APPENDIX 1: Update summary of local needs assessments (January 2020)

Mental Health Needs Assessment

Salford has produced a comprehensive Mental Health and Wellbeing Health Needs Assessment[1] as part of its JSNA. This HNA draws on epidemiological and comparative data for Salford in conjunction with stakeholder views to identify areas of unmet mental health need for the Salford populations. It also looks at the mental health throughout the life course from perinatal health to the mental health of the older population. The chapter on children and young people sets out a comprehensive set risk factors and related prevalence rates. The HNA gives an overall prevalence figure of "an estimated 3,363 children aged 5 to 16 in Salford with mental health disorders." The HNA also estimates "1,287 children aged 5 to 16 with an emotional disorder in Salford." This chapter also includes figures and analysis of services for children and young people in the city.

Locality Plan

Salford's Locality Plan has been refreshed for 2020. This is due to be published in early Spring 2020 and will be available on the Locality Plan web page[2]. The Locality Plan sets the ambition for Salford for the next few years. It is a plan for health and wellbeing, not only for illness and dependency; for strengths and not just for frailties; for opportunities and not only for needs; and for ideas not just for certainties.

It takes a look at progress, which is considerable, and at the remaining challenges, which are also considerable. It brings a renewed emphasis on prevention, personal involvement and care closer to home, and explores what people in Salford have told us these phrases mean to them.

Chapter 4 of the revised plan sets out the progress made since the original Locality Plan was written and published. Some specific ambitions and progress made relevant to this review are:

"Reduce the number of children in poverty" *(Salford Locality Plan (2016)*

Child poverty has seen a fall from 26.8% to 21.1% between 2014 and 2016. Despite a rising population there are at least 2,000 fewer children in poverty in 2016 (latest figure) compared to 2014. Halving child poverty in nine years is not on track but the trend suggests it could be at 19.2% or 2,400 fewer children in poverty by 2021 compared to 2014. The current national child poverty indicator has been discontinued. A new measure will be introduced in Spring 2020. It is unclear how this will allow trends to be tracked.

"Our success rates at GCSEs are amongst the lowest in England" *(Salford Locality Plan (2016)*

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[1] https://www.salford.gov.uk/media/394967/salford-mental-health-and-wellbeing-hna.pdf
[2] https://www.salfordccg.nhs.uk/transformation/locality-plan

This is still true. We have the 3rd lowest average Attainment 8 score and 3rd lowest average Progress 8 score out of 150 LAs in England (2019).

"There will be £45m annual investment in mental health services to make sure people get the help they need as quickly as possible" *(Salford Locality Plan (2016)*

Comparable figures in health and social care in mental health are difficult, but mental health is by a wide factor the largest area of spend by Salford CCG, accounting for about £1 in every £6.

One of the broad ambitions for children and young people set out in the revised Locality Plan is for them to be welcomed into a safe and nurturing home environment. Every child needs to feel they belong and are valued, and to be protected from the "toxic stress" of adverse childhood experiences (ACEs). A full immunisation schedule is every child's right, to keep themselves and others safe from infectious diseases, and developmental screening to prevent avoidable disability and handicap. Breastfeeding continues and parents are supported to care for their child supported by a wider network.

The plan emphasises the importance of emotional wellbeing for children and young people. As part of our population health investment we have developed an evidence-based system for earlier identification of emotional wellbeing needs. Our Emotional Friendly Schools Programme has been rolled out to complement the schools link work provided by Child and Adolescent Mental Health Services (CAMHS). This means teaching staff are supported with their own wellbeing and resilience and be better able to identify needs in others. The school link workers provide a named contact for school staff before referrals to CAMHS take place. Earlier identification of need from attachment disorders, building resilience in schools, tackling ACEs and developing an approach around peer and parent support means we hope to improve outcomes and reduce incidence of mental health needs.

Public Health England (PHE) publish data for local authorities on Children and Young People's Mental Health and Wellbeing. Indicators are grouped into five themes:

- Identification of need
- Protective factors
- Primary prevention: Adversity
- Primary prevention: Vulnerability
- Finance

The tables below set out the latest performance for Salford on each of these indicators. Also shown (where available) are the number of people affected, how Salford ranks compared to its 15 nearest neighbours, the trend over time and the comparison with England.

Key

Value the figure used to compare across areas over time. This may be a percentage or rate or other value. This is stated in the indicator name.

Count is usually the number of individuals included. This isn't given for estimates based on surveys.

NN Rank is Salford rank amongst its group of 15 other most similar local authorities in England according to CIPFA. 1= best performer (purple), 16 = worst performer (yellow). For the finance table 1= highest spend (blue) and 16 = lowest spend (magenta).

Trend: This is the 3 year trend. Only shown where it is available. Green = improving, Red = getting worse, ↘ = reducing, ↗ = increasing, ⇔ = unchanged.

Vs England: How Salford compares to England (latest year). Statistical significance is accounted for. Only shown where it is available.

Identification of need

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
Estimated prevalence of mental health disorders in children and young people: % population aged 5-16	5-16	Persons	2015	10.0%	3,363	7		
Estimated prevalence of emotional disorders: % population aged 5-16	5-16	Persons	2015	3.8%	1,287	7		
Estimated prevalence of conduct disorders: % population aged 5-16	5-16	Persons	2015	6.2%	2,068	7		
Estimated prevalence of hyperkinetic disorders: % population aged 5-16	5-16	Persons	2015	1.7%	571	10		
Prevalence of potential eating disorders among young people: estimated no. aged 16 – 24	16+	Persons	2013	4,030	4,030	8		
Prevalence of ADHD among young people: estimated no. aged 16 - 24	16+	Persons	2013	4,238	4,238	7		
% of children where there is a cause for concern	5-16	Persons	2017/18	33%	101	6		
Hospital admissions as a result of self-harm (10-24 years): DSR - per 100,000	10-24	Persons	2017/18	582	268	13		Worse
Hospital admissions as a result of self-harm (10-24 years): DSR - per 100,000	10-24	Female	2017/18	898	203	13		Worse
Hospital admissions as a result of self-harm (10-24 years): DSR - per 100,000	10-24	Male	2017/18	272	65	13		Worse
Hospital admissions as a result of self-harm: DSR - per 100,000	10-14	Persons	2017/18	309	43	11	⇔	Worse
Hospital admissions as a result of self-harm: DSR - per 100,000	15-19	Persons	2017/18	917	127	12	⇔	Worse
Hospital admissions as a result of self-harm: DSR - per 100,000	20-24	Persons	2017/18	524	98	12	↘	Worse

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
% of school pupils with social, emotional and mental health needs	Primary school age	Persons	2018	3.5%	833	15		Worse
% of school pupils with social, emotional and mental health needs	School age	Persons	2018	3.8%	1,351	15		Worse
% of school pupils with social, emotional and mental health needs	Secondary school age	Persons	2018	3.8%	417	16		Worse

Protective factors

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
School readiness: % of children achieving a good level of development at the end of Reception	5 years	Persons	2017/18	67.4%	2,240	11	↗	Worse
School readiness: % of children achieving a good level of development at the end of Reception	5 years	Female	2017/18	75.0%	1,202	7	↗	Worse
School readiness: % of children achieving a good level of development at the end of Reception	5 years	Male	2017/18	60.3%	1,038	10	↗	Worse
School Readiness: % of children with free school meal status achieving a good level of development at the end of Reception	5 years	Persons	2017/18	59.2%	389	6	↗	Similar
School Readiness: % of children with free school meal status achieving a good level of development at the end of Reception	5 years	Female	2017/18	69.5%	216	3	↗	Similar
School Readiness: % of children with free school meal status achieving a good level of development at the end of Reception	5 years	Male	2017/18	50.0%	173	7	↗	Similar
Average difficulties score for all looked after children aged 5-16 who have been in care for at least 12 months on 31st March	5-16 years	Persons	2017/18	13.4		6		
Mean score of the 14 WEMWBS statements at age 15	15 years	Persons	2014/15	47.8		5		Similar
Positive satisfaction with life among 15 year olds: % reporting positive life satisfaction	15 years	Persons	2014/15	63.5%		9		Similar
Educational attainment (5 or more GCSEs): % of all children	15-16 years	Persons	2015/16	49.7%	1,086	12		Lower
GCSEs achieved (5 A*-C inc. English and maths) for children in care	15-16 years	Persons	2015	24.4%	11	1		Higher

Primary prevention: Adversity

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
Children in low income families (under 16s)	<16 years	Persons	2016	21.1%	10,460	7	⭨	Worse
Children in low income families (all dependent children under 20)	0-19 years	Persons	2016	21.2%	11,955	7	⭨	Worse
Free school meals: % uptake among all pupils	School age	Persons	2018	21.5%	7,681	13	⭨	Worse
Free school meals: % uptake among all pupils	Primary school age	Persons	2018	21.3%	5,088	13	⭨	Worse
Free school meals: % uptake among all pupils	Secondary school age	Persons	2018	20.6%	2,297	11	⭨	Worse
Repeat child protection cases: % of children who became subject of a child protection plan for a second or subsequent time	<18 years	Persons	2018	28.9%	132	16	⇔	Worse
Children subject to a child protection plan with initial category of abuse: rate per 10,000 children aged under 18	<18 years	Persons	2018	36.5	203	10		Worse
Children subject to a child protection plan with initial category of neglect: rate per 10,000 children aged under 18	<18 years	Persons	2018	25.9	144	6		Worse
Children who started to be looked after due to abuse or neglect: rate per 10,000 children aged under 18	<18 years	Persons	2018	28.7	160	12		Worse
Children in need due to abuse or neglect: rate per 10,000 children aged under 18 years	<18 years	Persons	2018	287.7	1,601	12		Worse
Children who started to be looked after due to family stress or dysfunction or absent parenting: rate per 10,000 children aged under 18	<18 years	Persons	2017	8.9	49	9		Similar
Children in need due to family stress or dysfunction or absent parenting: rate per 10,000 children aged under 18	<18 years	Persons	2017	49.0	269	5		Better
Families out of work: % of households with dependent children where no adult is in employment	Dependent children	Persons	2011	6.1%	6,287	11		Worse
Families out of work: % of households with dependent children where no adult is in employment	Not applicable	Persons	2011	6.1%	6,287	11		Worse
Family homelessness	Not applicable	Persons	2017/18	2.9%	328	11		Worse
Children in need due to parent disability or illness: rate per 10,000 children under 18	<18 years	Persons	2018	3.8	21	6		Better
Parents in alcohol treatment: rate per 100,000 children aged 0 - 15	<16 years	Persons	2011/12	278.8	126	8		Higher
Parents in drug treatment: rate per 100,000 children aged 0 - 15	<16 years	Persons	2011/12	104.0	47	2		Similar
Unaccompanied Asylum Seeking Children looked after: count	<18 years	Persons	2018	18	18	10		

Primary prevention: Vulnerability

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
Children in care	<18 years	Persons	2018	102.8	570	13	⇔	Worse
Children leaving care: rate per 10,000 children aged under 18	<18 years	Persons	2017/18	30.4	169	10	⇔	Higher
Children in need due to socially unacceptable behaviour: rate per 10,000 aged under 18	<18 years	Persons	2018	5.2	29	9		Similar
Children in need due to child disability or illness: rate per 10,000 children aged under 18 years	<18 years	Persons	2018	21.4	119	9		Better
% with 3 or more risky behaviours at age 15	15 years	Persons	2014/15	21.2%		15		Worse
Fixed period exclusion due to persistent disruptive behaviour: rate per 100 school aged pupils	School age	Persons	2016/17	1.6	549	11	↗	Worse
Primary school fixed period exclusions: rate per 100 pupils	Primary school age	Persons	2016/17	1.3	299	7	↗	Similar
Secondary school fixed period exclusions: rate per 100 pupils	Secondary school age	Persons	2016/17	10.0	1,087	8	↗	Worse
Pupil absence	5-15 years	Persons	2017/18	5.1%	559,859	11	⇔	Worse
Pupils with Learning Disability: % of school aged pupils	School age	Persons	2017	7.3%	2,561	12	↗	Worse
Pupils with Learning Disability: % of school aged pupils	School age	Female	2016	6.7%	2,285	12		Worse
Pupils with special educational needs (SEN): % of school pupils with special educational needs	School age	Persons	2018	19.8%	7,063	16	↗	Worse
Pupils with special educational needs (SEN): % of school pupils with special educational needs	Primary school age	Persons	2018	19.2%	4,586	16		Worse
Pupils with special educational needs (SEN): % of school pupils with special educational needs	Secondary school age	Persons	2018	16.7%	1,858	14		Worse
% who were bullied in the past couple of months at age 15	15 years	Persons	2014/15	51.2%		4		Better
% of regular drinkers at age 15	15 years	Persons	2014/15	8.2%		14		Worse
Smoking prevalence at age 15 - current smokers (WAY survey)	15 years	Persons	2014/15	8.0%		8		Similar
% who have taken drugs (excluding cannabis) in the last month at age 15	15 years	Persons	2014/15	1.1%		13		Similar
First time entrants to the youth justice system: Crude rate - per 100,000	10-17 years	Persons	2018	320.2	69	11	⇔	Worse
% with a long-term illness, disability or medical condition diagnosed by a doctor at age 15	15 years	Persons	2014/15	14.4%		12		Similar
16-17 year olds not in education, employment or training (NEET) or whose activity is not known	16-17 years	Persons	2017	7.7%	360	14		Worse

Indicator Name	Age	Sex	Latest Year	Value	Count	NN Rank	Trend	Vs England
16-17 year olds not in education, employment or training (NEET) or whose activity is not known	16-17 years	Female	2017	7.3%	160	14		Worse
16-17 year olds not in education, employment or training (NEET) or whose activity is not known	16-17 years	Male	2017	8.3%	190	14		Worse

Finance

Indicator Name	Age	Sex	Latest Year	Value	Count (£000s)	NN Rank	Trend	Vs England
Spend (£000s) on Local Authority children and young people's services (excluding education): rate (£) per 10,000 aged 0-17	<18 years	Persons	2017/18	£9,407	£52,359	10	⇔	
Spend (£000s) on Sure Start Children's Centres and early years: rate (£) per 10,000 aged 0-17	<18 years	Persons	2017/18	£456	£2,536	10	⇔	
Spend (£000s) on Children looked after: rate (£) per 10,000 aged 0-17	<18 years	Persons	2017/18	£4,620	£25,716	10	⇔	
Spend (£000s) on Safeguarding children and young people's services: rate (£) per 10,000 aged 0-17	<18 years	Persons	2017/18	£2,051	£11,418	10	⇔	
Planned spend (£000s) on special schools: rate (£) per 100,000 pupils	School age	Persons	2018/19	£12,837	£4,850	7	⇔	
Planned spend (£000s) on pupil referral units: rate (£) per 100,000 pupils	School age	Persons	2018/19	£5,029	£1,900	2	⇔	
Spend (£000s) on Youth justice: rate (£) per 10,000 aged 0-17	<18 years	Persons	2016/17	£1,126	£6,181	1	⇔	