evidence-based interventions are not currently effective. Support when a young person is in crisis should include:

Liaison and Diversion

- 4.45 An **Integrated Healthcare in Custody and Wider Liaison and Diversion Service** was jointly commissioned in 2017 by the Office of the Police and Crime Commissioner and NHS England. It is an integrated service model combining two key services that have historically been commissioned separately; police custody health care and Liaison and Diversion. The service will deliver an all-age (adult and youth) service across key points of intervention in the criminal justice system, addressing a wide range of health issues and vulnerabilities. Any young person in Police custody will receive a health assessment which will then follow them to the Court arena. These assessments will inform remand and sentencing decisions and ensure the defendant is managed and supported appropriately through the criminal justice system.
- 4.46 There has been a considerable amount of work undertaken in Trafford to keep young people out of custody. There is a continuing partnership project between the Trafford Youth Justice and Police to provide Early Help and divert young people away from the Criminal Justice System (CJS). If a young person is arrested for a minor offence, they are taken home and a parent/carer is informed that a referral will be made to TYJ for an assessment to take place rather than taking them to police custody. TYJ then advises the young person if they take part in the assessment and intervention and are assessed as suitable; TYJ will recommend to the police that the young person is given a community resolution instead of a caution. This approach is working extremely well to continually reduce first time entrants into the criminal justice system.
- 4.47 The number of Section 136 incidents where children and young people are detained in police custody has always been low in Trafford with one being reported in 2020 and one in 2021. This is monitored regularly and reported to the Director of Children Services (DCS).

Perinatal and Parent and Infant Mental Health Care

4.48 Perinatal care and Parent Infant Mental Health (PIMH) services in Trafford are delivered by both the Health Visiting Service and CAMHS. Our Perinatal Pathway³¹ sets out an overarching approach for managing perinatal mental health support and recognises the importance of the parent infant relationship, and hence the early emotional development of the infant. The pathway is for prospective parents, their children and family, starting before birth and continuing until the child's fifth birthday. It includes a process for screening and assessing perinatal mental health needs in order to identify need and provide timely support. The pathway details the range of community and specialist mental health provision for parents and infants.

Inpatient Services and the Greater Manchester Crisis Care Pathway

4.49 The NHS England National Commissioning Committee approved the delegated responsibility of CAMHS Tier 4 General Adolescents and Eating Disorders Services to the devolved Greater Manchester Health and Social Care Partnership (GMHSCP) Chief Officer. This enables Greater Manchester (GM) to have the ability to make key decisions around specialised CAMHS that will deliver cohesive pathways across the full spectrum of general mental health and eating disorders.

4.50 GM's Crisis Care Pathway has been developed to support children in a mental health crisis. The pathway comprises several areas, some of which are new service developments and some which require transformation of existing systems and services. All elements of the pathway are shown in the below diagram.



4.51 **All age Mental Health Liaison (MHL) service** provides seven-day A&E liaison and aims to reduce patient waiting times and inpatient bed days, support quick discharges and reduce the need for readmissions. Mental health assessments in A&E are conducted within one hour of the patient being referred to the service. MHL ensures patients are safely discharged from A&E either back to their home environment or into suitable mental health services within four hours. The service will also signpost or refer onwards to voluntary and other third sector organisations where appropriate. The service is supported by CAMHS who provide follow up

³¹ Trafford Perinatal Maternal and Infant Mental Health Pathway: <http://www.traffordccg.nhs.uk/wp-content/uploads/2014/05/Trafford-Maternal-and-Infant-Mental-Health-Pathway-final-2016.pdf>

appointments to children accessing the Mental Health Liaison service when required.

- 4.52 Four new **Rapid Response Teams** are now operating 8am to 8pm, 7 days a week, actively supporting young people across all 10 boroughs of Greater Manchester. They provide consistent crisis response, rapid assessment, de-escalation and brief intervention for young people who are experiencing a mental health crisis and support young people, along with their families, for up to 72 hours.
- 4.53 Where specialist inpatient admission is being considered **Greater Manchester Assessment and Inreach Centre (GMAIC)** will carry out an access assessment. The service also supports those children and young people who have been placed outside of GM and works with providers to prevent delay in the discharge process.
- 4.54 **Safe Zones** operate across GM via a partnership of voluntary, charitable and social enterprise organisations led by The Children's Society. For Trafford, this service is delivered by 42nd Street due to their knowledge and long-term experience of working in the borough. 42nd Street and The Children's Society work together closely to deliver an efficient service across the region. This service provides complementary and ongoing support in a youth-centred, community setting for young people and families who have accessed the rapid response service. There is a longer-term ambition to enable open access for certain groups of vulnerable young people who may otherwise present more frequently to A&E. Trafford's nearest safe zone is located in the north of the borough, based in Gorse Hill.

Adult Services

- 4.55 Because of the focus on mental health support for the 18 – 25 age range in the NHS Long Term Plan, we have briefly detailed some of the relevant adult mental health services below which young people may be able to access:

Trafford Primary Care Mental Health and Wellbeing Service (PCMHWS)

- 4.56 The PCMHWS will help those who need more mental health support than their GP can provide but are not so unwell they require specialist mental health interventions from secondary care services. The PCMHWS offers screening, assessment and mental health interventions from Mental Health Practitioners & Cognitive Behavioural Therapists and access to medication advice/support to GPs from a Pharmacist & Consultant Psychiatrist.

Community Based Services from Greater Manchester Mental Health (GMMH)

- 4.57 **Community Mental Health Teams (CMHTs) - For people who need a "Care Coordinator"**: Community mental health teams (CMHTs) provide multi-disciplinary assessment, treatment and care of individuals with severe and enduring mental health problems. They provide a service to individuals from 16 years of age up to 70 years of age with a diagnosed functional mental health problem.
- 4.58 **Crisis Resolution Home Treatment Team (CRHT) - Extra support and assessment when people are in crisis**: The Trafford Home Based Treatment team (HBT) is a team of multi-professionals, supporting people who are currently in a mental health crisis or having a relapse of their existing mental illness and require intensive support. The team provides a rapid assessment, treatment in their own homes and flexible support tailored to individuals' needs. HBT is a 365 days a year service and covers the 24-hour period.
- 4.59 **Trafford Extended Service (TES)**: This service offers assessment for ADHD and autism and consultation to other services (to help them to support service users effectively).
- 4.60 **Trafford IAPT (talking therapies)**: The service can be accessed via a professional referral or self-referral, the service is for people aged 16 and up. Trained practitioners can offer support ranging from guided self-help with

Psychological Wellbeing Practitioner, CBT (Cognitive Behavioural Therapy), Psychology and Counselling.

- 4.61 **Trafford's Approved Mental Health Professional service:** provides core assessment functions under the Mental Health Act 1983 and other relevant legislation
- 4.62 **Urgent Care and Inpatient Services:** offer highly specialist mental health, care support and treatment to people with acute mental health conditions and high levels of risk to themselves and others. This is either through assessment at A&E, an inpatient admission or services through Trafford's Home-Based Treatment Team.
- 4.63 **Health and Justice Community Services:** provides mental health care across criminal justice settings. This includes:
- **Liaison and Diversion** interventions aimed at diverting people with mental health problems and learning disabilities away from the criminal justice system at the earliest opportunity.
 - **Manchester Offenders: Division Engagement Liaison (MO:DEL)** also provides a Liaison and Diversion however the service will work with patients for up to 6 months of case management and works with service users from the city of Manchester.
 - **St Joseph's** host's an on-site mental health team who work with offenders who are released on licence and have mental health needs. This involves case management and coordination of care on release from prison and discharge from St Joseph's back into the community.
 - **Street Triage** is part of a national pilot scheme involving the police identifying a cohort of individuals who call the police repeatedly for inappropriate reasons or use the emergency services when in mental health crisis. Street Triage practitioners work closely with the police and individuals to address their mental health needs with the aim of reducing the number of responses from the police.

Eating Disorder Service

- 4.64 The adult Community Eating Disorders Service provides dedicated care and support to adults with an eating disorder. The team provides talking therapies, physical health advice and dietetic expertise. They aim to provide first class care, and support, to adults and young people with eating disorders whilst also offering advice and support to carers, family and friends.

5. Activity, Resource and Funding

Activity & Key Performance Indicators

CAMHS

5.1 The table below shows the referral rates for 21/22, with a 99% acceptance rate. The total referral number was 1985, which was an increase of 374 referrals into the service than in 20/21. 32% (643) were urgent cases and 62% (1237) were routine cases. Referrals to CAMHS have increased over the course of the Local Transformation Plan time period.

Trafford CAMHS (2021/2022)	Q1	Q2	Q3	Q4	
Referrals	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Total
New Referrals Received	545	395	488	557	1985
New Referrals Accepted	541	394	487	553	1975
Referrals Acceptance rate%	99%	100%	100%	99%	99%
Routine (4 - 12 weeks)	299	259	338	341	1237
Urgent (1 - 3 weeks)	196	120	148	179	643

5.2 Waiting times for CAMHS have seen an improvement in 21/22, as the table below shows. The average wait times to first appointment are an improvement on 20/21 figures and the percentage rate of young people waiting 12 weeks to first appointment and 18 weeks or less from referral to treatment is improving year on year. The service does acknowledge that whilst the service delivery model has changed to be able to respond more quickly to the large number of referrals, the wait for treatment for some psychological therapies has increased due to demand and capacity issues.

Waiting times / RTT (Referral To Treatment)	Q1	Q1	Q3	Q4	YTD (Average)
Average Ref to 1st contact/Apt (6weeks target)	2.9	4.4	4.6	4.1	4.0
Average Ref to 2nd contact/Apt (12weeks target)	4.2	5.7	6.7	2.8	5.6

Area	Outcome	Results		
		2019/20	2020/21	2021/22
Waiting Times	95% of children and young people that wait 12 weeks or less from referral to first appointment.	75%*	89%	92%
Waiting Times	98% of children and young people that wait 18 weeks or less from referral to treatment.	81.8%*	95%	96%

Community Eating Disorder Service (CEDS)

Period	Referrals	Accepted referrals
2018	33	31
2019	40	38
2020*	35	33
2021	149	148

5.3 Since the development of the service in 2018 demand remained fairly consistent from 2018-2020 both in terms of referrals and the acuity of those children and young people under the care of the service as shown in the table above. However, the referral numbers have increased rapidly for 2022. Trafford has a significant higher number of children and young people being referred for eating disorders and this is also reflected nationally with referral numbers increasing across the country.

5.4 Although Trafford have seen a sharp rise in referrals for the Eating Disorder Service, Trafford has maintained performance against the national waiting time standards (4 weeks for routine referrals and 1 week for urgent referrals). The year- end unified position for 2021/22 is shown below:

Waiting time standard	Period	Value	Target
C&YP with eating disorder <4 weeks (routine cases)	21/22	100%	95%
C&YP with eating disorder <1week (urgent cases)	21/22	100%	95%

Early Intervention in Psychosis

5.5 As of the end of October 2022, there were 20 young people under the age of 18 reported to be on the Trafford Early Intervention caseload and with a further 8 on the Early Detection Intervention Team pathway, giving a total of 28.

The Early Intervention in Psychosis team continue to exceed the national 60% RTT target for access times.

Area	Outcome	Results		
		2019/20	2020/21	2021/22
Early Intervention in Psychosis	60% of people aged 14-65 treated within two weeks of referral	56%	71%	67%

Early Help Commissioned Services

42nd Street

5.6 42nd Street has seen increasing demand for the service. *The figures presented in red are the average quarterly results divided by 3 and added to the overall total to enable a full year estimated comparison to the previous years.

5.7 Over the past 12 months the amount of referrals in to 42nd Street have increased significantly.

	2017-18	2018-19	2019/20	2020-21* (Q1 data not included as core service was closed)	2021-22
Referrals	352	308	270	209 (279)	596
Assessments offered	285	195	157	103 (137)	265
Ongoing support	344	359	395	249 (332)	Data not provided
Accessing the service	579	550	491	288 (384)	679

5.8 With regards to waiting times, over the past 12 months, these are starting to increase. The table below is broken down by referral to assessment and referral to the types of treatment offered, showing the average waiting times for the year.

Average wait referral to treatment 2021/22 (average number of weeks)	Q1	Q2	Q3	Q4	21/22 Average
Referral to assessment	6.4	8.5	15.22	16.8	11.73
Counselling (1:1)	12.7	23.4	23.52	38.43	24.51
Psychosocial complex (1:1)	13.2	22.4	26.57	36.55	24.68

Individual Outcomes for CYP accessing this service are reported below:

Area	Outcome	Results		
		2019/20	2020/21	2021/22
42nd Street - Outcomes	60% of young people completing therapy show either 'Reliable Recovery' or 'Reliable Change'	59%	48%	65%
42nd Street - Access	100% increase in in assessments and offers of treatment (from 115 to 230)	157	103*	

5.9 42nd Street are now also offering an online digital offer as part of their current offer; this is projected to reduce wait times for CYP accessing the service who are not able/unwilling to attend face to face sessions.

Trafford Sunrise

5.10 Trafford Sunrise has been part funded by transformation plan investment and has proved incredibly popular since its inception in September 2017. In the first year the service received 401 referrals and in the second year 429 referrals. Trafford Sunrise received additional funds in 2020 to extend the original 12-month NHSE pilot for an additional period through the COVID-19 pandemic. With this, Trafford Sunrise will continue to deliver an enhanced emotional health and wellbeing service for children and young people aged 5-12 years until August 2021. Waiting times have significantly reduced since this funding was introduced, as shown below. However, the impact of COVID is illustrated in the following table where overall referrals into the service are below previous years.

	2018-19	2019-20	2020-21	2021-22
Total referrals into service	429	336	275	287
Number not accepted (unsuitable i.e. too high need)	22	33	41	28
Number accessing group sessions	121 attended (103 completed)	194 attended (117 completed)	154	180
Number accessing parent workshops	105	220	378	211
Number accessing 1-1	26	18	102	118
Average wait for group	14 weeks	27 weeks	8 weeks	12 weeks
Average wait for 1-1	22 weeks	60 weeks	36 weeks	60 weeks

5.12 Since the start of the pandemic, Trafford Sunrise has seen an unprecedented number of referrals for children requiring support with their mental health and emotional wellbeing. This demand remained consistent, and the service received an ongoing surge in referrals which increased the waiting times significantly. Additionally, staffing resource within the service had become unstable due to a number of vacancies and could no longer meet the demand. In December 2021, a decision was reached to close the service to new referrals.

5.13 During the closure of the service support continued in the following ways:

- New families in need of support were directed to the online parent support workshops
- Early Support Groups and Working Together Groups continued to be delivered to those families waiting as far as the staffing allowed.

5.14 The service worked closely with commissioners to progress a waitlist clearance initiative which is being delivered by Action for Children and a plan was put in place to reopen the service again to new referrals. All posts were recruited to, and additional funding was put in place to support the sustainability of the service. The service reopened to new referrals at the beginning of September 2022.

Kooth

5.14 The online counselling service Kooth has also been part funded by transformation plan investment and came in at the same time as Trafford Sunrise. Similar to Trafford Sunrise, Kooth has also seen a very high level of engagement. The below table shows data across a 12-month period from Q1 2021/22 to Q4 2021/22

Kooth	Total	Unique Young People
Registrations		1953
Logins	8798	1844
Chat Sessions	470	301
Messages	3980	937
Forum Views	1169	

5.15 The service has built on its outcome success and in 21/22 continued to show improvements on the previous year.

Area	Outcome	Results	
		2020/21	2021/22
Kooth - Outcomes	Positive average goal movement of 4 for individual outcome targets (out of 10)	5.9	5.95
Kooth - Experience	80% of CYP would recommend the service to a friend	100%	100%

5.16 Trafford has quarterly monitoring meetings with all three services and commissioners will work collaboratively with providers to ensure activity and outcome information is utilized to inform service delivery. Outcomes for these services are detailed in the 'Measuring Outcomes' section in Chapter 6.

Workforce Information

5.17 In order to sustain delivering increased access and improved outcomes for children and young people's mental health a significant expansion in the workforce is required. This was set out in the Five Year Forward View for Mental Health. A review of the mental health workforce will be considered as part of the wider Trafford mental health review. This section looks at the total workforce across mental health and the increase that has occurred since the Local Transformation Plan funding came in.

Clinical and Service Accountability

5.18 Current numbers of staff and skills mix within core CAMHS are presented in the table below.

CAMHS - Band	17/18 WTE	18/19 WTE	19/20 WTE	20/21 WTE	21/22 WTE	22/23 WTE
Consultants (Psychiatry)	2.7	2.7	2.7	2.7	2.7	2.7
Band 8D	0	0	0	0	0	0
Band 8C (Psychological Therapies)	1	1	1	1	1	1
Band 8B (Psychology)	2.4	2.4	2.4	3.0	3.0	3.2
Band 8A Op Manager	1	1	1	1	1	1
Band 8A	1.8	1.3	1.3	2.5	2.5	3.8

Band 7 Team Leader	1	1	1	1	1	1
Band 7 Clinical	8	8.2	9.9	10.5	10.5	9
Band 6	5.5	5.4	7.4	8	8	8.7
Band 5	1	1	2	3	3	3
Band 5 Admin	0	0	0	1	1	1
Band 4	3.5	5.4	2.75	2.75	2.75	3.25
Band 3 Admin	4	3	3	5	5	5
Band 2 Admin	2.6	2.6	2.6	2.6	2.6	2.6
Total	34.5	35	37.05	44.05	44.05	45.25

5.19 As shown above, the overall number of posts in CAMHS has increased since the first transformation plan was published in 2016 by just over 10 WTE. Utilising Local Transformation Plan funds Trafford has recruited a number of posts to provide leadership regarding the service transformation, increase capacity to address the waiting list and an integrated offer for complex families. This includes a Children & Young People's Wellbeing Practitioner, CBT Therapists, Mental Health Practitioners and a Children's First Response post.

5.20 This gives an ongoing Trafford mental health workforce of **60.05 WTE**. This is higher than 2020/21 (56.25 WTE) and 2019/20 (52.25 WTE).

Summary

- In 21/22 CAMHS received 1985 referrals which is compared to 1611 referrals for 20/21. Referral rates for CAMHS have continued to rise, one reason for this could be due to the temporary closure of new referrals into Trafford Sunrise.
- To address long waiting times in CAMHS, a number of posts were funded as part of the transformation plan. These posts are now funded on a recurrent basis, whilst this investment has helped to reduce waiting times, the impact of COVID and higher level of urgent referrals has increased pressure on the service.
- Demand for CEDS has increased although the service continues to meet its waiting times standards.
- Referrals into 42nd Street have remained stable in 22/22 when compared to previous years despite the increase in demand for mental health services during the lockdown period and following on from the long-term effects of Covid 19 on children and young people's mental health.
- Trafford Sunrise has received additional funding during the COVID pandemic and this funding has been extended to allow the services to continue to deliver an enhanced service until August 2021. Waiting times have been significantly reduced since the introduction of this funding with group waits down to 8 weeks from 27, and 1-1 support down from 60 weeks to 39.
- Kooth has also seen a very high level of engagement, including a surge in registrations in 2021/22.

6. Stakeholder Engagement

- 6.1 The emotional health and wellbeing of Trafford's children and young people has been at the forefront of policy, strategy and service development for a number of years. This section provides a summary of the engagement activity that aids our transformation journey.

Service Engagement

- 6.2 CAMHS ensures that patient feedback is gathered. This is done through a Friends and Family questionnaire, an annual in-depth survey, focus groups, patient interviews and a service user group. Feedback is also gathered through use of the local Healthwatch Trafford website, Patient Advice and Liaison Service and through the outcome star system for children and young people that is jointly managed with Trafford's Children and Young People's Service. CAMHS also gather Child Experience of Service Questionnaires (CHI-ESQ) data from patients as part of routine practice, as well as simple methods in gathering feedback, such as the use of Emoji's before and after appointments. This data is used to help improve the service. Performance and patient complaints/satisfaction for CAMHS are also gathered through quality leads at Trafford ICS. If there is an area of concern, then this is raised through monthly quality meetings. Recurring issues are fed back to commissioners to help with the development and growth of the services offered. In 2021, we plan to work in partnership with Youthwatch Trafford to review our online mental health support offer.

Training

Mental health training for professionals working with children and young people has continued to be a priority area in Trafford. Training continues to be provided in the following subject areas: Anxiety, depression, bereavement, self-harm and solution focussed techniques. Sessions are delivered by a multitude of providers.

7. Local Transformation Plan

- 7.1 Our Mental Health Local Transformation Plan (LTP) sets out Trafford's plans to ensure children and young people along with their parents/carers have an improved experience of local mental health services.
- 7.2 In order to implement the THRIVE Model effectively we have identified 5 key priorities aligned with 'Future in Mind'. Our Plan is structured in accordance with these priorities:
1. **Promoting Resilience, Prevention and Early Intervention.** Trafford will promote good mental health in all children and young people to enable them to thrive, be resilient and cope well with life's challenges. This will happen through children, young people and families receiving early support when they need it.
 2. **Improving Access to Effective Support.** Trafford will seek to ensure that children and young people have the best possible access to services through the 'THRIVE model'.
 3. **Caring For the Most Vulnerable.** Vulnerable young people will be able to obtain appropriate mental health support through services working effectively together.
 4. **Accountability and Transparency.** Trafford will have clear lines of accountability and an increased understanding of data in order to shape the future changes to mental health services.
 5. **Shaping the Workforce.** The Trafford workforce will have sufficient resources and skills to improve children and young people's emotional health and wellbeing and make a real and lasting difference to their lives.
- 7.3 Below, we will explain the work that we will carry out in 22/23 and beyond in delivering against the above priorities.

Promoting Resilience, Prevention and Early Intervention

Priority: Mental Health Support Teams – THRIVE in Education

- 7.4 A key priority for 22/23 will be to continue a THRIVE in education offer through the delivery of MHSTs in a number of Trafford schools. MHSTs will offer support to schools to develop their whole school approach to mental health and emotional wellbeing. In addition, they will deliver group and 1:1 interventions for pupils with mild-moderate mental health needs, along with parent workshops/groups on a number of topics. Schools will be offered the opportunity to access funded training from the Department for Education to support them to have a senior mental health lead within their team of staff. The development of MHSTs in Trafford is an exciting prospect and will complement and enhance the range of existing universal and early help services available to children, families and schools.
- 7.1 MHSTs are well placed to support children and young people who may not otherwise access community mental health services. MHSTs as part of an overall THRIVE in Education offer will improve access for groups of children more vulnerable to experiencing mental health problems. We will do this by involving children, young people, and families, parents and carers in the development and planning of services. Commissioners, providers and senior mental health leads in schools will actively monitor access to the service by different groups. Where inequalities are evident or access does not match the student or local demographics an action plan will be developed including pupils and their families to ensure access.

Improving Access to Effective Support

- 7.2 **Priority: Development of a Single Point of Access (SPOA):** In 2019 we began consultation work with young people around the development of a SPOA. Due to COVID this work was paused in 2020 but re-started in 2021. Mental health providers have commenced a weekly triage meeting which is attended by CAMHS and 42nd Street.

7.3 Work is continuing throughout 22/23 to develop the SPOA, in partnership between CAMHS and 42nd Street, Trafford sunrise, Early help and other VCSE partners via a joint staffing model. The central principle of the SPOA will be to provide a single route for information, interaction and intervention. We will work with partners within the Local Authority Early Help service to ensure a joined-up approach.

Care For The Most Vulnerable

7.4 As detailed in our 'Social Determinants of Mental Health' section in Chapter 2, there are a number of groups who are more vulnerable to mental health conditions. This includes Care Experienced Children, Care Leavers and those with complex needs.

7.5 **Priority: Transforming care** Since 2017, we have worked to provide Care, Education and Treatment Reviews (CETRs) for children and young people with learning disabilities and/or autism who are at risk of admission to hospital or secure accommodation. As part of this work, we have developed a Dynamic Service Database to identify those at risk and who therefore may require a CETR.

7.6 A CETR consists of a panel places the child/young person at the centre of the process and asks 4 big questions:

- Am I safe?
- What is my current care, education and treatment like?
- Is there a plan in place for my future?
- Do I need to be in hospital for my care and treatment?

7.7 The DSD is RAG rated using a variety of criteria to ascertain how likely it is that a young person will require inpatient or residential provision. This scoring system will be utilised to prioritise those at highest risk of entering a mental health hospital or institutional care in the first instance. Commissioners will work alongside education, health and social care colleagues to monitor risk and take steps to reduce this risk. This process supports early intervention.

7.8 **Priority:** We will go further in this area by implementing the **Intensive Behaviour Support Service Team (ITBSS)**, an intensive psychological and behaviour support approach aimed at preventing young people with a learning disability and challenging behaviours from being admitted into institutional care. Investment has been confirmed from Greater Manchester and will involve Manchester Foundation Trust providing this service across Manchester, Salford and Trafford. Trafford's DSD will be used as a first stage identifier of those children and young people who are eligible for the service.

7.9 **Priority:** Trafford alongside GM colleagues are implementing a **Keyworker Pilot**. By 2023/24 children and young people with a learning disability, autism or both with the most complex needs will have a designated keyworker. Initially, keyworker support will be provided to children and young people who are inpatients or at risk of being admitted to hospital. Keyworker support will also be extended to the most vulnerable children with a learning disability and/or autism, including those who face multiple vulnerabilities such as care experienced and adopted children, and children and young people in transition between services. A Key Working function is seen as being an important response to ensuring children and families get the right support at the time and that local systems are responsive to meeting their needs in a holistic and joined up way.

7.10 **Priority:** The **Trafford Autism and Social Communication (TASC) Pathway and Trafford Combined ADHD Assessment Service (TCAS) review** were due to re reviewed in autumn 2020. Due to COVID these reviews were temporarily paused. During 2021-22 key stakeholders and partners across education, health and social care, and representatives from Trafford Parent Carer Forum worked together to review both pathways using

capacity and demand modelling.

7.11 The principles of the review were to understand how the pathways are functioning, the demand upon them, patient/family experience. We aimed to fully review the pathways and make recommendations to improve patient/family experience and improve waiting times for autism assessment, a key element of the NHS Long Term Plan. These recommendations have been collated into a report to be taken forward.

- **ADHD:** Attention Deficit Hyperactivity Disorder
- **Adverse Childhood Experiences (ACEs):** Traumatic events that have affected a person's wellbeing
- **AGMA:** Association of Greater Manchester Authorities
- **AIM assessment:** Assessment, Intervention and Moving on
- **ASD:** Autism Spectrum Disorder
- **CAMHS** - Children's and Adolescent Mental Health Service (formally known as HYM - Healthy Young Minds)
- **CBT:** Cognitive Behavioural Therapy
- **CETR:** Care, Education & Treatment Review
- **CHI-ESQ:** Child Experience of Service Questionnaires – Used to get views of people using services
- **CiC:** Children in Care
- **CNA:** The patient Could Not Attend
- **DNA:** The patient Did Not Attend
- **EHC:** Education, Health & Care
- **Future in Mind:** An NHS England report that explains how to improve children and young peoples' mental health services
- **GM:** Greater Manchester
- **Healthy Child Programme 5-19:** A Department of Health report that brings together recommended programmes and interventions for those aged between 5 and 19
- **IAPT:** Improving Access to Psychological Therapies
- **Incredible Years programme:** Training programmes for parents, teachers, and children that help in preventing and dealing with behaviour problems
- **ICS:** Integrated Care System
- **JSNA:** Joint Strategic Needs Assessment (sets out Trafford's needs based on available data)
- **LAC:** Care Experienced Children
- **LD:** Learning Disability
- **Lower Super Output Areas (LSOA):** LSOAs are geographic areas. They were designed to improve the reporting of small area statistics.
- **LTP:** Local Transformation Plan
- **MHL:** Mental Health Liaison service
- **MHSDS:** Mental Health Service Data Set (National data collection for mental health services)
- **MHST:** Mental Health Support Teams
- **NHSE:** NHS England - oversees the budget, planning, and delivery of commissioning in the NHS
- **NOS:** Not otherwise specified
- **Ofsted:** Office for Standards in Education
- **PCFT:** Pennine Care Foundation Trust
- **Perinatal:** The period immediately before and after childbirth
- **PIMH:** Perinatal Infant Mental Health
- **Postnatal:** The period after childbirth
- **RCP:** Royal College Psychiatry
- **SDQ:** Strength and Difficulties Questionnaire
- **TYJ:** Trafford Youth Justice



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