

Health and Wellbeing Board

Thursday 18 March 2021

3.00 pm

This will be a virtual meeting. A meeting link will be circulated in advance.

Supplemental Agenda No.2

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Date: 22 March 2021

COVID-19 Monitoring Report

Southwark's Outbreak Prevention & Control Plan

Knowledge & Intelligence Team
Southwark Public Health Division

18 March 2021

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Cases, bed occupancy and mortality continue to decrease, but the decline in infections has recently slowed

KEY MESSAGES

Case rates across London continue to decrease on the whole, but the decline has slowed, with many boroughs experiencing fluctuations in their cases.

- Southwark had 63 confirmed cases of COVID-19 in the week up to 12 March.
- Across London, most boroughs now have incidence rates below 50 per 100,000; with three boroughs having rates below 25 per 100,000.

The number of NHS hospital inpatients with COVID-19 symptoms continues to decline.

- Across the capital, more than 1,100 hospital inpatients have confirmed COVID-19, with almost 300 of these occupying mechanical ventilation beds.

Coverage of the COVID-19 vaccine continues to increase across priority groups, and is comparable to similar boroughs such as Lambeth.

- Over 71,000 people registered with a Southwark GP have received their first dose of the vaccine.
- There remains significant inequalities between ethnic minority groups, with coverage lowest among those from Black African ethnic background.
- There are significant geographical inequalities in coverage, with levels lowest in Peckham and highest in Dulwich Village.

Cases in Southwark continue to fall, with the borough having the second lowest incidence in London

CASES

Across London, cases continue to decrease but the pace of decline in infections has recently slowed, with many boroughs showing fluctuations in the past 7 days.

- Reported 7-day incidence to 12 March is now 20 per 100,000; decreasing by almost half (43%) in the last week. This equates to 63 confirmed cases.
- Across London, 27 of the 32 boroughs have incidence rates below 50 per 100,000; with three boroughs having incidence rates below 25 per 100,000.

Figure 1: Confirmed daily cases in Southwark

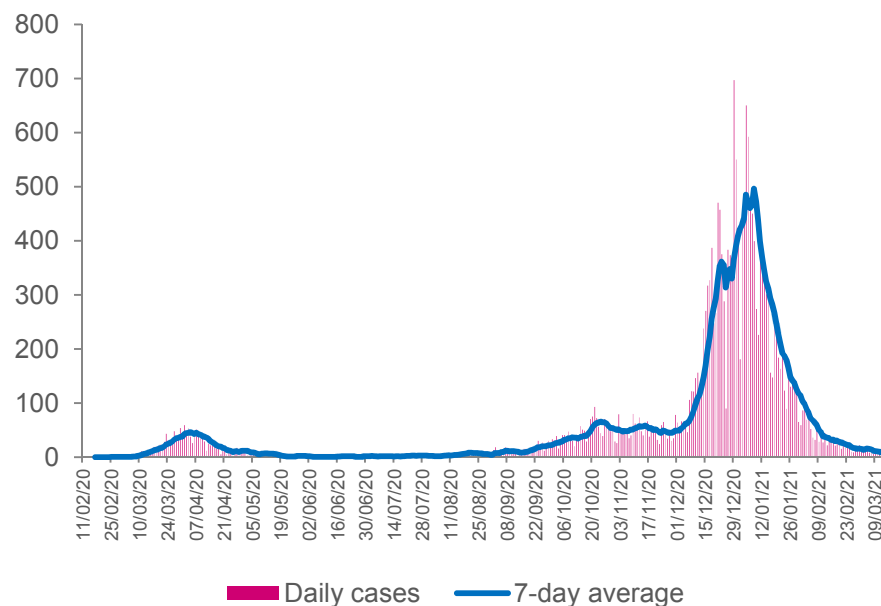


Figure 2: Weekly incidence rate per 100,000 population

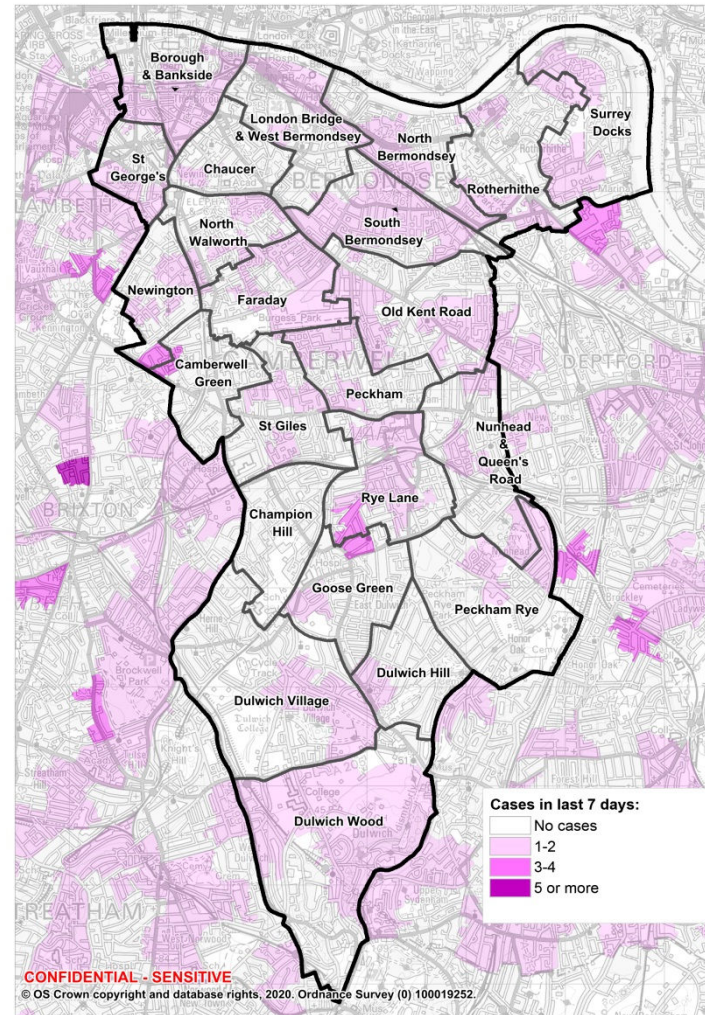


References

1. NHS Digital COVID-19 Local Authority Testing Dashboard.
2. PHE Regional Situation Awareness Report. Data to 12 Mar.

Case numbers continue to decline across Southwark, with low incidence rates across the borough

CASE DISTRIBUTION



Reference

1. PHE Daily Line List. Data to 16 March

Slide 4

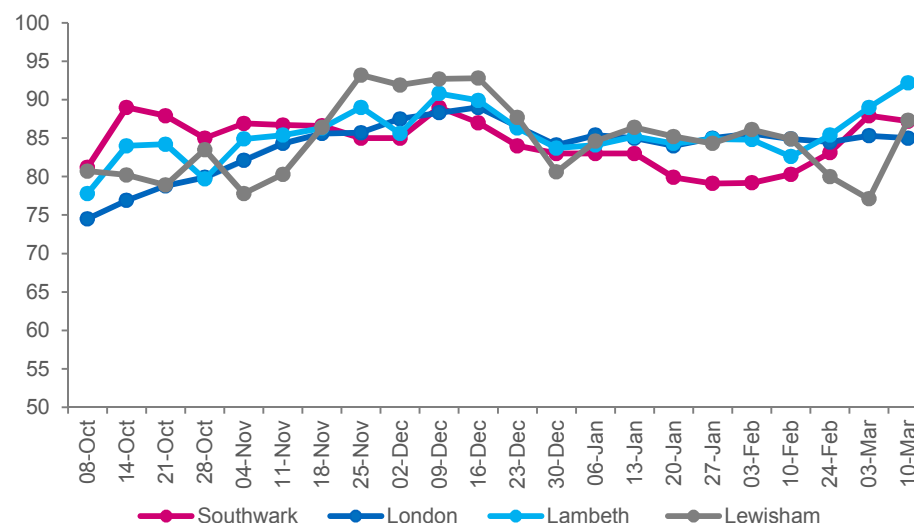
The overall case completion rate for Southwark has seen a recent increase

CONTACT TRACING

NHS Test & Trace data enables monitoring of COVID-19 spread through the testing of suspected cases and tracing of recent close contacts.

- The overall case completion rate for Southwark is made up by the follow-up rates of the local and national teams, and the rates of case auto-completion of the online contact tracing form.
- Completion figures for national and local contact tracing in the week to 10th March:
 - 87% of cases were completed; higher than 85% for London as a whole; and comparable to Lewisham.
 - 75% of contacts were completed; compared to 85% for London as a whole.

Figure 3: Overall weekly case completion rates (%)



Reference

1. PHE. London contract tracing weekly outcome reports. Data to 10 Mar.

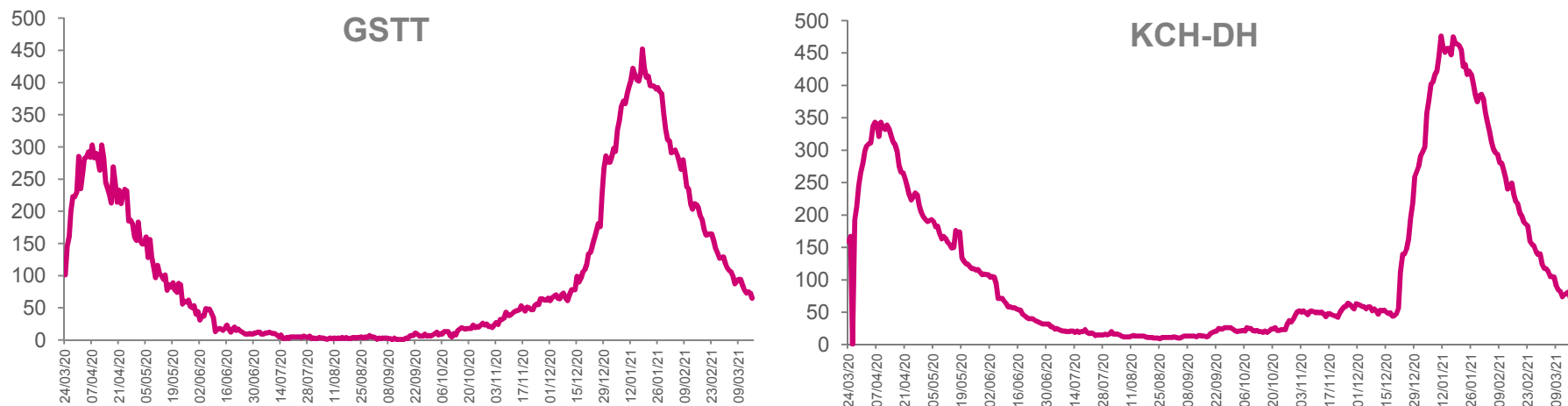
The number of NHS hospital inpatients with COVID-19 is declining, both locally and across London

SECONDARY CARE

Data on local hospitals' confirmed COVID-19 admissions and inpatient diagnoses are provided by NHS situation reports.

- In the last week, combining new admissions and in-patient diagnoses, there have been:
 - 3 cases at GSTT, and 28 cases at KCH-DH.
- There are currently **72** confirmed COVID-19 patients at KCH-DH, and **65** at GSTT.
- Across London, there are **1,138** patients in hospital with COVID-19, comparable to numbers seen in early November. Of these patients, **287** are on mechanical ventilation beds in critical care.

Figure 4: Bed occupancy with COVID-19 diagnosis



References

1. SEL Early Warning report. Data to 16 Mar.
2. Coronavirus.data.gov.uk/healthcare . Data to 16 Mar.

Cases continue to decrease locally and across London, however concerns regarding new variants remain

HORIZON SCANNING

Alert Levels	The alert level has been lowered to 4 “ transmission is high or rising exponentially ”. ONS estimates 1 in 320 people in London had COVID-19 in the week to 6 March. The national R number is currently 0.6-0.8, the same as London.
Key Research	<p>ONS now estimate that 1 in 3 people in England have antibodies against COVID-19, and therefore have some level of protection against the virus. This has increased from 1 in 5 people last month, highlighting the impact of the national vaccine rollout.</p> <p>Results from a recent study suggest that the B.1.1.7 Kent variant first identified in September has between 30% and 100% higher mortality than previous strains. REACT-1 study results indicate the national pace of decline in infections has recently slowed.</p>
Vaccination	<p>The WHO and the European Medical Association continue to review the Oxford-AstraZeneca vaccine safety data, but both have stated that there is no evidence that the vaccine is the cause of recent incidents involving blood clots.</p> <p>National and local research shows vaccine hesitancy to be highest among black people, the young and the low-paid. However, positive attitudes towards vaccines have increased overall since December.</p>
COVID-19 Mortality	Southwark has had 429 deaths related to COVID-19 , with 9 deaths in the week up to 5 March . Overall, Southwark had 297 excess deaths in 2020 , with an additional 141 excess deaths in 2021 .

Find out more at
southwark.gov.uk/publichealth

Southwark Public Health Division

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Southwark's Community Health Ambassadors Network

Health & Wellbeing Board

Southwark Public Health Division

March 2021

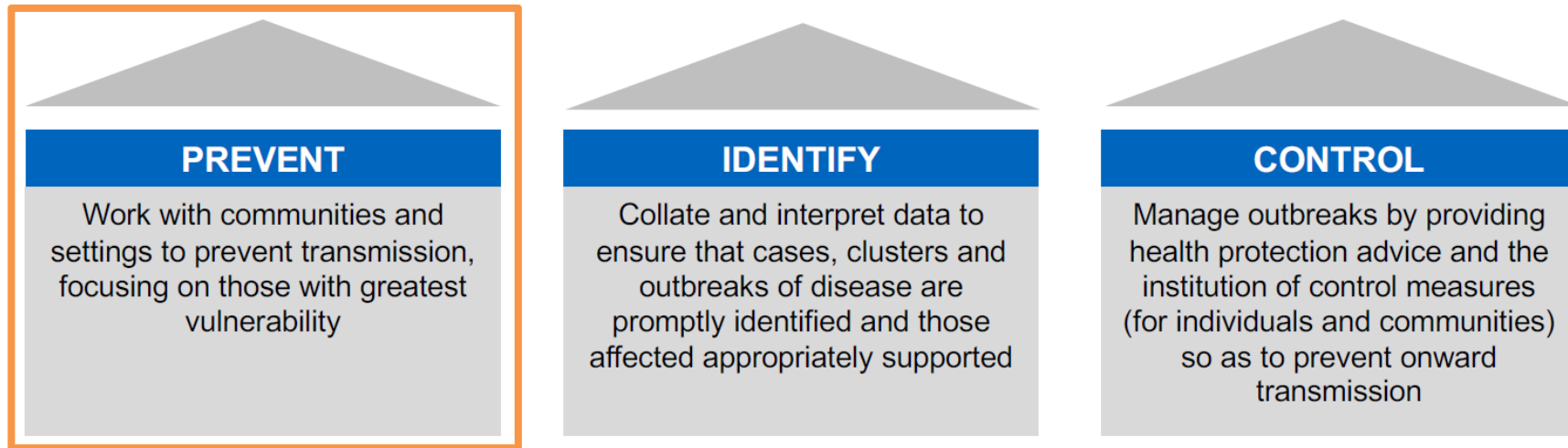
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Introduction to Southwark's Community Health Ambassadors Network

SOUTHWARK'S OUTBREAK PREVENTION AND CONTROL PLAN

Mitigate the impact of novel coronavirus on Southwark's population and communities, focusing on those most at risk.

ENGAGEMENT & COMMUNICATIONS



The initial set-up and ongoing Network co-ordination is the result of partnership and collaborative working between Community Southwark and Southwark Council.

Introduction to Southwark's Community Health Ambassadors Network

ROLE OF AMBASSADORS

Raise awareness

- Share accurate COVID-19 information with their networks, for example:
 - How to prevent transmission and stay safe
 - Testing, NHS Test and Trace and vaccines
 - Responses to myths and misconceptions
- Direct residents within their network to support resources (sign-posting):
 - Resources in different languages and alternative formats
 - Multiple resource formats (e.g. posters, leaflets, social media graphics, videos)
 - Range of different topics (e.g. COVID-19 guidance, financial support, food, medicine or other delivery support, mental wellbeing)

Community voices

- Ensure their community's voice is heard and their questions answered, by providing feedback on:
 - Challenges facing their communities
 - Potential solutions and support required

Introduction to Southwark's Community Health Ambassadors Network

AMBASADOR CRITERIA AND EXPECTATIONS

Who can become and Ambassador?

- The network is open to everyone living or working in Southwark and everyone's voice is important. Ambassadors include local residents, faith groups, voluntary sector workers, volunteers, medical professionals, teachers, TRAs, and Councillors.
- Even if Ambassadors only pass on the information to their closest friends and family, they will still be making a difference.

What are the expectations of an Ambassador?

- In order to sign-up as an Ambassador, individuals are required to complete an expression of interest form, and attend a 90 minute induction session to meet the Network leads and to better understand what the role entails.
- Once on boarded, the role of an Ambassador is to engage with their networks and local communities on the topic of COVID-19. There is no set expectations on time or engagement commitment.
- Ambassadors do not need to be (and are not expected to be) COVID-19 health experts, medical professionals, social workers, therapists or enforcers.

Introduction to Southwark's Community Health Ambassadors Network

SUPPORT FOR AMBASSADORS

Support and resources that are available to Ambassadors include:

- Access to new and trusted COVID-19 resources produced by a range of health organisations, through our weekly newsletters and resource drive.
- The weekly newsletter also includes details of relevant events, training and grant opportunities, and support services and schemes.
- Access to public health professionals and experts who can respond to specific COVID-19 queries.
- Access to free Southwark training courses (digital skills, healthy weight, public health in the pandemic, making every contact count).
- Opportunity to attend webinars and network meetings on specific topics (e.g. vaccine roll-out in Southwark).
- Access to the Induction Pack; a detailed information resource to support you as an Ambassador.

Progress to date of the Southwark's Community Health Ambassadors Network

NUMBER OF AMBASSADORS SIGNED UP

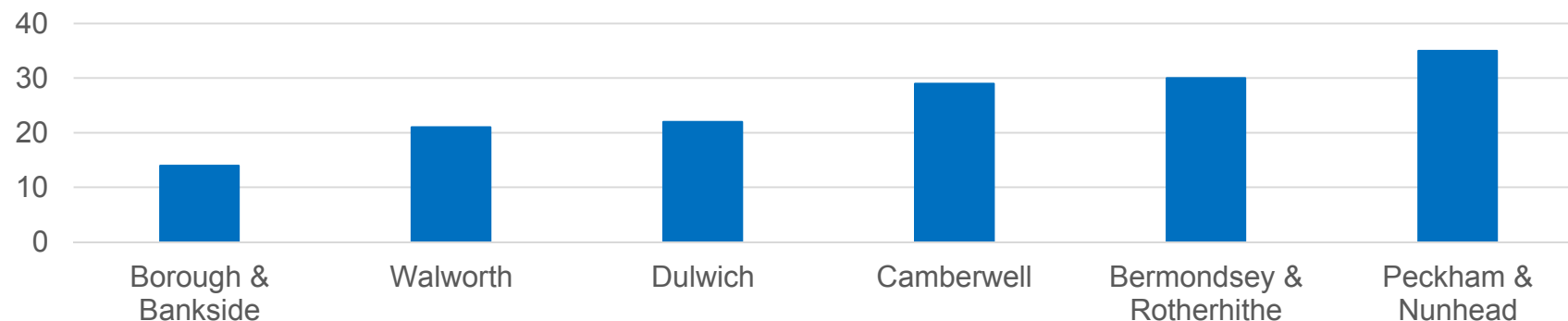
66 Ambassadors registered as of 17/02/21.

68% of Ambassadors who provided ethnic background information selected an ethnic minority group (41).

212 messages were sent out on average per Ambassador in January, with printed and direct messages being the most common message types.¹

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Areas Ambassadors have connections or influence in:



¹ Based on January survey data received from 22 respondents

Progress to date of the Southwark's Community Health Ambassadors Network

FEEDBACK RECEIVED FROM AMBASSADORS

Ambassador feedback examples¹

- *"The weekly email and WhatsApp group has been very helpful in representing what is happening in Southwark and relating my own experiences to a bigger picture."*
- *"Many friends have called me to thank me for convincing them to receive the vaccine after my posts of relatives who have had the vaccine."*
- *"The most effective method has been posting out a paper newsletter, as lots of our clients are digitally excluded -several people who had not previously been in contact have rung as a result."*
- *"I have been sharing lived experiences with regards to barriers to taking the vaccine and offering a personal view point."*
- *"I have found the Ambassador network quite useful, especially if I post a query and someone gets back to me. This helps me to put the correct message out to the wider community. I have been reposting useful information once its verified."*

¹ Based on January survey data received from 22 respondents

Media coverage of the Southwark's Community Health Ambassadors Network

BBC SEGMENT ON THE AMBASSADOR PROGRAMME

BBC London News interviewed two Ambassadors as part of a news piece on vaccine hesitancy in Southwark.

- It was shown as part of the evening news and the lead item on the late news (11/02/21). The two programmes have an accumulative audience of 5,850,000.
- Carole filmed herself having her Covid-19 vaccine to help encourage others to do the same.
- Saidat is active in her local school, mosque and Tenants and Residents Association (TRA). She believes people like her are more suited to getting the message across to people who are worried.



Next steps for the Southwark's Community Health Ambassadors Network

GROWING THE AMBASSADOR NETWORK

We want to accelerate the growth of the Network to maximise the impact and reach into communities to prevent the spread of COVID-19.

- Further utilise existing networks, groups, communication channels and community organisations to help promote the scheme to encourage residents to sign-up as Ambassadors.
- Tailor the Ambassador induction process to better suit particular individuals or communities (e.g. setting specific inductions, one to one inductions)
- Further develop resources and benefits available for Ambassadors to encourage sign-ups and better support Ambassadors already within the Network.
- Sign-up more multilingual Ambassadors to better support communities impacted by language barriers.
- Expand the reach of the Network into priority groups and underrepresented communities.

Any suggestions you have for increasing our impact and reach would be most welcome.

Next steps for the Southwark's Community Health Ambassadors Network

LONGER TERM PLANS FOR THE AMBASSADOR NETWORK

We want to consider how the Ambassador Network could transition and progress in the future.

Longer term COVID-19 considerations:

- Even after the final step of the government's roadmap, when "it is hoped all legal limits on social contact can be removed", there will still be a need for community COVID-19 communications to continue for a longer period (e.g. vaccine passports / certificates, vaccine booster doses, ongoing testing, variants of concern)
- Indirect COVID-19 support is likely to become even more important in the longer term, as a result of the increasing social, economic and health impacts post-pandemic (e.g. financial support, physical and mental wellbeing).

Longer term wider system considerations:

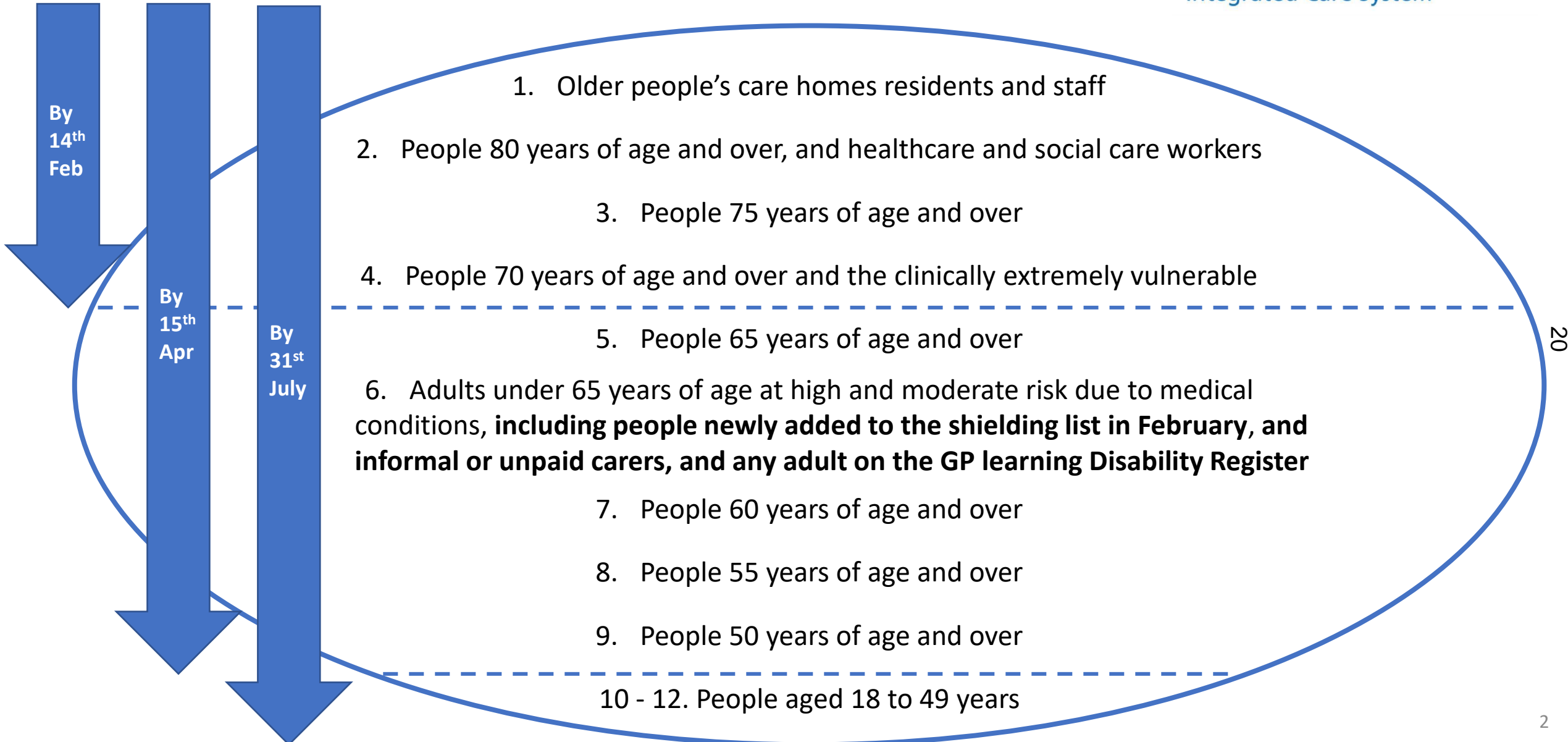
- The Network provides an opportunity to engage, support, co-design and obtain feedback from a wide range of communities, relating to numerous potential Southwark services and initiatives.
- Ambassadors could transition into becoming wider community health champions, by broadening COVID-19 prevention messages into wider health prevention themes to support population health and wellbeing recovery (e.g. smoke-free society, healthier diets, cleaner air, better mental health).

Southwark COVID vaccination programme update

Health and Wellbeing Board briefing

18th March 2021

JCVI priority cohorts: progression to date



Cohorts being vaccinated now

Over 55s

Additional clinically extremely vulnerable

46,015 additional people added to the shielding list in SEL

Added on the basis of BMI, gender, ethnicity and postcode, as well as health conditions

Coding straight into the patient record within 10 days

Notification by letter and email (where held)

GP practice will call people for vaccination

Underlying health conditions

Such as chronic respiratory / heart / kidney / liver / neurological (e.g. stroke) disease, diabetes or immunosuppression

Includes learning disabilities

Total number in SEL are TBC

Unpaid carers

In receipt of Carers Allowance

Coded as a carer in the GP record

Known as a carer to the council

Through voluntary sector organisations that support carers

Proactive communications to encourage carers to come forward

Care home residents, care home staff, health and social care workers, clinically extremely vulnerable

Accessing a vaccination in Southwark

- Patients are being contacted by their GP and/or acute sites for their first vaccination
- Can access the vaccine at our Primary Care Network main and satellite sites
- Community pharmacies in Southwark going through authorisation process
- Care homes, accommodation, homeless and asylum seekers outreach in progress
- Mobile unit and pop up



South East London progress and cohort coverage by borough

Total vaccinations delivered to date:

537,000

	80+	75-79	70-74	CEV	65-69	At risk	Carers (DWP)	60-64**	55-59**	Care home residents	Care home staff
Bexley	93.6%	93.4%	92.6%	85.1%	88.9%	61.8%	53.0%	75.7%	50.1%	89.5%	61.4%
Bromley	93.1%	93.1%	91.6%	86.1%	87.5%	68.6%	52.5%	72.2%	47.4%	90.5%	60.0%
Greenwich	87.4%	87.1%	86.0%	73.0%	79.3%	57.0%	47.5%	61.5%	45.8%	90.3%	57.1%
Lambeth	76.8%	77.1%	75.9%	67.2%	69.0%	52.6%	41.8%	59.4%	41.0%	80.5%	44.5%
Lewisham	79.6%	79.9%	78.9%	68.4%	72.6%	50.6%	44.4%	59.0%	35.3%	80.9%	59.2%
Southwark	77.6%	77.3%	78.3%	66.7%	70.9%	40.8%	39.8%	53.2%	35.8%	86.4%	49.1%

SEL	86.8%	86.5%	85.4%	73.2%	78.8%	55.0%	46.4%	63.7%	42.3%	86.7%	56.2%
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*All data is at Thurs 11th, except for the care home data, which is at Mon 8th

**These cohorts only became eligible in early March so they have not been 'RAG' rated here

Last week's activity: 68,000 vaccination

This week's planned activity: 52,000 vaccinations

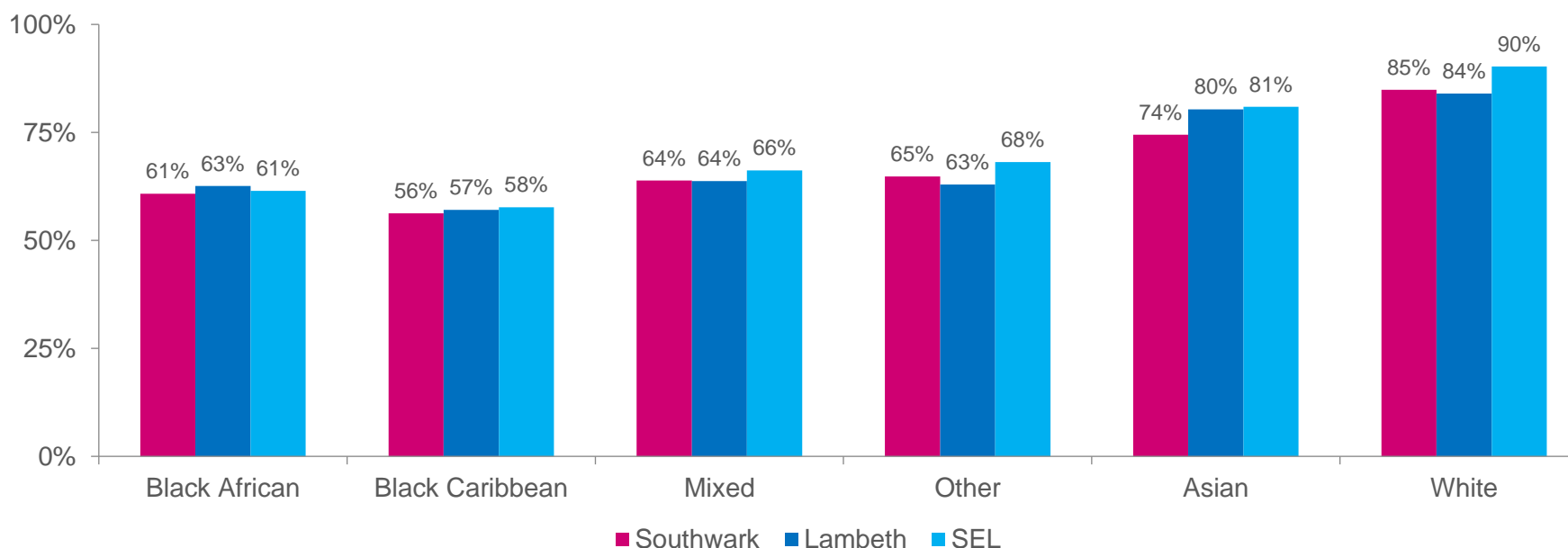
Next week's planned activity: 107,000 vaccinations

Vaccination statistics by ethnicity

Within broad ethnic categories, Southwark's first-dose coverage among high-priority GP-registered persons is comparable to Lambeth and South East London levels.

- People aged 65 yr and over and those who are clinically extremely vulnerable (CEV) are high-priority groups for Covid first-dose vaccination.
- The below data is for local-GP-registered populations (living anywhere); some people are double-counted as they are both CEV and aged 65 yr or over.

Fig. 3 First-dose vaccination rates in high-priority Southwark, Lambeth and SEL GP patients, by main ethnic group



Reference

1. NHSE. NIMS data portal. Data for local-GP-registered patients living anywhere; data to 15 Mar.

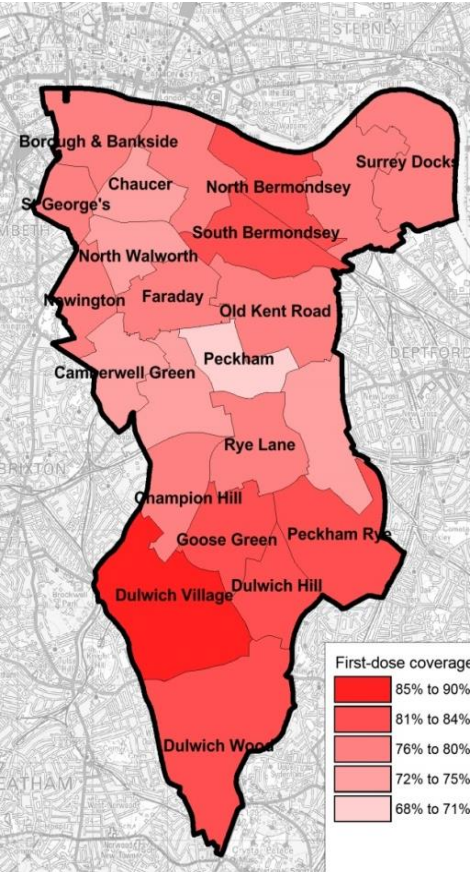
Southwark: Population, uptake % & remaining by PCN, ethnic group, and cohort

PCN	Ethnic Group	Population n	80+ Uptake %	Remaining	Population n	75-79 Uptake %	Remaining	Population n	70-74 Uptake %	Remaining	Population	CEV Uptake %	Remaining	Total Population n	Total Uptake %	Total Remaining
NORTH SOUTHWARK	African	287	55.1%	129	299	55.9%	132	428	62.4%	161	3,957	58.3%	1,652	4,971	58.3%	2,074
	Asian	186	76.3%	44	168	72.6%	46	211	66.4%	71	1,148	72.3%	318	1,713	72.0%	479
	Caribbean	270	60.4%	107	121	53.7%	56	126	58.7%	52	938	48.8%	480	1,455	52.2%	695
	Mixed	60	61.7%	23	39	64.1%	14	63	61.9%	24	510	60.8%	200	672	61.2%	261
	Other	285	63.5%	104	259	64.9%	91	431	60.6%	170	1,956	61.2%	759	2,931	61.7%	1,124
	White	2,266	87.8%	276	1,462	85.7%	209	2,438	86.7%	324	5,080	80.9%	972	11,246	84.2%	1,781
NORTH SOUTHWARK Total		3,354	79.6%	683	2,348	76.7%	548	3,697	78.3%	802	13,589	67.8%	4,381	22,988	72.1%	6,414
SOUTH SOUTHWARK	African	310	61.6%	119	240	58.8%	99	379	56.2%	166	3,359	60.8%	1,317	4,288	60.3%	1,701
	Asian	170	72.4%	47	153	80.4%	30	183	83.6%	30	753	74.1%	195	1,259	76.0%	302
	Caribbean	678	64.6%	240	279	67.0%	92	313	58.8%	129	1,809	53.7%	837	3,079	57.8%	1,298
	Mixed	40	75.0%	10	31	67.7%	10	50	68.0%	16	310	59.0%	127	431	62.2%	163
	Other	369	48.8%	189	250	61.2%	97	396	65.9%	135	1,397	60.1%	558	2,412	59.4%	979
	White	1,644	90.0%	165	1,253	88.4%	145	1,943	88.4%	225	3,441	82.2%	614	8,281	86.1%	1,149
SOUTH SOUTHWARK Total		3,211	76.0%	770	2,206	78.6%	473	3,264	78.5%	701	11,069	67.0%	3,648	19,750	71.7%	5,592
Southwark	African	597	58.5%	248	539	57.1%	231	807	59.5%	327	7,316	59.4%	2,969	9,259	59.2%	3,775
	Asian	356	74.4%	91	321	76.3%	76	394	74.4%	101	1,901	73.0%	513	2,972	73.7%	781
	Caribbean	948	63.4%	347	400	63.0%	148	439	58.8%	181	2,747	52.1%	1,317	4,534	56.0%	1,993
	Mixed	100	67.0%	33	70	65.7%	24	113	64.6%	40	820	60.1%	327	1,103	61.6%	424
	White	3,910	88.7%	441	2,715	87.0%	354	4,381	87.5%	549	8,521	81.4%	1,586	19,527	85.0%	2,930
	Other	654	55.2%	293	509	63.1%	188	827	63.1%	305	3,353	60.7%	1,317	5,343	60.6%	2,103
Grand Total		6,565	77.9%	1,453	4,554	77.6%	1,021	6,961	78.4%	1,503	24,658	67.4%	8,029	42,738	71.9%	12,006

Source: NIMS Dashboard (13/03/2021)

Vaccination statistics by ward

The data below shows ward-level vaccine coverage for high-priority people living in Southwark (regardless of GP location). The map shows that, on **15 March**, coverage for 70+ yr olds was lower in central Southwark

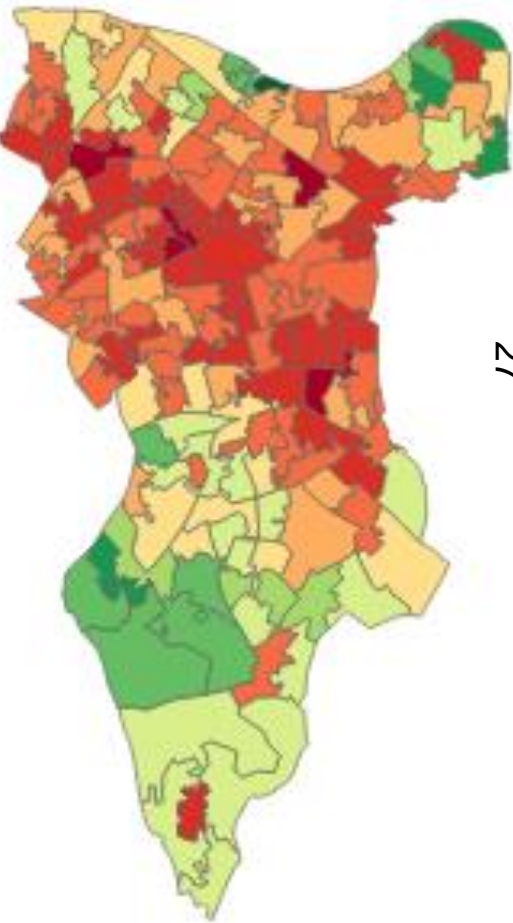
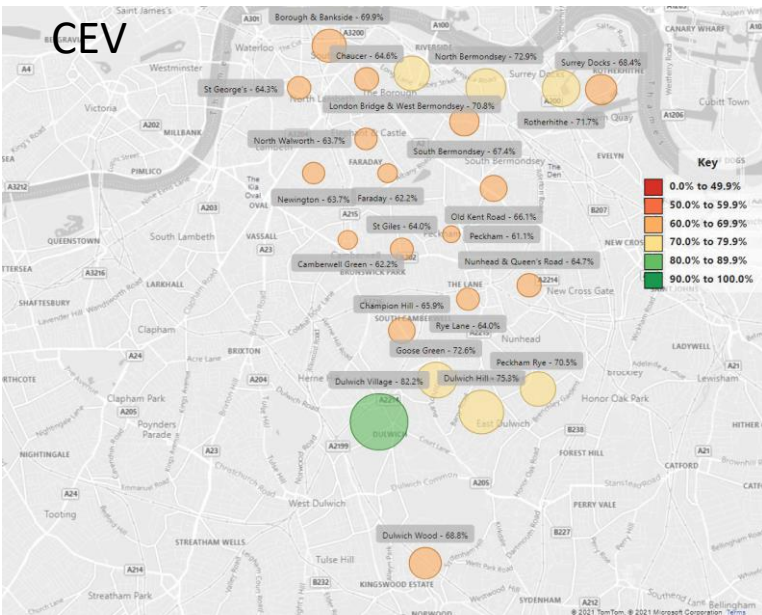
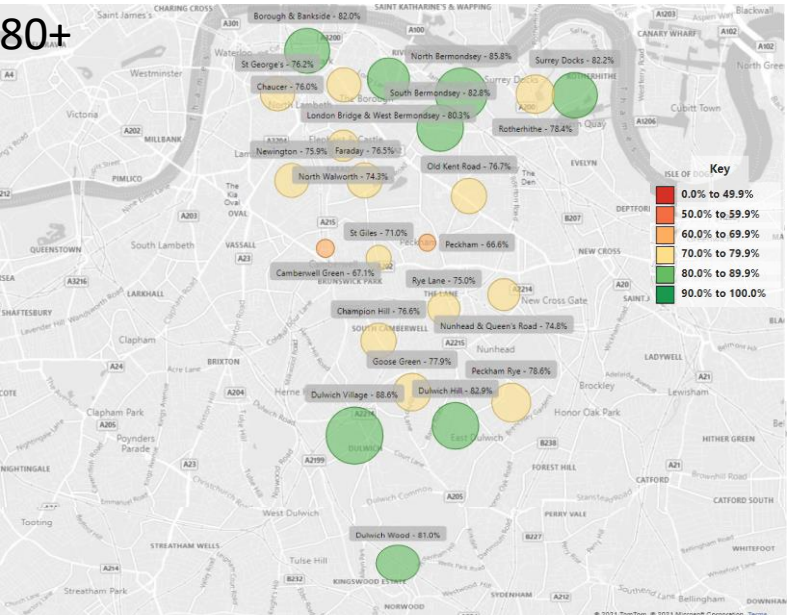
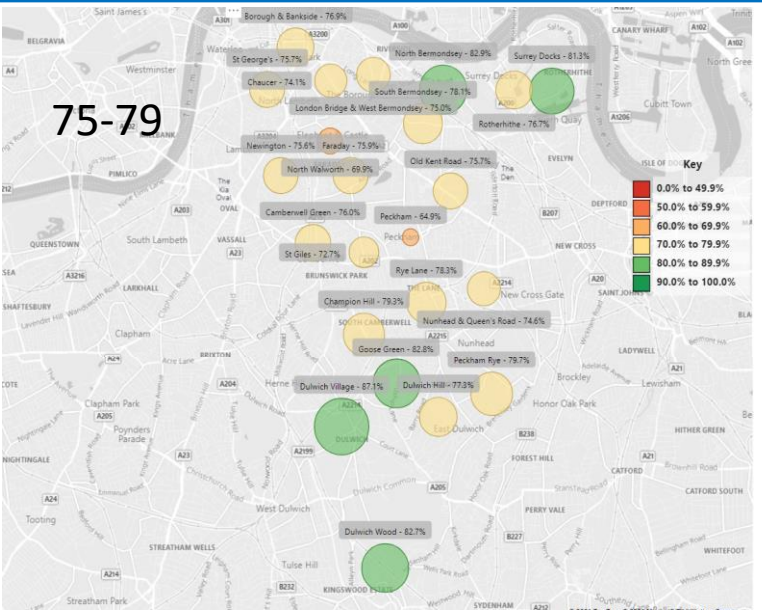
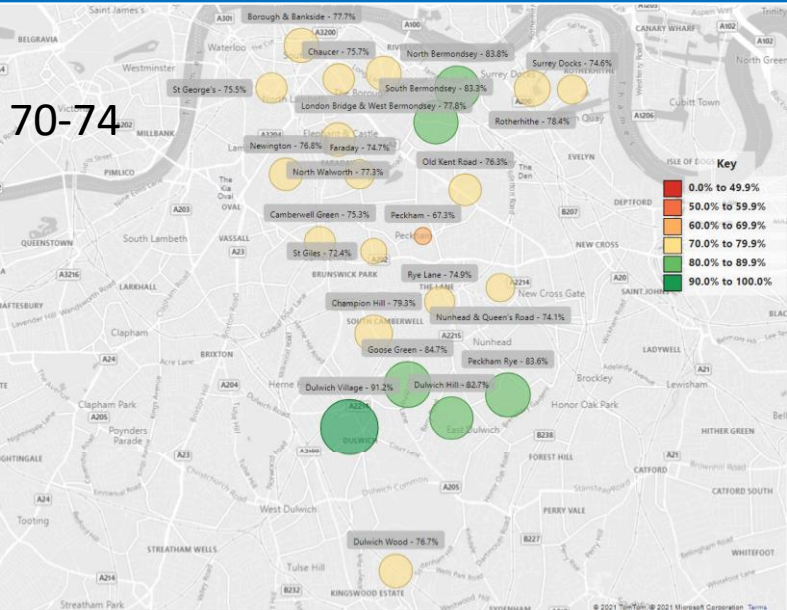


Ward	50-54 y	55-59 y	60-64 y	65-69 y	70-74 y	75-79 y	80+ y	CEV
Borough & Bankside	33%	56%	66%	72%	78%	77%	82%	73%
Camberwell Green	28%	44%	56%	71%	77%	78%	69%	65%
Champion Hill	28%	46%	62%	72%	80%	81%	79%	69%
Chaucer	36%	50%	59%	73%	76%	75%	77%	67%
Dulwich Hill	31%	46%	66%	79%	83%	78%	83%	77%
Dulwich Village	36%	57%	84%	90%	91%	88%	89%	83%
Dulwich Wood	44%	63%	73%	80%	78%	83%	83%	71%
Faraday	27%	41%	50%	68%	76%	76%	77%	65%
Goose Green	27%	47%	66%	77%	85%	83%	79%	75%
London Bridge & W Bermondsey	34%	50%	65%	70%	78%	75%	82%	72%
Newington	34%	50%	61%	71%	77%	77%	77%	66%
North Bermondsey	34%	54%	69%	76%	84%	83%	86%	75%
North Walworth	29%	43%	52%	68%	78%	72%	75%	66%
Nunhead & Queen's Road	29%	38%	54%	67%	74%	76%	76%	67%
Old Kent Road	31%	44%	58%	67%	77%	77%	77%	69%
Peckham	27%	40%	53%	60%	68%	66%	68%	64%
Peckham Rye	34%	51%	61%	75%	84%	80%	79%	72%
Rotherhithe	35%	53%	69%	79%	79%	79%	83%	76%
Rye Lane	30%	44%	55%	66%	76%	79%	75%	65%
South Bermondsey	33%	51%	64%	75%	84%	79%	83%	71%
St George's	34%	47%	63%	72%	76%	77%	77%	67%
St Giles	29%	42%	57%	68%	75%	76%	72%	66%
Surrey Docks	30%	51%	68%	72%	76%	82%	83%	71%
Southwark	32%	47%	61%	72%	79%	78%	79%	69%

References

- NHSE. NIMS data. Data for local residents, regardless of GP location; data to 15 Mar.
- ONS mid-year resident population estimates for wards, 2019. Copyright: Office for National Statistics 2019.

Southwark: Ward Level COVID-19 Vaccination Uptake

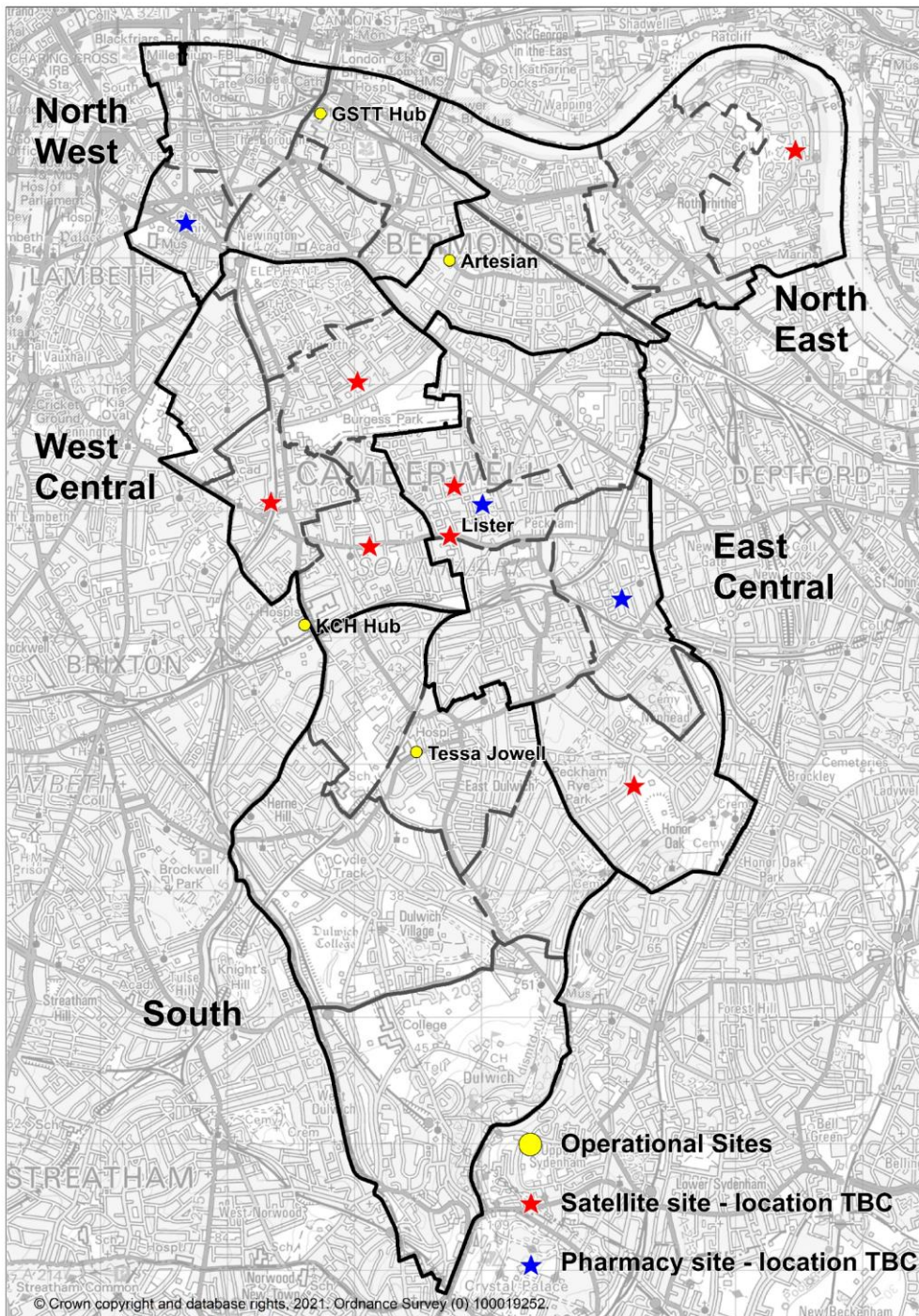


Borough Plan Design principles

In discussion with local partners a draft set of design principles have been developed:

- The borough will take a portfolio approach to the covid vaccination programme
- It will be a blended approach of fixed sites and mobile/pop up sites which will have varying capacity dependent on resources and vaccine delivery schedule
- Fully utilise the established hospital hubs/mass vaccination sites within the borough recognising that some of them are strategically placed near public transport and will serve a working/mobile population
- Support the 'flip' of hospital hubs to mass vaccination sites
- Reduce the inequalities across the population by targeting service and co-design with communities
- Recognises the value of trusted and established relationships
- Delivery sites continue with limited step up/step down activity
- Focus additional capacity on meeting the needs of the communities that find it difficult or are reluctant to travel
- Make having a vaccine as easy as possible for all
- Maximise the flexibilities that the standard operating procedure allows to support the delivery of a roving or mobile model
- Recognise the need for a flexible, sustainable and valued workforce to support the programme

Borough plan



- Includes
 - KCH, Denmark Hill
 - GST, London Bridge
 - Primary Care Networks
 - Satellite sites (some in development)
 - Community Pharmacies but note these have not been authorized as yet
- Excludes
 - Mobile unit
 - Outreach to care homes, other accommodation providers, homeless hostels and hotels, asylum seekers core and contingency hotels

- Continued work with GP practices and community groups so patients are not left behind
- Approach dependent on population
- Looking forward work for cohorts 10-12
- Southwark Joint Immunisations and Vaccinations Strategy 5 aims
- Borough vaccination Group
- Joint Immunisations and Vaccination Plan
- £400k funding to support vaccine hesitancy work

Interventions

- Working with local politicians to address inequalities and challenges by ward
- Using pop up clinics in deprived areas and church venues
- Reimbursing travel costs to vaccination sites.
- Training and appointing ambassadors who have knowledge and insight of BAME communities
- Identifying homeless and use existing ways to vaccinate them at hostels and other familiar locations

Tackling vaccine hesitancy – what we are doing

1. Multiple engagement/briefing sessions
2. Pop-up and additional clinics (focused on certain groups including homeless and Patients with Learning Disabilities)
3. Continue to work with care home staff - numbers taking up vaccination increasing
4. Working with community champions, faith leaders, community leaders and partner organisations to listen to concerns and to provide trusted information



Questions, comments, ideas

Emerging Impact of COVID

18 March 2021

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Context re Impact of COVID on children and young people across Southwark.

- 112 schools of which 20 are secondary
- Approx 40,000 children and young people
- Range of data and statistics from agencies but early for schools
- March 2021 full return to school
- Not just affecting children and young people – lets remember the adults/teachers

Attendance

- 89%+ at secondary
- 95% + at Primary
- By mid February 2021 the attendance of vulnerable children had reached: those with an EHCP 46%, those with a social worker 43% and those eligible for free school meals 17%. (data from 80% return from schools)

Context

All schools are very mindful of the need to address emotional health and well-being needs and although there will be individual strategies in place as mentioned above, they are also taking a broader approach to this on the return to school, planning units of work, activities, etc around this. This was a successful approach in September.

Measures/interventions are in place to address, e.g. 1:1s, FEH involvement, Place2Be, The NEST, Kooth, CAMHS etc

Primary Schools- common themes

- Generally, the primary school population has settled quickly and excitedly back into school;
- The vast majority are not showing specific or worrying signs of distress at this point
- Not long enough back to assess full range of MH issues (it took longer last time for issues to show for some, e.g. in relation to DV or abuse)



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Secondary Schools- common themes

- Some students are struggling with sleep with many not able to leave the house at all, for fresh air and exercise
- Lots of more generalised anxiety issues, e.g. pulling out their hair and or eyelashes, trichotillomania
- For some students with prior behavioral issues have responded positively to home learning opportunities, engagement has improved
- Digital learning has enabled more students to access online yoga sessions, relaxation and mindfulness sessions, than we usually get for face to face sessions.
- Teachers recognise the importance of a “recovery focus”, just like last year.

Example from 1 x secondary school

- Higher concerns around eating disorder like symptoms
- Higher cases of online safeguarding issues
- Really positive home/family relationships
- Children accessing and seeking out MH support – support structures
- Some positive behaviour changes in teachers owning their behaviour in their classrooms



Impact on children: What Primary schools are telling us

Primary:

- Children have a shorter concentration span and easily distracted or 'zone out'
- Some children are a bit unsure and anxious
- Children are visibly less fit, and many more seem overweight and have less stamina
- Children seem more aware of the impact Covid is having on them, becoming vocal about how 'lost' they felt and the hit their self-esteem has taken
- The talk of longer days/smaller breaks has really worried some children
- Real positive is that most children are resilient
- On the whole for staff, there is a sense of relief at the return to consistency in a daily routine and going home, etc

Impact on children

- Issues for children are likely to be individual ones with most already known about, through monitoring and contact during lockdown if not in school (and most vulnerable children were)
- Covid has exacerbated some issues for known children, e.g. those who are emotionally vulnerable
- Social skills and confidence need building up, including appropriate language and communication skills
- anxiety around friendships that they will need will need to work, e.g. negotiating friendships in the playground, interacting and getting it right
- Very young children have had some difficulty with self-regulation – occasional and unexpected ‘melt-downs’ and a few have wanted to stay inside, worrying about going outside



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SEND

- Pupils with SEND, and ASD in particular, can take time to adjust to the whole class/school being back
- The impact of the pandemic and more specifically school closures, on this group of very vulnerable pupils has been very mixed.
- Each school has had students/pupils who have been extremely anxious about all aspects of the pandemic
- Special school staff have been in weekly or more frequent contact with all pupils who have not been in school and have worked very effectively with other agencies including health and social care to support the most vulnerable and anxious families.
- Those who have attended school throughout have been happy, relaxed and have been learning well.
- Positive attitudes to less crowded schools, consistent routines and the usual focus on well-being and happiness.
- Some families of pupils who have not attended, due to the anxieties or other concerns, have also fed back that their children are happy, settled and have developed strong family relationships often with other members with whom, up until this point they had not been close.
- On the whole, they engaged well with the remote learning packages prepared by their schools (this appears to be something of a national picture).

What partners are telling us

- Complexity of mental health presentation and crisis
- CYP presenting with mental health concerns at A&E departments
- Rise in disordered eating behaviours
- CYP reporting feelings of anxiety, depression, and being unable to sleep
- **Referrals to CAMHS**
- Constant demand from Feb through to Nov (around 130 referrals per month) with a drop in Dec/ Jan. Feb 2021 figures awaited
- Eating disorder and crisis services saw a considerable increase in referrals.
- There is an expectation that referrals will significantly increase from schools full reopening from March 8th.

Feedback from 2 service providers

The NEST

Wellbeing Coaches I secondary schools 1:1 and group sessions – working with students and staff, online workshops- panic attacks teachers felt ill –equipped with scale

1 x On-line provider

Demand higher during term time – more F than male, more in the 11-14 age range, anxiety and stress most common factors, Black or Black British and White young people, most referrals from schools.



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Impact on staff

One quote from a teacher:

- “For me personally, I feel a bit lonely. Because we have to stick in our year bubbles, even at break times, the social aspect of having friends at school to sit and chat with and catch up with has disappeared really. I know this is how quite a few people feel. We are back, but we are isolated from each other. You think of the stuff you enjoy about the job, and a lot of it has been removed. I love taking children out, going to competitions, sitting, chatting, and being around the whole school, and it just isn't possible.”

Continue

- Keep under review the targeting of council investment in mental health in schools.
- To achieve/maintain an overarching Southwark picture of need and how this is being addressed.
- More detail on impact on groups by ethnicity and vulnerability.
- Greater information on impact on adults working with children and young people.

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NOTE: Amendments/queries to Poonam Patel, Constitutional Team, MSTeams

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