

**LEICESTER CITY HEALTH AND WELLBEING BOARD
DATE**

Subject:	0-19 Healthy Child Programme: Public Health Nursing (School Nursing) Offer
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EXECUTIVE SUMMARY:

School Nurses are Public Health Nurses who provide a vital and unique link between school, home, allied health professionals and the community. School Nurses provide a clinical service to children and young people in a safe and supportive environment, using evidence-based interventions. They provide Statutory Safeguarding support to children and young people.

In the last 12 months the School Nursing team have provided Public Health support to over 4000 City children and young people and provided Statutory Safeguarding support to over 550 children and young people.

RECOMMENDATIONS:

The Health and Wellbeing Board is requested to:

- Note that the report contains three sensitive case studies.
- Note the successes and challenges experienced by School Nursing team.
- Support, champion and promote the role of School Nurses.
- Request an update on the School Nursing team in a year’s time.

Summary

0-19 Healthy Child Programme is commissioned by Leicester City Council and delivered by Leicestershire Partnership NHS Trust (LPT) and it is known locally as Healthy Together. Healthy Together is an integrated offer containing a number of Public Health elements, this paper looks at the Public Health Nursing, School Nursing offer.

School Nurses are Public Health Nurses who provide a vital and unique link between school, home, allied health professionals and the community. School Nurses provide a clinical service to children in a safe and supportive environment, using evidence-based interventions. The School Nursing team are there from the start of primary school all the way through to secondary school and on to young adulthood. Throughout these years they guide and support children and help promote good physical and mental health. From being at forefront of spotting signs of abuse to encouraging healthy eating and providing mental health support, the range of services they provide is wide and far-reaching. They support children through difficult transitions, whether it is starting school, moving to secondary school or providing advice on sexual health. In doing so, they play a key role in reducing health inequalities, reaching out to vulnerable and marginalised young people who may otherwise fall through the gaps. Their pastoral, supportive role is needed now more than ever as our young people continue to recover from the impact of the pandemic and during the ongoing cost of living crisis.

In recent review of all Public Health services School Nursing ranked 4th out of 30 assessed. It scored the highest possible marks for prevention focus; evidence of effectiveness; cost effectiveness; health and social care integration; co-dependencies with other LCC departments; and innovation.

The School Nursing team is a small team who support all children and young people in school in Leicester, they support:

- 9 Infant Schools
- 9 Junior schools
- 67 Primary schools
- 19 secondary schools
- 1 'all age/all though' school

and provide Public Health support to 8 Special Schools. There is a School Nursing offer for:

- 2 Pupil Referral Units
- Not in education or training (NEET)
- Home Educated.

To enhance this support the School Nursing team provides an award-winning digital offer for all children and young people aged 5-19.

School Nursing uses a skill mix model and the team is made up of:

- Specialist Community Public Health Nurses (Registered Nurses)
- Healthy Child Programme Nurses (Registered Nurses)
- Healthy Child Programme Practitioners (HCPP)
- Healthy Child Programme Support Workers (HCPSW)

In order to best meet the needs of children the workforce was divided in two in October 2019:

- Public Health (80% of workforce)
- Safeguarding (20 % of workforce)

This model allows the workforce to deliver a safe and effective public health service to address the complex physical and mental health issues experienced by children growing up with poverty, deprivation, and often multiple adverse experiences as set out in the service specification and Standard Operating Guidance (2020), whilst also meeting the statutory safeguarding commitments as per the LSCBP Guidance, Working Together to Safeguard Children (2020) and the national guidance 'Best start in life and beyond: Guidance to support commissioning of the healthy child programme 0 to 19' (Updated 2021).

There are 57,000 Children and Young People in Leicester Schools, and School Nursing can be accessed by any child. However, the universal offer is aligned to targeted support and evidence-based packages of care.

The School Nursing Safeguarding team is responsible for all telephone strategy calls and all Section 17 & 47. In June 2023 there are:

- 33 Active Section 17's.
- 43 Section 47's.

Statutory Safeguarding role

Children with identified safeguarding needs require a full Baseline Health Assessment. Having a Baseline Health Assessment before the initial case conference enables all professionals in the meeting to have as full a picture of the child's health needs and their lived experience as possible. School Nurses have a unique perspective and relationship with children and young people as they sit outside of the social care arena; meaning they essential information to contribute and influence safeguarding plans.

Between September 2021-September 2022 756 children have been supported by the School Nursing safeguarding team in Leicester City. 234 for Section 17 (Child in Need) and 522 for Section 47 (Child Protection Plan)

Contacting the School Nursing team

There are several ways that children, young people and their families can access the School Nursing team:

- Referrals from parents, teachers and pastoral care staff, GPs, social care, CAMHS, Early Help, community paediatricians.
- Self-referrals from young people.
- Contact via either the parent or child Chat Health text messaging service
- Digital Health and Wellbeing Contact (year 7,9,11)

The School Nursing Team offer:

Annual School Health Agreements

are co-produced by School Nurses and school staff coproduced the Annual School Health Agreements, which outline the responsibilities of both the school and School Nurses and the plans for delivery of care during the year. For 22/23 academic year

the team completed 100% of all primary school agreements and 22 out of the 28 senior schools (including special educational schools).

Statutory National Child Measurement Programme (NCMP) in reception and year 6

This is a mandated surveillance programme in which the height and weight of children in Reception and year 6 are taken. This provides data which helps with planning of services. In Leicester parents are sent the results of children's measurements and any child above a healthy weight is invited, along with their family, to participate in a Family Lifestyle Club (FLiC) that supports them to eat healthy and take part in physical activity (FLiC is commissioned as part of Healthy Together, more information is available).

The School Nursing team continually strive to meet emerging themes from both the results from the National Childhood Measurement Programme and general referrals. As part of this response the 5-19 workforce have developed a healthy lifestyle programme which is currently being rolled out across Leicester primary schools

School involvement in NCMP is voluntary, in academic school year 22/23 two schools did not participate.

Year 7, 9 and 11 Digital Health and Wellbeing Contact

This is the local response to the national 0-19 Health Child Programmes guidance to have regular, universal, contact with children in Secondary School. Schools are offered the opportunity to have children participate in a Digital Health and Wellbeing Contact in year 7,9,11. This is facilitated in school and is a proactive means to ask young people about their health behaviors and provides universal Public Health advice. There are key words and phrases that trigger a 'red flag', all red flags are triaged by a School Nurse. This can lead to a Baseline Health Assessment (face to face in school) and progress to evidence-based interventions of support, safeguarding, or referral to other services (e.g CAMHS) as required.

The schools receive information, on a school population level, about the key themes, and these can be used as a focus for School Health Fayres or Public Health events throughout the school year, including targeted assemblies. Engagement with the Youth Advisory Board suggested that assemblies were viewed as a good means to relay messages.

The Digital Health and Wellbeing Contact was recently evaluated by Universities of Sheffield and Bristol and found to be an effective way to identify unmet health need (papers available).

The School Nursing team are working with 2 schools (Westgate and Ellesmere) for children with additional needs in Leicester to tailor the Digital Health and Wellbeing Contact to meet the needs of pupils with Special Educational Needs. This work is ongoing and will need to reflect the individual needs of pupils attending both schools.

12 Schools have participated in the Digital Health and Wellbeing Contact this academic year, with 2 more booked in before the end of term: So far 1889 students completing the forms. Of this, 755 generated red flag responses. Last academic year 788 students completed the contact, creating 400 red flag responses.

The Digital Health and Wellbeing Contact has been shortlisted for the Health Services Journal 2023 Digital Award for Generating impact in population health through digital support.

Case Study 1: Digital Health and Wellbeing Contact (identifying unknown health needs)

Presenting Concern:

A 14 year old Asian female, who moved from Italy to the UK 2 years ago, completed the year 9 Digital health and Wellbeing Contact in school. She “red flagged” on several issues such as anger, safety in school and on line safety, self-harm, healthy eating, risk of exploitation and puberty. As a result a triage assessment was completed in school.

What we did:

During the triage assessment the young person was initially guarded in her responses and hesitated prior to answering questions relating to safety at home upon which she became very distressed.

During this assessment the young person disclosed she witnesses her dad abusing her Mum at least 3-4 times a week. She reported this had been going on since she was 7 years of age. She disclosed that her father had physically abused her and her younger brother. The young person shared she had photographic evidence of her mums physical injuries on her phone but does not know what to do to with it. The Young Person had not spoken about what has been happening at home before. She discussed being the oldest of 4 siblings and she is always worried about their and her mums safety.

The School Nurse followed safeguarding process and shared information with the designated safeguarding lead in school and made a referral to social care. As it was felt her mum would be at increased risk of harm from her father, the referral was not shared with the mother.

A safety plan was implemented for the young person, and it was assessed safe for her to return to the family home after school.

The outcome:

The Digital Health and Wellbeing Contact facilitates the opportunity for the young person to raise concerns about their physical, social, sexual and emotional health. The school Nurse uses a triage appointment to assess if there was the need for targeted support or further assessment. With this young person (and many like her) the School Nurse built a trusting relationship which allowed the YP to feel safe to share the abuse her and her family were being subjected to through the actions of her father.

Without this contact the young person may not have had the opportunity to disclose any of the abuse. The school were not aware of any concerns linked to the young persons presentation or behaviours, and as a result of the work of the School Nurse were to be able to provide support and a safety plan to protect this young person from future harm.

Triage Assessments followed, as required, by Baseline Health Assessments

All children who are referred are triaged by a School Nurse, some are provided with advice and guidance and some are invited for a Baseline Health Assessment which includes an assessment of any risks. School Nurses use this tool to understand the holistic health needs of a child including physical, social, sexual (where age appropriate to do so) and emotional health.

This assessment is completed for all referrals requiring a package of care and for any child or young person who is to be the subject of a safeguarding meeting. It is completed by either a Public Health Nurse or Healthy Child Program Nurse. The School Nurse provides clinical interpretation of any risks identified (Low, Raised, High, Increased Safeguarding Risk and Medical Emergency).

In the last 12 months 4151 Triage Assessments and 1252 Baseline Health Assessments were completed

Evidence-based packages of care to support early interventions

Baseline Health Assessments often lead to additional evidence-based care packages in accordance with local care pathways and protocols. Support is provided over several weeks for the identified health issues such as sexual health, emotional health and wellbeing and healthy weight. This work may result in referring to specialist services or the Early Help offer.

Review Health Assessments

Upon completion of a package of care, there are a number of possible outcomes:

- The identified need is resolved, and the child/young person discharged to Universal services with ongoing Universal support including the digital offer and information on how to access parent led Healthy Child clinics.
- The identified need has not been resolved and either an additional session of support is provided, or the child/young person is referred to another, more specialist, service.
- The GP is informed if there are any unmet health needs that cannot be addressed by Healthy Together and the care plan is documented.

Between April 2022 – March 2023 712 Review Health Assessments were completed.

ChatHealth

ChatHealth is an award winning, free, confidential text messaging service for Young People and their parents. There are 2 Chat Health offers. One for children and young people and one for parents.

ChatHealth was nominated for national awards through the AHSN Network and NHS Confederation's Innovate Awards. They won two awards, The Innovation Spread Award and Overall Award Both provide a free and confidential messaging service that allows young people, or their parents and carers to ask any question of the school nursing team. Depending on the question, this might result in a brief, evidence-based intervention via text or might be result in escalation to a meeting with a School Nurse and triage into the service via a Baseline Health assessment.

Since it was created in 2014 ChatHealth has been rolled out to 70 other NHS Organisations meaning that more than 60% of School Nursing services in England, Northern Ireland and Wales offer ChatHealth. This makes it possible for around 2.8 million young people (aged 11-19) and their parents and carers to easily send a

message to get confidential help and advice about a range of health and wellbeing issues.

Case Study 2: ChatHealth

Presenting Concern:

A parent of a 13-year-old male contacted the School Nursing team via ChatHealth for advice around their son's mood and anxiety. Parent given a safety plan once no imminent risk for son was identified. Both parent and young person consented to a referral into the School Nursing team.

What we did:

A triage assessment was completed in school. The young person's presentation relating to anxiety, fear and mood, meant a Baseline Health Assessment was required. The safety plan was updated with both the young person and the parent.

The Baseline Health Assessment identified that there were no concerns relating to harmful behaviours, but that targeted support for paranoia and anger was required. Initial strategies were provided, and a plan of care was agreed with the young person which included how to contact the School Nursing team over the forthcoming coming summer holiday should they need to.

The Young Person missed their review appointment with the School Nurse, however, was seen by the GP (following parental concerns) and disclosed thoughts of wanting to harm other people. The GP made a referral to early intervention for counselling which was not accepted.

In the interim, the School Nurse completed a follow up appointment in school where the young person disclosed they were having constant intrusive thoughts and had an active plan to harm other people (stab, shoot and strangle anyone they came into contact within the park local to their home).

The young person also disclosed a previous plan to end their life over the summer holidays, although they did not actively make any attempts and denied any current active plans. The School Nurses assessment of risk of harm to the young person and other's was high. The parent was informed, a safety plan agreed and an immediate referral to the CAMHS crisis team completed by the School Nurse.

The Outcome:

Following the referral to the CAMHS crisis team by the School Nurse the young person was assessed on the same day and it was identified by CAMHS that the young person was at immediate risk of harm to other people. The young person continues to be under the care of the CAMHS.

ChatHealth is a tool for parents to contact the School Nursing team. This can, as in this case, lead to a face-to-face Baseline Health Assessment and evidence-based package of care, here this work culminated in the need for an immediate crisis intervention. School Nurses use Baseline Health Assessment to support children and young people to identify social, physical, sexual or emotional health needs that they may need support with. In this case, the School Nurse was able to identify the escalating risk of harm to not only the young person but those around them, and with support of the parent, seek the appropriate care in a timely and safe way.

www.healthforkids.co.uk

Health For Kids is a fun website for primary school aged children (5-11), and their parents, to learn about their health. Its packed full of fun characters, interactive articles and exciting games to play. In the Grown-ups area parents and carers can get health information and advice to help keep their children healthy and happy.

Between September 2021-2022 Health For Kids saw 130,594 users (114,060 new users).

Health for Kids was pioneered by LPT and has been rolled out to 11 other NHS Trusts.

www.healthforteens.co.uk

Health For Teens is a website for young people aged 11-19 about everything they want to know about health. It features bite-size information on a range of physical and emotional health topics, with engaging and interactive content such as movie clips, audio snippets and quizzes.

The 'your area' section brings local information to teenagers including advice, articles, events and helps them to find the right local support services.

Health for Teens was pioneered by LPT and has been rolled out to 13 other NHS Trusts.

The Healthy Together digital offer, including the websites, won the overall award at the 2020 Forward Healthcare Awards. For more information on ChatHealth, Health for Kids, and Health for Teens please visit <https://impacts.dhtsnhs.uk/>

Health Promotion Fayres

All secondary schools are offered Health Promotion Fayres following the completion of 7,9,11 Digital Health and Wellbeing Contact and are guided by the school level themes that emerge from it. Healthy Together work in partnership with the school and appropriate external services such as mental health support team, CAMHS, police, Turning point re substance use, dieticians.

Sexual Health Clinics

The School Nursing team offer a sexual health service to secondary schools. This provision is only delivered to schools that have consented as part of the School Health Agreement meeting. The School Nursing Team can provide support, advice and offer pregnancy testing and condom distribution using the C-C card initiative.

Currently 11 secondary schools have consented for the School Nursing team to deliver sexual health provision.

School Assemblies and Public Health events

School Nurses work in partnership with schools to deliver Public Health messages and support as identified in the School Health Agreements. In the 22/23 academic year there were 37 sessions delivered as school assemblies or pop-up lunch time events. These events targeted 1,357 children, 1,527 young people and 207 Parents and covered topics such as worry, sleep awareness, dental health and Healthy Lifestyles.

Other events where School Nurses had a presence include coffee mornings with parents, sports days and parent days.

Parent Information Sessions

Parent information sessions are offered as a blended approach alongside the digital offer. Last Academic year there were 477 sessions.

Case Study 3: Self Referral

Presenting Concern:

A 14-year-old British Asian female was requested her school refer her to the School Nursing team. The referral highlighted concerns around home life following her parents' separation and exam pressures. The referral identified she was receiving support for previous self-harming behaviours through the onsite school counsellor but due to the young person herself making the request support from the School Nurse, the referral was accepted. The young person did not attend her initial triage appointment but instead sought out the School Nurse during her lunch break and requested an urgent appointment.

What we did:

Due to the young persons presentation, a triage appointment was immediately completed. She was reporting high levels of stress relating to schoolwork and home life and shared thoughts to end her life. She shared a clear plan as to how she was planning to take her life and disclosed she had made an attempt the previous evening. Due to the severity of the disclosure the School Nurse escalated the need for the young person to be immediately assessed by a mental health specialist. Both parents were contacted, and the School Nurse facilitated a meeting with the young person, her mum and school. The young person shared her concerns to the School Nurse that her parents would not understand as she felt her mum would not believe how she was feeling. It was agreed that the young person needed to be assessed immediately through Accident and Emergency and Mum (along with schools support) took the young person to Accident and Emergency.

The outcome:

The young person was assessed in Accident and Emergency and received ongoing support through CAMHS.

At the time the School Nurse saw this young person she was receiving support for the trauma of her parents separation and the impact it was having on her, however she had not disclosed any indication of the severity of this on her mental health.

Whilst the School Nursing service is not an emergency service this young person had known the School Nurse was in her school as part of the weekly 'Health Shop' and actively sought out the School Nurse as the person to whom she wanted to voice her current state of mind. The School Nurse was able to assess need, identify immediate risk and ensure access to appropriate health care, whilst raising the risk with parents and school.