

Contract for Secondary Schools Ealing Mental Health Support Team

1. Introduction:

Mental Health Support Teams (MHSTs) are the government's response to the green paper 'Transforming Children and Young People's Mental Health Provision'. Ealing MHST consists mainly of Education Mental Health Practitioners (EMHPs) and Child Wellbeing Practitioners (CWPs).

Our Mental Health Support Teams will refer to EMHPs as 'Educational Wellbeing Practitioners' (EWP's) and the EWP's will be a mixture of qualified practitioners and trainees. Educational Wellbeing Practitioners and Child Wellbeing Practitioners will both be performing the same roles and will hereafter be referred to as 'practitioner'. The MHST's will also have more senior staff who will closely supervise the practitioners as well as providing some support to schools themselves. Ealing MHST is based in Ealing Primary Centre.

The MHST will offer brief, focused, evidence-based early interventions for anxiety and low mood (under close supervision) to children and young people who wouldn't otherwise reach the thresholds for CAMHS, as well as some group work and some interventions to parents of children aged 4-8 years old.

2. Our offer to Secondary Schools:

Each secondary school will have a named MHST practitioner who will work in the school 1 day a week to provide early evidence-based intervention for young people presenting with mild-moderate mental health problems such as anxiety and low mood.

The named practitioner will meet with the designated school link worker at each school once a week to discuss possible referrals, update the link worker on existing cases and to discuss other interventions such as groups and workshops that may be helpful to the school population.

The named practitioner will be able to see 4 cases per day.

When the link worker brings referrals, the practitioner will discuss which are most appropriate and will signpost the link worker to more appropriate services when relevant.

For appropriate cases, the practitioner will have a small waiting list where cases are held until they have capacity. They will be seen in order of referral, unless clinical need dictates that a case needs to be prioritised.

If a group is planned, this will count as 2-3 cases (depending on the group and the amount of work that needs to go into developing and delivering this).

Each secondary school will have one training session a term allocated. The topic for this training session should be discussed with the named practitioner in advance so that they can prepare the material. Ideally this should be something that is not already offered by another service or provider in Ealing although there could be an opportunity for working jointly with other services.

3. Commitment needed from Secondary Schools:

School liaison:

The school will allocate an appropriately trained, link worker to the named practitioner. If possible this should be the school Mental Health Lead or if not, someone who reports to them. This link worker will be the initial point of contact for school staff interested in referring a child to the MHST.

The link worker will promote the MHST service within the school and will seek out appropriate referrals to discuss with the practitioner.

The link worker will meet with the named practitioner (for 30 mins-1 hour) twice a month. One of these meetings will be between the link worker and the named practitioner to discuss possible referrals anonymously. The other meeting will be with the named practitioners and all link workers from their cluster to discuss need and plan support needed across the cluster. These meetings may be virtual.

The MHST practitioner will also meet the SENCO on a regular basis.

Once a referral is deemed appropriate, the link worker will obtain informed consent using the forms provided to the school and then complete the MHST referral form which will be forwarded to a central email address ealing.mhst@nhs.net. The young person or family will not be seen or contacted until the referral form and consent forms have been fully completed, received and processed by the team.

Any safeguarding referrals that are needed following information obtained by the MHST practitioner will be done by the school Designated Safeguarding Lead.

The school will ensure that clinical and evaluation measures requested will be completed and returned to practitioners when necessary.

If schools do not respond repeatedly to attempted contact by the MHST practitioner or fail to provide appropriate referrals, a senior member of the team will arrange a meeting to problem solve difficulties. If difficulties persist, the team will withdraw from offering support in the school until any issues can be resolved.

Facilities required:

The school will ensure that the practitioner has access to a quiet, private and appropriate therapeutic space within the school to see parents and run groups/workshops.

The school will ensure that the practitioner has access to staff room facilities (etc) and can print materials for sessions, groups (etc) for the school within the school.

4. Identifying appropriate referrals:

The MHST aims to provide early, evidence-based intervention for children and young people presenting with mild-moderate mental health problems such as anxiety and low mood. **Appropriate referrals for the MHST are *below* the current tier 2 CAMHS threshold.**

The MHST uses guided self-help approaches and these are designed for young people who have a fairly clear idea about at least one goal for improved wellbeing, can make the time commitment to make a series of appointments and are ready to take active steps to face the challenge of making changes.

The MHST is a school-based service and as such only referrals from schools will be accepted. We encourage other clinicians who feel they have an appropriate case for the MHST to discuss this with the school link worker in the first instance and the link worker can refer if they also deem the case to be appropriate.

Referrals must meet the criteria stated below:

- Young people with mild to moderate mental health problems such as anxiety or low mood
- No historical or current experiences of abuse or violence.
- All cases should be low risk.

This Contract is forSchool.

We confirm that we have read the information above and agree to ensure the requirements from school are met in accordance with this contract.

	Name	Signature	Date
SENCO			
School Mental Health Lead			
School link worker			
MHST Practitioner			
MHST Team Lead			