

## INFORMATION FOR SCHOOL STAFF AND PARENT/CARERS OF HOST SCHOOLS

### WHAT ARE THE MENTAL HEALTH SUPPORT TEAMS?

Mental Health Support Teams (MHST) have been created to offer early intervention, low intensity, mental health support within schools for children and young people with mild to moderate mental health difficulties. The MHST will also support the Mental Health Lead in each education setting to introduce and develop their Whole School Approach. The MHST will also offer support and advice to education setting staff to identify the most appropriate services for their need and help liaise with other appropriate services.

The purpose of the MHST is to improve the mental health and wellbeing of children and young people and is driven by the Green Paper 'Transforming Children and Young People's Mental Health Provision' ([www.gov.uk](http://www.gov.uk))

In Northamptonshire, we have 2 current MHST; one in Central Northampton and one on East Northamptonshire.

Our 3 new teams will be in Corby, Kettering Wellingborough.

Each team will consist of 4 trainee Education Mental Health Practitioners, one CBT Therapist/supervisor, 2 Mental Health Practitioner/supervisor. We also have a small administrative team, an Operational Team Lead and Clinical and Team Lead. The MHST will sit within CAMHS services within Northamptonshire Healthcare NHS Foundation Trust.

In our new areas, to begin with, the trainee EMHPs will be in training and therefore the MHST will start their work in a limited number of schools. Once the trainee EMHPs are qualified (after a one year post-graduate course), the MHST will support the full number of schools and education settings within each area.

Your school has signed up to work with MHST, the MHSTs will be taking referrals via your Mental Health Lead in School, with whom you should discuss any concerns you may have about the emotional health of your child/young person/the children and young people you work with.

The 2 current MHSTs are fully operational.

The 3 new teams in Corby, Kettering Wellingborough will be fully operational from September 2022.

Your School Mental Health Lead is: Laura Buckley (Headteacher)

## CONTACT DETAILS

[CYP.MHST@nhft.nhs.uk](mailto:CYP.MHST@nhft.nhs.uk)

## WHAT ARE EDUCATION MENTAL HEALTH PRACTITIONERS?

Education Mental Health Practitioners (EMHPs) are part of the government's MHST plans for schools to provide mental health early intervention support for children and young people. Trainee EMHPs spend a year completing a post-graduate course covering evidence based approaches for low intensity care. This phase is the 'trainee phase'. During this time, they will build up their experience through individual, group and whole school work with pupils, families and staff. Once they have completed the course, they are qualified EMHPs.

## SUMMARY OF THE TRAINEE EMHP ROLE

EMHPs have a clear criteria to support low level (low intensity) mental health needs such as low mood, anxiety and phobias through short term pieces of work (4-8 sessions). EMHPs will be able to provide assessments, evidence based individual and group pupil work, shared decision making with pupils, parent-led approaches, onward signposting to other teams and services and whole school projects.

The interventions offered will be Cognitive Behavioural Therapy informed and robust clinical supervision is offered to all practitioners within the MHST.

- Trainee EMHPs will receive weekly clinical supervision from a supervisor to be able to discuss their cases
- Informed consent will be required from children, young people and parent/carers prior to any discussions or referrals
- As part of their training and supervision, trainee EMHPs will be required to video their sessions, the recording will be used for training and supervision requirements only and consent for this can be taken away at any point and will not affect the intervention offered the child, young person, or parent/carer
- A written record of interventions is completed on SystmOne, which is our health electronic record system
- All MHST staff have enhanced DBS checks

## TRAINEE EMHPS CAN SUPPORT WITH:

There are many things EMHPs can help with in your school, where needs are more complex, they may need to refer a young person onto another team or service that is better placed to support.

The below table shows the types of presentations EMHPs can help with, things they may be able to help with (with discretion and under close supervision), and things they won't be able to help with. This document is a guide only and MH Leads in schools can discuss cases within MHST consultations.

# What support can a fully trained EMHP provide in your school or college – function 1.

An example guide from CYP IAPT Midlands Collaborative. Regional variations may occur; please confirm list with your HEI or EMHP Supervisor.

EMHP's can work with children as individuals or in a group to provide interventions in cases of...	EMHP's may work with children as individuals or in a group to provide interventions in cases of... Discretion and close supervision needed	EMHP's should not work with children as individuals or in a group to provide interventions in cases of... Significant levels of need /complex conditions
Behavioural difficulties – identification, brief parenting support	Support staff and help cofacilitate a full parenting programme such as Triple P	Conduct disorder, anger management, full parenting programmes (e.g. Triple P, Solihull Approach).
Training parents and teachers to support interventions with children	Irritability as a symptom of depression – (can present as anger)	Treatment of parents' depression and anxiety.
Low mood	Low confidence, Assertiveness or interpersonal challenges – e.g. with peers	Anger management training, Chronic depression
Worry management	Some short-term phobia exposure work	Low self-esteem, social anxiety disorder
Anxiety/Avoidance: e.g. simple phobias, separation anxiety	Thoughts of self-harm, self-harm not requiring medical attention. Support to develop healthy coping strategies	Extensive phobias e.g. Blood, needles, or vomit phobia
Panic Management	Insomnia (further training may be required)	Severe, active, high risk self-harm.
Assessing self harm, thoughts of self harm, and supporting with alternative coping strategies. Pupils with history of self-harm, but not active	Assessment of complex interpersonal challenges	PTSD, trauma, nightmares
Sleep Hygiene	Mild/early onset Obsessive Compulsive Disorder (OCD) (further training may be required)	Relationship problems -counselling for issues such as relationship problems may be better suited to school counsellors.
Thought Challenging – negative automatic thoughts	Children that are displaying rigid, ritualistic behaviour that may or may not be within a diagnosis of ASD	Obsessive compulsive disorder moderate to severe in nature
Problem Solving		Moderate to severe attachment disorders. Assessment and diagnosis of developmental disorders and learning difficulties.
		Pain management
		Historical or current experiences of abuse or violence

## HOW TO REFER

Referrals will be made following the current pathway for emotional health and wellbeing needs for Children and Young People via the Referral Management Centre (RMC). The RMC provides a single point of access for professionals to make referrals into children and young people's specialist community health services. The RMC aims to manage all referrals to ensure that children and young people are seen by the right person, with the right skills at the right time. (<https://www.nhft.nhs.uk/camhs>)

All referrals go via the Mental Health Lead within school. This may change as we continue to work with children, young people, parents/carers and education staff to discuss how to improve accessibility to our service.

Any changes within our service will be communicated to all involved.

EMHPs will require a suitable space within school to complete sessions; an appropriate and confidential room. MHST can be flexible, should the need arise, and offer video sessions conducted via Microsoft Teams. Consent from parent/carer and the child, young person will need to be gained and recorded.