

# Warwickshire School Health & Wellbeing Service

Annual Report for the academic year 2017/2018 - Year 3



Compass



Warwickshire  
County Council

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# 1. INTRODUCTION

## WARWICKSHIRE SCHOOL HEALTH AND WELLBEING SERVICE REVIEW 2017/18

We are delighted to present our third annual service review. This report describes the ways in which we have continued to develop innovative, creative and collaborative services with a real focus on prevention, which contribute to good outcomes for young people, families, schools and communities.

This review will show how we have worked closely with young people and our other partners and stakeholders. For example, we have been listening to and learning from our Youth Health Champions about the best ways to deliver meaningful services to young people in order to give them the skills to maintain a healthy lifestyle. Additionally, feedback from parents / carers led us to adapt our approach e.g. by introducing the parent line text messaging service, to provide choice in how parents can access the school health and wellbeing team.

The report also describes some of the innovative projects we are involved in for example the 'Ready for School?' pilot. This has seen us working with early years settings, families and other partners to facilitate a seamless transition into school, enabling children to be ready to learn.

### INTRODUCTION FROM COMPASS

It is a testament to the hard work and dedication of the Compass School Health & Wellbeing team, schools, partner agencies and Public Health Warwickshire that this service continues to evolve, reflect and adapt to best meet the needs of children, young people, their families and school communities. This report demonstrates Compass' commitment to continuously improve. The result of which is an adaptable, flexible, visible, and high quality universal service that is confidential, caring and reliable. It is evident we are reaching more children, young people and families earlier each year in ways that best meet individual needs. This improvement is as a result of actively listening and working with stakeholder to devise innovative ways of delivering meaningful interventions that maximises the impact of the service.

**Rachel Bundock**

Chief Executive, Compass

# INTRODUCTION FROM PUBLIC HEALTH

As we reach the end of the third year of the contract and consider the progress, achievements, successes and challenges, it is clear the School Health & Wellbeing Service has undergone significant change to meet local and national service expectations. A comprehensive review of the transformation of the service delivery model has demonstrated the positive impact of the changes since 1st November 2015 and will shape service delivery in the future.

A number of key projects have been successfully delivered during the academic year 2017-18; including the implementation of an Emotional Health and Wellbeing Lead working in partnership with our child and adolescent mental health services, and the 'Ready for School?' pilot project in partnership with early years settings and local health visiting services.

A notable achievement for year 3 was receiving silver in the 'Best Podcast' category at the ARIAS 2018 awards for the Health Uncovered podcasts, developed with young people, on social media and substance use. Congratulations to the service for this highly innovative piece of work and well-deserved national recognition.

The service will continue to play a key role in supporting our local priorities, including child accident prevention, self-harm reduction, oral health initiatives and our parenting strategy, as we enter year 4 of the contract.

## **Kate Sahota**

Commissioning Lead, Children's Public Health

## **Our nurses working with the Royal College of Nursing (RCN)**

Some examples of how the service has been engaging with the RCN:

Fiona Smith, RCN Professional Lead for Children's and Young People's Nursing visited Warwickshire to help inform the **redevelopment of RCN guidance for children and nursing services**. Fiona visited:

- Our Central hub to meet staff and discuss the service.
- Whitnash Primary to observe a Youth Health Champion introduction event, during which the children participated in a 'ways to keep healthy' session which involved discussing healthy eating, exercise and personal safety. Children drew and wrote on body pictures with their thoughts.

The RCN is **building an evidence base around school nursing** to explore how this helps to improve public health. To support this one of our School Staff Nurses submitted an RCN case study outlining some work they had undertaken with one young person, following referral by their school's Welfare Lead due to concerns for the young person around social anxiety.

# 2. PUBLIC HEALTH WARWICKSHIRE

## WARWICKSHIRE PRIORITIES

**Mental Health & Wellbeing**

- Promoting good mental and emotional well-being to enhance resilience
- Bullying, including physical/on line, peer pressure
- Focussing on early identification and support

**Physical Health & Wellbeing**

- Supporting long term conditions (e.g. diabetes, asthma, epilepsy)
- Screening and immunisation coverage
- Promoting safety and reducing accidental injuries
- Promoting good oral health

**Positive Lifestyle Choices**

- Smoking, drugs and alcohol misuse
- Relationships, sexual health, contraception and parenthood
- Maintaining a healthy weight including physical activity and healthy eating

## SERVICE OBJECTIVES

Focus on reducing inequalities and improving outcomes

Use prevention and early help approaches

Evaluate preventative and public health programmes in school and community settings

Identify and support children and young people in need of early help

Deliver evidenced based approaches that contribute to children and young people's health, wellbeing and behaviour change

Co-ordinate care and refer on to other services

Support children and young people who have complex and or additional needs via co-ordination, advocacy, education and training

Contribute as part of a multi-agency team for children, young people and families with multiple problems

Support transition from pre-school and primary through to secondary school and further education

# 3. REVIEW OF SCHOOL HEALTH & WELLBEING PRIORITIES - YEAR 3

Each academic year we agree a Service Improvement & Development Plan setting out the priorities and then report on how well we are meeting these. In year 3 (2017-2018) we have successfully met the priorities identified in year 2:

| PRIORITY  | HAVE WE MET THE CHALLENGE?  |
|---|---|
| <b>'Ready for School?' pilot 3-5 years (please see page 11 for more information)</b>                | <ul style="list-style-type: none"> <li>• Creation of school readiness questionnaire, promotion within early years settings and development of good working relationships with their staff.</li> <li>• 254 questionnaires were completed (32% of invitations sent).</li> <li>• Next year the pilot will expand to include all early years settings in North Warwickshire, sending invitations to over 2,000 parents / carers of 3.5 year olds.</li> <li>• Referred families to Health Visitors for additional support.</li> <li>• Identified public health priorities for the 3 localities, with interventions to be delivered during 2018-19.</li> <li>• Working to develop a 'Ready for School?' policy and toolkit.</li> <li>• Evaluation of the pilot continues with Coventry University.</li> </ul> |
| <b>SEND – Health Needs Assessment (HNA)</b>   | <ul style="list-style-type: none"> <li>• Communicated with special schools to advise them of the HNA process.</li> <li>• Meetings have taken place with 5 special schools who would like to introduce parent workshops, HNA and public health interventions for 2018-19.</li> <li>• Formed a SEND working group led by our School Special Needs Nurse to implement safe working practices and pathways across the service to ensure that the needs of children and young people with SEND are being met.</li> </ul>   |
| <b>Links / joint working with Children &amp; Young People's Drug &amp; Alcohol Service (CYPDAS)</b> | <ul style="list-style-type: none"> <li>• 11 schools received specialist intervention sessions regarding drugs, alcohol and solvents.</li> <li>• Joint provision of ChatHealth.</li> <li>• Joint development and promotion of the Health Uncovered podcasts.</li> <li>• CYPDAS to use HNA data during 2018-19 to identify secondary schools that will benefit from interventions.</li> <li>• Co-delivery of awareness sessions planned for 2018-19.</li> </ul>   |
| <b>Home schooled – vulnerable groups HNA</b>  | <ul style="list-style-type: none"> <li>• HNA invitation provided via Warwickshire Vulnerable Groups team (continue to be sent for 2018-19).</li> <li>• Promotion of service to parents / carers and home schooled children and young people.</li> </ul>   |
| <b>Post 16 HNA</b>  | <ul style="list-style-type: none"> <li>• Pilot undertaken in colleges.</li> <li>• Discussions have taken place with the Association of Young People's Health to look at how the service provides support to post 16 young people with medical conditions once they have left school.</li> </ul>   |
| <b>Lifestyle behaviours - prevention and early help pathways</b>                                    | <ul style="list-style-type: none"> <li>• Pathways are established within the team and external partners such as Rise, Respect Yourself, CYPDAS and Fitter Futures.</li> </ul>   |
| <b>Evaluate service</b>   | <ul style="list-style-type: none"> <li>• Continued analysis of data from HNA and NCMP to respond to identified needs and provide appropriate interventions.</li> <li>• Information shared with Public Health Warwickshire to identify population level need.</li> <li>• Service user feedback from children, young people, parents / carers and schools.</li> </ul>   |

## Providing more support for reception children through the HNA

In 2016-17 we identified that HNAs were completed for only 42% of reception age children, which meant we weren't able to provide all the support needed or gain an accurate picture of the health needs of the population at school entry.

### How we sought to improve this

We attended various events across the county within school and community settings to promote the HNA and give parents / carers an opportunity to complete the questionnaire, including:

- Libraries, children's centres and leisure centres during specific children's events and holiday play schemes.
- School coffee mornings for new school entry parents / carers.
- Meeting parents / carers in the playground during drop-off and pick-up.
- School induction events, parents' evenings throughout the year, sports days.

Additionally, in the north of the county, parents / carers participating in the 'Ready for School?' pilot received follow up communication in the summer before the start of school advising them to look out for the School Entry HNA. In this area, it increased the completion rate by 9%.

### Outcome

In 2017-18 we were pleased to see an increase in the completion rate to 48%.

Feedback from parents / carers indicated what approaches they found particularly useful:

- During events where they could immediately access the questionnaire and receive help to log in.
- Understanding the importance of the questionnaire by speaking directly to one of the School Health & Wellbeing team.
- At leisure centre events they liked having an update on the service and which elements of health we could support with.
- The ability to complete the questionnaire away from school.
- The ability to refer directly to the School Health & Wellbeing team without going via school.

We will therefore continue to promote the School Entry HNA through similar methods during the next year.

# 4. UNIVERSAL KEY STAGE CONTACTS

## Health Needs Assessments (HNA)

We continue to deliver these nationally recommended universal key staged contacts using online questionnaires through the The Lancaster Model (TLM) portal. In 2017-18 building on the success of the previous year's pilot, we have rolled out the Year 9 HNA in all secondary schools.

We ask parents / carers to complete HNAs at school entry on behalf of the child and for year 6 and year 9 these are completed by children and young people themselves (excluding the SEND pilot).

The information gathered through the HNA enables us to target interventions where there is real need, through data alerts on an individual, school and population level.

### HNA completion, by year group

#### School entry (aged 4 to 5)

| Academic year | Population | Number of HNA completed | Percentage |
|---------------|------------|-------------------------|------------|
| 2017 - 2018   | 5,972      | 2,887                   | 48%        |
| 2016 - 2017   | 6,404      | 2,684                   | 42%        |
| 2015 - 2016   | 6,405      | 1,638                   | 25%        |

#### Year 6 (aged 10 to 11)

| Academic year | Population | Number of HNA completed | Percentage |
|---------------|------------|-------------------------|------------|
| 2017 - 2018   | 5,991      | 5,514                   | 92%        |
| 2016 - 2017   | 5,796      | 5,278                   | 91%        |
| 2015 - 2016   | 5,757      | 4,653                   | 80%        |

#### Year 9 (aged 13 to 14)

| Academic year       | Population | Number of HNA completed | Percentage |
|---------------------|------------|-------------------------|------------|
| 2017 - 2018         | 5,963      | 2,776                   | 47%        |
| 2016 - 2017 (pilot) | 5,655      | 1,543                   | 27%        |

## How we acted on feedback to improve completion rates

During the Year 9 HNA pilot in 2016-17, concerns were raised by participating schools about the:

- Level of disruption to the curriculum.
- Logistical challenges of facilitating the School Health & Wellbeing team in their schools.

**Acting on this feedback we:**

- Developed a video which explains the HNA to pupils, giving them information about; the type of questions asked, confidentiality, how the information provided will be used and what support and guidance will be available through ChatHealth and the School Nurse team directly.
- Worked with schools to identify the best ways for pupils to complete the HNA to reduce disruption to the wider curriculum, which has led some schools to set the HNA questionnaire as homework, and some have asked pupils to complete this as part of their tutorials or PSHE lessons, either facilitated by our teams or by school.

This has provided flexibility both for schools and our team in how the online questionnaires are managed and completed within school schedules.

We achieved a 46.5% completion rate for the Year 9 HNA in 2017-18, providing more accurate data for the population. This enabled us to better target this cohort through drop-in and one to one support sessions with School Nurses, in more secondary schools. The key topics highlighted by the HNA were emotional health, weight management and sexual health.

**To further encourage completion for the next academic year we continue to:**

- Promote the service (through bulletins / articles in staff newsletters and Heads Up magazine, etc.).
- Engage with all secondary schools.
- Make HNA data available as a report to enable its use for health promotion and monitoring.
- Improve pupil access to face to face support through additional drop-in services.



## Individual level data alerts

Please refer to the tables above for the numbers of HNAs completed, by age group. Of the total 11,177 questionnaires completed in 2017-18, these have generated 11,857 individual alerts for review by our school nurses.

| Alert type                            | Relevant year group |        |        | Number of alerts generated (% of total HNAs completed) |               |               |
|---------------------------------------|---------------------|--------|--------|--|---------------|---------------|
|                                       | School entry        | Year 6 | Year 9 | 2017-18  | 2016-17       | 2015-16       |
| Risk & protective                     | Y                   | Y      | N      | 1,447 (17%)  | 1,437 (18%)   | 1,244 (20%)   |
| Emotional health & wellbeing          | Y                   | Y      | N      | 1,859 (22%)  | 1,708 (21%)   | 1,475 (23%)   |
| Holistic health interview             | Y                   | Y      | Y      | 3,168 (28%)  | 2,830 (30%)   | 1,973 (31%)   |
| Vision screening                      | Y                   | N      | N      | 186 (6%)   | 166 (6%)      | 128 (8%)      |
| Hearing screening                     | Y                   | N      | N      | 124 (4%)   | 128 (5%)      | 70 (4%)       |
| Follow up <sup>1</sup>                | Y                   | Y      | N      | 4,955 (N/A)  | 8,285 (N/A)   | 15,402 (N/A)  |
| Information <sup>2</sup>              | Y                   | Y      | Y      | -  | 8,149 (N/A)   | 6,861 (N/A)   |
| Developmental milestones <sup>3</sup> | Y                   | N      | N      | 118 (4%)   | -             | -             |
| <b>TOTAL</b>                          |                     |        |        | <b>11,857</b>  | <b>22,703</b> | <b>27,153</b> |

- <sup>1</sup>Follow up alerts - now only generated by pupil, rather than by topic, leading to a decrease.
- <sup>2</sup>Information alerts - these are no longer generated however based on the number of pupils indicating further information was required, circa 11,000 alerts would have been generated under the old system.
- <sup>3</sup>Developmental milestones – a question has been added to compliment the work done around ‘Ready for School?’ and allow the tracking of pupil development from ‘Ready for School?’ to ‘School Entry’.

## Responding to alerts

Where individual alerts are generated those children and young people and / or their parent / carers (depending on pupil age) are contacted to offer support, to signpost them to useful websites or refer to other agencies as appropriate.

## 'Ready for School?' Pilot

It has been identified that there are growing numbers of children starting school in Warwickshire who are not 'school ready', for example not able to:

- Use the toilet (still wearing nappies).
- Dress themselves.
- Use cutlery to eat.

Supporting the Warwickshire Smart Start Strategy 2016-2020, this pilot project aims to close the gap for children between their last health visiting contact and them starting school; to ensure that they are or can become school ready. As part of the pilot, Warwickshire Public Health, the School Health and Wellbeing Service and TLM have together created an online developmental assessment questionnaire for children aged around 3.5 years. This is based on the HNA tool currently being used across the county at reception, year 6 and year 9 and collaboratively adapted to meet the needs of pre-school children.

An invitation was sent to the parents / carers of children attending 22 early years settings in North Warwickshire, asking them to complete the online assessment. 254 questionnaires were completed (32%). Following review, parents / carers were contacted where appropriate, including:

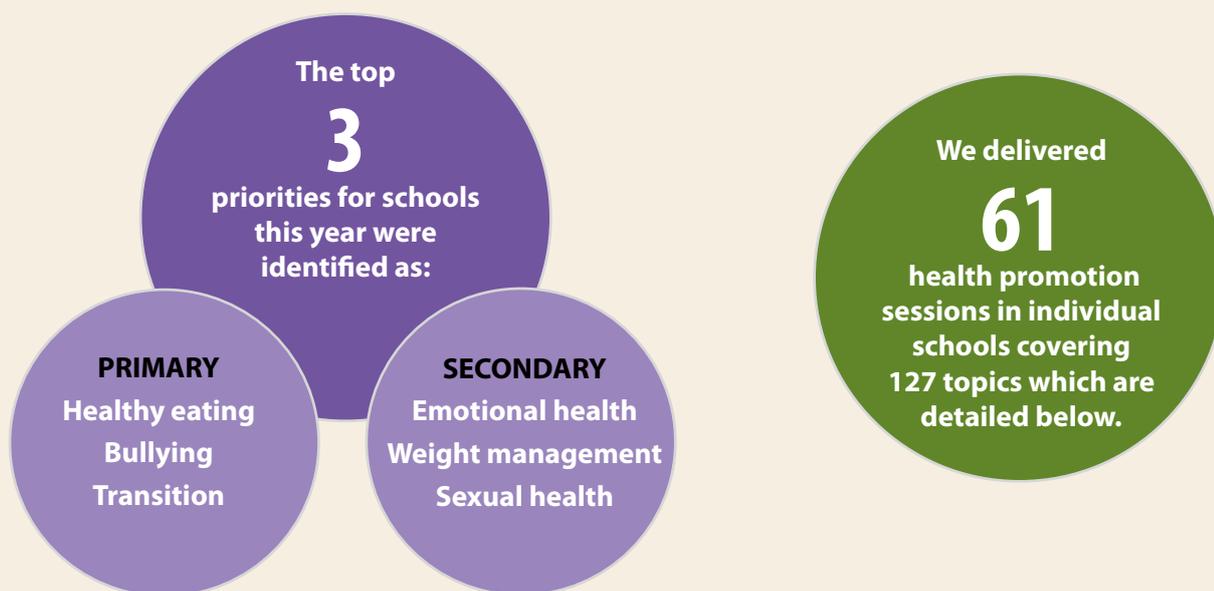
- 5 referrals made to health visiting services (for toileting, behaviour, developmental delay, selective eating).
- 42 children were identified as not having attended the dentist – all these parents / carers were sent a letter with advice about the benefits of attending the dentist and how to access an NHS dentist if they are not currently registered. The parents of 2 children with special needs were signposted to specialist dental services. Next year we will measure the impact of these letters using the School Entry HNA.
- 40 parents / carers requested information regarding health topics - useful website links were sent to them along with contact details for health visiting services.

Overall data has been used to identify public health priorities in partnership with the early years settings, health professionals and other related agencies. These include the 'bottle swap' (benefits of cups compared to bottles), adult mental health and the skills required to become school ready.

Interventions and public health information will be provided to early years settings to support school readiness and the public health agenda during the 2018-19 academic year, utilising the skills and knowledge of early years professionals and their existing relationships with families.



## School level data



### Public health campaigns - key priorities identified for schools

From the data collected we provided each school an anonymised report summarising the health needs of their pupils. These reports were discussed with the schools and plans were agreed which combined current school initiatives with activities to be delivered by the School Health and Wellbeing team. For year 9 pupils this was in the form of individual sessions and for primary school children group sessions as summarised below.

| Topics identified              | Topics covered during sessions | Number of pupils attended |
|--------------------------------|--------------------------------|---------------------------|
| Healthy eating                 | 42                             | 2856                      |
| Oral health                    | 41                             | 2800                      |
| Handwashing                    | 10                             | 468                       |
| Puberty                        | 10                             | 367                       |
| Weight management / body image | 7                              | 478                       |
| Bullying                       | 7                              | 295                       |
| Emotional health               | 5                              | 240                       |
| Smoking                        | 2                              | 120                       |
| Safety                         | 2                              | 92                        |
| Transition                     | 1                              | 60                        |

## Population level data

### Primary schools (school entry and year 6)

| Public health priority | Number of schools | Percentage of schools |
|------------------------|-------------------|-----------------------|
| Healthy eating         | 166               | 87%                   |
| Bullying               | 81                | 43%                   |
| Transition             | 64                | 34%                   |
| Substance misuse       | 43                | 23%                   |
| Emotional health       | 42                | 22%                   |
| Smoking                | 40                | 21%                   |
| Puberty                | 36                | 19%                   |
| Weight management      | 20                | 11%                   |
| Oral health            | 18                | 9%                    |
| Vision                 | 11                | 6%                    |
| Accidents & safety     | 6                 | 3%                    |
| Child development      | 5                 | 3%                    |

### Secondary schools (year 9)

| Public health priority      | Number of schools | Percentage of schools |
|-----------------------------|-------------------|-----------------------|
| Emotional health            | 16                | 80%                   |
| Weight management           | 11                | 55%                   |
| Sexual health awareness     | 9                 | 45%                   |
| Substance misuse - drugs    | 8                 | 40%                   |
| Bullying                    | 6                 | 30%                   |
| Online safety               | 5                 | 25%                   |
| Substance misuse - smoking  | 4                 | 20%                   |
| Substance misuse - solvents | 0                 | 0%                    |

## Supporting public health campaigns

| Campaign                                    | How we supported   |
|---|--|
| Hydration                                   | Promoted through the use of posters as part of the Warwickshire Hydration Partnership (see example)  |
| Cyberbullying                               | Promoted through creation and display of bespoke posters and an advisory leaflet (see example)       |
| Safety                                      | Topics covered during public health group interventions including sun safety and accident prevention |
| School readiness                            | Continuation and expansion of the 'Ready for School?' HNA pilot                                      |
| Warwickshire Child Sexual Exploitation week | Attended and participated in the conference day  |

**DRINK TO HYDRATE** 8

**Being hydrated can help with:**

- Alertness
- Concentration
- Laughter
- Ability to talk
- Remembering names
- Sleeping at night
- Energy levels

**Dehydration can cause:**

- Confusion
- Urine infections
- Increased falls
- Tiredness and feeling sleepy
- Dizziness
- Headaches
- Irritated bladder
- Dry mouth and skin

Warwickshire Hydration Partnership is a coming together of local, regional and national organisations to encourage better hydration for people of all ages across Warwickshire. The partnership includes: Age UK, Compass, HEART, NHS Right Care, NHS South Warwickshire CCG, NHS South Warwickshire NHS Foundation Trust, NHS Warwickshire North CCG, Severn Trent Water, Warwickshire County Council, Warwickshire Fire Service

**CYBER BULLYING: HELPING YOU ONLINE**

Cyber bullying is any form of bullying which takes place online, via smartphones, tablets, gaming, chat forums and social media. If someone is repeatedly cruel – that is bullying. No one should blame themselves. No one deserves to be treated badly.

**4 simple steps to stop bullying online**

- Do not respond** to any messages – most of the time, bullies are only after a response, so don't let them have this from you.
- Screenshot** any messages – capture any copies of the messages.
- Mute** accounts so you can longer see the users. You can hide messages or posts from users without them ever finding out! Using 'mute' (or similar) features on social media still shows you following other users, but their updates do not appear in your feeds or timelines. Check the settings page on the social media site to find out how to do this. If you accidentally muted someone, you can also 'unmute' them without them knowing either!
- Tell Someone** – take the messages you have screenshot, and show a trusted adult, so something can be done about the offending user(s).

If you are the person who is doing the bullying, you can visit [ditchthelabel.org](http://ditchthelabel.org) for help & information

**PARENTS**  
Does your child have a smart phone/tablet? Or are you thinking of buying them one? **It doesn't matter which one you buy. The important thing is keeping them safe when they are using it.**

**PARENTAL CONTROLS**  
[www.internetmatters.org](http://www.internetmatters.org) is a website which can guide you through how to set up parental controls across a host of devices – and even via your broadband. Setting these up will allow you to decide age appropriate content which your child can access on these devices.

More information on how to report, block, mute and update privacy on social media sites can be found via the following pages:

- facebook.com
- youtube.com
- support.twitter.com
- help.pinterest.com
- support.snapchat.com
- help.instagram.com
- tumblr.com

Compass CYBER SAFE  
If you're 11-19 years old, you can text your school nurse for free, confidential advice and support on 07507 331 525

Feedback from a parent following a continence workshop:

*"I've learnt a lot from this workshop. Before coming I felt lost and alone. I feel now that we can tackle the bed time wetting with everything we have learnt."*

## Delivering public health messages following the HNA

Warwickshire School Health and Wellbeing Service worked with Nicholas Chamberlaine Technology College to schedule a suitable time for year 9 students to complete the online health questionnaire. This was then completed by 166 students (78%) during a series of autumn term sessions.

Following completion a number of students had the opportunity to meet with a Nurse to discuss health concerns they had raised and receive appropriate support from the Nurse, through signposting or referral to specialist services.

We analysed the overall results of the questionnaire and highlighted the public health priorities. Following discussion of these with the deputy head teacher, we made a joint agreement to target emotional health and wellbeing, with a particular focus on stress and anxiety.

Following this meeting, our Nurses delivered a bespoke assembly presentation for the year 9 students, which encouraged them not to self-diagnose, but rather understand:

- How to seek support from the correct agencies.
- That exam stress is normal.
- The importance of exercise and the factors which can impact on emotional health and wellbeing.

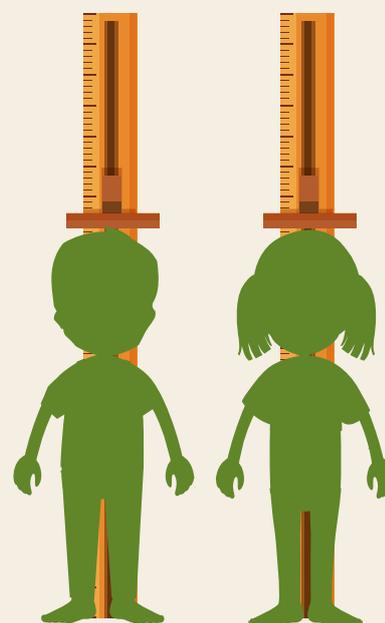
Students asked appropriate questions during the session and also during break time, as the Nurses ensured they were visible and accessible.

## National Child Measurement Programme (NCMP)

Every year in England, children in reception and year 6 have their height and weight measured as part of the NCMP, a mandated government activity.

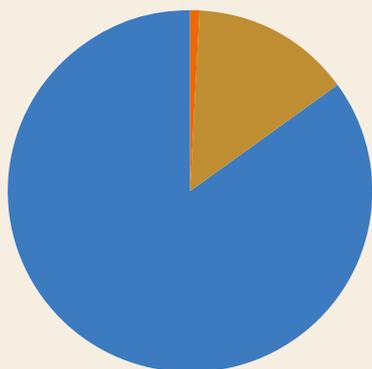
The NCMP provides information to help build an understanding of national and local trends in child weight. It is important to have a good understanding of how children are growing, so that the best possible advice and support can be provided for them and their families.

Our NCMP programme is led by our Healthy Lifestyle Coordinator and delivered in schools by our School Nursing Health Care Support Workers.



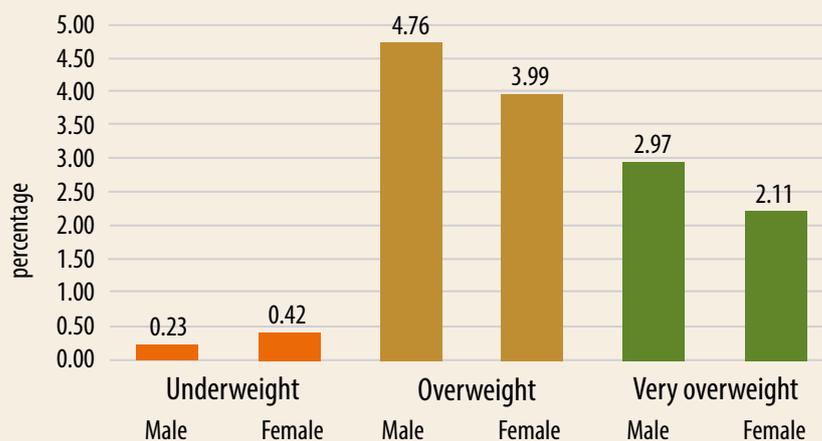
|           | Completion rate |             |             |
|-----------|-----------------|-------------|-------------|
|           | 2017 - 2018     | 2016 - 2017 | 2015 - 2016 |
| Reception | 98.0%           | 97.6%       | 98.4%       |
| Year 6    | 97.2%           | 96.8%       | 97.1%       |

## School entry NCMP summary

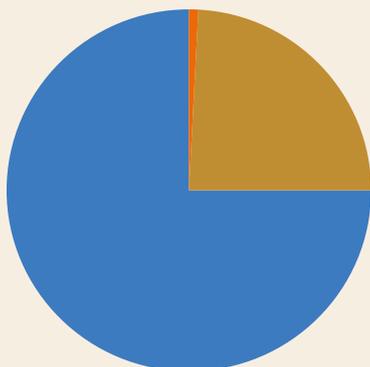


- 1% Underweight
- 14% Overweight and Very overweight
- 85% Healthy weight

## NCMP results for School Entry

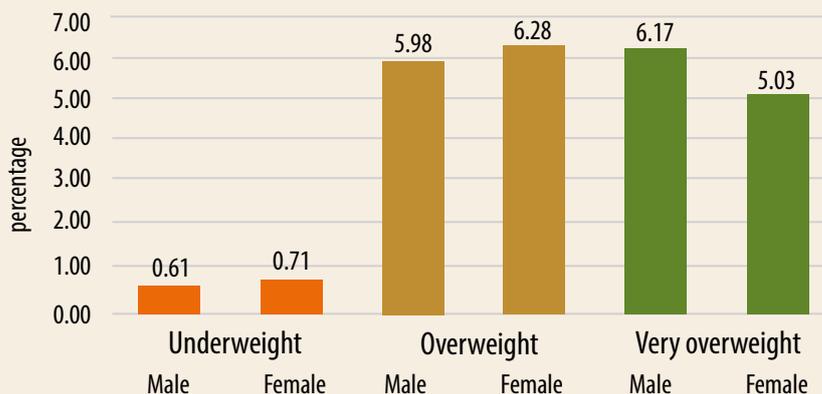


## Year 6 NCMP summary



- 1% Underweight
- 24% Overweight and Very overweight
- 75% Healthy weight

## NCMP results for Year 6



## Acting on NCMP data

When children are found to be overweight (91st+ percentile) we refer them onto Fitter Futures - who aim to support people to improve their health through maintaining a healthy weight, become physically more active and having a healthier lifestyle. This year we referred 1,688 children (14% of total pupils measured).

We encourage families to attend Fitter Futures and we continue to work with children, young people, families and schools to establish and sustain healthy eating habits. Where children are found to be underweight we contact their parent / carer and refer them to their GP.

We undertake weight management public health group interventions where schools use the HNA data to identify this as a priority.

## Working with partners to improve pupil health

The Fitter Futures Change Makers Family Lifestyle Programme is for families with children aged between 4 and 12 years old who want to know more about healthy eating and active games. The programme aims to work with families as well as individual children.

A School Nurse referred a child to Fitter Futures, following regular contact with their doctor and dietician regarding weight issues.

At the point of referral the School Nurse made the Family Lifestyle Adviser aware of the child's anxiety issues and their refusal "to be seen outside" due to sensitivity regarding their weight. A group programme was deemed not to be appropriate, so 6 weekly one-to-one sessions were proposed for the child and their mother.

Despite the child's anxiety issues, they were very open to the sessions with Fitter Futures, engaging fully and enjoying the physical activities. Nutrition activities included:

- Encouraging the mother and child to try new foods by holding a tasting session, with the child starting to eat fruit such as bananas and apples as a result.
- Setting a target for the child to start eating breakfast regularly.

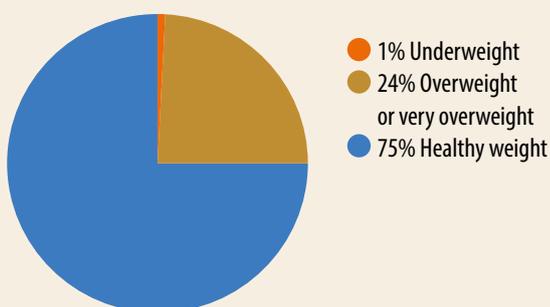
At the end of the series of sessions, the child was encouraged to take responsibility for their own diet, without reliance on doctors or dieticians, for example by eating breakfast and controlling their snacking.

Both mother and child lost weight during the sessions (1kg and 2kg respectively).

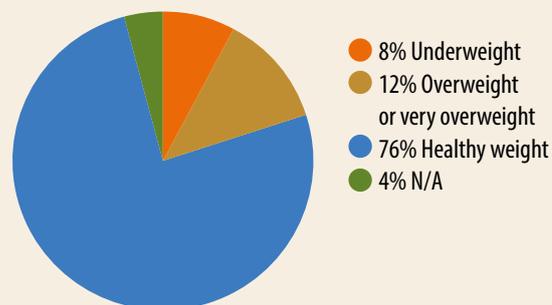
*Talking with the nurse had made me better with my eating habits*

## Perceptions of year 6 children

Actual NCMP measurements for year 6 children



How year 6 children see themselves



Consistent with the data gathered last year, we have found that year 6 data collated via the NCMP when compared with that collated via the HNA (where children and young people are asked questions about their own health) indicates that some young people perceive themselves to be a healthy weight or underweight when actual measurements show that not to be the case.

We continue to track these findings and over time this will be used as evidence to inform not only our interventions and health promotion messages but also to inform the programmes delivered by agencies such as Fitter Futures to allow them to reflect body perception and healthy weight into their courses.

# 5. SAFEGUARDING

Safeguarding within school is everyone's responsibility, to ensure children and young people thrive. The School Health & Wellbeing team has a key role to play in supporting these fundamental, statutory requirements.

## Review Health Assessments (RHA) for Children who are Looked After (CLA)

A core part of the School Health & Wellbeing Service delivery is the annual RHA for children who are looked after. This assessment includes professional liaison and follow up with social workers, foster carers and guardians. Every young person is invited to an annual statutory RHA, during which a School Nurse will:

- Assess the child or young person's physical, emotional and mental health.
- Explore the child's health history and establish the effects this has on their development.
- Assess the existing arrangements for the child's health including:
  - vaccinations
  - dental checks
  - vision checks.
- Provide advice and guidance on promoting health.
- Outline the actions which need to be taken to ensure that the CLA is provided with optimum health care and therefore is as healthy as possible.

The number of CLA assessments undertaken has increased from 141 in 2016-17 to 156 in 2017-18.

The School Health & Wellbeing Service continues to identify and work with children and young people in need of support and protection, acting within national, Local Safeguarding Children's Board and Compass standards.

### Multi-agency working

The School Health & Wellbeing Service participates in multi-agency working and is part of the **Warwickshire County Council self-harm working group** (other members are from Public Health Warwickshire, all of the Warwickshire CCGs and Rise) which meets monthly.

The group was set up following the Warwickshire Suicide Prevention Strategy which highlighted that there are above average rates of self-harm among young people in South Warwickshire and that people who self-harm are at increased risk of suicide in the following year.

The Compass Emotional Health & Wellbeing Nurse has used the forum to suggest interventions in schools for reducing self-harm and contributed to the Warwickshire events organised for World Suicide Awareness Day in September 2018.

As a result of our involvement with the group:

- All school nursing staff are aware of the need to ask more involved questions of young people who have self-harmed and staff have undertaken online training from the Zero Suicide Alliance which gives guidance on how to speak about suicidal feelings.
- The Suicide Bereavement Support Service Coordinator from The Kaleidoscope Plus Group has offered to work with the School Health & Wellbeing Service, speaking to schools where there is an identified need.

## Attendance at safeguarding meetings

|   |     |
|---|-----|
| Safeguarding meetings attended                            | 857 |
| Safeguarding meetings contributed to                      | 596 |
| Safeguarding information requests received including MASH | 136 |

## Multi-Agency Safeguarding Hub (MASH) information requests

|   |                 |
|---|-----------------|
| Number of Information requests received | 95              |
| Number of cases information provided    | 67              |
| Cumulative total                        | 179             |
| Cumulative total by area                | North 24        |
|   | Central 88      |
|   | South 49        |
|   | Area unknown 18 |



# 6. OTHER SUPPORT

## ChatHealth text messaging helpline

We provide ChatHealth to give young people and parents / carers the opportunity to text a School Nurse for confidential advice on all kinds of health and wellbeing issues. This has provided broader access to the school nursing team and given people more ways to seek advice.

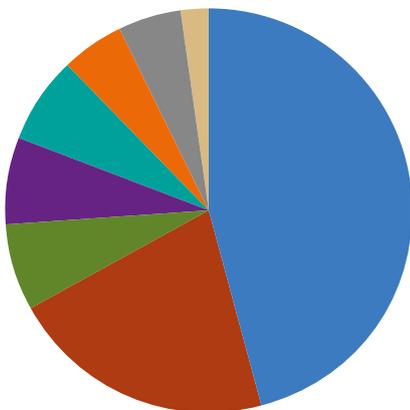
### ChatHealth text messaging service - teen line

| 2017-2018            |                   |               |
|----------------------|-------------------|---------------|
| Conversations opened | Messages received | Messages sent |
| 70                   | 423               | 514           |

### ChatHealth text messaging service - parent line

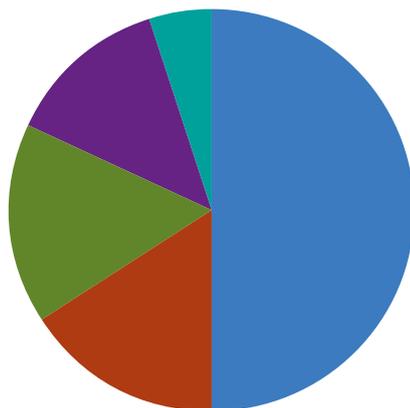
| 2017-2018            |                   |               |
|----------------------|-------------------|---------------|
| Conversations opened | Messages received | Messages sent |
| 40                   | 112               | 159           |

### ChatHealth attributes - teen line



- 46% Emotional Health (including self harm, anxiety, depression)
- 21% Sexual health, relationships & pregnancy
- 7% Medical conditions
- 7% Child development (sleep, continence)
- 7% Other
- 5% Healthy eating
- 5% Weight management and body image
- 2% Substance misuse

### ChatHealth attributes - parent line



- 50% Child development (behaviour, continence, sleep, parenting advice)
- 16% Emotional health (including anxiety)
- 16% Medical conditions
- 13% Other (contact request)
- 5% Healthy eating

*Thank you - helped so much. Feeling positive :-)*

## Young person seeking support via ChatHealth

### Initial contact

A young person contacted us via ChatHealth stating that they were feeling depressed and had suicidal ideation.

One of our School Nurses began a dialogue to determine more about the issue, the young person's existing support, any previous self-harm and what self-help strategies they had, as well as continuously assessing whether a police 'welfare check' was required.

The School Nurse quickly shared web links for The Mix and Young Minds in case the young person left the conversation.

### Further dialogue

By the end of the conversation, the School Nurse was confident that the young person was in a much more positive place and therefore a welfare check would not be required. A mutually convenient appointment was made with the young person.

### Face to face support

The young person attended the appointment, during which the School Nurse:

- Offered further support strategies.
- Obtained further information about the young person and their feelings.
- Talked about Specialist Mental Health Services.
- Obtained consent to contact the young person's mother, complete a referral to Specialist Mental Health Services and speak to the member of teaching staff who had been supporting them.

### Outcomes

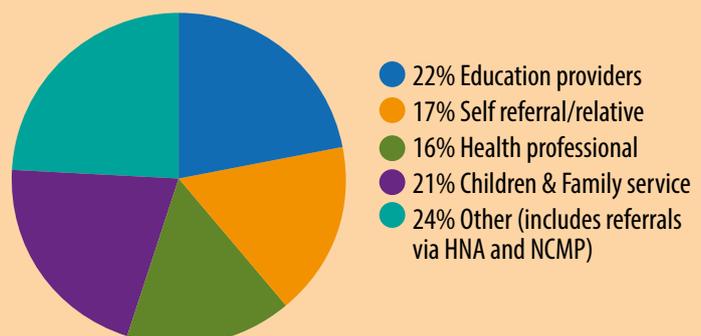
The School Nurse met the young person again after two days, where they appeared more relaxed and in a positive mind frame.

Through their engagement with School Health & Wellbeing team, the young person:

- Felt listened to and that their issues were quickly and appropriately addressed.
- Received immediate emotional health and wellbeing support.
- Was able to access appropriate parental and multi-disciplinary support.
- Had a reduced desire for self-harm.
- Continued to seek support from the School Health & Wellbeing team when needed.

## Referrals into the service

We received 4,801 referrals. All those who refer into the service - whether other health professionals, school staff or children & family services – use same standard referral form, which is available via our website. Additionally parents / carers can make referrals over the phone.

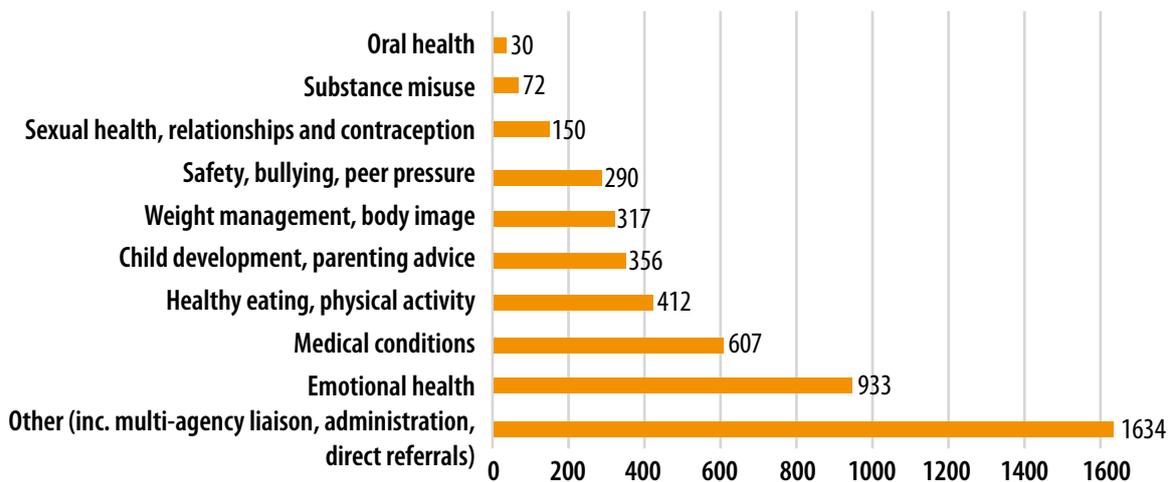


## Interventions

Interventions can be delivered one to one or in a group setting by a member of the School Health & Wellbeing skill mix team. These sessions are arranged through schools and / or parents / carers to support children and young people in the most effective way.

Where appropriate we refer children and young people and their families to another service or provider, for example their GP, primary care, hospital, Rise, Children & Family Services or signpost them to websites and helplines.

### Type of interventions delivered



### Intervention to support a young person with social anxiety

One of our School Staff Nurses received a referral from a school's Welfare Lead due to concerns for a young person around social anxiety.

Over three sessions our School Staff Nurse was able to explore symptoms and possible triggers with the young person, who eventually disclosed that they are transgender. During the sessions, the School Staff Nurse:

- Helped the young person understand the reason for the anxiety.
- Discussed LGBTQ+ support options / groups.
- Encouraged the young person to talk to their parents.
- Discussed referral and full disclosure to Rise.

#### Outcome

The sessions ensured that the emotional health and wellbeing issues presented by the young person were appropriately addressed. They are now accessing specialist support, including having undergone an assessment with Specialist Mental Health Services.

The young person has disclosed to their mother and has her support, meaning they have been able to take steps towards transition.

Although initially presenting with complex issues, the young person now presents as a happier and more confident person and is excited about what the future holds.

## Group interventions in the community

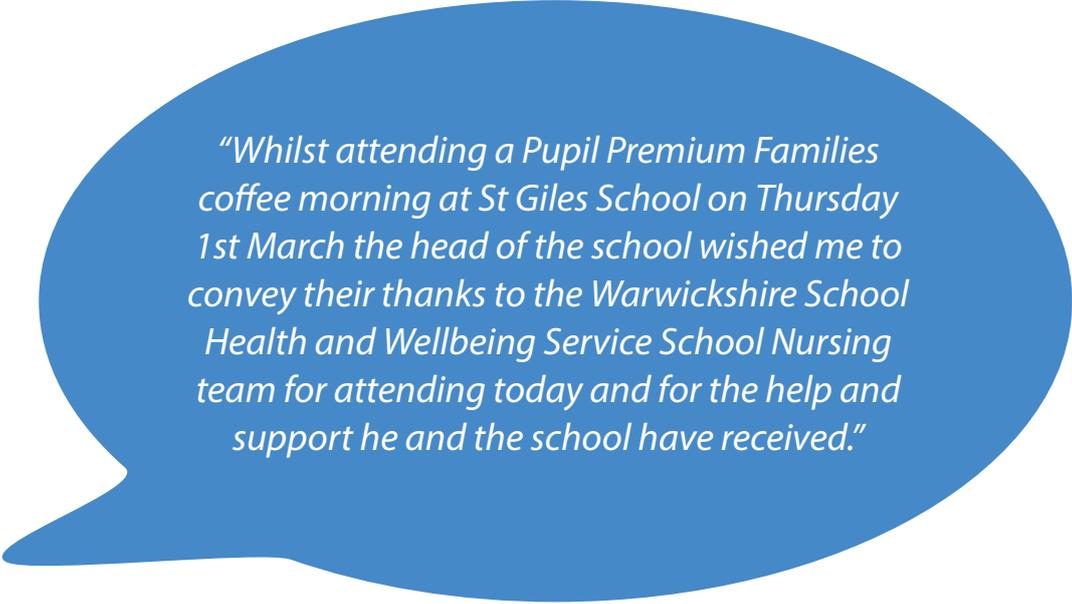
As well as providing group interventions to school pupils, we also promote the service and provide public health messages to the wider community through a variety of events including school parents' evenings, sports days, community events including coffee mornings and drop in sessions at children's centres and community settings.

For example members of our team have attended a number of introductory parents' evenings for the new school intake, where they typically:

- Have a speaking slot to introduce the School Health & Wellbeing Service.
- Provide leaflets to parents / carers to introduce the School Entry HNA questionnaire.
- Host a promotion stand displaying information and leaflets about key public health messages.
- Are available to respond to any ad hoc questions from parents / carers.

This means that parents / carers have increased awareness of the service and the support available and they understand more about the School Entry HNA and the NCMP, so they are more willing to complete the HNA and engage with the service.

| Type of session                 | Number of sessions delivered | Contacts    |
|---------------------------------|------------------------------|-------------|
| Event (e.g. school health days) | 4                            | 405         |
| Parents' evenings               | 30                           | 1652        |
| Sports day                      | 2                            | 70          |
| Coffee morning                  | 6                            | 162         |
| Community drop ins              | 15                           | 107         |
| <b>TOTAL</b>                    | <b>57</b>                    | <b>2396</b> |



*"Whilst attending a Pupil Premium Families coffee morning at St Giles School on Thursday 1st March the head of the school wished me to convey their thanks to the Warwickshire School Health and Wellbeing Service School Nursing team for attending today and for the help and support he and the school have received."*

# 7. HOW THE SERVICE IS MAKING A BROADER DIFFERENCE

## Compass social value statement

Creating a sustainable impact and adding social value is integral to Compass achieving its charitable objects. Compass is a champion of early intervention - our philosophy and values being driven by a desire to articulate the service user and family experience – to build the resilience of individuals, families and communities. We focus not just on what we do, but on how we carry out activities in collaboration with service users, families, communities, professionals, partner agencies and commissioners, achieved by:

- Working as part of the whole community to make best use of resources to deliver and develop local services, solutions and opportunities.
- Using our knowledge, intelligence and data to identify opportunities, gaps and trends to support social mobility and build community capacity.
- Empowering people and finding solutions together, believing that everyone has something to contribute.
- Recognising that transformation is about bringing people together to generate ideas and solutions, rather than working in isolation.

In Warwickshire, we have worked collaboratively with our Youth Health Champions to develop public health messages and resources, to deliver health information to their peers. During the next academic year, we will be working jointly with parents / carers to develop local services to meet our community's needs.



## Staff wellbeing

We know that we need well motivated, happy, well trained and supported staff in order to deliver our service and we adopt a number of approaches to help us. We are proud of our 95% staff retention rate.

## Staff engagement

All staff are members of working groups, receive regular supervision - both individual and group - and engage in an annual appraisal process.

Each week a member of the team receives the 'Star of the week' award, which is announced, along with other news and updates in our weekly staff bulletin.



## Training and development

We have an ongoing staff development programme to maintain the quality of service. This includes mandatory annual training on topics including safeguarding, epilepsy, anaphylaxis, long term medical conditions, basic life support, emotional health & wellbeing, CLA review health assessments.

All staff use the Compass Standard Operating Guidance and other locally developed guidance (e.g. Child Development) to ensure consistency of approach. All new starters, newly qualified nursing staff and return to practice nurses complete the Compass Preceptorship Pack as part of their induction.

In addition:

- Two staff have graduated from the Specialist Community Public Health Nurse (SCPHN) training.
- One member of the team has started the SCPHN training.
- We have one student practice teacher, who will lead next year's student nurses.

## Service away day

In July all 50 team members spent the day together, giving them an opportunity to influence and improve the services we deliver to children, young people and families and to improve their own working environment.

We were pleased to welcome Primary Mental Health and Warwickshire PRIDE to the event to deliver training sessions to the team about the Boomerang Resilience Programme and LGBTQ+. The day also provided a market place for other agencies to promote their services to team.



*"The Boomerang and LGBTQ+ training was very good and useful for future interventions with young people. Had a good day and learnt so much!"*

*"Nice to come together as a whole team. Informative day."*

## Creation of a new role based on evidenced need

Our new Emotional Health and Wellbeing (EHWB) Nurse joined the team in June 2018, to support the service by providing advice and resources to practitioners or jointly attending appointments where emotional health needs have been identified. The role also provides support to schools to ensure appropriate referrals to Specialist Mental Health Services are completed. The EHWB nurse also co-delivers self-harm training to professionals with the Primary Mental Health team.

## Youth Health Champions

The Youth Health Champions Programme is designed to give young people the skills, knowledge and confidence to act as peer mentors, increasing awareness of healthy lifestyles and encouraging involvement in activities to promote good health.

The programme has continued to develop, with the Youth Health Champions involved in:

- Ensuring the voice of the young person influences the School Health & Wellbeing Service and that they are engaged in public health promotion.
- Contributing to the Health Uncovered podcasts.
- Working with a graduate design student who was volunteering with the service to redesign the service poster and service user feedback forms.

Our ambition is to grow the Youth Health Champions programme across the county and we have approached a number of other secondary schools and some primary schools to explore opportunities for engagement, with two more schools coming on board in 2018.

**65 pupils** are now involved with Youth Health Champions.

## Expanding access: tackling young people's health and wellbeing issues through Health Uncovered

Health Uncovered podcasts were created through an innovative collaboration between; ChatHealth, Radio 1's DJ Cel Spellman, Compass services in Warwickshire, together with Youth Health Champions and other school nursing teams and in partnership with Audio Expressions and Leicestershire Partnership Trust; to tackle young people's health and wellbeing issues.

Our fabulous Youth Health Champions were the real stars of the podcasts, with their professionalism, humour, honesty and humility.

The podcast series won silver in the 'Best Podcast' category at the Audio & Radio Industry Awards (ARIAS) 2018 awards.

If you haven't yet heard any of the podcasts they can be accessed through iTunes or <https://www.stitcher.com/podcast/health-uncovered-with-cel-spellman>.

# 8. PRIORITIES FOR YEAR 4

## **'Ready For School?' 3 - 5 years**

- Widen the pilot to all children due to start school in September 2019 across Nuneaton, Bedworth and North Warwickshire.
- Implement public health priority interventions in early years settings.
- Finalise a countywide 'Ready For School?' policy and toolkit.
- Evaluate the pilot with Dr Katherine Brown, Coventry University.

## **SEND**

- Promote an equitable service for SEND pupils across the county.
- Pilot the Year 6 HNA in Special Schools.
- Implement continence workshops for parents / carers of children with additional needs.

## **Home schooled and young carers**

- Continued promotion of service to home schooled pupils and their families.
- Provide an opportunity to complete the universal staged contacts of HNA at year 6 and year 9.
- Provide wider access to service for young carers.

## **Emotional health**

- Development of EHNB Nurse role in service providing enhanced support to children and young people around emotional health and wellbeing in partnership with specialist services.

## **Communication**

- Improve the promotion of the service to service users and stakeholders using a wide range of resources including social media and school communications.
- Launch the new Compass website including School Health & Wellbeing Service page.

# 9. GLOSSARY

**Boomerang Resilience Programme** - A 5 week programme, designed by Primary Mental Health, to help children and young people become more resilient and cope with difficult emotions such as anger or stress.

**CAMHS** - Child and Adolescent Mental Health Service.

**CCG** - Clinical Commissioning Group.

**CLA** - Children who are Looked After.

**CYPDAS** - Children & Young People's Drug & Alcohol Service.

**EHWB** - Emotional health and wellbeing.

**Healthy Child Programme (5-19)** - Good practice guidance which sets out the recommended framework of universal and progressive services for children and young people (5-19 years) to promote optimal health and wellbeing.

**HNA** - Health Needs Assessment.

**LGBTQ+** - Lesbian, gay, bisexual and transgender.

**MASH** - Multi-Agency Safeguarding Hub, involving representatives from the County Council, police, health, probation and other key agencies working together to safeguard children, young people and adults; the MASH acts as the first point of contact, receiving safeguarding concerns or enquiries and collating information from different agencies to build up a holistic picture of the circumstances of a case.

**NCMP** - National Child Measurement Programme.

**PSHE** - Personal, social and health education.

**RCN** - Royal College of Nursing.

**RHA** - Review Health Assessments.

**Rise** - The emotional wellbeing and mental health services for children and young people in Coventry and Warwickshire (includes Specialist Mental Health Services (formerly CAMHS)).

**SEND** - Special education needs and disabilities.

**SCPHN** - Specialist Community Public Health Nurse (our School Nurses are qualified nurses or midwives with specialist graduate level education in community health and the health needs of children and young people; the SCPHN qualification is recordable with the Nursing and Midwifery Council (DH, 2012)).

**TLM** - The Lancaster Model, used to carry out HNA questionnaires.

# 10. CONTACTS

Telephone number: 03300 245 204

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ChatHealth Teen Line Text: 07507 331 525

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ChatHealth Parent Line Text: 07520 619 376

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Email: [warwickshireSH&WBSservice@compass-uk.org](mailto:warwickshireSH&WBSservice@compass-uk.org)

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Service Manager: Matt Conibere, The Mansley Business Centre, Timothy's Bridge Road, Stratford upon Avon CV37 9NQ. Telephone: 03300 245 204 Option 2

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## Locality hubs:

### Central hub - covering schools in Rugby, Leamington Spa, Warwick and Southam

---

Team Leader: Jane Wild

Address: Valiant Office Suites, Lumonics House, Valley Drive, Rugby CV21 1TQ.

Telephone: 03300 245 204 Option 1

Secure emails: [WarwickshireSH&WBSservice@compass-uk.org](mailto:WarwickshireSH&WBSservice@compass-uk.org) (using an Egress account)  
[COMPASS.WarwickshireSHWS-Rugby@nhs.net](mailto:COMPASS.WarwickshireSHWS-Rugby@nhs.net)  
[WSHWS\\_Rugby@welearn365.com](mailto:WSHWS_Rugby@welearn365.com)  
[warwickshireswb.service@compassuk.cjsm.net](mailto:warwickshireswb.service@compassuk.cjsm.net)

### South hub – covering schools in Stratford, Kenilworth, Alcester, Shipston and Kineton

---

Team Leader: Tracy Bainton

Address: The Mansley Business Centre, Timothy's Bridge Road, Stratford upon Avon CV37 9NQ.

Telephone: 03300 245 204 Option 2

Secure emails: [WarwickshireSH&WBSservice@compass-uk.org](mailto:WarwickshireSH&WBSservice@compass-uk.org) (using an Egress account)  
[COMPASS.WarwickshireSHWS-Stratford@nhs.net](mailto:COMPASS.WarwickshireSHWS-Stratford@nhs.net)  
[WSHWS\\_Stratford@welearn365.com](mailto:WSHWS_Stratford@welearn365.com)  
[warwickshireswb.service@compassuk.cjsm.net](mailto:warwickshireswb.service@compassuk.cjsm.net)

### North hub – covering schools in Nuneaton, Bedworth, Atherstone and Keresley

---

Team Leader: Karen Cornick

Address: 2 The Courtyard, Caldecote, CV10 0AS

Telephone: 03300 245 204 Option 3

Secure emails: [WarwickshireSH&WBSservice@compass-uk.org](mailto:WarwickshireSH&WBSservice@compass-uk.org) (using an Egress account)  
[COMPASS.WarwickshireSHWS-Nuneaton@nhs.net](mailto:COMPASS.WarwickshireSHWS-Nuneaton@nhs.net)  
[WSHWS\\_Nuneaton@welearn365.com](mailto:WSHWS_Nuneaton@welearn365.com)  
[warwickshireswb.service@compassuk.cjsm.net](mailto:warwickshireswb.service@compassuk.cjsm.net)

# ABOUT COMPASS

Compass is a non-profit organisation delivering services across England to create healthier lives and safer communities.

We are at the forefront of delivering innovative health and wellbeing services, for example as the only voluntary sector organisation delivering both school nursing services and children and young people's substance misuse services nationally, giving us a unique ability to access a broad population and improve the lives of these children and young people.

We have been providing the Care Quality Commission registered Warwickshire School Health & Wellbeing Service, underpinned by the national Healthy Child Programme (5-19) since November 2015.



### Teen line

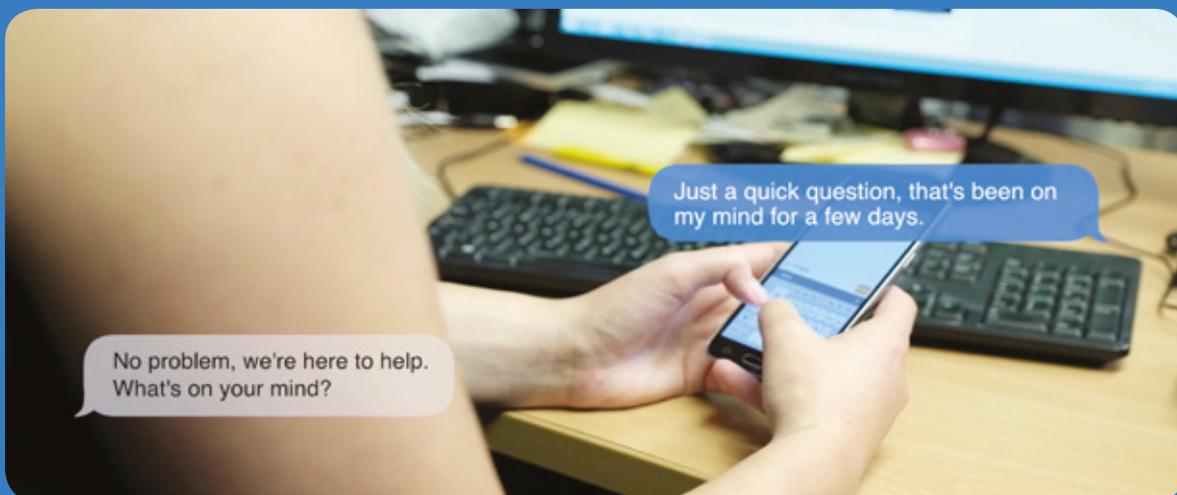
Young people can now text a school nurse from their mobile phone. ChatHealth, the school nurse messaging service, is confidential and available Monday to Friday from 9am to 5pm. You can message for advice on all kinds of health issues, like sexual health, emotional health, bullying, healthy eating and any general health concerns. Look out for more information around school. You can still get in touch with the School Nurse in the same way as you might have done before, if you prefer.

**Text number: 07507 331 525**

### Parent line

Parents / carers can now text a School Nurse from their mobile phone. ChatHealth, the school nurse messaging service, is confidential and available Monday to Friday from 9am to 5pm. You can message for advice about general health, child development, behaviour, toileting and emotional health and wellbeing.

**Text number: 07520 619 376**



The teen health podcasts are free and you can listen via mobile devices, tablets and laptops. Just search "Health Uncovered" in your favourite podcast app.

Compass



Warwickshire  
County Council