



England

# Children's Wellbeing Practitioners and the Transformation of Children & Young People's Mental Health Care

Friday 15<sup>th</sup> September

Presented by:

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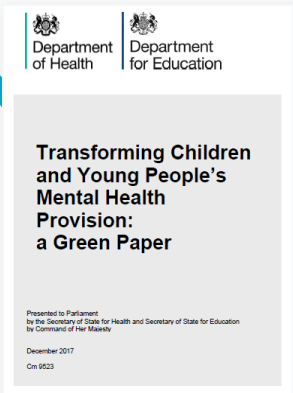
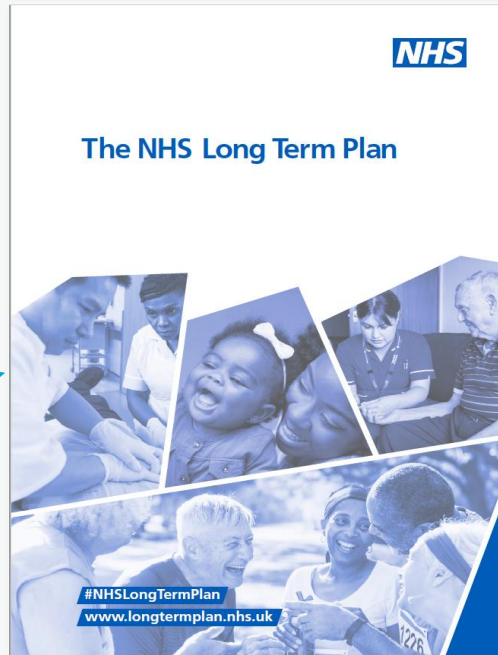
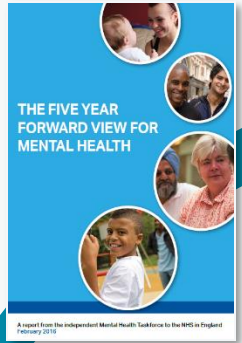
**Catherine Gallop** - Director of Cedar and Clinical Training, University of Exeter and Co-Chair of the Psychological Professions Network South West (PPN-SW), Chair of BPS CYP Training Committee



# Plan

- Provide an overview of the children and young people's (CYP) mental health policy context relevant to the CWP role.
- Outline the increasing demand for mental health services and the workforce challenges, noting the important contributions of CWPs to the CYP mental health workforce and transformation of CYP mental health care.
- Highlight current and future opportunities of the CWP role to support sustainability and ongoing impact.

# The current transformation programme started with Future in Mind...



## Our overall ambition

Enable every child and young person with mental health needs to achieve their goals and life potential

## Our principles

- Evidence-based practice
- Outcomes inform treatment and service development
- Supervision
- Authentic co-production

## This requires us to

- Build better mental health services
- Improve outcomes and experience
- Increase access
- Reduce health inequalities
- Continue to focus on prevention
- Support early intervention and the reduction of stigma
- Invest in the workforce

# Recap on the NHS Long Term Plan commitments:

## Access

- An additional 345,000 CYP aged 0-25 accessing support from NHS-funded mental health services by 2023/24
- By 2028/29, access to specialist support for all CYP who need it (subject to resources)

## Mental Health Support Teams (MHSTs)

- MHSTs working in schools and colleges – early intervention and whole school approach across 20-25% of country by 2023/24

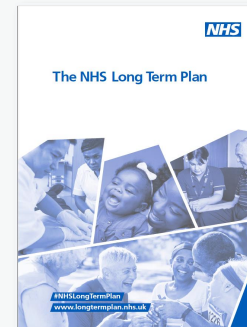
## Waiting Time Pilots

- Test the feasibility and sustainability of introducing a waiting time standard for access to NHS-funded mental health support

## Digital Therapies

- Develop digitally enabled care pathways for children and young people in ways which increase inclusion

A comprehensive offer for 0-25 year olds integrated across health, social care, education, and the voluntary sector to address health inequalities



## Eating Disorders

- Boost investment in children and young people's eating disorder services to continue seeing 95% of urgent cases within 1 week, and within 4 weeks for non-urgent cases

## Crisis Services

- All CYP experiencing crisis able to access crisis care 24 hours a day, 7 days a week by 2023/24, including via a single point of access through NHS 111

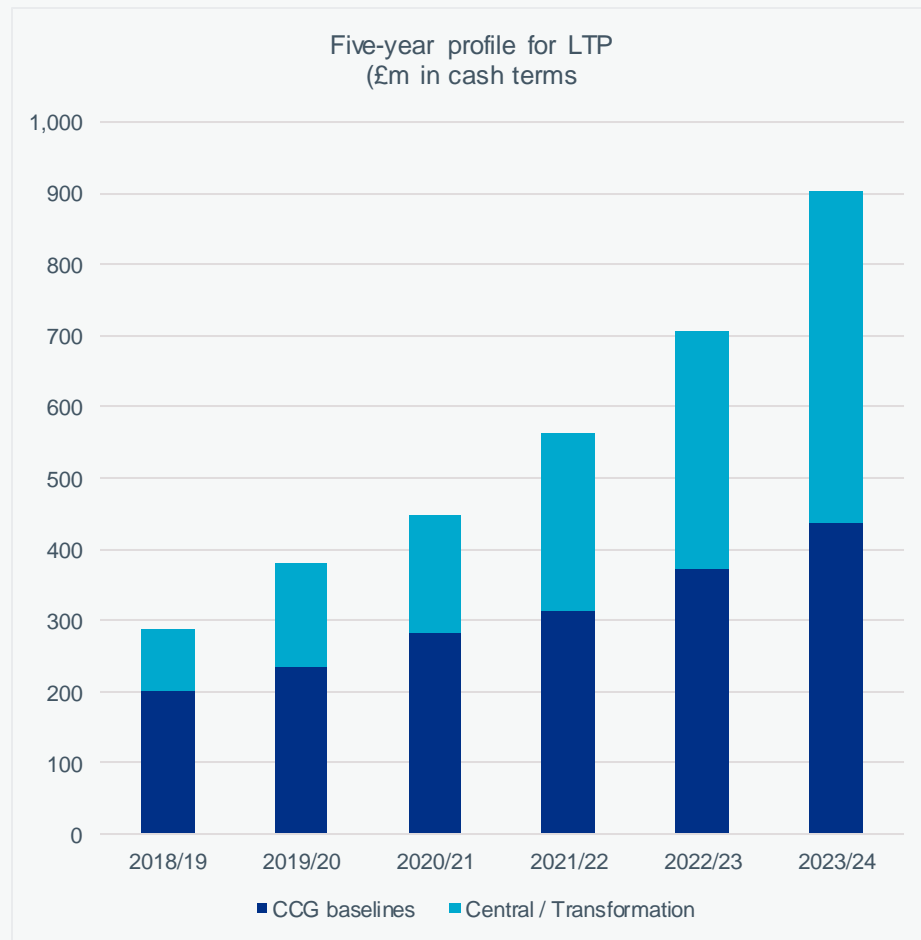
## Whole pathways, including inpatient beds

- Extension of Provider Collaboratives continue to drive integrated pathways

## Wider Commitments

- Additional investment in Youth Justice services
- Reduced waiting times and increased support for CYP with learning disabilities and/or autism
- 6,000 highly vulnerable children with complex trauma will receive consultation, advice, assessment, treatment and transition into integrated services

# Supported by continued investment into CYPMH services...



Long Term Plan additional funding rises to **over £900m by 2023/24.**

This is **on top of existing mental health spend** before 2018/19

**£40m additional specialised commissioning funding** over 3 years from 2021/22

# This investment has allowed us to make significant progress since 2016...



Around 700,000 CYP aged 0-17 accessed NHS-funded support in the rolling 12 months to May 2023

(MHSDS Monthly Statistics)



Since the start of the Long Term Plan [LTP], c. 35% more CYP have received NHS-funded support (MHSDS Monthly Statistics)



35% of the school-age population (3.4m CYP) now covered by Mental Health Support Teams



CYP Community Eating Disorder services are treating 47% more children and young people in 22/23 compared to 19/20



The total CYPMH workforce has increased by 46% since the start of the LTP and by 70% since 2016

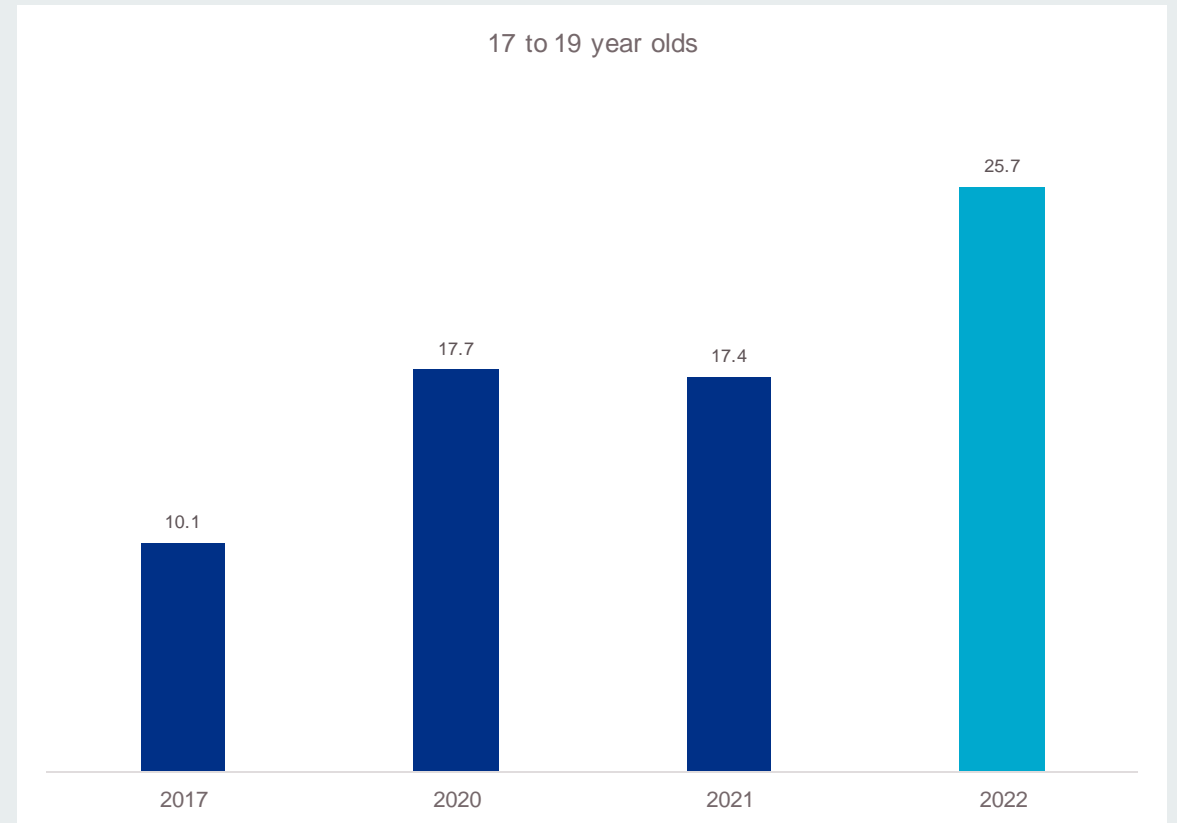
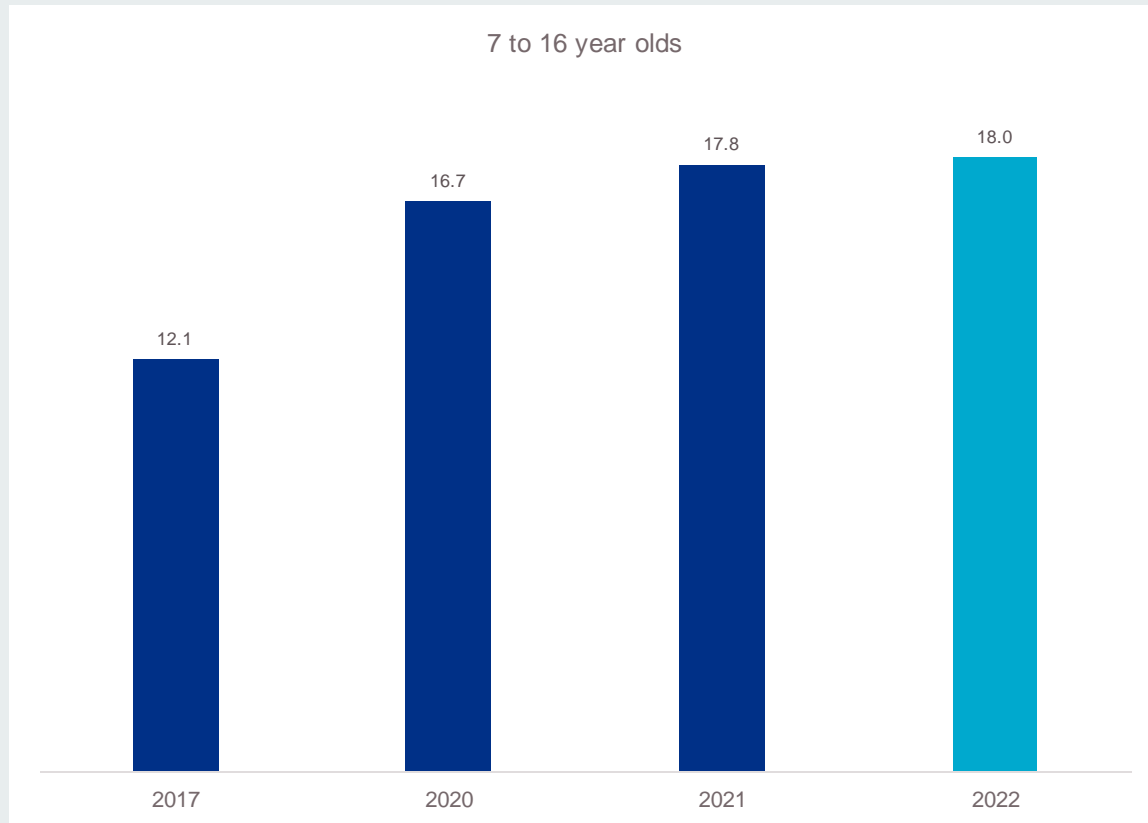
(CYPMH Workforce Census 2022)



76% coverage of the four functions of a comprehensive CYP crisis service.

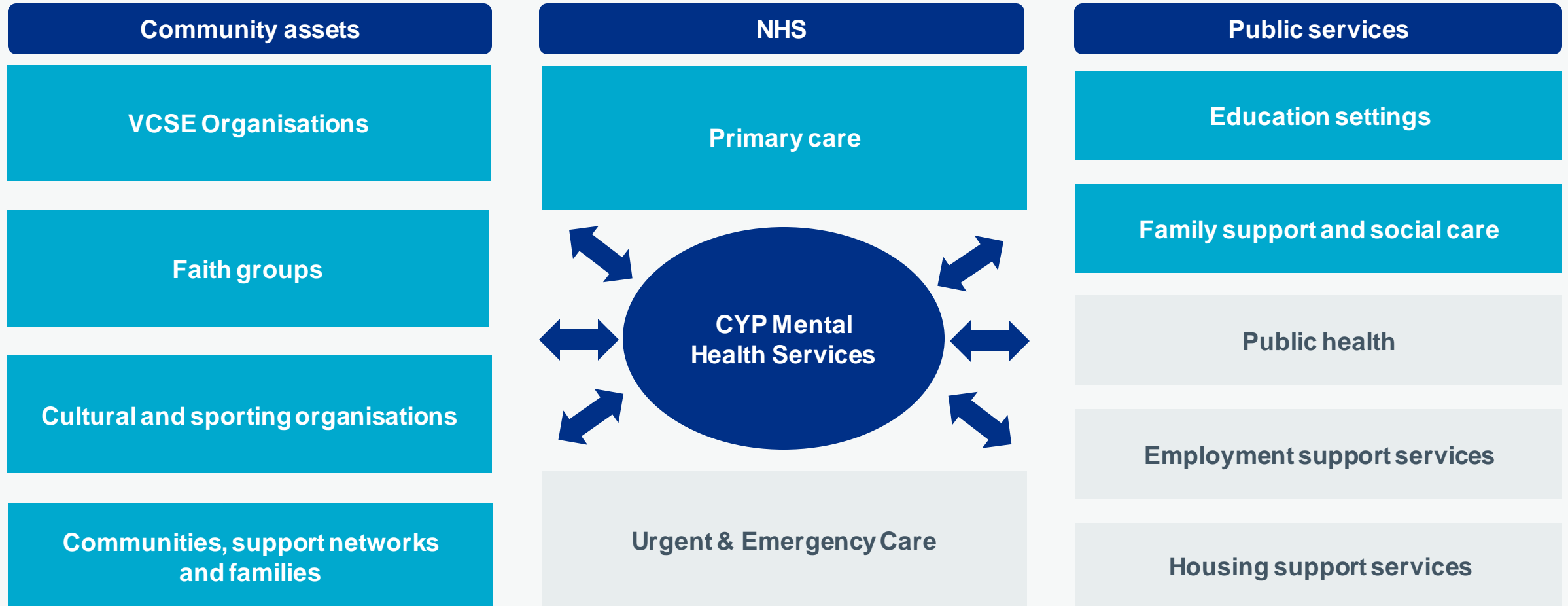
# But significant challenges remain, so it's job begun, not job done...

Rates of probable mental disorder have continued to rise...



[Mental Health of CYP in England 2022 - wave 3 follow up to 2017 survey](#)

# Supporting children and young people with mental health problems requires collective effort and the NHS cannot do it alone...






# And we need to work in partnership with those with lived experience

Co-production and participation must be at the heart of all work to empower children, young people, parents and carers **at every level from local service design and delivery to national strategy and policy setting.**



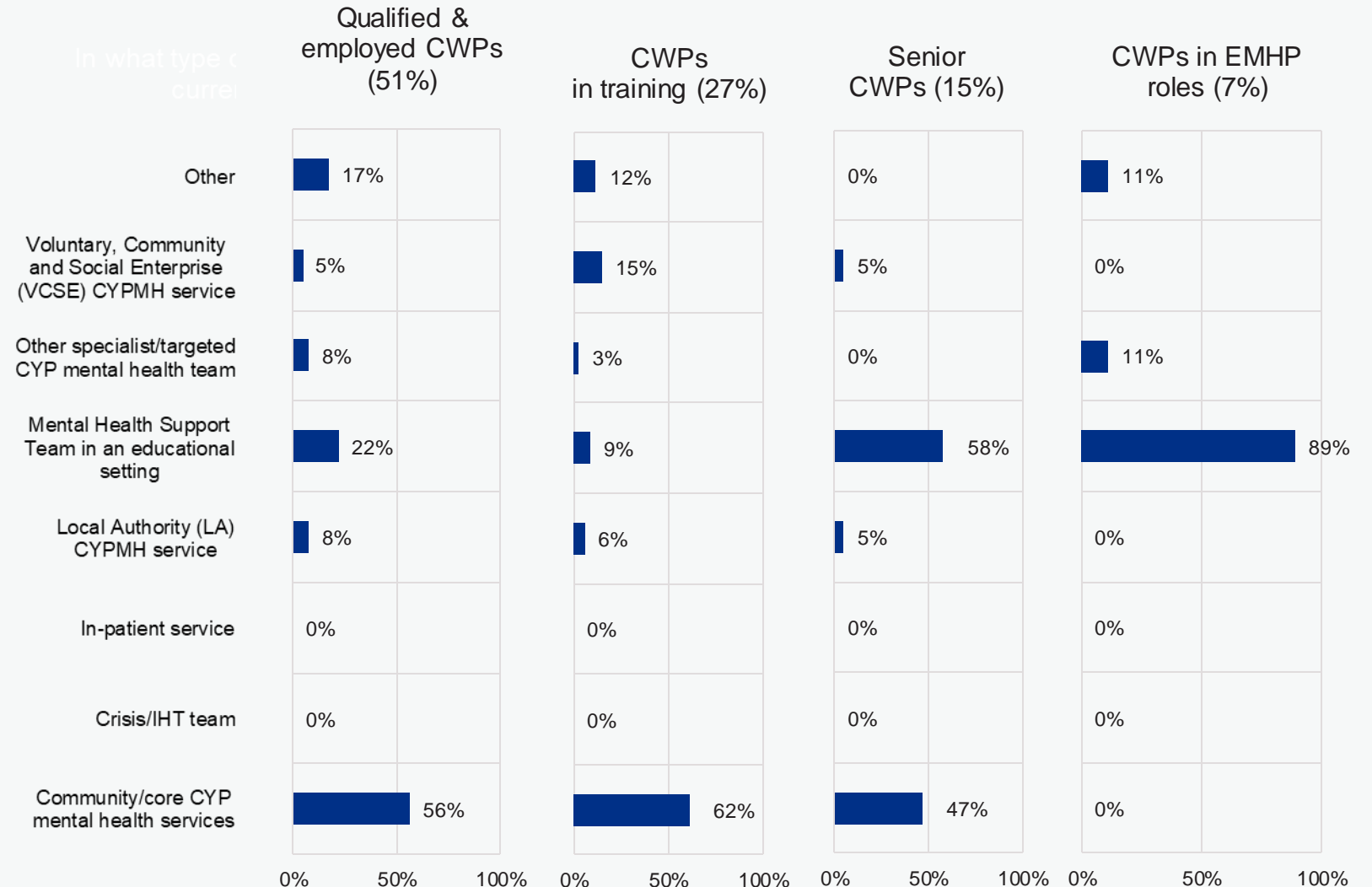


# CWPs: Community based and primary care place and impact

- Understand and work effectively in community and primary health care settings
- Learn assessment and engagement skills particular to these settings, including an emphasis on supporting co-production and expert by experience involvement.
- Establish links and well-being related knowledge exchange with community organizations and civic institutions used by CYPs, such as youth clubs, sports clubs and faith-based groups.
- Development of working relationships with organizations that access children, families and young people in populations that CAMHS finds hard to reach to support equity of access and reduce health inequalities.
- Understanding diversity, inclusion and multi-culturalism to equip them with the necessary knowledge, attitudes and competences to operate in inclusive values-driven settings.
- Training others, meaningful activities, participation activity, psychoeducation, evidence based group work.

# Where are CWPs typically based?

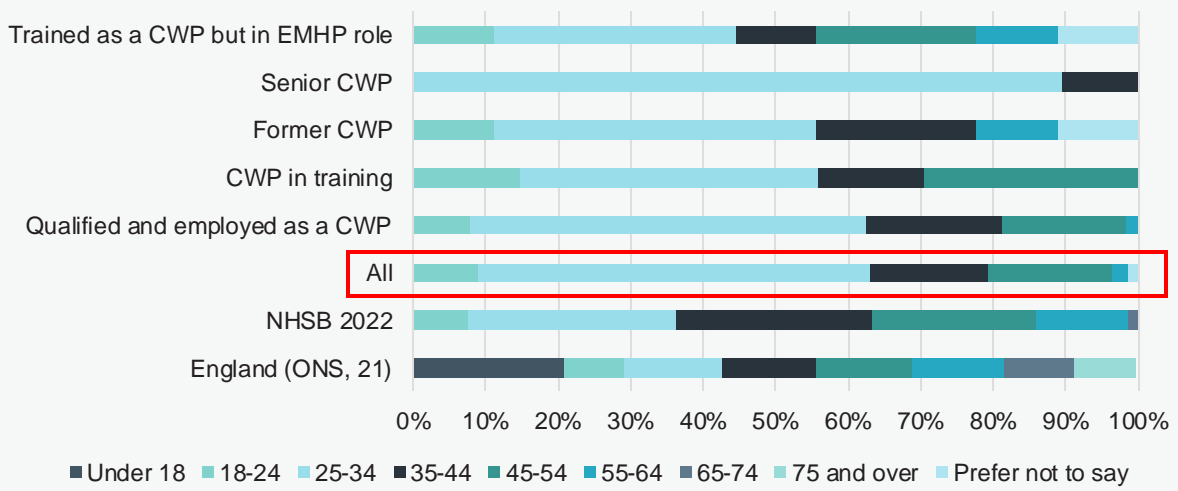
- Of 126 training or qualified CWPs still in CWP related roles, the majority were based in Community CYP Mental Health services.
- The next most common location was Mental Health Support Teams
- Amongst 'Other' locations, Early Help and Early Intervention teams in both NHS and local authorities were common



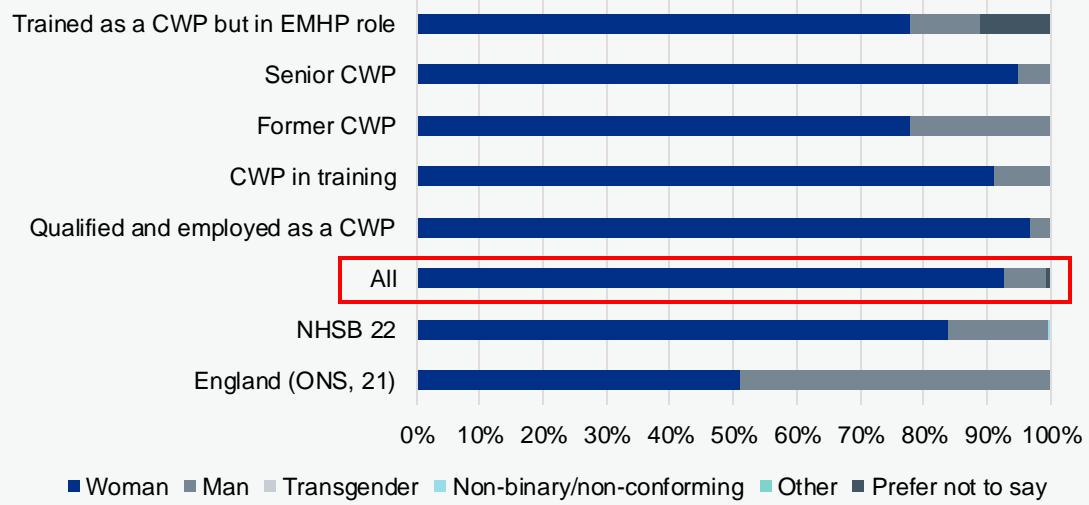
# CWP Demographics

- CWPs tend to be younger than the wider CYPMH workforce
- More CWPs are female than the wider workforce, but more are non-binary or trans.
- Fewer CWPs report a disability than either wider workforce or England population
- Greater diversity in terms of sexual orientation than population, likely more in line with younger age groups.

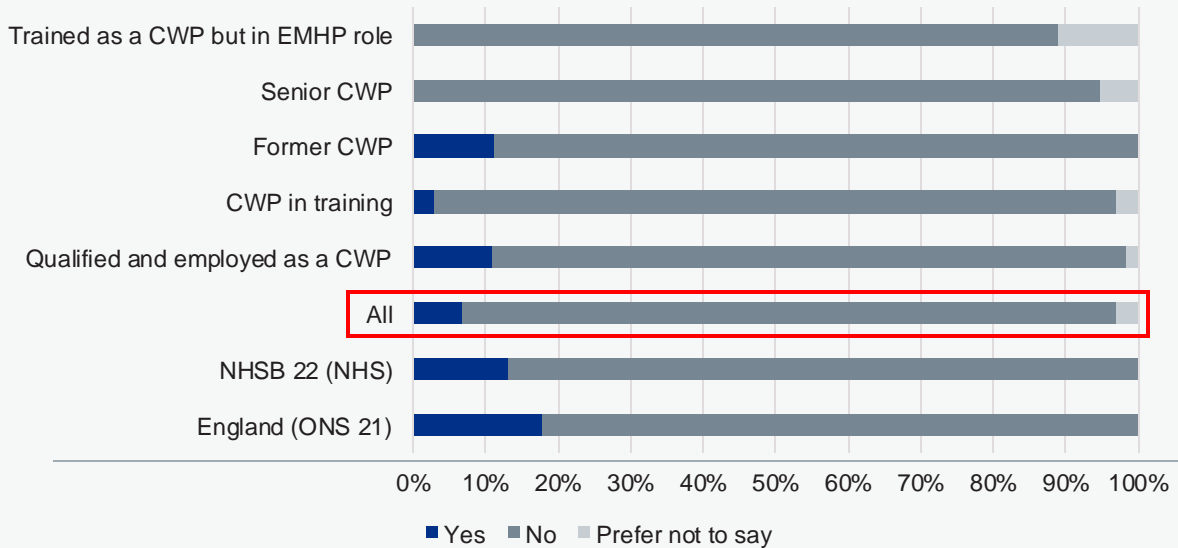
Age



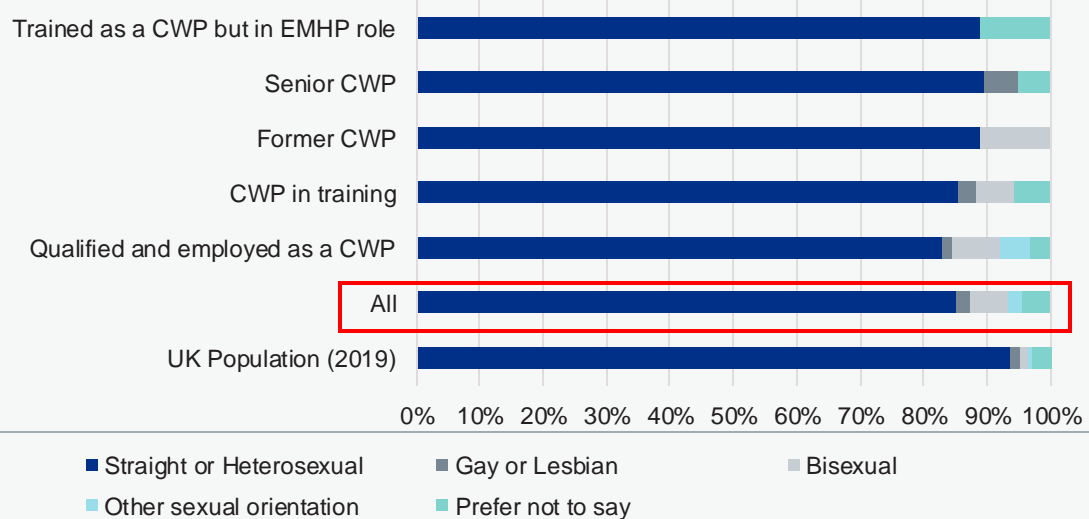
Gender



Disability



Sexual orientation



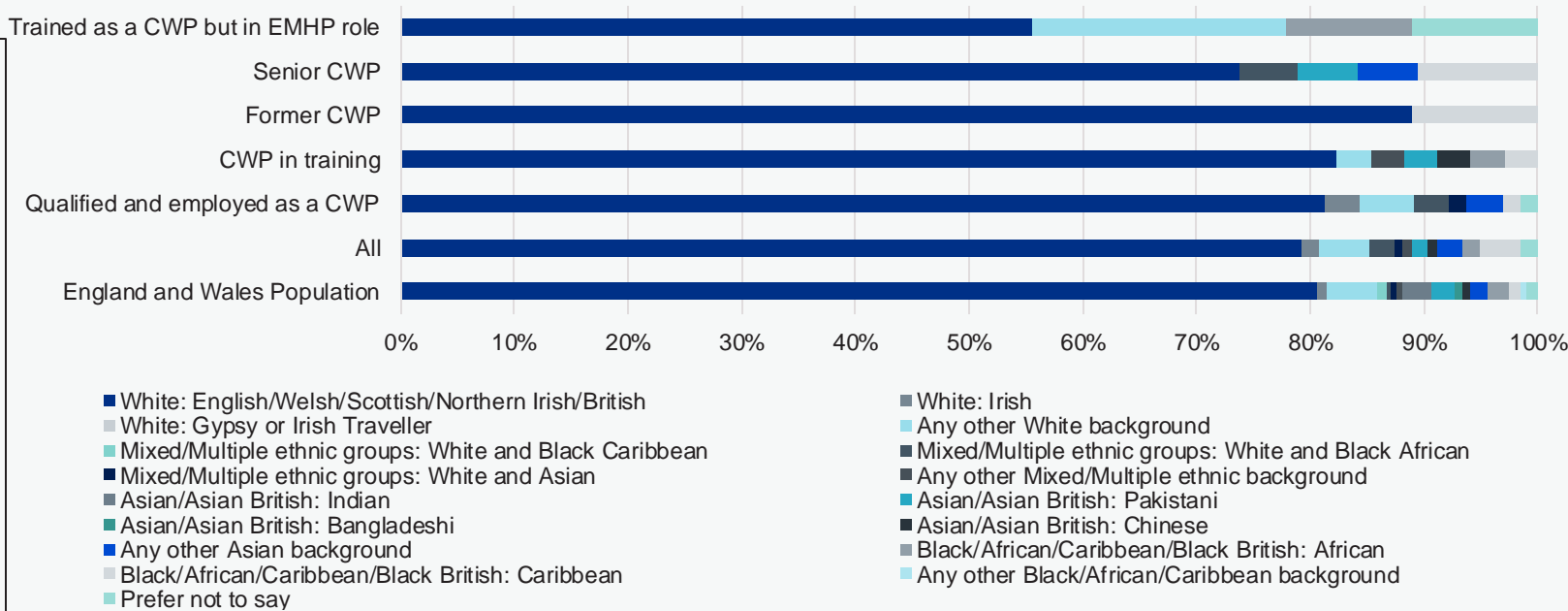
Source: CWP and EMHP Experiences Survey Report, 2022

# CWP Demographics

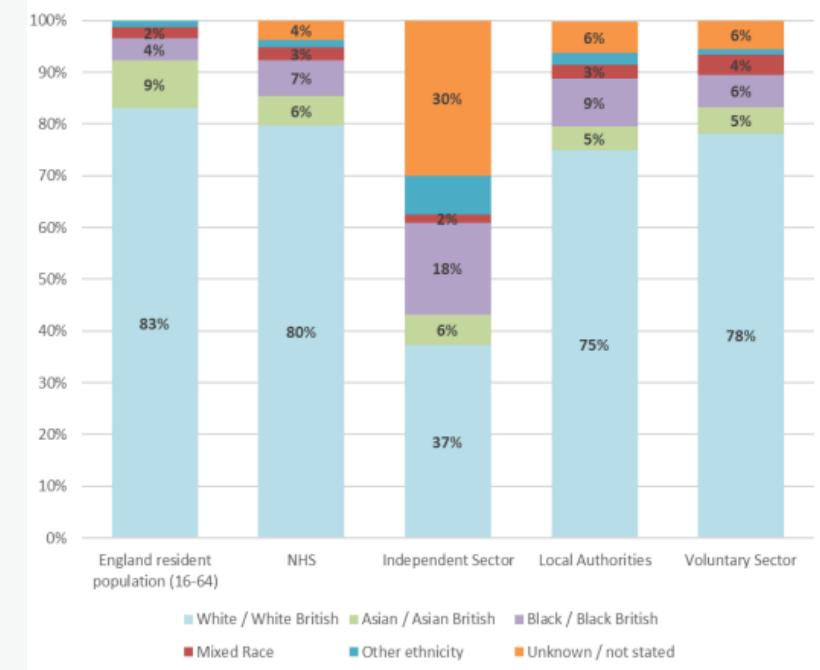
- Broadly more ethnic diversity amongst CWP workforce than the population, roughly in line with cross-sectoral CYPMH workforce
- No data on religion, faith, belief amongst wider CYPMH workforce, and atheism not an option on ONS census but comparable diversity to the population, though Muslim, Hindi, and Sikh all under-represented in CWP workforce

Source: CWP and EMHP Experiences Survey Report, 2022

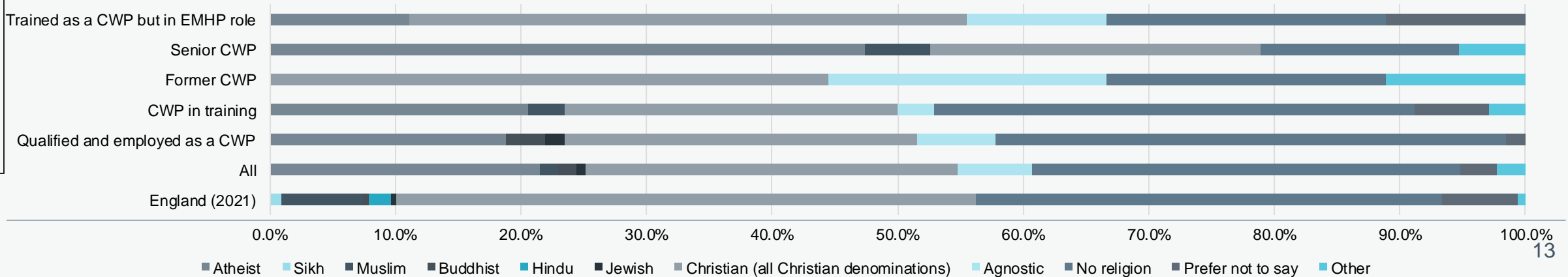
## Ethnicity



## Ethnicity of CYPMH staff in post (headcount)



## Religion, faith, belief



# CYPMH workforce data

According to latest NHS Benchmarking Report (January 2023)

- **The total workforce expanded by 5% between 31<sup>st</sup> March 2021 and 31<sup>st</sup> March 2022**
- Within that, the NHS workforce grew by 8.2%. Whilst the LA workforce is reported to have grown, and the independent sector to have shrunk, there were fewer providers reporting and changes in workforce are approximately correlated.
- Note: NHS workforce data was 'plugged' with data from other sources to make-up for non-submitting providers in this census.
- **Workforce growth has slowed but remains positive.**

## NHS vacancies:

- **have increased from 9% to 17%**
- For CYPMH services are comparable with vacancies for adult inpatient (18%) and adult community services (14%).
- The majority of vacancies are in nursing (846 vacant WTE), psychology (403 WTE), support workers (345 WTE), Medical (161 WTE) and Therapists/AHP (129 WTE).

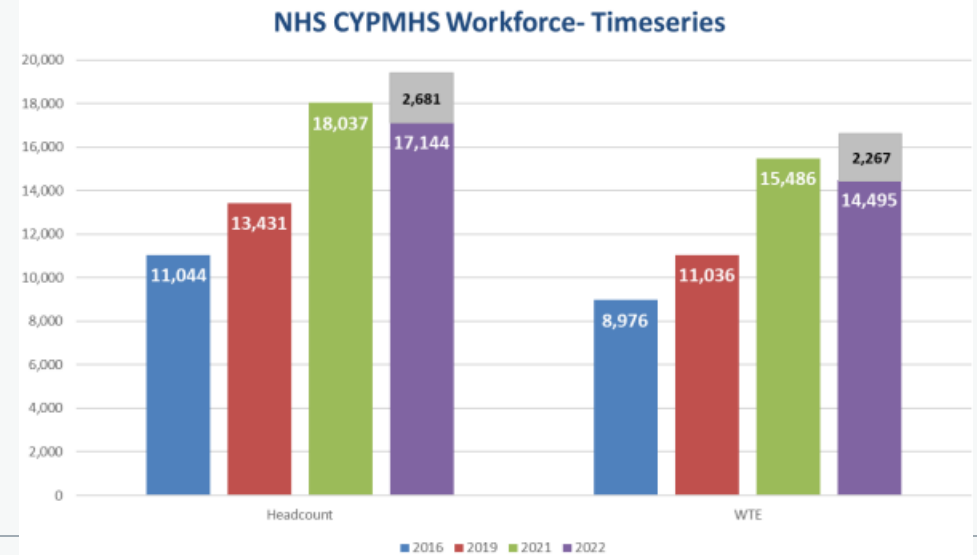
## NHS staff retention (across 1 year):

- **Has fallen marginally again from 80% to 77%.**
- Ranges across trusts from 51% to 100% (all staff retained).

## CWPs:

- **355 staff in 'CWP' NHS roles – under-reporting**
- **87 WTE CWP vacancies (~20%) – above the national average**

Sector	2016 WTE (31/12 2015)	2019 WTE (31/12/2 018)	2021 WTE (31/03/ 2021)	2022 WTE (31/03/2 022)	change 2021 to 2022	Number of providers (2021)	Number of providers (2022)
NHS	8,976	11,036	15,486	16,763*	+1,277	65	65*
Independent	1,688	1,643	2,293	1,575	-718	11	5
Local Authority	865	1,065	600	747	+147	46	53
Voluntary	158	321	1,457	1,441	-16	74	55
<b>Core CYPMH</b>	<b>11,687</b>	<b>14,065</b>	<b>19,836</b>	<b>20,526</b>	<b>+690</b>	-	-
YOT	996	792	790	1,117	+327	89	106
<b>Total</b>	<b>12,683</b>	<b>14,857</b>	<b>20,626</b>	<b>21,643</b>	<b>+1,017</b>		



[https://www.hee.nhs.uk/sites/default/files/documents/Children%20and%20Young%20People%27s%20Mental%20Health%20Workforce%20Census%202022\\_National%20Report\\_24.1.23.pdf](https://www.hee.nhs.uk/sites/default/files/documents/Children%20and%20Young%20People%27s%20Mental%20Health%20Workforce%20Census%202022_National%20Report_24.1.23.pdf)

\*Grey section represents 10 NHS organisations who have not or only partially submitted  
Please note that the sum of the purple and grey sections of the WTE chart is one less than the total WTE figure reported.  
This is due to rounding.



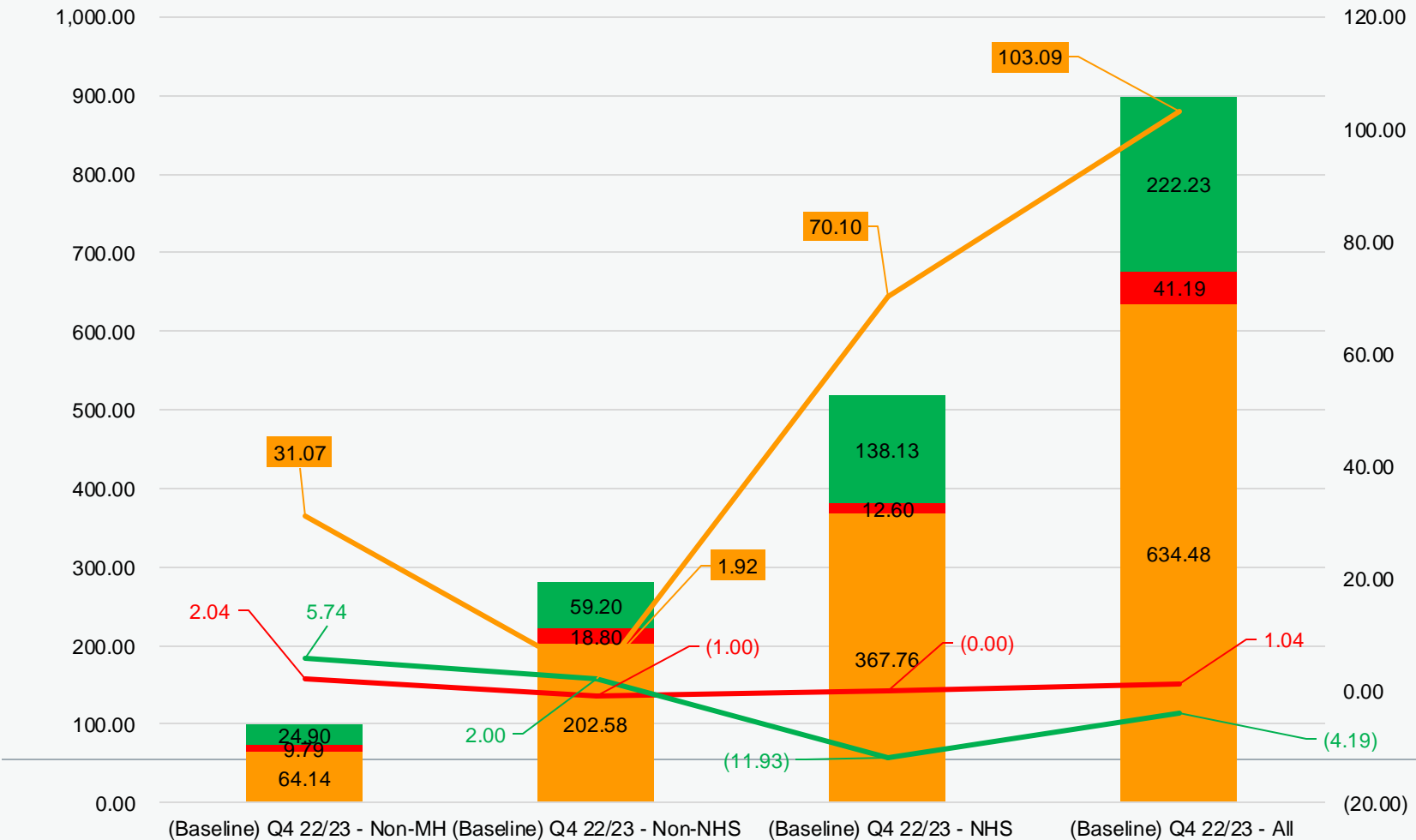
# Children's Wellbeing Practitioners – Training Data

- Over 2000 training places have been commissioned by HEE/WTE/NHSE since 2016/17
- Training delivered at seven Higher Education Institutions across England
- Data on the whereabouts of CWPs in systems is incomplete.
- The NHS Benchmarking Censuses have reported figures which are below our expectations:
  - 2019 (118 WTE)
  - 2021 (359 WTE)
  - 2022 (355 WTE)
- NHSE/WTE Planning data from systems has given us a more realistic view:
  - 2021/22 Q4 Actual Staff in Post: 493 WTE, with 80 WTE vacancies (14%)
  - 2022/23 Q4 Planned Staff in Post: 607 WTE, with (an optimistic) 11 WTE vacancies (2%)
- Work is being pushed by the National Psychological Professions Workforce Group to improve this data
- CWPs who've been trained over the years have steadily moved into other, possibly more senior roles, and cease to have 'CWP' role titles.
- CWPs have become a crucial mechanism for expanding the supply of staff into the workforce, and embedding a foundational knowledge of Low Intensity interventions

# Children's Wellbeing Practitioners - in Post and Vacancies

- Data from the NHSE WT&E Planning Data Dashboard, 22/23 Planning Data
- Nearly 900 CWP's (including Senior CWP's) across all sectors of CYPMH services
- Nearly 100 CWP's based in non-mental health services, and nearly 280 CWP's (31%) based on non-NHS services
- 11% vacancy rate across all roles and sectors

Children's Wellbeing Practitioners in Post and Vacancies (WTE), 22/23 Q4, Planning Data



Based on this data, and the NHSB CYPMH Census Core Workforce of 20,526, CWP's make up between 4-5% of the CYPMH workforce

- Trainee Children's Wellbeing Practitioners (in post)
- Senior Children's Wellbeing Practitioners (in post)
- Children's Wellbeing Practitioners (in post)
- Children's Wellbeing Practitioners (vacancies)
- Senior Children's Wellbeing Practitioners (vacancies)
- Trainee Children's Wellbeing Practitioners (vacancies)

• NPP Workforce Plan estimated an additional 2,550 Psychotherapists and psychological professionals are needed by 23/24

• The NHS Long Term Workforce Plan stated that a further 15,000 psychological therapists and practitioners need to be trained



# THE 12 PSYCHOLOGICAL PROFESSIONS IN NHS FUNDED HEALTHCARE



Learn more from the Psychological Professions Network  
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## PSYCHOLOGISTS



**CLINICAL PSYCHOLOGIST**  
 Applies psychological knowledge across healthcare settings

**COUNSELLING PSYCHOLOGIST**  
 Works across settings using a range of talking therapies

**FORENSIC PSYCHOLOGIST**  
 Works with offenders in the criminal justice system, usually in prison or secure settings

**HEALTH PSYCHOLOGIST**  
 Applies psychological knowledge to improve physical healthcare



## PSYCHOLOGICAL THERAPISTS, PSYCHOTHERAPISTS & COUNSELLORS



**COGNITIVE BEHAVIOURAL THERAPIST**  
 Provides cognitive behavioural therapy to help people develop strategies for change

**COUNSELLOR**  
 Uses a recognised counselling framework to explore and resolve distressing issues

**ADULT PSYCHOTHERAPIST**  
 Uses specialist training in individual, couple or group therapy to help with emotional distress and mental health difficulties

**CHILD & ADOLESCENT PSYCHOTHERAPIST**  
 Uses specialist training to work across the healthcare system with children, young people and parents

**SYSTEMIC FAMILY THERAPIST**  
 Works with family members and other close relationships to strengthen resilience and find solutions together



## PSYCHOLOGICAL PRACTITIONERS



**PSYCHOLOGICAL WELLBEING PRACTITIONER**  
 Provides brief CBT-based interventions to adults with mild to moderate anxiety or depression

**CHILDREN'S WELLBEING PRACTITIONER**  
 Provides brief evidence-based psychological interventions to promote mental wellbeing



**EDUCATION MENTAL HEALTH PRACTITIONER**  
 Works with children and young people in school and college with brief psychological interventions



Learn more from the Psychological Professions Network  
 @KSSPPN kss-ppn.nhs.uk @NWPPN nwppn.nhs.uk

# Accreditation and registration



the british  
psychological society  
promoting excellence in psychology



## Why is registration and practitioner accreditation important?

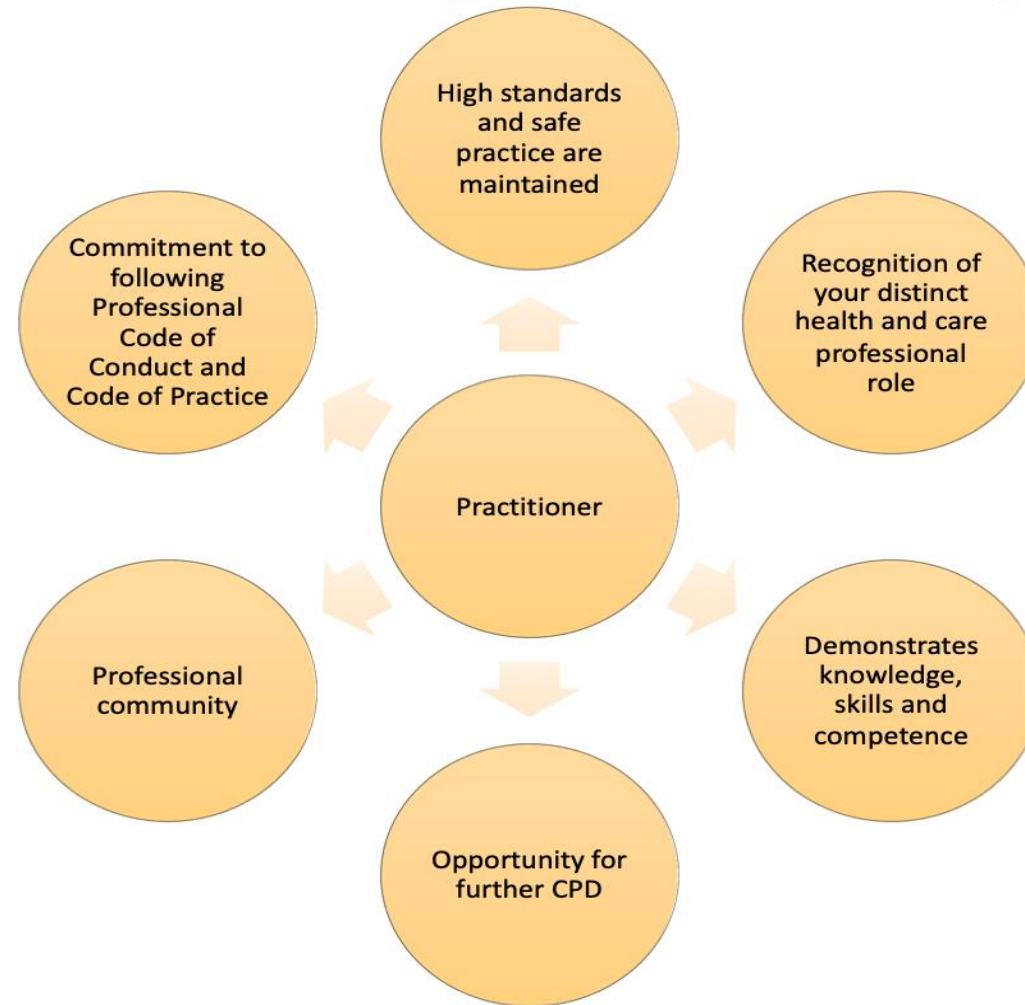
BABCP and BPS collaborated to establish closely aligned and reciprocal registration schemes for Wellbeing Roles for those working in specified contexts.

### Registration:

- Promotes protection of the public
- Ensures collaboration between national bodies, employers and other key stakeholders to improve access while maintaining quality and standards
- Supports widening participation for emerging psychological roles in the workforce
- Ensures that entry routes are specified and clarify career pathways
- Ensures that professional competence is maintained through specific access to tailored continuing professional development (CPD)
- Supports this workforce to advocate with employers; policy-makers and other key strategic stakeholders
- BPS and BABCP committed strategically to supporting the development of a diverse and inclusive wider psychological workforce, with registration supporting this.

# Individual Registration

## What does individual registration mean to practitioners?





# Senior Wellbeing Practitioner

**Candidates for Senior Wellbeing Practitioner training will:**

- Be qualified EMHPs (G/PG Diploma) or CWP's (G/PG Certificate or Diploma), with two or more years of post-qualification experience
- have been accepted on to the 2–year Senior Wellbeing Practitioner PG Diploma training programme
- have been successful in applying for a locally created Senior Wellbeing Practitioner role

**Senior Wellbeing Practitioners will be:**

- trained in supervision
- trained in range of additional clinical skills including adaptations to low intensity interventions for complex cases

**Senior Wellbeing Practitioners are intended to enhance the stability and sustainability of MHSTs and services with CWP's through:**

- Increasing workforce retention/reducing staff turnover through developing career progression opportunities
- Increasing supervision capacity
- Extending EMHP low intensity clinical skillset in response to needs of children, young people, and families in educational and community settings

Module 1 (30)	Module 2 (30)	Module 3 (30)	Module 4 (30)
<b>Supervision I:</b>  <b>Supervising Evidence-Based Psychological Therapies/Interventions in Child and Adolescent Mental Health or Education Settings</b>	<b>Supervision II:</b>  <b>Clinical Supervision Practice (Wellbeing Practitioner for Children and Young People or Education Mental Health Practitioner)</b>	<b>Enhanced Practice in Early Intervention</b>	<b>Adapting Low Intensity Practice with CYP (&amp; families) with neurodiversity including ASD/LD</b>
Generic Supervision (generic knowledge and competencies to support effective supervision)	CWP <u>or</u> EMHP specific supervision knowledge and competencies (e.g. supervision of low intensity interventions and whole school approaches).	Low intensity / Early Intervention support for: <ul style="list-style-type: none"> <li>• Traumatic events</li> <li>• OCD</li> <li>• Self harm</li> <li>• Social Anxiety</li> <li>• Tics</li> <li>• Self harm</li> <li>• School Refusal</li> <li>• Working with Eating Difficulties</li> </ul>	<ul style="list-style-type: none"> <li>• Adaptations to practice</li> <li>• LI interventions</li> <li>• Adapted LI CBT for anxiety and low mood</li> <li>• Interventions for behaviour that challenges (functional analysis)</li> <li>• Problem-Solving and executive function</li> </ul>

# Primary care and CYPMH integration: progress until now

£5m in 2022/23, with a further £8m for 2023/24 to help systems improve integration across pathways between Primary Care Networks (PCNs) and Mental Health Providers and create new roles for CYP mental health practitioner.

CYPMH Practitioners can provide a bridge between primary care and specialist mental health providers, as well as providing direct triage and care where appropriate

## Progress:

- 33 out of 42 ICBs across England are implementing plans to improve partnership working and create shared roles in primary care.
- The number of CYP MH primary care roles recruited in 2022-23 increased from 39 in Q2 to 89.7 WTE by Q4, 29 of which were funded using the ARRS scheme by Q4.
- 85 Primary Care Networks (PCNs) are reported to be working with CYP MH services and partner VCSEs to support these roles and improve access to appropriate mental health care and support.
- £8m allocated for 2023-24, building on £5m for 2022-23 to expand and support integration, and a quality improvement matrix tool will be made available in the summer.

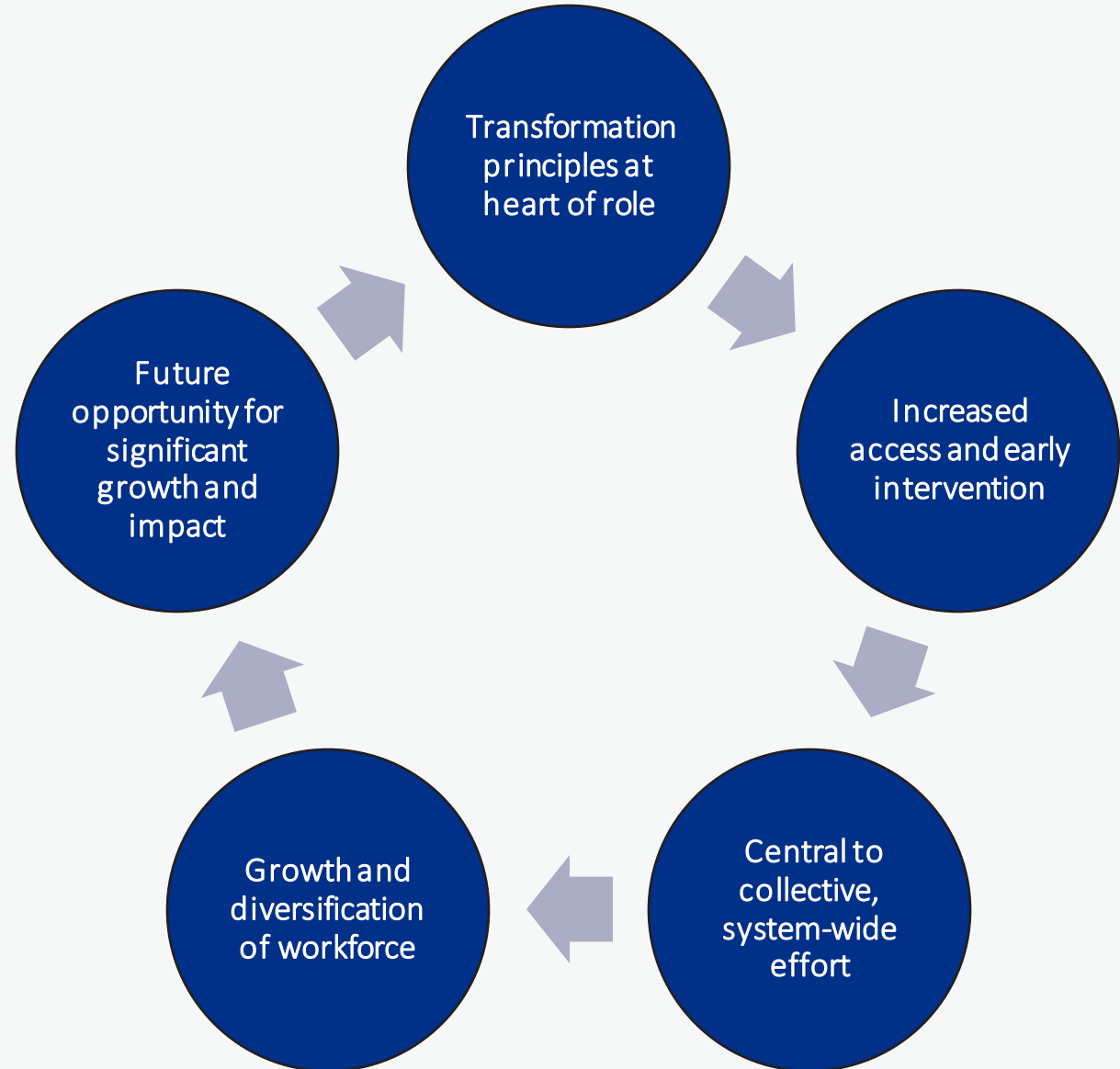
Region	ICBs with plans/total ICBs	Participating PCNs by Q4	CYP MH primary care WTE roles by Q4
London	4/5	12	13
South West	3/7	5	5
South East	6/6	17	23
Midlands	9/11	16	23.2
East of England	6/6	20	6
North West	3/3	12	13.5
North East and Yorkshire	2/4	3	5

## Roles included:

- CYP MH practitioner (n=46.5 WTE)
- **Children Wellbeing Practitioner (n=23 WTE)**
- CYP Social Prescriber (n=7 WTE)
- CYP MH nurse (n=4.2 WTE)
- CYP MH counsellors (n=2 WTE)
- Other inc. CYP MH support workers (n=5 WTE)

# Round up:

**CWPs have and continue to make a significant contribution to our overall ambition : to *enable every child and young person with mental health needs to achieve their goals and life potential***



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## Thank You



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**england.nhs.uk**



**england.cyp-mentalhealth@nhs.net**