



# Community Wellbeing Service (CWS)

Schools Information Pack

# Why do we have a Community Wellbeing Service?

The Community Wellbeing Service was established to improve early access to children and young people's mental health support. We are funded by the Integrated Care Board to deliver Mental Health support services to children, young people and families throughout Somerset. This service is FREE at point of delivery.

## Functions of the CWS

1

Provide evidence-based interventions, such as Low Intensity Cognitive Behavioural Therapy (LICBT) for mild to moderate mental health and wellbeing needs through:

1:1 Support  
(face to face  
or virtual)

Group Work

Parents/carers  
and guardians  
support

2

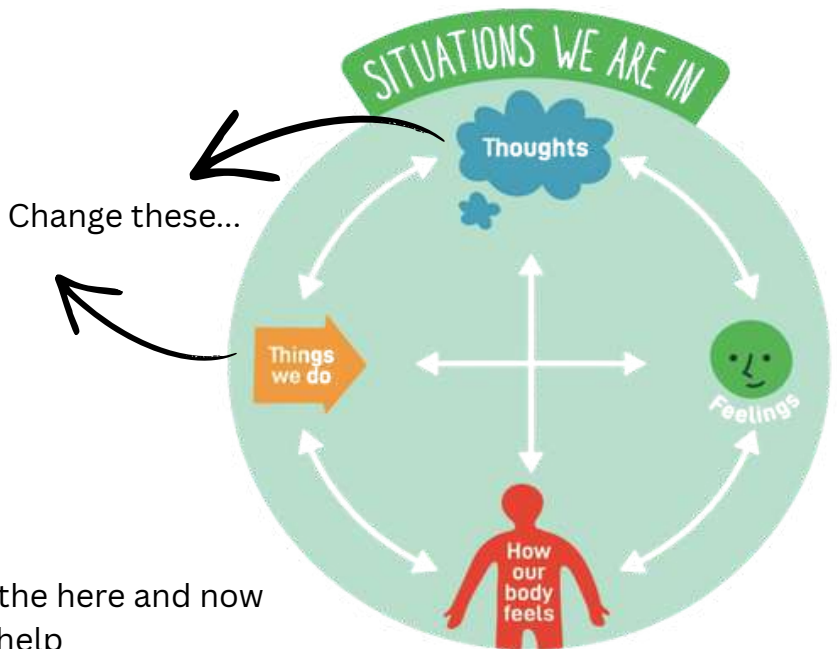
Offer timely advice to schools, provide signposting and liaise with external agencies to get the right support

3

Provide informative, engaging universal support to children, young people and their families across Somerset

# What is LICBT?

- Low Intensity Cognitive Behavioural Therapy (LICBT) is an evidence-based therapeutic model that uses guided self-help interventions
- It supports children and young people who are able and motivated to make changes likely to improve mood or reduce anxiety
- 1:1 Sessions are 45 minutes and run for up to 6 weeks. They are goal-focused, with activities between meetings to build coping skills and maintain wellbeing



- Focused on the here and now
- Guided self help
- Making changes to feel better
- Active involvement
- Changes to thoughts and behaviours
- Combat vicious cycles and safety behaviours

# LICBT Criteria

|                           | LIKELY TO BE APPROPRIATE                                                                                                                                                                                                                                                                                                                                                                                  | MAY BE APPROPRIATE                                                                                                                                                                                                                                                                                                                                                                                                        | NOT APPROPRIATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUMMARY                   | Common mental health difficulties with no/few co-morbidities, that are likely to respond to early intervention/low intensity approaches                                                                                                                                                                                                                                                                   | Common mental health difficulties that may respond to early intervention/low intensity approaches<br><br>(However, consideration is required concerning the severity and impact of the difficulties)                                                                                                                                                                                                                      | Complex and/or significant levels of need                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| SEVERITY                  | Symptoms are mild and not present everyday                                                                                                                                                                                                                                                                                                                                                                | Symptoms are moderate and occur most days/ every day                                                                                                                                                                                                                                                                                                                                                                      | Symptoms are severe and occur most days/ every day                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| NUMBER OF DIFFICULTIES    | Single Difficulties                                                                                                                                                                                                                                                                                                                                                                                       | Main difficulty along with one difficulty in other area (mental health and/or physical difficulty)                                                                                                                                                                                                                                                                                                                        | Multiple difficulties occurring daily                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| ADDITIONAL LEARNING NEEDS | CYP/parent have no additional learning needs impacting on engagement with materials                                                                                                                                                                                                                                                                                                                       | Mild additional learning needs in young person and/or parent                                                                                                                                                                                                                                                                                                                                                              | Moderate additional learning needs                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| PRIMARY PRESENTATION      | <ul style="list-style-type: none"> <li>Mild to moderate low mood</li> <li>Symptoms of panic</li> <li>Excessive worry</li> <li>Negative thinking</li> <li>Fear of social situations</li> <li>Mild health anxiety</li> <li>Behavioural routines and self-care in primary age children</li> <li>Mild school avoidance (&lt; 1 month)</li> <li>Mild OCD (&lt;1 hour a day)</li> <li>Mild self-harm</li> </ul> | <ul style="list-style-type: none"> <li>Suicidal ideation (no specific plans/ actions)</li> <li>Mental health difficulties alongside neurodiversity</li> <li>Mild disordered sleep and/or eating</li> <li>Young person who is occasionally using drugs/ alcohol</li> <li>Tics</li> <li>Low self-esteem</li> <li>Nightmares, night terrors</li> <li>Hearing voices, visual hallucinations</li> <li>Child in Need</li> </ul> | <ul style="list-style-type: none"> <li>Purely Autism/ADHD/ ND traits or sensory processing disorders</li> <li>Eating disorders</li> <li>Significant self-harm or recent suicide attempt</li> <li>Significant anger difficulties</li> <li>Complex interpersonal challenges</li> <li>Bereavement</li> <li>Blood, needles and vomit phobias</li> <li>Current bullying</li> <li>Experiences of abuse or violence</li> <li>Children under Child Protection orders</li> <li>PTSD/ ongoing trauma</li> </ul> |

# LICBT Criteria

## When LICBT May Not Be Appropriate

|                             |                                                                                                                                                                                                                          |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Family Situation            | Significant instability in family indicated by regular conflictual family relationships and/or significant emotional and mental health issues in family.                                                                 |
| Opportunity                 | Young person has no self-agency and a lack of appropriate support.                                                                                                                                                       |
| Motivation                  | Young person and/or parent is not motivated to change.                                                                                                                                                                   |
| Other Professional Support  | Young person and/or family has additional agencies actively providing therapeutic support.                                                                                                                               |
| Suicidal Behaviour          | Current or recent history of suicidal behaviour. Specific planning and/or suicide attempt within previous three months.                                                                                                  |
| Suicidal Ideation           | Current or intensive thoughts of suicide that distress and occur everyday.                                                                                                                                               |
| Serious/Current Self Injury | Current self-injury is regular and significant requiring treatment more than once in the last 3 months or is escalating, significant and unpredictable.                                                                  |
| Risk to Others              | Current or reoccurring threatening and aggressive behaviours. Infliction of physical, sexual or emotional harm to others.                                                                                                |
| Risk and harm from others   | Physical, emotional, and/or sexual harm, neglect and/or risk and harm from others.                                                                                                                                       |
| Self Neglect                | Significant difficulties with routine, self-care if independent or from caregivers if not. Shows signs of neglect, including exhaustion, poor hygiene, hunger/malnourishment etc.                                        |
| Alcohol and Substance Abuse | Uses alcohol and/or substances with any regularity or family is dependent on substances.                                                                                                                                 |
| Severe Mental Illness       | Significant phobia and other higher level mental illnesses that may be diagnosed including: PTSD, Bipolar Disorder, Psychosis, Personality Disorders, Eating Disorders, Attachment Disorder, established Health Anxiety. |
| Eating Disorders            | If CYP has a diagnosed or suspected eating disorder                                                                                                                                                                      |
| Bullying                    | If CYP is currently being bullied or is accessing mental health support because of the effects of bullying.                                                                                                              |

# 1-1 Interventions

## Brief Behavioural Activation (BA)

Behavioural Activation supports young people experiencing symptoms of low mood. It is based on the idea that by doing more valued activities people can feel better. It aims to help young people work out what is important to them (their values) and consider how they can spend more time doing activities that improve their mood.

## Brief Coping Cat

Coping Cat supports children struggling with symptoms of anxiety aged 8-13. It is an effective intervention for separation anxiety, social phobia and social anxiety. It aims to help children recognise and understand physical reactions to anxiety and support them to establish effective coping strategies.

## Behavioural Experiments (BE)

Behavioural Experiments support children and young people to help challenge negative thought patterns which prevent them from doing something they want to do. It works by putting thoughts to the test and reflecting on the outcomes.

## Cognitive Restructuring (CR)

Cognitive Restructuring explores and challenges unhelpful thoughts by addressing negative automatic thought patterns and unhelpful thinking styles. We consider alternative, more balanced ways to view thoughts, and observe how this improves mood or confidence.

## Exposure and Response Prevention (ERP)

Exposure and Response Prevention is suitable for young people experiencing symptoms of Obsessive Compulsive Disorder (OCD). Exposure in ERP refers to exposing the thoughts, images, objects and situations that cause anxiety or cue obsessions. Response Prevention in ERP refers to making a choice not to do a compulsive behaviour once the anxiety or obsessions have been 'triggered'.

## Exposure and Habituation (E&H)

Exposure and Habituation is used to treat agoraphobia, social phobia, health anxiety, and other specific phobias. The intervention targets the feared consequences by putting the child/young person in charge, creating a plan to help them face the things that they are avoiding.

# 1-1 Interventions

## Nurturing Positive Relationships

Nurturing positive relationships aims to support parents, carers and guardians to develop positive emotional co-regulation skills. The intervention helps parents/carers understand behaviour as a form of communication and encourages them to find different ways of meeting the child's needs.

## Helping your Child with Fears

This intervention is delivered directly to parents, carers and guardians and is designed to support children between the ages of 5-13 who experience anxiety. It helps families to recognise triggers and factors that maintain anxiety. They then develop strategies to tackle their child's fears.

## Worry Management

Worry Management aims to treat Generalised Anxiety and would be most suited to children and young people who experience constant worry and anxiety. They may particularly struggle with unpredictability and catastrophise about themselves, family, friends, and the wider community.

## Habit Reversal Training

HRT is for children who have difficulties with repetitive involuntary physical or verbal behaviours, often described as tics. HRT helps young people gain control over their tics by replacing the tic with alternative, less disruptive responses. Over time, this reduces the frequency and intensity of the tics, improving the child's quality of life.

## Parent-Led CBT for OCD

Parent-Led CBT for OCD is for parents of children between the ages of 5-12 who have difficulties with compulsive and repetitive behaviours. Parents learn how to talk to their child about their compulsions, and find ways to put their child's thoughts to the test together

## Feelings First

Feelings First is an intervention for children and young people aged (8-13) who are communicating their difficulties through their behaviour. A practitioner will work with a child/young person to try and find out what their behaviour is communicating. They will learn to spot warning signs and create a plan for the family and child/young person to manage their feelings first, before the behaviour occurs.

# How to Make a 1:1 Referral

## Need for Support Identified

Staff member in school becomes aware of a young person in need of support. If the child meets the referral criteria (p 3-4) staff member will make a professional referral or encourage the parent/carer/guardian or young person to fill in the appropriate referral form on the Young Somerset website: <https://www.youngsomerset.org.uk/make-a-referral/>



## Triage

Our triage team will review the referral to determine appropriateness for assessment. If it is decided that our service may be appropriate, an invitation to an online assessment will be sent. Face to face appointments are available for those children and young people for whom engaging online would be a barrier. If it is decided that our service is not suitable we will signpost to suitable services.



## Assessment

During the assessment, the young person or parent will have the opportunity to discuss the issues raised in the referral and how these are affecting day to day life. Risk, safety and protective factors will be explored.



# Group Work Interventions

Group interventions are shown to be just as effective as 1-1 interventions, and are suitable for children and young people who would benefit from a more open and peer-supported setting.

They are delivered in school and the dynamics of students in a group setting should be considered. Group size is between 6-8 young people, for the parent interventions 6-8 sets of parents. If you would like to request a group at your setting, please discuss this during a consultation meeting.

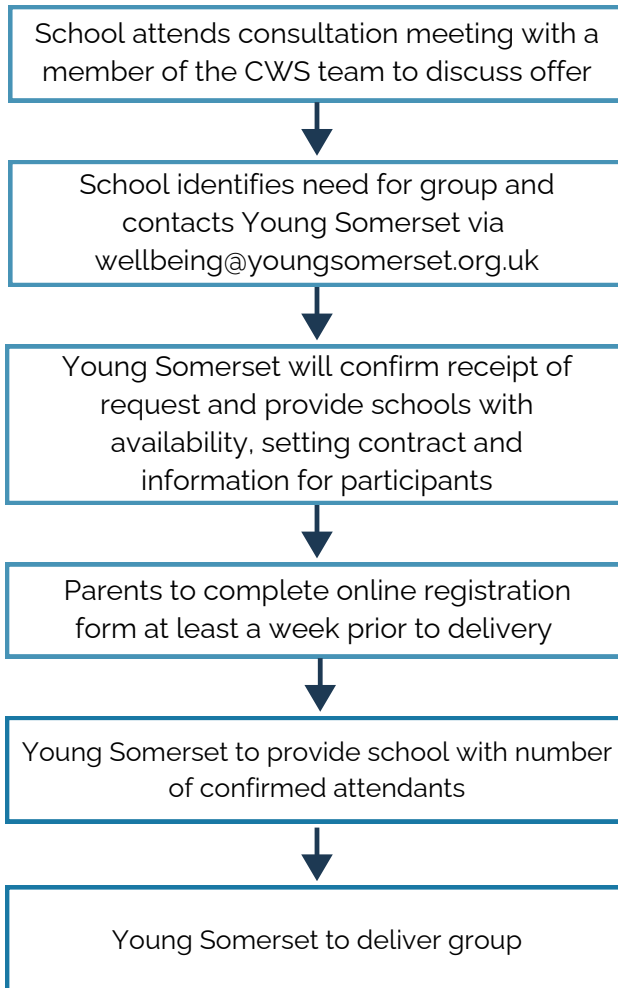
| Universal Groups | Targeted Groups                                         |
|------------------|---------------------------------------------------------|
| Transitions      | Worry Management                                        |
| Peer Mentoring   | Coping Cat                                              |
| My Big Feelings  | Mind and Mood                                           |
| How I Shine      | Helping Your Child with Fears and Worries -Parent Group |
| Tuning into Kids | Nurturing Positive Relationships - Parent Group         |

## Nature Based CBT

We have qualified Forest School practitioners that are able to deliver 6 fun, practical sessions to...

- Learn how thoughts and behaviours are connected using simple CBT techniques
- Explore the outdoors through nature-based activities, games and mindful exercises
- Develop practical coping strategies to manage worries, stress and low mood
- Build confidence and resilience by learning to recognise and challenge unhelpful thoughts
- Discover ways to improve wellbeing through connection and time in nature. We will need access to your schools Forest School/outdoor space, please ask in your consultation meeting for more details.

# Group Work Process



”

*Young Somerset provided practical, age-appropriate tools to help pupils identify and manage worries. These strategies have supported the children to better understand their emotions and develop coping skills that they can use both in school and at home, benefiting not only the pupils themselves but also their families.*

*-SENDCO at St Bartholomew's, Crewkerne*

“

”

*'Young somerset change peoples lives and you have changed my life for the better, we are very lucky to have met you'.*

*- YP age 10*

“



[www.youngsomeset.org.uk](http://www.youngsomeset.org.uk)

[wellbeing@youngsomeset.org.uk](mailto:wellbeing@youngsomeset.org.uk)

