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The School Wellbeing Service (SWS) is a school based early intervention mental health (MH) support service. The service has 6 School Wellbeing Workers (SWW) linked to the 6 geographical school clusters across the city. The SWW are managed by the Local Authority, based in schools and clinical supervised by CAMHS. The service has 3 key outcomes. The progress and achievements against these outcomes for the first full year of delivery are outlined in this short report.

The three service outcomes are:

1. School staff will have increased knowledge and confidence in supporting children and young people (cyp) with emotional and mental health issues.
2. Children and young people are identified early and supported effectively within school to prevent needs increasing and the requirement for specialist intervention where appropriate
3. Increasing number of children and young people that feel more able to cope with mental health issues within a school setting

For further information and detail please contact William Shaw Project Lead William.shaw@york.gov.uk

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Outcome one: School staff will have increased knowledge and confidence in supporting children and young people with emotional and mental health issues.			
	Key performance indicator	Management Information	Measurement capture
a	Number of school staff reporting increased confidence and knowledge	<ul style="list-style-type: none"> – Mental health training delivered – Number of school staff accessed training – Number of school staff reporting increased confidence and knowledge following training – Number of school staff reporting increased confidence and knowledge following working alongside SWW in schools 	<ul style="list-style-type: none"> – Staff pre and post questionnaire – Training evaluation questionnaire – Spreadsheet / database – Case studies – Stakeholder feedback

Training delivered and number of schools staff accessing training

- Mental health awareness training delivered 25 schools to 423 school staff
- Whole School Approach training – Relax Ed and Worth it has been delivered to 49 school staff across 19 different schools with representation from all clusters

Increase of knowledge and confidence following training

- Schools staff reported a 20% increase in knowledge and a 10% increase in confidence to support children and young people (cyp) more effectively following training. This is based on pre and post evaluation questionnaires.

Increase of knowledge and confidence following working alongside School Wellbeing worker

- 70% of school staff (who completed the staff survey) said the service had increased their knowledge and confidence. This is based on the pre / post staff survey
- School staff have fed back that they feel more confident in supporting cyp around areas of self esteem, attachment, bereavement, low mood, anxiety, depression and emotional regulation. Confidence has not increased significantly in other areas including; anger, social communication, self harm, eating disorders, resilience and body confidence.

Case study

A Y3 pupil with a diagnosis of Aspergers whose parents were struggling to manage the child’s behaviour at home due to emotional outbursts and issues with sleep. There had been input from ASC specialist teacher. School SENCO requested a consultation, and an intervention around emotional literacy an regulation was put in place co-delivered by SWW and ELSA lasting 3-4 sessions. A parent consultation too place prior to the intervention and advice and

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strategies were given to parents post intervention as well as an ongoing support plan suggested for school. Parent fed back to school that intervention had made a significant impact at home and child had begun to sleep better.

Stakeholder feedback

'I'd like to say how much we value working with the well being service and what an excellent idea the programme is. The existence of your service and the has made a huge difference and is so useful and reassuring to have others in the field to work with and refer to and to increase our own capacity' Teacher

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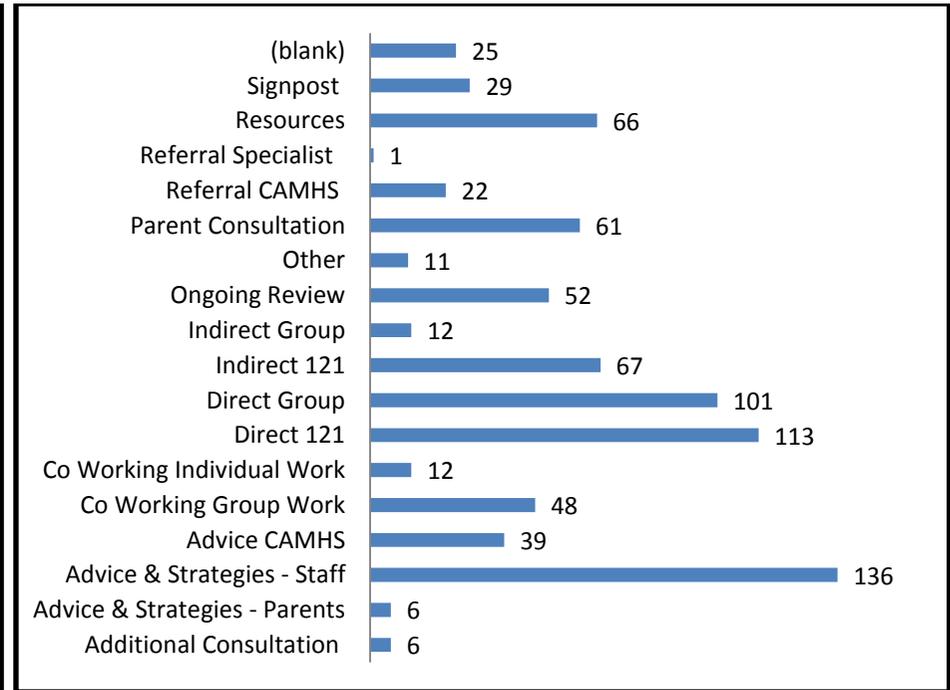
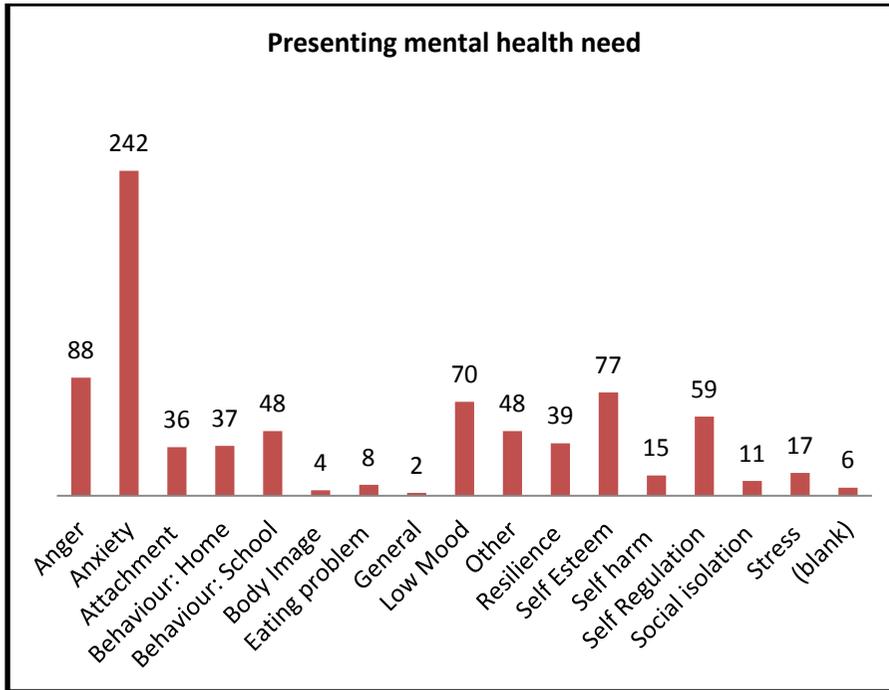
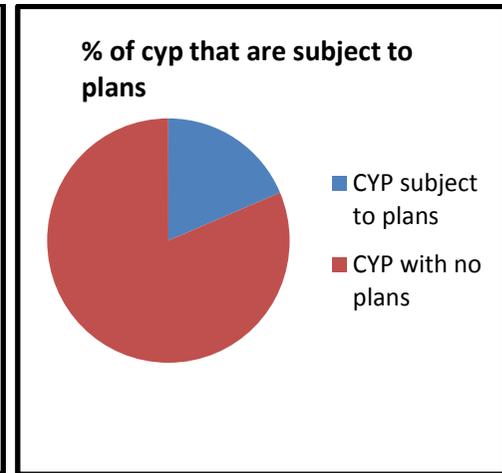
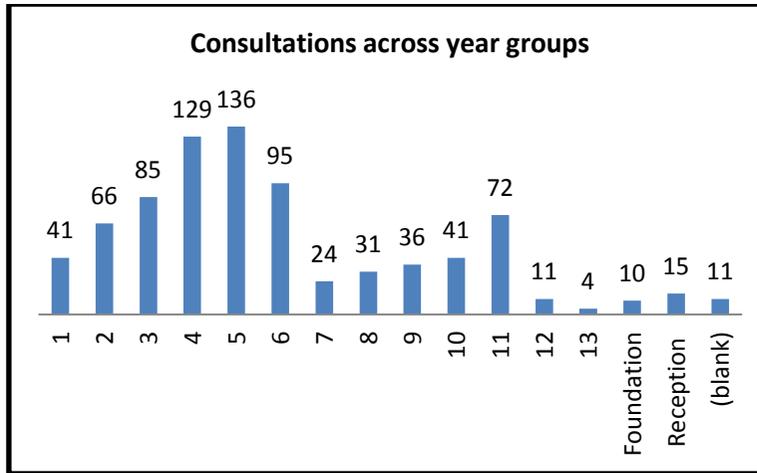
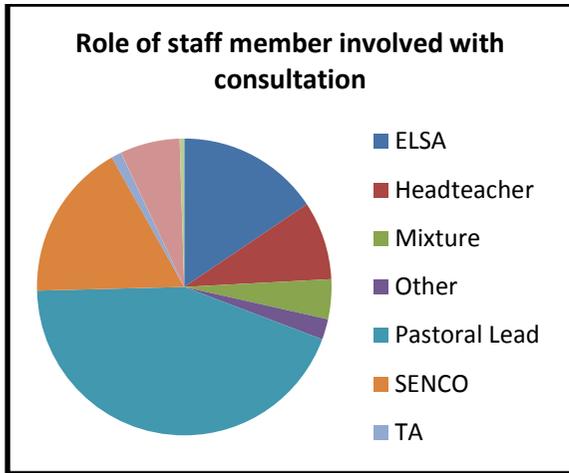
Outcome two			
Children and young people are identified early and supported effectively within school to prevent needs increasing and the requirement for specialist intervention where appropriate			
#	Key performance indicator	Management Information	Measurement capture
b	Number of consultations taken place	<ul style="list-style-type: none"> – Number of consultations – Staff member (s) involved with consultation – Number of consultations in each year group – Number of consultations with children and young people subject to plans – Predominant presenting issue / need for consultations – Outcome of consultation ie direct work / signposting / referral to CAMHS 	<ul style="list-style-type: none"> – Consultation forms – Spreadsheet / database – Case studies – Stakeholder feedback
c	Number of children and young people accessing support	<ul style="list-style-type: none"> – Number of children and young people accessing direct work – Number of children and young people accessing 1:1 support in each year group – Number of SWW direct / non direct 1:1 support 	<ul style="list-style-type: none"> – Consultation forms – Spreadsheet / database – Case studies

- **807** Consultations have taken place across the academic year in every school across York, with the exception of Westfield Primary, Danesgate, Applefields Schools
- **370** children and young people have received direct work to support their mental health
- **220** children and young people have received individual support **150** children and young people have been part of group work
- The average pre SDQ score for direct work is **17.3** and post is **15**. This is compared to the average SDQ score across the whole city school population of 10.2 for year 8 and 11.4 for year 11. SDQ classify a score of 16-19 as borderline and 20-40 as abnormal mental health.

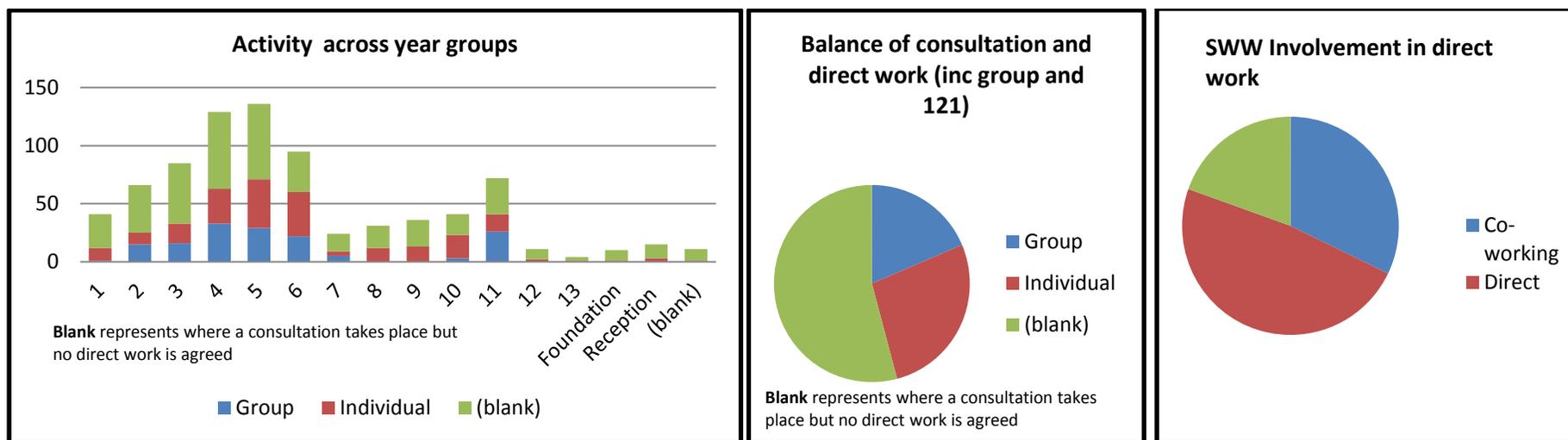
Case study

Year 5 child struggling with identity and with a history of anxiety (previously had been under CAMHS). School requested a consultation as the child had been unhappy and some of his anxious behaviour had escalated significantly to the point mum was seeking a CAMHS referral. A parent consultation took place and 6 sessions took place utilising a CBT approach around anxiety focusing on feeling associated with family and change. Feedback was provided to the family with advice and strategies. School were able to continue to provide support. SDQ score was reduced and family felt more able to manage.

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Service impact on specialist CAMHS

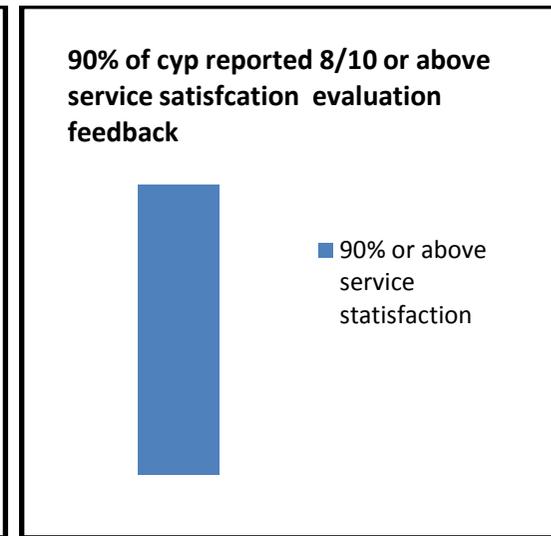
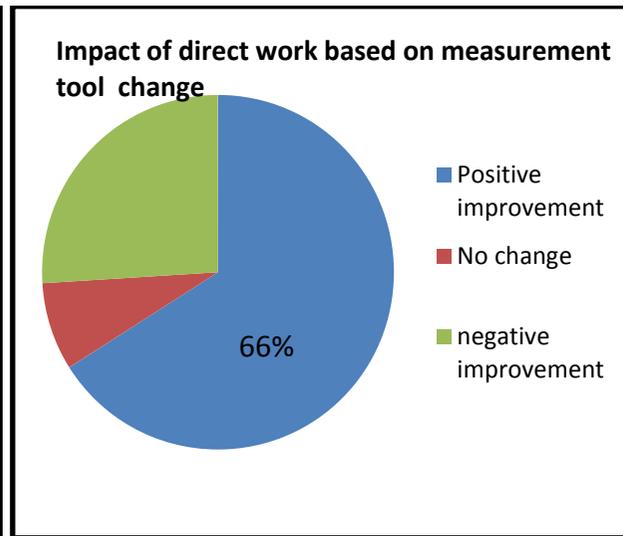
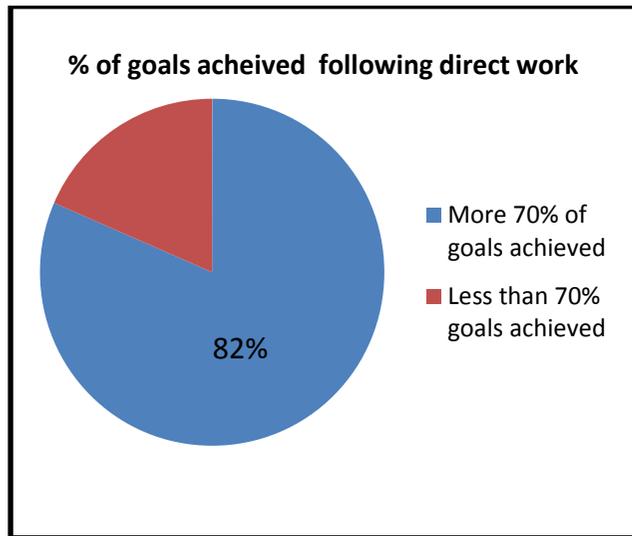
- 36 referrals have been made to CAMHS following consultations and or direct work. This represents 4% of the contact of the service with children and young people
- School staff rated **8/10** the specific support that the service has provided to schools in relation to referrals to CAMHS.
- When school staff were asked whether the support, information and intervention from the School Wellbeing Service had reduced the number of referrals made to CAMHS this academic year, **28% said yes**, 15% no, 40% stated that it was too difficult to tell at this stage, 17% did not answer.

Stakeholder feedback

‘The service has provided another layer of support before considering referrals to CAMHS. It has given us a better understanding of services available and thresholds required for referral to CAMHS, which has prevented some cases from maybe progressing more quickly to CAMHS. Parents have also appreciated an opportunity to access support from a professional in school prior to considering a referral to CAMHS’ Primary Headteacher

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Outcome three			
Increasing number of children and young people feel more able to cope with emotional and mental health issues within a school setting			
#	Key performance indicator	Management Information	Measurement capture
d	Number of children and young people reporting increased wellbeing and resilience	<ul style="list-style-type: none"> – % of children and young people where goals have been achieved – % of children and young people with measurement tool increase – % of children and young people reporting satisfaction with the service 	<ul style="list-style-type: none"> – Measurement tools – goal, SEB, SDQ – Evaluation questionnaires – Stakeholder feedback



Case study

A year 6 girl had suffered a bereavement and consequently presented very low in mood, withdrawn and anxious. She was not comfortable in school and would physically try to escape. School had implemented a plan to support the young person which involved the ELSA and Headteacher and parents, but this was proving unsuccessful. The SWW worked 121 with the young person for 8 weeks. The SWW used art therapy and DDP techniques to engage the young person. Solution focussed practice was also used in combination with a ladder plan from school. The young person gradually built up the time she spent in school each week to be able to feel comfortable being in school for a whole day and spending time in her classroom environment. Impact was measured using SEB and SDQ tools. These measurement tools along with evaluation feedback demonstrated an increased resilience and improvement in her overall mental health.

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Stakeholder feedback

Young people

- 'I put one of my sayings as 'I can do this!' because in a lot of situations I think 'I can't do this' and I would like to make myself believe 'I can'
- 'I think this has really changed how I think about myself'
- 'Thank you for coming in and helping us all to deal with our problems. I had a great time and have made new friends thanks to you. I really appreciate everything you have done and all the time you have put in'

Parents

- 'I got the pack from the sessions with the SWW. Thank you. It looks very interesting and for feedback purposes he loved the programme. The content was brilliant and totally tailored for him via WWE and Harry Potter which is brilliant and it had him engaged from week one'
- 'Thank you for helping me get my little girl back'