



- **Mental Health** = on a continuum with emotional distress at one end.
- **Emotional Distress** = describes negative emotion triggered by stressful event or underlying mental health issue.

Is it a mental health problem or is it normal adolescent angst??

⇒ Depends on **impact on functioning (TRAM tool)**

T transient
R reactive
A appropriate
M manageable

GENERAL APPROACH

History Taking
<p>1. Presenting Symptoms</p> <ul style="list-style-type: none"> ○ Psychological (<i>consider screening tools</i>) ○ Physical <ul style="list-style-type: none"> ▪ Sleep, appetite, energy, concentration ▪ CVS effects of anxiety ○ Functional impact: allows assessment of severity <p>2. Risk Assessment</p> <p>Significant risk of physical harm?</p> <ul style="list-style-type: none"> • Manifestations of significant distress <ul style="list-style-type: none"> ○ Self-harm/suicide) ways of coping with ○ Eating disorder*) intolerable feelings • Safeguarding concern • Protective factors <p><i>*see additional document for pathway</i></p> <p>3. PMHx of mental health issues and medication</p> <p>4. FHx of mental health issues</p> <p>5. HEADSSS tool includes alcohol and recreational drugs</p> <p>6. General physical health</p> <p>7. Identifiable Triggers Helps to:</p> <ul style="list-style-type: none"> • explore patient’s perceptions of issues • identify their priorities <ul style="list-style-type: none"> - <i>What is worrying you most? Why did you make an appointment?</i> - <i>What do you think is contributing to the way you are feeling?</i>
Mental State Examination
<p>1. Appearance and behaviour</p> <p>2. Speech</p> <p>3. Moods</p> <p>4. Thoughts or formal thought disorders</p> <p>5. Perception</p> <p>6. Insight and capacity: <i>If no capacity may need to consider Mental Health Act</i></p>
Risk Formulation
<ul style="list-style-type: none"> • Enhancing risk factors <ul style="list-style-type: none"> ○ Feelings: hopelessness ○ Thoughts about the future; suicidal ideation ○ Behaviours: self-harm; suicidal plans ○ Predisposing factors ○ Precipitating factors: internal and external triggers ○ Perpetuating factors: patterns of presentation • Protective risk factors <ul style="list-style-type: none"> ○ Internal resources ○ External support

General Management

Stage 1 - Initial Management

- Listen:** non-judgmentally and recap
- Validate:** acknowledge distress
- Explain:** with reference to triggers identified above by pts

Stage 1 - Ongoing Management *(Depends on Risk Assessment)* [CYP Mental Health Service Directory](#)

High level need Significant risk of physical harm or moderate to severe mental health problem

GP Hotline number for queries (Mon-Fri 7am-7pm): 0300 777 0606

General measures below +

- CYPMHs referral via SPA form (hpft.spa@nhs.net) +/- in a crisis 0800 6444 101 (24/7) (CCAT; CEDS, targeted team; PALMS)
 - **Urgent:** Immediate risk < 4hr, or If can keep safe < 7d
 - **Routine:** < 4wks

Moderate level need mild or moderate mental health problem

• STEP 2 professional referral via referral form [CYPMHS Step 2](#) 01438 730570

+/- **Safeguarding referral** via www.hertfordshire.gov.uk/childprotection

- protectedreferrals@hertfordshire.gov.uk (email to follow up safeguarding referrals)

Stage 1 - Ongoing Management

Low Level need (Emotional issue, mild mental health issue)

(1) Simple Behavioural Strategies

- a. Address specific problem
- b. General behavioural measures *
 - Timetable more valued enjoyable activities
 - Better work-life balance
 - Take up a relaxing hobby
 - Gratitude diary
 - Relaxation (mindfulness/ meditation)
 - Health behaviours:
 1. Regular Exercise
 2. Good Sleep: **HEAL**
 - (Health; Environment; Attitude; Lifestyle)
 3. Well-balanced diet
 4. Reduce smoking/vaping, drugs, alcohol
 5. Good digital hygiene
 - '5 steps to wellbeing'
 - [Journal](#)
 - [Five Ways to Wellbeing elearning modules](#)

(2) Signpost to: (see PILs appendix 3* and Just Talk Herts website <https://www.justtalkherts.org/just-talk-herts.aspx>)

Every Mind Matters <https://www.nhs.uk/every-mind-matters/>

a) Local Remote Digital Wellbeing Services

- i. With YOUth www.withyouth.org HMN /BFB Labs
- ii. The Sandbox: [Sandbox Homepage \(mindler.co.uk\)](http://SandboxHomepage(mindler.co.uk))

b) Local Face-to-face support

Supporting You Programme	HCC SfYP: 0300 123 7538 Supporting You Referral
School Nursing Team 5-19yrs	Public Health Nursing 0300 123 7572 School Nursing Referral
School Mental Health Support Teams (MHSTs)	Details of schools and colleges with an MHST are here
Childrens' Wellbeing Practitioner (CWP) 5-19yrs	Public Health Nursing hct.cwp@nhs.net (number to follow) CWP Referral
Talking Therapies team >16yrs	HPFT: 0800 6444 101 www.hpft-iapt.nhs.uk/
Hertfordshire Community Counselling Organisations	
YCT (East and North Herts) 11-18y Tel: 01279 414 090 www.yctsupport.com	Youth Talk (St Albans district) 13-25y Tel: 01727 868684 www.youthtalk.org.uk
Rephael House WGC/Hatfield 11-19y Tel: 020 8440 9144 www.rephaelhouse.org.uk	Signpost (Watford and Hemel) 10-25y Tel: 01923 239495 www.oneymca.org/signpost

(3) CYP with Special Educational Needs & Disabilities (SEND) support: [Hertfordshire directory of SEND services](#)

(4) Coordinated support from a few agencies incl social care

(Child in need not reaching safeguarding threshold)

Complete green single service request form for early help and request: Families First (FF) assessment or ring FF triage: 01438 737 575 or direct parents to 0300 123 4043 to request a FF assessment



Stage 2

(depending on level of comfort)

- (1) ASK PATIENT TO GIVE SPECIFIC EXAMPLE and use CBT model to help identify vicious cycle**
- (2) Discuss early solution-focused management to break vicious cycle**
 - a. **Behavioural strategies** - as above *
 - i. Encouraging positive behaviours
 - ii. Targeted to specific examples: recognise the behaviour in relation to the feelings
 - b. **Cognitive strategies**
 - i. Challenging negative beliefs – ‘what would other people say?’
- (3) Homework and follow up**
 - a. 1 general change to reduce emotional distress
 - b. 1 specific strategy to impact on how he/she feels: Behavioural or Cognitive
- (4) Review and recap: ‘let’s review what we have just discussed, your priorities and action plan’**