Introduction

The purpose of this document is to provide guidance to those working in IAPT services, as well as commissioners and providers of services, regarding working with under 18 year olds. The need for this guidance has arisen following reports from the British Association for Behavioural and Cognitive Psychotherapies (BABCP) that its members were being approached by IAPT services to provide training for services working with children as young as 13 at the request of commissioners.

Why do children and young people need a different approach to that of adults?

Children and young people do not present or process mental distress or disorder in the same way as adults. The systems and structures which surround children of the family and school are not the same as those within which adults operate. Depending on a child or young person's age, capacity and competence, the legislation which impacts on their treatment changes. In the eyes of the law, an under 18 year old is still a minor for whom there are a range of safeguards in place.

Over the past eight years, services working with Children and Adolescents have evolved and changed, and there has been investment in improving access. However, access to services is still variable across the country, not just in terms of what is provided, but the age at which CAMHS ends and adult mental health services begin. Variations across the country still include:

- CAMHS ends at 16.
- CAMHS ends at 16 if the young person has left school, 18 if in school.
- CAMHS ends at 18
- CAMHS ends when the young person leaves secondary school

Why is this an issue for IAPT?

The IAPT programme and IAPT outcome and recording system has been based on services for adults aged 18+. However, in parts of the country where CAMHS ends at 16, and adult commissioners commission services for
16+, IAPT services have been working with 16 and 17 year olds to ensure there is no care gap for young people with appropriate presentations.

With the advent of plans to extend IAPT to under 18s, in some areas commissioners have had discussions with services to reduce the age range below that of 16 year olds. This has caused concern amongst professionals that staff are treating children and young people inappropriately, without training or resources.

What does the new Mental Health Strategy say about working with under 18 year olds?

The strategy highlights the importance of delivering services which are age appropriate and developmentally suitable. **No health without mental health – delivering better outcomes for people of all ages**\(^1\) states the following in relation to working with children and young people:

‘Different approaches are required for children, young people and adults, although some interventions are effective in reducing distress and improving functioning across all age groups. Stigma and discrimination create barriers for people with mental health problems of all ages and their families and carers. The principles of the recovery approach, which emphasises the equal importance of good relationships, education, employment and purpose alongside reduction in clinical symptoms, apply equally to children and young people.’

‘Getting the experience of care right for children and young people and involving them in the design and review of services are important both for their current and future health and their willingness to use services if they need them later in life. Services need to be appropriate to the child’s or young person’s developmental stage. Of particular importance is ensuring effective transition from children’s to adults’ services.’

‘Age-appropriate environments are important, to protect children and young people from exposure to potential dangers or exploitation;
  • careful case formulation and clear inter-agency communication enable assessment and organisation of responses to safeguarding issues; and
  • getting the environment and service experience right for children and young people can strongly influence their current and future

\(^1\) Department of Health 2011
engagement with care. Getting this right can diminish any adverse impacts.’

Within the list of principles of high quality care the strategy states the importance of:

‘age and developmentally appropriate settings and approaches for children and young people, and adults of all ages.’

What does BABCP say about working with under 18 year olds?

In the BABCP ‘Standards of Conduct, Performance and Ethics in CBT’, standard 7.1 states that ‘therapists should only practise in the areas in which they have appropriate education, training and experience’\(^2\). This should therefore avoid situations such as those recently cited where people with no training or experience to work with younger people are doing so, for example.

Will the Children and Young people’s IAPT project be funding separate IAPT services for under 18 year olds?

The Children and Young People’s IAPT Project is a service transformation project which aims to embed the quality markers of IAPT for evidence based practice and session by session outcome monitoring in existing CAMHs working at Tiers 2 and 3, targeted and specialist levels. The funding within the project is for training and backfill of existing staff, not new posts.

What should services and commissioners do about existing services working with 16 and 17 year olds?

Services and commissioners will want to ensure that the services provided to any of their service users meet their needs. In the case of 16 and 17 year olds, this includes treatment given by staff who are trained specifically to work with young people, including treatment formulation and appropriate outcome measures, and who understand the social and legislative framework which surrounds them so that issues such as safeguarding are covered with good networks to ensure multiagency working. The Children and Young Peoples’ IAPT project is developing a range of outcome measures validated for children and young people, and services may wish to use these measures once available.

Should current IAPT services work with under 16 year olds?

Any service working with under 16 year olds will need to ensure that staff are trained to work with children and young people and supervised appropriately. If a commissioner wishes to commission a standalone IAPT service we recommend liaising with the local CAMHS to ensure there are good links to existing local strategies and services.