Health Visiting and School Nurse Programme: Supporting implementation of the new service offer:

Promoting emotional wellbeing and positive mental health of children and young people

Rationale and Context

Examples of Emotional Health and Wellbeing support

Confident to be Curious

What works locally: case studies, Acknowledgement and references
Rationale and Context

Mental health, wellbeing and resilience are crucial to a host of social care and economic benefits – as well as aspects of an individual’s health, positive relationships, education and work. Unravelling the benefits of better health and wellbeing for all requires a sustained, systematic and coordinated effort (Commission on the Social Determinants of Health, 2008). There is very strong evidence that investment in the promotion of mental health and wellbeing of parents and children not only in the pre-school years, can avoid health and social problems later in life.

The Children’s Society and New Economics Foundation have explored the relevance of the Five Ways to Wellbeing for Health Visitors and School Nurses. The following outlines the contribution that the health visiting and school nursing service can make to improving emotional health and wellbeing outcomes for children, young people and their families. It describes different levels of intervention across the 4 tiers of the new health visiting and school nursing service model.

This document builds on No Health Without Mental Health (2011) and recognises the vital role of partner agencies and the need for local collaboration in commissioning and delivery. It provides more specific focus and clarity for health visitors and school nurses to support their roles. The aim is to implement new evidence to ensure healthy start includes building the emotional resilience which is vital in life chances. This guidance shows how health visiting and school nursing services can provide input in terms of prevention, early intervention, on-going support and referral to specialist services, whilst working collaboratively with partnership organisations.

Health Visitors and School Nurses are well placed to identify issues, use protective screening and provide effective support. Using this approach not only supports good mental health, but is economically more effective (Mental Health promotion and mental illness prevention: The economic case, London School of Economics and Department of Health, 2011). This document outlines the contribution that the health visiting and school nursing service can make to improving emotional health and wellbeing outcomes for children, young people and their families. It describes different levels of intervention across the 4 tiers of the new health visiting and school nursing service model.

Using key data on child and adolescent mental health

Child and adolescent mental health disorders are common. They affect 10-20% of children and young people – with the most recent UK figures indicating that 10% of 15-16 year olds have a diagnosed mental health disorder.

Common mental health disorders and difficulties encountered during childhood and the teenage years include: ADHD (Attention Deficit Hyperactivity Disorder); anxiety and a range of anxiety disorders ranging from simple phobias to social anxiety, generalised anxiety and PTSD (Post Traumatic Stress Disorder); autism and Asperger syndrome (the autism spectrum disorders, or ASD); behavioural problems; depression; eating disorders (including anorexia nervosa and bulimia); self harm; obsessive compulsive disorder (OCD); psychotic disorders; and in particular schizophrenia; and substance abuse.

1 in 5 adults in the UK are reported to have a mental health problem. It is thought that approximately half of all lifetime mental disorders start by the mid-teens (Bamardos, 2009). Data and evidence should be used by Health Visitors and School nurses to provide:

- Assess the health and wellbeing needs of children and young people and provide early identification of risk factors e.g. advice & support for children & young people with long-term conditions; support for travellers’ health needs; repeat A&E admissions.
- Assess parenting to identify areas of actual or potential parenting issues, and early identification of risk factors e.g. knowledge and attitude to child rearing; quality of mother child interaction; parental perception of child behaviour; client’s experience of adverse family interactions.
- Understand what works for population at risk e.g. parents that may have significant difficulties;
- Identify and consider of strengths versus risk when working with families.
- Recognising the importance of parental wellbeing can affect the child’s emotional health and wellbeing and resilience.
- Ensuring early identification of need and provision of evidence based family centred support.
- Focusing on early intervention and early help – both in early years and at trigger points during school-aged years.
- Ensuring early identification of those who are at risk of postnatal depression through antenatal assessment and post-natal depression screening, recognising family dynamics to provide a whole family approach.
- Encouraging partnerships to deliver a comprehensive service offer.
- Ensuring seamless support across the transitions from midwifery, health visiting, and school nursing services.
- Recognising the value of multi-agency delivery with clear co-ordination.
- Enhancing parenting strategies e.g. the incredible years.
- Identifying and consideration of strengths versus risk when working with families.
- Ensuring developmental assessments to indicate developmental concerns and delays.
- Developing evidence based pathways and protocols with outcome measures

Evidence based practice: five ways to wellbeing

Poor mental health is both a contribution to and a consequence of wider health inequalities. Health Visitors and School Nurses, with partner agencies, have a crucial role in positive mental health within a family context and in creating confident communities and brighter futures for all. To ensure emotional health and wellbeing is promoted and ensuring that seamless services are provided, the following need to be addressed:

- Raising the profile of health visitors and school nurses’ contribution to emotional wellbeing and mental health.
- Developing guidance / tools for transition with clear role definition for Health Visitors and school nurses to ensure clear transition pathways.
- Actively engaging promoting transition points across the life course for children and young people – providing a joint and holistic approach to support the child and family.
- Ensuring shared training opportunities and regular updating of resources.
- Ensuring effective support during transition pathways.

Five ways to Wellbeing

The Children’s Society and New Economics Foundation have explored the relevance of the Five Ways to Wellbeing for Health Visitors and School Nurses in working with children, young people and families.

The five steps provide the framework for Health Visitors and School Nurses working with children, young people and families, as well as an organisational tool to effect cultural change.

Connect – Enable young people to spend time with friends and family.

Be active – Urg young people to exercise regularly, either on their own or in a team.

Take notice – Encourage awareness of environment and feelings.

Keep learning – Keep young people’s world as large as possible, encouraging their natural curiosity.

Creativity and play – Encourage children’s imagination and creativity as they grow.

A focus on building resilience and confidence

Marmot (2010) reinforces the need for a life course approach to tackling inequalities, to build resilience and wellbeing of children and young people across the social gradient. Support needs to be in place before birth and subsequent stages throughout the life of the child to ensure positive outcomes. Healthy Lives, Healthy People (2010) outlined the need to build self esteem, confidence and resilience. This can be achieved by:

- Recognising the importance of good relationships with family, friends and others is paramount to building resilience.
- Recognising the importance of parent wellbeing can affect the child’s emotional health and wellbeing and resilience.
- Ensuring early identification of need and provision of evidence based family centred support.
- Focusing on early intervention and early help – both in early years and at trigger points during school-aged years.
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Collaborative support: a summary of key messages

Supporting emotional health, wellbeing and resilience requires a collaborative approach across a number of agencies. Collaboration will enhance delivery but can only be achieved by effective team and multi-agency working, which requires:

- Providing leadership to shape teams and provide direction for delivery.
- Ensuring effective referral systems are in place.
- Enhancing multi-disciplinary team discussions.
- Encouraging reflective review to make service improvements and supporting insightful challenge.
- Using shared learning to support critical appraisal to enhance practice.
- Supporting inter professional learning and development.
- Providing protected time for supporting and developing professional networking and support groups.

Effective commissioning for effective service delivery

The core aims of effective commissioning are to:

- Improve mental health and wellbeing of the population.
- Improve the quality and accessibility of services.
- Ensure commissioning is underpinned by robust data and evidence including service user feedback.
- Ensure services are developed and delivered based on local need, use evidence based intervention and are reviewed to ensure impact and positive outcomes.
- Utilising robust processes for collection of service user feedback to enhance and shape services.
- Ensuring data and feedback is provided to influence effective commissioning.
- Supporting parenting and family life.
- Supporting school readiness.
- Developing whole school approaches to health and wellbeing.
- Promoting mentally healthy environments.

Success can be measured through:

1. Improved mental health literacy in children and young people.
2. Improved resilience for children, young people and families.
3. Improved children, young people and families’ emotional wellbeing and mental health.
4. Improved early identification and access to therapeutic interventions and universal support.
5. Improved confidence and skills of health visitors and school nurses to address emotional wellbeing and mental health.

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**Emotional Health and Wellbeing**

Emotional Health and Wellbeing support is based on a continuum of needs approach which requires the skill, knowledge and training of Health Visitors/School Nurses. The continuum is based on the search for health needs; the stimulation of an awareness of health needs; the influence on policies affecting health. Safeguarding is a core element of all levels of work within the health visiting and school nursing service models. Below outlines the Health Visitor/School Nurse service offer and provides examples of how they can support the child and family throughout the four levels of the service offer. The following are examples but not limited to those identified:

**Health visiting examples of emotional health and wellbeing at this level**
- Identifying demographic and population/community needs, contributing to poor emotional health and wellbeing
- Supporting development of community services to meet identified need
- Working with children’s centres to identify and support positive parenting and child and family wellbeing

**Community**
Using Community Assistant to ensure services support and meet the identified needs of the local population. Local communities have a range of services including some Sure Start services, school health services and the services families and communities provide for themselves

**School nursing examples of emotional health and wellbeing at this level**
- Ensuring early identification of risk factors e.g. demographics of school population
- Acting upon health concerns such as advice and guidance to address health and wellbeing concerns;
- Providing drop-in services in schools with a multi-agency approach
- Providing school nurse support/information for parents whose children are starting in primary education
- Ensuring school nurses are working in partnership with teachers to deliver workshops/activities regarding emotional health and wellbeing – such as self-awareness, emotional intelligence, mindfulness, resilience
- Signposting for parents and carers to local services/support groups/interest groups and updates

**Health visiting examples of emotional health and wellbeing at this level**
- Providing antenatal and postnatal parenting programmes which support positive mental health of parents and parents
- Supporting general access to ‘talking therapies’ and parental support
- Providing assessment of parental mental health needs including maternal mental health
- Early identification of attachment/bonding concerns
- Delivering health promotion, advice and support
- Signposting to financial and welfare support
- Supporting breastfeeding and promoting secure attachment

**Universal Services**
Universal services are for all families. Health visitors and school nurses deliver the Healthy Child Programme to ensure a healthy start for children, young people and families

**School nursing examples of emotional health and wellbeing at this level**
- Ensuring assessment of health and wellbeing need and early identification of risk factors e.g. advice & support for Children & young people
- Ensuring early identification of emotional health and wellbeing needs
- Providing health checks to indicate developmental concerns and delays
- Ensuring support for health promotion and change management around issues such as obesity, smoking, drugs and relationship issues, sexual health

**Health visiting examples of emotional health and wellbeing at this level**
- Ensuring early identification and support for mothers with postnatal depression and low maternal mood
- Using evidence based interventions for specific needs such as crying baby, sleep problems, attachment and bonding
- Supporting health promoting behaviours and support for change management
- Ensuring referral to support services and planned structured support for specific issues e.g. developmental delays and relationship support

**Universal Plus**
Targeted services according to assessed or expressed need. Universal Plus gives a rapid response from the health visiting and school nursing teams when children, young people and families need specific expert help

**School nursing examples of emotional health and wellbeing at this level**
- Ensuring identification of risk factors and recognition of early warning signs
- Providing support where behavioural difficulties are present
- Using evidence based interventions or specific package of care for identified health need e.g. sexual health and self-harming
- Providing planned structured support that strengthens the family relationship
- Using local assessment teams to inform and assess judgment and to work across partnership
- Ensuring early intervention with partner agencies and working with voluntary agencies
- Using research based approach to continual assessments, intervention.
- Providing referral, to support services e.g. CAMHS/Adult Support services.
- Providing primary school drop-ins to support parents
- Providing on-site counselling services and links to CAMHS

**Health visiting examples of emotional health and wellbeing at this level**
- Providing targeted longer term support for families with complex needs e.g. those affected by drugs, alcohol or domestic violence
- Providing ongoing support for families with a disabled child
- Using strengths based approaches to support long term change and resilience within families
- Delivering continued intervention for families in crisis and restorative intervention to maintain family and safeguard children

**Universal Partnership Plus**
Targeted according to identified need. Universal Partnership Plus provides ongoing support from the team plus a range of local services working together with children, young people and families to deal with more complex issues over a period of time. These include services from Sure Start Children’s Centres, other community services including voluntary organisations and, where appropriate, the Family Nurse Partnership, other agencies including CAMHS and social care

**School nursing examples of emotional health and wellbeing at this level**
- Using evidence based targeted programmes promoting the health in the school and community settings.
- Providing continued intervention and support to prevent deterioration in a chaotic family and/or child with additional needs e.g. behavioural issues; young people repeatedly in touch with police; young people in the youth justice system; support for pregnant teenagers; sexual exploitation/grooming, self-harming; young person or parental alcohol/drug misuse.
- Informing other professionals about health needs of child and family
- Using local multi-agency tools for assessments
- Identifying and considering strengths v risk when working with families
‘Confident to be Curious’

The Health Visiting and School Nursing Offer for Emotional Wellbeing and Mental Health

Below describes the service offers for children, young people and families.

Community: There are a range of health services including GP and community services for children, young people and their families. Health visiting and school nursing teams develop and make sure you know about them.

Universal services: From the Health visiting and school nursing service provides the Healthy Child Programme to ensure a healthy start for every child (e.g. Public Health, including early identification of postnatal depression and emphasis on mental health early intervention.)

Universal plus: delivers a swift response from your health visiting and school nursing service when children, young people and families need specific expert help e.g. bullying, transition, resilience building.

Universal partnership plus: delivers ongoing support from your health visiting and school nursing service from a range of local services working together with you to deal with more complex issues over a period of time (e.g. with CAMHS, CAT and mental health services).

Maximising health and wellbeing outcomes

Improving children, young people and families’ awareness of mental health and wellbeing

- Making every contact count, e.g. using intelligent contacts and taking responsibility regarding emotional health
- Focusing on early help and family approaches to support emotional wellbeing and mental health
- Recognising and utilising opportunities for emotional health and wellbeing promotion
- Agreeing outcome measures and implementing robust systems
- Linking to Ofsted framework as a lever to engage school to promote wellbeing
- Supporting partnership working and collaboration
- Ensuring early identification of risk factors and early offers of support intervent

Building and strengthening leadership

Making emotional health and wellbeing everyone’s business

- Ensuring confident understanding and competent assessment of emotional wellbeing and mental health
- Providing seamless support from 0-19 – Health Visitors and School Nurses working with parents to provide seamless timely support within a family context
- Assisting local needs and building services to meet the emotional wellbeing and mental health needs
- Designing outcomes - Linking to Healthy Child Programme, No Health Without Mental Health and Support of the Commissioner and Young People’s Mental Health Outcomes Forum
- Emphasising children’s emotional health and wellbeing e.g. public health and Local Authority and commissioning provides great opportunity to enhance partnership working to improve emotional wellbeing and mental health

Delivering care and measuring impact

Making emotional health and wellbeing everyone’s business

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Working with people to provide positive experience

- De-stigmatising mental illness and normalising emotional health and wellbeing
- Providing non-judgmental support
- Making emotional health everyone’s business. Utilising the principles of Your’s Welcomes Quality Criteria
- Using feedback from young people on service experience
- Providing tailored support for children, young people and families
- Ensuring “reach” to children, young people and families
- Focusing on child and young person rather than service delivery setting
- Agreeing and reviewing person (or family) centred goals

Supporting a positive staff experience

- Supporting capacity building across the team and within partner organisations
- Supporting staff development and building skills
- Growing the workforce by providing placements – Health Visitors and school nurses (linking with CAMHS)
- Providing comprehensive supervision and support with reflective and planning time
- Encouraging regular review of casebooks
- Providing restorative supervision
- Ensuring health visitors, school nurses and partner organisations have the confidence and skills to support the emotional health and wellbeing needs of children, young people and their families
- Identifying leadership opportunities and providing support to develop skills
- Developing skills and knowledge in emotional wellbeing and mental health – cross agency training
- Providing opportunities for Health Visitors and School Nurses to be involved in Emotional Health and Wellbeing support and delivery through building community capacity projects

Ensuring we have the right staff, with the right skills, in the right place

- Ensuring the Health Visiting and School Nursing role and contribution is clearly understood
- Ensuring Health Visitors and School Nurses are confident and competent to support health and wellbeing of children and young people within a family context
- Encouraging value based recruitment
- Providing opportunities for role development and career development
- Having the confidence to work within sphere of competence and expertise including appropriate sign posting and referral
- Providing a positive culture to maximise contribution and retain staff

Commitment

- Recognising need and ensuring collaborative support to achieve better outcomes for children and young people
- Striving for service improvement and needs-led practice

Communication

- Working and communicating with others to ensure seamless support
- Being transparent and working with key partners

Courage

- Challenging when things go wrong
- Championing emotional health and wellbeing of children and young people

Competence

- Ensuring appropriate skills and knowledge to support effective delivery
- Recognising training needs and supporting staff development

The National Nursing, Midwifery and Care Staff Strategy: Commission provides a framework for health visitors and school nurses to examine the core values and contribution to supporting emotional health and wellbeing.

- Providing high quality care to support children, young people and families with emotional health and wellbeing needs
- Ensuring comprehensive support for all children and young people

The pathway to promoting positive mental health and wellbeing

Adapted from Hertfordshire Community Services

Identifying challenges and developing solutions

There are public health challenges that cannot be addressed solely by this partnership pathway, including local variation in service configuration and delivery. Such issues should be underpinned by using a robust evidence base and require local collaboration between health visiting, school nursing and mental health services, commissioners and practitioners adopting partnership pathway principles and adapting them to meet the needs of local children, young people and families taking account of local health priorities, identified health needs and resource deployment. The use of a partnership pathway will support effective service provision and provide solutions to address local challenges in promoting health, protecting and preventing ill health. The six priority actions identified in the National Nursing, Midwifery and care staff strategy http://www.commissioningboard.nhs.uk/files/2012/12/compassion-in-practice.pdf provide a useful framework to address challenges through solution focused approaches. Key partners include: education, GPs, local authorities and voluntary sector organisations.
What works locally: case studies, Acknowledgement and references

Good practice: CARE
Stockport Parenting Team are a group of specialist community public health nurses with additional training in evidence based parenting programmes, such as Incredible Years Training Programmes and Parent Effectiveness Training. The team has close links with Child and Adolescent Mental Health Service and provides free parenting programmes and 1:1 support. The Parenting Team provide training and support to the work of health visitors, Children’s Centre staff and school nurses and related health professionals. The service aims to build parents’ confidence and skills, and by doing so build resilience in children and young people. Through collaborative work with the parenting team, parents learn to understand the emotional needs of their children linked to their stage of development and learn strategies to respond to these needs.

Good practice: COMMUNICATION
Staple, an Early Intervention Child and Adolescent Mental Health Service based in Hertfordshire, is part of Hertfordshire Community NHS Trust. Working with 0-19 year olds, Staple supports other professionals working with this age group encouraging them to think creatively when considering mental health and emotional wellbeing needs. Anxiety and anger are increasingly common presenting issues for young people today and much of a school nurse and health visitor’s time is being taken up responding to these types of difficulties. The BrainBox™ is one of the practical resources, designed by Deborah Bone, that can easily be adapted by other professionals and used within health and education settings. The BrainBox™ is used to explain and share strategies about managing anger and anxiety.

Communication and Transition
Bart’s Health: Tower Hamlets School Health Team, actively engage with young people. When consulting with young people on how the service could help and support service users and their family, it was clear that they related it to a ‘medical model’ of health. It was identified that the transition periods between key stages during the school age years and into adulthood, were significant, impacting on anxiety at home and wellbeing; thus influencing learning, achievement, long term future and social skills. The School Health Team were able to use the information, to feedback to managers and practitioners in schools, to the School Health Team and the Public Health partners, regarding the importance of the transition periods and the role of the School Health service, in early intervention to support, as a targeted appointment or a ‘drop in’ service, regarding emotional health and wellbeing.

Good practice: COMPASSION
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Bright Stars training day. The Bright Stars journey runs for six weekly sessions of approximately one hour each. There are a maximum of 12 participants per group, all of whom will be taught the same strategies. The Bright Stars journey is led by a qualified health professional and a member of the teaching staff who have both attended a Bright Stars training day. The Bright Stars journey runs for six weekly sessions of approximately one hour each. There are a maximum of 12 children in each group. The Bright Stars journey is evolved to first and last session to encourage working in partnership. Each child receives a certificate at the end of the six weeks and the group demonstrates the things they have learned to their parents and the rest of the class/school. The school receive resources to enable them to deliver further programmes. Bright Stars has been delivered in over 30 schools in Hertfordshire.

Acknowledgements
This pathway has been developed in partnership with a range of stakeholders across the NHS and other organisations. Thanks are extended to all contributors, specifically the following:

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PIA to Professional Officer – Nursing, Department of Health

Good practice: COURAGE
In recognition of good multi agency work Newall Green High School was chosen to pilot an Emotional Health Project. This was collaboration between Education, Health and Social Care to deliver a programme for young people. This Project a citywide was commissioned. 9 High Schools in Manchester now have an allocated Clinical Psychologist and an Emotional Health Advisor.

The Emotional Health Advisor attached to NHS Manchester manages the team, and the school continues to be used as a venue for training.

Half termly consultation meetings are held in school and give the opportunity for staff to discuss students they are worried about. Parental consent is gained before these consultations take place. The weekly multi agency forum identifies the appropriate professional who will give support. It is co-ordinated by the deputy Head Teacher. The School Nurse/Health Advisor is global in offering advice for identified health issues e.g. poor attendance and poor health, with liaison with the GP and offer support package to address the issues. The school based social worker accesses additional support and enhances the 12 family support workers operational skills. The school nurse is instrumental in whole school training on Asthma, Allergic reactions, Diabetes, Epilepsy, with an extended role around sexual health and Co-ordinates the immunisation programme and liaises with other health professionals.

Good practice: COMMITMENT
Edge Hill University, carried out an in depth study, demonstrating that graduating Children’s Nurses recognised when a child was emotionally well or challenging, an important skill to extend. The BrainBox™ is one of the practical resources, designed by Deborah Bone, that can easily be adapted by other professionals and used within health and education settings. The BrainBox™ is used to explain and share strategies about managing anger and anxiety.

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Good practice: COMPETENCE
Walsall school nursing service use the FRIENDS programs http://www.pathwaysfriends.co.uk/ . It is an evidence based cognitive behavioural programme for working with CYP between 4-16 years. School nurse teams have been trained to deliver better programmes in schools and community venues. The programmes form part of the emotional health referral pathway, CYP who present with low self-esteem, poor confidence, and/or anxiety (mild to moderate) are offered this as a targeted first intervention. School nurses and assistants who are trained to deliver the programmes are involved in the transition periods through co-operation with a representative from a school health team thus building capacity of school to offer early intervention.

The programme is delivered in a multi agency setting. CYP who present with low self-esteem, poor confidence, and/or anxiety (mild to moderate) are offered this as a targeted first intervention. School nurses and assistants who are trained to deliver the programmes are involved in the transition periods through co-operation with a representative from a school health team thus building capacity of school to offer early intervention.

References and Resources:

Young Minds
Incredible Years Training Programmes, Dr Vietnam-Stafford
Staple – Early Intervention CAMHS, Hertfordshire Community NHS Trust

Delivering race equality in mental health care: an action plan for reform inside and outside health, Department of Health, Edge Hill University

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Content and COMPETENCE
Confident Communities, Brighter Futures: A framework for developing well-being, health and resilience in young people, by the Department of Health and Public Health England

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Confident Communities, Brighter Futures: A framework for developing well-being, health and resilience in young people, by the Department of Health and Public Health England

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Youth MHFA course

EMPATHY: Emotional Health and Wellbeing, Hertfordshire Community Health Service

School Nurse

Social and emotional wellbeing: early years, NSE, 2013

Learning disability: acquisition, assessment and treatment of social anxiety disorders, Department of Health, 2000

Diabetes, Epilepsy, with an extended role around sexual health and Co-ordinates the immunisation programme and liaises with other health professionals

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In recognition of good multi agency work Newall Green High School was chosen to pilot an Emotional Health Project. This was collaboration between Education, Health and Social Care to deliver a programme for young people. This Project a citywide was commissioned. 9 High Schools in Manchester now have an allocated Clinical Psychologist and an Emotional Health Advisor.

The Emotional Health Advisor attached to NHS Manchester manages the team, and the school continues to be used as a venue for training.

Half termly consultation meetings are held in school and give the opportunity for staff to discuss students they are worried about. Parental consent is gained before these consultations take place. The weekly multi agency forum identifies the appropriate professional who will give support. It is co-ordinated by the deputy Head Teacher. The School Nurse/Health Advisor is global in offering advice for identified health issues e.g. poor attendance and poor health, with liaison with the GP and offer support package to address the issues. The school based social worker accesses additional support and enhances the 12 family support workers operational skills. The school nurse is instrumental in whole school training on Asthma, Allergic reactions, Diabetes, Epilepsy, with an extended role around sexual health and Co-ordinates the immunisation programme and liaises with other health professionals.

What works locally: case studies, Acknowledgement and references