



Item No: 13

Meeting Date: Wednesday 24th September 2025

Glasgow City Integration Joint Board

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Children's and Young People Mental Health (CYPMH) Framework Funding

Purpose of Report:

This report provides an update to the Integration Joint Board on the fundings arrangements for the Children and Young People's Mental Health and Wellbeing (CYPMH) Framework for 2026 onwards, following baselining of this previously annualised grant.

Background/Engagement:

Members previously approved CYPMH funding on an annual basis. Continuation funding was agreed for 2025/26 to enable a full review of the programme following baselining of these funds. This report describes the review process and outcomes and makes recommendations on the future use of this funding, limiting the financial and governance risks that have been managed annually during this funding period. The review has involved stakeholders across NHS GGC's Specialist Children's Services, Glasgow City's Social Work Services, Youth Health Service, Health Improvement, Education Services and Third Sector partners.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

- HSCP Senior Management Team ☐
- Council Corporate Management Team ☐
- Health Board Corporate Management Team ☐
- Council Committee ☐
- Update requested by IJB ☐
- Other ☒
- Children's Services Planning Group
- Not Applicable ☐

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Recommendations:	The Integration Joint Board is asked to: a) Note the contents of the report and; b) Note the proposed expenditure of £1.843m per annum from 2026.
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Relevance to Integration Joint Board Strategic Plan:

This relates to all six of our Strategic Plan (2023-2026) priorities, particularly prevention and early intervention.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome(s):	Outcome 1 – People are able to look after and improve their own health and wellbeing and live in good health for longer.
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Personnel:	A number of fixed term posts will move to permanent status and any currently vacant posts will be removed, thereby reducing future employer risks for NHSGGC and GCC.
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Carers:	Carers will have better access to mental health support and clearer pathways to services, especially for children and young people not needing escalated to specialist intervention.
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Provider Organisations:	CYPMH funds are in-part delivered by provider organisations. The report has contractor implications which will be implemented through GCC/NHSGGC procurement requirements in line with existing contract terms.
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Equalities:	EQIA completed and can be found at: https://glasgowcity.hscp.scot/equalities-impact-assessments
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Fairer Scotland Compliance:	Completed within the EQIA process.
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Financial:	All expenditure will be in compliance with the procurement and financial regulations/standing financial instructions of both partner bodies.
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Legal:	Contracts will be recommissioned and extended in line with requirements and employer duties enacted in accordance with the relevant employing body.
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Economic Impact:	This will stabilise services and enable workers to move beyond very short-term contracts of employment, improving sustainable delivery and impact.
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Sustainability:	This work aligns with the Children's Transformational Change Programme, GIRFEC principles, and the Christie Commission's focus on early intervention and prevention. Developed and tested over four years, the proposed approach offers greater long-term sustainability than possible with the previously annualised funding from Scottish Government.
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Sustainable Procurement and Article 19:	The procurement process will meet all legislative requirements, and Article 19 of the UN Convention on Rights of a Child (UNCRC).
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Risk Implications:	<p>Without CYPMH there is a significant risk that the mental health needs of children, young people, and their families will escalate to more intensive service intervention and place additional demands on Child and Adolescent Mental Health Services (CAMHS), Primary Care and Children's Services.</p> <p>A failure to mainstream in line with Scottish Government CYPMH intentions may impact on future commitments to GCHSCP on behalf of Glasgow City Council. Scottish Government reporting on outcomes is to be continued.</p>
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Implications for Glasgow City Council:	Glasgow City Council have awarded this baseline budget to GCHSCP to commit on their behalf, including staff and contracts implications.
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Implications for NHS Greater Glasgow & Clyde:	CYPMH funding is in part provided for NHS staff and contracts
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Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input checked="" type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Purpose

- 1.1 This report provides an update to the Integration Joint Board of funding arrangements for the Children and Young People's Mental Health and Wellbeing (CYPMH) framework for 2026 onwards, following baselining of this previously annualised grant. The report also provides details of review activity to confirm the programmes to be funded through the baselined budgets.

2. Background

- 2.1. This programme of expenditure was a new programme of investment established in 2021 by Scottish Government to reduce the significantly growing mental well-being concerns for young people. An extensive Scottish engagement process

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was undertaken to develop a framework to guide this investment in all local authority areas.

- 2.2. This report is a follow up to the reports presented to IJB in January 2021, March 2021, May 2021, September 2021, March 2022, April 2022, March 2023, January 2024 and [May 2024](#), which sought approval for the strategic direction, and the plan for the use of the Mental Health tier 1 and 2 funding, in the context of its alignment with the wider children's services transformational change programme.
- 2.3. In 2024 the Scottish Government published a revised [Community Mental Health and Wellbeing Supports and Services Framework](#), setting out expectations of local authorities to provide prevention and early intervention programmes for the mental health of children, young people and their families in light of the learning.
- 2.4. Early in 2025 the Scottish Government confirmed mainstreaming of the funding, recognising the repeated challenges of local systems to manage delivery and the associated employer and contract risks of the previous annualised process. The amount granted to Glasgow City Council (GCC) for 2025-26 was £1.843m. GCC confirmed this funding to the Integration Joint Board from 2025 onwards. The Scottish Government have indicated that they will continue to expect annual reporting from local authorities on the use of this funding, including the number of beneficiaries.
- 2.5. CYPMH framework funding has significantly contributed to the delivery of the Youth Health Service (YHS) over the last four years. That service is substantially funded from non-recurring income with CYPMH funding providing 29% of the core costs. A separate review is currently underway to consider governance and service security for YHS. The emerging insights from the review have been incorporated into the recommendations in this paper.

3. Review Process and recommendations

- 3.1 The review took place from May to August 2025. Members of the Tier 1 & 2 Group of Children's Services Planning considered the current programmes and their impact as demonstrated by recent annual reports to Scottish Government.
- 3.2 External providers that currently receive CYPMH funding were invited to two engagement events to reflect on the learning and impacts. Very quickly the limitations of the national reporting process in evidencing impact were recognised and although a number of the programmes had been externally evaluated there was inadequate impact data consistently applied. It was agreed that a new monitoring and evaluation framework was required. This has been developed in partnership and will be piloted from September 2025 for full implementation in April 2026.
- 3.3 A mapping exercise was carried out to illustrate the scope of current CYPMH activity across the Mental Health Prevention and Early Intervention Framework, covering all age groups, developmental stages, protected characteristics, and other vulnerability categories.
- 3.4 The review also examined referral sources to assess how effectively the programme alleviates pressure on other services.

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3.5 The review highlighted:

- Over the past four years, the programme's ongoing development and trialling of new approaches has helped shape a range of valued services and supports, while also highlighting key areas for future focus.
- The interdependency between services was substantial e.g. a small-scale pilot in 2024-25 is currently being scaled up through this fund, enabling Youth Health Service, CAMHS, School Nursing and the Young People Compassionate Distress Response Service (CDRS) to triage referrals to the most appropriate service. The initial pilot with 60 young people resulted in a decision to change the support journey in 20 cases, reducing waiting times and unnecessary pressure on services in each of those cases.
- The service impacts of this investment bridged public services e.g. a Police Scotland and CDRS pilot recently demonstrated that when CDRS was used, police officers spent an average time of 79 minutes at an incident, compared with 360 minutes when CDRS was not used, with a corresponding cost reduction of £196.50 per incident. There was also a significant reduction in repeat call demand. Previously those police officers would accompany individuals to A&E, therefore this pilot has also reduced demand on those services.

3.6 Recommendations arising from the review were:

- a) Provision for people with protected characteristics/Fairer Scotland have been substantively advanced and these components should be continued. There should be broader consideration for young people with a disability and young carers.
- b) The scope of provision requirements for 5-10 year olds should be further explored.
- c) Many of the staff employed on temporary contracts for a number of years should now be made permanent to ensure continuation of delivery and reduce employer risks
- d) Move towards longer term contracts for required provisions, tailored to the specifics of each service and existing agreements, to improve continuity and workforce stability in provider organisations.
- e) Innovation. Some programmes are in development stages, offering innovative solutions that help reduce system pressures and 8% of the CYPMH funds are utilised in this way. Having a small component of the fund that enables innovation will remain critical to addressing emerging issues and some of the intractable challenges for children and young people's mental health.
- f) Review and refine the evaluation framework to more clearly capture the effectiveness and value of CYPMH programmes.

4. CYPMH funding programme for 2026 and beyond

- 4.1 Following the review a re-assessment of the funding requirements across the programmes was completed. This has seen the removal of a couple of vacant posts, adjustments to budgets in line with requirements, and the introduction of

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investment specifically to consider outstanding needs for children aged 5-10 years of age.

- 4.2 The table below provides a breakdown of the programmes recommended for future funding from this income. Any material change to the proposals for the funding will be brought back to the IJB for consideration as appropriate.

CYPMH funding	£1,843,000.00	
Internal posts & programmes	Cost 2025-26	Cost 2026-27 (as at 2025-26 excluding uplifts)
Youth Health Service (7 posts) 2026-27	289,226	369,226
Martha's Mammies 1 x SWS Grade 6	53,153	53,153
1 x Assistant Service Manager Grade 8 SWS - aftercare redesign with RSLs	78,015	78,015
CYPMH Lead (NHS B7 0.8wte)	57,308	57,308
Family Well-being Hub (NHS B6 0.2wte)	13,748	13,748
Referral screening grp: additional hours: CAMHS, YHS, School Nursing	18,135	18,135
CYP Networking Team (6 NHS B7+ 5 x B3)	287,259	247,624
Roma outreach workers (NHS 2xB3)	82,222	82,222
Externally provided supports & services	Cost 2025-26	
YP Compassionate Distress Response Service (CDRS)	163,085	163,085
LGBT+ MH supports (consortium)	185,400	185,400
Community based programme supporting CYP with anxiety, ND and school attendance, including walk & talk, MH group work provision, group programmes to address very low attendance includes	51,700	51,700
Specialist BME supports & services (combination of training and direct provision)	35,000	35,000
Online supports to 10-15 year olds (contract currently held by Kooth)	166,152	166,152

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Online supports for 16-23 year olds (contract currently held by Togetherall)	56,803	56,803
Referral screening group: external posts	5,000	5,000
Youth Health Service mental health contract	149,350	149,350
Programme to address needs of 5-10 age group	50,000	50,000
GAMH: to provide managing distress in young people training to social work staff	5,000	5,000
Family Wellbeing Hub including Children 1st Support Line, peer support group	56,250	56,250
Total	1,802,806	1,843,171

- 4.3 Cost of living increases are not shown but would be applied in accordance with general uplift.
- 4.4 The broader recommendations of the review will be progressed through Children's Services Planning arrangements.
- 4.5 Due to the baselining of funding a number of fixed term posts will move to permanent status and the contractual arrangements with external providers will require to be amended in line with the procurement arrangements of the contracting authorities.

5. Recommendations

- 5.1 The Integration Joint Board is asked to:
- a) Note the contents of the report; and
 - b) Note the proposed expenditure of £1.843m per annum from 2026.