

SOUTH TEES HEALTH PROTECTION ASSURANCE WORKSHOP - CHILDREN

Thursday 19th September

09:15 – 12:05

Via Microsoft Teams



HOUSE KEEPING

- Please put your microphone on mute
- There will be an opportunity to ask questions at the end of each presentation. Please put your yellow hand up to allow us to take questions in order.
- If you don't manage to ask your question, please pop it in the chat and we will send a response out with the information afterwards.



A LEGAL DUTY

- This is the **seventh** annual health protection assurance workshop for the Live Well South Tees Board.
- The Health and Social Care Act imposes a legal duty on local authorities to provide information and advice to certain persons and bodies within their area in order to promote the preparation of health protection arrangements against threats to the health of the local population, including from infectious disease, environmental hazards and extreme weather events.
- The Health and Wellbeing Board requires assurance that this duty has been adequately discharged – Annual Report
- **Today will provide us with the opportunity to reflect on some current issues and strengthen our collective efforts to protect the health of the South Tees Population.**



HEALTH PROTECTION FUNCTION

The health protection function is delivered by multiple health organisations at national, regional and local levels who work very closely together to fulfil their function dependent on the type of emergency.

Category 1 responders – Emergency Services, UK Health Security Agency, NHS England, NHS Acute Trusts, ICB, Public Health in Local Authority

Category 2 responders – Highways, utilities providers, HSE, Voluntary Sector

Main Role: To develop policy, guidance, advice on planning and response to emergencies

Areas of responsibilities:

- Act as lead for health consequences arising from the following emergencies:
 - Chemical, biological, radiological and nuclear (CBRN)
 - Human infectious diseases (including pandemic flu)
 - Disruption to medical supply chains / stockpiling medical and other counter measures
 - Mass casualties



WELCOME

Clare Mahoney

Assistant Director of Education & Skills

Redcar & Cleveland Council

EDUCATION AND HEALTH PROTECTION

- Covid-19 highlighted that schools are vulnerable to health protection incidents.
- Demonstrated that the unpredictable nature of health protection can have a significant detrimental impact on attendance, learning and attainment.
- Education organisations that have an ongoing dialogue with local health protection providers will be better prepared for the next incident - **because there will be one!!**
- It's our duty to work with parents to ensure that children are well looked after and all aspects of their wellbeing are taken care of
- Locally, we recognise that many parents have low literacy levels and for some English is not their first language.



WHAT GOOD LOOKS LIKE...

- Healthier environments for our pupils, staff and wider communities.
- Reduce the spread of contagious diseases, meaning **better attendance**, learning and attainment.
- Develop our local resilience by educating staff and pupils about the importance of health protection alongside mental health and physical health – which we know impacts on attendance and achievement not just at school, but also beyond, throughout working life.
- Improve our poor immunisation uptake rates to help reduce the burden of disease experienced locally.
- Encourage pupils and staff to engage in screening that helps identify illness early when treatment and positive outcomes are still possible.



Non-Communicable Disease & Attendance

Louise Dauncey

Network Delivery Manager

North East and North Cumbria Integrated Care
Board

Sophie Gilmour-Ivens

Paediatric Epilepsy Specialist Nurse

North East and North Cumbria Integrated Care
Board



CYP Transformation South Tees Health Starters

Louise Dauncey
Network Delivery Manager - CYPT

Part of:

North East North Cumbria
Health & Care Partnership



Child Health and Wellbeing Network

Our vision

In the North East and North Cumbria we believe all children and young people should be given the opportunity to flourish and reach their potential, and be advantaged by organisations working together



ENABLERS



CROSS CUTTING THEMES



What do you want us to do

“Share good practice, drive work forward and connect us into experts and groups”

[Join the Network](#) or scan QR code



CHWN Work Programmes

- Youth Voice
- Inequalities focus – [Core 20](#)
- Comms and Engagement
- CYPT Integration Centre
- CYPT Programme



CYP Transformation Programme

10 Key Priority Workstreams



The CYPT programme will lead change to **integrate** and **improve** the delivery of **inclusive** services.



Ten key areas of work for CYP Transformation Programme:

- Integration of Services within Health and Care, led by local systems
- Identifying and protecting the most vulnerable children and young people
- Evaluating paediatricians working in 111 providers
- Developing data and capacity to monitor and understand the state of child health
- Spotting the deteriorating child
- Developing a joint approach to transition and 0-25 model of care
- Delivering obesity pilot to develop evidence base relating to obesity related complications
- Implement national bundle to improve asthma outcomes
- **Improvements in epilepsy, diabetes and other long-term conditions**
- Keeping children well and focus on holistic and therapeutic needs





Epilepsy

Sophie Gilmour-Ivens

Paediatric Epilepsy Specialist Nurse Strategic Lead

Part of:

**North East North Cumbria
Health & Care Partnership**



What is Epilepsy?

- Epilepsy is a tendency to have recurrent epileptic seizures, more than 24 hours apart.
- Epilepsy is a variable condition that affects different people in different ways.
- 1 in 200 school-age children and young people in UK, have epilepsy.

What is a seizure?

- A seizure is a sudden and temporary increase of electrical activity within the brain cells (neurons).
- Seizures can affect part of the brain (focal seizures) or the whole of the brain (generalised seizures).
- What a seizure looks like depends on what area of the brain is involved.
- There are over 60 different types of seizure.

Impact of Epilepsy on CYP

- Attendance: Time off for appointments / days off after seizures / days off with medication side effects.
- Behaviour: Epilepsy and / or medication can cause hyperactivity, aggression and challenging behaviour.
- Learning: CYPwE may have problems with memory, attention, concentration and processing information
- Mental Health: Approximately 40% of CYPwE have a co-existing mental health disorder
- Sleep: Seizures and / or medication can disrupt sleep or make CYP sleepy.
- Stigma / bullying: Due to misunderstanding about the condition

What can Schools do?

- Epilepsy education / training (Online / PESNs)
- Record seizures (video / written account / seizure diary)
- Screen for learning and behaviour issues (Young Epilepsy ABLE screening tool)
- Develop a relationship with the local PESNs

What do the PESNs do?

- Advice to other professionals
- Family support
- Safeguarding
- Training – safety / first aid / emergency medication
- Write individualised epilepsy plans

South Tees PESN Team

- Paediatric Epilepsy Specialist nurses:
Helen Gilpin
Helen Garfitt
Samantha Boddy
- HCA/Admin Support
Gina Hicks
- Tel: 01642 854489
- stees.childrensepilepsy@nhs.net

Resources

- Epilepsy Action website: www.epilepsy.org.uk
- Epilepsy Society website: www.epilepsysociety.org.uk
- Young Epilepsy website: www.youngepilepsy.org.uk
- [Supporting young people with epilepsy | Young Epilepsy](#)
- [Epilepsy for teachers | Epilepsy Action Learning](#)

Other Education Sessions

Schools Education Session (26th September)

[Epilepsy – Schools Webinar \(office.com\)](#)

HT Epilepsy Lunch and Learn (8th November)

<https://forms.office.com/e/fwcS9Z7Q8Y>

Childhood Illness Back to School HT Lunch and Learn (24th September)

[Back to School Common Childhood Illnesses - HT Champion Learning Session \(office.com\)](#)

Questions?

Communicable Disease

Dr Simon Howard

Consultant in Health Protection
UK Health Security Agency



UK Health
Security
Agency

Communicable diseases, infection prevention and control, and attendance

Dr Simon Howard
Consultant in Health Protection

The North East Health Protection Team

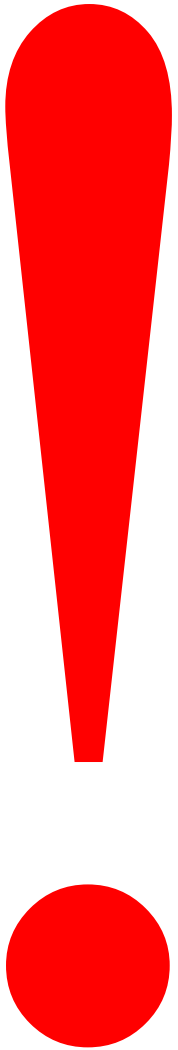
We're a team of specialist doctors, nurses and practitioners.

We're here to protect the population.

We do that through **advising**, **helping** and **supporting**

- we are **not** a regulator
- we are **not** 'keeping an eye' on you





- We are not experts in childcare settings – most of our work elsewhere
- You know your schools and communities best
- When things happen, it is crucial that we **work together** to do the right thing(s) to protect those at risk
- We can't advise on everything – scabies and nits are infections that we often get asked about but can only give limited advice on.

We get reorganised a lot...



...but the local team/service stays the same

Infections in childcare settings



Childcare settings are common sites for transmission of infections.

Children can be particularly susceptible because:

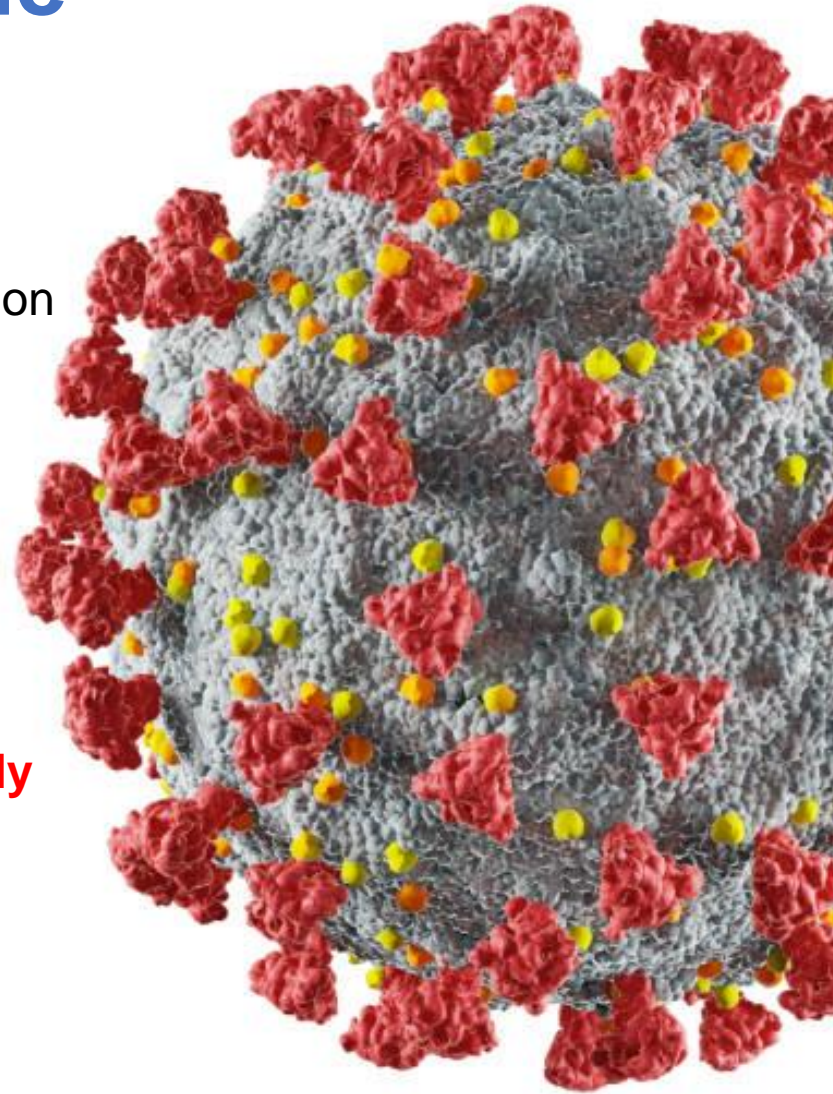
- they have immature immune systems
- have close contact with other children
- sometimes have no or incomplete vaccinations
- have a poor understanding of hygiene practices

COVID was a very 'odd' time

Schools had to cope with things that the Health Protection Team would almost never advise:

- Closing – and opening – and closing – and opening!
- Testing all pupils for an infectious disease
- Changing guidance every five minutes (!)

Health Protection is usually boring – it is about really basic stuff (cleaning, washing hands) and doesn't ever really change.



Good ways to prevent outbreaks



- Exclude children with infections for the appropriate period of time – **especially following the 48hr rule for those with diarrhoea and/or vomiting.**
- Hand hygiene – liquid soap and water is best.
- Hand washing after using the toilet and before eating
- Good respiratory hygiene
- High standards of cleaning
- High food hygiene standards
- Encourage vaccinations – these **also help with attendance**

Guidance
Managing specific infectious diseases: A to Z

Updated 26 June 2024

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z>

Should I keep my
child off school?

Yes

Until...

Chickenpox	at least 5 days from the onset of the rash and until all blisters have crusted over
Diarrhoea and Vomiting	48 hours after their last episode
Cold and Flu-like illness (including COVID-19)	they no longer have a high temperature and feel well enough to attend. Follow the national guidance if they've tested positive for COVID-19.
Impetigo	their sores have crusted and healed, or 48 hours after they started antibiotics
Measles	4 days after the rash first appeared
Mumps	5 days after the swelling started
Scabies	they've had their first treatment
Scarlet Fever	24 hours after they started taking antibiotics
Whooping Cough	48 hours after they started taking antibiotics

No

but make sure you let their school or nursery know about...

Hand, foot and mouth	Glandular fever
Head lice	Tonsillitis
Threadworms	Slapped cheek



 SCAN ME

Advice and guidance
To find out more, search for **health protection in schools** or scan the QR code or visit <https://qrco.de/minftec>.

Things to avoid

- **Don't** try and shorten exclusion periods to increase attendance – you'll have the opposite effect.
- **Don't** send letters about circulating illnesses without giving us a ring first – we can help you get it right first time.
- **Don't** tell parents or the press that there has been a case of an infection in your setting – such as meningococcal meningitis – without talking to us first. We can liaise with the doctors involved in treating the case.
- **Don't** be afraid to call us – we're here to help and getting early advice helps.



A flavour of things we might advise



ADVICE

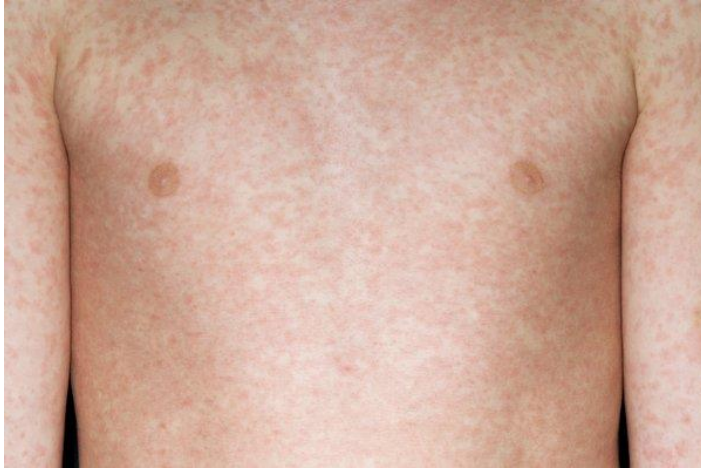
- We will probably ask you to **collate and share information with us** so that we can give the right advice. This may include **personal information** – it is okay under GDPR etc to share this with us.
- We may advise you to **stop certain activities** during an outbreak (e.g. 'messy play')
- We may advise you to **send messages to parents**. We often have templates, and can always help you to get the messages right.

Rare, but it happens...

- We might need to exclude someone from your setting without being able to share full information as to why.
- We might need to exclude someone for a prolonged and uncertain period, particularly if we need to achieve 'clearance' (a negative test) before they can safely return.
- For younger children, we might need to discuss whether you can support supervised toileting / handwashing for a period to support their return.
- We might need to work with you and local health services to provide vaccinations, antibiotics or testing for a group of children or staff.



A note on measles



- Measles is **very infectious**
- **Usually mild illness**, but can be very serious or even fatal in vulnerable people
- **Vaccination** is the best protection – 2xMMR
- **Usually rare in the North East** – but lots of cases in the UK and Europe at the moment, and some in South Tees earlier this year – we may see more in the autumn
- Can lead to **prolonged exclusion** from childcare settings – e.g. for unvaccinated siblings of cases

0300 303 8596

- **If you'd like advice on infectious diseases** – especially if someone has a serious illness, or you have an outbreak of D&V, Scarlet Fever, Chicken pox – or something that is 'unusual for you'.
- If you think you might have an outbreak that is 'unusual for you' – e.g. two or more cases of salmonella or *E coli* that you think may be linked.
- If you are thinking of sending a letter to parents about circulating illness.
- If someone has been diagnosed with an infectious disease and parents are getting worried.



Free educational resources for ages 3-16

e-Bug resources support students to learn about microbes, infection prevention and control, antibiotics and vaccination. Each lesson plan is mapped to the National Curriculum and includes activities, handouts, worksheets, and adaptable content. Scroll down to see the range of resources on offer.





UK Health
Security
Agency

Communicable diseases, infection prevention and control, and attendance

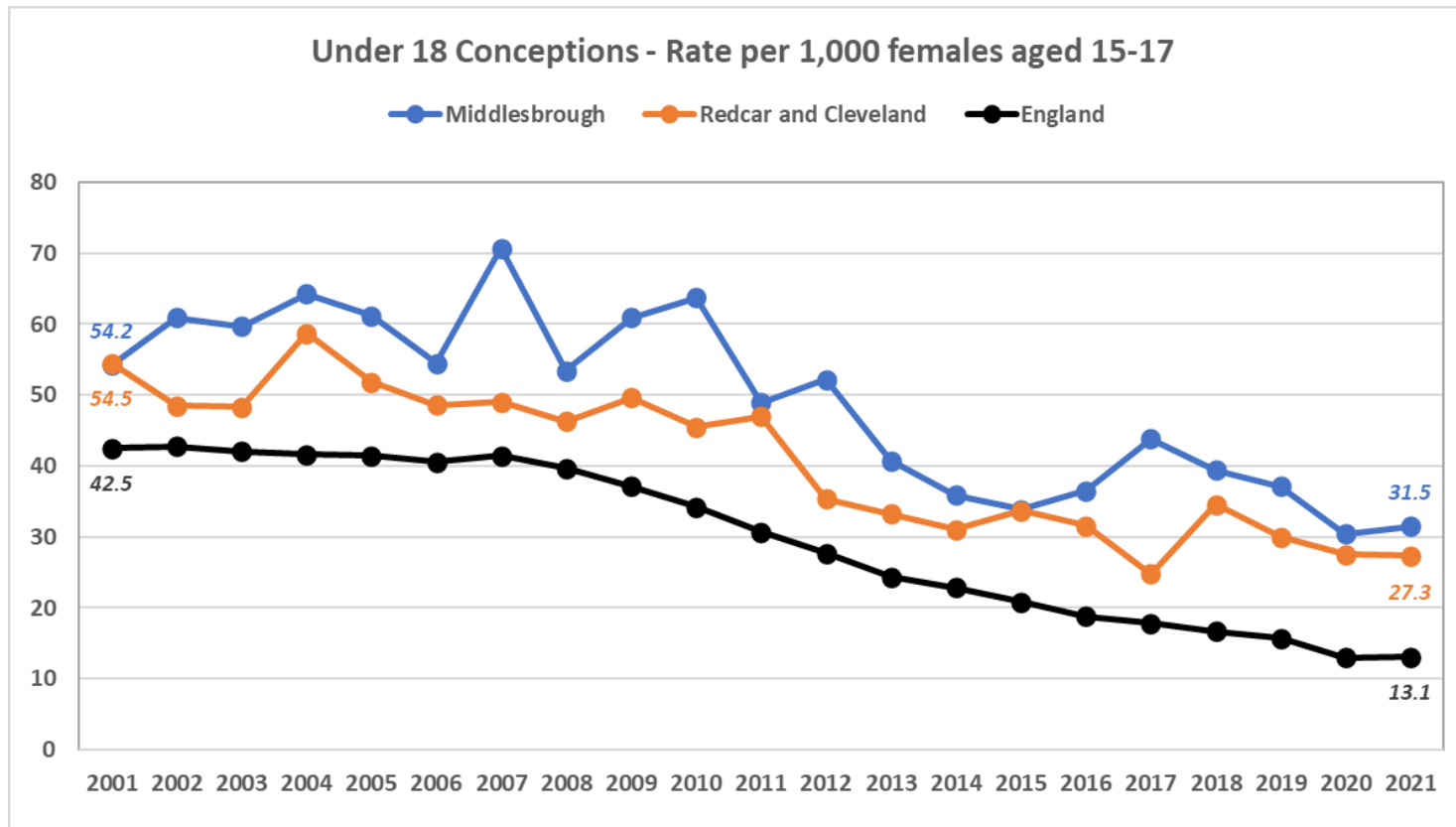
Dr Simon Howard
Consultant in Health Protection

Teenage Pregnancy & Conceptions

Jacky Booth

Sexual Health Lead & Tees Sexual Health Contract Manager
Public Health South Tees

Teenage Conceptions – ONS Annual Data



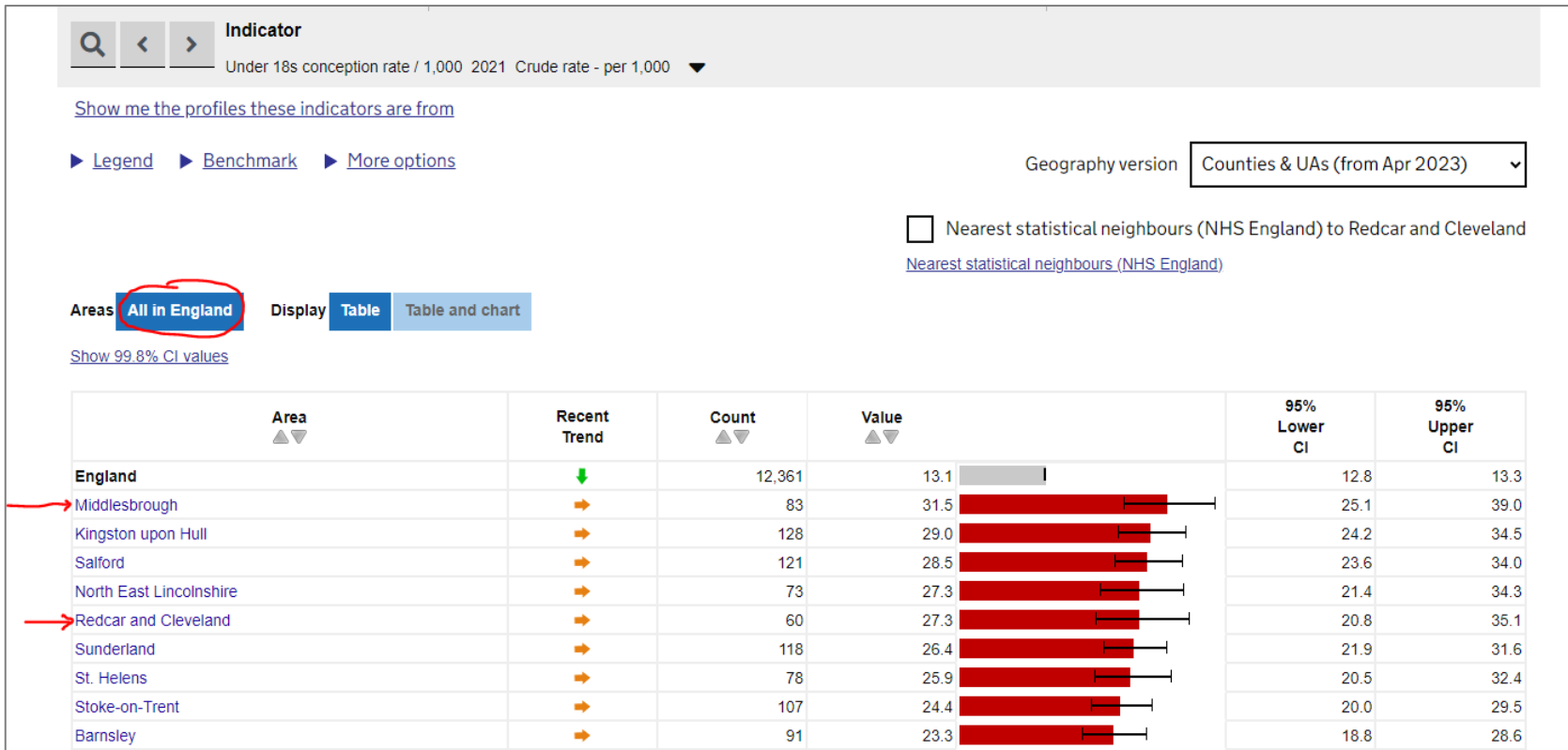
M'Bro - 31.5 per 1,000

R&C - 27.3 per 1,000

England - 13.1 per 1,000

Conception rates higher than England but on a downward trend.

Teenage Conceptions – ONS Annual Data – 2021 Rank



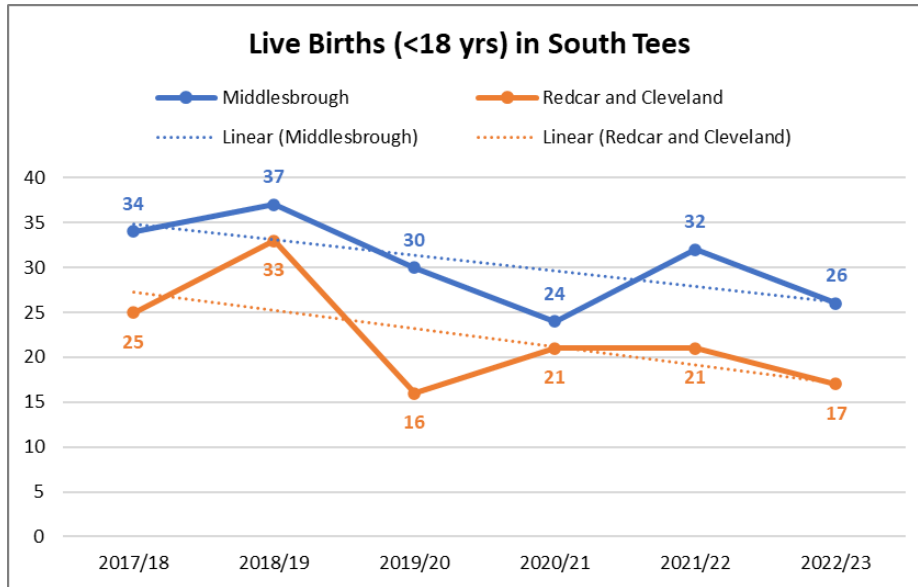
2021 Data

M'Bro
Ranked 1st highest
nationally (n=83)

R&C
Ranked 5th highest
nationally (n=60)

Female
population 15-17
(Mid 2022)
MBC is 2,703
RCBC is 2,339

Teenage Conceptions

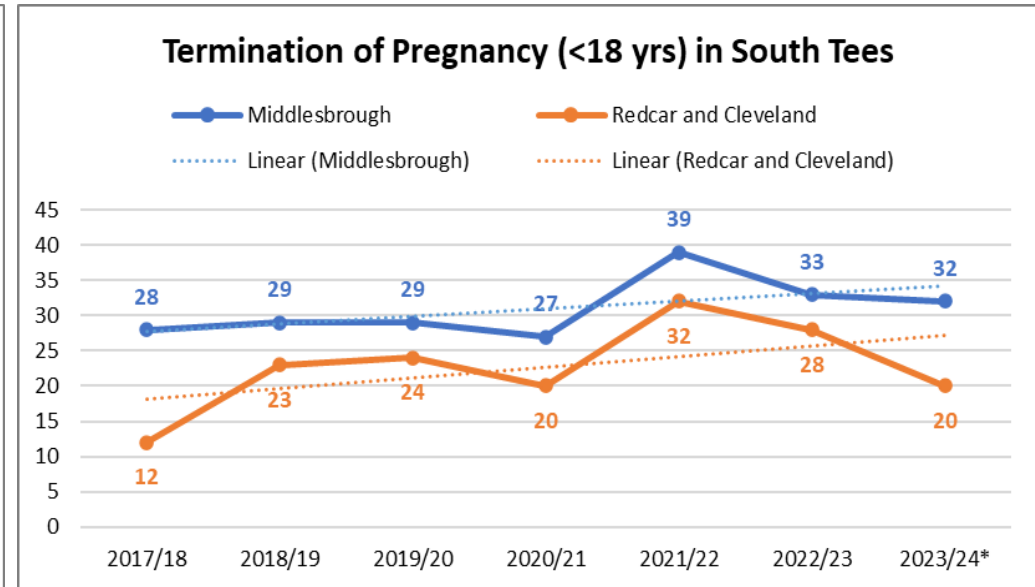


2022/23

Live births on a downward trend

MBC - 26

RCBC - 17

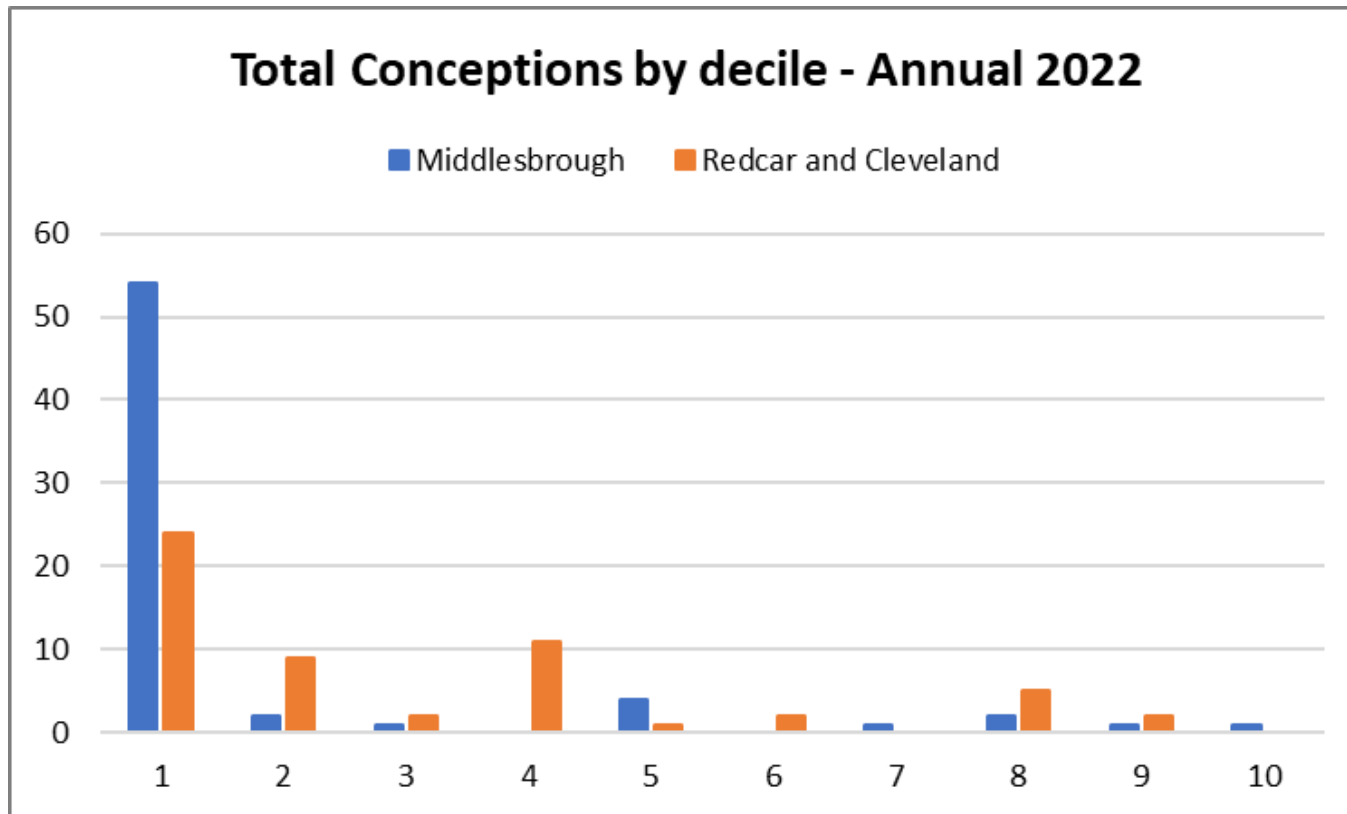


2022/23

ToP in MBC trend slightly up (2023/24 partial data, predict another 4) 36

ToP in RCBC trend slightly up (2023/24 partial data, predict another 4) 24

Decile - 2022



Majority of conceptions occur in decile 1 – most deprived areas

Middlesbrough
75% of conceptions in decile 1

Redcar & Cleveland
35% of conceptions in decile 1



Highest Conception Wards

Middlesbrough Wards

- Longlands & Beechwood
- Brambles & Thorntree
- Newport
- Ayresome
- Central
- Parkend & Beckfield

Redcar and Cleveland Wards

Grangetown

Brotton

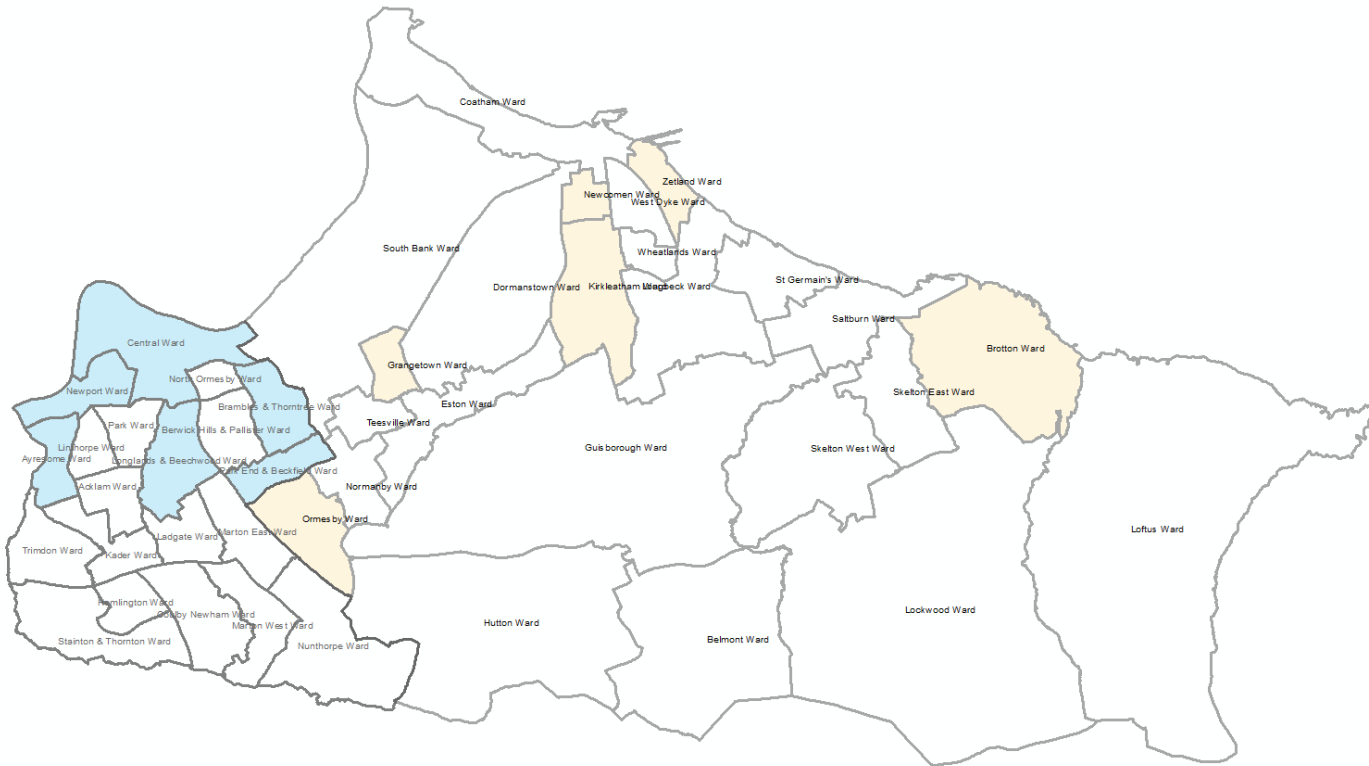
Kirkleatham

Newcomen

Ormesby

Zetland





MBC

RCBC

Grangetown
Brotton
Kirkleatham
Newcomen
Ormesby
Zetland

Emergency Hormonal Contraception (EHC) 13-17yrs

- Morning after pill
- **Free** for anyone from 13 years upwards from any subcontracted community pharmacy and the Sexual Health Service
- January – August 2024 13-17 year olds EHC Dispenses
 - Middlesbrough **52**
 - Pharmacy Express, Linthorpe Road
 - Boots, Cleveland Centre
 - Redcar and Cleveland **54**
 - Tesco, Redcar
 - Boots, High Steet



Sexually Transmitted Infections (STIs) 16-24yrs

August 2023 to July 2024 (Contract Year 3)

	STI	Number of Infections
Middlesbrough 16-24yrs	Chlamydia	181
	Gonorrhoea	85
	HIV positive	3
	Primary syphilis	9
Redcar & Cleveland 16-24yrs	Chlamydia	168
	Gonorrhoea	78
	HIV positive	0
	Primary syphilis	7

Sexual Health Services

Teesside Sexual Health Service

- Website - [Sexual Health & STI Clinics in and near Teesside | HCRG Care Group \(thesexualhealthhub.co.uk\)](http://thesexualhealthhub.co.uk)
- Telephone: 0300 330 1122
- Middlesbrough Hub - The Live Well Centre, Dundas Arcade
- Redcar and Cleveland - The Civic Centre, Ridley Street



Young People & Relationships

Joanne Henderson
Senior Coordinator
Brook



BROOK SOUTH TEES

19 September 2024



BROOK NATIONALLY

Established for over 55 years,
Brook is the UK's leading sexual
health and wellbeing charity for
young people.





Our mission

**EVERYONE IS SUPPORTED TO LIVE
HEALTHY LIVES, FREE FROM
INEQUALITY AND STRENGTHENED BY
FULFILLING RELATIONSHIPS**



C Card and Condom Distribution

Assemblies for year 9-13 promoting C-card and access to services

C-card registration and condom distribution

Chlamydia testing

Outreach and health promotion at youth provisions and events

C-card and chlamydia training for professionals



Education sessions for young people

RSE sessions for year 10-13 in schools and colleges.

Program of sessions for young people with additional needs and sessions for young people with English as an additional language.



Education sessions for young people

A range of topics such as:

Introduction to Sexual Health

Staying safe online

Pornography and youth produce sexual imagery

Healthy relationships

Fertility and Pregnancy Choices.

Sexual Harassment





My Life Program

Person centered
Goal oriented

Suits a range of needs
Can cover a range of topics
Up to 6 x 1 hour sessions



Brook 1-1 link



My Life Program

**Agencies may refer young people aged 13-25 to brook if:
live, work or be educated in South Tees or Hartlepool.**

And :

Display an unhealthy attitude to relationships, sexual health and/or gender norms.

Be at risk of harm or danger related to sex and relationships (whether online or in the community).

At risk of engaging in unprotected sexual activity.

Needing support around sexuality awareness, identity, self-esteem and acceptance.

Living in a household or exposed to domestic violence.



Brook 1-1 link



Professional Support

Range of open access training and networking meetings on a variety of RSE topics to support professionals from all roles involving young people.

CONDOM DISTRIBUTION

1.Schools do not have to inform parents when a condom distribution is taking place.

2.Parents do not have the right to prevent their child accessing clinical services

3.Condoms are provided under the Fraser guidelines which would be confidential.

4. Condom distribution isn't new to sexual health strategy or schools.

Why support young people access to condoms?

- 1. Young people who have access to condoms go on to use condoms and feel more comfortable using them WHEN the time comes.**
- 2. It prepares young people for engaging with services as an adult.**
- 3. It can positively impact attendance in the school.**
- 4. Reduce STI's and unplanned pregnancies**



OUR OFFER CCCARD OFFER

Assemblies or classroom sexual health service/condom promotion

Condom distribution

Staff training for sexual health signposting and support and Ccard
condom distribution

Support, advice and guidance from Brook Education
and Wellbeing Specialists



CONDOMS

Condoms are made from very thin latex (rubber) and are designed to cover the penis. They stop fluids being transferred between you and your partner during sex.

Condoms and internal condoms are the only methods of contraception that prevent pregnancy AND protect you from sexually transmitted infections (STIs). To stay safe, always use condoms on sex toys too!

WHERE CAN YOU GET CONDOMS? (even if you're under 16)

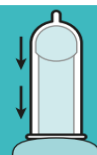
- Brook services (FREE)
- Sexual health clinics (FREE)
- Some GPs (FREE)
- Pharmacies
- Petrol stations
- Vending machines
- Online

DON'T FEEL
EMBARRASSED!

6 GOLDEN RULES

1 CHECK the expiry date, ensure there is a BSI kite mark or CE mark (a sign it is good quality) and no rips or holes in the pack.

4 ROLL the condom to the base of the penis using your other hand, and get rid of any air bubbles with your fingers. For extra pleasure, you can apply some lube to the outside too.



WITHDRAW the penis

THE LGBT+ ABC

LGBT+ covers lesbian, gay, bisexual and transgender people, as well as other people who don't identify as heterosexual or cisgender. There are many different terms people use for sexuality and gender.

No matter how you think people identify, do check with them which terms they like to use. Also, language changes all the time but here we try to cover a few of the basics. Are there other ones you know?

B

Binary: The idea you're one of two things, e.g. male or female, gay or straight.

Bigender: Someone who identifies with two genders e.g. male and female.

Binding: A method used to press down the breasts for the appearance of a flat chest.

Biphobia: The discrimination and hatred of bisexual individuals.

Bisexual: People who are bisexual are attracted towards more than one gender.

Agender: Someone who doesn't have a gender.

Allies: Someone who supports the LGBT+ community.

Asexual or ace: Someone who does not experience sexual attraction.



Cisgender or cis: When your gender matches the sex you were assigned at birth.

Closet: When someone hasn't revealed their gender or sexual orientation, i.e. 'being in the closet'.

Coming out: The act of an individual revealing to others their gender or sexual orientation.



D

Dyke: Historically a slur directed at lesbians. Some choose to identify this way or reclaim it.

Demisexual: Someone who only feels sexual attraction to someone after a strong emotional bond has been formed.

?*!\$

Heterosexual: Someone who is sexually attracted to someone of the opposite gender to themselves.

Homosexual: Someone who is sexually attracted to the same gender as themselves.

Homophobia: The discrimination and hatred of gay and lesbian people.

H



G

Gay: A widely accepted term for all same-sex attractions.

Gender: The gender you feel you belong to which may differ from the one you were assigned at birth, based on your genitals.

Gender dysphoria: A medical term for feeling distressed about the fact your gender and assigned sex are different.

Gender neutral: Someone who doesn't identify with any gender.

Genderqueer: When none of the categories on the gender spectrum fit you and you feel you're something else.

Gender fluid: When your identity moves around the gender spectrum.

I

Intersex: People whose biology doesn't easily fit into male or female. This can include genitals, chromosomes or hormones.

L

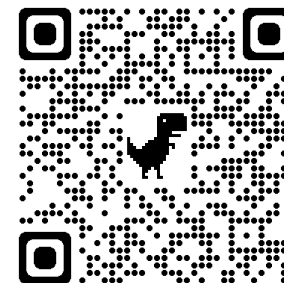
Lesbian: A female who is sexually attracted to the same gender.



M

MSM: Stands for 'men who have sex with men'.

FIND OUT MORE
Visit us online at:
brook.org.uk



19 September 2024



Brook Learn
learn.brook.org.uk



FURTHER LEARNING



**TAKE CHARGE.
TAKE A TEST.** ☒

SEXUAL HEALTH & WELLBEING EXPERTS



joanne.henderson@brook.org.uk

CONSENT:
DO YOU GET IT?

Comfort Break

Please return at 11:25am

HealthStart

Elise Brady

Health Protection Officer

Public Health South Tees

HealthStart Purpose

Public Health South Tees are developing a programme to help schools address emerging health issues building on the established HeadStart Mental Health Leads Network, encompassing physical health issues and local concerns.

The health and education partnership might aim to:

- Improve the health and education of the whole school community
- Identify emerging health and education needs
- Use evidence-based interventions to address those needs
- Develop, recognise, celebrate and share best practice



Health & Wellbeing Themes

1. **Healthy Weight:** EWS award, Oral Health NCMP, Henry Programme
 2. **Physical activity:** 'Creating Active Schools'
 3. **Healthy Child Programme:** School Nursing, 0-19 Service
 4. **Mental Health:** social and emotional wellbeing – HeadStart, CAMHS
 5. **Health Protection:** Non-communicable and communicable diseases & immunisation
 6. **Big 6:** Vaping, smoking, alcohol, substances, sexual health & gambling
- * Inequalities, poverty, exploitation & safeguarding runs through all themes

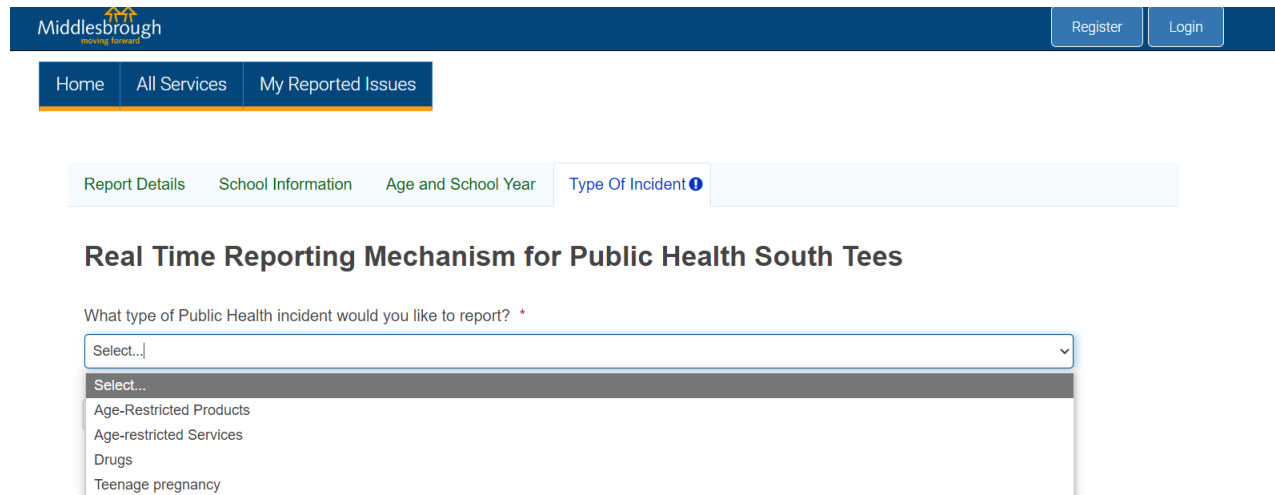


Real time reporting portal

For each topic we have provided resources, staff training and guidance on how to manage the issue/condition.

If there is an incident in your school relating to a public health issue such as age restricted products, drugs or a teenage pregnancy you can report this on the online portal.

Once PHST are alerted to the issue, the correct team will be able to provide support in a timely manner.



The screenshot shows the 'Real Time Reporting Mechanism for Public Health South Tees' web portal. At the top is a dark blue header with the 'Middlesbrough moving forward' logo on the left and 'Register' and 'Login' buttons on the right. Below the header is a navigation bar with three tabs: 'Home' (highlighted in orange), 'All Services', and 'My Reported Issues'. The main content area has a light blue background and features a breadcrumb trail: 'Report Details' (green), 'School Information' (green), 'Age and School Year' (green), and 'Type Of Incident' (blue with an information icon). Below the breadcrumb trail is the title 'Real Time Reporting Mechanism for Public Health South Tees'. Underneath the title is the question 'What type of Public Health incident would you like to report? *'. A dropdown menu is open, showing a list of incident types: 'Select...', 'Age-Restricted Products', 'Age-restricted Services', 'Drugs', and 'Teenage pregnancy'.

HealthStart Booklet

- Includes links to online training resources on topics such as how to manage allergies
- Developed local e-learning modules for non-communicable conditions such as asthma, epilepsy and diabetes and infection prevention control.
- Guidance on how to refer to services such as stop smoking or vaping service, sexual health service or young persons drug & alcohol team
- Contact details for UK Health Security Agency
- Information on local programmes that schools can get involved in to increase physical activity



Future Developments

- Trial the wider programme in a primary and secondary school
- Analyse data to identify school specific health needs

What schools can do to keep up to date on HealthStart:

- Identify the Health & Wellbeing Lead
- Identify the PSHE Lead
- Sign up to the NENC Child Health and Wellbeing Network [Join the Network now](#)



Immunisations

Sarah Slater

Advanced Public Health Partitioner

Public Health South Tees

Why are vaccinations important for schools?

Vaccine days can be disruptive for schools and require good communication and organisation to run smoothly but increasing the uptake is important for schools as well as public health:

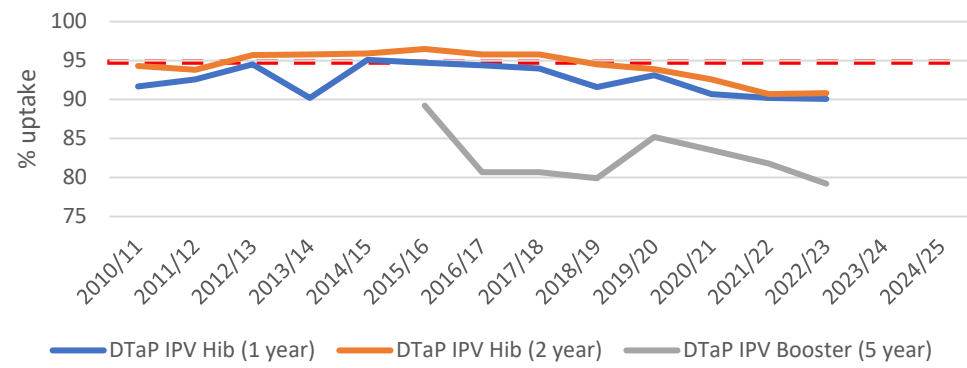
- Help provide a healthy environment through the reduction of vaccine-preventable diseases in schools and in the wider community
- Protects children which in turn reduces pupil and staff absenteeism rates
- Reduces the likelihood of outbreaks in schools
- Encourages health-conscious behaviour
- Provides life long protection



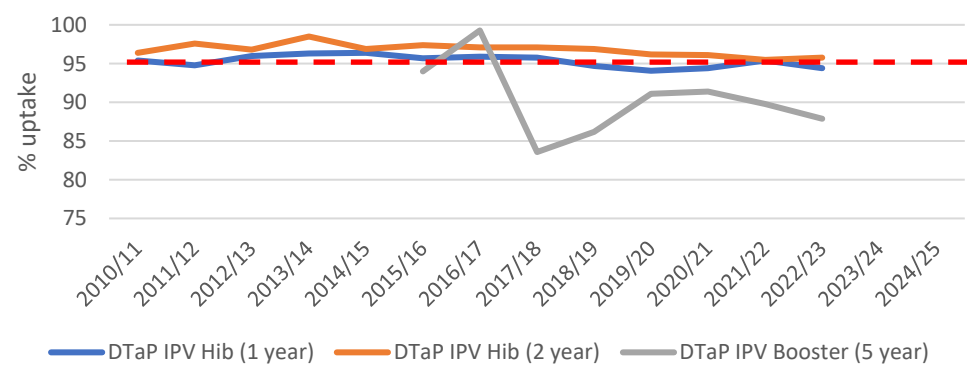
Increase uptake of childhood vaccines



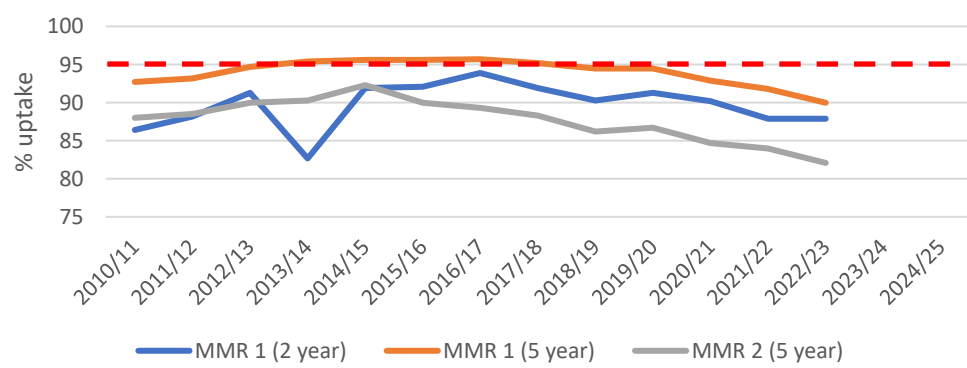
Middlesbrough



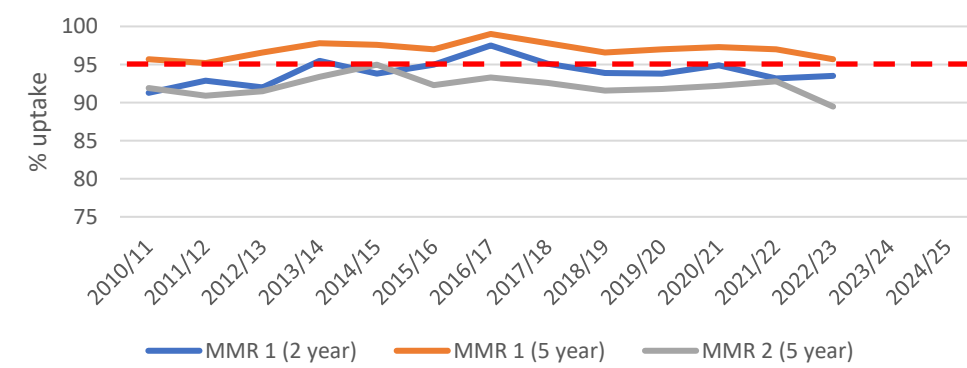
Redcar & Cleveland



Middlesbrough



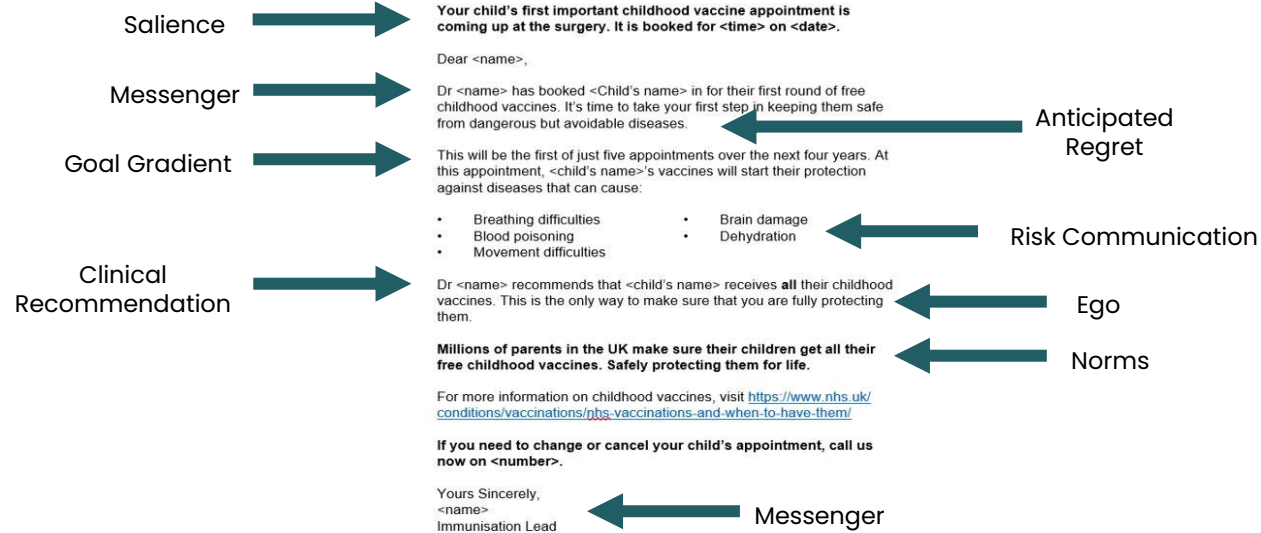
Redcar & Cleveland



GP Resources

GP Practices

- Letter invites
- Text reminders
- Booking prompts
- Scripted chats
- Redbook Trackers
- Birthday cards
- Certificate



My baby's 5 steps to protection



Community Resources



5 steps

- Registry office
- Children's A&E
- Leisure centre
- Family hubs

It's not too late

- Nursery
- School admissions



School Admissions Leaflet

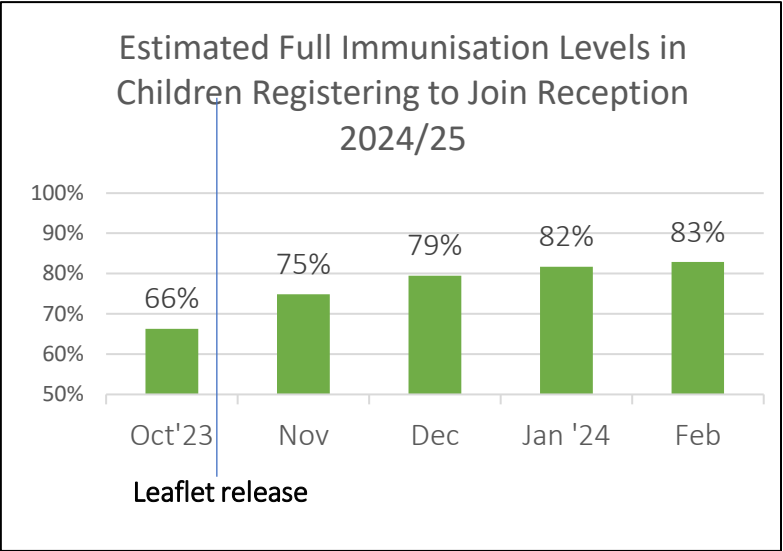
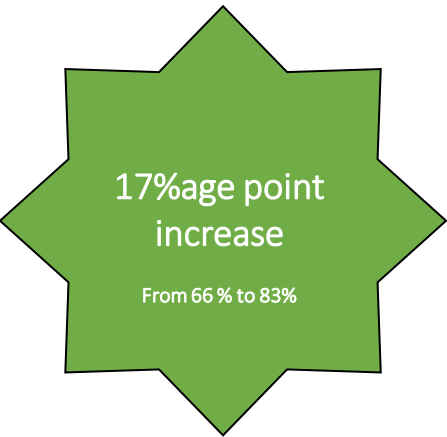


“Mop up” Messaging aligned to School Registration in Hartlepool



Leaflet issued with school registration forms encouraging completion of the “set” of childhood vaccinations

Reviewed impact in a single trial practice with a cohort of 175 children all at school registration age (Born 1st Sept 2019 - 31st Aug 2020). *All results capture prior to launch of the national MMR campaign*



	Oct'23	Feb'24	Variance - start to finish
Dtap/IPV/Hib(HepB)	94.3%	97.1%	+2.9%
MMR Dose 1	97.1%	99.4%	+2.3%
Dtap/IPV Booster	66.3%	82.9%	+16.6%
Hib/Menc Booster	94.9%	96.0%	+1.1%
MMR Dose 2	69.1%	85.7%	+16.6%

No. of children estimated to have a complete set of vaccinations

Data Source: CHIS, Catchment: Hartlepool Health, Practice A81044



How can schools support?

Nurseries:

- Distribute Ongoing Protection leaflet with enrolment documents for nursery children
- Distribute birthday card reminders for 3-year-olds

Primary Schools:

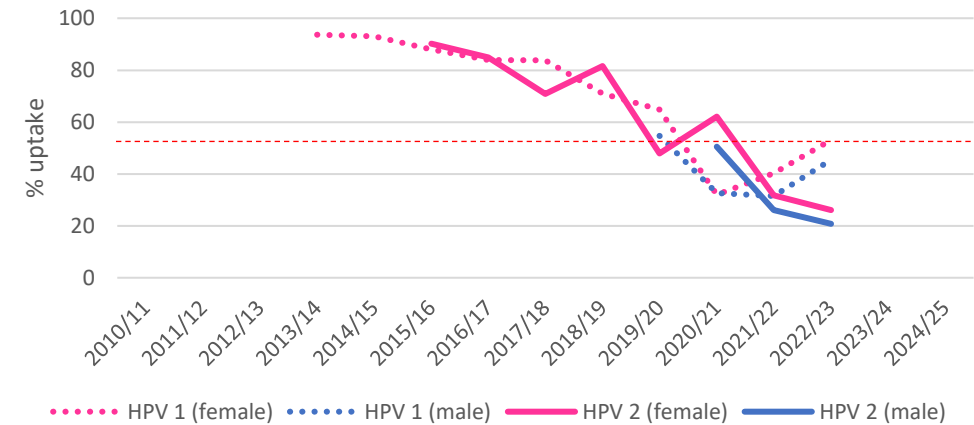
- Distribute the 0-5 It's Not Too Late leaflet with enrolment documents for reception children
- Distribute birthday card reminders for 4-year-olds
- Display resources on parent evenings/welcome days



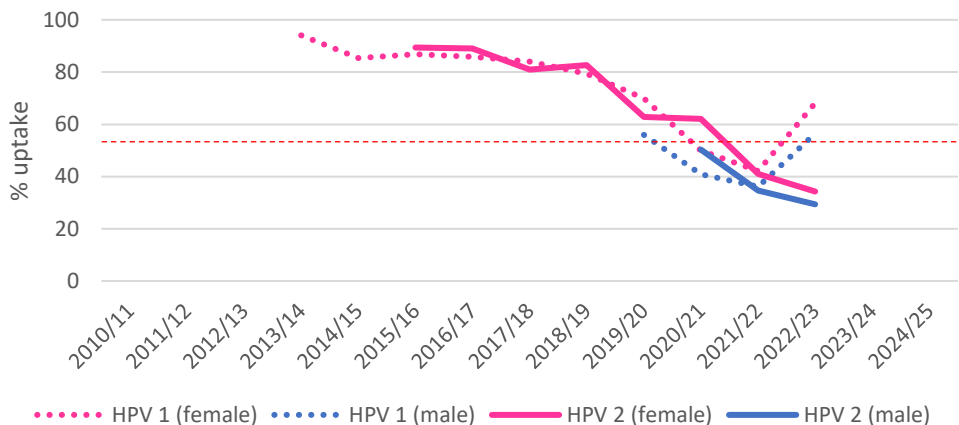
Increase uptake of adolescent vaccines



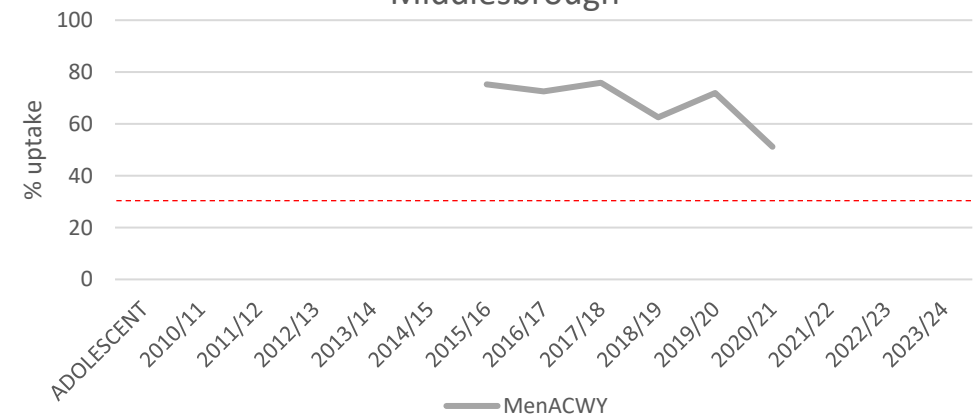
Middlesbrough



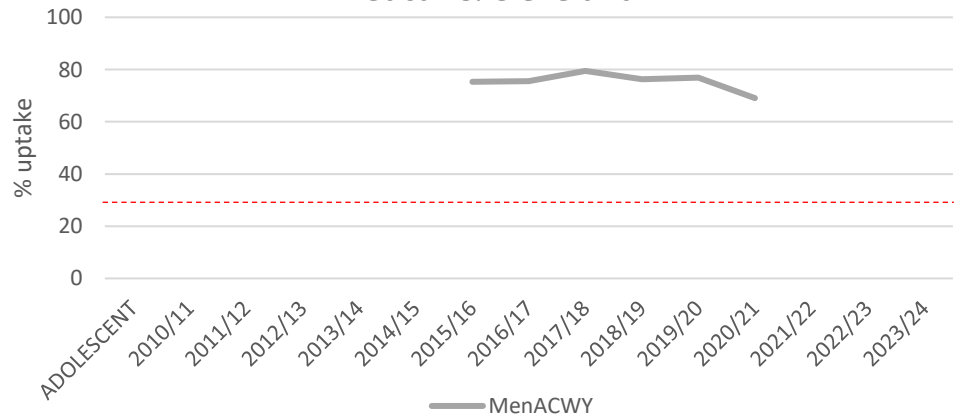
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Middlesbrough



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Increase uptake of adolescent vaccines



Letter

Text messages

1a.

ACTION REQUIRED

School Code: HD130908

Just 7 days until, with your consent, your child can have their FREE Meningitis and 3-in-1 Booster vaccines at school.

2a.

ACTION REQUIRED

School Code: HD130908

Just 4 days until, with your consent, your child can have their FREE Meningitis and 3-in-1 Booster vaccines at school.

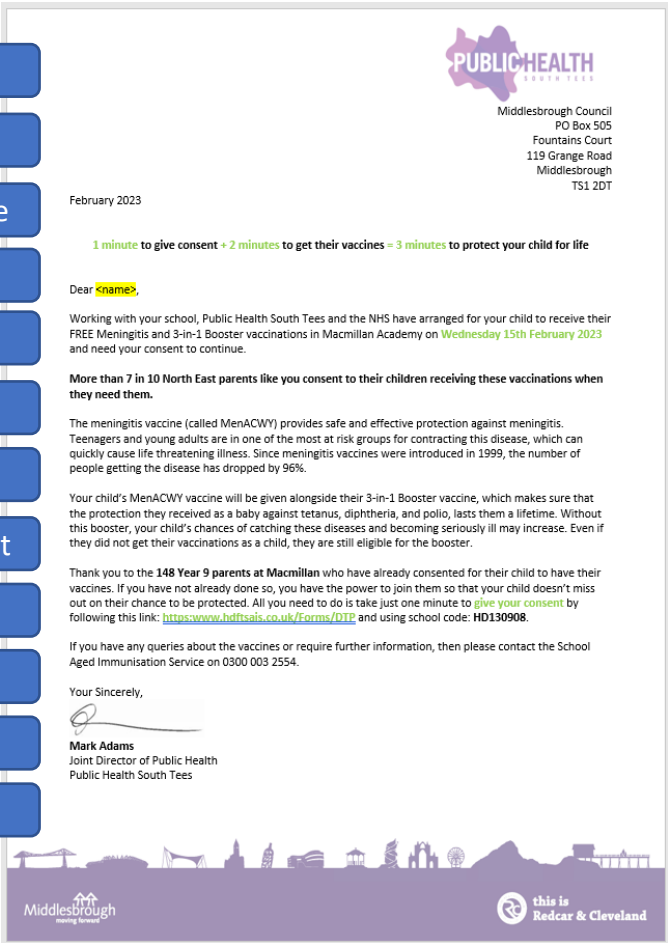
1b.

148 Y9 parents have already consented. If you have not yet responded, please ACT NOW to give/refuse consent at: <https://www.hdftsais.co.uk/Forms/DTP>

2b.

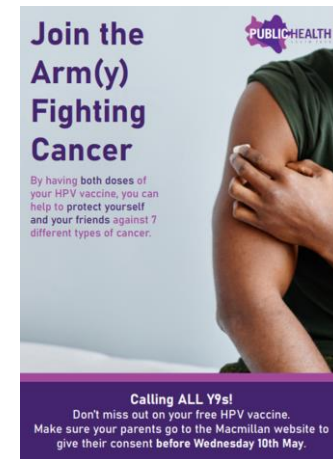
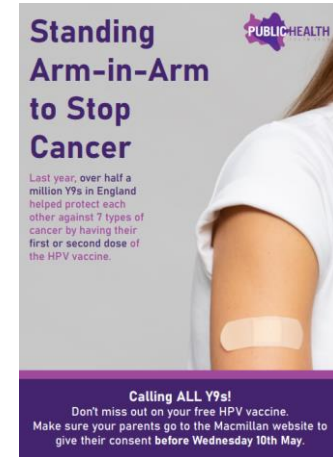
XXX Y9 parents have already consented. If you have not yet responded, please ACT NOW to give/refuse consent at: <https://www.hdftsais.co.uk/Forms/DTP>

- Priming
- Affect
- Rule of 3/Salience
- Default
- Power of FREE
- Simplicity
- Framing
- Endowment Effect
- Norms
- Ego
- Loss Aversion
- Messenger



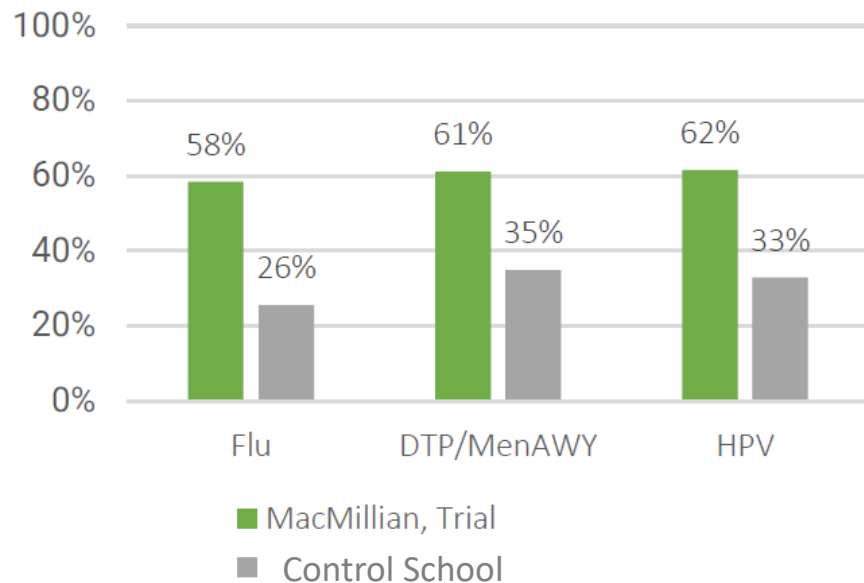
Adolescent trial at Macmillan 2023

- DTP/MenACWY:
 - Data from Academic Year 21-22: 50.4% vaccine uptake
 - Initial consent prior to trial (26/01/23): 130 (50%)
 - Consent after amended letter: 159 (61%)
 - Consent after text 1: 178 (70%)
 - Consent after text 2: 189 (74%)
- HPV (Y9)
 - Initial consent prior to trial: N/A
 - Consent after amended letter: 125 (52%)
 - Consent after text 1: 149 (62%)
 - Consent after text 2: 162 (68%)
 - Consent after text 3: 165 (70%)

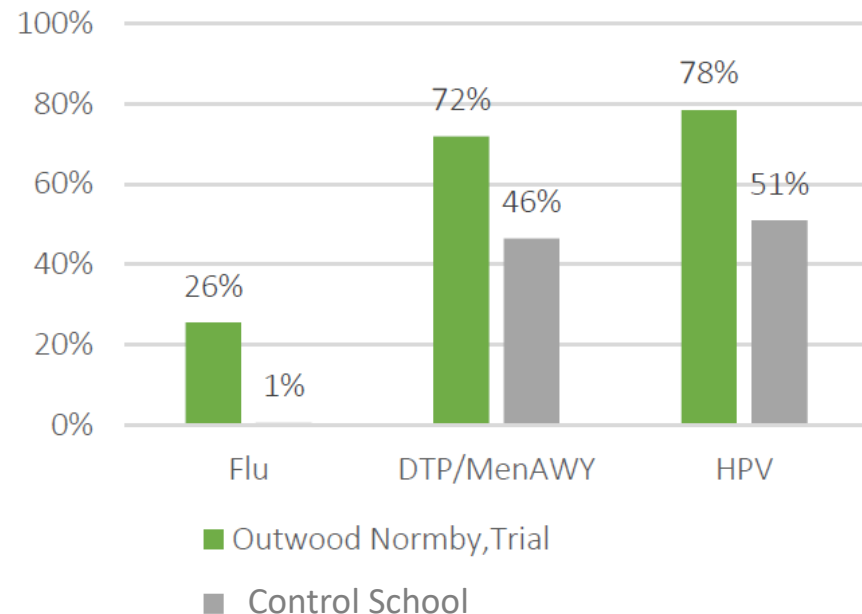


Adolescent outcomes and next steps

Middlesbrough



Redcar & Cleveland



Uptake increased in the trial schools compared to controls for all 3 vaccine programmes.

How can schools support?

- Work with IntraHealth to send out the immunisation letters and text messages at certain time intervals
- Display the resources around school in the lead up to vaccine clinics to encourage students to ask their parents if they have returned the consent form
- Hold assemblies educating students on the important of particular vaccine prior to the vaccine clinic



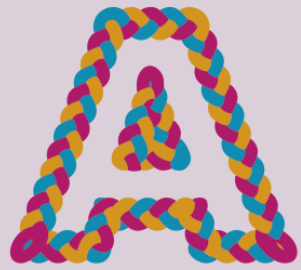
Substances in School

Richard Wait

ACT Recovery Solutions
Middlesbrough Council

Scott Rowell

We Are With You
Redcar & Cleveland Council



ACT
Middlesbrough



Recovery Solutions

**Middlesbrough Council's In House
Substance Use Service**

Spice Snapshot



The Spice Vape Situation

In a relatively short space of time, we have seen a rise in young people using vapes to use synthetic cannabinoid receptor agonists (SCRAs), more commonly known as Spice.

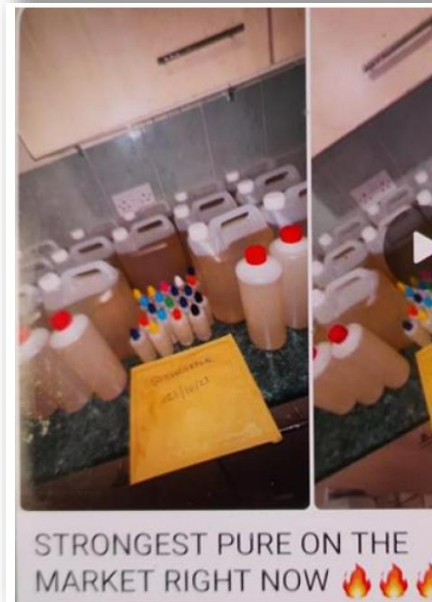
There are several separate reasons for this that have all come together to create this situation.

Dealers and Peers



The rise of social media has given dealers the ability to advertise their products directly to young people, shielded from parents

Here we can see what we believe to be Spice, advertised as THC on Telegram



Dealers and Peers



This is supported by evidence from a survey of young people, which found that the majority of young people who use vapes have bought them from a friend or peer.

It is important to remember that it is not the individual person who would be responsible for the sale of vapes. However, dealers are always looking at new products but have ways to disguise the correct and distribute vapes. Young People report to us that they buy (what turns out to be Spice when tested) for between £10 and £20



pens (Empty)

Price : £4.99



Dealers and Peers



There appears to have been a worrying rise of young people supplying each other with vapes.

Sometimes this can be quite innocuous, however we must also consider where these young people are getting enough vapes to distribute, from.

We have seen examples of young people being exploited by criminal gangs, or even by their parents.

It is important to remember that if a young person distributes a vape which ends up having THC or Spice, there could be legal consequences for this

Spice is an umbrella term used to describe synthetic cannabinoids

Originally these synthetic cannabinoids were developed in a lab and were part of research into the endocannabinoid system. This was partly done to avoid legal restrictions on working with natural cannabinoids

John W Huffman was one of the main people behind the research, and it was his discoveries that led to Spice and K2 first being used as street drugs after publishing these formulas in hopes his work would be continued



When it comes to educating people on this newest iteration of Spice, the most important message to get across are ...

Cannabis and Spice should not be considered similar to each other.



≠



Spice

And secondly the risks associated with Spice are high...

These include ...

Seizures and heart attacks

Overdoses (CNS)

Mental Health related issues

W052444

Date Received: 03 Jun 2024

Postcode: TS1 -

Purchase Intent: THC disposable vape

Package Label: Tyson Pineapple express

Sample Colour: Yellow

Sample Form: Liquid

Consumption Method: Not Stated

Self-Reported Effects: Not Stated

Sample Upon Analysis (Major): Tetrahydrocannabinol, Cannabidiol, Cannabinol

Sample Upon Analysis (Minor):



[Click to Enlarge](#)

W051395

Date Received: 13 May 2024

Postcode: TS39 -

Purchase Intent: THC vape

Package Label: THC vape

Sample Colour: Colourless

Sample Form: Liquid

Consumption Method: Smoked

Self-Reported Effects: Increased Energy, Increased Confidence, Violence/Aggression

Sample Upon Analysis (Major): MDMB-4en-PINACA

Sample Upon Analysis (Minor):



[Click to Enlarge](#)

W050208

Date Received: 12 Apr 2024

Postcode: TS3 -

Purchase Intent: THC liquid

Package Label: Not Stated

Sample Colour: Pink

Sample Form: Liquid

Consumption Method: Oral

Self-Reported Effects: Relaxed, Memory Loss, Confusion

Sample Upon Analysis (Major): MDMB-4en-PINACA

Sample Upon Analysis (Minor):



[Click to Enlarge](#)

W052676

Date Received: 10 Jun 2024

Postcode: TS3 -

Purchase Intent: Vape

Package Label: Not Stated

Sample Colour: Colourless

Sample Form: Liquid

Consumption Method: Smoked

Self-Reported Effects: Breathlessness, Irregular Heartbeat, Nausea, Confusion, Panic Attack, Agitation

Sample Upon Analysis (Major): MDMB-4en-PINACA

Sample Upon Analysis (Minor):



[Click to Enlarge](#)

REDUCE RISK - HAVE A ROBUST SYSTEM

- Training for all staff
- Know your hotspots (where and when incidents are most likely to happen, who repeat offenders are)
- Establish clear **procedures** for when an incident occurs
- Communicate the procedures in school policy and parent agreements
- Ensure that PHSE curriculum covers the use of THC / SPICE vapes and the risks to health, education, criminal status, future career, travel
- Educate young people about how to make good decisions (not knowing what SPICE contains makes this impossible!) and to have the confidence to be able to say 'no' when offered products.

PROCEDURES MIGHT INCLUDE:

1. Once immediate health needs have been taken care of, speak to the young person to obtain as much information as possible
2. Confiscate the product and report incident to the Police via 101
3. Record the incident at school and report to Public Health
4. Issue standard letter to parents
5. Promote local services and make a referral where appropriate, rather than punishments. Permanent exclusion makes the young person even more vulnerable to taking drugs and exploitation by organised criminal gangs.

AGENCIES WHO CAN HELP

- Police (999 or 101 depending on situation)
- Public Health (HealthStart resources include e-learning module for teachers, a reporting mechanism, and liaising with A&E/Police to get a better understanding of the extent of the issue)
- Substance Use Services – can deliver awareness sessions and drop-in sessions in schools. Provide harm minimisation treatment services if under 16 seek parental consent or use Fraser Guidelines.
- Trading Standards (if product bought from retailer)



**we are
withyou**
in Redcar &
Cleveland




harbour
working for safer communities

The Team

1 team Leader, 4 Full time outreach workers

- Delivers 1 to 1 psychosocial interventions to young people below the age of 25.
- Delivers to schools both primary and secondary, delivering to over 4000 pupils in the last year.
- We also run drop-ins at local schools and pupil referral units and have classroom and teaching workshops on a regular basis working in small groups.
- Within these sessions we deliver alongside our thrive partners and are able to deliver a range of resources alongside our usual substance misuse delivery including relationships, domestic abuse, and exploitation



Pregabalin



What Is Pregabalin

Pregabalin is a prescription drug used to manage a number of long-term conditions including:

- Epilepsy
- Neuropathic pain
- Generalised anxiety disorder

The anxiolytic (relaxing) effects of pregabalin occur rapidly after administration.

Pregabalin can elicit feelings of euphoria and relaxation that users compare to drunkenness.

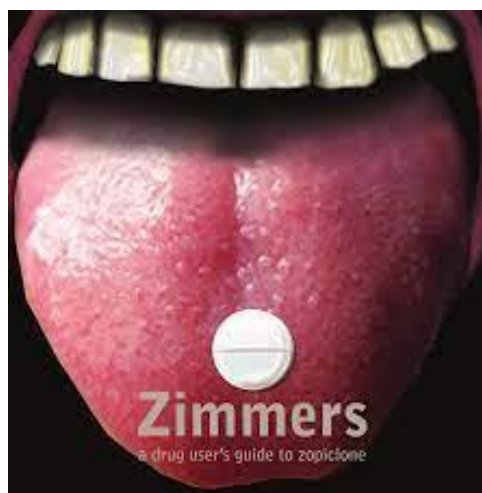
Pregabalin can be addictive.

Pregabalin tablets

Pregabalin comes in tablet form, in 25mg, 50mg, 75mg, 100mg, 150mg, 200mg and 300mg hard capsules.
The colour of the capsules vary depending on the manufacturers.
Some street names include: PGs;
Gabbies; Budweisers, Bud light and Fizzers.



Zopiclone



Appearance

- They can appear as a film coated tablets, often round or oval.
- They are usually white but can be orange or blue. Often marked with 3.75mg or 7.5mg and sometimes have the letter Z on them
- Metallic in taste



Illicit Zopiclone

- In recent years, zopiclone has become a popular street drug and can be referred to as 'zimmers', 'zimmies' and 'zim-zims'.
- Due to an increase of zopiclones being sold illicitly, doctors are becoming more cautious and reluctant to prescribe zopiclone as a sleeping remedy. They can be sold for as little as £1 per tablet!
- Tablets that are sold illicitly are not guaranteed to be advertised and come with their own risks!

Benzodiazepine (Benzo's)



What are 'Benzos' and why are they being used illicitly.

Benzodiazepines, also known as “benzos,” are a class of synthetic prescription drugs that are commonly used to treat both acute and chronic anxiety.

Benzos are among the most addictive prescription drugs on the market today because they provide users with rapid relief from uncomfortable symptoms caused by excessive brain activity. Simply put, they have the ability to make users feel good without impairing their ability to function the way alcohol and other substances can.

They are central nervous system depressants and can slow down your heart rate and breathing. People may experience a 'floating' sensation and feel warm, calm, relaxed and tired.



So what can be the effects of misusing?

- Hallucinations
- Lowered inhibitions
- Fits/seizures
- Blurred vision
- Constipation
- Vomiting
- Trouble sleeping

- Psychosis
- Hypomania, confusion & memory impairment
- Tremors
- Peripheral oedema (swelling in limbs)
- Effects on libido
- Suicidal thoughts (in a small number of people)



Risk of overdose

It is difficult to know when someone has overdosed on tablets.

Some signs could be: drowsiness, swaying and staggering, clumsiness and slurred speech, difficulty breathing, blue lips, gurgling sounds, unable to wake up.

The risk of overdose on tablets increases :

(a) with higher doses,

(b) when it is injected rather than swallowed,

(c) when it is mixed with depressant drugs like alcohol, sedatives (tranquillisers and sleeping pills), or opioids (notably heroin or methadone).

The higher the dose you use, the greater the risk of overdose and death.



REFERRAL TO LOCAL SERVICES



MIDDLESBROUGH



Recovery Solutions for
alcohol and substance support

Tel: 01642 726800



People who access
the support of
local services are
much more likely
to successfully quit
using substances
than those who
don't!

REDCAR & CLEVELAND

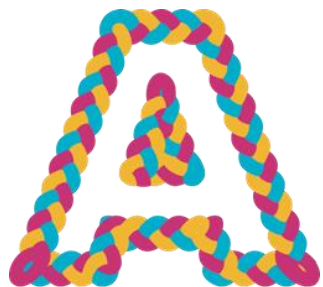
**we are
withyou**
in Redcar &
Cleveland

'We are with you' for alcohol
and substance support

Tel: 0300 303 3781



FOR MORE INFORMATION



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**we are
withyou**

**in Redcar &
Cleveland**

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CLOSING REMARKS

Rebecca Scott
Public Health Principal
Public Health South Tees



THANK YOU FOR ATTENDING

**Please take 2 minutes
now to complete the
evaluation by scanning
the QR code!**

[Evaluation Form](#)

Public Health South Tees Health
Protection Assurance Workshop
(Children)

