

**Children's Wellbeing Practitioner  
Programme for London  
and the South East:  
*Reflections from Cohort Four***

# INTRODUCTION

This brochure has been produced to showcase the work presented at this year's Shared Learning Event, to celebrate the third year (fourth cohort) of the CWP programme delivered by the London and South East CYP IAPT Learning Collaborative. CWP stands for 'Children's Wellbeing Practitioner', a role that offers evidence-based interventions in the form of low intensity support to children and young people with mild/moderate emotional wellbeing and mental health problems. The third year of this programme marks a new phase in this development where larger numbers of CWPs are offering interventions to more children and young people in services across London and the South East.

The CWP training programme was set up in response to the Government's 'Five Year Forward View for Mental Health' (2016) which acknowledged the need of greater mental health provision for children and young people. This set a target of offering interventions to 70,000 more children and young people annually by 2020, by training up 1,700 new staff in evidence-based treatments.

CWPs and their Supervisors / Service Development Leads have received training delivered by King's College London and University College London, in collaboration with the Anna Freud National Centre for Children and Families. These post graduate certificate courses have trained the CWPs to offer brief focused evidence-based interventions with children and young people experiencing:

- Anxiety (primary and secondary school age)
- Low mood (adolescents)
- Common behavioural difficulties (working with parents for under 8s)

CWP services have developed locally to provide emotional wellbeing and mental health support to children and young people, which has resulted in a wide variety of service models. This diversity in approach, data from the outcome of the interventions and service user feedback will be showcased at this year's Learning Event. We hope to take stock of everyone's achievements, reflect on the impact that this training has on service development and, most importantly, demonstrate how it offers effective support to children and young people with mild to moderate difficulties.

Claire Evans, Head of CYP MH Workforce Development at Anna Freud National Centre for Children & Families

Jessica Richardson, Co-Director and Clinical Lead of CYP MH at Kings College London

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# EPSOM CHILDREN'S WELLBEING TEAM



Anna Norman, Stephanie Pointing, Maria Butler, Solin Hamawandy

## WHO ARE WE?

We are a new team of Children's Wellbeing Practitioners (CWPs) based in Surrey. We are part of the Surrey Child and Adolescent Mental Health Service (CAMHS) Early Intervention Team.

## WHAT DO WE OFFER?

As a new service we have developed our service to fit the needs of the local community. We work in partnership with selected primary and secondary schools, offering 6-8 sessions of 1:1 Guided Self-Help (GSH). In addition to this, we also offer or have created:

- Group sessions
- One off workshops
- Drop in sessions
- Assemblies and PSHE lessons

- Self-help YouTube videos
- Resources
- Easy read manuals
- Audio recorded manuals

## REFERRAL PROCESS

CWP referral form completed by client (self-referral) or school (with consent of client)



Referral given to school's allocated CWP and is discussed within CWP team meeting



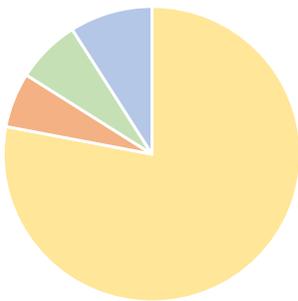
Assessment offered if appropriate or signposted elsewhere if deemed not appropriate

## GUIDED SELF-HELP

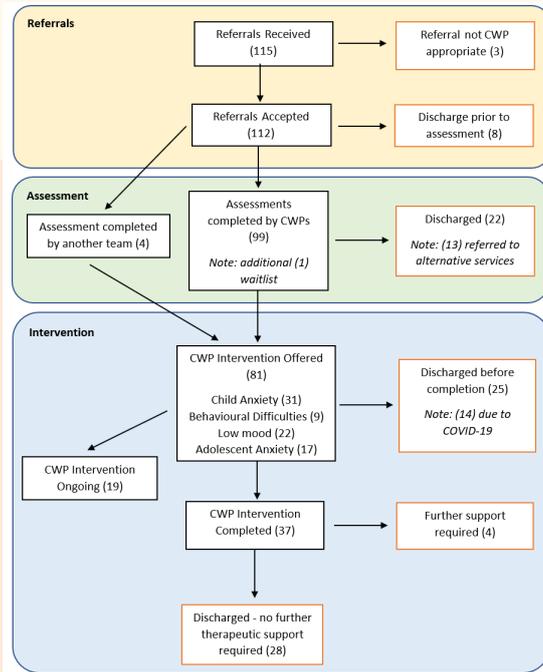
### ASSESSMENTS

A total of 99 assessments were completed by CWPs.

Assessment Outcomes



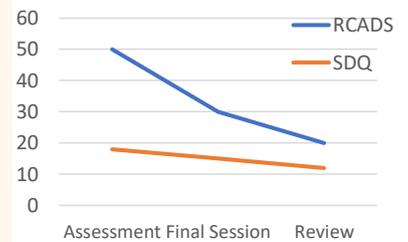
- CWP intervention
- Signposted elsewhere
- Referred to CAMHS
- Discharged



### GSH INTERVENTIONS

A total of 81 clients were offered GSH interventions.

Average RCADS and SDQ scores over time.



Average GBO scores over time



## CLIENT FEEDBACK

The Experience of Service Questionnaire (ESQ) was used to gain feedback.

- "She gave me advice and a positive view of my situation"
- "I enjoyed all of it. It was really easy to come and see you"
- "I felt listened to and was given very helpful tips"
- "Everything was supportive and helpful!"
- "I was given lots of techniques to make me feel better when I'm stressed"
- "I really feel comfortable being me and talking about my problems"
- "I have realised other people experience the same thoughts as me"

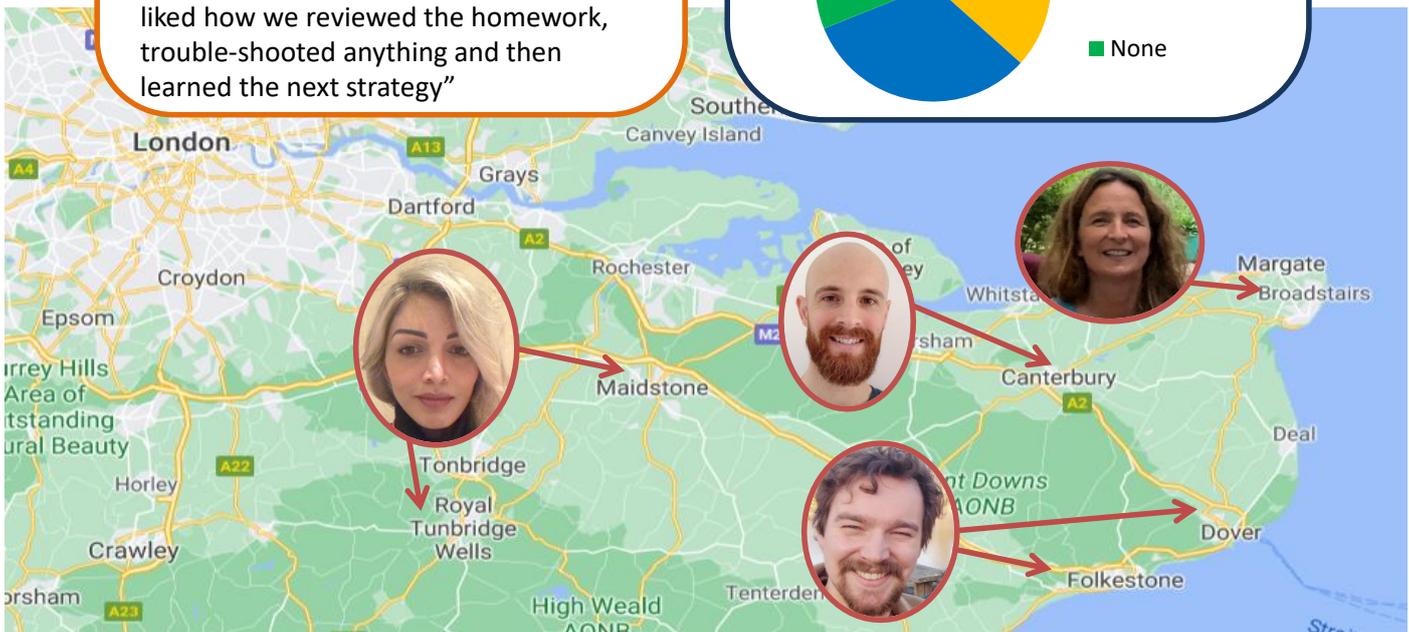
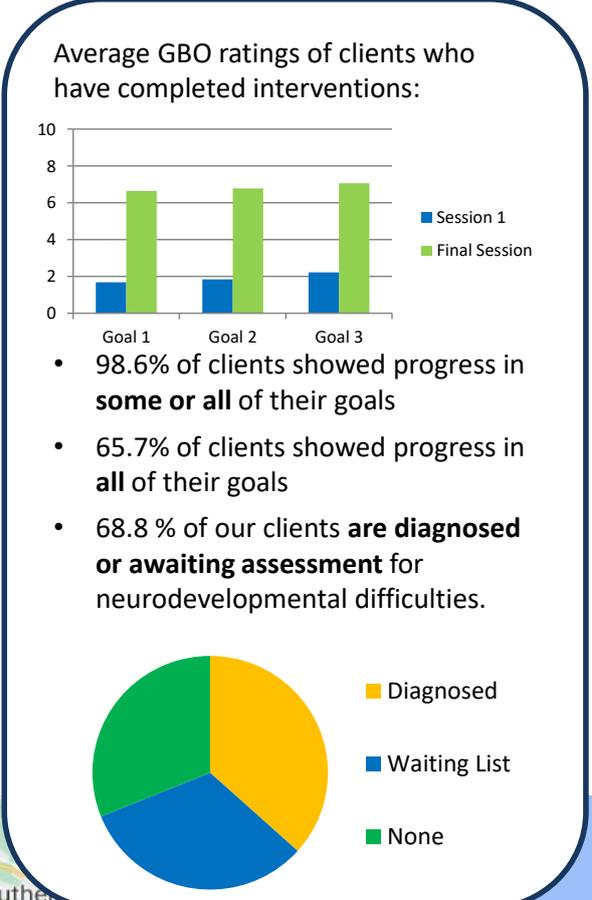
# KENT AND MEDWAY CWP<sub>s</sub> – SHARED LEARNING EVENT



As trainees, we were placed in different localities around the Kent and Medway area. Along with our CWP training we have also learned how to work as part of an existing multi-disciplinary team which has helped immensely with our successes.

**Cases for all Kent: 160**  
**Individual Total: 71**  
**Group Total: 89**  
 Individual Anxiety: 44  
 Individual Child Anxiety: 7  
 Individual Behaviour: 10  
 Individual Low Mood: 10  
 Group Anxiety: 36  
 Group Child Anxiety: 43  
 Group Behaviour: 10

**Service User Feedback:**  
 “...really helpful, listened well, never judged, pointed us in the right direction.”  
 “...she was able to have a connection with you. We all really appreciate this.”  
 “before the sessions everything felt like a blur. But now... I can manage it”  
 “...every session was well explained... I liked how we reviewed the homework, trouble-shooted anything and then learned the next strategy”



# REFLECTIVE GROUP

## South London And Maudsley NHS trust Lewisham CWP Service



To lift the mood of the group following temporary service closure due to COVID-19, we began to deliver the low mood intervention to one another.

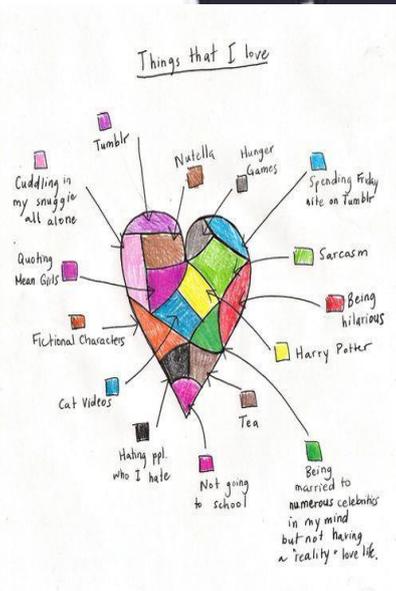
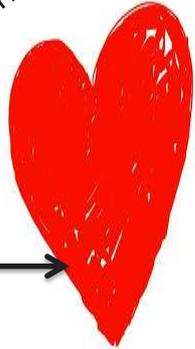
Initially, the group was a place to look back on our experience with delivering the interventions.

The group is on a rotating basis so all trainees take turns in leading it.

We each completed the intervention tasks at home and reflected on our experiences during the group sessions. Doing this enabled us to put ourselves in the young people's shoes and see things from their perspectives.

The group has now become a space to try out different evidence based therapeutic activities. Not only has this helped build practitioner confidence but it enables our service to provide compassionate care which has been found to improve treatment outcome.

COMPASSIONATE CARE



# Amelia, Nicola, Anna & Kathy



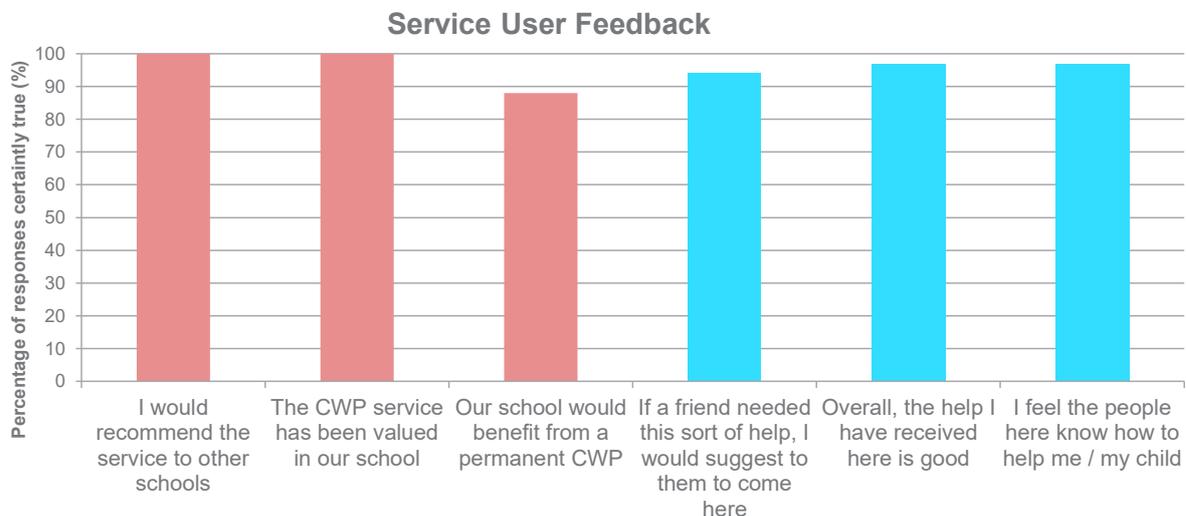
We are a Tier 1-2 CAMHS service and are based in eight schools across Richmond and Kingston. Our roles are term-time only and we see parents and young people in schools. From our service based learning task we identified a gap in our service-user feedback and involvement.

*“The advice and suggestions have helped tremendously, beyond my expectations. In a short space of time, my son has become more confident and independent.” – Parent*

*“I felt listened to. I've learned how to manage things by myself. I got given useful coping methods that are really helpful. It was very easy to share my thoughts and feelings and I was treated very well,” - Adolescent*

*“It helped us to manage some of the more difficult mental health cases in school that we were struggling to signpost outside school. The fact it occurred in school meant that disruption for the student was low,” - Primary Link worker*

In addition to Experience of Service Questionnaire (ESQ) we set out to seek more qualitative feedback from every family; asking them verbally at the end of each intervention and offering them the opportunity to provide written comments, pictures or recordings of their experience. The following audit data includes work completed by both trainee and qualified CWPs.



**Key audit findings for future service development are:**

- There is a lack of representation in referrals from adolescent males
- Referrals for BAME students are not reflective of the wider population in Kingston
- Families fed back that they found the lack of provision over the summer holidays unhelpful



Respectful



Open



Collaborative



Compassionate



Consistent



# SOUTHWARK CAMHS CWP TEAM (TIER 2)



**SOUTHWARK YOUNG PEOPLE'S WELLBEING TEAM**

We are a friendly team and we are here for you.

We work through the reasons you may not be feeling your best self. Our help might help you.

The words we use to work together are: 'Guided self-help' (GSH).

"Understand your mood, change your life"

We help children and young people between 5 to 18 years with...

We meet once a week for eight weeks

You have our support

Fears and worries

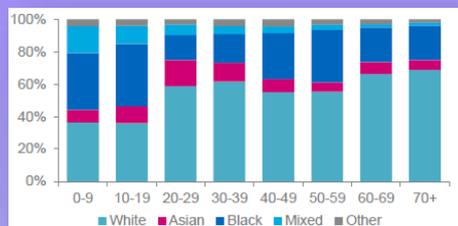
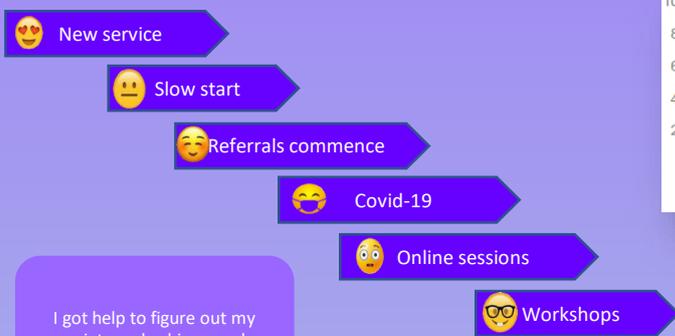
Low mood - feeling sad or down.

We help younger children with difficulties through working with their parents.

We help you understand your difficulties.

We help you plan how to keep all that you learn going.

You can get support from us through a referral by your GP or school.



**Diversity in Southwark**  
GLA 2016, Round trend-based ethnic group population projections, 2015. Gov.uk, 2019: southwark.gov.uk/JSNA

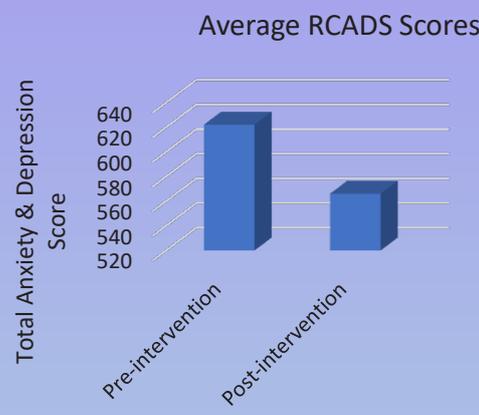
I got help to figure out my anxiety and achieve goals

I was taken seriously

I wasn't laughed at

I was listened to

A. Anxiety     C. Behaviour  
 C. Anxiety     Low Mood

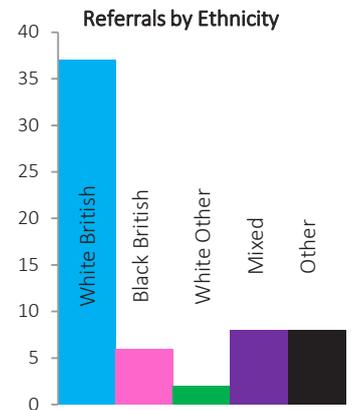
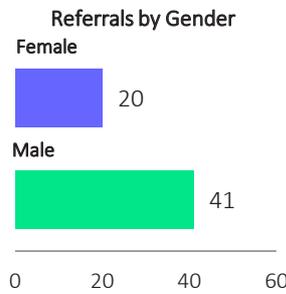
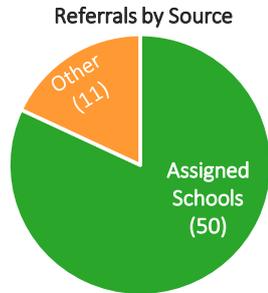


**Case study**  
Challenging behaviour case with dad of 9y boy:

- School work suffering as not focusing
- Poor boundaries at homework time
- Unclear instructions - too adult
- GBOs increased from 4 to 7
- Promising school report
- Now focuses first, plays later!

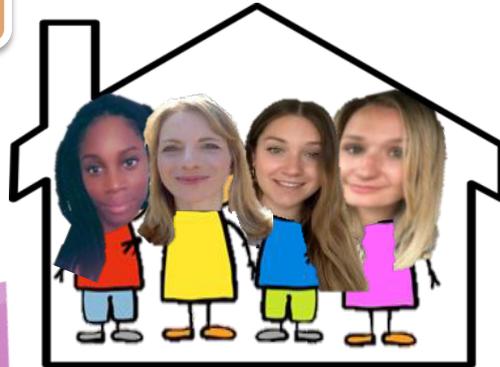


As a team, we received **61 referrals** between January 2020 and July 2020 from **schools** we are each assigned to as well as **other organisations** in Sutton such as other schools, CAMHS, and Off the Record.



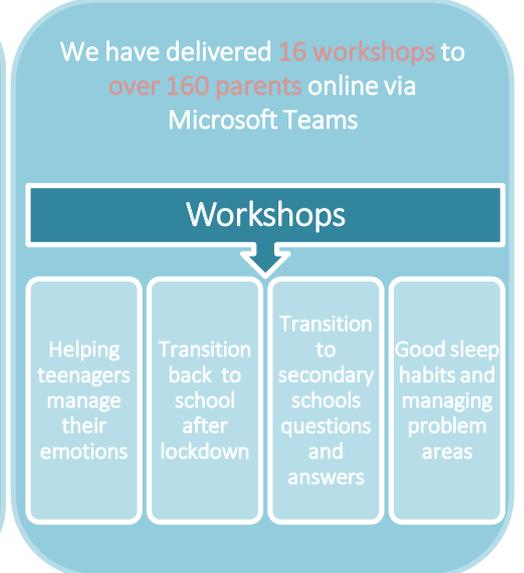
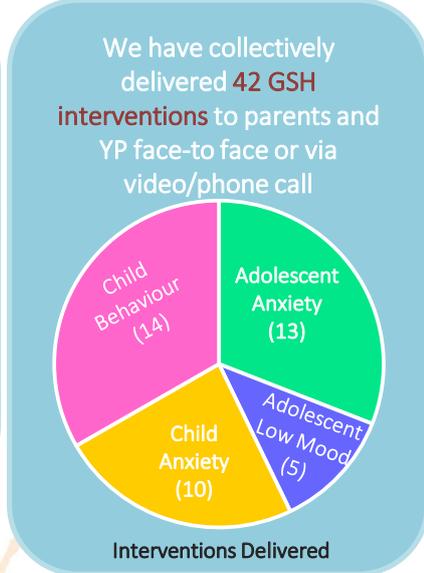
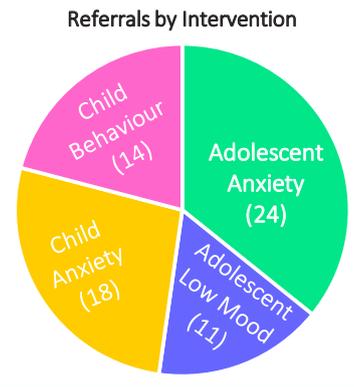
How have we used the GSH model to guide us?

How have we adapted as CWP's?

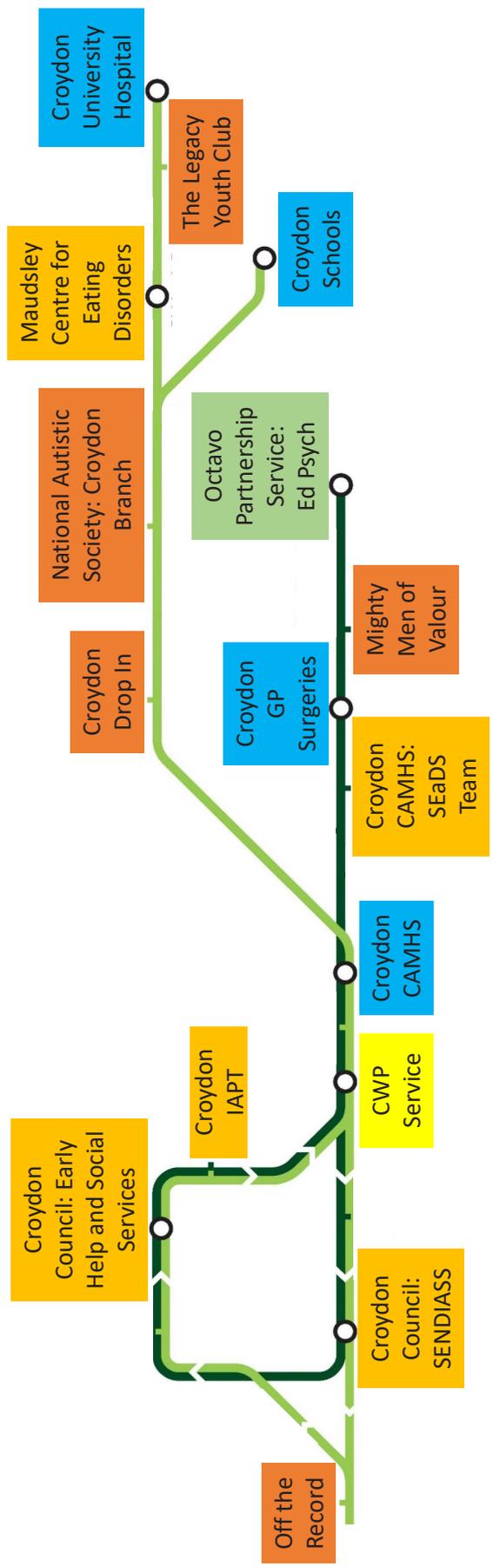


## Sutton CWP Team

Talibah B, Hannah M, Zara T & Claire W



# Croydon CWP Service's Involvement in Patient's Journey



**Legend**

- Third Sector Charities
- Majority of Incoming Referrals
- Statutory Services
- Partnership Agencies



**EVERY JOURNEY MATTERS**

# The story of the new Merton CWP service

## Autumn 2019

That's when we got to know our borough. We visited the Youth Offending Service, Family Therapy Services, Children's Services, Mental Health organisations, CAMHS...our local libraries and coffee shops too!



## January 2020

We moved into our new base: a primary school in Mitcham.



We started accepting referrals from the school's SENCO.

## We are family

We ran a primary school coffee morning. We introduced our service and raised awareness of GSH for child anxiety to parents.



We also ran Year 12 and 13 PSHE workshops, in which we quizzed students on their knowledge of the symptoms & causes of anxiety and low mood. We then did some psychoeducation and presented our service offer. We received many referrals through these workshops.

We conducted webinars in response to the Covid-19. We delivered transition back to school after lockdown: managing children's worries webinar to parents of children in primary schools.



## Numbers

We expanded our referral intake from 1 to 6 schools.

We work with 6 schools, 5 primary schools and 1 secondary school

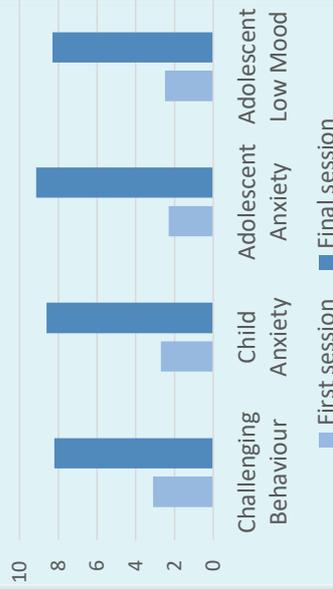


"It was nice to have someone listen to me and make me feel like my worries are actual worries and didn't dismiss them." Young person

"Practitioner has a good understanding of how to help with behavioral problems. She was good at listening and suggesting ways forward." Parent

## Reach for the stars

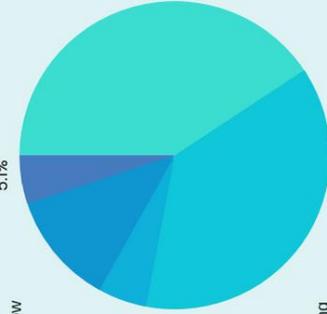
Average goal based outcome scores



## Workworkworkworkwork

We have worked with 59 families

Anxiety & Low Mood (Adolescent) 5.1%



Child Anxiety 40.7%

Challenging Behaviour 37.3%

## Adapting for ASD

We adapted the Challenging Behaviour manual to meet needs of children who have received an ASD diagnosis or are awaiting an assessment.

- **New materials** were created such as on one-on-one parent-child social coaching to increase social skills within the family, peer social coaching to improve social skills with peer group, and creating a support network for the parent, as it can be isolating caring for a child with ASD.



- **Adapted Special Play**, which included spotlighting, encouraging eye contact and social skills such as turn-taking.
- Created handouts for parents to use **visual supports** including story boards and visual schedules, to decrease anxiety surrounding changes and transitions.

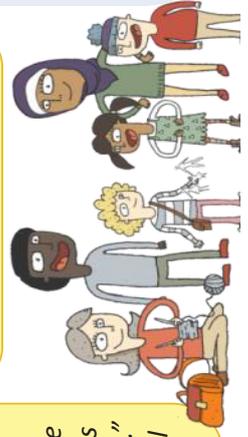
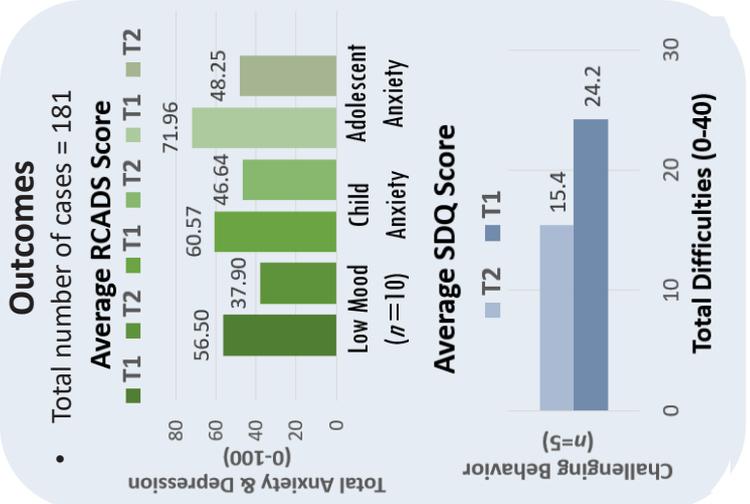
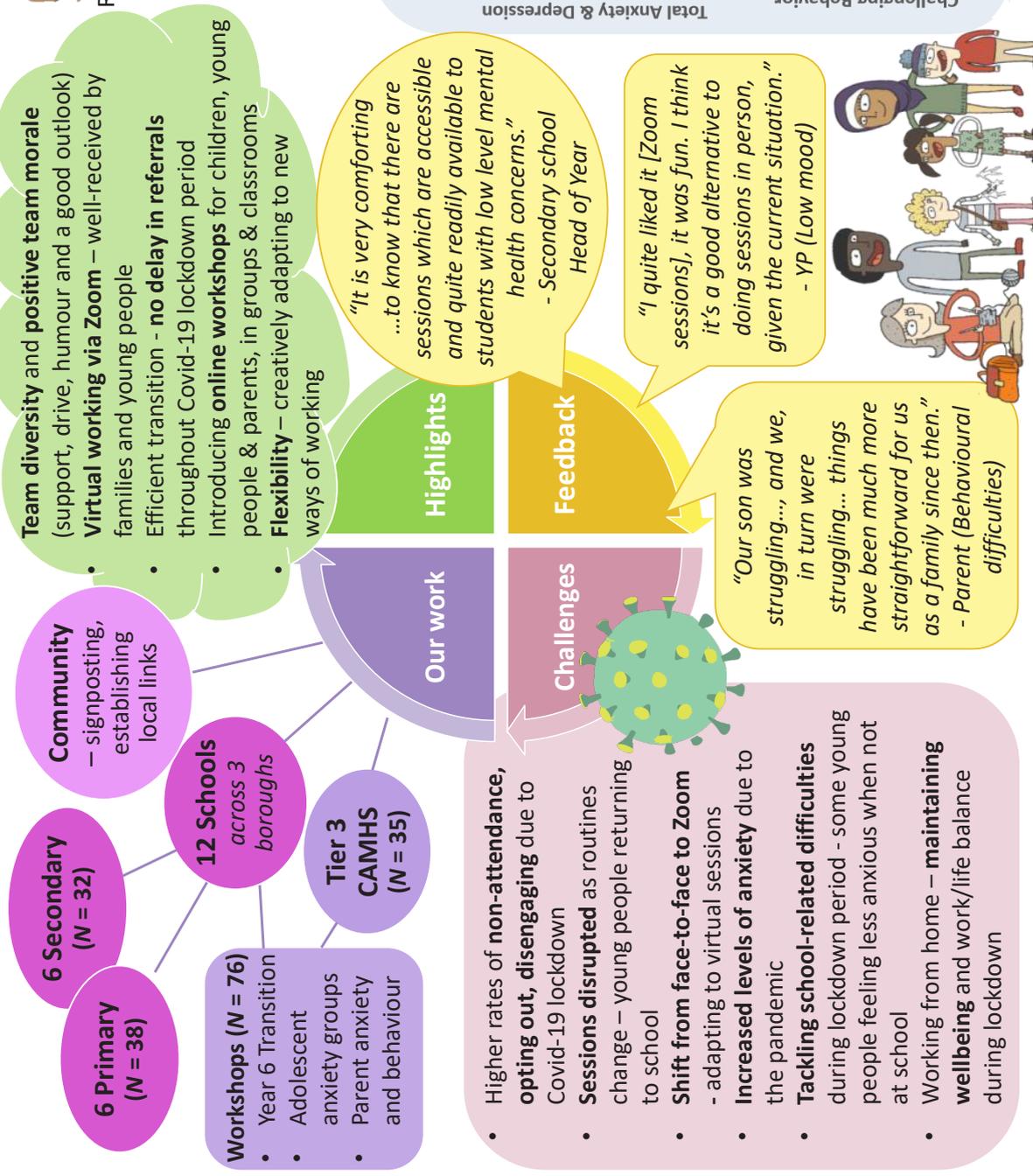
# Brent, Harrow & Hillingdon CWP Service



- CWP service based in CAMHS, with outreach to local primary and secondary schools and links to community organisations.
- 50-65% of the population identify as BAME. Large Christian, Hindu & Muslim populations.

## Cohort 4 CWP Team

<b>Brent</b>	<b>Harrow</b>
Rebecca Shaw	Joey Wong
Katia Cancedda	Mary Oshinnaya
<b>Hillingdon</b>	<b>Supervisor</b>
Lorraine Brown	Geoff Chan
Amanda Pegrum	







# Adapting to the needs of students during the COVID-19 pandemic and beyond

Hammersmith and Fulham CAMHS  
Children's Wellbeing Practitioners (H&F CWP)



## Introduction

The creation of Mental Health Support Teams (MHST) reduced the scope for CWPs to provide GSH to schools (Department of Health, 2017). Nonetheless, H&F CWPs have traditionally had a good partnership with William Morris Academy and offered an exam stress group, to students completing GCSE and A-level exams. Due to COVID-19 and the impact on exams, we liaised with the Student Services Manager to determine what would be most helpful for students.

## Method

Based on discussions with the school, we created a survey to explore the need of students. The survey included a check-in with their mental wellbeing, whether they needed any tailored support on anxiety or low mood, and their preference of receiving this support.

## Results

Figure 1 details students rated over mental health during COVID-19. Figure 2 shows mental health related concerns rated by students.

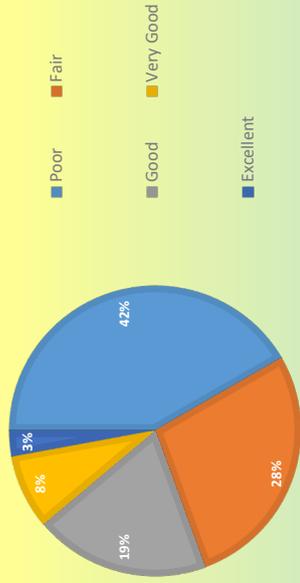


Figure 1: Overall student mental health rating.

We also asked students their likelihood of attending a live virtual workshop and 59% rated they were unlikely. Based on the results and further liaison with school, we created two 30 minute pre-recorded presentations on general stress and anxiety and on low mood. These were added to the school website for students to access and information on how to refer to our service was also provided.

## Conclusions and moving forward:

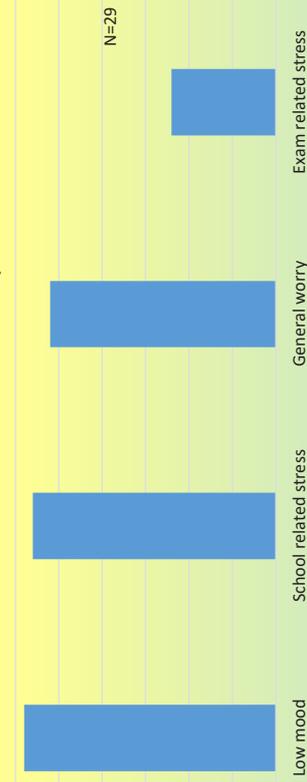
Our results along with research (Sweeney, Donovan, March & Forbes, 2019) suggest that virtual support can be more accessible and favoured over face to face support for some adolescents. This highlights that working in this way would benefit the needs of students and emphasises the importance of working collaboratively with MHST moving forward; to ensure that care is delivered in the right place and time for students (Department of Health, 2015).

## References

Department of Health. (2015). *Future in mind*. London: Department of Health.  
 Department of Health. (2017). *Transforming Children and Young People's Mental Health Provision: a Green Paper*. London: Department of Health.  
 Sweeney, G. M., Donovan, C. L., March, S. & Forbes, Y. (2019). Logging into therapy: Adolescent perceptions of online therapies for mental health problems. *Internet interventions*, 15, 93-99.



Figure 2: Student rated mental health concerns.



# Haringey CWP Service: COVID-19 Pandemic Response

## Who we are

We support families of children and young people aged 4-18 years old.

We offer early intervention for child anxiety and challenging behaviour, and adolescent anxiety and low mood, in the form of guided self-help.



## Increasing access to online CWP work:

- CYP lead and local GPs
- Haringey Early Help: awareness and attended meetings to identify referrals
- Haringey schools: 18 primary schools and 8 secondary schools to raise awareness and identify referrals
- Haringey and London Gender services to link up for workshops and referrals into the service

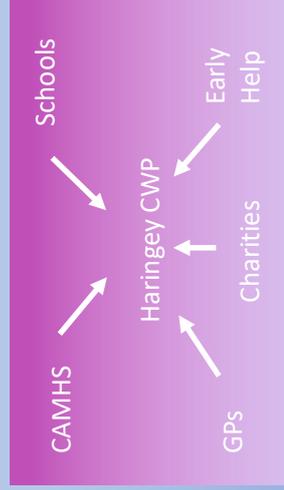
## COVID-19 Pandemic Response

Involvement with other CAMHS activities:

- Quality Improvement
- Auditing
- Dissemination of i-Thrive

## Shifting the CWP interventions online:

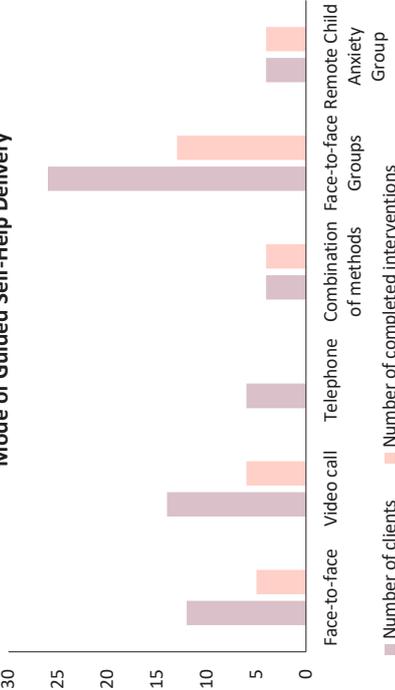
- Sessions via zoom and telephone
- Webinars on child anxiety, child challenging behaviour and adolescent mood management
- Recorded online seminar on Positive Parenting



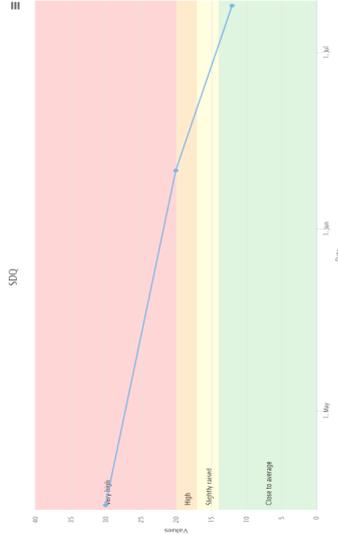
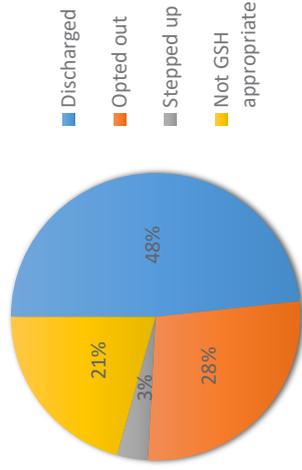
This year, Cohort 4 and 5 have further embedded in the Tier 2 Community Team, attending the weekly multi-disciplinary team meeting and delivering Guided Self-Help (GSH) in clinic.

We have also expanded our offer to include remote sessions, for both 1:1 and group interventions.

Mode of Guided Self-Help Delivery



Outcomes for 1:1 Guided Self Help Clients



### Case Study

- 11 year old girl of Chinese origin referred for GSH from Tier 3, while awaiting a neurodevelopmental assessment.
- Her mother was offered remotely delivered GSH for Challenging Behaviour.
- The parent-SDQ ratings showed improvement throughout the intervention.

"I never thought I'd see so much progress in such a short space of time. At the beginning I questioned why I was doing the [parent] work but the intervention has been so helpful for the whole family." Parent



Lucy Davy



Bonnie Brittle

### Future Service Goals

1. To increase CWP involvement in Participation groups. To create a parent group, in addition to the young person group.
2. To continue delivering and expand remote service delivery.
3. To further promote GSH in Hounslow, in order to reach an increasingly diverse population.



# Who are we?



**Islington CWP service** sits within a CAMHS tier 3 service, providing tier 2 early intervention to children, young people and families in Islington

**2020 Population diversity:** 48% White British/Irish, 10% Asian/Asian British, 12% Black/ African/ Caribbean/ Black British, 20% Other White (with Turkish / Turkish Cypriot the largest category) and 10% from a mixed background

**Mental health disorder prevalence** of 14% vs national average of 10%.

**2020 Socio Economic Deprivation**- 6<sup>th</sup> most deprived local authority in London and 53<sup>rd</sup> in UK

# What have we been up to this year?

**We have joined Islington's Social, Emotional & Mental Health (SEMH) Service**



**We have developed a survey and are collecting data about peoples experience of remote sessions**

**Service User Experience of Remote Therapy Survey - for people who have done remote therapy**

This survey has been created to understand your experience of remote therapy during this lockdown period. All members of the lockdown period should be invited to complete this survey. If you are currently, or have previously, been offered an offer of remote therapy, please ask your practitioner for this link if this is the one you should complete.

What type of remote therapy have you been accessing?

Telephone  
 Video Call  
 Telephone and Video Call  
 Other...

How did you feel about remote therapy when you were first introduced to the idea?

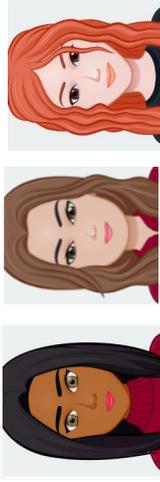
Using any number from 0 to 10, where 0 is very unhelpful and 10 is very helpful, how helpful did you think remote therapy would be when you were first introduced to the idea?

0 1 2 3 4 5 6 7 8 9 10  
 very unhelpful ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ very helpful

How do you feel about remote therapy now?

0 1 2 3 4 5 6 7 8 9 10  
 very unhelpful ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ very helpful

- ✓ Gives CYPs greater access and choice of services
- ✓ Reduces wait times
- ✓ Allows a more joined up experience for CYPs trying to access support for their mental health



**Victoria Catline Hannah Day Evelyn Smith**

## We have learnt about remote working

Team tea breaks	Boundaries
Practicing with children 'in vivo'	Utilising YouTube and online games
Suitable desk space	Utilising screen share

## We have brought some of the previous cohorts' ideas to life

**AUTISM** Joint sessions incorporating parents into the adolescent model  
**Anxiety model for children with ASC** and children into the parent led model



Workshops in Youth hubs e.g. Lift and Platform

## We still plan to...

Make materials accessible to deliver workshops in languages other than English

Use the Anxiety model for children with ADHD



## Pioneering the Point1 CWP Programme

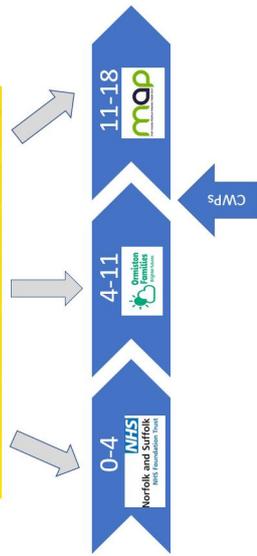


We are: Chris, Esther, Katie and Lin. We are the first CWP cohort in a Third Sector Organisation in the Norfolk Region.

### POINT1

emotional wellbeing for children and young people

Where do we fit?



### Challenges

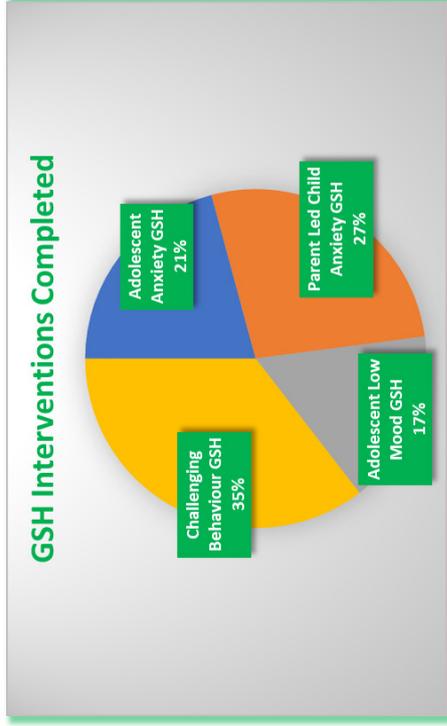
1. Completely new team within a developing service
2. No parent led pathways
3. Limited policies and procedures for CWPs
4. Large geographical area to cover
5. Covid-19

### Achievements

1. Developing relationships within and between services.
2. Embedding a parenting intervention pathway
3. Establishing the remit of the role
4. Increasing accessibility by working in the community
5. Making adaptations e.g supporting other staff in using GSH

## Who have we been Supporting?

- The total amount of 'meaningful contacts' we have had with young people and families is: **67**
- The total amount of GSH interventions we have completed is: **48**



## Here is some of our feedback...



"I liked that everything I said was heard and I found the worksheets (like the problem solving) were very helpful"



"Tailoring the strategies to examples of my child has been helpful. It's increased my understanding and confidence"



CWPs's have breathed life into our service and established new and exciting pathways of treatment for CYP and their families.

# From Timid To Tiger: A Treatment Manual for Parenting the Anxious Child

(Cartwright-Hatton et al., 2010)



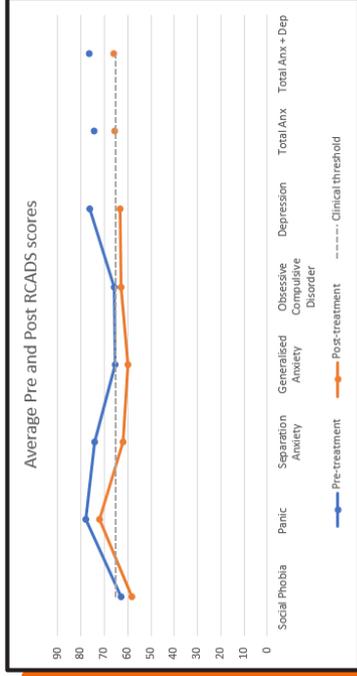
We are five Children Wellbeing Practitioner's; Amanda, Charlie, Elaine, Ellen and Fiona who work for Children Families and Young People Under 18's service in Suffolk within Norfolk and Suffolk NHS Foundation Trust.

**Introduction**  
From Timid to Tiger is an evidence-based CBT informed parenting programme for children aged four to nine years who are experiencing problematic anxiety and behavioural difficulties.

Week	Content
1	Introductions and basic concepts: 7 confident thoughts, anxiety pyramid and thoughts, feelings and behaviours.
2	Securing the Parent-Child bond through Play
3	Understanding Children's Anxiety
4	Using Praise to Build Confidence
5	Using Rewards for Motivation and Setting Limits
6	Managing Children's Worries
7	Using Withdrawal of Attention and Consequences
8	Review, Managing School and Celebration

**Why do we use this intervention?**

- Our service is not commissioned to support challenging behaviour, however this intervention supports managing some problematic behaviours seen in anxious children.
- From Timid to Tiger incorporates anxiety management techniques and parenting advice adapted from Webster-Stratton (2006).



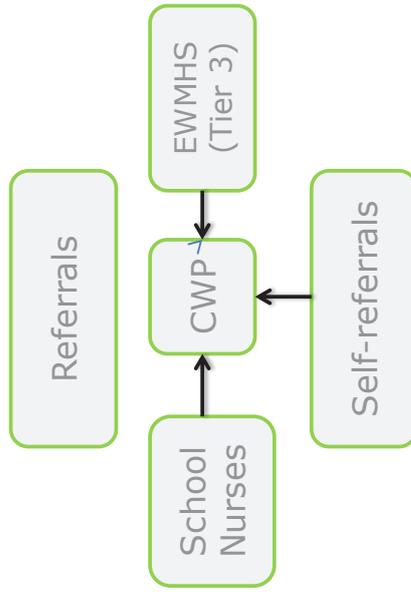
**Covid-19 Adaptations**  
Prior to the Covid-19 Pandemic TTT groups were held within the community. To enable the groups to continue, the following adaptations were made:

- Groups are held virtually on Microsoft Teams
- Invitations and materials needed for sessions are emailed to parents
- Materials are adapted such as use of videos instead of role play
- Group size: maximum 7

**Conclusion**  
From measuring average and pre and post RCADS scores from six recent participants of the From Timid To Tiger group, it is evident that:

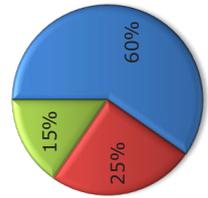
- Post-intervention scores are indicative of improvements in all areas of the RCADS, despite a focus on anxiety.
- This supports Cartwright-Hatton et al (2011) who found that 57% of 74 anxious children were free of their main anxiety disorder compared to a 15 % of the control group from this intervention.
- It does need to be considered, however, that the results above are from the Parents RCADS and therefore may not reflect the child's perception.

The Essex Child and Family Wellbeing Service provides support for families, child and young people across Essex. The CWP role was brand new to services and was integrated into a multidisciplinary team made up of School Nurses, Health Visitors and Healthy Family Support Practitioners. We are partnered with the Emotional Wellbeing Mental Health Service in Essex.

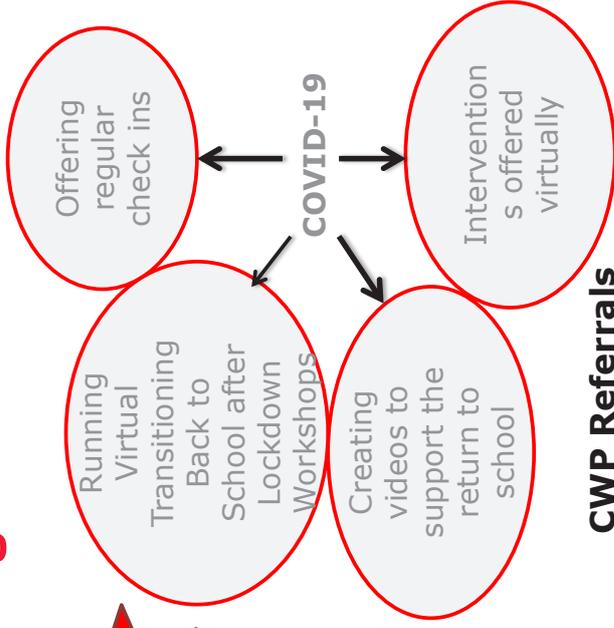


## Type of interventions delivered

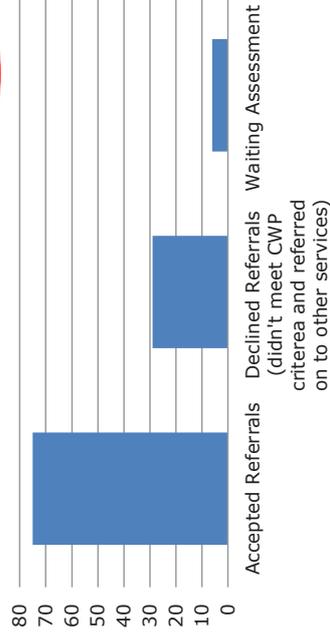
■ Child Anxiety ■ Adolescent Anxiety ■ Low Mood



The pie chart shows how many types of each intervention we have delivered. We noticed that majority of referrals and interventions delivered were for Childhood Anxiety.



## CWP Referrals



Since February 2020 we have received a total of 110 referrals into the CWP services. The table above shows the numbers of accepted referrals where work has been completed and how many were declined referrals who were signposted to other services..

**42 out of 46**  
Cases reported feeling better and having strategies to use in the future

