

Promotion of mental health and prevention of mental ill health in CYP

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The Children and Young People's Mental Health and Wellbeing Taskforce

- In summary, the themes are:
- Promoting resilience, prevention and early intervention
- Improving access to effective support – a system without tiers
- Care for the most vulnerable
- Accountability and transparency

What we currently do:

- Antenatal
- 0-5 years
- School age children
- Children with special needs
- Transition points

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Universal Services

- Perinatal Mental Health Service
- Health Visiting
- Healthy School inc. School Nursing
- Early Help
- Counselling Services
- CAMHS

Perinatal Mental Health Service

- Referral rates: Av. 234 per year
- Treatments times vary dependant on need
- Can remain in service until child reaches 3 years of age
- Those referred in the antenatal remain until child reaches 1 year.

Health Visiting 0-5

- Aim: Universal prevention and early intervention detected at the 5 mandated checks
 - Antenatal – maternal mental health, 0%
 - New Birth Visit – emotional attachment, 90%
 - 6-8 weeks – mood assessment, targeted 45%
 - 1 year check – assess family strengths, risks 47%
 - 2 ½ year check – learning and behaviour 61%

Health Visitors

- Tensions

- Ability to meet the mandate
- Introduction of integration of ages & stages questionnaire at 2 ½ years with PVI settings
- Additional funding to bring us up to a floor (1 of 12 L.A.)
- 32 HV team to carry out circa 15000 assessments per year (470)
- PH grant cuts
- No requirement to improve on existing performance *versus* evidence for early identification and intervention = reduced demand

Early Help

- Early Help Assessment
- Team around the family
- Family support workers

- Children Centres:
 - Integration with Midwifery, health visitors, perinatal mental health team, postnatal support group

Early Help

- Tensions:
 - Diminishing commitment for evidence based interventions:
 - perinatal/baby massage
 - breastfeeding/attachment/emotional health/peer support
lowest breastfeeding rates in London
 - Assumptions regarding appropriate training – consistent messages (e.g. HV, children centre staff, family support workers)
 - Financial cost pressures

Healthy Schools

- Newly commissioned Schools Nursing Service
 - Universal health and development assessments of reception and year 6.
- With Schools:
 - develop a school health profile
 - develop a Health and Wellbeing Action plan
 - support school to deliver actions in year
 - facilitate school to achieve the HS award

School Nursing

- School nurses lead and deliver the Healthy Child Programme (HCP) 5-19 and are equipped to work at community, family and individual levels.
- They can play a crucial role in supporting the emotional and mental health needs of school-aged children. School nursing services are universal and young people see them as non-stigmatising.

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Healthy Schools

- Tensions:
 - 9 School Nurses to cover: 43000 5-19 children and young people in 81 schools and colleges
 - Attendance at increasing numbers of Safeguarding CP conferences
 - Ad hoc commissioned counselling services not specifically linked to schools
 - Optional to develop a Health & wellbeing action plan

Vulnerable groups

- Increasing numbers of Early Help Plan, CIN, CP and LAC
- Theme: Neglect = Long term chronic problems
- Dedicated CAMHS support for Looked after children placed out of borough
- Some young carers support
- Respite

Vulnerable groups

- Tensions
 - Timeliness of LAC health assessments and regular reviews – identification of appropriate support
 - Ad hoc commissioning by partners of counselling services enforcing a tiered approach
 - No single point of access or a “one stop shop” service

Transition

- Transition group exists

Tensions:

- Various commissioned services – requires a multiagency approach.