

Thrive Training and Workforce Development for multi agency staff working with Children, young People and Families.

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Early Help



This Training Plan aims to develop the skills, knowledge and confidence of the frontline workforce (both paid and voluntary) across all services working with children, young people and families including schools.

It focuses on:

Improved awareness and understanding of children and young people's mental health across a range of organisations working with children, young people and families

Improving understanding of risk and protective factors which can impact on or improve emotional health and wellbeing and the benefits of support from a trusted adult.

An improved offer for children and young people most vulnerable to poor mental health, making it easier for them to access the support when, and where they need it.







A range of delivery methods will be used to extend the reach and accessibility of the training and support dissemination of courses.

This will include:

face to face and virtual facilitated training courses,

non-facilitated online learning sessions

access to short training films,

webinars,

thematic events

networks and forums e.g. schools resilience network







The Training Framework has 4 levels

Respond

Initiate

Intervene

Influence

The framework is adapted from prevention and lifestyle behaviour change competencies framework (NHS Yorkshire & Humber, 2010)







This includes any staff member who comes into contact with children and young people, but who
do not have a specific pastoral role. This might include sessional youth work staff, caretakers,
admin staff or schools lunchtime supervisors who have limited contact with young people. On the
other hand, teachers who spend a lot of time with young people but have little opportunity for
informal discussion might also fall within this category.

Hel

Respond

These staff will not need an in-depth understanding of mental health but must be able to respond appropriately if a child or young person begins to ask questions, displaying signs and symptoms or raises/discloses an issue. They must be able to engage with children and young people and use basic skills of awareness, engagement, and communication to listen the child/young person and respond by proving basic information and advice and escalate the issue if appropriate.

Examples of Training include facilitated training such as: YMHFA awareness, self harm awareness, Identifying and talking about suicide,

Self facilitated training including: conversations about mental health, supporting family wellbeing, Talk suicide, Introduction to mindfulness, Introduction to Adverse Childhood Experiences, Understanding the teenage brain



This includes any staff who work closely with individual or small groups of children and young people in less-structured contexts. This could be youth workers, teaching assistants, etc.

Hell

Although these staff do not need an in-depth understanding of mental health, they will have pre-established relationships with young people and be well placed to notice early warning signs. They are likely to be the initial source of support for young people who are starting to struggle and should feel confident in initiating conversations about emotional well-being to help the child/young person talk about any worries. These staff will be able to select and use brief intervention techniques that help individuals take action which may include starting, stopping, increasing or decreasing behaviour/ activities. They should also be able to support the child/young person to access other services as appropriate e.g. make a referral with their consent.

Examples of Training include facilitated training such as: YMHFA (1 day), Self harm awareness, Identifying and talking about suicide, Mindfulness: Lessons for Practice, Attachment awareness, Understanding sleep.

Self facilitated training including: Anxiety & Trauma, Introduction to mindfulness, Introduction to Adverse Childhood Experiences, Understanding the Teenage Brain

Initiate



Intervene

This includes staff with a specific role in relation to mental health or emotional wellbeing. These people will be delivering low level interventions to individuals and/ or small groups.

These staff require a more detailed understanding of key issues, especially those for which they run interventions. Although they might not have regular interactions with most children and young people in their setting, they will be an essential source of support for those facing difficulties. They will need to be able to select and use appropriate techniques and approaches to provide support to children and young people to deliver change and to maintain these changes over the longer term. They should also be able to support the child/young person to access other services as appropriate e.g. make a referral with their consent.

Examples of Training include facilitated training such as: YMHFA (2 day – Mental health first aider), Applied Suicide Intervention Skills, Self harm response, Understanding Sleep, Mindfulness: Lessons for Practice, Attachment awareness, Elsa, Ambit

Self facilitated training including: Anxiety & Trauma, Understanding the Teenage Brain

This includes staff, whether working directly with children and young people or in management roles (e.g. SLT members, schools mental health leads, school governors, trustees etc.) who act as a resource for the support, training and education of others and can influence policy or practice around emotional health and well-being. They could be involved in identifying and discussing new approaches, sharing practice, networking with other organisations or supporting colleagues to develop their practice especially those who provide support at the respond, initiate and intervene levels.

Influence

These people need a detailed understanding of issues relating to children and young people (and families) mental health and emotional well-being, and more specifically their implications for practice. They need the knowledge and skills to create, analyse and evaluate effective support packages and also to request additional support where necessary.

Examples of Training include facilitated training such as: Leading Mental Health from the Middle, Development Programme for School Mental Health Lead, Developing your school mental health policy, Governance Lead for School Mental Health and Wellbeing

Self facilitated training including: Understanding the Teenage Brain.



Impact

 Improved confidence and understanding of the issues in multi agency staff including the role of "Trusted Adult"

Early

Help

- Improved joint working and shared language
- Improved understanding of the CYP Mental Health/Thrive system
- Improved identification of need and appropriateness of referrals into services
- Organisations embedding training into inductions/PPD's etc.
- Schools and Youth Organisations achieving the Whole School/Organisation approach or working towards this
- One plan for the city





Next Steps

- Training Audit to identify and target underrepresented teams on training
- Development of future modules to respond to identified need e.g. Eating disorders, School governor training, Senior mental health lead training in schools.
- Implementing a city wide approach to trauma informed practice





Any Questions?

For more information please visit:

https://www.howareyoufeeling.org.uk/headstart-trainingprogramme-page

www.howareyoufeeling.org.uk/professionals