Children and Young People Mental Health Risk Guideline

Patient's name:……………………………………………………

Trust ID & NHS number:……………………………….......

Date of Birth:………………………………………………….

Date and time:……………………………………………….

CED clinician to complete for any child or young person (CYP) presenting with mental health concerns

> Circle appropriate risk – Manage as per highest level of risk

LOW RISK	MODERATE RISK	HIGH RISK
• No intention to die ☐ • Outcome of attempt unlikely to be harmful ☐ • Regrets actions ☐ • Stable mental state ☐ • Willing to engage / cooperate ☐ • No safeguarding issues / carer able to safeguard CYP ☐ • Able to identify protective factors ☐	• Some plans to self-harm or die in the future ☐ • Concerns with engagement / cooperation ☐ • Potential safeguarding issues / carer unable to safeguard ☐ • Agitated / distressed / traumatised ☐ • Significant contributory event / trigger ☐ • Risk of absconding ☐ • Tearful / withdrawn / anxious ☐	• Current intention / plans to die ☐ • Significant low mood ☐ • Unstable mental state ☐ • Safeguarding concerns / carer unable to safeguard CYP ☐ • Possibility of fatal outcome in attempt ☐ • Physically verbal/aggressive ☐ • Not engaged / uncooperative ☐
Management **IN HOURS** ➢ Call RACH Paediatric Mental Health Liaison Team (PMHLT) to discuss if appropriate for referral. ➢ Admit to short stay unit only if formal risk assessment by PMHLT is indicated **OUT OF HOURS** ➢ Consider discharge into carer's care with full consent of patient and carer. ➢ Ensure appropriate safety-netting and resources (e.g. use hand-out at end of this guide). ➢ Family can self-refer to local community CAMHS team or GP. OR ➢ Contact out of hours CAMHS Consultant if further assistance / advice required. **Observations** **BOTH IN AND OUT OF HOURS** ➢ Whereabouts to be known by staff and checked 1 – 2 hourly. Not all patients need to be kept within eyesight. ➢ "General" observations. ➢ Request that parent / carer stay with CYP whilst in hospital	**Management** **IN HOURS** ➢ Refer to RACH Paediatric Mental Health Liaison Team (PMHLT). ➢ Admit to short stay unit (nurse in room near nurses' station) or ward until formal risk assessment by PMHLT. **OUT OF HOURS** ➢ Admit to short stay unit (nurse in room near nurses' station) or ward until formal risk assessment by PMHLT. ➢ Refer to PMHLT following day. **Observations** **BOTH IN AND OUT OF HOURS** ➢ Nurse in an observable area ➢ Whereabouts and safety to be known by staff. ➢ Request that parent / carer stay with CYP whilst in hospital. ➢ "Within eyesight" observations required by 'special' *to be considered* if parent / carer unable to stay with patient, or level of concerns warrants closer observation (see BSUH Policy for the observation of paediatric patients with mental health problems in the RACH) ➢ Any CYP requiring a 'special' **must be nursed on the ward**, not short stay unit.	**Management** **IN HOURS** ➢ Refer to RACH Paediatric Mental Health Liaison Team (PMHLT). ➢ Admit to ward (not short stay unit) until formal risk assessment by PMHLT. **OUT OF HOURS** ➢ Admit to ward (not short stay unit) until formal risk assessment by PMHLT. ➢ Refer to PMHLT following day OR ➢ Contact out of hours CAMHS Consultant if further assistance / advice required. **Observations** **BOTH IN AND OUT OF HOURS** ➢ Nurse in an observable area. ➢ Whereabouts and safety to be known by staff at all times. ➢ Request that parent / carer stay with CYP whilst in hospital. ➢ If attempts to abscond consider further support (i.e. hospital security, police, use of mental capacity act, or section 5.2) ➢ If disturbed / unstable mental state consider urgent discussion with PMHLT and/or on-call CAMHS Consultant Psychiatrist (numbers below) for advice. ➢ "Within arm's reach" observations required by 'special' (see BSUH Policy for the observation of paediatric patients with mental health problems in the RACH).

If patient absconds from hospital, contact Security on ext. 7474. Always contact Police on 101, but they may act on high risk cases only, and social care, as there is a potential safeguarding risk

Clinician name:

Signature / Title / Bleep:

Date & time:

CAMHS CONTACT LIST (for staff NOT families)

In hours: 09.00 – 20.00 weekdays / 10.00 – 18.00 weekends: Paediatric Mental Health Liaison Team, bleep 8913 (extension 2414)

Out of hours: 20.00 – 09.00 weekdays / 18.00 – 10.00 weekends: **On-call CAMHS Consultant**: via PRH switchboard 01323 440022 **for advice on management that cannot wait until working hours.**
(Urgent Help Duty Mobile: 07788564997)

To contact social care, use contact list in Child Health intranet "safeguarding" guidelines. Contact appropriate social care hub based on patient's address

Notes on 'Specialing' a patient

- On arrival to CED or admission to ward or short stay unit, the decision regarding whether a patient needs a 'special' should be made based on an assessment of risk.
- Decision should be made by the admitting doctor in consultation with the nurse in charge of the ward, shift coordinator, and the PMHLT (within working hours) and relevant entries made in the medical notes**.**

- Outside the working hours of the PMHLT, either the nurse in charge of the ward or the duty doctor should make the decision to 'special' a patient.
- This can be in conjunction with the on-call CAHMS psychiatrist if required. Relevant entries should be made in both the medical and nursing notes.
- Whenever a decision has been made to 'special' a patient, the consultant in charge of the patient should be informed.
- The PMHLT, when available, will be called by either the nurse in charge or the ward or the duty doctor and will attend the ward to assess the patient.
- The decision to reduce the level of supervision should be done in conjunction with the PMHLT. An assessment of the level of risk, as per PMHLT psychosocial assessment and risk assessment, would need to be incorporated and recorded.
- It is the responsibility of the ward staff to monitor for any change in presentation and contact PMHLT regarding any changes.

Please see BSUH Policy for the observation of paediatric patients with mental health problems in the Royal Alexandra Children's Hospital for further details about observations and documentation.

the **alex**
Emergency Department

NHS
Sussex Partnership
NHS Foundation Trust

NHS
Brighton and Sussex University Hospitals
NHS Trust

Sussex Partnership NHS Trust & Brighton and Sussex University Hospitals NHS Trust

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Safety net plan

Return to hospital if you have any of:

❖ significant low mood,

❖ further self-harm or suicide attempt,

❖ feeling physically unwell,

❖ experiencing unusual thoughts or behaviour

Always come to hospital if concerned

Contacts

- Mental Health Helpline 24/7 cover: 0300 5000 101
- HopelineUK, telephone (free): 0800 068 4141 (Mon-Fri 10.00-17.00, 19.00-22.00; Sat-Sun 14.00-17.00)
- Young Minds Parents Helpline - for PARENTS ONLY - email parents@youngminds.org.uk,   telephone (free): 0808 802 5544 (Mon-Fri 09.30-16.00)
- Samaritans, telephone (free): 116123
- Childline, telephone (free): 08001111
- MindEd for Families www.minded.org.uk