

Southwark Governors' Association

25 March 2021



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Welcome and introductions

Martin Deutz, Chair

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Agenda

18:00 Welcome from **Martin Deutz**, Chair,

Kevin Morris, Assistant Director of Schools and Learning

18:20 **PART I: Annual General Meeting**

18:25 **Transformation of the school meals service in Southwark**, Myles Bremner

18:35 **The impact of Covid-19 on child development, achievement and mental health & wellbeing**,

Marsha Douglas & Jesvir Dhillon, Southwark Educational Psychology Team

19:00 **Children's and young people's mental health in 2021 - Preparedness**,

Cath Connolly, Systemic Psychotherapist

19:20 **The scale of the problem in Southwark – attendance, exclusions & referrals**, Shane Steere-Jones & Kelly

Wilson, Southwark Family Early Help Team

19:35 **Panel Q & A**

20:00 AOB and close

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Message from Kevin Morris, Assistant Director for Schools and Learning

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Annual General Meeting

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AGM

- Chair's report
- Elections for the management committee
- Election of Chair
- Election of Vice-Chair/s

Southwark School Meals Transformation

Presentation to
Southwark Governors' Association

Southwark Public Health Division

25 March 2021

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Improving children's health by transforming Southwark's school food

What is the Southwark School Meals System Transformation Programme?

- An ambitious 4-year programme from the Education and Public Health teams - aimed at supporting schools in improving the nutritional quality of school meals in Southwark.
- Building on the significant financial investment that Southwark Council makes in its Free Healthy Primary and Nursery school meals scheme, the programme aims to:
 - Inspire change by establishing a network of Flagship schools and organising sharing and learning visits and events
 - Boost knowledge and skills with a targeted training and support programme targeted at school Business Managers
 - Improve coordination between schools; driving value for money and improving efficiencies with a move towards pooled procurement and co-ordinated commissioning.

The Transformation Journey:

From a fragmented school food system:

- Multiple types of arrangements and caterers
- Delivering variable nutritional quality
- Not always reaching those most in need
- Not providing best value for money

That will be transformed by:

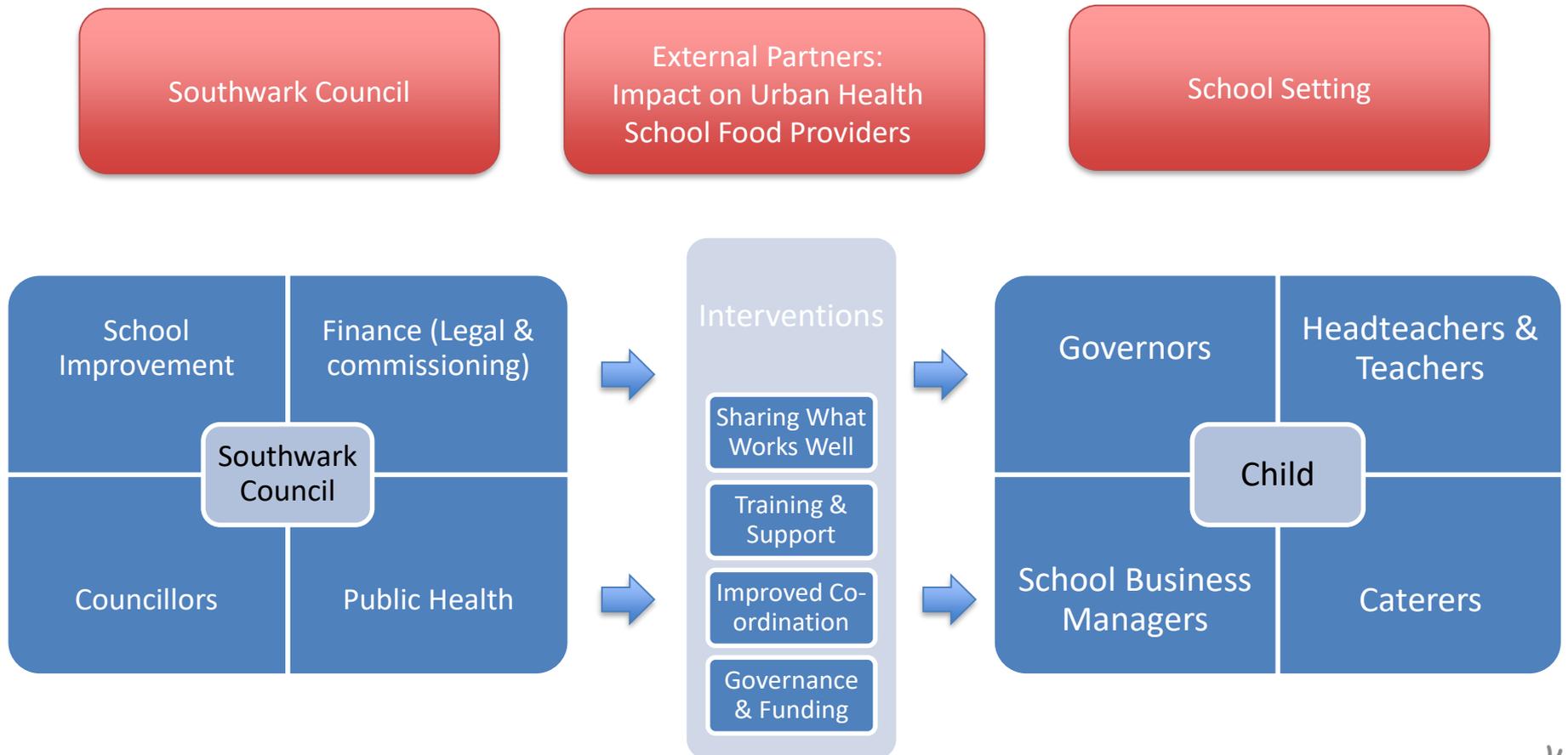
- Supporting schools to share what works well
- Investing in targeted support & training
- Improving co-ordination by moving towards a centrally commissioned school food offer
- Putting into place effective governance & accountability mechanisms

Delivering a vision where all Southwark children enjoy a healthy lunch:

- Improving children's health & wellbeing
- Addressing disadvantage and tackling inequalities
- Providing more social value through jobs and the local economy

A multi stakeholder programme

Engagement with other community managed school food projects will maximise the collective impact of this Programme and wider activities



The Importance of good school meals

Why should school governors be involved?

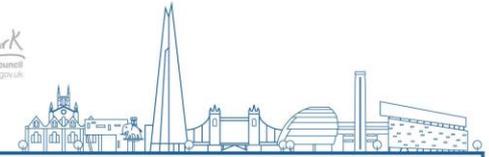
- The COVID-19 pandemic has highlighted the real need for healthy school meals as well as the fragility of the school food system. Within this context it is important for school governing bodies to understand and ask questions about school meal provision in their school.
- Governors are accountable for three specific areas which relate to school meals:
 - *Promoting pupil physical and mental health and emotional wellbeing* – school meal provision together with school food culture are critical to achieving this.
 - *Financial oversight* – school meal funding represents both a significant income stream and major spending area. Schools report a lack of clarity about income, spending and accountability.
 - *School food provision* - specifically how schools ensure they are meeting the quality standards set out by national [DfE guidance](#) as well as the specific water and dessert policies introduced by Southwark Council.

Support from Southwark School Governors is important

What would we like your help with?

1. Encouraging and supporting your schools to get involved in the Programme when it launches later in the Summer term– so that we can make sure all Southwark school meals are healthy and nutritious, have high take-up rates and provide excellent value for money.
2. Sharing with us your insights and experience to make sure the programme is set up and governed well.
3. Take part in a 30 minute Southwark online healthy weight training course specifically designed for School Governors in Southwark.

Healthy Weight Governor training



We need to act now to improve children's health in Southwark



Every child deserves the opportunity to be healthy, no matter where they live.

Our borough has one of the **highest levels of childhood obesity** in the country. We must put our children's health first – and **take action now to improve child health and wellbeing.**

As a School Governor, you have a **crucial role** in helping to identify key priorities for your school. Healthy weight, especially in children, is one of the **foundations of good health and wellbeing**, and therefore should be treated by all of us as a **priority.**

Complete the online Healthy Weight Training by **Monday 19th April 2021** and be entered into a draw to win **1 of 4 £250 Decathlon vouchers** for your school.

SOUTHWARK'S ONLINE HEALTHY WEIGHT TRAINING FOR SCHOOL GOVERNORS



- **30-minute training course** designed specifically for School Governors in Southwark
- Provides **essential information** on the issue and implications of excess weight and services offered in Southwark
- Consists of **short topic summaries** to introduce you to the weight issues facing Southwark
- Is **FREE, completely online** and can be started anytime, anywhere

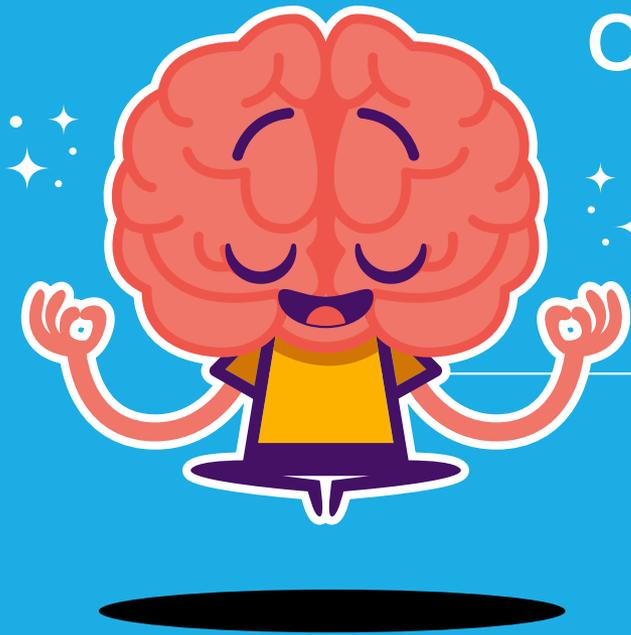
<http://southwarkhealthyweight.com/gov>

For more information please contact:
Rebecca.steele@southwark.gov.uk

Southwark Public Health Division

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THE IMPACT OF COVID-19 ON CHILD DEVELOPMENT, ACHIEVEMENT AND MENTAL HEALTH & WELLBEING.

Southwark Educational
Psychology Service

Marsha Douglas (Senior EP) and Jesvir
Dhillon (EP)

Southwark
Council
southwark.gov.uk

Statistics

A UK population-based study of young people aged 13-18 during lockdown found:

- *47% of girls & 60% of boys reported anxiety*
- *19% of girls & 23% of boys reported depression*

(Levita et al., 2020)

A probability based sample of 2673 parents recruited through social media reported deteriorating mental health and increased behavioural problems among children aged 4 to 11 years between March and May 2020 (during lockdown) but reduced emotional symptoms among 11-16 year olds (Pearcey et al, 2020)



Southwark School's response to the

- What schools have achieved during this pandemic, for our communities and for our children is incredible
- School have managed within a context of uncertainty and many differing views and pressures
- Schools have responded flexibly to an incredible set of circumstances with all colleagues in schools finding creative solutions and making sense of what works
- School are at different stages and it is still developing about the emotional and psychology impact of Covid-19 where time and sensitivity is needed

What Covid-19 may have meant for many of us ?

“A psychologically distressing event (s) that is outside the usual range of human experience often involving a sense of intense fear, terror and helplessness”

(Perry 2011)

Perception is more important than reality



Southwark Educational Psychology Response

- Lens of Trauma
- Critical Incident response –
 - To be curious about what is happening / don't jump in
 - Communicating with and to the Community
 - Drawing on sources of existing support (familiarity is important in times of uncertainty)
 - Acknowledge the range of 'normal' responses- watchful waiting
 - Draw on people's resilience
 - Growth out of Grief – on reflection there may be some things learnt

The prevalence of trauma



One in four children will have experienced developmental trauma affecting their behaviour and ability to learn

Signs to look out for

Children who may have trouble with **relationships, boundaries, empathy and social isolation**

Physical **health and development** becomes impaired

Children Over-reacting or under-reacting to stimuli in the environment (eg. bells, touch, looks, sudden movements as well as being unsettled by transitions and changes

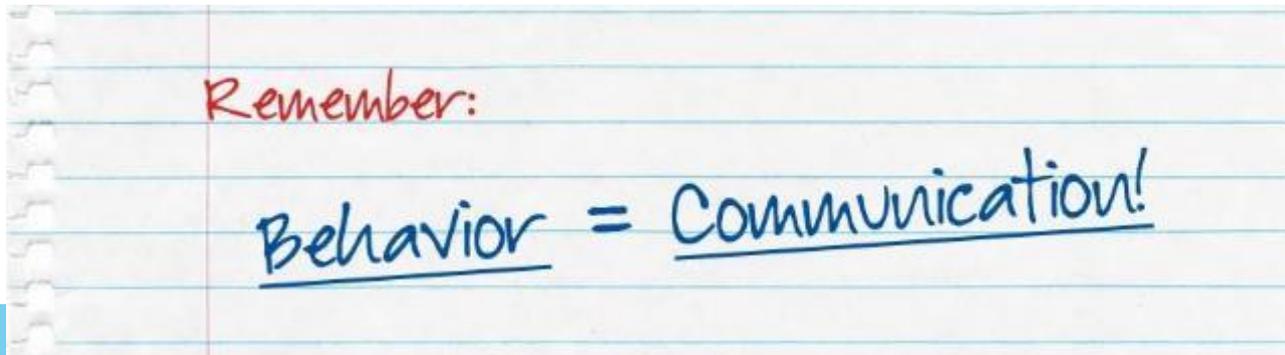
When triggered, the “feeling” brain dominates the “thinking” brain so children **struggle to identify and label feelings** and make their needs known – often overwhelmed by **anxiety or frustration**

Children can struggle with **self concept, body image, low self-esteem, shame and guilt**

Behavioural control can be an issue – difficulty controlling impulses, oppositional behaviour, aggression, disrupted sleep and eating patterns, trauma re-enactments

Cognitive ability may be delayed. Problems with **focus, processing new information, language development, planning and problem-solving**

Understanding behaviour



Behaviour is generally functional and makes sense in the context in which it developed - but may not in other contexts/ relationships



The iceberg model

Resilience

Resilience:

Basic needs met
Sense of belonging
Coping skills
Sense of self
Learning

Adverse life experiences

**Protective
factors**

**Risk
factors**



Finding a balance

Recognising opportunities

- Children are resilient and we think most children will cope with these changes
- Children might have enjoyed the lockdown period and the opportunities it provided
- Children might be looking forward to seeing their friends, teacher and participating in school activities

Recognising challenges

- Increase risks associated with lockdown; poverty, domestic abuse, child exploitation
- Less respite for family and stress on family units
- Bereavements. Other losses – structure, freedom and friendships
- Discomfort with school being different

Whole School Approach

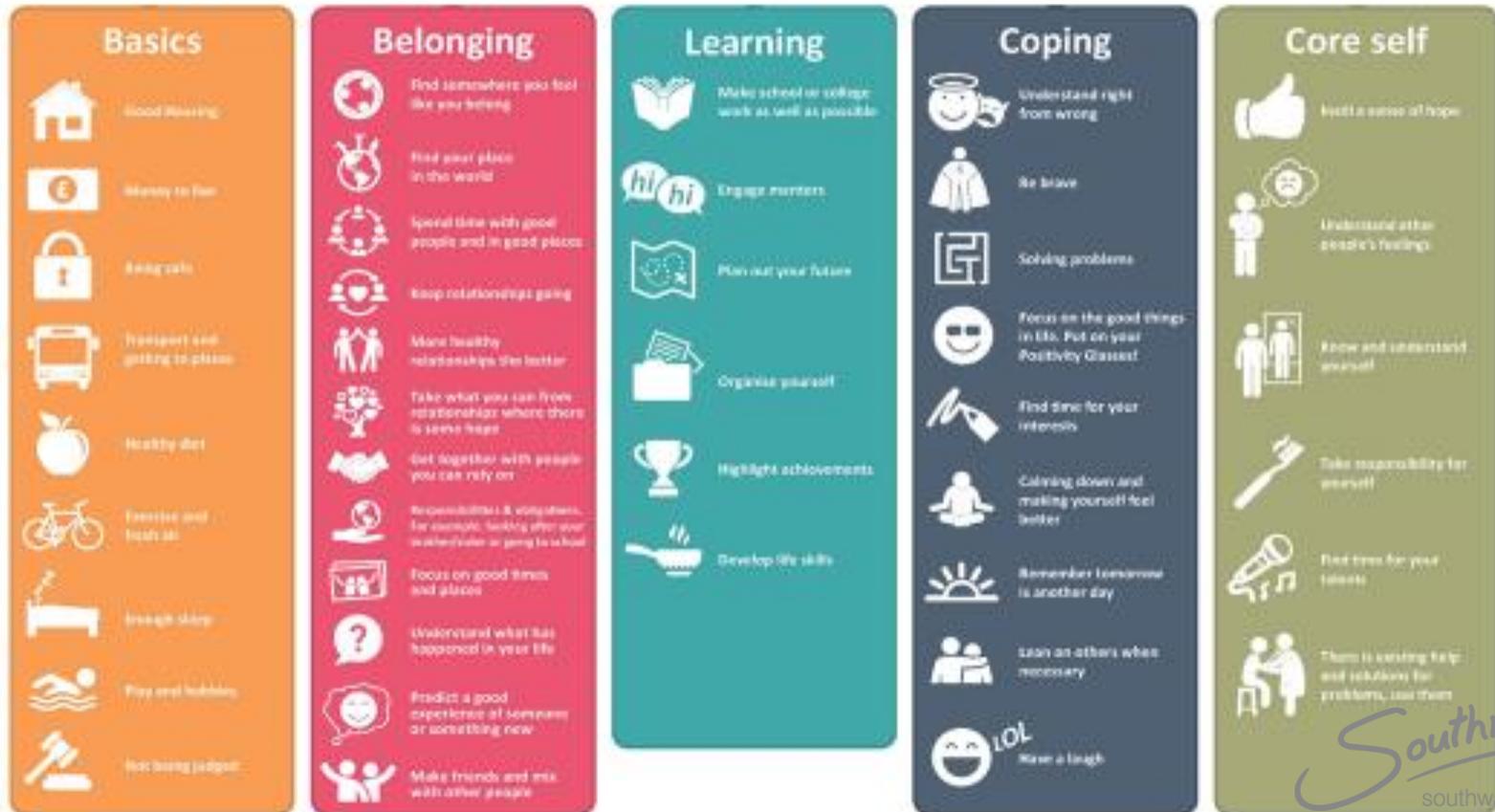
Many people will retain their wellbeing and resilience.

Some will need more support to recover.

A Whole School/College approach which:

- Builds relationships, flexible coping and renews a sense of agency
- Values emotional wellbeing
- And re-affirm safety and routines
- Will maximise learning and growth

Resilience framework



Questions that Governors may ask SLT

CURRICULUM

How is the curriculum supporting Mental and emotional Wellbeing ?

SUPPORT AVAILABLE

What measures are in place for children, staff and parents to get support?

VULNERABILITY

Is the cohort of vulnerable children changing?
Increase/ or the same?

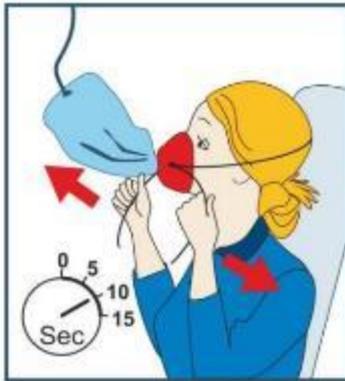
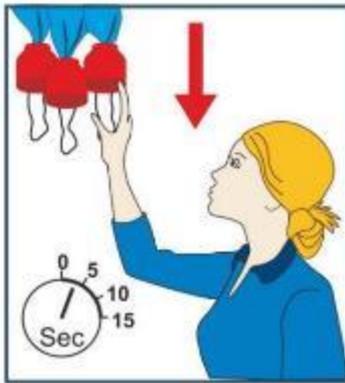
ADJUSTMENTS

If there are changes in any policies what are the implications for vulnerable students?

MONITORING OVER TIME

Children may not show or share concerns straight away, so what measures will monitor this?

Looking after ourselves and staff



Before we can help others, we need to help ourselves

Dysregulated adults can't help dysregulated children

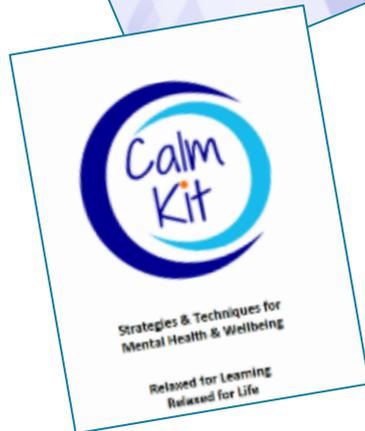
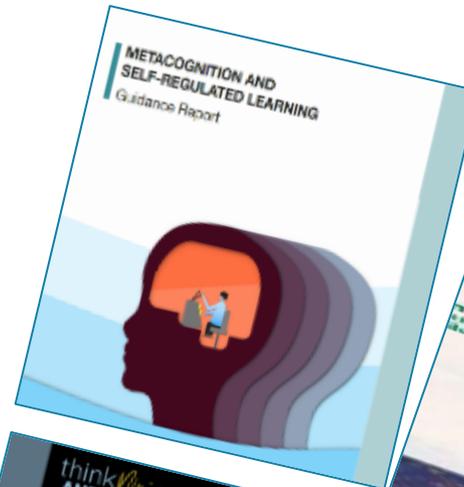
Support for staff

- <https://www.educationsupport.org.uk>



The screenshot shows the Education Support website homepage. At the top left is the Education Support logo. To the right, there is a phone icon with the number 0800 562 561 and the word HELPLINE below it. Further right are two buttons: 'GRANTS' in a blue box and 'DONATE' in a red box. Below the header is a navigation menu with links for 'Coronavirus support', 'Helping you', 'Helping your staff', 'Helping others', 'About Us', and a search icon labeled 'Search'. A teal banner below the navigation contains the text: 'Coronavirus update: We continue to be here to provide mental health and wellbeing support to all education staff.' The main content area features a large teal background with the text 'We are here for you' in white. Below this, it states: 'We are the only UK charity dedicated to supporting the mental health and wellbeing of education staff in schools, colleges and universities.' A red button labeled 'CONTACT OUR HELPLINE' is positioned at the bottom right of this text. To the right of the text is a photograph of a woman with blonde hair sitting on a red mat in a room with colorful hula hoops and a blue slide.

Recovery curriculum



Services and Resources

- Southwark Educational Psychology Service (for all maintained schools or academies that trade with us) SEN-EducationalPsychologist&EHO@southwark.gov.uk
- <https://www.bps.org.uk/coronavirus-resources>
- Mentally Healthy Schools
<https://www.mentallyhealthyschools.org.uk/>
- <https://www.annafreud.org/schools-and-colleges/>
- <https://www.childbereavementuk.org/coronavirus-supporting-children>
- Family Early Help - <https://www.southwark.gov.uk/childcare-and-parenting/children-s-social-care/family-early-help-feh/family-early-help-feh-strategy> 0207 525 1922
- ASD outreach team - AutismSupportTeam@southwark.gov.uk
- The Nest - <https://www.thenestsouthwark.org.uk/>

Baselining, Monitoring & Evaluation approaches

Universal & Targeted:

- your school's CPD/training evaluation forms
- PSHE & WB Curriculum Review tools and next steps
- Surveys:
 - Toolkit - <https://www.annafreud.org/media/4612/mwb-toolki-final-draft-4.pdf>
 - Pupil WB Measures - <https://www.annafreud.org/schools-and-colleges/5-steps-to-mental-health-and-wellbeing/understanding-need/measure-pupil-wellbeing/>
 - WB Framework - <https://www.annafreud.org/schools-and-colleges/resources/wellbeing-measurement-framework-for-schools/>

References

- Levita, L., Miller, J. G., Hartman, T. K., Murphy, J., Shevlin, M., McBride, O., ... & Bental, R. (2020). Report1: Impact of Covid-19 on young people aged 13-24 in the UK-preliminary findings.
- Pearcey, S., Shum, A., Waite, P., Patalay, P., & Creswell, C. (2020). Report 04: Changes in children and young people's emotional and behavioural difficulties through lockdown. *Emerging Minds*.
- Gaskill, R. L., & Perry, B. D. (2012). Child sexual abuse, traumatic experiences, and their impact on the developing brain. *Handbook of child sexual abuse: Identification, assessment, and treatment*, 29-47.

THANKS!

Child Mental Health in 2021: Preparedness

**Cath Connolly,
Systemic Psychotherapist**

The same pandemic, unequal impacts: How people are experiencing the pandemic differently

It's been clear from the early stages of the COVID-19 pandemic that some groups are more affected than others.



People living in the poorest areas are at higher risk from COVID-19

People in the most affluent areas are **50% less likely** to die of COVID-19 than those in the poorest areas.



Black and minority ethnic communities are more affected by COVID-19

People of black ethnicity are **4 times as likely** to die from COVID-19 compared to people of white ethnicity.



Disabled people have been hit particularly hard

Disabled people have experienced death rates **2 to 3 times higher** than non-disabled people.



Young people are most likely to lose employment

One in three of 18–24-year-olds have been furloughed or lost their job – **twice the rate** of working-age adults.



Health and social care workers have an increased risk of adverse mental health outcomes

4 in 5 social care workers in Scotland reported their work during COVID-19 negatively impacted their mental health.

The COVID-19 impact inquiry is exploring the different ways the pandemic, and the national response to it, are affecting health and health inequalities in the UK.

Find out more at health.org.uk/covid-19-impact-inquiry

Risk

Exposure to infection is unequal

- Precarious, low paid, manual jobs
- Caring, retail, and service sectors
- Face-to-face jobs cannot be done from home.

Whitehead et. al. (2021)

Worsening Mental Health Aggravating Triggers

- separation from friends
- arguments with parents
- unresolvable arguments on social media
- strained finances
- academic stress
- and feelings of isolation.

[referenced in Ford et. al. 2021]

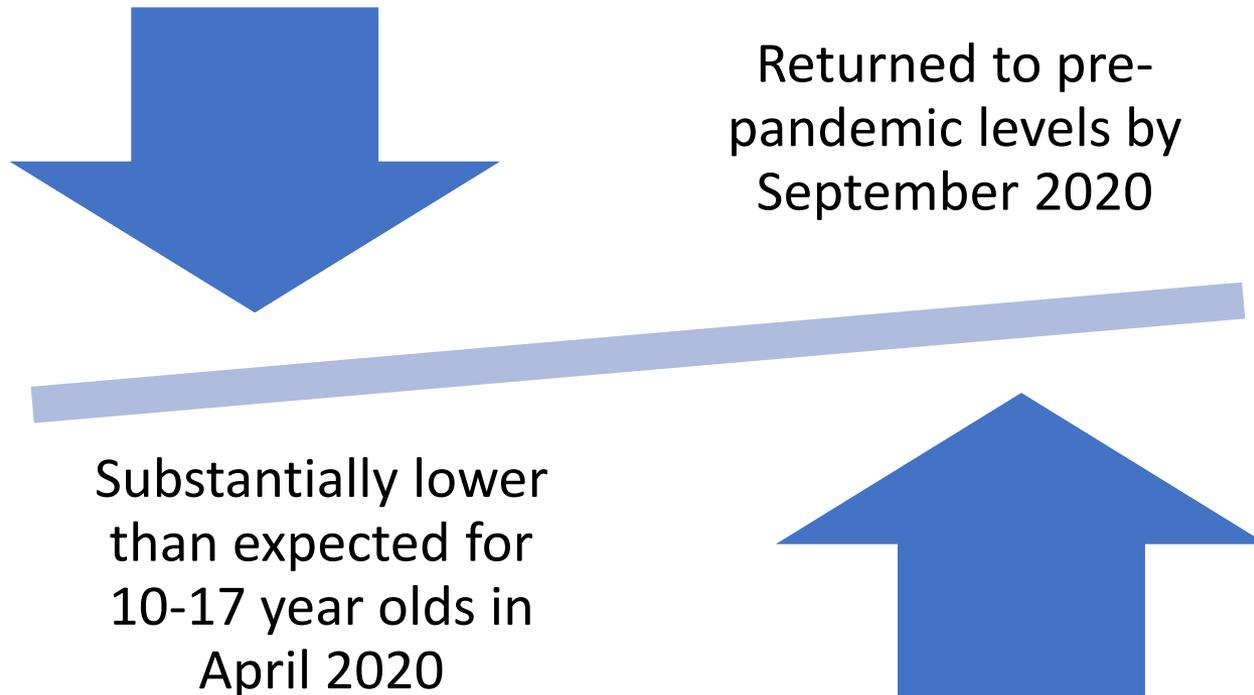
Early Findings

Probable mental health conditions increased from 10.8% in 2017 to 16% in July 2020 across all age, sex, and ethnic groups

NHS Digital. Mental health of children and young people in England, 2020

The Incidence Of Self-harm Recorded In Primary Care.

Carr et. al. (2021)



Return to school with exacerbation of symptoms, post trauma exposure and general post lockdown anxiety

Doubling in the number of ED urgent referrals during 2020 and a smaller increase in non-urgent referrals [NHSE]

Mental Health Crises & Hospital presentations

Mental Health Preparedness

✓ *Do each of your schools have their current CAMHS thresholds/ referral routes?*

✓ *Do your schools have easy access to national helpline numbers and local services other?*

✓ *Do your schools have an immediate strategy for managing pace & stimuli for those young people with neuro-developmental conditions? How is this evidenced?*

✓ *Do school staff feel confident in recognising and initially responding to self harm, OCD, emerging eating disorders? How is this evidenced?*

Reading

- Carr MJ, Steeg S, Webb RT, Kapur N, Chew-Graham CA, Abel KM, Hope H, Pierce M, Ashcroft DM. Effects of the COVID-19 pandemic on primary care-recorded mental illness and self-harm episodes in the UK: a population-based cohort study. *Lancet Public Health*. 2021 Feb;6(2):e124-e135. doi: 10.1016/S2468-2667(20)30288-7. Epub 2021 Jan 11. PMID: 33444560; PMCID: PMC7843955. Ford T, John A, Gunnell D. Mental health of children and young people during pandemic *BMJ* 2021; 372 :n614 doi:10.1136/bmj.n614
- NHS England. CYP-ED waiting times time-series. 2021. <https://www.england.nhs.uk/statistics/wp-content/uploads/sites/2/2021/02/CYP-ED-Waiting-Times-Timeseries-Q3-2020-21.xls>
- NHS Digital. Mental health of children and young people in England, 2020: Wave 1 follow up to the 2017 survey. NHS Digital, 2020. <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2020-wave-1-follow-up>
- Whitehead M, Taylor-Robinson D, Barr B. Covid-19: We are not “all in it together” —less privileged in society are suffering the brunt of the damage. *BMJ Opinion* 22 May 2020. <https://blogs.bmj.com/bmj/2020/05/22/covid-19-we-are-not-all-in-it-together-less-privileged-in-society-are-suffering-the-brunt-of-the-damage/>

The scale of the problem in
Southwark – attendance,
exclusions and referrals,
**Shane Steere-Jones and Kelly
Wilson, Southwark Family
Early Help Team**

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Family Early Help presentation to Southwark Governors Association 25/03/2021

Shane Steere-Jones

FEH Service Manager 11+

Kelly Wilson

Quality Assurance Lead, FEH&YJ

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Content

- Permanent exclusions
- Fixed Period exclusions
- Attendance and safeguarding of vulnerable children and families during lockdown (January – February)
- Attendance of children post March 8th
- Work undertaken by the Back to School team
- Team Around the School Meetings
- 100% Inclusion

Permanent Exclusions

- Permanent exclusions from Southwark schools continue to reduce
- The rate for permanent exclusions of girls is rising, both nationally and in Southwark.
- Although Y10 and Y11 are the most common year groups to be permanently excluded, there is an increase in the younger age groups (Y7 and Y8)
- The rate of permanent exclusions of Black Caribbean children is 1.5 times higher than that for White British children.
- A highly vulnerable group: over half have met the threshold for statutory social work, 44% have some sort of diagnosed SEN need, and almost three quarters live in one of the top 20% deprived areas in the country.
- Almost all have had at least one prior fixed period of exclusion

Fixed Period Exclusions

- 2019/20 data received indicates that had lockdown not taken place, there would have been a significant increase in FPE.
- Continuing increase in the rate of FPE for girls
- In secondary, FPEs in Y7,8 and 9 are increasing. The clear peak for FPE in primary is Ys 5 and 6
- The ethnic groups with the highest rates of FPE are Black Caribbean and Mixed White and Black Caribbean, both of which were three or more times more likely to be given a FPE than White British children.
- The rate of FPEs from Southwark secondary schools for pupils with an EHCP is 31.92, higher than the national rate (30.89)
- FPE rate of pupils eligible for free school meals is 2.2 times higher than for those who were not eligible.

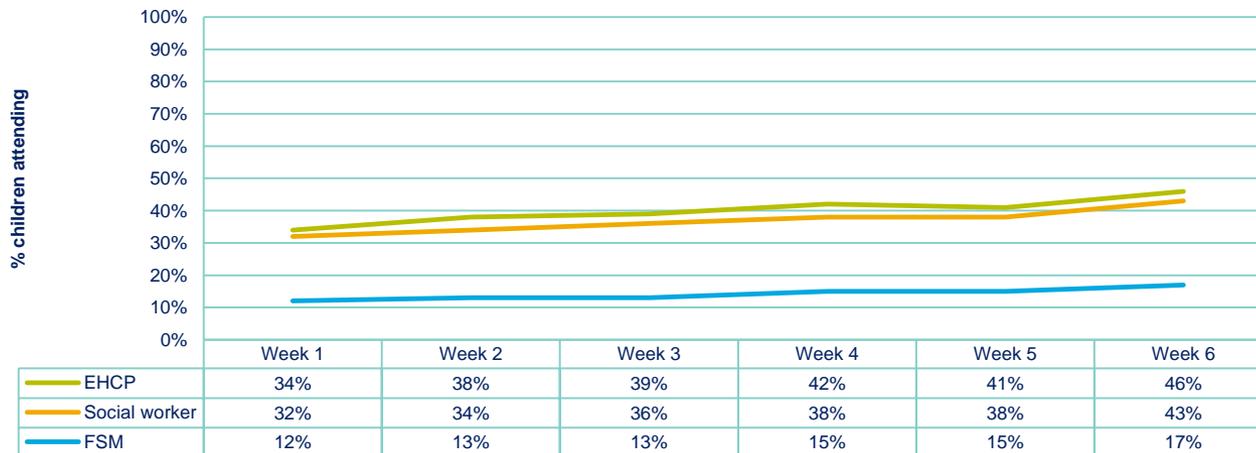
Fixed Period exclusions

- There is a strong link between those who have received fixed periods of exclusions and those who go on to be permanently excluded.
- FEH uses the FPE data to identify and support children and families who have the most need.

Academic Year	Total FPE	No. reported	% overall	% primary	% secondary	% special
2018/19	1,844	225	12.2%	21.4%	9.0%	81.3%
2019/20	1,515	169	11.2%	20.8%	8.7%	46.9%

Attendance of vulnerable children during lockdown (Jan – Feb 2021)

Proportion of vulnerable children attending school (by vulnerability type)



- Daily school level data published on DFE website. Non mandatory, on average between 80 and 90 schools submitted their data to the DFE (including independent schools)

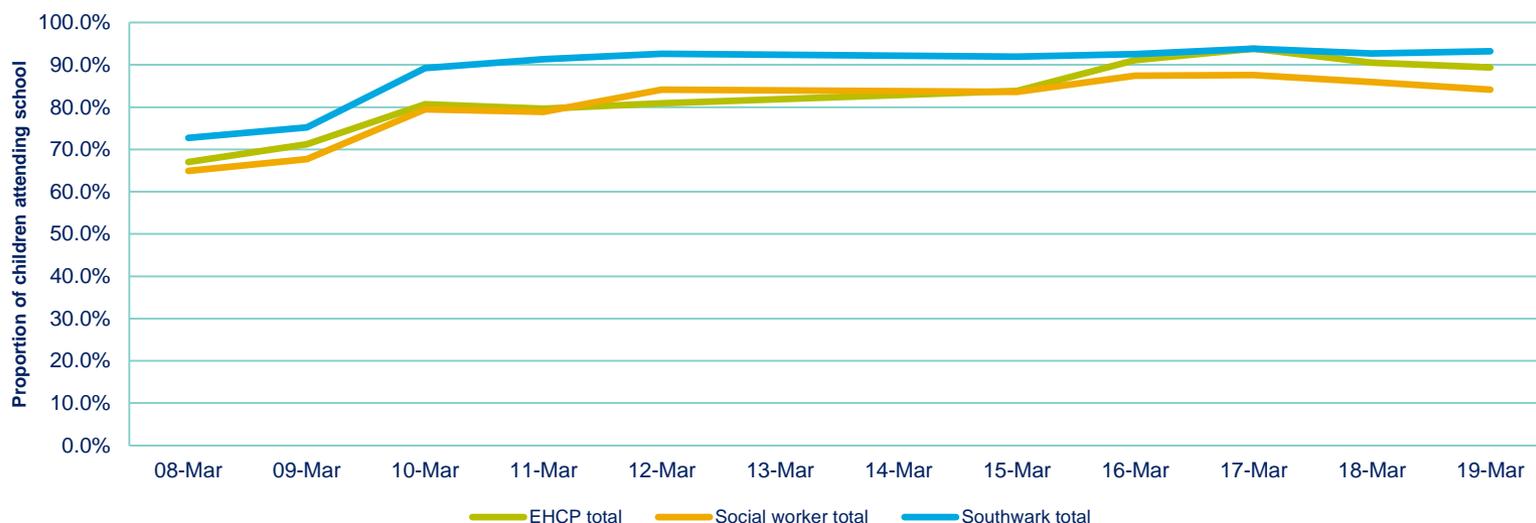
- Unlike the last lockdown, schools were also asked to provide information about critical worker and vulnerable children who could not be offered a place at school, as well as access to home learning and free school meals parcels / vouchers.

What we did...

- Data was scrutinised weekly, and performance bulletins sent out to Directors, the Senior Management Team and the Back to School Team
- Schools advisers, Social Workers in Schools teams, SEN team and educational psychology team used the data to engage with schools, helping them to submit their data and having conversations about the vulnerable children that hadn't attended.
- All lead professionals with vulnerable children requested to encourage their families to send their children to school

Attendance of vulnerable children post lockdown

Proportion of children attending school (EHCP, social worker and all school roll)



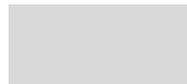
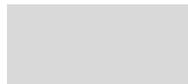
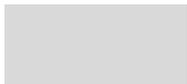
	w/c 08/03/2021						w/c 15/03/2021						DoT
	Mon	Tue	Wed	Thu	Fri	Weekly ave.	Mon	Tue	Wed	Thu	Fri	Weekly ave.	
EHCP total	67.0%	71.2%	80.7%	79.6%	80.9%	75.9%	83.8%	91.1%	93.8%	90.5%	89.4%	89.7%	▲
Social worker total	64.9%	67.7%	79.5%	78.9%	84.1%	74.9%	83.6%	87.4%	87.6%	85.9%	84.1%	85.7%	▲
Southwark total	72.7%	75.2%	89.2%	91.3%	92.6%	84.5%	91.9%	92.5%	93.8%	92.7%	93.2%	92.8%	▲

Key messages

- We will continue to analyse and circulate the DFE data – assuming that schools continue to submit it
- Please could all schools advise us of who has not been in school for ten or more days. Are there children who have not come back to school at all who FEH have not been made aware of?
- Data from the school census has been matched to the current FEH, social care and youth offending caseloads and shared with schools. This will take place half termly (taking the census publication dates into account). This has improved the communication with schools, we can all do better together!
- Looking forward, we would like to have the FPE data as it happens, so that we can work with the family earlier, and hopefully give them the support they need to improve school attendance and reduce the risk of exclusion.

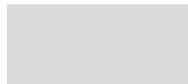
Back to School Team

- Continuing to offer a 'first response' intervention for young people failing to attend school citing Covid related issues
- Offering advice, guidance and signposting to schools, LA officers and families to ensure intervention targets specific factors underpinning non-attendance
- Where not open to a LP, to assess the need for a full attendance and inclusion intervention or 'whole family' intervention from the FEH teams



Demand for BTS

- 389 children referred to the BTS/EIT team since Sept 2020
- 189 cases signposted to other targeted services for support and intervention
- 174 assessed as needing no further input following BTS action – school or LP to manage



Attendance and Inclusion work

- 429 children offered an attendance and inclusion consultation with a senior education welfare officer since Sept 2020
- 251 children referred for current PNA
- 44 children referred for risk of permanent exclusion
- 10 children at risk of both
- 124 children referred for other reasons

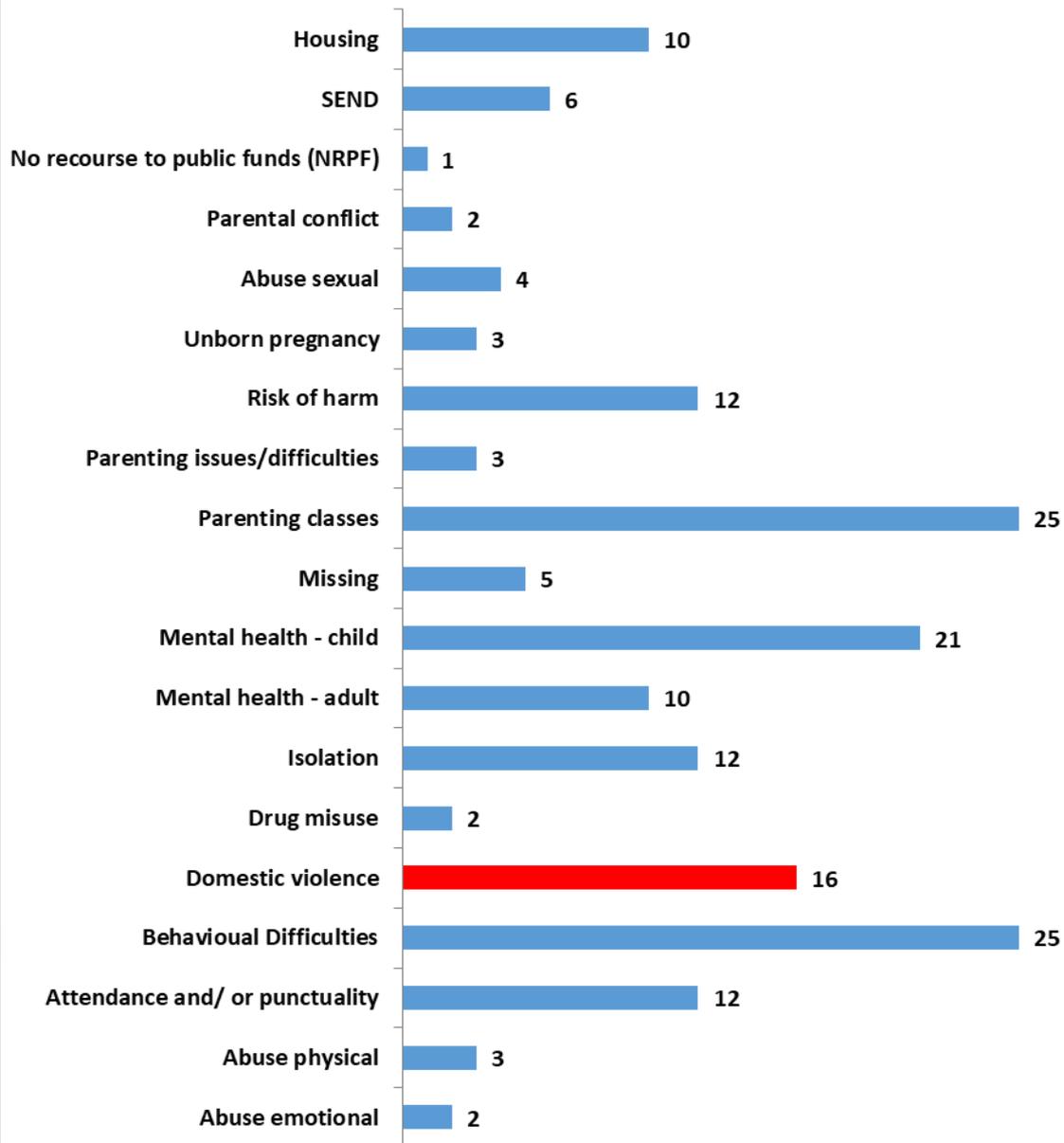


FEH referrals 2020-2021 so far

Sep	Oct	Nov	Dec	Jan	Feb
183	279	209	392	174	290

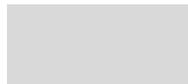


Primary Contact Reasons February 2021



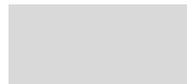
Where do referrals go?

- All referrals screened by FEH team manager and discussed at weekly referral meeting
- 61% allocated for targeted support via FEH U11, 11+, children's centres or parenting team
- Remaining families signposted to other Tier 2 services including YOS prevention, Early Help CAMHS, Specialist Community Nursing, Education Inclusion Team, The Nest wellbeing hub, Solace or universal services



Team Around the School

- Team around the school meetings continued to be offered to schools
- The enhanced TAS with multi-agency representation continues to be piloted
- Opportunity for children to be identified in a multi-agency forum at the onset of difficulties with benefit of early threshold and resource decision making



Team Around the School

- Partners include MASH, social care, CAMHS, YOS, school and community nursing, SEND and Education Inclusion
- Usually only available to trading/maintained schools – however, all schools offered a full TAS in 2020-21 due to pandemic



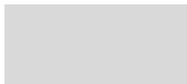
Covid impact on attendance and inclusion

- The medium and longer term impact of Covid has yet to impact on exclusions data
- Young people may be returning to school having been subject to 'hidden harm' within the home
- 'Externalised' destructive behaviours are often as closely related to trauma as 'internalised'



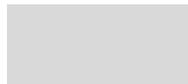
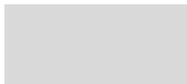
Covid impact on attendance and inclusion

- Young people may be less able to self-regulate behaviour and emotional responses to challenging situations
- FTEs likely to be strong indicator of onset of these difficulties – provisional data from autumn indicates steady increase in FTE, particularly children in early secondary years



Discussion

- How are schools ensuring that support is available at the point that problems emerge (e.g. submission of FTE data to LA)?
- Do staff have the training and awareness to provide trauma-informed responses to challenging behaviour?
- How can we monitor that all possible options to prevent permanent exclusion have been explored including emotional wellbeing support, family support and managed moves?



Speakers panel – Q&A

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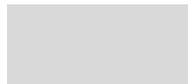


Future dates

24 June 2021

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