

# Making a difference Emerging Practice

## Connexions and Mental Health Services

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every young person

## Preface

The Humber region is hosting an innovative pilot project looking at the support of young people with mental health problems. Connexions Humber are one of the key partners. This project demonstrates how Connexions can engage with other partners in support of some of the most vulnerable young people. It also demonstrates how Connexions is helping to bring about a culture shift in the way different agencies work, coming together to support young people.

Mental health services are undergoing a period of change, and the future direction of their work will be underpinned by a more integrated approach to delivering support. Such change, alongside the development of Connexions, provides the opportunity for all services working with young people with mental health problems to establish strong links and mutually beneficial working relationships. The outcome, of course, will be the best support possible for these most vulnerable young people.

The following account of the Humber project is not a prescriptive blueprint for all to adopt. It is just one example of ongoing work aimed at improving the provision of support to young people with mental health problems. Other Connexions Partnerships are developing links with local mental health services. Parallels can be drawn with the 23 Child and Adolescent Mental Health Services (CAMHS) Innovation projects, sited in a variety of settings around the country. These aim to bring together local agencies to provide mental health care for children and young people who otherwise have difficulty accessing services. Some of these focus on early intervention, others

on working with young people who have established difficulties. However, the project in the Humber does contain many useful ideas for taking forward multi-agency work between Connexions Partnerships, mental health services and young people themselves. Connexions Partnerships are encouraged to consider these ideas when developing models that meet the needs of young people in their area. At the end of the report there are some other sources of information on mental health and young people.

**Many thanks to all those involved with the project in the Humber for all their work. They include Kate Macdonald (Project Team Manager), Martin Patrick (Connexions) and Patrick O'Connor and Michelle Robinson (Inter Agency Link Team) as well as the participating schools and colleges.**

**Thanks also, for their support and help with this publication, to the Department of Health, Young Minds, Connexions Greater Merseyside and Connexions West of England.**

**Anne Weinstock  
Chief Executive, Connexions**

## Mental Health and Young People

This section is based on extracts from the published work of Young Minds, the national charity committed to improving the mental health of young people. Much of it is taken from the publication 'Behind the Behaviour/Behind the Symptoms'\* , published by Mental Health Media. Although that particular publication focussed on 4-11 year olds, the following can be applied to young people with whom Connexions will be working.

Adolescence is perhaps one of the most complex and stretching stages of life both for the adolescent and those that surround them. During this period young people develop their ideas about how to make decisions on the way they live, their priorities, beliefs, and about what is right and wrong. In doing this they draw on, and are powerfully influenced by, the beliefs and behaviours of their families and community. In forming these ideas, young people necessarily go through periods of questioning the beliefs of their carers, trying out different ideas and often adopt values that are not acceptable to some adults. The development of a moral code is closely linked to the negotiation of peer relationships, finding like-minded friends, joining a group and deciding how and where to fit in. It is a major challenge for all young people - particularly so for those with low self-esteem, poor social skills and communication difficulties.

**For some this is an exciting time, but for others the confusion and dilemmas are overwhelming. Hence the importance of children's mental health.**

Children's mental health is the strength and capacity of children's minds to grow and develop with confidence and enjoyment. It consists of the capacity to learn from experience and to overcome difficulty and adversity. Children who are mentally healthy are not saints or models of perfection, but ordinary children making the most of their abilities and opportunities.

Professionals in child and adolescent services look at risk factors which increase the probability of a young person developing a mental health problem. Examples of risk factors include bereavement, parental separation, hospitalisation, and loss of friendships. An important key to promoting young people's mental health is an understanding of the protective factors that enable the young person to be resilient. The DfES publication '*Promoting Children's Mental Health within Early Years and School Settings*' (see Annex 1) gives more details on risk factors and resilience factors.

There are differences between what are called mental health problems, mental health disorders and mental illness. These terms refer to differing degrees of disturbance along a continuum of mental health.

\*Copies can be downloaded at [www.mhmedia.com/products](http://www.mhmedia.com/products)

### Mental Health Problem

The term 'mental health problem' refers to a broad range of emotional and behavioural difficulties. They vary in how much they cause children distress and how much they interfere with everyday living. Many of these problems pass with time. However, some require additional help over and above what can ordinarily be provided by their carers, relatives and friends, through a GP, a teacher, a social worker and others. Studies suggest that, at any one time, between 15 and 20% of the young people in the United Kingdom have significant problems of this kind (*Target and Fonagy 1996*). Mental health problems can occur in children and young people of all ages, from the behavioural problems of toddler years to the difficulties of adolescence. There is a strong association between the presence of children's mental health problems and low family income.

### Mental Disorder

Children and young people whose problems are more severe, extreme or distressing to the extent that they cause serious interference with their everyday life, and which persists over weeks and months, can be described as having a mental disorder. The Office of National Statistics carried out a survey in 1999 which found that around 10% of children in England, Scotland and Wales had some kind of mental disorder.

### Mental Illness

Within this group of children and young people suffering from mental disorders, there is a small group - approximately 1-2% - whose mental disturbance is so severe as to cause even greater distress and confusion for both themselves and those who care for them; this level of disturbance substantially interferes with their daily lives, their development and their relationships with those around them. The term 'mental illness' is more appropriately used with these children and young people, many of whom have a very precarious hold on reality. Psychotic disorders, serious depressive illness and anorexia nervosa are examples of mental illness.

**These terms - MENTAL HEALTH, MENTAL DISORDER AND MENTAL ILLNESS - are drawn from the language of health professionals. Within educational settings the same young people will be described as having emotional and behavioural problems. These are often describing the same children although focusing on the way they come to our attention in different settings. Understanding each other's language is particularly important when professionals from different agencies are discussing who needs to take responsibility for trying to deal with a child in difficulties. Troubled children may need support from more than one source.**

Our capacity as professionals from different agencies to work successfully together is a key factor in enabling troubled children to be supported, helped and in some cases, treated.

## About the Project

### Project Partners

- Connexions Humber
- University of Hull (Dept. of Psychiatry)
- Hull and East Riding Community NHS Trust; including Child and Adolescent Mental Health Service (CAMHS) - Inter-Agency Link Team and Adult Mental Health Services - Early Intervention in Psychosis Service Development (EIS)
- Hull and East Yorkshire Mind.

### Context

Beginning in Autumn 2001, the project developed out of a mutual desire in partner agencies to improve access to mental health services, and to create strong links between organisations within the city of Hull in the pursuit of this goal. It provides Connexions with a route into specialist mental health services; and health agencies (CAMHS and Adult Services) an opportunity through Connexions to work in partnership to engage fully with education and the wider community.

The project is taking place against the backdrop of national developments in how mental health services are delivered. The **National Service Framework for Mental Health** (*Department of Health, 1999*) sets out a vision for better, improved mental health services separated into seven standards which span the full range of mental health care. Whilst focusing on services for working age adults, the framework does impact also on the work of CAMHS, through promoting the development of **early intervention services for psychosis**. This will provide particular opportunities for co-operative planning and provision to take place between CAMHS, adult mental health services and primary care, and within mental health promotion.

Standards 1-3 are of particular relevance to this project;

- **Standard 1** requires that services should promote mental health for all, working with individuals and communities to cease discrimination against people with mental health problems.
- **Standards 2 and 3** require services to provide clear pathways from primary to secondary care and to provide services which are accessible around the clock.

**The NHS Plan: A plan for investment, a plan for reform,** (*Department of Health, 2000*) demonstrates a commitment to working towards the vision of services set out in the National Service Framework for Mental Health. It states 'fifty early intervention teams will be established over the next three years to provide treatment and active support in the community to young people and their families. By 2004 all young people who experience a first episode of psychosis, such as schizophrenia, will receive the early and intensive support they need. This will benefit 7,500 young people each year.'

The Humber project aims to address:

- Standards 1-3 of the National Service Framework
- working towards having a seamless service available for young people (across the transition between CAMHS and Adult Mental Health Services)
- effective integration of child, adolescent and adult mental health services working in partnership with primary care, education, social services, youth and other services.

**National developments, and their impact on mental health services for young people as well as adults, provide Connexions Partnerships with the opportunity to engage with local mental health services and explore joint working.**

## Project Aims

- To create a model for dealing with mental health issues within Connexions and secondary schools.
- To create clearer and more efficient pathways into appropriate care to enable rapid assessment and early intervention or referral to an appropriate agency.
- To equip staff (Connexions personal advisers and teachers/support staff) with the knowledge and skills to support people with mental health problems in school.

The project focuses on two secondary schools and a sixth form College in North Hull, an area which incorporates both the University of Hull and Orchard Park, an estate which has particular problems of social deprivation. The project team includes a Research Psychologist (Project

Manager), and a Nurse Practitioner seconded from the CAMHS **Inter-Agency Link Team\***. It also involves staff from Hull and East Yorkshire Mind, and educational psychologists attached to the participating schools.

## Accessing Mental Health Services: Key Issues

It can be extremely difficult to access mental health services whether you are a family member concerned for your relative or a school/college concerned about a pupil/student. It is often only when problems become acute that a referral is made. In discussions with the schools and colleges involved in the project, it was clear that there were particular issues that needed addressing;

- whilst staff had an intuitive feeling that a young person had mental health difficulties, they lacked the specialist knowledge needed to be sure;
- staff were not familiar with the appropriate 'language' to report concerns to mental health agencies;
- often the only mechanism to make a referral was through a GP. As a result, cases reaching mental health services tended to be at an acute stage (i.e. had been on-going for some time);
- after a referral, feedback from mental health services to others was often sporadic with no clear protocol about who receives the information. Consequently, staff were left feeling ill-equipped as to how to support the young person concerned.

***It is likely many of these issues will translate to other areas, as well as the Humber region.***

**\*The Inter-Agency Link Team** consists of professionals from Health, Education and Social Services. This includes Health Visitors, RMN/RMNH Nursing, Educational Psychology, Clinical Psychology, Senior Clinical Medical Officers, Family Resource Workers (Social Services) and Social Workers. The Team is a central referral point for all young people with emotional, behavioural and mental health difficulties. The Team provides a clear framework for consultation and support for professionals across agencies and assesses the needs of young people. Duplication of work is avoided and the Team assists agencies to co-ordinate their efforts when working with young people. There is a prompt response to families referred (within 20 working days), which facilitates access to a range of services for young people, including appropriate referrals to specialist services. The team has been awarded the Department of Health and Social Care Award for Children's Services (Modernisation and Innovation in Primary Care Practice).

## Steps Towards an Improved Service

### 1 - Exploration and Planning

Early consultations were held with key individuals and agencies to identify needs in terms of how to 'present' the problems of young people, training needs of staff, and how to pull together appropriate referral and consultation procedures. Professionals consulted include Connexions Personal Advisers (PAs), School Heads of Years, Educational Psychologists, School Nurses, Educational Welfare Officers and Classroom Support Assistants and Learning Mentors.

**This established ownership within the project which was vital to its success.**

### 2 - Community Resources (service mapping)

The Project Team mapped local service provision. This proved invaluable in relation to supporting young people who were not attending or uninterested in school. Community projects of interest to these young people were identified, providing them with a stepping stone back into education or training.

### 3 - Training

This aspect of the project has 3 main strands;

- Identifying additional training needs of Connexions personnel and teachers/support staff in participating schools.
- Developing and delivering a training package to address these needs.
- Developing support networks to ensure both implementation and continuous updating.

Training needs have been identified through interviews and focus groups with staff in schools - Heads of Year, Special Educational Needs Co-ordinators (SENCOs), Learning Mentors and other professional groups. The main need identified was to create a greater understanding of common mental

health difficulties in adolescence to enable staff to have a better idea of when to refer. **The project is not an attempt to create mental health practitioners, but it does aim to give staff the language to communicate effectively with mental health staff and a greater ability to 'deal' with problems in their work setting.** The training package is being developed as the project proceeds but validated packages (such as those developed by Young Minds) used successfully elsewhere are also being utilised. Partnership work is ongoing with other agencies such as Mental Health Promotion (Mind Out Campaign), and the National Youth Agency, whose 'getting connected' programme (see Annex 1) aims to raise the self-esteem and emotional literacy of hard to reach young people.

Schools staff and Connexions PAs have had training sessions introducing mental health on a continuum, touching on common adolescent mental health problems and offering staff a further opportunity to discuss issues within their organisations. These training sessions have been undertaken in collaboration with Hull and East Riding Mind.

### 4 - Establishment of Referral Procedures for Mental Health Assessments

Following an analysis of existing referral procedures, project staff liaised with agencies/individuals (e.g. Educational Psychologists) involved in these existing procedures. The aim was to establish where there were difficulties, in order to develop solutions to enable fast referral to appropriate agencies. This work is also helping the project develop a referral framework.

### a) Work in Schools

Currently the project is piloting using the In School Resource Team (ISRT) as the focal point of all discussions and a way of getting all party agreement on how to proceed with each individual case. Membership of the ISRT includes the Educational Psychologist and Educational Welfare Officer in participating schools. The mental health practitioner now attends the ISRT meeting, and in partnership with the Educational Psychologist has a consultancy role which can lead to:-

- advice without referral;
- referral to appropriate agency; and
- specialist mental health assessment via the Inter-Agency Link Team.

The Inter-Agency Link Team can either co-work with primary care (e.g. School Nurse), or make a referral to an appropriate agency, or referral to a specialist within CAMHS. For consultation purposes, telephone support from the Inter-Agency Link Team is also available.

Referrals are made via a consultation-liaison model. This places great emphasis on developing close links within a practice between the primary care team (GPs, school, Connexions) and the consultee with a view to:

- Reduce rather than increase referrals of milder disorders
- Selectively encourage and facilitate referrals of more serious mental health problems
- Enhance the skills of the primary care team to enable effective management of more common and less severe mental health problems in primary care (within the educational setting).

### b) Work in Colleges

Most college referrals come through the college counsellor, but with no clear protocols in place to enable easy referral to mental health services. The picture is further complicated by transitional issues and questions over which service is accessed, CAMHS or Adult services. This issue in particular can lead to young people falling through the net, and Mental Health services are now developing protocols to address this. The project has

set up a Hull and East Yorkshire Post-16 Mental Health Forum with representation from all further education colleges, the university, Connexions, CAMHS (Head of Service) and Adult Mental Health Services (Head of Service). It aims to identify in more detail difficulties in presenting young people's mental health issues. It is envisaged that this Forum will meet regularly and work along similar lines to the ISRT within schools.

### c) Connexions Personal Advisers

For under sixteens, referral is via ISRT meetings. Post sixteen, referral is via the PAs line manager to the Inter-Agency Link Team. Telephone support is also available.

## 5 - Inter-agency Liaison

At the heart of the project is cross-agency communication and feedback. Discussions have been held with all agencies with a role in the mental health field in order to gain an understanding of the obstacles which existed to effective communication, and to set up procedures/protocols to overcome these obstacles. The project aims to establish a 'feedback' loop to enable all agencies to be kept informed of action taken on each individual intervention. In Hull, a city wide information sharing protocol has been developed, and this project has been identified as an ideal opportunity to test it out. Connexions PAs will be an important component of this - through the holistic nature of their role - both by being a 'communication centre' and by being close to the young person, supporting them as they return to school, attend college or take up training.

## 6 - Destigmatisation Campaign

Another component of this project is to deliver an educational/destigmatisation campaign on mental health issues in schools and colleges with an objective of normalising mental health issues, and encouraging students to seek help for themselves or their friends earlier. To achieve this, work is ongoing with the Community NHS Trust's Mental Health Promotion Department (tapping into the National Healthy Schools Standard and Mind Out Campaign) and Hull and East Yorkshire Mind.



## Lessons for Connexions Partnerships

- Make developments sustainable by embedding Connexions PAs within existing systems. The Humber project identified a role for two PAs specialising in mental health - to work effectively they have to be embedded within existing systems.
- Link PAs into statutory and voluntary agencies at a primary care level. This will promote early identification and intervention for young people experiencing psychological difficulties.
- Work directly with young people and their carers and in schools and colleges offering advice and support.
- Make PAs part of the Inter-Agency Link Teams, attending referral meetings weekly.
- Enable the PAs to receive supervision (from the Inter-Agency Link Team) and ongoing training.
- Use PAs to address issues of stigmatisation and enable easier engagement with young people and their families. Because the PAs are external to (although embedded within) mental health agencies, consent should be easier to achieve.
- Links need to be made with services for adults, not just with CAMHS, whose involvement with a young person can often end at age 16.
- Know who to talk to within mental health services. The development of **Early Intervention Services\*** is an opportunity to do this. Find out who is the project manager and approach them. Try and become a member of one of their advisory groups. Find out if there is a Health Promotion Department in your Community Trust and contact

the Head of CAMHS and adult mental health services. Other possible contacts are the Lead Commissioner on Mental Health in the Primary Care Trust, or the Head of the Local Implementation Team, National Service Framework.

## Further Information

This is an action research project. Developments are being tested and refined through proper evaluation and consultation. Connexions Partnerships and mental health services will be provided with any further information that becomes available, to enable them to learn all the lessons from the Humber experience. If you want to know more about this project and how it is progressing, or are interested in doing something similar, please contact:

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**\*Early Intervention in East Yorkshire** This project was set up in 1998 and is based on many of the notions of traditional Psychosocial models (e.g. family management and problem solving strategies). The significant difference lies in the emphasis placed on context and the belief that a young person's vulnerability to stress is amenable to change. By working in a 'development', rather than a 'life-long illness' frame, clients and their families are engaged in a more optimistic process. This frame emphasizes the need for families to make goal directed demands on their offspring and have some expectation that their son/daughter will take increasing responsibility for their own lives. At the same time parents are encouraged to address their own life-stage issues. Key components for the success of this service include good communication between units (acute and community) and professional groups which ensures swift initial contact (within 10 working days) plus continuity of long-term care.

## ANNEX 1

### Other Sources of Help

There are a number of information sources around young people and mental health. Some of these are listed below - many of the websites will have pages of advice, access to publications and links to further information.

*The DfES is not responsible for the contents or reliability of the linked websites and does not necessarily endorse the views expressed within them. Listing shall not be taken as endorsement of any kind.*

**The Connexions** website has, available to download, two PA training documents that may be useful;  
Reference Guide at;  
<http://www.connexions.gov.uk/documents/ucxsrefg.pdf>  
Accessing Specialist Resources Reader at;  
<http://www.connexions.gov.uk/documents/Accessing-Spec-Resources.pdf>

#### **DfES publication:**

Promoting Children's Mental Health within Early Years and School Settings can be browsed online and downloaded at: <http://www.dfes.gov.uk/mentalhealth/>

This document is also available to order from DfES Publications, PO Box 5050 Sherwood Park Annesley Nottingham NG15 0DJ; tel 0845 6022260; fax 0845 6055560; email [dfes@prolog.uk.com](mailto:dfes@prolog.uk.com) ref: 0112/2001

#### **Department of Health:** <http://www.doh.gov.uk/>

Details and copies of publications about the National Service Framework and the NHS Plan can be found here. Specific useful links include:

<http://www.doh.gov.uk/nsf/children.htm>  
<http://www.doh.gov.uk/nhsplan/nhsplan.htm>

and the circular **Child and Adolescence Mental Health Service (CAMHS) grant guidance 2003/04** can be found at <http://www.doh.gov.uk/publications>

#### **Early Intervention Services:** <http://www.iris-initiative.org.uk/>

This website provides information on psychosis and services.

**National Health School Standard:** <http://www.wiredforhealth.gov.uk/healthy/healsch.html>

#### **Assessment Toolkit:** [www.getting-on.co.uk/toolkit](http://www.getting-on.co.uk/toolkit)

The website of the Humberside Partnership has information on an assessment toolkit designed to support Personal Advisers and others involved in Connexions.

#### **National Youth Agency:** [www.nya.org.uk](http://www.nya.org.uk)

Professional site which gives links to child and young people's information sites. Also [www.gettingconnected.org.uk](http://www.gettingconnected.org.uk), a programme providing a curriculum framework which supports the re-engagement of disaffected young adults into learning and work.

## Mental Health Promotion

**Mind Out** <http://www.mindout.org.uk/>

Mind out for mental health is an awareness and action campaign, working to bring about positive shifts in attitudes and behaviour surrounding mental health.

**Mentality** <http://www.mentality.org.uk/>

Mentality is a national charity dedicated solely to the promotion of mental health. It works with the public and private sector, user and survivor groups and voluntary agencies to promote the mental health of individuals, families, organisations and communities.

**Young Minds** <http://www.youngminds.org.uk/>

YoungMinds is the national charity committed to improving the mental health of all children and young people. Its website has useful information for young people, professional and parents and includes details of the CAMHS Innovation Projects.

**The Mental Health Foundation** <http://www.mentalhealth.org.uk/>

The Mental Health Foundation is the leading UK charity working in mental health and learning disabilities.

**Mental Health Media** [www.mhmedia.com](http://www.mhmedia.com)

Mental Health Media promote the voice of mental health service users through video and multimedia production.

**Rethink** [www.rethink.org](http://www.rethink.org)

Rethink is the new operating name for the National Schizophrenia Fellowship. This website includes '@ease' - the website resource for young people on mental health issues.

**Mind** [www.mind.org.uk](http://www.mind.org.uk)

Website of one of the leading mental health charities in England and Wales.

**The Royal College of Psychiatrists** <http://www.rcpsych.ac.uk/info/mhgu/>

See the section of the website entitled Mental Health and Growing Up using the above website address.

**The Samaritans** [www.samaritans.org](http://www.samaritans.org)

This site contains access to information and publications about emotional support.

**Trust for the Study of Adolescence** [www.tsa.uk.com](http://www.tsa.uk.com)

TSA was founded in 1989 to help improve the lives of young people and families. Their work aims to improve understanding about adolescence and young adulthood.

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