

Briefing for Health Services dealing with Children and Young People (CYP)

Response to a major incident that may increase referrals to children and young people's mental health services

NHS England (London Region) is coordinating the NHS response to the incident at London Bridge on 3rd June 2017. It is important that children, young people and families affected get access to the right mental health support, care and if appropriate, treatment. Alongside our Public Health and Voluntary Sector partners we have produced a stepped care models and clear pathways for both adults and Children and Young People (CYP) to inform the wider system's response. To access these pathways electronically please click on the [link](#).

The importance of a public health focused prevention response both maximises the inherent resilience of communities, and makes best use of specialist resources. Providing information to the public is a useful strategy to employ as part of our London plan. Please be aware that members of the public are being directed to information, access advice and support:

- Guidance is being released for parents, carers and trusted adults, including educational staff, who will be providing support to children and young people.
- Home Office web page: <https://www.gov.uk/guidance/london-bridge-and-borough-market-attacks-june-2017-support-for-people-affected>
- Referral for psychological support may initially be via primary care or direct self-referral to a local children, young peoples and families' mental health (CYP MH) service.
- 111 callers should be advised to seek support via their GP or via self-referral to their local service.
- NHS '*Coping with Stress following a major incident*' leaflet (primarily designed for adults) that can be accessed by clicking [here](#).

Many of those who are affected by the incident – injured, witnesses, first responders - will not require access to specialist mental healthcare. NICE (2005) recommends 'watchful waiting' of up to four weeks following a trauma, before offering an intervention, to allow time for spontaneous recovery, unless there is risk in terms of suicidal ideation/self-harm. However we could expect 20% of those involved to seek support.

Children, young people and families are likely to access services from about four weeks after the incident.

Services will need to review their preparedness for an increase of children, young people and families seeking trauma based support:

- that their contact details are up to date e.g. websites (service, Trust, CCG), NHS Choices – see [this FAQ on NHS Choices](#) for more details, [Youth Wellbeing Directory](#)
- their capacity to manage enquires and advice from other health, social care and government organisations and the press.
- how the service responds to a possible increase in self-referrals of young people affected by the incident – some of whom may not be suitable for services.
- that their staff are able to identify who requires Targeted/Getting Help trauma-focused interventions.
- their capacity to provide NICE recommended Targeted/Getting Help interventions for trauma e.g. Trauma-Focussed Cognitive Behaviour Therapy (TF-CBT) and Eye Movement Desensitisation and Reprocessing. If capacity is limited, services should consider sharing arrangements with other psychological therapy providers.
- consider ensuring the service has access to some specialist trauma-treatment supervision for staff working with people affected by the incident
- staff awareness of the use of anxiety disorder specific measures (ADSM) for measuring outcomes in PTSD, for example, the [CRIES 8](#), a brief child-friendly measure designed to screen children at risk for Post-Traumatic Stress Disorder, for 8-18 years.
- staff should be aware of the need to add an accurate problem descriptor on to the clinical record system.
- referral and contact arrangements to relevant third sector organisations
- availability of information materials for people accessing the service and staff.

Although the response for services are likely to follow normal processes and some prioritisation may be required it is useful to check that the service is ready should it be called upon as a result of a major incident.

Please circulate this information as widely as possible within the services so they are aware of this recommended approach.

Useful links

- Incident support pathway for children and young adults (Link). The pathway document includes appendices sign-posting to a range of resources.
- <http://childbereavementuk.org/wp-content/uploads/2016/05/2-3-After-the-event-supporting-children-after-a-frightening-event.pdf>