

Believe in  
children



Barnardo's  
Scotland

18/04/2017

**Barnardo's Scotland briefing for Health and Sport Committee Debate:  
Inquiry into the Preventative Health Agenda**

**Key points**

- **Over 50% of the children and young people we work with have a mental health problem. Half of mental health problems start before the age of 15.**
- **A focus is required on the cost to the public purse of late intervention.**
- **A system-wide approach is needed which doesn't see budgets for prevention and budgets for treatment as separate.**
- **Public bodies should be held to account through their Children's Services Plans on the preventative action they have taken.**

We welcome this Health and Sport Committee Debate on their ongoing Inquiry into the Preventative Agenda. Barnardo's Scotland works with over 26,000 children, young people and their families every year. We work in local communities across Scotland and we see the damage that can be caused by not intervening early in a child's life to support them and their family and prevent them from reaching crisis point.

Of particular concern to Barnardo's Scotland is the growing prevalence of mental health problems among the children and young people we work with. A recent survey of our services in Scotland found that **over 50% of the children and young people we work with** have an issue with their mental health, either diagnosed or undiagnosed.

We know that **half of mental health problems start before the age of 15**, and the benefits of supporting children to develop emotional resilience are well documented. In our services we find that children and young people can often find it difficult to label and regulate their feelings and can often lack coping mechanisms and emotional literacy. These are the children, who, without proper support may end up in acute care or adult health services further down the line.

**Cost to the public purse of late intervention**

A report by the Early Intervention Foundation in 2016 highlighted the very real cost of late intervention in England and Wales, a cost of £16.6 billion annually, with £3.7 billion of this falling on the NHS.<sup>1</sup> The report states that:

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<sup>1</sup> <http://www.eif.org.uk/publication/the-cost-of-late-intervention-eif-analysis-2016/>

*"Spending on late intervention is an indicator of demand for acute services, such as hospitalisation and incarceration, which tend to be more expensive. EIF aims to increase the use of effective early intervention to help reduce this demand"*

A focus on the **cost to the public purse of late intervention** rather than trying to **evidence the benefits of early intervention** within an electoral cycle might be beneficial. The political nature of having to be seen to have made a difference could be tempered by strong, local evidence of what happens if we don't invest in prevention.

**There may be a role for Integration Authorities in auditing and analysing their own preventative activity** in order to generate the kind of data collated by the Early Intervention Foundation.

### **Balance between acute and preventative services**

We believe there needs to be a better balance between investment in acute services and preventative community-based services. Health and social care integration is an important part of the Scottish Government's 2020 vision and requires NHS boards and councils to redirect resources towards more community-based and preventative care.<sup>2</sup>

In relation to mental health we believe that until there is a thorough restructuring of commissioning, the incentive for Health Boards will always be to focus spend on reactive/acute services rather than on prevention of mental ill health. Current commissioning models can undermine attempts to create a **system-wide approach which doesn't see budgets for prevention and budgets for treatment as two different things.**

We have argued for a mixed-model of delivery for children and young people's mental health services. Community-based models of delivery which involve health, education, social work and the third sector are undoubtedly more cost-effective than institutional based care and medical interventions. This approach fits with recommendations from the Christie Commission as well as the ethos for health and social care integration.

Policy makers, both local and national must be bold and invest in preventative activity which has been proven to be cost-effective even if the results of this investment are not immediately apparent. New resources for mental health must not be funnelled into dealing with acute sector pressures; **we need to see a discernible shift in the pattern of investment.**

### **The role of Health Boards and Integrated Authorities**

In 2015, Audit Scotland recommended that Integrated Authorities make clear links between their work, the Community Empowerment (Scotland) Act 2015, and the Children and Young People (Scotland) Act 2014.<sup>3</sup>

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<sup>2</sup> [http://www.audit-scotland.gov.uk/uploads/docs/report/2015/nr\\_151022\\_nhs\\_overview.pdf](http://www.audit-scotland.gov.uk/uploads/docs/report/2015/nr_151022_nhs_overview.pdf)

<sup>3</sup> [http://www.audit-scotland.gov.uk/uploads/docs/report/2015/nr\\_151203\\_health\\_socialcare.pdf](http://www.audit-scotland.gov.uk/uploads/docs/report/2015/nr_151203_health_socialcare.pdf)

This is an important recommendation and highlights the need for there not only to be a focus on what health and IAs can do to initiate and maintain preventative spend but what they must do to meet the statutory duties they have to act in a preventative way. Part 3, section 9 of the Children and Young People (Scotland) Act 2014 requires that a Children's Services Plan is to be prepared by the Local Authority and relevant health board with a view to ensuring that any action taken in relation to meeting the needs of children and young people is taken at the earliest appropriate time and that action is taken to prevent need arising.

All Local Authorities and Health Boards were required to submit their Children's Services Plans to the Scottish Government in April of this year. **It will be crucial that these Plans are scrutinised to ensure that they, and the public bodies responsible, meet the statutory duties in relation to preventative action.**

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