



Context

This pathway is guidance to support school nurses and youth justice professionals working with young people who are in the youth justice system or at risk of being involved. This document sets out the rationale for effective partnership working and pulls together the core principles to assist local areas to develop their own local frameworks to support effective working. It provides more specific focus and clarity for school nurses and youth justice teams to support their roles.

The document builds on good practice and evidence and sets out the rationale for a partnership pathway between school nursing and youth justice teams to outline potential opportunities and challenges to improve health and well being outcomes for children, young people and their families who are at risk of entering the youth justice system. This pathway adopts an early intervention approach to supporting younger siblings.

Key principles and core components required to enhance outcomes including options for service delivery are detailed. Wherever children /young people are in the youth justice system, and whenever they are at risk of coming into the system, the health and well-being needs of children should be met through mainstream services. These are the same services available to all children.

Why do we need a pathway?

The overarching rationale is to achieve consistent, seamless support and care for children, young people and their families at the interface with the youth justice system;

- Improving the health and well being of children at the interface of the youth justice system will identify opportunities to intervene early to address emerging health and well being needs, providing opportunities to make a positive impact on children's life chances.
- The Munro Report (2010) identifies the importance of 'early help' throughout childhood and focuses on transition as a key complex stage. Healthy Lives, Healthy People (2010) responds to the Marmot Report outlining approaches aimed to build self esteem, confidence and resilience.
- Responding to the inequalities experienced by children, young people and their families who are in care, or at risk of experiencing continuity of care problems, when exiting the youth justice system

The pathway provides a coordinated approach between school nurse and youth justice service to ensure early identification of health and well being needs and the provision of primary healthcare services to young offenders and their families.

It is focussed on safeguarding and promoting the welfare of all children and young people in line with the requirements of the Children Act 2004 and the UN Convention on the Rights of the Child (1989), ensuring every child and young person should enjoy the best possible health and health service.

<http://www.legislation.gov.uk/ukpga/1998/37/section/39>

The pathway will:

- Adopt a life course approach and provide a clear focus on identified outcomes for children, young people and their families
- Build on evidence based good practice and provide some clarity relating to identified complex needs and service structure.
- Provide an understanding and clarity around roles, functions and engagement with key partners.

All children and young people in the youth justice system have equal opportunities for their health needs to be identified, assessed and met in a timely manner.

Community

- Improved health outcomes and a reduction in health inequalities
- Reaching and influencing the wider community, promoting healthy lifestyles and social cohesion
- Improved planning of local services to reduce health inequalities

Universal Services

- Awareness of the risk factors for young people at risk of offending
- Identify and support young people excluded or missing school (or in alternative education provision e.g. PRU) who may be at risk of missing health, well being and education services.
- Ensure pathways are in place for access to all universal services through a coordinated healthcare response
- Early identification of health and well being needs
- Young people empowered to take responsibility for own health and support to achieve optimum health
- Preventing identified needs escalating
- Assessment of need and acknowledgement of family and community support

Universal Plus

- Joint planning of young person's needs

Universal Partnership Plus

- Seamless support and multi-agency team
- Early seamless support and multi-agency team provision to support young people

Achieving Seamless Public Health Provision;

There are public health challenges that cannot be addressed solely by this partnership pathway, including local variation in service configuration and delivery. Such issues require local collaboration between school nursing and youth justice service leads, commissioners and practitioners. This will enable them to adopt partnership pathway principles and adapt 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 through;

- Safeguarding young people at risk of, or experiencing significant harm through abuse and/or neglect;
- Achieving a coordinated approach between school nursing, the youth justice service and others to improve health and well being of children, young people and families ensuring strong family support;
- Providing services that make a difference through evidence based effective interventions;
- Engaging with children, young people and families in service design and evaluation;
- Long term availability to support key transitions between childhood and adulthood and between different services and placements;
- Ensuring quality assurance and governance procedures are followed;
- Removing any organisational barriers to progress; and
- Ensuring effective information sharing

Data collection: Use and interpretation of the data from the Joint Strategic Needs Assessment (JSNA) will be the basis to assess health needs and how they can be met using evidence based interventions. Collection of data pertaining to the Healthy Child Programme outcome measurements should be available locally; the pathway aims to build on local evidence to validate the success and quality assurance of the pathway.

The current NHS and Public Health Outcomes Framework contains indicators for child health, each having an impact on the health and well being of the population along the life course. These indicators will demonstrate outcomes to support this pathway in relation to 'starting well' and developing well through partnership working through outcome measures.

Opportunities Setting out an agreed framework can help to identify where there are new opportunities which can be solved locally to enhance services

Quality

- Increased equity and quality of universal offer delivering improved outcomes
- Improved service user/client satisfaction/user involvement
- Improved documentation
- Ensured quality of care and quality improvement through robust continuous clinical audit in clinical practice
- Build capacity and knowledge of the school nursing service and identify risks
- Supported clinical effectiveness, risk management and clinical audit
- Explicit and well defined standards of care provided

Innovation

- Evidence-based practice and use of clinical guidelines
- Baseline for future initiatives building on what works
- Improved use of specialist skills and clinical judgement
- Innovative case studies used in service delivery in school nursing and youth justice service to disseminate good practice

Productivity

- Early identification of health and wellbeing needs, leading to needs being addressed earlier
- Emphasis on prevention and intervention resulting in a reduction in the number of children and young people entering the youth justice system and a reduction in re offending by those already within the youth justice system
- Reduction in risk taking behaviour
- Improved commissioning of services
- Consistency and higher quality services
- New and improved use of technology.

Prevention

- Effective delivery of the public health agenda through implementation of the Healthy Child Programme
- Family/individuals issues identified and addressed asap within the family context
- Seamless services incorporating the full public health agenda across services
- Improved parenting skills and family resilience
- Empowered children and young people
- Support for long term conditions and complex care

It is recognised that the circumstances and needs of the family must be taken into account when implementing this timeline

Enhanced Pathway Timeline		
0 – 19		
When	≤ 10	10 – 19
Who	School Nurse Health Practitioner within youth offending service Health Visitor GP, Designated/ Named professionals Head Teachers, Teachers Families / carers Parenting support Children's services (Social Care)	School Nurse Health Practitioner within youth offending service; Speech and Language specialist Community Children's Nurse CAMHS practitioner Other identified Designated/ Named professionals Families / carers Head Teachers, Teachers, Parenting support Children's services (Social Care)
Where	Home / Educational setting / Community / Secure settings – Remand Foster Care, Secure Children's Home, Secure Training Centres, Young Offender Institution (DH 2009 Healthy Children, Safer Communities). http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_109772.pdf	
Rationale	Identify the level of vulnerability and health risks to children and young people, to signpost to appropriate services, including Schools and support them to take appropriate action. Maximise face to face contact / connectivity with family minimising risk. Intervening early to support children and young people to be school ready / life ready. Smooth transition childhood and adulthood and between different services and placements. Ensure more children and young people are diverted from youth justice system where appropriate. Comprehensive delivery of the Health Child Programme 0-19. Development of local pathway to determine seamless support for local health and well being need.	
Key messages	<p>School nurse will respond to the inequalities experienced by children, young people and their families who are on the edge of, within or exiting the youth justice system. http://www.legislation.gov.uk/ukpga/1998/37/section/39</p> <p>There will be timely sharing of accurate information about health and well being needs of children and plans for meeting those needs between youth justice system and school nurse and notification / change of status to ensure connectivity – school nurse/ youth justice practitioner for transition of care.</p> <p>Healthy Child Programme universal offer carried out by a school nurse. Where health and well being needs are identified, there will be interagency agreement of package of care for children, young people / families and carers.</p> <p>Health assessment to include for example but not limited to</p> <ul style="list-style-type: none"> • Immunisations • Registration with GP/ Dentist • Speech and language therapy • Parenting support/signposting to strong family support • Emotional health and well being • Sexual health • Healthy eating/lifestyle • Accident prevention • Oral health • Hearing and vision • Behaviour management • Physical activity • Continence <p>Vulnerable children with identified specific health need – initiation of common assessment framework (CAF)</p>	<p>School nurse will respond to the inequalities experienced by children, young people and their families who are on the edge of, within or exiting the youth justice system http://www.legislation.gov.uk/ukpga/1998/37/section/39</p> <p>Healthy Child Programme universal offer carried out by school nurse. Where health and well being needs are identified, there will be interagency agreement of package of care for children, young people, families and carers. Vulnerable young people with identified specific health and well being needs – initiation of common assessment framework (CAF)</p> <p>Assessment to identify unmet health and well being needs, for example poor communication, speech and language skills, mental health problems, learning difficulties, self harm and harm to others. Where appropriate, assessment should build on and take account of any health assessment conducted through the youth justice service or youth secure establishment. There will be timely sharing of accurate information about health and well being needs of children and young people and plans for meeting those needs between youth justice practitioner and school nurse.</p> <p>Identification of children and young people excluded or missing from school, those missing out on health, mental health services provided in schools. This includes those receiving alternative provision ie Pupil Referral Units and home tuition.</p> <p>Identify, support and signpost for early help where families are finding difficulty with parenting issues</p> <p>Health assessment to include positive support where health and well being needs are identified for example but not limited to</p> <ul style="list-style-type: none"> • Alcohol and /or drug misuse, mental health matters. • Speech and language therapy • Emotional health and wellbeing • Sexual health • Physical activity • Developing positive relationships • Immunisation status • Healthy eating and physical activity • Personal safety • Signposting and referring to other services • <p>Re-engaging young people and families into community health services on release from custody. An average custodial sentence is only 78 days and this should be given consideration when planning interventions and considering when to cease any services being delivered prior to a young person receiving a custodial sentence.</p>
Your community	Your Community has a range of services including some Sure Start services and the services families and communities provide for themselves. Health visitors and school nurses working in partnership to develop and promote community based support for children, young people and parents targeted to meet the identified needs of the local community.	
Universal services	Universal services are for all children, young people and families. Health visitors and school nurses deliver the Healthy Child Programme to ensure a healthy start for children and families, for example prompt for immunisations, health and development checks, support for parents and access to a range of community services / resources.	
Universal plus	Universal Plus gives a rapid response from the school nurse / youth justice practitioner when children, young people and parents need specific expert help targeted according to assessed or expressed need, for example managing long term health issues and additional health needs or parenting interventions supporting families with children experiencing early childhood behavioural difficulties.	
Universal partnership plus	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, targeted according to identified need.	



High Level Principles and Finding Local Solutions

High-level principles

- Safety of child and access to early help, interventions and support for children, young people, families and carers
- Children /young people within the youth justice system have far more unmet health needs than other children of their age. These include poor communication skills, mental health problems, learning difficulties and both self-harm and risk of harm to others
- Child and family centred approach to care, support and decision making process
- Partnership working within the changing health and social care agenda and recognising core values of the family service
- Early years are critical to setting out a child's life trajectory: for physical and emotional health, learning and development
- Local service provision taken into account in designing a collaborative shared pathway to identify the optimum points for partnership working.
- Build on existing good practice

Key principles and components

We must take decisive action on behalf of children and young people in or on the edge of the youth justice system because:

- They face a range of other, often entrenched difficulties – including school exclusion, substance misuse, fragmented family relationships unstable living conditions and parental poverty, social exclusion and mental health problems. It is the combination of overlapping factors that give these children multiple and complex needs and heightens the risk of their being drawn into anti-social activity.
- Contact with the youth justice system can bring additional matters for some children and young people. Learning difficulties, communication needs and/or mental health problems make it more difficult to cope with police interviews after arrest, understand court proceedings or requirements of a community sentence. For those placed in custody, there is the added anxiety of being away from home, maintaining contact when placed at a distance, staying safe in unfamiliar surroundings and worrying about the welfare of siblings and parents left behind. Once they have completed their sentence, they face the challenges of settling back into the community.
- Organisational and attitude problems can be barriers to progress. Children and their parents have often missed out on early attention to their health, mental health and well being needs. They may not have reached the threshold for services because each different problem they had was not in itself serious enough to attract attention, even though the combination of problems put them at high risk. Help offered to them later may not have been enough to make up for these early omissions.

Finding local solutions: addressing the core principles to overcome challenges can be achieved locally through the proposed options for delivery outlined below

Partnership working

Collaborative development of a shared and refreshed pathway will clarify understanding of the contributions each member of the health, social care and youth justice service makes;

Proposed Options for delivery:

- Clarity of roles and responsibilities
- Effective use of resources
- Improved communication between key partners
- Joint visits and appropriate use of Common Assessment Framework

Collaboration

Identification of contact points and areas for collaborative approaches to ease transition are crucial.

Proposed Options for delivery:

Strengthened joint training in health and wellbeing will provide an opportunity for

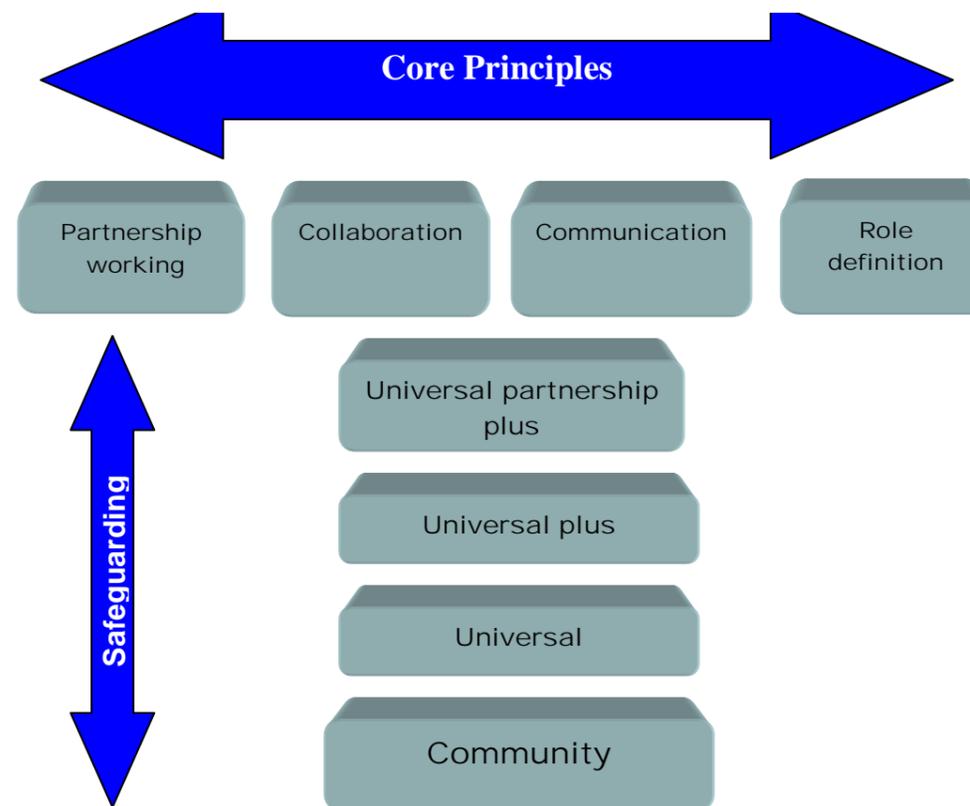
- Joint early years/foundation assessment to be completed in partnership with pre-school/school child to determine readiness for school.
- Joint assessment and care planning for adolescent service users
- Use of evidence based assessment tools including child developmental assessments and relevant screening tools

Using vulnerability assessment tools will ensure that practitioners are able to target resources appropriately and to those children and families with greatest need making best use of limited resources

Joint Assessment

- Improved skills mix
- All young people have a needs assessment
- Integrated care planning

Figure 1: Illustrates the potential journey of children and young people across service domains indicating the key areas of service delivery. Professionals need to address to provide quality intervention and a seamless transition to support readiness for school and readiness for life. The core principles need to be addressed by both School Nursing and Youth Justice Services.



Safeguarding is of paramount importance and local areas need to ensure there are clear protocols in place, which offer clarity regarding the roles and responsibilities of School Nursing Services and Youth Justice Services.

Communication

Communication is evident throughout the whole of the pathway. It is essential children, young people and parents are offered the appropriate information at the right time and pace for them. This in itself is a challenge.

Proposed Options for delivery:

- Good information with shared access when appropriate and timely transfer is essential, for example, importance of providing live and up to date access for the tracking of pupil movement in and out of the youth justice service
- Develop a seamless approach to signposting and messaging about the different health services and professional roles to support positive health and well being
- Develop a system between health and youth justice to track and support children, young people and families transferring in and out of areas (and information sharing across borders)

Role definition

Clarity regarding roles and responsibilities will assist the child, young person, family and professionals, thus ensuring effective use of resources and skills with agreed protocols for service delivery.

Proposed Options for delivery:

- Develop clarity regarding the roles and responsibilities
- Clear information for children, young people and parents and other professions and partners

What works locally: case studies, Acknowledgement and references

Emerging good practice – ‘Someone you know and can trust.’

As part of the school nurse service offer, school nursing services offer ‘drop in’ and open door sessions in secondary school and community settings. Young people should be able to access the school nurse for confidential sexual health advice. Normalising the engagement with school nursing services and building strong relationships can help young people to share concerns. For example, a young female ‘Tracey’ discloses she has been a victim of rape. She attended the ‘drop in’ session on many occasions and developed a trusting relationship with the school nurse.

Tracey later entered the youth justice system following a drunk and disorderly conviction. Whilst Tracey was involved with the youth justice service, through a partnership approach the school nurse and youth justice health practitioner liaised, thus building on the established trusting relationship the school nurse had already established with Tracey, this facilitated continuity of care.

During the consultation sessions with the school nurse Tracey and her partner disclosed they both wanted to stop smoking, the school nurse utilising specialist public health skills worked with both and with support they were successful in quitting. Continued support from the school nurse enabled Tracey to feel confident to take some responsible decisions regarding her sexual health and wider health choices.

The school nurse supported Tracey, providing reassurance and an introduction to the youth justice service, being accompanied by someone who knew her history the school nurse was able to offer the emotional support Tracey needed at this time, this gave her confidence and continuity. The school nurse and youth justice health practitioner partnership was an excellent example of transition of care between partners.

Emerging good practice – Early Help – ‘see a school nurse before it gets worse’

Munro (2010) and young people themselves identify the importance of early help and support before ‘crisis’ as crucial to their health and wellbeing. School nurses are well placed to identify health needs and to be responsive to the needs of young people in partnership with other professionals. For Example: as part of a youth justice service order a young male, ‘Peter’, was referred to the youth justice health practitioner for a health assessment. He had developed a trusting relationship with the youth justice health practitioner; during the assessment session he disclosed that he had been ‘hearing and seeing things’ - which he found ‘very scary’. He advised he had not disclosed this to anyone else, but after discussion and reassurance he agreed that the youth justice health practitioner could share this with his parents and make a referral to the children and adolescent mental health service (CAMHS).

His mother, although initially shocked, disclosed that she had suspected her son was experiencing difficulties and had consequently left her job in an attempt to try to support him. Peter had built a trusting relationship with the youth justice health practitioner and asked if they would accompany him to his CAMHS referral. He was diagnosed with early psychosis and thus treated with medication and support. Peter reported he felt more confident and able to manage his ‘problems with support, his mother has been able to return to work.

Partnership working between youth justice health practitioner, school nurse and CAHMS enabled ongoing support to provide this family to cope with their son’s health issue over a longer period of time.

Emerging good practice – ‘Visible, Accessible and Confidential’

The public health needs of young people involved with the youth justice service are not always recognised, furthermore young people particularly those excluded or not accessing mainstream education are not always clear regarding the role of the school nursing service. However, an accessible visible service can be beneficial in meeting the needs of this vulnerable group of young people. For example, the youth justice health practitioner conducted a health needs assessment at the youth justice service, for a young male, ‘John’, who received a referral order for actual bodily harm; he had damage to his front teeth. The assessment revealed that John was not registered with a dentist and did not know how to register. He also revealed he had ongoing and recurrent toothache. The youth justice health practitioner identified a local dentist who was accepting new NHS patients.

The youth justice health practitioner supported John to register with a local dentist and accompanied him for a dental appointment. Continued support from the youth justice health practitioner enabled John to feel confident to take some responsible decisions regarding his dental health. Building on this trusting relationship, the youth justice health practitioner, liaised with the school nurse to ensure the young male had continuity and seamless transition of care between partners.

John reported he gained in confidence to access the dentist by himself and in his self-esteem with his new ‘smile’ and felt confident to proactively approach the school nurse with health matters.

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