#FundTheHubs: Joint response to the Mental health and wellbeing plan: discussion paper
July 2022

Summary

This is a joint response from the Children and Young People's Mental Health Coalition, Centre for Mental Health, Global Black Thrive, Mind, The Children's Society, YoungMinds and Youth Access in support of our joint #FundTheHubs campaign. We welcome the development of a new mental health and wellbeing plan that seeks to set out a 10-year vision for change and advocates for a cross-government approach. The plan presents a crucial opportunity to expand early intervention and prevention services for children and young people building on the *Transforming Children and Young People's Mental Health Green Paper* and the *NHS Long Term Plan*.

We are calling for the national rollout of the early support hubs model which would ensure that young people in every area across England can access early support for their mental health.

The case for intervening in early mental health support for young people

In 2017, 1 in 9 children and young people were estimated to have a diagnosable mental health condition. Since then, factors such as the COVID-19 pandemic and poverty have been shown to be impacting young people's mental health, with recent data from NHS Digital from July 2021 suggesting that 1 in 6 young people are now experiencing a probable mental health disorder[1]. But the concerns about young people's mental health pre-dated the pandemic:

- o According to YoungMinds analysis of NHS data, the number of young people referred to CAMHS (nationally) in November was the highest ever recorded (103,865)[2].
- o Analysis from The Children's Society's Good Childhood data also reveals that children and young people's wellbeing overall has been declining since they began their survey in 2009/10[3].
- o Research by UCL[4] shows that in 2018-19, almost a quarter of 17-year-olds (24%) had self-harmed in the previous year. 7% of 17-year-olds had attempted suicide at some point in their lives.
- o Half of all mental health problems manifest by the age of 14, and 75% by the age of 24[5].
- o The number of A&E attendances by young people aged 18 or under with a recorded diagnosis of a psychiatric condition have tripled since 2010[6].

- In 2017, suicide was the most common cause of death for both boys (16.2% of all deaths) and girls (13.3%) aged between 5 and 19[7].
- A Mind survey of 2,000 parents revealed that half of parents said on average their child/children's mental health was worse now than it was before the COVID-19 pandemic[8].
- Just over a third of young people (37%) with a diagnosable mental health condition are able to access NHS specialist support[9].

There are also clear inequalities when it comes to children and young people's mental health, with higher rates of mental health problems among young women (compared to young men), LGBTQ+ young people, autistic young people, and young carers, alongside clear links between mental health and race, and mental health and financial insecurity.

Early support services within the community are key in providing young people with access to preventative and early intervention support. They form a crucial part of the mental health system and play a key role in improving access to support, especially for groups facing mental health inequalities. The earlier a young person gets support for their mental health, the more effective it is likely to be.

However, many young people face unacceptable delays in accessing early support. Research undertaken by Centre for Mental Health highlights that on average, young people receive help 10 years after their symptoms first arise[10]. This is often due to a combination of high thresholds for support and long waiting lists and times for specialist mental health services which means young people struggle to get support even when they are seriously unwell. This is backed up by recent survey findings released by Mind[11]:

- 7 in 10 parents think it is difficult to get NHS support for young people's mental health
- 82% of parents who think it is difficult to get NHS support for young people's mental health say it is because waiting times are too long, and 71% said it is because there isn't enough support for young people when they first experience problems.

There are long-term financial implications associated with delayed and late intervention, including treatment for serious mental health problems such as psychosis and conduct problems (ibid). With the right early action, we can stop young people's problems from escalating, instead of waiting to treat them at crisis point.

Experiencing mental health difficulties in childhood or adolescence can have a significant impact across the life course. It has been shown to substantially affect young people's educational outcomes, earnings, employment, ability to maintain relationships, and likelihood of engaging in risk-taking behaviour. The human and financial costs of failing to support young people are high and undermine our health as a society. That's why we are calling for a network of hubs across the country, which would provide early support for young people's mental health when their problems first emerge.

What are early support hubs?

Early support hubs[12] offer easy-to-access, drop-in support on a self-referral basis for young people with mild to emerging mental health problems, up to age 25. They are community-based and are often delivered in partnership between the NHS, local authorities or the voluntary sector depending on local need and existing infrastructure. A mix of clinical staff, counsellors, youth workers, advice workers and volunteers provide a range of support on issues related to mental health and wellbeing while additional services can be co-located under one roof, these include:
- Counselling and psychological therapies
- employment advice
- youth services
- sexual health
- housing support.

Figure 1: An early support hub (using the YIACS framework)
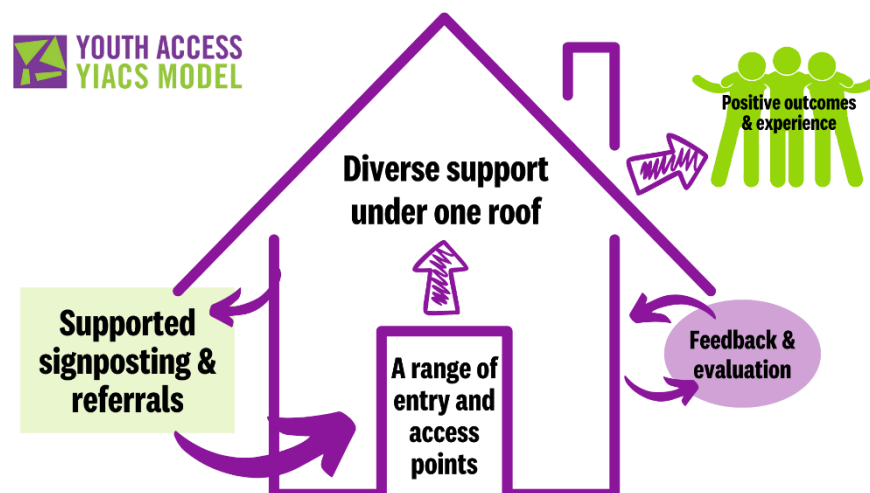
Building on the existing evidence base for these services, early support hubs can reduce pressures on the NHS and improve young people's life chances by providing a community space to access flexible support for emotional wellbeing. We propose building on existing service models across the country such as Youth Information Advice and Counselling Services (YIACS)[13] and other early support hubs, including learning from international examples.

How hubs fit in with the wider system

Early support hubs can form part of a comprehensive mental health and wellbeing pathway for children and young people. Existing hubs have established clear and effective pathways to specialist mental health and children's services for those requiring enhanced support. They also provide young people with advice, information, and signposting to other forms of support such legal and advocacy services.

While the roll out of Mental Health Support Teams in schools and colleges has been welcome, school-based provision is not appropriate for all young people. According to recent analysis by Mind, over a third of young people (36%) said they did not want mental health support from their schools[14]. For some this is because they did not see school as a trusted setting. Others cited concerns about stigma associated with seeking support and concerns about the confidentiality of seeking support from their school. Early support hubs benefit young people who do not want mental health support at school, as well as those outside of mainstream education and young people who are older than school age.

Furthermore, the support offered through early support hubs can also be delivered alongside or in partnership with other key services such as youth services, schools and colleges and family hubs. However, evidence from Youth Access reinforces the need for a young people specific setting that is led by the young person, and tailors the service based on their needs and priorities. Young adulthood is a very specific life phase, whereby individuals face novel challenges such as leaving home or care, entering employment or higher education, becoming financially independent and developing relationships. Early support hubs are designed to support young people to navigate these challenges on their own terms, which will often mean independently of the family and with assurance of confidentiality.

Below is a case study of Mancroft Advice Project (MAP) in Norfolk which illustrates how these various components are put into practice.

Case study: Mancroft Advice Project, Norfolk

Dan Mobbs, CEO of MAP summarises their offer:

"At MAP (Mancroft Advice project), we deliver the full Youth Access YIACS model, with an open-access 'hub' near the town centre in Norwich. Young people can walk-in (or buzz in, during Covid) and talk with a staff member about what's going on for them and what sort of support might be best. We have a team of therapists, advisers, and youth workers, so in most cases, young people can be connected with the help they've asked for on the same day, within the service. We also offer a free helpline and outreach services to reach Norfolk's more remote communities.

"Young people access MAP voluntarily and on their own terms – a central characteristic to youth work and person-centred counselling. As such, the service works mainly with young people aged 13-25, since they can engage independently of parents and are competent to give informed consent.

"Often parents do call in for advice or to try to refer their child into the service, in which cases MAP staff will signpost them to services for parents and families and let them know that their child can engage with MAP on their own terms, if they want to.

"All of MAP's work is centred around the young person – whether that is to explore their identity, substance use, mental health concerns, money worries or any other issue, in a space that's just for them. MAP does offer family-based support where the young person needs to involve their family in order to overcome their problems. For example, if they are facing homelessness due to conflict at home, we would offer mediation to see if they can come to a resolution. With this approach, young people see MAP as somewhere 'just for them', and trust staff as 'on their side' - it might be the only place they feel like this....

"On the system level, MAP also plays a strategic role on Norfolk's Safeguarding Children's Board and will also work with family-focused agencies to ensure young people are getting appropriate support, for example, for young parents, we'd want to have a good relationship with the local Family Hub to make sure they can get that specific support."

Early support hubs: The system perspective

As an integrated service, early support hubs will work with the wider system, such as NHS CYPMHS, MHSTs, and safeguarding teams to ensure that they can get young people to the right support and address any risks. Hubs are also often well connected to other specialist services where they are unable to deliver support directly, such as specialist advice on housing, immigration, or substance misuse.
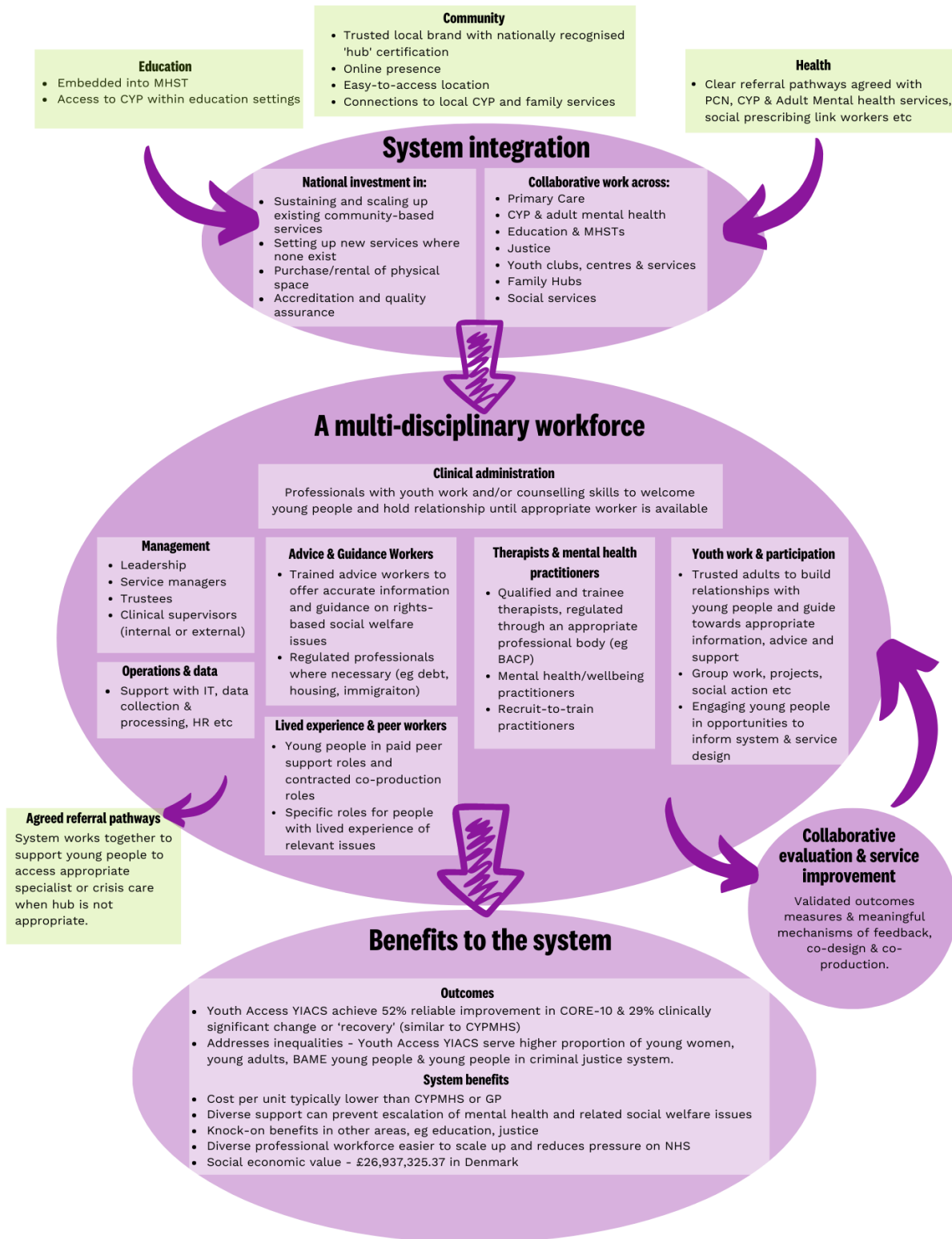
For example, The Nest, an early support hub based in Southwark, London has been embedded in the wider system of support for young people in Southwark, developing strong links with Family Early Help, Schools, CAMHS, GPS, and Social Services. As a result of The Nest's strategic position, it has enabled the service to work collaboratively to raise awareness of the services across local services and the wider community, deliver tailor-made training sessions to school staff to better equip them in supporting students, and to develop work with MOPAC and the Family Early Help team to develop a parent/carer network to empower parents to deliver peer to peer support.

Early support hubs are able to provide an integrated offer as they are staffed by multidisciplinary teams (see figure 2) who collaborate successfully to provide holistic, person-centred, and coordinated supported. This includes therapists and counsellors, youth workers, advice workers, participation workers and peer support workers.

The support delivered through hubs can generate positive outcomes across a number of areas of children and young people's lives which is further elaborated on later.

Figure 2 below further illustrates how early support hubs can be integrated within local children and young people's mental health services.

Early support hubs:
The system perspective

Community
- Trusted local brand with nationally recognised 'hub' certification
- Online presence
- Easy-to-access location
- Connections to local CYP and family services

Education
- Embedded into MHST
- Access to CYP within education settings

Health
- Clear referral pathways agreed with PCN, CYP & Adult Mental health services, social prescribing link workers etc

System integration

National investment in:
- Sustaining and scaling up existing community-based services
- Setting up new services where none exist
- Purchase/rental of physical space
- Accreditation and quality assurance

Collaborative work across:
- Primary Care
- CYP & adult mental health
- Education & MHSTs
- Justice
- Youth clubs, centres & services
- Family Hubs
- Social services

A multi-disciplinary workforce

Clinical administration
Professionals with youth work and/or counselling skills to welcome young people and hold relationship until appropriate worker is available

Management
- Leadership
- Service managers
- Trustees
- Clinical supervisors (internal or external)

Operations & data
- Support with IT, data collection & processing, HR etc

Advice & Guidance Workers
- Trained advice workers to offer accurate information and guidance on rights-based social welfare issues
- Regulated professionals where necessary (eg debt, housing, immigraiton)

Lived experience & peer workers
- Young people in paid peer support roles and contracted co-production roles
- Specific roles for people with lived experience of relevant issues

Therapists & mental health practitioners
- Qualified and trainee therapists, regulated through an appropriate professional body (eg BACP)
- Mental health/wellbeing practitioners
- Recruit-to-train practitioners

Youth work & participation
- Trusted adults to build relationships with young people and guide towards appropriate information, advice and support
- Group work, projects, social action etc
- Engaging young people in opportunities to inform system & service design

Agreed referral pathways
System works together to support young people to access appropriate specialist or crisis care when hub is not appropriate.

Collaborative evaluation & service improvement
Validated outcomes measures & meaningful mechanisms of feedback, co-design & co-production.

Benefits to the system

Outcomes
- Youth Access YIACS achieve 52% reliable improvement in CORE-10 & 29% clinically significant change or 'recovery' (similar to CYPMHS)
- Addresses inequalities - Youth Access YIACS serve higher proportion of young women, young adults, BAME young people & young people in criminal justice system.

System benefits
- Cost per unit typically lower than CYPMHS or GP
- Diverse support can prevent escalation of mental health and related social welfare issues
- Knock-on benefits in other areas, eg education, justice
- Diverse professional workforce easier to scale up and reduces pressure on NHS
- Social economic value - £26,937,325.37 in Denmark

The evidence base for early support hubs

There is broad support for a national rollout of early support hubs. A survey of parents by Mind revealed that nine in 10 parents (90%) think young people should have access to drop-in mental health support in their communities. And 88% of parents think a nationwide network of hubs should be set up, and 76% of them think the government should fund them[15]. In addition, over 5000 young people signed a letter to the Chancellor of the Exchequer urging him to fund early support hubs as part of the 2021 Autumn Spending Review[16].

Furthermore, the children and young people's mental health sector is united on the need to introduce a network of early support hubs. Just over 50 youth and mental health organisations also signed the open letter to the Chancellor. The Health and Social Care select committee recommended a national roll out of early support hubs in their inquiry into children and young people's mental health[17]. The Children's Commissioner for England has also backed the establishment of a network of community based mental health hubs for children and young people as part of her *The Big Ask, The Big Answer* report[18]

Early support hubs have been shown to have excellent outcomes for young people, both internationally and in the UK:

- o Jigsaw services are early support hubs that provide brief early mental health support to young people aged 12-25 across Ireland. O'Keefe and colleagues[19] evaluated their impact and found that the service was successful in reducing levels of self-reported psychological distress.
- o Research that has been conducted on existing early support hubs in the UK, or YIACS, reports comparable clinical outcomes to those accessing therapy through CYPMHS or school, while also reporting significantly higher satisfaction amongst young people with their experience[20]. For example, in a study of YIACS, 97% of young people reported that it was 'certainly true' that they 'were listened to', compared to 85% in CYPMHS[21].
- o An independent evaluation of the Headspace model in Australia was shown to have a significant reduction in suicidal ideation and the prevalence of self-harm for young people that accessed the service[22].
- o In addition, research has shown that the wider help provided by existing early support hubs through advice services is highly effective at improving young people's mental health, with the potential to avoid escalation of mental health issues related to common social welfare issues such as housing, debt, and employment[23].

- **Reducing disparities in young people's mental health**

Early support hubs provide an effective gateway to support for young people facing the greatest mental health disparities. A 2018 study[24] also found that, compared to children and young people's mental health services (CYPMHS) and school-based counselling services, voluntary sector organisations were serving a greater proportion of 'older' young people, as well as higher proportions of LGBTQ+ young people, young people from racialised communities, and young

people in contact with the youth justice system[25]. A drop-in mental health service piloted at Great Ormond Street Hospital also found that young people from racialised communities were over-represented within their services and that a drop-in model may be an effective way to increase their access to mental health support[26].

Analysis of Jigsaw services in Ireland also found that almost half of the young people who engage with the service are young men, a group who do not traditionally seek support through traditional or more clinical pathways as often as young women[27].

- **Young people's mental health during the transition period**

The period of transition can be a difficult time for young people experiencing mental health problems and it is often described as a 'cliff edge' where support quickly dissipates as young people turn 18. Young people consistently report negative experiences when making the transition from CYPMHS to Adult Mental Health Services (AMHS). This is because young people say they often struggle with the different approaches taken by AMHS, and they don't always feel prepared or heard. Some also find that they don't meet the threshold for AMHS and are left without support, leading them to fall through the cracks of services. Early support hubs can provide a critical safety net for young people in this situation.

Early support hubs help bridge the gap between CYPMHS and AMHS by formalising transition arrangements between hubs, and these services through agreed and established referral pathways. They also encourage more joint commissioning between CYPMHS and AMHS to help improve early support hubs' capacity to work across age boundaries. According to one study of YIACS, the average age of young people accessing hubs was 20 years old[28].

Workforce

The workforce for early support hubs varies depending on the services offered and is typically multidisciplinary in make-up. However, the type of roles that you would expect to see in an early support hub include:

- Service Manager
- Counsellors e.g. BACP Degree Level Counsellors
- Youth workers (for drop in & detached/ outreach youth work) e.g. Participation/ community engagement officers
- Employment, housing and debt advisors
- Sexual health nurse
- Administrator
- Some services are also supported by volunteers and peer to peer workers.

Analysis by the British Association for Counselling and Psychotherapy (BACP) in a survey of their current workforce shows that for working with children and young people clients up to the age

of 18, around a third of their 58,000 members (approximately 19,000 counsellors) have undertaken specific training for working therapeutically with children and young people[29]. Of those trained specifically to work with young people, over half (55.5%) have indicated that they would like more paid client work and, on average, have capacity to take on an extra five clients per week. Extrapolating these figures suggests that BACP members alone are trained and available to work with over 51,000 additional young people per week.

Investing in early support hubs

There are huge economic benefits to implementing comprehensive early support for young people. The annual cost of mental health problems in England is estimated to be £119 billion[30], measured in terms of spending on health and the impacts on an individual's work or education. Three-quarters of mental health problems first emerge before the age of 25[31], so it makes sense economically to invest in mental health support for young people, as well as making a huge difference to people's lives.

In a UK study investigating YIACS, for young people who reported that advice had improved their stress or health, savings in GP costs alone (and disregarding the cost of other health services) were estimated to equate to £108 per young person, exceeding the average cost of advice provision[32].

Early support hubs can also help reduce demand on NHS services. Evidence shows they can achieve significant upstream savings as a result of improved mental health outcomes, and reductions in the number of referrals to NHS CYPMHS, and in the number of presentations at A&E. For example, an external evaluation by the Anna Freud Centre found that 42nd Street's Integrated Community Response Service (delivered within the hub) reported significant individual and system impacts with savings of £806,040 because of improved mental health outcomes, and reductions in the number of referrals and emergency calls to NHS CYPMHS, and in the number of presentations at A&E[33].

We want to build on the successful examples of early support hubs in the UK so that young people can access early support wherever they live. We also need to ensure they have consistent, long-term funding for existing services.

We estimate that a national network of hubs would cost approximately **£103 million per year** and would offer help to about **500,000 young people** with emerging mental health problems. We believe that early support hubs provide a clear opportunity to bridge the gap in early intervention support that currently exists.

Case study: [The Well Centre](#), London Borough of Lambeth

The Well Centre is a youth health hub for 11-20 year olds based in Lambeth, South London. The centre was jointly designed and developed by Redthread (a youth work charity) and the Herne Hill Group Practice (general practitioners) and is now run by Herne Hill Group Practice.

The Well Centre was established in 2011 after a need for a specific service for young people was identified in the local area. This need was identified following a drop-in that was held at a local GP practice, which saw a significant proportion of young people attending that were not registered to the practice. The centre provides access to a GP, a CAMHS senior mental health practitioner and Health & Wellbeing Practitioners (HWP). Young people are able to go to the Well-Centre about any health concerns that they have, including physical, mental and sexual health. Young people are able to drop-in to the centre or pre-booked appointments are available. Referrals can also be made into the service. Referrals are made from a wide range of partners including GPs, social workers, parents, and teachers. Young people can also self-refer.

Every young person who attends receives an initial biopsychosocial assessment from the GP to identify their needs and the support that is required. They are then discussed at a weekly multi-disciplinary team meeting where they are allocated to the most appropriate support. Physical health needs are met by the GP, whilst mental health concerns are referred either to the HWP's for support, counselling, social prescribing (jointly decided with the young person) or to the CAMHS practitioner for a higher level of intervention. The GP's retain contact with those that are deemed to have a higher level of need and review young people when new concerns are raised, or they are being prescribed for.

The service has been cited as best practice in Future in Mind. The Centre works closely with the local voluntary sector, social services, GP's, school nurses, alongside a range of other partners. They have a good working relationship with CAMHS, who not only provide the senior CAMHS practitioner embedded in the Well Centre but also a monthly meeting with a CAMHS consultant to discuss more complex cases, thereby managing to retain many within the Well Centre and reduce the need for onward referral to CAMHS. Several of the HWP's are funded by local PCN's. The main service is funded by the Children and Young People's Commissioner for Lambeth, who works across both health and the local authority. The funding, however, comes from the Lambeth CCG budget. When the service was first set up, it initially received funding from charitable trusts and from NHS innovation funding – this funded the service for the first 2 years of operation. It subsequently became sustainably funded via the CCG.

Case study: [42nd Street, Manchester](#)

42nd Street is an early support hub that plays a key role in Manchester's CYPMH infrastructure. They work with young people aged 13-25 years across Greater Manchester who present with mental health problems, including depression, anxiety, behavioural problems, and self-harm. Their activities include counselling and psychotherapy; 1-1 mental health support; group work; a youth leadership programme; mental health promotion work and youth work activities.

Therapeutic interventions are combined with opportunities for young people to learn, develop new skills, be creative and demonstrate to themselves and others that they can recover from mental ill-health and achieve their full potential. Referrals to the services delivered by the charity come from a range of sources: young people themselves, parents, friends, GPs, social workers, teachers, specialist CYPMHS, A&E and other professionals.

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