



HEALTH INNOVATION
North West Coast



Cheshire and Merseyside



REDESIGNING YOUNG ADULTS' MENTAL HEALTH SERVICES

UNDERSTANDING THE PROBLEM

MENTAL HEALTH AMONG YOUNG PEOPLE IS A GROWING CONCERN, PARTICULARLY FOR THOSE AGED 16 TO 25

Mental health among young people is a significant and growing concern, particularly for those aged 16 to 25 as they navigate the transition from child to adult services. Around one in five young people experience a mental health condition. Suicide is recognised as one of the leading causes of death among young people, highlighting the seriousness of these challenges. This period of transition can be especially difficult, with many young people experiencing disruption to support alongside pressures related to education, employment, and increasing independence. As a result, those with mental health conditions are more likely to have lower academic attainment and face higher rates of unemployment than their peers. Rising living costs, societal pressures, and the lasting impact of the pandemic further compound these challenges, limiting opportunities at a critical stage of life.

ONE IN FIVE YOUNG PEOPLE EXPERIENCE A MENTAL HEALTH CONDITION



NHS England reports that in 2023 young people with a mental health condition were:

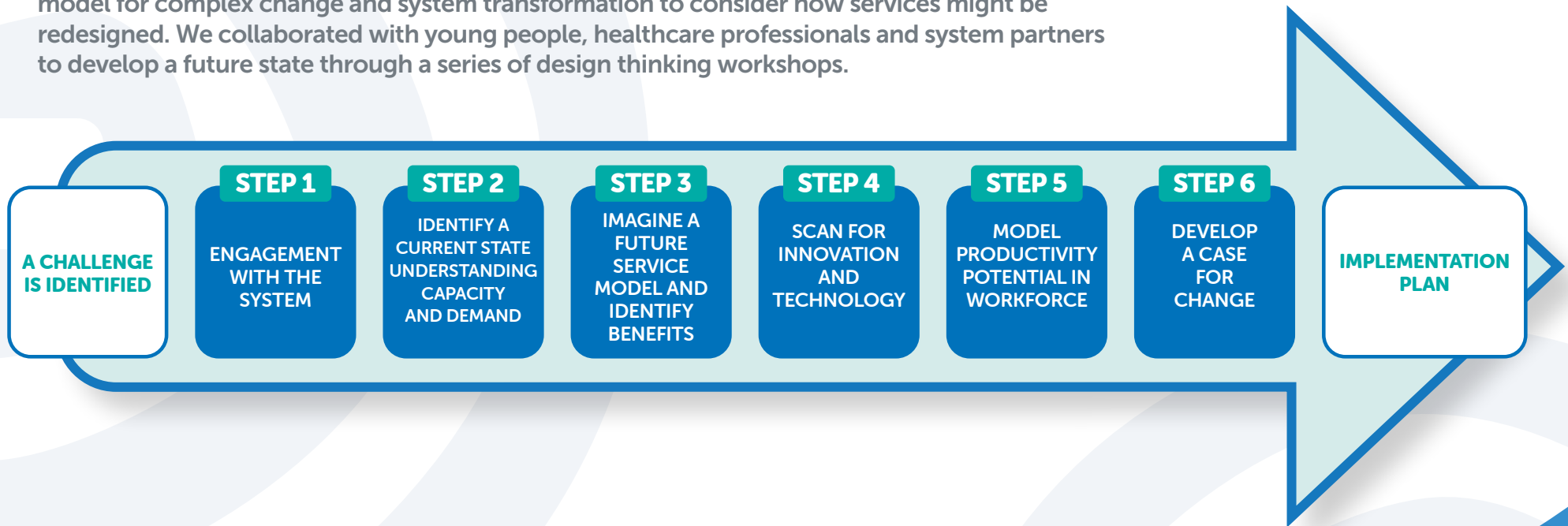
- three times more likely not to be able to afford to take part in activities such as sports, days out, or socialising with friends
- four times more likely to fall behind with bills, rent or mortgage
- three times more likely not to be able to afford to buy food, or to have to use a food bank
- four times more likely not to be able to afford the right clothes, shoes and equipment for their daily lives.

Access to care is hampered by the growing gap between demand and capacity of services resulting in long waiting lists. Young people who receive care from Children and Adolescent Mental Health Services (CAMHS) as children experience many challenges transitioning to Adult Mental Health Services (AMHS), and only around a quarter of young people transition to AMHS. Many are discharged to their GP who can find it difficult to support young people without input from specialist services.

THE APPROACH

The Cheshire and Merseyside Children and Young People’s Mental Health Plan 2024-2026 was developed in conjunction with children, young people and their families. One of the eight priorities is to “design and develop an equitable offer of mental health support for young adults (18-25 year olds)”.

Health Innovation North West Coast has supported Cheshire and Merseyside ICB in using a model for complex change and system transformation to consider how services might be redesigned. We collaborated with young people, healthcare professionals and system partners to develop a future state through a series of design thinking workshops.



CURRENT STATE OF CHESHIRE AND MERSEYSIDE SERVICES

A recently commissioned Cheshire and Merseyside report examined emotional wellbeing and early mental health services for children and young people aged 5-25. It draws on evidence from nearly 500 providers and the voices of over 1,000 children and young people across the region to map provision, highlight exemplars, identify gaps and propose practical actions for a more visible, connected and equitable early help system.

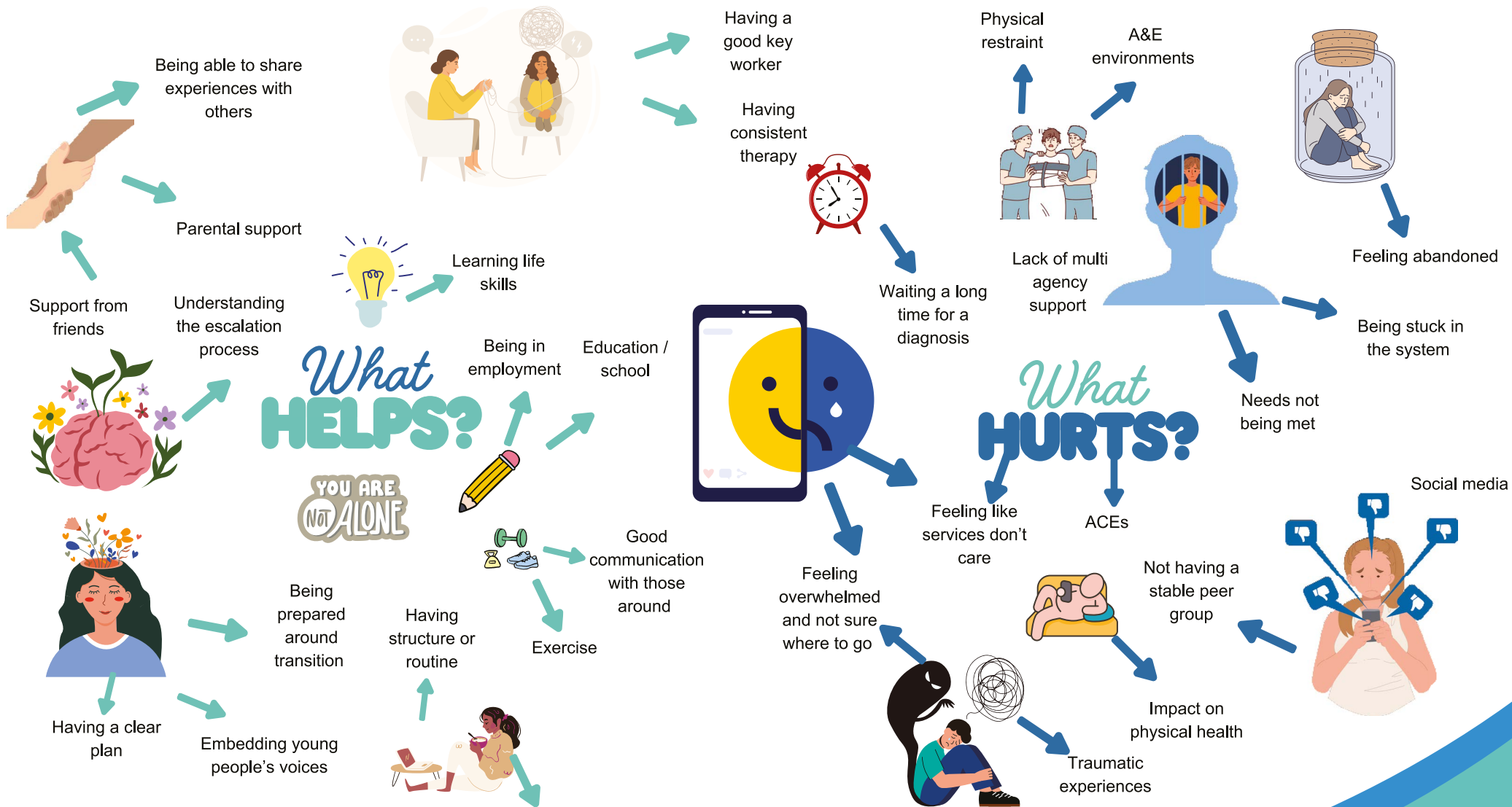
The report found that only 32 per cent of services for children and young people provide support up to the age of 25. However, nine per cent of these services extend support only for specific groups, such as young people with special educational needs or disabilities, those with an Education, Health and Care plan (EHCP), or those who are care experienced. Most early-help support reduces or ends at age 17 and young adults frequently described feeling caught between children's and adult services.

For a comprehensive understanding of the provision available currently please see the report here [EWEMH Report](#).

ONLY 32 PER CENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE PROVIDE SUPPORT UP TO THE AGE OF 25

As part of our design thinking workshops, we spent time understanding the experiences of young people. They shared what they say, feel, do, and think about themselves and current services, providing insight into the challenges of navigating early adulthood, developing independence, and accessing mental health support that can often feel fragmented or designed primarily for adults. Young people were also asked what helps and what 'hurts' when accessing support. While some participants later told us they were uncomfortable with the word 'hurts', it reflects the wording used in the workshop discussions. Young people highlighted the importance of support through key transitions and compassionate non-judgemental care, as well as challenges including long waiting times, inconsistent support and environments that can feel unsuitable for them.





SIX KEY THEMES

SIX KEY THEMES WERE IDENTIFIED BY YOUNG PEOPLE, HEALTH PROFESSIONALS AND SYSTEM PARTNERS:

1 Culture

There can sometimes be a culture in our services that leaves young people feeling invalidated, abandoned, misunderstood, and not cared for. Young people and service providers would like the culture to be led by young people, to be compassionate, non-judgemental, and have a focus on understanding users with a holistic approach to their lives.

2 Communication/collaboration

Young people told us that there is no clear offer of services or clear explanation of what support they can expect along their journey. They felt that many professionals are involved in their care, but that communication and collaboration between services is not always clear. This can lead to confusion about what support is available locally. Some professionals also described the system as feeling "more of a muddle than a model". Young people said they would value a clearer map of services, communication that includes them directly and better information-sharing between services to reduce the need to repeat their story.

3 Efficiency

Demand outweighs capacity and services are under-funded. Young people and service providers highlighted concerns about duplication and inefficiency across parts of the system. Young people and service providers would like to see a focus on prevention, pooled funding, a clear map of services, multi-agency first contact, and a needs-led response.

4 Relevance to young person

Services are not tailored to this age group, including the support provided, the physical environment and the training of the workforce which results in needs not always being met. Young people and service providers would like to see multi-agency care under one roof, with a consistent care team, and provided in a welcoming, safe, youth-friendly environment.

5 Access

Young people told us that accessing support can be difficult and that thresholds for services can feel too high. Some described services as being "diagnosis-led rather than needs-led", meaning they felt support was sometimes dependent on a formal diagnosis rather than their individual needs. Young people and service providers said they would like services to be more visible, easier to access and available in ways and at times that work for them.

6 Transition

The transition from CAMHS to AMHS does not work well, leaving many without support and feeling abandoned. Young people and service providers would like to see a clear, flexible, individualised pathway and a well communicated handover.

FUTURE STATE OF CYP SERVICES

THE PROPOSED FUTURE STATE INCLUDES FIVE KEY AREAS OF CHANGE:

CHANGE

1

EMPLOYING OUR YOUNG PEOPLE



Employing young people within mental health services can help ensure that services are more responsive to their needs and experiences. Involving young people in roles across the system can

improve the relevance and accessibility of services, while also providing valuable opportunities for young people to gain skills, confidence and work experience. This can support recovery and wellbeing, while also contributing to wider ambitions to reduce youth unemployment and economic inactivity among young people.

This approach aligns with national policy direction, including the Government's Get Britain Working agenda and programmes such as Connect to Work, which aim to support people with health conditions or other barriers to enter employment. Evidence-based models such as Individual Placement and Support (IPS) also highlight the positive relationship between employment and mental health recovery.

THIS APPROACH COULD BE COORDINATED CENTRALLY ACROSS CHESHIRE AND MERSEYSIDE WITH A TEAM RESPONSIBLE FOR:

- developing a suite of roles, job descriptions and recruitment materials
- matching young people to suitable opportunities
- providing centralised training and development
- managing a proposed offer into employment.

THE PROPOSED OFFER COULD INCLUDE:

- tier 1 – introduction to the service and early engagement opportunities
- tier 2 – confidence-building and general employment support
- tier 3 – job matching into roles within mental health services.

Examples of roles for young people could include participation in young people's advisory or lived experience boards, sitting on recruitment panels, acting as Mental Health Ambassadors, contributing to governance roles, working as peer support buddies, supporting parents, undertaking administrative roles or joining through apprenticeship opportunities.

CHANGE

2

UPSKILLING OUR WORKFORCE



Empowering young people, particularly those from underserved and marginalised communities, to contribute to the development and delivery of training can help ensure services better reflect lived experience. This can support staff to better understand the challenges young

people face and strengthen the inclusivity and responsiveness of services.

Proactively engaging with groups who are less likely to access services including those experiencing socioeconomic disadvantage, cultural barriers, or mistrust of services can help ensure their perspectives are not overlooked. Meaningful community engagement and peer-led approaches can help services better understand barriers to access, build trust, and develop more equitable, person-centred support.

THIS WOULD BE COORDINATED CENTRALLY AND DESIGNED BY YOUNG ADULTS:

- coordinating resources via a digital portal
- running events/sessions in person and online
- carrying out training needs analysis and regular reviews
- providing standard regular baseline training for all
- offering specific ad hoc additional training
- managing a method of evaluation to measure training outcomes.

TRAINING SHOULD INCORPORATE THE FOLLOWING ELEMENTS:

- a focus on understanding young people, with a holistic approach to all aspects of their life
- a map of services available to all staff
- culture/behaviour coaching to ensure a collective responsibility for the culture
- specific circumstances, such as LGBTQIA+, care leavers, adverse childhood experiences and neurodiversity etc
- individualised conversation techniques so that young people feel validated
- coaching in delivering compassionate care in a non-judgemental and honest way, promoting that it's OK to seek help
- training for AMH workforce staff in young people's needs (ACEs etc) and vice versa.



CHANGE

3

MARKETING OUR SERVICES



Clearer communication and promotion of services will help ensure that young people and families understand what support is available and can access the service that best meets their needs. It will also help support smoother transitions between children's and adult services.

THIS COULD BE COORDINATED BY A TEAM, INCLUDING YOUNG ADULTS, RESPONSIBLE FOR:

- communications and promotion across services, including the development of relevant, engaging and accessible materials
- managing an online platform that provides a single point of access for referrals and hosts educational content, digital tools and a directory of local services
- undertaking demographic research to support equitable access to services
- carrying out appropriate governance, due diligence and ethical review processes.

MARKETING AND ENGAGEMENT ACTIVITY COULD INCLUDE:

- working with trusted voices and influencers to promote positive messages about mental health support
- sharing case studies and lived experience stories
- podcasts and public talks
- targeted use of social media platforms such as TikTok, Snapchat, YouTube and Instagram
- induction materials and virtual tours of services, including directions and information about local transport
- organising health and wellbeing events
- outreach and promotion through local events, sports clubs and youth centres.



CHANGE

4

TRANSITION POLICY



Developing a Cheshire and Merseyside Transition Policy, that moves from age-based to needs-based, will bridge the gaps between children's and adult services and improve young people's experience and continuity of care.

TRANSITION POLICY IDEAS INCLUDE:

- early planning and clear roles, responsibilities and timelines between services
- an identified transition key worker / buddy to manage the process and support the building of relationships with new staff
- flexibility and reasonable adjustments where necessary, including age-specific expectations where additional needs diagnosis is present
- transition at the pace of the young person
- an approach to data sharing and connecting digital systems between services
- an offer of one or several of the following to support the young person to transition:
 - visits to adult services ahead of time
 - virtual tours/videos of services/buildings
 - taster/introductory sessions
 - an introductory period with a phased approach
 - transition profile/passport
 - online staff bios/blogs



CHANGE

5

PHYSICAL SPACES & HOLISTIC CARE OPTIONS



In line with the 10 Year Health Plan, taking a neighbourhood approach to providing holistic, person-centred, multi-agency care, under one roof and in an environment that is welcoming and relevant to young people.

Designed by young people, these spaces could include a variety of assets/activities such as life skills, arts, cooking etc, alongside co-located health and social care services.

These spaces could be supported by a digital, online or virtual environment, providing a Single Point of Access for all referrals and housing the educational content, apps and a local services library etc.

These five changes align with the findings of the emotional wellbeing and early mental health report, which provides clear evidence to guide the development of any future Youth Futures Hubs across Cheshire and Merseyside. Young people expressed strong demand for open-access youth spaces, flexible early intervention, clear navigation routes, and relational, non-clinical support - all core components of the proposed Hub model. The data also highlight the need for 16 to 25 pathways, co-produced design, integration with VCSE partners, and evening/weekend access.

**ALL OF THESE FIVE CHANGES
COMBINED RESULT IN TWO
KEY ELEMENTS, CENTRAL
COORDINATION AND SPACES
IN THE COMMUNITY.**



CESHIRE AND MERSEYSIDE YOUNG ADULT MENTAL HEALTH TEAM

OUR ASPIRATION

The marketing, workforce training and job placements could be delivered through a centralised team, co-funded by organisations across the ICS footprint. This team could also oversee the single point of access into mental health services and provide outreach support to neighbourhood hubs across each locality.



KEY



MARKETING OUR SERVICES -
The central mental health team are responsible for marketing all services in a co-ordinated manner, driving all activity to the SPA platform.



EMPLOYING OUR YOUNG PEOPLE - The central young adult mental health team are responsible for employing and supporting young adults into a variety of roles across mental health services.



UPSKILLING WORKFORCE - The central young people's mental health team are responsible for the design and delivery of centralised workforce training for any professional working with young adults.



NEIGHBOURHOOD HUBS

INNOVATIONS

Digital technologies will play an important role in supporting the implementation of the proposed model for young adult mental health services. Emerging technologies, digital tools and new approaches to engagement and training offer opportunities to improve how services are delivered, accessed and experienced by young people. They could support workforce training and development, strengthen communication and marketing of services, improve awareness of the single point of access and help direct young people to appropriate support, including local hubs. They may also include digital and immersive approaches, such as virtual reality, augmented reality and interactive learning tools, which can help make information and support more accessible and engaging for young people.

WAYS THAT INNOVATIONS COULD BE USED:

- A central repository for training materials, supported by digital tools and technology-enabled learning to support workforce development.
- A single point of access platform designed to improve the visibility of services and help people find appropriate support. This could also help direct users to relevant local services or hubs.
- Innovations specifically targeted at young adult mental health, including digital learning tools, virtual reality or augmented reality resources, and virtual tours of services to help young people better understand what support is available and how to access it.



THE FOLLOWING EXAMPLES HIGHLIGHT INNOVATIONS THAT COULD BE CONSIDERED TO SUPPORT DELIVERY OF THE MODEL

BFB Labs Ltd

Digital therapeutic intervention for 13-25-year-olds facing difficulties with low mood/depression.

Phase Space

Virtual reality (VR) solution to improve young people's mental health.

ChatHealth

Individuals can send a text message and get a quick response from a health professional from their local area.

Togetherall

An online moderated platform providing peer support, access to resources and CBT courses. The platform is anonymous, allows instant access, always active, and clinically moderated and managed. It is aimed at individuals at all stages of mental health need.

STEM4 – Calm Fear

App using CBT to manage anxiety. Focuses on relaxing, mindfulness, breathing techniques and emotional expression, managing feelings through journaling and self-monitoring, allowing users to track their progress.

STEM4 – Mood Move

App using Behavioural Activation Framework to help increase motivation to change. Helps young people to define goals and set activities to reduce avoidance of situations that may induce depression and low mood.

MoodWise

Signposting/central repository where young people (16-25) can find useful national and local resources. Supports anxiety, depression, stress, anger and loneliness. No data collected and all content NHS-approved and quality-assured.



CONCLUSION

Improving mental health outcomes for young people aged 16 to 25 is both a clinical priority and a wider system responsibility. The evidence presented throughout this report highlights a clear and persistent gap between children's and adult services, compounded by rising demand, socioeconomic pressures, and inequitable access to support.

The proposed future model offers a practical and co-produced response to these challenges, grounded in the voices of young people, system partners, and regional evidence. By focusing on employment, workforce capability, transition pathways, visibility of services, and holistic neighbourhood-based support, Cheshire and Merseyside has an opportunity to deliver a genuinely equitable and needs-led offer for young adults.

Delivering this transformation will require sustained system-wide collaboration across NHS, Local Authority, VCSE, education, and employment partners. It will also require a cultural shift from age-bound services to flexible, relational, and person-centred pathways that reflect the realities of early adulthood.

This is not solely a service redesign: it is a strategic investment in prevention, life chances, and long-term population health. Supporting young people to access timely mental health care, meaningful employment opportunities and trusted relationships will reduce inequalities, improve recovery outcomes, and contribute to wider economic and social value across the region.



ACKNOWLEDGEMENTS



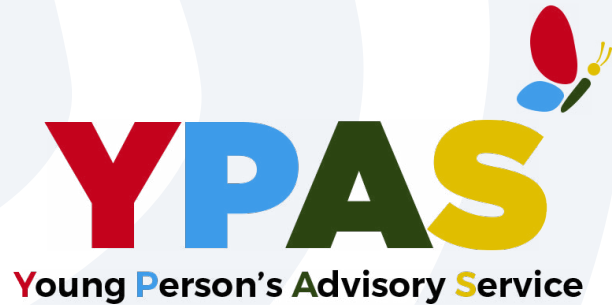
**Cheshire and Wirral
Partnership**
NHS Foundation Trust



Mersey Care
NHS Foundation Trust



Alder Hey Children's
NHS Foundation Trust



Change and Integration Programme
Together for Young Lives,
Cheshire and Merseyside



Cheshire & Merseyside
Young People and Families
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