

# REPORT

<b>Report Title:</b>	ChatHealth School Nursing Text Messaging Service. First Year Review
<b>Date:</b>	15/11/16
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## **ChatHealth School Nurse Text Messaging Service - First Year Review**

In November 2015 the School Nursing service in Suffolk (excluding Waveney) launched their new School Nursing model, in order to deliver the Department of Health's Healthy Child Programme (HCP) 5-19 years. An integral part of the model was an innovative new text messaging service ChatHealth. The text messaging service was launched to secondary school aged pupils in November 2015 and extended to parents/ carers in April 2016.

ChatHealth allows young people in Suffolk to send messages to a dedicated number which is delivered to a secure website. Once there, texts are responded to within one working day. The service is available Monday to Friday 9am – 4.30pm excluding bank holidays. Outside these hours anyone who texts the service receives an automated message with advice on where to get help if their question is urgent.

School nurses can support children and young people with enquiries relating to a wide range of health and wellbeing issues including self-harm, bullying, drug and alcohol use, smoking, healthy eating, sexual health and mental health. They are also able to signpost to other local services including 'Ask the 4YP expert' live 1-1 chats and the Source website. Traditional ways of contacting the school nursing service remain including their well-attended weekly drop ins in secondary schools. The number to text is 07507 333356.

ChatHealth was introduced with the aim of improving access to the School Nursing service to widen participation and enable early intervention, as well as improving efficiency of current resource. This ethos fits within wider programmes within CYP including 2020 Children & Young People Emotional Wellbeing, 2020 Family Strategy and Early Help Strategy.

## First Year Review

A review of the ChatHealth service has been carried out at the end of the first year of implementation. The text messaging service has been found to be positively received by staff, young people and clients with key benefits demonstrated.

### Key Benefits:

- Increase in contacts to the School Nurse service
- Access to service available throughout school holidays
- School Nurse service used by those who had not previously used it
- Some students accessed the school nurse for the first time
- Access to service for young people and parents/ carers not in mainstream schools eg home educated pupils
- Improved governance in managing text messages
- Most queries dealt with in time efficient manner therefore cost benefit to service

A number of challenges in providing the text messaging service have been identified.

### Key Challenges:

- Ability to cope with increased demand
- Staff availability to respond to messages in a timely manner
- Delivering a consistent approach to queries
- Staff confidence in delivering health advice in this new way
- IT equipment and infrastructure
- Continual marketing of service required

## Conversations

The varied range of health queries asked via the text service reflects topics asked within School Nurses face to face contacts. The majority of conversations related to emotional health and wellbeing (39%), followed by queries regarding physical health (32%) and sexual health (10%). Requests to see a school nurse accounted for 19% of messages. Advice given by the nurses is based on their Suffolk School Nursing Model Standard Operating Procedure. This ensures advice is evidence based and consistent. There has been equal use of the service by parents and young people, with the majority of young people wishing to remain anonymous.

## Chathealth - School Nurse Text Messaging

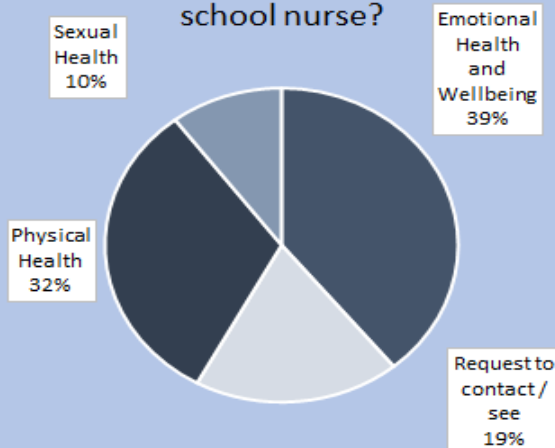
Messages Received

**1410**

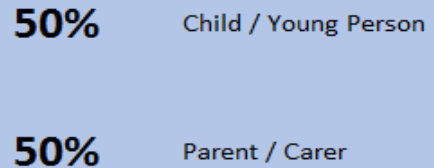
Messages Sent

**1974**

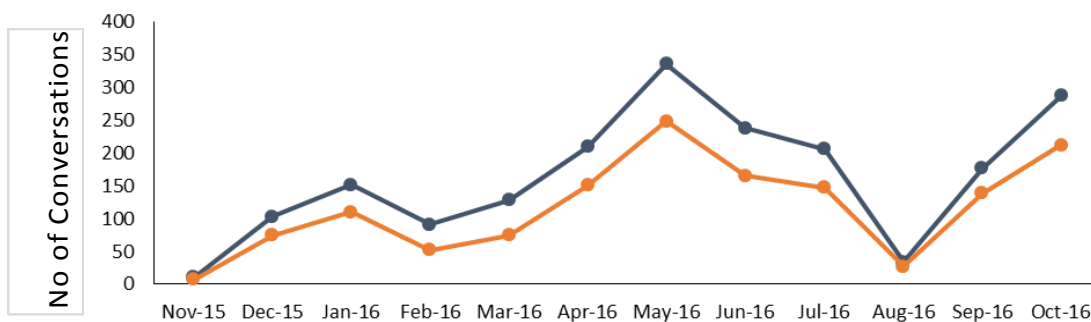
What do people ask their school nurse?



Who texts their school nurse?



Activity of the service compares favourably with other organisations using ChatHealth. Within this first year of service 1410 messages have been received and 1974 messages sent. Peaks in activity have been evident following marketing activity, with significant increases following distribution of service newsletters to parents and young people and teaching sessions or assembly presentations in schools.



Impact on health outcomes have been demonstrated in the majority of conversations. Case studies have been included within appendices to illustrate the broad range of health advice and support given, and impact gained.

## Feedback

Feedback is requested from users at the close of each conversation. They're asked to rate the service out of 10. In this first year 74% of conversations have been rated as 5 out of 5. The themes of the feedback from young people and their parents in Suffolk mirrors that of other areas. Lower rating scores have predominately been associated with parents requesting input with an area not covered by the School Nursing service eg assessment of ADHD, or where the client has been signposted without additional advice being given. Users have found the service:

- Quick and easy to access
- Less embarrassing than other access points
- They value being able to be anonymous
- The confidentiality of the service is important
- Would prefer a service that was open in evenings and weekends, rather than predominantly when they are in school
- Would like an instant response to all messages

Comments from young people have included; 'really good - I will now come to drop-in' and 'thank you. Just knowing I had the card with your number on really helped me'. Parents comments have included; 'I would definitely rate the school nursing service a 5/5 because the help offered was fantastic and I was treated nicely and seriously', 'felt that the support given me was great' and 'the service was extremely helpful and very efficient'.

## Future Developments / Recommendations

In order to continue to extend the reach and increase the uptake of the ChatHealth text messaging service, the following actions are planned:

- Explore alternate ways of School Nurses covering this service including incorporating role within a single point of access for all referrals
- Review time that service is available, including working with other services
- Increase marketing of service availability during school holidays
- Review marketing strategy including closer link to wider Suffolk County Council marketing plans
- Examine ways to improve access for pupils in Special Schools
- Examine access to school nursing by messaging for young people who don't speak English as a first language
- Increase targeting of service to groups not attending school eg colleges, home educated
- Consider 'mystery shopper' to further evaluate service

- Extend service to include advice / support to professionals including education staff
- Launch ChatHealth smartphone app to send instant messages when developed by operating body Leicestershire Partnership NHS Trust
- Launch ChatHealth to Health Visiting service following scoping exercise of alternate ways to manage and consideration of appropriate timescales

**SOURCES OF FURTHER INFORMATION**

**[www.suffolk.gov.uk/schoolnursing](http://www.suffolk.gov.uk/schoolnursing)**

## Appendix

### **Case Study One**

**The issue the young person was experiencing and seeking advice or support for:**  
Bereavement Support - The young person felt confused about feeling anger towards their parent who had died the previous year. They were finding the anniversary of their death difficult to cope with.

**Next steps:**

**The care provided via ChatHealth:**

The young person was reassured that the feelings they were experiencing were normal. Support already in place was explored, and suggestions given for further support. This included signposting to resources provided by Grief Interventions and the School Nurse drop in. ChatHealth also provided an avenue for expressing feelings at a difficult time.

**Outcomes:**

**The outcomes of the care provided to the parent/young person:**

Young person felt listened to and a plan for future support was agreed.

**Impact:**

**Impact of ChatHealth on this particular contact:**

The young persons immediate anxiety was reduced and plan in place to manage future feelings associated with bereavement.

### **Case Study Two**

**The issue the parent/young person was experiencing and seeking advice or support for:**

Sexual Health: Young person had experienced unprotected sexual intercourse and asked where she could get emergency contraception from.

**Next steps:**

**The care provided via ChatHealth:**

The young person was signposted to iCash sexual health services and it was explored how they could attend a clinic or GP surgery. As the young person lived in a rural area, without transport, they were unable to attend a clinic. Arrangements were therefore made for a School Nurse to meet the young person in their school to administer emergency contraception.

**Outcomes:**

**The outcomes of the care provided to the parent/ young person:**

The young person met the School Nurse and a full sexual health assessment was undertaken including risk of sexual exploitation. The young person was administered emergency contraception, given condoms (as part of the C – card scheme) and offered chlamydia screening. Methods of contraception and risks of sexually transmitted infections were discussed. A repeat appointment was made and they were assisted in making an appointment at the iCash sexual health clinic.

**Impact:**

**Impact of ChatHealth on this particular contact:**

Sexual health advice and emergency contraception was able to be given to a young person unable to obtain elsewhere within the required timeframe

### **Case Study Three**

#### **The issue the parent/young person was experiencing and seeking advice or support for:**

Emotional Health: Young person reported feeling low in mood and discussed wanting to hurt themselves.

#### **Next steps:**

##### **The care provided via ChatHealth:**

Feelings that the young person was experiencing and current support mechanisms were discussed. During the conversation the young person disclosed that they had made several suicide attempts in the past and were seeing a case worker from the integrated delivery team (IDT), Norfolk and Suffolk Foundation Trust. The young person agreed that the School Nurse could contact their IDT case worker to enable a mental health assessment and support.

#### **Outcomes:**

##### **The outcomes of the care provided to the parent/ young person:**

The School Nurse was able to contact the IDT case worker and alert them to the young person's low mood. A transcript of the text conversation was shared. The IDT worker made telephone contact with the young person and carried out an assessment. Contact was also made by the case worker with the young person's family to alert them and discuss current risks. This was made with the young persons knowledge. A plan of care was agreed which included an appointment the following day with the case worker.

#### **Impact:**

##### **Impact of ChatHealth on this particular contact:**

A timely mental health assessment was facilitated that allowed an assessment of risk to be made, and an appropriate plan of care to be agreed.

### **Case Study Four**

#### **The issue the parent/young person was experiencing and seeking advice or support for:**

Behaviour – Parent of a primary school age child requested advice regarding managing their child's behaviour.

#### **Next steps:**

##### **The care provided via ChatHealth:**

The specific behaviour difficulties experienced were explored. There were no difficulties experienced in school. As sleep problems were also an issue and impacting on behaviour, specific advice regarding sleep were given. Parenting programmes were recommended and the parent was put in touch with the local area parenting coordinator.

#### **Outcomes:**

##### **The outcomes of the care provided to the parent/young person:**

The parent planned to contact the parenting coordinator and attend a parenting programme.

#### **Impact:**

##### **Impact of ChatHealth on this particular contact:**


The parent felt empowered to manage their child's behaviour and reported that the delivery was responsive to their needs.

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