Early evaluation of the Children and Young People's Mental Health Trailblazer programme

A summary of interim findings for schools and colleges

What is the Children and Young People's Mental Health Trailblazer Programme?

The Trailblazer programme, launched in 2018, is led by the Department of Health and Social Care, Department for Education and NHS England and Improvement. It is funding the creation of mental health support teams (MHSTs) and training education mental health practitioners (EMHPs) to work directly in educational settings. The MHSTs have three core functions:



to provide direct support to children and young people with mild to moderate mental health problems

to support educational settings to introduce or develop a whole school or college



approach to mental health and wellbeing



external specialist services to help children and young people get the right support and stay in education

to give advice to staff in educational settings and liaise with

Educational settings across England in the first 25 areas participating in the programme (called Trailblazer sites) include:

Primary

Secondary

16 plus settings

All-through Other educational settings



SCHOOL





development

What are we investigating?

programme to examine the:

implementation



of MHSTs in the Trailblazer sites.





early progress





Interviews



with key school and college staff

Two surveys – one



monitoring data





Document

review



Programme

What have we found so far?



funding of additional capacity to provide in-house mental health support, and the programme's focus on prevention and early intervention. Prior to Covid-19, Trailblazers were

making good progress implementing

Schools and colleges welcomed the



MHSTs. The recruitment, training and transition into practice of the first cohort of EMHPs was widely regarded as a major achievement and all teams were operational by early 2020.



educational settings was critical to success of the programme, but only around half of the schools and colleges responding to our survey had been involved in the design and set up of the MHSTs in their area. Early positive impacts reported by schools

It was widely agreed that engagement of



and colleges included schools feeling more supported, school staff feeling more confident talking about mental health issues and better signposting to external services.

Covid-19 had a **major impact**, **both on** programme implementation and on day-to-day delivery of the MHST service.

How did Covid-19 impact the programme?

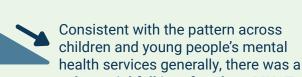


some MHSTs found it harder to build relationships with staff in schools and colleges and establish the new service. Many educational settings saw an increase in mental health problems among children and young people, parents

and carers, as well as their own staff.

children and young people's mental

Coupled with the impact of lockdown,



substantial fall in referrals to MHSTs in the initial months of the pandemic.



increase referrals; switching to remote delivery of support; and changing or expanding the support they could offer.

MHSTs responded to the challenges

ways: using communications and

that lockdown presented in three main

working with other services to try and





The challenges



There were limitations in the reach and effectiveness of digital and online interventions. Some children and young people were unable to access support online, and these were often the same children and young people whose lives and mental health had been disproportionately affected by Covid-19.

The extent to which children, young people and families had been involved in shaping the design and approach of their local



MHSTs was highly variable, some Trailblazers had made more progress in creating opportunities for influence than others.

Where next?

In the next phase of the evaluation, we will be speaking to a wider range of stakeholders in six case study Trailblazer sites and undertaking focus groups with children and young people. Alongside this, we will undertake a second round of surveys with educational settings and key people involved in the set up and delivery of

MHSTs. Our findings will be shared in a second

report to be published in summer 2022.



Read more about the evaluation at:

BRACE, including this evaluation, is funded by the NIHR Health Services and Delivery Research (HS&DR) programme (HSDR16/138/31). PIRU, including this evaluation, is funded by the NIHR Policy Research Programme (Project No: PR-PRU-1217-20602). The views expressed are those of the authors and not necessarily those of the NIHR or the Department of Health and Social Care

https://www.birmingham.ac.uk/Documents/college-social-sciences/social-policy/BRACE/trailblazer.pdf



