# 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)

In Northamptonshire, we have 5 current MHST; one in Central Northampton, East Northamptonshire, Corby, Kettering Wellingborough

Our 2 new teams will be in Central Northampton2 and Daventry/NN6.

Each team usually consists 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 as well as a Neuro-specialist post. The MHST will sit within CAMHS services within Northamptonshire Healthcare NHS Foundation Trust and is an additional service to compliment those already existing.

Central 2 team will be led by Hiral Pandya, CBT Therapist/Supervisor, Jill Schofield, MH Practitioner/supervisor and 3 Education Mental Health Practitioners (EMHP's); Abbie Crofts, Georgia Meyers and Remy Blanco-Rivas.

Daventry/NN6 team will be led by Katie Frost, Clinical Team Lead; Nandini Vadera, Mental Health Practitioner/Supervisor; and 3 Trainee Education Mental Health Practitioners (EMHPs), Nicky Higgins, Michaela Mullens and Kirsty Jackson-Bradshaw.

In our new areas, to begin with, the trainee EMHPs will be in training and therefore the MHST will start their work in line with the training course. The trainee EMHPs will be fully qualified after a one-year post-graduate course.

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.

Your School Mental Health Lead is: Denise Morgan

## **CONTACT DETAILS**

#### 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.



# **MHST CRITERIA**

MHST can work with: CWPs can work with:	MHST and CWPs may be able to work with (please consult MHST):	MHST and CWPs are unable to work with:
Low mood- behavioural activation	Phobia work	Conduct disorder
Worry management	Early inset of OCD symptoms	Treatment of parental mental health difficultie
Problem solving	When active self-harm is present	Chronic depression
Sleep hygiene	When suicidal thoughts are present	Extensive, long-standing phobias
Graded exposure for anxiety (generalised anxiety, separation anxiety, health anxiety, social anxiety)	Eating problems /using eating as a way of regulating emotions	Severe, active, high risk self-harm
Simple phobias	Controlling behaviours relating to anxiety/emotional dysregulation presentations as NVR may be appropriate	Active suicide ideation
Supporting with self-harm when associated with and the focus of work is on low mood/anxiety		PTSD
Thought challenging		Relationship issues, MHST do not offer counselling
		OCD severe in nature
		Attachment disorders
		Eating disorders
		Assessment of developmental disorders
		Assessment of learning difficulties
		Pain management
		Historical or current experiences of abuse or violence
		Symptoms of psychosis; significant confusion, hallucinations of an auditory or visual nature ongoing, concerning thought pattern

# **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 <u>Mental Health Lead</u> 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 with 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.

