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Representation: National Forum of School Health Educators

Title: Integrating CYP IAPT principles into SCPHN Practice

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A plethora of reports and policies have documented the scale and enormity of

mental health problems in children and young people (WHO, 2004; Green et al; 2005; RCP 2010; DH 2015) over recent years. In addition to this, complaints of huge waiting lists children and young people are experiencing, as well as the number of referrals (23%) being rejected by specialist services for treatment and support is becoming ever increasingly apparent (Firth 2016).

Therefore in order to address this crisis, the following document '*Future in mind*' (DH 2015, p.13) was introduced to target several key areas of mental health care for children and young people these being: "*promoting resilience, prevention and early intervention, developing the workforce, accountability and transparency, improving access to support and care for the most vulnerable*". However following a review being undertaken on the progress and challenges of its implementation, several barriers still exist impacting on the transformation of mental health services (Firth 2016).

Transforming mental health services for CYP:

One of the biggest challenges involves developing the current and future workforce, as 83% of Trusts who responded to the study reported experiencing recruitment difficulties (Firth 2016). Therefore to address this, one recommendation made in this report, suggests Health Education England should work with trusts and local health commissioners to adopt a strategy on supporting training needs for specialist and universal staff, as it is recognised that "*the children and young people's mental health system is much broader than specialist CAMHS services*" (Firth 2016, p.23).

(CYP IAPT) Programmes:

Children and young people's improving access to psychological therapies programmes (CYP IAPT) are designed to change the way mental health services are provided for children and young people. Practitioners undertaking this post graduate programme will gain an understanding of evidence based psychological therapies to treat a range of mental health issues in children and young people such as anxiety, depression and conduct problems. Therefore they will develop skills in cognitive behavioural therapy parent training, systematic family practice or interpersonal psychotherapy for adolescents dependent upon the selected modules chosen.

Mental health in children and young people is a key public health issue which needs addressing, whilst school nurses are not mental health specialists, they are public health specialists, who have a vital role in safeguarding the children, young people and families we work with. This is because school nurses are uniquely placed to recognise, identify, support and manage emotional health issues in children and young people through their public health role, working across all service levels from Universal through to Universal Partnership Plus (DH 2012a). Furthermore they are often the first point of contact for children and young people in a range of settings, thus providing a rationale for integrating children and young people's improving access to psychological therapies (CYP IAPT) principles within the educational training framework we provide for existing

and future practitioners, as we move towards developing a 0-19 service.

By undertaking further development of knowledge and skills within this field, this would support the school nursing role in practice by ensuring early identification and intervention of mental health issues in children, young people and their families as soon as possible. Furthermore this would assist in improving access to support and treatment and will prevent huge numbers of referrals to an already stretched CAMHS system.

Mental Health Locality Leads:

For transformation of mental health services for children and young people to take place, there needs to be comprehensive approach to developing the current and future workforce. This includes introducing specialists to take the lead on mental health in children and young people within localities alongside child sexual exploitation and safeguarding leads. Additionally we should incorporate mental health annual mandatory training alongside child sexual exploitation and safeguarding updates, as all three are inextricably linked. Overall this approach would support information sharing, safeguarding and the identification of ongoing training and development needs at a local level, as well as providing a coordinated response amongst all professionals, as they continue to tackle ongoing and future mental health problems in children and young people within their role.

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