

**HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL**

**Day:** Thursday  
**Date:** 9 November 2023  
**Time:** 6.00 pm  
**Place:** Committee Room 1 - Tameside One

Item No.	AGENDA	Page No
1.	<b>APOLOGIES FOR ABSENCE</b>	
2.	<b>DECLARATIONS OF INTEREST</b>	
	To receive any declarations of interest from members of the Scrutiny Panel.	
3.	<b>MINUTES</b>	1 - 4
	To approve as a correct record, the Minutes of the proceedings of the Health and Adult Social Care Scrutiny Panel held on 14 September 2023.	
4.	<b>TAMESIDE MENTAL HEALTH PROVISION</b>	5 - 46
	The Panel to meet Simon Sandhu, Medical Director, Pennine Care NHS Foundation Trust; Trish Cavanagh, Deputy Place Based Lead; and Lynzi Shepherd, Head of Mental Health, Learning Disabilities and Autism (Tameside), to receive an update on mental health priorities for Tameside and an overview of services and support delivered by Pennine Care.	
5.	<b>CHAIR'S UPDATE</b>	
	The Chair to provide a verbal update on activity and future priorities for the Panel.	
6.	<b>DATE OF NEXT MEETING</b>	
	To note that the next meeting of the Health and Adult Social Care Scrutiny Panel will take place on Thursday 11 January 2024.	
7.	<b>URGENT ITEMS</b>	
	To consider any additional items the Chair is of the opinion shall be dealt with as a matter of urgency.	

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## Health and Adult Social Care Scrutiny Panel 14 September 2023

**Commenced:** 6.00pm

**Terminated:** 7.20pm

**Present:** Councillors Owen (Deputy), Axford, Beardmore, Drennan, B Holland, Patel, Tilbrook, Warrington

**Apologies:** Councillors N Sharif, Bowden

### 14. DECLARATIONS OF INTEREST

There were no declarations of interest submitted by members of the Scrutiny Panel.

### 15. MINUTES

The minutes of the meeting of the Health and Adult Social Care Scrutiny Panel held on 27 July 2023 were approved as a correct record.

The following action be noted under Item 4 of the agenda. That a working group is established to review Domestic Abuse services specific to the perpetrator needs assessment and access to safe accommodation for victims of domestic abuse, including measures to protect and safeguard people in their own homes.

The Chair sought the interest of panel members and confirmed that the working group will consist of the Chair, Deputy Chair, Councillors Axford, Beardmore, Bowden and Drennan.

### 16. ADULT SOCIAL CARE

The Panel welcomed Councillor John Taylor, Executive Member (Adult Social Care, Homelessness & Inclusivity); and Stephanie Butterworth, Director of Adult Services, to receive an update regarding Adult Social Care Reforms.

Members received a summary and overview of the Adult Social Care Reform White Paper, People at the Heart of Care (2022). The paper sets out a 10 year vision for adult social care, with three key objectives that:

- People have choice, control, and support to live independent lives
- People can access quality and tailored care and support
- People find adult social care fair and accessible

The reforms also take account of aspects such as future population changes and what this is likely to bring as a change in social care needs and delivery. A number of factors will need to be considered and addressed locally, these include:

- Adult Social Care Workforce – capacity and pressures
- Carers
- Market sustainability
- New duties for the Care Quality Commission (CQC)
- Winter planning

Supporting Tameside's social care workforce remains in place as a key local priority, when taking account of pressures faced across the sector. Recruitment and retention challenges are faced by the Council and providers in residential, nursing care and community care. Councillor Taylor advised that further commitments have been made by the Council with recently obtained grants from the Department of Health, targeted specifically for workforce initiatives. The authority has remained committed to supporting and promoting the social care workforce, working with providers with recruitment initiatives, roadshows, developing career pathways within the sector and commitments to the national living wage and real living wage.

A significant review of market sustainability in Tameside will be undertaken, with the aim to assess and inform the authority and providers on current provision and to proactively prepare and plan for future and changing demand. The Council will assess what it is doing now and where it wants to move to in ensuring the borough has a healthy, diverse and responsive social care market to meet all care needs. Points were also discussed about the ongoing work with providers around the fair cost of care.

Tameside context was provided regarding Living Well at Home provision with the overarching aim to enable people to remain well and living independently in their own homes and communities. A vital part of this is to ensure that both support and accommodation is right for the individual. Integrated working is at the heart of this and it was reported that Tameside is in a good place moving forwards as part of the Greater Manchester integrated care arrangements.

Panel members received a summary of what's going well and pressure areas. Positives included the ongoing quality and improvement work with care homes, the homes for all programme, listening and learning from residents receiving services, blended roles and work on carers including the strategy and meeting requirements set within the Care Act.

Discussion touched upon local challenges and pressures specific to waiting lists, service users waiting for adaptations or equipment as well as reviews and occupational therapy assessments. It was reported that 6 additional reviewing officers have been recruited to alleviate pressures and wait times in this area.

Further points were discussed regarding the increasing use of long-term residential care, with numbers increasing for people requiring specialist and dementia care. Issues specific to No Criteria to Reside (NCTR), hospital patients are experiencing delays in suitable placements and assessments in some cases. A final point was made regarding the impacts of mental health and presenting factors identified during the assessment process, with the results of Covid and the cost of living crisis becoming increasingly present.

Councillor Taylor and the Director of Adult Services responded to questions on:

- Pressures on the adult social care budget and managing demand.
- Working with providers and workforce pressures both within the Council and across the local care sector.
- The role and support available for unpaid carers.
- The Care Cap.
- Capacity of residential and nursing care in Tameside.
- Supporting residents to stay at home with support and adaptations, disabled facilities grants.
- Preparations for CQC inspections and new framework - Implications for the Council.
- Learning from social care compliments and complaints.

**Actions:** The points for action include:

- Changes to CQC inspection framework, notable changes, focus areas and key lines of enquiry, what it means for the Council – to be summarised on a page for members.
- Assurance and managing risk within the community and people's homes. Data specific to service users returning to hospital closely following discharge and repeat admissions, specific to residents assessed to be suitable for independent living with social care.

- Waiting times associated with Disabled Facilities Grants and awaiting adaptations.
- Budget allocation for Adult Services, as a proportion of the Council's total spend.

#### **17. CHAIR'S UPDATE**

The Chair informed member that the first meeting of the Domestic Abuse working group will take place at 5pm on 31 October. Members of the working group have received notice and details of the meeting.

The Chair also advised members of the upcoming Scrutiny Mid-Year budget meeting, with a date to be confirmed shortly and circulated by email.

#### **18. DATE OF NEXT MEETING**

To note that the next meeting of the Health and Adult Social Care Scrutiny Panel will take place on Thursday 9 November 2023.

#### **19. URGENT ITEMS**

The Chair reported that there were no urgent items for consideration at this meeting.

**CHAIR**

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# Tameside Mental Health Provision

**Simon Sandhu – Medical Director, Pennine Care**

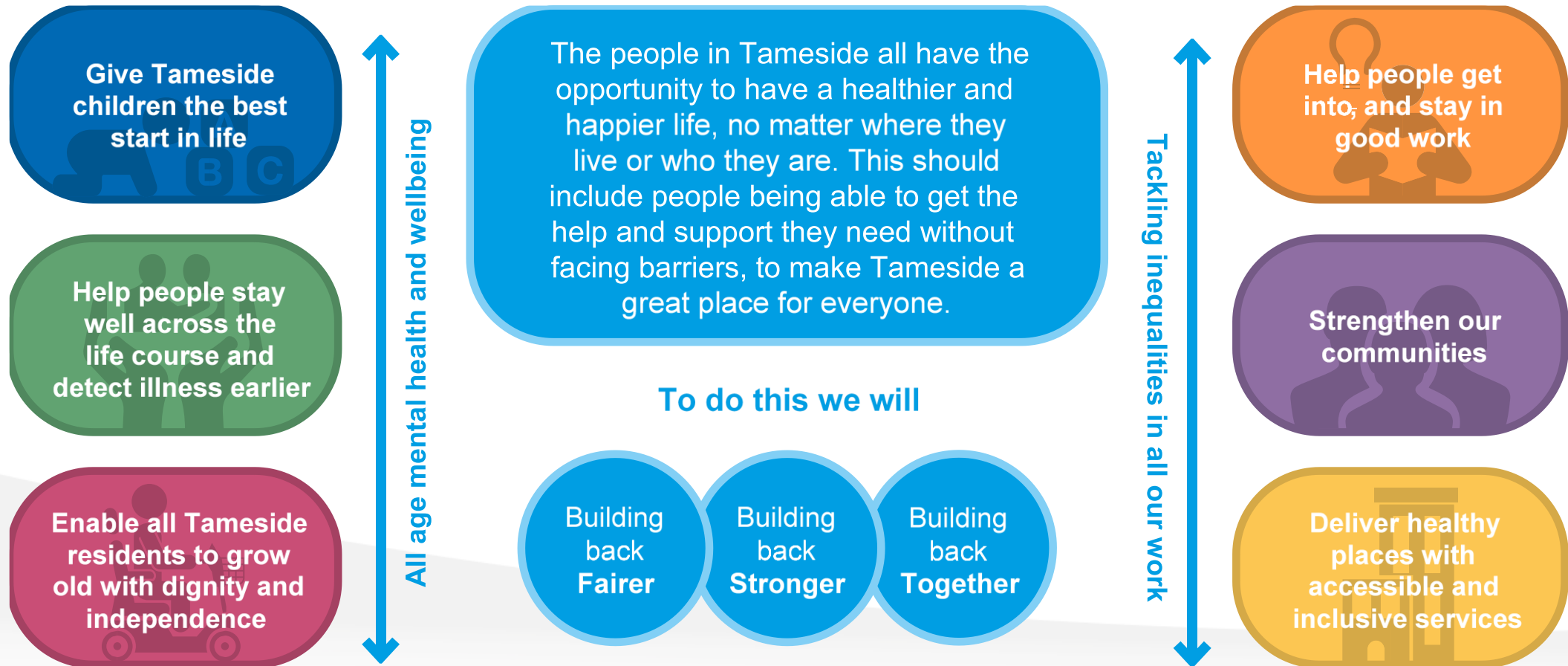
**Trish Cavanagh – Deputy Place Lead**

**Lynzi Shepherd – Head of Mental Health, Learning Disabilities and  
Autism (Tameside)**

November 2023

# TAMESIDE JOINT HEALTH AND WELL BEING STRATEGY AND LOCALITY PLAN: Building Back Fairer, Stronger, Better.

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# Estimated spectrum of mental health need across Greater Manchester population

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Well  
Population  
1.7m



At  
Risk  
550  
Thousand



Mild  
350  
Thousand



Moderate  
150  
Thousand



Severe  
50  
Thousand

Episodic - 30,000  
Persistent - 13,000  
Complex Enduring - 7,000+



Wellbeing

Self Care  
700k

Low Intensity Care  
140k

Moderate Intensity Care  
70k

High Intensity Care  
18k

Complex Care  
15k+

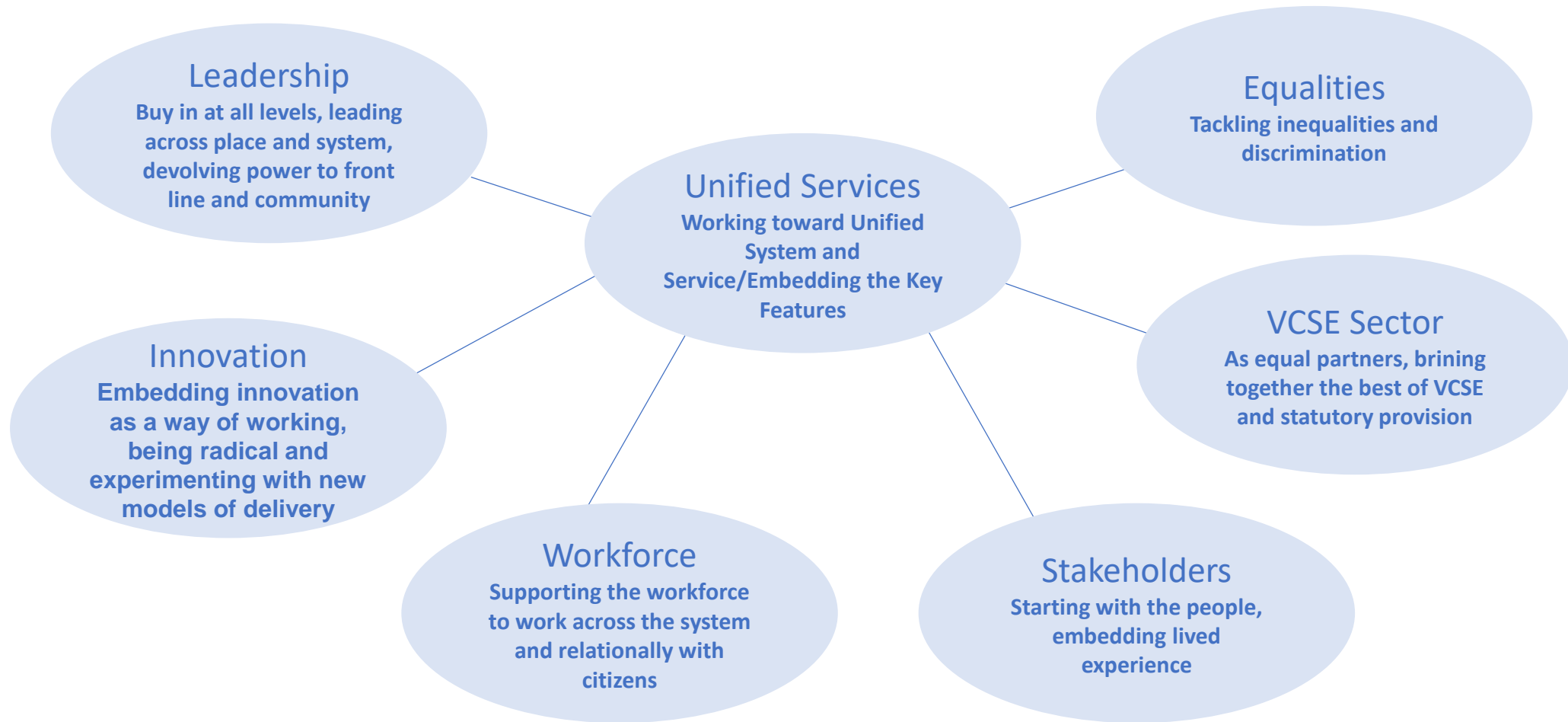
This is not a one-way street. A person will move backwards or forwards along this continuum at different points in their life.

Estimated number of people (adults and children) in each group based on their mental health state over 12 months  
 People categorised as having a mental health problem (mild/moderate/severe) if they had an episode in a calendar year  
 Categorised at risk if they had an emerging symptom within a 12 month period, an episode in the year before or were children/parents of a person presenting with mental health problems

Based on the Productivity Commission Issues Paper into the Social and Economic Benefits of Improving MH (Jan 2019)

# Mental Health Priorities for Tameside

- Improved mental health population health outcomes for the people of Tameside – Understanding our future needs
- Mental health will need to be taken into account in all our work – Develop and improve system working to support the prevention agenda and a reduction in health inequalities
- Children and Young Peoples Mental Health by implementing both Local Transformation Plan and NHS Long Term Plan and with a focus on the continued development of the Early Help Offer
- Mental Health Community Transformation Programme – Redesign, and develop services in line with national policies and proven evidence base knowledge
- Mental Health Urgent and Emergency Care Transformation Programme - Redesign, and develop services in line with national policies and proven evidence base knowledge
- Continued development and implementation of the “No Wrong Door” approach to all mental health care - Create the right processes to support planning decisions and enable more integrated and efficient ways of accessing services
- Reducing Health Inequalities for people with a Learning Disability and Autistic People



# About us....

**Simon Sandhu, Medical Director**

*Maximising potential*

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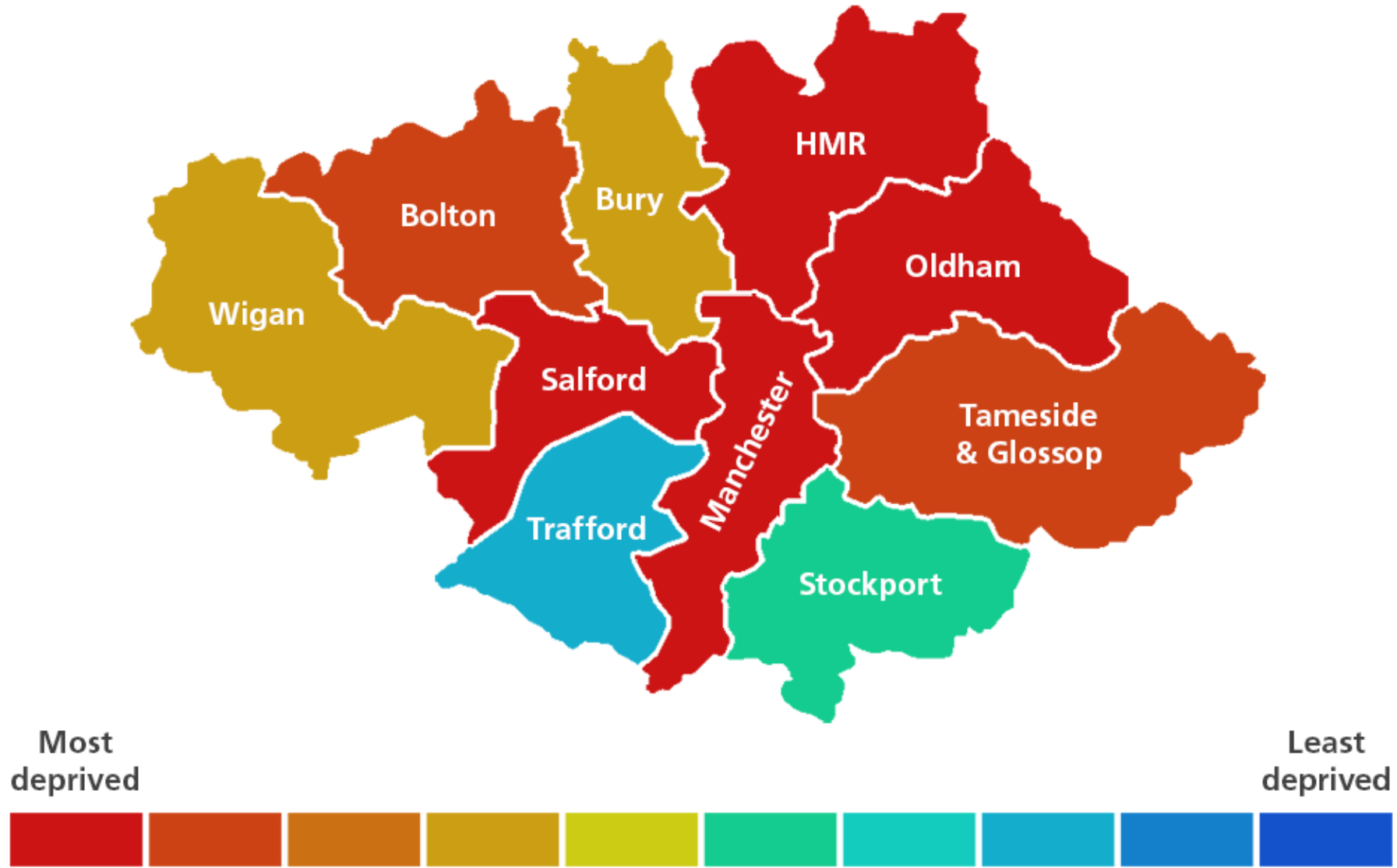
# Where we provide services

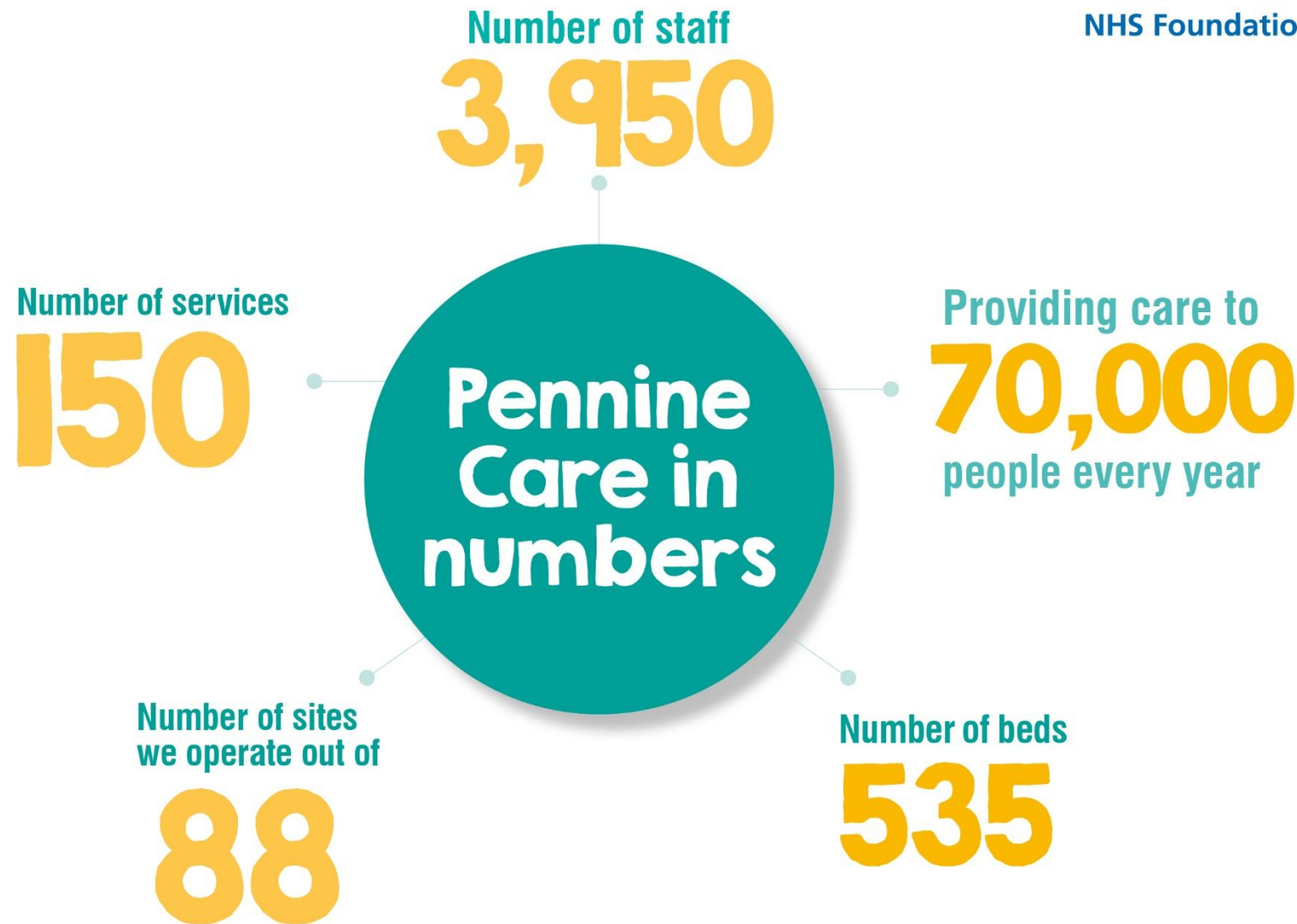


**Pennine Care**  
NHS Foundation Trust



**Military Veterans services (North West)**







**Pennine Care**  
NHS Foundation Trust

# Our services

**North West:**  
**Military Veterans**

**Greater Manchester:**  
**Child and Young People:** community and inpatient  
**Greater Manchester Resilience Hub**  
**Rehabilitation and Secure Care**

**Boroughs:**  
**Adult:** primary care, community  
and inpatient  
**Older People:** community  
and inpatient  
**Drug and Alcohol**  
**Learning Disability and Autism**

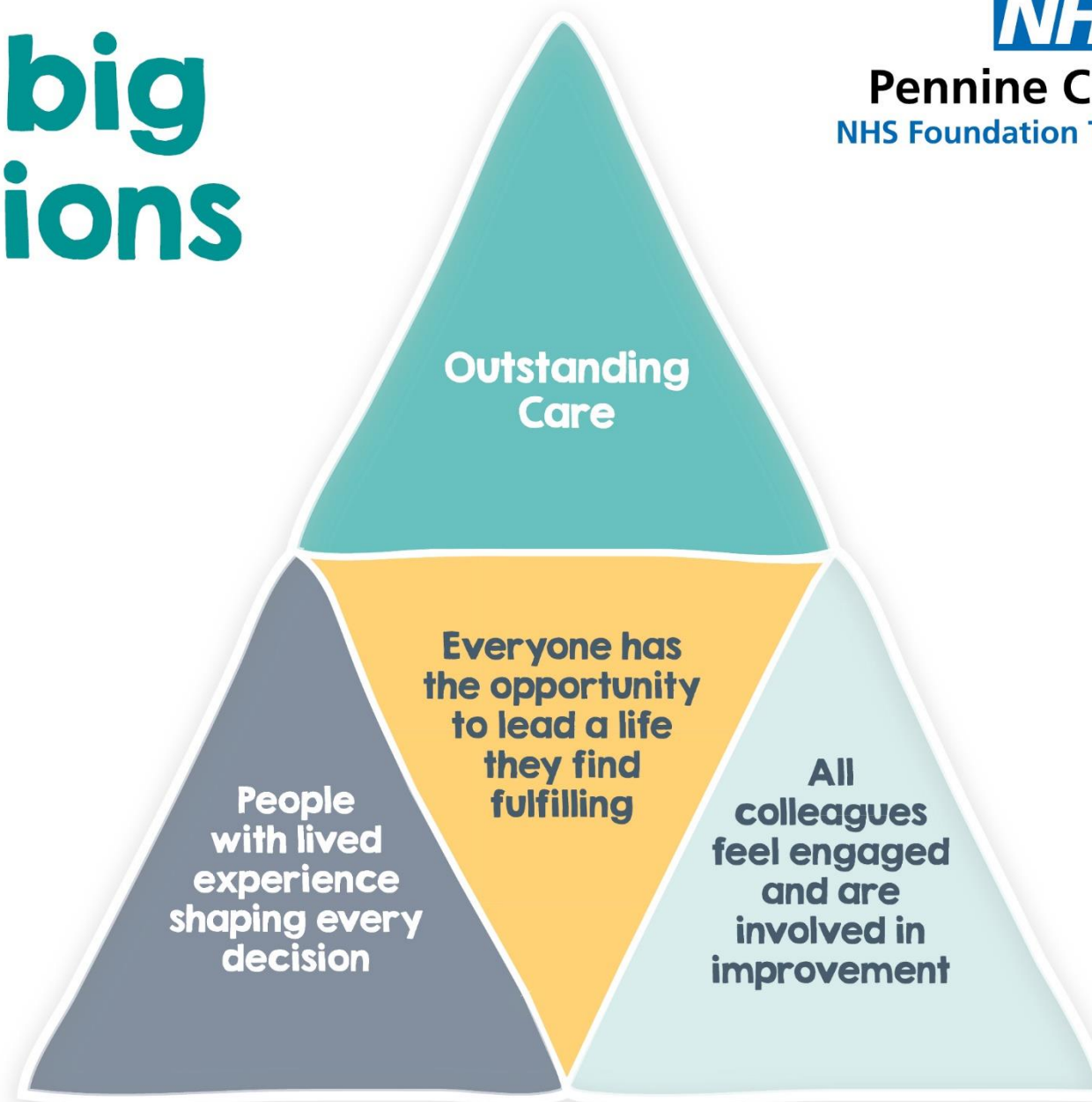




# Our 4 big ambitions



**Pennine Care**  
NHS Foundation Trust







# Key milestones







**Pennine Care**  
NHS Foundation Trust



# Improvements since CQC inspection in 2018

CQC said	We did
 <b>Medicines to be managed safely</b>	<ul style="list-style-type: none"><li>• All pharmacy posts appointed</li><li>• Senior pharmacy staff at transformation meetings and events to ensure medicines management requirements met</li><li>• Pharmacy staff appointed into home treatment and community team roles</li><li>• Reviewed covert medicine policy and audited practice</li></ul>
 <b>Eliminate mixed sex wards and dormitories</b>	<ul style="list-style-type: none"><li>• All wards are single gender with no shared dormitories</li></ul>
 <b>Care plans meet the communication needs of learning disabilities patients</b>	<ul style="list-style-type: none"><li>• Inpatient assessment</li><li>• Hospital traffic light assessment</li><li>• Learning disabilities traffic light care plan</li></ul>
 <b>Psychological therapies to be provided to all wards</b>	<ul style="list-style-type: none"><li>• Recruitment to inpatient posts</li></ul>

# Improvements since CQC inspection in 2018

CQC said	We did
 <b>Implementation of electronic recording for patient records</b>	<ul style="list-style-type: none"><li>• Electronic patient record system, Paris, to all inpatient and outpatients teams, and rolling out to psychological therapies and older people's services</li></ul>
 <b>Advocacy services to be made accessible to all patients</b>	<ul style="list-style-type: none"><li>• All care hubs have access to advocacy services</li></ul>
 <b>Alternatives to ward admissions</b>	<ul style="list-style-type: none"><li>• Daily and weekly huddles to manage patient flow</li></ul>
 <b>New values and vision to be implemented</b>	<ul style="list-style-type: none"><li>• Vision, values, and behaviour framework</li><li>• Strategy launched reflecting our four big ambitions</li></ul>

# Improvements since CQC inspection in 2018

CQC said	We did
 <b>Improve diversity and equality</b>	<ul style="list-style-type: none"><li>• Published anti-racist statement and transgender and non-binary statement</li><li>• Focus on diversity in recruitment to reflect our communities</li><li>• Developed and extended staff networks</li><li>• Developed anti-racist action plan</li><li>• Anti-racist survey with action plan</li></ul>
 <b>Lack of development opportunities for managers/leaders</b>	<ul style="list-style-type: none"><li>• Leadership development programmes</li><li>• Management skills development programme reviewed</li><li>• Board development sessions</li><li>• Apprenticeship scheme for leaders</li></ul>
 <b>Obtain views of patients</b>	<ul style="list-style-type: none"><li>• Patient and carer experience and engagement manager</li><li>• Relaunched Triangle of Care care hub and trustwide forums</li><li>• Co-designed involvement toolkit for staff</li><li>• Patient council for our Talking Therapies service</li><li>• Patients and carers speaking directly to Board, members of project groups and forums, participating in recruitment and training</li><li>• Patient and carer experience feedback calendar</li><li>• Embedding lived experience participants in quality and safety forums</li></ul>

# What our national benchmarking tells us

- Cost per adult acute bed increased from **£88k (2021) to £93k (2022)** - significantly **lower than national average** (£166k in 2021 to £179k in 2022).
- **Spend on community services is low**
  - Generic CMHT cost per patient rose from £1512 (2021) to £1934 (2022) - **considerably below national average** of £4125 (2021) and £4408 (2022) compared to benchmark levels and lack of consistent community services, crisis alternatives.
- Adult acute beds per 100, 000 resident population – **considerably higher than national average over last three years**, 28.2 compared to national average of 20.5. due to lack of community alternatives.
- Child and adolescent mental health services (CAMHS) in **lowest quartile for cost of contact.**



## Other areas of variation identified

- Significant gaps in CAMHS capacity due to baseline levels and increased demand
- Inconsistent alternatives to admission services; gaps in availability, particularly out of hours. Crisis beds only commissioned in Stockport (2 beds).
- Care home liaison team/day hospital services only in two localities.
- Significant variation in medicines and prescribing shared care arrangements across and between localities - creating pressure in both primary and secondary care.



### Other areas of variation identified

- Significant gaps in commissioned neurodevelopment pathway - long waits.
- Significant variation in funding and models across memory assessment services - long waits.
- NHS Talking Therapies models and commissioned levels vary.





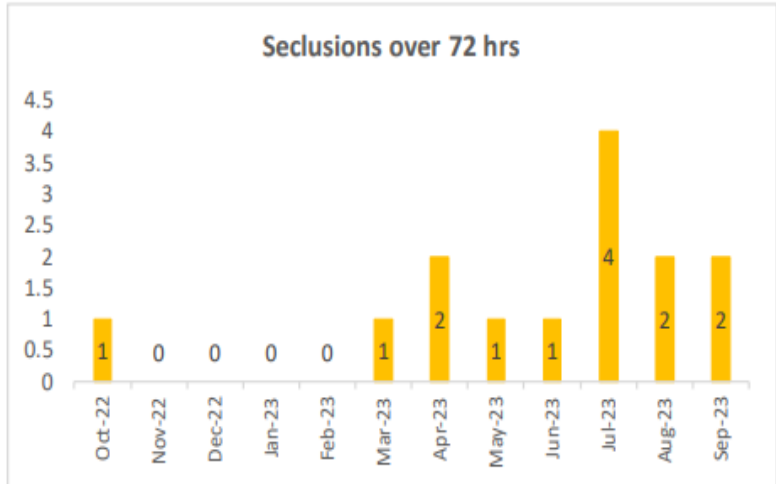
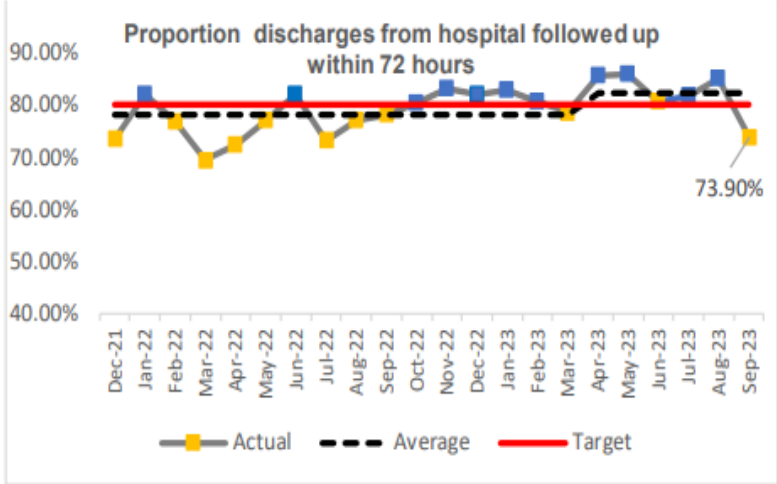
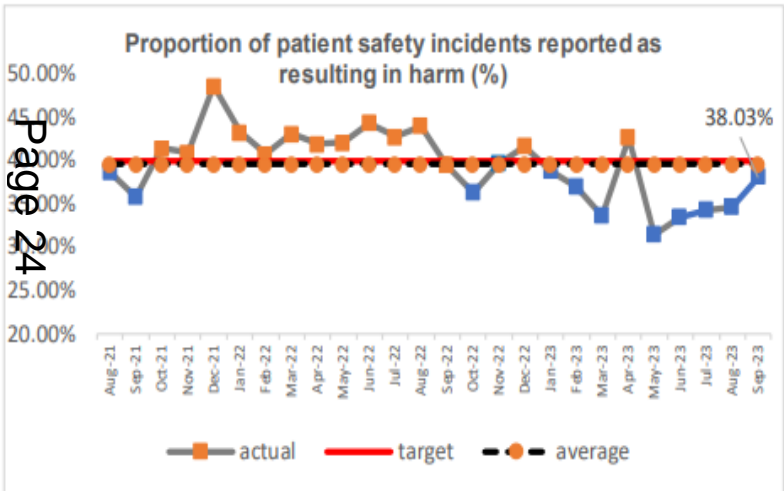
# Quality metrics

# Patient Safety

The proportion of incidents that resulted in harm remains below the 40% threshold with an average of 36.14% since January 2023.

At a Trust level 72 hr follow up remains above the 80% standard, however in month performance has dropped across 4 out of 5 boroughs with Bury & Stockport reporting below the quarterly 80% standard for Quarter 2. Further work is being undertaken to review the position across the Trust.

2 Seclusions over 72hrs have been reported in month

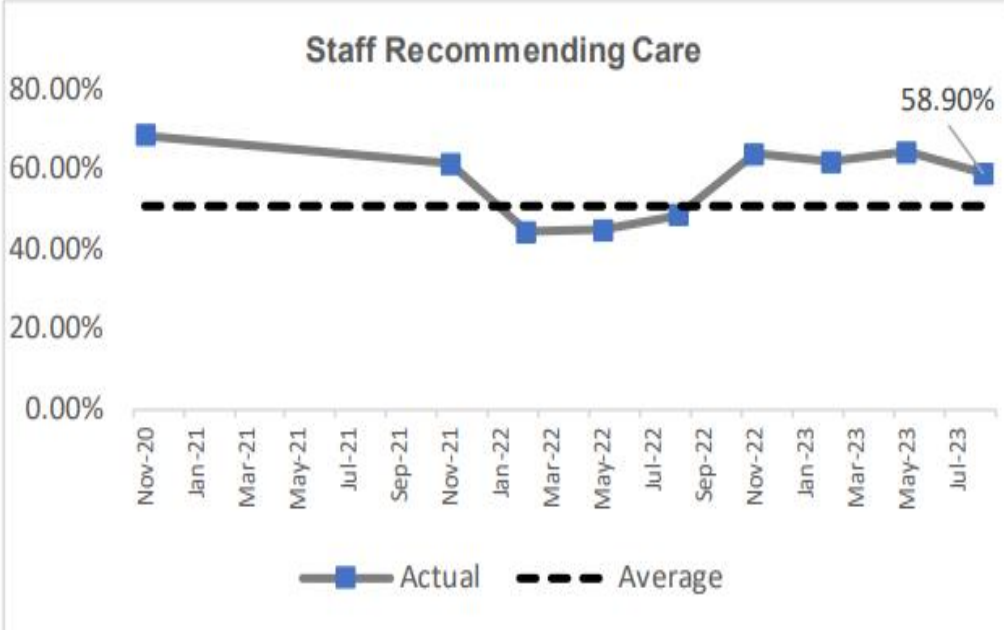
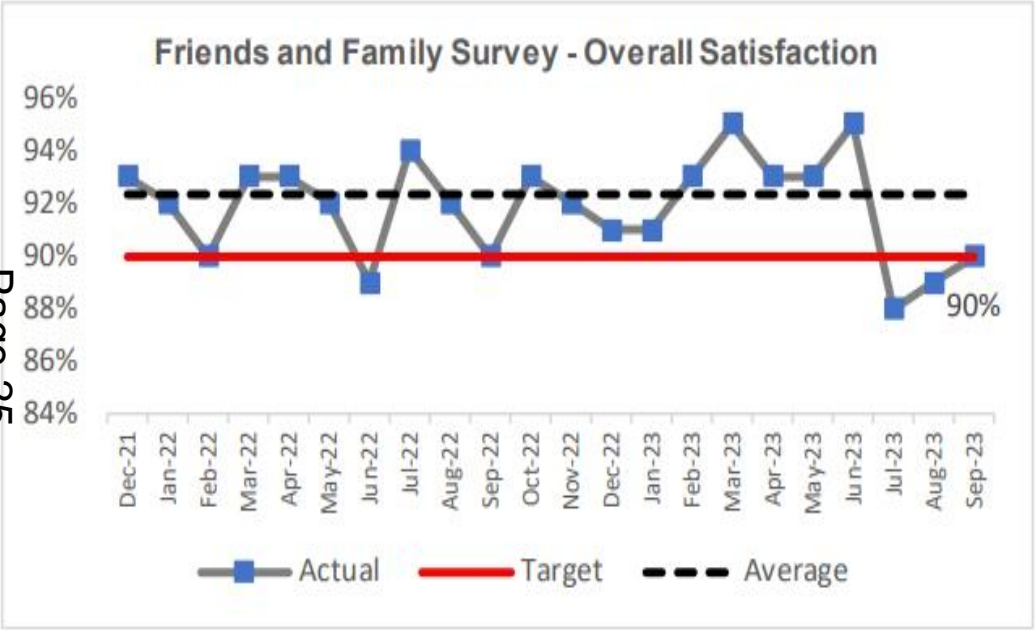


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
<b>Qrtly</b>	76.21%	81.97%	80.46%	84.19%	81.21%
<b>Target</b>	80%	80%	80%	80%	80%
HMR CCG	79.57%	83.33%	80.23%	88.98%	82.80%
Bury CCG	75.00%	76.92%	77.33%	78.65%	78.33%
Oldham CCG	76.32%	87.85%	81.82%	88.79%	88.24%
Tameside CCG	98.28%	87.56%	85.71%	87.50%	82.76%
Stockport CCG	76.24%	86.08%	82.61%	80.19%	79.76%

# Experience of Care

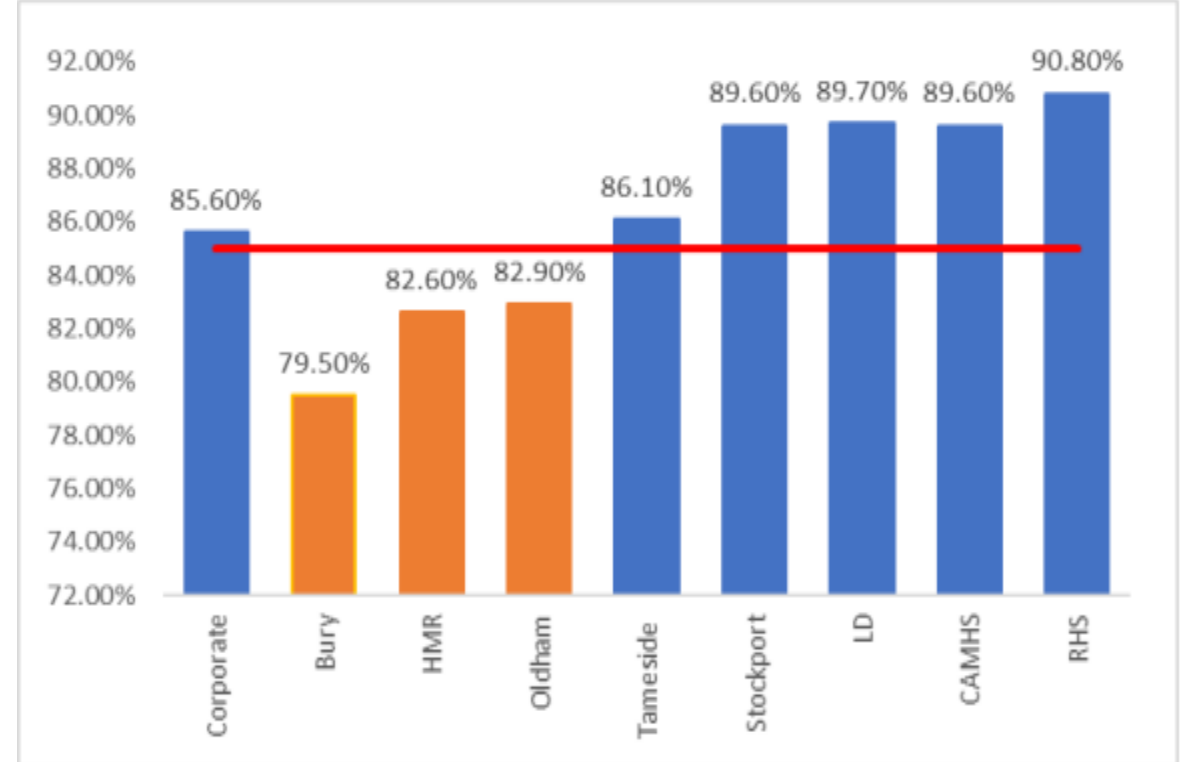
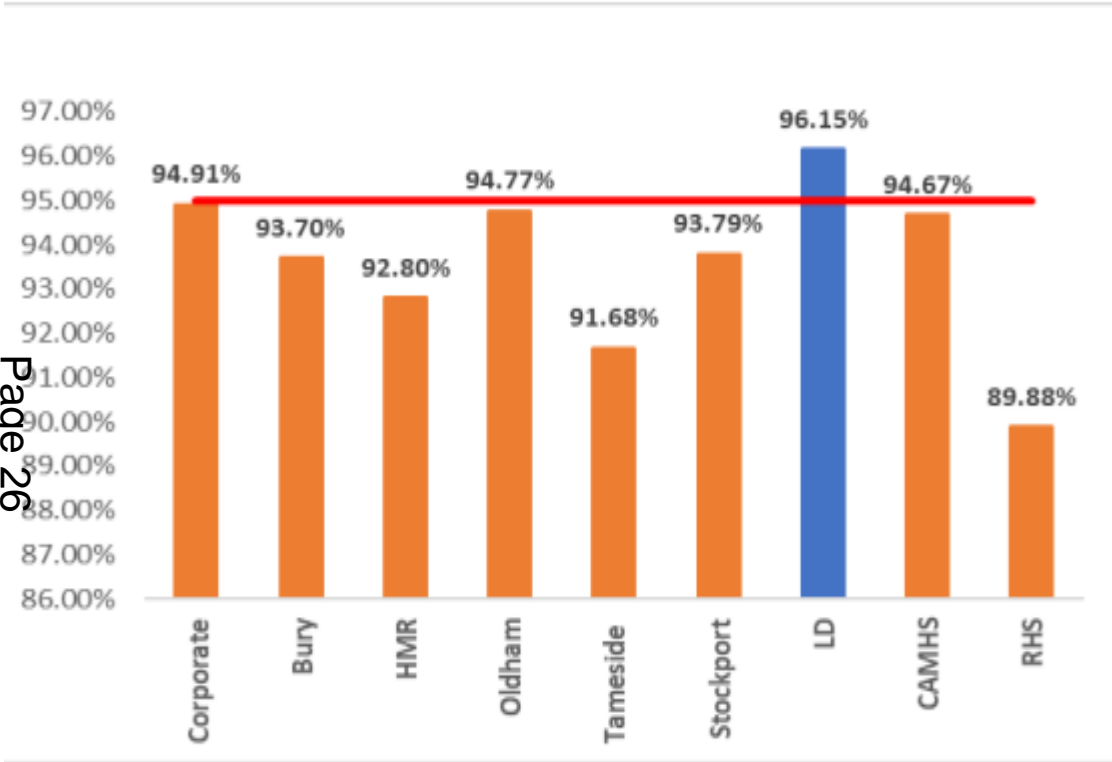
Our overall patient experience score from our friends and family survey is reported at 90% and remains above the national average for Mental Health Trusts. Specialist Services continues to report below the 90% standard with results in our Rehabilitation and High Support inpatient wards reporting at 61%.

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	May-23	Jun-23	Jul-23	Aug-23	Sep-23
North	88%	90%	89%	94%	92%
South	93%	97%	92%	95%	93%
Specialist	94%	97%	86%	87%	89%

# Workforce Data – attendance & appraisal



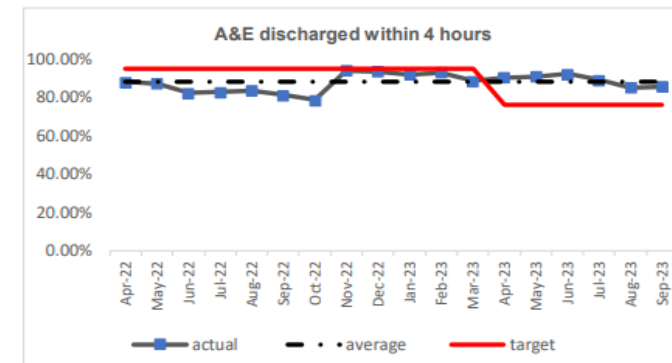
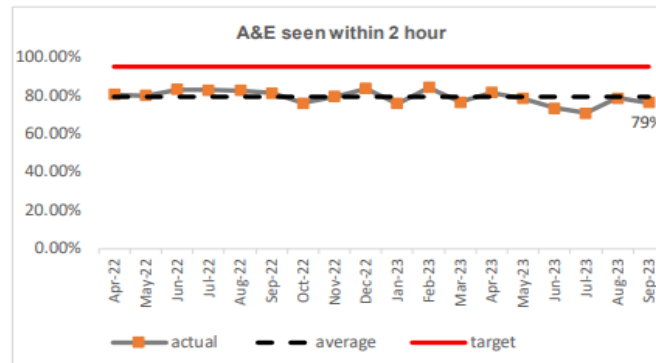
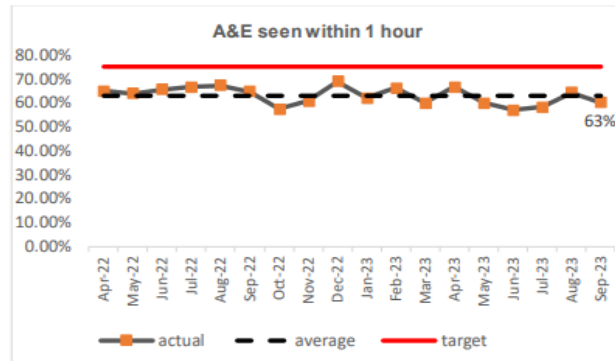
# Community Mental Health

## Access and Crisis

Referrals into the Mental Health Liaison service have averaged around 1300 per month since January 2022; over the last 3 months in particular referrals have started to drop and there were 1055 across all teams during September. A comparison of September 2022 with September 2023 shows that, across the PCFT footprint, the highest number of referrals have been consistently from Oldham patients.

Performance against the 1 hour and 2-hour targets have been consistently below the standard across all borough for over 18 months with ongoing pressures related to staffing capacity, acuity and access to appropriate space within emergency departments contributing to the pressures. Performance in Bury has seen a decline over the past quarter the reasons for which are being explored.

As from April 23 the national standard for 4 hours discharge has been reduced from 95% per month to 76% per month by March 2024. September saw a slight improvement in performance against the 4-hour standard and this remained above the adjusted 76% target.

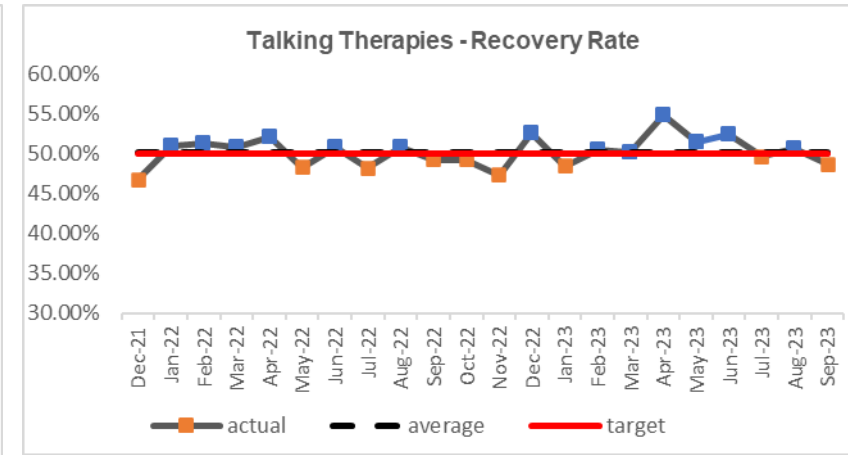
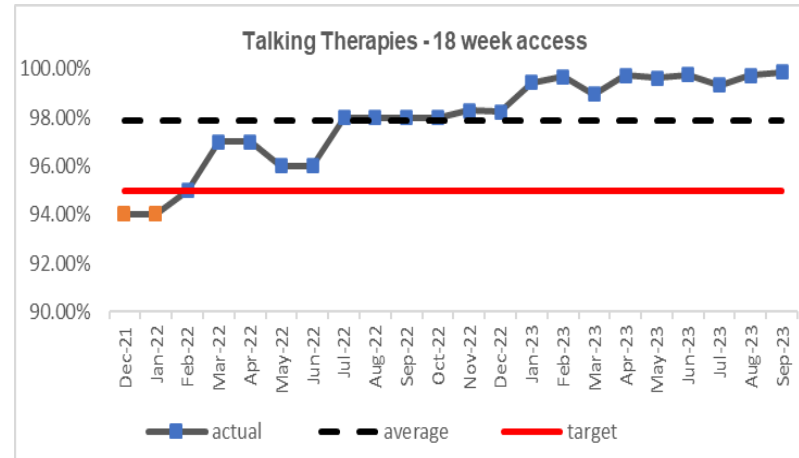
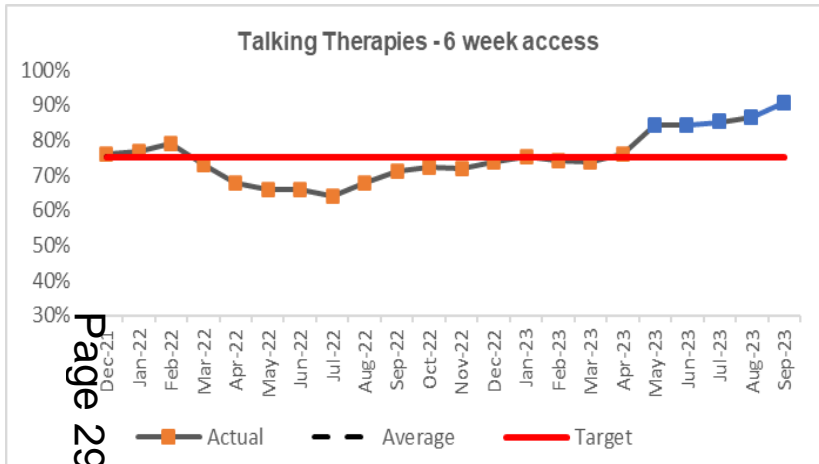


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Cum.in qrt	66.17%	61.50%	62.43%	61.16%	60.88%
Target	75%	75%	75%	75%	75%
HMR	63.84%	54.41%	51.15%	47.78%	61.54%
Bury	61.01%	57.74%	52.24%	54.48%	35.71%
Oldham	61.57%	57.35%	59.21%	64.34%	60.90%
Tameside and Glossop	73.84%	66.00%	71.48%	64.71%	56.21%
Stockport	68.75%	67.19%	66.06%	63.34%	68.82%

	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Cum.in qrt	82.15%	78.96%	78.46%	77.59%	74.87%
Target	95%	95%	95%	95%	95%
HMR	80.13%	75.74%	70.38%	68.89%	69.23%
Bury	83.03%	77.98%	75.37%	71.64%	42.86%
Oldham	78.20%	75.18%	78.38%	79.10%	74.69%
Tameside and Glossop	84.84%	84.57%	80.63%	78.71%	82.65%
Stockport	84.09%	79.78%	81.65%	80.81%	73.20%

	Sep-22	Dec-22	Mar-23	Jun-23	Sep-23
Snap Shot month	82.15%	78.96%	78.46%	92.14%	85.52%
Target	95%	95%	95%	76%	76%
HMR	79.40%	88.60%	79.80%	92.74%	70.00%
Bury	73.10%	88.00%	86.30%	93.10%	100.00%
Oldham	92.10%	98.20%	97.90%	99.08%	79.63%
Tameside and Glossop	61.10%	83.90%	73.10%	76.15%	80.19%
Stockport	95.80%	100.00%	91.10%	97.52%	99.24%

# Specialist Mental Health Provision: Talking Therapies

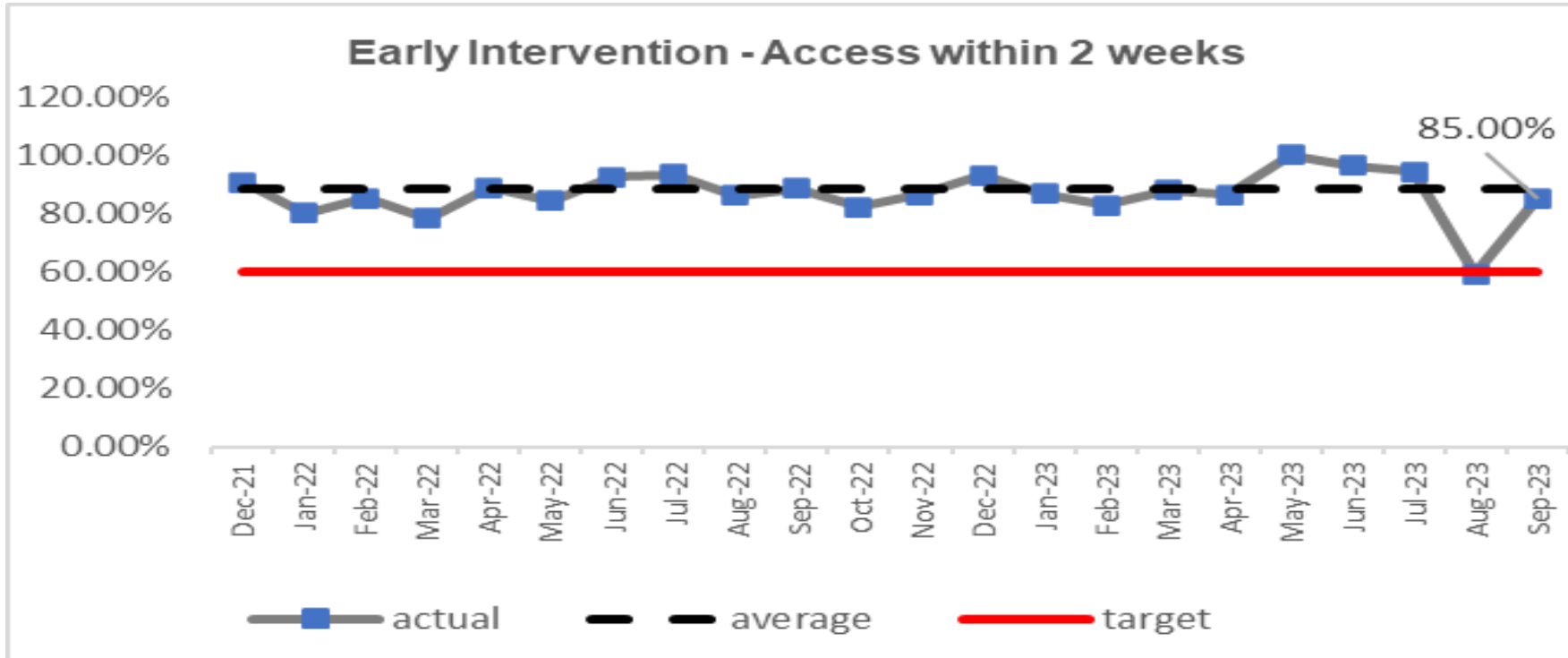


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Qrtly	67.69%	72.58%	74.42%	81.63%	87.38%
Target	75%	75%	75%	75%	75%
Tameside	84.84%	91.26%	93.10%	96.13%	97.12%

	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Qrtly	98.09%	98.15%	99.34%	99.75%	99.73%
Target	95%	95%	95%	95%	95%
Tameside	99.84%	100.00%	100.00%	100.00%	100.00%

	Sep-22	Dec-22	Mar-23	Jun-23	Aug-23	Sep-23
Snap Shot month	49.20%	52.50%	50.20%	51.40%	50.70%	48.70%
Target	50%	50%	50%	50%	50%	50%
Tameside	50.50%	49.10%	51.00%	51.90%	56.00%	50.90%

# Specialist Mental Health Provision: Early Intervention Services

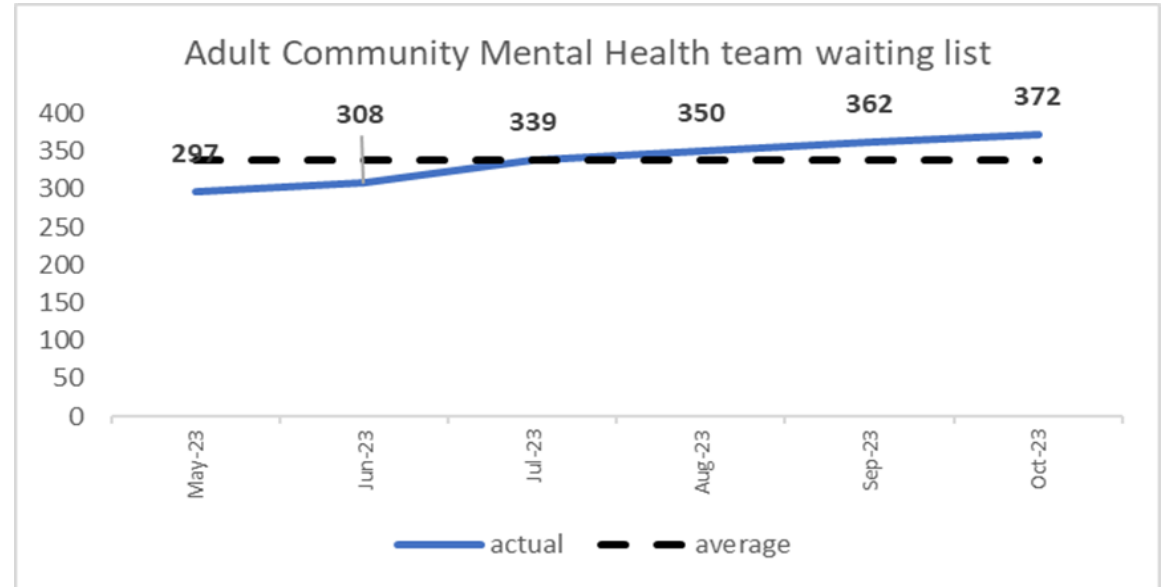
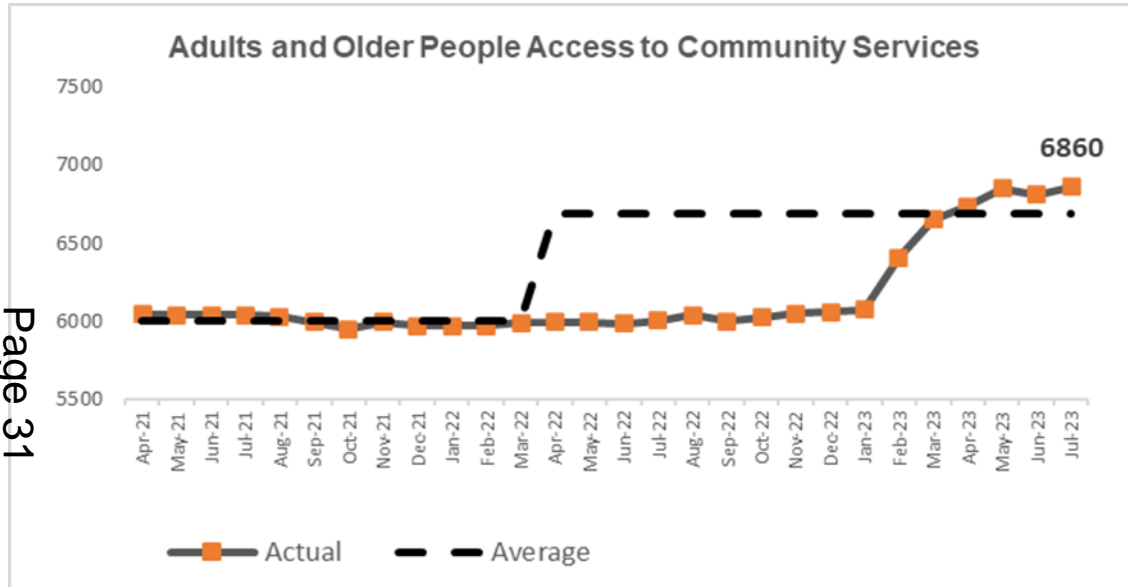


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Qrtly	89.36%	86.73%	86.60%	94.87%	79.07%
Target	60%	60%	60%	60%	60%
Tameside	82.35%	60.00%	87.50%	92.31%	77.78%



# Specialist Mental Health Provision: Community Teams

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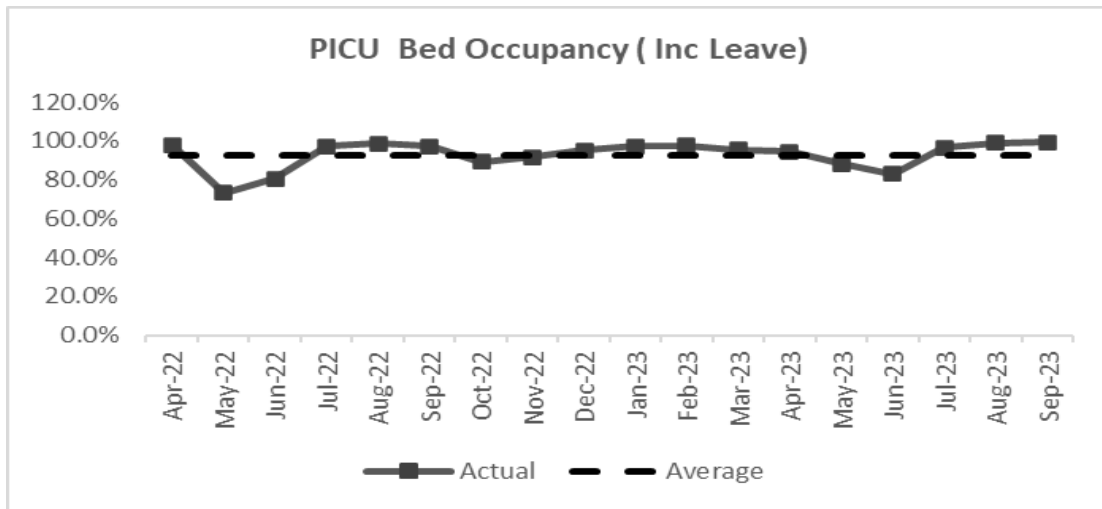
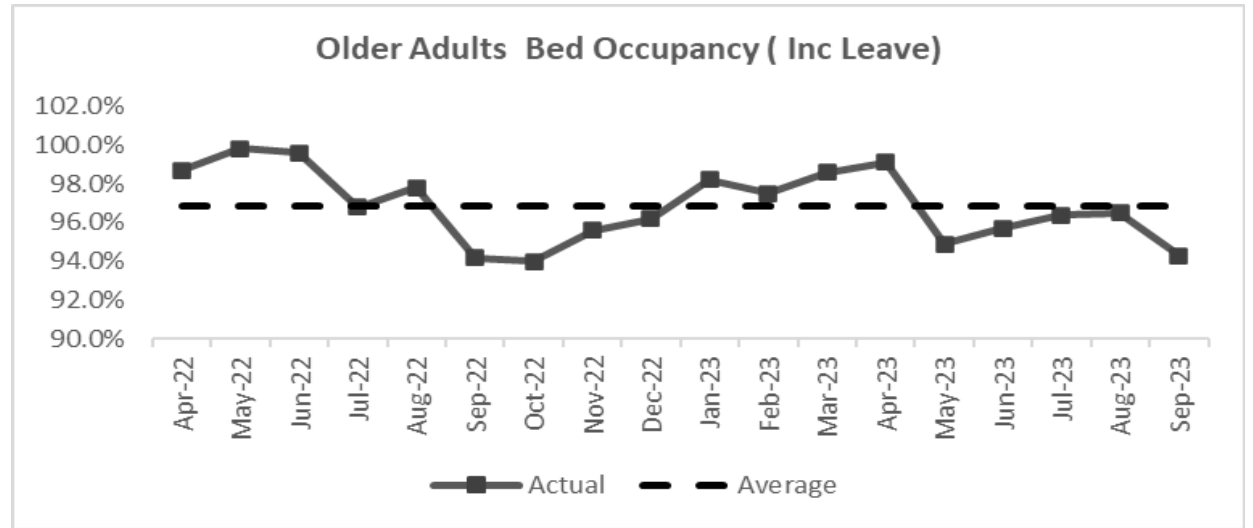
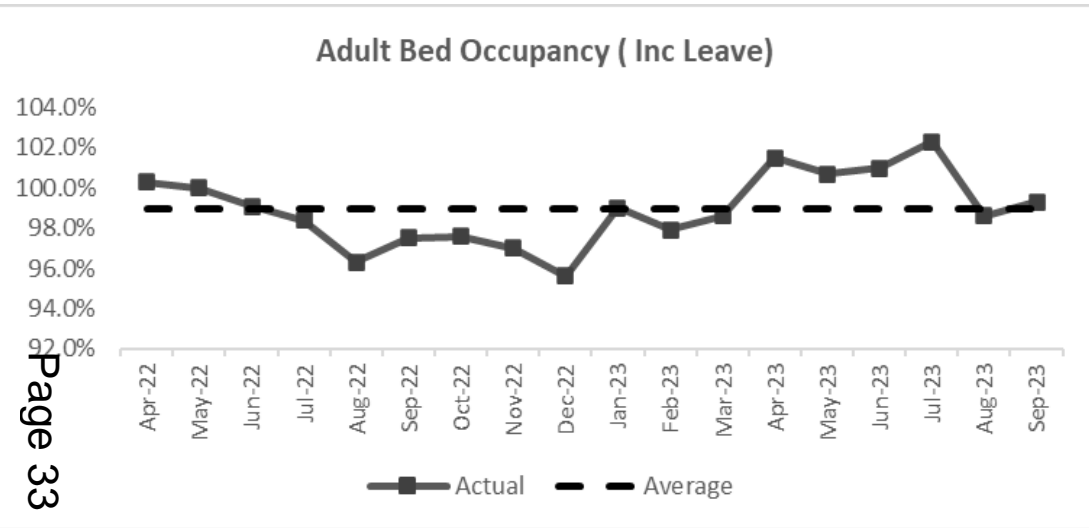


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Rolling 12 month	6000	6060	6650	6810	6860
Trajectory				7100	7100

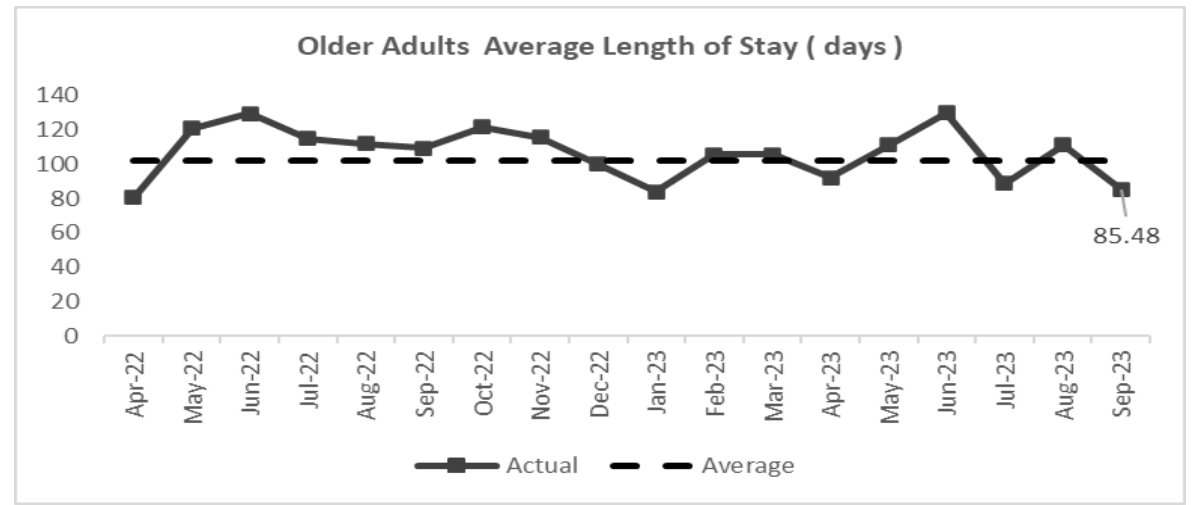
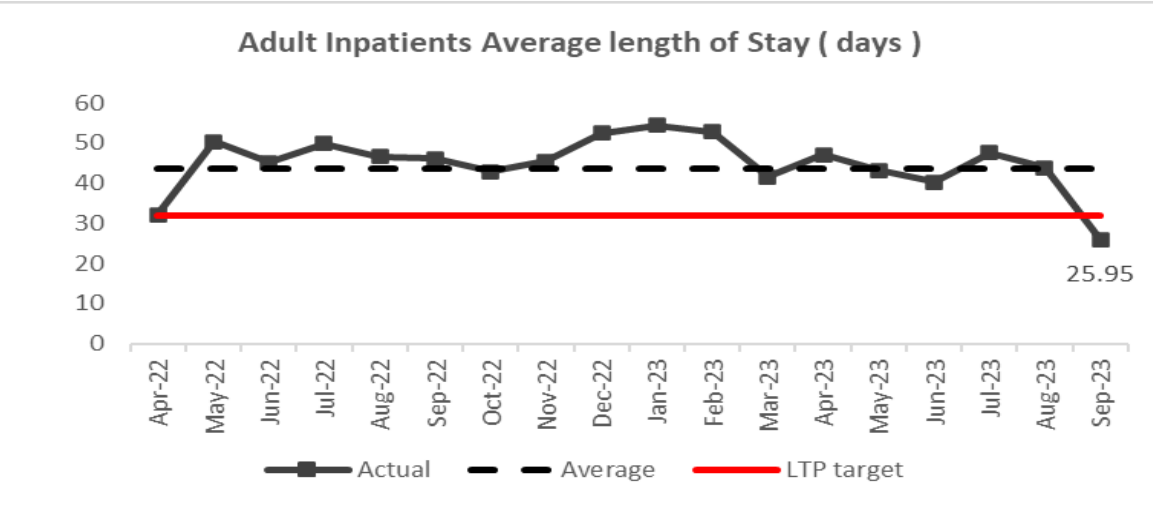
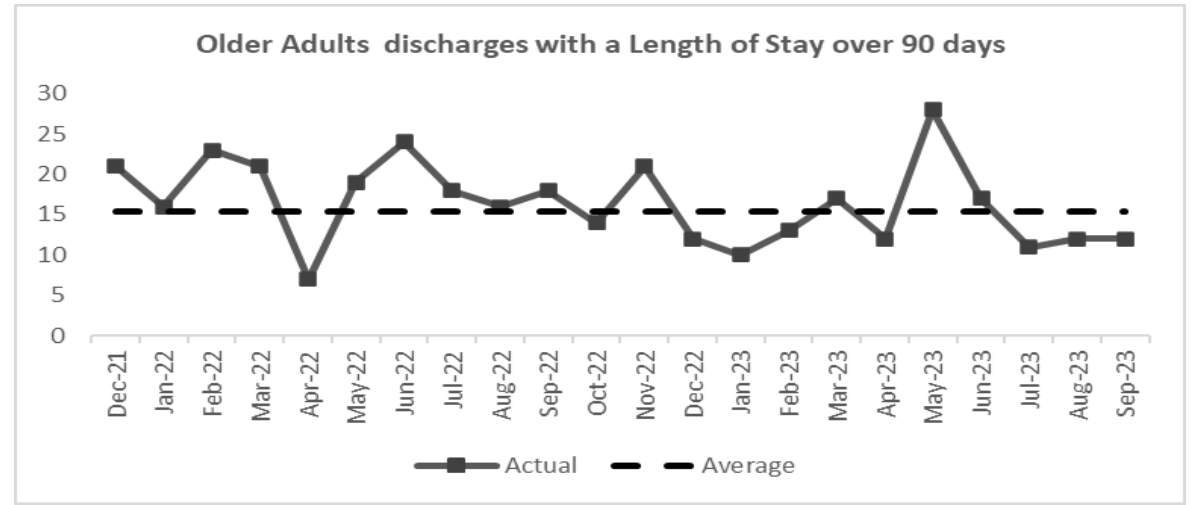
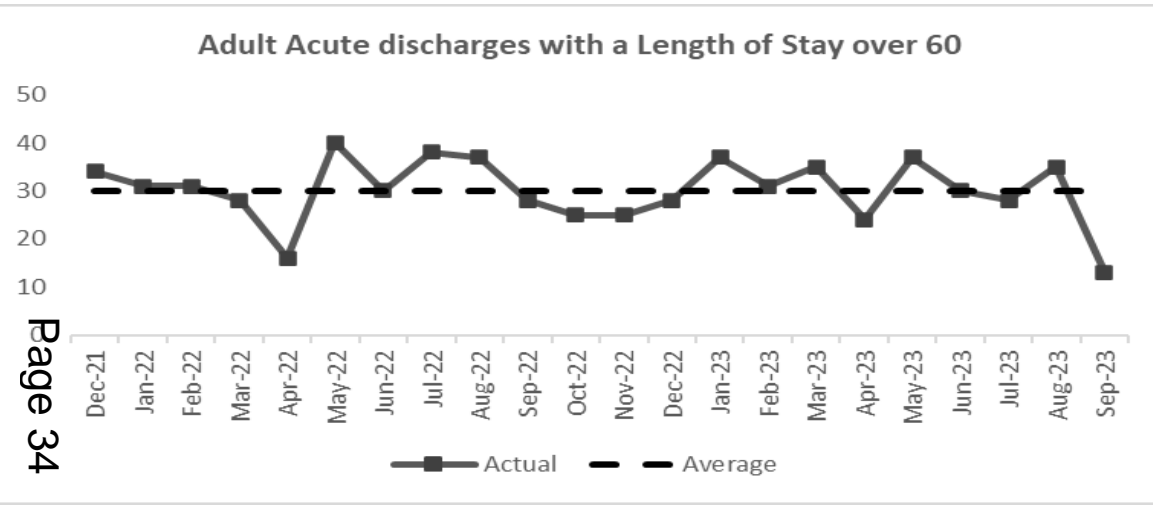
	Sep-23	Oct-23
HMR	16	23
Bury	46	63
Oldham	141	151
Tameside and glossop	87	85
Stockport	60	50

# Inpatient Mental Health

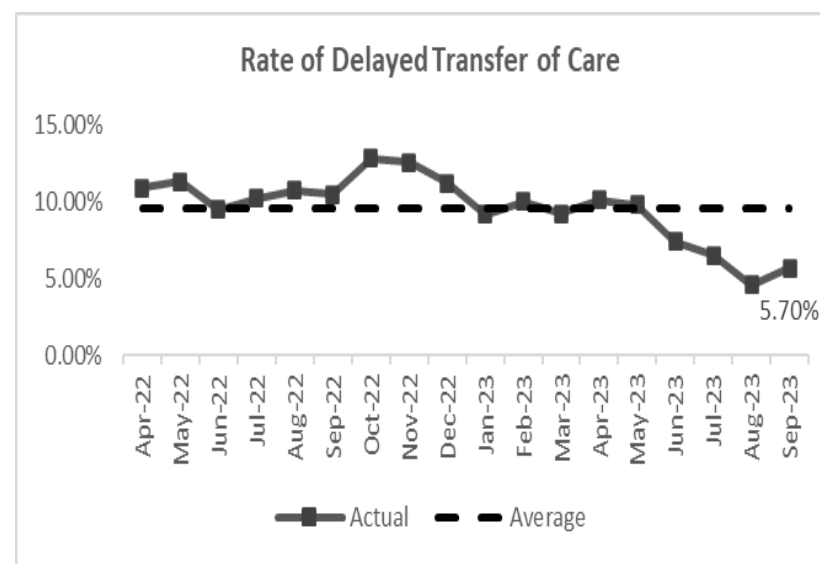
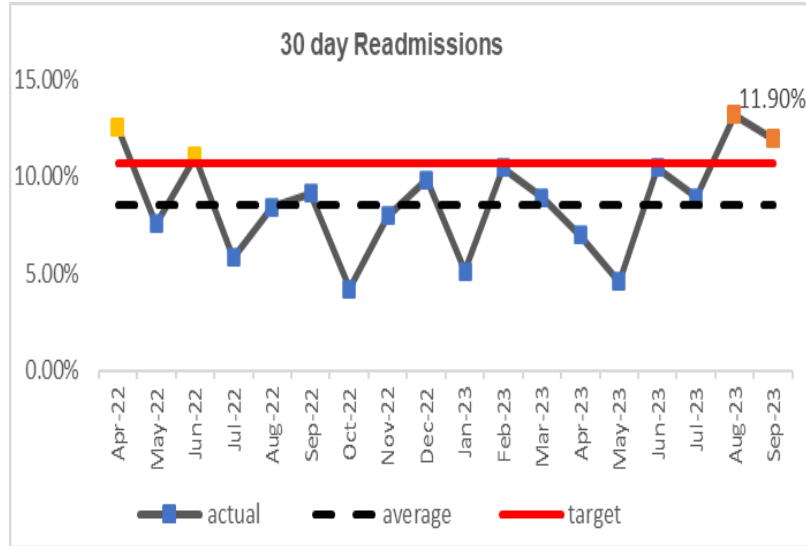
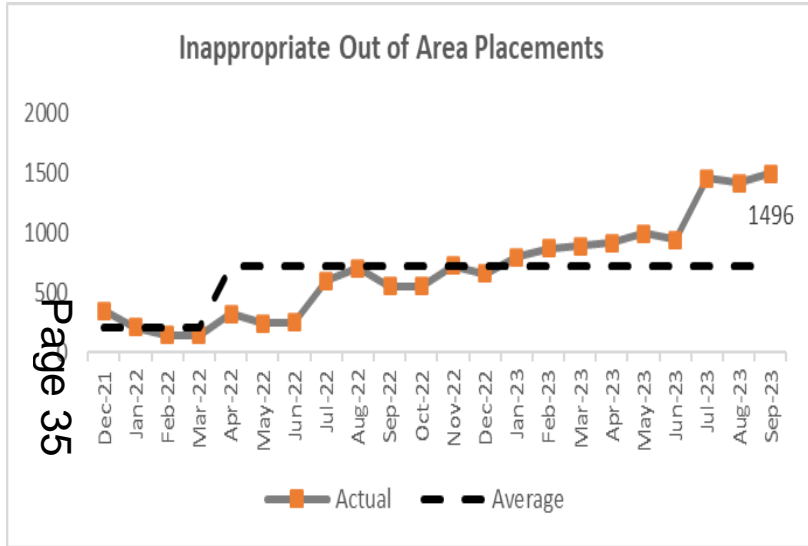
# Specialist Mental Health Provision: Inpatients - Occupancy



# Specialist Mental Health Provision: Inpatients – Length of Stay



# Specialist Mental Health Provision: Inpatients – Out of Area Placements, Delayed Transfers, Readmissions

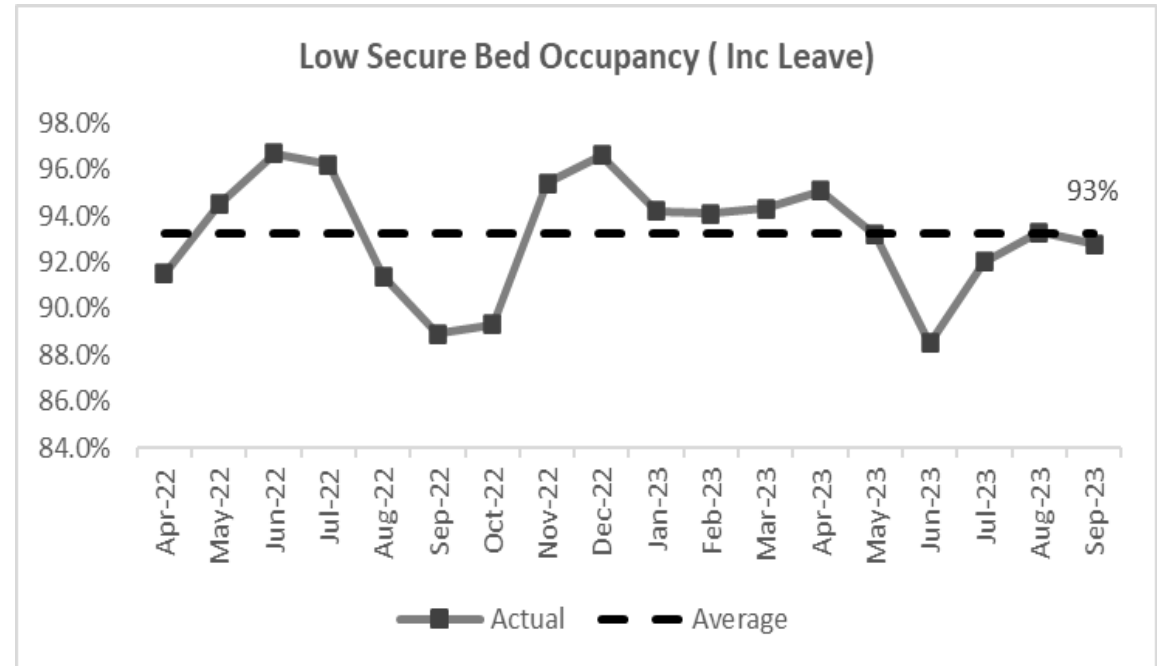
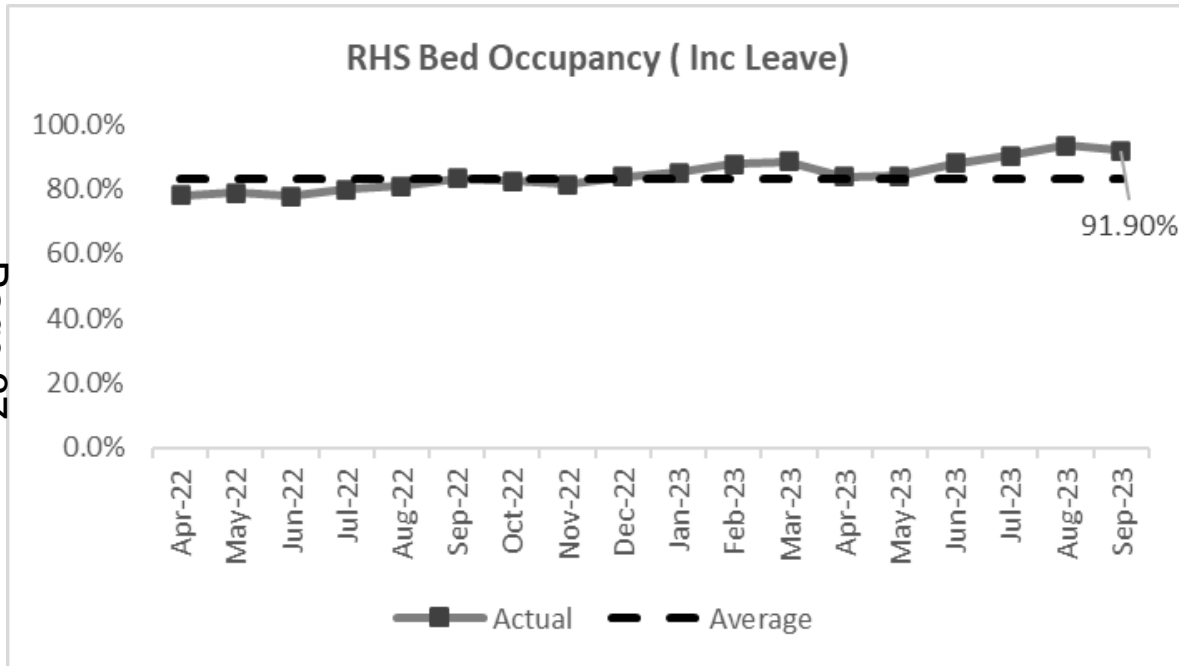


	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
Cum.in qrt	1862	1944	2559	2850	4369
Trajectory	400	400	300	2425	2413
Tameside CCG				385	557

	Qrt 2 22/23	Qrt 3 22/23	Qrt 4 22/23	Qrt 1 23/24	Qrt 2 23/24
n qrt	7.78%	7.35%	8.07%	7.17%	11.42%
:	10.7%	10.7%	10.7%	10.7%	10.7%

# Specialist Mental Health

# Specialist Mental Health Provision: Specialist



# Children and Young People's Mental Health

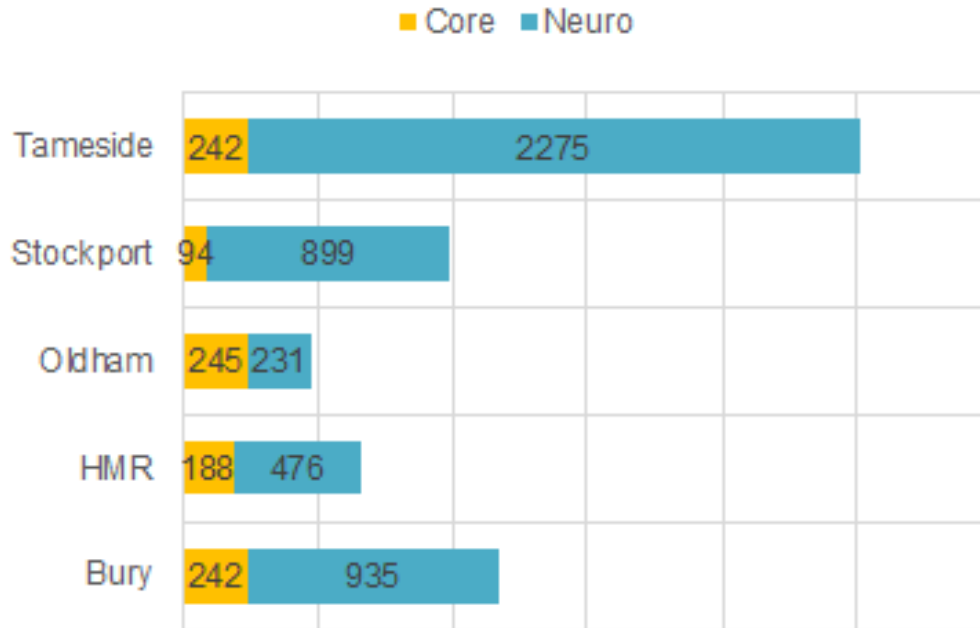


# Tameside: National Benchmarking

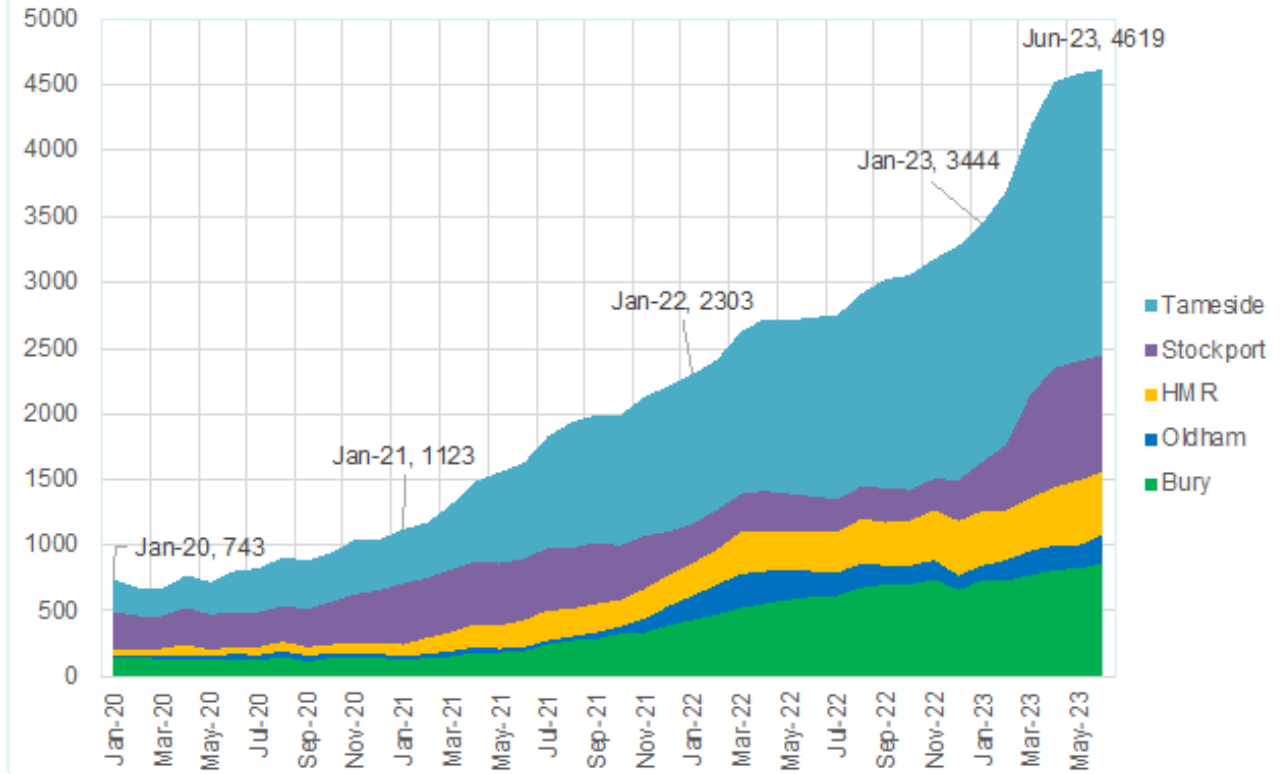
Metric	Low	High	Tameside	National Mean	National Median
Referrals received per 100,000 population			8,535	4,869	4,473
Referral acceptance rate (%)			76%	77%	76%
Mean waiting time to 1st appointment (weeks)			11	9	7
Mean waiting time to 2nd appointment (weeks)			23	15	12
Waiting list (1st appointment) at 31st March 2022 per 100,000 population			3,060	845	629
Waiting list (2nd appointment) at 31st March 2022 per 100,000 population			3,598	674	401
Conversion rate (%)			74%	72%	73%
Patients on the caseload per 100,000 population (0-18)			4,379	2,220	1,923
Contacts delivered per 100,000 population (aged 0-18)			48,944	30,353	26,434
Contacts delivered per clinical WTE			616	337	321
Proportion of contacts delivered non face to face (phone or digitally)			63%	52%	54%
Proportion of non face to face contacts delivered digitally			6%	35%	31%
Community CYPMHS workforce per 100,000 population (0-18)			108	117	114
Community CYPMHS cost per 100,000 population (0-18)			£6,291,976	£7,637,744	£7,363,237
Cost per contact (£)			£129	£285	£251
Inpatient staff per 10 Beds			...	45	42

# Pennine Care Current Position for CAMHS in Tameside

### Waiters by locality



### Neurodevelopment waiting list growth over time - Jan 2020 to June 2023



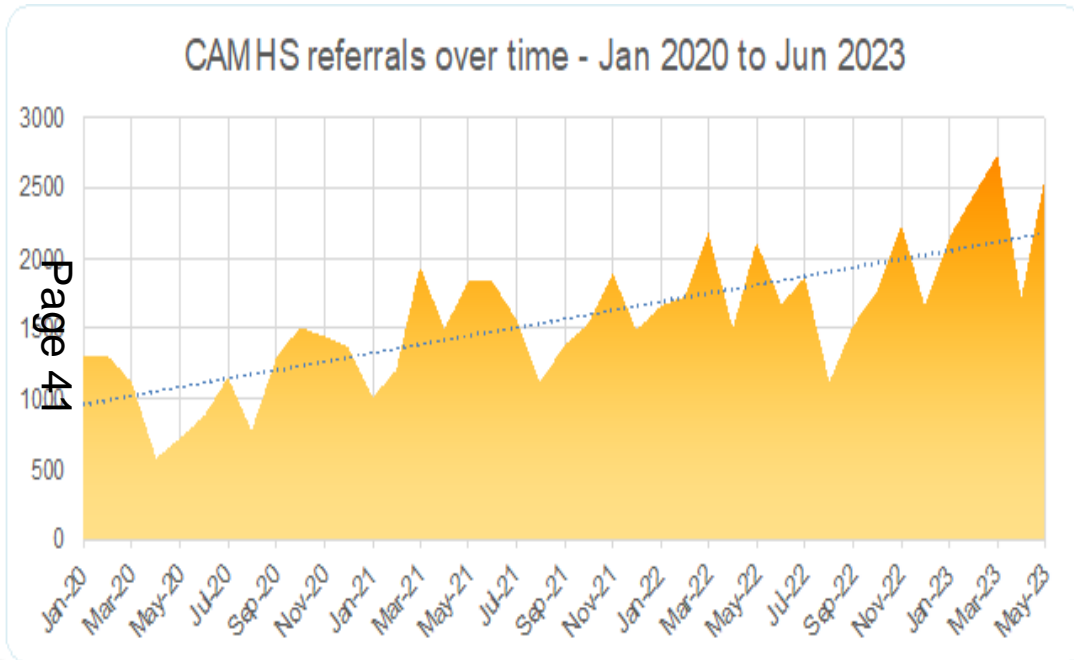
# Pennine Care Current Position for CAMHS in Tameside



**Pennine Care**  
NHS Foundation Trust



**Greater Manchester**  
Integrated Care



Locality	Total population	Population estimate: age 4-16	Referrals 1 Jun '22 to 31 May '23	Referrals as percentage of school age population
Bury	193,800	37,210	3,857	10.37%
Oldham	242,100	52,052	2,673	5.14%
Rochdale	223,800	45,208	1,576	3.49%
Stockport	294,800	52,474	2,650	5.05%
Tameside	231,100	42,522	2,654	6.24%

# Pennine Care Current Position for CAMHS in Tameside



**Pennine Care**  
NHS Foundation Trust

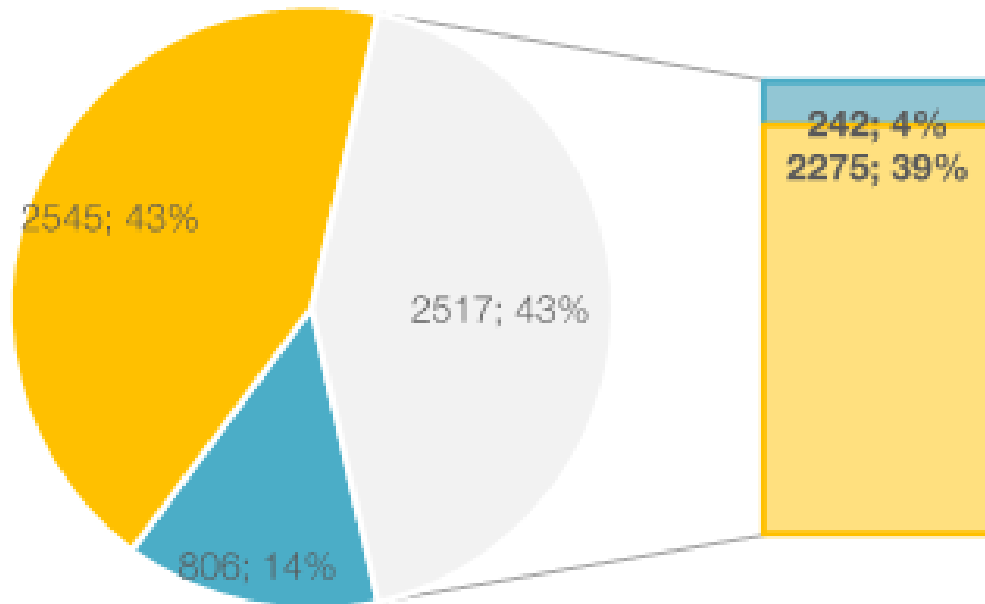


**Greater Manchester**  
Integrated Care

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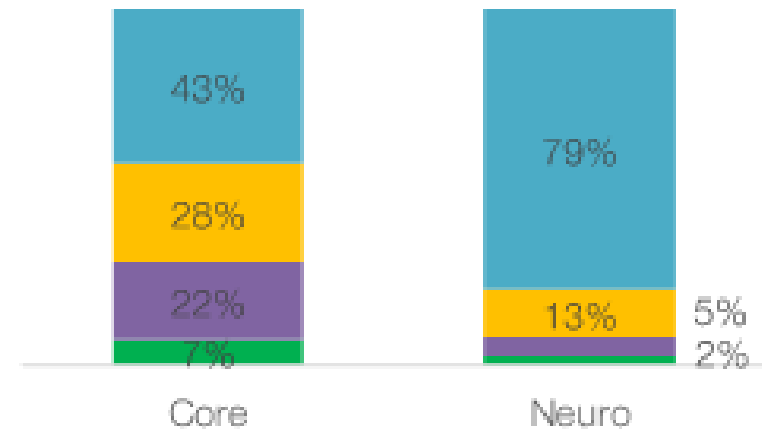
## Total waiting list

Core Neuro Tameside Core Tameside Neuro



## Tameside CAMHS waiters by length waited per pathway

Under 4 weeks 4-9 weeks  
10-17 weeks 18 weeks and over



# Additional Community Services: CYP ND Pathways – snapshot/examples

## OKE Health Navigator

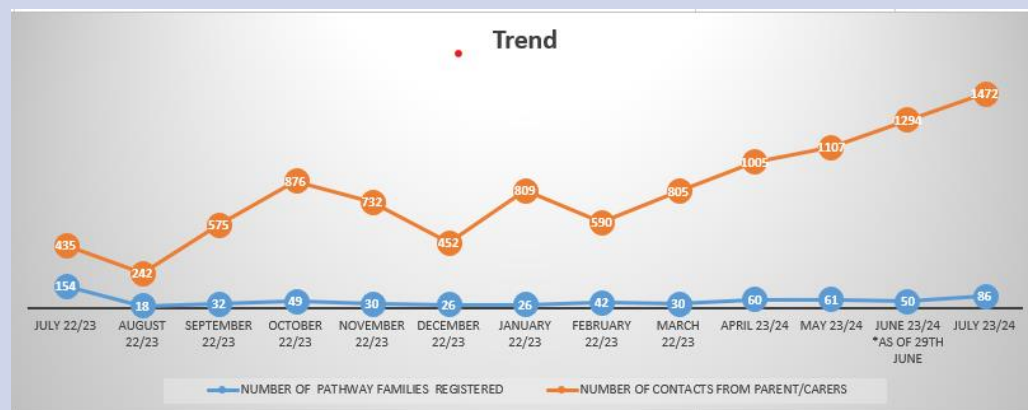
### Number of families registered:

- Jul/Aug 23: 86 Total to date: 664
- Number of contacts with parents/carers:
- Jul/Aug: 664 Total to date: 10394

## Starling Introduction to Neurodiversity Training

- 612 professionals trained (since commencing of scheme)
- This includes professional such as: Teachers, SENCOs, Youth Justice Workers, Social Workers, VCSE, Faith organisations, CGL, Parenting Team, Family Support Workers.
- On average around 150-200 people per quarter. E.g March - June 2023 = 152 attendees at 4 training events.

## Active Tameside Participation Officers



## Active Participation Officers

SEND Participation - Young People and Families Supported				
	Jan-23	Feb-23	Mar-23	Q4 Total
Total Young People Supported:	Total: 43 (30 Males / 13 Females)	Total: 34 (18 Males / 16 Females)	Total: 53 (41 Males / 12 Females)	130
Total Families Supported:	Total: 17	Total: 14	Total: 27	58

# Additional Community Services: CYP ND Pathways – snapshot/examples

## Community Hive –

MH Support age 8-18, professional referral not necessary. Available via hubs across locality.

Number of clients receiving support: Q4: 179 Q1: 317

Number of referrals: Q4: 214 Q1:213

22/23 Total: 546

Except for Christmas and holiday periods there has been steady increase in CYP accessing support.

## MHST

Q4 Total Number of referrals: 144

Total number of CYP receiving support: 114

### Active Body /Active Mind

	Jan-23	Feb-23	Mar-23
Young People on programme	168	168	145
Male	84	84	91
Female	84	84	54
Age 6-11 (Primary)	162	162	60
Age 11-16 (Secondary)	6	6	85
BME	28	28	35
Disability	3	3	6

## Kooth

Online support, no referral needed CYP age 10+

New registrations: Q4 328 Q1: 452

Annual total 22/23: 912 registrations

2.5% of total CYP population reached in rolling 12 month period.

Most common reasons users accessed support: Anxiety 41%; Self harm 31%; suicidal thoughts 25%



# Additional Resources

## MENTAL HEALTH AND EMOTIONAL WELLBEING SUPPORT

**I need help now:**

**Pennine 24/7 Helpline: (freephone)**  
Our Mental Health Helpline is here for anyone in our areas requiring urgent mental health support – this includes people already known to mental health services, those who are not known and carers.  
**0800 014 9995**  
24 hours a day 7 days a week  
[www.penninecare.nhs.uk/help](http://www.penninecare.nhs.uk/help)

**Talk to an adult, friend or somebody that you trust as soon as you can.**

**Childline**  
Call 0800 1111 or visit [www.childline.org.uk](http://www.childline.org.uk)

**Samaritans**  
A confidential national helpline supporting people in mental health crisis  
**08457 90 90 90**  
[www.samaritans.org](http://www.samaritans.org)

**Papyrus**  
Papyrus offers support to young people feeling suicidal  
[www.papyrus-uk.org/help-advice](http://www.papyrus-uk.org/help-advice)

**I need advice or help:**

**OKE**  
Health Navigator Service – advice and additional support for health and mental health services for parents  
[www.facebook.com/ourkidsyeses.uk/](https://www.facebook.com/ourkidsyeses.uk/)  
Tel: 0161 342 5550 Mob: 07867484290  
Email: [oketameside@gmail.com](mailto:oketameside@gmail.com)

**Community Hive**  
For mental health and emotional wellbeing the Community Hive offers walk in support in accessible neighbourhood locations  
[www.togmind.org/youth-in-mind/community-wellbeing-offer](http://www.togmind.org/youth-in-mind/community-wellbeing-offer)

**Early Help**  
Family Information Service on 0161 342 4260 for help and advice on Early Help Services available.  
**Monday to Wednesday: 8.30am - 5pm**  
**Thurs: 8.30am - 4.30pm**  
**Fri: 8.30am - 4pm**  
[www.tameside.gov.uk/Early-Help-Parent-Carer-The-early-help-access-point](http://www.tameside.gov.uk/Early-Help-Parent-Carer-The-early-help-access-point)

**KOOTH**  
Free, safe and anonymous mental health support for young people  
[www.kooth.com](http://www.kooth.com)

**Parenting Support**  
Do you need support, advice and guidance? The Parenting Team are here to support parents, carers and professionals.  
[parentingreferrals@tameside.gov.uk](http://parentingreferrals@tameside.gov.uk)  
**0161 368 7722**  
Please note that e-mails will only be viewed during 8.30am and 5pm - Monday to Friday.

**I need more help:**

**CEDS** **0161 716 4060**  
Our Community Eating Disorders Service offers advice and support to families, carers, and those who work with, or support, a child or young person.  
[www.penninecare.nhs.uk/ceds-south](http://www.penninecare.nhs.uk/ceds-south)

**CAMHS**  
Specialist services to children and young people who are experiencing mental health difficulties.  
Mental Health referrals need to be made by a professional to the single point of access that includes Early Help, Mental Health and Safeguarding. Following triage, the referral will be supported by the most appropriate service.  
[www.penninecare.nhs.uk/tamesidecamhs](http://www.penninecare.nhs.uk/tamesidecamhs)

**NHS**  
**Pennine Care**  
NHS Foundation Trust

**NHS**  
**Greater Manchester**  
Integrated Care

### SELF-REFERRAL EMOTIONAL WELLBEING, SUPPORT AND ADVICE - FOR CHILDREN AGED 8-18

#### CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH AND EMOTIONAL WELLBEING GETTING ADVICE AND GETTING HELP (SEPTEMBER 2022)



**Mental Health Support in Tameside and Glossop**

More information for adults and children's mental health services

Local Offer for SEND



**DERBYSHIRE**  
County Council



Do you have a query around Autism or ADHD and need support?  
ADHD / ASD Consultation Offer



Contact the CAMHS Service on 0161 716 3600 to access one of the Tuesday Consultation slots with one of the Neuro Specialist Team. This could be delivered digitally, over the phone or where there are risks, we can support face to face. You can access more than one consultation appointment if you need to.

**KOOTH Online Counselling and Peer Support Forum**  
(11-25 year olds)  
Free to register, no referral needed



**Community Hive**  
(8-18 Year olds)  
TOG Mind  
Every Wednesday 4-8pm in Ashton, other localities available  
Brief Intervention Walk In  
Online Support

**Families and Young People Can SELF-REFER to the Community Hive - online support and drop ins**

**School Nurse Health Advice Line**

Call 0161-366-2317  
Monday to Friday 9am-4pm



Live information on the Facebook page

There is additional support for young people in schools so please speak to the pastoral lead about accessing support in school. The mental health in schools team is expanding across schools.

[www.penninecare.nhs.uk/tameside-mhsupport](http://www.penninecare.nhs.uk/tameside-mhsupport)

**Early Help**  
Neighbourhood Support and Advice for families in Tameside



### A FAMILY NEEDS SEND HEALTH ADVICE OR SUPPORT



**OKE**  
0161 342 5550  
07867484290  
Contact us:  
[www.ourkidsyeses.org/contact-us/](http://www.ourkidsyeses.org/contact-us/)  
Facebook – OKE Our Kids Eyes

**OKE HEALTH SERVICES NAVIGATOR**

- Friendly advice 7 days a week
- Help you find the support you need in a variety of ways
- Help with queries on pathways

We can connect you to services  
We will listen to you and help navigate the system with you  
We can offer support and advice and keep you up to date on the local offer

**ACTIVE**  
0161 301 6054  
Joel.morton@activetameside.com  
Aiden.hopkins@activetameside.com

**ACTIVE TAMESIDE SEND TEAM**

- Access to supported activities
- Build confidence
- Connect to other services
- About the services

We can find the right support for you  
We can connect you to like-minded people  
We can make you stronger and help you try new things

Call the Access Point:  
0161 342 4260

**SEND FAMILY SUPPORT IN EARLY HELP**

- Access to specialist parenting advice
- Offer group support and interventions to understand your child with additional needs
- Advice on behaviour

We can help you implement strategies  
We can connect you to other families  
We can help you access social care support

### 5 Ways to Wellbeing

**CONNECT** - building connections with family, friends, colleagues or neighbours can support and enrich you every day. Encourage them to join you on a GM Daily Mile, and make your walk more fun and enjoyable.

**KEEP LEARNING** - trying or learning something new or visiting somewhere new can increase your confidence and your self-esteem, as well as being fun. Walking a Daily Mile can help you see new things where you live, and further away.

**BE ACTIVE** - moving makes you feel good, whatever the activity. It helps to release feel good hormones which support your overall wellbeing. Inviting others to walk with you, or sharing a smile and saying hello to other walkers will give you a positive sense of self.

**GIVE** - Giving time or words to others is proven to support wellbeing. Being involved with your community and creating connections with people can be rewarding. Inviting others to walk with you, or sharing a smile and saying hello to other walkers will give you a positive sense of self.

**TAKE AN INTEREST** - enjoying the moment, being aware of the here and now and noticing the world around you can help you appreciate what matters. Being mindful of the present helps you to feel grounded. A GM Daily Mile can take you away from your daily routine and stresses. A perfect chance to switch off and enjoy a nice stroll.

@GMWalks #GMDailyMile  
#GMWalking #ActiveWorkplaces



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