

Improvement: Co-design of health contact for children aged seven to eight Project team: Helen Sharman, District Manager, Kent School Health and Halfway Houses Primary School We Care Ambition: Putting communities first



Problem statement: National guidance recommends a health contact for children aged seven to eight-years-old, to support building emotional resilience. Currently, Kent School Health (KSH) does not provide this contact and following research is not aware of any other school health service in the country which is providing this contact. Engagement sessions took place with two year three classes. Thirty-eight per cent of the children requested that a health contact was delivered in the form a leaflet.

Since the pandemic, referrals into KSH have increased for both general and emotional health. To ensure that the leaflet captured the needs of the children, engagement sessions were held to identify what health concerns matter to them. The top three of each of these concerns formed the main content of the health leaflet.

SMART aim: To co-design and pilot a health contact in three schools, for children aged seven-eight, which will increase visibility and accessibility of Kent School Health (KSH) and increase the resilience and wellbeing of this cohort of children, by December 2023.

Measures to track improvement:

- Increased visibility and accessibility of Kent School Health Number of referrals into the service from pilot schools pre and Feedback pre and post leaflet, dip test questions to evaluate post leaflet, dip test questions asked to teachers, special educational needs co-ordinator (SENCO) and parents.
- Patient experience

Feedback from teachers, year three children and parent and carers on health contact content and layout Feedback received following intervention by KSH.

Better Health Outcomes - Building Resilience and wellbeing in children

knowledge on healthy lifestyles and self-help strategies to build resilience and wellbeing.

Data:

38% of children requested a health contact in the form of a leaflet.

Increased visibility

Between March and May 2023, KSH received 18 referrals, from the three schools (two schools in quintile two and one school in quintile one). Eleven of these referrals were completed by the school and three were from parent/carers.

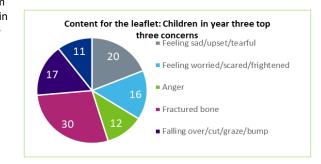
Better Health Outcomes

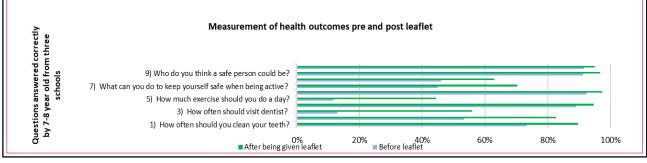
Data showed the children also had physical health concerns. Content of the leaflet was then adjusted to incorporate appropriate support.

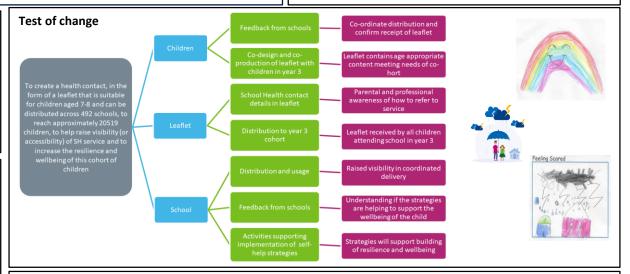
Patient experience

- 93% of children liked the leaflet
- 92% of children said they would complete the activities

- 81% of children said the activities would help them 'this breathing thing will help me when I get angry'
- Before the pilot 1/7 teachers knew how to contact KSH
- Following the pilot 7/7 teachers knew how to contact KSH







Results, what we learned and what's next:

Overall average improvement in health outcomes = 19%

Parent case study highlighting the need to raise visibility

"My child really struggled in year three because of anxiety and bullying. He started to refuse to come to school after that and had to be dragged away from me at the playground. Only after struggling with this for some time did I hear from a SENCO about an online parenting course. The only problem was that it was over the summer holiday. The course didn't work for me because it was the wrong time. If it is the holidays and my child is happy because they are not near the problem, then how can I test strategies and see if they are working? I felt really alone and would have liked support but I did not know about school health. I would have contacted you if I knew and would be happy for support in any way."

Teacher feedback post leaflet

- "the children loved the activities"
 - "I knew about KSH, but I did not realise you offered support to all year groups. I thought it was just year R and year 6"

Raise visibility and accessibility

Letter created for parents, carers and teachers to introduce and explain leaflet

What's next:

- Roll out contact across 492 Kent schools, reaching approximately 20,000 children.
- Create assembly to support delivery in high need areas
- Continue to measure visibility by monitoring referrals into service and use feedback to evaluate reach and impact.