



**Glasgow City Council**

**Education, Skills and Early Years City  
Policy Committee**

**Report by Executive Director of Education Services and  
Interim, Chief Officer Glasgow City Health and Social Care  
Partnership**

**Contact: Barry Syme, Principal Educational Psychologist  
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**Item 4**

**3rd October 2024**

**MENTAL HEALTH AND WELLBEING INTEGRATED WORKING IN  
GLASGOW'S SCHOOLS**

**Purpose of Report:**

To update the Committee on the work being undertaken in schools and communities to support children and young people's mental health and wellbeing

**Recommendations:**

The Committee is asked to consider the range of approaches being used and ask the Executive Director and Chief Officer to present further update reports, as appropriate.

Ward No(s):

Citywide: ✓

Local member(s) advised: Yes  No  consulted: Yes  No

**PLEASE NOTE THE FOLLOWING:**

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## 1. BACKGROUND

The mental health and wellbeing of children and young people is a crucial factor for learning, healthy development and long-term outcomes into adulthood. Schools have a crucial role in promoting resilience and mental health and wellbeing for the whole school community, including pupils, staff, parents and carers. Promoting resilience and mental health and wellbeing involves taking a preventative and early intervention approach, as stated in The Scottish Mental Health Strategy 2017-2027. This aligns with Glasgow City Council's vision to be the Nurturing City, where schools can be a place for children and young people to experience a nurturing and supportive environment that provide positive experiences which have the potential to foster self-esteem and help build resilience.

### 1.1 Understanding Mental Health and Wellbeing

Mental health is an important part of our overall health and influences the extent to which we feel safe, secure and can thrive in everyday life. Mental health is defined by the World Health Organisation (2022) as *'a state of mental well-being that enables people to cope with the stresses of life, realise their abilities, learn well and work well and contribute to their community.'*

Mental health ebbs and flows daily in response to a range of individual, social and environmental factors and is essentially our internal view that we are coping well psychologically with the stresses and demands of everyday life. Mental health exists on a continuum which ranges from mental wellness at one end of the scale and emotional distress at the other. Mental wellbeing is experienced differently from one person to the next and fluctuates back and forth along the continuum, across time and in response to changing environmental and situational stresses.

1.2 We all fall somewhere on the continuum, and this will change at different times in our lives depending on a range of factors. At one end of the continuum, we may be functioning relatively well in our lives, enjoying a range of experiences and coping with the challenges of everyday life. Mental wellness doesn't mean that we are without stress or worry, as these emotions are normal human responses to the everyday demands. Rather it means that we are coping reasonably well with the normal stresses of life.

1.3 Towards the other end of the scale, we may experience persistent and/or intense emotions such as low mood, despair, apathy, etc, that impacts significantly on our sleep, work and social relationships and our ability to function well. At the far end, a person may experience so much emotional pain that they feel unable to cope anymore. We will require different types and levels of support depending on where our experience sits on the continuum and the challenges we are facing. Just as with physical health, it is important to take a preventative approach by strengthening and supporting our mental health and wellbeing, building on our natural resilience.

- 1.4 Given the potential range of needs that a young person may have it is essential that there is a wide variety of supports available and that young people can choose what is best for them. This is why Education Services and partners within Glasgow HSCP provide different services and supports within an integrated framework.

## **2. THE TIER 1 AND 2 CHILDREN AND YOUNG PEOPLE'S PLANNING GROUP**

- 2.1 This is a multi-agency planning group with a range of partners from Glasgow City Council, Glasgow HSCP and the Third Sector. The group is currently chaired by Peter Orr, Service Manager from Glasgow HSCP. This group oversees the commissioning of services that are targeted at early intervention and supporting young people in schools or in the community. The Tier 1 and 2 Planning Group reports to the Children's Wellbeing and Mental Health Strategy Group and to the Children's Services Executive Group. As well as monitoring the outcomes of services that are commissioned by the group they also look at areas of future need based on the data gathered by various agencies.

## **3. SCHOOLS MENTAL HEALTH POLICY**

- 3.1 Glasgow City Council Education Services published a policy template for all school in October 2019. It has now been reviewed and will be published following consultation before Christmas 2024 as practice guidelines for schools. It is anticipated that this document will be used by establishments in a way that meets the needs of their specific context and sector. These guidelines provide a minimum expected standard across Glasgow education establishments. These are over-arching GCC guidelines. Establishments are encouraged to carry out an analysis of strengths and areas of development based on the guidance provided to support a Mental health and wellbeing whole establishment action plan. Regularly revisiting the contents with staff may also be beneficial as well as focussing on particular areas which may align with your establishment's improvement plan.
- 3.2 Colleagues in the Health Improvement Service (HIS) have developed a School Mental Health Policy Self-evaluation tool and an Action Plan Template to assist schools in developing a Mental Health Policy specific to their establishment. Children and Young People should be fully involved in the development of their school policy.

## **4. SCHOOL COUNSELLING**

- 4.1 As part of the Scottish Government's commitment to support the mental health of young people in schools we continue to offer counselling to all learners aged 10 to 18 years of age in Glasgow school.

- 4.2 We work with four partners (Action for Children, LifeLink, Quarriers, Impact Arts and With Kids) in delivering one to one counselling, group counselling, play therapy and art therapy in all our schools since 2021 and the current contract will continue to March 2025. There has been increased demand for counselling and therapeutic supports across all schools, Council Officers meet regularly with the organisations delivering these services and contract management reports show not only the level of uptake but also positive outcomes from counselling, play therapy and art therapy.
- 4.3 A new contract framework will be in place for April 2025 running for 4 years and again we plan to offer a range of counselling and therapeutic supports but widening the age range to 5 to 18 years of age.
- 4.4 In the period from 1st July 2023 to 31st March 2024, 2487, young people received counselling or therapeutic support in Glasgow Primary and Secondary Schools. Within Secondary schools of those pupils who completed counselling 23% showed a positive score on the Young Person Clinical Outcomes in Routine Evaluation (YP-CORE). In Primary Schools One to One Counselling -102 out of 123 young people who completed therapy recorded an improved YP-CORE score. For Art Therapy Counselling – 114 young people reported an improved outcome on Wellbeing indicators and in Play Therapy Counselling - 25 out of 30 children who have had 10+ sessions demonstrated improvement outcomes.

## **5. Attendance Multi-agency Strategic Group**

- 5.1 In response to concerns around school attendance numbers across the country following the COVID019 pandemic we have established a multi-agency strategic group to focus on school attendance and in particular how this correlates with attainment but also mental health and wellbeing. Research highlights that long term outcomes from non-attendance at school are very poor, with an increase in long term mental health difficulties and a requirement for increased input from adult services. We are also aware that Children and Young people with Neurodevelopmental Diversity are more likely to experience school attendance problems. This is supported by data from CAMHS.
- 5.2 The strategic group involves partners from School, Educational Psychology, Glasgow Virtual School, Glasgow Improvement Challenge, CAMHS, Social Work Services and the Third Sector. One of the key priorities is where non-attendance is associated with high levels of anxiety and stress. This is referred to as emotionally based school avoidance or non-attendance and is now nationally recognised as an issue affecting a significant number of young people. In Glasgow we have been working since 2019 on developing advice and practical guidance for schools and partners in support young people with Emotionally Based School Non-Attendance (EBSNA). There are now practice guidelines for all schools as well as training programmes for staff.

### 5.3 Emotionally Based School Non-Attendance (EBSNA) and Quarriers REACH Service

EBSNA is an overarching term used to describe children and young people who have a profile of additional support needs which includes a difficulty in engaging with and/or attending school. This difficulty is often due to wide ranging factors which can include anxiety, issues related to Autism and neurodevelopmental profiles of need and other mental health presentations. In Glasgow we have commissioned Quarriers to provide a service called REACH to young people who have attendance at below 60%. Over the past 2 years this service has engaged with 341 young people with 81 cases closed and 70 currently engaged with a support worker from Quarriers. The focus of this service is not specifically to get young people back to school, but to engage with them to allow them to achieve personal goals that allow them to either access future education or a community-based resource.

### 5.4 Some of the outcomes for 151 engaged young people who are currently or have previously been supported, to the nearest %.

Return to school part time:	35%
Return to school full time:	4%
Engagement with college:	7%
Improved well-being and emotional health:	65%
Workplace apprenticeships:	4%
Engagement with alternative curriculum options:	12%
Improved engagement with community activities and opportunities:	45%
Re-engagement with school community:	19%
Full day in school:	11%
Engaging in the community with link worker:	35%
Engaging with adult outside family home:	27%
Leaving the bedroom:	18%
Going outside	26%

### 5.5 The service also highlights the mental health issues that the majority of young people referred are experiencing.

Trauma	34.48%
Bereavement	13.8%
Gender Identity	3.5%
Self-Harm	6.9%
Depression (Low Mood)	17.2%
Anxiety	75.9%
Emotional/ Behavioural Difficulties	55.2%
Body Image	13.8%
Suicidal Ideation	3.5%
Disordered Eating	6.9%
Sleep Hygiene	20.7%
Anger	20.7%
Confidence/ Low Self-Esteem	44.5%

Stress	17.2%
Relationship Issues	37.9%
Lack of Motivation	41.4%
Risk-Taking Behaviour	6.9%

5.6 Given the success of this project it has been agreed by the Children's Services Executive Group (CSEG) to award additional funding through the Whole Family Early Intervention Fund to maintain this service for a further 2 years. Further updates on this service and the outcomes for young people and their families will be provided to the Committee in the future.

## 6. ONLINE MENTAL HEALTH SUPPORTS FOR YOUNG PEOPLE

6.1 As part of Scottish Governments community mental health commitment, we continue to commission online mental health support services through Kooth (10 to 16 years) and Togetherall (16 to 23 years). These online platforms are clinically supervised and provide 24/7 support for young people seeking assistance. They are totally free to access for residents living within Glasgow within the specified age ranges. Funding comes from Glasgow HSCP using the Children and Young People's Community Health Fund and is administered and managed through Education Services. This is a prime example of integrated joint working between the HSCP and GCC Education Services.

6.2 Togetherall ([www.togetherall.com](http://www.togetherall.com))

From April 2023 to March 2024 Togetherall supported 254 young people in Glasgow. Of these 67% stated that Togetherall was their only source of support. Over the past 6 months 58% of users accessing the platform had thought of taking their own life and 47% considered self-harm. 43% of users had received private support from clinicians which shows a very high level of need. During the reporting period 10 individuals had required escalation due to the level of risk (suicide or self-harm) and all were given support; half of these were outside normal working hours of services such as NHS. The 3 main reasons for young people accessing Togetherall were Depression, Anxiety and Loneliness. A detailed report is available on request. Glasgow HSCP and GCC Education Services are continuing to work with Togetherall to promote the service widely and in particular with Primary Care service in GP Practices.

6.3 Kooth ([www.kooth.com](http://www.kooth.com))

From July 2023 to March 2024, 993 young people accessed Kooth (Primary age 196, Secondary age 797).

It is recognised by Education, Health and Social Work colleagues that that platforms such as Kooth and Togetherall offer vital support for some young people.

## **7. WELLBEING AND HEALTHY EATING GUIDELINES FOR SCHOOLS**

7.1 Through data gathered from the School's Counselling service and from discussions with the school Pastoral Care Network, the issue of the number of young people with eating disorders or concerns has been raised. Over the past few years, we have seen an increase in the number of young people who report eating problems as well as reports of bullying linked to body image and shaming. A working group was established in 2023 to look at the need for guidance for schools around eating issues. A group of teachers and support staff from Knightswood Secondary School and The Dance School of Scotland have developed practice guidelines for all schools on Healthy Eating and Wellbeing and these are currently out for consultation in schools and will be published before the end of this year.

7.2 The guidance covers various topics such as:

- Common Eating Disorders / Problems
- Spotting the signs
- Talking about eating problems
- Frequently asked questions and answers for staff
- Eating and performance sport
- Vocational Performing Arts Training and eating
- Accessing support
- Actions to be taken by staff.

7.3 Once the guidance for schools has been published there will be further work developing advice for parents and carers. The working group is also looking at using alternative ways of sharing this information with young people through animations.

## **8. PLACE 2BE SENIOR MENTAL HEALTH LEADS TRAINING PROGRAMME**

8.1 Developing a whole school approach to supporting mental health and wellbeing is a key aspect of our mental health policy. Working in partnership with Place2Be we have been able to use funding from Glasgow HSCP to purchase 150 Places on the Senior Mental Health Lead course. This new leadership programme in Scotland supports school staff to develop a whole school approach to wellbeing and mental health.

8.2 As well as learning how to engage with the whole school community to promote positive mental health, the course covers:

- leadership and management.
- enabling student voice
- developing and supporting staff.
- identifying need and monitoring impact.
- working with parents and carers.
- targeted support and referral.
- an ethos and environment that promotes respect and values diversity

8.3 This is a 12-week online programme led by a clinician from Place2Be. The programme support leaders to identify a school's needs and priorities and build strategic approaches to address these. The programme incorporates two bespoke consultations with qualified clinicians, where participants can bring up to 5 members of school staff team to work together on their strategy.

8.4 The training has been evaluated and the outcomes were:-

- 98% would recommend the course to another school Senior Mental Health Lead. (n=45)
- 77.3% responded positively when asked if action they have taken as a result of this programme is having a positive impact on pupils in their school. (n=44)
- 98.1% rated their understanding of what contributes to the development of mental health highly after completing the course, this is an increase from 58.5% before the course. (n=53)
- 77.4% responded positively when asked if they have a clear plan on how to prioritise their school's mental health activity after completing the course, compared to 17% before. (n=53)
- 100% said they found the consultations with the Place2Be trainer helpful in developing their personal leadership of mental health. (n=45)

8.5 There are a further 30 staff who are about to start this programme in September.

## **9. [YOUTH HEALTH SERVICE \(YHS\)](http://WWW.NHSGGC.SCOT/GLASGOWCITYYHS)**

9.1 The Youth Health Service is a holistic, early intervention service for young people aged 12-19 years. The service is delivered in 9 venues across Glasgow City, in the evenings Mondays-Thursdays from 6pm-9:30pm, offering face-to-face, virtual and telephone appointments, to maximise access. Young people are supported with their mental health alongside a range of other clinical issues such as sexual health, weight management or multiple risk behaviours. This is complimented with support for non-clinical issues, such as housing, family support, and employability, as these can often impact on mental health.

9.2 The mental health support provided by the YHS, is delivered by Lifelink, commissioned by the NHS to deliver this component of the service model. A menu of support is delivered as a tiered model including Tier 1, Listening Ear appointments (20mins), Tier 2, Single Session appointments (50mins) and Tier 2, (40mins) 1:1 counselling offering the opportunity to access 4-8 sessions. A suite of well-being sessions has recently been included in the tiered offer, and training is underway to add family sessions to the menu of support. This tiered approach ensures young people have access to the right support at the right time, utilising available resource effectively. Frequently presenting issues include anxiety, depression, self-harm and anger. The aetiology of the wellbeing issues are often complex, they may not be immediately visible, rather emerging in subsequent consultations and once a relationship has been established. This is reflected in the presenting CORE (YP) scores used to measure distress, with over 40% having an initial score of >20 indicating moderate to severe distress.



- 9.3 A multi-disciplinary team provides the overall care for young people and includes nurses, GPs, counsellors, multiple risk workers, alongside an employability coach. Comprehensive wrap around support is provided by the nursing team beyond service delivery. This includes liaising with other professionals and agencies, signposting to relevant opportunities and onward referrals where appropriate. Parenting support is often included in the support plan for a young person to improve outcomes. Key referral sources are GP practices (37%), young person or family themselves (24%), Social Work 12%, CAMHS 11%, Education 9%.
- 9.4 Service demand has remained high since the pandemic with 1758 referrals last year.

## **10. COMPASSIONATE DISTRESS RESPONSE SERVICE (CDRS)**

**[CDRS | GLASGOW ASSOCIATION FOR MENTAL HEALTH \(GAMH.ORG.UK\)](https://www.gamh.org.uk)**

- 10.1 Both locally and nationally, work has been carried out to address needless and distressing waits at Accident and Emergency by people who are not medically unwell but are experiencing temporary distress and for whom there is a wellbeing concern. In Glasgow, CDRS was developed as an alternative, fast response service for people experiencing acute emotional distress, but are not in need of a clinical/medical intervention. The adult service (age 16+) has an in-hour referral pathway for GP practices and an out-of-hours pathway for emergency services. Young people aged 16-25/26 can also be referred to YP CDRS through an enhanced referral pathway that includes Education, Social Work, Health and Third Sector, Mon-Fri 9am-5pm. Young people are referred with their permission, and receive a call from a Distress Response Worker within 24 hours (or next working day), offering compassionate listening and distress management strategies. Young people may also access face to face support at GAMH offices. The YP pathways has been operating since September 2021 and supports approximately 500 young people annually. Highest presenting issues are anxiety, depression and suicidal ideation or behaviour. CDRS is an associate to the national Distress Brief Intervention (DBI) programme meaning that we can access comparative data nationally and across time, and have access to national training, governance and other developments. The service is currently piloting a 14-15's pathway with YHS, CAMHS and Social Work.

## 11. POLICY AND RESOURCE IMPLICATIONS

### Resource Implications:

<i>Financial:</i>	Within existing resources with additional funding from Scottish Government Mental Health Community Funding, School Counselling Funding and Scottish Attainment Fund, as appropriate.
<i>Legal:</i>	N/A
<i>Personnel:</i>	Within existing resources.
<i>Procurement:</i>	In line with Council advice.

### Equality and Socio-Economic Impacts:

<i>Does the proposal support the Council's Equality Outcomes 2021-25? Please specify.</i>	Yes Equality Outcome 7. Glasgow's Improvement Challenge (Literacy and Numeracy) has resulted in improved attainment.
<i>What are the potential equality impacts as a result of this report?</i>	Young people should have improved health and wellbeing as well as improved long-term outcomes.
<i>Please highlight if the policy/proposal will help address socio-economic disadvantage.</i>	While the approaches will not help to address socio-economic disadvantage there is clear evidence that providing support this group of young people will have long term benefits.

### Climate Impacts:

<i>Does the proposal support any Climate Plan actions? Please specify:</i>	No
<i>What are the potential climate impacts as a result of this proposal?</i>	None

*Will the proposal contribute to Glasgow's net zero carbon target?* No

**Privacy and Data Protection Impacts:**

Are there any potential data protection impacts as a result of this report  
Y/N None

If yes, please confirm that a Data Protection Impact Assessment (DPIA) has been carried out

**12. RECOMMENDATIONS**

- 12.1 The Committee is asked to consider the range of approaches being used and ask the Executive Director and Chief Officer to present further update reports, as appropriate.