





Appendix 1 – Mental Health Update

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As presented to Recovery Co-ordination Group on 14 December



Covid-19 Impact Assessment





Despite challenges, there are some positives

Less traffic congestion
Spending less money
Reduced travel
Better air quality
ending more time outdoors

Household income

36% saw a negative impact ghest amongst residents aged -34, lower income households I households just about getting

mployment

53% report a negative impact on he employment of the household Over half of those freelancing or self employed have seen their

Community spirit

Strong sense of community for 62%, negatively impacted by CV19 for many Negative impact higher among residents aged 75+, residents with a disability / long standing illness, lower income households and those shielding

Support from services

from local services

16% of shielding respondent

had

Loneliness

6% experienced more loneliness during lockdown

Female residents, residents aged 16-34 and lower income households experienced loneliness more often

Mental health

28% feel more anxious or stressed

More 16 to 34 year olds said they were negatively effected by lockdown

Helping others

54% report people in their local area are doing more to help others

Access to healthcare

CV19 impacted access to health care / medicine and dental services

Only 35% found it easy to access healthcare services for CV19 symptoms (and just 17% of 75+)

The future...

48% said the pandemic has changed the way they think about the future (especially transport use and working behaviours)

Priorities for the coming year

Encouraging residents to shop locally and supporting small businesses, and sourcing goods and services from local businesses

What are we doing to help?

- Tech to Connect improving access to technology to those who are isolated and digitally excluded
- Surrey Virtual Wellbeing Hub self-referral gateway to VCFS support
- Emotional wellbeing advice and resources on the Healthy Surrey Website
- Webinars delivered by the Recovery College.
- Collaboration between Citizens Advice Bureau, DWP and MH providers.
- Spreading Mental Health First Aid training.
- Messaging and signposting



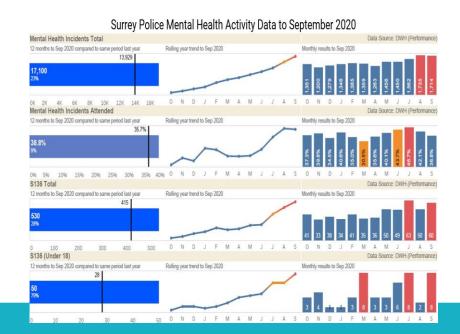




Acuity Pressures

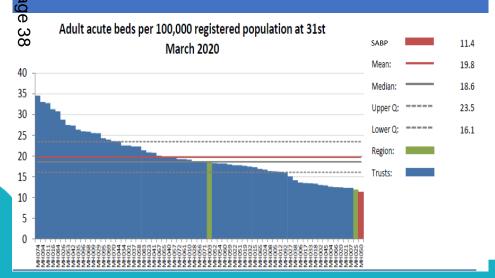
- · More people presenting in crisis who were not previously known or who had been stable
- increases in the use of emergency powers under the Mental Health Act with s135/s136 activity from January-August 30% higher than 2019 and a higher percentage of those people assessed also requiring admission
- Surrey Police data indicates an increasing trend in attendance at mental health incidents and increased use of s136 powers under the Mental Health Act.

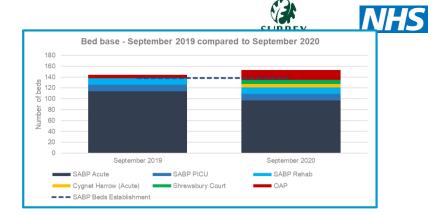
Page 37 **DEMANDS ON ADULT MH SERVICES - May - Oct 2020** ADULT MENTAL HEALTH 80% presenting problem now VOLUNTARY SECTOR 183,000 Adults in classified as "In Crisis" in 2020. Surrey Heartlands could Seen 48% more This compares to 37% for 2019 require additional activity since May support based on Contact with people up 18% across Vulnerability indicators. the board SAFE HAVENS HOME TREATMENT TEAMS 40% more visits since May 2020 and this number is People accessing HTT has been increasing. rising since April 2019. Since May 108 visits in August 2020 2020 20% more people have been double the monthly accessing services. average for 2019. NHS Benchmarking shows Staffing is 40% lower than the National average.

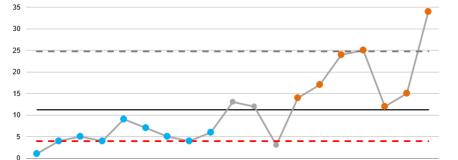


Inpatient Admissions and Flow Trends

- Low bed-base per 100k weighted population and further reductions experienced due to social distancing, safety works and contractual changes
- High occupancy rates of over 95+%
- Significant increase in Out of Area placements due to low number of available beds but also increases in admissions and acuity
- Managing flow is critical and there has been a reduction in length of stay to national average levels but delayed transfers
 of care can create pressures







Admissions-Inappropriate Out of Area starting 01/04/19







Adult Emotional Wellbeing & Mental Health Pressures

- General impact of Covid-19 on adult emotional wellbeing and mental health
- Increased acuity
- Bed pressures and flow management
- Increase in Out of Area Placements
- Delayed transfers of care, especially for people with complex needs such as Autism
- Coptimising the community pathway
- Workforce capacity pressures
- Growing pressure on 3rd sector resources and lack of long-term contracting options create fragility
- Significant health inequalities and under provision of physical health checks

	Solutions and actions	Status
1	Increase bed team capacity through private sector	In Place
2	Virtual ward and enhanced bed bureau	In Place
3	OPEL reporting	In Place
4	RESET weeks	In Place
5	Hospital discharge team	In Place
6	Home First and Home Fast initiative and intensive	In Progress
	home support	
7	Housing support and welfare worker	In Progress
8	24/7 crisis line	In Place
9	24/7 rapid response and home treatment team	In Place
10	Safe Havens	In Place
11	24/7 Safe Havens	Delayed
12	Mental health liaison in all acute hospitals	In Place
13	Police triage	Delayed
14	Restoration of community services and increase	In Place
	in face-to-face contact	
15	Integrated mental health in primary care	In Place
	(GPIMHS) roll out	
16	IAPT restoration of services	In Place









Demand Continues to Rise for Kooth

We are seeing more young people than ever turning to Kooth for support. Now that traditional means of support are closed to many, it's clear that digital has a vital role to play in supporting mental health and wellbeing. Offering anonymity and freedom to access help when it's needed is key, we're there



Suicidal Thoughts See 40% Increase on Last Year, Accounting for 19% of all Issues on Kooth

"School is the only place I'm safe from taking my own life. But they can't take me now. Because of the risk. I have tried to take my life a few times. Everything seems to be bad and getting worse." - Anonymous Kooth User



Anxiety/Stress

Anxiety and stress is the largest presenting issue by volume.

Up 53% from last year



Sadness

Sadness now accounts for 9% of all issues presented.

Up 211% from last year



Self Harm

A worrying amount of CYPs are presenting with self harm issues. Up 45% from last year



Suicidal Thoughts

A huge spike in CYPs presenting with suicidal thoughts Up 40% from last year



Family Relationships

Relationships with family members remain strained.

Up 50% from last year



School / College Worries

Such as returning to school or handling education virtually. Up 246% from last year



Friendships

Friendships have suffered while schools and colleges are closed.

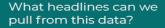
Up 20% from last year



Loneliness

Our young people are growing lonelier during lockdown.

Up 135% from last year



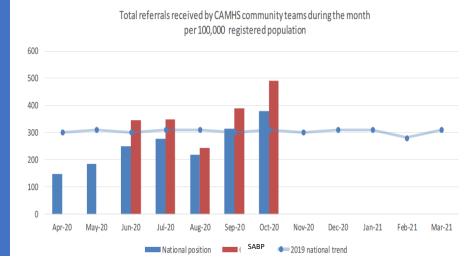
- Anxiety/Stress sees 53% increase among young people
- 1 in 5 Young People Struggling with Issues around Family Relationships
- **3. Self-Harm** sees Major Increase in Prevalence under Lockdown
- 4. Suicidal Thoughts see 40% Increase on Last Year
- Young People Struggle with Friendships During Lockdown
- **6. School or College**-Related Mental Health Issues Surge
- 7. Sadness sees Threefold Increase under Lockdown
- **8. Loneliness** Among Young People up 134%

The presenting issues are registered against a service user following any interaction that displays this issue. This is typically during counselling, but could also be during any other interaction, such as comments in a forum. The comparison to last year is based on the proportion of the users that have presented with the particular issue, compared to the proportion last year, during the same time period. Dataset size: 70,007 eXexzoe.2007.

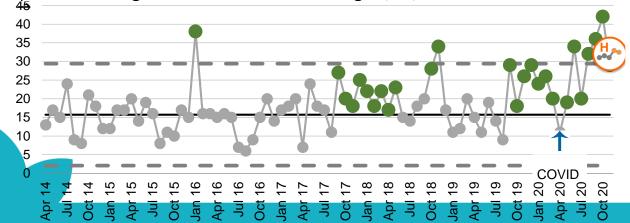


Demand and Capacity Trends

- National benchmarking data shows a year-on-year increase in CAMHS referrals since 2018/17.
- CAMHS is currently showing a 22% increase in demand above the same time last year.
- 66% increase in demand for children's eating disorder services and a 3-fold increase in urgent cases.
- Comparatively small workforce, with a higher than average number of agency staff. However, productivity is above the national average.



Children's Eating Disorders Referrals- starting 01/04/14



Average number of months waited for children currently in treatment			
CAMHS CT	3 months		
PMHT	3 months		
ASD	6 months		
ADHD	7 months		







Children's Emotional Wellbeing & Mental Health Pressures

- Demand pressures and high referral rates
- Eating Disorders
- Tier 4 CAMHS
- High community referral acceptance rates and high caseloads Long waits for neurodevelopmental services
- Relatively low discharge rates
- Workforce pressures, high agency staffing but relatively high productivity
- Inequalities

	Solutions and actions	Status
1	24/7 crisis line	In Place
2	Children's Havens	In Place
3	Paediatric liaison	In Place
4	Integrated role in Emergency Duty Team	In Place
5	HOPE House	In Place
6	Tier 4 CAMHS Provider Collaborative	Shadow Form
7	Eating disorders safety plan	In progress
8	Physical health monitoring pathway for eating disorders	Delayed
9	Review of waits and waiting list initiatives	In Progress
10	Support to schools	In Progress
11	Emotional Wellbeing and Mental Health Service retender	Outcome awaited