

# Warwickshire School Health & Wellbeing Service

Annual Report for the academic year 2018/2019 — Year 4



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# 1. INTRODUCTION

## WARWICKSHIRE SCHOOL HEALTH AND WELLBEING SERVICE REVIEW 2018/2019

Over the past academic year, we have continued to offer a school nursing service that is universally accessible to school-aged children and young people and their families in Warwickshire. We have taken an evidence-based approach to further developing our services, working to ensure all individuals who require additional support receive it.

This report demonstrates the impact of the work we are doing from school entry: supporting the move to healthy behaviours, reducing health inequalities, and helping Warwickshire children and young people obtain the very best start in life.

### INTRODUCTION FROM COMPASS

I am delighted to introduce our 4th annual Warwickshire School Health and Wellbeing Service report. The drive and commitment to continuously improve the service to best meet the health needs of local populations is a testament to the staff team. Their values-based approach underpins all that we do in Compass, alongside ensuring the continuing quality of service interventions within a robust clinical governance framework.

The service continues to build on its previous annual cycles of health needs assessments and interventions to analyse and prioritise public health needs of school-aged children, their families and communities. This has led us to develop new partnerships that will make interventions more accessible whilst extending choice. We are proud of the success of our Ready for School and Young Carers projects, as they have enabled us to strengthen our collaborative working with early years settings and the Young Carers service.

Using service user feedback from a range of stakeholders, we continue to improve access and engagement through the creation of digital products. One example is our year 6 video, which was co-produced with pupils and explains the benefits of completing the Health Needs Assessment.

**Rachel Bundock**

Chief Executive, Compass

## INTRODUCTION FROM PUBLIC HEALTH

The School Health & Wellbeing Service has gone from strength to strength over the last 4 years and this report shows some of the hard work that has gone into developing and delivering high quality services to children and young people in Warwickshire. As well as achieving delivery of the core components of the Healthy Child Programme 5-19, the service has worked in partnership with Warwickshire County Council (WCC) and other key partners to deliver a range of local priority projects, such as school readiness, self-harm, suicide prevention, oral health and child accident prevention. Having access to the data and intelligence collected by the service informs our strategic work, such as within the Joint Strategic Needs Assessments, and shapes the future direction of where best to target our resources as effectively as possible.

Performance levels for the service remain consistently high and WCC is confident in the ability of the entire Compass team to deliver against the service specification and contract. Following the re-commissioning process that took place in early 2019, I look forward to seeing how the service develops over the course of the new contract from November 2019, in particular with the inclusion of the family lifestyle and weight management service and the roll-out of new technologies.

**Kate Sahota**

Lead Commissioner (Family Wellbeing), Warwickshire County Council

# WARWICKSHIRE PRIORITIES

## Mental Health & Wellbeing

Promoting good mental and emotional wellbeing to enhance resilience

Bullying, including physical, online and 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 evidence-based approaches that contribute to children and young people's health, wellbeing and behaviour change



Coordinate care and refer on to other services



Support children and young people who have complex/ additional needs via coordination, 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

## 2. YEAR 4 PRIORITIES – HAVE WE MET OUR OBJECTIVES?

In Year 4 (2018/2019) we successfully met the following priorities identified during Year 3:

### **PRIORITY: Ready for School 3 – 5 years**

#### **HAVE WE MET THE CHALLENGE?**

##### **Ready for School Pilot**

- The Ready for School Pilot continued through Year 4 into October 2019.
- A final report will be available from December 2019.

##### **Public health initiatives**

Based on our analysis of the data gathered so far, we implemented 3 new public health initiatives:

- Bedworth Bottle Swop
- Adult mental health
- School readiness (continence workshop)

More information about the Ready for School Pilot can be found on page 16.

### **PRIORITY: SEND**

#### **HAVE WE MET THE CHALLENGE?**

##### **Health Needs Assessment (HNA)**

- We piloted the Health Needs Assessment in two special schools: Welcombe Hills in Stratford-upon-Avon and Discovery Academy in Nuneaton.
- Two small cohorts in each school, identified based on the children's capabilities, completed the questionnaire.
- The pilot mirrored the HNA process in the mainstream schools.
- All individual alerts were reviewed and responded to by our school special needs nurse.
- Our findings from the pilot will influence the development of our HNA tool.

##### **Continence Workshop**

- New SEND Continence Parent Workshop launched, delivered in 3 locations by the service special needs nurse and family brief intervention workers.
- A SEND working group has been established within the service to raise the quality and standards of work completed.

## **PRIORITY: Home-schooled pupils, vulnerable groups and young carers**

### **HAVE WE MET THE CHALLENGE?**

#### **Health Needs Assessment (HNA)**

- The universal HNA is continually promoted to all home-schooled and vulnerable groups.

#### **Service development – Young Carers and Looked After Children**

- A 'Young Carers' pilot project took place in the north of the county, aiming to identify young carer health needs and deliver appropriate health interventions.
- Findings from the pilot project are now being used to inform the countywide service.
- The role of Looked After Children's nurse has been created and will begin from November 2019. The data from the pilot project will feed into the specification for this.

## **PRIORITY: Emotional Health**

### **HAVE WE MET THE CHALLENGE?**

- An emotional health and wellbeing nurse is embedded into the core service offer.
- They attend regular meetings with partner agencies to share local data and intelligence, ensuring a joined-up response to children and young people who need support with emotional health and wellbeing.
- Training and one-to-one support is also being provided to service and school staff to empower more professionals to offer support and guidance around emotional health.

## **PRIORITY: Communication**

### **HAVE WE MET THE CHALLENGE?**

#### **Website**

- The Compass website with interactive service pages was launched April 2019: [www.compass-uk.org](http://www.compass-uk.org).
- The website provides age-appropriate information, easily downloadable digital products, out of hours support and service contact information.

#### **Marketing and digital communications officer**

- From November 2019, we will be appointing a marketing and digital communications officer.
- Their role will be to ensure effective communication and engagement with children, young people, families, schools, commissioners and other partners.

# 3. UNIVERSAL KEY STAGE CONTACTS

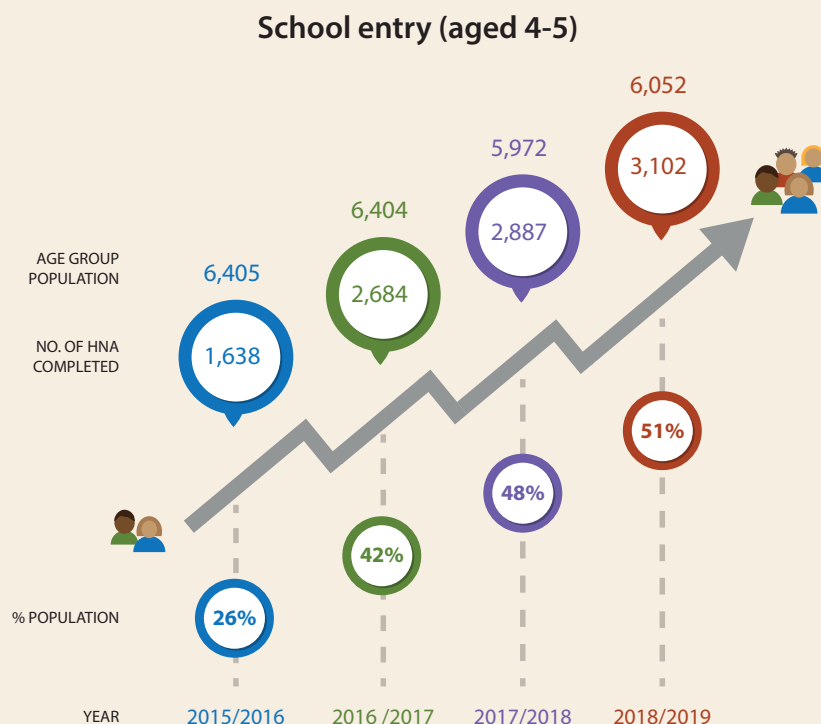
## Health Needs Assessments (HNAs)

The Warwickshire School Health and Wellbeing Service (WSHWBS) has continued to deliver a Health Needs Assessment at the nationally recommended key-staged contacts: school entry, year 6 and year 9. We utilise a licensed online questionnaire that can be completed via a secure portal in any location with internet access.

The questionnaire is delivered via age-appropriate means: parents/carers complete the school entry HNA on behalf of their child, while year 6 and year 9 pupils complete the questionnaire themselves within their educational settings with the support of the WSHWBS team.

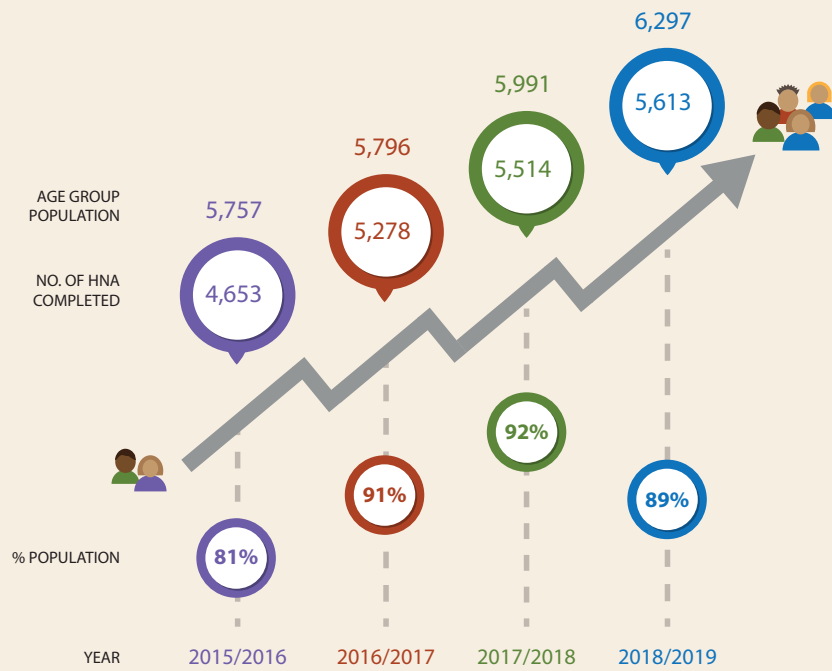
Drawing on our experiences from the last three years, and in consultation with head teachers, students and our commissioner, the HNA process has been adapted to ensure an open and transparent information exchange. By working collaboratively with stakeholders such as education professionals and other health professionals, we are able to ensure identified needs are addressed promptly and in the manner most beneficial to the child/young person. Adapting our delivery and communication methods according to the needs of schools has also led to a year-on-year increase in the number of HNAs completed:

## HNA completion by year group

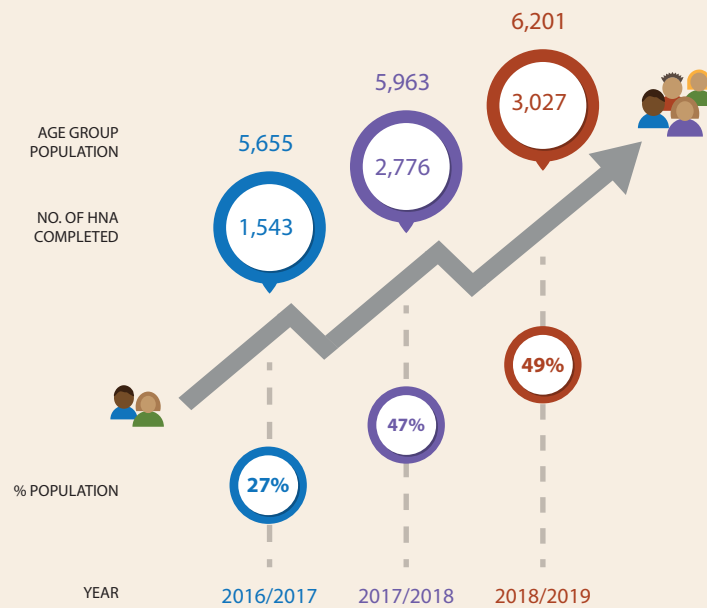




### Year 6 (aged 10-11)



### Year 9 (aged 13-14)



#### Utilising the HNA data

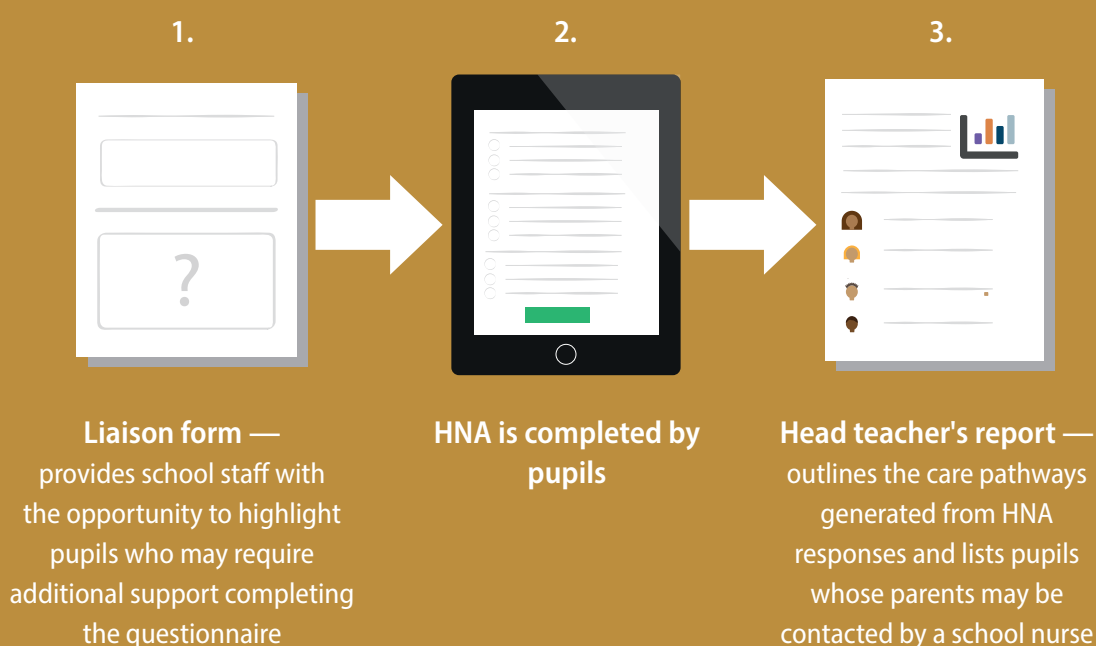
The increase in the number of HNAs completed has enabled us to help more Warwickshire children and young people get the right support for their health and wellbeing needs. In addition, we are able to build a broader picture of the public health priorities of the region and, working with partners, provide targeted interventions.

## Acting on feedback: communication with schools during the HNA process

After some school consortiums said they wanted to opt out of the HNA process, we investigated the reasons behind this and potential solutions.

We discovered the main reasons for wishing to opt out were based around the WSHWBS not sharing enough information about the support provided to families, children and young people after the questionnaire was completed.










A new process was developed in response, implemented by the service in collaboration with schools and the public health commissioner. This pathway provided the opportunity for the service to share information before and after the completion of the HNA:



This process has ensured that schools, families and the WSHWBS continue with the early identification of issues concerning young people and are able to implement effective and timely interventions.

## Individual-level data alerts

During 2018/2019, a total of 11,742 HNAs were completed across the 3 key stage contacts, which generated a total of 10,813 user alerts. User alerts notify our school nurses that support may be required, which can be delivered via a phone call, a face-to-face meeting, the sending of information through the post, and/or a referral to other services such as CAMHS, GP services, Children's Services and Change Makers (weight management). The HNA can also trigger the need for a holistic health needs assessment.

|  |  | Number of alerts generated  |           |           |           |
|--|--|--|-----------|-----------|-----------|
| Alert type   |  | 2018 - 19  | 2017 - 18 | 2016 - 17 | 2015 - 16 |
|  Risk & protective                        |  | 1,374  | 1,447     | 1,437     | 1,244     |
|  Emotional health & wellbeing             |  | 1,984  | 1,859     | 1,708     | 1,475     |
|  Holistic health assessment <sup>1</sup> |  | 2,379  | 3,138     | 2,830     | 1,973     |
|  Vision screening                       |  | 163  | 186       | 166       | 128       |
|  Hearing screening                      |  | 158  | 124       | 128       | 70        |
|  Follow-up <sup>2</sup>                 |  | 4,605  | 4,995     | 8,285     | 15,402    |
|  Information <sup>3</sup>               |  | -  | -         | 8,149     | 6,861     |
|  Developmental milestones               |  | 150  | 118       | -         | -         |
| Total  |  | 10,813   | 11,857    | 22,703    | 27,153    |

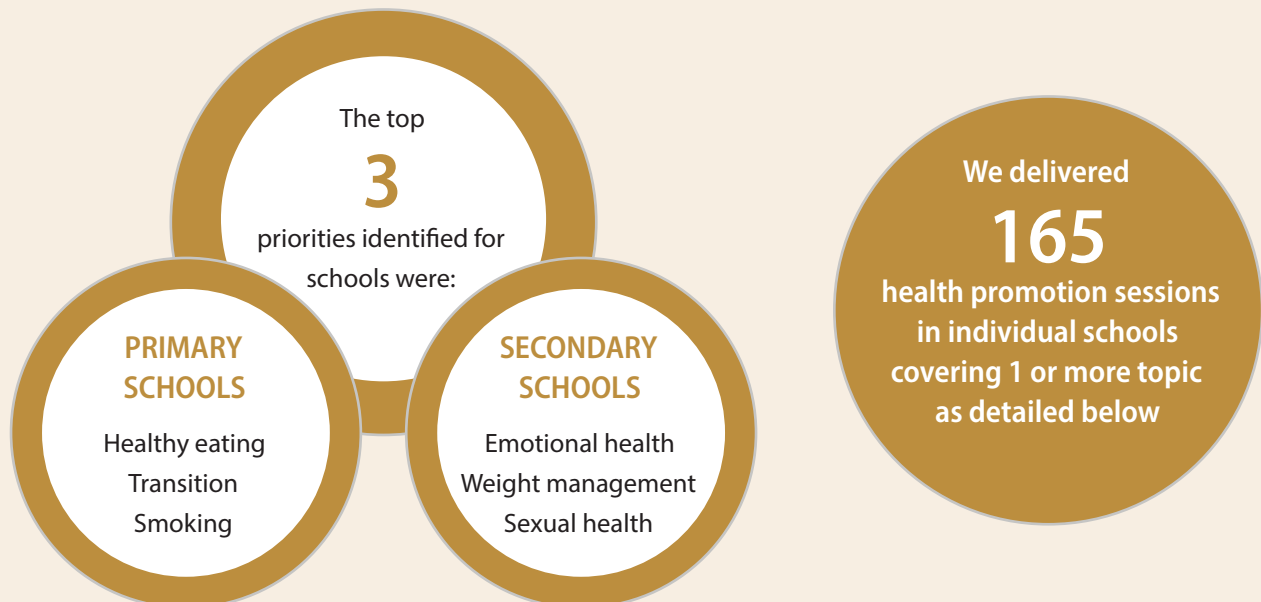
<sup>1</sup> Holistic health assessment: the trigger to complete a holistic health assessment is generated based on the other types of alerts triggered: i.e. risk and protective alerts that have been raised.

<sup>2</sup> Follow up alerts: now only generated by pupil, rather than by topic, leading to a decrease.

<sup>3</sup> Information alerts: no longer generated (based on previous triggers for this alert, the 2018/2019 HNA would have generated nearly 11,000).

## School-level data

The HNA data was collated and analysed by the school nurses. An anonymised aggregated report was produced for each school which outlined the identified health needs of their pupils and the health and wellbeing topics which would benefit from promotion.



## Public health interventions — how we addressed the identified priorities

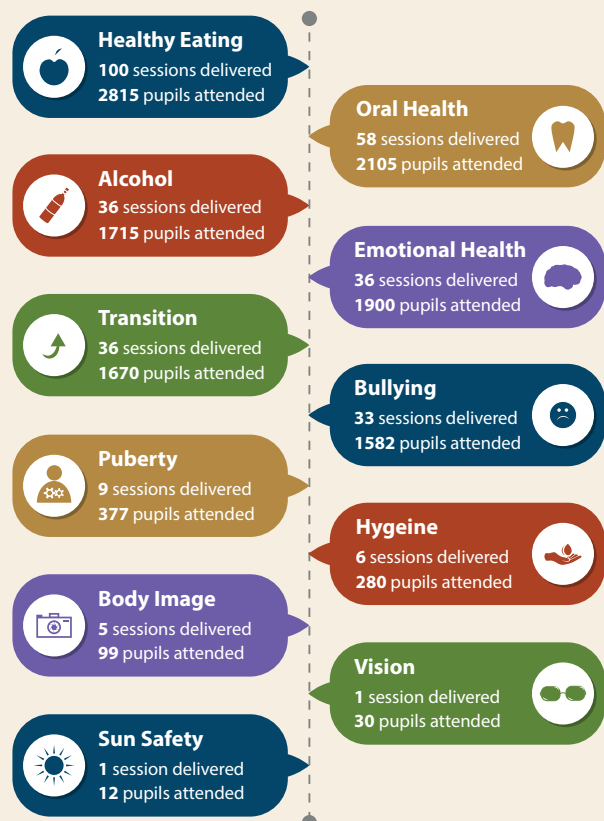
### Primary school

In collaboration with the schools' head teachers, a clear plan of the delivery of public health interventions by the WSHWBS was developed based on the health needs report. Primary schools received group interventions as summarised in the diagram to the right.

### Secondary school

Year 9 students received individual support with the identified health priorities. The WSHWBS also delivered relevant secondary school drop-in sessions in-line with national public health campaigns, as detailed on page 13–14.

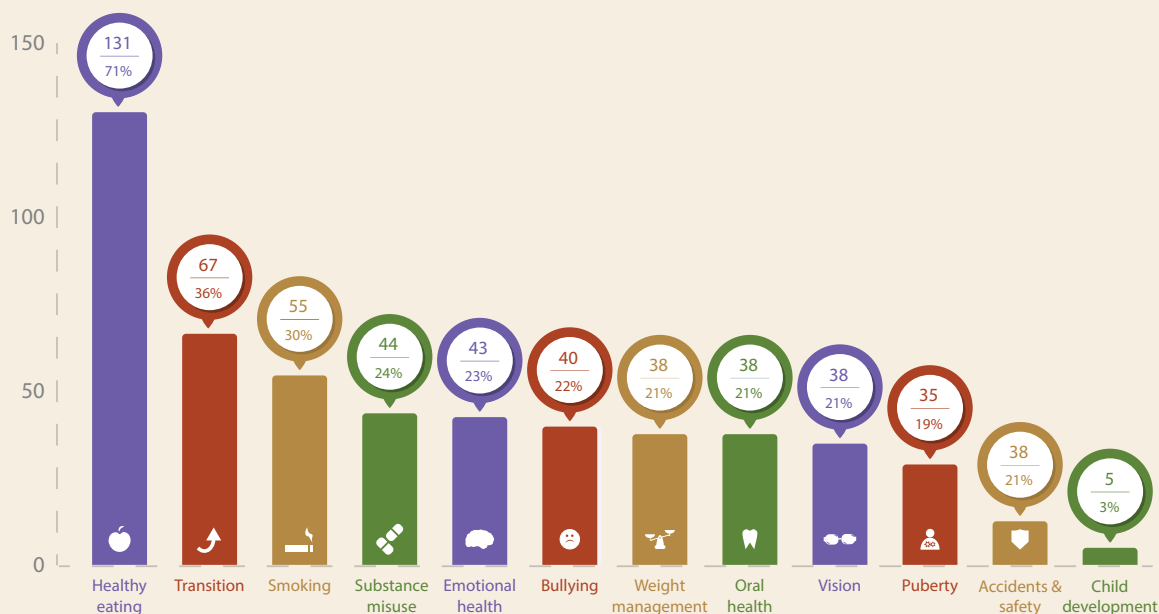
### Primary school group interventions



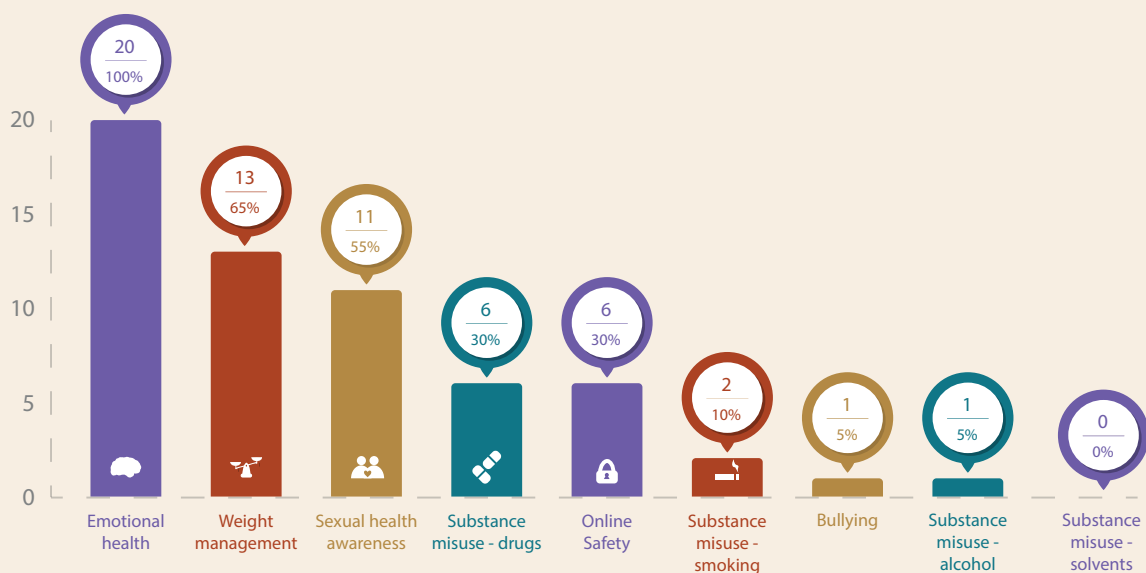
## Population-level data

The HNA data collated for schools was also used to create an overview of the public health priorities for the school age population of Warwickshire. The graphs below demonstrate the number of schools where each topic was identified as a priority.

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



### Secondary schools (year 9)



In 2017/2018, HNA data analysis highlighted that emotional health and wellbeing was a priority for 80% of young people in secondary schools. This year, that figure increased to 100%. In response to increasing evidence of the significance of emotional health to children and young people, in partnership with primary mental health services we are now implementing individual and group interventions led by our emotional health and wellbeing nurse.

## Supporting public health campaigns

### CSE Awareness Week

In March, the WSHWBS supported CSE (Child Sexual Exploitation) Awareness Week with partners Warwickshire CSE Team by wearing red. The team facilitated drop-in sessions with display boards at 8 secondary schools during lunchtime to share information about CSE and sexual health.



This included giving students useful information leaflets and promotional materials from the CSE Team. We also promoted ChatHealth - a confidential SMS messaging service for young people who require advice relating to health and wellbeing.

### National Smile Month

The WSHWBS supported National Smile Month by holding drop-in sessions over lunchtime in 11 primary schools. At these sessions, children completed activities such as an interactive oral health quiz based around cut-outs of a smiley mouth and colouring-in sheets that gave information about healthy eating. Oral health assemblies were also delivered to 7 primary schools.



The Youth Health Champions in another primary school took part in an oral health experiment where different drinks were poured on an eggshell to see the impact each has. After being shown this exercise, the children then replicated it with their peers to spread the message across the school.

National Smile Month was also promoted by the WSHWBS at local community venues such as libraries and sports centres.



## **Warwickshire Youth Conference – ‘More Sex Ed Please; We’re British’**

In June 2019, the WSHWBS team supported the Warwickshire Youth Health Conference held at Dunchurch Park Hotel.

Year 9 students from 16 schools across Warwickshire attended the conference, supported by their teaching staff. They were asked to consider how relationship and sex education (RSE) should support them in managing and developing healthy relationships, making positive choices and keeping safe.

The WSHWBS team supported the students throughout the day, attending various workshops that focused on positive sex and relationship messages, emotional health and wellbeing, consent and the law, and cyber safety and providing guidance and advice where required.

Feedback from students, teaching staff and professionals who attended was all highly positive.

We will continue to support this initiative in 2020.



### **Promoting public health campaigns in Year 5 (2019/2020)**

Throughout 2019/2020, the school nurse team and schools will continue to work in partnership to promote national public health campaigns.

## Delivering public health messages following the HNA

Following the completion of the HNA in Ferncumbe primary school, we received some feedback from staff and pupils regarding our approach and the nature of the questions asked.

In response to this, a WSHWBS school nurse and Kate Sahota — Warwickshire County Council Lead Commissioner (Family Wellbeing) led a focus group of year 6 students to give them the opportunity to share their concerns.

Following the focus group, the year 6 students worked with the WSHWBS to create a video to dispel any confusion or safety concerns their peers may have about completing the HNA. The students created story boards and took part in the video together with a healthcare support worker.

In the video, we addressed issues such as why the pupils were being asked the questions they were and what the WSHWBS were doing to keep their personal information safe.





## Ready for School Pilot

The Warwickshire Ready for School pilot was commissioned for 2 years and is due to be completed by the end of October 2019. The objectives of the pilot are:

- To adapt, implement and test a Health Needs Assessment questionnaire within the pre-school age group (3-3½ years).
- To collect and analyse data regarding school readiness issues.
- To close the gap for children between the last Health Visiting contact and start of school.
- To signpost families to services.
- To shape public health interventions and services.

The HNA tool (TLM) currently utilised by the WSHWBS for children at school entry was adapted for the pre-school age group. To ensure it was fit for purpose, the amended questionnaire was developed in conjunction with Warwickshire Public Health, with the support of education, early years and health professionals.

In year 1 of the pilot, the new pre-school HNA was rolled out on a trial basis via two methods of delivery: method 1, promotion to parents/carers via early years settings attended by children, and method 2, delivery via email from the Ready for School team. Method 1 yielded a significantly better completion rate and was therefore chosen as the sole method of delivery when the pre-school HNA was rolled out more widely in year 2.

Analysis of the data collected from the pre-school HNA supported the development of 3 targeted public health initiatives:

### 1. Adult mental health

In one locality, data showed approximately 1 in 5 parents/carers had a history of anxiety or depression. This was cross-referenced with data from the school entry HNA, where the figure rose to 1 in 3 adults. Adult mental health was therefore considered a public health priority for this area.

As a result of this, the manager of the local children's centre, supported by the Ready for School team, put on a mental health awareness training workshop for early years professionals, which took place prior to World Mental Health day. The feedback collected suggested attending professionals felt the training was highly valuable in increasing their awareness of how to support parents.

Thank you  
for your hard work  
and commitment to  
building awareness for us  
to best support  
parents! ”

## 2. Speech and language: Bedworth Bottle Swop

In another locality, the HNA data highlighted concerns regarding speech and language, accessing dental services and diet. early years professionals were concerned about the number of children aged 1–4 who were using bottles, and the impact this was likely having on these issues.



Warwickshire Public Health supplied funding for free-flow beakers/cups with the objective of supporting parents/carers to swap from feeding bottles to age-appropriate drinking cups. Training was delivered to early years settings by the Ready for School (RFS) team and Health Visiting service, so that staff could support parents/carers with the transition and share the relevant public health messages.



In addition, a booklet was developed by the RFS team, Bedworth Children's Centre, the Health Visiting team, Time to Talk and local early years settings. This booklet highlighted key information about the positive impact of changing to a cup, as well as tips and advice on making the change.

“ Staff at nursery were brill - encouraged me and my child and gave fab advice - thanks.

The display came at just the right time and I was thrilled to see such an initiative. ”

## 3. School readiness: toilet training

In a third locality, reception teachers raised concerns about children's ability to go to the toilet independently.

In response, a continence workshop has been developed by the team to be delivered when concerns around toilet training or requests for support are made. The workshop is suitable to be delivered either to early years staff or groups of parents, and provides information, advice and top tips around toilet training.

## Ready for School resources

A School Readiness Policy, which aims to ensure a consistent approach to the expectations of children regarding school readiness and support with the transition of children into school, has been developed further and will be presented to the Ready for School working group in early September. A relevant and accessible version for parents is also being created. We are working closely with the Warwickshire County Council early years strategic lead, and are active members of the strategic working group.

A working document has been produced which will collate all the information about a child, including social history, development, etc., and will act as a record of meetings with parents/carers etc. The purpose of this document is to provide early years professionals with the means to easily record and monitor a child's progress and support their transition into reception.

The Ready for School 'Top Tips' flyer, which provides simple guidance on identifying and addressing school readiness issues, has been circulated to all early years settings in the North and widely distributed throughout the rest of Warwickshire.



## National Child Measurement Programme (NCMP)

During the academic year 2018/2019, we introduced a new electronic system to improve the efficiency and accuracy of NCMP data management. The SchoolScreener® software has modules specifically designed for the inputting of a child's height and weight, with the option to automate processes such as the sending of parent letters. Because the software is purpose-built, it's fast and straightforward to add entries, and the data is stored and transferred securely.

Using SchoolScreener® has enabled us to streamline the NCMP process, releasing staff time to provide follow-up interventions, advice and support.

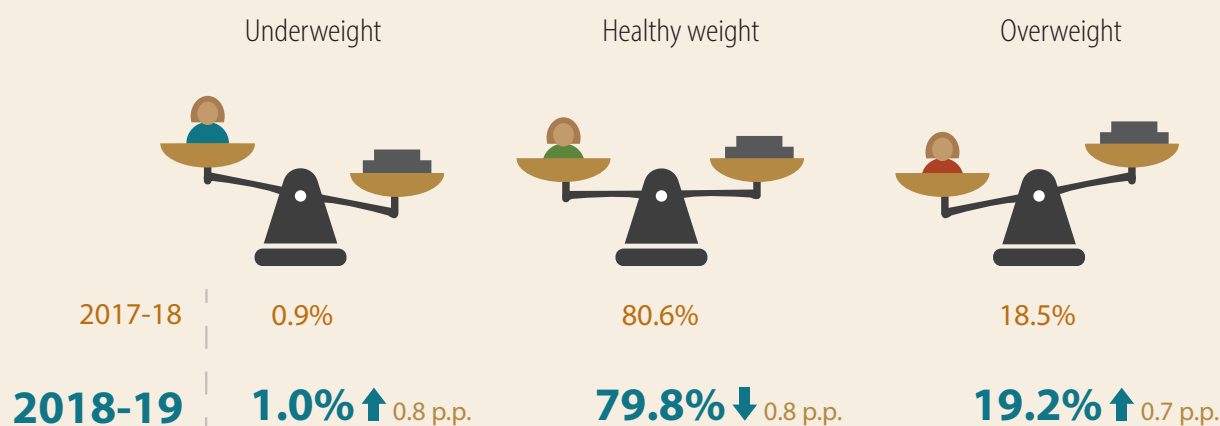
Benefits of the system include:

- Ability to upload directly onto the NHS digital data set
- Production of individual result letters including centile charts
- Helps manage measurement opt-outs
- Ability to attach measurements to the child/young person's health record

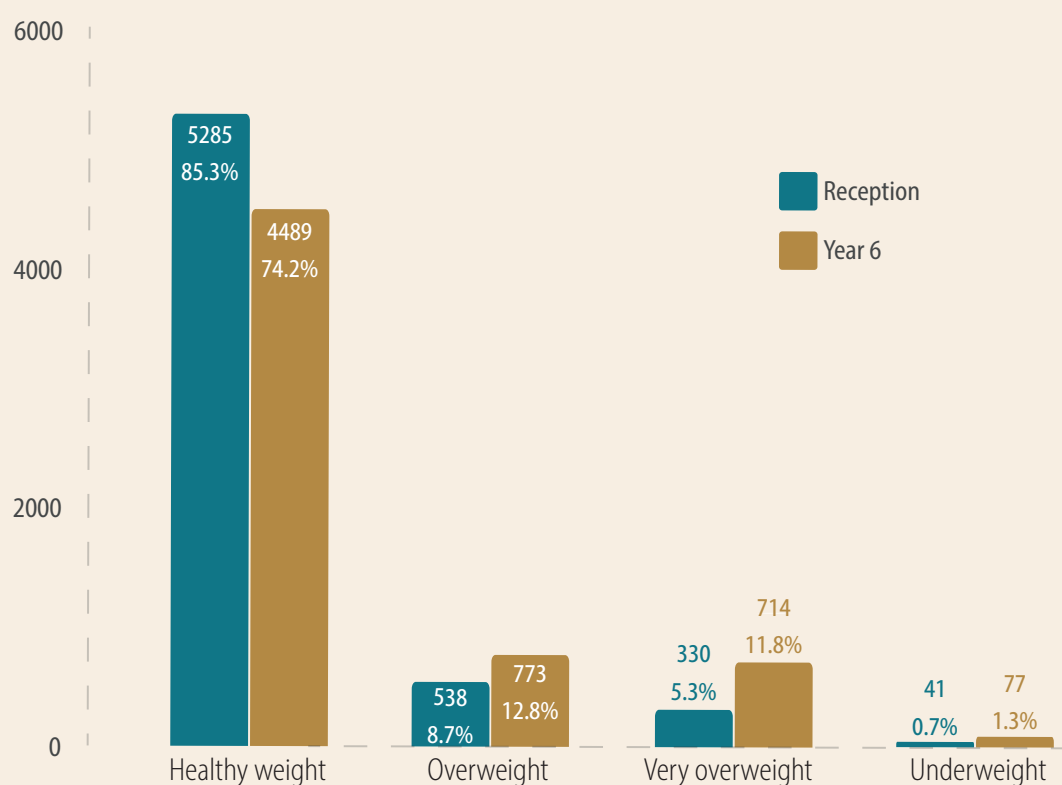
## NCMP completion rate

|           | 2018/2019 | 2017/2018 | 2016/2017 | 2015/2016 |
|-----------|-----------|-----------|-----------|-----------|
| Reception | 97.0%     | 98.0%     | 97.6%     | 98.4%     |
| Year 6    | 95.9%     | 97.2%     | 96.8%     | 97.1%     |

## Year-on-year comparison of all children weighed



## 2018/2019 — Breakdown by age group



## NCMP results

NCMP data collected for 2018/2019 shows a slight increase in overweight children and a slight decrease in healthy weight children, with a negligible change in underweight children. The increase in overweight children can be attributed to an increase in very overweight reception children (+0.3 percentage points), and overweight (+0.4 p.p.) and very overweight (+0.5 p.p.) year 6 children.

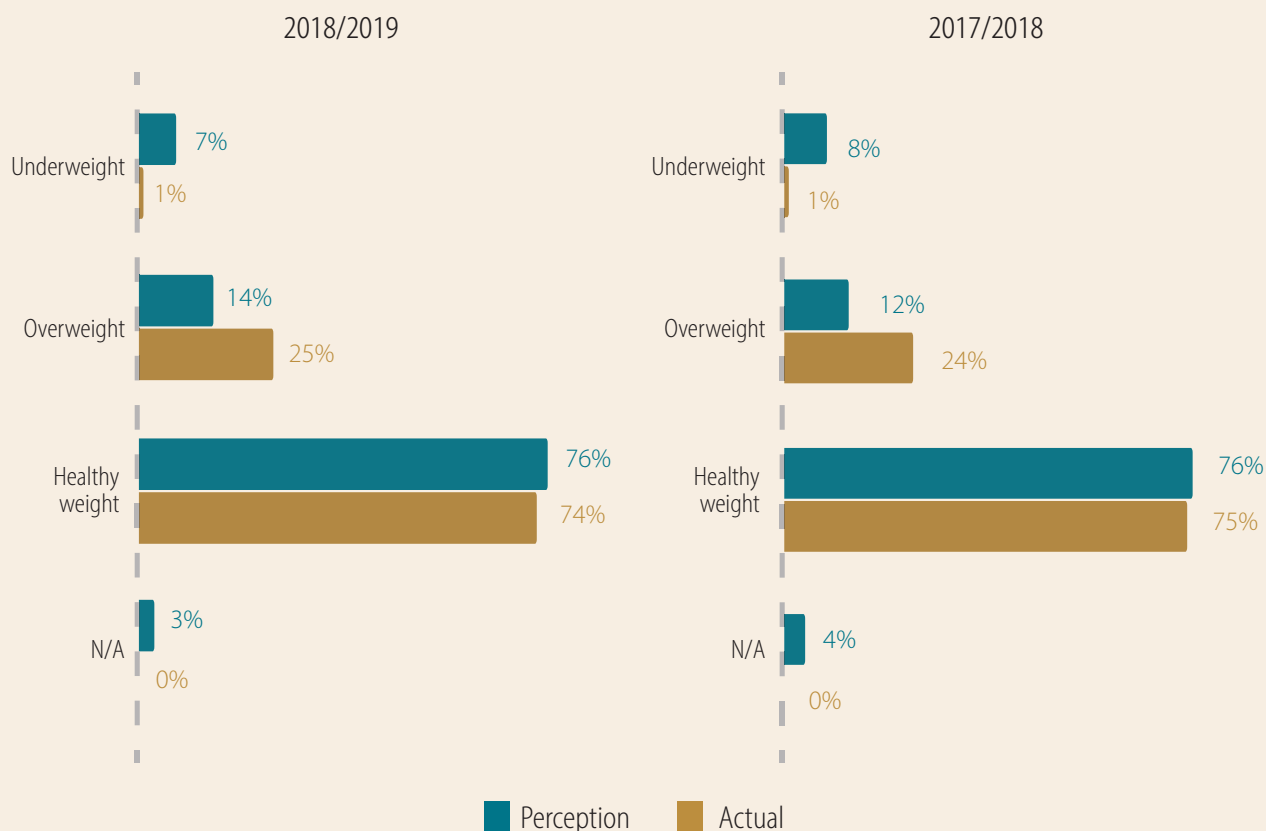
The decrease in the overall completion rate between the two years equates to 1% for both reception and year 6. This could be attributed to the introduction of GDPR in 2017/2018, which resulted in a higher number of parent/carer opt-outs.

### Acting on NCMP data

Of the children measured, 2,204 children were referred for follow up with the family weight management team Change Makers, and were invited to participant in their positive lifestyles programme where information about good nutrition and physical activity is delivered during weekly sessions via activities, games and interactive workshops.

## Perceptions of year 6 children

In order to gain a wider understanding of issues relating to healthy lifestyles, we compared data gathered from the Health Needs Assessment to the NCMP data. In particular, we looked at how year 6 children's perceptions of themselves compared to their actual measurements.



In comparison to last year's data, we have seen a slight increase in the number of year 6 pupils who perceive themselves as overweight. However, consistent with the trend of the past 3 years, there are a number of young people who perceive themselves to be a healthy weight or underweight, while actual measurements show this is not the case.

The WSHWBS have been analysing the Warwickshire childhood obesity figures and population data over the last four years and reviewing follow up interventions. Based on this, we have developed a new approach for the academic year 2019/2020. This new approach will see us working in partnership with the Change Makers team to provide a range of interventions including fluid, adaptable programmes of workshops for families. These programmes will be continuously updated to reflect the most recent data, health advice and trends to ensure the maximum impact on the individuals involved.

## Case study: working with partners to improve public health

The Change Makers Family Lifestyle Programme teaches families about how to live healthier lives. Participants can learn about good nutrition, try new foods, do some healthy cooking and play active games together.



A family attended Change Makers due to their child's very restrictive diet. She refused to eat a lot of foods, including all vegetables. Her family wanted to learn more about healthy eating and exercise and try and encourage her to have a more varied diet.

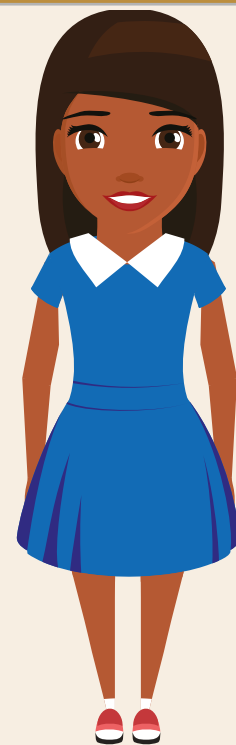
Each week at the Change Makers sessions, the family learnt about a new topic, including the Eatwell Guide, portion sizes, food labelling, and healthy breakfasts. In addition, varied healthy snacks were provided to get the children to try new foods.

With the encouragement of her family and the Change Makers family lifestyle advisor, and the added motivation of a group environment where other children were trying new foods, the child ate lots of foods she had previously refused.

By the end of the programme, the child was eating two portions of vegetables per day, having previously eaten none. In addition, the family gained a better understanding of nutrition and how to keep active.

I enjoyed learning about food and its importance as much as the children. We are especially grateful to you for getting our granddaughter to try new foods she would have never tried before — cucumber, peppers, pineapple, melon, and even more surprisingly chicken and tuna. We were both amazed she actually tried them and without fuss. I think both pupils and adults alike also enjoyed your fitness games — our granddaughter still wants to play dodgeball because 'fitness is fun'!

Family member feedback



## 4. SAFEGUARDING

The safeguarding of children, young people and families remains a core requirement of the WSHWBS. Identifying and responding quickly to need and contributing to multi-agency networks helps to protect our most vulnerable children and families.

### **Review Health Assessments (RHA) for Looked After Children (LAC)**

As in previous years, children and young people in Warwickshire who are 'looked after' (under the care of the local authority, i.e. in foster care or a special guardianship by an aunt, sibling etc.) have their statutory annual RHA completed by the WSHWBS. These assessments offer the opportunity for the child or young person and/or their carers to discuss any worries or concerns they may have about their health. Following the health assessment, the school nurse and the child/young person will develop a plan that aims to improve their health and wellbeing and keep them safe.

This academic year, the number of RHAs has risen to 166 from 156 last year. Despite the increase in numbers, the WSHWBS remains committed to offering a service that meets the physical and emotional needs of children and young people in care.

We have been pleased to be able to offer greater flexibility in the venues and appointment times for RHAs, increasing the equity and accessibility of our services. We have also introduced SMS messages to confirm and remind individuals of appointments. We continue to work closely with the dedicated Warwickshire Looked After Children Team to improve communication and increase the quality of the assessments.

### **Multi-agency working**

The WSHWBS participates in multi-agency working. We remain members of the Warwickshire County Council self-harm working group, working in partnership to address the levels of self-harm amongst children and young people. We use the Health Needs Assessment data to identify emerging needs around mental wellbeing and support a targeted response.

We have continued to partner with Warwickshire social care teams providing health advice and support for vulnerable and at-risk children and young people. This includes safeguarding, CSE and Early Help.



## Attendance at safeguarding meetings

|   |     |
|---|-----|
| Safeguarding meetings attended                            | 750 |
| Safeguarding meetings contributed to                      | 554 |
| Safeguarding information requests received including MASH | 113 |

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

|  |                 |
|--|-----------------|
| Number of children information was requested for               | 158             |
| Number of children WSHWBS were able to provide information for | 67              |
| Cumulative total by area                                       | North 6         |
|  | Central 86      |
|  | South 54        |
|  | Area unknown 12 |



## 5. OTHER SUPPORT

### ChatHealth text messaging helpline

We continue to support young people and parents/carers through the text messaging service ChatHealth. As in previous years, we promote to young people and parents/carers through the following methods:

- Promotion via service staff during one-to-one and group interventions.
- Every Year 9 pupil is given a ChatHealth contact card when they complete the HNA.
- Pastoral leads in all secondary schools have received promotional materials to share with pupils.

In the coming academic year, our marketing and digital communications officer will work with our Youth Health Champions to expand the reach and impact of the ChatHealth service by exploring further promotion opportunities, as well as possible alternative communication methods that fit with the current digital trends and habits of young people.

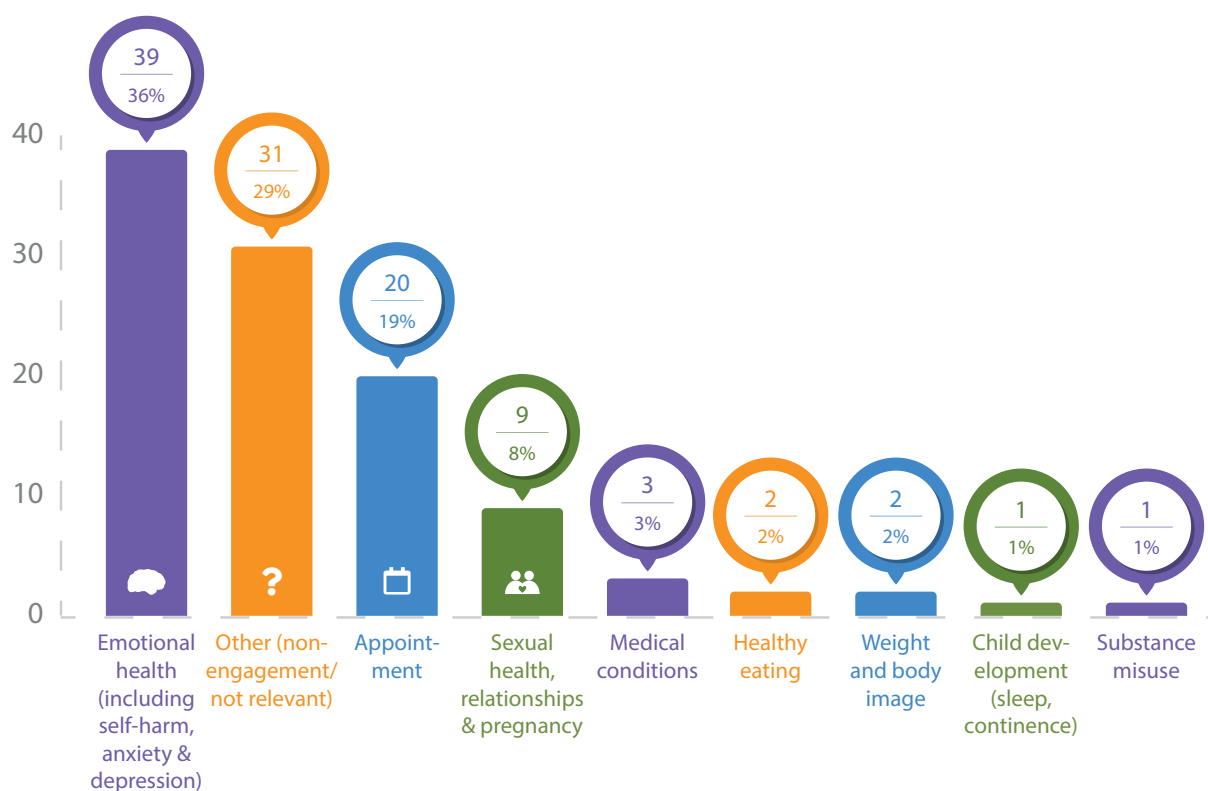
### ChatHealth text messaging service - teen line



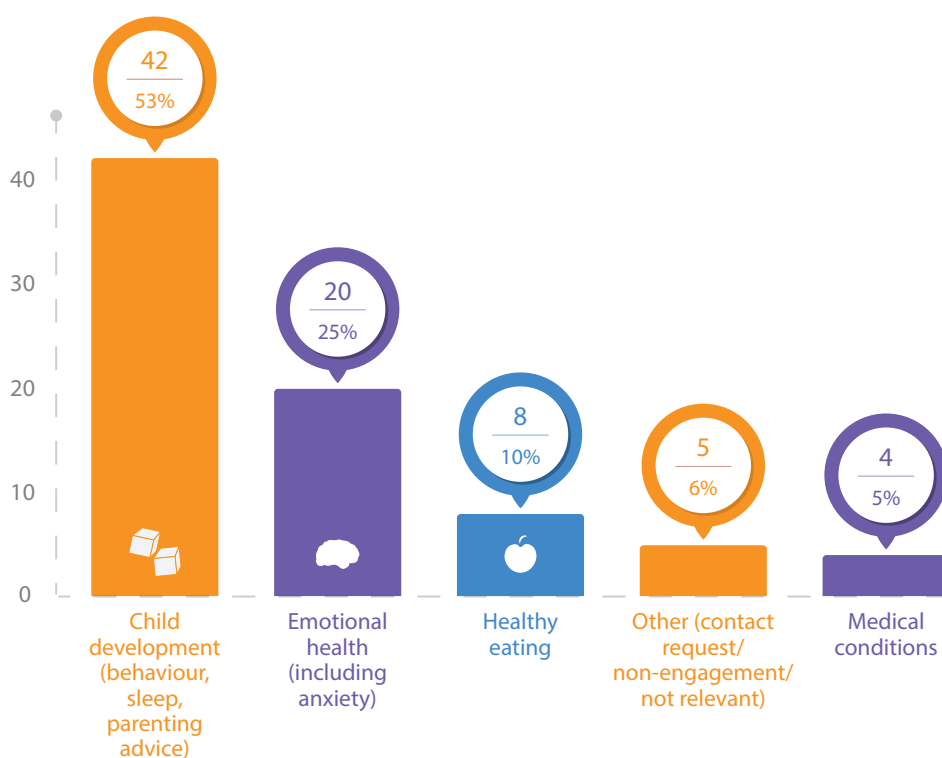
### ChatHealth text messaging service - parent line



## ChatHealth topics — teen line



## ChatHealth topics — parent line



## Case study: young person seeking support via ChatHealth

### Initial contact

A young person contacted the WSHWBS via ChatHealth stating they were struggling with their emotions within their family life and at school.

### Further dialogue

A school nurse started a conversation to determine more about the issue and the young person's existing support. They also quickly shared links for online Young Minds resources, and shared information about when support would be available from a nurse via ChatHealth. During this conversation, the school nurse had made an appointment to see the young person in school.

### Face-to-face support

The young person attended the appointment, during which the school nurse:

- Found out more about the young person and their feelings.
- Identified an adult that the young person felt comfortable talking to.
- Gave advice on sleep hygiene, SAM support app and creating a support network.
- Obtained consent to contact the young person's mother.
- Arranged to see the young person again.

A follow-up visit took place the next week, during which the young person raised further issues they had experienced at home and discussed support strategies with the school nurse.

### Outcomes and ongoing support

Through their engagement with ChatHealth and the school nurse, the young person:

- Said they felt reassured and supported thanks to having someone to talk to.
- Said they were happy that the school nurse would talk to her mother, as they felt unable to do so themselves.
- Received immediate emotional health and wellbeing support.
- The WSHWBS continues to offer support around ongoing issues.

## Young Carers

During the academic year 2018/2019, we ran a pilot project in the north of the county in conjunction with groups for young carers in the area. The aim of the project was to explore how the WSHWBS could identify and support the health needs of this vulnerable group.

To gain a better understanding of the needs of the young carers, data from their Health Needs Assessment was cross-referenced with data collected by the groups they attended. A dialogue was also opened directly with the young carers to allow them to express their opinions and needs.

The WSHWBS and Warwickshire Young Carers (WYC) service managers met in June to analyse the collective data. The ongoing actions are as follows:

- The school staff nurse who led the project will liaise with other colleagues to discuss how best to identify young carers who would benefit from referral into the WSHWBS.
- A draft document was sent to the WYC lead that clearly outlines the support available from the WSHWBS to encourage WYC staff to refer young carers.
- In the academic year 2019/2020, each WSHWBS hub will liaise with the WYC group leader in their area to arrange group interventions and one-to-one support for individuals.
- The WSHWBS will employ an engagement worker who will support the service in working with vulnerable groups such as young carers.



Warwickshire Young Carers is committed to finding ways of supporting the needs of young carers in our county. We have enjoyed working in partnership with the Warwickshire School Health and Wellbeing Service to develop new ways to address some of the health needs of young people. Through the identification of specific health needs of young carers, we have explored, developed and delivered activities and appropriate referral pathways to support this vulnerable group. Staff of WSHWBS have also completed WYC Young Carers Awareness Training.

Anthony Bishop — Service Manager,  
Warwickshire Young Carers

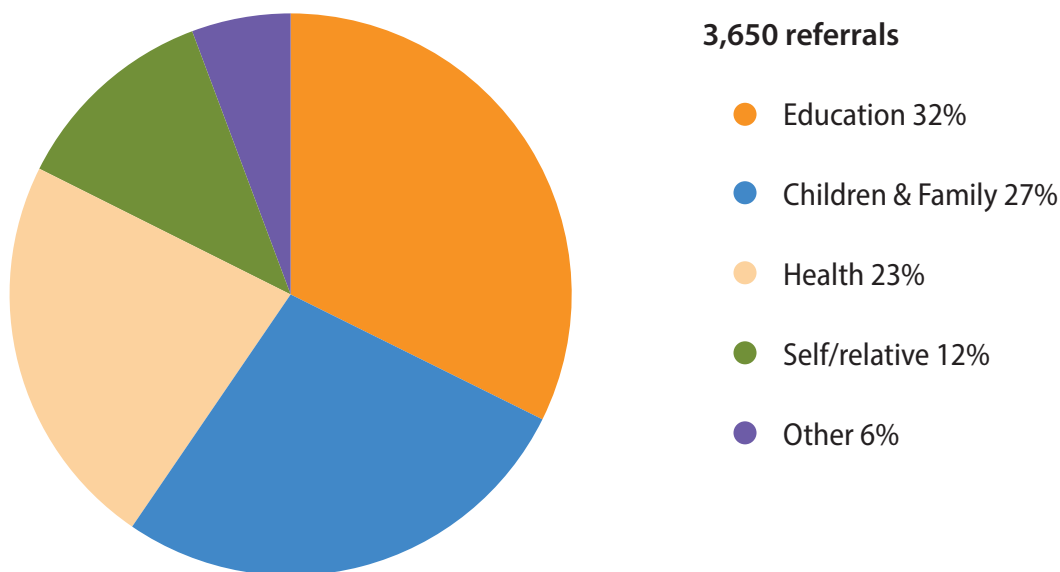
## SEND

### School special needs nurse

Our school special needs nurse continues to provide expertise and leadership to ensure equitable access, engagement and care to our children and young people with SEND. Her work over the academic year 2018/2019 included:

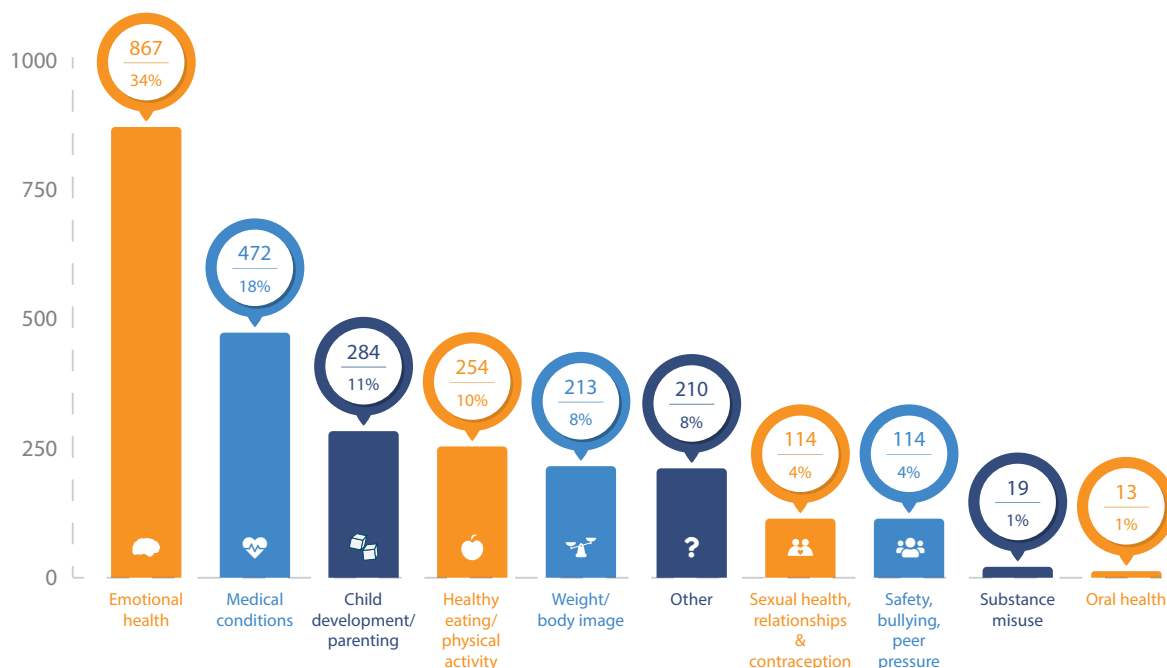
- Training WSHWBS staff on supporting children and young people with SEND around issues relating to epilepsy, puberty, autism, toileting and signposting to other services.
- Developing and delivering continence workshops for parents/carers of children and young people with SEND.
- Implementing partnership agreements with special schools, so targeted support can be delivered to pupils.
- Providing information and resources relating to SEND for parents/carers and colleagues via the service website.
- Providing training for staff at special schools on the delivery of buccal midazolam (for the treatment of seizures) and writing pupil health care plans.

### Referrals into the service



## Type of interventions delivered

The number of interventions from school nurses and healthcare support workers, including one-to-ones and group workshops/programmes:



## Group interventions in the community

| Type of session                 | Sessions delivered | Contacts    |
|---------------------------------|--------------------|-------------|
| Event (e.g. school health days) | 5                  | 471         |
| Parents' evenings               | 34                 | 1517        |
| School and community drop-ins   | 45                 | 971         |
| <b>TOTAL</b>                    | <b>84</b>          | <b>2959</b> |

“The workshop was fantastic: informative, good tips and guidance, supportive, listened and informal. I would recommend this to other parents/carers. Thank you!

Parent feedback following a continence workshop

## Case study: one-to-one intervention from a WSHWBS school nurse

A young person was receiving support from health and social care professionals under a Child In Need plan. They were deemed to be at risk of child sexual exploitation. They had a history of emotional abuse from a parent and had been placed in foster care.

Professionals had tried to engage with the young person suggesting advocacy, counselling, bespoke sexual health advice, and CSE risk assessment. However, the young person was not engaging with professionals and was becoming increasingly frustrated by their 'interference', avoiding meeting with the social worker.

A school nurse from the WSHWBS was allocated to support the young person's health and wellbeing needs. The nurse felt the young person was overwhelmed by professionals' good intentions and had begun to see the many interventions as white noise. Although the young person did not have a diagnosis of autism, the nurse felt that they may benefit from some of the strategies used for young people with autism due to the circumstances.

The nurse constructed a visual timeline including the young person's past, present and future. For the future, this included what they wanted to do in the future, how they were going to do it, and who they wanted to help. The timeline also included examples of when the young person had made positive choices and the impact these had had on their life. The objective was for the young person to take ownership of the timeline, adding to it themselves or with help, to empower them in making decisions about their support.

The young person engaged with professionals to look at the timeline. They viewed the exercise positively and were forthcoming in their contributions.

This was the first time the young person had engaged with professionals. Professionals felt this was due to the young person having had the opportunity to have 'a say' about their care plan.



## 6. HOW THE SERVICE IS MAKING A BROADER DIFFERENCE

### Compass social value statement

#### **"We are stronger together."**

The charitable aims of Compass centre on supporting and empowering communities. We focus on facilitating local projects that deliver social, economic and environmental benefits to residents. We achieve this by:

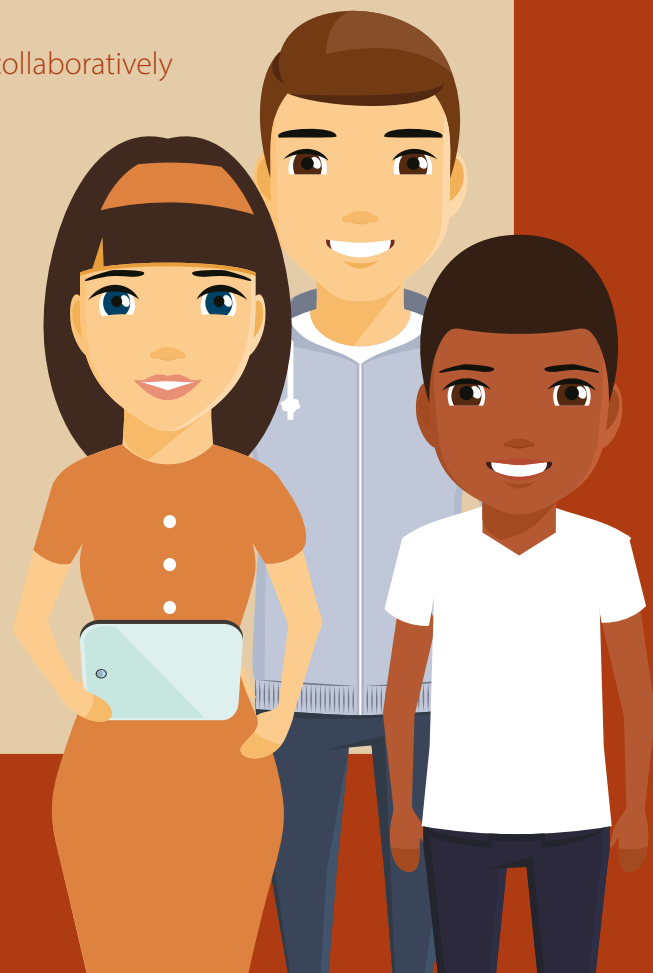
- Bringing people together to generate ideas and solutions that represent the needs of the population.
- Combining staff knowledge and experience with data to offer an informed response to challenges and bring about change.
- Sharing resources to increase the overall impact of work completed.

Our social value policy helps Compass achieve these things both as an employer and a provider of services. Each service has its own plan so as to address the specific needs and opportunities identified within local communities.

#### **Locally**

This year in Warwickshire, we have continued to work collaboratively with our Youth Health Champions to develop useful resources for children and young people. One example of this is a video created in collaboration with a year 6 class, where students explain the Health Needs Assessment process to peers.

During the academic year 2019/2020, we will build on the Youth Health Champion model and establish Parent/Carer Champions, providing a comprehensive training and support structure for both. The objective of this is to give children, young people and parents/carers the skills and knowledge needed to take control of their own health and wellbeing, and to support them to advocate positive health messages within the community.



## Youth Health Champions

The Youth Health Champion's badges were developed to help the Youth Health Champions feel part of a community and recognise their roles. Wearing a special badge meant that students could be easily identified by their peers and teachers as the Health Champions within their school. The badges are worn on the student's blazers and jumpers daily.



## Business Administration Level 2 Apprentice

This academic year, the WSHWBS was pleased to support a business administration apprentice in partnership with Warwickshire College. We were able to help expand her knowledge of the vital part that the administration staff play in the smooth working of the service and provide hands-on experience of working in this role. During her time with the service, she worked as a part of the core team and went to college one day a week. After working with the Compass WSHWBS for one year, she acquired an administration role with the Compass Children's and Young People's Drug and Alcohol service and completed the apprentice scheme there.

For the academic year 2019/2020, we will continue to work with Warwickshire College and will recruit and support a business administration level 3 apprentice.

## Staff wellbeing

Compass take pride in supporting staff health and wellbeing. We actively engage our staff in a variety of wellbeing activities and are pleased with our staff retention rate.

## Service Health Champion

A WSHWBS healthcare support worker attended the Health Champion's Training delivered by Warwickshire County Council. She is now the team's point of contact regarding any health and wellbeing related support they feel they may need at work, both physically and mentally, with the aim of improving the overall health and wellbeing of our staff. She is able to offer the team up-to-date resources, signpost them to further support where necessary, and plan activities that the team can all take part in. She also contributes to the weekly newsletter, providing healthy recipes and health and wellbeing advice.

## Staff engagement

### Training and development

We continue with our ongoing staff development programme, maintaining the quality and safety of the service. Alongside mandatory annual training which includes safeguarding and long-term medical conditions, we have also delivered training on:

- Solihull training refresher for Solihull practitioners
- Solihull training for all new staff
- Respect Yourself
- Substance Misuse
- Looked After Children – update training

Staff have also accessed the primary mental health training on attachment, self-harm, low mood and eating disorders on various dates throughout the year

We continue to support our staff nurses through the Specialist Community Public Health Nurse (school nurse) training.

### Feedback from 'Solihull Approach' training

“ The teenage brain section made me reflect on a recent advisory and how I could approach it differently next time.

The training has joined the dots and added a rainbow of colours to my understanding of parenting! ”

“ It was interesting learning about child and teenage brain development — makes me think about how I 'contain and reciprocate' with my own son.

## Service away day

We were delighted to hold our 4th annual away day at Wolston Community Centre. This year, we had plenty to celebrate: from the good work carried out with young people, such as the Young Carers project, to the retention of the school nursing contract following a competitive tender exercise. We were joined by the national charity Fixers, who held a workshop about body image, and our colleagues from Compass Buzz and Compass Harrow, who kept us up-to-date with Compass initiatives around the country.



“ One session in particular was extremely valuable to me as a practitioner. Fixers discussed how body image affects so many young people at school, home, online and when accessing healthcare. Raising awareness, promoting understanding and hearing from a young person talking about their experiences was really powerful.

Natalie Wilkes — School Staff Nurse

It's great to get together as a whole team to hear about the positive changes being made to our service. I really like the idea of the centralised admin hub — it'll be great for schools, pupils and parents accessing support. It's also exciting that we're providing more digital support and an opportunity to widen staff knowledge of the technology. ”

Andrea Leach — Senior Administrator

## Staff newsletter

A weekly newsletter provides staff with service updates, introduces new team members, and celebrates any individual or service-wide achievements.

All service staff are invited to contribute and share any information they think will be beneficial or interesting to colleagues — such as upcoming training sessions or events, healthy living tips or ideas, new resources for children and young people such as mobile apps, and any relevant feedback received.

2nd November 2018

Compass

SCHOOL HEALTH NEWS

Warwickshire School Health & Wellbeing Service Staff Newsletter

**In this issue:**

- Service Update
- Reminders
- Information sharing
- Forthcoming events
- Forthcoming training

### Service Update

A big congratulations on the 3rd Anniversary of the Warwickshire School Health & Wellbeing Service!

Thank you to all our staff for the hard work and commitment in supporting Warwickshire children and families!

### Rise Mental Health Awareness Day

This week Lily and Chris attended the RISE mental health awareness day at The Ratcliffe Centre in Atherstone.

Other agencies who attended included the Fire Service, FIS, Library, CAVA and MIND. Fun activities were provided for children and families including face painting, stress ball making, arts and crafts. Attending this event was a good opportunity to build working relationships with partnership agencies whilst promoting the school health service to the public.

We have received brilliant feedback from RISE! "We had over 55 visitors (children included) and received some fantastic feedback". (See attached)

## Utilising digital technology

In order to improve the accessibility, reach and impact of our service, we are exploring ways to utilise the digital technology used by the children and young people our service is here to support.

Over the coming academic year, we will be expanding our digital offer to include Facebook Chat, Instagram, and Google search optimisation of our service webpages to ensure information is readily available via the channels used by young people.



## 7. PRIORITIES FOR YEAR 5

### **Weight management programme**

A new programme that covers weight management, food culture, healthy eating/lifestyles, oral health, and physical activity will begin in November 2019.

- Integrate the programme with our core service offering and deliver in partnership with Rugby Borough Council (Change Makers).

### **Central navigation hub**

- Implement a single point of entry (one phone number for the service) and a duty system delivered by nurses and administrators for all referrals, queries, bookings, notifications and coordination of core activities.
- Provide a one-step response so that our families and partners are one contact, click or call away from support via multiple access points e.g. by email, phone, text messaging or online (through the website).

### **New roles to enhance the service offer and delivery**

- Introduce new roles into the service, including a clinical nurse manager, Looked After Children's nurse, community engagement worker, marketing and digital communications officer, and healthy weight management team.

These new roles will:

- Increase engagement with vulnerable/hidden groups through strengthened care pathways.
- Build community capacity by connecting with partner networks through volunteers and health champions.
- Coordinate public health messages to deliver timely health promotion and improvement, protection programmes, and national and local campaigns.



## **SEND**

Our school special needs nurse will continue to work with the SEND leads at Warwickshire County Council to explore how the WSHWBS can best support children and young people with SEND both in mainstream and special schools.

## **Implementation of EMIS Web**

From August 2019, our new digital client record system (EMIS Web) went live.

- Embed the system into the service, training and supporting staff.
- Work with partners who already use the system to enable easier referral and information sharing between WSHWBS staff and primary care.

## **New HNA process**

- Collaboratively develop a new electronic Health Needs Assessment tool.
- Implement from November 2019 to deliver the national key-staged contacts at reception, year 6, year 9 and post-16.
- Improve time efficiency, relevance of the questions, data accuracy, and the overall experience for children, young people and families.

## **Training for early years staff**

Applying our knowledge and experience from delivering the Ready for School pilot programme, we will work with the early years strategic lead to:

- Embed the School Readiness policy and utilise Good Levels of Development measures of attainment (GLD) at community/locality/population levels.
- Deliver universal and targeted support to early years settings, including training, resources and public health information to help children to start school ready to learn.

## 8. GLOSSARY

**CAMHS** — Child and Adolescent Mental Health Service

**CSE** — Child sexual exploitation

**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

**LAC** — Looked After Children

**MASH** — Multi-Agency Safeguarding Hub

**NCMP** — National Child Measurement Programme

**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))

**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))

**SEND** — Special Education Needs and Disabilities

**TLM** — The Lancaster Model

**YHC** — Youth Health Champion



## 9. CONTACTS

**Main 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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**Service manager:** Matt Conibere

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

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**Secure emails:** warwickshireschoolhealth@compass-uk.org (secure using an Egress account)  
COMPASS.WarwickshireSHWS-Rugby@nhs.net (secure from NHS or gov.uk emails)  
WSHWS\_Rugby@welearn365.com (secure from welearn365.com or gov.uk emails)  
warwickshireswb.service@compassuk.cjsm.net (secure from CJSN emails)

### Locality hubs:

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

**Team leader:** Hayley Norman

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

**Team leader:** Jane Wild

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**North hub – covering schools in Nuneaton, Bedworth, Atherstone, Coleshill, Polesworth and Keresley**

**Team leader:** Kerry Rose

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# ABOUT COMPASS

Compass is a non-profit organisation that delivers services across England which create healthier lives and safer communities.

We are at the forefront of delivering innovative health and wellbeing services: as the only voluntary sector organisation to provide both school nursing and children and young people's substance misuse services nationally, we have a unique ability to access a broad population and bring about positive changes.

We have been providing the Care Quality Commission registered Warwickshire School Health and Wellbeing service since September 2015.



## Teen line

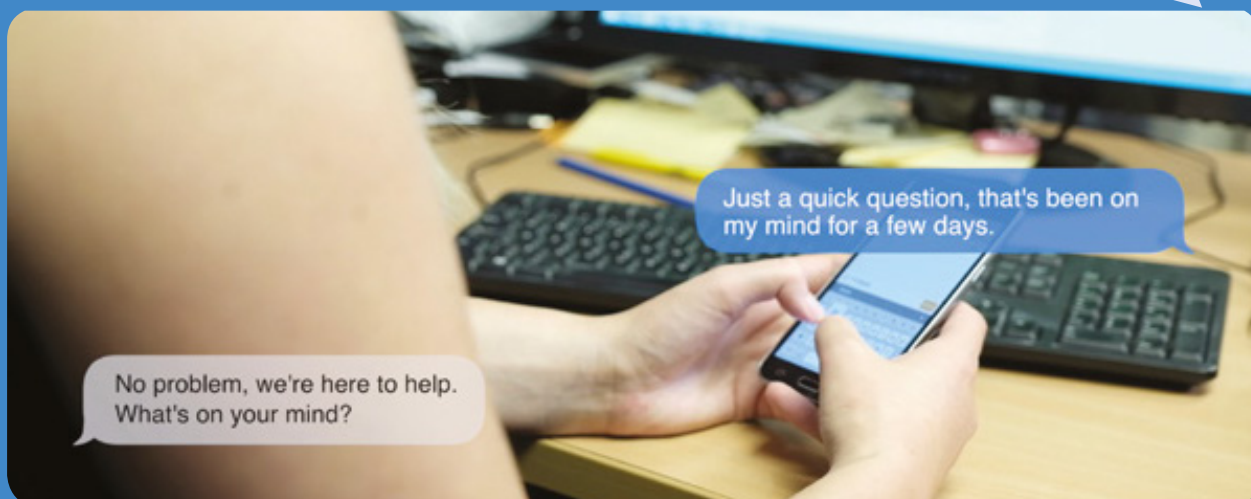
Young people can now text a school nurse from their mobile phone. ChatHealth, the school nurse messaging service, is confidential and available Monday to Friday from 9am to 5pm. You can message for advice on all kind of health issues, like sexual health, emotional health, bullying, healthy eating and 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 Compass website provides information about the regional services available, as well as tips, advice and guidance on a range of health and wellbeing topics for children and young people, parents/carers and professionals.



**[www.compass-uk.org](http://www.compass-uk.org)**

