

# **A descriptive analysis of adolescent mental health in Lambeth and Southwark:**

Review of key measures relating to adolescent mental  
health

# Introduction

This is the first report commissioned by Guys and St Thomas charitable trust (GStT) to support the development of their adolescent mental health programme

Subsequent reports will cover further exploratory and spatial analysis and record-level data linkage and utilisation analysis for population sub-groups.

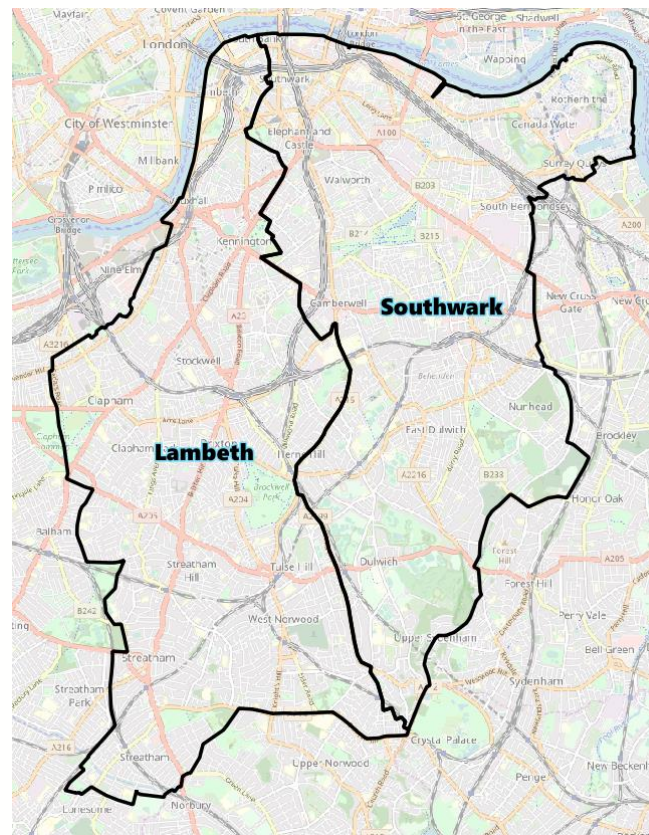
The aim of this stage of analysis is to review published measures, directly or indirectly related to mental health in children and young people. This should help aid with the prioritisation of subsequent analysis and of focus areas for the trust to take forward with their community delivery partners.

# The population context

GStT charitable trust operates within the Lambeth and Southwark local authority district areas in South London. These are contiguous with the health commissioning boundaries - CCGs.

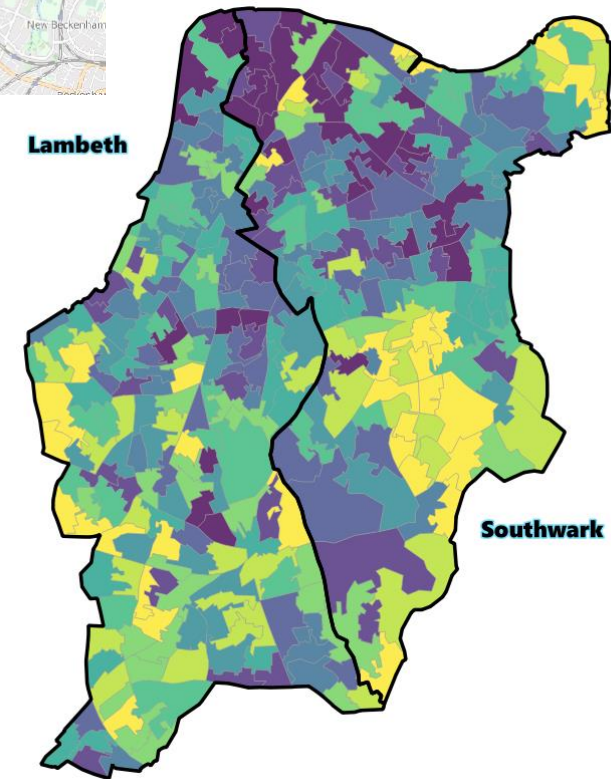
The combined areas have a total population of around 640,000, of which 106,000 (17%) are categorised as adolescent (aged 10-24). The Local Authority profiles for England indicate:

- Low male life expectancy
- High childhood obesity
- Low income
- High crime
- Issues with communicable disease



There are 344 lower super output areas (LSOA) within the 2 areas, with an average adolescent population of 309.

The highest concentrations of adolescents is generally speaking in the North of each district within the bounds of the Overground rail line.



# Loneliness in children and young people



## Main findings:

### Children aged 10-15 years

11.3% children stated they "often" felt lonely, more commonly in children aged 10-12 years than 13-15 year olds

### Increased risk of loneliness in:

- Children receiving free school meals (27.5% vs 5.5%)
- Children in cities (19.5% vs 5% in towns/rural areas)
- Child with low reported health (28.3% vs 10%)

### Children aged 10-15 years

9.8% young people stated they "often" felt lonely.

### Increased risk of loneliness in:

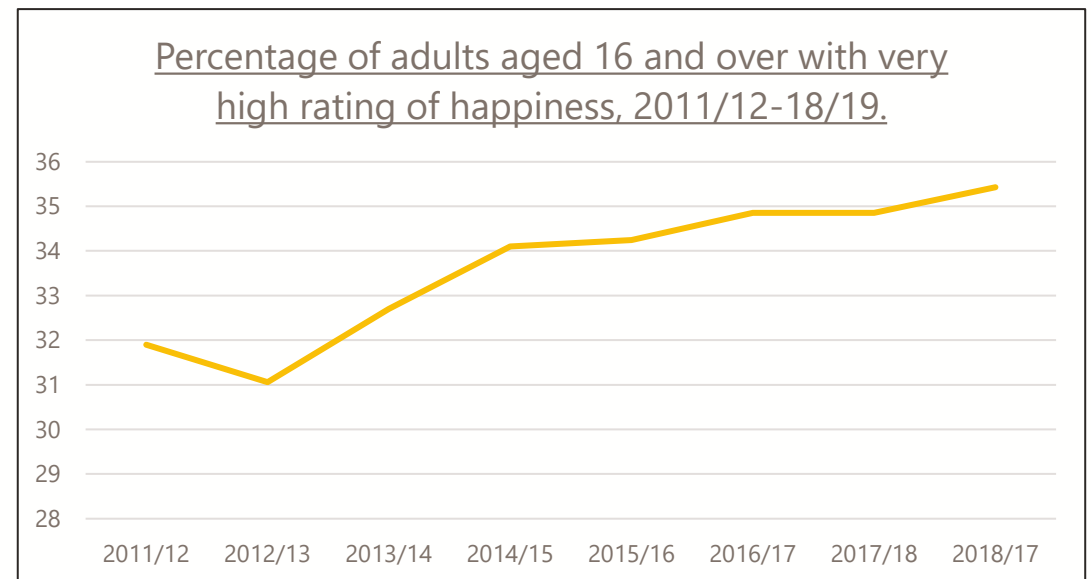
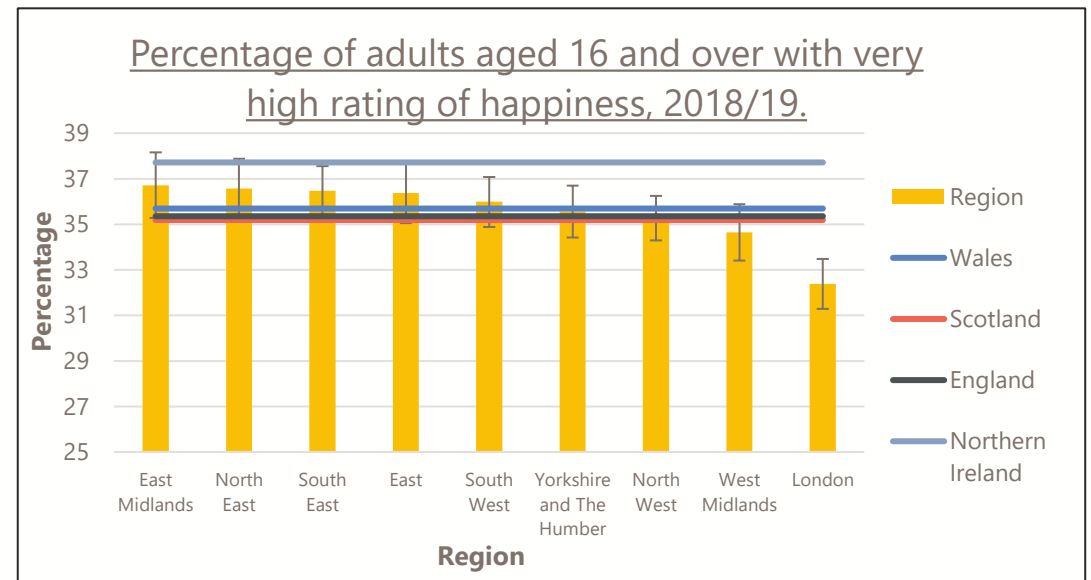
- Young people with long term conditions
- Young males
- Young people living in single adult households



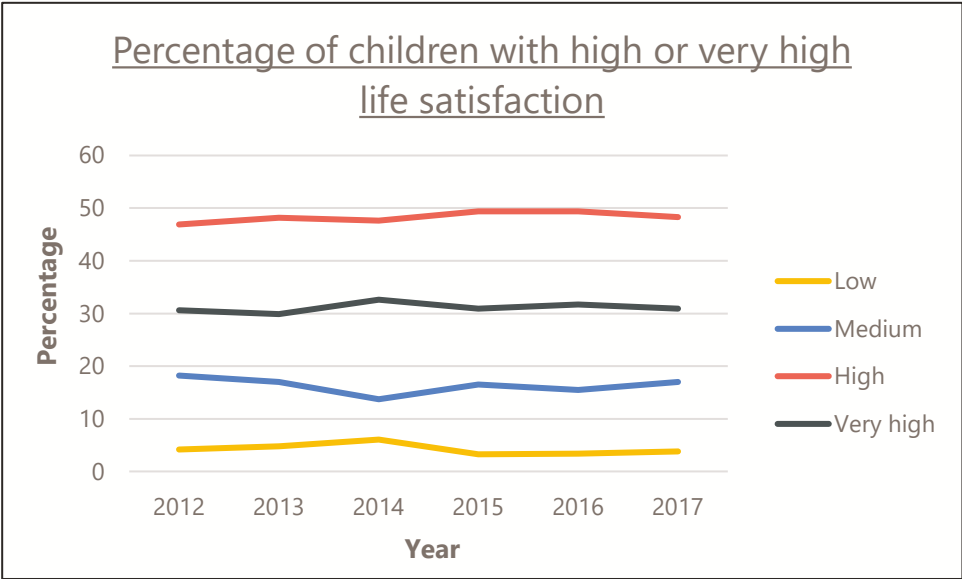
# Measuring National well-being

Adults aged 16 and over were asked to rate on a scale of 0 to 10 where 0 was not at all and 10 was completely. The very high rating are those who responded 9 to 10 on the scale.

While happiness has increased considerably since 2012/13, there are clear inequalities between regions as seen by the proportion of very happy people in London and West Midlands measuring below the national average.



# Children’s well-being measures



Trends in life-satisfaction in children aged 10-15 years have been consistent over the recent years.

The largest proportion of respondents state they feel “high” levels of life satisfaction, followed by “very high”, “medium” and “low” levels respectively.

	2012	2013	2014	2015	2016	2017
Sample size (Number)	3,405	2,892	2,944	1,511	1,433	2,235
1. Children aged 10 to 15 years.						
Source: The Children's Society Household Panel Survey						

The proportion of children reporting low levels has neither increased or decreased significantly over the reporting period.

# List of indicators reviewed

Theme	Indicator
Criminal behaviours and substance misuse	Admission episodes for alcohol-specific conditions - Under 18s
	Crime rates, overall
	First time entrants to the youth justice system
	Hospital admissions due to substance misuse (15-24 years)
	Numbers in Alcohol and Drug Treatment
Crisis and Emergency	Pupil absence (5 -15 years)
	Attendances/Admissions for Self Harm (10 - 24 years)
	Emergency admission rate (0-19)
Family or social circumstance	Suicide Rates
	Care leavers now aged 19, 20 and 21 years
	Cause for concern
	Children in care
	Children in care who were unaccompanied asylum-seeking children (UASC)
	Children in need
	Children in need due to parent disability or illness
	Children leaving care
	Children subject to a child protection plan with initial category of abuse
	Children subject to a child protection plan with initial category of neglect
Family homelessness	
Physical health	Child mortality rate
	Elective admission rate (0 - 19)

Theme	Indicator
Mental Health Needs	Access rates for CYP mental health services
	Estimated prevalence of mental health disorders in CYP
	Estimated prevalence of mental health disorders in CYP
	Estimated prevalence of mental health disorders in CYP
	Hospital Admissions for Mental Health Conditions
	Prescription data - Antidepressants
	Prescription data - Anti-psychotics
	Prescription data - Hypnotic medication
	Pupils with social and emotional mental health need
	Referrals for Eating Disorders
Sexual health	Referrals to IAPT from education providers
	Tier 4' Admissions for adolescents
	Chlamydia detection rate
Systems & Infrastructure	Teenage mothers
	Under 18s Conception rate
Systems & Infrastructure	CAMHS waiting times
	Children on adult wards
	Financial investment in LA MH services
	Homelessness Provision
Systems & Infrastructure	OOA Placements

# Indicators that proved to be unsuitable for review

- Controlled drug prescriptions – Data availability
- CAMHS Waiting times – Data Quality (Lambeth and Southwark – NULL)



# Methods

With the exception of a few specific indicators agreed with the project sponsor, all data was sourced from openly accessible websites (e.g. PHE fingertips, NHS Digital).

To observe variation in each measure, we have plotted the most up-to-date data points for all areas in England on a box-plot with median and quartile bounds. For ease of observation, and to indicate the density, points are 'jittered' (offset at random height from central line) on the plot.

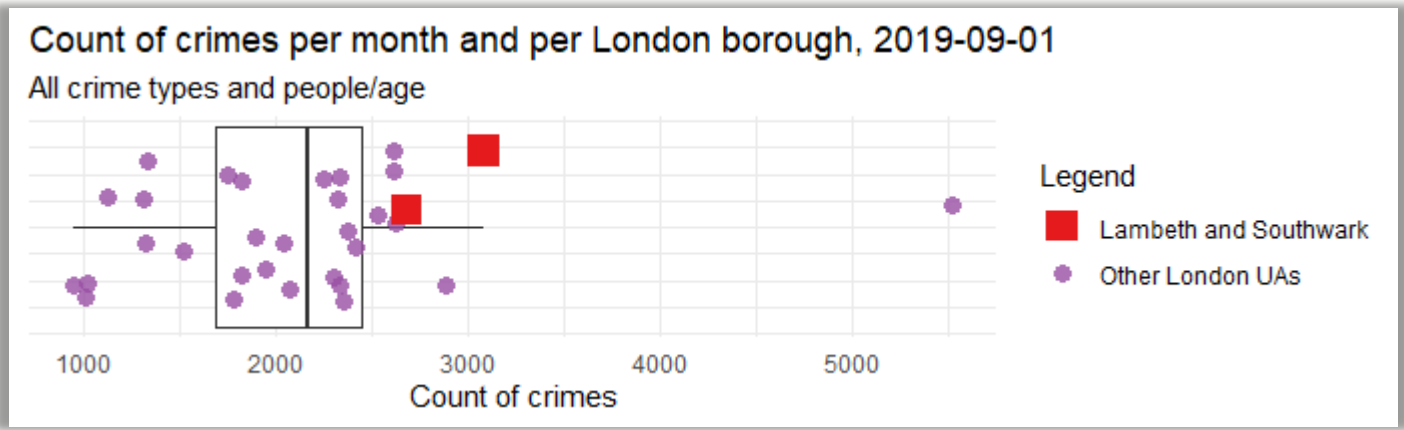
Lambeth and Southwark areas are highlighted with most prominence, other London areas with some prominence and all others shown for context.

Where time-series data are available (3+ time periods), a line chart is provided to demonstrate upward or downward trend in each indicator.

All charts were produced using the R statistical software (version 3.5.3)

# **Indicators on a page**

# Crimes reported according to Home Office classifications - Count



Rationale for selection:  
 Crime rates are much reported and are of central importance to most. The subtle effect of fear, stress and tension on a persons mental health can be lasting and dangerous.  
 Criminal activity can often manifest as a feature of traumatic psychosis, whether as a perpetrator or a victim.

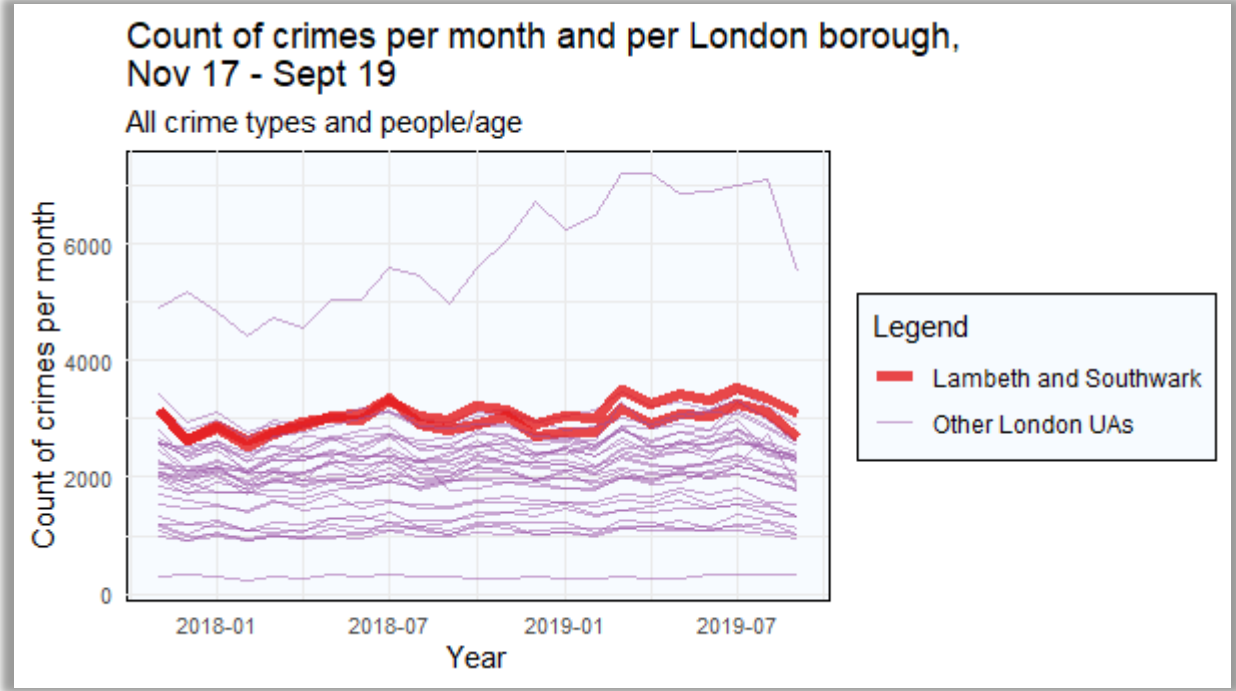
Position:

The count of all crimes in Sept-2019 are as follows:

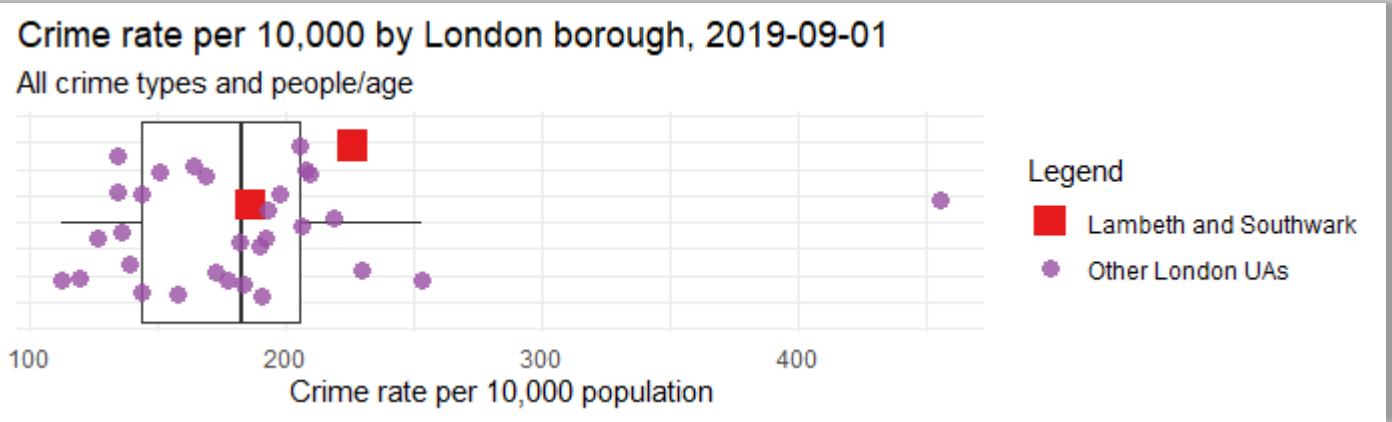
- Lambeth: 2682
- Southwark: 3086

High outlier: Westminster

This puts Lambeth and Southwark above the 3<sup>rd</sup> quartile with two of the highest respective crime counts in London. Levels of deprivation, transient nature of population and the age profile may be influential in the high volume of crimes.



# Crimes reported according to Home Office classifications – Rate per 10,000 population



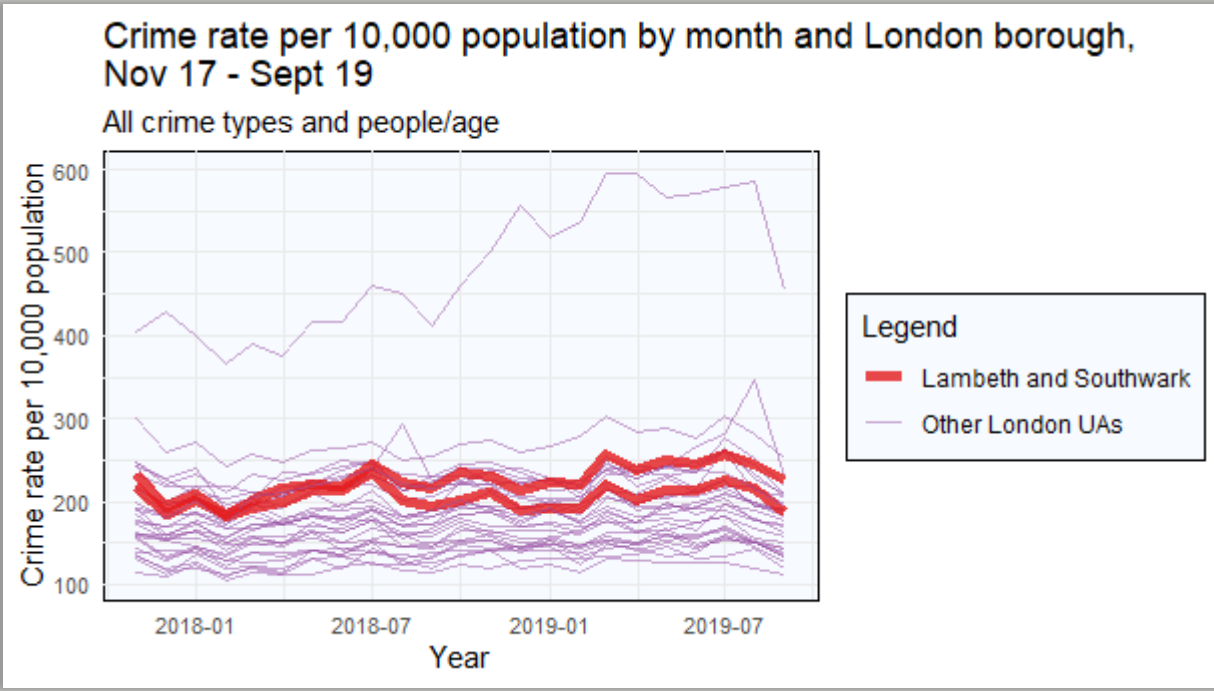
Rationale for selection:  
 Crime rates are much reported and are of central importance to most. The subtle effect of fear, stress and tension on a persons mental health can be lasting and dangerous. Criminal activity can often manifest as a feature of traumatic psychosis, whether as a perpetrator or a victim.

Position:

The rate of all crimes per 10,000 population in Sept-2019 are as follows:  
 - Lambeth: 186 crimes per 10,000 pop  
 - Southwark: 225 crimes per 10,000 pop

High outlier: Westminster

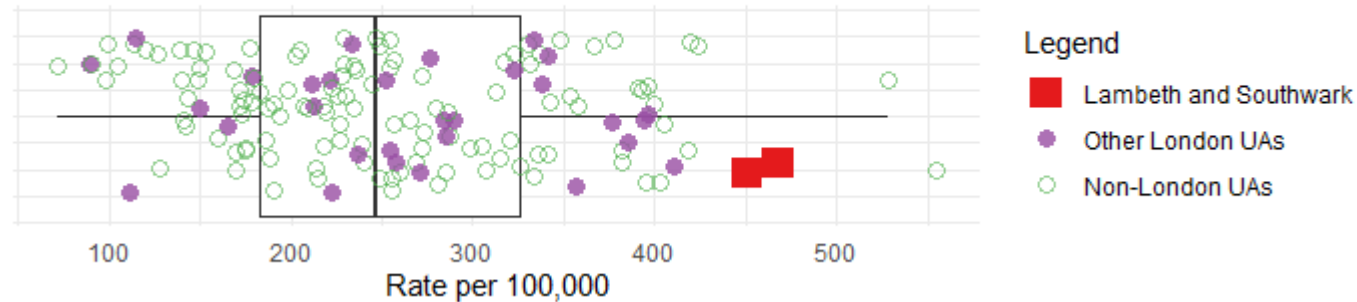
When considering crime rate, the variation in London boroughs reduces as population differences are accounted for, however the crime rate of Southwark remains considerable higher than the London median.



# First time entrants to the youth justice system

## First time entrants to the youth justice system, 2018

Rate of 10-17 year olds receiving their first reprimand, warning or conviction per 100,000 population



### Rationale for selection:

Children and young people at risk of offending or within the youth justice system often have more unmet health needs than other children. This indicator is included to ensure that vulnerable children and young people (aged 10-17) at risk of offending, are included in mainstream planning and commissioning.

### Position:

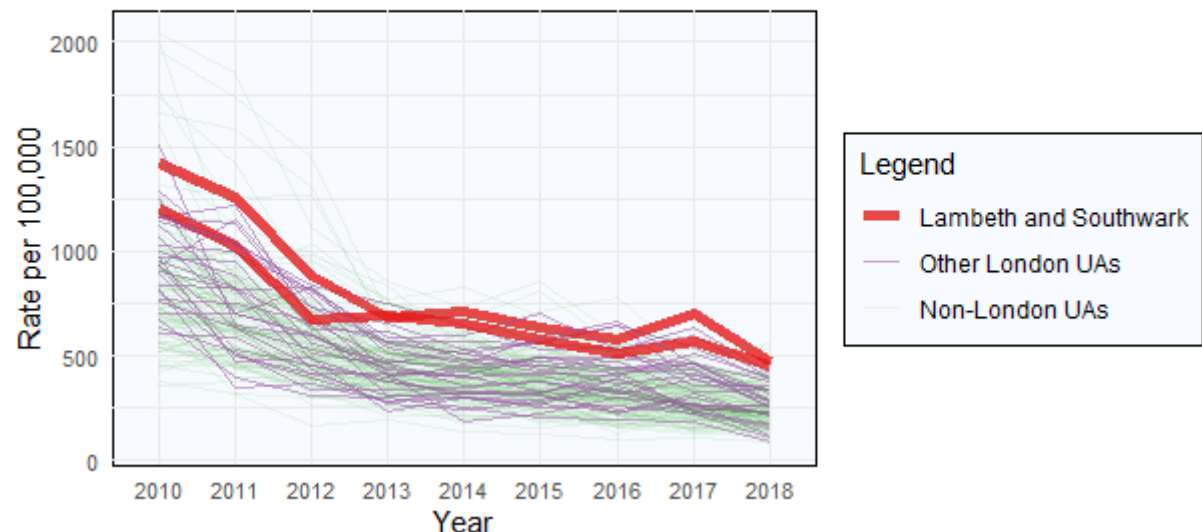
The rates of first time entrants in to the youth justice system are as follows:

- Lambeth: 468 per 100,000 > 18's
- Southwark: 451 per 100,000 > 18's

Lambeth and Southwark and considerable outliers in this regard however rates have been steadily decreasing since 2010

## First time entrants to the youth justice system, 2010 - 2018

Rate of 10-17 year olds receiving their first reprimand, warning or conviction per 100,000 population

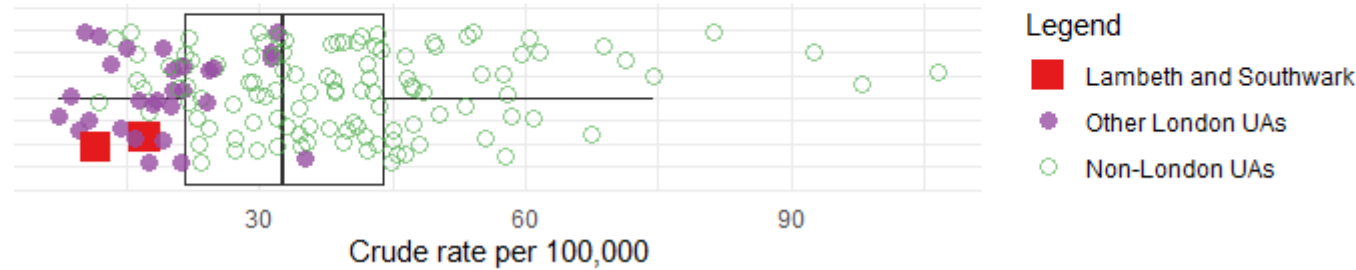




# Hospital admissions for alcohol-specific conditions (<18's)

## Admission episodes for alcohol-specific conditions, 2015/16 - 17/18

Admissions to hospital for under 18s where the primary diagnosis or any of the secondary diagnoses are an alcohol-specific (wholly attributable) condition.



### Rationale for selection:

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually.

### Position:

The crude rate of alcohol-specific admissions between 2015-18 are as follows:

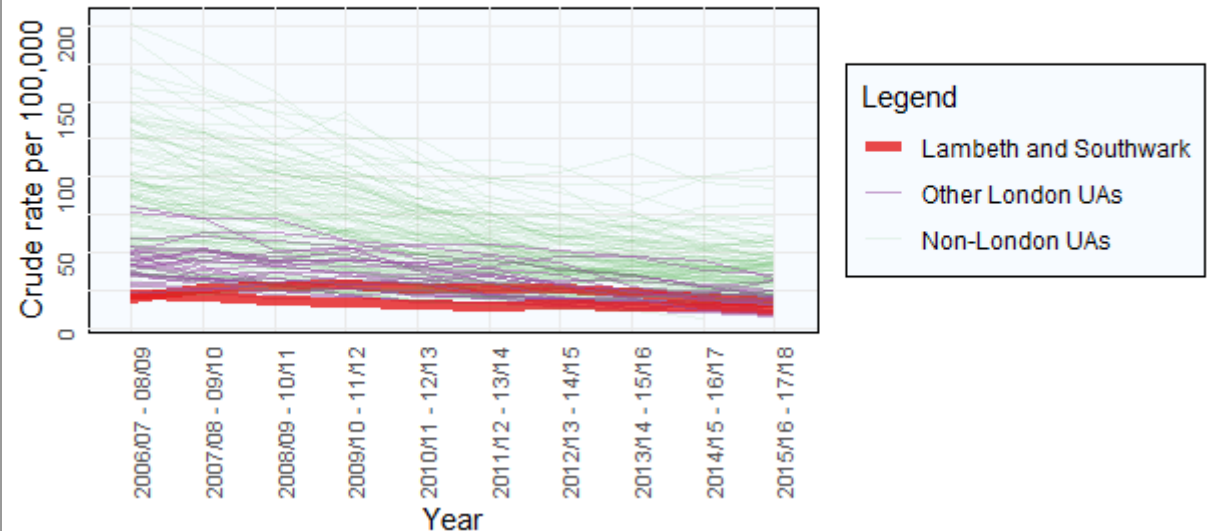
- Lambeth: 17 admissions per 100,000 pop
- Southwark: 11.5 admissions per 100,000 pop

Lambeth and Southwark have rates lower than the 1<sup>st</sup> quartile and London UA's are distributed at lower points than non-London UA's.

In recent years London UA's have remained at low rates however non-London UA's are converging at low levels.

## Admission episodes for alcohol-specific conditions, 2006/07 - 17/18

Admissions to hospital for under 18s where the primary diagnosis or any of the secondary diagnoses are an alcohol-specific (wholly attributable) condition

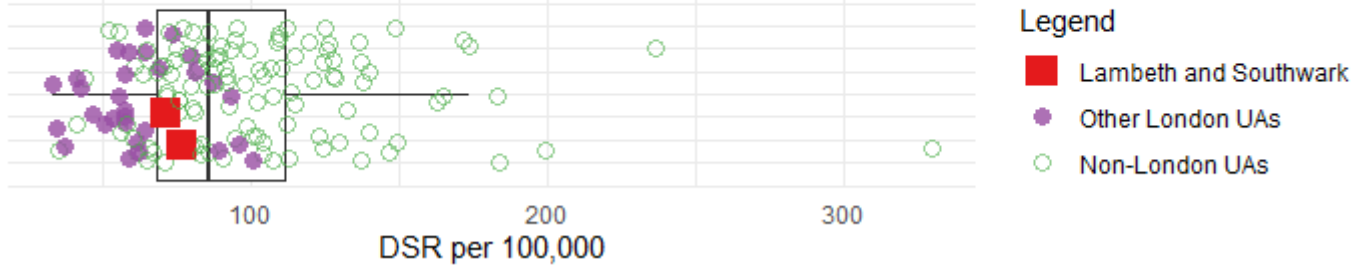




# Hospital admissions due to substance misuse (15 – 24 years)

Hospital admissions due to substance misuse, 2015/16 - 17/18

Directly standardised rate of hospital admission for substance misuse, per 100,000 population aged 15-24 years



Rationale for selection:

There is evidence to suggest that young people who use recreational drugs run the risk of damage to mental health including suicide, depression and disruptive behaviour disorders.

Position:

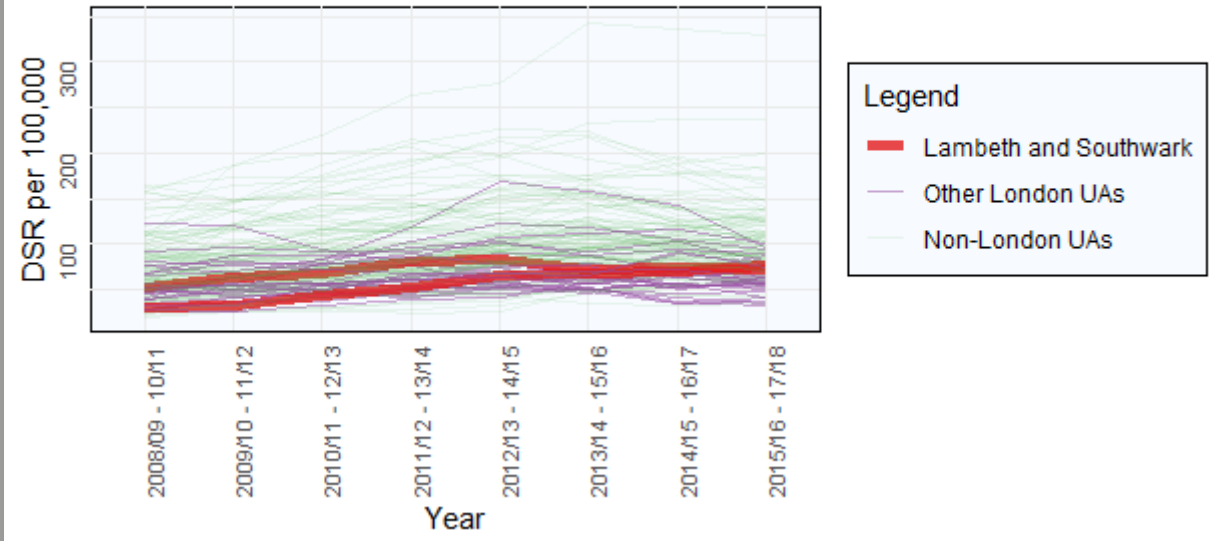
Directly standardised rates of admissions due to substance misuse are as follows:

- Lambeth: 71 admissions per 100,000 pop
- Southwark: 76 admissions per 100,000 pop

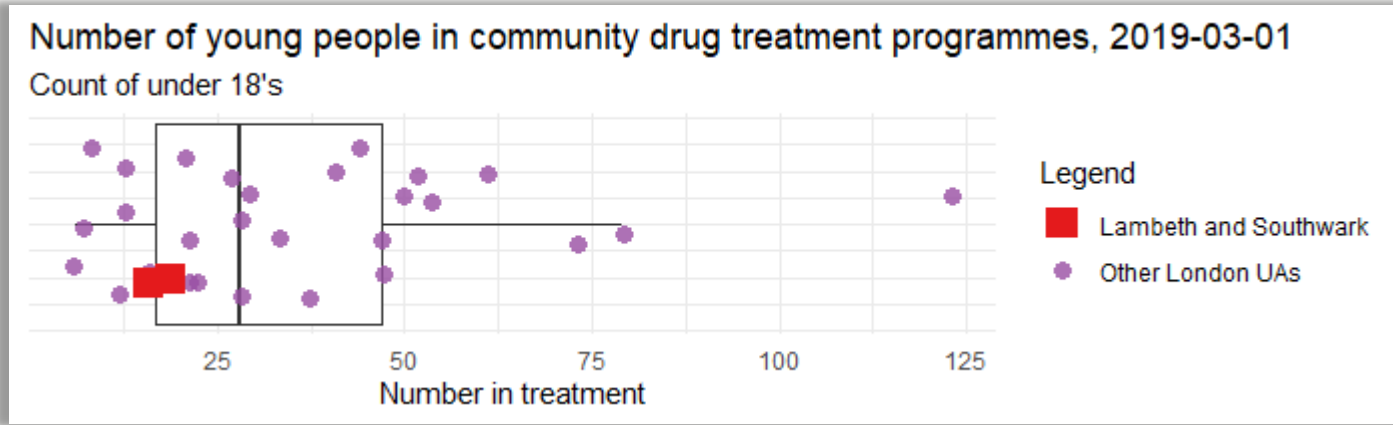
Lambeth and Southwark are centrally positioned in terms of London UA's while there is clear distinction between London and non-London UA's recently and in the past.

Hospital admissions due to substance misuse, 2008/09 - 17/18

Directly standardised rate of hospital admission for substance misuse, per 100,000 population aged 15-24 years



# Numbers in Community Drug Treatment



Rationale for selection:  
 For sufferers of mental illness, the effects of drugs can be of varying importance. They can offer relief and respite, and therefore need to be monitored and managed. Or they can symbolise a loss of control and risk, and need to be avoided. Working with mental health patients to understand their relationship with drugs ensures quality care is provided

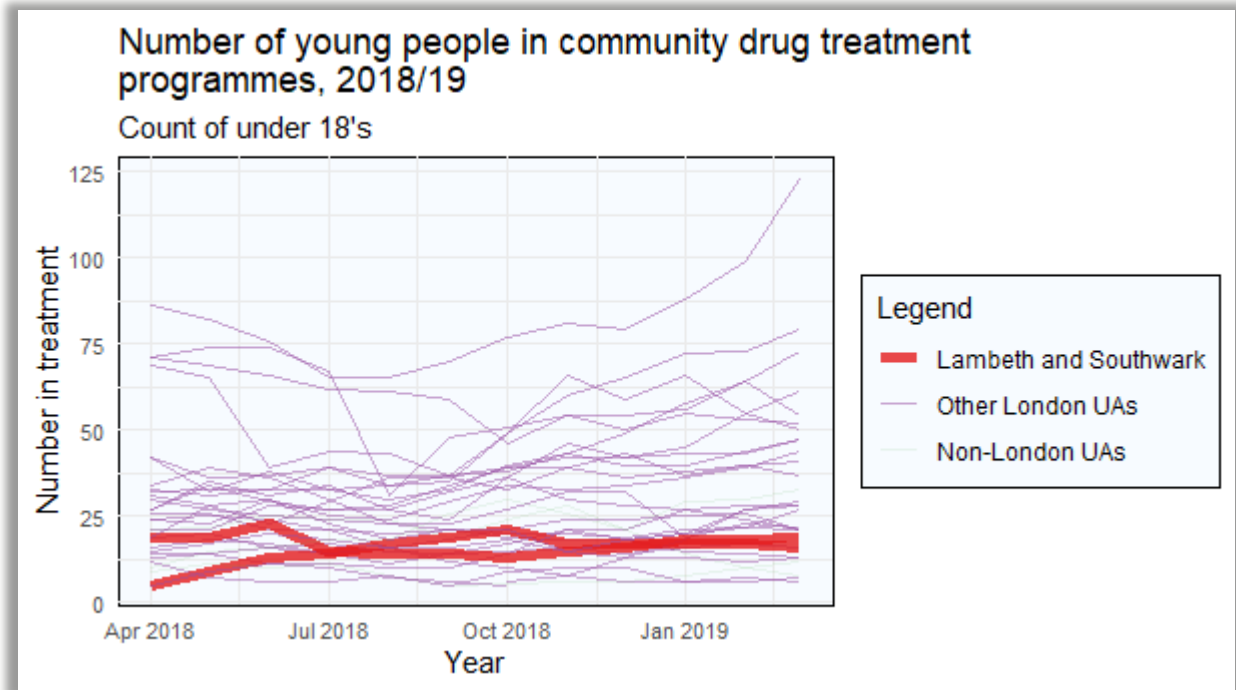
Position:

The numbers of young people in community drug programmes in March 2019 were as follows:

- Lambeth: 16
- Southwark: 19

High outlier: 123

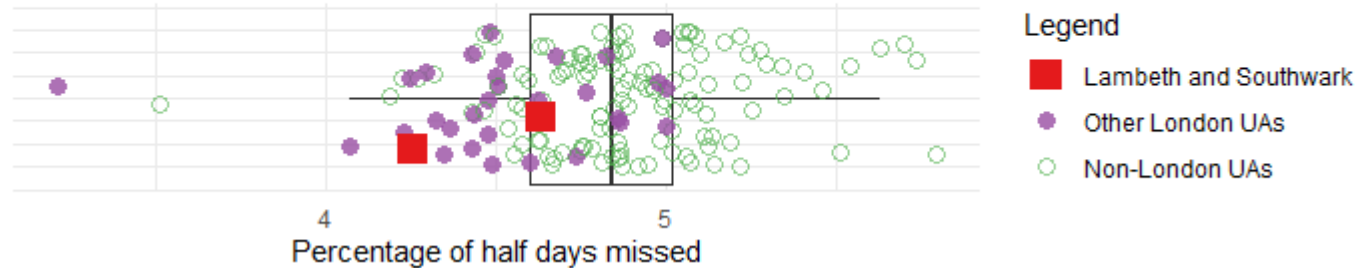
Low rates of youth involvement in community drug programmes may represent reduced prevalence or alternatively may symbolise disengaged services that do not mirror the risk that the population is under.



# Pupil absence (5-15 years)

## Pupil Absence, 2017/18

Percentage of half days missed by pupils due to overall absence (including authorised and unauthorised absence)



## Rationale for selection:

Improving attendance (i.e. tackling absenteeism) in schools is crucial to the Government's commitment to increasing social mobility and to ensuring every child can meet their potential. Improving school attendance will require all services that work with young people to agree local priorities. This indicator should help achieve this.

## Position:

The percentage of all half-days missed by pupils are as follows:

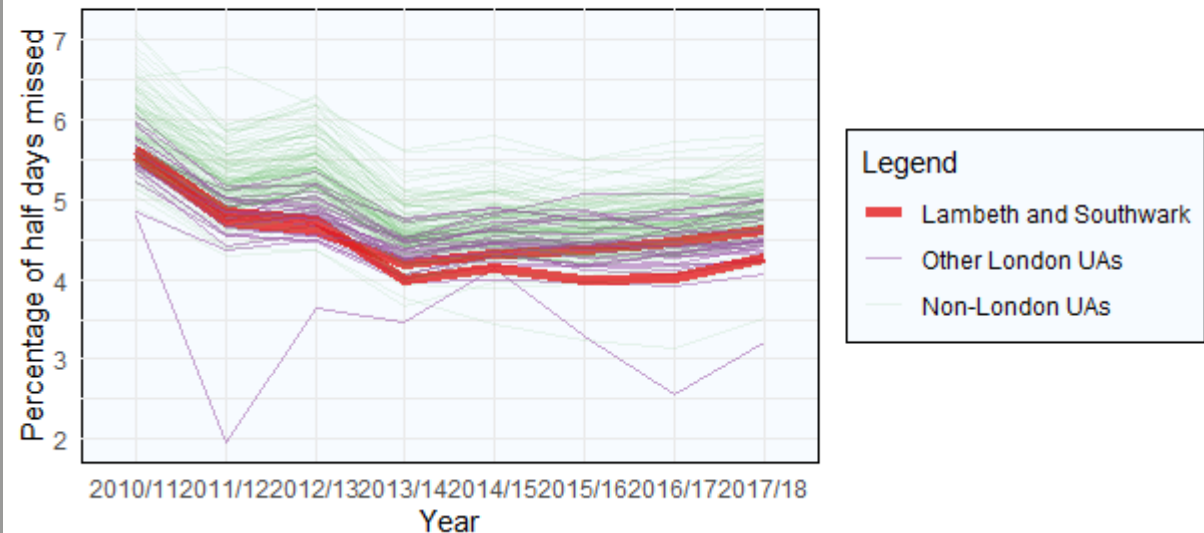
- Lambeth: 4.6%
- Southwark: 4.2%

Both boroughs have below average pupil absenteeism with London UA's mostly distributed lower than the national median.

Pupil absenteeism has generally reduced in recent years with Lambeth and Southwark showing reductions similar to that of the national average.

## Pupil Absence, 2010/11 - 2017/18

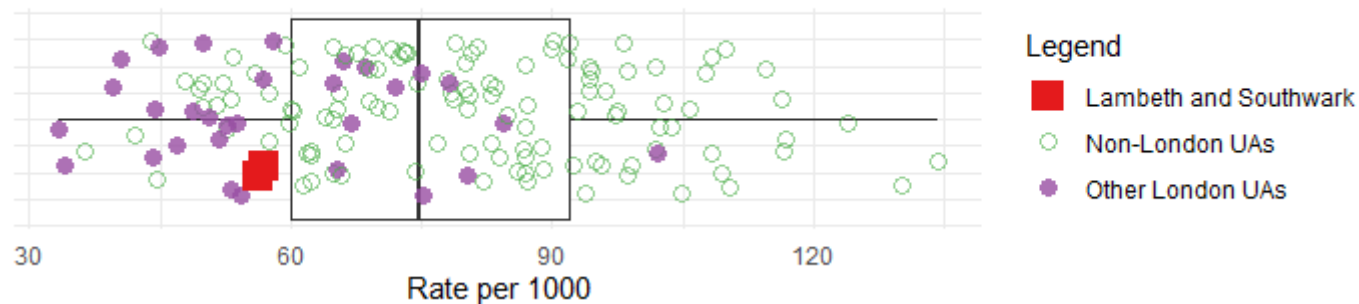
Percentage of half days missed by pupils due to overall absence (including authorised and unauthorised absence)



# Emergency admissions rate (0 -19 years)

Emergency admission rate in 0-19 years population, 2016/17

Rate per 1000



## Rationale for selection:

Approximately 35% of all admissions in the NHS in England are classified as emergency admissions, costing approximately £11 billion a year. Increasingly patients in mental health crisis turn to A&E departments through lack of any other options as such, estimating current volume is of value.

## Position:

The emergency admission rates per 1000 population are as follows:

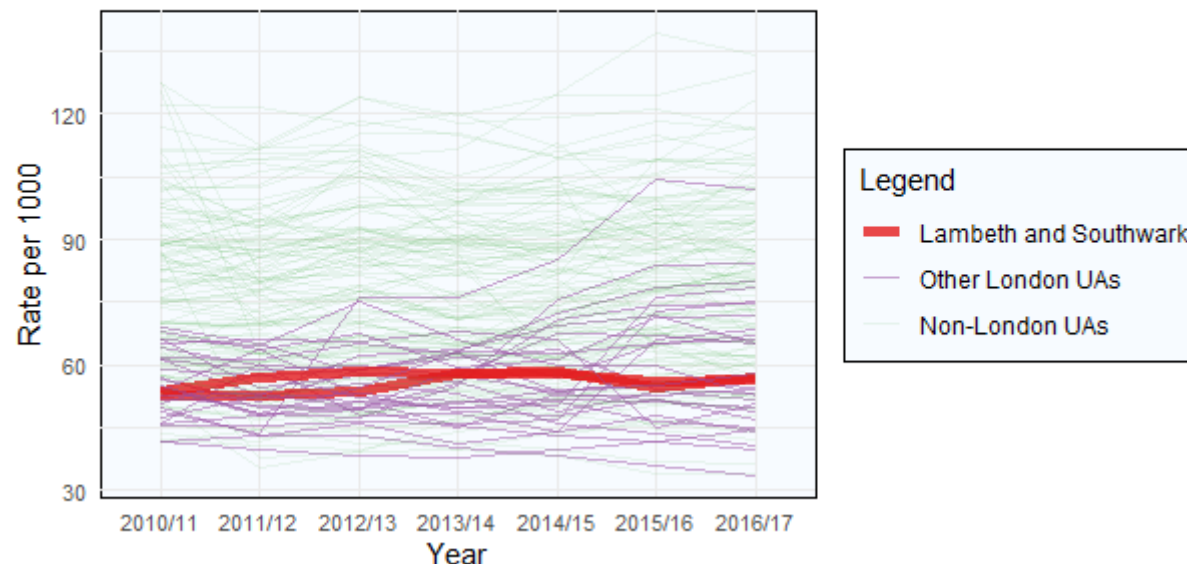
- Lambeth: 56.8 admissions per 1000 pop
- Southwark: 56.3 admissions per 1000 pop

Both boroughs demonstrate emergency admission rates lower than the national average and are distributed centrally among other London UA's.

Rates have remained stable and low since 2010/11.

Emergency admission rate in 0-19 years population, 2010-17

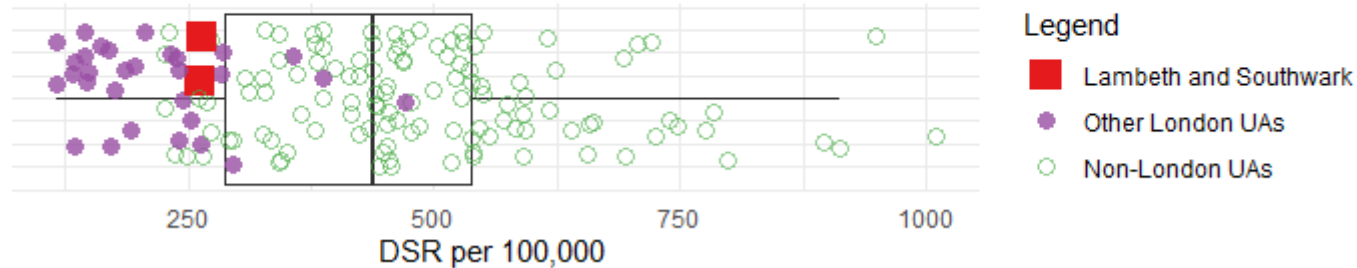
Rate per 1000



# Attendances/Admissions for self-harm (10 – 24 years)

## Hospital admissions as a result of self-harm, 2017/18

Directly standardised rate of finished admission episodes for self-harm per 100,000 population aged 10-24 years



### Rationale for selection:

Hospital admissions for self-harm in children have increased in recent years, with admissions for young women being much higher than admissions for young men. With links to other mental health conditions such as depression, the emotional causes of self-harm may require psychological assessment and treatment.

### Position:

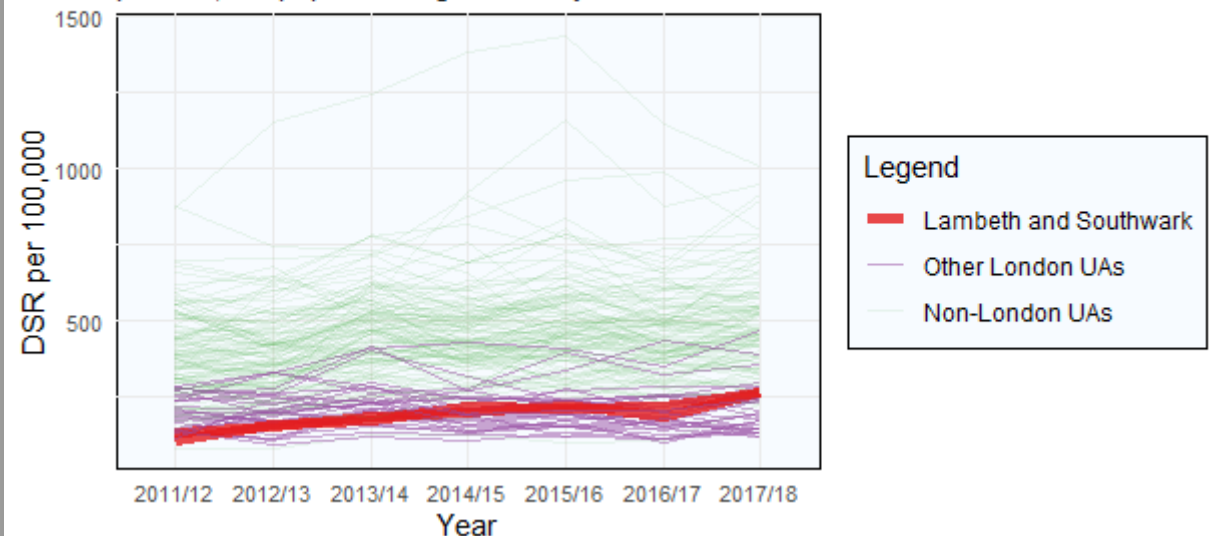
The directly standardised rates for admissions due to self harm are as follows:

- Lambeth: 263 admissions per 100,000 pop
- Southwark: 261 admissions per 100,000 pop

Both boroughs have a DSR of self harm admissions under the 1<sup>st</sup> quartile suggesting concededly lower rates than other UA's. The DSR in Lambeth and Southwark has slowly risen since 2011/12, and this is occurred at a faster rate than other London UA's.

## Hospital admissions as a result of self-harm, 2011/12 - 2017/18

Directly standardised rate of finished admission episodes for self-harm per 100,000 population aged 10-24 years

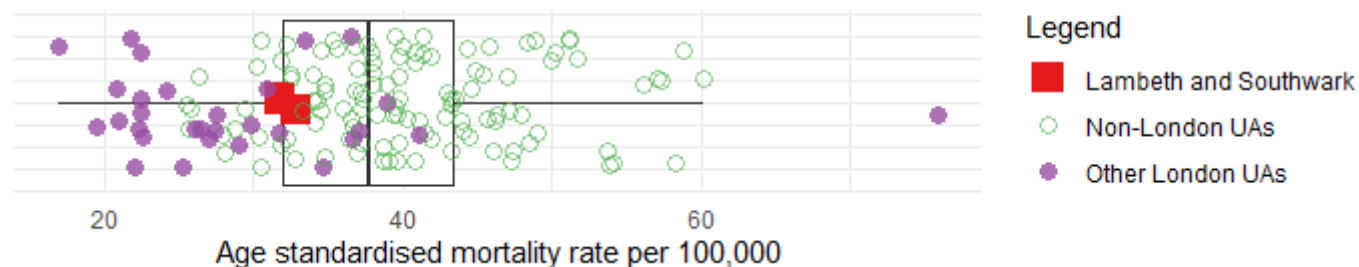




# Mortality from suicide and external causes

External morbidity and mortality - Age standardised mortality rate by local authority, 2017

All ages



## Rationale for selection:

External morbidity and mortality measures focus on reasons for illness/poor health that can be attributed to objects or acute processes occurring outside of the body. Examples include accidents, falls, violence and/or other injury.

## Position:

The age standardised mortality rates for Lambeth and Southwark are as follows:

- Lambeth: 32 deaths per 100,000 pop
- Southwark: 33 deaths per 100,000 pop

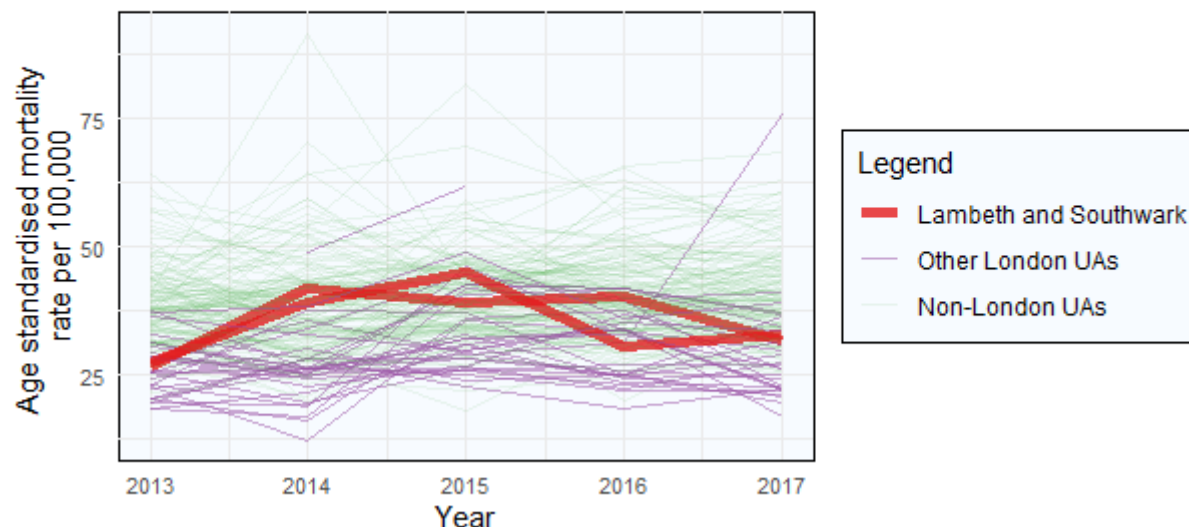
High outlier: Kensington and Chelsea

In recent years, Lambeth and Southwark's age standardised mortality rate has gradually decreased while remaining higher than the London average.

Generally London local authorities have a lower rate than other non-London areas.

External morbidity and mortality - Age standardised mortality rate by local authority, 2013-17

All ages

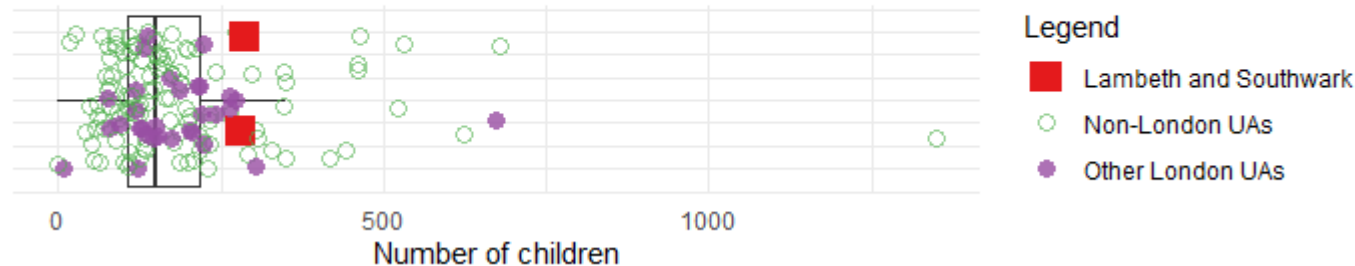




# Care leavers now aged 19, 20 and 21 years

## Care leavers now aged 19, 20 and 21 years old, 2018

Children who were looked after for a total of at least 13 weeks after their 14th birthday including some time after their 16th birthday



## Rationale for selection:

The increased prevalence of MH issues in children in care continues in care leavers. This population inherently represents reduced familial support networks and a sudden cut-off of state input could threaten the mental and physical health of care leavers.

## Position:

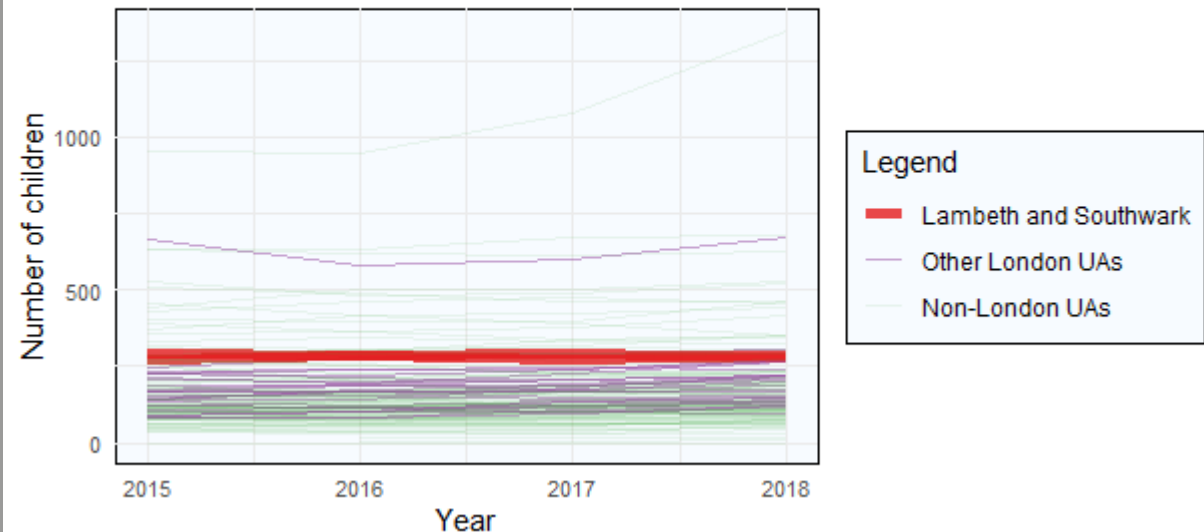
Lambeth and Southwark host a higher number of care leavers now aged 19, 20 and 21 years than the London and English medians respectively.

This measure includes children in care previously residing in other areas and so high numbers may comment on migration practices of care leavers.

Since 2015, numbers of care leavers have remained remarkably consistent across the majority of UA's in the country.

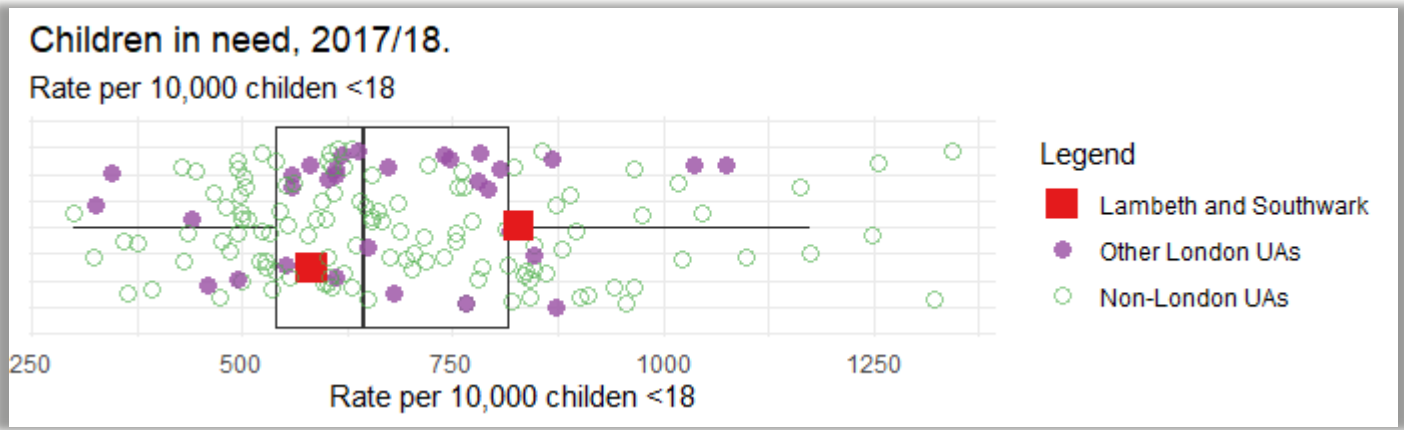
## Care leavers now aged 19, 20 and 21 years old

Children who were looked after for a total of at least 13 weeks after their 14th birthday including some time after their 16th birthday



# Children in need (rate per 10,000 children <18)

Family or social circumstances



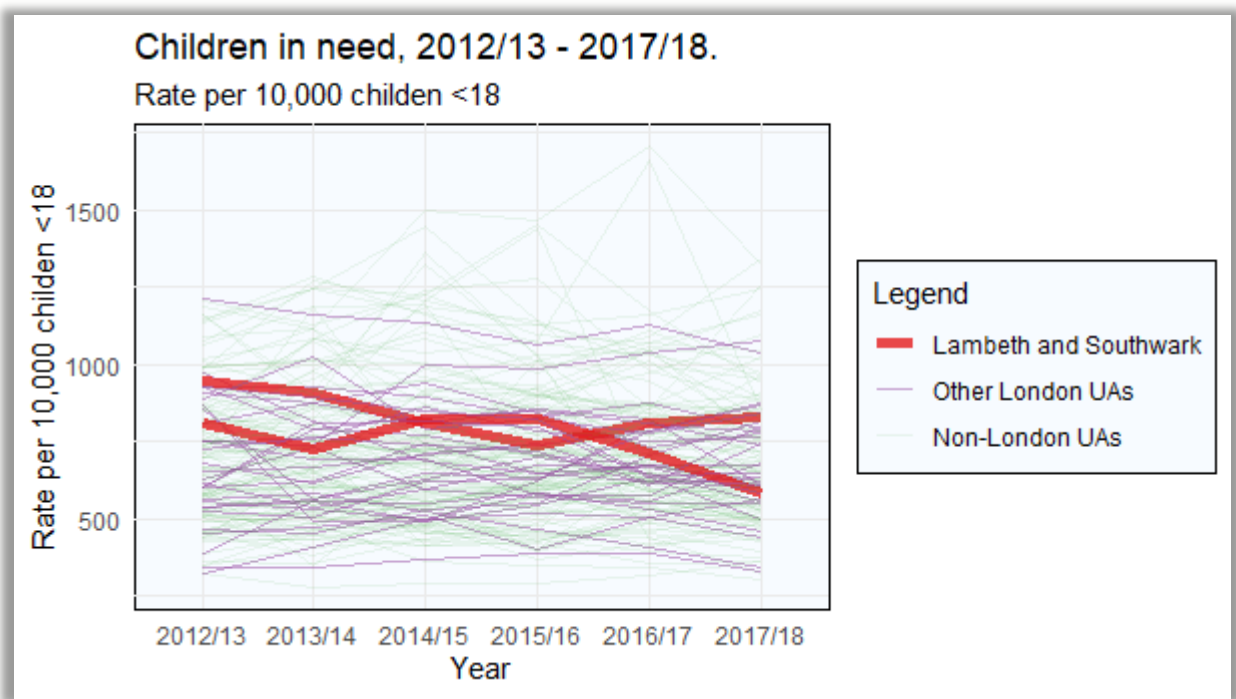
Rationale for selection:  
A child in need is one who has been referred to children's social care services, and who has been deemed to be in (some) need of social care services. Needs could be temporary or long term, but can be a strong indicator of future mental well-being.

Position:

The overall rates of children in need are as follows:

- Lambeth: 829 per 10,000 children
- Southwark: 582 per 10,000 children

Lambeth, in the top quartile, has a higher rate than the London and England averages, whilst Southwark's current rate is below national and regional medians. Both are decreasing broadly in line with national trends.

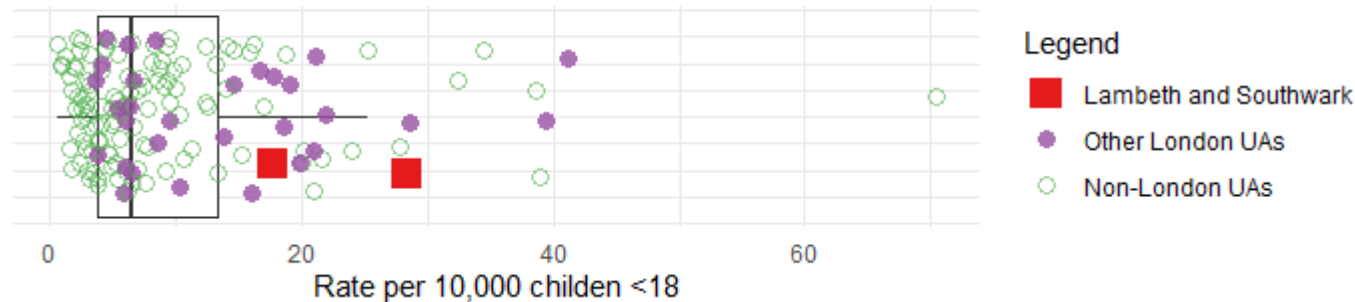


# Children in need due to parent disability or illness

Family or social circumstances

Children in need due to parent disability or illness, 2018.

Rate per 10,000 children <18



## Rationale for selection:

The circumstances in which a child is raised have lasting effects on their development and health. Identifying need due to health issues that may influence a parent's ability to provide for a child indicates potential vulnerability regarding the child's future mental health

## Position:

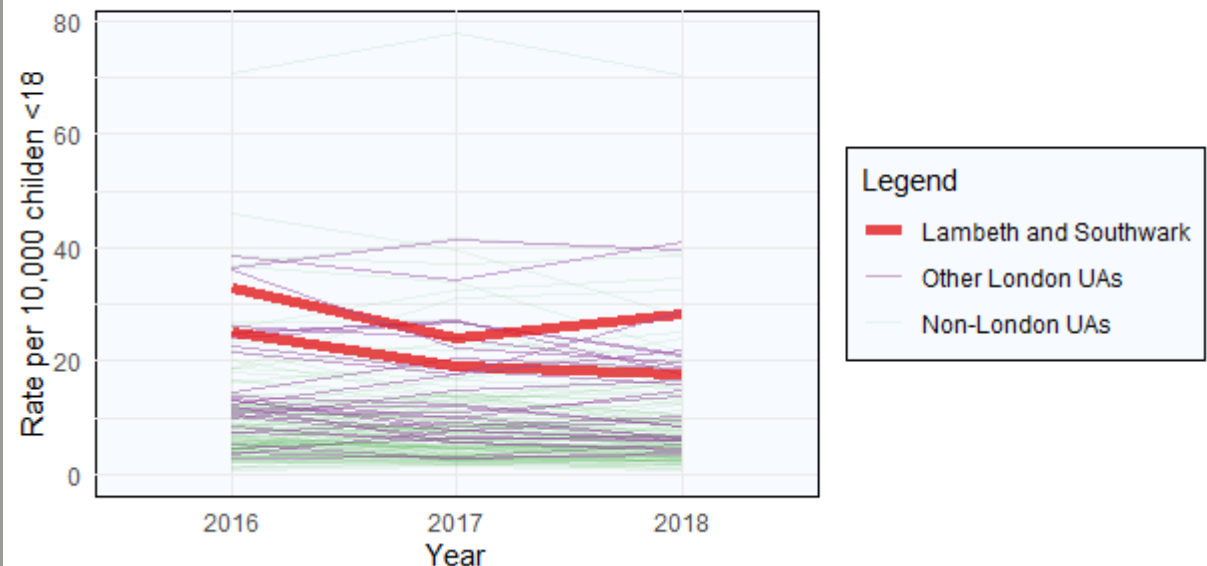
The rates of children in need due to parent illness or disability are as follows:

- Lambeth: 17.7 per 10,000 children
- Southwark: 28.4 per 10,000 children

Both areas have a higher rate than the London and England average with a cluster of Non-London UA's below the 1<sup>st</sup> quartile below, suggesting this indicator is of high value to planners in and around London.

Children in need due to parent disability or illness, 2016-2018.

Rate per 10,000 children <18

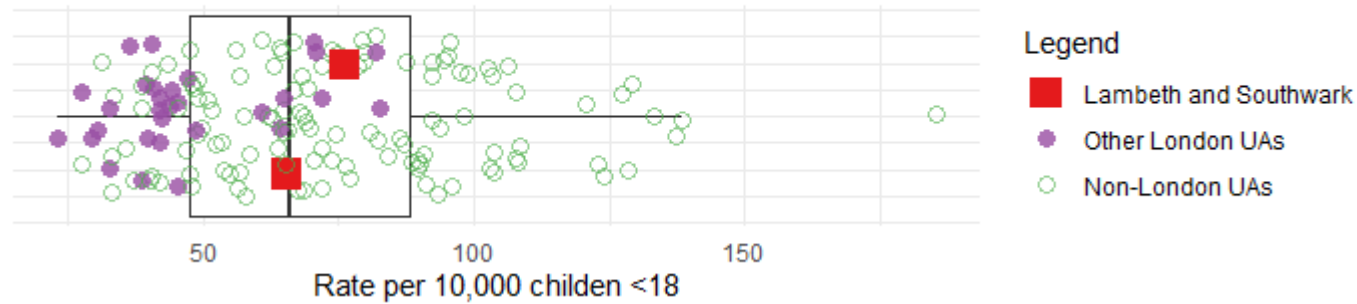


# Children in care (rate per 10,000 children <18)

Family or social circumstances

## Children in care, 2018

Children looked after at 31 March



## Rationale for selection:

Children and young people in care are among the most socially excluded in children in England. There are significant inequalities in health and social outcomes compared with all children and these contribute to poor health and social exclusion of care leavers later in life.

## Position:

The rates of children in care are as follows:

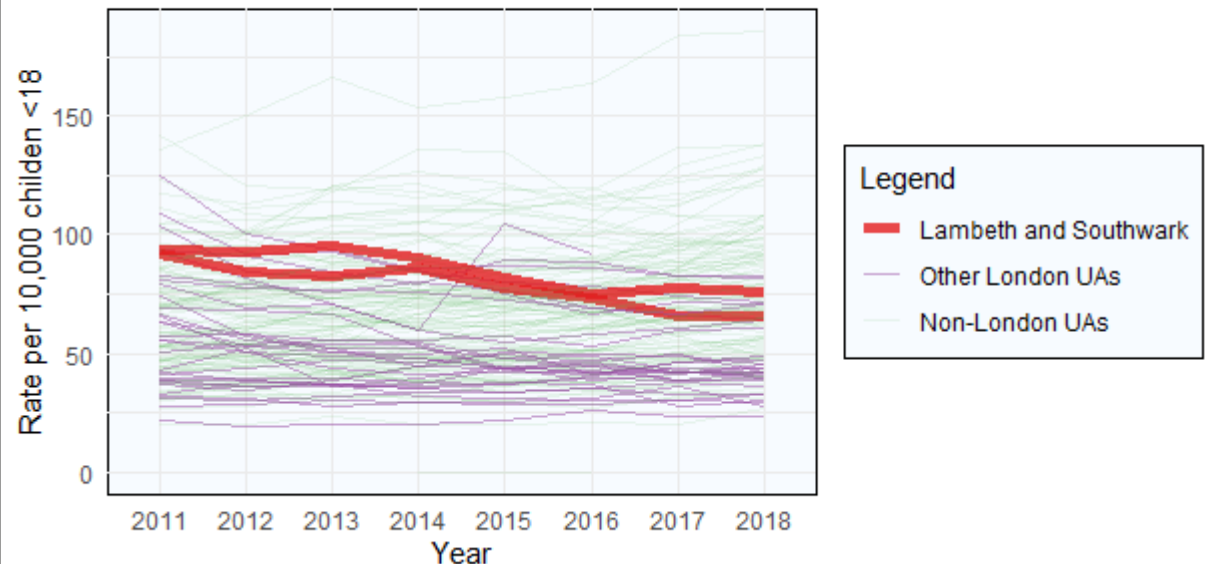
- Lambeth 65.4 per 10,000 children
- Southwark 76.2 per 10,000 children

Lambeth and Southwark are positioned centrally within the national distribution, with London UA's generally showing lower rates of children in care.

Since 2011 Lambeth and Southwark have seen a slow reduction in the rate of children in care, however this is not a trend that is seen nationally.

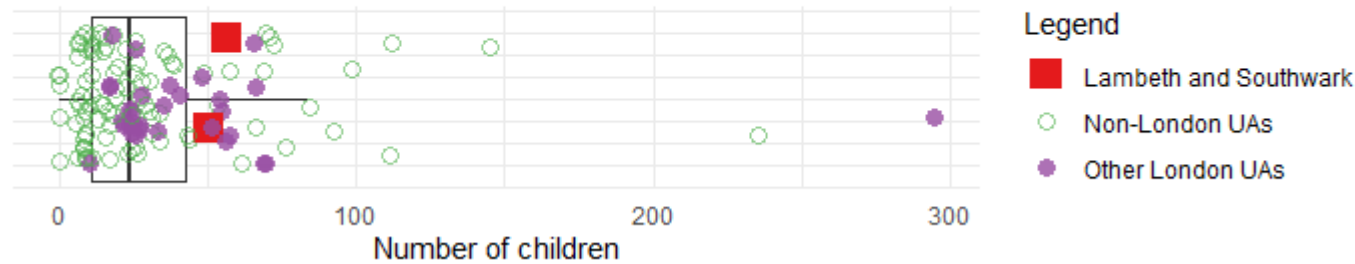
## Children in care, 2011 - 2018.

Rate per 10,000 children <18



# Children in care who were unaccompanied asylum-seeking children (UASC)

Children looked after at 31 March, who were unaccompanied asylum seeking children (UASC) by local authority, 2018



## Rationale for selection:

Studies have suggested that up to one third of refugee and asylum seeking young people have concerns regarding their mental health, particularly with respect to anxieties about their rights, entitlements, housing and asylum claims.

*Hadley Centre for Adoption and Foster Care Studies 2018*

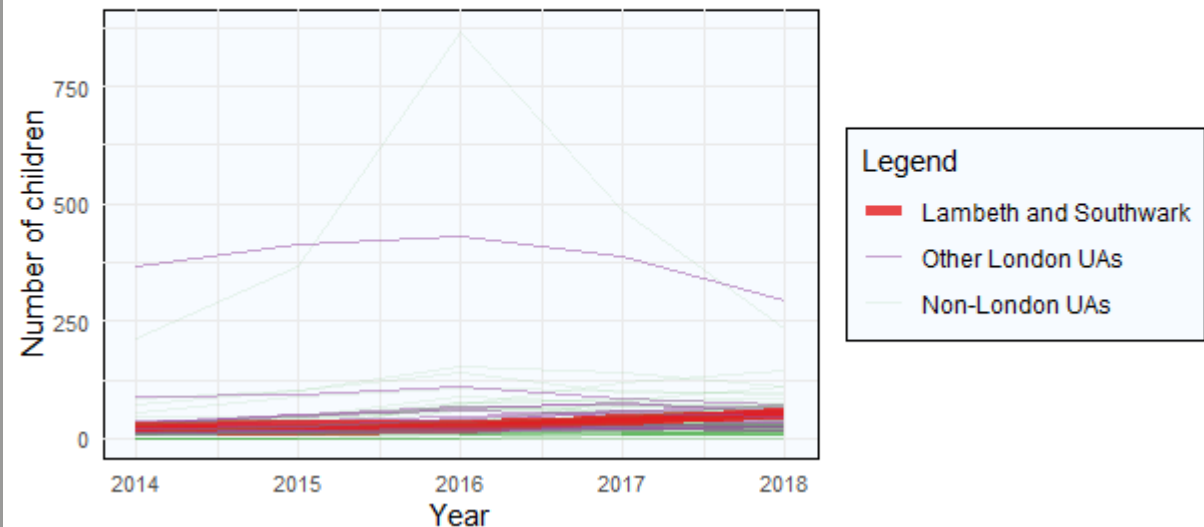
## Position:

Lambeth and Southwark show increased numbers of unaccompanied asylum-seeking children compared to the rest of England.

The high outliers are Kent and Crawley respectively.

London UA's are generally distributed above the national average however this may be due to migration practices, proximity to immigration application centres and more culturally diverse populations.

Children looked after at 31 March, who were unaccompanied asylum seeking children (UASC) by local authority

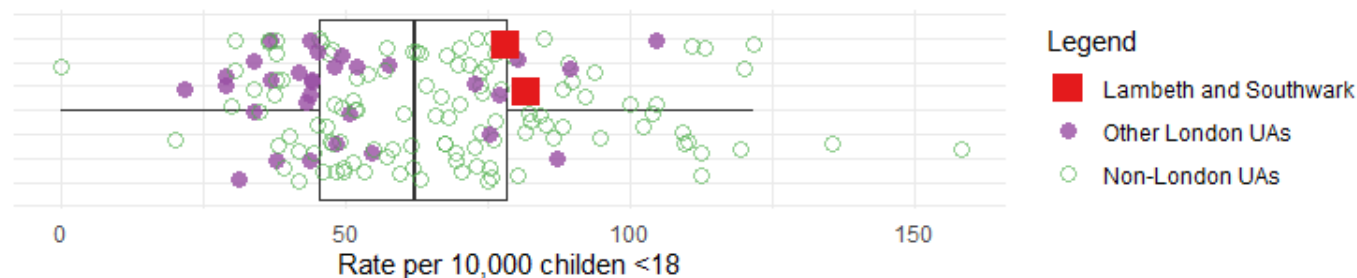


# Children leaving care (rate per 10,000 children <18)

Family or social circumstances

Children who ceased to be looked after by local authorities during the year ending 31 March 2019

Rate per 10,000 children <18



Rationale for selection:

Young people in care are over-represented in mental health statistics. Being in care when young is also a determinant of adult mental health, and is associated with increased levels of antisocial behaviour, emotional instability and psychosis.

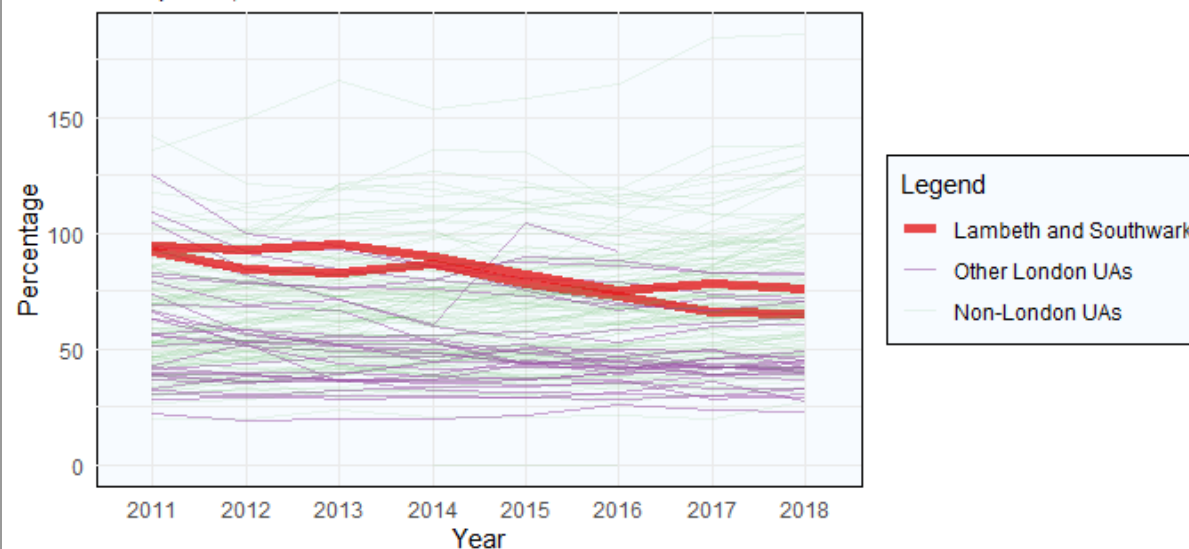
Position:

The child care leaver rates for Lambeth and Southwark are above the national median, located around the 3<sup>rd</sup> quartile

The time-series visualisation suggest Lambeth and Southwark have a child care leaver rate higher than the London region average but decreasing gradually.

Children who ceased to be looked after by local authorities during the year ending 31 March 2018

Rate per 10,000 children <18



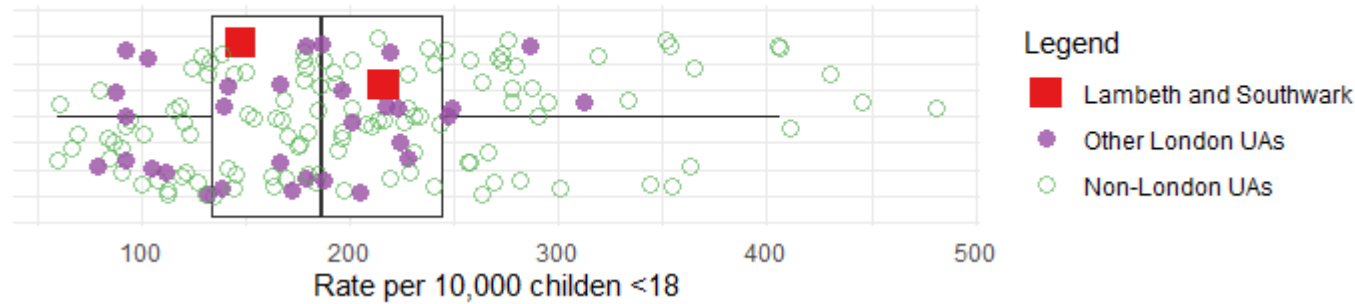


# Children subject to a child protection plan: Neglect

Family or social circumstances

Children subject to a child protection plan with initial category of neglect, 2018

Rate per 10,000 children <18



## Rationale for selection:

Children who are the subject of a child protection plan have been identified as at risk of abuse and/or neglect and there is strong evidence to suggest this has a detrimental effect on mental health and wellbeing.

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs

## Position:

The rates of children subject to a protection plan through neglect are as follows:

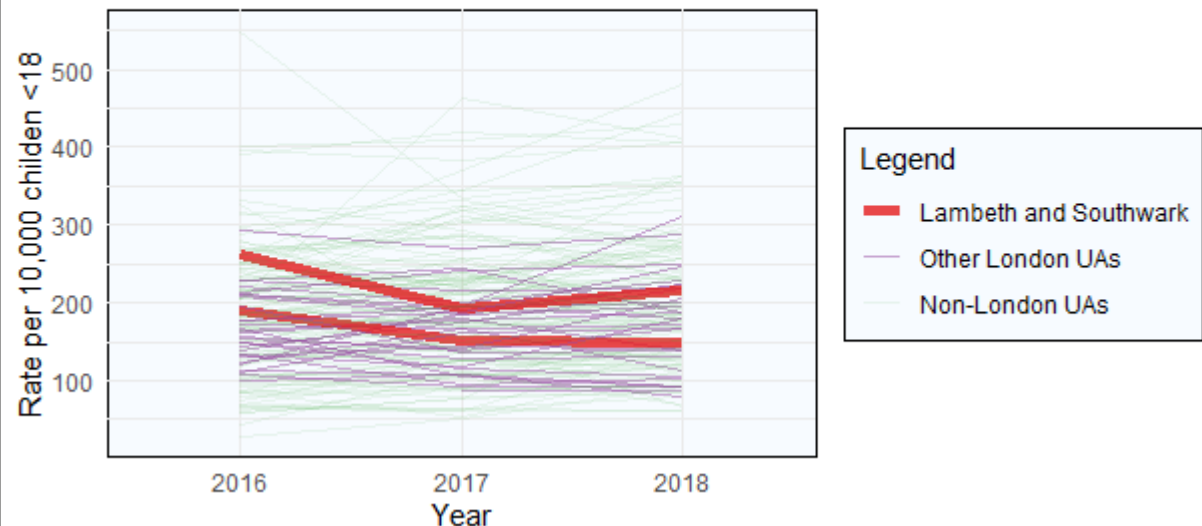
- Lambeth: 146 per 10,000 children
- Southwark: 216 per 10,000 children

The increased rate in Southwark identifies an area of focus to achieve the same position as local neighbouring boroughs.

There is no clear distinction between London and non-London UA's suggesting child neglect is not clearly stratified by proximity to London while rates are slowly decreasing over recent years.

Children subject to a child protection plan with initial category of neglect, 2016-18.

Rate per 10,000 children <18

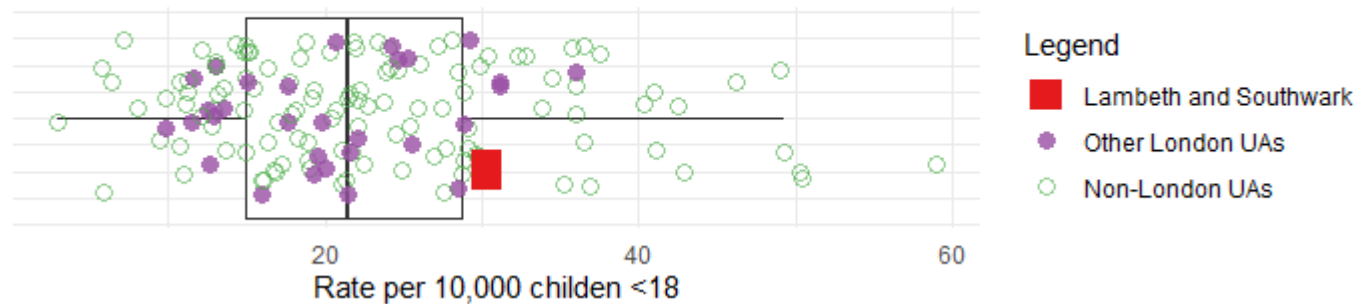


# Children subject to a child protection plan: Abuse

Family or social circumstances

Children subject to a child protection plan with initial category of abuse, 2018

Rate per 10,000 children <18



## Rationale for selection:

Child abuse has a particularly powerful negative and far reaching impact and may result in major psychiatric disorders, personality disorders, conduct disorders, self-destructive and violent behaviours, anti-social behaviour, problems with relationships, impaired capacity for parenting as well as physical illness.

## Position:

The rate of children subject to a child protection plan due to abuse are as follows:

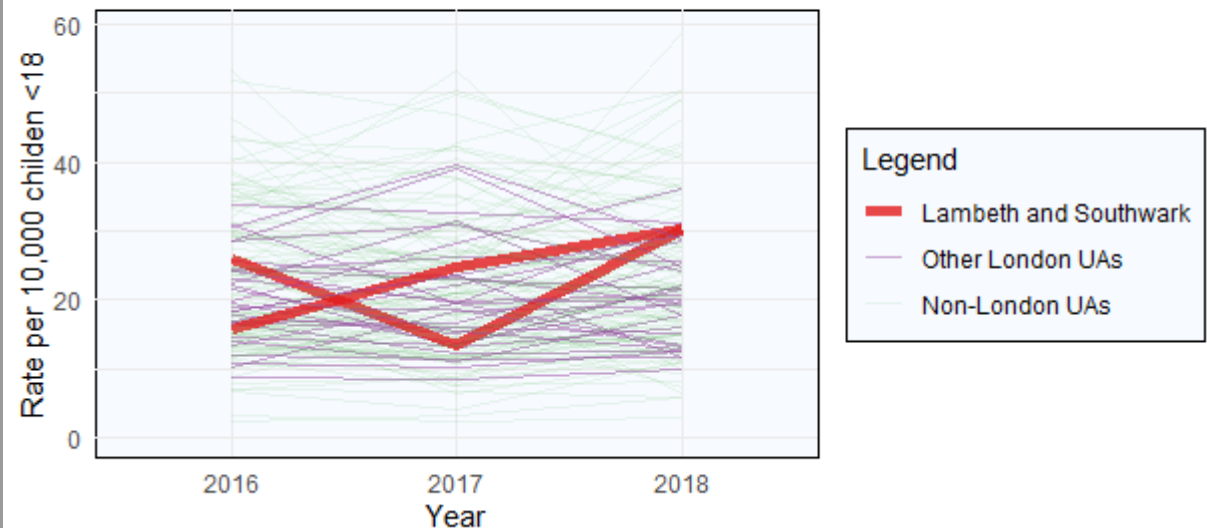
- Lambeth: 30 children per 10,000
- Southwark: 30 children per 10,000

Both boroughs show a rate higher than the 3<sup>rd</sup> quartile, with only two other boroughs in London with a higher rate per 10,000 children.

Lambeth has seen a dramatic fall and rise in recent years while Southwark has had a stable rise the rate of children subject to protection plans due to abuse.

Children subject to a child protection plan with initial category of abuse, 2016-18.

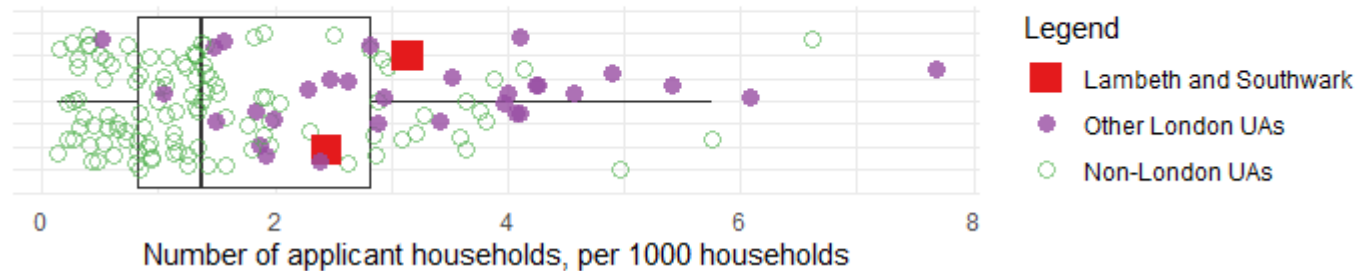
Rate per 10,000 children <18



# Family Homelessness

## Family Homelessness, 2017/18

Number of applicant households with dependent children or pregnant woman accepted as unintentionally homeless and eligible for assistance



## Rationale for selection:

The UN Convention on the Rights of the Child highlights the right of every child to an adequate standard of living. Children from homeless households are often the most vulnerable in society. Homelessness is associated with severe poverty and is a social determinant of health.

## Position:

The number of household homelessness applications per 1000 households are as follows:

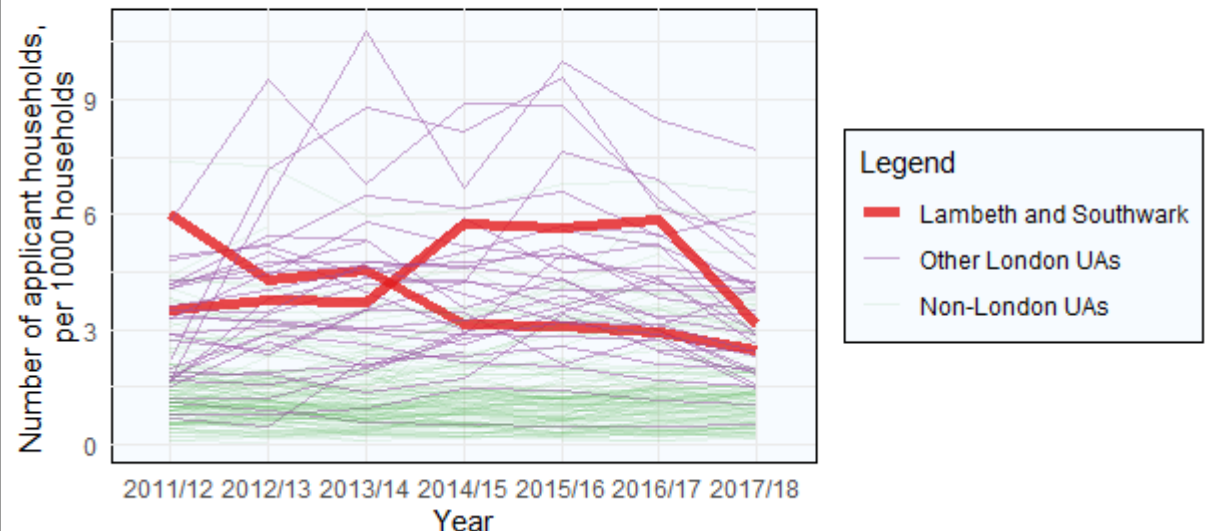
- Lambeth: 2.4 per 1000 households
- Southwark: 3.14 per 1000 households

Lambeth and Southwark are positioned centrally with respect to other London UA's, however an increased volume of household applicants are seen in London compared to non-London UA's.

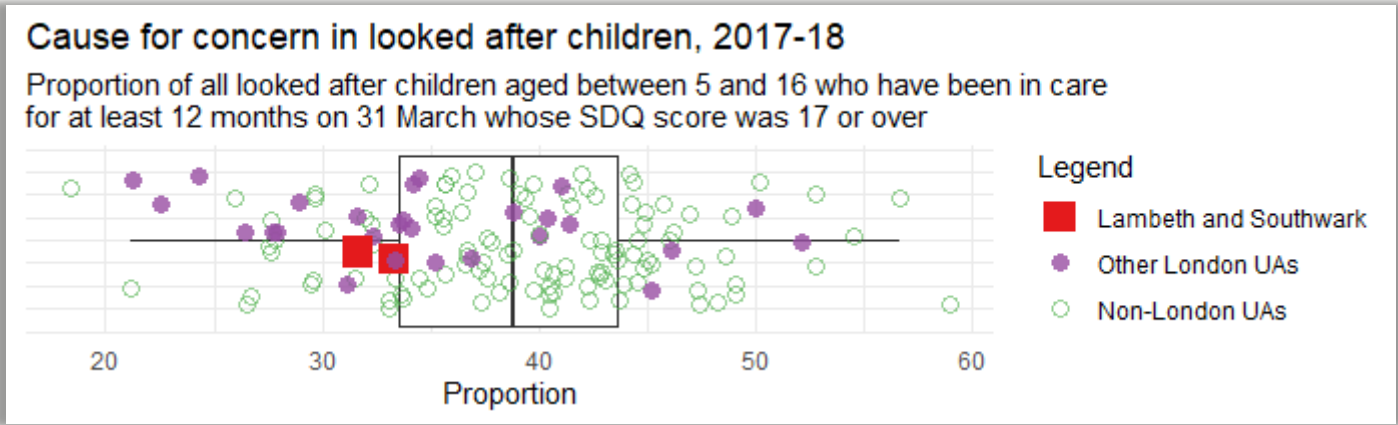
London UA's have seen huge variation in numbers of family homelessness applications while non-London UA's show stable low levels.

## Family Homelessness 2011/12 - 2017/18

Number of applicant households with dependent children or pregnant woman accepted as unintentionally homeless and eligible for assistance



# Proportion of looked after children identified as a cause for concern



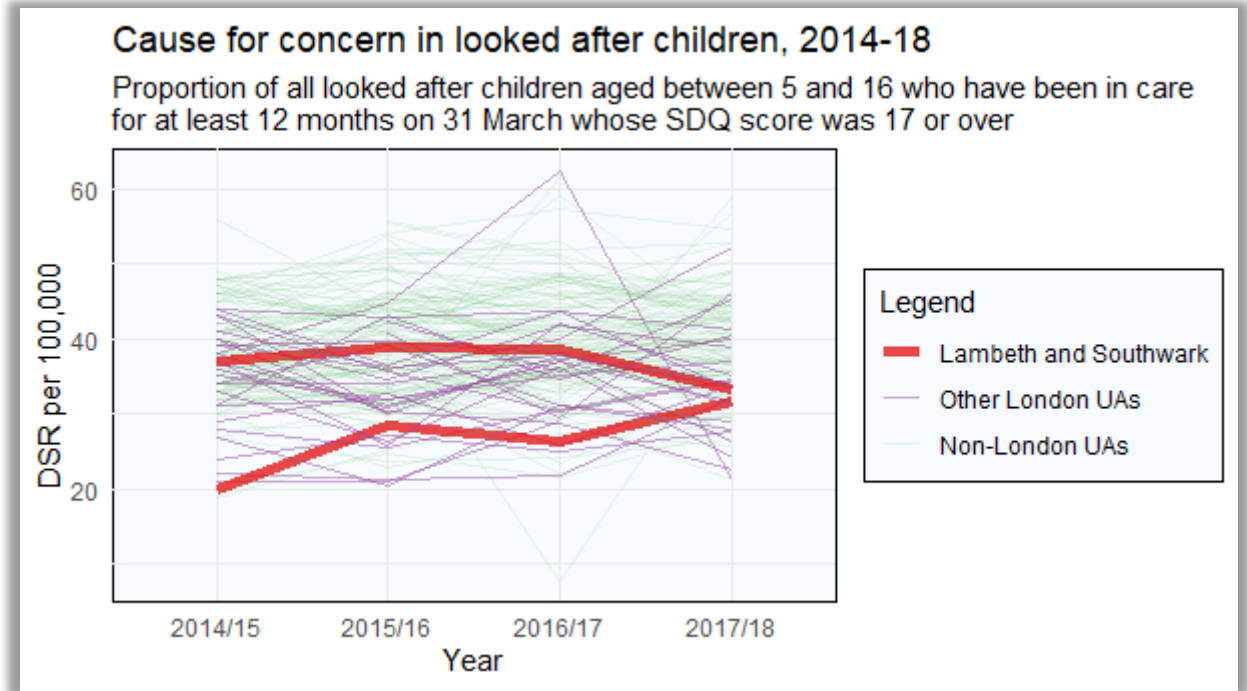
Rationale for selection:  
 This indicates the proportion of looked after children in the area who are affected by poor emotional wellbeing and are therefore at risk of further mental health disorder.

Position:

The relative proportions of looked after children who have been identified as having a cause for concern are as follows:

- Lambeth: 31.6%
- Southwark: 33.3%

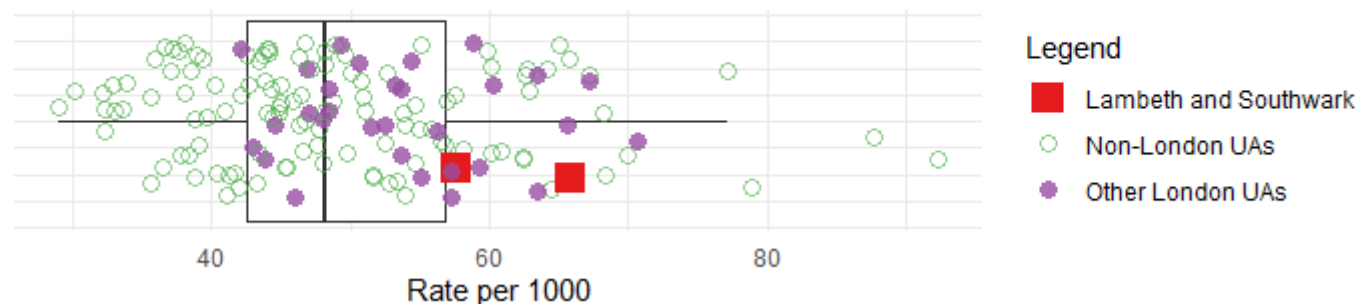
Both area's have proportions below the national average, and there is no clear relationship between London and non-London area's with regard to their proportion of looked after children that are a cause for concern.



# Elective admissions rate (0 – 19 years)

## Elective admissions rate, 2015/16

Rate per 1000, under 18 population



## Rationale for selection:

In England both emergency (unplanned) and non-emergency (elective) hospital admissions have been increasing. Some elective admissions are potentially avoidable. Local services such as primary care and patient characteristics (age, ethnicity, deprivation and gender) can all affect the rate of elective admissions.

## Position:

Elective admission rates per 1000 population are as follows:

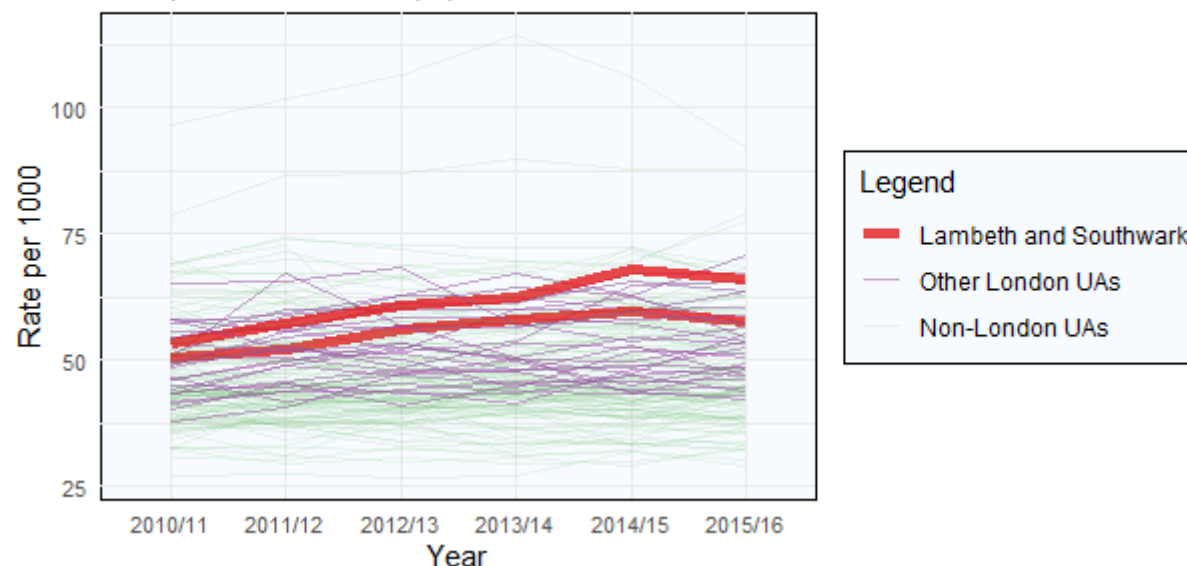
- Lambeth: 57.6 admissions per 1000 pop
- Southwark: 65.9 admissions per 1000 pop

Rate of elective admissions in Lambeth and Southwark is higher than the national median and has been steadily increasing since 2010/11.

This must be considered alongside emergency admission rates as increased elective admissions are intended to reduce the emergency admission rate.

## Elective admission rate

Rate per 1000 under 18 population

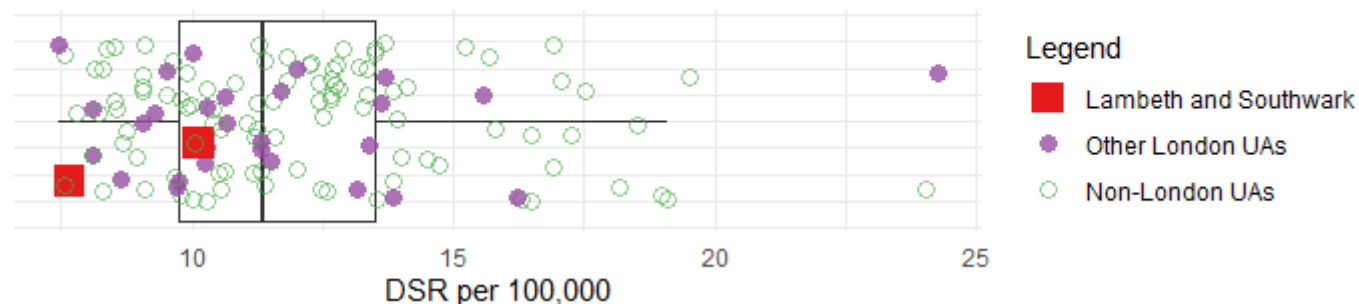




# Child Mortality Rate

## Child mortality rate, 2015-17

Directly standardised rate of death due to all causes, persons aged 1-17 years.



## Rationale for selection:

Death in childhood represents not only a tragedy for that child's family but also a loss to wider society in terms of lost years of productive life.

## Position:

The directly standardised child death rates per 100,000 population are as follows:

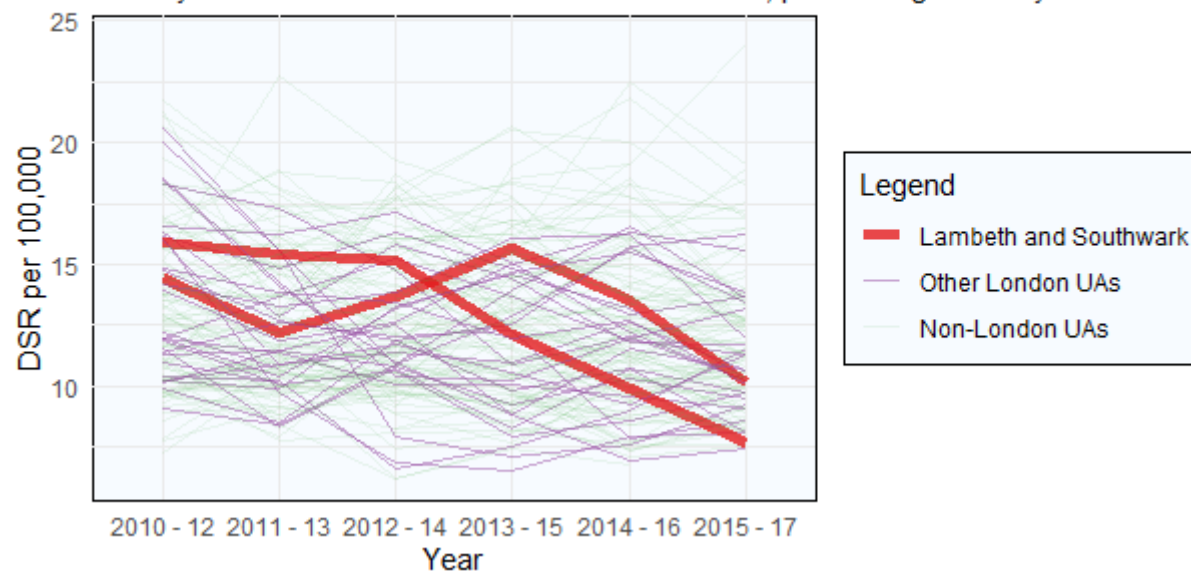
- Lambeth: 10.1 per 100,000
- Southwark: 7.6 per 100,000

Both DSR's are below the national median and there is no clear distribution pattern for London UA's.

Both Lambeth and Southwark have seen reductions in their child mortality rates since 2010-12, with no clear national trend.

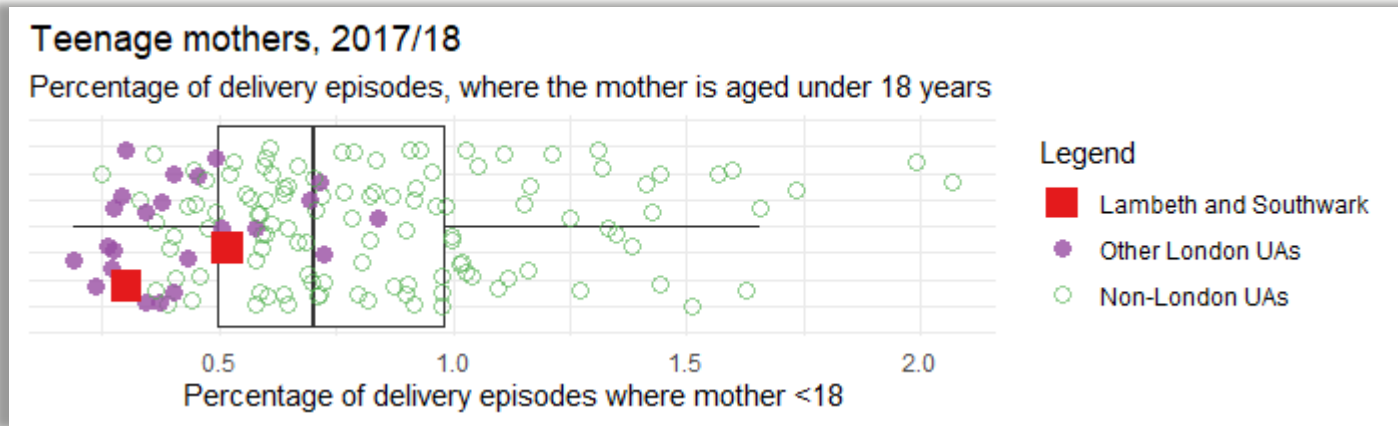
## Child mortality rate, 2010-17

Directly standardised rate of death due to all causes, persons aged 1-17 years.





# Teenage Mothers



Rationale for selection:

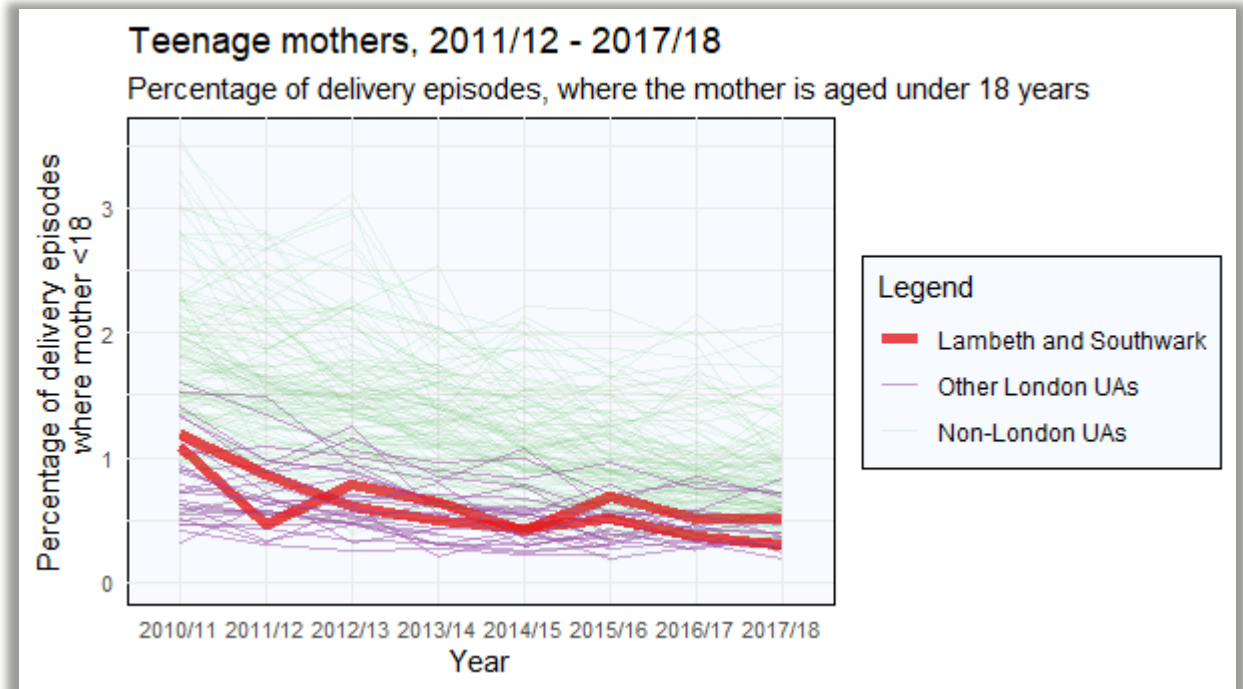
Children born to teenage mothers have 60% higher rates of infant mortality and are at increased risk of low birthweight which impacts on the child's long-term health. Teenage mothers are three times more likely to suffer from post-natal depression and experience poor mental health for up to three years after the birth. Teenage parents and their children are at increased risk of living in poverty.

Position:

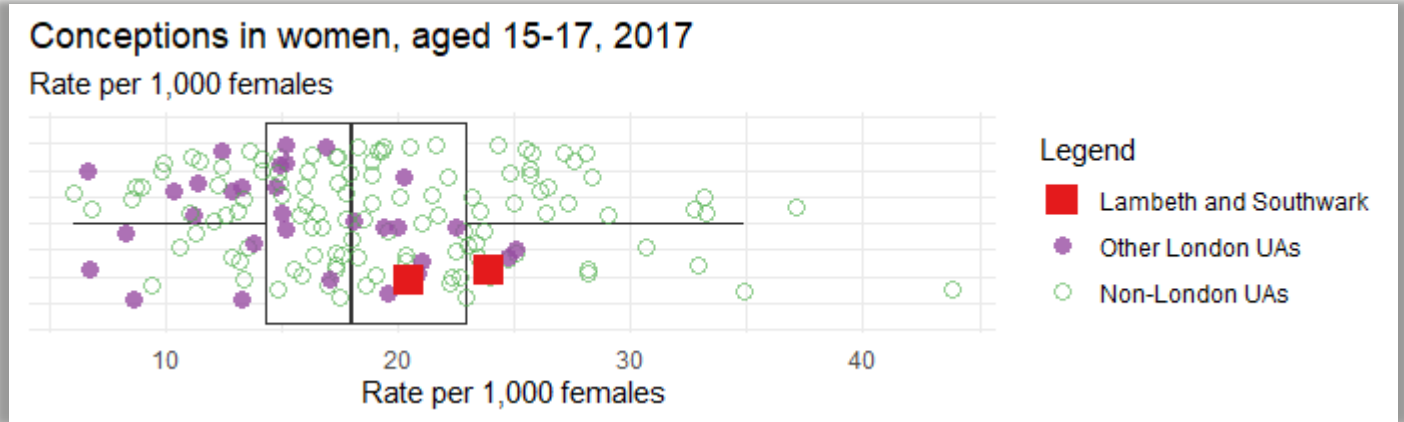
The percentage of delivery episodes where the mother was below 18 years are as follows:

- Lambeth: 0.5%
- Southwark: 0.3%

There is a distinction between London and non-London UA's regarding children born to teenage mothers, however since 2010/11 the gap has been reducing with non-London percentages dropping at a faster rate than that of London UA's.



# Under 18's conception rate (per 1,000 females aged 15-17)



Rationale for selection:  
Most teenage pregnancies are unplanned and around half end in an abortion. As well as it being an avoidable experience for the young woman, abortions represent an avoidable cost to the NHS.

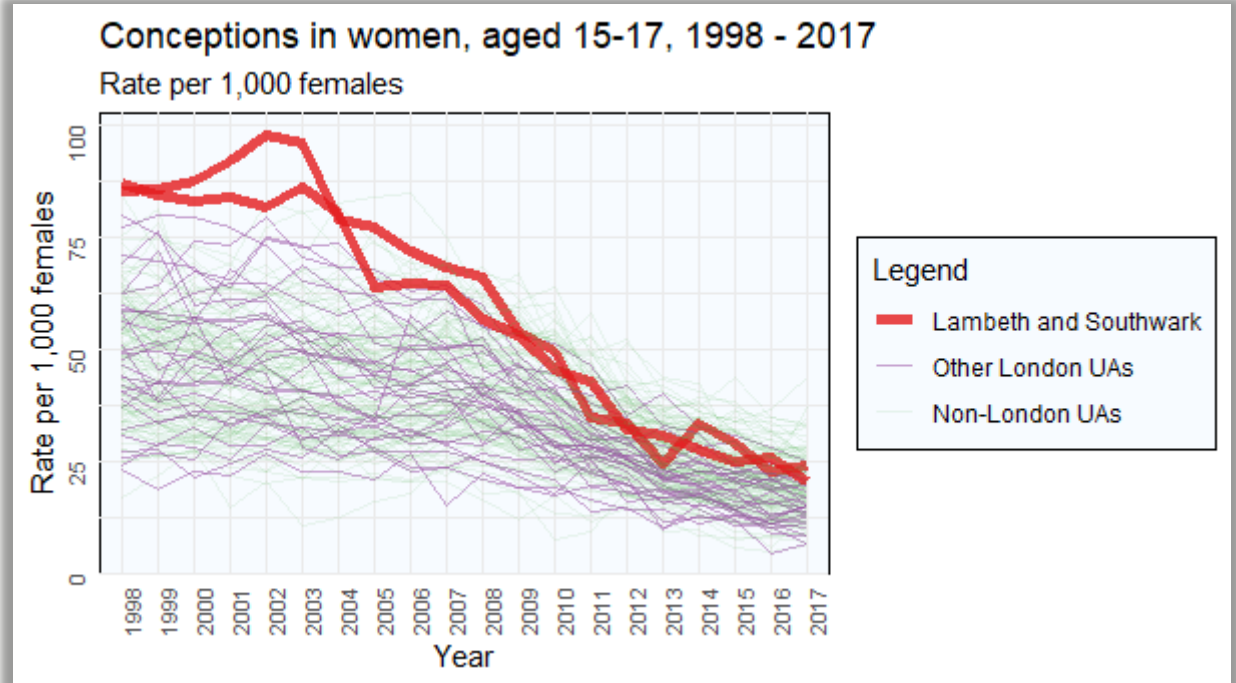
Position:

The under 18's conception rates are as follows:

- Lambeth: 23.9 per 1000 females
- Southwark: 20.4 per 1000 females

Lambeth's under 18 conception rate is higher than the 3<sup>rd</sup> quartile while Southwark's between this and the national median.

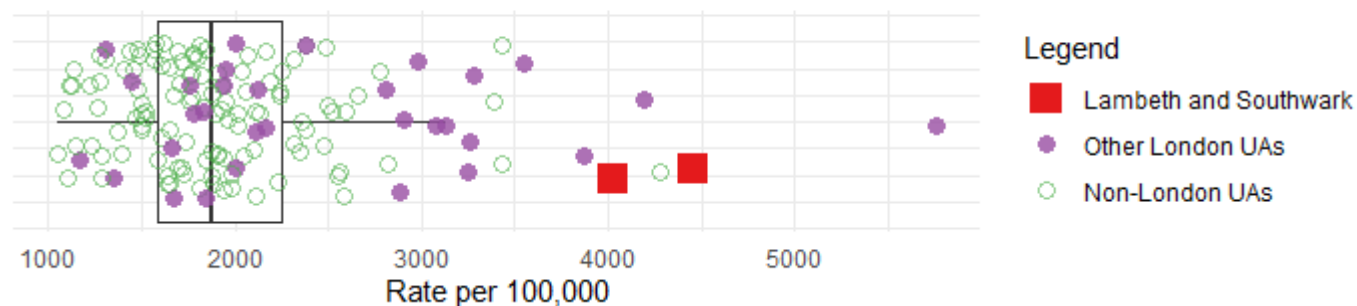
Over the last 20 years great efforts have resulted in a relative convergence of under 18 conception rates; national variation is now much lower than it was in 2000.



# Chlamydia detection rate (per 100,000 population aged 15 – 24)

Chlamydia detection rate, aged 15-24, 2018

Rate per 100,000



## Rationale for selection:

Chlamydia is the most commonly diagnosed bacterial sexually transmitted infection in England, with rates substantially higher in young adults than any other age group. It causes avoidable sexual and reproductive ill-health, including symptomatic acute infections and complications such as pelvic inflammatory disease (PID), ectopic pregnancy and tubal-factor infertility.

## Position:

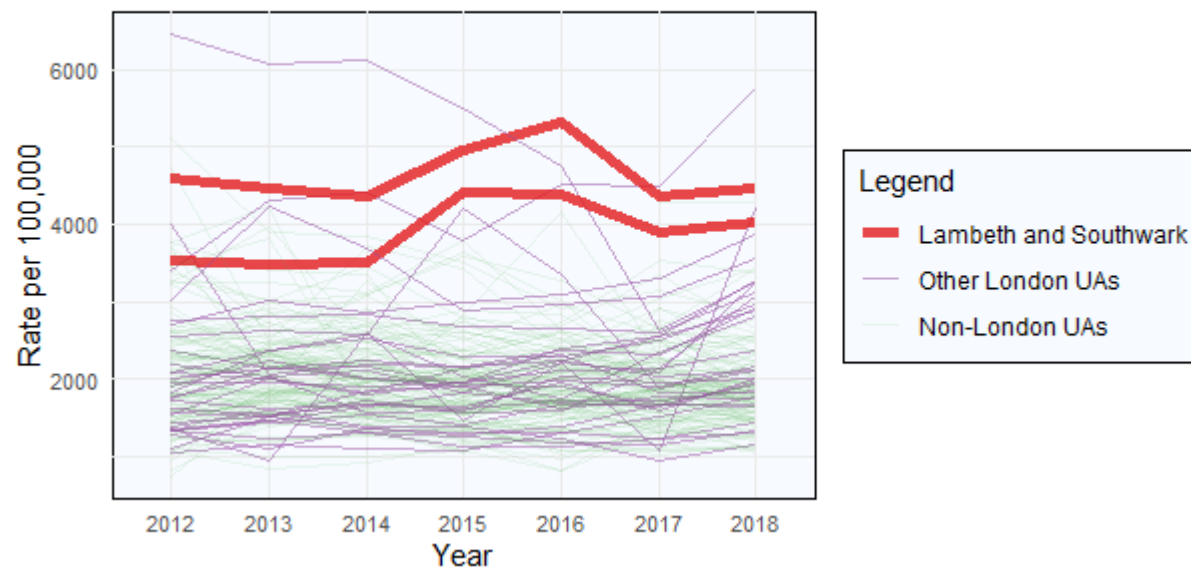
The rate of chlamydia detection per 100,000 population are as follows:

- Lambeth: 4460 per 100,000 population
- Southwark: 4026 per 100,000 population

Lambeth and Southwark are high outliers for chlamydia detection suggesting high prevalence and/or well-developed sexual health outreach services. Youthful populations and reduced stigma around accessing sexual health services may be influential here.

Chlamydia detection rate, aged 15-24, 2012 - 2018

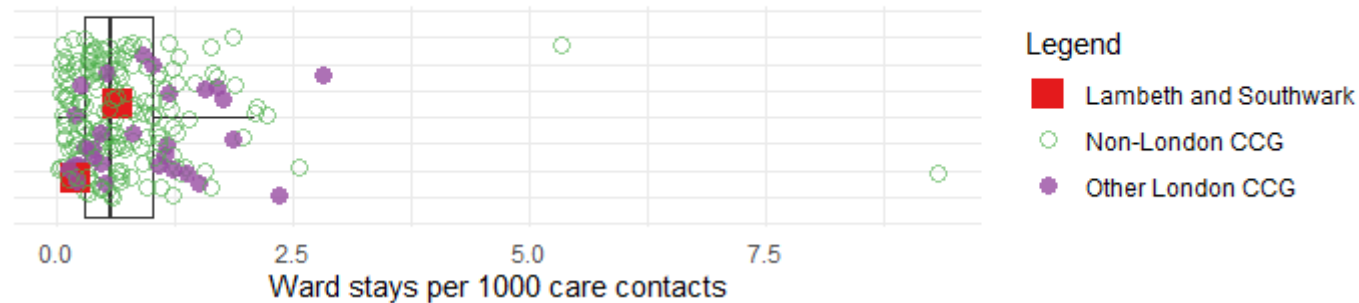
Rate per 100,000



# Children on adult wards (Stays per 1,000 care contacts)

Wards stays on adult mental health wards per 1000 care contacts, 2018/19

Children aged 0-16 years



## Rationale for selection:

Similar to the risk associated with Out of Area Placements, the risk of children being placed on adult wards is that they are less able to recover in unfamiliar settings and less able to benefit from age-specific design features of care/services.

## Position:

The relative rates of children staying on Adult MH wards are as follows:

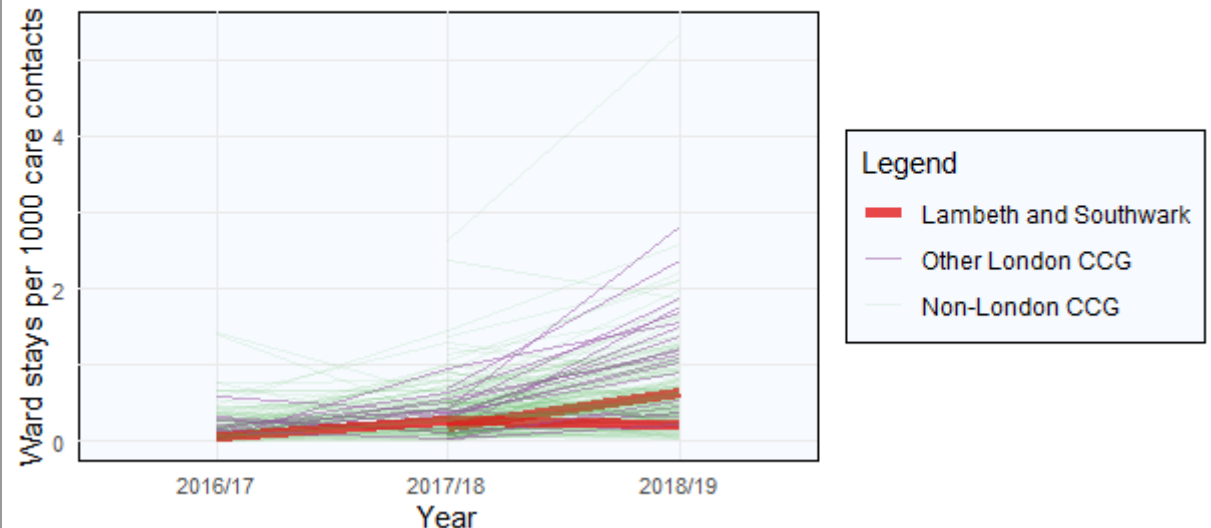
- Lambeth: 0.65 stays per 1000 care contacts
- Southwark: 0.21 stays per 1000 care contacts

High outlier = NHS Trafford CCG

While Southwark is below the national average, Lambeth CCG is positioned near the median. Both CCG's have maintained their current rate of children on adult wards while other London UA's have had sharp increases in recent years.

Wards stays on adult mental health wards per 1000 care contacts, 2016-19

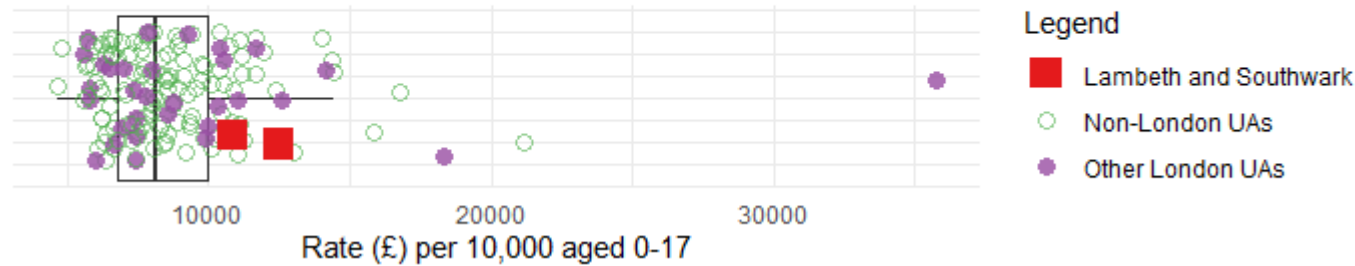
Children aged 0-16 years



# Financial investment in Mental Health Services by Local Authority

Local authority spend on CYP Mental health services, excluding education, 2017/18

Rate (£) per 10,000 age 0-17



## Rationale for selection:

An indicator of local authority spend on Child and Adolescent Mental Health (CYP) services informs us of

## Position:

The rates of local authority expenditure on CYP MH services are as follows:

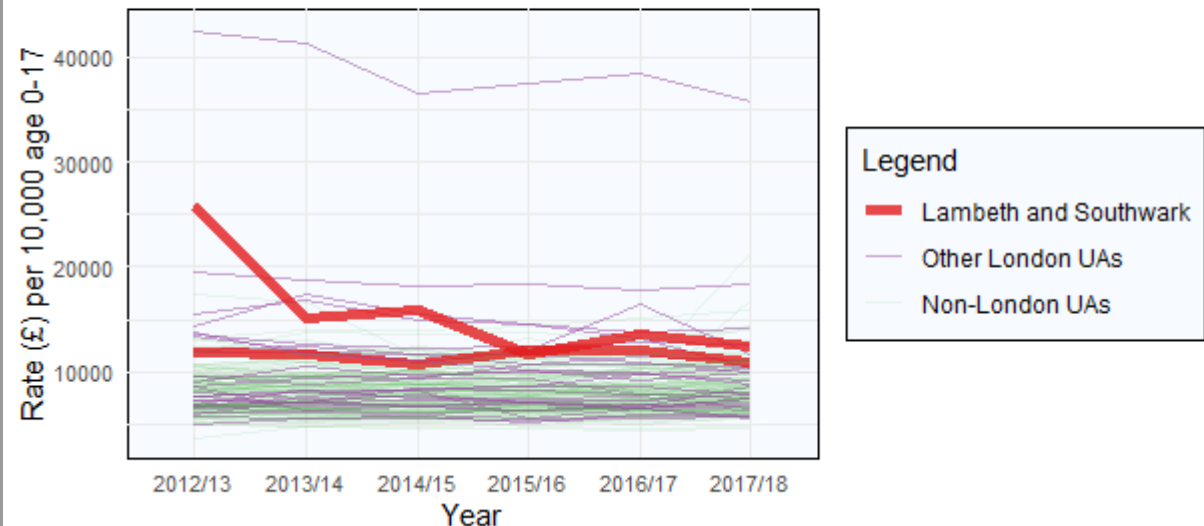
- Lambeth: £10,867 per 10,000 population >18
- Southwark: £12,483 per 10,000 population >18

High outlier: City of London

While most area closely situated, Lambeth and Southwark are investing above the average on CYP MH services and have been doing so since 2012/13.

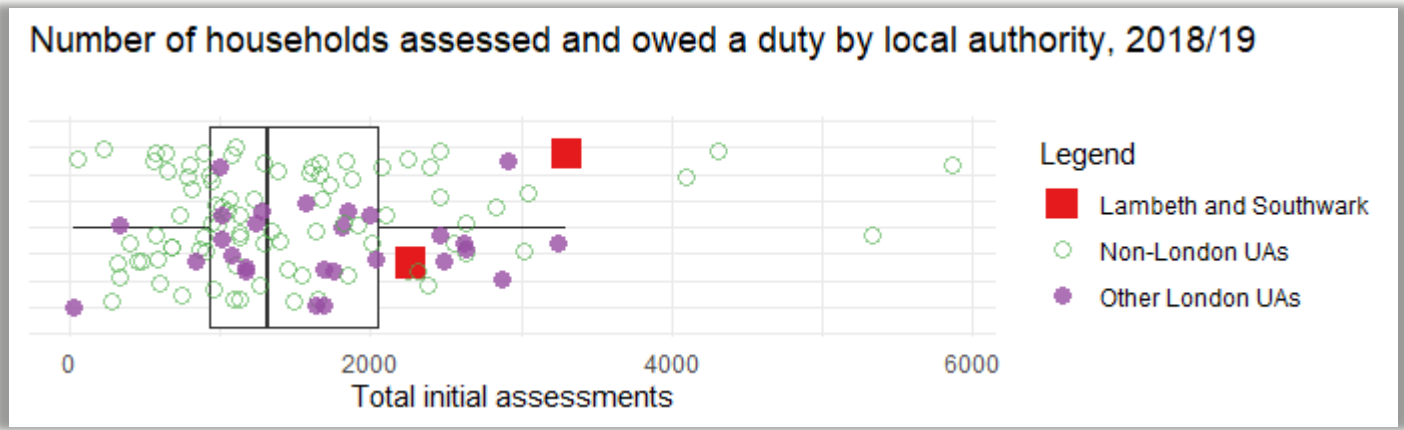
Local authority spend on CYP Mental health services, excluding education

Rate (£) per 10,000 age 0-17





# Homelessness Provision



Rationale for selection:  
 The homeless population demonstrate increased rates of high risk behaviours and are a more isolated population in terms of health service access. These factors along with wider living conditions combine to represent an increased risk of mental illness and distress in the homeless and rough sleeping population

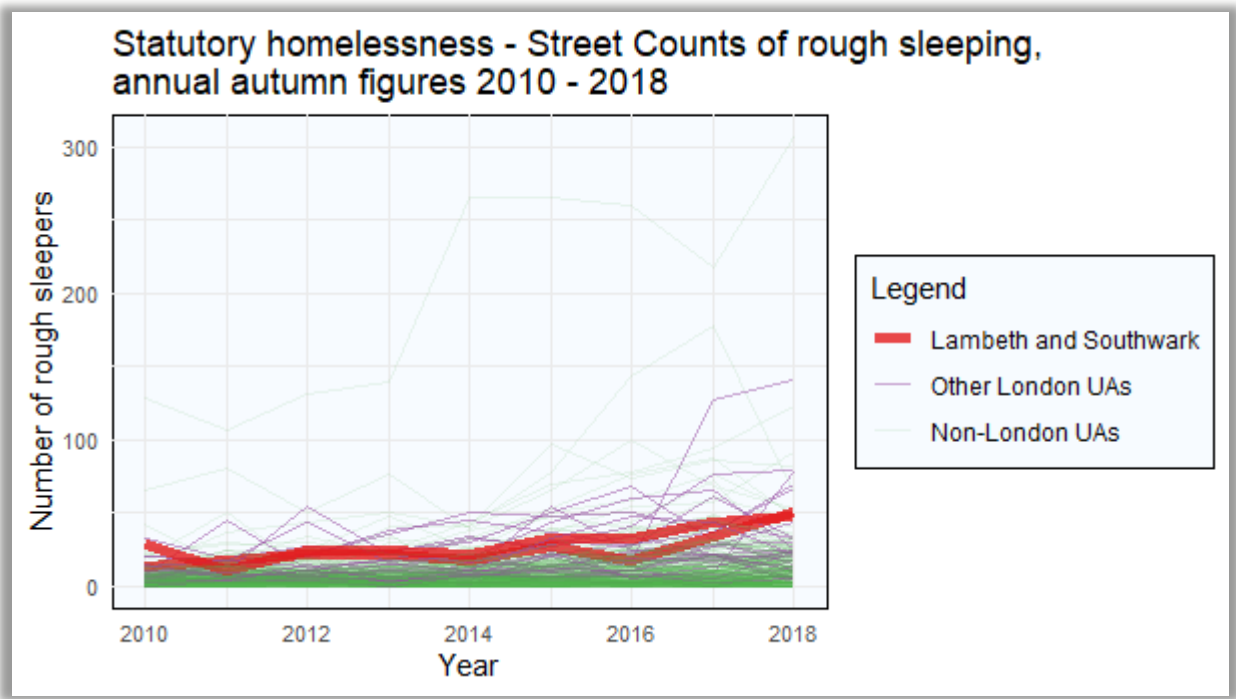
Position:

The number of initial household assessments completed are as follows:

- Lambeth: 2264
- Southwark: 3300

Lambeth and Southwark are positioned above the 3<sup>rd</sup> quartile with regard to homeless provision. Factors such as increased living costs and greater population density may contribute to this indicator.

Lambeth and Southwark have been above other non-London UA's since 2010.





# Out of Area Placements

Out of Area Placements (OAP) per 1000 care contacts, 2018/19

Under 18's in mental health services



## Rationale for selection:

Out of Area Placements involve a patient being transported and placed in a hospital outside their usual area of care. This can have significant effects of a patients ability to access their family and support networks which of a vital importance in terms of mental health recovery

## Position:

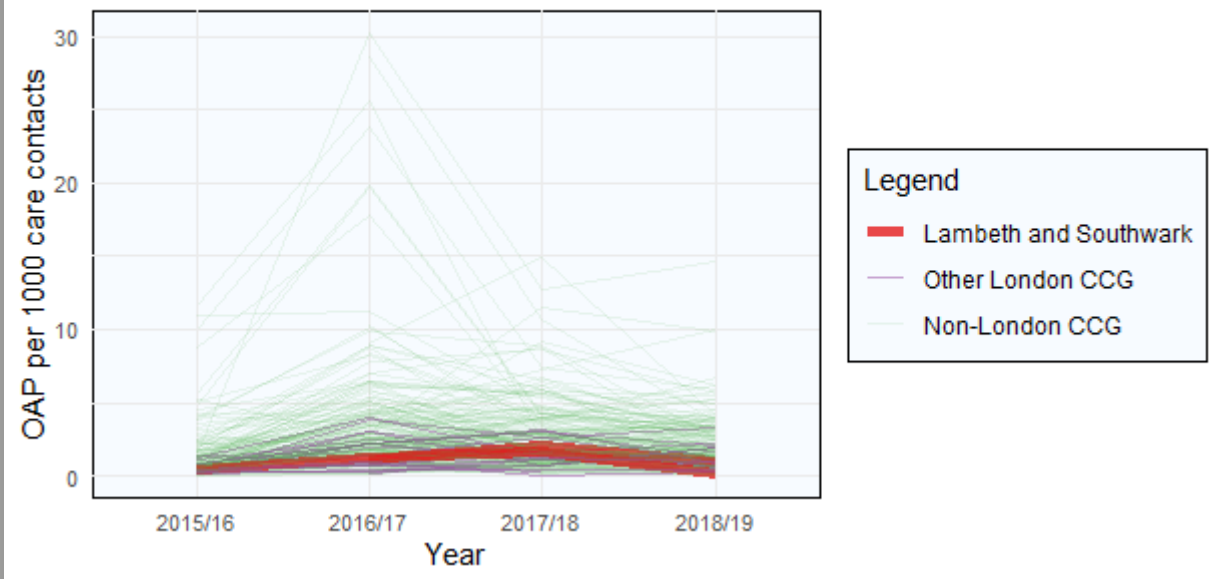
Rates of mental health Out of Area Placements are as follows:

- Lambeth: 1.03 OAP's per 1000 care contacts
- Southwark: 0.21 OAP's per 1000 care contact

Lambeth and South are below the national median and have a steady rate of OAP's since 2015/16. Generally, London UA's demonstrate a lower distribution of OAP rates when compared to that of other non-London UA's

Out of Area Placements (OAP) per 1000 care contacts, 2015-19

Under 18's in mental health services



# Access rates for CYP mental health services

## Percentage of CYP with a diagnosable MH condition receiving two or more contacts in the reporting period, 2018/19 Q4

Children aged 0-18 years



### Rationale for selection:

Many aspects can influence an areas Access Rate for CYP MH services, such as diagnosis rates, funding, population demographics and age profiles. A reduced CYPMH service access rate can indicate greater use of acute care services and poorer outcomes at the point on contact.

### Position:

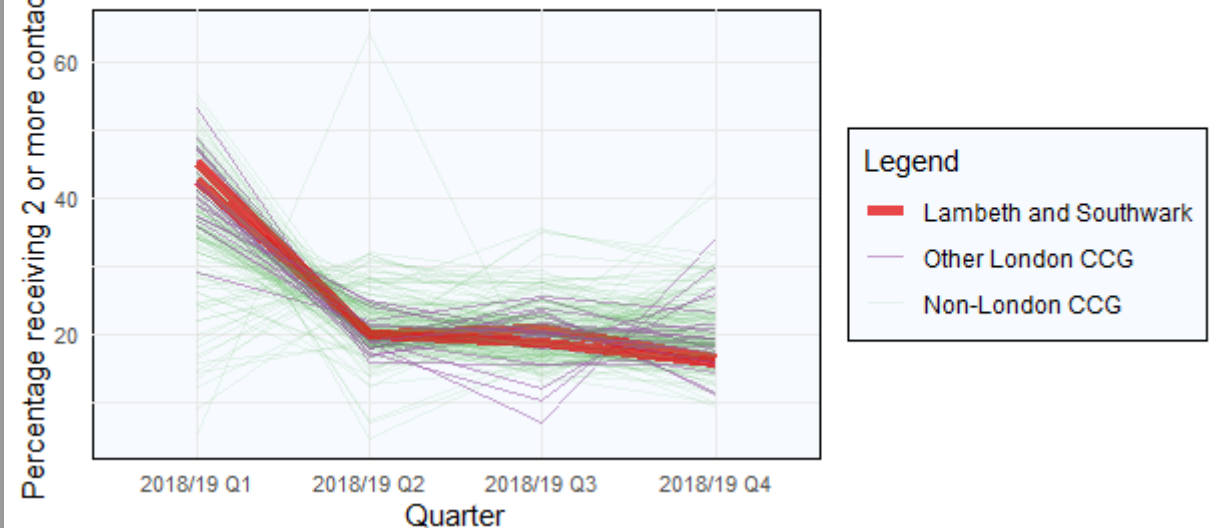
The percentages of CYP with a diagnosable MH condition receiving 2 or more contacts are as follows:

- Lambeth: 16.5%
- Southwark: 16%

The proportion of Lambeth and Southwark CYP MH patients receiving 2 or more contacts is similar to the national 1<sup>st</sup> quartile suggesting a different care model to that of Milton Keynes CCG with 64% of patients receiving 2 or more contacts.

## Percentage of CYP with a diagnosable MH condition receiving two or more contacts in the reporting period, 2018/19

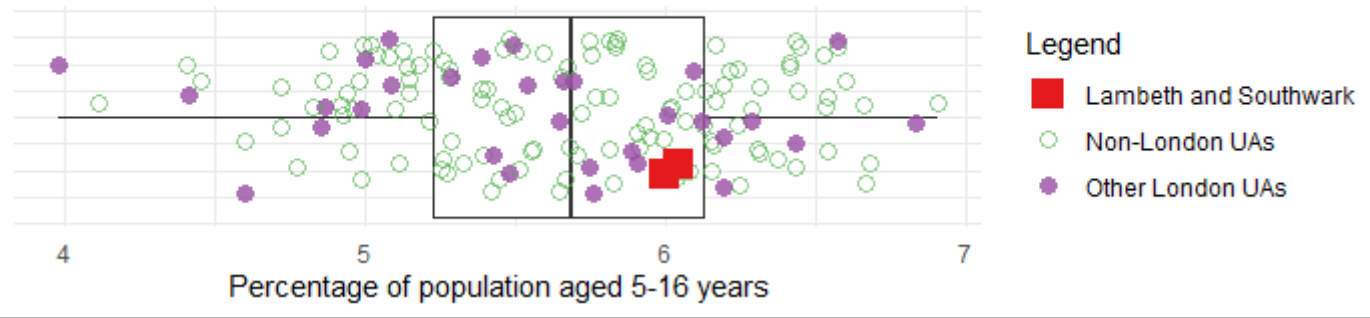
Children aged 0-18 years



# Estimated prevalence of conduct disorders in CYP (5-16 years)

Estimated prevalence of conduct disorders, 2015

Percentage of population aged 5-16 years



## Rationale for selection:

A baseline estimate of mental illness prevalence predicates any comparison or intervention design to ensure appropriate measures are taken. This measure is based on prevalence from the ONS survey Mental health of children and young people in Great Britain (2004).

## Position:

The estimated prevalence(s) of conduct disorders in Children and Young People (CYP) are as follows:

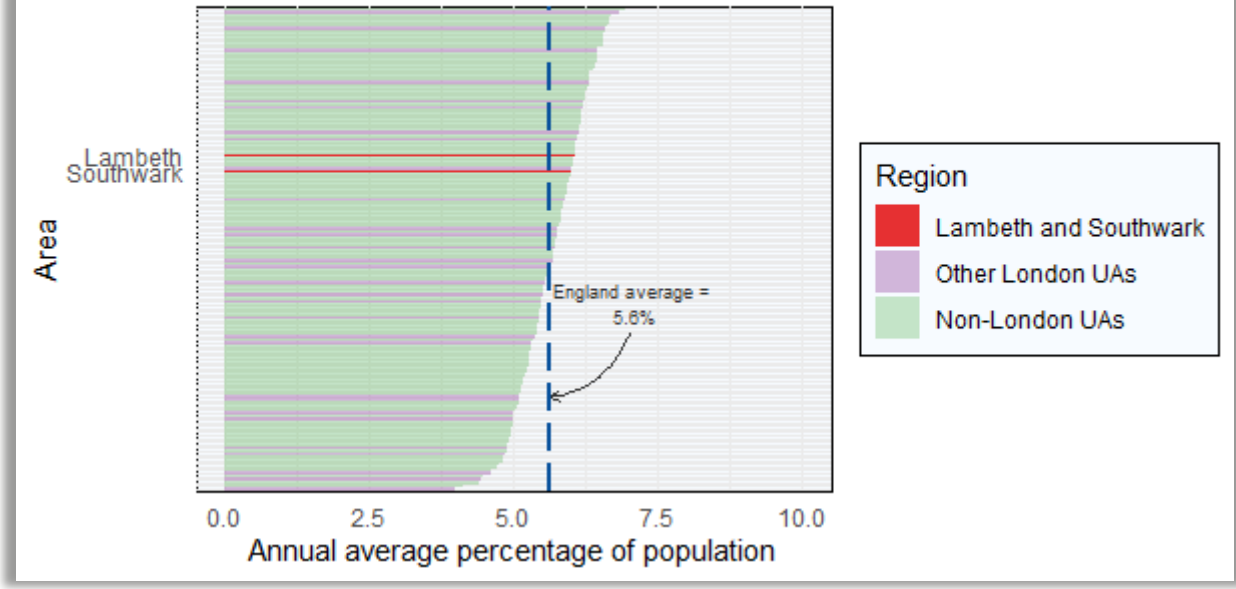
- Lambeth: 6.0%
- Southwark: 5.9%

Most recent available date from 2015 suggest both Lambeth and Southwark boroughs are above the national average in terms of prevalence of conduct disorders.

There is no clear distribution of London UA's compared to that of non-London UA's.

Estimated prevalence of conduct disorders, 2014-15

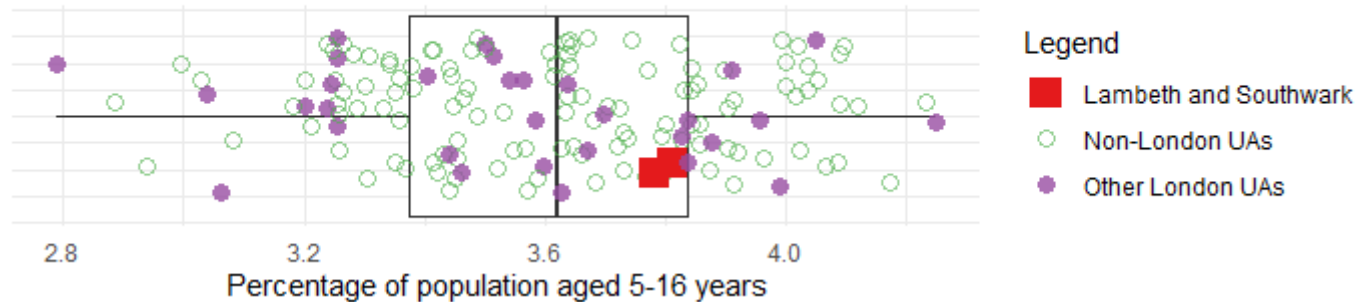
Children aged 5-16 years



# Estimated prevalence of emotional disorders in CYP (5-16 years)

Estimated prevalence of emotional disorders, 2015

Percentage of population aged 5-16 years



## Rationale for selection:

A baseline estimate of mental illness prevalence predicates any comparison or intervention design to ensure appropriate measures are taken.

This measure is based on prevalence from the ONS survey Mental health of children and young people in Great Britain (2004).

## Position:

The estimated prevalence(s) of emotional disorders in Children and Young People (CYP) are as follows:

- Lambeth: 3.8%
- Southwark: 3.7%

Most recent available date from 2015 suggest both Lambeth and Southwark boroughs are above the national average in terms of prevalence of emotional disorders.

There is no clear distribution of London UA's compared to that of non-London UA's.

Estimated prevalence of emotional disorders, 2014-15

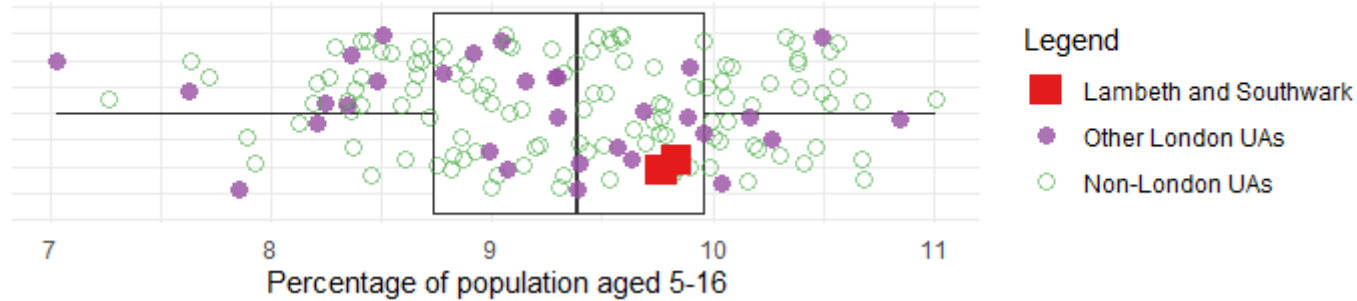
Children aged 5-16 years



# Estimated prevalence of mental health disorders in CYP (5-16 years)

Estimated prevalence of mental health disorders in children and young people, 2015

Percentage of population aged 5-16



## Rationale for selection:

A baseline estimate of mental illness prevalence predicates any comparison or intervention design to ensure appropriate measures are taken.

This measure is based on prevalence from the ONS survey Mental health of children and young people in Great Britain (2004).

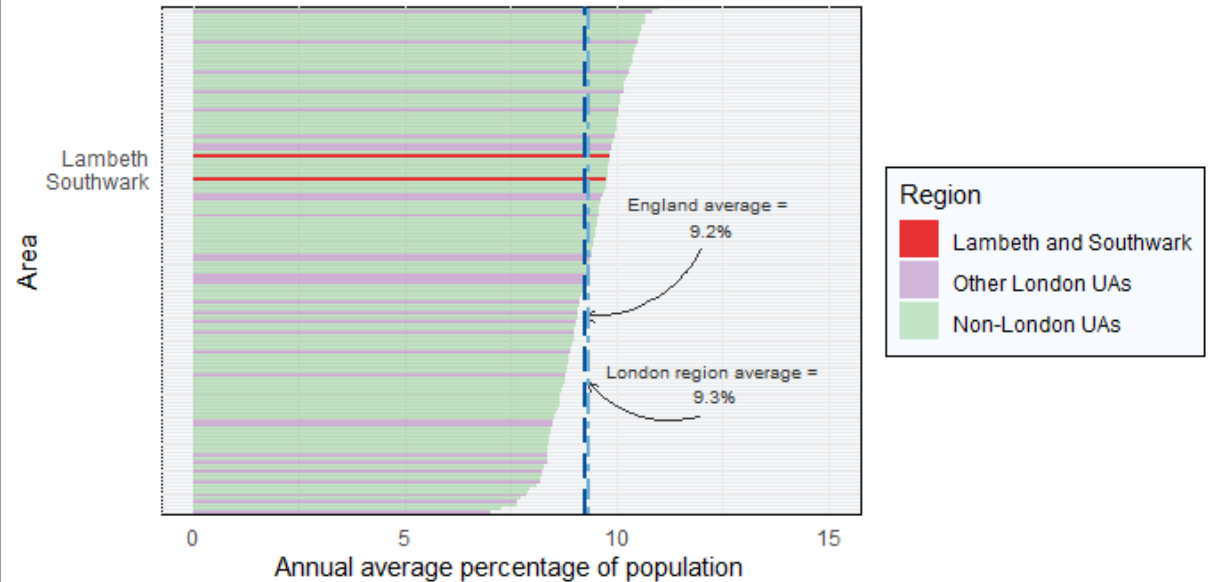
## Position:

The estimated prevalence of mental health disorders for Lambeth and Southwark are above the national median, but lower than the 3<sup>rd</sup> quartile.

London boroughs are evenly distributed across the national dataset, with the estimated prevalence higher in Southwark and Lambeth than the London region average.

Estimated prevalence of mental health disorders in CYP, 2014-15

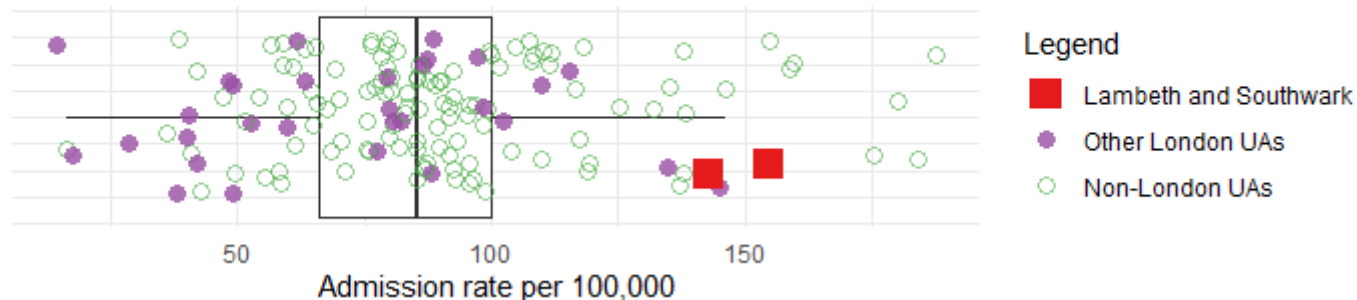
Children aged 5-16 years



# Hospital admissions for mental health conditions

## Hospital admissions for mental health conditions, 2017/18

Inpatient admission rate for mental health disorders per 100,000 population aged 0-17 years.



## Rationale for selection:

One in ten children aged 5-16 years has a clinically diagnosable mental health problem. Failure to recognise and treat mental health disorders in children can have a devastating impact on their future, resulting in reduced job and life expectations

## Position:

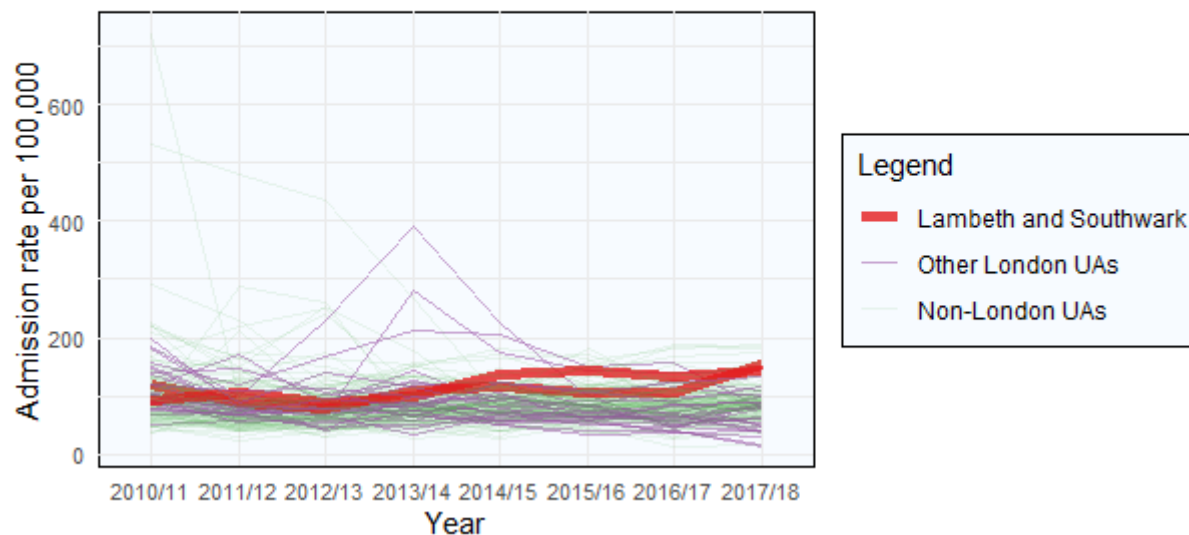
The admission rates for mental health conditions per 100,000 population are as follows:

- Lambeth: 154.8 admissions per 100,000 pop
- Southwark: 142.8 admissions per 100,000 pop

Lambeth and South are positioned considerably high relative to other London UA's and have been steadily increasing from around the average in 2010/11 to above it in 2017/18.

## Hospital admissions for mental health conditions, 2010/11 - 2017/18

Inpatient admission rate for mental health disorders per 100,000 population aged 0-17 years

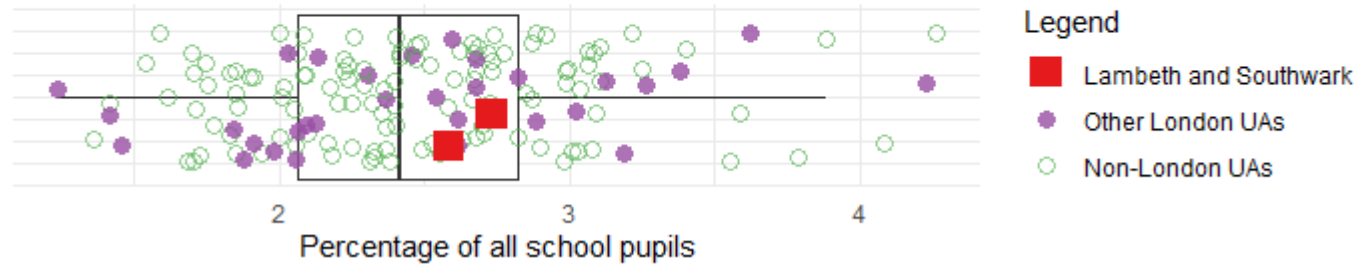




# Pupils with social and emotional mental health needs

## The number of school children who are identified as having social, emotional and mental health needs, 2018

Percentage of all school pupils



## Rationale for selection:

The National Clinical Practice Guidelines state that children with learning or physical disabilities have a risk of developing a mental health problem compared to the national population.

*British Psychological Society 2005*

## Position:

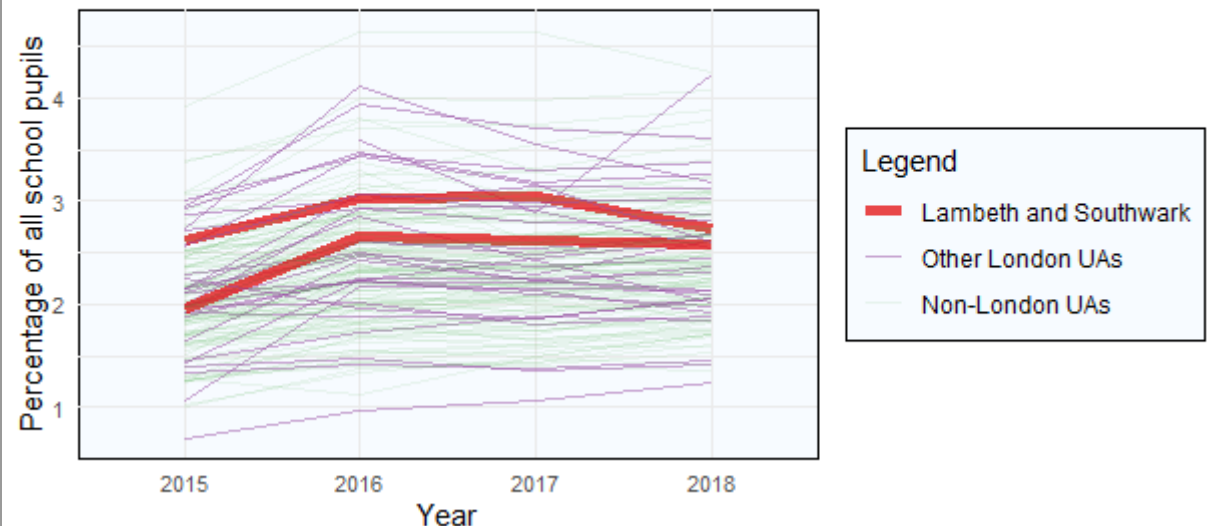
The relative percentage of school pupils identified as having a social, emotional and mental health needs are as follows:

- Lambeth: 2.7%
- Southwark: 2.5%

This suggests the proportion of children with such needs in Lambeth and Southwark are slightly above the national median, however the proportions are changing in line with national patterns since 2015.

## The number of school children who are identified as having social, emotional and mental health needs, 2015 - 2018

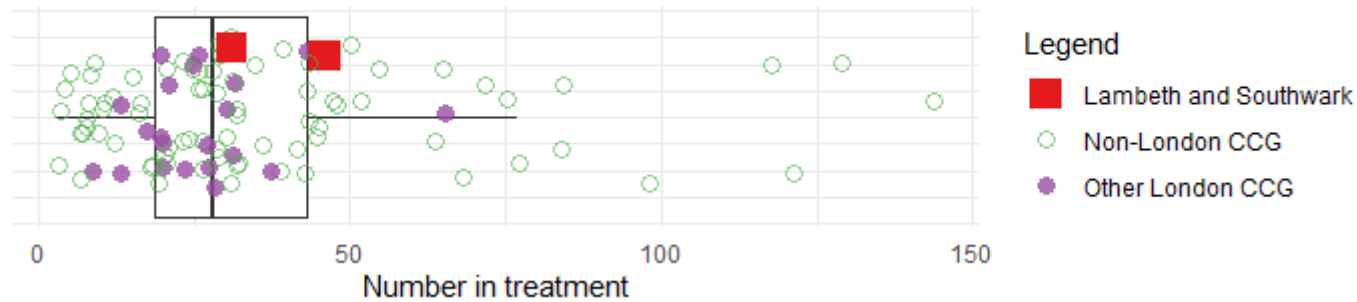
Percentage of all school pupils



# Children and Young People treated for Eating Disorders

The number of patients that started treatment for eating disorders, 2018/19

Children and young people



## Rationale for selection:

Eating disorders can have long lasting and very severe effects on a person's physical and mental health, including serious mental conditions as well as metabolic, gastro-intestinal and cancer-related physical health complications.

## Position:

The numbers of Children and Young People (CYP) in treatment for Eating Disorders during 2018/19 are as follows:

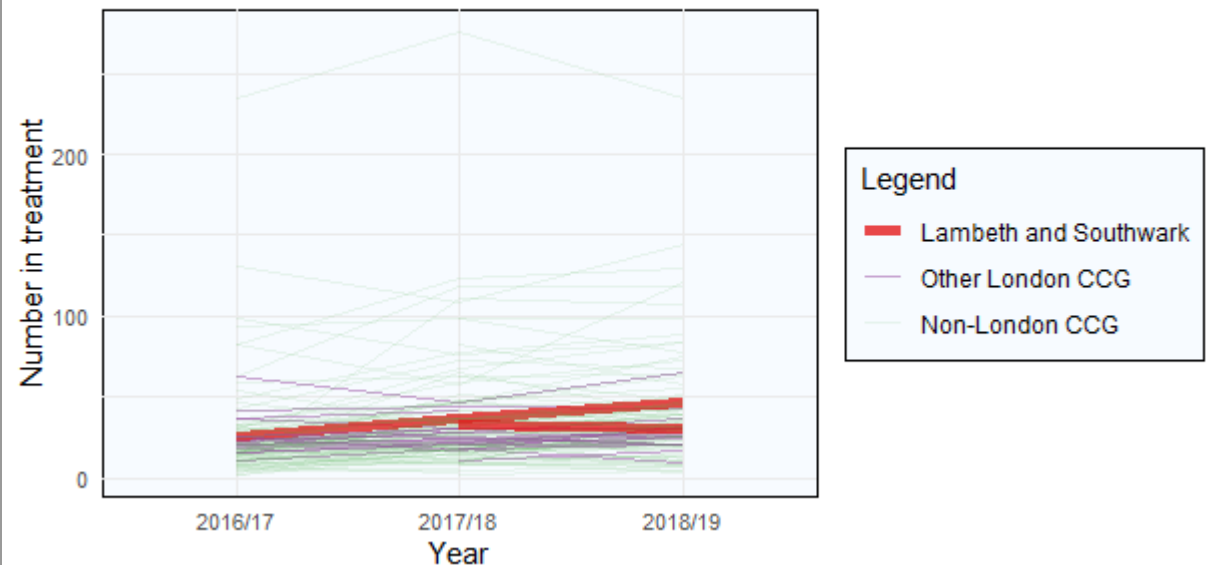
- Lambeth: 31 people
- Southwark: 46 people

The number in treatment in Lambeth is similar to the national median, which a greater demand for care is seen in Lambeth with numbers above the 3<sup>rd</sup> quartile.

While the demand for care is higher in Lambeth, this indicator does not quantify need for care, rather it communicates varying provision.

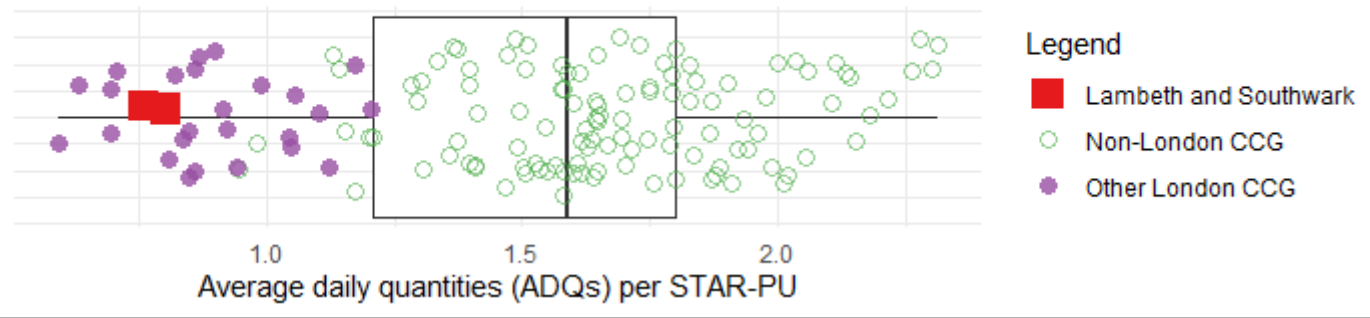
The number of patients that started treatment for eating disorders

Children and young people



# Prescription data - Antidepressants

Antidepressant prescribing: average daily quantities (ADQs) per STAR-PU, 2017/18  
18+ years old



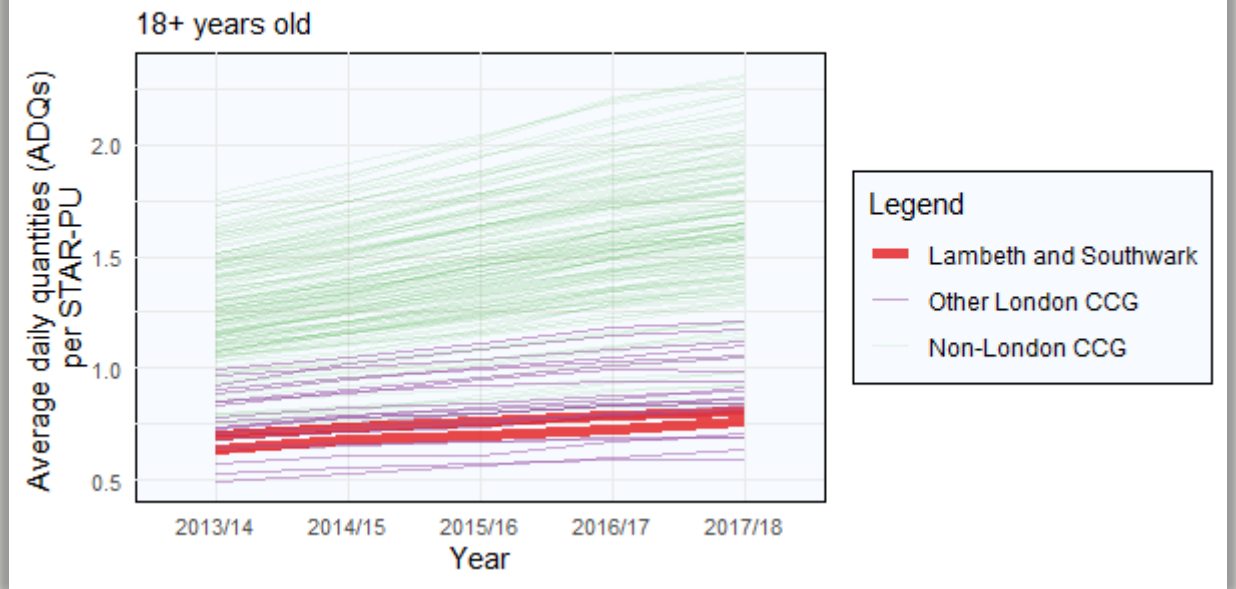
## Rationale for selection:

Antidepressants can be prescribed for a range of conditions but mainly to treat clinical depression in adults. They can be difficult to withdraw from with long-term use.

## Position:

Lambeth and Southwark are below average for London CCGs, and all London CCGs are in the bottom quartile nationally. This could in part be due to the younger and more transient population profile of many London boroughs.

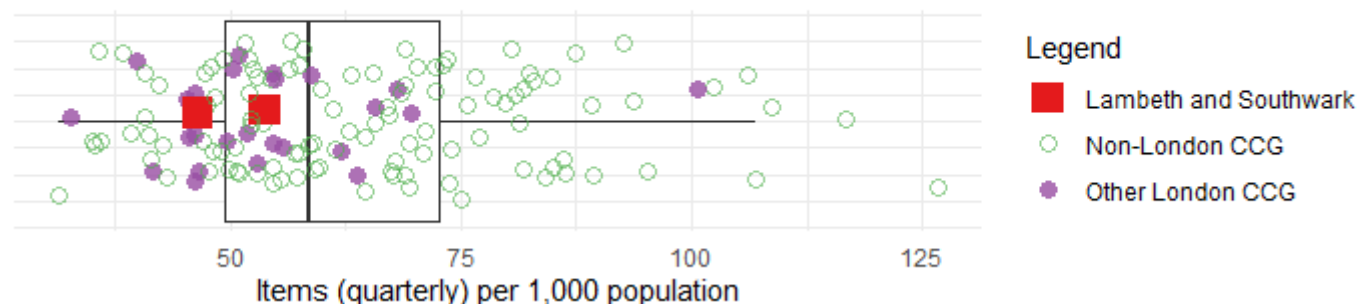
Antidepressant prescribing: average daily quantities (ADQs) per STAR-PU  
18+ years old



# Prescription data – Anti-psychotic medication

GP prescribing of drugs for psychoses and related disorders , 2017/18 Q4

All ages



## Rationale for selection:

Antipsychotics medicines are used mainly for the management of schizophrenia and bipolar disorder symptoms. Their use might suggest high prevalence of those disorders and/or systematic over-use.

## Position:

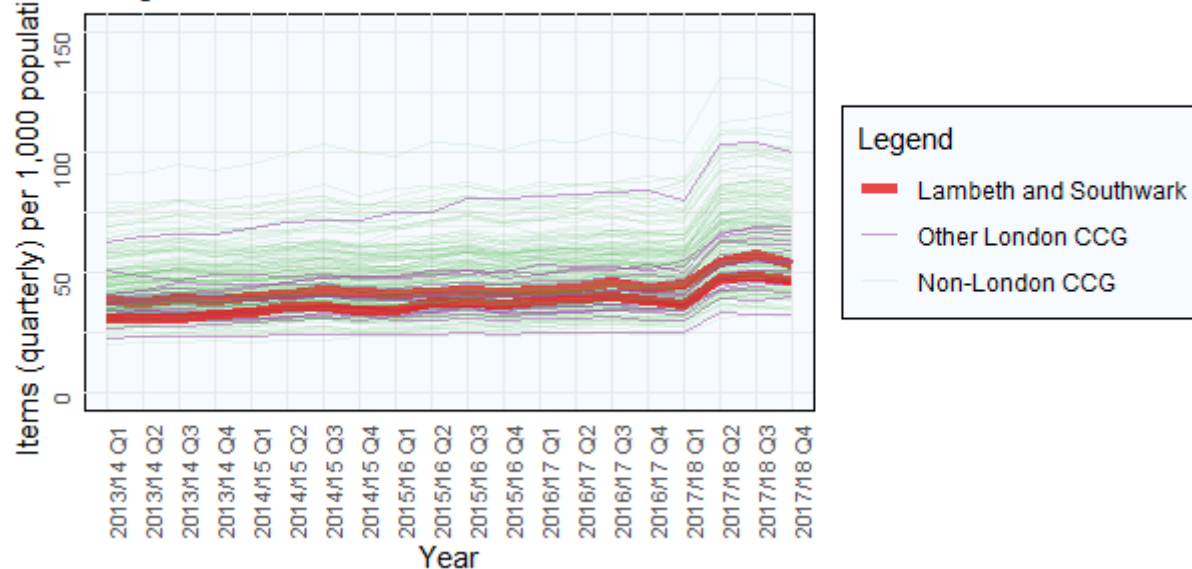
Both areas are currently below the national median and about average compared to levels across London.

- Lambeth: 53.8 per 1,000 population
- Southwark: 46.5 per 1,000 population

As seen nationally, both areas have seen marked increases in the levels of prescribing in 2017/18.

GP prescribing of drugs for psychoses and related disorders

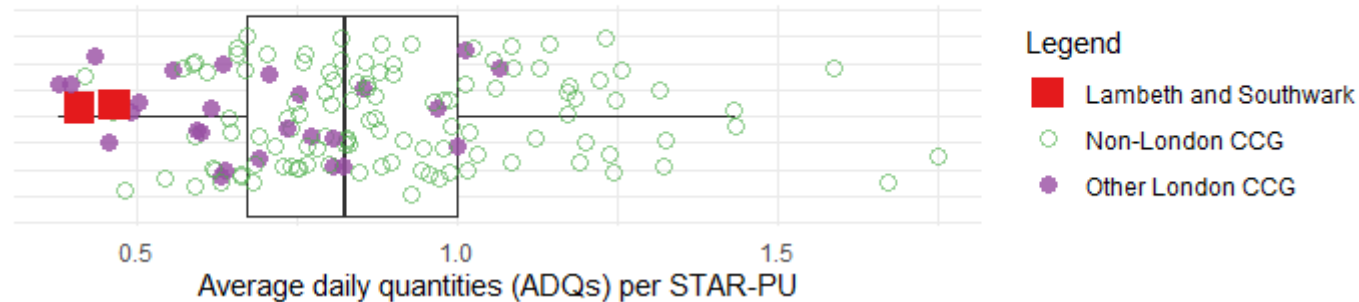
All ages



# Prescription data – Hypnotic Medication

## Hypnotics prescribing: average daily quantities (ADQs) per STAR-PU, 2017/18

18+ years old



## Rationale for selection:

Hypnotic medicines such as benzodiazepines are used for treating sleep problems and also anxiety. Long-term use can cause emotional imbalance, loss of confidence and feelings of isolation.

## Position:

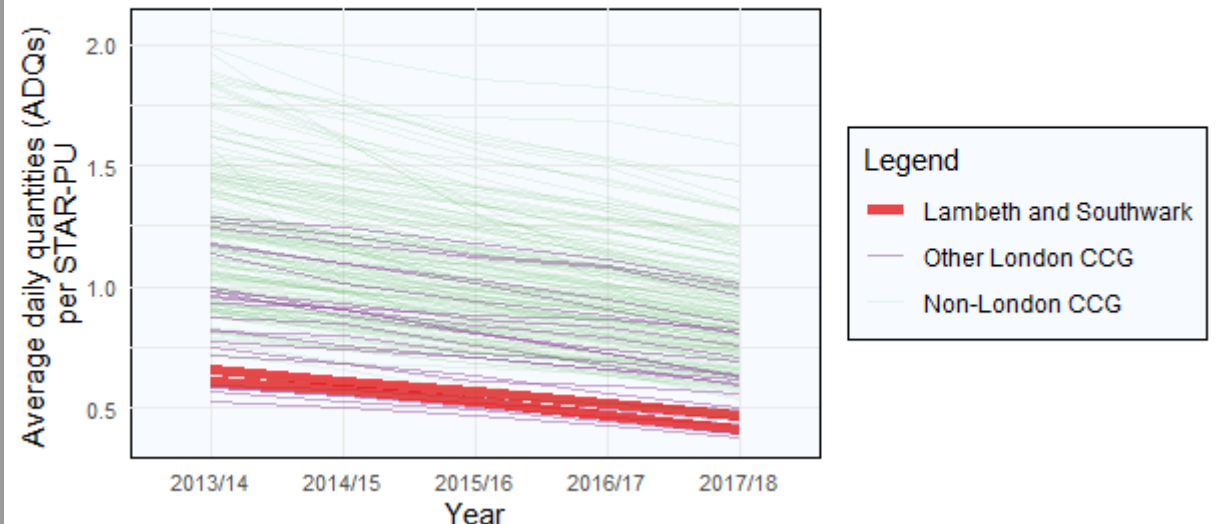
Both Lambeth and Southwark currently have very low levels of hypnotic prescribing, as do most parts of London:

- Lambeth: 0.47 per adjusted prescribing unit
- Southwark: 0.41 per adjusted prescribing unit

Long-term trends suggest their use is also falling at a faster rate than most other areas.

## Hypnotics prescribing: average daily quantities (ADQs) per STAR-PU

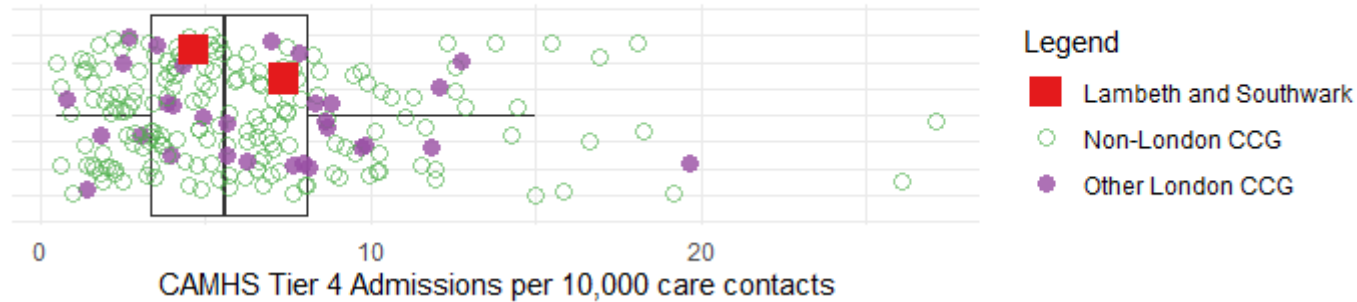
18+ years old



# CAMHS Tier 4 Admissions for adolescents

CAMHS Tier 4 Admission rate per 10,000 Care Contacts, 2018/19

0-24 years old



## Rationale for selection:

Admission to a mental health inpatient bed should be reserved for those children and young people in most severe need. High rates of admission could suggest high levels of that need or poor provision of other community mental health services.

## Position:

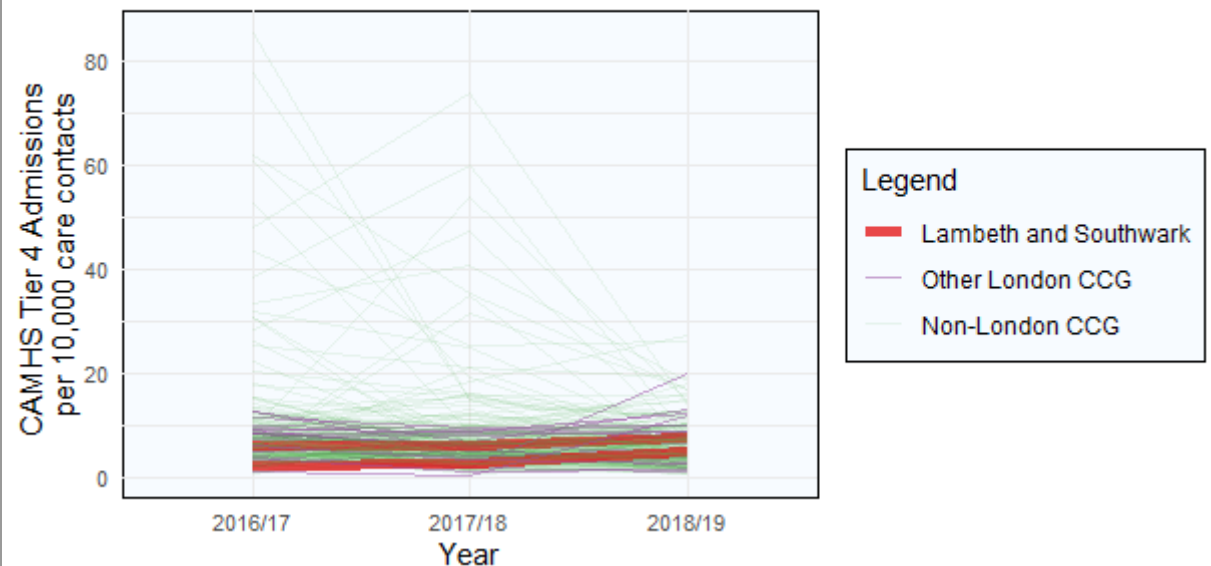
Both Lambeth and Southwark currently have admission rates around the national median:

- Lambeth: 7.4 per 10,000 contacts
- Southwark: 4.7 per 10,000 contacts

There is a small but persistent increase in these rates, slightly higher than the growth nationally over time.

CAMHS Tier 4 Admission rate per 10,000 Care Contacts

0-24 years old

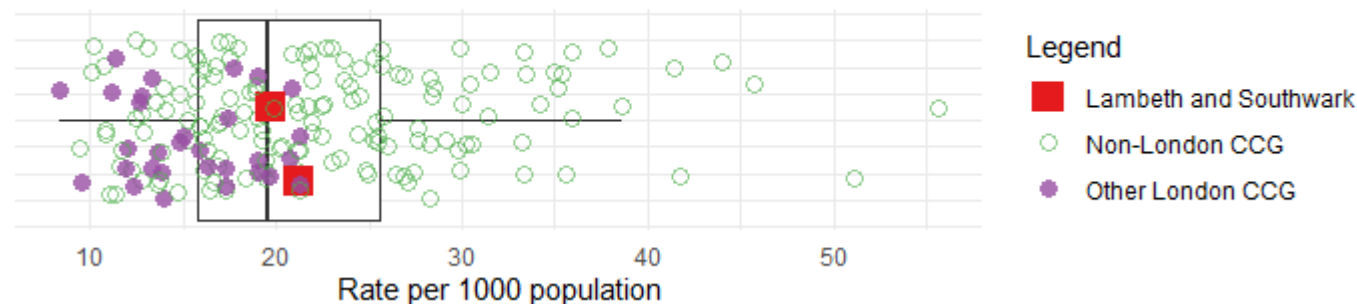




# Referrals to IAPT services in under 25's

Rate of referrals made to IAPT service, per 1000 10-24 years population, 2018/19

All IAPT referrals types



## Rationale

IAPT is recognised as an ambitious programme of talking therapies and in the past year alone more than one million people accessed IAPT services for help to overcome their depression and anxiety, and better manage their mental health.

## Position

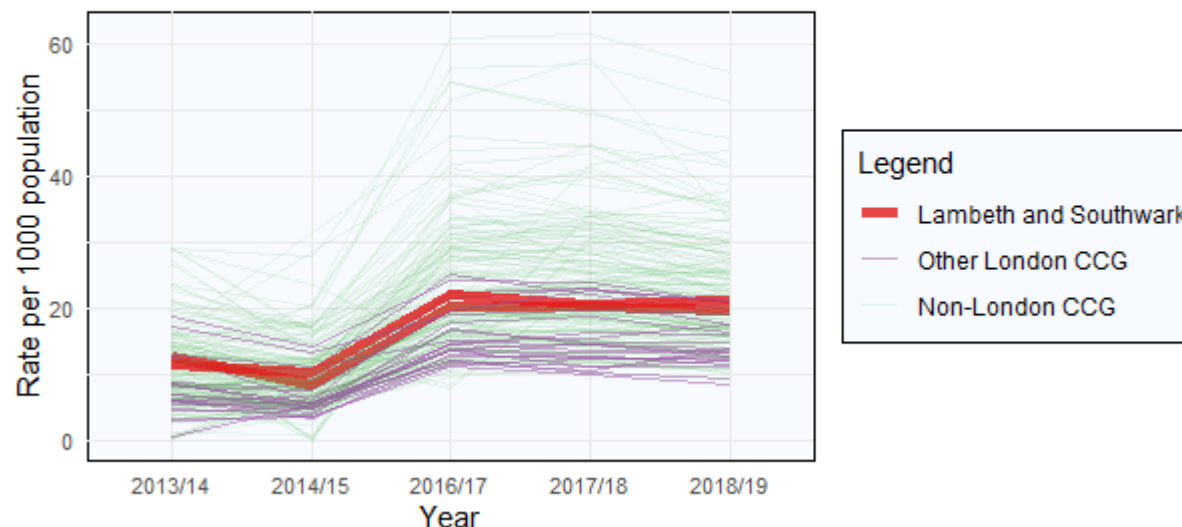
The rates of referral to IAPT services per 1000 population aged 10-24 years are as follows:

- Lambeth: 21.1 referrals per 1000 population
- Southwark: 19.7 referrals per 1000 population

Both Lambeth and Southwark are centrally positioned in terms of their rate of referrals and both follow the national trends since 2013/14.

Rate of referrals made to IAPT service, per 1000 10-24 years population

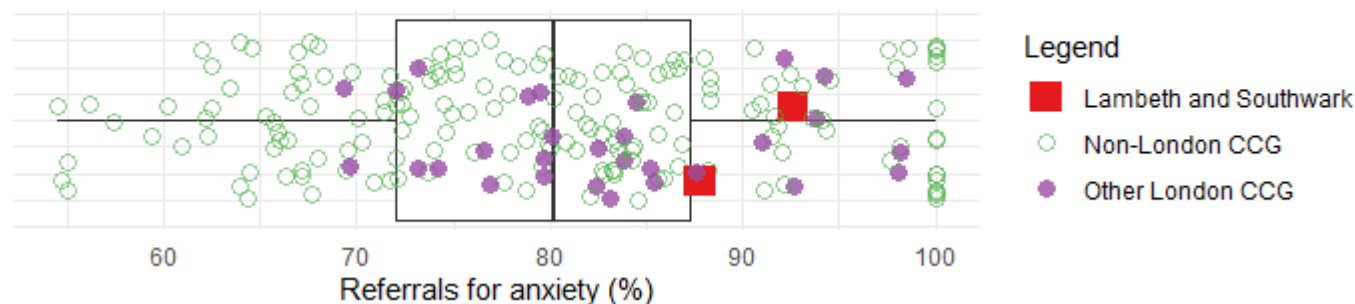
All IAPT referrals types



# Referrals to IAPT services in under 25's - Anxiety

Percentage of referrals for Anxiety (GAD7Score > 11), 2018/19

10-24 years old



## Rationale

IAPT is recognised as an ambitious programme of talking therapies and in the past year alone more than one million people accessed IAPT services for help to overcome their depression and anxiety, and better manage their mental health.

## Position

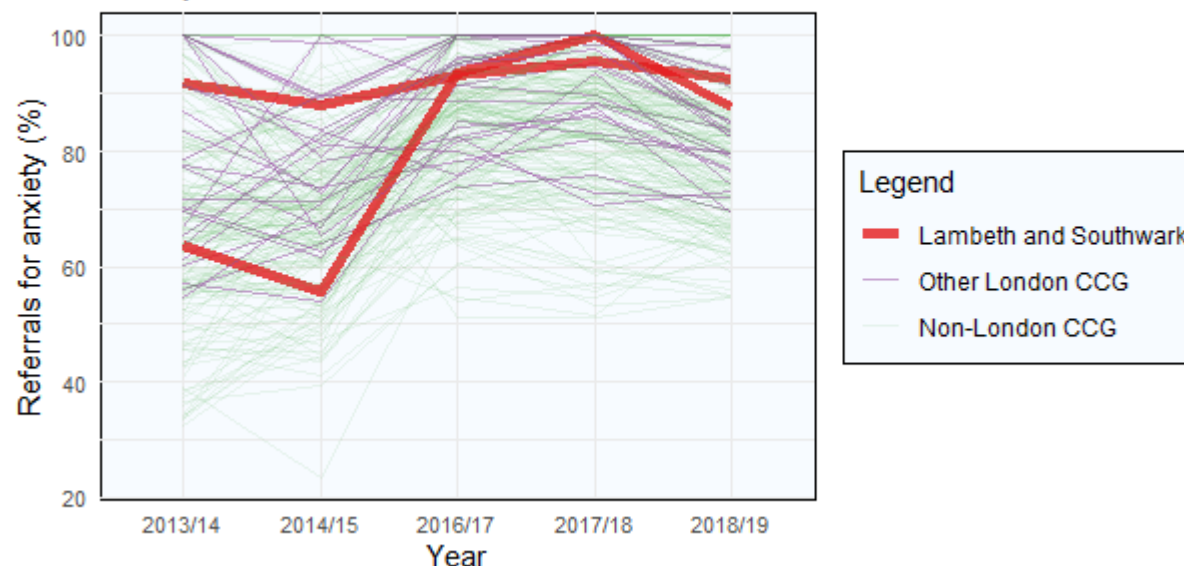
The respective proportion of referrals that were made to IAPT for Anxiety therapies were:

- Lambeth: 87%
- Southwark: 92%

Since 2013/14 the proportion of referrals made for anxiety in Southwark has risen rapidly, from below average to above the 3<sup>rd</sup> quartile. This may be due to referral practices, increased prevalence or changing population characteristics.

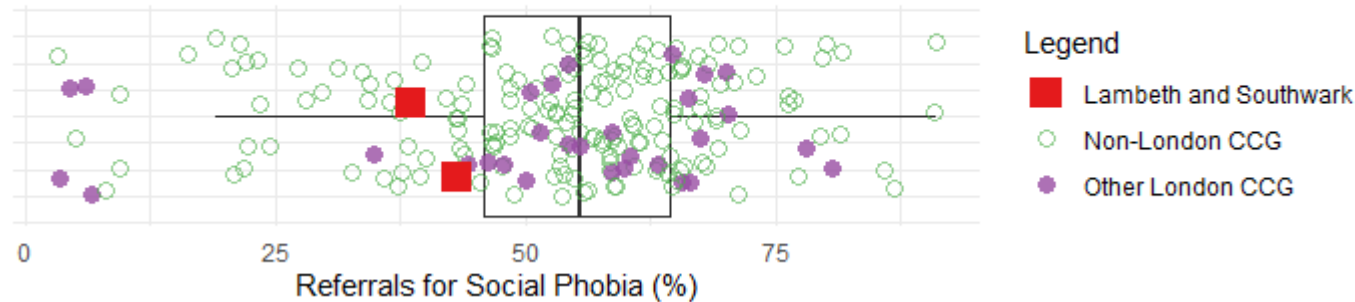
Percentage of referrals for Anxiety (GAD7Score > 11)

10-24 years old



# Referrals to IAPT services in under 25's – Social Phobia

Percentage of referrals for Social Phobia, 2018/19  
10-24 years old



## Rationale

IAPT is recognised as an ambitious programme of talking therapies and in the past year alone more than one million people accessed IAPT services for help to overcome their depression and anxiety, and better manage their mental health.

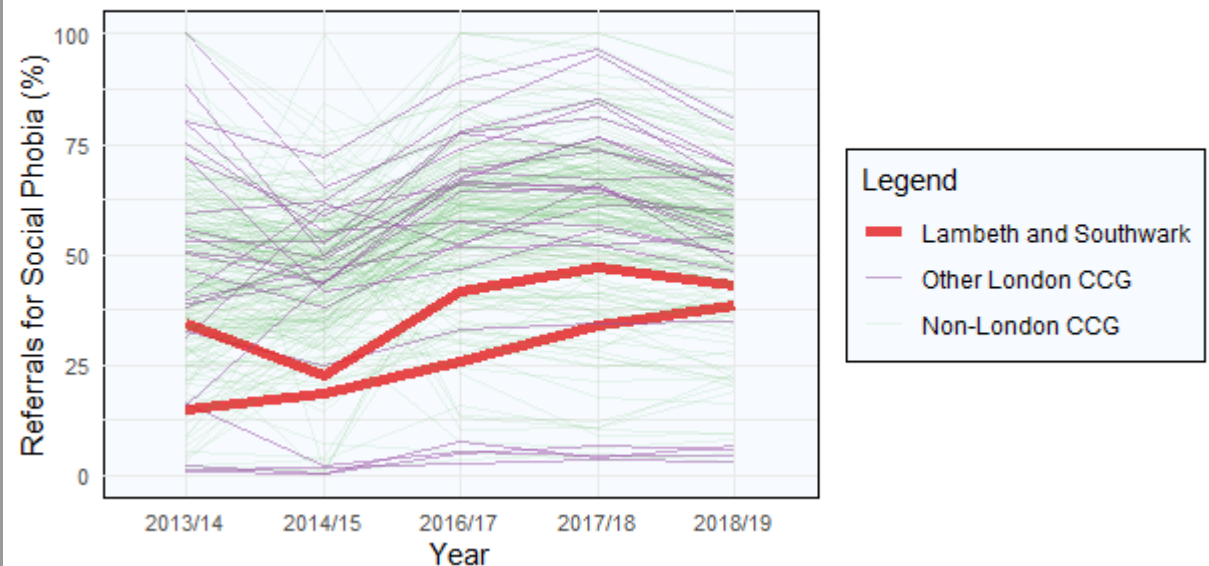
## Position

The respective proportions of referrals made to IAPT for social phobias are as follows:

- Lambeth: 38%
- Southwark: 43%

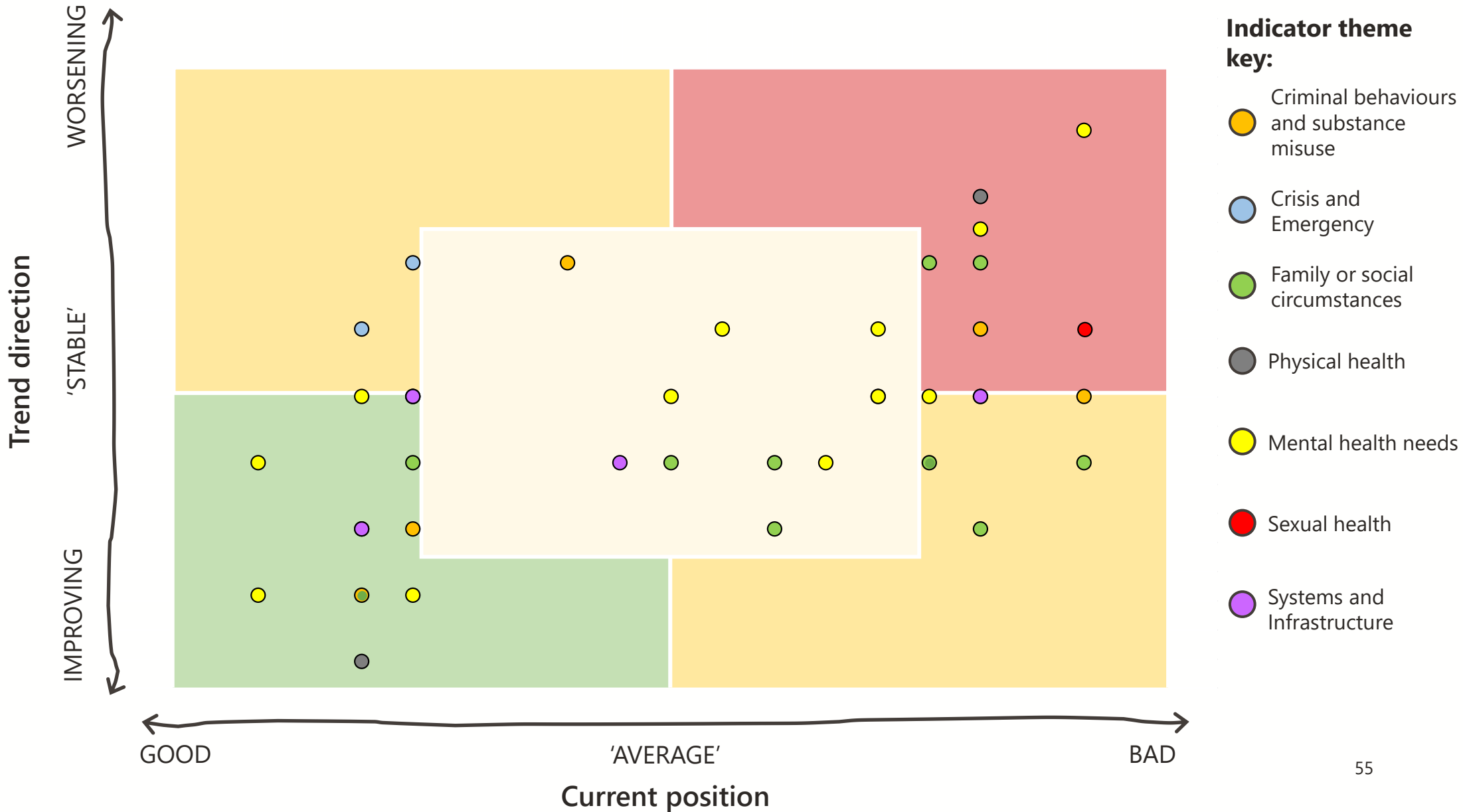
The proportion of referrals for social phobias for both boroughs are below the national average, and have been so since 2013/14. London boroughs are distributed evenly across the dataset.

Percentage of referrals for Social Phobia  
10-24 years old



# **Overall indicator summary**

# Based on the current position of the indicator and longer-term trends...



## Priority issues?

- **Hospital admissions for mental health conditions (under 18's)\***
- **Planned admission rate for physical health conditions (under 20's)\***
- **Referrals to IAPT with anxiety\***
- Children in care - asylum seeking children
- Overall crime rates
- Chlamydia infection rates (15-24's)

## Emerging issues?

- **Unplanned admission rate for physical health conditions (under 20's)\***
- **Admissions for self-harm (10-24's)\***
- **Admissions for substance misuse (15-24's)\***
- Children under child protection plan (abuse)

\* Measures for which LSOA-level data will be obtainable for second stage analysis



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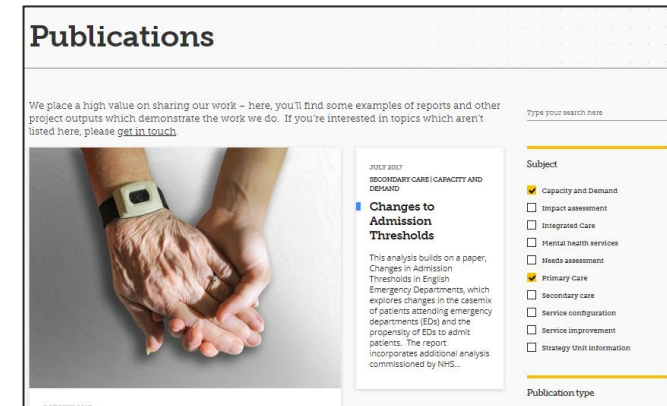
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