## Editorial

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# Child Health

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# If that is a quick roll-out what hope do we have?

Caroline Voogd, editor

ast-tracked? What images does this expression conjure up for you? A speedy delivery, a quick roll-out, rapid interventions, swift action responding to urgent need maybe. It certainly doesn't bring to mind an 8-year (and counting) wait! And yet, Claire Murdoch, NHS national mental health director, commenting on the Mental Health Support Teams (MHSTs) initiative said:



'NHS mental health teams are currently in contact with record numbers of children and young people, and since fast-tracking the introduction of these MHSTs, it's brilliant that we can confirm that well over two-fifths of pupils in schools and in further education are now covered by expert support.'

Two-fifths? I would struggle to call this brilliant. As a matter of fact, it is likely to keep me up at night. Let me get this right? The MHSTs were meant to help alleviate the extraordinary pressure on CAMHS. The same mental health services that are in a dire state and overwhelmed with referrals. Data obtained by the Children's Commissioner (2024) for England shows that more than 270000 out of nearly one million children and young people referred to mental health services in 2022/23 were still waiting for support at the end of the year (see *page 102*). And, 32 000 children and young people had been waiting for more than 2 years for a second contact, when care actually begins.

So when I read that MHSTs are on track to reach half of all children and young people by next year, 8 years after the initiative was first proposed it does not fill me with hope. Figures published by the Department for Education (2024) show that around 4.2 million students (around 44%) are now covered by support from MHSTs, it has been forecasted to reach 54% coverage by March 2025. What about the other half of all children and young people? How many years will it take to reach them? How many will have (and have already) left education by the time they will be able to access support? For how many will it come too late? These fears haunt us and the latest data do nothing to alleviate them.

Demand for children's mental health services, whether that is from CAMHS or MHSTs far outstrips availability and if it takes this long to roll out a programme which was purportedly 'fast-tracked' then what hope do we have of ever being able to offer decent mental health and wellbeing support for all children and young people who need it?

The only thing that keeps the nightmares at bay is the thought of our incredible school nurse and child health workforce in schools – who will be making a difference every day for children fighting mental health challenges. Let's hope the support we need from the MHSTs will soon be nationwide and any postcode lotteries of provision eradicated.

In this issue we are welcoming a new regular column by the National Forum of School Health Educators (see *page 137*). The forum aims to facilitate the exchange of ideas, information and best practice among educators and institutions involved in school nursing education. The column will explore various aspects of school nursing education, focusing on current trends, challenges and advancements, provide insights into key areas this may be policy changes, best practices and innovative approaches to improving the health and wellbeing of school-aged children and their families and, more generally, to enhance the quality of education for specialist community public health nurses and other school health professionals.

Department for Education. Transparency data: Transforming children and young people's mental health provision. 2024. Online. Available at: www.gov.uk/ government/publications/transforming- children-and-young-peoples-mental- healthprovision (accessed 31 May 2024)

Children's Commissioner. Children's mental health services 2022-23. 2024. Online. Available at: www.

childrenscommissioner.gov.uk/ resource/childrens-mental-health- services-2022-23 (accessed 31 May 2024)