

# The Children and Young People's Strand of the Grampian Psychological Resilience Hub (PRH)



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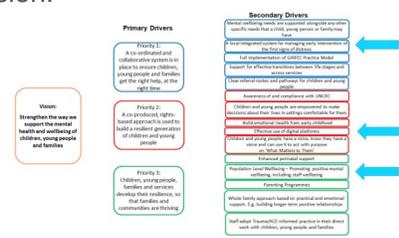
The Grampian Psychological Resilience Hub (PRH), a virtual service and the first of its kind in Scotland, is both innovative and inspiring and has gained positive feedback from audiences locally, nationally and internationally. It was established to support people using the principles of Psychological First Aid (PFA) to manage their Covid-19 related mental health concerns and to help minimise these concerns from presenting to front line services such as GPs and hospitals. This innovative approach shows how the coupling of clinical experience and Quality Improvement has meant that we have been able to evidence base and conceptualise a model that helps children and young people access early intervention and preventative mental health support.



**Aim: 80% of Tier 1/2 cases will receive support (appropriate to need) for psychological distress within 21 days of referral by May 2021.**

## Method

A fishbone analysis helped the team look at the variety of causes why a child, young person or their family were accessing support from PRH. This supported staff to understand the greatest need and therefore staffing and support guidance was updated to better reflect this. The team mapped their work onto the existing Mental Health Driver Diagram, provided to us through an Improvement Advisor. This ensured that, although we had developed our own theory of change, we were ensuring that this was consistent with the national vision.



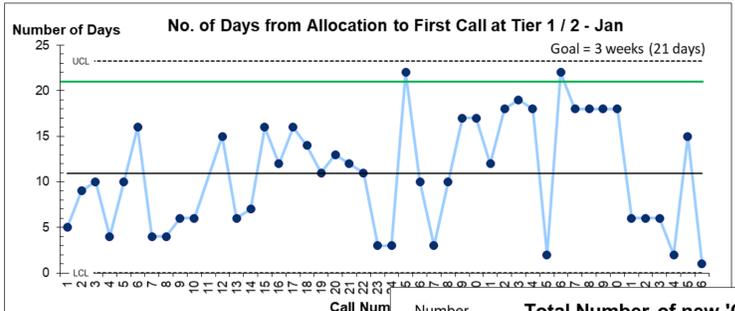
## Process Change

From the data, we noticed that the first break of the upper control limits was in the first few weeks of lockdown, when nationally, and in the press, the anecdotal feeling was that young people were excited to return to school. However, the data showed us a different picture - sitting behind this data was a group of anxious children and young people who were apprehensive about returning to school; wearing facemasks; and worried about catching Covid. This knowledge and tracking of the data helped us to better understand the needs of children and young people and tailor the support required to better meet these needs and not react to 'hearsay'. We coupled this with SPC Charts tracking the level of demand at each tier. This meant that we could create changes to the service and resourcing appropriate staff capacity, ensuring they were not overloaded and demand could be met.

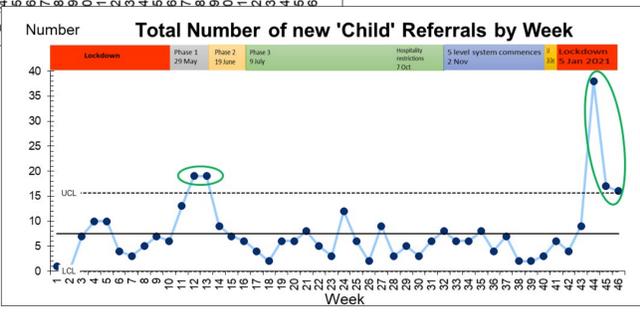
## Achievements

You will see from **SPC Chart A** that in the month of January, one of the busiest months, that a high volume of calls were taken for children and young people at Tier 1 and 2. Of these calls, **96% of calls** provided support to a child, young person or their family within the allocated 21 days. The mean for that month was 11 days. Across the last 5 months (Jan 2021 – May 2021), **93% of calls were within the 21 days**, with a mean of **10 days**.

**This meant that we met our aim and are continually ensuring that our children and young people receive support in a timely manner.**



SPC Chart A



SPC Chart B - Showing demand of the PRH each week.

## Results

**"Right Help. Right Place. Right Time."**

From another suite of measures, data also shows us that the PRH meets the early intervention needs of young people as **84% of 'cases' are closed after 1 or 2 calls** - meaning that within a short period of time, a multi-agency professional (trained in psychological first aid) has been able to de-escalate the distress of a child or young person.

## Conclusions

The PRH was established to ensure that people presenting with psychological distress did not put a burden on GP services. One GP, reflecting on the impact of the service had this to say:

*"I think this has been an excellent resource in Covid times. The self-referral option has also eased the burden for GP referrals and helped patients when initial access to us has been more difficult. You should be commended for setting up an amazing service so quickly and managing to maintain its effectiveness throughout Covid - hopefully a similar service could be continued longer term, especially for teenagers and younger people, as feedback from patients has been positive too."*

## Scale / Spread

Taking all of this into consideration, we have come to appreciate that this service is valued by those who access it, those who refer to it and those who work within it. This has resulted in us conceptualising a service model going forward post Covid-19, which is being considered locally and feeding into considerations at a national level. Discussions are at an early stage as to how this model could be adapted to form a Child and Adolescent Psychological Support Service (CAPSS). Learning from this work has already been shared with Cincinnati Children's Hospital, America through the Scottish Government's links with the Institute for Healthcare Improvement.