The following guidance will help you in collaboration with children, young people and families to assess whether a request to Young People Cornwall’s Children’s Wellbeing Practitioners (low intensity CBT) is appropriate.

Low Intensity Cognitive Behavioural Therapy (LI-CBT) is suitable for those children and young people who are aware of their cognitive abilities e.g. accessing thoughts and are motivated to change their behaviour. Interventions used provide evidence-based support for mild to moderate mental health needs which include low mood and anxiety presentations. LICBT is not recommended when there are multiple or complex needs or where a high level of risk is present. The table below provides a guide on suitability for our **CWP service**. Please note that those listed in the not suitable column will likely mean that we won’t be able to support in a LICBT capacity, but there may be other support that Young People Cornwall can offer. Therefore, if you are unsure about the support you are requesting, please contact us through email referral@ypc.org.uk

LICBT Interventions are designed to target specific needs and work towards a young person’s chosen goal. We require young people to engage in materials and complete work outside of sessions, hence clients need to be motivated to change. We can work directly with the young person 1:1 or we may offer a group setting. We can also offer parent led CBT where the child is under 12 years old. We tend to work with behavioural issues when a child is below 11 years old.

When a request is accepted this does not guarantee support will be provided. A Children’s Wellbeing Practitioner will carry out an assessment to check suitability for LICBT intervention. If assessed as appropriate the client will be offered a maximum of **8 sessions**. If our service is not suitable or not suitable at this time we will signpost or refer clients onto more appropriate services.

Those young people who have high ACE scores (Adverse Childhood Experiences) and childhood trauma are unlikely to benefit from LICBT support, without effective prior support. This is due to difficulties in being able to focus, retain information and learn from the here and now.

**Completing a request for support:**

* Please complete the form as a professional alongside a young person (this gives us additional information and ensures the young person’s voice is heard)
* Paper forms are no longer accepted, and referrals need to be completed online via our website.
* Please give as much information as you can – focusing on the current problem, what the young person wants and their motivation for change, any risk that covers past and current situation and any surrounding context where relevant.

**Please note we do not offer counselling support and CBT support is not the same.**

Young People Cornwall is **not a crisis intervention service**, and we cannot offer immediate contact or risk screening. If you have immediate concerns, please look to get in touch with the appropriate services [Early help - Cornwall Council](https://www.cornwall.gov.uk/health-and-social-care/childrens-services/early-help/)

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| **Suitable** | **May be suitable** | **Not suitable** |
| Common Mental Health difficulties that may respond to early intervention. | Conditions which may respond to early intervention but require discretion. | Significant levels of need/complex conditions which are not suitable for brief early intervention |
| Low Mood/ Mild to Moderately Severe DepressionPanic DisorderAgoraphobiaGeneralised Anxiety Disorder / WorrySimple Phobia (but not needle, blood or vomit).Sleep problemsStress ManagementBehavioural Difficulties (up to 12 years old) | Anger DifficultiesLow self-esteemMild Social Anxiety DisorderSome Compulsive BehavioursMild Health AnxietyAssertiveness/Interpersonal Challenges (e.g. with peers)Self-harm is disclosed but is assessed as linked to low mood but **is not assessed as enduring and high in risk in nature.**OCD | Pain ManagementPTSDBipolar DisorderPsychosisPersonality DisordersEating DisordersChronic Depression/AnxietyEstablished Health AnxietyHistorical or current experiences of abuse or violence.Complex interpersonal challengesBereavementActive, enduring and significant self-harmRelationship Problems |
| Single difficulty. | Main difficulty along with another difficulty in another area (that will not be worked on). | Multiple current difficulties having a significant current impact. |
| CYP and/or Parent has no additional learning needs that impact on engagement with materials. | Mild additional learning needs in CYP and/or Parent. | Moderate additional learning needs. |
|  |  | Significant instability in family, indicated by very conflicted parents, regular conflictual family relationships and/or significant mental health issues in parent/carers. |
|  |  | CYP has no self-agency and lack of parental/carer support. |
| LICBT requires someone to be motivated to make changes in the here and now. |  | CYP and/or Parent is not motivated to change. |
|  |  | CYP and/or Parent has additional agencies actively involved and are providing therapeutic support. |
|  |  | Significant/recurrent previous history of suicide with plans and/or suicide attempt within previous 3 months. |
|  |  | Current self-harm is regular and significant requiring treatment more than once in the last 3 months OR self-harm is significant and unpredictable.  |
|  |  | Current thoughts of suicide, with plans towards acting, that cause significant distress and occur every day. |
|  |  | Inflicts current harm to others. |
|  |  | Current harm from peers and/or current physical harm from conflictual family relationships. |
|  |  | Significant difficulties with routine self-care if independent, or from caregivers if not. Shows signs of neglect (exhaustion, poor hygiene, malnourished etc.) |
|  |  | Use of substances on a regular basis and/or parent is dependent on substance and using to intoxication.  |