Emotional Health and Wellbeing of Children and Young People in Nottingham City- The Scale of the Challenge

Lynne McNiven- Consultant in Public Health

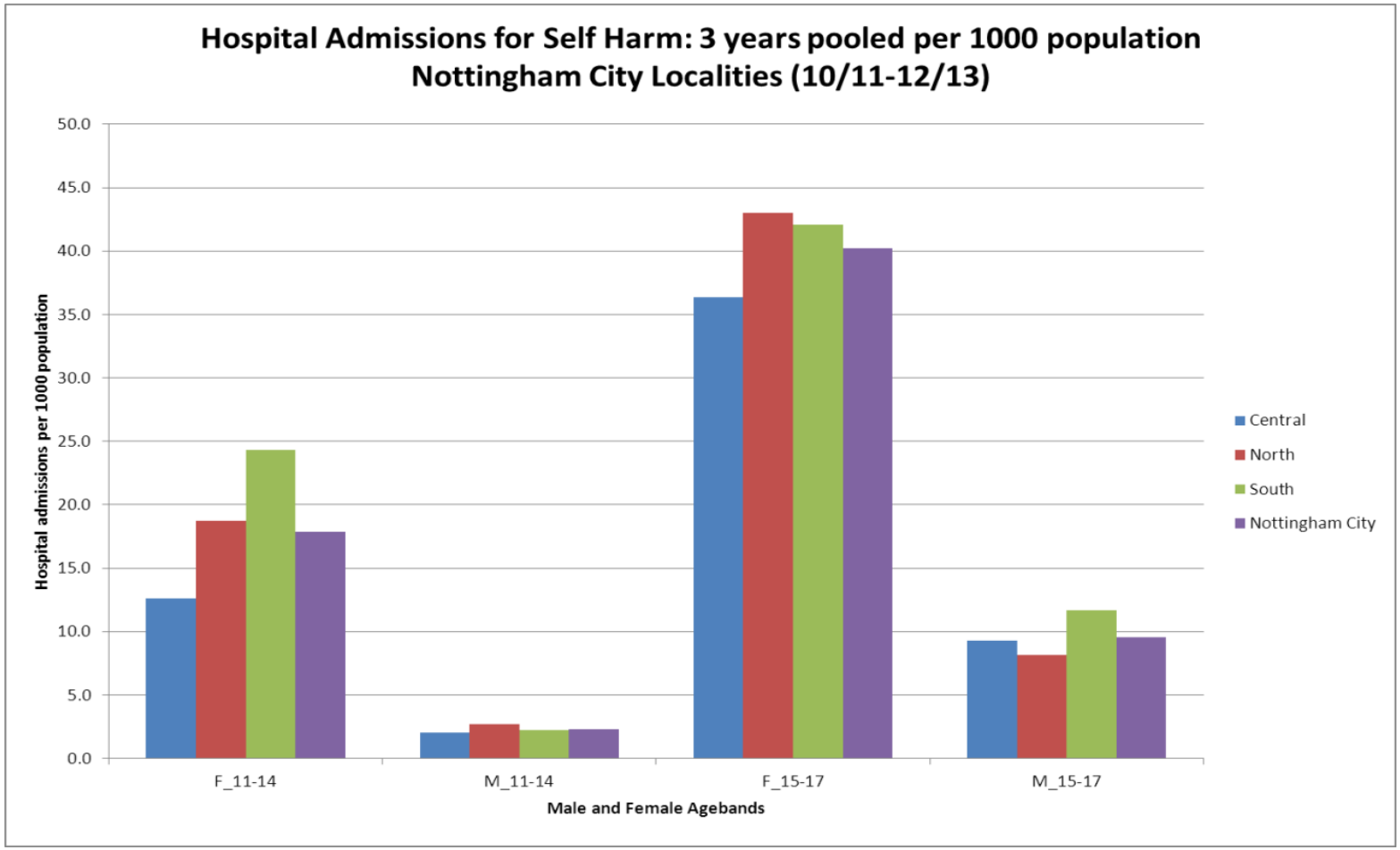
Nottingham City Council

Scene Setting

- **1 in 10 young people suffer from mental health problems**
- **It is recognised that b**y the age of 14 about half of all lifetime mental health problems start
- The total number of children and young people aged 0 – 18 living in Nottingham City is **68,424**
- About 35.1% of children in Nottingham City are living in poverty
- **Looked after children, young offenders, children who experience or witness domestic violence are** recognised to have high risk of emotional and mental health problems with estimates around 45%, 40% and 25% respectively.
- Numbers of looked after children (LAC) have significantly increased within Nottingham City a rate of 4.5% year on year and as of the end of March 2013 there were **560 LAC in Nottingham**
- Between April 2013 and October 2013, School Nurses met with **557 children and young people** with emotional health problems.

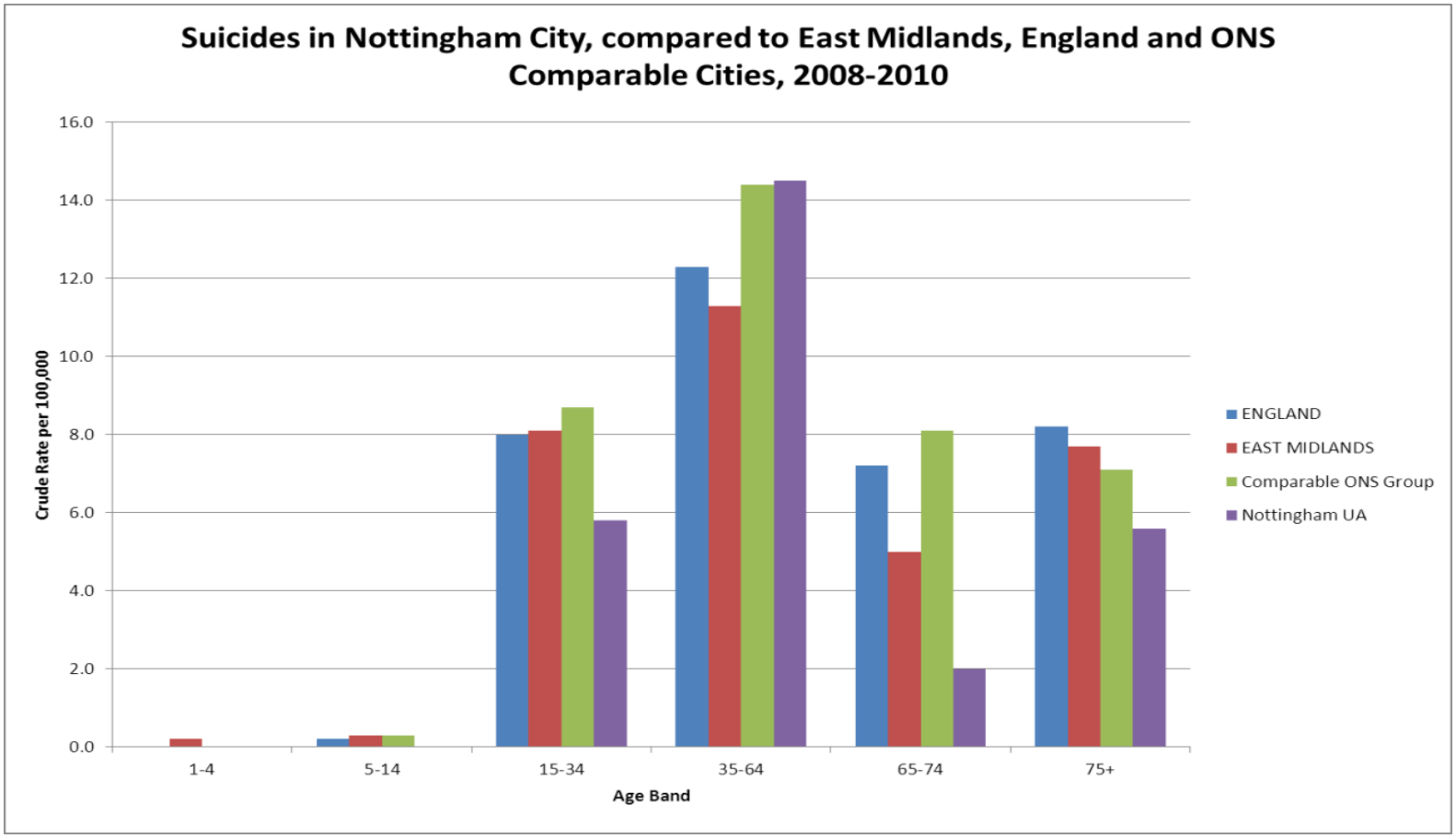
Nottingham City Council

Self Harm



Source: Hospital Episode Statistics (SUS) NHIS Datawarehouse

Suicide



Source: Hospital Episode Statistics (SUS) NHIS Datawarehouse

High Risk Groups in Nottingham

- **Looked after Children-** The numbers of Children in Care within Nottingham have been rising at a rate of 4.5% year on year and as of September 2013 Nottingham has between **580 - 600 children in its care**
- **Young Carers-** . Data from the 2011 census can be used to estimate the number of young carers in Nottingham within the East Midlands, **2.1% of children and young people aged 5-18 were identified as young carers**
- **NEETS**- The percentage of young people NEET in Nottingham City **6.3%**
- **Gypsy and Traveller Families-** number of children from Gypsy/Roma Communities has significantly increased in 2013 to 129 from that in 2012 where there was **96 recorded children.** The number of children from Irish Traveller heritage has remained relatively static.
- **Young people using drugs and Alcohol-** No significant difference in Nottingham than comparator cities
- **Teenage Mothers-** In Nottingham City, **49.5 young women** aged under 18 years conceived per 1,000 population in 2011 compared to the national average of 30.7 per 1,000

NHS Nottingham City Clinical Commissioning Group

Nottingham City Council

NHS
Nottingham City
Clinical Commissioning Group

High Risk Groups In Nottingham Cont:

- **Youth Offenders-** Between 2011-2012 there were **2066 first time entrants** into the Youth Justice system , estimated prevalence of mental health disorders is 40%
- **Children and Young People with a Physical Illness, Physical and Learning Disabilities- 4368 children** with a disability, **476 pupils** in special school
- **Children and Young People with Special Educational Needs-** 43,681 pupils within Nottingham, of this **9,315 have SEN**
- **Children who are exposed to Domestic Violence or experience Domestic Violence –** Using a national survey of 6196 children 1837 children and young people (1,266 under 11 and 571 aged 11-17 have witnessed domestic violence in the last year). **However first year of DART, 4236 children in Nottingham City alone was recorded**
- **Children and Young People Subject to abuse/ with a Child Protection Plan-** Using NSPCC % prevalence data od 11- 17 year old, **3768 children** are subject to sexual abuse, **1576 children** are subject to physical abuse at the hand of a parent of guardian**, 2238** are experiencing severe neglect and **1553** are experiencing emotional abuse.
- During 2011/12, there were **436 children** who were the subject of a child protection plan in Nottingham City. Overall however there has been an upward trend both locally and nationally since in 2001/02.

Nottingham City Council

Recommendations from the HNA

NHS Nottingham City Clinical Commissioning Group

Early Intervention –Breaking the cycle and taking a life course approach

Antenatal

- Focus on perinatal mental health

Early Years

- Utilise the school readiness check at age 4 to undertake an emotional and mental wellbeing check of the child and pass on any information to the school and school health.

School Aged Children

- Provide guidelines to schools on how to effectively use the pupil premium for quality emotional and mental health support for pupils.

CAMHS Services

- Complete a system review of all CAMHS services

Self-harm

- Develop an appropriate pathway for children and young people who self harm including those who attend ED .

Parents and Family

- Systematic support should be provided to families with children and young people who are experiencing domestic violence at all risk levels as assessed by DART. There needs to be recognition the impact of DV on Children's and emotional mental health.

Nottingham City Council

Discussion session 1:

What are the main challenges you are facing with children and young people's emotional and mental health within your work?

Nottingham City Council

CityCare
Building Healthier Communities

Young Peoples Emotional Wellbeing Team.

Lisa Wilson September 2104

Young Peoples Emotional Well being Team

“A good start in life and positive parenting promote good mental health, wellbeing and resilience to adversity through life”(2011, 3,10) No Health Without Mental Health.

CityCare
Building Healthier Communities

Young peoples emotional wellbeing team. Who, what, when, why and how

- The Team
- A 2 year pilot service that supports the emotional wellbeing pathway for young people ages 0-24 years in Nottingham City.
- Referrals will be accepted from December but the service is going live January.
- To identify and ensure children, young people and their families receive the most appropriate support to meet their needs

CityCare
Building Healthier Communities

The pathway

- Stage 1 Identification, clarification and early intervention.
- Stage 2 Support from the Young peoples Emotional Wellbeing team
- Stage 3 Specialist assessment
- Stage 4 Outcome of specialist assessment and planning
- Stage 5 Implementation and on going support
- Stage 6 Transition to adulthood.

CityCare
Building Healthier Communities

CityCare
Building Healthier Communities

Nottingham CityCare Partnership CIC
1 Standard Court
Park Row
Nottingham
NG1 6GN

e: citycare@nottinghamcitycare.nhs.uk
t : 0115 883 9600

www.nottinghamcitycare.nhs.uk

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FREE ONLINE SUPPORT FOR YOUNG PEOPLE

XENZONE
DELIVERING MENTAL HEALTH ONLINE

Nottingham City Face2Face & Online Counselling Service

Daniel Da'Bell
Locality Service Manager
daniel@xenzone.com
Mobile tel; 07715 906131

Meleni Parkin
Service Integration
mel@xenzone.com
Mobile tel; 07528751216

The Online Service

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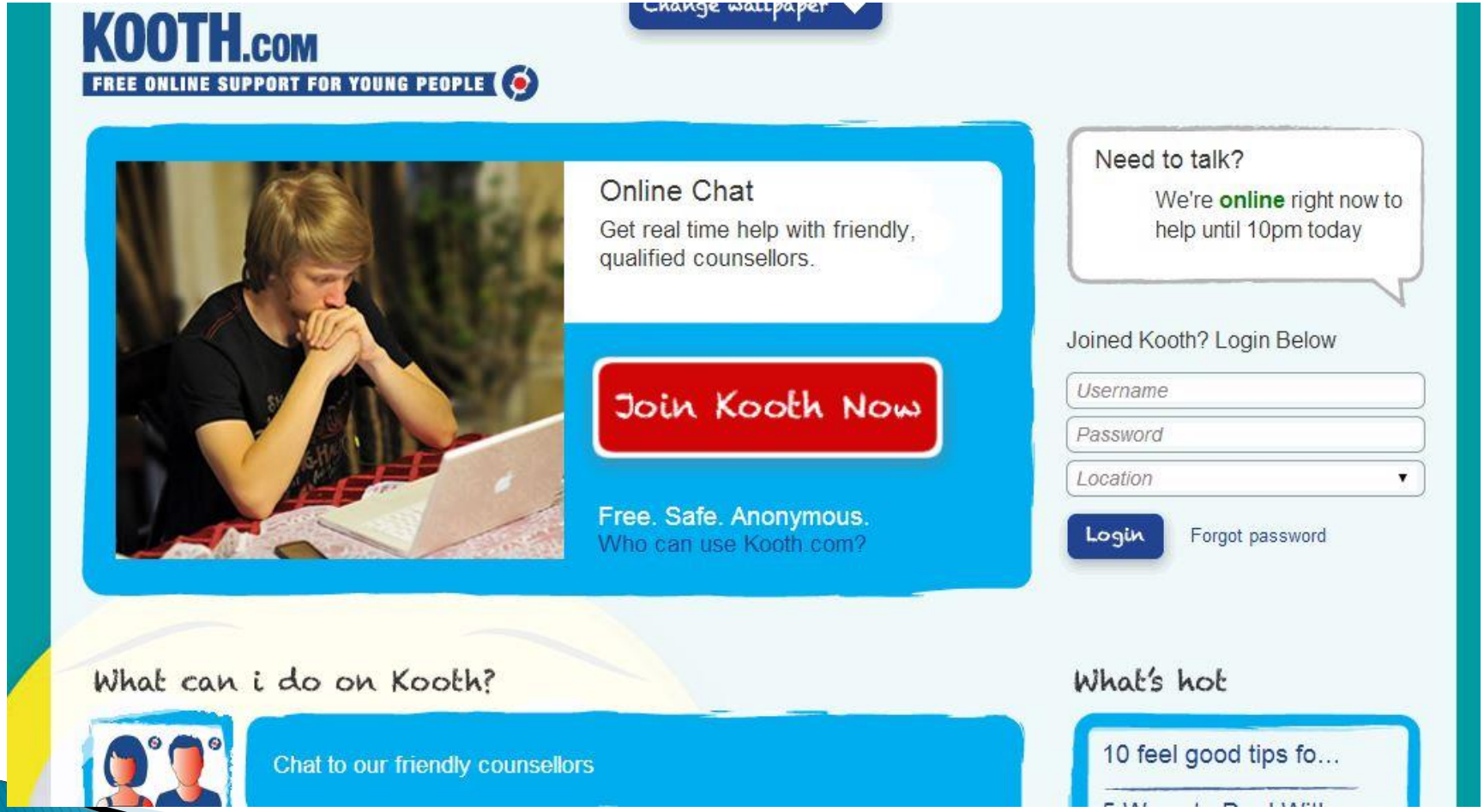
- Young People can sign up themselves – no referral needed
- Text based – live or asynchronous messaging
- Offers a range of therapeutic tools and activities
- Open 365 days a year: Out of Hours Service
  12-10pm weekdays, 6-10pm weekends



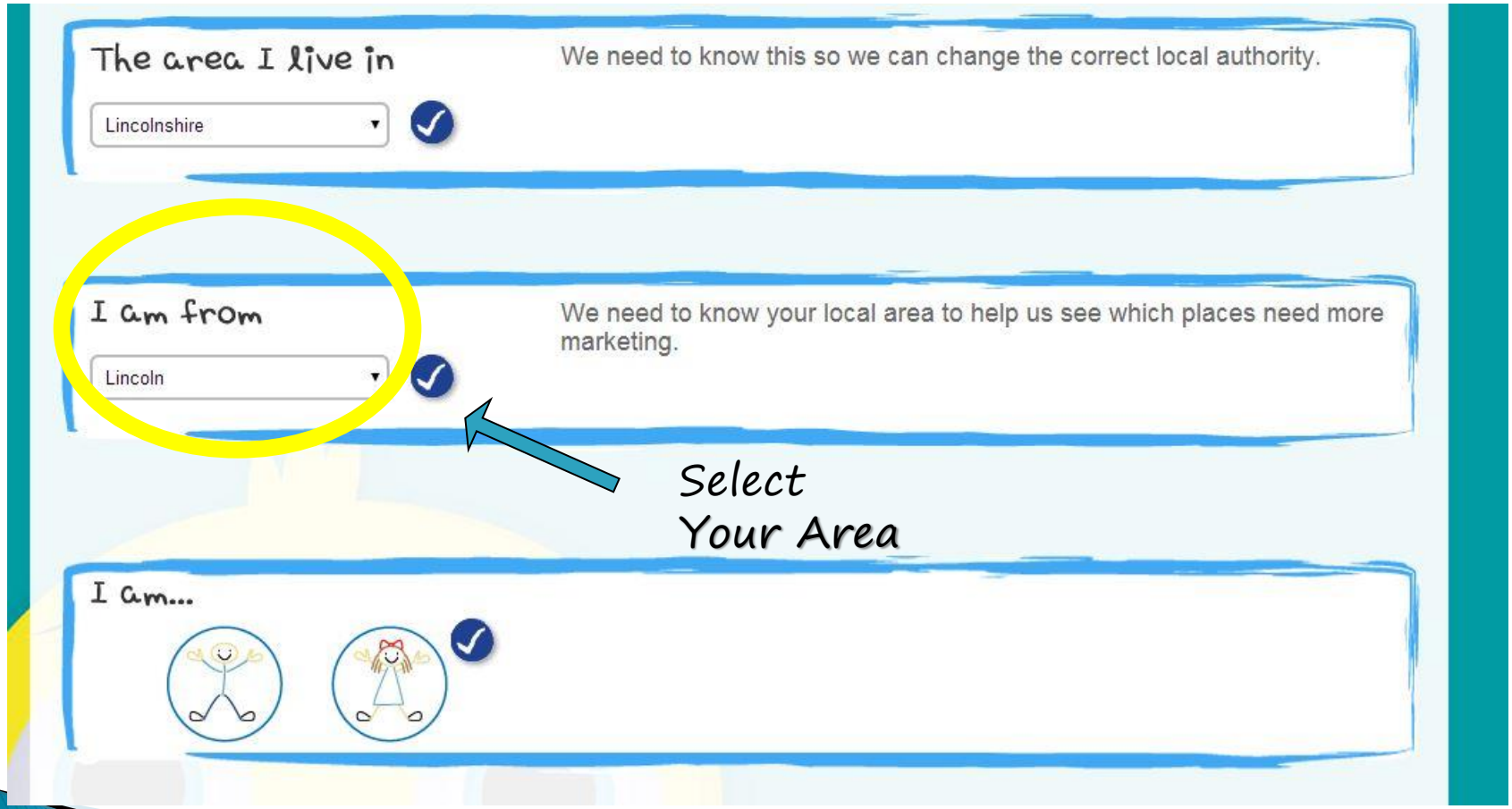
The Face 2 Face Service

- Referral form to complete – either by YP or adult (GP< school nurse, teacher, parent etc)
- Age range for both services is 10-25 but U11's must be referred
- Sent electronically to Locality Manager who will contact the YP to arrange
- Can be seen in school or at any place which is suitable and convenient for the YP
- Can also use the online service too

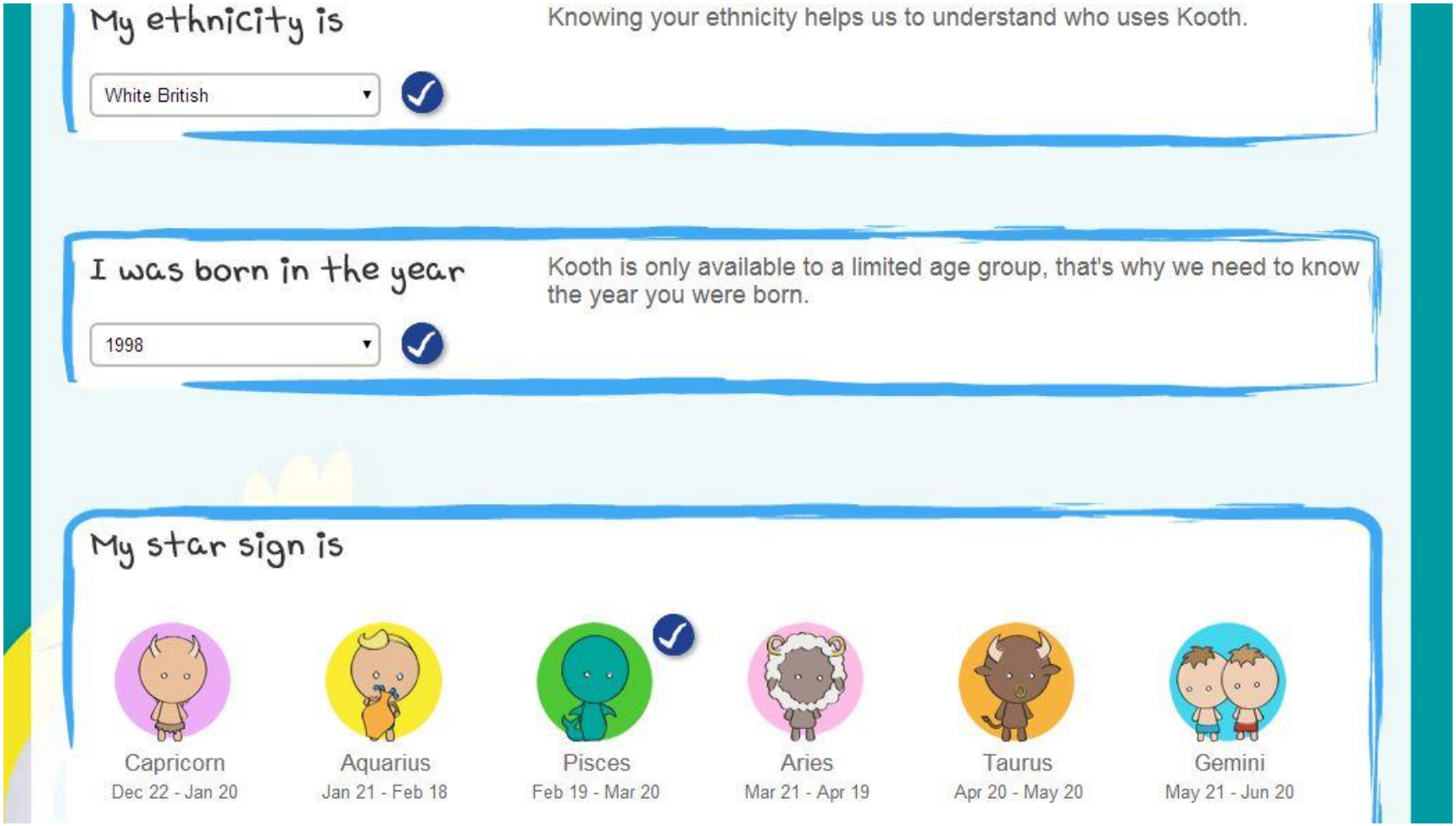
First...You'll need to sign up



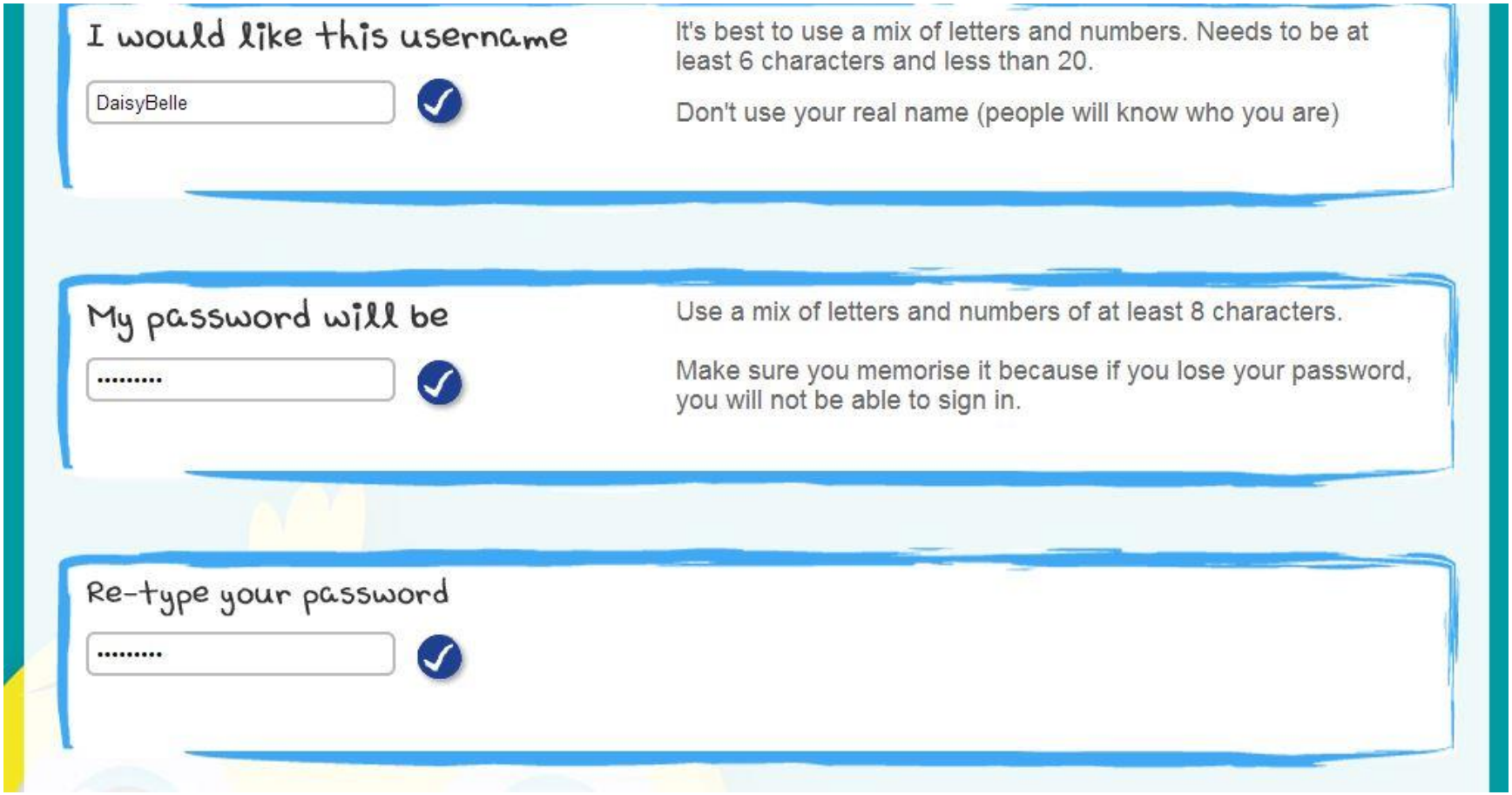
Choose the Area You Live In.....



Tell Us Something About YOU



A few more details....

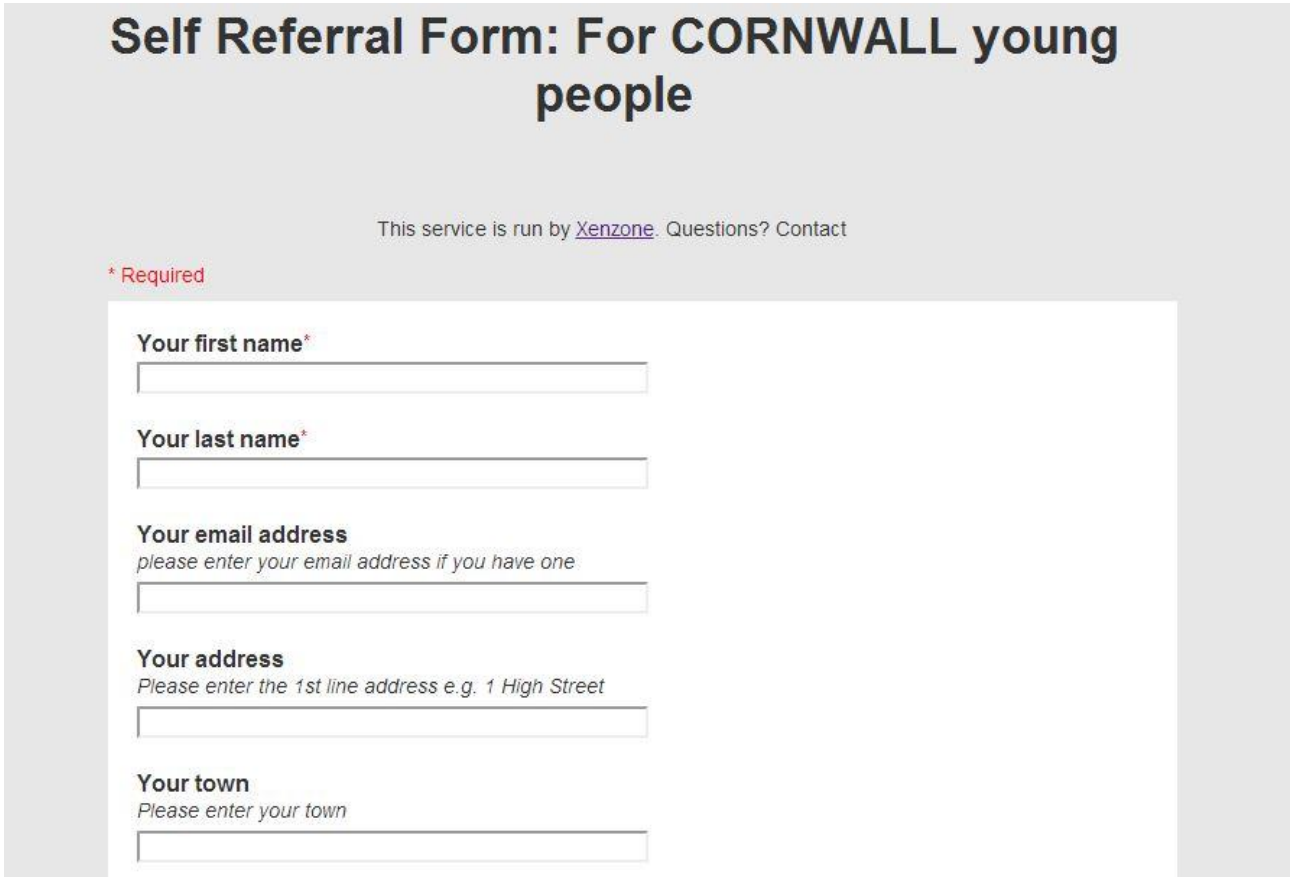


.....Don't use your real name

Now You're In.....


Change wallpaper
LINCOLNSHIRE DaisyBelle
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Home Messages Magazine Forum Links Log out
welcome to kooth :)
OPEN
Chat now
Meet the Team
MAGAZINE
Read our magazine
Take part in our forums
Activities
My magazine
when you follow magazine articles you'll see them here
My forum
when you follow forum posts you'll see them here
My goals
My journal
I feel

Face to Face Self Referral



Self Referral Form: For CORNWALL young people

This service is run by Xenzone. Questions? Contact

* Required

Your first name*

Your last name*

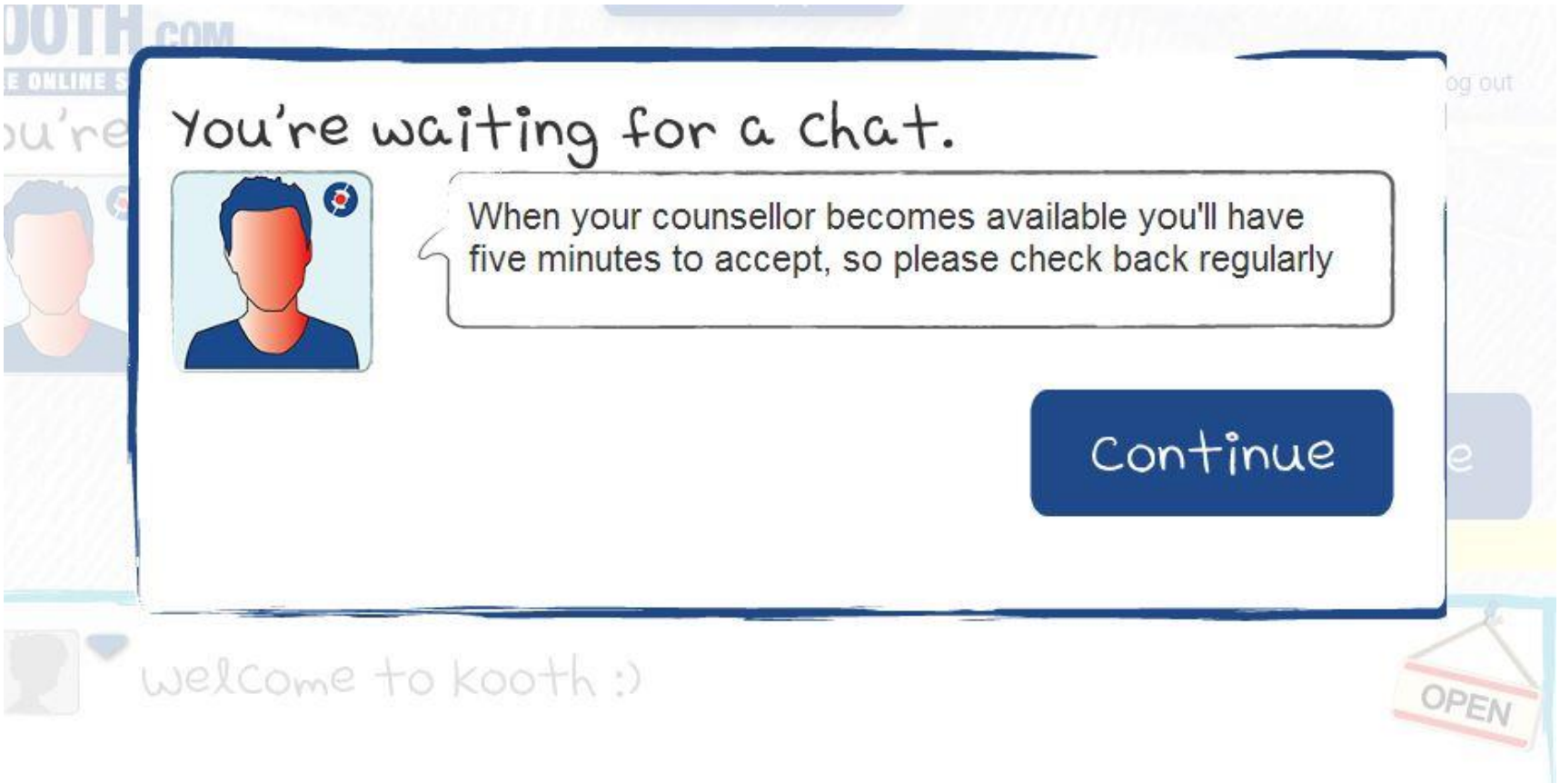
Your email address
please enter your email address if you have one

Your address
Please enter the 1st line address e.g. 1 High Street

Your town
Please enter your town

Just fill it in and press send

Press the red 'Chat now' button to talk to a counsellor



Remember.....

- A Counsellor will see you are in the queue and pick up from there
- It should be pretty quick but they might be just finishing a chat with someone else first
- The counsellors are available from 12 midday to 10pm Monday to Friday and 6pm to 10pm at weekends

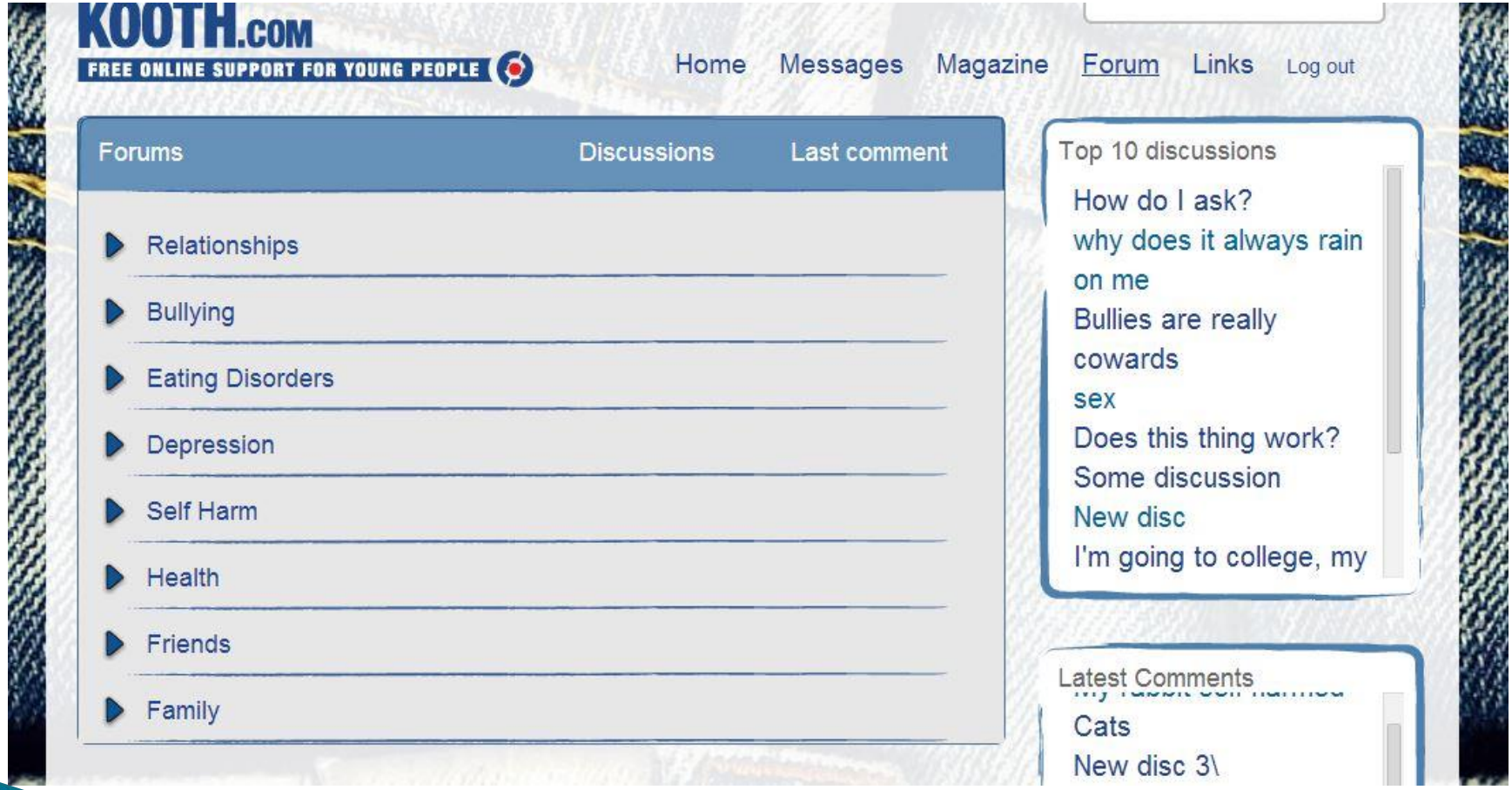
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Also.....

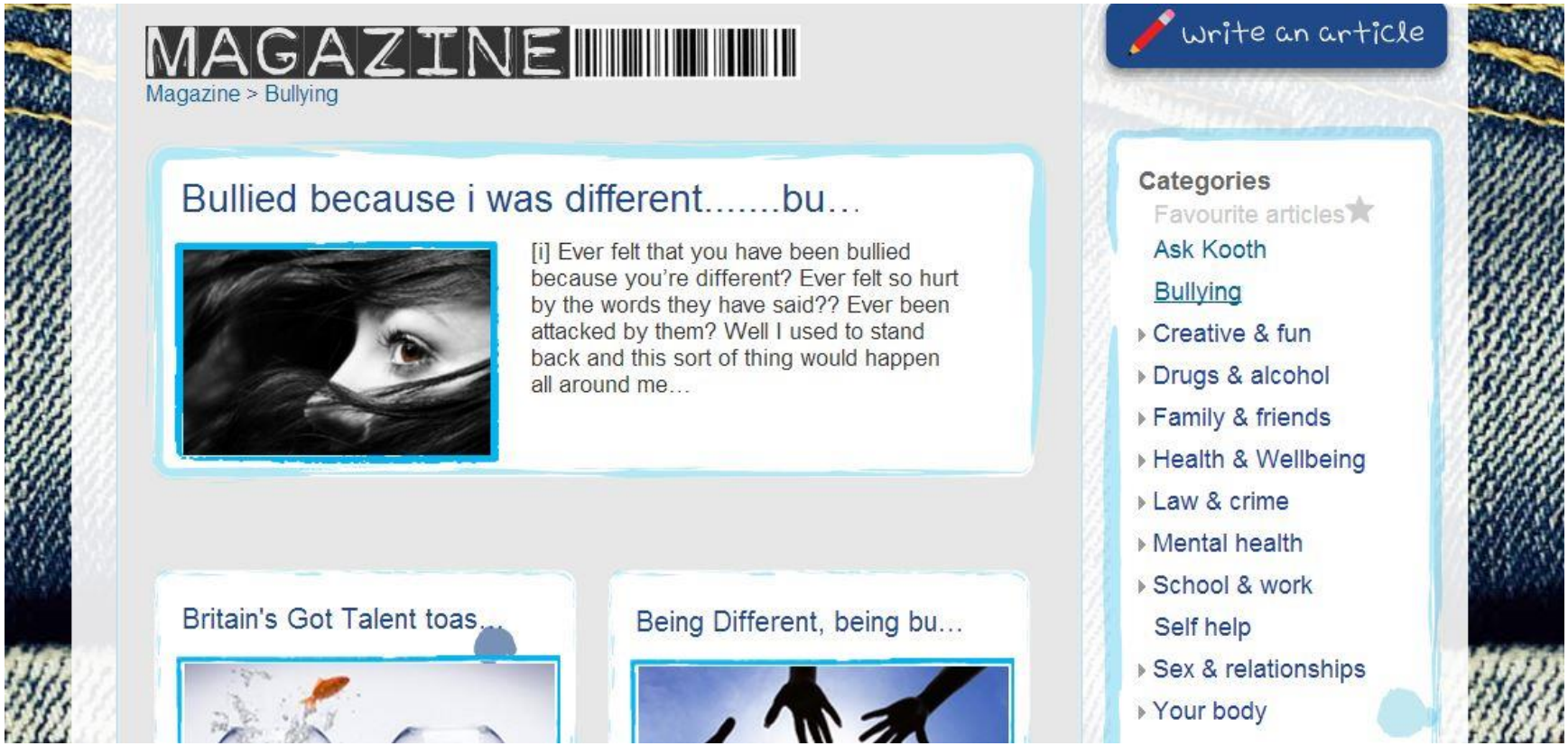
- You can access the rest of the site while you wait, check your messages etc
- A button will flash on screen when a counsellor has opened a 'room' to talk to you
- You can also send an email message if you prefer, either to the team or to a specific counsellor

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FREE ONLINE ADVICE FOR YOUNG PEOPLE

Forums….to help other young people and get advice yourself



Lots of different articles…



Make your own magazine by adding to your favourites

Lots of info and things to do



cCBT and self help resources

ALTERNATIVE THOUGHTS & ACTIONS

1. Dark or Distressing Thoughts	2. Alternative Thoughts	3. Alternative Actions
What are the thoughts (words, images, memories) that made me feel distressed?	*What I will tell myself (as reasonable alternatives to the distressing thoughts):*	*What I have done in the past that helped:*
		My coping resources:
	What would I say to a close friend who was feeling this way?	
		What I will do to help calm and soothe myself:
4. Call for help (if still necessary)		
If I still feel overwhelmed and out of control, I will I call, and/or go to:	*Coping statements, positive self-talk:*	
		What I can I do for the next 20 minutes (and give it my full attention):
E.g. Friend / relative, Health professional, Helpline (Samaritans 08457 90 90 90), A&E, 999	*What can I tell myself that will make me feel better, or remind myself of good things about me, my life, the future?*	*To help me cope, I can choose to do things for 20 minutes at a time. If nothing helps, then I can go to step 4*

…we can use the interactive panel to share worksheets with young people

Building more Evidence Bases – Symptom, Impact, Feedback, Goal and Global Tracking

		0	1	2	3
1	I feel sad or empty	Never	Sometimes	Often	Always
2	Nothing is much fun anymore	Never	Sometimes	Often	Always
3	I have trouble sleeping	Never	Sometimes	Often	Always
4	I have problems with my appetite	Never	Sometimes	Often	Always
5	I have no energy for things	Never	Sometimes	Often	Always
6	I am tired a lot	Never	Sometimes	Often	Always
7	I cannot think clearly	Never	Sometimes	Often	Always
8	I feel worthless	Never	Sometimes	Often	Always
9	I feel like I don't want to move	Never	Sometimes	Often	Always
10	I feel restless	Never	Sometimes	Often	Always

- Help!
- What is counselling?
- RESPECT your counsellor
- Confidentiality
- Complaints
- Tips and tricks

wirraltest hi Kevin

... kevin is writing a message ...

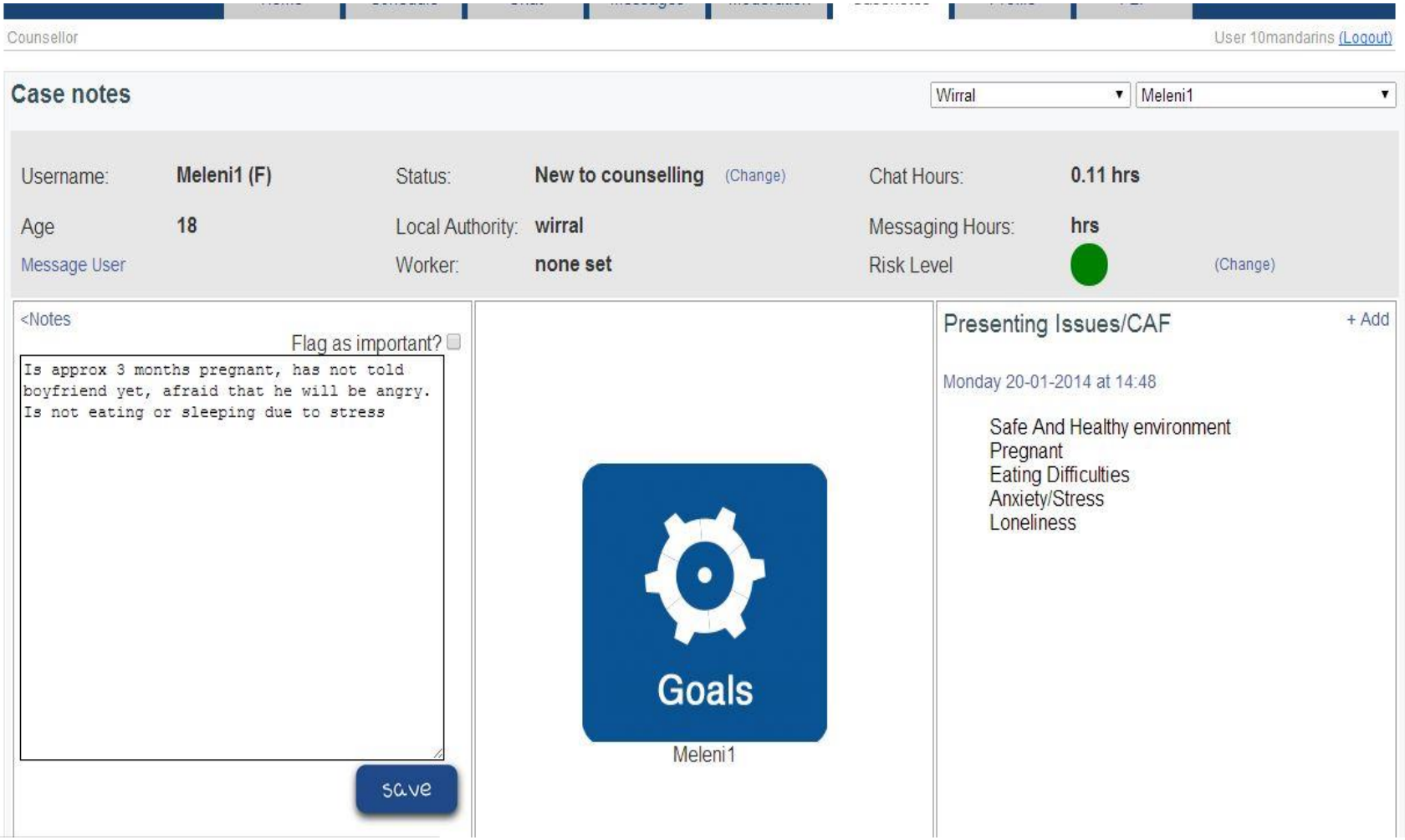
that we know how you are doing.
Thanks!

These questions are about how you have been feeling OVER THE LAST WEEK.
Please read each question carefully. Think how often you have felt like that in the last week and then put a cross in the box you think fits best.

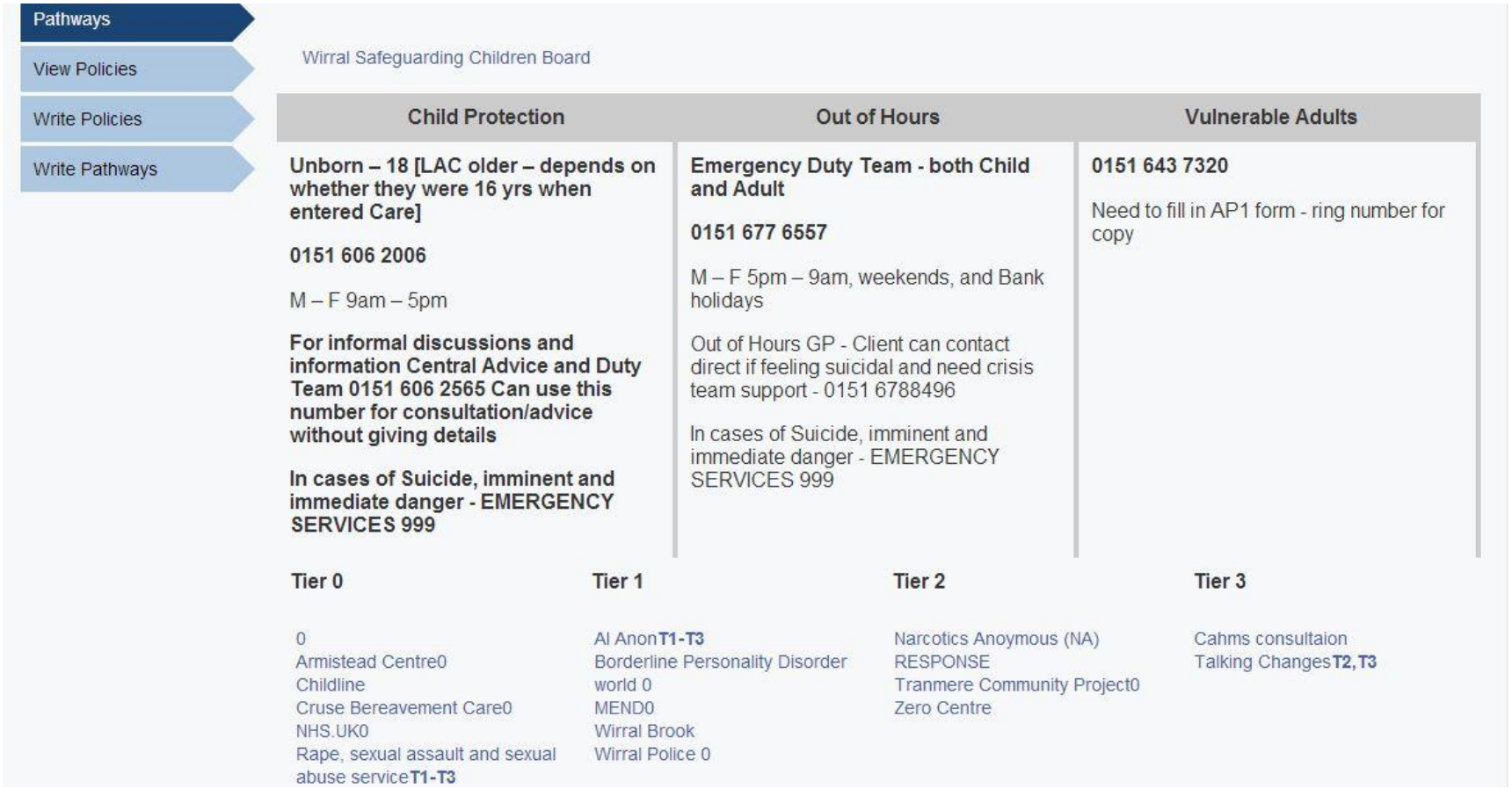
OVER THE LAST WEEK...	Not at all	Only occasionally	Sometimes	Often	Most or all of the time
1. I've felt edgy or nervous	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
2. I haven't felt like talking to anyone	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
3. I've felt able to cope when things go wrong	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
4. I've thought of hurting myself	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
5. There's been someone I've felt able to ask for help	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
6. My thoughts and feelings distressed me	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
7. My problems have felt too much for me	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
8. It's been hard to go to sleep or stay asleep	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
9. I've felt unhappy	☐ 0	☐ 1	☐ 2	☐ 3	☐ 4
10. I've done all the things I wanted to	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0

Thankyou for answering these questions

Casenotes


Counsellor
User 10mandarins (Logout)
Case notes
Wirral
Meleni1
Username: Meleni1 (F)
Status: New to counselling (Change)
Chat Hours: 0.11 hrs
Age 18
Local Authority: wirral
Messaging Hours: hrs
Message User
Worker: none set
Risk Level
(Change)
<Notes
Flag as important?
Is approx 3 months pregnant, has not told boyfriend yet, afraid that he will be angry. Is not eating or sleeping due to stress
save
Goals
Meleni1
Presenting Issues/CAF
+ Add
Monday 20-01-2014 at 14:48
Safe And Healthy environment
Pregnant
Eating Difficulties
Anxiety/Stress
Loneliness

Signposting



Pathways

View Policies

Write Policies

Write Pathways

Wirral Safeguarding Children Board

Child Protection	Out of Hours	Vulnerable Adults
Unborn – 18 [LAC older – depends on whether they were 16 yrs when entered Care] **0151 606 2006** M – F 9am – 5pm **For informal discussions and information Central Advice and Duty Team 0151 606 2565 Can use this number for consultation/advice without giving details** **In cases of Suicide, imminent and immediate danger - EMERGENCY SERVICES 999**	**Emergency Duty Team - both Child and Adult** **0151 677 6557** M – F 5pm – 9am, weekends, and Bank holidays Out of Hours GP - Client can contact direct if feeling suicidal and need crisis team support - 0151 6788496 In cases of Suicide, imminent and immediate danger - EMERGENCY SERVICES 999	**0151 643 7320** Need to fill in AP1 form - ring number for copy

Tier 0	Tier 1	Tier 2	Tier 3
0 Armistead Centre0 Childline Cruse Bereavement Care0 NHS.UK0 Rape, sexual assault and sexual abuse service**T1-T3**	Al Anon**T1-T3** Borderline Personality Disorder world 0 MEND0 Wirral Brook Wirral Police 0	Narcotics Anoymous (NA) RESPONSE Tranmere Community Project0 Zero Centre	Cahms consultaion Talking Changes**T2, T3**

KOOTH.com is Safe.....

- Everything is moderated and confidential
- No personal details or real names
- All the counsellors are trained, qualified and are used to working with young people
- If it was needed, we would talk to YP about face to face services as well as talking to us online

Harmless CIC

Naomi Stewart

Therapist/Suicide Prevention Worker

The Queen's Award for Voluntary Service

The MBE for volunteer groups

CPD CERTIFIED

The CPD Certification Service

Collective Mark

Harmless

support | information | training | consultancy

Who are we?

- Harmless was developed by people who understand self harm and the factors that increase the risk of suicide.

- We provide a service that is accessible, flexible and responsive to the needs of our client base.

- We invest time, building trust and working collaboratively with different agencies, groups and government bodies; developing key relationships that support positive engagement with our services and influence policy.

The Queen's Award for Voluntary Service
The MBE for volunteer groups

CPD CERTIFIED
The CPD Certification Service

Harmless
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What do we provide?

- Support for Adults and young people at risk of self harm or suicide
- Workshops for professionals, supporting them to work effectively with these issues
- Workshops for parents/carers
- Informal support

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The MBE for volunteer groups

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The CPD Certification Service

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What do we provide?

Preventative and post-ventative support; responding with immediacy where risk is identified and referrals are made to appropriate agencies.

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The MBE for volunteer groups

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The CPD Certification Service
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HARMLESS
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What do we provide?

The Harmless team collaborates with the media both locally and nationally, providing guidance where reporting has included explicit details or method of self harm or completed suicides.

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The MBE for volunteer groups

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Research and Outreach

On-going research is undertaken with partnership organisations to study the impact of self harm and suicide at an individual and societal level

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The MBE for volunteer groups

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The CPD Certification Service
Collective Mark

HARMLESS
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HARMLESS

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THE TOMORROW PROJECT

WORKING TOWARDS A BRIGHTER FUTURE

The Tomorrow Project
City Format

- Commissioned by Nottingham City CCG (May 2013).
- Primarily young people and those most at risk (including adults)
- Groundwork began immediately building relationships, contacting schools, colleges, and community groups.
- The city approach is to combine a preventative and post-ventative approach, without delivering a clinical tier, take the work out into the communities of need.

Harmless
support | information | training | consultancy
THE TOMORROW PROJECT
WORKING TOWARDS A BRIGHTER FUTURE

The Tomorrow Project
City Format

- Formal support: PSHE workshops for young people, professionals and parents around mental health and emotional wellbeing, resilience, increasing understanding of self-harm and suicide, promoting help-seeking and offering resources.

- Informal support: Drop-in sessions following on from workshops where individuals or small groups can discuss their concerns confidentially, and where non-presenting individuals can seek signposting.

- Information sessions for professionals (mainly within schools and colleges) to help them feel more confident working with self-harm and suicide.

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support | information | training | consultancy
THE TOMORROW PROJECT
WORKING TOWARDS A BRIGHTER FUTURE

The Tomorrow Project

- Delivery in educational establishments and community organisations have grown in demand and Workshops have been and continue to be delivered to young people parents/carers and staff.

- We have ongoing relationships and delivery across educational establishments within Nottinghamshire.

- Multiple other organisations are benefiting from meetings, discussions and delivery

Harmless
support | information | training | consultancy
THE TOMORROW PROJECT
WORKING TOWARDS A BRIGHTER FUTURE

The Tomorrow Project
Ethos

- Designing, developing and delivering an accessible suicide prevention service by working in community venues.

- Raising awareness and challenging stigma about mental health, self harm and suicide whilst enabling increased confidence to notice and understand risk indicators and act appropriately.

- Prompt post-ventative response to those individuals and communities affected by a death from suicide that recognises a 42% risk of further death amongst a community affected by suicide.

- Hope, empowerment, recovery.

HARMLESS
support | information | training | consultancy

THE TOMORROW PROJECT
WORKING TOWARDS A BRIGHTER FUTURE

The Team

- Caroline Harroe, Service Manager
- Darren Whelband, Business Manager
- Adrienne Grove, Clinical Coordinator/Therapist
- Satveer Nijjar, Trainer
- Naomi Stewart Suicide Prevention Worker/Therapist
- Val Stevens Suicide Prevention Worker/Therapist
- Hayley Green Administrator
- Pip McWilliams Administrator

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THE TOMORROW PROJECT
WORKING TOWARDS A BRIGHTER FUTURE



sharp

Self Harm Awareness & Resource Project

NHS
Nottingham City
Clinical Commissioning Group

SHARP Objectives

* **raise awareness**,

build confidence and **skills** and **provide support**

to front-line service providers and professionals

to intervene and manage young people who

present with self harm and suicidal behaviours

* SHARP Practitioners will also provide children and young people with opportunities and strategies for hope and recovery from the effects of self-harm and minimise the risk of future harm.

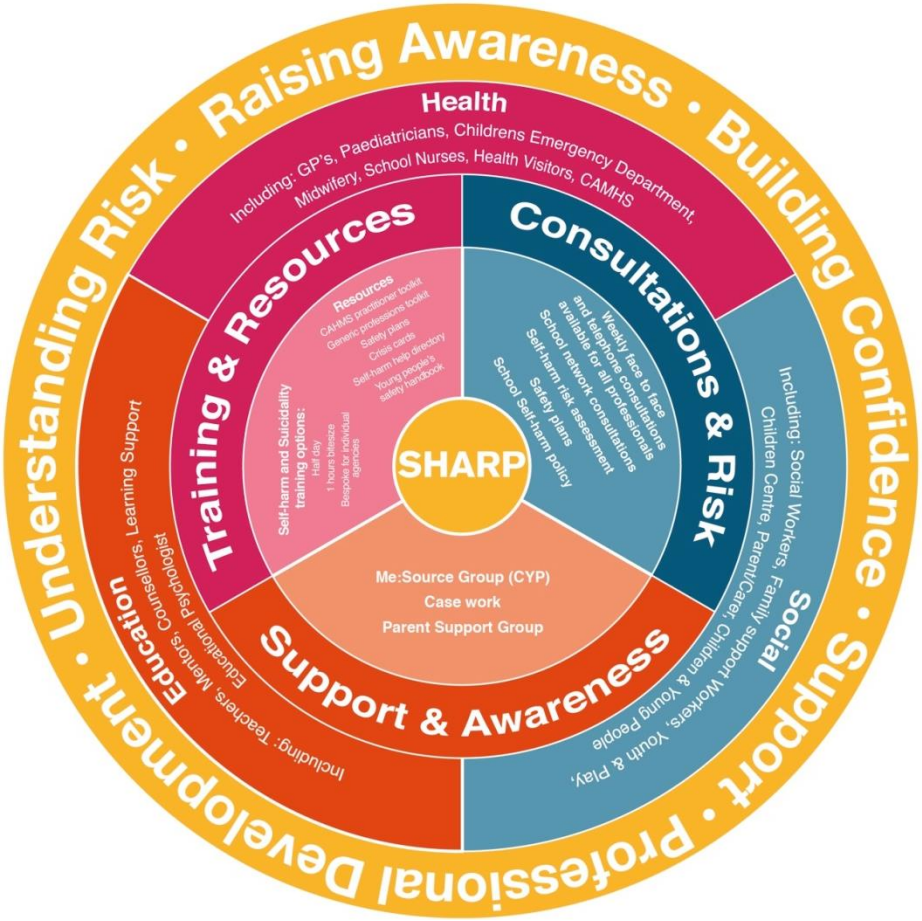
CYP presenting at QMC

Between 2012 – 2013 there was a 54% increase in CYP presenting and QMC, with 275 CYP being seen in 2013

Between May –Jul 2013 & May-July 2014, there has been a 33% decrease in presentations

(source – CAMHS Specialist Self Harm Team)

The SHARP model



Training

'All staff that come in to contact with people who self-harm, in any setting, need dedicated training to equip them to understand and care for people who have self-harmed.' *NICE 2013.*

Training offered	No. of attendees	% increase in knowledge
NCC Training – 3 Modules (Self-Harm Awareness, Suicide Everybody's Business & Pathways and Interventions)	149	84.96%
School Health Training	24	69.23%
School Bitesize - Self-Harm Awareness	137 (9 schools)	70.77%
Emergency Department Mentoring Session – Self-Harm Awareness	25	100%

Consultations

"reassuring that I'm on the right track"

* Offer **support, guidance and resources** to any professional working with a CYP who presents with self-harm or suicidal behaviours
* Facilitate reflective space to ensure CYP needs, strengths and risks are harnessed and appropriate support is offered
* Average score of 9/10 on scale of helpfulness by professionals (0- not helpful, 10 - very helpful)
* Contact us on 0115 8764000 for face-to-face or telephone consultation

"useful to have space to reflect on the issues"

Clinics

* Piloted in 5 secondary schools between March 2014 – July 2014
* Working preventatively to support CYP presenting with self-harm / suicidal behaviours by **completing a risk assessment with the young person, providing a brief intervention and make further recommendations for school and wider network to support**
* 43 young people accessed clinic
* 14 schools confirmed for clinics from Sept 2014
* **"Extra support to pupils by professionals who are experienced in the area has really helped and students have all given positive feedback"**

Support for Schools

* SHARP have developed a school self-harm policy with support from Trinity School and the CAMHS Self-harm team
* This document will be implemented in all Nottingham City Secondary Schools once it is ratified by the Nottingham City Safeguarding Children Board
* Bite-size training will be delivered to all schools around this document

Joint protocol
- CAMHS and Social Care

* This protocol aims to promote effective joint working between Nottingham City Children's Social Care and CAMHS, to ensure a coordinated approach to self-harm where there are also Child Protection or safeguarding concerns (e.g. domestic violence)
* Joint visit between Practitioner and Social Worker within 48 hours
* Risk assessment of self-harm should take place to ensure that the child or young person gets timely and appropriate support
* Identify level of risk and offer recommendations with appropriate and timely referral to CAMHS or other relevant agencies

SHARP Resources

* Practitioners risk assessment
* CAMHS Practitioner toolkit
* Young persons safety plan
* School self-harm policy
* School safety plan
* Safety in the home
* Professional consultations (phone and face to face)
* Young persons ME:Source booklet

sharp

SELF HARM AWARENESS & RESOURCE PROJECT

* We are based at Glenbrook and offer a city wide
* Service



0115 8674000



Camhs.Sharp@nottinghamcity.gov.uk

Healthy School Status

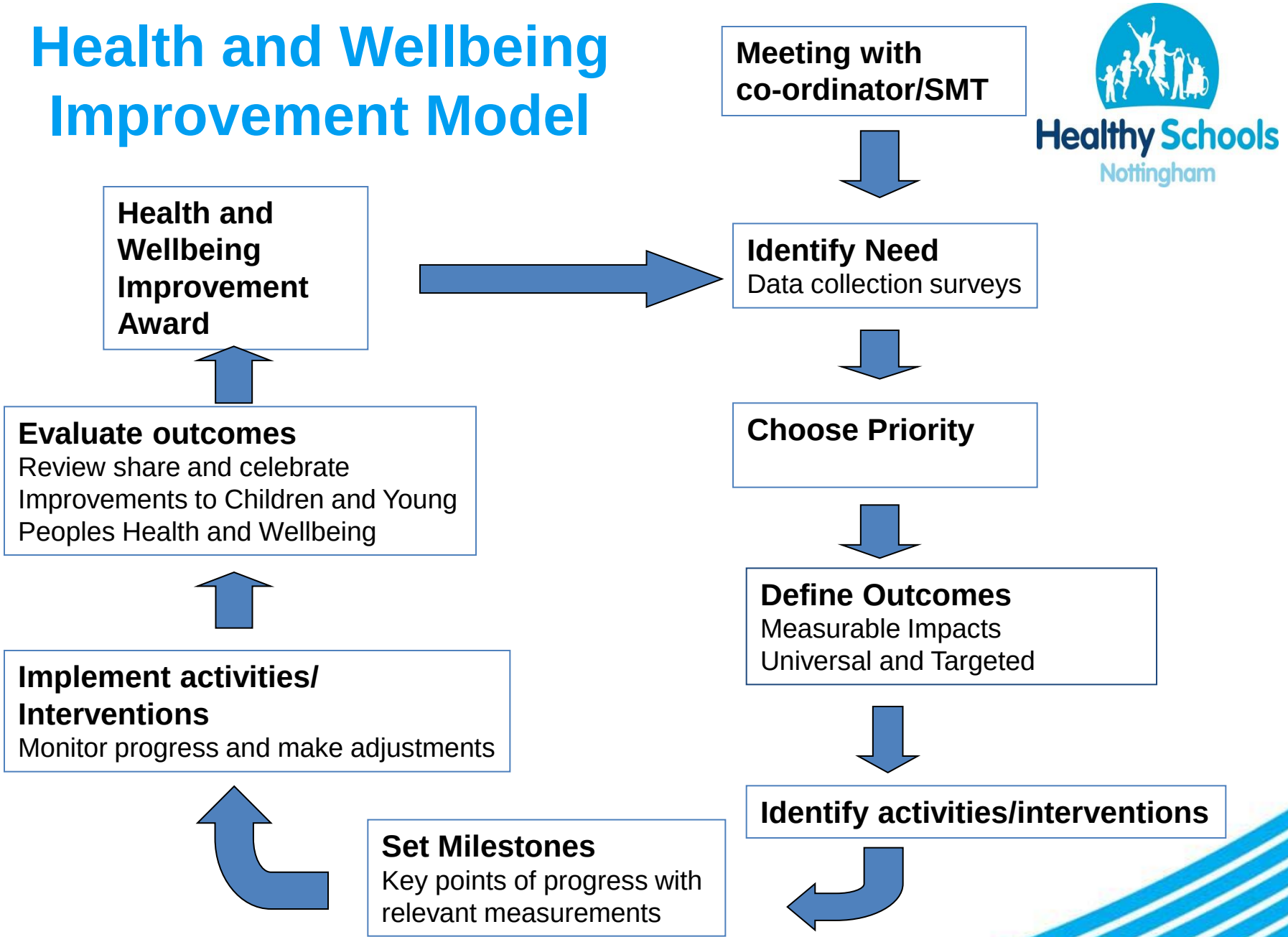
Biannual review for all schools

(Healthy Schools co-ordinators are asked to evidence the following in relation to PSHE, SRE, EHWB and Physical Activity)

Whole Schools Approach to Emotional Health and Wellbeing

1. **Leadership, management and managing change** (Who? and How?)
2. **Policy development** (Eg. Safeguarding, Anti-bullying, Confidentiality)
3. **Learning and teaching, curriculum planning and resourcing** (Schemes of work for PSHE, SEAL etc and external providers)
4. **School culture and environment** (including nurture groups, safe spaces, relationships within school)
5. **Giving children and young people a voice** (responding to views and pupils having responsibilities)
6. **Provision of support services for children and young people** (links with specialist services and knowledge of referral pathways)
7. **Staff continuing professional development (CPD) needs, health and wellbeing** (including staff as role models)
8. **Partnerships with parents/carers and local communities** (communication and support)

Health and Wellbeing Improvement Model



Health Improvement Model

Healthy Schools Nottingham

Examples of Outcomes based on behaviour change

- Increase in the number of children who take part in play activities
- An increase in the number of children who discuss sensitive issues with a designated adult
- A decrease in the number of bullying incidents at playtime
- Increase the number of pupils who have responsibilities within school

Examples of Outcomes based on pupil perceptions

- Decrease in the number of children who perceive bullying as a problem in school
- Increase in the number of pupils who feel confident to approach the school nurse

Examples of Outcomes for vulnerable pupils

- Increase in the number of vulnerable children who report that they enjoy school
- Increase in the level of support offered to ‘at risk’ pupils in relation to emotional health and wellbeing

Planning

Emotional Health and Wellbeing

Outcome- quantitative
To raise attendance from 93% to 95%

Outcome – qualitative
To increase the percentage of children who feel good about themselves from 66% to 90%

Outcome - targeted
Increase number of vulnerable children who enjoy school from 70% to 100%

Activities

•School incentive system for good attendance reviewed with pupils
•Whole school attendance displayed weekly for parents and pupils
•'Attendance Ted' awarded each week to the class with the highest attendance
•Rewards in place for 100% attendance
•Greater awareness amongst children that attendance is important
•Weekly meetings between the learning mentor and head teacher to discuss attendance
•Data compiled into reports so that patterns for poor attendance can be analysed
•Parent meetings set up for children who have more than 5 days unauthorised absence
•Attendance has risen to 95%
•An effective school council has been re-established
•A stepped increase in the number of children who feel that they have someone in school that they can talk to about relationships
•A stepped increase in the number of children who feel that they are taught how to feel good about themselves
•A range of strategies adopted in classrooms to raise self-esteem
•Creative curriculum reviewed with staff and pupils
•Increased awareness among staff of the needs of our most vulnerable children
•Increased participation by most vulnerable children in opportunities outside of the curriculum
•Participation by most vulnerable children in an outdoor learning programme.
•An increase from 57% to 80% of the most vulnerable children reporting that they enjoy school.

Healthy Schools Team

- Healthy Schools officer for every school
- One to one consultations with staff
- Signposting to partners
- Staff Training
- Pupil Consultation
- School Council Training
- Parent sessions
- Resource development
- Specialist SRE support from SRE Consultant

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CityCare
Building Healthier Communities

Nottingham School Nursing Service

Nottingham City Council

Health Improvement Co-ordination Team

Helen Bradley – Health Improvement Co-ordinator

Delivered by Nottingham Citycare Partnership on behalf of Nottingham City Council

The Strategic Drivers

- **'Getting it right for children, young people and families. Maximising the contribution of the School Nursing Team: Vision and call to Action'.** (Department of Health, 2012)

- **'Maximising the School Nursing Team contribution to the public health of school-aged children'.** (Department of Health, Public Health England, 2014)

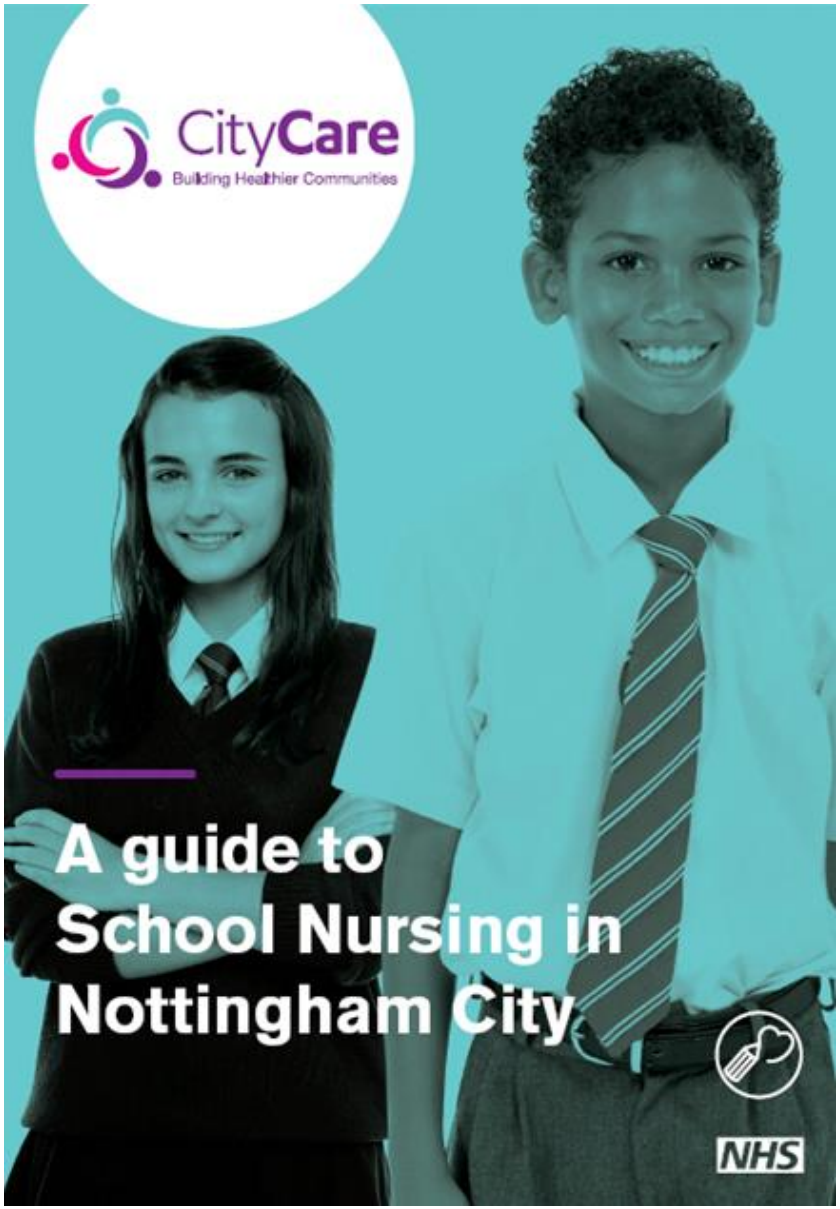
- **Review of Nottingham City School Nursing** (Nottingham City Council, 2014)

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Nottingham School Nursing Service

- The most qualified and experienced nurses supporting families with the greatest need
- Early identification of vulnerable families through transfer of care from Health Visiting
- Holistic health assessment to identify those who require additional support
  - Reception
  - Year 7
  - Year 9

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Health Improvement Co-ordination

- **Priority areas** :
  - Emotional Health and Wellbeing
  - Healthy Weight
  - Sexual Health and Relationships
- **Training**
- **Project development**
- **Co-ordination of campaigns**
- **Providing service information to schools & school health teams**
- **Partnership working**

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‘Rise Above’



Improving mental health and wellbeing and emotional resilience of young people aged 11 – 19 years.

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Discussion session 2:

How can you start to incorporate early intervention and primary prevention of children's emotional health and wellbeing in your work setting and what do you need to do to get this started?

Nottingham City Council