Children and young people’s mental health services survey

Background

In recent years there has been progress in improving mental health services, including significant investment. However, many trust leaders have expressed their concern about how long children and young people are currently waiting for care, reporting large increases in demand for mental health services. NHS Providers submitted evidence to the ongoing Health and Social Care Select Committee’s inquiry into children and young people’s mental health services.

To capture insight on the most up to date picture, NHS Providers conducted a short pulse survey of chairs and chief executives of mental health and learning disability trusts and combined trusts that provide mental health services for children and young people (CYP). The survey was open between the 11-17 May 2021. The survey was sent out by email.

The survey aimed to capture the views of the sector on the specific issues currently facing CYP mental health services including, the impact of the pandemic on demand for services and those that have been most affected.

Sample

- 35 trust leaders responded to the survey. The responses were from 30 unique trusts, accounting for 58% of the sector that provide CYP mental health services.
Survey results

1. How does the current level of demand your trust/local system(s) is experiencing for children and young people’s mental health services compare to six months ago?

- 100% of mental health trust leaders said that the demand their trust/local systems is experiencing for CYP services is significantly (80%) or moderately (20%) increasing compared to six months ago.

<table>
<thead>
<tr>
<th>Demand Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Significantly increasing</td>
<td>80%</td>
</tr>
<tr>
<td>Moderately increasing</td>
<td>20%</td>
</tr>
<tr>
<td>Staying the same</td>
<td>0%</td>
</tr>
<tr>
<td>Moderately decreasing</td>
<td>0%</td>
</tr>
<tr>
<td>Significantly decreasing</td>
<td>0%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>0%</td>
</tr>
</tbody>
</table>

(n = 35)

2. If you have seen any changes in demand, can you quantify in percentage terms, what you are experiencing and for which service(s)? (Example: There has been a 30% increase in referrals to eating disorder services in the last three months)

- Trust leaders provided a picture of increasing demand across CYP services, although there is some variation across services and by trust. There were consistent themes relating to:
  - The increases in demand for CYP eating disorder services.
  - The increases in referrals to community and inpatient CAMHS services.
  - The increase in complexity and acuity of children and young people trying to access services with one trust leader saying the acuity of patients in inpatient settings was extending length of stay by 50%.
  - The increases in presentations to A&E, with one trust leader saying they had seen an increase up to 50%.
  - The pressure on tier 4 beds for CYP.

"Latest data shows 72% increase over usual level of CAMHS referrals. Biggest increase since schools resumed. Most alarming is the increase in first presentation with very acute symptoms - anxiety,"
suicidality and self-harm.” – Chief Executive, combined mental health, learning disability and community trust

3. How would you describe your trust/local system(s) ability to meet the current demand it is facing for the following mental health services for children and young people?

- When asked to describe demand across different services for children and young people, trust leaders highlighted the variation across specific services.
- 85% of trust leaders said they could not meet demand for CYP eating disorder services – the highest result across all services.
- Two thirds of trusts leaders said they are not able to meet demand for community CAMHS (66%) and inpatient CAMHS services (65%).

4. What are the top three reasons that demand for children and young people’s mental health services is not being met in your local area(s)?
• The top three reasons why trust leaders say demand for CYP mental health services is not being met are:
  • Increased complexity/acuity of caseloads due to the COVID-19 pandemic (88%)
  • Additional demand due to the COVID-19 pandemic (42%)
  • Lack of suitable social care provision (42%)
• The next significant reasons included, ‘not enough patient beds’ (36%) and ‘workforce shortages’ (33%).

5. How does the amount of time children and young people are currently having to wait to access treatment for services provided by your trust compare to waiting times six months ago?

• 84% of trust leaders said the amount of time children and young people are currently having to wait to access treatment for services is significantly (25%) or moderately (59%) increasing compared to waiting times six months ago.
• 9% of trust leaders said that waiting times have stayed the same compared to six months ago.
6. If you are experiencing changes to waiting times, can you quantify how much shorter/longer children and young people are having to wait and for which service(s)? (Example: From the end of 2020 to May 2021, the average waiting list for a CAMHS tier 4 bed has increased from three months to six months)

- Overall, 12 trust leaders said that waiting times are increasing, but the degrees to which varied depending on the service.
- Several trust leaders explained that waits for eating disorder services have deteriorated, resulting in them missing the national waiting time standard.
- One trust explained how they had no waits for tier 4 beds and said their waiting time initiatives are working.

7. How concerned are you currently about your trust/local system(s)’s ability to meet the level of anticipated demand within the next 12-18 months for mental health care amongst children and young people?

- 78% of trust leaders said they are extremely (47%) or moderately (31%) concerned about their trust/local system(s) ability to meet the level of anticipated demand within the next 12-18 months for mental health care amongst children and young people. A further 19% are somewhat concerned.
8. To what extent do you agree with the following statements as they relate to the local populations served by your trust:

- 91% of trust leaders agree (41%) or strongly agree (50%) with the statement ‘Presentations to children and young people’s mental health services are more acute and complex than in the past’.

- 72% of trust leaders disagree (55%) or strongly disagree (19%) with the statement ‘I am confident that my trust has the right numbers, quality and mix of staff (clinical and non-clinical) in place to deliver high quality mental healthcare to children and young people’.
• 61% of trust leaders disagree (29%) or strongly disagree (32%) with the statement ‘There are enough inpatient mental health beds for children and young people in my trust/local area(s). 27% of trust leaders agree (19%) or strongly agree (7%) with the statement.

• 65% of trust leaders disagree (25%) or strongly disagree (34%) with the statement ‘My trust has access to the capital funding it needs.’
9. How concerned are you about staff wellbeing and current levels of stress and burnout across your children and young people’s services workforce?

- 83% of trust leaders are extremely (37%) or moderately (47%) concerned about staff wellbeing and current levels of stress and burnout across their CYP services workforce. A further 10% are somewhat concerned.