

Let's talk...

A common language and understanding of emotional wellbeing and mental health

A joined-up approach between services to support the emotional wellbeing and mental health of children and young people

Autumn 2023 - second edition



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What is mental health?

Everyone has mental health. Just like physical health, sometimes our mental health is good and sometimes it is not so good. Discussing mental health should be a positive experience and, if done well, can reduce the stigma associated with mental health difficulties. To enable these discussions to happen in a kind and compassionate way, we need a shared understanding of emotional wellbeing and mental health; a **common language** to ensure we are understood and can plan for appropriate support.

All Essex provisions strive work in traumainformed ways. In schools, we call this Trauma Perceptive Practice: the Essex approach to understanding behaviour and supporting emotional wellbeing. The approach builds on the values of Compassion, Kindness, Hope, Connection and Belonging. If we can achieve these for our children and young people, we believe that we can reduce the impact of stress in their lives and work towards building resilience for the future.



The World Health Organisation says:

"Mental health is defined as a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."

Emotional wellbeing and mental health mean different things to different people. Often, when we think about mental health we are actually thinking of mental ill-health, yet CYP are labelled as having 'mental health'. We all have mental health and we must look after it. The lack of a shared understanding is often a barrier to finding effective interventions at the right time and in the right place. We may need different levels of support at different times in our lives to ensure we have the resilience to bounce back when we need it.



Working together in Essex

The Essex Emotional Wellbeing & Mental Health Strategic Board

Members of the board are representatives from a range of service across Essex, all of which provide support for local children, families and schools.

Recommendations for working together

To improve provision for emotional wellbeing and mental health:

 We need to be able to have conversations about teenage suicide (and emotional health issues).
 These need to take place within families, with friends and peer groups. It is still a taboo subject.
 We need to consider how best to facilitate such conversations. We need to consider how we can help families and professionals listen to and respond to vulnerable young people. There needs to be guidance for young people themselves, for parents and professionals.
 Schools have a critical role to play, but it is not exclusively down to schools. It is also the responsibility of agencies and professionals who have working relationships with vulnerable young people.

Joint Ofsted & CQC Inspection

In 2019 Essex SEND Services and Integrated Care Boards (IBCs) were subject to a joint inspection. Observations and recommendations for improving the offer for emotional wellbeing and mental health:

 Improvements required in the local areas practice in identifying the needs of children and young people. Also in the way that partners work together to plan services and in the quality of education, health and care (EHC) plans.

- The number of children and young people identified with moderate learning difficulties is high. Local authority leaders suspect that the over-identification may be linked to weak teaching. It may also be linked to underidentification of speech, language and communication needs, and social, emotional and mental health needs.
- 3. Joint commissioning needs to ensure that processes for planning and implementing EHC plans are effective. This applies for CYP aged 0 to 25 years with SEND. More advice from the right professionals in health and social care services will increase the effectiveness of plans.

Following reinspection in 2022, both Ofsted and CQC judged that Essex services have made sufficient progress in all three of these areas. But there is still more that can be improved in our joint working.

Our Ofsted Local Area SEND Inspection: https://reports.ofsted.gov.uk/provider/44/80468

Sharing a common language

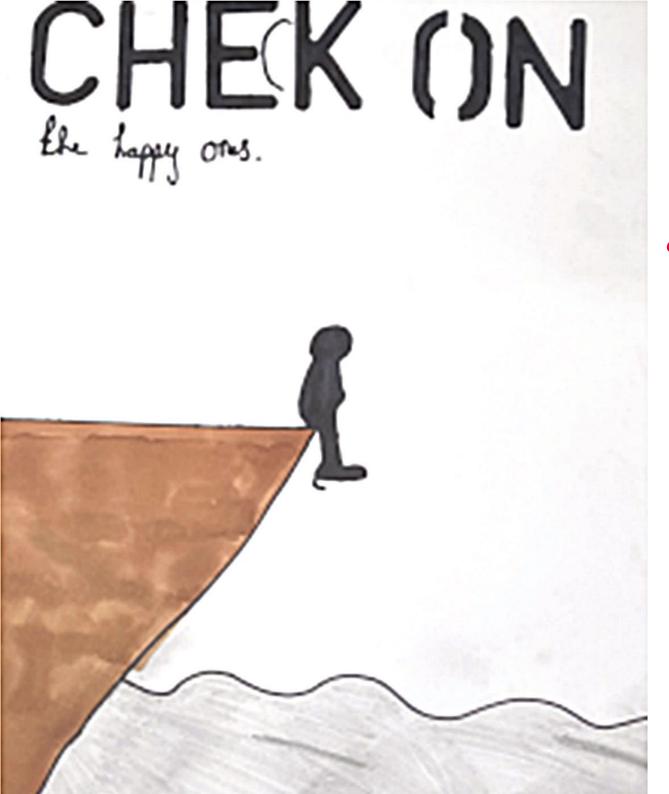
Unfortunately, children, families and professionals report experiencing or hearing a range of derogatory and unhelpful terms or phrases. These are experienced as judgemental and maintain the stigma around mental health. This has got to change so that children can have the best experiences they can in getting their needs met. It is vital that this begins with an evolution of language and understanding.

This change will take time. We need to develop a culture that promotes positive language and communication skills:

- 1. This starts with everyone reflecting on their own use of language.
- 2. Next, we encourage them to challenge unhelpful language or communication styles used by others.
- 3. Whilst a change in vocabulary is key, we must also consider the impact of tone and non-verbal communication.

We may not get this 'right' every time, but creating space for healthy conversations will enable us to evolve together.

angry Fear love Happy Sad W PSet calm



"I feel very passionate about art and mental health for young and old children who feel like they can't reach out or speak up. This is why on my poster I chose to draw a small 'c' to represent those who may not have the courage to."

Examples of language change

It is important to acknowledge that we all have habits in the language we use. These are formed over our lifetime can take time to change. This can be easier for written words than spoken words. With this in mind, it is important that we challenge unhelpful language in a kind and compassionate way and avoid criticising each other. Remember, we are all entitled to learn and grow at our own pace.

Please use the examples in the following table to promote the use of more helpful language in discussions, written documents, assessments and support plans.





| Unhelpful Language 'You might say or hear' | Preferred Helpful Language 'Use this instead' | Explanation |
|---|--|---|
| Naughty / Poor or Challenging Behaviour / Behavioural | Communicating behaviour Unexpected behaviour | All behaviour is communication. We must act as 'stress detectives' to explore what a CYP is telling us through their communicating behaviours. |
| Kicking off / Melting down | Stressed Distressed Dysregulated Difficulties in self-regulating Outside their Window of Tolerance | By understanding that a person is stressed, we are more likely to support rather than punish. They will experience safety and hope rather than blame and shame. |
| Attention Seeking / Exhausting / A pain | Connection-needing | The young person is showing us they would like help or support, or telling us that they need to feel a sense of belonging. We should support them to feel connected and valued. |
| Controlling / Manipulative | Lacking control over their safety needs | We need to build reliable and consistent relationships so that the young person believes that adults can be trusted to meet their needs. |
| Emotional / Over-sensitive / Dramatic / Over-exaggerate | Overwhelmed | Some emotions can feel intense and overwhelming, and this is completely normal. |
| Risky / Feral | Exploring safety and boundaries Vulnerable | These behaviours require a compassionate description of their actions to better understand their needs and how to meet them. |
| Refuse / Rude / Daydreamer | Feeling threatened or unsafe | We need to build reliable and consistent relationships so that the young person believes that adults can be trusted to meet their needs. |
| Aggressive / Violent / Delinquent | Compromising the safety to themselves and others | These behaviours require a compassionate description of their actions to better understand their needs and how to meet them. |

You can see how the helpful language can brought to life here: https://schools.essex.gov.uk/pupils/social_emotional_mental_health_portal_for_schools/Documents/DS21_7086_Talk_Common_Language_Posterv3.pdf

Dictionary

Here are some of the key terms you might hear in your role.

| Term | Definition |
|---|--|
| Adverse Childhood Experiences (ACEs) | A wide range of circumstances and experiences that impact on a child's development through heightened and unsupported stress, gaps in care and stimulation, or material deprivation. In Essex we take an adverse experience to be any that in an on-going or severe way compromises whether a child is safe. |
| Alternative Education Provision – Education | An educational setting which provides and alternative, and often specialist, education offer for pupils who do not attend mainstream or special schools. |
| Care, Education Treatment Review (CETR) – Health | If a CYP with learning difficulties or autism is experiencing significant difficulties with their mental health and are at risk of requiring an hospital placement in relation to their mental health, it may be recommended that they have a CETR to assess the appropriateness of such a placement. |
| Co-production | Coproduction describes working in partnerships with shared power in decisions making between those who use and deliver services. Co-production happens at various levels, such as agreeing a personalised care plan or designing service delivery. |
| | Co-production of health and care services with children and young people aims to help young people to feel more independent and in control of the services they use. Their involvement will develop and deliver better care services. |

| Term | Definition |
|---|--|
| Discharge – Health | When an individual's care is ceased from a health care provider. |
| Education, Health & Care Plan (EHCP) – Education | A statutory plan outlining targeted/specialist support for pupils with SEND. |
| SEMH Enhanced Provision – Education | An educational setting which provides targeted, short-term education for pupils with additional SEMH needs. |
| | More info: https://schools.essex.gov.uk/pupils/social_emotional_mental_health_portal_for_schools/Pages/Enhanced-Provisions-for-SEMH.aspx |
| FCAMHS – Health | Forensic Child & Adolescent Mental Health Service. |
| Integrated Care Board (ICB) – Health | Integrated Care Board (ICB) are our local health providers. There are 7 across Southend, Essex & Thurrock: Southend, Castle Point & Rochford, Basildon & Brentwood, Mid Essex, West Essex, NE Essex and Thurrock. |
| In-patient- Health | A person who spends a period of time within a hospital setting. This could be in a paediatric, psychiatric or acute ward. |
| Lived Experience | Services aim to work with those who have lived experience. Those with lived experience have personal or close experience of certain challenges, such as mental health services/ use of their insight allows providers to better design develop and deliver services that meet the needs of those using them. |
| Mental Health Support Teams (MHST) – Health | School based mental health services for children and young people who present with difficulties with anxiety and low mood. Offers direct support and consultations to school on whole school wellbeing culture. |

| Term | Definition |
|--|--|
| Multi-Agency Group / Team | A Multi-Agency Group / Team is a range of professionals from different services and disciplines who work together in collaboration with joint responsibility to ensure that the whole needs of a child or family are met. e.g. teachers, doctors/clinicians, social worker, occupational therapist, etc. |
| Neuro-diverse – Health | Neurodiversity describes the idea that people experience and interact with the world around them in many different ways. Examples of neurodiversity are autism, dyslexia and ADHD. |
| One Page Profile – Education | A One Page Profile captures all the important information about a person on a single sheet of paper under three simple headings: what people appreciate about me, what's important to me and how best to support me. |
| One planning / One Plan – Education | Essex's approach to the Graduated Response. One planning is a process which is used to create a One Plan: a collaborative plan of support using the structure of Assess, Plan, Do, Review to respond to SEND. |
| Ordinarily Available – Education | The universal educational offer that is available to all pupils. |
| Primary Care Network (PCN) Children and Young People's Mental Health Practitioner – Health | The PCN Mental Health Practitioners are aimed at improving timely access to mental health support. They are able to provide assessment and brief evidence-based interventions for CYP presenting with mild to moderate symptoms, who would be suitable for low intensity interventions. |
| | The PCN Practitioners will also be available for consultation to GP Practitioners on cases to support the exclusion of mental health concerns to help determine the appropriate treatment pathway. |

| Term | Definition |
|------------------------------------|--|
| Reasonable adjustments – Education | Changes that a school/setting must make so that all pupils can participate in their education and enjoy the provision and facilities the school/setting offers. |
| Risk | Something or someone that creates or suggests a hazard. Risk needs to be considered within the context of the situation through assessment. |
| Safeguarding | Measures to protect the health, wellbeing and human rights of individuals, which allow people especially children, young people and vulnerable adults – to live free from abuse, harm and neglect. |
| SPA – Health | Single Point of Access for contacting CAMHS. |
| Special School – Education | An educational setting which provides specialist education for pupils with a SEND. |
| Threshold | A point at which criteria changes and indicates a need to alter/change provision. |
| Transition | A point of change, such as changing year groups, moving to a new school/setting, or switching from CAMHS (children's services) to EPUT (adults service). |

Approaches in Education, Health and Care

References, tools and models to aid our understanding different levels of need vary depending on the service. This can create confusion as it can blur the lines of interpretation and understanding of need.

Each of the diagrams on the next page shows the models from the perspectives of education, health and care to provide clarity about what this looks like.

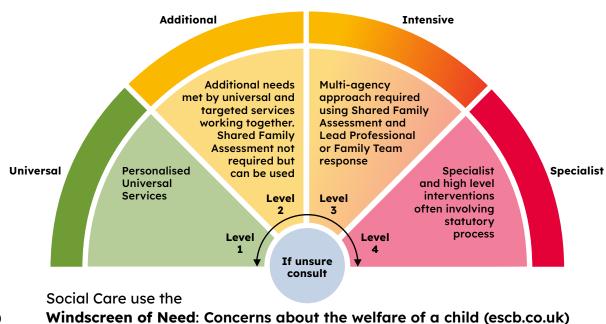
Important note:

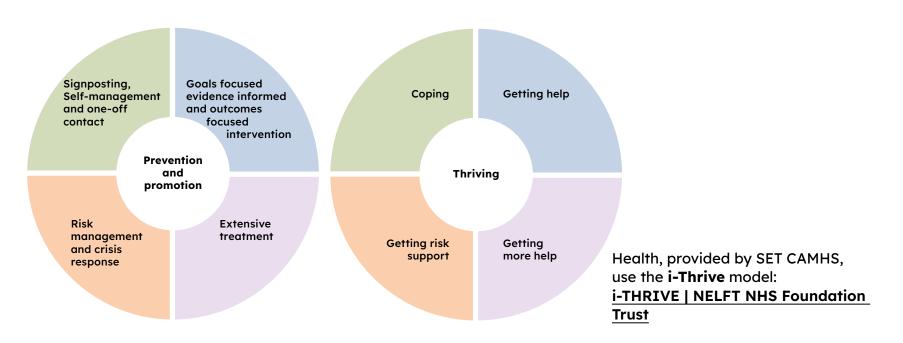
Children may not access services/provision at an equivalent 'level' or for the same length of time. Accessing support from one service does not mean that they are also eligible for that level of support from another service. For example, a child may be in a mainstream setting accessing a 'universal' education offer, whilst getting 'intensive' support from care services, or; a child may be in mainstream setting accessing an 'additional' education offer whilst 'getting more help' from CAMHS.

To navigate the varying systems and support required, collaboration should be personalised. It should take into account meaningful assessment to inform planning.



Education settings use the **SEND Code of Practice**: **SEND code of practice**: **0 to 25 years – GOV.UK (www.gov.uk)**





Processes

Assessment

Most services will need to carry out their own assessment to find out if they can meet the presenting needs. This normally happens at the first appointment the young person has with a service. These assessments will differ depending on the service, and may be called different things (triage, assessment, panel, etc), but all will aim to hear the young person's story to build an understanding of what aims, goals and behaviour changes the young person would like to make.

If more than one service is involved in the support plan, it will be likely that they will need an assessment for each.

This sometimes means that the individual may have to tell the story more than once. Whilst it is acknowledged that this can be frustrating, there are important reasons to engage in each assessment: each service will likely be seeking different information or looking for different things; circumstances might have change since a previous assessment, and; descriptions are more valuable when shared first-hand.

Types of Plans

Education:

- One Plan <u>Make a plan of action to support</u> your child | Essex Local Offer
- EHCP Help for people with high support needs |
 Essex Local Offer

SET CAMHS:

- Care plan Make a plan with child/young person and parents, setting our goals to help improve their mental health
- Safety plan Make a plan with child/young person, parents and other agencies in managing the risks in community.
- Multi agency care and risk management plan –
 Make a plan for child/young person and their
 family outlining all agencies support/actions they
 will offer and complete.

 117 Care Plan – Is a multi-agency plan for young person that was previously subject to Section 3 Mental Health Act during period of admission.

'Admissions'

Admission to General Adolescent Unit (GAU) – If a person presents with significant risk (suicidal ideation with plan), psychotic symptoms, eating disorder) and need to be admitted to psychiatric hospital to keep them safe. The main aim of admission is to stabilise the young person mental health and to reduce the risks.

Informal Admission – If a person is able to decide whether to be admitted to hospital for a period of assessment or treatment, and are willing to go into hospital, they can be admitted on an 'informal' basis.

Admission under Section 2 Mental Health Act – A person admitted to psychiatric hospital for a period of assessment.

This will require the person to have a Mental Health Act assessment with 2 psychiatrist and Approved Mental Health Professional (AMHP).

Reviews

Education:

- One Plan review Make a plan of action to support your child | Essex Local Offer
- EHCP Annual Review <u>Preparation and Planning</u> for Annual Reviews - SENDIASS - YouTube

SET CAMHS:

- Treatment review To have a review session with child/young person and parents to review treatment goals and engagement.
- CETR: Community Education Treatment
 Review https://www.england.nhs.uk/learning-disabilities/care/ctr/care-education-and-treatment-reviews/
- CPA meeting Care Programme Approach is a meeting with child/young person, parents with all agencies support/actions
- 117 Care Plan Is a plan for young person that was subject to Section 3 Mental Health Act.
- CIN
- Pathway Plan

Acts / Sections / Codes

SEND Code of Practice
 SEND code of practice: 0 to 25 years – GOV.UK
 www.gov.uk

The Mental Health Act:

When someone's mental health is poor, they are not always able to make decisions for themselves and therefore professionals might be asked to do this on their behalf and a Mental Health Act Assessment will be arranged.

The Mental Health Act says when you can be detained in hospital and treated against your wishes. You can be detained (sometimes referred to as 'sectioning') if professionals think your mental health puts you or others at risk, and you need to be in hospital:

- Section 2 of the Mental Health Act 1983 –
 Detention under s.2 of the MHA is for a period of up to 28 days for assessment. If professionals feel that you need to remain in hospital as a detained patient after the 28 days has expired, a further Mental Health Act Assessment will be required.
- Section 3 of the Mental Health Act 1983 –
 Detention under s.3 of the MHA is initially for a period of up to 6 months but it can be renewed.
- MH-CoP-Being-detained.pdf (assets.nhs.uk)
- More information about the Mental Health Act can be found here: What is the Mental Health Act? (rethink.org)

Signposting

This is not an exhaustive list but a broad overview of what you might expect. If it is assessed that a child does not meet a services' criteria, it remains a multi-agency responsibility. They need to ensure the most appropriate providers are engaged and to enable a smooth transition between support.



Art by Emilia, age 7

Coping/Prevention/Universal Support

Signposting to support good emotional wellbeing and resilience

For All:

- Effective Support Portal <u>https://www.escb.co.uk/working-with-children/concerns-about-the-welfare-of-a-child/ or call 0345 603 7627.</u>
- Essex Map https://www.essexmap.co.uk/

For Families/Young People:

- Wellbeing Apps
 https://www.england.nhs.uk/supporting-our-nhs-people/support-now/wellbeing-apps/
- Essex Child & Family Wellbeing Service https://essexfamilywellbeing.co.uk/
- Essex Local Offer https://send.essex.gov.uk/
- SEMH Self-care library for children and young people https://schools.essex.gov.uk/pupils/social_emotional_mental_ health_portal_for_schools/Pages/Self-care-for-CYP-Library. aspx

For Schools/Settings:

- Essex Schools Infolink Pupil Support and Welfare pages
 https://schools.essex.gov.uk/Pages/EssexSchoolsInfolink.aspx
- Essex Early Years and Childcare https://eycp.essex.gov.uk/
- Ordinarily Available SEND
 SEND Strategy, Policies and Guidance (essex.gov.uk)
- SEMH Teaching Resources and Assessment Tools
 https://schools.essex.gov.uk/pupils/social_emotional_mental_health_portal_for_schools/Pages/teaching_resources_semh.aspx
- SEMH training https://schools.essex.gov.uk/pupils/social_emotional_mental_ health_portal_for_schools/Pages/semh_related_training.aspx

Getting Help/Early Intervention/Additional Support

Signposting to support emotional wellbeing difficulties that affect functioning, education and family life

For All:

- Effective Support for Children and Families Guidance https://www.essex.gov.uk/children-young-people-andfamilies/resources-practitioners/effective-support-resources or call 0345 603 7627.
- One planning https://send.essex.gov.uk/help-learning/make-plan-action-support-your-child
- SET-CAMHS Consultation
 https://www.nelft.nhs.uk/set-camhs
 or call the SPA on 0800 953 0222.

For Families/Young People:

- Kooth.com https://www.kooth.com/
- Togetherall https://togetherall.com/en-gb/
- Getting Help in Essex https://www.essex-gethelp.uk/
- SNAP Special Needs and Parents http://www.snapcharity.org/index.php/information
- Engagement in interventions to support skill building (eg. group work, brief evidence-based interventions, exposure interventions, peer mentoring, etc.)

For Schools/Setting:

- Essex Schools SEND Services
 https://schools.essex.gov.uk/pupils/SEND/Pages/default.aspx
- EP in SET-CAMHS consultation
 Contact educationalpsychologyCAMHS@essex.gov.uk to book a slot.
- SEMH Enhanced Provisions
 https://schools.essex.gov.uk/pupils/social_emotional_mental_
 health_portal_for_schools/Pages/Enhanced-Provisions-for SEMH.aspx
- Mental Health Support Teams (MHST)
 available in some schools. Your child's school will be able to tell
 you if this service is available.

Getting More Help/Targeted Intervention/Intensive Support

Signposting to support emotional wellbeing needs that affect functioning on daily basis, requiring a personalised support plan

For All:

- Effective Support for Children and Families Guidance https://www.essex.gov.uk/children-young-people-andfamilies/resources-practitioners/effective-support-resources or call 0345 603 7627.
- SET-CAMHS Referral https://www.nelft.nhs.uk/set-camhs or call the SPA on 0800 953 0222.

For Families/Young People:

- Personalised planning in their school/setting.
- Engagement in interventions to support skill building (eg. evidence-based interventions)

For Schools/Settings:

- Self-harm Management Toolkit schools.essex.gov.uk/pupils/social_emotional_mental_health_ portal_for_schools/Documents/Self Harm Toolkit for Schools Sept 2019.pdf
- Reducing the Risk of Suicide guidance https://schools.essex.gov.uk/pupils/social_emotional_mental_ health_portal_for_schools/Pages/lets_talk_semh_resource_ suite.aspx
- Education, Health and Care (EHC) Needs Assessment https://schools.essex.gov.uk/pupils/SEND/Pages/EHC-Needs-Assessments.aspx

Getting Risk Support/Specialist Support and Intervention

Signposting to support complex emotional wellbeing needs presenting high levels of risk in the community, requiring a multi-agency support plan

For All:

- SET-CAMHS Crisis number 0300 555 1201
- Family Operations Hub 0345 603 7627
 Out of hours emergency duty service 0345 606 1212
- Papyrus Hopeline 247 call 0800 068 4141 or text 07860 039967.
- Samaritans call 116 123 or visit https://www.samaritans.org/how-we-can-help/contact-samaritan/
- Childline call 0800 1111
 or visit https://www.childline.org.uk/get-support/contacting-childline/

For Families/Young People:

- Shout anonymous crisis text support Text 'SHOUT' to 85258
- Shared care plan, shared risk assessment and risk management plan with all agencies.
- Engagement in rehabilitation and relapse prevention.

For Schools/Settings:

Critical Incident support
 https://schools.essex.gov.uk/admin/Critical_Incidents/Pages/
 Critical%20Incidents%20and%20School%20Closures.aspx

Acknowledgements

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