

Health and Social Care Scrutiny Commission

Tuesday 22 March 2022

7.00 pm

Ground Floor Meeting Room G02A - 160 Tooley Street, London SE1
2QH

Supplemental Agenda One

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7.	Update on CAMHS race equality work A presentation is enclosed on CAMHS to update the commission on race equality work. A presentation on the impact of substance misuse, particularly Skunk, on Mental Health is also enclosed.	3 - 21
8.	Elective Care Recovery KCH have provided an update on Elective Care recovery.	22 - 23

Contact

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Date: 17 March 2022



King's College Hospital
NHS Foundation Trust

King's College Hospital NHS Foundation Trust submission to the Southwark Health and Social Care Scrutiny Commission, March 2022.

King's College Hospital NHS Foundation Trust is one of the busiest and biggest Trusts in the country serving an inner-city population of 1.3 million people and acting as a tertiary referral centre for millions more.

This submission below sets out how the Trust, and in particular our Denmark Hill site - which cares for the people of Southwark – is supporting both our staff and members of the public with the symptoms of Long COVID.

Long COVID

King's was one of the first Trusts across the country to deliver support for people living with the symptoms of Long COVID and we continue to work with partners from across the region to provide Long COVID support.

There are three ways in which our Trust is involved in providing Long COVID services:

1. *Joint community service between King's College Hospital NHS Foundation Trust and Guy's and St Thomas' NHS Foundation Trust (GSTT).*

Since April 2021, we have been jointly running Long COVID specialist multidisciplinary assessment clinics for residents in South East London at three of our acute sites. For King's, assessment clinics are run from King's College Hospital in Denmark Hill and the Princess Royal Hospital in Bromley. These clinics assess patients who have been experiencing symptoms of Long COVID for three months or more and refer them on as appropriate so that they can receive the best care for their symptoms, in a timely manner. Depending on the severity of their symptoms, people with Long COVID could be referred to our specialist vocational rehabilitation clinic (as set out below) or be signposted to community group support. This assessment service has been co-developed in collaboration with partners across the integrated care system with a strong emphasis on patient and public engagement.

Clinicians from King's and GSTT as well as community healthcare representatives from Southwark and Lambeth and other partners meet regularly to discuss strategic direction and plan and agree the service delivery together on a regular basis. As part of this work, there are plans in place to set up a single point of access service across Southwark and Lambeth, strengthening our community based and specialist care offer. Single point of access services significantly improves patient experience as they streamline the referral processes, making it easier and quicker for people to access the treatment and support they need without multiple appointments and assessments.

2. *Vocational Rehabilitation for people living with Long COVID*

King's was the first specialist vocational rehabilitation service exclusively set up to support members of the public with Long COVID across the country. Vocational rehabilitation is a process which enables people with functional, psychological, development, cognitive and emotional needs or health conditions to overcome barriers to maintaining or returning to employment, volunteering or education.

The symptoms of Long COVID can detrimentally impact on someone's ability to work. We see and treat people referred to our service with the most severe symptoms of Long COVID and following an initial assessment, co-ordinate an individualised programme of support to help them return to work. This includes working directly with the patient's employers to put in place meaningful adjustments so that a return to work, or maintaining their job, is possible.

Since the service began – on charitable, proof of concept funding, we have treated 89 patients, all of whom are either still receiving treatment, have returned successfully to their substantive employment or found alternative employment more suited to them while they continue to manage their symptoms. The pioneering specialist service has now received longer term funding support from the CCG and recruitment is underway to enable us to reduce waiting lists and support more people living in Southwark and South East London.

3. Occupational Health support for Trust staff

Across King's we support all our staff who are managing symptoms of Long COVID. We do not yet know whether the Omicron variant of COVID-19 will cause Long COVID symptoms in people who caught the virus since it emerged in late 2021. This is because it takes three months of persistent symptoms for a diagnosis of Long COVID to be made.

Our support programme for staff includes an occupational health physician, nursing staff, occupational therapists, physiotherapists and involvement from colleagues in psychology. The team supports staff to manage their physical, cognitive and psychological symptoms working towards recovery. It includes implementing adjustments, developing coping with symptom strategies and peer support to enable people to return to work or maintain their current roles.

Of the staff referred to our service for support managing their Long COVID symptoms, 63% were currently off sick from their role and 36% were working adjusted hours. The service has made a substantive contribution to meaningfully supporting staff – working in a range of roles, at varying levels of seniority – back into the jobs they enjoy and want to do. We will continue to ensure that this support is available to all staff who need it.

For more information, please contact: Rachael Truswell, Head of Stakeholder Relations, on Rachael.Truswell@nhs.net

Equality of access to
SLaM CAMHS Services
Southwark H&SCSC
Update report 22nd
March 2022

Overview

- ▶ What Southwark CAMHS is doing to increase access for Black, Asian and Minority Ethnic young people?
- ▶ What CAMHS is doing about ethnicity data and what does the data say, with a focus on prevention and Early Help
- ▶ Opportunities
- ▶ Background

What CAMHS is doing to improve access for BAME young people - CAMHS equality objective

In addition to overarching focus on reducing long waits and increasing access to services, CAMHS have prioritised increasing access for Asian and Black young people by 25% by March 2023

Work delivered in 21/22:

- ▶ Established Equality leads in every borough and encouraging champions in every team
- ▶ Audit of CareLink team(LAC) population showed that it mirrored the overall Southwark Looked After population
- ▶ Recruitment uses Black and Asian therapy network
- ▶ CAMHS anti-racist forums and reflective spaces
- ▶ Co-production with young people on cultural competencies Engaging Black and Asian communities
- ▶ Quarterly monitoring of ethnicity caseload data on service users accepted and seen by CAMHS
- ▶ The diversity in recruitment champion programme and delivering the WRES in CAMHS.

Planned activity (above work is continuing):

- ▶ Shared database with Local Authority to monitor access across the system (NEST)
- ▶ Collaboration with community groups, representing BAME communities
- ▶ Improving the way CAMHS communicates about race equality (e.g. CAMHS Equality Newsletter and communication with schools)
- ▶ Trust is implementing Patient and Carer Race Equality Framework (PCREF) to address race inequalities across the Trust in partnership with local communities

What is PCREF

- The Patient and Carer Race Equality Framework (PCREF) was a recommendation from the national Mental Health Act Review
- It will become a **statutory requirement for all Mental Health Trusts**; guidance based on learning from Pilots will be issued Q1 2023/24 - each Trust required to have PCREF in place by year end.
- SLAM is one of 4 national Pilot sites with Manchester, Birmingham and ELFT
- The goal of PCREF is to help move to **equity in access, experience and outcome**
- The programme is a **tripartite partnership between staff, service users and carers, and our communities** – it is not community engagement, it seeks to **change ourselves**

PCREF

- ▶ There are 3 parts to the PCREF programme Nationally and in the Trust
 - ▶ Meeting our statutory and regulatory obligations (performance data analysed by ethnicity)
 - ▶ Organisational Competencies (change ideas and implementation)
 - ▶ Service User and Carer feedback mechanism (National work - we are providing input)

- ▶ Two year change programme piloting change ideas such as
 - ▶ Co-produced Cultural Awareness Training
 - ▶ Embed cultural viewpoints onto Care Planning

Staff development & Partnership-update

- ▶ Two posts based in Southwark YOS have been filled to improve engagement with young people involved in the youth justice system
- ▶ A new post has been created to improve engagement and address the need on Adolescents in need of RISK SUPPORT and their network
- ▶ Southwark CAMHS are contributing to a multi-disciplinary Taskforce in SILS aiming at improving access to services, reducing school exclusion and youth violence
- ▶ Southwark CAMHS responded to the murder of George Floyd by setting up a Race & Culture Consultation Group (R&CCG).
- ▶ R&CCG organised two 1/2 day whole service events on 22nd February and 28th July 2022 supported by external facilitators. The first event focussed on restating the service commitment to anti-racist practice and developing a plan of action; the second on clinical practice and engagement across cultures. Plans are afloat for a third event focussing on a review of cross cultural practice in CAMHS
- ▶ Increased partnership working with NEST and via the MHST that will increase access to Emotional and well being support.

Increasing choice in means of contact

- ▶ Due to the pandemic Southwark CAMHS adapted its appointment offer and has been able to continuously offer Face to Face, Phone and Virtual appointments.
- ▶ As restrictions are lifted Southwark offers the choice of appointments depending on needs and preference of families.

Total Contacts by Outcome in P...

SubServiceLine	No. of Contacts	%
Southwark CAMHS	43080	100.00%
(Blank)	3	0.01%
Attended	35150	81.59%
Cancelled by patient	2853	6.62%
Cancelled by Trust	453	1.05%
DNA	3974	9.22%
Other - Patient not seen	647	1.50%
Total	43080	100.00%

Southwark CAMHS - Contact Hours Attended by month

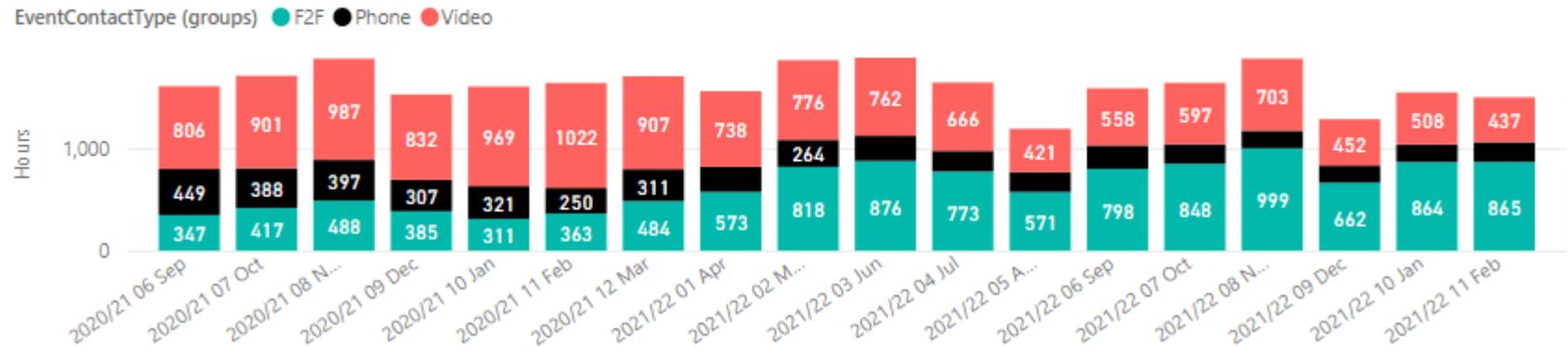
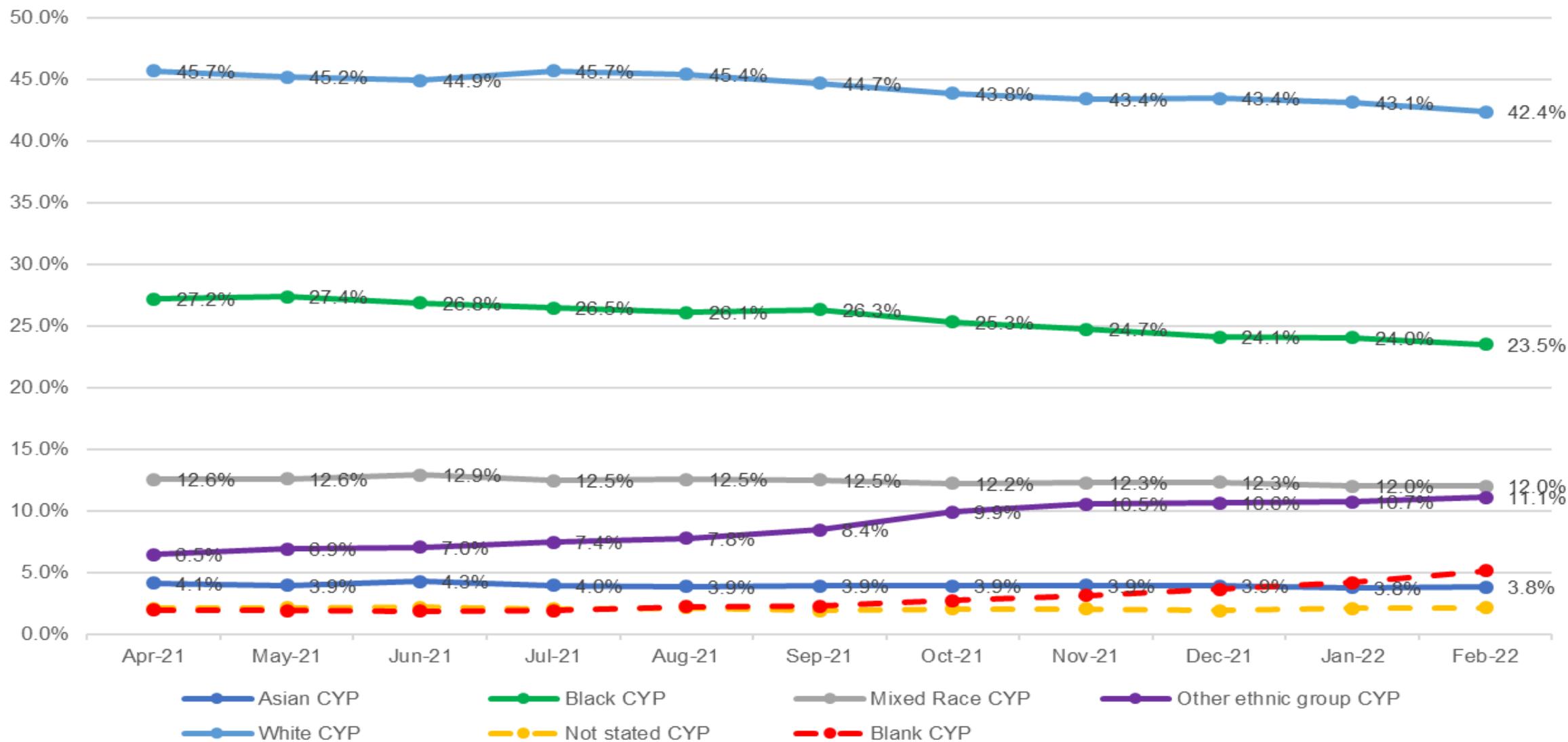


Table and graph show Southwark CAMHS clinical activity for the last 18 months Sept 20 to Feb 22 with an increase in F2F contact

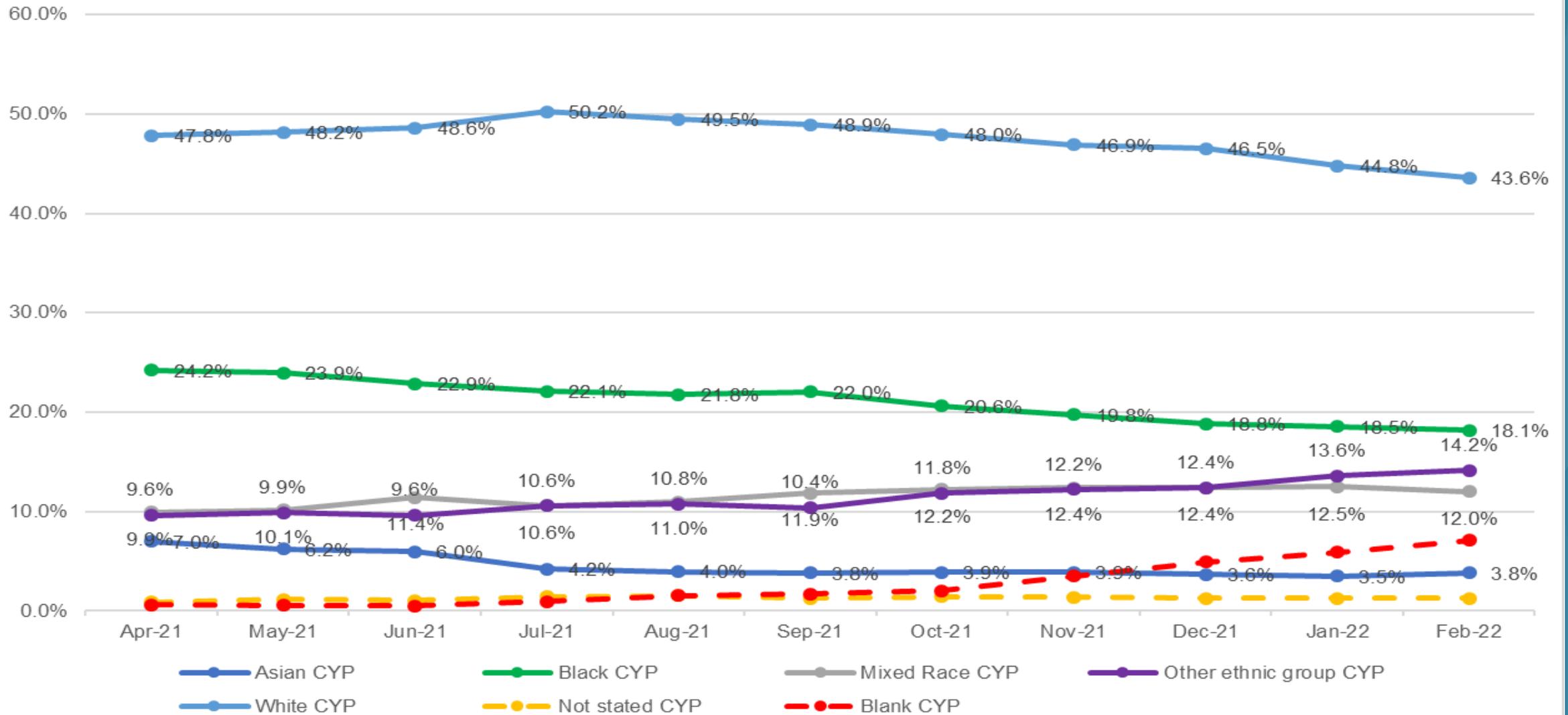
Ethnicity data- Update

- ▶ Ethnicity data matters campaign currently includes:
 - ▶ Creating dashboard to make the data collected easier for staff to access and analyse
 - ▶ We continue to publish annual equality information on CAMHS community services in each borough
 - ▶ Monthly monitoring of CAMHS ethnicity recording performance at Trust monthly Performance & Quality meeting; initial target 95% being achieved in Southwark (next slide)

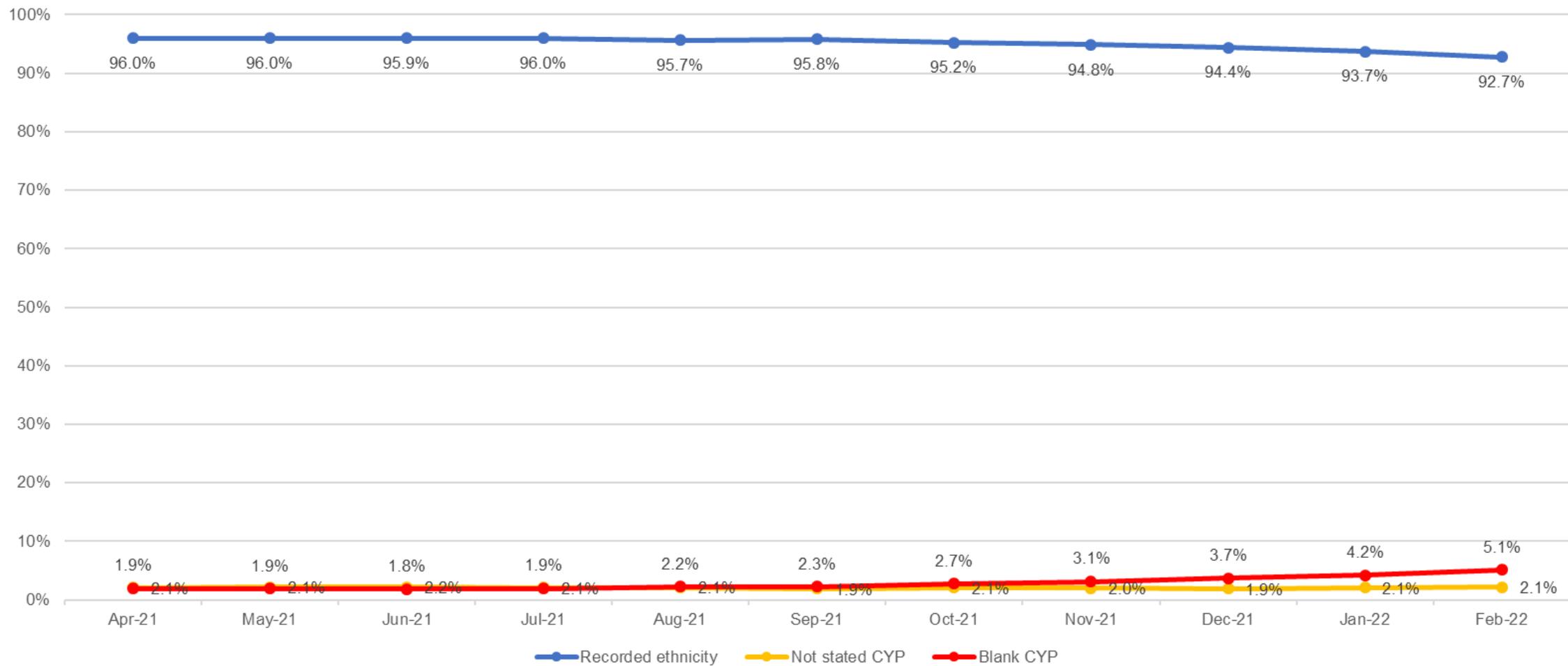
Ethnicity profile of Southwark CAMHS Caseload (End of Month) in proportions of CYP between Apr 21 and Feb 22



Ethnicity profile of Southwark Early Help Service Caseload (End of Month) in proportions of CYP between Apr 21 and Feb 22



Ethnicity recording in Southwark CAMHS



Opportunities

- ▶ Continuing to learn through Southwark engagement and involvement groups and activities; including other providers
- ▶ Positive Behaviour Support (PBS) outreach posts in CAMHS
- ▶ Working in partnership with our referrers to remove barriers in the system (e.g. GPs, schools) SHARED Dashboard
- ▶ Shared data Dashboard and Work in partnership with other providers eg The NEST Southwark, Kooth
- ▶ increasing outreach work
 - ▶ Development of Multiagency task force at SILS
 - ▶ Recent development of an outreach post targeting those who are known to be less likely to engage with CAMHS
 - ▶ Maturing CWP service with increased scope to explore provision of service within community (GP) settings.
- ▶ Support the work of Groundwork and the Mental Health Support in School Team (MHST)
- ▶ Relentless focus on long waits and overall access to specialist CAMHS teams for all children and young people who need it.

Cannabis use: the current picture

- Office National Statistics latest stats:
- Overall drug use in past year remained stable
- Although small annual increases in cannabis use amongst yps (5% increase amongst 16-24 year old in last year)
- Cannabis most commonly used drug, inc amongst young people: 18.7 % of 16-24 year olds used in last year
- Cannabis skunk most prevalent type:

Approx 94% police seizures high strength skunk, compared to 85% in 2008, and 51% in 2005.

High potency cannabis use and mental health in Adolescents. (Lindsey et al. 2020)

- Cohort study of 1087 participants
- Findings:
- Use of high-potency cannabis was associated with increased frequency of cannabis use
- Increased likelihood of anxiety disorder
- Increased likelihood of tobacco dependence
- Increased likelihood of anxiety disorder
- Small increase of likelihood of psychotic experiences

Cannabis Use in Adolescents and Risk of Depression, Anxiety, and Suicidality. (Gabriella et al. 2019).

- Meta-analysis of 11 studies and 23,317 individuals
- Findings:
 - Cannabis use increased risk of developing depression
 - Cannabis use increased risk of suicidal behaviour
 - Cannabis use increases likelihood of developing mental health problems even in the absence of a co-morbid condition.

Systemic complexity

- Direct link between Cannabis skunk use and mental health compounded by numerous additional factors, inc:
- Poor housing and economic deprivation
- Parental ill health, inc. mental health
- Although no significant difference between cannabis use in different ethnic groups, Black British young males more regularly stopped and searched, and more likely to be prosecuted for cannabis possession than other groups.

Southwark CAMHS and substance use

- Will work with child/ young person if secondary/ dual-diagnosis.
- Will formulate around substance misuse and relationship to primary diagnosis.
- Can provide psycho-education and harm reduction.
- Can goal set towards reduction and abstinence.
- Work with young person's network.
- Will promote protective factors.
- Primary substance misuse presentation sign-posted to Southwark Healthy Young People.

Risk summary

- The risk of developing a psychotic illness is higher in people who:
- Start using cannabis at a young age
- Smoke stronger types, such as skunk
- Smoke it regularly
- Use it for a long time
- Smoke cannabis and also have other risk factors for schizophrenia, such as a family history of the illness

References:

Office of National Statistics <https://www.ons.gov.uk/>

Black people 12 times more likely to be prosecuted for cannabis, new analysis shows.
Retrieved 08.03.2022 from <https://www.independent.co.uk/news/uk/politics/black-people-cannabis-prosecutions-b1853669.html>

Gabriella G., Tobis A., Tomasz Z., (2019) *Association in Adolescence of Cannabis Use in Adolescence and Risk of Depression, Anxiety and Suicidality in Young Adulthood.*

Lindsey A. Hines, Tom P. Freeman, Suzanne H, Gage, (2020). *Association of Hig-Potency Cannabis Use with Mental Heath and Substance misuse in Adolescents.*

**King's College Hospital NHS Foundation Trust submission to the Southwark Health and Social Care Scrutiny Commission, March 2022.**

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This submission below sets out how the Trust, and in particular our Denmark Hill site - which cares for the people of Southwark - has managed the most recent surge of the Omicron variant of COVID-19 and the next steps in recovering from the impact of the pandemic.

Operational recovery from COVID-19*The impact of Omicron*

Over the Christmas period and in the early months of 2022, our services and staff were managing the surge of patients presenting with the Omicron variant of COVID-19 as well as the high numbers of staff sickness and isolation that occurred because of the transmissibility of the strain. Despite these ongoing challenges, our staff have shown outstanding professionalism and agility to provide the very best care to all.

As at 15 March 2022, our current Trust position is:

- Trust wide: 21 patients in critical care, 156 patients in general and acute beds.
- King's College Hospital, Denmark Hill site: 18 patients in critical care, 85 patients in general and acute beds.

Across our hospitals, including our Denmark Hill site, we have stood down the gold and silver command and control structures, used for rapid decision making and escalation. We continue to actively monitor the local and national COVID-19 situation so that we are ready to respond to any emerging trends.

Elective recovery

We are continuing to make progress with our elective recovery. While some elective care was paused during previous waves, we are now carrying out planned elective care at all our sites and returning to face-to-face appointments where clinically appropriate.

Last year our waiting lists dropped from 8,000 to 1,000, for people who had been waiting longer than one year for treatment. We are routinely exceeding 100% of our business-as-usual pre-pandemic baseline (2019/2020) for outpatients and day case surgery.

We are also increasing our capacity, both in terms of staffing and facilities, to be able to continue to reduce waiting times and see and treat more people across Southwark and South East London. At King's College Hospital in Denmark Hill, we have opened two new theatres in neurosurgery which will enable us to carry out an extra 750 neurosurgical procedures this year. In radiology, we have purchased two new scanners which are quicker than the equipment they have replaced, and we now have more scanners in total across all our sites. This team are also running a seven-day service to scan and diagnose more people, at an earlier stage. We are mid-way through construction for a new outpatient's facility which will house 48 consultation rooms and eight procedure rooms which will be open to patients in the summer.

Living with COVID – the UK Government's roadmap for recovery

Following the Prime Minister's announcement setting out the roadmap for living with COVID on 21 February, King's has taken time to understand the full implications of the relaxation of measures including social distancing on our patients, services and staff.

What the changes mean for the NHS

Many of our infection prevention and control measures will remain in place, in some format, so that we can protect our patients, visitors and staff working across our sites. Face masks continue to remain mandatory as soon as people enter our buildings and appropriate PPE will be required on wards. For red pathways – on COVID-19 positive inpatient wards for example – staff will continue to be provided with FFP3 masks and eye protection to provide them with the highest level of protection against the transmission of COVID-19. For all other interactions with patients and visitors, staff will be required to wear surgical masks – with eye protection being required to carry out some tasks and procedures. There are no changes to these policies – they remain the same as the policies we put in place throughout the pandemic.

It is of paramount importance to the Trust that all our staff, patients and visitors' safety is prioritised. We will be continuing to take a cautious, risk assessed approach to all infection prevention and control decisions which are made across the Trust.

For more information, please contact: Rachael Truswell, Head of Stakeholder Relations, on Rachael.Truswell@nhs.net

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