

# WEST NORTHAMPTONSHIRE COUNCIL CABINET

7 MARCH 2023

**CABINET MEMBER FOR ADULT CARE, WELLBEING, AND HEALTH  
INTEGRATION: COUNCILLOR MATT GOLBY  
CABINET MEMBER FOR CHILDREN, FAMILIES AND EDUCATION:  
COUNCILLOR FIONA BAKER**

Report Title	Report of the People Overview and Scrutiny Committee – scrutiny review of child and adolescent mental health and the risk of self-harm
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## List of Approvers

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## List of Appendices

**Appendix A – Report of the People Overview and Scrutiny Committee scrutiny review of child and adolescent mental health and the risk of self-harm**

### 1. Purpose of Report

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- 1.1. The report presents to the Cabinet for consideration the report and recommendations of the People Overview and Scrutiny Committee scrutiny review of child and adolescent mental health and the risk of self-harm.

## **2. Executive Summary**

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- 2.1 The People Overview and Scrutiny Committee established a task and finish panel to examine the provision in West Northamptonshire of services and support for children and young people who may be at risk of self-harm, which help people not to reach the point where they require specialist health services and which enable people to access those services when this is required.
- 2.2 The Task and Finish Panel carried out an in-depth scrutiny review during the period January – December 2022. The panel took information from a range of expert advisors as well as carrying out desk top research. The panel used this information to identify key conclusions and resulting recommendations. Some of these recommendations are directed to the Cabinet of West Northamptonshire Council and some to the Northamptonshire Integrated Care Board, depending on whether recommendations concern local authority functions or health / partnership functions.
- 2.3 The Task and Finish Panel presented its report to the People Overview and Scrutiny Committee on 21 February 2023. The final version of the report is set out at Appendix A.

## **3. Recommendations**

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- 3.1 It is recommended that the Cabinet:
- a) Agrees to seek a discussion with West Northamptonshire schools through the Schools Forum about contributing additional resources on a system-wide basis to support children and young people’s mental health using a top slice from schools budgets.
  - b) Agrees to approach the f40 group of local authorities about making a collective case to the government about the need for additional resources to support children and young people’s mental health and the impact of current pressures.
  - c) Commits to the development of a new Youth Strategy for West Northamptonshire that should set out how organised youth activities will contribute to supporting children and young people’s mental health.
  - d) Agrees to consider reasonable opportunities to enable non-statutory organisations that provide services and support for children and young people’s mental health to make use of empty Council or commercial premises in West Northamptonshire and to work with commercial partners where necessary to facilitate this.
  - e) Supports the take up of mental health first aid training by community groups working with children and young people in West Northamptonshire.
  - f) Notes the recommendations directed to the Northamptonshire Integrated Care Board resulting from scrutiny review of child and adolescent mental health and the risk of self-harm.
    - The Northamptonshire Integrated Care Board to agree to develop and implement a long term whole-system strategy to provide effective support for children and young people’s mental health in West Northamptonshire that incorporates the following principles:

- Local access to services throughout the authority
  - No disparity between the services available or initiatives being trialled in West Northamptonshire and North Northamptonshire when services are organised on a countywide basis
  - Delivery of services from locations that encourage young people to use them
  - Provision that enables service users to tell their story once rather than needing to do so repeatedly to different organisations
  - Development and delivery of services to be informed by good intelligence about who is using them and potential barriers to access that may affect children and young people from different backgrounds or communities.
  - Effective oversight and leadership of an overall offer that involves a range of different service providers.
- The Northamptonshire Integrated Care Board to agree to develop and implement a plan for effective provision of the core CAMHS function, to include the following elements:
    - Maximising capacity to meet future demand and to reduce waiting times to an acceptable level
    - Organisation of CAMHS services to link up with Local Area Partnerships and to help to build strong relationships with partners in local communities to encourage continuity of support for children and young people.
  - The Northamptonshire Integrated Care Board to agree that all Local Area Partnerships in West Northamptonshire should include children and young people's mental health in their priorities.
  - The Northamptonshire Integrated Care Board to agree to continue to pursue opportunities to provide additional capacity to support children and young people's mental health at the 'tier 2.5' level of provision, between targeted services such as youth offending teams, primary mental health workers and school and youth counselling (tier 2) and specialist community CAMHS (tier 3).
  - The Northamptonshire Integrated Care Board to agree to work with the Northamptonshire Police, Fire & Crime Commissioner and Northamptonshire Police to ensure that the police role is integrated effectively in a whole-system strategy to provide support for children and young people's mental health in West Northamptonshire.
  - The Northamptonshire Integrated Care Board to agree to investigate the feasibility of funding a school nurse and mental health first aider in all schools in West Northamptonshire.
  - The Northamptonshire Integrated Care Board to agree to review existing information about support available for mental health and wellbeing produced for children, young people, parents, and guardians in West Northamptonshire and to consider the potential for this information to be enhanced.

#### **4. Reason for Recommendations**

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4.1 The recommendations resulting from the scrutiny review are intended to contribute to the provision of effective services and support for mental health and wellbeing amongst children and young people in West Northamptonshire. This reflects the Overview and Scrutiny function's role for the development and review of policy.

#### **5. Report Background**

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5.1 The purpose of this scrutiny review was to examine the provision in West Northamptonshire of services and support for children and young people who may be at risk of self-harm, which help people not to reach the point where they require specialist health services and which enable people to access those services when this is required. The NHS website defines self-harm as "when somebody intentionally damages or injures their body."

5.2 The scope for the scrutiny review identified the following key lines of enquiry:

- What lower-level services and support are available to support the mental health and wellbeing of children and young people experiencing problems that might otherwise escalate to the point where they could lead to self-harm? Are the services and support provided by different organisations linked together effectively?
- What specialist health services are available to support children and young people who have a higher level of need? What are the routes into these services? How accessible and how quick to respond are they in practice?
- What is the extent of self-harm by children and young people in West Northamptonshire, given previous data showing that the number of 15-19 year olds hospitalised for self-harm in Northamptonshire was above the national average? How does the latest position compare to that in similar authorities and what are the reasons for any differences?
- What opportunities exist to strengthen existing provision, if this is necessary, taking account of the current context in which service providers in West Northamptonshire are operating?

5.3 The choice of this topic for scrutiny by the People Overview and Scrutiny Committee was a reflection of increasing general awareness in society of the importance of children and young people's mental health and of councillors' interest in ensuring that services in West Northamptonshire are as effective as possible.

5.4 The scrutiny review links to West Northamptonshire Council's corporate priority to improve the life chances of residents.

5.5 The intended outcome of the scrutiny review was to make evidence-based recommendations to the West Northamptonshire Council Cabinet and/or other applicable decision-makers that are intended to contribute to the provision of effective services and support for mental health and wellbeing amongst children and young people in the area.

## 6. Issues and Choices

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- 6.1 The Cabinet is asked to consider the recommendations of the People Overview and Scrutiny Committee and to provide a response to them to the Committee. The West Northamptonshire Council constitution states that the Cabinet shall consider a report submitted by an Overview and Scrutiny Committee at the next available Cabinet meeting. The Cabinet shall respond to the Overview and Scrutiny Committee within two months of the report being submitted.
- 6.2 The key findings, conclusions and recommendations from the scrutiny review are set out in this section of the report.

### **Development of overall provision for children and young people's mental health to respond to increasing demand**

- 6.3 The Task and Finish Panel gained a clear impression from the information that it gathered of increasing needs amongst children and young people relating to mental health, even if this could have been anticipated. Expert advisors were all seeing increased needs from their different perspectives. They highlighted the range of factors contributing to this, including existing pressures on young people in modern society; the impact of the COVID-19 pandemic and lockdowns; and more specific issues such as the experiences of children and young people coming into the authority as refugees.
- 6.4 The Task and Finish Panel recognised that an increasing general trend does not mean that individuals' needs are necessarily at a severe level. However, the situation increases the risk that needs will escalate to this level if not identified and addressed appropriately. In addition, Northamptonshire is working from a recent position in relation to hospital admissions of young people resulting from self-harm that compares unfavourably with other areas.
- 6.5 The Task and Finish Panel noted that local services supporting children and young people's mental health are delivered by a range of different statutory and non-statutory organisations, from the NHS to voluntary and community sector groups. Some services are delivered on a countywide basis; some in particular areas only. The Panel was left with the impression of a complex overall 'system', which increased the risks of services becoming splintered in practice, of children and young people falling between different organisations, and of opportunities to intervene early being lost. The Panel felt that a complex and variable approach to service provision also does not help potential service-users to understand how and where to access services.
- 6.6 The Task and Finish Panel ultimately raised the need for a more coherent strategy for children and young people's mental health services in West Northamptonshire. The Panel was concerned at the risks inherent in there being no single agency with overall responsibility, and accountability, for meeting these needs. The Panel emphasised that failing to provide effective support to children and young people with mental health needs will go to the heart of organisations' fundamental aims, such as the vision in West Northamptonshire Council's Corporate Plan to make the area one where children are given the best start in life and vulnerable

children are supported and protected. Pressures on individual service providers will also continue to be greater if there is not a robust collective strategy for using overall resources.

- 6.7 The Task and Finish Panel considers that the Integrated Care System model provides an opportunity for a step-change to address these points. Integrated Care Northamptonshire is intended to embody a collective commitment to joined up working towards common objectives, relating to children and young people's mental health as much as other priority areas. Structurally, ICN could also offer more ownership and oversight of services that involve such a range of different providers. The Panel urges that this opportunity is maximised.
- 6.8 The Task and Finish Panel encourages that a long term strategy for the provision of children and young people's mental health services in West Northamptonshire developed by ICN should be directed towards authority-wide provision through a locally-focussed model. The Panel is keen to see effective initiatives such as the Espresso Yourself wellbeing cafes rolled out into all of the main areas in the authority. Services should be delivered from locations that encourage young people to attend and the Panel felt that local councillors might assist in providing relevant local intelligence. Services should also be informed by a good understanding of who is using them and potential barriers to access: the Panel heard from one school representative who provided information that young people from BME groups made up a high percentage of their total number of students but a low percentage of the students accessing support for mental health needs.

Recommendations:

- A) The Northamptonshire Integrated Care Board to agree to develop and implement a long term whole-system strategy to provide effective support for children and young people's mental health in West Northamptonshire that incorporates the following principles:
- Local access to services throughout the authority
  - No disparity between the services available or initiatives being trialled in West Northamptonshire and North Northamptonshire when services are organised on a countywide basis
  - Delivery of services from locations that encourage young people to use them
  - Provision that enables service users to tell their story once rather than needing to do so repeatedly to different organisations
  - Development and delivery of services to be informed by good intelligence about who is using them and potential barriers to access that may affect children and young people from different backgrounds or communities.
  - Effective oversight and leadership of an overall offer that involves a range of different service providers.

## **Ability of core Child and Adolescent Mental Health Service to meet demand**

- 6.9 The Task and Finish Panel concluded that the core CAMHS function in West Northamptonshire is under significant pressure and needs help.
- 6.10 The Task and Finish Panel heard at the start of the scrutiny review from the senior manager at Northamptonshire Healthcare NHS Foundation Trust that the number of referrals to core CAMHS had increased by 180% in the past two years and about increases in the waiting time for appointments. At the start of 2023 the CAMHS website advises that it aims to provide an initial assessment within 13 weeks of receiving a referral but that this can take longer. Expert advisors who spoke to the Panel during 2022 referred to young people ultimately waiting up to two years for treatment. The Panel felt that a service that involved an excessive waiting time to receive support is not a working service. School staff members and GPs who spoke to the Panel had different experiences of the quality of service provided by CAMHS. There was also a perception that the threshold for access had been raised over time. Young people who spoke to the Panel commented that perceptions about long waiting times could put people off from seeking assistance for mental health issues.
- 6.11 The Task and Finish Panel recognises that this is not only an issue in West Northamptonshire and heard, for example, that there are national pressures on the workforce for children and young people's mental health. However, the Panel raises the need for a long term plan to put core CAMHS on a better footing. The Panel would like to see more locally-based provision. This would also help to strengthen working relationships with key partners such as schools or GPs and to support understanding and good communication on areas such as the thresholds for a young person to be referred to core CAMHS.
- 6.12 The Task and Finish Panel considers that this approach to future provision can link into the Local Area Partnerships (LAPs) that will form part of the structure of Integrated Care Northamptonshire. There are due to be nine LAPs in West Northamptonshire, five in Northampton and four in Daventry and South Northamptonshire. They will each be responsible for leading the design and delivery of integrated care systems in their areas, bringing together the NHS, the local authority, voluntary and community sector bodies, residents, and other community partners that contribute to supporting health and wellbeing. The Panel understands that LAPs will be given a degree of autonomy to identify their own priorities to reflect issues in their particular area. The Panel recognises the aims and potential benefits of a locally-led approach. At the same time, it considers that children and young people's mental health is an issue that should represent a priority throughout the authority. All LAPs would also need to support the implementation of the whole-system strategy for children and young people's mental health recommended at paragraph 1.6 in the report. The Panel therefore proposes that all LAPs should include this issue in their adopted priorities.
- 6.13 In commenting on the capability of the core CAMHS function in West Northamptonshire the Task and Finish Panel recognises that the services it provides are intended for children and young people with moderate to severe mental health needs; those at tier 3 in the diagram at paragraph 6.1 in the report. During its information-gathering the Panel heard about good examples of services and support being provided in Northamptonshire, for example through the REACH

collaboration, at what might be called the 'tier 2.5' level, that is between targeted services at tier 2 and specialist community CAMHS at tier 3. The Panel saw how this action could help to manage some demand on core CAMHS, by supporting children and young people with mental health needs that did not reach the threshold for CAMHS but might escalate without some intervention or by supporting others whilst they were waiting to access CAMHS. The Panel encourages the continuation of this approach. However, the Panel also emphasises that it is not proposing this as a solution to the need for an effective whole-system approach to children and young people's mental health provision or for the fundamental issues affecting core CAMHS capability. If members of the public or professionals see CAMHS as their only recourse then high demand will continue. If core CAMHS does not have the capacity to provide services in a reasonable time to those children and young people who do require support at the moderate to severe level of need, they will continue to be poorly served.

Recommendations:

- B) The Northamptonshire Integrated Care Board to agree to develop and implement a plan for effective provision of the core CAMHS function, to include the following elements:
- Maximising capacity to meet future demand and to reduce waiting times to an acceptable level
  - Organisation of CAMHS services to link up with Local Area Partnerships and to help to build strong relationships with partners in local communities to encourage continuity of support for children and young people.
- C) The Northamptonshire Integrated Care Board to agree that all Local Area Partnerships in West Northamptonshire should include children and young people's mental health in their priorities.
- D) The Northamptonshire Integrated Care Board to agree to continue to pursue opportunities to provide additional capacity to support children and young people's mental health at the 'tier 2.5' level of provision, between targeted services such as youth offending teams, primary mental health workers and school and youth counselling (tier 2) and specialist community CAMHS (tier 3).

### **In-patient mental health services for children and young people**

- 6.14 The scope for this scrutiny review was focussed on the lower-level services and support available to support the mental health of children and young people experiencing problems that might otherwise escalate to the point where they could lead to self-harm. The Task and Finish Panel therefore did not seek to consider in-patient services for people with severe or highly complex needs. However, during its information-gathering the Panel was able to hear from a young person with direct experience as a mental health service user in Northamptonshire and in other area parts of the country. This included experience of in-patient mental health care.
- 6.15 The young person who spoke to the Task and Finish Panel volunteered to do so and the Panel was impressed both by what they said and the way that they spoke to councillors. Although some of their information proved to be outside of the specific focus for this scrutiny review the Panel



wishes to ensure that it is relayed to the relevant service providers, to inform them and so that it can be acted upon as necessary.

Recommendations:

- E) The People Overview and Scrutiny Committee to agree that information given to the Task and Finish Panel by a young person with direct experience as a mental health service user be sent to Northamptonshire Healthcare NHS Foundation Trust.

### **Children and young people's mental health and the police**

- 6.16 The Task and Finish Panel heard from a representative of Northamptonshire Police about practical demands on police capacity connected with children and young people's mental health. The Panel was advised that police officers were required to attend if an older teenager or young adult presented at hospital or called the emergency services saying they had or were going to harm themselves. The same people could be seen regularly. Police officers could need to conduct an individual to a place of safety, which might involve remaining with them until this could be done in order to safeguard their wellbeing. Northamptonshire Police did not have dedicated space for accommodating vulnerable young people. Taking a young person to police premises might also create a misapprehension about the reasons for this.
- 6.17 The Task and Finish Panel recognises that there are a range of factors that might contribute to a young person reaching a crisis point that brings them into contact with the police. This can include factors that are outside the scope of this scrutiny review. However, the Panel did not want this aspect of its evidence-gathering to be lost. The Panel therefore highlights that the development of effective overall provision for children and young people's mental health should involve considering how other partners and Northamptonshire Police can best work together on this matter.

Recommendations:

- F) The Northamptonshire Integrated Care Board to agree to work with the Northamptonshire Police, Fire & Crime Commissioner and Northamptonshire Police to ensure that the police role is integrated effectively in a whole-system strategy to provide support for children and young people's mental health in West Northamptonshire.

### **Support in schools for children and young people's mental health**

- 6.18 The Task and Finish Panel took a strong impression from information-gathering of the particular impact on schools of providing support for increasing mental health needs amongst children and young people.
- 6.19 The Task and Finish Panel saw one example at Northampton Academy of a school that operated an extensive non-teaching support function. Not all schools are in the position to do as much and it was highlighted that schools do not necessarily have a budget to fund roles such as mental health first aiders, meaning that staff are asked to fill them on a voluntary basis. In all cases, the Panel was conscious of how far schools are being asked to provide support for students' mental

health on top of their core education functions and within existing resources. Practical demands do not match up to formal responsibilities, curriculum priorities and funding.

- 6.20 The Task and Finish Panel felt that representations should be made to the government about the effect of this situation. Rather than acting unilaterally, West Northamptonshire Council should approach the f40 group, representing the lowest-funded education authorities in England, to seek to make a collective case about the inadequacy of current resources to support children and young people's mental health and the impact of current demand pressures.
- 6.21 The Task and Finish Panel saw examples of existing and previous good practice in Northamptonshire concerning support in schools that should be built upon in future. The Panel heard that mental health school teams being rolled out were proving to be effective. On the other hand, it understood that since the COVID-19 pandemic there had not been school nurses in all schools. The Panel felt that there should be access to both types of provision in all schools.
- 6.22 The Task and Finish Panel saw the potential for West Northamptonshire Council to pursue a discussion with local schools about the scope to use their resources collectively to fund additional support for children and young people's mental health. This might be done using a top-slice from schools budgets. Resources contributed in this way might be used for different purposes that would reflect the overall aim: enhancing 'tier 2.5' support, local therapeutic support or the existing emotional health and wellbeing support teams operating in some schools. The Panel recognises existing financial pressures on schools but considers that a system-wide approach on this issue might help to manage a situation that is already generating practical demands on them.

Recommendations:

- G) The Northamptonshire Integrated Care Board to agree to investigate the feasibility of funding a school nurse and mental health first aider in all schools in West Northamptonshire.
- H) The Cabinet to agree to seek a discussion with West Northamptonshire schools through the Schools Forum about contributing additional resources on a system-wide basis to support children and young people's mental health using a top slice from schools budgets.
- I) The Cabinet to agree to approach the f40 group of local authorities about making a collective case to the government about the need for additional resources to support children and young people's mental health and the impact of current pressures.

### **Information about mental health and wellbeing for children, young people and their families**

- 6.23 In carrying out this scrutiny review the Task and Finish Panel has frequently looked at bodies, such as schools or GP practices, who act as a link between children and young people needing support for mental health and the services providing this. It is clearly essential that the professionals concerned are sufficiently informed and equipped to direct children and young people and their families to sources of support. At the same time, information-gathering has brought home to the Panel how important it is also to consider what information on services and support is produced for children, young people, parents and guardians themselves.

- 6.24 Young people who spoke to the Task and Finish Panel highlighted the extent to which young people turned to their peers for support on mental health and wellbeing issues. This could occur if other routes were not, or did not seem to be, available to them. A young person might still feel a stigma about raising mental health issues with an adult. Peer support might be organised, for example through peer mentoring schemes in schools, or informal through making a connection with someone on social media who was sharing a relatable experience. Professionals who spoke to the Panel commented that more attention could be given to the role of parents in providing support for young people's mental health and wellbeing. This would reflect, for example, the dangers that could be connected with social media use.
- 6.25 The Task and Finish Panel recognises existing information about mental health produced for children and young people and families in West Northamptonshire. It encourages that this is maximised, in order to provide clear, jargon-free information about services and support to members of the public. This should take account of examples of good practice: the Panel particularly noted the NottAlone.org.uk online directory of mental health advice and support in Nottinghamshire, which received a Local Government Chronicle Award in 2022. The Panel felt that the development of information about mental health services and support would ideally go as far as service providers having a social media presence that could use artificial intelligence in a similar way to targeted advertising to identify young people who may be in need and provide them with relevant information and a discrete means of seeking support. Clearly the availability of resources is a key factor in the ability to do this.

Recommendations:

- J) The Northamptonshire Integrated Care Board to agree to review existing information about support available for mental health and wellbeing produced for children, young people, parents, and guardians in West Northamptonshire and to consider the potential for this information to be enhanced.

### **Support for young people's general health and wellbeing**

- 6.26 During this scrutiny review the Task and Finish Panel considered the role of organised leisure time activities in supporting health and wellbeing amongst children and young people, by contributing to a positive and nurturing environment, providing opportunities to build self-confidence and for self-expression and in other ways. The Panel is not seeking to suggest that this is an answer to potentially complex needs, but that such provision can play a part in creating a nurturing environment, in preventing needs from escalating, or in directing young people or their families to additional sources of information and support.
- 6.27 The Task and Finish Panel acknowledged that West Northamptonshire Council does not have its own youth services, reflecting the general direction within local government over the last 10 years with regard to the delivery and funding of youth services. Through its information-gathering the Panel also heard about pressures on community-based organisations providing youth activities, particularly following the COVID-19 pandemic.

- 6.28 Given the role of youth activities in supporting health and wellbeing the Task and Finish Panel has sought to identify what action West Northamptonshire Council might now take to improve local provision. The Panel would ideally like to see a standard offer of youth activities available to all young people on a local basis, potentially organised according to the areas served by secondary schools.
- 6.29 The Task and Finish Panel understands that the Council has recently started work towards the development of a new Youth Strategy for West Northamptonshire. It wishes to support this as at least a move in the right direction. On a practical level, the Panel heard about the impact of property costs on organisations providing activities for young people and questioned the potential to make use of empty Council or commercial properties to alleviate this demand. The Panel hopes that West Northamptonshire Council would look constructively at opportunities to do this directly, or to encourage partners to the same end. The Council should also seek to encourage the take up of mental health first aid training by community groups working with children and young people.

Recommendations:

- K) The Cabinet to commit to the development of a new Youth Strategy for West Northamptonshire that should set out how organised youth activities will contribute to supporting children and young people's mental health.
- L) The Cabinet to agree to consider reasonable opportunities to enable non-statutory organisations that provide services and support for children and young people's mental health to make use of empty Council or commercial premises in West Northamptonshire and to work with commercial partners where necessary to facilitate this.
- M) The Cabinet to support the take up of mental health first aid training by community groups working with children and young people in West Northamptonshire.

## **7. Implications (including financial implications)**

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### **7.1 Resources and Financial**

- 7.1.1 Specific recommendations resulting from the scrutiny review may have resources and financial implications. The Cabinet should consider these implications when producing its response to the People Overview and Scrutiny Committee as set out in paragraph 6.1 above.

### **7.2 Legal**

- 7.2.1 The role of Overview and Scrutiny Committee is to make recommendations to the Cabinet. The Cabinet will need to reach decisions based on the usual public decision-making criteria including that members consider relevant considerations and no irrelevant considerations. The views of a relevant Overview and Scrutiny Committee supported by evidence can be decided upon but Cabinet's responsibility remains to ensure that it has sufficient information to make a decision including the financial and legal implications of the specific proposals presented.

### **7.3 Risk**

7.3.1 The recommendations resulting from the scrutiny review are intended to contribute to mitigating risks associated with children and young people's mental health. The Task and Finish Panel sought to identify recommendations that are reasonable and practical in current circumstances. The Cabinet is able to give further consideration to risks that may be connected with implementing specific recommendations when producing its response to the People Overview and Scrutiny Committee.

### **7.4 Consultation and Communications**

7.4.1 The Task and Finish Panel heard from a range of expert advisors when gathering information for the scrutiny review, as set out in the final report.

### **7.5 Consideration by Overview and Scrutiny**

7.5.1 The recommendations presented to the Cabinet are the result of an in-depth scrutiny review by an Overview and Scrutiny task and finish panel. The final report of the task and finish panel was considered and approved by the People Overview and Scrutiny Committee on 21 February 2023.

### **7.6 Climate Impact**

7.6.1 None directly relating to this report.

### **7.7 Community Impact**

7.7.1 The recommendations resulting from the scrutiny review are intended to have a positive impact on children and young people and their families in all areas of West Northamptonshire.

## **8. Background Papers**

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People Overview and Scrutiny Committee agenda papers and minutes, 16 November 2021

People Overview and Scrutiny Committee work programme

Child and Adolescent Mental Health Task and Finish Panel agenda papers and notes, January 2022 – December 2023