

## Academic Year 2021/2022





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#### Foreword from Public Health

As Warwickshire County Council's new commissioner for School Health and Wellbeing Services, I am excited to be joining the service at such a vital time. I have been hugely impressed by the work that Connect for Health does and with the positive and proactive culture that carries through the organisation. Reflecting on the 21/22 academic year and thinking about the year to come; there are clear strengths in the service around understanding and responding to emerging needs for children and young people, but with this comes significant pressure across the service's tiered offer.

In a return to some normality in education settings through the 21/22 academic year, Connect for Health sought to balance a full programme of delivery with significant post-pandemic demands around safeguarding, emotional wellbeing and healthy lifestyles. While this increased pressure and complexity resulted in an agreed early halt to Health Needs Assessments in the Spring Term; Connect for Health were able to achieve an impressive 96.1% completion rate for the National Childhood Measurement Programme (NCMP), a 100% completion rate for Children in Care Health Assessments, and 99% of service users reporting they would recommend the service. They also ended the academic year with a cleared waiting list for referrals. As commissioner, these measures offer a reassuring picture of what the service can achieve under difficult circumstances.



While there remains a lot to learn about the service, I am excited to be working with Connect for Health on important developments for the 22/23 academic year, including a refreshed weight management offer and additional support for professionals around Relationships, Health and Sex Education (RHSE). I am looking forward to supporting Connect for Health to embed this work and to experience the high-quality service that it offers to children and young people in Warwickshire.

#### **Foreword from Compass**

I am delighted to share with you our 7th annual report which reviews the service's impact over the last 12 months. It is evident that the need for support has never been greater given the challenges faced by all children, families and communities over the last three years; with more people needing support with a wider number of issues. Having been on the journey with the team over the last seven years what remains a constant is the absolute commitment to providing the very best care and support which is evident in the CQC's service rating.

Connect for Health staff maintain a clear focus on ensuring what they provide to children and families is effective, based on evidenced need. The team ensure their support is tailored to individual and family preferences. A great example of this is the introduction of a mental health and wellbeing lead role within the service in response to the year-on-year increase in requests for mental health support through the annual health needs surveys of pupils and parent/carers.

This has resulted in the staff team becoming more skilled to deliver prevention and early intervention support, using improved screening tools and guided self-help resources so children and families can get help at the earliest opportunity. It ensures the offer is aligned to and co-ordinated with other mental health early help and specialist services.

Another key success has been the fantastic collaboration with children, young people, families, schools and communities to rebrand the service. Its purpose was to create a brand identity that is understood by all its beneficiaries and which reflects what people want from their school nursing service; with the ultimate aim of ensuring every child, young person, family and school across Warwickshire knows what the service is and how to access it. The new Connect for Health brand was co-designed and shaped as a result of multiple surveys, focus groups and creative sessions to hear the voices and views of as many people as possible. The end product is a brand identity that is truly representative and inclusive of the many communities served and which is reflective of how the service strives to continually improve its offer by adopting a person-centred and responsive approach.



## 2. Introduction

# CONNECT FOR HEALTH SERVICE REVIEW 2021/22

We are pleased to present the annual report for the academic year 2021/22. This report illustrates the range of services we have provided to children, young people and families across Warwickshire. It describes some of our targeted interventions as well as our universal Public Health delivery. This year's report has a fresh new look to it as it features our new service rebranding which was co-created with Warwickshire's children and communities. Despite the challenges as the country emerged out of the Covid-19 pandemic, Connect for Health once again continued to provide high quality, evidence based interventions throughout the year which led to positive outcomes.



# Warwickshire County Council: Outcomes of the Children

I am supported to be healthy

I am preparing to achieve economic well-being

My voice is heard

I am supported to make a positive contribution

I am supported to enjoy and achieve \_\_

I am supported to stay safe

#### **School Health Service Outcomes:**

The service utilises clinical judgement and public health expertise to identify health needs early, determine potential risk and provides early intervention to prevent issues escalating.



#### High impact area 1:

Supporting resilience & wellbeing

Reducing inequalities & risk

Supporting autonomy & building independence

High impact area 4:

Supporting vulnerable young people & improving health inequalities





#### High impact area 2:

Improving health behaviours & reducing risk taking

High impact area 5:

Supporting complex and health and well being needs



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#### High impact area 3:

Supporting healthy lifestyles

Ready for school at 5 & ready for life 11-24

Improving life chances & improving opportunity

#### High impact area 6:

Supporting self-care and improving health literacy



#### 2. Priorities

#### have we met our objectives?

Connect for Health successfully met the priorities outlined in the previous annual report. These priorities link to Warwickshire County Council's Outcomes for Children. They also align with the national School Health Services Outcomes listed above.

Last year our priorities were:

#### 1. Increase provision of our service offer to vulnerable groups

- a. Frequency of the SEND continence workshop was increased to fortnightly
- Child Exploitation Nurse project gained momentum. This enabled more vulnerable young people to be supported via bespoke interventions
- **C.** Tailored SEND lessons were delivered in special schools to support key Public Health Campaigns:
  - i. Eye Health (Sept)
  - ii. Stress Awareness (April)
- **d.** Tailored SEND teacher materials/assemblies were produced for other Public Health Campaigns:
  - i. Internet safety (February)
  - ii. Sun safety (May)
  - iii. Child safety (June)

#### 2. Build community capacity and improve health behaviours

- Worked with commissioners to start to develop a Relationship and Sexual Health Educational (RSHE) role. This post will support quality assurance for schools around their RSHE policies and will enhance engagement with other community partners
- Public Health Lead Programme further embedded with new health and wellbeing topics being shared with schools each month
- C. Health Champions continued to be set up in schools across Warwickshire. These children and young people work with us to help share health messages with their peers
- **d.** The project undertaken by our SCHPN students was carried out to explore the type of support young people would like to receive from our service and how they would like us to engage with them



#### 3. Recruitment of a mental health and wellbeing lead nurse

- **a.** Experienced nurse was recruited and commenced role in Sept 2021
- Developing strategic relations with mental health and wellbeing partners across Warwickshire to design care pathways
- C. Designing targeted mental health and wellbeing packages which can be delivered to children and young people
- Delivered training to staff, enhancing their knowledge and skills

## 4. Launch service rebrand and increase awareness of the service amongst children, young people and families

- **a.** Following creative sessions, chats and surveys with children, young people, families, schools and communities, Warwickshire School Health and Wellbeing Service re-branded to become Connect for Health
- **b.** During the consultation children and young people engaged particularly with the word "connect" and the concepts around this
- C. Positive feedback was received from a broad range of people regarding the service re-branding. They liked the fresh new look and clearly identifiable logos
- **d.** Staff received re-branded name badges and lanyards and MSTeams backgrounds were updated
- **e.** The re-branding launched in September in line with the start of the new academic year. Schools and partners were informed via newsletters and social media

#### 5. Increase digital accessibility to health information

- a. Embedding the use of Zoom to deliver continence workshops
- Increased use of Facebook, Twitter & Instagram to spread healthy lifestyle messages, including promotion of the Change Makers Healthy Lifestyles Programmes
- **C.** Medical conditions awareness videos were refreshed with the latest health messaging
- **d.** Monthly health and wellbeing newsletters created to share key health messages with families, schools, partners have continued
- **e.** News features on the Compass website illustrating some of the current work we are undertaking



#### Service delivery post Covid-19 pandemic

Warwickshire's children were profoundly affected by the Covid-19 pandemic in many ways. While most children with Covid-19 infections experienced mild illness, they were still affected by the social, emotional, educational and physical effects. So even though the peak of the pandemic passed, during 2021/22, children continued to be impacted as schooling, routines and expectations changed once again. The health picture we saw locally was mirrored nationally.

These changes manifested in children in a variety of ways and as a service we saw increased complexity in the health issues being experienced by children and young people. Many were struggling with sleep, they had altered eating patterns and their levels of resilience and mental health had changed. We also saw a drop in school attendance.

As a service, we needed to be resourceful in meeting this level of need and optimise the number of children and young people we could support. Our healthy lifestyle co-ordinator and health support workers engaged with schools to deliver interactive health and wellbeing sessions in schools. Our family brief intervention workers supported children with issues around sleep and our Change Makers service provided fun educational programmes which supported the whole family to get active and eat in a balanced way. To support with reduced emotional health and wellbeing, our mental health lead and nurses developed enjoyable, interesting assemblies and workshops which were delivered in schools.

Through this network of virtual and face to face delivery, we were able to support Warwickshire's children and families via one to one and group interventions.

Emerging from a global pandemic had its challenges but Connect for Health made the most of every chance to maintain service delivery to the highest standards. Some initiatives created during lockdown, were so successful that they have now become standard practice. These initiatives included the virtual C4H continence workshops and medicine management training. Positive feedback from service users indicated that they liked being able to

## 3. Care Quality Commission (CQC) Inspection

In October, Connect for Health were delighted to welcome two inspectors from the CQC. This was the first CQC inspection for Connect for Health. The aim of the inspection was to make a judgement of the quality of service delivery. The overall rating for the inspection is based on a combination of what they found when they inspected, information from the ongoing monitoring of data about C4H and information given to them from our service, children and young people, members of the public and other organisations.

#### Overall rating for this location - GOOD 👚



The unannounced inspection took place over three days. The two inspectors spent time talking with members of the leadership team to learn more about the service. They also held two focus groups with 14 members of staff.

We were pleased that they took the opportunity to spend time out in a school observing one of our Health Needs Assessment sessions. This gave them the opportunity to talk with Health Support Workers delivering the programme and engage with school staff and children. They also directly contacted 4 parent/carers for their views of the service and the care that they were being provided with.

The CQC inspect services over 5 areas:

Are services safe?	GOOD
Are services effective?	GOOD
Are services caring?	GOOD
Are services responsive to people's needs?	GOOD
Are services well-led?	GOOD

Local commissioners told the inspectors that they had a high level of confidence in the service. They described the service as being innovative, with staff who were keen to find solutions to any barriers.

#### Inspectors commented that:

- Staff treated children, young people and their families with compassion and kindness
- The service planned care to meet local needs
- People could access the service when they needed it
- Staff felt respected, supported and valued
- Staff worked well together to the benefit of children
- Leaders ran services well

We were delighted to have been awarded the rating of good in all five inspected areas!

## 4. Safeguarding

#### Multi-agency working



Connect for Health are embedded in the itegrated multi-agency approach to safeguarding vulnerable children and young people. We work closely with the dedicated Children in Care and Child Exploitation Teams, together with our colleagues across the safeguarding partnership. This joint working helps us to best support our vulnerable children and young people.

#### Holistic Health Assessments (HHAs)

Due to the sustained, higher levels of safeguarding the service completed more holistic health assessments than previous years. The health assessment is a robust way of assessing a child or young person's health against expected child developmental milestones. Following the completion of the assessment the nurse will make a professional judgement as to whether a child/young person's development is considered to be "age appropriate". This will then aid the nurse's analysis of the overall health and wellbeing of a child or young person. During this academic year 392 holistic health assessments were completed.

This detailed information from the completed holistic health assessment is shared with the child/young person themselves but also with relevant family members and safeguarding partners. Collectively a decision is made as to which service is best placed to support the identified health needs of the individual.

#### Safeguarding assessments completed



Over the course of the year C4H continued to see higher levels of safeguarding than pre-pandemic. The **28.1**% increase in the number of holistic health assessments being completed was indicative of the number of safeguarding meetings taking place. Where at all possible, work was allocated to enable staff to attend safeguarding meetings. However there were occasions when multiple safeguarding meetings were taking place simultaneously and this was a particular challenge for the service.

#### C4H involvement in safeguarding processes

Theme	2021/2022
Initial Child Protection Conference	286
Core Group	665
Review Conference (RCPC)	150
Child in Need	125
Strategy Meeting	118
Multi-disciplinary	86
Early Help	107



#### **Supporting Children in Care**



Over the past academic year, Connect for Health have remained committed to meeting the health and wellbeing needs of Children in Care (CiC). We have continued to complete Review Health Assessments and have written bespoke actions plans to meet any identified health needs. During this year the service has supported 200 children and young people who are in care. This is an increase of 8% from the previous year.

We also continued to provide one to one interventions to meet the health needs of CiC, working across venues including schools and children and family centres.

#### Support provided to the Multi-Agency Safeguarding Hub (MASH)

Number of children & young people information was requested for:	286		
Number of children & young people C4H were able to provide information for:  665			
Cumulative total by area:  North 234  South 114  273			

#### **Child Exploitation Nurse Pilot**

This year saw the conclusion of the CE nurse pilot. During the pilot, the nurse regularly engaged with vulnerable and exploited young people on a range of health issues including; emotional and physical health, relationships and sexual health.

The nurse supported them in accessing the most appropriate healthcare and used motivational interviewing skills to enhance behaviour change in the young person. Through this individualised support the nurse supported the young person to improve their overall health and wellbeing.

#### Child Exploitation case study

A young person had a history of mental health problems and has spent a considerable amount of her teenage years in an acute mental health facility. Upon discharge from hospital the young person became known to the exploitation team as they had been groomed by an older male. The young person was known to misuse a variety of drugs and alcohol whilst associating with the perpetrator.

Being led by the verbalised needs of the young person, the CE Nurse supported them to engage with Warwickshire's children and young people's drug and alcohol service. The CE Nurse attended the meetings together with the young person, and the meetings took place at a venue of the young persons choice and at a time which suited them. During this engagement the CE Nurse was able to incorporate exploitation awareness and safety planning work with the young person.



## 5. Universal key stage contacts

#### **Health Needs Assessments - (HNAs)**

Connect for Health have continued to deliver the successful Health Needs Assessment (HNA) to children and young people across Warwickshire. The HNA is an ever-evolving online questionnaire which aims to gather data about the health needs of children and young people. The health questionnaire is available for completion at school entry, year 6 and year 9.

In the summer C4H promoted the completion of the School Readiness Health Questionnaire at schools, community events and on our social media platforms. These promotional activities enabled us to engage with parent/carers. However, due to many Covid-19 restrictions remaining in place, these events were more limited than we would have liked.

Meanwhile, via HNA sessions in schools, our year 6 and year 9 pupils were encouraged to complete the questionnaire themselves during the school day. The sessions in schools were delivered by Connect for Health, and practitioners took the opportunity to make every contact count and promote Public Health messages whilst they were with the children. In addition, following the analysis of the questionnaire data, C4H met with schools to co-develop a school health plan which outlined the health interventions which would be provided.

#### HNA completion by year group



School Entry (4-5)
Population in
Warwickshire: 5,696

HNA questionnaires completed: 2102

36.9% completion rate



**Year 6**Population in
Warwickshire: 6,672

HNA questionnaires completed: 4020

60% completion rate



**Year 9**Population in
Warwickshire: 6,893

HNA questionnaires completed: 1330

19% completion rate

#### **HNA** data comparisons

It was with regret that we couldn't complete all the HNA programme for this year. This was due to the increased demands on the service, largely being driven by a higher than usual amount of safeguarding work and the complexity of the health needs children were presenting with.

It was agreed with our commissioners that the HNA programme would finish in February, therefore completion rates for this year were lower than we have achieved previously and consequently it cannot be used to draw comparisons with the previous year's data.

#### Individual-level data

The HNA portal generates flags which indicate where a pupil's answer to a question 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. For the School Entry HNA, 99% of questionnaires generated flags to be reviewed by a nurse, followed by 87% for the Year 6 HNA and 82% for the Year 9 HNA.

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 school entry and year 6 pupils and provided directly to year 9 pupils

#### **School entry flags**

	Торіс	Red Flags	Amber Flags	Public Health Message Displayed
	Lifestyles*	162	1752	1687
	Family health & wellbeing	120	496	9230
	General health	1092	5623	9699
	Emotional health	67	168	0
A	Safety	4242	2635	2914
	Social media	0	149	195
(iji)	Friendships & relationships	0	104	104
	Child development	36	948	86
	Total	1482	9294	26180

<sup>\*</sup>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 6 flags

	Торіс	Red Flags	Amber Flags	Public Health Message Displayed
	Lifestyles*	380	3043	11493
	Bullying	1218	0	0
	General health	38	1337	6387
	Emotional health	632	982	2181
A	Safety	0	0	3862
	Social media	0	0	3273
<b>(;;</b> )	Friendships & relationships	0	624	0
	Total	2268	5986	27196

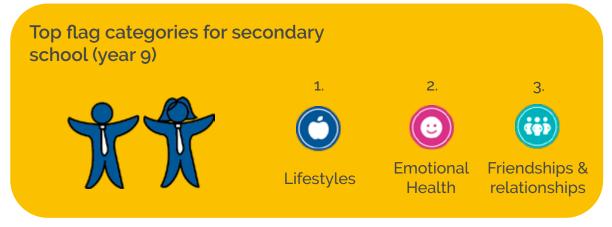


#### Year 9 flags

	Торіс	Red Flags	Amber Flags	Public Health Message Displayed
	Lifestyles*	44	1506	3572
	Bullying	357	274	0
	General health	17	124	1738
	Emotional health	183	682	3808
A	Safety	64	274	343
	Social media	0	0	1107
(;;)	Friendships & relationships	0	548	885
	Total	665	3388	11453

#### Population-level data





#### **Key HNA data points**

62% of school readiness pupils have 4 or less pieces of fruit and veg each day, increasing to 78 % for year 6 and 80% for year 9.





1% of year 6 pupils said they had no one they felt they could trust and speak to, compared to 6% of year 9 pupils.

16% of year 6 pupils answered yes to "do you ever want to hurt yourself on purpose?" 4% of year 9 pupils answered yes to "Do you currently hurt yourself on purpose?"





17% of year 6 pupils and 31% of year 9 pupils use social media for more than 4 hours on a normal day.

4% of school readiness pupils never sleep in their own bed at bedtime. 11% of year 6 pupils always have problems falling asleep at bedtime. 26% of year 9 pupils said they do not get 7-8 hours of sleep a night.





1% of school readiness pupils are not active for an hour or more a day. 8% of year 6 pupils never do physical activity after school or at weekends. 9% of year 9 pupils never take part in sport where 6% of year 6 pupils answered that they are very active.

HNA results provide the service with a wealth of data on both an individual and cohort basis. As the two case studies below illustrate the HNA is a vital tool for identified unmet health needs and the C4H service is pivotal in taking appropriate steps to address these needs.

#### **Year 6 Health Needs Assessment Case Study**

A child had completed the Year 6 Health Needs Assessment and on reviewing the questionnaire it was discovered that the child was struggling emotionally with the gender transition of a parent who lived separately to the child and other parent.

The parent with whom the child lived was contacted via telephone to discuss the concerns in more depth and it was agreed a referral into the service was appropriate to explore the concerns further and offer support to the child and family.

The case was allocated to a School Staff Nurse and contact was made with the parent again with details about local services that support issues around LGBTQ. The nurse had made contact with the local service and discussed directly with a case worker who offered one to one support with the child and family.

It was agreed that the service was able to provide more specialist support surrounding the issues in question and the parent was grateful as they were unaware of this service and that they offer support to families of LGBTQ individuals. The parent was advised to contact Connect for Health for any further support following the support offered by the local LGBTQ support service.

#### **Year 9 Health Needs Assessment Case Study**

A young person had indicated on their Year 9 health questionnaire that they self-harm and that they feel happy only some of the time. The questionnaire was reviewed by a nurse and the decision was made to invite the young person to meet with a School Staff Nurse or School Nurse and be seen within school in a confidential room on a one-to-one basis.

The young person was able to discuss with the nurse their concerns and provide more information about the self-harm. The young person was provided with distraction strategies and a safety plan as well as strategies to improve emotional health and well-being with websites and handouts. The nurse was able to assess the level of risk of the young person face to face and go through safety advice with them.

The young person was given the opportunity to access regular appointments with the nurse within the school to review progress. The nurse was able to maintain confidentiality with the young person and gain trust which was paramount in supporting the young person to improve their health and wellbeing and in preventing emotional health deterioration.

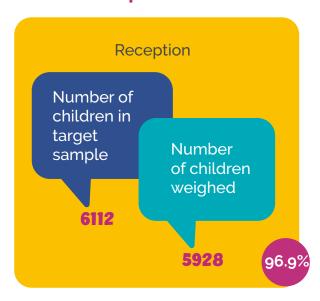
The Health Needs Assessment was the gateway for the young person to access early intervention for emotional health concerns that may not have been identified so early on.

#### National Child Measurement Programme (NCMP)

This was the first year that the NCMP and HNA were delivered simultaneously. Some schools chose to have health morning with their year 6 pupils. Connect for Health would invite pupils to have their height and weight recorded for NCMP, then the child would complete the health questionnaire before listening to a health presentation which would encourage a balanced lifestyle.

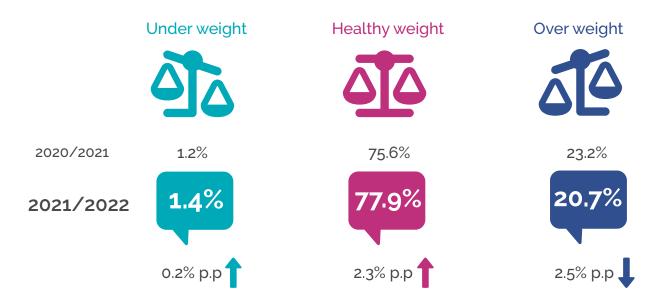
Due to it being the first academic year since lockdown, COVID absences were still high, therefore another visit to schools was often required to take the absent children's measurements (mop ups). In total, there were around 1146 children absent when their height and weight recordings were meant to be taking place. This was double the amount compared to previous academic years.

#### **NCMP Completion Rate**

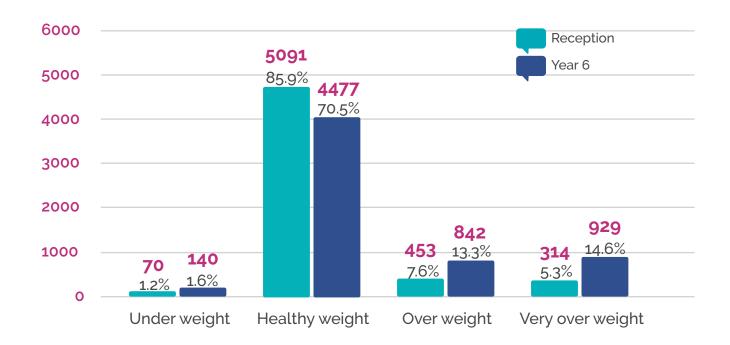


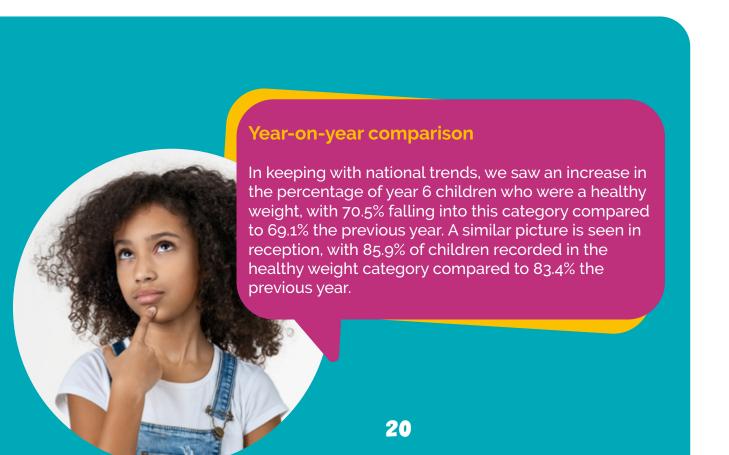


#### Year-on-year comparison of all children weighed



#### Breakdown by age group





#### Mental Health & Wellbeing Lead

In response to higher levels of mental health and emotional wellbeing flags seen in the previous 2 years HNA data, 2021-2022 saw the creation of the Mental Health and Wellbeing Lead role. The role was created to enhance the early intervention and prevention support we offer to children and young people around their mental health and emotional wellbeing.

Initially, our Mental Health and Wellbeing Lead, Helen, worked to enhance staff's existing knowledge and skills, holding in house training workshops and clinical supervision. Helen provided new staff with the opportunity to shadow her whilst she provided mental health

interventions to young people. This enabled new staff to see how she works with young people so that they can learn how to recognise symptoms of poor mental health and then how to manage them.

A variety of strategies were discussed so that the young person would go away equipped with skills to prevent deterioration of their mental health. This work then led to the development of additional mental health and wellbeing resources which could be utilised by practitioners with children and young people.

Helen created an evidence based mental health assessment tool which supports nursing staff to screen and assess the mental health and wellbeing needs of individual children. The assessment tool supports clinical practice and guides the practitioner with the actions to be taken and the support to be provided. This has been well received by nurses and ensures that we are providing a quality service response.



In addition, 'Mental Health Awareness' and 'Self-harm' workshops have been designed and delivered to young people in secondary schools. These were delivered via large-scale whole year group sessions. These have been very well evaluated by young people and we have therefore decided to create further mental health workshops which we will utilise in response to Yr 9 HNA.

Helen has also linked to early help and specialist services so that prevention and early help mental health services can work in collaboration to best support children, young people and families



#### **Change Makers report**

Change Makers continued to deliver their live cooking sessions. These sessions involved the healthy lifestyles practitioner and families cooking simultaneously. The cooking activities were once again popular with families as they allowed them to learn as a group and proudly show off the results to each other. Cooking sessions are an embedded part of the Change Makers 7-week programme.

Once again, the 7-week programmes took on a blended approach this year due to some of the remaining Covid-19 restrictions being in place. This meant that some of the programmes were delivered in person in schools, whilst others were delivered online to small groups of individuals. All programmes were well received, with many families fully completing the 7-week programme

Feedback received from service users suggested that staff knowledge was good and information was appropriate and useful.

In the springtime the service created a fussy eating workshop. This workshop was developed as more referrals were being received into service which indicated this need.

The workshop reached out to support parent/carers whose children may be struggling with some aspects of fussy eating.

To complement the fussy eating workshop the service continues to deliver healthy lifestyle messaging into schools and community settings.

These activities included the importance of eating a balance diet and being active.

"Helen told me about why it was important for my daughter to eat before her sports comps and it was a really clear description regarding digestion, fuel and sport. I was able to explain it to my daughters and they were very

Feedback from parent

In total, over 400 healthy lifestyle sessions were delivered to families

"I have learnt some new quick recipes to try with the children. I have tried some of the recipes again and have started to try and introduce new foods in stages as suggested."

Feedback from parent

#### **Change Makers Case Study**

A young person was referred to Change Makers. They were struggling to introduce new foods into their diet, and this was making their diet quite restrictive. The young person wanted help to improve their diet.

The young person and family were offered 6 sessions of support. The first few sessions focused on food groups, meal planning, food preparation and positive mealtime environments. Then they progressed onto four practical cooking sessions, where each week the young person would prepare and cook new snack and meal ideas. The meals included fresh fruit, ice cream, fresh pasta, and pizzas.

During the programme, the parent fed back that the young person had tried several new foods, such as melon, bolognaise and curry. Further feedback from the parent stated that the young person was now far more relaxed and happier about trying new foods.

#### **Change Makers Case Study**

A parent made a referral to Change Makers as they had concerns for their son. The parent reported that their son was overweight, did very little physical activity and had poor eating habits. During an initial consultation, the parent admitted their own eating habits were poor and they were also overweight.

Initially the young person had some resistance to joining a healthy lifestyle group, however once the format of the sessions was explained to him, he agreed to join in. He completed all the programme and worked with his parent in setting weekly targets and actions. This motivated him to change some of his dietary behaviours and thereby instilled better eating habits. Through attending the programme, the parent was also reminded of the importance of eating a balanced diet and being active. This encouraged them both to increase their water intake and they chose to track their water consumption by putting a chart on the fridge door.

They told the Change Makers practitioner that they were now working together to plan meals and were considering how they could incorporate more physical activity in their daily lives.

#### **Source of referrals into C4H service**



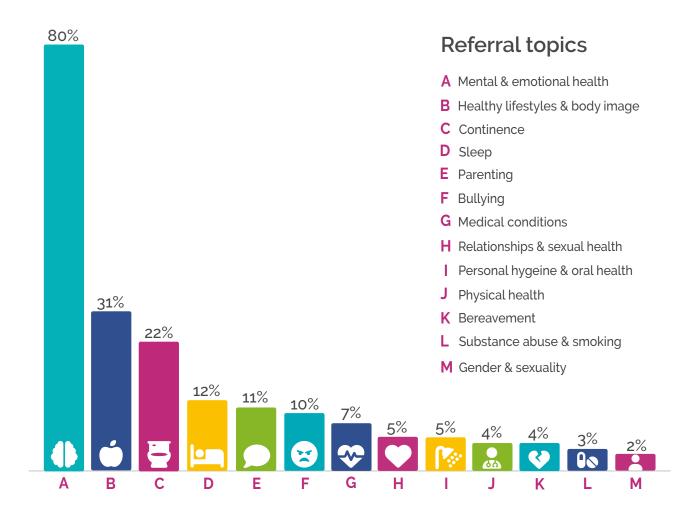
#### Number 2021/2022

ChatHealth	11
Children & Family Services	721
Family Information Service	40
Fitter Futures	1
GP	102
Health Professional	199
Health Visitor	287
Internal referral	189
Looked After Children's team	220
Mainstream School	1161
NCMP	168
Relative	410
Self	7
Special School	5
WCC - Other	24
Young People's Drug & Alcohol	1
Service	

Total referrals 2020/2021 3,266

Total referrals 2021/2022 3,546

Compared to 2020/21, the service saw a **32% increase** in referrals from relatives and a **106% increase** in referrals from Health Visitors



## 6. Other support

#### Responding to public health priorities during COVID-19

As our collection of HNA data was limited, we considered several factors when developing our response to public health priorities, such as:

- · Emerging trends from previous year's HNAs
- Nationally and locally identified health topics which were known to have occurred because of lockdown
- •Feedback from practitioners who could define common health concerns

Using this information in combination with our data, we developed resources and lesson materials suitable for both face-to-face and virtual use, including:

#### **Public Health Intervention Packs**

#### **Outdoor Activity Poster Display**

The aim of the outdoor play poster display was to encourage people living in Warwickshire to be active and enjoy the outdoors by participating in fun activities that help them engage with nature. In partnership with Warwickshire Wildlife Trust we created three outdoor activity posters that encourage families to scan a QR code, where they can learn all about how to complete outdoor activities, with opportunities to have fun and learn along the way. We asked schools to display our posters around school grounds for children and parents/carers to see. Schools from across the county agreed to participate and display the posters.

#### Build a den - view poster

This was the first poster that was sent to schools in early April. The den building activity included options for all ages, from a full size survival shelter to a teeny tiny den for elves, fairies and frogs.





#### Outdoor Art - view poster

This was the second poster that was sent to schools in May. The outdoor art activity included leaf rubbing, mud paintings and stick sculptures. These activities were great for all ages and abilities and required minimal equipment.

#### Brilliant birds - view poster

This was the third and final poster that was sent to schools in June. The bird activities included bird spotting, homemade binoculars and bird feeders. These activities were great for all ages and abilities.

# Connect for Health have bearsed up with Warrickshire Wildlife Trust to share fun activities for families to take part in on the school or in local given spaces. Brilliant birds! Our bird activities given spaces. Brilliant birds! Our bird activities given spaces. Brilliant birds! Our bird activities are great for all ages, sabilities and regale minimal enginement. Some here when here when here and will be a sabilities and regale minimal enginement. Total QR Code views:

#### School Feedback

The outdoor play posters were well received by schools and although QR code views and school participation was low, we still managed to obtain feedback from schools. A total of 15 feedback forms were received from schools throughout the project.

Schools shared posters by various means, including sending the posters in an email to parents and sharing with parents on parent communication websites. Some schools shared posters within school newsletters and on social media pages. Many displayed posters on school notice boards, within classrooms and around the school, as well as participating in poster activities in after school clubs.





#### **Public Health Campaigns**

## Safer Internet Day - February

The information within the Safer Internet Day school information pack encouraged schools to join the supporters list and to share their Safer Internet Day activities. Schools could also utilise the educational resources, information and guides within this pack.

https://www.compass-uk.org/wp-content/uploads/2022/01/Safer-Internet-Day-2022.pdf



#### Sun Awareness Week - May

In support of Sun Awareness Week, we developed an information pack to help families to enjoy the outdoors safely. This included sun safety tips and information.

https://www.compass-uk.org/wp-content/uploads/2022/05/Sun-Awareness.pdf



## Stress Awareness Month - April

The Stress Awareness Month campaign was a good opportunity to share top tips, activities, websites and other resources that can help families to deal with stress.

https://www.compass-uk.org/wp-content/ uploads/2022/04/National-Stress-Awareness-Month.pdf



## National Eye Health Week - September

This parent/carer information pack provided information, advice and support to help maintain good eye health awareness for children and young people, with the aim of decreasing the risk of serious vision problems.

https://www.compass-uk.org/ wp-content/uploads/2021/09/ Eye-Health-Week-parent-information.pdf





## World Mental Health Day - October

This pack contained resources and activities to help schools talk about mental health, reduce stigma and discuss ways we can all look after our wellbeing.

https://www.compass-uk.org/wp-content/ uploads/2021/10/World-Mental-Health-Day.pdf

## Anti-Bullying Week - November

Anti-Bullying Week took place between 15-19 November with the aim to raise awareness of bullying, in schools and elsewhere and to highlight ways of preventing and responding to it. The information within this resource contained facts, resources for teachers and fun activities for pupils to get involved with the campaign.

https://www.compass-uk.org/wp-content/uploads/2021/11/Anti-Bullying-Week.pdf



Other public health campaings included National Fitness Day, Breast Cancer Awareness month, Time to Talk day, CSE Awareness Day & World Health Day. <u>Click here to view all PHCs.</u>

#### **School Health Newsletters**





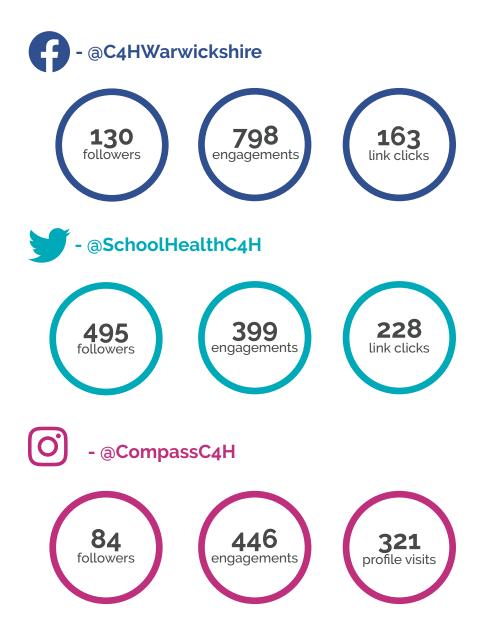




View all service newsletters

#### Social Media

This academic year Connect for Health have promoted Public Health messages using Facebook, Twitter and Instagram. This form of electronic communication has allowed us to provide advice, support and information to those who might need it via these popular platforms. Connect for Health will continue to be innovative by sharing and posting informative and engaging Public Health content to promote positive health and wellbeing.



The growth in our online presence has been key to gaining exposure to young people and their parents. Since the new initiative of growing the C4H online presence, results from acedemic year 2021/2022 vs 2020/2021 have continued to increase. In the previous adademic year, Facebook was the only platform that was being regularly utilised for content sharing. The aim for this year was to grow Twitter and Instragram, along with Facebook, to have a stronger online presence, enabling us to reach wider audiences.

#### Key points from social media data



A consistent online presence provides an additional online resource for parents and teachers. Building brand awareness and recognition means C4H is at the forefront of our target audience's mind when they need services we can provide.

"Shares" are by far the most powerful engagement measure on Facebook. C4H secured a 99.1% increase in shares this year, meaning people are finding value in our posts and messages and think them useful enough to share with others.



Marketing specialists consider a good Instagram average engagement rate to be between 1% - 5%. C4H achieved a ground-breaking average engagement rate of 10.65% on instagram this academic year. This means the people that see our content are responding well!



Link clicks are a great way to see who is taking the time to look at the resources and information C4H is sharing on Twitter. The last acadmic year saw 188 people clicking on the links within our tweets, this means the content is engaging enough for them to explore further.





#### Virtual interventions

#### Medical condition awareness training & feedback from school staff

C4H continued to offer medical awareness training for asthma, anaphylaxis and epilepsy to all Warwickshire school staff. Schools can access online pre-recorded awareness training regarding these medical conditions. The online awareness videos for Epilepsy, Asthma and Anaphylaxis continued to evaluate well with school staff. A total of 77 schools in Warwickshire requested Anaphylaxis training, 54 for Asthma training and 55 for Epilepsy training. Within those schools we received **851** individual registrations for the Anaphylaxis training, 553 for Asthma training and 518 for Epilepsy training.

Training ratings from school staff	Excellent	Good	Satisfactory	Poor
Asthma	53%	45%	2%	0%
Anaphylaxis	63%	36%	1%	0%
Epilepsy	<b>51</b> %	48%	1%	0%



"I feel I learned more than in previous face-to-face trainings. It was good to be able to pause video & make notes. Thank you!"

> Feedback from school staff on Anaphylaxis training

> > "Having videos to see the different types of seizure was particularly effective."

Feedback from school staff on Epilepsy training

"I liked the use of diagrams to show how asthma actually the different types of inhalers

> Feedback from school staff on Asthma training

affects the body and all of there actually are."

For education

#### **Continence workshops**

Our Parent/Carer Continence Workshops were hosted virtually via Zoom by our FBIWs. There were two types of workshop - SEND and mainstream - which were delivered on a monthly basis. The live format gave parents/carers the opportunity to ask questions at the end of the session, while virtual delivery ensured continuity and accessibility in times of restrictions. Attendants were made aware of the opportunity to seek further support from our team and received a follow up call 6-8 weeks after the workshop to review progress and provide further guidance as needed.

C4H delivered **43** workshops over the year, **24** of which were mainstream sessions and **19** were specialised SEND sessions. **489** parents and carers were invited to attend these workshops following a referral to C4H and around **54%** of those invitations resulted in workshop attendance.

#### Actions following workshop attendance

	Care completed	GP referral	Unavailable for contact
264 Attendees	181	64	19

100% of parents & carers felt comfortable talking to us

Our digital support around continence continues to be popular. Our "Daytime Wetting" video has been viewed 3,464 times since we developed it

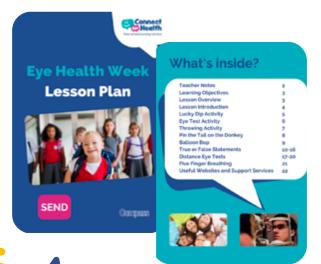
**100**% of parents & carers felt that their thoughts, feelings and concerns were listened to.

75% would recommend us to another family

#### **Special Educational Needs & Disabilities (SEND)**

Our team continued to work with children and young people with SEND, alongside their parents and carers, to support their health and wellbeing. This included one-to-one support for parents and carers with topics such as emotional regulation and sleep. Healthcare plans were created as required for children and young people with SEND, who have a medical condition that impacts on their school day (for example epilepsy or asthma).

Our SEND practice development identified that special schools would benefit from customised lessons on three key health and wellbeing topics. These sessions included:



#### Eye Health Lesson Plan

The lesson aim was to raise awareness of good eye health and encourage pupils to take care of their vision. It used engaging activities to test vision and get pupils thinking about their sight. The lesson also linked to other important health and wellbeing topics that were relevant to children and young people.

#### Pupil Feedback (eye health lesson)



"Thank you for a really enjoyable, fun session" "I like them because they teach me new stuff" 77

#### Stress Awareness Lesson Plan

The lesson was developed to raise awareness of the importance of managing stress. The lesson utilised engaging activities to equip children and young people with strategies to cope with stress. The aim was for the participating children and young people to have fun and gain a better understanding of how to cope with stress.



#### Teacher Feedback (stress awareness lesson)



"All the children engaged with the session and had a go. It gave them different experiences and ideas to deal with difficult situations." "Nice short bite sized session to keep interest"

77

"Good rotation of activities."



#### Child Safety Assembly

With the summer holidays around the corner and the expectation that children and young people would be spending more time at home and out and about, an assembly was created to raise awareness of staying safe at home, around water and the road. The assembly included useful information, advice and discussion based activities.

#### Teacher Feedback (child safety assembly)

All teachers that completed the feedback form said they strongly agreed on the following statements:

- The information was clear and understandable 💮 The presenters were engaging
- The session was age appropriate
- The length of the session was sufficient
- The session met expectations
- Would recommend C4H to another school

#### SEND Case Study - supporting a child

A referral came into service for a child of primary age who was having sustained continence issues. This was causing health issues for the child and the parent/carers relationship with the primary school had become disrupted.

Connect for Health engaged with the parent/carers and explored the extent of the concerns. Through this professional enquiry it was found that the child also experienced poor core strength and balance which was impacting on their ability to toilet independently. Continence and health-related advice was provided to the parent/carers and a referral was made to the community paediatrician for further support relating to continence and to rule out any related medical conditions. A referral was also made to Occupational Therapy so that bespoke support could be provided.

Through the actions of Connect for Health, a plan was put in place so that the child could experience a more inclusive and supported school day. This enabled good school attendance and improved their overall health and wellbeing. In addition, the service continued to support the parent/carers whilst referrals were being made to the Paediatrician and Occupation Health services. Connect for Health worked with the primary school so that they fully understood the needs of the child and felt confident with the toileting plan

#### **ChatHealth**

ChatHealth continues to be an important means of communication between Connect for Health, young people and parents/carers. Audits of the text messaging service have highlighted very informative interactions with service users and feedback has been positive. Yearly data informs us that Childline was busier than the Parent's line this year, with 658 messages being received.





Our ChatHealth service has been rated 5 out of 5 stars by young people and parents/carers

#### Teenline statistics (for 11-19 year olds)







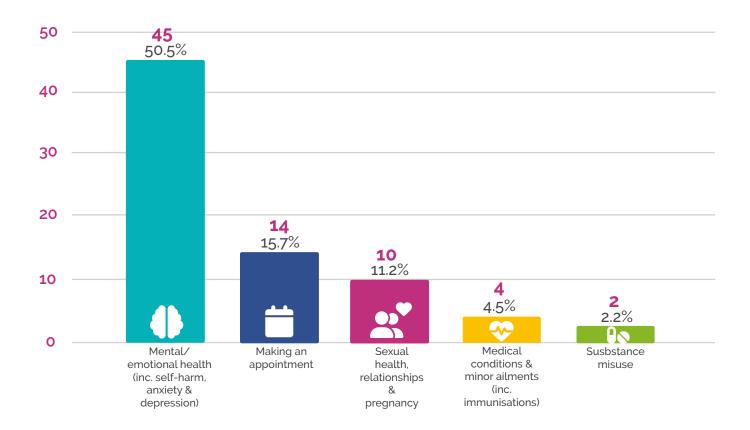
#### **Parentline statistics**







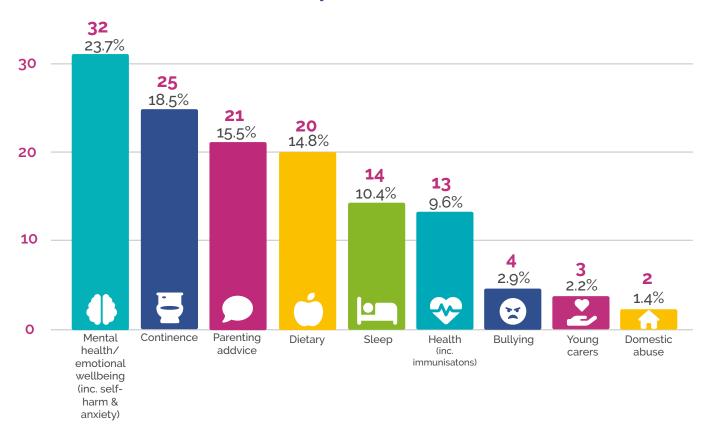
#### Teenline conversation topics



14 conversations (15.7%) 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. Some conversations covered more than one topic.



#### Parentline conversation topics



One conversation attributed as "non-engagement" meaning the parent or carer did not continue the conversation after the initial message

#### Case Study - ChatHealth

A parent texted into the service on the ChatHealth parent line number to request support with sleep and anxiety of their primary school aged child. The nurse on duty was able to signpost the parent to many different resources and websites that focus on sleep and anxiety. The nurse also gave the parent the telephone numbers of the local Primary Mental Health Team and informed the parent that they offer parent workshops and consultations around the issues that they had mentioned.

The nurse was also able to signpost the parent to the local family information service for support with sleep. The conversation was over a series of short text messages which enabled the parent to gain specific information quickly and they were able to access websites and resources immediately or later on due to the nature of text messages.

The parent gave positive feedback that the service had helped them today and they will contact the services that had been recommended

# 6. How the service is making a broader difference

#### Public health campaign lead programme

This year C4H worked with schools to roll out the Public Health Campaign Leads (PHCL) initiative across Warwickshire. The initiative worked directly with allocated members of staff, supporting them to set up health groups in their schools. Through these groups, children then had the opportunity to become Public Health Champions as they worked together to deliver Public Health messages across their school.

Each month C4H created fun, informative and interactive resources on different health and wellbeing topics and these were shared with the Public Health Campaign Leads. The Leads worked with the Public Health Champions to arrange how they would share these messages with the rest of the school community. Some held school assemblies, others created display boards and some held activities in playgrounds. All material aimed to create discussion which would promote positive behaviour change to improve health and wellbeing.



<u>Countywide totals for school participation in</u> <u>Public Health Campaigns</u>

North:

Central:

South:

Compage

**CERTIFICATE OF** 

**ACHIEVEMENT** 

In total, 75 schools took part in the initiative with many of them delivering multiple Public Health campaigns. A Certificate of Achievement was awarded to schools who took part in 3 or more campaigns.



Most participating schools gave us a 5 star rating for this initiative



## Specialist Community Public Health Nursing (SCPHN) Student Project

As part of the SCPHN course, our student conducted a project aiming to ascertain how young people would like to engage with school health and in turn, what they would like from school health as a service.

The project began with the development of an online questionnaire. The questionnaire was trialled with a group of young people and their feedback then guided the final question structure and overall design. The questionnaire was then made visually appealing by C4H's digital and marketing team.

The questionnaire was distributed to C4H practitioners who shared it with diverse groups of young people. This was important as we wanted to hear the voice of as many different individuals as possible. In addition, C4H attended a variety of different educational settings to promote the uptake of the questionnaire.

The questionnaire results were then analysed and shared with members of the leadership team. The project highlighted the need for young people's contributions regarding the development and evaluation of school health services and it

evidenced how young people would like to access the service. In addition, it highlighted what additional support they would like to receive from Connect for Health.

Overall, the project has helped Connect for Health to hear and understand the voice of young people, resulting in the service being able consider the results and potentially alter our offer and delivery to ensure we are positively impacting young people's health and wellbeing by providing valuable, targeted and accessible support.

If you would like to see the final project report, please download this here:





"Time to Listen"
by Alice Flude

## **7. Priorities for 2022/2023**

## 1. Increase provision of our service offer to vulnerable and/or harder to reach groups

- a. SCPHN student project to explore how we can better engage with members of our gypsy and travelling communities
- b. To ensure meaningful engagement with children, young people and families from vulnerable and/or harder to reach groups such as home educated and refugees/asylum seekers

#### 2. Provide evidence based, mental health and wellbeing support

- a. Develop and roll out low mood, self-harm and resilience support packages which are fully evaluated by children and young people
- **b.** Build on the existing mental health support for staff by providing: clinical supervision, direct consultation with individual cases and mental health assessment tools

#### 3. Build community capacity and improve health behaviours

- a. Increase partnership working with sexual health service and Warwickshire's children and young people's substance mis-use service to deliver effective interventions with young people
- **b.** Increase partnership working with other agencies involved with the delivery of RSHE in schools

#### 4. Strengthen partnership working

- a. Create information sharing arrangements with Warwickshire's Mental Health in Schools Teams
- **b.** Share the findings from holistic health assessments with GPs

#### 5. Continue to grow online presence

- **a.** Explore other relevant social media platforms to continue to deliver public health messages online
- **b.** Analyse data and adjust posting time to maximise engagement and reach

## 8. Glossary

CiC - Children in Care

**CE** - Child Exploitation

**CQC** - Care Quality Commission

Healthy Child Programme - 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

HHA - Holistic Health Assessment

MASH - Multi-Agency Safeguarding Hub

NCMP - National Child Measurement Programme

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



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#### **Locality hubs:**

Central hub - covering schools in Rugby, Leamington Spa and Southam Team leader: Helen Rogers

South hub - covering schools in Stratford, Kenilworth, Warwick, Alcester, Shipston,

Studley, Henley-in-Arden and Kineton

Team leader: Claire Harper

North hub - covering schools in Nuneaton, Bedworth, Atherstone, Coleshill,

Polesworth and Keresley Team leader: Rebecca Ellis

#### **Acknowledgements:**



Connect for Health staff have contributed to the development and production of this report. The service manager would like to thank them and formally acknowledge their efforts.

Main telephone number: 03300 245 204





#### **About Compass**

Our charity, Compass, provides health and wellbeing services for children, young people and their families. We offer consultancy and training with clients including Transport for London.



We run health and wellbeing, substance misuse and sexual health services for children and young people across England and have been in the vanguard of the government's drive to establish Mental Health Support Teams in schools.

We have been providing the Care Quality Commission registered Connect for Health service since September 2015.

#### Teen line

Young people can 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 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

