



INFORMATION FOR NURSES

**Children and young
people's mental health
– *every nurse's business***



Royal College
of Nursing



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Children and young people's mental health – *every nurse's business*

Information for nurses

Introduction

Children and young people's mental health – every nurse's business is aimed at key decision-makers who shape child and adolescent mental health service provision, and those who influence pre and post-registration nursing education. We have increasing evidence that mental ill health in childhood and adolescence is becoming very common. It is vital for nurses and other health care professionals to have the right skills to recognise the symptoms and provide appropriate support.

We know that in Scotland around 10% of young people under the age of 19 have mental health problems to the extent that it interferes in their day-to-day lives (Public Health Institute for Scotland 2003). Other research has found that looked after children have a much higher rate of mental health problems than is seen in children

living with their families (Richardson & Joughin 2000). A recent study (Philips 1997) reveals that 80% of children in foster care were considered by social workers to require treatment by a mental health professional. Although it is widely understood that eating disorders play a large part in the well being of young people, the Eating Disorders Association says that there is a lack of information about the incidence and prevalence (Eating Disorders Association 2003).

Nurses, health visitors and midwives work across a range of settings, and are one of the largest groups of health care professionals who come into contact with children and young people. They are in the right place to promote the psychological and emotional well being of children and families and to prevent the development of mental health problems by being aware of the factors that can put children and young

people at risk (DHa 2003; DfES 2003). Identifying potential problems as early as possible, and referring young people for appropriate support and treatment can substantially reduce the likelihood of long-term psychological difficulties.

The scale of the problem

Recent studies indicate that 20% of children and young people experience psychological problems (Mental Health Foundation 1999; National Statistics 2000; World Federation for Mental Health 2003). Research from National Statistics found that:

- ◆ 10% of 5 to 15-year-olds had a mental disorder
- ◆ 5% of 5 to 15-year-olds had clinically significant conduct disorder, 4% had emotional disorders (anxiety and depression), and 1% were hyperactive
- ◆ in groups of 5 to 10-year-olds 10% of boys and 6% of girls had a mental disorder
- ◆ in groups of 11 to 15-year-olds 13% of boys and 10% of girls had a mental disorder.

Children and young people's services

It is crucial that wherever services are provided the environment must be appropriate to meet the holistic needs of children and young people¹. Children and young people should not be cared for in an adult environment², and care settings should be made child/young person-friendly and confidential. Services should be combined to provide integrated provision across all health care sectors, and should include local provision and initiatives to give rural communities access to services. In particular we need to give greater attention to how 16 to 18-year-olds make the transition to adult services.

Department of Health (England) policy places the mental health needs of children, young people and their families as an integral part of any children's service (DH 2003a and b). DH says that all staff should have an understanding of how to assess and

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- 1 The term children and young people relates to children and young people up to the age of 19 (DH 2003).
 - 2 Individual nurses, midwives and health visitors have a responsibility to ensure that the child and young person is only admitted where necessary, and if required to an area that is conducive to meeting their specific needs.

address the emotional well-being of children, be able to identify significant mental health problems and liaise with the appropriate services. The *hospital standard* in the Children's National Service Framework (DH 2003a and b) states that all hospitals treating children and young people should have policies and child and adolescent mental health liaison services in place to deal with:

- ◆ management of overdoses and deliberate self harm
- ◆ acute psychiatric crisis
- ◆ direct clinical work
- ◆ complex cases
- ◆ child protection cases
- ◆ long term and life-limiting illness
- ◆ the death of a child.

Research from the Mental Health Foundation (Leon, 2001) highlights the need to develop specialist services to tackle the mental health needs of young people who misuse drugs or alcohol, as well as those who self harm or have an eating disorder. Children and young people from minority ethnic communities, looked after children and young people with

attention deficit hyperactivity disorder also need specialist care.

However, there is inadequate inpatient and specialist provision in areas such as forensic services, made more damaging because of staff shortages that impact on the delivery of a high quality service. The entry gateway must be broadened for children's nurses, school nurses and health visitors who want to work in this specialist area. This is crucial because only 10% of children with emotional and mental health difficulties are seen at anyone time in tier three child and adolescent mental health services. The majority of children with difficulties either go undetected, or are cared for in primary care settings (Kramer and Gerralda, 2000) by nurses who often do not have appropriate training. It is therefore vital to develop the capabilities of *all* nurses in identifying and addressing child and adolescent mental health issues (Griffiths, 2001).

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Involving young people in shaping service provision

Young people need to be involved in all aspects of service planning because they have important things to say about how they experience services and treatment regimes. They value informal, friendly approaches where they are listened to, and where they work in collaboration to come up with ideas (MHE, 2001).

To ensure the views of young people are taken into account and shape the development of new and existing mental health services and treatment regimes the Mental Health Foundation has asked the Government to establish a national strategy. This move has been welcomed and supported by the RCN.

Other professionals (Claveirole 2003) emphasise the importance of seeking the views of parents and carers. Using this information parents and carers, as well as siblings and wider family members, can be supported and empowered to help the children. There are already some good practice examples of this in the health service such as involving children and young people in staff recruitment and selection processes, and in training and education programmes.

3

Integrated working across and between services

Services for children and young people are provided by a variety of health care professionals and agencies.

Organisations involved range from education, and youth justice, to the Government-sponsored agency Connexions and the National Youth Agency. The agencies strive to tackle wider social issues that impact on a child or young person's emotional and psychological well being. However, evidence shows that services do not collaborate effectively, and young people experience difficulties in finding out about relevant services or which one is right for them.

The Scottish group SNAP (Public Health Institute for Scotland 2003) recommends an integrated model of promotion, prevention and care to address the growing incidence of child and adolescent mental health problems. The group suggests using preventive strategies to help children and young people develop coping mechanisms, self esteem and self-identity. This would include educating youth workers, teachers, parents, families, as well as the children and

Nursing education and training

young people themselves. All staff working with children and young people should receive child protection (RCN 2003a) education and training, including knowledge of the 1989 Children Act, the 1983 Mental Health Act and other relevant legal frameworks.

The RCN firmly believes that *all* staff at the points of interface between primary, secondary and tertiary health, as well as education, social care and the voluntary sector require further awareness of child and adolescent mental health issues. This should result in roles, responsibilities and referral pathways that provide early intervention and support. The RCN endorses a model where nurses in tier two to four supervise, train and advise those nurses in tier one.

The Government's National Service Framework for children in England (DH 2003b) states that it is essential that *all* staff working with children and young people understand how to address their emotional well being, and recognise significant mental health problems. The framework recommends education and training for *all* children's health care staff in how to recognise and respond appropriately to the mental health needs of children and their families. The department says that this would include education and training to deal with difficult situations.

It is clear that in the short term there is a need to focus on targeted education and training provision to:

- ❖ develop the skills and knowledge of non-specialist child and adolescent mental health nurses
- ❖ enhance the knowledge and skills of specialist child and adolescent mental health nurses to enable expansion of roles and responsibilities in areas such as eating disorders (Hampshire, 2003), working with drug and

alcohol users (Drug Misuse Information Scotland, 2003) and in children and young people with learning disabilities (DH, 2003).

In the medium term there is a need to influence and change the content of pre-registration nursing education across all branches. In future, nursing education must contain appropriate content on child and adolescent mental health issues.

However, there is some way to go. Research undertaken by both Sue Hooton (Hooton 1999) and the RCN (RCN 2003b) highlights the inadequate content of child and adolescent mental health in pre-registration programmes. Although there are some good examples where pre-registration nursing students in RN [Child] and RN [Mental Health] programmes have greater input to the courses than before. One such example is where an RN [Mental Health] programme has included a dedicated eight-week theory block followed by a six-week practical placement. Access to appropriate clinical placements enhances nurses' clinical experience, and helps to encourage nurses to consider child and adolescent mental health as a career option.

What the RCN would like to see in nursing education

- ◆ Pre-registration nursing programmes to include aspects of child and adolescent mental health and emotional well being, and the risk and protective factors that can hinder or enhance this, promotion, prevention, assessment, identification, sources of support and early intervention measures within pre-registration curricula
- ◆ Post-registration nursing education opportunities to be available for nurses working at tier one who have not received adequate preparation at pre-registration level (school nurses, community children's nurses, health visitors and community psychiatric nurses)
- ◆ Post-registration specialist child and mental health educational provision to be provided in a flexible learning framework, that promotes a coherent career pathway. This should include the development of nurses to work in tier three and four services, and cover preparation to undertake new areas of work

and specialist programmes encompassing opportunities for multidisciplinary and multi-agency learning at Masters level

- ◆ All nurses working in child and adolescent mental health services to be able to access clinical supervision and continuing professional development opportunities.

Leadership in child and adolescent mental health nursing

There is a lack of UK-wide leadership in child and adolescent mental health nursing. Children's champions would act as effective advocates for the needs of children and young people at all levels of service provision. They would also influence health policy and service developments. The All Wales Child and Adolescent Mental Health senior nurses have been extremely effective in raising the needs of children in the Welsh Assembly by active involvement in developing an all-Wales strategy (The National Assembly for Wales 2002).

Ensuring effective leadership in child and adolescent mental health services (CAMHS)

The RCN wants to see the following developments:

- ◆ the establishment of CAMHS nurse consultant posts in all service providers is crucial to ensuring effective leadership to influence practice and strategic level service developments

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Conclusion

- ◆ beacon sites of CAMHS nursing practice expertise should be identified in order to share and disseminate good practice
- ◆ investment in nursing research in the field of child and adolescent mental health
- ◆ designated CAMHS nursing representation in the health departments of each of the four UK countries
- ◆ CAMHS nursing representation in the local commissioning of mental health services for children and young people
- ◆ CAMHS representation in local workforce development work groups to ensure that accessible and appropriate education provision is contracted at pre-registration and post-registration to meet the current and future needs of local service providers.

The Royal College of Nursing believes that the current state of children's and young people's mental health service provision requires urgent attention. To address the deficiencies highlighted in this document. The RCN is calling for:

- ◆ an urgent review of the availability of specific service provision for children and young people with mental health problems³ across the UK
- ◆ the establishment of a career framework to attract and retain child and adolescent mental health nurses
- ◆ the involvement of young people in the design, delivery and evaluation of services, as well as mechanisms to enable nurses to develop the knowledge and skills to facilitate their involvement.

The RCN believes that the key to improving the current situation is the integration of services for children and young people and a workforce that is focused on, and educated in, the needs of children and young people.

³ A review of child and adolescent mental health services is currently being undertaken in Northern Ireland.

Nurses have a crucial role in the promotion of child and adolescent psychological and emotional well being – a role that should be acknowledged. In particular, specialist child and adolescent mental health nurses should be seen as equal partners within specialist care delivery teams.

For more information contact RCN Adviser Fiona Smith at fiona.smith@rcn.org.uk

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Useful contacts

Connexions

Connexions is an advice and guidance service in England for all 13 to 19 year olds. Its key objective is to encourage more young people to stay in education or training, so that an increasing number have the qualifications they need for further education or the world of work.

www.connexions.gov.uk

National Youth Agency

The NYA supports those involved in young people's personal and social development and works to enable all young people to fulfil their potential within a just society. Email nya@nya.org.uk or telephone 0044 (0) 116 285 3700.

www.nya.org.uk

SNAP

SNAP aims to bring together policy makers and practitioners from further education colleges and higher education institutions to explore the social inclusion agenda and its implications for their institutions and partner agencies, to help share good practice, and to contribute to the development of national and regional policies for widening participation in higher education. Email: snap@dundee.ac.uk or telephone 01382 345138, fax 01382 221057.

www.snap.ac.uk

YoungMinds

YoungMinds is a national charity committed to improving the mental health of all babies, children and young people.

Email: enquiries@youngminds.org.uk or telephone 020 7336 8446.

www.youngminds.org.uk

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