

Warwickshire School Health & Wellbeing Service

ANNUAL REPORT

Academic Year 2019/2020: Year 5





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1. INTRODUCTION

WARWICKSHIRE SCHOOL HEALTH AND WELLBEING SERVICE REVIEW 2019/2020

We are pleased to present this report for the academic year 2019/2020. This report demonstrates the range of services provided to children, young people and families in Warwickshire at a universal level, and the personal response delivered where the need for additional support is identified. It describes some of the new elements of the service such as the integrated weight management service and the new and improved Health Needs Assessment tool that is helping the team identify and respond to health and wellbeing needs in our community. Despite the challenges of this academic year due to the global pandemic, the service has continued to provide high-quality and highly valued interventions to families, schools and the local community by using new and creative ways to deliver services, consistent with the national restrictions.

INTRODUCTION FROM COMPASS

Our fifth annual report comes at a time of national crisis as a result of the global pandemic. The impact of coronavirus has been devastating and far reaching on all parts of our society and in particular children, young people and families. Compass' focus during the pandemic has been on keeping essential public health services open, visible and accessible for all. Our Warwickshire School Health team has worked tirelessly over the year to ensure its core services are delivered using a wide range of creative and flexible methods of engagement, and by responding swiftly to the wide-ranging needs of individual families. As ever, I am in awe of our incredible staff team who continue to make such a difference to the lives of Warwickshire's children and young people every day. I have no doubt our team will continue to listen, reflect, adapt and evolve based on the changing needs of families as and when the longer-term impacts of the pandemic become better understood.

Rachel Bundock

Chief Executive, Compass

INTRODUCTION FROM PUBLIC HEALTH

The School Health & Wellbeing Service has been in place for five years now and continues to go from strength to strength. The service provides a high quality, visible, accessible and confidential offer, focused on improving the health and wellbeing of and reducing health inequalities for school-aged children and young people in Warwickshire. In November 2019, following a recommissioning exercise, Compass were awarded a new contract with Warwickshire County Council to deliver this service. Several new strands of work have been developed and delivered during the start of the academic year 2019/2020, including:

- 1. The inclusion of a family lifestyle and weight management service, including the development of a revised and enhanced pathway and a virtual offer during the pandemic.
- 2. The roll out of new technologies, including the creation and development of a new, integrated tool for Health Needs Assessments. The new tools are helping inform how they will enhance the school nurse role in delivering public health interventions for children and young people. We look forward to seeing this develop further in the academic year 2020/2021.
- **3.** Completion of the Ready for School pilot, supporting the delivery of the Ready for School toolkit for early years settings in Warwickshire.

The COVID-19 pandemic has brought significant challenges and we have worked closely with Compass to help them re-purpose the service offer to children and young people, ensuring that they continue to be supported. This has been difficult due to school closures, local restrictions and national lockdowns; however, Compass have managed to successfully adapt and adjust their approach and interventions to effectively reach children, young people and their families. Regular newsletters provided a valuable communication with schools ensuring that parents/carers continued to be supported. Their collaboration and flexibility with the Health Visiting service also has been important to meet the demands of the pandemic for families.

I would like to close on a note of thanks to Compass, for a year of two halves: firstly, by starting the year with mobilising a new contract at the same time as ensuring services are not disrupted and to focus on key areas of developments, and then for the second half of the year where the impact of COVID-19 has required a rapid response. The hard work, commitment and professionalism of the staff team continues to shine and ensures we have a robust, reliable service in the county, supporting our children, young people and their families.

Kate Sahota

Lead Commissioner (Family Wellbeing), Warwickshire County Council

Karen Higgins

Commissioner (Family Wellbeing), Warwickshire County Council

WARWICKSHIRE COUNTY COUNCIL: OUTCOMES FOR THE CHILD

I am supported to be healthy

I am supported to stay safe

I am supported to enjoy and achieve

I am
supported
to make
a positive
contribution

I am preparing to achieve economic wellbeing

My voice is heard

SCHOOL HEALTH SERVICE OUTCOMES

Keeping safe: reducing risky behaviours

- Children and young people are safe and protected, resulting in a reduction in hospital admissions caused by unintentional injuries.
- A reduction of the number of children and young people killed or seriously injured on the road.
- More children and young people are smoke free, reducing the prevalence of smoking locally.
- Children and young people are supported to reduce substance misuse.
- Children and young people are supported to reduce teenage conceptions and improve sexual health.

Improving lifestyles

- More children and young people are a healthy weight, through a reduction in the number of children who are overweight and obese at 4-5 years and 10-11 years.
- More children and young people grow up free of tooth decay.
- Increased population immunisation coverage for children and young people, to reduce prevalence of preventable ill health.

Maximising learning and achievement

- More children and young people achieve positive physical and emotional milestones (contributing to improved rates of school readiness).
- More children and young people develop and achieve their potential, through improved rates of school attendance.
- More children and young people, particularly the most disadvantaged children, improve academic results to close the attainment gap between the most and least deprived.

Seamless transition and preparation for adulthood

• More 16-19 year olds are able to achieve their potential through increasing percentage in employment, education and training.

Resilience and emotional wellbeing

- More children have better mental health
- All children and young people are safe and protected, within their families wherever possible.

Supporting complex and additional health and wellbeing needs

• More children and young people who have the greatest need make the greatest improvement, closing the gap in inequality in health outcomes.

Source: School Health & Wellbeing Specification 2019, Warwickshire County Counci

2. YEAR 5 PRIORITIES — HAVE WE MET OUR OBJECTIVES?

In Year 5 (2019/2020) we successfully met the following priorities identified during Year 4:

PRIORITY: Weight Management Programme

HAVE WE MET THE CHALLENGE?

Integration of Change Makers with WSHWBS

- Change Makers healthy lifestyles team successfully integrated with WSHWBS, resulting in a simplified referral process and an increased number of referrals from healthcare professionals.
- The combined skill-set and improved communications of the two teams has supported a holistic response to each child's needs.

Weight Management Programme

- The Change Makers healthy lifestyles team:
 - Designed a new rolling weight management programme, then adapted it to be delivered virtually due to the COVID-19 restrictions.
 - Provided one-to-one support to families throughout lockdown.
 - Continue to develop initiatives to address the potential increase in child obesity caused by lockdown.

PRIORITY: Central Navigation Hub

HAVE WE MET THE CHALLENGE?

- Administrators from localities were brought together to the central hub to ensure consistency and improve efficiency.
- A single point of contact with switchboard and county-wide email addresses was implemented, simplifying access to the service.
- Procedures and processes were put in place to ensure quality standards.

PRIORITY: New roles to enhance the service offer and delivery

HAVE WE MET THE CHALLENGE?

New roles

- Clinical Nurse Manager
 - Providing clinical support and improving practice amongst the team.
 - Leading the specialist nurses in the service.
- Marketing and Digital Communications officer
 - Improving all communications to stakeholders and children, young people and their families.
 - Developing high-quality materials and resources.
 - Providing resources to schools throughout the national lockdown.
- Healthy lifestyles team
 - Offering a broader programme of family and teen weight management interventions.
 - Providing an online programme of activities and interventions during lockdown.

PRIORITY: SEND

HAVE WE MET THE CHALLENGE?

Provision of more accessible resources

• Creation of new virtual continence workshops for children and young people with SEND, including new visual presentations and feedback mechanisms.

Providing staff with the knowledge and skills to support children and young people with SEND

• The service now has a robust SEND training programme in place. This training programme is provided to all new members of staff and equips them with the knowledge and skills they require to provide the very best care to children, young people and families.

PRIORITY: Implementation of EMIS web

HAVE WE MET THE CHALLENGE?

Implementation of a more efficient patient record system

- EMIS web was customised by members of the WSHWBS and EMIS team to ensure that the system works efficiently for our service.
- Templates are included in the system to ensure that information is recorded accurately and that data reports can be produced.
- Letter and document templates are incorporated to ensure consistent content.
- Access to the NHS spine system has improved the accuracy of demographic and safeguarding information.

PRIORITY: New Health Needs Assessment (HNA) Process

HAVE WE MET THE CHALLENGE?

- Introduction of a new electronic HNA tool for two of the recommended national key staged contacts, year 6 and year 9, and school entry pilot.
 - New questions developed with academic scrutiny and feedback from head teachers.
 - New Nurse Dashboard, allowing concerns raised by children and young people to be addressed through support and interventions.
- Pilot of the School Entry HNA for parents/carers completed, with parents given access to a portal for public health information.
 - Questions developed with early years practitioners and parents/carers.

PRIORITY: Training of early years staff

HAVE WE MET THE CHALLENGE?

Improved support provided to early years settings

- Ready for School Pilot report was completed and distributed, sharing recommendations and best practice for early years settings.
- Ready for School 'Top Tips' leaflet was produced to support parents/carers with the transition to school.

MEETING OUR PRIORITIES UNDER THE CONSTRAINTS OF A GLOBAL PANDEMIC

In March this year, in response to the global pandemic, community services including school nursing were required to pause or partially stop and work in a different way, mostly virtually. Although schools closed to all except the most vulnerable and the children of key workers, many of the concerns and issues for our young people and families remained, and in some cases were exacerbated by the enforced lockdown and separation from friends, family and familiar routines.

WSHWBS responded to this situation with flexibility, strength, leadership and the determination to continue to do the very best for children, young people and families in Warwickshire. This is reflected in the information and case studies shared throughout this report.

We have continued to respond to referrals into the service in a timely way and have been able to complete health assessments for our most vulnerable children, including those in care. We have provided schools with <u>weekly newsletters</u> throughout lockdown, giving hints, tips and resources to promote good health and wellbeing.

There have been positives in these extraordinary times, including being able to use different ways of interacting with our families and young people, for example via one-to-one video technology, which in some cases has been hugely beneficial. We have been able to use videos and webinars to provide training and support to schools and parents/carers which has made robust, evidence-based information more accessible and convenient, allowing people the opportunity to receive support at the time most suitable for them.

The evidence is growing that the pandemic has had and continues to have an immense impact on our young people's mental health and wellbeing, making the role of the school nursing service more vital than ever. Working with our commissioner and school staff, we continue to learn from these new ways of working and adapt our service to respond to emerging issues.

3. UNIVERSAL KEY STAGE CONTACTS

Health Needs Assessments

At the beginning of this academic year, we began to use a new electronic Health Needs Assessment (HNA) system to deliver the nationally recommended key stage contacts at school entry, year 6 and year 9. This new and improved tool, which the service designed in collaboration with systems provider Thomson Screener, has made the process quicker and easier for parents/carers and young people to complete and is producing more relevant data, enabling the service to better respond to individual and community needs.

Until the national lockdown in March, our completion figures continued to be positive; however, the closure of schools in line with the Government guidelines¹ meant that the programme was paused. During the lockdown and restoration of community services period, the service continued to respond to the needs that had been identified but in a virtual manner using phone calls and digital technology (as detailed on page 14).

We intend to resume the programme for the academic year 2020/2021 and work with schools to work out the most effective means of delivering it under the present circumstances.

¹COVID-19 Prioritisation within Community Health Services, March 2020

HNA completion by year group

School entry (aged 4-5)



New system developed with input from parents/carers.
Pilot questionnaire completed by 101 parents/carers.

Year 6



Warwickshire year 6 population:

6,181

No. HNA completed:

4,416

Percent of population:

71%

Year 9



Warwickshire year 9 population:

6,346

No. HNA completed:

1,419

Percent of population:

22%

Individual-level data alerts

The HNA portal generates flags which indicate where the pupil has answered a question which requires additional attention and possible intervention; these are either red or amber based on the level of need and the urgency of the response required. **84%** of year 6 pupils and **98%** of year 9 pupils generated flags to be reviewed.

The system also generates automated public health messages on the screen during the completion of the questionnaire. These are included in the pupil profiles provided to parents/carers for year 6 pupils or provided directly to year 9 pupils.

Year 6 flags

	Topic	Red flags	Amber flags	Public health messages displayed
0	Lifestyles*	1,896 43% (of total red flags)	2,082 31% (of total amber flags)	11,845 50% (of total PH messages)
	Bullying	1,196 27 %	 	-
(\$\text{\$\pi\$}	General health	742 17 %	1,358 20%	5,833 25 %
0	Emotional health	552 13%	2,875 43%	-
	Safety	-	- -	3,325 14%
	Social media	-	 	2,787 12 %
(<u>a</u>	Friendships & relationships	-	432 6%	_
	Total	4,386	6,747	23,790

^{*}Lifestyles topic includes questions on healthy eating, physical activity, sleep and substance misuse, along with questions which may indicate the pupil is supporting members of their family.

Year 9 flags

	Topic	Red flags	Amber flags	Public health messages displayed
0	Lifestyles	449 25 %	1,354 30%	3,679 32 %
(29)	Bullying	913 51 %	 - 	-
©	General health	211 12 %	137 3%	1,614 14%
©	Emotional health	126 <mark>7</mark> %	1,805 40%	3,222 28%
	Safety	100 6 %	239 5%	1,307 11%
	Social media	-	 - 	1,203 10%
	Friendships & relationships	-	997 22%	632 5%
	Total	1,799	4,532	11,657

HNA data comparisons

This data was collected from the first cohort to use the new HNA tool, and as such comparisons with previous years are no longer applicable. In future years, data will continue to be analysed against previous years in order to monitor the effectiveness of the HNA and spot trends and changes in the population's needs.

Population-level data

Analysing the HNA data at a population level identified the following public health priorities for Warwickshire:

Top flag categories for primary school (year 6)



Lifestyles

2.

Emotional health

3.



Bullying

Top flag categories for secondary school (year 9)



1. **Emotional** health

Lifestyles

Friendships & relationships

Key points

78% of year 6 pupils have 4 or less pieces of fruit and veg each day, increasing to 84% for year 9 pupils.



13% of year 6 pupils answered yes to 'Do you ever want to hurt yourself on purpose?'. 5% year 9 pupils answered yes to 'Do you currently hurt yourself on purpose?'.









10% of year 6 pupils said people are ganging up on them by leaving them out, not talking to them or telling lies about them. 10% of **year 9 pupils** said they have been hurt by being left out of a group either in person or online at least weekly over the last year.





2% of year 6 pupils said they had no one they felt they could trust and speak to, compared to 4% of year 9 **pupils** who said they did not have someone they can trust and can talk to.

Responding to public health priorities during COVID-19

Our capture and analysis of HNA data was significantly impacted by the pandemic. As such, the 2019/2020 data could not be analysed in the usual way when developing our service response to public health needs. We therefore pro-actively reviewed the previous year's HNA data and the current types of referrals we were receiving into the service. We combined this with locally held intelligence to construct a list of topics which recognised the key health and wellbeing issues experienced by children and young people. From here, we developed a suite of virtual workshops and resources which parents/carers could access to better equip them to support their children.

Virtual workshops

WSHWBS Family Brief Intervention Workers (FBIWs) and nurses hosted a series of virtual parent/carer workshops in response to the key health and wellbeing topics identified in the year 6 HNA.

The workshops aimed to provide parents/carers with the knowledge and confidence to support their children, to create healthy habits, and open dialogues that could prevent health needs developing further. The workshops also allowed staff to reiterate that further support from our service is always available should parents/carers or children/young people continue to have concerns, as well as sharing the details of other relevant services in the county.

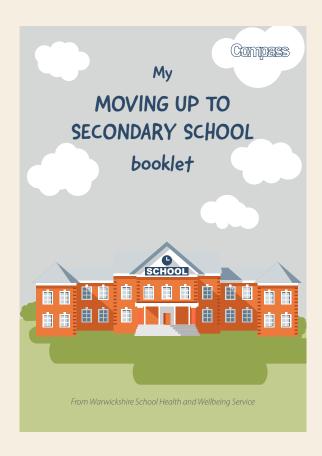
Workshop attendance

Topic	Attendees	Parent/Carer Workshop
Healthy Eating	7	Workshop
Healthy Sleep Patterns	7	Building emotional resilience
Building Emotional Resilience	7	Compass Warwickshire School Health & Wellbeing Service
Moving Up to Secondary and Friendships	9	
Internet Safety	3	Parent/Carer
Encouraging Positive Mental Health in Children	4	Workshop
Building Good Mental and Physical Health	4	Healthy Sleep Compass Warwickshire School He
Resisting Peer Pressure and Risk-Taking Behaviours	7	Workshop Moving up to Secondary School CONDASS Warwickshire School Health & Wellbeing Service

Health & Wellbeing Guide and Moving Up to Secondary booklets

To provide additional support to parents/carers of year 6 pupils who completed the HNA, we created a 'Health & Wellbeing Guide' booklet. This covered topics where data showed pupils were most likely to have concerns or queries. It contained top tips, advice, resources, and details of where both parents/carers and children/young people could access further support.

We also created a 'Moving Up To Secondary Booklet' for parents/carers to complete with their children to prepare them for transition, as this was an area where concerns were commonly expressed. The booklet contained activities, checklists, useful tips and resources. Both resources were sent via email to over 6,000 year 6 parents/carers in Warwickshire.



Download Moving Up booklet



Download Health & Wellbeing booklet

Case study – support following the year 9 HNA

A WSHWBS nurse met up with a year 9 pupil after their HNA identified they may require support. During their appointment, the young person told the nurse that they were worried about a family member's health. They also shared concerns about their family being able to access food, stating that although they always got to eat, sometimes one of their parents went without which made them worry.

The nurse offered advice and reassurance about the issues raised and let the young person know that she would explore them further and provide on-going support until there was an improvement. She provided a list of useful websites and contact details for support in the meantime, including the ChatHealth text messaging service.

The nurse called the young person's parent to discuss the concerns and look into potential solutions. The parent confirmed a family member had a medical condition, and highlighted other issues that could be having an impact upon the young person. They felt their home environment was affecting the young person's emotional health and shared that they also struggled with sleep. They also confirmed they sometimes missed meals to ensure the young person always got to eat.

The nurse assured the parent that WSHWBS could support with the young person's emotional health and sleep problems. She shared details of an emergency food bank the family could access in their area that day to collect food for over the weekend. She also made a referral to an online food bank who deliver food packages the next working day. She then spoke to Warwickshire Family Information Services to request contacts to provide the parent with for support with their finances. Throughout the time she was working with the family, the nurse made multiple referrals to the online food bank to ensure they had continued access to food.

With the parent's consent and the young person's contribution, the nurse completed an application to initiate Early Help support around the home environment and finances. School were involved in this process as the parent had a good relationship with them and found them to be 'really supportive'. School also supported the parent by letting them know how they could make an application for free school meals for the young person.

The nurse also referred the young person to Warwickshire Young Carers, providing a support network to help them cope with the situation with their unwell family member. Over the following weeks and months, she provided on-going support to both the young person and their parent about sleep, emotional health, dealing with frustration and managing emotions. After the COVID-19 outbreak, she continued to support the family virtually.

Because the young person completed the HNA, WSHWBS were able to identify a number of health and wellbeing issues and work with partners to provide essential support to the young person and their family.

Supporting public health campaigns

Eye Health Week (23rd–29th September)

WSHWBS hosted a number of drop-in sessions in schools across the county, providing information and engaging pupils through games and activities. Materials for this were co-produced with the Youth Health Champions (YHC) groups.





Mental Health Awareness Day (10th October)

We supported the Young Minds #HelloYellow campaign by wearing yellow and raising awareness through the Compass website and social channels. The team also took the opportunity to reiterate that young people can contact the service if they are struggling with their emotions, sharing the ChatHealth text messaging service details.

Global Handwashing Day (15th October)

Global Handwashing Day was promoted through lessons delivered by the service to reception, year 1 and year 2 children. These covered the importance of when, why and how to wash hands through a presentation and a series of activities.





Stress Awareness Day (6th November)

We hosted drop-in sessions in schools to start a conversation about stress, demonstrate coping strategies such as breathing techniques, and share other advice and the details of services children and young people can access for support.

Anti-Bullying Week (11th-15th November)

For Anti-Bullying Week, a skill-mix WSHWBS team worked with YHC to educate their fellow pupils about bullying. The YHC engaged well in sessions and were pro-active in coming up with ideas. They created posters, decorated a board for their school hall, and spoke about the campaign in an assembly, showing their posters and reading a poem.



Obesity Awareness Week (13th-20th January)

For Obesity Awareness Week, we created a handout to help secondary school-age pupils learn about healthy lifestyles. This included games and activities designed to highlight common misconceptions about food, drink and exercise, as well as lots of simple tips for staying active and eating well. This was distributed to schools via email, as well as promoted by staff visiting schools to facilitate the National Child Measurement Programme.

We also created a website blog sharing top tips for healthier living and shared this and our handout via social media.





Young Carer Awareness Day (30th January)

WSHWBS showed our support for Young Carers by joining in the 'A young carer is...' campaign on social media.

Safer Internet Day (11th February)

We created this quiz for teachers to do with pupils during form time or PSE lessons. Alongside the answers, we included talking points to help teachers use the quiz as a means to start a general discussion about internet safety, gauge pupil knowledge and fill in any gaps. We also wrote and shared a blog article, which included top tips for staying safe online with useful resources and websites.





Download handout

No Smoking Day (11th March)

We worked with Warwickshire Children & Young People's Drug & Alcohol Services to create a handout with important information and a crossword highlighting the risks of smoking. We also promoted No Smoking Day in schools, setting up boards with key information about smoking presented visually, and handed out cessation resources and service contact details to those who showed an interest in quitting smoking.

Promoting public health campaigns through school newsletters

As we entered into national restrictions, we started sending out a weekly newsletter for schools to distribute to families. Alongside providing general health and wellbeing advice and details of how support can be accessed, we were able to utilise the newsletter to promote public health campaigns and share useful resources and fun activities.







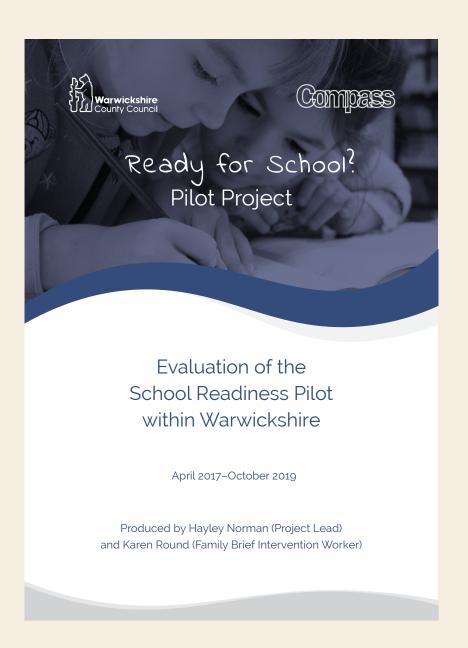


View all service newsletters

Ready for School pilot

The Ready for School pilot was a project that aimed to explore how services can work in partnership to improve school readiness and support families most effectively based on local needs. Following its completion in August 2019, we produced a comprehensive report outlining the method, findings and recommendations from the project. We shared this with Early Years settings, local authority commissioners, and other health and education partners to help inform decision-making around the support given to children, parents/carers and Early Years practitioners.

We also created a 'Top Tips' leaflet designed to help parents/carers get their children ready to start school, which was distributed by our service and sent to partners to share with the families they work with.







Download Top
Tips leaflet

Download Ready for School Report

National Child Measurement Programme (NCMP)

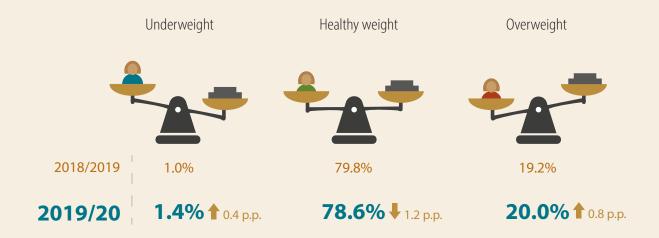
During the academic year 2019/2020, we facilitated the National Child Measurement Programme (NCMP) in schools across the county. The NCMP programme provides data on child obesity levels and contributes to the government response to tackling this public health priority.

On 25th March 2020, we were instructed by Public Health England to suspend all NCMP activity in response to the pandemic. In July, we were informed by Public Health England that the NCMP programme for this academic year would formally end and requested that all collected data be uploaded to the National NHS Digital data set. The impact this had on our completion rate can be seen in the table below: however, we were still able to obtain enough data to gain useful insight into levels of childhood obesity.

NCMP completion rate

	2019/2020	2018/2019	2017/2018	2016/2017	2015/2016
Reception	69.4%	97.0%	98.0%	97.6%	98.4%
Year 6	82.8%	95.9%	97.2%	96.8%	97.1%

Year-on-year comparison of all children weighed



2019/2020 — Breakdown by age group



Acting on NCMP data and children and young people's perceptions

In keeping with national findings, we have seen a small increase in the number of children who are underweight and children who are overweight.

With the integration of Change Makers into WSHWBS, our school nurses were able to work with the healthy lifestyles practitioners to provide a response that addressed both data from the NCMP and the perceptions of children and young people gathered through the HNA.

Perceptions of Year 6 children

5.7% of year 6 pupils answered 'Never' when asked if they like their body.

(Based on HNA data. 251 out of 4,416 answers with options 'Always', 'Sometimes' and 'Never'.)



Consistent with previous years, children and young people identified as overweight or very overweight received an invitation to take part in the Change Makers healthy lifestyles programme. In order to increase uptake, these families also received a leaflet which provided information on what the programme entailed and highlighted the potential benefits for the whole family. Parents/carers of children who were identified as underweight were contacted by a nurse and given the opportunity to discuss any concerns.

Nurses were able to address the responses to the HNA where children shared a negative perception of their body on a case-by-case basis, while the healthy lifestyles team could reinforce messages about body positivity through the healthy lifestyles programme.

2019/2020 Change Makers report

In November 2019, the Change Makers healthy lifestyles team integrated with WSHWBS. Combining the two teams aimed to simplify the referral process, improve communication, and support a holistic response to children and young people's health and wellbeing needs.

The new healthy lifestyles offer included a one-off workshop, a rolling programme of educational sessions, one-to-one support for complex cases, or a combination of all three in order to achieve the best outcomes for each family.

Restrictions to prevent the spread of COVID-19 were put in place shortly before the in-person workshops and programmes were due to begin. Therefore, the team had to quickly adapt to flexible virtual working. All families awaiting support were contacted and offered virtual support. Some chose to postpone their involvement so as to benefit from the face-to-face offering in the future, while others began receiving one-to-one support from the team via phone, email and video calls.

A virtual rolling programme was developed and took place over the summer holidays. This included an online version of the workshops and educational sessions, along with live cooking sessions, live exercise sessions and a Q&A session. The activities ran Monday to Friday with 3 sessions per day, with each session available on multiple dates and times to improve accessibility. During this time period, there was also an increase in uptake of one-toone support. Materials developed for the virtual programme were adapted and utilised for these oneto-one sessions, with recipients providing excellent feedback (see next page).



The integration of Change Makers and WSHWBS has achieved the goal of simplifying referrals, with a notable increase in referrals from healthcare professionals since the change. The team now have a closer working relationship, conducive to ensuring each family's needs are met.

There is some evidence that the pandemic may have promoted weight gain¹. The Change Makers are now working to help address this through initiatives currently in development such as a primary school 'Healthy Eating Challenge', which aims to be piloted and rolled out across the county in 2020/2021.

Supporting weight management services during the COVID-19 pandemic: Phase 1 insights, Public Health Engalnd

Feedback from Change Makers interventions

I don't know how you did it but she loved it!

Feedback from a mother who said her daughter engaged well with Change Makers, despite usually avoiding anything healthy.

lt's really
opened my eyes
to making better
choices for the whole
family.

He can't wait for the sessions, he really enjoys them.

He has lost 6lbs since starting the programme and he is literally so happy he is dancing about. He is so happy with his progress.

Feedback from a family member after 4 Change Makers sessions over 8 weeks.

She's eating breakfast every day now we eat together.

I just wanted to say thank you for all your help and support over the past weeks. I really appreciate it.

4. SAFEGUARDING

Holistic health assessments and health reviews of Children in Care (CiC) during COVID-19

Due to COVID-19, we had to cease our face-to-face health assessments halfway through the academic year. Community venues closed, we were prevented from visiting homes, and we lost access to venues such as schools where we had previously undertaken health assessments. However, the health assessments and support for young people needed to continue. We adapted to this new situation and responded by completing health assessments via WhatsApp. This allowed us to video call children, young people and families, enabling us to see their body language, demeanour and physical presentation. This created a better, more rounded health assessment than what could have been achieved via a voice call.

Sharing the voice of the child

Throughout the pandemic, we strove to hear the voice of the child using a variety of different means including questionnaires, feedback forms, one-to-one conversations and health assessments. We were then able to share their voice with our partners and work together to safeguard children.

Practitioners captured the health needs and the voice of the child and advocated for them with other professionals. They helped others to understand the impact that trauma has on children and we worked with them to establish a robust plan of support. This was done via video calling into a variety of different safeguarding meetings using secure links.

The impact of lockdown

The impact of lockdown on children and young people is likely to be long-lasting and has potential to increase poor outcomes for those already disadvantaged. Data shows that the number of children and young people requiring protection is increasing rapidly. WSHWBS will continue to draw on the skills of our team and work with our multi-disciplinary partners to ensure the protection of our most vulnerable children and young people.

Safeguarding assessments completed





Multi-agency working

WSHWBS is one organisation in a co-ordinated approach to safeguarding vulnerable children and young people. As such, we work with partner agencies to analyse all relevant information and plan how best to safeguard and promote the welfare of a child or young person. We do this through attending multi-agency meetings, sharing identified welfare and health information. We then work with our partners to respond to the identified needs and contribute to multi-agency assessments and review.

WSHWBS involvement in safeguarding processes								
Initial Child Protection Conference	Core Group	Review Conference (RCPC)	Child in Need	Strategy Meeting	Multi- disciplinary	Early Help	Family Support	CiC Review
221	381	104	95	55	6	98	43	5
Total meetings 2019/2020: 1,008				Total meeting	gs 2018	/2019: 750)	

Support provided to the Multi-Agency Safeguarding Hub (MASH)				
Number of children information was requested for	62			
Number of children WSHWBS were able to provide information for	23			
Cumulative total by area	North 30			
	Central 12			
	South 12			
	Area unknown 8			

Safeguarding case study – essential support for a victim of a child exploitation

School nurse Ray had been working with a young person named Jodie, who was on a Child Protection Plan due to being a victim of county lines and child sexual exploitation. Jodie had been forced to run drugs, recruit other young people to do so, and sell drugs in school. She had been the victim of multiple sexual assaults. She had stated that the only way out was to commit suicide, and had previously made an attempt on her own life. She was also misusing drugs and alcohol as a coping mechanism.

After schools were closed due to COVID-19, Jodie's parents made the decision to keep her at home. Ray was concerned about Jodie's safety, particularly in respect of her suicidal ideation. Because of this, she began working closely with the school to keep in regular contact with Jodie. She made regular telephone calls, while the school carried out 'virtual visits' and reported self-harm and other concerns back to Ray to escalate to the appropriate services.

Through her regular phone calls with Jodie, Ray provided support around her alcohol and drug misuse, as Jodie didn't want to involve any other services in this matter at that time. She also undertook sensitive work around sexual health, encouraging Jodie to take tests following the assaults she had been a victim of.

If Jodie was in difficulty, she sent an X in a message to all professionals to alert them that immediate interventions were needed. The multi-agency team made significant progress in preventing Jodie from being further exploited by the drug gang in the future.

Ray's support, delivered with sensitivity and care, formed an essential part of the multi-agency response addressing Jodie's emotional health and wellbeing needs. There is a likelihood that without this response, Jodie could have made further attempts to take her own life. Ray's continuous contact also built invaluable rapport and trust, ensuring Jodie feels listened to and has the confidence to share her concerns.

All names have been changed to protect the young person's identity.

5. OTHER SUPPORT

Sources of referrals into the service

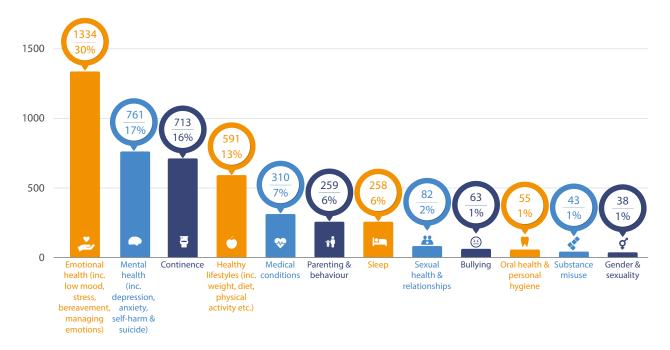
	Number	% of total
ChatHealth	14	<1%
Children & Family Services	446	9%
Family Information Service	2	<1%
Fitter Futures	1	<1%
GP	110	2%
Health Needs Assessment	1,075	21%
Health Professional	143	3%
Health Visitor	248	5%
Child in Care team	143	3%
Mainstream School	863	17%
NCMP	1,753	34%
Relative	299	6%
Self	7	<1%
Special School	3	<1%





Reasons for interventions

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



Completing interventions virtually during COVID-19

In order to continue to meet the health and wellbeing needs of children and young people during the pandemic, WSHBWS had to quickly adapt to new ways of working. The school nurse team utilised technology to maintain direct contact and continue to meet statutory requirements, while also working closely with partners to ensure the safety of children and young people who were at increased risk during the lockdown. Our virtual response included:

- A weekly newsletter sent to schools and partners to share with children, young people, and families, with health and wellbeing advice and resources.
- Whatsapp chats and video calls for interventions.
- ChatHealth and Parentline text messaging services.
- Virtual workshops.
- Virtual meetings with partners.
- Digital resources on the most prevalent health and wellbeing topics, sent via email and shared on social media.



Case studies

Creating a safety net for a young person with concerns at home

School nurse Katie was due to see a young person named Tom in school just as schools were closed due to the COVID-19 outbreak. Tom had indicated that his father had mental health problems and raised concerns about domestic abuse. Katie was concerned that no professionals would have sight of Tom during the lockdown, and that the restrictions could potentially become a catalyst for the father's mental health problems, with the possibility of further domestic abuse.

Katie sent Tom a letter to let him know he could still contact his school nurse, with instructions on how to do so. She also contacted the designated safeguarding lead at the school to raise her concerns. School told Katie they have a list of vulnerable children and young people for whom they are carrying out welfare checks both over the phone and face-to-face (while maintaining social distancing). They added Tom to this list and said they would telephone him that day.

During the telephone conversation that followed, further concerns were raised. As a consequence, school arranged a home visit to visually check on Tom and attempt to speak to him alone. Tom was also provided with a school mobile number to contact if he had any worries during the school closure.

Katie's actions meant Tom had the support of multiple professionals and was aware of his safety net if he had concerns, which included both school and school nursing. The family were also supported with issues raised over the phone around accessing food.

Completing a comprehensive Holistic Health Assessment remotely

School nurse Andy was invited to attend an Initial Child Protection Conference (ICPC) on behalf of WSHWBS. This took place during the COVID-19 outbreak, and so was hosted virtually via Microsoft Teams.

Andy contacted the family involved via telephone and was able to complete a comprehensive Holistic Health Assessment of both the young people concerned. The young people engaged very well and said they enjoyed talking to Andy on the phone. Andy was also able to share the ChatHealth number with the young people and Parentline number with the parents. One of the young people texted ChatHealth the next day to test whether they would get a response, giving Andy confidence they would use the service if they had any concerns.

Andy shared the 'voice' of the young people at the ICPC, expressing their feelings and wishes, which helped build a picture of the support required. The young people have an additional line of support (ChatHealth) whenever needed.

All names have been changed to protect the young people's identity.

Young carers

WSHWBS continued to develop our relationship with Warwickshire Young Carers, remaining in contact with the organisation throughout the year. We provided a young carers update during lockdown, with some top tips on health and wellbeing for young carers during the pandemic, as well as strategies for dealing with stress.





The Young Carers Youth Group were also given the opportunity to contribute ideas for the service rebrand, sharing words and names they associate with the service.



The young carers
have had an amazing
experience learning how
to make bread sticks and
the therapeutic outcomes. I'm receiving
messages and photos from the young
carers and parents about how tasty the
bread sticks are.

Teresa Bird, Young Carers Project Worker

In August, WSHWBS facilitated a virtual therapeutic baking session for the young carers, with the objective of supporting their emotional wellbeing and providing an outlet from daily stresses. During the session, which was led by an experienced former mental health practitioner, the young carers learnt how to make breadsticks while focusing on the mindful elements of the process. They engaged throughout and were able to enjoy some freshly baked bread at the end as a reward for their hard work. The session also enabled the WSHWBS nurse leading our contact with young carers to spend some informal time with the group and reiterate the support available from our service.

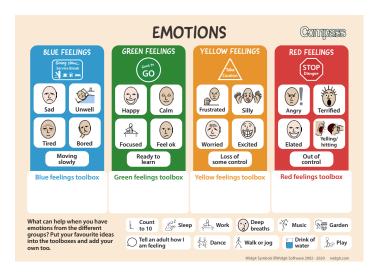
I think there was plenty of value in the time spent, nobody was checking their phones or not taking part so I think they were engaged. Definitely a mindful space for all of them. Many thanks, I got a lot from it too.

lan Waterland, Theraputic Baking Leader

SEND

Our specialist SEND nurse leads our team in ensuring we offer an equitable, evidence-based service that meets the needs of children and young people with special educational needs. This is achieved in a variety of ways including:

- Training of internal staff.
- Working closely with staff at special schools.
- Supporting parents/carers through workshops and one-toone interventions.
- Creating accessible resources for children and young people with additional needs.



Regulating Emotiosns activity created by SEND lead and marcomms officer - download here

Case Study - supporting a young person with severe allergies

A young person who is autistic and has severe allergies was referred into the service for completion of a Health Care Plan. The Health Care Plan was completed but further support was required from parents around teaching the young person to be able to recognise the signs and symptoms for anaphylaxis. The parents also requested support for a hospital passport if the young person should have an admission to hospital.

The Health Care Plan was completed with parents and they were given some hospital passport templates to choose which one would best capture the needs of the young person. Parents were signposted to a St John's YouTube clip on anaphylaxis to view with the young person, which provided visual information about anaphylaxis. Pictures demonstrating anaphylaxis, signs and symptoms, and a step-by-step guide of what the young person needed to do were provided to gradually introduce the early signs and symptoms for anaphylaxis

The young person was able to manage their long-term medical condition at home and school independently. The Health Care Plan in place supported the young person to participate in full-time education, and the family's anxieties have been reduced. If the young person is admitted to hospital, information will be shared using the hospital passport highlighting how best to communicate, ensuring the young person's needs are met.

ChatHealth

The ChatHealth text messaging service has been key to ensuring young people and parents/carers are able to access a school nurse, particularly during the period of restrictions when schools were closed. We continued to promote the ChatHealth details during one-to-one and group sessions, through the youth health champions, and after the year 9 HNA. In addition, during lockdown we promoted ChatHealth through social media initiatives including a video where members of staff held up cards expressing a message of support for families. We also reiterated the availability of the text service in all of our newsletters and other digital communications to schools and families.

We audit the text message conversations every three months in order to ensure the quality of the service provided. The completion of the audit leads to further training and guidance for the team to ensure that the best possible service is provided to young people and parents/carers. In addition to the audit, we also seek feedback from each service user in order to enhance the service provided. Some positive feedback received from service users includes 'Very quick to respond and very helpful', and 'Thank you for your message and explanation, I appreciate it'.

Over the coming year, we will continue to analyse the effectiveness of ChatHealth and explore other potential methods of communication to ensure our offer remains relevant to young people.

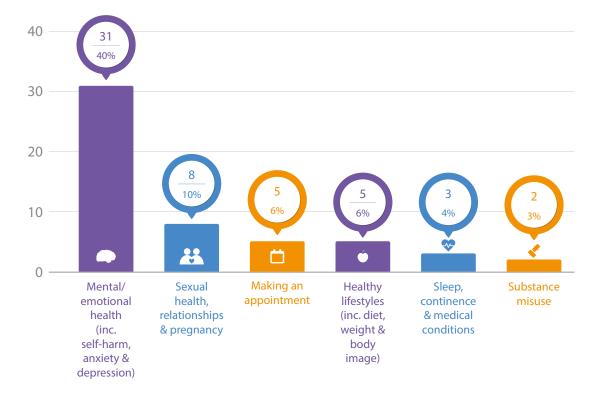
ChatHealth statistics (for 11-19 year olds)



Parentline statistics

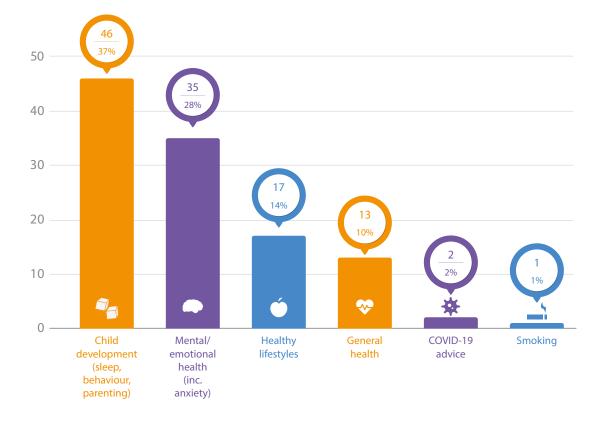


ChatHealth conversation topics



23 conversations (30%) had the attributed topic of 'other', which covers when a young person doesn't proceed with the conversation after initial messages or when a new conversation is started to provide service feedback.

Parentline conversation topics



11 conversations (9%) had the attributed topic of 'other', which covers when parents/carers are signposted to other services for support. Some conversations covered more than one topic.

6. HOW THE SERVICE IS MAKING A BROADER DIFFERENCE

Empowering local communities

We remain committed to supporting and empowering local communities. To build on this, in the coming academic year we intend to recruit an engagement worker who will work with teams in our local communities to generate solutions that meet the needs of our population.

Youth Health Champions

WSHWBS continued to work with Youth Health Champions. These groups of children and young people within schools spend time with nurses and healthcare support workers contributing to the development of resources and learning key health messages to share with their peers.

One activity completed involved creating boards and other materials with the youth health champions on topics including who WSHWBS are, oral health, emotional health and body positivity. These were then shared with the rest of the school. They also completed handwashing activities to help spread important health messages with their peers around infection control.

Focus groups were completed with the Youth Health Champions about the ChatHealth text messaging service. Their feedback will be used to inform our digital developments over the coming year.

In addition, the Youth Health Champions and local youth groups have been extensively involved in our branding project. Each individual was given the opportunity to share a name idea or phrase they associate with the service, vote on names other children and young people had suggested, and draw their ideas for a logo. They had lots of creative ideas which helped us to understand the elements of our brand they engage and connect with most. This fed into the development of our new brand identity, which will be launched in September 2021.

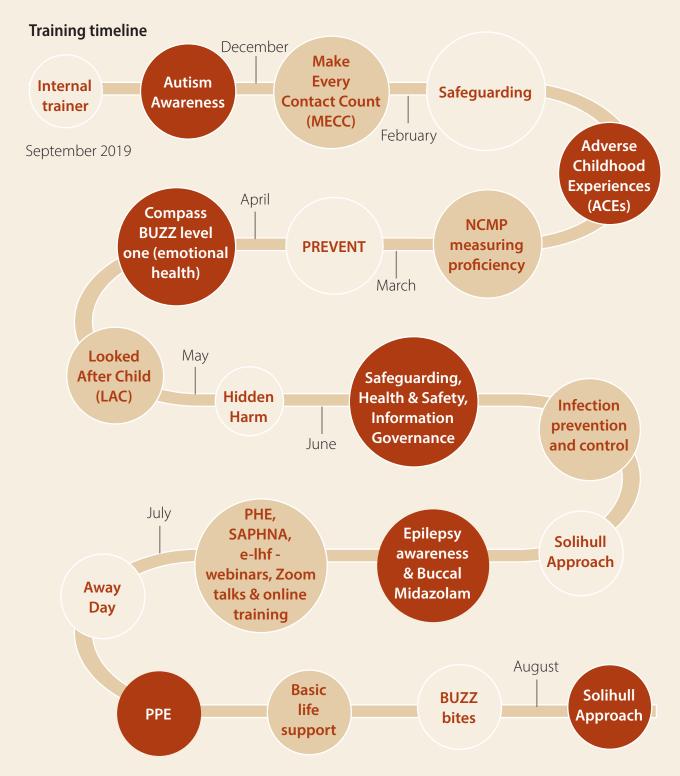


Youth Health Champion logo designs

Staff engagement

Training and development

We continued to provide our staff development programme, designed to upskill our staff and ensure the quality and safety of the service. This year, staff completed a range of mandatory training and were given the opportunity to attend a varied choice of optional training, allowing staff with specific skills and interests to develop these further. We also continued to support staff through the Specialist Community Public Health Nurse (school nurse) training.



Feedback from training

Safeguarding

It was really nice to spend the day reflecting on current safeguarding practices - I learnt a lot. Solihull Approach

Thank you so much, fabulous training. I'm going to use this approach in my work to support parents when I get referrals for fussy eating or sleep difficulties, and with teenagers in my one-to-ones at school.

You're Welcome

As part of the SCPHN course, I undertook a year-long leadership module focusing on service improvement and development. I was tasked to revisit the You're Welcome (2011) criteria whilst considering the set of standards produced for the You're Welcome Pilot Project (2017).

I produced a report that provides a self-assessment of Warwickshire School Health & Wellbeing Service against the current You're Welcome Quality Assessment Criteria (Department of Health [DH], 2011) using the 2017 Pilot Project self-assessment format. The aim was to develop the School Nursing team, improving outcomes for children and young people. The purpose of the self-assessment is ensuring Warwickshire School Health & Wellbeing Service is an appropriate, youth-friendly, accessible service, eliminating the barriers young people face when requiring school health support (Children's Commissioner, 2016). Many national policies and reports identify School Nurses can make a positive difference to the health and wellbeing of young people by offering early advice and support (DH, 2009 and DH, 2012). Consideration of recommendations have been included to ensure future sustainability of the self-assessment.

Natalie, School Nurse

Staff wellbeing

The WSHWBS Healthy Lifestyles Coordinator took on the role of promoting staff wellbeing through a number of initiatives throughout the year. This included creating a 'breakout space' for staff to spend some time away from their desks during lunchtime, with wellbeing activities such as puzzles available. Staff were also involved in public health campaigns – for example, for National Fitness Day, each hub was asked to take part in a form of physical activity before or after work or during lunchtime. Alongside this, the service Health Champions continued to share useful tips and recipes through the staff newsletter.

This year's staff Away Day took place in July, while COVID-19 restrictions were still in place. As such, the event took place virtually. In recognition of the hard work and adaptability demonstrated by staff in the face of difficult and unexpected circumstances, the day focused primarily on staff wellbeing. A motivational speaker hosted a session called 'The Art of Brilliance', which talked about how positive thinking and reframing can help us



get more out of life. The staff were then given free time in the afternoon to do a wellbeing activity of their choosing, and made pledges to make these wellbeing activities a part of their daily lives.



7. PRIORITIES FOR YEAR 6

Develop healthy lifestyles offer

- Continue to integrate the healthy lifestyles team into the core service working with families, communities and local partners, supporting a holistic approach to the needs of children, young people and families.
- Further development of face-to-face and virtual offer, using learning from the pandemic response to shape the provision of workshops, programmes and one-to-one interventions.

Improve digital offer to increase choice and accessibility

- Provide greater choice to families, young people and schools in the way that we communicate and provide support to them, through video conferencing, online workshops and training webinars.
- Provide online medicine management training to schools and education settings that can be accessed at a time convenient to them.
- Utilise social media channels to promote public health messages and increase awareness of the service and support available.

Build community capacity and improve health behaviours

• Introduce a community engagement worker into the service to build community capacity through volunteers and peer champions.

Increase our engagement with vulerable groups, including home-schooled children and young people

- Introduction of two new specialist roles, Child in Care nurse and child exploitation specialist nurse, will increase engagement and support to those children and young people who are vulnerable.
- Engage with home-educated team, raising awareness of the service with those who have not previously engaged with the universal offer.

Improve service delivery for children, young people and families in partnership with the local and national SEND agenda

- Our SEND specialist nurse will continue to provide expert and evidence-based advice on health and wellbeing issues relating to SEND to young people, families, professionals, partner agencies and staff.
- Reviewing and adapting resources and information to ensure that our young people with SEND are offered accessible information both in mainstream and special schools.

Development of new brand identity

- Finalise our new brand identity, produced in response to feedback gathered from children, young people and families which identified a lack of awareness of the service and the support available.
- Continue to co-produce the brand with children and young people at every stage.
- Develop new digital and printed materials and resources to engage school-age children, promoting positive health messages and raising awareness of the support available to them.

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.

YHC — Youth Health Champion.

9. CONTACTS

Main telephone number: 03300 245 204

ChatHealth Teen Line Text: 07507 331 525

ChatHealth Parent Line Text: 07520 619 376

Service manager: Matt Conibere

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

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)

warwickshireshwb.service@compassuk.cjsm.net (secure from CJSM emails)

Locality hubs:

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

Team leader: Lorraine Kewell

South hub – covering schools in Stratford, Kenilworth, Warwick, Alcester, Shipston, Studley, Henley-in-Arden and Kineton

Team leader: Jane Wild

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

Team leader: Kerry Rose

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.

