

Needs based guidance for Social and Emotional Mental Health (SEMH) for Children and Young People in North Yorkshire

This document has been developed to support professionals working with children and young people to help identify the best way to provide support for social and emotional mental health in North Yorkshire. The document uses the principles of the [i-thrive framework](#) (please note, i-thrive is different from the Thrive Approach to social and emotional wellbeing) and links to the 5 needs based grouping: Thriving, Getting Advice, Getting Help, Getting More Help and Getting Risk Support.

Children and young people's needs may not neatly fit into one section of the i-thrive framework and may move between the sections of the framework during different stages and events in their life. The voice of children, young people and families is a central part of this framework.



Thriving

Most, if not all children and young people will experience the normal difficulties of life and do not need individualised advice or support around their mental health issues. They will benefit from whole school practices and inclusive environments that promote protective factors and social and emotional wellbeing, for example:

- regular PSHE lessons, covering a range of topics related to social and emotional health and wellbeing, friendships, and management of emotions
- curriculum activities that build resilience and the ability to take the knocks and setbacks of life
- regular, relational 'check-ins' with staff at all levels (i.e. adults taking an active interest in the children and young people in their care)
- a stimulating curriculum that encourages investment in their own education, that promotes talents and interests and that raises aspirations
- positive role models amongst staff and other pupils who can show empathy, warmth and be non-judgemental

[Compass Phoenix](#) and [Wellbeing in Mind Teams](#) provide support to schools and colleges across North Yorkshire. They help increase the **skills, confidence and competence** of staff dealing with emotional and mental health concerns to create a "Thriving" environment for Children and Young People.

PRESENTING NEEDS (examples)

It may not always be obvious when a child or young person is struggling to maintain good mental health. The following indicators **should not** be used as a checklist but may assist in determining whether a child or young person might benefit from support and where this could be accessed.

| <h3>Getting Advice</h3> <p>This category includes children and young people who present mild or temporary difficulties whilst adjusting to the normal difficulties of life and would benefit from either self-support or support within the community.</p> | <h3>Getting Help</h3> <p>This category includes children and young people presenting moderate difficulties who would benefit from targeted, evidence-based interventions provided by key professionals.</p> | <h3>Getting More Help</h3> <p>This category includes children and young people presenting significant difficulties who would benefit from extensive long-term interventions provided by key professionals.</p> | <h3>Getting Risk Support</h3> <p>Children and young people within this category may have some or many of the difficulties outlined in the Getting Help or Getting More Help sections but, despite extensive input, they or their family are currently unable to make use of help, or more help and they remain a risk to self or others.</p> |
|---|--|---|---|
| <p><u>School Performance</u> SEMH need is resulting in some mild and temporary changes that impact school performance and/or attendance (e.g. sometimes struggling to concentrate, some inconsistencies in academic performance, sometimes late)</p> <p><u>Eating Habits</u> SEMH need is resulting in some mild and temporary changes in eating habits (e.g. occasionally misses a meal, overeats or has a negative body image)</p> <p><u>Sleep Patterns</u> SEMH need is resulting in some mild and temporary changes in sleeping habits (e.g. occasional changes in sleep routines)</p> <p><u>Behaviour</u> SEMH need is resulting in some mild and temporary observable changes in behaviour (e.g. sometimes finds it difficult to be separated from caregiver)</p> <p><u>Physical appearance and self-care</u> SEMH need has resulted in some mild and temporary observable changes in appearance and self-care (e.g. sometimes wears dirty clothes or hair is unbrushed)</p> <p><u>Relationships with peers</u> SEMH need is starting to impact on friendships and relationships with peers (e.g. sometimes isolates from peers).</p> | <p><u>School Performance</u> SEMH need is moderately impacting on school performance and/or attendance (e.g. struggling to concentrate in multiple lessons, sustained changes in academic performance, sustained changes in school attendance or lateness)</p> <p><u>Eating Habits</u> SEMH need is moderately impacting on eating habits (e.g. regularly avoiding meals or overeating, negative body image)</p> <p><u>Sleep Patterns</u> SEMH need is moderately impacting on sleeping habits (e.g. changes in sleeping routines, unable to get to sleep, waking regularly through the night, sleeping more than usual, regular bad dreams)</p> <p><u>Behaviour</u> SEMH need has resulted in some moderate observable changes in behaviour that has moderately impacted on daily functioning (e.g. regular difficulties separating from caregiver, not wanting to leave the home, regular feelings of hopelessness or irritability, self-destructive behaviour, regular anger outbursts, challenges with managing emotional regulation)</p> <p><u>Physical appearance and self-care</u> SEMH need has resulted in some moderate observable changes in appearance and self-care (e.g. regularly wearing dirty clothes, hair regularly unbrushed, regularly forgetting lunch)</p> <p><u>Relationships with peers</u> SEMH need is moderately impacting on friendships and relationships with peers (e.g., regularly self-isolating from peers, regularly avoiding social activities they usually enjoy)</p> | <p><u>School Performance</u> SEMH need is significantly impacting on school performance or attendance for an extended period of time (e.g. Have struggled to regularly attend school for an extended period of time, significant changes in academic performance for an extended period of time)</p> <p><u>Eating Habits</u> SEMH need is significantly impacting on eating habits for an extended period of time (e.g. the changes in eating habits may be resulting in physical changes)</p> <p><u>Sleep Patterns</u> SEMH need is significantly impacting on sleeping habits for an extended period of time (e.g. changes in sleeping routines, unable to get to sleep, waking regularly through the night, sleeping more than usual, regular bad dreams)</p> <p><u>Behaviour</u> SEMH need has resulted in some significant observable changes in behaviour that has impacted on daily functioning for an extended period of time (e.g. persistent difficulties separating from caregiver, not wanting to leave the home, regular feelings of hopelessness or irritability, self-destructive behaviour, regular anger outbursts)</p> <p><u>Physical appearance and self-care</u> SEMH need has significantly impacted on appearance and self-care for an extended period of time (e.g. regularly wears dirty clothes, hair regularly unbrushed, regularly forgets lunch unkempt hair, lack of pride in appearance for an extended period of time)</p> <p><u>Relationships with peers</u> SEMH need is significantly impacting on friendships and relationships with peers for an extended period of time (e.g. regularly self-isolating from peers, regularly avoiding social activities they usually enjoy, not wanting to leave the house for an extended period of time)</p> | <p>These children and young people remain a significant concern and risk, often across the system (e.g., in health education, social care, youth justice). This may include children and young people who routinely go into crisis but are unable to make use of help offered, or where help has not made a difference; or have ongoing issues and are unresponsive to treatment.</p> <p>Partners supporting young people are involved in managing the risks for these children and young people.</p> |

WHAT CAN YOU DO TO SUPPORT?

- Talk to the child or young person and be curious about what is happening with them
- Consider completing an Early Help Assessment (EHA) to build a wider picture of what is working well and what additional support may be required. Speak to your locality Early Help Consultant for additional advice
- Signpost children and young people to 'self-support' available, e.g.
 - Pastoral support in school
 - [The Go-To](#)
 - [Recovery College online](#)
 - [Compass Phoenix Training and Consultation](#)
 - [Compass BUZZ US text messaging \(07520 631168\)](#)
 - [Childline](#)
 - [Young Minds](#)
 - [Mental Health Support Teams EXCLUDING Craven](#) (also known as Wellbeing in Mind Teams)
 - [Mental Health Support Teams Craven](#)
 - [Kooth Craven](#)
 - [QWell](#)

- Talk to the child or young person and be curious about what is happening with them
- Consider the severity of the need (e.g. is the young person questioning their sexuality or are they self-harming? Is the child having difficulty separating from a parent or are they having suicidal thoughts?)
- Seek help accordingly, for example from:
 - [Mental Health Support Teams EXCLUDING Craven](#) (also known as Wellbeing in Mind Teams)
 - [Mental Health Support Teams Craven](#)
 - [Compass Phoenix](#) consultation or referral
 - Consider completing an [Early Help Assessment \(EHA\)](#) or holding a Team around the Family Meeting to co-ordinate the support.
 - [SEND Hub](#) referral (Educational Psychology referral can also be made via a SEND Hub referral)
 - [0-19 Healthy Child Team Emotional Health & Resilience Service.](#)
 - [Sleep Charity](#) service

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- Seek help accordingly, for example from:
 - [SEND Hub](#) referral
 - [Specialist CAMHS](#) service
 - Specialist CAMHS eating disorder service (accessed via the [Specialist CAMHS service](#))
 - Consider completing an [Early Help Assessment \(EHA\)](#) or holding a Team around the Family Meeting to co-ordinate the support.

- Specialist CAMHS [crisis service](#) (not including Craven)
- Specialist CAMHS [crisis service](#) (Craven only)
- North Yorkshire [Safeguarding Board](#)
- [Humber and North Yorkshire Keyworker Service](#)

For details on more services to support Children and Young People in North Yorkshire, **view the marketplace** for Social Emotional and Mental Health in North Yorkshire: <https://thegoto.org.uk/mini-marketplace/>

Safeguarding: if you are worried about the safeguarding of a child, please visit the NY safeguarding board for information and advice <https://www.safeguardingchildren.co.uk/about-us/worried-about-a-child/>

We have taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to check that services are still available before signposting.

This document has been developed in partnership by members of the North Yorkshire Emotional Health and Wellbeing Delivery Group. Members include: Specialist CAMHS, Compass Phoenix, Craven Mental Health Support Teams in Schools, Wellbeing in Mind, Healthy Child Programme, Early Help, Inclusion service, Education Psychologist, NYCC Commissioner, NYCCG Commissioner, Bradford and Craven CCG Commissioner.