

LONDON BOROUGH OF CAMDEN	WARDS: ALL
REPORT TITLE Annual Health Update on Children, Young People and Families	
REPORT OF Director of Public Health, Supporting People	
FOR SUBMISSION TO Children Schools and Families Scrutiny Committee	DATE 20 February 2023
<p>SUMMARY OF REPORT</p> <p>The report summarises health outcomes for children and young people (CYP) in Camden and outlines work being undertaken to improve these by the Council, North Central London (NCL) Integrated Care Board (ICB) and other local partners. It draws on the most recent data from the Office for Health Improvement (OHID) Fingertips Child and Maternal Health dashboard, and other local data setting out progress to date which positively reflects our work to deliver Our Camden Plan and Camden 2025 vision that people lead healthy, independent lives.</p> <p>The effects of the pandemic on key child health outcomes such as obesity and mental health have been felt in Camden, while access to health care services such as dental care have exacerbated existing challenges. However, our partners have continued to be resilient in managing these challenges. They have been working with us to continue to develop and offer innovative solutions for Camden families and the strength of our universal and integrated services have continued to demonstrate the impact on health outcomes and inequalities.</p> <p>Local Government Act 1972 – Access to Information The following document(s) has been used in the preparation of this report:</p> <p>Public Health England Camden Child Health Profile March 2021</p> <p>Contact Officers: Kalpna Chauhan, Head of Children’s Integrated Commissioning London Borough of Camden, 5 Pancras Square, NC1 4AG 020 7974 1353 / kalpna.chauhan@camden.gov.uk,</p>	
<p>WHAT DECISIONS ARE BEING ASKED FOR? The Committee is asked to note the report.</p>	

Signed by: 
Kirsten Watters Director of Public Health, Supporting People

Date: 8 February 2023

1. Purpose of Report

- 1.1. The report provides an update on Camden's performance and activity against key health indicators relating to services for children and young people. Comparison data has been taken from Office for Health Improvement and Disparities (OHID) Fingertips Child and Maternal Health data dashboard (updated in 2022) and other local data.

2. Background

- 2.1. Each year, the Committee receives an update on children's health services delivered by the North Central London (NCL) Integrated Care Board (ICB) (previously NCL Clinical Commissioning Group), Council and our partners. This report reflects our work to deliver Camden 2025's vision that people lead healthy, independent lives, the Children's Trust Partnership Board's priority that 'Good physical and mental health are promoted and health inequality reduced', and our contribution to the delivery of the work of the Local Care Partnership.
- 2.2. Ordinarily OHID publishes yearly snapshot reports for local authorities on child health and offer comparisons with regional and national averages. In March 2022 following consultation with users, the snapshot reports have been delayed until 2023. Instead, data for this report has been taken from the OHID Fingertips Child and Maternal Health data dashboard¹, which provides more comprehensive and up-to-date data to help local government and health services improve the health and wellbeing of children and young people and tackle health inequalities.
- 2.3. The scrutiny panel are asked to note this report which outlines the key health outcomes for CYP in Camden and provides more detail on services and local initiatives in Camden to meet our health challenges.

3. Key data for Camden across the life-course²:

3.1. Infant and child mortality

The infant and child mortality rates are similar to both England and London. In Camden, there was a rate of 3.6 deaths of infants aged under 1 per 1000 births for the period 2018-20, representing an average of 8 deaths of infants aged under 1 per year. Over the 3-year period 2018-2020, there were 20 child deaths (1-17 year olds).

3.2. Maternity

In 2021/22, 5.4% of women are smokers at the time of delivery, which is better than London and England. However, this has increased from 3.5% in 2019/20.

3.3. Early years

In 2021/22 the MMR immunisation level (and other childhood immunisations) did not meet recommended coverage (95%). By age two, 71.6% of children have had one dose, and only 62.6% of children are fully protected (2 doses) at age 5. This is one of the lowest rates in London.

3.4. School-age children

¹ OHID Fingertips 2022 [Child and Maternal Health - Data - OHID \(phe.org.uk\)](https://www.phe.org.uk)

² Statistics are for the year 2020-21 unless otherwise stated. Data included is the latest data available.

- 20.5% of children in Reception (similar to England and London average and 38.1 % in Year 6) were overweight and very overweight (2021/22). Both rates are similar to the London and England average.
- Using the 2021 child health profile which extracts oral health data from 18/19 we can see that dental health is similar to England. 18.9% of 5 year olds have experience of dental decay (no recent data updates are available).

3.5. **Young People**

- The teenage pregnancy rate is lower than London and England. 30 young women under the age of 18 became pregnant in 2020.
- In 2021, the detection rate for Chlamydia in young people in Camden (1,194 per 100,000) is below the minimum recommended rate (2,300) and lower than London and England.

3.6. **Hospital Admissions**

- Hospital admissions caused by unintentional and deliberate injuries for children aged 0-14 were 50.3 per 10,000, and 49.2 per 10,000 for young people aged 15-24, better than London and England (2020/21).
- Hospital admissions as a result of self-harm in young people aged 10-24 were 168.5 per 100,000, better than London and England.
- Hospital admissions of children and young people related to alcohol in 2018/19 - 2020/21 were 19 per 100,000. Admissions for young people aged 15-24 due to substance misuse were 36.6 per 100,000 for the same period. Both are better than London and England.

4. **Summary of Camden services and local initiatives to improve the health of children and young people**

- 4.1. **Maternity – increasing smokefree pregnancies:** the risks of smoking during pregnancy are serious, from premature delivery to increased risk of miscarriage, stillbirth or sudden infant death. Smoking remains the single biggest modifiable risk factor for poor outcomes in pregnancy and is completely avoidable. Quitting smoking is one of the best actions a mother can take for her and her baby's health and development. Stopping smoking in pregnancy is a national priority outlined in NICE guidance PH26, PH48 and NG92, the NHS Long Term Plan and a number of maternity initiatives, such as Saving Babies' Lives Care Bundle 2 (SBLCBV2).
- 4.2. In January 2020, a system-wide programme to address smoking in pregnancy across NCL began. The programme brings together secondary care maternity services, community stop smoking services and local authorities across the five boroughs. A NCL Smokefree Project Coordinator was recruited, and Smoking Cessation Midwife Champions were recruited to each maternity trust. Initially they were recruited for 1 day a week to support the programme but this has been increased to 2 days a week.
- 4.3. The **Smokefree Pregnancy programme** broadly focuses on the BabyClear model, an evidence-based intervention incorporating NICE Guidance (PH26). It includes routine identification of smoking at booking and 36-week appointments via carbon monoxide (CO) screening, opt-out referral to stop smoking services and specialist training for midwives and stop smoking advisors.
- 4.4. The NCL Smokefree Pregnancy Progress Report 2022 details programme activity over the last year between July 2021 to July 2022. Smokefree pregnancies are more established in

NCL Trusts and midwife champions are working closer with their local NCL stop smoking services. COVID-19 continues to impact on the project, in terms of midwives being released for training. However, there have been several successes:

- Carbon monoxide (CO) monitoring at booking appointments in NCL has increased by 47% between 2019/20 – 2021/22 (n=5,589 to n=9,145).
- This year, North Middlesex University Hospital (NMUH) exceeded the CO monitoring at booking target of 95% by 98%.
- There has been a 42% increase in the proportion of referrals to NCL stop smoking services from 2020/21 to 2021/22 (31% to 73%).
- NHS Digital Statistics on Stop Smoking Services data for quarter two 2021-22, indicates that Barnet stop smoking service had the highest number (34) of pregnant women who quit (self-reported) in London, followed by Islington (32) with the best (self-reported) quit rate at 82%.
- The midwife champions role has increased in time to better support smokefree pregnancies within their Trusts and improved engagement with pregnant smokers.
- North Middlesex University Hospital (NMUH), University College London Hospital (UCLH) and Royal Free Hospital Trust (RFHT) have begun planning for the NHS Long Term Plan projects. NMUH has recruited two Maternity Tobacco Dependence Advisors and UCLH are in the process of recruiting.

4.5. More work is needed to further engage with pregnant smokers and to increase the number of pregnant women quitting smoking. CO monitoring at 36 week appointments need to be improved in all Trusts and Trusts need to ensure pregnant smokers are referred to stop smoking services on an opt-out basis. The next steps are:

- Continue to implement the BabyClear objectives, including CO monitoring at booking and particularly at 36 week appointments, with opt-out referrals.
- Midwife champions to develop a *Very Brief Advice* training and development plan for their Trust by December 2022 and train all booking, antenatal and community midwives by June 2023.
- Meet with Barnet and Breathe stop smoking services by December 2022 to better understand why their services are successful at getting pregnant smokers to quit and share learning across NCL.
- Continue to implement the NHS Long Term Plan and bring maternity tobacco dependence services in-house by March 2024.

4.6. The Smokefree Pregnancy Progress Report 2021 highlights that no NCL Trust reached the 95% target for CO screening pregnant women at booking or 36 weeks. However, CO monitoring was paused for most of 2020-21 due to Covid-19. The report also highlighted that the largest number of mothers Smoking at Time of Booking (SATOB) attended Royal Free Hospital Trust (383) and UCLH had the fewest (76). North Middlesex University Hospital had a significantly larger proportion of SATOB mothers compared to the other trusts and compared to the NCL average. Furthermore, NMUH has the highest Smoking at Time of Delivery (SATOD) rate in NCL, whereas Camden has the lowest in NCL at 3.5% and one of the lowest in London.

- 4.7. In April 2021, the NHS Long Term Plan (LTP) recommended that more intensive and in-house support is provided to pregnant smokers. The LTP focuses on engagement, as despite good referral rates to community stop smoking services and outcomes when engaged, many women do not convert their referral to an appointment/quit. Over the next two years, the programme will focus on engagement with pregnant smokers and pilot an in-house stop smoking support service in trusts with high SATOB and SATOD rates. North Middlesex Hospital, UCLH and Royal Free London NHS Trust have all recruited (or are in the process of recruiting) a Tobacco Dependence Advisor to work specifically in the maternity unit to engage women and their partners to stop smoking.

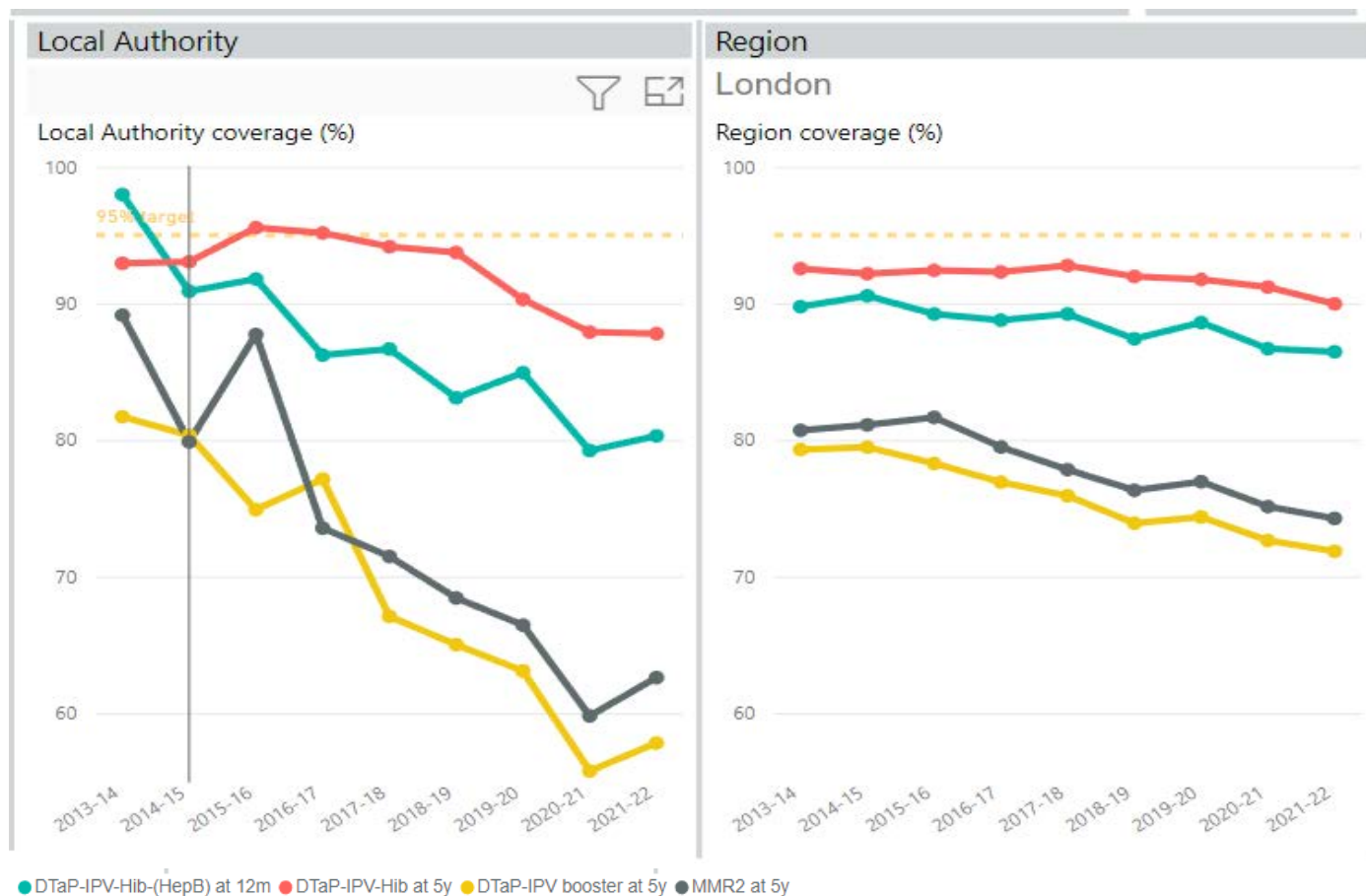
5. Early years integration and health visiting

- 5.1. In December 2022 Camden successfully completed Stage 3 of the Unicef Baby Friendly assessment for the **Camden health visiting service**, with very complimentary feedback about the integrated relationship between the health visiting and breastfeeding teams. Camden received a provisional pass as it reached the required standard on 24/26 of the assessed areas of the framework. A small amount of remedial work will continue on the final two areas; on advice about responsive feeding and safety when making up formula milk, which will be reviewed virtually in Spring 2023. Assessors interviewed 42 mothers chosen at random and of these 90% reported that they were 'very happy with care', with the additional 10% reporting feeling 'fairly happy'. All 42 mothers reported that staff providing care were kind and considerate.
- 5.2. Great improvements have been made locally over the last 2 years by Camden's Health Visitors and Baby Feeding team to improve recording of breastfeeding rates at 6-8 weeks by amending the templates used by health visiting teams. The percentage of maternal records with breastfeeding status recorded at 6-8 weeks was 82% in 2021/22. This is compared with 71.8% in London.
- 5.3. Following the peak of the pandemic when some health visitors were redeployed into other nursing roles for a short time, in the early part of 2021/22 performance across New Birth Visits and Health Reviews dropped significantly. In quarters 1 and 2 of 2021/22, New Birth Visits had averaged at about 73% as the service experienced reduced staffing capacity. A commissioning task and finish group was set up and swiftly introduced a management action plan. New Birth Visits went up to 92% by quarter 4 in 21/22, which is higher than pre-pandemic levels. New Birth Visits data for the 2022/23 year is on track to be even better. Health Reviews data has more steadily improved over the last 18 months, with the latest available data showing that 88% of children received a 12-month review, and 80% of children received a 2-2.5 year review in Quarter 3 of 2022/23. Camden performance is better than the England and London averages.
- 5.4. In 2021/22 **healthy eating sessions for parents** preparing to wean their babies continued to be delivered virtually and in-person via children's centres. 236 unique families attended the sessions (525 total attendees) 26% were from BAME groups. As a result, 96% started solids around 6 months in line with national guidelines. A further 97 unique families (210 total attendees) attended a Starting Solids Next Steps session with 97% reporting they were able to successfully support their baby to move onto textured or family foods or from bottle to cup. 20 early years settings engaged in the updated Little Steps to Healthy Lives (LSHL) award that has been aligned to Healthy Early Years London (HEYL). Changes made as a result of HEYL/LSHL include updating food and physical activity policies, menus meeting voluntary food and drink guidelines and increased oral health support and promotion.

6. Improving childhood immunisations

- 6.1. NHS England (NHSE) holds responsibility for childhood immunisations, and delivery is through primary care; the council is not directly responsible for the performance. However, we continue to maintain a scrutiny role and are working with ICB colleagues to improve uptake.
- 6.2. Childhood immunisations are a key outcome for the new “healthy, and ready for school” priority in the new Health and Wellbeing Strategy. In November 2022, a multistakeholder workshop was held to test a population health approach to tackling low immunisation uptake. This event brought together partners across NHS (commissioners and providers), children’s services, schools, public health, and voluntary and community organisations to identify the challenges and opportunity areas for further action. This will transition to delivery in early 2023.
- 6.3. The ICB are also taking action, working with colleagues in Public Health, primary care, Camden Council and Central and North-West London NHS Foundation Trust (CNWL) (health visiting and school nursing provider), LA children’s services and NHSE (who commission immunisations). This covers a number of areas:
 - The HealthIntent population health management platform is now established across partners in NCL, and provides real time feedback on both population rates of immunisations and routine feedback on due and overdue immunisations at patient level
 - A programme of training has been delivered to parent champions, community champions, faith leaders and GP admin staff, with Community Matters as delivery partners. The training package covers both the importance and benefits of immunisations and how to have conversations about immunisations
 - Funding to Camden from the NCL inequalities fund has supported take-up in the more deprived wards of the borough, through the provision of community pop-up clinics in autumn 2022. These were held at St Pancras Community Association allowing easy access to catch-up immunisations in one of Camden’s most deprived communities
 - A poster campaign was held in early and late summer to promote uptake of the pre-school MMR booster focussing on the increased risk of catching measles while travelling and then on ensuring children reaching 5 were vaccinated and ready for school

6.4. Rates of immunisation are beginning to improve, particularly for the pre-school boosters (MMR2 and DTaP-IPV, due at age 3 years 4 months) as shown in the graph below.



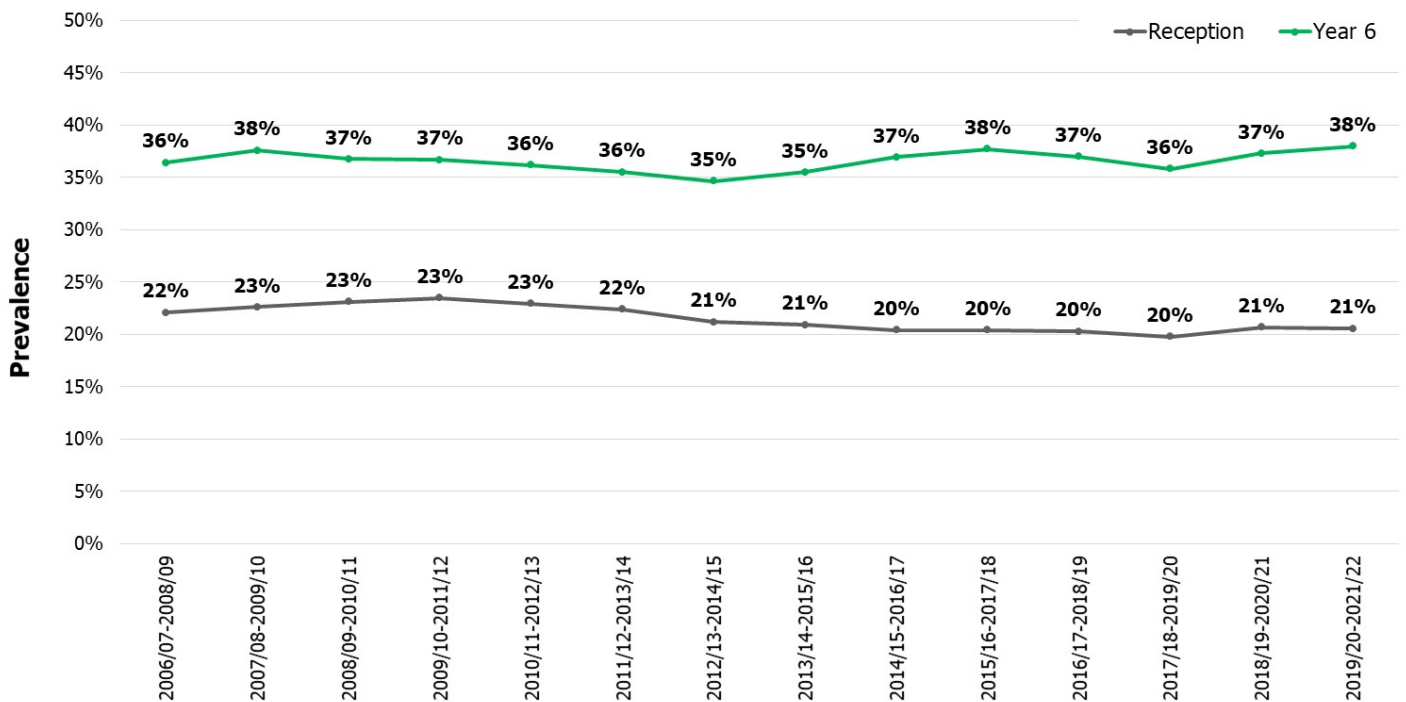
Source: UKHSA Childhood Vaccination Coverage Statistics

7. School-aged children and school-based health

7.1. **Promoting healthy weight** is a key priority for Camden’s Health and Wellbeing Board (HWBB). The latest figures for 2021-22 show that 20.5% of reception age children in Camden schools are overweight or very overweight. In Year 6, 38.1% of 10-11 year olds are overweight or very overweight. Both rates are similar to the London and England average.

7.2. Ward and ethnicity data demonstrates there are significant inequalities in the borough. In 2021/22, among Year 6 pupils attending Camden secondary schools, there was a significant difference in the prevalence of overweight (including obesity) by ethnicity and deprivation. A significantly higher proportion of Year 6 pupils from Bangladeshi (43%), Pakistani (67%), White and Black African ethnic groups (60%) were overweight or very overweight when compared to Year 6 pupils from a White British ethnic group (30%). A significantly higher proportion of Year 6 pupils who live in more deprived areas were overweight or very overweight (40%, deprivation deciles 1-4) when compared with pupils who live in the least deprived areas (26%, deprivation decile 9 and 10).

Rolling three-year trend in prevalence of overweight/very overweight among Reception and Year 6 students in Camden, 2010/11 - 2021/22



Note: As per NCMP data disclosure guidance, the numerator and denominator were rounded to the nearest 5 before calculating the prevalence.
Source: NHS Digital NCMP Enhanced Dataset

- 7.3. Among Reception pupils in 2021/22, there was a significant difference in the prevalence of overweight and very overweight among pupils who live in less deprived areas (25%, deprivation decile 3 and 4) when compared to pupils who live in the least deprived areas (12%, deprivation decile 9 and 10). But there was no significant difference by ethnicity among Reception pupils.
- 7.4. The Health and Wellbeing Board's strategy will be renewed with a specific focus on addressing the impacts of Covid on our population. Supporting young people and families to maintain a healthy weight will be a core theme. Camden has also recognized through the Renewal Commission the challenge of developing a good food system for Camden, with a challenge over the coming years to ensure that everyone in Camden has access to healthy, affordable, sustainable food, every day. This includes addressing immediate food poverty needs which have risen sharply during the pandemic through the actions of a wide range of local organisations and Camden's Food Poverty Alliance.
- 7.5. Addressing overweight and obesity requires action across a range of organisations, settings and activities. These include specific programmes to support people to achieve a healthy weight.

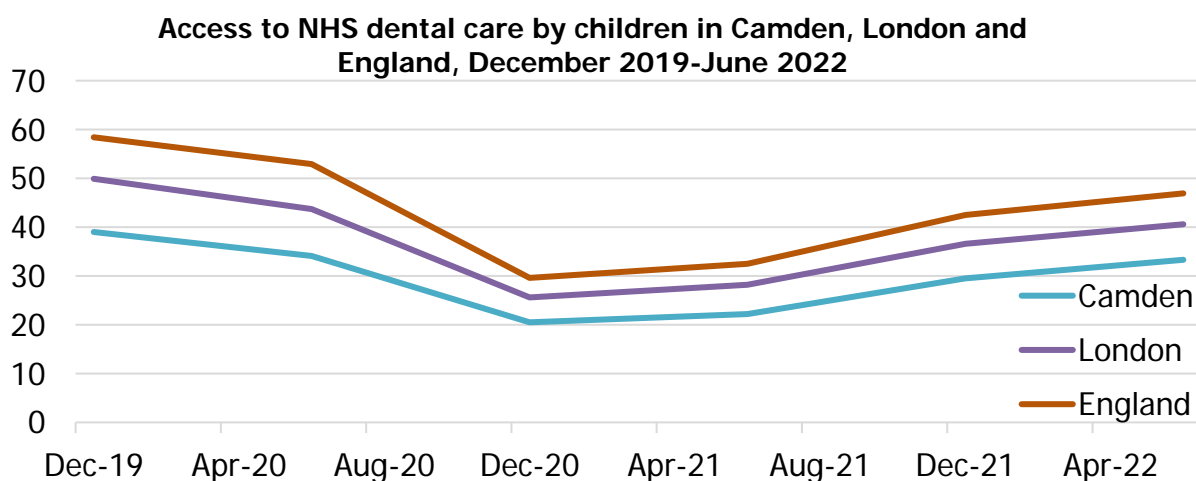
- 7.6. During 2021-22 Camden has been developing a '0-5 years Obesity Prevention Action Plan' to enhance the early recognition and identification of unhealthy weight in Early Years. The plan maximises opportunities to support a healthy weight in children within the existing 0-5 pathway and Healthy Child Programme. There are seven key strands to the plan that include staff training, enhanced weighing and measuring opportunities, physical activity, weight management clinical pathways, the food environment in Early Years and Infant Feeding. Successes include:
- 'Talking about weight training' delivered by the Health and Wellbeing Team aims to improve the knowledge and skills of Early Years Staff working with families around discussing healthy weight. 129 Early years staff attended Day 1 and 26 have attended Day 2 (follow-up).
 - Cooking on a low income pilot event at Hampden Community Centre well evaluated, new food initiative being established
 - Planning a pilot setting to weigh and measure children in addition to the universal
 - Focus on physical activity in Early Years at the 'Camden Moving Forward Conference'
 - Maternal obesity needs assessment completed.
- 7.7. **Families for Life (FfL)**'s universal healthy lifestyle programmes have been running virtually and in-person via schools and early years in 2021/22 delivered by the Camden Health and Wellbeing Team. 271 unique families (484 total attendees) attended the FfL programme with 78% from Black, Asian Minority Ethnic groups. Results from the 4 week Family Kitchen virtual healthy cooking programmes, for families of children aged 5-11 showed that 46% of the children who took part increased their fruit and vegetable consumption following the programme. A supermarket voucher system was put into place to support families to access ingredients for free. 82% completed the programme. Two free cook-along webinars were also developed with 104 families accessing the webinar and receiving a free supermarket voucher for ingredients. The FfL Community Champions programme continued resulting in 4 champions trained (total of 21 overall) to promote consistent healthy lifestyle messages to their communities and promote the FfL programme with 11% of attendees being referred by a champion in 2021/22. Champions also promoted Covid-19 Community vaccinations, promoted FSMs, supported Afghan refugee families by raising donations and as translators, and raised awareness of mental health in the community by linking in with Mosques and community organisations. Camden's Health and Wellbeing Team also supports various settings (schools, nurseries, children's centres, after school clubs and youth centres and childminders) to meet the healthy eating and physical activity criteria within the Healthy Schools, Early Years, Play Providers and Youth Centres healthy setting awards. 77% of schools are engaged in Healthy Schools, an increase of 4% from 2020/21.
- 7.8. **The Healthy Living Service**, which is part of the school nursing service delivered by CNWL delivers a follow-up one-to-one service for young people identified as overweight. During 2021-22, 248 children were identified from the NCMP programme as being overweight. All families were contacted and 74 families accepted the offer. In addition to this there were a further 120 referrals into the service. In total 95 (78%) of children and young people who started the programme were classified as completers having attended 4 more sessions. From this cohort, 42% (n=40) lost weight, 33% (n=31) weight plateaued and 25% (n=24) gained weight. Overall, these figures show improvements on attendance and outcomes from previous years.

- 7.9. 27 children completed the Healthy Living Service programme and of these, over 55% lost weight or saw their weight plateau and 70% of them were living in the most deprived area. A service improvement plan was put in place from July 2021 to increase numbers of CYP engaging with the service. Over the following six months (June – November 2021) there was an average increase in referrals per month from 11 to 20 and the number of completers changed from an average of four per month to 20 per month
- 7.10. Performance data on the **Enhanced Healthy Living Service** which is a wrap-around service supporting professionals working with obese children with complex needs, as well as parents/carers of children with obesity addressing the broad range of related needs for the family, with specialist support from psychologists shows:
- 10 MDT meetings took place assisting 62 Camden children and young people
 - 4 Parent group programmes were run with a total of 24 group sessions. Parents who could not attend the group programme were seen for individual sessions with a total of 78 individual sessions delivered to Camden parents. A total of 46 Camden parents/carers were seen for the Families, Food and Feelings programme.
 - 4 training webinars were delivered to support professionals working with families. A total of 83 Camden professionals attended the webinars.
- 7.11. **Healthy Schools:** 77% of schools are engaged in the Healthy School Award, an increase from 73% in 2020-21. 9 schools renewed Healthy School Recognition and 1 achieved gold. A total of 43 schools continue to be engaged in Healthy Schools. The annual 'Race to Health' physical activity challenge ran as 2 borough-wide races. Overall, 2,973 pupils from 26 schools logged 1,715,889 minutes across the combined five weeks of the race, and four youth clubs hold the Healthy Futures Youth Club award which includes all three Camden maintained youth hubs.
- 7.12. The Health and Wellbeing Team have developed Healthy Conversations training to support staff in all settings to talk about weight and support referrals to appropriate services. The focuses on understanding readiness to change, identifying opportunities for conversations on healthy weight, techniques and skills for effective conversations and practice. 2 training programmes (4 sessions) ran in 2021/22 with 44 early years staff attending. A rolling training programme is running in 2022/23 with the ambition to engage 300 early years staff, as well as being offered out to schools. The team will continue to deliver virtual healthy lifestyles offer as well as deliver in person programmes in schools and early years settings. As part of the food poverty alliance strategy the team will be offering opportunities to increase access to food growing to children and families across the borough with 2 food growing sessions held in 2021/22 attended by 42 pupils and 8 sessions booked in for 2022/23.
- 7.13. **Improving children's oral health:** Data from the national child dental health survey (2018/19) shows there have been some improvements in children's oral health. 18.9% of 5 year olds in Camden had experience of dental decay in 2019, compared with 30% in 2017. It is important to keep in mind that all the survey data needs to be interpreted with caution due to small sample sizes. Data from NHS Digital showed that 33.3% of children in Camden accessed dental services between (June 2021-June 2022 compared to 46.9% in London)³
- 7.14. In children, access to dentists began to decline around the beginning of the pandemic in early 2020, with subsequent closure of dental practices in March 2020. Dental access in

³ Data from [NHS Dental Statistics for England dashboard \(30 June 2022\)](#)

Camden has been consistently lower compared to England, even pre-pandemic. In common with many parts of the NHS, the situation in NHS dental services is one of escalating patient demand combined with limited clinical capacity.

- 7.15. The oral health promotion service led by the Whittington is working closely with clinical services and similar care groups to mitigate these challenges. Where access to primary dental care is not possible the Oral Health Promotion Service can facilitate direct access to CDS for those with more acute needs; signpost to local child friendly dental services; provide basic information and reassurance on treatment procedures by oral health champions.



- 7.16. Public Health commission Whittington Health Oral Health Promotion (OHP) team to deliver a number of oral health promotion programmes in Camden. The main focus of the contract is on children and a number of different initiatives are being delivered in early years' settings and schools:

- **Brushing for Life** - the OHP advisor delivers the Brushing for Life programme in early years' settings and with children with special educational needs (SEN). Frontline staff working in early years' settings (e.g. children centre and nursery staff, health visitors etc.) are provided with oral health training and packs containing toothpaste and toothbrush to distribute. During 2021-22, 5,300 packs were distributed through health visiting and 364 staff were trained.
- **Teeth for Life** – Supervised toothbrushing is established in 37 early years settings which has resumed a back to the same levels after the pandemic. supervised tooth-brushing was suspended due to Covid and infection control however 51 staff attended training to deliver the intervention in a safe and effective way.

- **Fluoride Varnish programme** - is delivered to children aged 3- 6/7 year olds (nursery to year 2) in 41 schools in Camden. Applying fluoride varnish to teeth is an evidence-based intervention to prevent tooth decay. Whittington Health would usually visit participating primary schools once per year and dental nurses apply fluoride varnish to the teeth of children whose parents have given their consent. 17 schools with the highest rates of Free School Meals (>40%) are offered a second fluoride varnish application. Children who are identified as requiring urgent dental care are signposted to services. Due to the pandemic consent rates have fallen from around 70% to 60% nationally. In Camden, the consent rate for 2021-22 average was 56%.

8. Long-term conditions management

8.1. **Integrated Paediatric Service (IPS)** provides a platform for integrated working in primary care that facilitates system-wide learning, improved communication and enables enhanced clinical decision making. The objectives aim to improve population health outcomes and reduce health inequalities for children and young people aged 0 – 18 in Camden, ensuring care closer to home with the right referral, right place, right time. The approach is embedded across all primary care networks and includes;

- Paediatric consultant triage of all general paediatric referrals
- Paediatric joint clinics delivered in primary care
- multi-disciplinary meetings to assist with system-wide case discussion and joint education

The remaining boroughs in NCL are implementing the agreed NCL IPS Strategic Framework aligned to local population need.

8.2. **Supporting children with asthma:** in 2021 there were 1,317 children aged 0-18 who were diagnosed with asthma and registered with a GP in Camden (GP data, December 2021). 4.5% of all 12-18 year olds registered with a GP have been diagnosed with asthma. This is a higher prevalence than for both children aged 0-11 and young people aged 19-24 (of which 2.2% and 1.9% are diagnosed with asthma respectively); this pattern is broadly in-line with the national data. There are more cases diagnosed in males than females, also in-line with the pattern nationally.

8.3. In Camden in 2021, the frequency of A&E attendances for asthma is much higher in children compared to other age groups. There were 35 A&E attendance (n=191) for every 100 children with asthma, compared to 3 for adolescents, 5 for young people and 2 for every 100 adults with asthma. The frequency of emergency admissions for those diagnosed with asthma also decreases with age: in 2021 for every 100 children diagnosed with asthma there are 4.6 emergency admissions per year; decreasing to 3.1 for adolescents, 1.8 for young people, and 2.0 per 100 adults with asthma. This may indicate poorer management of asthma in children and adolescents compared to adults.

8.4. Camden also has relatively high inpatient admission rates for asthma in children and young people (694 per 100,000 GP registered population) compared with other North Central London boroughs (NCL Asthma review). However, overall the rate of emergency hospital admissions for young people with asthma (per 100,000 GP registered population) have been decreasing in line with London and England.

8.5. In 2022 Camden introduced an Asthma Friendly Schools (AFS) programme. It means all schools in the borough will be supported to deliver five key standards; all of which aim to keep children healthy and safe in school. Schools will also be able to access a first free

emergency inhaler kit alongside a starter resource pack to help universal rollout of the programme. So far, 22 schools have engaged with the programme, and one has already achieved AFS status. 19 School Champions have been identified and trained, 14 schools have attended asthma workshops, and 16 schools have received visits and started the checklist process.

- 8.6. Locally there is variation in primary care management of children and young people with asthma. In 2023 we will be working with a Camden GP to look at post attack review and follow up, improve diagnosis, prescribing and asthma control. The work we do with primary care will be part of our wider local intervention in schools, children's centres, and community asthma. It would also be a step towards delivering more proactive and tailored support with at risk asthmatics to improve health outcomes in the future.

9. Young People

- 9.1. **Reducing teenage pregnancy:** teen pregnancies have shown a general decline in Camden since 2011 with a current rate of 7.3 conceptions per 1,000 population for under-18s (2020). This is significantly lower than the national rate of 13 per 1,000 and lower than some comparable areas in London such as Islington and Wandsworth.⁽⁴⁾

- 9.2. Teenage Pregnancy Steering Group has been working to continue to prevent teenage pregnancy and the delivery of high-quality services to support teen parents. The purpose of the Steering Group was to ensure Camden Council, community services, and Public Health work collectively to set out key objectives that members of the Steering Group could take forward and monitor. These objectives include improving prevention pathways for young people at risk of experiencing an unplanned teenage pregnancy; increasing awareness of services available in Camden that support young people experiencing an unplanned pregnancy or at risk; monitoring local data relating to teenage pregnancies to target resources proportionate to need; and mapping services that provide support for young parents where there has been an unplanned pregnancy, including around contraceptive options.

- 9.3. The key activities of the Steering Group are guided by applying the national Teenage Pregnancy Prevention Framework to develop an action plan to ensure that the rate of teenage pregnancy is low and there are high-quality sexual health services to support teen parents. For example, one of these actions included creating a mapping document of local universal and targeted service provision. The group provides governance to ensure actions are being implemented, including supporting schools to provide high-quality Relationship and Sex Education (RSE), ensuring RSE training is given to relevant health and non-health professionals, and sexual health service providers are including co-production and engaging with vulnerable groups.

- 9.4. Camden's Integrated Early Years Strategic Board, Public Health, commissioning teams and our sexual health providers continue to provide a watching brief on this area.

9.5. Sexual Health

The CAMISH education team work collaboratively across the borough in schools, youth clubs and colleges, providing high quality, engaging RSE sessions for young people, My

⁴ OHID Fingertips 2022 [Child and Maternal Health - Data - OHID \(phe.org.uk\)](https://phe.org.uk)

Life 1:1 programmes and open access/bespoke in house professionals trainings, including C Card training for professionals who wish to become registration and distribution outlets.

- 9.6. We work with multiple organisations providing targeted education sessions on topics including LGBT+, healthy relationships, consent and contraception. We run regular C Card drop in sessions in various locations across the boroughs.
- 9.7. Our Education and Wellbeing Specialists and Coordinators are working in conjunction with our Participation team colleagues to listen to the voices of young people and gain a first-hand understanding of what young people wish to see from Brook in the borough, and how we can enhance and develop our offer to meet local need and enable us to reach more service users.
- 9.8. Organisations have the opportunity for clinic visits to support young people with taking control of their sexual health and wellbeing. This gives young people interested in working in sexual health a good insight into what we do, and a chance to ask our clinical staff any questions.
- 9.9. Our Young Health Champions programme is a focus for us as we enter 2023, the programme offers young people the chance to participate in a RSPH (Royal Society for Public Health) accredited level 2 award. This is aimed at young people with an interest in health and wellbeing, and want to support their peers in living a healthy lifestyle.

9.10. **Substance misuse**

FWD Drug and Alcohol Services for Young People in Camden, also known as Forward, (FWD) is a specialist young person's substance misuse service within the Integrated Youth Support Service (IYSS), aligned with the Youth Early Help. Youth Early Help work focuses on preventing the escalation of young people's issues and behaviours from requiring a higher level of intervention.

- 9.11. The FWD have been delivering preventative, targeted and treatment services to raise awareness, increase knowledge and reduce harm caused by substance misuse. FWD staff are strategically located within the three locality Youth Hubs, the Youth Offending Service and the Looked after Children's Service. FWD continues addressing alcohol and substance misuse within educational settings by offering targeted programme and individual sessions for identified high risk and vulnerable students.
- 9.12. FWD also have workers linked Camden Centre for Learning the Hive, University College and The Royal Free Hospitals, UCLH, New Horizon Youth Centre, and the Brandon centre amongst other agencies. The team offers training programmes to build capacity and confidence amongst professionals and parents so that they are better able to identify needs and make appropriate referrals to services.
- 9.13. FWD works with children and young people from the age of eight to up to twenty-five years old who are either registered with a Camden GP, a resident in Camden and/or attend school and youth projects in Camden. FWD also works with looked after young people placed with carers outside of the borough. FWD provide specialist, multi-disciplinary support and interventions targeted at children and young people who are vulnerable to substance misuse or who may be affected by parental drug use.
- 9.14. In 2021/22 FWD engaged 318 young people, of which 208 received a one-to-one specialist service and 110 engaged in group interventions. The number of young people to engage in substance misuse services in Camden has recovered significantly compared to

2020/2021 when the Covid pandemic impacted many of the services that would normally refer young people to FWD. Young people who accessed the FWD service continue to present with more complex needs than previous years with mental health being the most prominent need.

- 9.15. Like previous years, cannabis was the most prevalent substance used triggering referrals that made up 52% of all referrals in the year. 21% of young people referred were referred for their use of alcohol, however some of the young people referred primarily for cannabis also consumed alcohol as their secondary substance of choice.
- 9.16. In 2021/2022 FWD responded to emerging concerns raised in a couple of school with whole year groups digesting cannabis edibles. FWD delivered tailor made educational awareness workshops on cannabis edibles and made health promotional material to help educate both young people and parents.
- 9.17. FWD successfully implemented the Young People's Prescribing service. This meant young people no longer needed to access substitute scripting via adult provider services. This service cut down waiting times for young people to access support when needed in a more appropriate setting. The service is flexible and was able to adjust to meet the needs of young people.
- 9.18. Of the 208 referrals open to FWD in 2021/2022:
 - 37% were known to social services at least once in their lifetime (this includes young person open with LAC, CIN, CP and care leaver needs)
 - 6% were known to the Youth Justice Service
 - 21% were involved with Early Help Services.
- 9.19. Upon case closure 84% of young people who received both Tier 2 and 3 treatment reported as being drug free or reduced their intake and became occasional users. 100% of YP reported they were satisfied with the service they received.
- 9.20. In addition, FWD delivered substance misuse awareness training sessions to 163 professionals across Camden, such as teachers, hospital staff and youth workers, delivered both virtually and face to face. Throughout the Pandemic FWD continued to offer virtual workshops to parents and young people.
- 9.21. FWD has delivered substance misuse awareness workshops to 53 parents across Camden. FWD worked in partnership with the British Somali Community Centre to provide a series of targeted interventions to help address particular issues around drugs within this community.

10. Mental health and wellbeing

- 10.1. **Local child and adolescent mental health (CAMHS) work:** children's mental health and emotional wellbeing services are experiencing considerable pressure, and this is likely to continue in 2022/23. However, over the last few years providers and commissioners have been working in close collaboration and have developed a strong system partnership – and will continue to build on this to improve outcomes for CYP. We can see increasing demand for these services which has resulted in an increase from one in nine CYP needing mental health support to one in six. There are also continued workforce challenges. The NCL Out of Hours service and crisis line continue to deliver across NCL. The Crisis Hubs which were established in COVID are continuing to operate and currently

being reviewed to look at the model and sustainability. A new Dialectical Behaviour Therapy (DBT) Service has been rolled out across NCL and a pilot of a new Home Treatment Team (HTT) model has launched in Barnet with plans to expand across NCL when investment allows. The development of an integrated front door in Camden between early help, social care and CAMHS services is continuing to progress with a view to the pilot going live in Spring 2023.

- 10.2. A Children and Young People's Social Prescribing Pilot is being delivered in 2022/23, partly funded through the ICB. This pilot has been developing referral pathways with Early Help, Schools, GP Practices and other sources and has worked 1:1 and in groups with young refugees, young people avoiding school, LGBTQ young people and socially isolated young people who are not accessing clinical services. Support includes access to activities, coaching and enabling engagement with other young people. VCSE partners delivering the pilot are The Hive, The Brandon Centre and Fitzrovia Youth in Action, supported by a multi-stakeholder steering group.
- 10.3. **Minding the Gap** (MTG) is an innovative approach to mental health services for young people aged 16-24. It was created by Camden Council in partnership with the then Camden Clinical Commissioning Group (CCG) in 2015 and co-designed with young people. The central component of MTG is the Hive. The Hive is an integrated youth hub and it is located on the Finchley Road in Swiss Cottage, within Camden Council owned premises. It is a welcoming, creative and accessible venue with the aim to make health services less intimidating and reduce stigma. The service was recommissioned at the end of 2021 with an increased budget in recognition of the complexity of need. The Hive is delivered by a consortium of specialist organisations led by Catch-22, a national charity, and in partnership with the Tavistock & Portman NHS Trust, Camden & Islington NHS Foundation Trust (C&I), and the Brandon Centre, the Anna Freud Centre and The Winch. The latter being a new partner in this consortium.
- 10.4. The core **Hive** team comprises of mental health and young people workers, some of them NHS clinical staff seconded from the Tavistock and C&I. The strength and uniqueness of the service is in the holistic, integrated, and wide-ranging offer to young people under just one roof. It offers young people aged 16-24 individual and group interventions including mental health therapies, substance misuse services and a sexual health clinic, as well as a wide range of group educational activities such as creative therapy, music, yoga, and discussion forums to explore topics such as sexual consent, youth violence/knife crime, equality and diversity, LGBT issues and racial discrimination. From April 2022, the Hive will also be offering one-to-one employment advice to young people, with a specialist employment advisor employed by Catch-22 providing youth focussed employment support, and a co-located with Department of Works and Pensions (DWP) employment advisor providing bi-weekly sessions.
- 10.5. During the pandemic lockdown, the Hive continued to support young people through one-to-one support, remote support and online group sessions. The Hive has approximately 1,400 young people per year using the Hub activities and provides one-to-one support to approximately 200 young people with complex needs. In 2020/21, 47% of young people presenting to the Hive had suicidal ideation, 36% presented with self-harm, and 42% had social isolation as a risk factor. By responding early to these needs, the service is able to prevent these issues from escalating and resulting in serious harm. The performance data for the service shows the percentage of young people showing an improvement in outcomes after interventions is high, with 79% of young people showing a reliable improvement in goals and 90% of young people rating the support they received highly.

- 10.6. **CAMHS trailblazer** - in December 2018, Camden successfully submitted an expression of interest for funding to become a national trailblazer in order to pilot ways to increase access to mental health support, building on our current model in schools and to reduce waiting times for CAMHS services to within 4 weeks. This has now become business as usual. Camden received around £3.5 million to introduce two new Mental Health in Schools teams and try new ways to triage referrals to CAMHS services. These services work across all 10 secondary schools and 20 of our primaries schools to offer support to children and young people with mild/moderate mental health needs and their parents. There will be opportunities for learning and collaboration with other schools too, so the benefits will reach borough wide. Another Mental Health in Schools Team will be introduced in 2022/23. In 2023/24 all remaining primary schools will have an opportunity to join MHSTs.
- 10.7. **Support to schools** - Camden Learning's Health and Wellbeing Team provide advice, support and training for schools on promoting positive mental health. During 2021-22, 47 (85%) schools (33 primary, 10 secondary, 4 special) engaged in MH support. 178 school staff (124 teachers and 54 support staff) from 29 schools attended a wellbeing workshop. There were 8 parent/carer workshops on supporting mental health delivered, involving 98 parents and carers from 8 primary schools. 1 primary school took part in iMHARS (Islington's Mental Health and Resilience in Schools). 152 pupils across 11 schools, (9 primary, 2 secondary), trained to be Wellbeing Champions to lead on activities promoting mental health in their school community.
- 10.8. **Responding to Covid and the impact on mental health** - 41 virtual Staff Wellbeing Workshops and CPD sessions ran, attended by 68 school staff from 24 schools. These sessions were an extension of the Peer Support for Staff Wellbeing programme that started in January 2021, developed in response to a need expressed by staff for professional wellbeing support in light of the Covid-19 pandemic. Funding for the programme was provided by the DfE Education for Wellbeing Return and Recovery grants. The programme offered 3 different types of support open to all school staff, facilitated by 3 mental health services; Tavistock and Portman NHS Foundation Trust, The Brandon Centre and Camden's Educational Psychologist Service (EPS).

The 3 types of support involve:

1. Small group consultations for staff with a mental health professional from the Tavistock about specific pupils they find challenging to deal with, due to the child's mental health or behavioural issues.
 2. Small group staff wellbeing/supervision sessions facilitated by a mental health professional from the Brandon Centre where staff have the opportunity to discuss their personal wellbeing in a safe space and gain strategies to improve their wellbeing
 3. Themed mental health workshops delivered by the EPS based on relevant wellbeing topics e.g. supporting pupils to cope with stress and anxiety, emotionally based school avoidance, grief and bereavement, supporting pupils with mental health issues as a result of the pandemic.
- 10.9. **Trauma-Informed Practice in Camden (TIPiC)**: This was originally one of the Youth Safety Task Force's funded projects April 2019-July 2021 and led by Camden's Educational Psychology Service (EPS) in collaboration with Camden Learning. It is delivered by EPS along with CAMHS, Robson House and Royal Free Hospital Children's School. 22 schools have or are currently engaged in TIPiC with a further 4 from September 2022. The Mental

Health Consultant in the Health and Wellbeing Team trained as a TIPiC trainer and co-delivered the training with an EP in one primary school with 70 staff. TIPiC continues to engage new schools.

10.10. During 21-22 the key activities included:

- Training for 4 primary schools new to TIPiC
- Continued support to 11 schools (3 secondary, 6 primary and 2 special)
- A range of support following the training to embed a trauma-informed approach, including evaluating staff wellbeing, clinical supervision and coaching for staff and whole school strategies for managing emotional regulation
- Webinars on aspects of a trauma-informed approach, open to all schools.

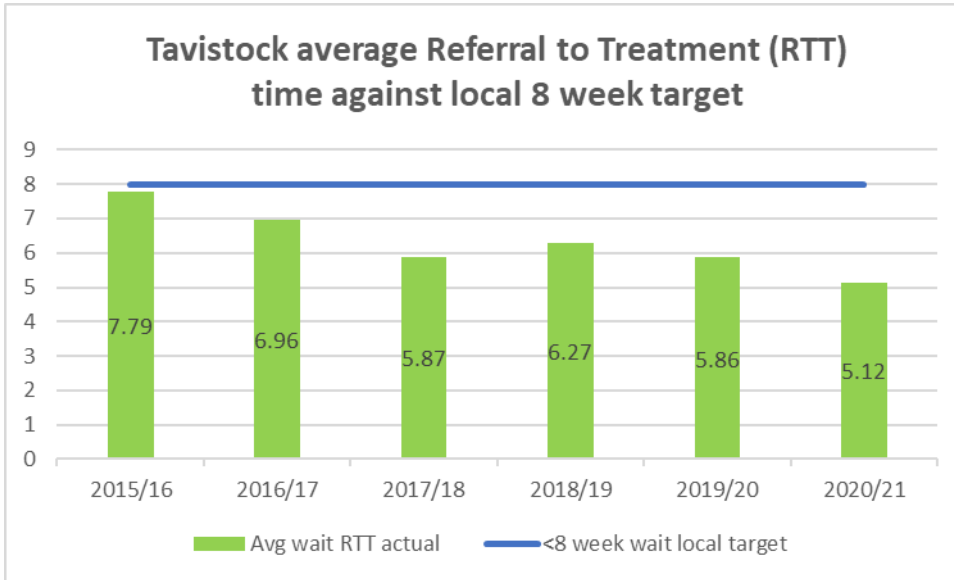
10.11. In 2021/22, schools identified a priority to re-engage parents/carers into the school community to rebuild the relationship between parents/carers and the school, and to share information about how schools are supporting children's wellbeing. 264 parents/carers attended a virtual or in-person workshop in 2021/22. In addition, schools recognised the importance of developing the pupil's voice and utilised the Wellbeing Champions programme as a vehicle to do so. 2 schools attended staff training with 125 school staff attending. One school staff training focused on 'A Whole School Approach to Growth Mindset'.

10.12. Looking forward demand for mental health and wellbeing support continues to increase. The Health Related Behaviour Questionnaire (HRBQ) highlighted that more pupils are keeping their worries to themselves, more pupils feel worried about their own mental health or that of a family member and more pupils are concerned about their appearance and weight. Parent/carer and pupil workshops and staff training have been tailored and more topics added to address these concerns. We are continuing to focus support on the role of the Mental Health Lead by providing termly networks and annual training as well as promoting the Senior Mental Health Lead training funded by the DfE. We have piloted a Transitions to Adulthood workshop series for 6th forms, which includes sessions on mental health, emergency first aid and health literacy, in collaboration with UCH. 1 programme of 3 workshops ran with 28 students attending and we will be engaging 3 more schools in 22/23.

10.13. The Camden Health and Wellbeing Team piloted a project in partnership with Partisan and the Hive Youth Hub to engage with young males from Black, Asian and Minority Ethnic backgrounds, to hear about their experiences of mental health and to gain insight into how accessible they found mental health services. This consultation group ran for eight weeks and enabled a group of 6 young males to come together each week, to share their experience and discuss and debate current issues and how these impact on the mental health and wellbeing of young people. This group continues to meet weekly at The Hive and is co-led by the young people in attendance; the group continues to grow and develop.

10.14. **The CAMHS Transformation Plan** for North Central London will be refreshed in March 2023. The current plan builds on our priorities in the NHS Five Year Forward View (5YFV) and trajectories set to ensure the 5 Year Forward View (5YFV) targets would be met. It also included local responses to the NHS 10 Year Plan and our work across the five NCL boroughs.

10.15. The majority of CAMHS providers in Camden have a waiting time for referral to treatment (RTT) that is well within the 8-week standard. The Tavistock continues to have an average waiting time within the standard. With the implementation of the Four Week Wait we have continued to see improvements in this measure. Despite the pandemic, the average waiting time has dropped to less than 6 weeks. In 2022, a national cyber-attack on NHS systems has impacted the reporting from providers.



10.16. The Covid pandemic caused disruption and uncertainty for all. Children and young people were particularly affected from the changes to education, socialising and access to services. NHSE benchmarking shows an increase in mental health conditions in under 18s, the current prevalence of mental health in CYP is 1 in 6. Despite the 155% increase in referrals to our Eating Disorder Intensive Service between 2020/21 and 21/22, with the investment of funding from NCL ICB and development of the community Eating Difficulties and ARFID service, young people are now waiting less than six weeks for a routine appointments and rates are continuing to improve.

10.17. Additional funding made available through Transformation Plan funds has increased the capacity across the service. Population data shows 0-18 population as 40, 549 in Camden and the national prevalence of children and young people who have a diagnosable mental health condition has risen to 1 in 6. This equates to 6,771 CYP in Camden.⁵ The NHSE 5YFV target required that at least 35% of children with a diagnosable mental health condition are seen for treatment by 2020 or increase in the numbers seen by at least 2% per year. Activity is reported through the Mental Health Services Data Set (MHSDS) Although significant improvements have been made across Camden over the last year to ensure that all providers across the system are able to submit this data and more accurately represent our activity, this work is still ongoing. In 2022 there was a cyber-attack impacting NHS systems and this has meant that it has been challenging to accurately report data sets this year until this issue is resolved.

10.18. In addition, in line with the NHS Long Term Plan, projected access targets have been recalculated to meet the required increase in number of CYP under 18 years accessing services, these are detailed below and expressed as a number of CYP instead of a rate per population and prevalence: The second line demonstrates that with a percentage of

⁵ NHS Digital Patients Registered at a GP Practice, September 2021 release

37.7% receiving treatment in 2020/21 we have met the national target of 35% despite the increase in demand of CYP needing mental health services following the impact of Covid.

Improve access to Children and Young People's Mental Health Services (CYPMH)							
			No. of Children	2019/20 Actual	2020/21 Actual	2022/23 Ambitions	2023/24 Ambitions
NHS Camden CCG	Count	No. of CYP under 18 receiving treatment by NHS funded community health services	6771	2,334	2,552	2603	2655
Percentage receiving NHS Funded Treatment of Prevalence							
			No. of Children	2019/20 Actual	2020/21 Actual	2022/23 Plus	2023/24 Plus
NHS Camden CCG	Count	No. of CYP under 18 receiving treatment by NHS funded community health services	6771	34.50%	37.70%	38.40%	39.20%

10.19. **Reducing inpatient mental health admissions:** the NCEL Provider Collaborative has now been operational across North Central and North East London since April 2020. The collaborative is being led by East London Foundation Trust (ELFT) and includes North East London Foundation Trust, The Whittington Health, Barnet, Enfield and Haringey Foundation Trust and the Tavistock and Portman Foundation Trust and Ellern Meade Eating Disorders Unit. The collaborative has led to a reduction in out of area inpatient placements across NCL. Savings made through the collaborative have supported the DBT model and a number of other initiatives including support to the VCSE sector to develop early intervention and prevention services.

10.20. Additional services commissioned across NCL will contribute to the reduction in admissions including those specifically funded to provide mental health support to care leavers.

11. Vulnerable groups

11.1. **Services for disabled children** - the Camden Integrated Children's Service (CICS) is a partnership that brings community health staff in Camden together in one service, regardless of employing organisation. The four NHS trusts that make up the partnership (Royal Free London, Tavistock and Portman, Whittington Health and CNWL) work with the local authority to ensure that children with complex and additional needs receive joined up services. The partnership continues to perform well and meet the outcomes of children and young people with complex and additional needs. As of the end of end of quarter 2 (Q2) 2022/23:

- 100% of families said they would recommend the service to friends or family against a target of 90%
- 97% of children and young people and their families reported an improvement in confidence in managing long term conditions against a target of 90% This is an improvement of 3% from the last reported figures.
- SCAS (over 5s autism assessment service) performance for Q2 sustained its Q1 improvement of 74% (67% for Q4) for CYP starting assessment for autism within 12 weeks of referral.
- In other services average waits for occupational health (OT) were 8 weeks, speech and language therapy (SLT) 7 weeks and community paediatricians 9 weeks compared to the target of 6 weeks.

- SLT did not meet their 6 week waiting time for assessment in the early years' service in order to deliver therapy packages, and in the schools-based service this was related to capacity. In addition, there are data quality issues for 5 of the longest waiters. The CICS Data Quality Group continues to focus on accurate recording of waiting times for intervention, and of transition between pathways within services.
- Dietetic performance has improved from 8 weeks for Q1 to 4 weeks for Q2 following a Quality Improvement (QI) project designed to deliver performance improvement.
- 83% CYP achieved the expected clinical outcomes in Q2, out of 1406 goals recorded, slightly down from 85% for Q1 2022/23. SLT reported a further increase in goals achieved to 760 (Q1 455; Q4 355), although achievement for SLT goals fell slightly from 88% for Q1 to 85% for Q2.
- 84% of CYP had a shared multi-disciplinary team (MDT) care plan in place at 30 September 2022, representing a reduction of 43 CYP in scope to 891 compared to 30 June 2022. We continue to work with staff to ensure that the agreed approach to recording is understood. The co-produced improvement to the shared care plan achieved some good outcomes, including a proposal to move onto an electronic shared care plan which we are investigating.
- All CYP who need it have a transition plan in place and the service continues to work on the preparation for adulthood agenda.
- All 220 learners at Swiss Cottage have a shared care plan in place. The SLT health team improved outcomes by 146 more goals this quarter compared to Q1, with a total of 375 goal achieved across all teams. Goals achieved as a percentage of goals outcomed dropped slightly from 75% in Q1 to 73% and there are a number of reasons for this, including a need for a piece of work around data quality which will be carried out this quarter.
- NCL wide work on ASD assessment continues and we include a dashboard showing how long CYP have been waiting for formal autism assessment in the child development team (CDT) for under 5s and the length of time taken to complete assessments once started. It is too early to draw any conclusions from the data as yet.

11.2. **Children and young people with complex needs** - the Closer to Camden

Commissioning Strategy for children with complex needs has been developed by the Council and the NCL ICB. Our ambition is to do more to prevent children and young people from being placed out of Camden and keep as many as possible closer to their families and wider support networks. Although we may always need to place some children and young people in residential schools, we know that there is more that we can do to support families earlier when issues arise and prevent the escalation of needs. Transition to adult services and preparing for adulthood are key and enabling young people to live independently in Camden or locally if they and their parents/carers so wish is also crucial.

11.3. The strategy identifies a number of commissioning priorities, agreed by Camden Council and the NCL ICB. Some priorities are already in progress and are able to be implemented in the short-medium term. Others are larger-scale ambitions that will involve extensive work to explore and develop over longer timeframes.

11.4. The Children's Integrated Commissioning Team, the Children and Young People's Disability Service (CYPDS) and the Special Education & Inclusive Intervention Service

(SEIIS) submitted a successful application to the **Department for Education (DfE) Short Breaks Innovation Fund** in partnership with Tavistock & Portman NHS Foundation Trust and PACE (a local specialist voluntary and community (VCS) play provider).

- £212k was awarded by the DfE, with an additional £24k provided by NHSE for delivery of the Rebuilding Bridges Project from June 2022 – June 2023.
- The project currently works with children and young people aged 4-18 with Social, Emotional & Mental Health needs (SEMH), autism and learning disabilities who are refusing school / at risk of school exclusion or attending an alternative provision, whilst providing holistic joined-up support to families.
- Specialist keyworkers provide 1:1 and small-group support to children and young people. CAMHS psychologists linked to the project complete assessments and deliver whole-family therapeutic interventions with a focus on positive behavioural approaches.
- The outcomes the project is working to are to improve school attendance, improve emotional well-being, reduce behaviours of concern and support parents better so they are able to cope in their role as main carers.
- A bid for year 2 programme funding has been submitted to the DfE, which has been successful and will build on the work established in year one of the project as well as developing innovative, new provision for older cohorts.

11.5. **Looked after children's (LAC) health service:** there were 326 children looked after in total during 2021/22, compared with 294 in the previous year and a higher total than any of the previous four financial years. There were 140 new entrants to care and 135 who left care during the period (compared with 106 and 110 respectively during 2020-2021). 62 of new entrants were unaccompanied asylum seeking children (UASC), compared with 31 in 2020-2021. 51% of the new entrants to care were 16+ years. There were 191 children looked after by Camden on 31.03.2022, 66% male and 34% female. 83.8% were from a black and minority ethnic background or of dual heritage.

11.6. Of the Children Looked After (CLA) who had been looked after for at least one year, 99% had their statutory review health assessment during the year. 100% of CLA entering care had an Initial Health Assessment and 51% had this completed within the statutory 20 working- day timescale. A high number of UASC arrived in the UK over a short time and due to insufficient clinic capacity it was not possible to meet the 20 day target during this period. Health assessments, both Initial and Review, are routinely being performed face to face. Occasionally, a young person may be hard to engage and the opportunity for virtual assessments are now embedded as a means to increase compliance. The health team make professional judgements about whether a virtual assessment is appropriate in each case and act in the best interests of the child to complete their review in the timeliest manner.

12. **Child deaths in Camden**

12.1. All child deaths (under 18) of residents in Camden are reviewed to identify trends and gain maximum learning from these deaths. The North Central London Child Death Overview Panel is responsible for reviewing all deaths, producing an annual report and sharing the findings.

12.2. There were 9 child deaths reported in Camden in 2020/21 (2 per 10,000 child population). This is statistically similar to the previous year, the NCL average and the other boroughs in NCL.

- 12.3. Analysis of child death data from 2019/20 to 2021/22 across the most common cause of death continues to be perinatal/ neonatal event. The proportion of deaths in NCL was higher in children under 1 year old (60%), followed by deaths in children aged 15-17 (14%), 1-4 years (12%), 5-9 years (8%) and 10-14 years (7%).
- 12.4. Despite concerns about the safeguarding risks posed by the pandemic lockdowns there was no increase in child deaths recorded in 2020/21. This is similar to the national picture where no increase has been seen in sudden or unexpected child death rates.
- 12.5. Across NCL and nationally, there remain stark inequalities in child deaths by ethnicity and deprivation. Action is being taken across the system locally and by the ICB to address these inequalities including, improving access to timely and good quality maternity services (and other wider health services), topic specific trainings for frontline professionals and targeted community outreach and engagement.

13. Finance Comments of the Executive Director Corporate Services

- 13.1. The Director of Finance has been consulted on the content of this report and has no further comment to make at this time.

14. Legal Comments of the Borough Solicitor

- 14.1. The Borough Solicitor has been consulted and has no comments to add to this report.

15. Environmental Implications

- 15.1 There are no environmental implications.

REPORT ENDS