SCHOOLS FORUM

**5**

Date: 9th December 2014

Heading: Better Mental Health in Schools

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| **Forum asked to decide /** | **Decision required:**  To consider funding the development of additional services to support the emotional health of vulnerable pupils attending B&NES schools.  Specifically, that Schools Forum support the request for £200,000 to fund 3 pilot services: A 12 month pilot to create and evaluate ‘Emotional Resilience Hubs’ in all 16 Secondary schools (£41,000), provide school based counselling in Secondary schools (£59,000) and to expand and continue Place2Be primary school counselling for a further 12 months (£100,000). |
| **Time Needed** | **15 minutes** |

1. **Background**
   1. At both a local and national level there is clear evidence of a rise in both emotional distress and mental ill-health within the 0-18/25 population. Nationally this has been evidenced by the Health Select Committee and this paper deals with the local issues facing pupils in our primary and secondary schools.
   2. Specialist CAMHS services in B&NES have been provided by Oxford Health NHS Foundation Trust (OHFT) since 2010. Additional, less specialist, services (PCAMHS) were commissioned from the same Trust in 2011. The funding, and hence the caseloads, for both services have remained fairly static since then. During 2013/14 approximately 550 children and young people were receiving P/CAMHS services at any one time.
   3. A breakdown by referral agency is given below:

GPs 52%

Community Paediatricians 18%

School Nurses/Schools 13%

Social Care 7%

Other 9%

* 1. A range of other provision is available to meet the emotional and behavioural and mental health needs of young people. However, it is increasingly clear that there is a mis-match between the demand arising from schools and settings and the capacity of P/CAMHS. Within this there are a significant number of inappropriate referrals (24%) where the CYP requires support but does not meet the clinical criteria of P/CAMHS or where there is no evidence of any previous support being given by other agencies e.g. school nurse.
  2. Many young people are experiencing emotional and mental health problems which adversely affect their own learning, as well as the learning of their peers. These can be challenging to address within the school setting. This increase in need is placing great strain on the schools’ pastoral systems and upon P/CAMHS (and other) services. Schools are struggling to meet the needs of some students and are asking for support to help ‘contain’ their needs. Nevertheless that does not mean that every such presentation requires a P/CAMHS or Children’s Social Care intervention.

1. **Secondary Schools - Emotional Resilience Hubs**

2.1 In discussion with Secondary School Head Teachers it has been mooted that it may be possible to address some of the above problems through the development of a new approach which bridges the school-based pastoral system and P/CAMHS system.

The proposal aims to achieve the following:

* Improved resilience, emotional wellbeing and mental health for young people of secondary school age
* Promote an increase in suitably qualified and experienced counsellors offering sessions in more secondary schools in Bath and North East Somerset.
* Improve relationships between service providers in communities which are relevant to young people’s emotional resilience.

The proposal is to establish a system of school-based counsellors who are supported by mental health practitioners from the local CAMHS service. (N.B. CAMHS are not able to provide clinical supervision of staff employed by other agencies, nor do they employ ‘counsellors’).

Counsellors would act as an internal ‘Tier 2’ service within the school. The tiered approach is outlined below:

**Tier 4**

* Inpatient beds in Marlborough House, Swindon. Community Family Assessment and Safeguarding Service (FASS)

**Learning Disability**

Intensive Intervention Service

**Tier 3**

Multi-disciplinary integrated team including Learning Disability Professionals.

**Assertive  
Outreach Service**

Crisis and Home Treatment

**Tier 2**

**Oxford Health NHS Foundation Trust**- PCAMHS

**Relate**- Counselling Service

**Cruse**- Bereavement Counselling

Community-based short-term early interventions for children and young people who are experiencing mild to moderate mental health problems

**Single Point of Access for NHS BaNES**

Consultation, training, support and joint working for and with Tier 1 professionals

**Referrers**

GPs, Primary Care Teams, Voluntary Sector, Education, Social Services and other Health Providers

2.2 Some schools already commission or employ school counsellors. Where possible, it is recommended that schools commission an external provider to deliver the counselling. A suitably qualified and experienced local provider is likely to offer reassurance to a school’s governing body that the counsellor is properly trained, supported, clinically supervised, insured and working within agreed policy frameworks and standards. From the perspective of students, an external provider is also more able to offer continuity of the counselling relationship beyond term time and the “school gate”. It can also be a way to offer students who do not want to access in-school provision the alternative of seeking a counselling service in their local community. See Appendix 1 for checklist of considerations. Locally, Off the Record, Relate and Place-to-Be are already commissioned to provide counselling services.

Where secondary schools do decide to employ their own counsellor, governing bodies should be made aware of their direct responsibilities for the clinical governance of the provision. Governors will need to ensure the counsellor is suitably qualified and clinically supervised by a qualified practitioner. This will include holding a contract between the school and the person or organisation providing the counsellor’s clinical supervision and checking that both super-visor and counsellor are covered by suitable professional indemnity insurance. Schools should also consider the capacity of a lone counsellor to build effective links with specialist P/CAMHS and other local services. These relationships can be crucial to the overall effectiveness of the service to individual students. In the case of long term absence by a single employee, schools also need to consider how they will maintain service continuity during the period. (A contracted service provider should have a contractual obligation to provide such cover). Governors should be aware of the need to have a confidentiality statement for the use of students and parents. The British Association for Counselling & Psychotherapy (BACP) provide further information for schools.

Most counselling services build effective relationships with local specialist CAMHS and other services relevant to young people’s needs, which can help when appropriate, with effective consultation, signposting and referral.

* 1. CAMHS practitioners, from Oxford Health NHS Foundation Trust will support each secondary school on a monthly basis by offering a package of consultation, training and telephone support. It is envisaged that each school create a pastoral ‘hub’ comprising of the school based counsellors, pastoral leads and the school nurse who will be supported by the CAMHS proposed package. In addition, where appropriate the CAMHS practitioner may be able to offer joint training and perspective from a young adult (previous CAMHS user).

2.4 This model is built on an informal model that has been provided to Chew Valley School during their experience throughout a crisis period: feedback on this arrangement has been very positive and although initially based on a needs led initiative - following a number of pupils’ sudden deaths - this package of support has been a unique model of care helping teachers, pastoral support staff, school nurses and pupils.

The model is designed to provide a range of support that ensures some sustainability by the school staff to continue supporting pupils at more 'normal' times and comprises of

* Regular consultation provided on a monthly basis to the key ‘hub’ staff.
* Providing training sessions to the wider school team about emotional resilience, key signs and symptoms of distress and and managing behaviour problems and developing personal coping strategies.
* Ad hoc consultation by phone to discuss problem behaviour.
* Joint training and awareness raising sessions to pupils by CAMHS staff and young CAMHS service users.
* Occasional direct work with pupils.

During the implementation of this ‘enhanced’ service at Chew Valley, some young people requiring more specialist support from CAMHS have been identified earlier in the pathway but generally these are either referred informally to the appropriate service or signposted to counselling. If counselling is provided 'in house' this would be a seamless pathway.

1. **Primary Schools – Place2Be counselling**

A number of initiatives are being developed to support primary pupils maintain good emotional support, e.g The Pilot Nurture Outreach Service. These are targeted particularly at children displaying disruptive behaviour in school after transition from early years settings but also includes some children who have been identified later in their schooling where a nurture approach is likely to have the best outcomes and staff need support with strategies. Nevertheless for some schools with higher levels of social disadvantage such interventions are not ‘long-term’ enough to create the transformation needed and do not specifically support the transition from primary to secondary school.

2.2 Targeted primary schools have been ‘pump-primed’ to receive counselling services from Place2Be (via a commissioning process). Place2Be is a nationally recognised leader of school based emotional and mental health services, operating in 200 schools, mostly in areas of high deprivation and disadvantage. The service offers support to pupil, staff and parents to better manage the emotional difficulties faced by children living in distress and emotional turmoil. The Council has provided some pump priming this financial year (14/15) but the commitment is proving too expensive for the identified schools to trial this way of working with young children and they need support to contribute the full funding necessary to establish this innovative service.

2.3 The identified schools are:

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| **Schools already signed up to Place2Be pilot** *(capacity for 6 schools in pilot 2014-15 academic yr on current funding with start-up from LA)* |
| * St Keyna Primary, Keynsham * St Nicholas schools, Radstock * Moorlands Federation, Bath * Southdown Infants and Juniors, Bath |
| **Schools Pending** *(Issues of budget and/or other individual arrangement in place)* |
| * Twerton Infant school, Bath * St Martins Garden Primary, Bath * St Michaels Junior school, Bath * St Philips Primary, Bath * St Andrews CofE Primary, Bath * Westfield Primary, Radstock * Castle Primary School, Keynsham |

Place2Be are setting up in the 4 schools who have signed up to the pilot and counselling’s services will be established in these schools by February 2015.

**4 Finance**

4.1 CAMHS Support:

A baseline package per school could be calculated as follows

* + Monthly supervision to the school hub x 3 hours per month (inc travel time) x 16 secondary/special schools = 48 hours/per month, over a year = 576 hours
  + 4 training sessions per year per school (full day or 8 half days) 7.5 x 4 x 16 = 448 hours per year
  + Plus Ad hoc consultation

Based on the above, a whole time post would be sufficient to provide the required amount of time to support the described functions to all 16 secondary schools.

Cost for full time (Band 6) mental health practitioner = £41,000

4.2 Counselling Costs:

It is difficult to estimate the need for counselling as there are no figures available for schools in B&NES and this would vary according the number of pupils taking up any offer of counselling. If schools were able to contract to one or two providers there could be an increase in flexibility between schools according to demand whilst also minimizing the governance structures required to ensure consistency and safe working practices.

Currently OHFT ‘subcontract’ with Relate to provide counselling sessions. These are provided at £15 per hour, but this is based on 2010 prices. Another voluntary sector counselling provider, Off the Record, estimates costs - including supervision and on-costs - to be nearer £40 per hour.

Off the Record also currently run “Listening Support” sessions - a 20 minute ‘first step’ intervention/preventative service – in six secondary schools. They have found that 97% of the young people who have attended have not needed to move into formal counselling. These sessions are provided for £3500 per year and provide 2 hours per week (giving six appointments). Such a service may be able signpost to the counsellor when appropriate rather than sending every young person straight to counselling. Both listening support sessions and counselling sessions are initially offered for six sessions.

It is proposed that each school receives £3687 to fund voluntary sector counsellors. For 16 schools this totals £59,000. With the £41,000 required for P/CAMHS support, the total cost of the secondary school one-year pilot would be £100,000. The level of funding/counselling could obviously be scaled up or down but this initial level could provide the basis for evaluating the level of need/benefit achieved. (Please note that Off the Record have also applied for national grant funding to provide this counselling service in secondary schools and are currently awaiting the results of their application).

4.3 Place2Be counselling Costs:

The eleven schools wishing to receive support from Place2Be would need **£100,000** to continue, or start, the pilot service.

It is proposed that the all three support service pilots are funded from the DSG ‘carry forward’.

1. **Timescale**

**Secondary**

4.1 The secondary pilot would run from 1st April 2015 until 31st March 2016. During January 2015, secondary schools in B&NES will be invited to develop the resilience hubs. Most schools are keen to increase the skills of their staff to support pupils in emotional distress.

4.2 From January to March 2015, protocols and pathways will be developed using a consistent format with school counsellors, school nurses and pastoral staff. Through established participation and engagement groups in both B&NES Council and Oxford Health, young people will be invited to contribute to the development of the multi-agency model to help shape, inform and advise on how to ensure it optimally meets the needs of young people in schools. By the end of March, a detailed plan will be in place to commence delivery of the service across the 16 schools for year one (April 2015 – March 2016).

4.3 The model will go live in some schools during April 2015 and will aim to ensure each school receives on average 2 days targeted CAMHS support per month which will include training, consultation, awareness raising and direct support. This will be dovetailed to school timetables and individual school needs.

4.4 Progress will be evaluated in Q3 of 2015/16 to determine future need and to consider recurrent funding. A evaluation of the pilot will begin from the start date and conclude by 20th December 2015 with a report to BASCL/Schools Forum by January 2016.

Subject to a positive evaluation it will be for Schools and/or Schools Forum to decide whether to fund the service on an ongoing basis and whether schools could choose to opt ‘in’ or ‘out’.

**Primary**

4.5 Place2Be are setting up in the 4 schools who have signed up to the pilot and counselling’s services will be established in these schools by February 2015.  With the proposed added subsidy to schools, we envisage all schools identified as having high need coming into the project throughout the financial year. This will ensure reach to the children with highest needs before they arrive at secondary school.

1. **Conclusions**

There is an increased demand for emotional support for pupils at B&NES schools.

Counselling is an activity voluntarily entered into by a child or young person who wants to explore, understand and overcome issues in their lives which may be causing them difficulty, distress, and/or confusion. The aims of counselling are to assist the child or young person to achieve a greater understanding of themselves and their relationship to their world, to create a greater awareness and utilisation of their personal resources, to build their resilience, and to support their ability to address problems and pursue personally meaningful goals.

This paper outlines 3 related services:

* CAMHS specialist support for schools - £41,000
* Secondary school counsellors - £59,000
* Primary school counsellors (targeted schools) - £100,000

1. **Recommendations**

That Schools Forum support the request for £200,000 to fund all 3 services: A 12 month pilot to create and evaluate ‘Emotional Resilience Hubs’ in all 16 Secondary schools (£41,000), provide school based counselling in Secondary schools (£59,000) and to expand and continue Place2Be primary school counselling for a further 12 months (£100,000).

1. **Appendices**

A Checklist for commissioning a counselling service

B Evaluation criteria (drawn up between schools/LA/CAMHS/CCG)

Appendix A

Thinking about commissioning a counselling service for young people?

Quick Checklist

Does the service have:

Policies on child protection and confidentiality?

Qualified and accredited counselling staff, with specific training to work with young people?

An established cycle of regular clinical supervision for counselling staff?

A policy on the line management of counselling staff?

A process for assessing young people’s needs and risks?

A process for measuring the outcomes of its work with young people?

A system for monitoring and analysing service take up, including data on demographic and presenting issues?

Opportunities for young people to comment and offer feedback on their ex-perience of the service?

Opportunities to be involved in other aspects of the service planning and delivery?

Appendix B

Evaluation Criteria (Drawn up between Schools/LA/CAMHS/CCG)