



North East and  
North Cumbria



Northumberland  
County Council

# Northumberland's Emotional Wellbeing and Mental Health Strategy for Children and Young People 2022 - 25



Local Area Partnership



# Foreword

We are committed to improving the general health and wellbeing of our children and young people by working together as partners in education, health, social care and voluntary services to provide holistic integrated support that wraps around the individual and family, by making healthy lifestyles a part of all of our services, children and young people will grow up knowing that this is our ambition for everyone.

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# Introduction and Context

## 1

In early 2020, the pandemic changed our world. The way we lived, spent time with friends and family, the way we learned and the way we worked all changed. Our daily lives are now returning more and more to life pre-pandemic, however the impact of the pandemic on the emotional wellbeing and mental health of children and young people continues to be felt.

Even before the pandemic the prevalence and complexity of children's emotional wellbeing and mental health needs had been increasing, often leading to multiple issues impacting on different aspects of their life and the families and communities in which they live.

In addition to an increase in complexity the prevalence of mental disorders in children and young people has increased in five-to-16-year-olds, from one in nine in 2017, to one in six in 2020. Identifying why we are seeing such an increase in mental health problems is difficult to prove categorically. However, it is likely that the uncertainty and anxieties caused by lockdowns, closure of schools, isolation from peer groups, bereavement, and the stresses and pressures on families are all contributing factors.

Nationally, mental health has been increasingly a focus with key policies being published over the years

- Closing the gap: priorities for essential change in mental health (2014)
- Future in Mind (2015)
- The Five Year Forward View for Mental Health (2016)
- The NHS Long Term Plan (2019)

The Long-Term Plan explains what the NHS will do over the next 10 years to expand mental health services for children and young people, reduce unnecessary delays and deliver care in ways that young people, their families and carers have told us work better for them.



There is a key role for local systems to play. Our partnership includes a range of services and organisations including the NHS, public health services, local authorities, schools, adult education, youth justice, drug and alcohol services, and voluntary and community groups who are working together to reduce inequalities and focus on early identification and support to improve children and young people's mental health.

This strategy sets out what we will do to develop and improve support for emotional wellbeing and mental health for children and young people in Northumberland. We will share updates through the Local Offer with children, young people and their families.

This Strategy sets out our local partnership's joint vision for the ongoing development and continual improvement of the support required to promote and improve the emotional wellbeing and mental health needs for our children and young people with across Northumberland.

It details our aspirations and local priorities which have been identified using local data and intelligence, through listening to the voices of children, young people and their families and frontline staff and managers of local services across health, education, and social care.

This strategy is written for children, young people aged 0-25 and their families and the schools, settings, organisations, services and practitioners who support them.

It sits alongside

- Northumberland Joint Health and Wellbeing Strategy 2018-2028
- Northumberland's Children and Young People's Plan 2019-2022
- Northumberland Local Area SEND Strategy 2021 – 2024

This strategy is based upon the THRIVE Framework which has five categories to support how we think and plan to meet emotional health and wellbeing needs of children and young people.

## Agreed a common language THRIVE model aligned with school's graduated response



Anna Freud National Centre for Children and Families) [THRIVE Framework \(annafreud.org\)](https://www.annafreud.org)

## Our Vision

We want children and young people to feel safe, able to cope with life's ups and downs, be proud of their identity and who they are, confident about adulthood and positive about the future.

We want to empower and enable children and young people themselves, their families and practitioners who support them to work together to promote resilience, independence good health and secure mental wellbeing.

## Our Principles

As a partnership we commit to the following principles which underpin the work we do

- Developments and improvements will be co-produced with children, young people and their families
- Services and practitioners will actively listen to children, young people and their families to understand what works and what needs to change
- Emphasis is placed on early identification and early prevention across all levels of work
- Services across education, health, social care and the private and voluntary sector will work collaboratively together
- Ensuring the system offers the right support, at the right time and from the right people within an appropriate setting
- Services to be needs led providing appropriate support regardless of diagnostic profile
- Raising awareness and increasing understanding of emotional wellbeing and mental health needs is delivered across the partnership and across the workforce



# What The Data Tells Us

## Nationally

The Office for Health Improvement and Disparities updated the [COVID-19 mental health and wellbeing surveillance report](#) in April 2022 and found that the pandemic has substantially affected **some** children and young peoples mental health and wellbeing

- This impact was in different ways and at different stages of the pandemic
- Those particularly affected were
  - Girls and young women
  - The disadvantaged
  - Those with special educational needs and / or disabilities (SEND) and / or those with pre-existing mental health needs
- Impact was different according to gender
  - Boys reported more symptoms of behavioural and attention difficulties
  - Girls had higher levels of emotional difficulties, poorer wellbeing and anxiety

## In Northumberland

Referrals for mental health and wellbeing support across services to health and education teams rose in 2020 and in 2022, with a significant increase in numbers of children and young people who are neurodiverse	As numbers of referrals are increasing waiting lists are starting to get longer for children and young people to access help and advice	For children and young people with Special Educational Needs and / or Disability, social, emotional and mental health is the most common need
For children and young people who are not well enough to attend school, the majority have mental health rather than physical health needs	For young people who accessed online support from Kooth, the top five issues in 2020/21 were related to anxiety/stress, suicidal thoughts, self-harm and family relationships	Northumberland is higher than the national average for children and young people being admitted to hospital for self-harm and mental health needs
Children and young people who are looked after or have experienced abuse are much more likely to need support for their emotional wellbeing and mental health	“Increasing numbers of children and young people are being referred to the neurodevelopmental diagnostic pathways for assessment”	A higher proportion of care leavers and care experienced young people experience poor emotional wellbeing and some diagnosable mental health problems. They are at much higher risk of poor mental health and isolation with limited support networks compared to their peers.

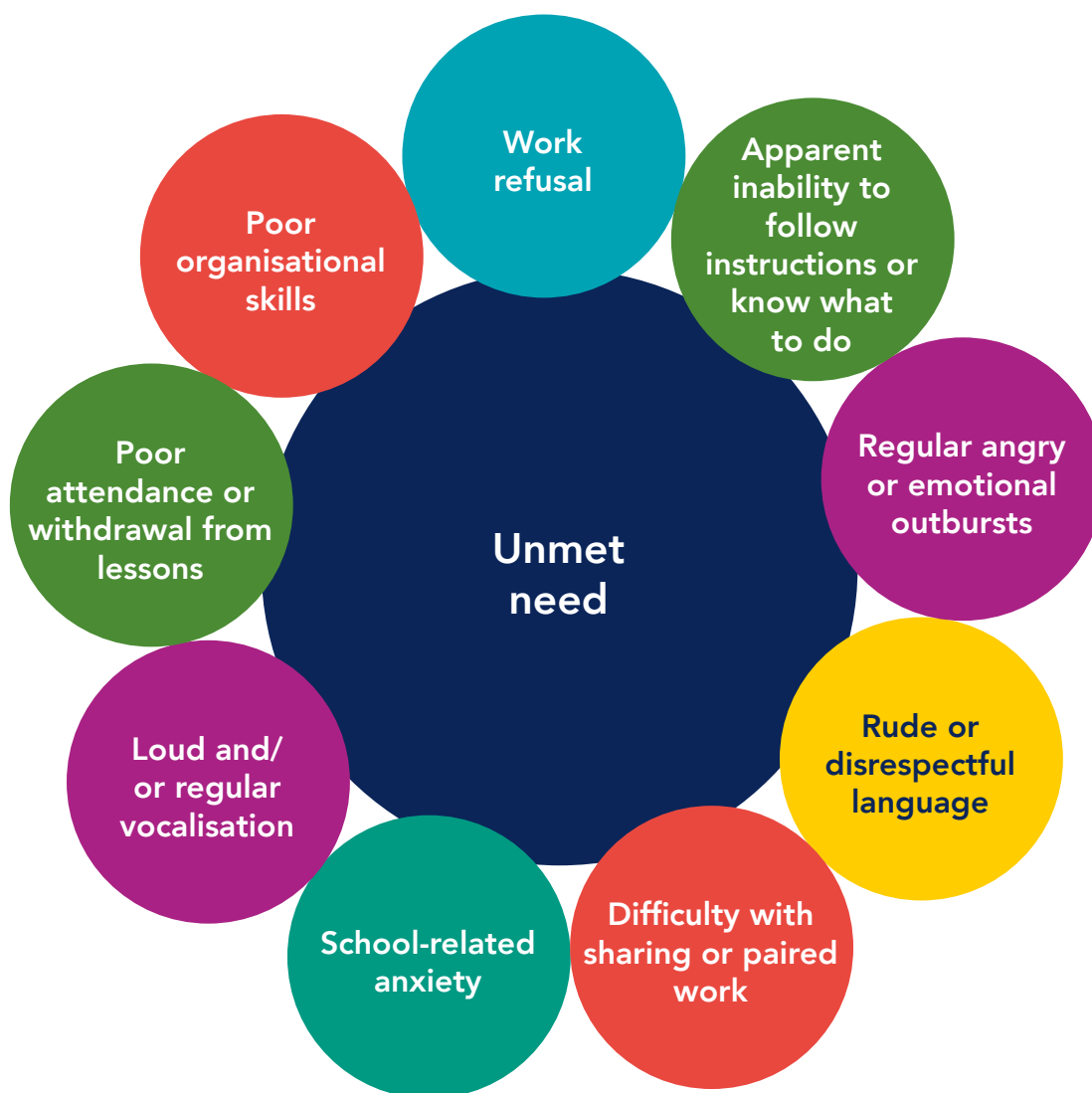


# Early Identification and Prevention and The Role of Schools

We know that many adults who have significant mental health needs first experienced difficulties when they were at school. Schools and settings therefore have a key role to play in identifying the early signs of emotional wellbeing and mental health need.

Schools are where most children and young people spend the majority of their time when they are not at home and there is a growing body of evidence to show that school-based interventions are effective in supporting mental health and wellbeing. It is therefore important

to consider the different ways that children and young people with emotional wellbeing and mental health needs may present in school and ensure that careful consideration is given to the reasons that may drive behaviour and actions in schools and settings.





A mentally healthy school is one that adopts a whole-school approach to mental health and wellbeing. A whole-school approach involves all parts of the school working together and being committed. It needs partnership working between senior leaders, teachers and all school staff, as well as parents, carers and the wider community.

## Supporting Mentally Healthy Schools in Northumberland

In addition to support and guidance on best practice at a national level, the following is available within Northumberland

- [Whole school approaches to promoting Emotional Health and Wellbeing, A Good Practice Guide](#) is available for schools to support planning and development.
- Northumberland's 'Ordinarily Available Provision' document sets out the support that schools are able to put in place themselves to support children with social, emotional and mental health needs as part of a graduated response according to need.
- Schools and settings are able to access, and signpost children, young people and families, to a range of support from the health, education, care and voluntary sectors as set out on the [Be You Website](#)



# What Children and Young People Have Told Us

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Northumberland's Public Health team carried out a Health-Related Behaviour Questionnaire in December 2021 of 2984 children and young people aged 10-18 across 34 schools in Northumberland. They found that



% Of young people who felt that life during coronavirus has affected their mental health and wellbeing showed girls were affected more

- Year 6 Boys 24%, Girls 31%
- Year 9 Boys 24%, Girls 52%
- Year 11 Boys 41%, Girls 61%



30% of pupils said they worry that they have missed too much school due to Covid-19 and won't get a job or the job that they want (Year 9 & 11)



How happy did you feel yesterday?

- Year 6 = 6.6
- Year 9 = 5.9
- Year 11 = 5.4

(Scale of 0 not at all happy to 10, completely happy)



Younger pupils are more likely to say 'they always feel good about themselves'

% Of children young people who feel good about themselves  
20% (Year 6), 20% (Year 9), 14% (Year 11)



Most children said they would know who to speak to and what organisations could help/support them if they were sad, worried, upset, or anxious, though becomes less as children get older

- Year 6 = 82%
- Year 9 = 66%
- Year 11 = 61%



Most children and young people said they last had fun with their family or friends today or yesterday

- Year 6= 79%
- Year 9=75%
- Year 11=64%



More than 1 in 4 pupils said they have used an app or website to find out how to make themselves feel better if they have felt sad, worried, upset, or anxious

- Year 6 = 28%,
- Year 9 = 27%,
- Year 11 = 29%



65% of Year 9 and 11 pupils said they would know how to get help if they were deliberately hurting themselves

Nearly all said they did in the last month

- Year 6= 96%
- Year 9=96%
- Year 11=95%

For children with additional vulnerabilities, the findings showed that

- 82% of children and young people would know how to seek help/support in Year 6, compared to 71% for those who identified as a young carer.
- In year 9, 66% of the overall year group said they would know how to seek help, compared to 55% who identified as LGBTQ+
- In year 11, 61% would know how to seek help/support compared to 50% for young carers and 53% for those identifying as LGBTQ+

The recent national Just like Us survey (2021) of LGBTQ+ young people and their peers found that two thirds (68%) of LGBTQ+ young people feel that their mental health has worsened since the pandemic began, compared to 49% of non-LGBTQ+ young people. Young LGBTQ+ young people in the Northeast of England reported being the most lonely in the country since the pandemic began.

The 2022 national Make Your Mark survey had responses from over 500K young people. The most important issue to the 5,248 participating 11–18-year-olds in Northumberland in 2022 was Health and wellbeing, which included emotional health and wellbeing, a ban on conversion therapy and tackling the effects of poverty on health.

Children and young people's views informed and shaped the current (2019-22) Children and Young People's Plan. Many of the 1750 children and young people who responded, stated that emotional and mental health and wellbeing were a significant priority, as was a curriculum that prepared them well for adult life, including learning about and achieving equality and challenging discrimination.

Children and young people who took part in focus groups with the Mental Health into Schools Teams said it was important for people to understand how difficulties affected them and how this may present in different places.



# What We Have Done So Far

- Established Mental Health Support Teams (MHST) that work in 54 schools and settings across Trailblazer sites in Hexham and Blyth from Wave 1 and Ashington and Bedlington within Wave 3. The teams delivered low level intensity interventions to 327 young people in the period of September 2021 to February 2022.
- Identified a training need due to the increase in low-level mental health difficulties that looked after children were experiencing while in foster care throughout the pandemic. The ROAR training programme was initially delivered to schools, working in collaboration with the Virtual School and FPS, the High Incident Needs Team adapted the programme to make it relevant for foster carers aimed at both primary and secondary school age looked after children. This allowed foster carers to feel confident identifying and supporting young people in their care using a consistent approach to prevent escalations, enabling them to remain calm throughout periods of uncertainty.
- Delivered Friends Resilience Training to 50 schools and settings across Northumberland in 2021 enabling staff in those schools to support children and young people to reduce anxiety and depression and promote positive mental health for children, young people and families. This also included a modified version of Friends Resilience training for foster carers to enable them to feel confident when supporting looked after children with low level mental health difficulties at home. Using a consistent approach to prevent escalations, enabling the children in their care to remain calm throughout periods of uncertainty. Working in collaboration with High Incident Needs Team, The Virtual School, and FPS over 65 foster carers and 3 supervising social workers completed the training.
- Reviewed access routes to mental health support, within the statutory commissioned services e.g., school health, Primary Mental Health Workers (PMHW) and Children and Young People Services (CYPS). Acceptance criteria collectively reviewed and revised to ensure clearer access criteria and referral routes for support, including self-referrals. Referral guidance produced and services mapped against the thrive model. Triage hub developed collaboratively to support access and signposting as appropriate. Identified that further work is required to ensure all services and support are based on the presenting need of children and young people providing appropriate support regardless of diagnostic profile.
- Established telephone consultation lines for practitioners and parents & carers throughout the week by both the Primary Mental Health Workers (PMHW) and Children and Young People Services (CYPS) teams, to provide advice and agree the best course of action to enable the child or young person access the right support at the right time. In the first 6 months of 2022 advice was provided to over 2000 parents, carers and practitioners. Northumberland CYPS also offer Consultant connect which is direct advice and consultation to G.P's in Northumberland who have all signed up to this service.
- Developed and launched the of the 'Be You' emotional health and wellbeing website for Northumberland to provide advice and guidance to children, young people, families, and practitioners around supporting mental health and wellbeing <https://www.beyounorthumberland.nhs.uk/#>. In 2021 the website had been accessed 1300 number of times. This website continues to be reviewed and developed.

- Through the Early Help Workforce programme delivered 108 learning events with 1,408 delegates in relation to emotional health and understanding neurodiversity. CARE Northumberland is the vehicle for embedding adversity-aware, resilience focused and trauma-informed practice across the County.
- Invested in the Northumberland Emotional Wellbeing Support Team working into children's social work to support children open to a social worker, their families and those working with them to have a better understanding of their emotional and mental health needs. From Feb-May 22 the team have had referrals in relation to 106 children and young people with practitioners reporting back that they had a statistically significant increased understanding of the child's needs post consultation than at the pre consultation stage.
- Invested in two Child Wellbeing Practitioner posts recruited from and employed by children's social care to support children and young people and their families with low level anxieties.
- Choices4Growth mental health project delivered emotional support and counselling, working directly with children, families, and staff within nine schools within the Berwick and surrounding areas during 2021.

The positive engagement has resulted in improved emotional resilience for the whole school community, seeing ...

- An improvement in mental health for children resulting in more positive friendships, aspirations and better school attendances.
- Better mental health for families resulting in reduced family tensions.
- Better use of teaching staffs time resulting in fewer problems in class.



# What We Need To Do Next in Northumberland

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**System Working** – about how leaders, services, teams and practitioners work and plan together to support emotional wellbeing and mental health in children and young people

1. Refresh the membership and terms of reference of the Emotional, Health and Wellbeing Improvement group to oversee and monitor the impact of action plans on improving the outcomes of children and young people.
2. Ensure that all developments undertaken for emotional wellbeing and mental health have been co-produced, and are informed by the voice and lived experience of children and young people which will be overseen by the Emotional, Health and Wellbeing Improvement group
3. Establish a dashboard to enable a whole system view of activity and outcomes across the system to ensure timeliness of access to support is maintained and referral bounce is minimized.
4. Ensure connectivity with relevant service and partnership strategies and developments.
5. Embed trauma informed approaches cross Northumberland.

**Thriving** – for children and young people whose current need is support to maintain mental wellbeing through effective prevention and promotion strategies

6. Workforce development: Deliver training to practitioners across education, health, social care, voluntary, community and social enterprise services
  - a. Early identification of emotional wellbeing and mental health needs
  - b. Understanding neurodiversity, support additional training and awareness re early identification and recognition
  - c. Importance of managing and planning transitions
  - d. Trauma informed practice
7. Co-produce support and guidance for children and young people about neurodiversity.
8. Provide equitable access to therapies for C&YP with mental health needs across Northumberland via engagement across providers of mental health and wellbeing support in CYP IAPT training.
9. Developing communities of practice, we will learn from and work with people with lived experience of stigma and inequality to improve our support.
10. Ensure all children and young people in Northumberland feel confident talking about their wellbeing and mental health and have a range of mechanisms available to enable them to do this e.g. pilot of squirrel, chat health, kooth, pshe lessons

## **Getting Advice** – for children and young people who need advice, signposting and self help support

11. Workforce development: Deliver training to practitioners across education, health, social care, voluntary and community settings on
  - a. Identifying and understanding the impact of trauma on children and young people, supporting a trauma informed workforce
12. Carry out a pilot (Stormbreaker) on the impact of providing physical activities to support children's and young people's mental health and wellbeing.
13. Ensure Children and Young People have enhanced knowledge and they are aware where advice and support can be accessed.

## **Getting Help** – for children and young people who need focused goals-based support

14. Workforce development: Deliver training to practitioners across education, health and social care on
  - a. Review and enhance the mandatory training programme for foster carers/parents and Designated Teachers, with a focus on supporting the mental health needs of Children who are Looked After
15. Increase integrated working through the co-location of mental health practitioners in Family Hubs improving joint working and understanding, early intervention programmes, focus on support within communities and reducing health inequalities
16. Continue the development of Mental Health School Teams and increase the reach of the Be You Mental Health School Teams across the County, secured funding for wave 9 which will increase the range of support available in schools for emotional wellbeing and mental health ensuring this is needs led regardless of diagnostic profile.
17. Deliver training to practitioners across education, health, and social care with a focus on supporting the mental health needs of children with a social worker.

## **Getting More Help** – for children and young people who need more extensive and specialised goals-based help

18. Ensure clear and safe person-centred transitions from children's to adult services for all young people who will require ongoing emotional wellbeing and mental health support.
19. Produce a guide for what support is available for children and young people with avoidant restrictive food intake disorder (ARFID) in Northumberland, based on a review of current need, pathways and support.
20. Review the Neurodevelopmental diagnostic pathway to ensure that different presentations are considered. Identification of adolescents and girls, post diagnostic support. Ongoing Emotional Mental Health support for Anxiety vs Autism
21. Provide clear guidance on accessing support for children and young people with mental health needs who are eligible for the adoption support fund and the level of assessment needed for this application
22. Ensure Advocacy and additional resources are available for children and young people by informing them about advocacy and children's rights services and provide help and assistance when children and young people want an advocate to speak for them.
23. Position intensive support in the right place on the pathway to have maximum support by further developing the role of the Northumberland Emotional Wellbeing Support Team (NEWST) and other mental health support into children's social work teams.

**Getting Risk Support** – for children and young people who have not benefited from or are unable to use help, but are of such a risk that they are still in contact with services

24. Workforce development:
  - a. Deliver training to Crisis services to increase awareness and understanding of the needs of children and young people with Autism and or a Learning disability
  - b. Provide Education programmes for Professionals including Police, Education providers, Health & Children's Social Care to identify risk of child sexual abuse, child exploitation to assess risk, to support and manage disclosures.
25. Providing staff awareness training to improve the identification of mental health needs at A&E ensuring that underlying mental health conditions are recognised and supported by the appropriate services,
26. Provide 24-hour access for all those children and young people who require more intensive support and intervention in order to establish an immediate safety plan. Recognising and been able to adapt crisis intervention support for people with a Learning Disability or Autism.
27. Further development of services and joint responses for children and young people with acute and complex needs but no formal mental health diagnosis.





# Working With Children, Young People and Their Families

In order to do this we will embed co-production as a way of working across the system. Co-production means that services and practitioners work together with families to improve the support they receive. This can be around support that an individual receives from a practitioner or around the support that is provided to a large group of children and young people.

To be able to do this, it relies on ownership and accountability and leadership at all levels. This means that across all organisations.

- **Senior leaders** are responsible for ensuring that strategies, plans and policies are informed by listening to and learning from the voice of children, young people and their families, with children and young people as equal partners in the development of improvement plans
- **Service and team leads** are responsible for supporting their staff and the systems in which they work to listen to and learn from the voice of children, young people and their families. Service and team leads will understand what is working well and what needs to be different to make sure that families receive high quality support and will involve families as equal partners in designing and implementing any changes
- **Individual practitioners** are responsible for listening to children, young people and their families to know what is important to them, what is working well and what they want for the future. This is a cornerstone of providing high-quality person-centred support



We will measure system change across all the work we plan to do and will know we have succeeded when we see.

- **improved experiences** – children, young people and their families will tell us they are more able to deal with life's ups and downs
- **improve outcomes** – children and young people who require support will access the most appropriate support at the earliest opportunity. Access data to services will support this been measured.
- **improved working together** – improvements will be co-produced and based on the experiences of children and young people and their families

To help us understand this we will monitor our progress against the relevant outcomes.

Information from these three areas will help us understand if we are improving outcomes and making a difference.

## How will we do this?

We will do this by analysing information from 3 areas

- **Listening** – to children, young people and their families to understand how we are making a difference and what we might need to change
- **Practice** – look at how well we deliver support and services to children, young people and families
- **Data** – look at what activity we do and how it compares to others

