

Place2Be NHS Quality Account December 2021



About us

Place2Be is a children's mental health charity with over 25 years' experience working with pupils, families and staff in UK schools. Our flexible model takes a Whole School Approach by supporting not only pupils, but their families and school staff as well.

Our support allows pupils to express themselves in different ways through talking, creative work and play. Our mental health professionals use an integrative therapeutic approach which is backed by research and brings together different strands of therapeutic thinking to support the development of each child and young person.

Introduction and statement on quality from the Chief Executive

Place2Be was founded in 1994 to embed professional mental health support within the environment of the school.

A crucial and unwavering principle set out from the very start was that Place2Be would collect data and evaluate what we delivered so that continual development and refinement of the service would be based on learning from our practice at the heart of schools, alongside insights from wider research.

Over the past 25 years Place2Be's dedicated research and evaluation team has been constantly evaluating the quality and effectiveness of the service that we provide to school communities. The approach of the team has been guided by our Practice and Quality Committee and our Research Advisory Group.

In Place2Be's first Quality Account we outline the processes we employ to ensure the service we provide is effective, high quality and based on evidence. We also set quality priorities for the year ahead.

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Catherine Roche
Chief Executive , Place2Be



Our mission, vision and values

For over 25 years we have provided mental health services in schools, guided by our mission, vision, values and approach.

Our mission is to improve children and young people's mental health. We believe that no child or young person should have to face mental health problems alone. Our teams across the UK passionately support pupils to manage challenges in their lives.

Place2Be's vision is for all children and young people to have the support they need to build lifelong coping skills and thrive. We believe that how we approach our work is as important as the work itself. Our values shape everything we do:

- Compassion We bring empathy and kindness to all we do, to better understand and meet the needs of children and young people, colleagues and other stakeholders.
- Integrity We demonstrate sound ethical values in all our work, and we are honest, transparent, courageous and authentic.
- Perseverance We have the courage to continue in the face of adversity and do this with determination to find effective solutions.
- Creativity We bring an open-minded approach and flexibility to our thinking and actions and enable others to do the same.







Overview of governance structures

Place2Be is governed by an independent board of Trustees.

This information is published on our website (<u>bit.ly/3eo3yrJ</u> \mathscr{O}) The Board of Trustees has also set up five committees to advise its work. Short summaries of these committees follow.

• The Nominations Committee

To keep under review the structure, size and composition of the Trustee Board and the services of Board members, having regard to the skills needed and the skills of existing members.

• The Finance and Audit Committee

To advise the Trustees in relation to their responsibilities for financial management, audit, control and reporting and to have oversight of the Charity's financial activities. With input from the Technology Advisory Group, it also advises the Trustees in relation to IT strategy and implementation. The Practice and Quality Committee
 To advise the Trustees in relation to the services
 delivered by the Charity and the quality and
 standards of clinical practice, administration and
 research that underpin the services provided by
 Place2Be. The Committee is further informed by
 our Research Advisory Group which provides
 expert advice and guidance on methodologies,
 analyses, ethics and dissemination of our
 findings.

The Risk Committee

To ensure that risks across the organisation are effectively identified; to oversee the coordination, development and implementation of the risk assessment and management process; to keep under review the systems and controls established by the Executive to mitigate those risks; and to prepare for the Trustees' consideration a statement in the annual accounts.

• The People and Culture Committee To consider any topic relevant to the HR Policies of Place2Be such as remuneration, Equality Diversity and Inclusion, people and capability.



Reporting against 2019/20 priorities for improvement and development

This is the first Quality Account from Place2Be so we have not previously set priorities for this section. In this Quality Account we outline some of the ways that Place2Be ensures quality in the services we provide.

Information that Place2Be collects

We collect information about our work to evaluate our effectiveness, improve our services and to inform the clinical decision making and monitoring of the service. Measuring impact has been central to Place2Be's model since we were founded in 1994.

Our mental health professionals collect a variety of information in schools, including:

- Referral details
- The type of support children receive
- Socio-demographic information about the pupils we support
- Validated measures of children's mental health and attitudes towards school and learning

We use this information to evaluate our effectiveness and to improve and develop our services.

Every year Place2Be reports on the:

- Demographic profile and number of children and young people we support
- Needs they have
- Types of intervention and numbers of sessions delivered
- Impact of our services on pupils' wellbeing and learning

For more information about the data that Place2Be collects please see this web page - **bit.ly/30XsH9Y** ?

Exploring the quality of our services

Effectiveness and impact

We measure the impact on the mental health of children and young people after therapeutic interventions such as 1-1 counselling. We use two main validated measures to do this:

- the Strengths and Difficulties Questionnaire (SDQ)
 <u>bit.ly/3r5uEw9</u> ²
- The Young Person CORE <u>bit.ly/3xB1FSh</u>

Using these measures, we can assess the mental health needs of the children and young people referred to our service before and after the Place2Be intervention.

We also measure the impact of our support on wider changes in the child's life such as engagement in learning, ability to keep friendships, self-regulation and self-confidence and improvements in attendance at school and in fixed-term exclusion, where relevant.

Benchmarking our service

As a member of the Child Outcomes Research Consortium (CORC), Place2Be receives annual reports benchmarking the outcomes of our services against other organisations (mostly NHS Child and Adolescent Mental Health services - CAMHS). According to the latest report (**bit.ly/31Lg9mH** ?) in 2019, pupils who receive our one-to-one counselling demonstrate a higher level of improvement (Parent SDQ total difficulties) compared with other services.





Continuous clinical improvement

Place2Be is committed to continuously improving its service for children, young people and school communities.

Having closely examined our outcomes data over many years we recently reshaped our Clinical Delivery Model to place assessment, formulation and review at the heart of all our targeted inteventions. We also expanded the range of universal and targeted interventions to ensure we could offer the right intervention for each child. As part of this we have expanded our universal and targeted parenting offer to address the needs of children with conduct difficulties as our data told us that one to one counselling was not as effective as parenting support for these children. We have also reduced the number of sessions of one to one counselling offered as we could see that longer interventions did not necessarily yield better results. Our average duration has gone down in the last academic year, with no overall negative impact on outcomes.

Ensuring quality data collection is a priority in terms of reliability of the data and findings. Place2Be

currently has between 64% and 86% pre and post paired collection from parents, teachers and young people. This compares extremely favourably with other children's mental health services providers. We continue to strive to improve these rates.

We provide ongoing training, personal development and supervision for clinical staff.

Taking part in academic and external research

Place2Be has an independent Research Advisory Group (RAG) made up of academics and experts.

The group meets quarterly. The group provides expert advice, supportive challenge and guidance on methodologies, analyses, ethics and dissemination of our findings. This gives Place2Be external validation of our research and evaluation.

Place2Be also works with our research partners to take part in studies to assess the impact of our work. Recently, a study in partnership with the University of Cambridge and the University of Exeter was published showing the long term impact of school based counselling services on the mental health and wellbeing of children - **bit.ly/3xm4eax** *C*

Other key papers that Place2Be has co-authored are -

Teachers concerns about pupil's mental health in a cross-sectional survey of a population sample of British school children - **bit.ly/3DT9IvU** ?

What issues bring primary school children to counselling? A service evaluation of presenting issues across 297 schools - bit.ly/3cKSeWA &

Impact of school-based mental health provision 'Place2Be' on child and adolescent mental health service (CAMHS) referrals: a longitudinal observational cohort study - **bit.ly/3oFug5J** *P*

A UK school-based mental health service response to the Covid-19 pandemic [Forthcoming]



Satisfaction and experience of children and young people

At the end of an individual counselling intervention for children and young people we collect their views on how it went.

Among a sample of 3,000 children and young people who had accessed the service between January 2015 and May 2019, 96% reported positive experiences of their counselling.

In secondary schools in 2019/20 87% of young people felt that their problems were a bit better or much better since coming to Place2Be's sessions.

Place2Be regularly gathers qualitative feedback and quotes from chidlren and young people. Some of these are featured below.

"Place2Be has helped me so much. I am more sure of myself and I have lots of friends now and I am so much happier." (8-year-old girl)

"It helped me not to worry so much and learnt to use creativity to take my mind off things and express myself."

(10-year-old girl)

"I feel 11 out of 10 now. Place2Be has helped me come out of my shell."

(12-year-old boy)

"It helped to feel calmer and to be able to talk about what I struggle with and my anxiety. I feel more confident now."

(14-year-old boy)







Satisfaction and experience of school staff

Our whole school approach includes working with the adults and professionals around a child. This involves training for school staff. We evaluate the experience of teachers and school leaders who take part in our training programmes by using surveys to gather feedback.

In the past year (August 2020 – August 2021) over 50,000 teachers and school staff from more than 13,800 UK schools took part in the Mental Health Champions Foundation - Place2Be's online training programme on children's mental health. Our evaluation showed that 97% of participants said they would recommend the programme to a colleague. Over 90% of participants feel that the course has increased their capacity to lead a positive approach to mental health and wellbeing.

Prior to the Covid-19 pandemic, our training for school staff was held in person. 99% of participants in our Introduction to Mental Health for Class Teachers programme in 2019/2020 were satisfied with the programme and 99% would recommend it to another teacher. Their knowledge of, and confidence in, understanding children and young people's mental health increased. The largest improvements were in confidence in understanding classroom dynamics and behavior and the participants' belief in their ability to improve pupil behaviour in the classroom by recognising and intervening in pupils' mental health and emotional wellbeing issues.

93% of senior school leaders who took part in the Mental Health Champions - School Leader

Programme in 2018/19 were satisfied with the programme, and 91% had partially or completely achieved the goals they had prioritised as part of the programme. Their knowledge increased in relation to

the services they could refer children and young people to for their mental health issues (from 17% to 78%). In addition, the programme may enhance relationships with NHS CAMHS as school leaders' confidence increased around providing information to CAMHS to support a successful referral (from 53% to 85%) and their understanding of the NHS specialist CAMHS referral criteria increased (42% to 64%).

We also provide termly and annual reports to our partner schools to report on the impact we are having within the school.

We gather qualitative feedback from schools, such as survey feedback gathered in relation to our Educational Psychology (EP) service. The positive impact of the EP consultations is illustrated in the following quotes:

"It's been helpful to explore the role the school and teaching is playing in the issues we discussed. This brought something new to my thinking"

"Having the access to share concerns that may or may not be diagnosed is so very helpful. The suggestions and methods of how to move forward, for me is a sense of encouragement and then knowing how to empower the young person is even more important. Greatly appreciated and so valuable!"

"[EP's] depth of expertise is so welcome when thinking about the young people we work with. She provides perspective and insight into what's going on for the child/ YP as well as practical advice for school staff. Amazing."



Ensuring children and young people's safety

Safeguarding procedures

As we work with vulnerable children and families, safeguarding is of the greatest importance to Place2Be. We have a comprehensive framework of consents, controls, policies and reviews to manage the associated risks and act promptly and appropriately if concerns are raised. All school-based staff and counsellors on placement are required to complete a safeguarding induction course before commencing their role. This course provides training in how to apply the safeguarding policy and procedure. Following this, the organisation has a requirement for annual refresher safeguarding training. Our beneficiaries are provided with an explanation of our safeguarding procedure before they begin working with us. To ensure policies are adhered to, safeguarding practice is reviewed via line manager supervision, internal audit processes and externally commissioned audits. The Risk Committee and the Board itself receive quarterly updates on all matters pertaining to safeguarding. Place2Be commissions an independent external safeguarding audit every two years.

Psychological safety

Psychological safety and security are important principles in our work. We are committed to providing therapeutic support that is impartial, culturally sensitive and aware, and inclusive. This includes meeting children and young people's needs under the Special Educational Needs and Disabilities Code of Practice and the Equality Act.

Safe and ethical practice is a priority for Place2Be. We are an organisational member of the British Association of Counselling and Psychotherapy (BACP) and abide by their Ethical Framework for the Counselling Professions.



Quality priorities for 2022

Place2Be will:

- Continue to aim to improve our Assessment and Formulation data completion rates. We will pay particular attention to improving the response rates for the 'children and young people voice' section of the assessment which is currently the biggest percentage of missing data.
- Continue to measure the effectiveness and impact of the new Clinical Delivery Model particularly in relation to:
 - 1. shorter duration of sessions
 - 2. maintaining quality of outcomes
 - reaching more children, young people and their families
- Continue to increase the range of interventions delivered to include the new offers (Parenting training online and face to face; a Cognitive Behavioural Therapy informed intervention for secondary young people)
- Continue to measure the effectiveness and impact of our new Parenting strategy, gathering user feedback to shape both online and face to face offers
- Prioritise Equality, Diversity and Inclusion in terms of improving the access to our services in school communities, and how well our services meet the needs of diverse groups. More information can be found in our Equality, Diversity and Inclusion action plan bit.ly/3I5org0 &





For further information

Readers can find out more about our impact and our data by looking at the following publications:

- Impact Report 2020 <u>bit.ly/3p3rxSy</u>
- 25 years learning from practice and evaluation - <u>bit.ly/36hmuoQ</u> 𝒫

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