



**WIRRAL
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Wirral Mental Health & Emotional Wellbeing: School Survey 2018 Results

Wirral Intelligence Service

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Wirral Mental Health & Emotional Wellbeing: School Survey 2018 Results

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Content overview

Abstract	Summary of “Future in Mind: Mental Health & Services in Wirral Schools” 2018 survey results.
Intended or potential audience	Internal <ul style="list-style-type: none">• Future in Mind Steering Group whose members come from a variety of sectors and organisations – this will be distributed via the group
Links with other topic areas	<ul style="list-style-type: none">• Children & Young People• Mental Health• Mental Health: Children, Young People & Families

Key findings

- 97 schools responded to the survey, predominantly from mainstream primary (69 of 97) the total take up was 78% across all schools in Wirral for 2018.
- 76 schools reported that staff had accessed training provided by Child and adolescent mental health services (CAMHS), with 42 (56%) respondents confirming that their staff had attended the training and the topics meet the needs of the training.
- According to feedback, major improvements have been noted in the CAMHS service with the introduction of the Advice line. However, there are still concerns over the delay in pupil's accessing therapeutic support after referral.
- Overall, 73% of respondents stated that they were satisfied with the Advice line provided by CAMHS, with 56% also being satisfied with communication and liaison with the service. However, 50% expressed dissatisfaction with the effectiveness of young people's access to therapeutic support in CAMHS
- In terms of issues perceived by schools as affecting the mental health and wellbeing of their pupils, "Exam/School Pressure/Issues" was thought to have the greatest impact. This was followed by "Self-esteem/Self-confidence/Self-image and access to "services/help" and "behavioural problems".
- 56 of 96, or 58.3% of respondent schools were undertaking to buy-in additional mental health services to supplement their mainstream offer. Of these, most reported that the services were accredited
- Schools are providing a wide range of in-house alternatives to mainstream provision, with 44 different services being reported. Such services include Pressure Point, Edsential and counselling services
- 52 schools do currently purchase additional Speech and Language Therapy (SALT) services, with most buying from private providers (25) rather than additional NHS provision (18)
- The two most common strategies in supporting the mental health and wellbeing of staff was to ensure Wellbeing Time/Promotion was available and Workload reduction initiatives. Supervision/1-2-1 Communication meetings and Access to 1-2-1/Group Support were also identified
- Promoting a supportive and open school culture was the predominant key point in the reported whole school approaches to emotional health and wellbeing

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Background to survey

This survey was undertaken on behalf of the Wirral Future in Mind Steering Group in order to ascertain and understand some key components related to:

- Children & Young People's mental health
- How services were able to respond to that expressed need
- How schools were able to work with Child & Adolescent Mental Health Services
- The views of school leaders in relation to key mental health issues
- Access to Speech & Language Therapy (SALT) services
- Approaches to Staff Wellbeing
- Whole school approaches to improving mental health and wellbeing

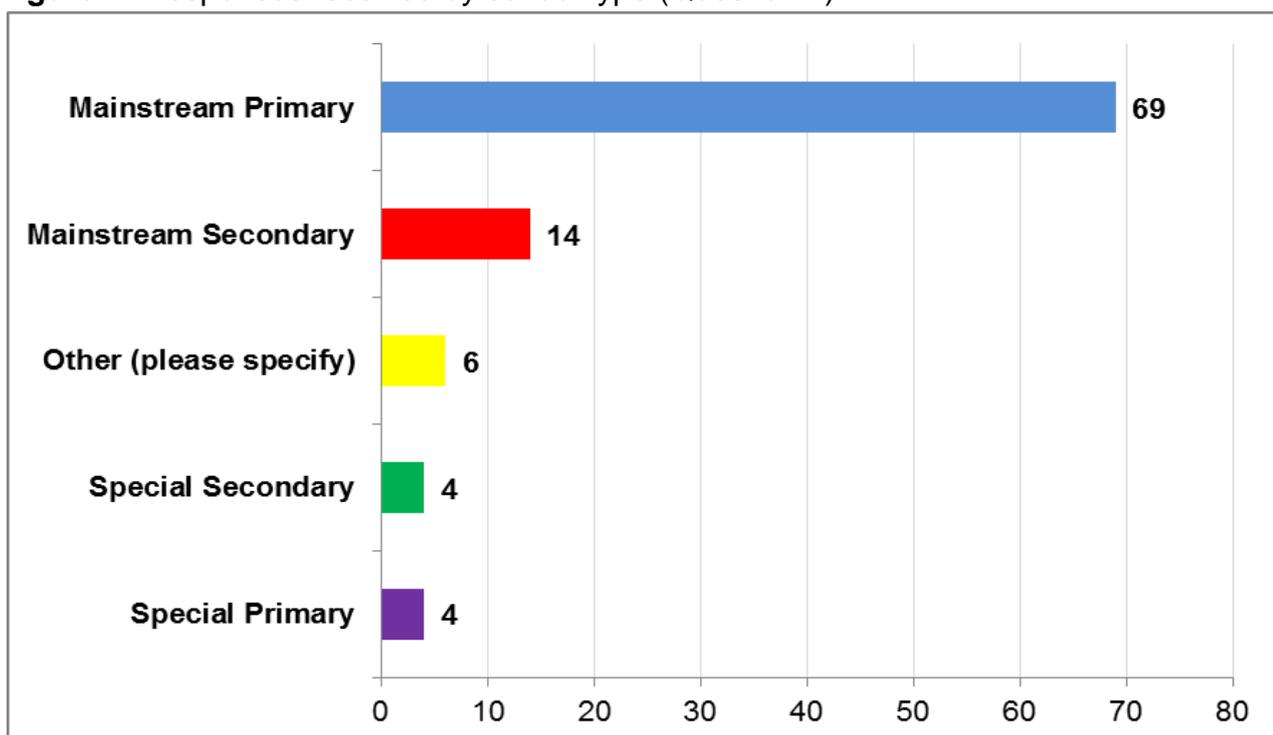
The 1st survey was undertaken in the summer of 2016 and has been running for 3 years now. In 2016 a total of 46 schools responded to the survey increasing to 68 schools in 2017. In 2018 the survey was made available to all schools on the Wirral for completion during November. The total number of school completing the survey for 2018 was 97; a 30% increase in respondents. The total number of school settings on the Wirral invited to take part in the survey is 125 (See appendix 2 the full list).

The survey questions ([Appendix 1](#)) and subsequent responses are presented in graph format with some additional context. The results form a key information source for local service leaders and commissioners to continue developing ideas and solutions to meet local need.

Survey Results

Figure 1 shows the breakdown of schools who responded to the survey (n=97) by type.

Figure 1: Responses received by school type (Question 2)



As can be seen in Figure 1, the majority of schools responding were mainstream primary schools. [Appendix 2](#) shows the full list of schools (Highlighted in yellow) who participated in the survey.

Table 1 shows that the proportional representation is similar in 2017 and 2018; mainstream primary being the most represented group.

Table 1a: Proportion of responses by school type, 2017 and 2018

School Type	2017	2018
Special Primary	2.9% (n=2)	4.1%
Special Secondary	2.9% (n=2)	4.1%
Other	2.9%(n=2)	6.2%
Mainstream Secondary	12.9% (n=9)	14.4%
Mainstream Primary	77.9% (n=53)	71.1%

Note: Those schools defined by “Other” refer academies and “all-through” schools (i.e. 3-18 years)

Table 1b: Proportion of responses by schools compared to total schools by broad school type, Wirral, 2018

School Type	2018
Special Schools	66.7%
Mainstream Secondary Schools	70.0%
Mainstream Primary Schools	76.7%

As Table 1b shows, nearly three quarters of mainstream secondary schools responded (n=14), over three quarters of mainstream primary schools responded (n=69) and two thirds of special schools completed the survey (n=8).

Participants were asked about what their key priorities are to support emotional health and wellbeing within their school over the next year. All 97 schools filled in at least one response to this question. Some of the most common themes that appeared were related to the following:

- Teacher workload
- Staff training
- Reduction of Stress
- Awareness of Mental health needs for both students and parents

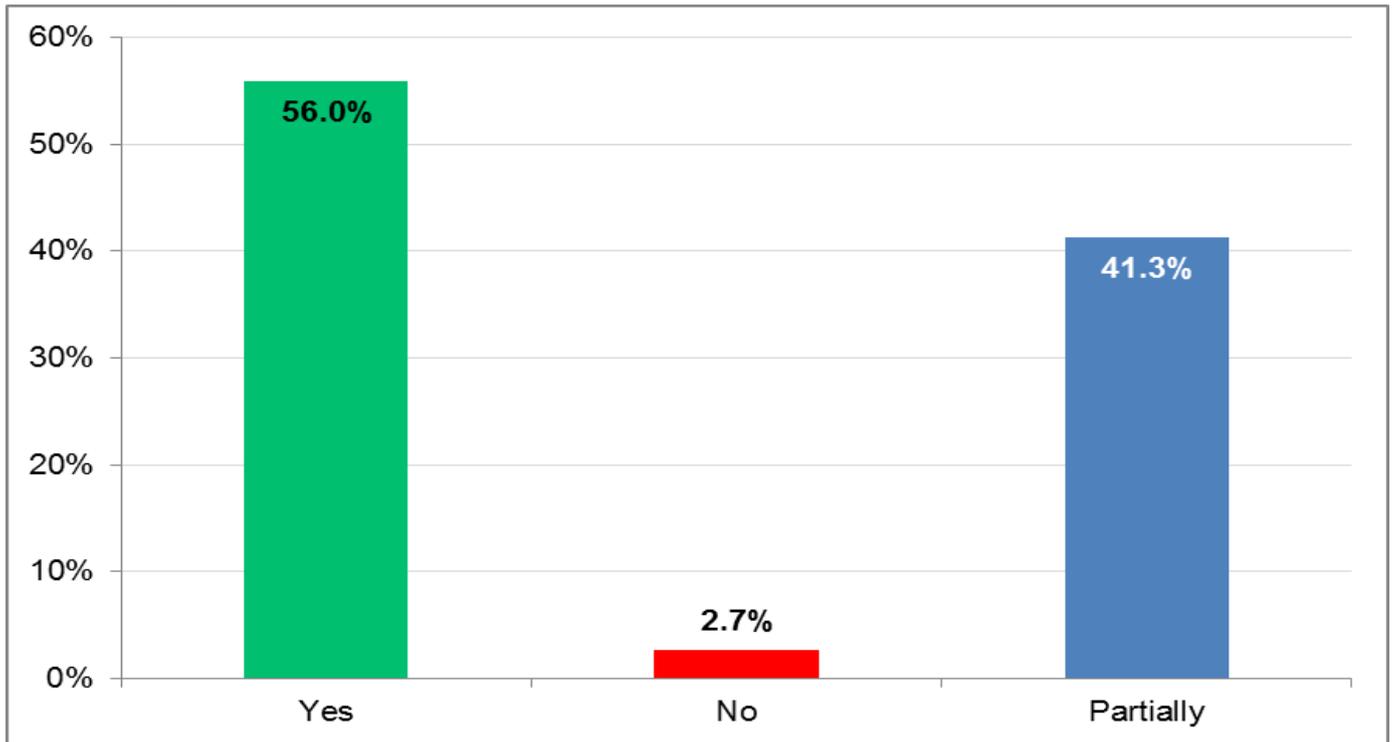
[\(A full detailed list of all 378 responses can be found in the appendix section 3a\)](#)

Child & Adolescent Mental Health Service (CAMHS)

Training provided by CAHMS

Respondents were asked whether any of their staff attended the training provided by CAMHS (Question 8). Of the 97 responders, 76 (or 79%) had staff that had attended the training. Figure 2 shows of these 76 participants, 42 (or 56%) felt that the training had met the needs of their organisation while 31 (or 41.3%) said it partially met their needs. A combined total of 97.3% of participants said the training was at least positive and helpful in some way.

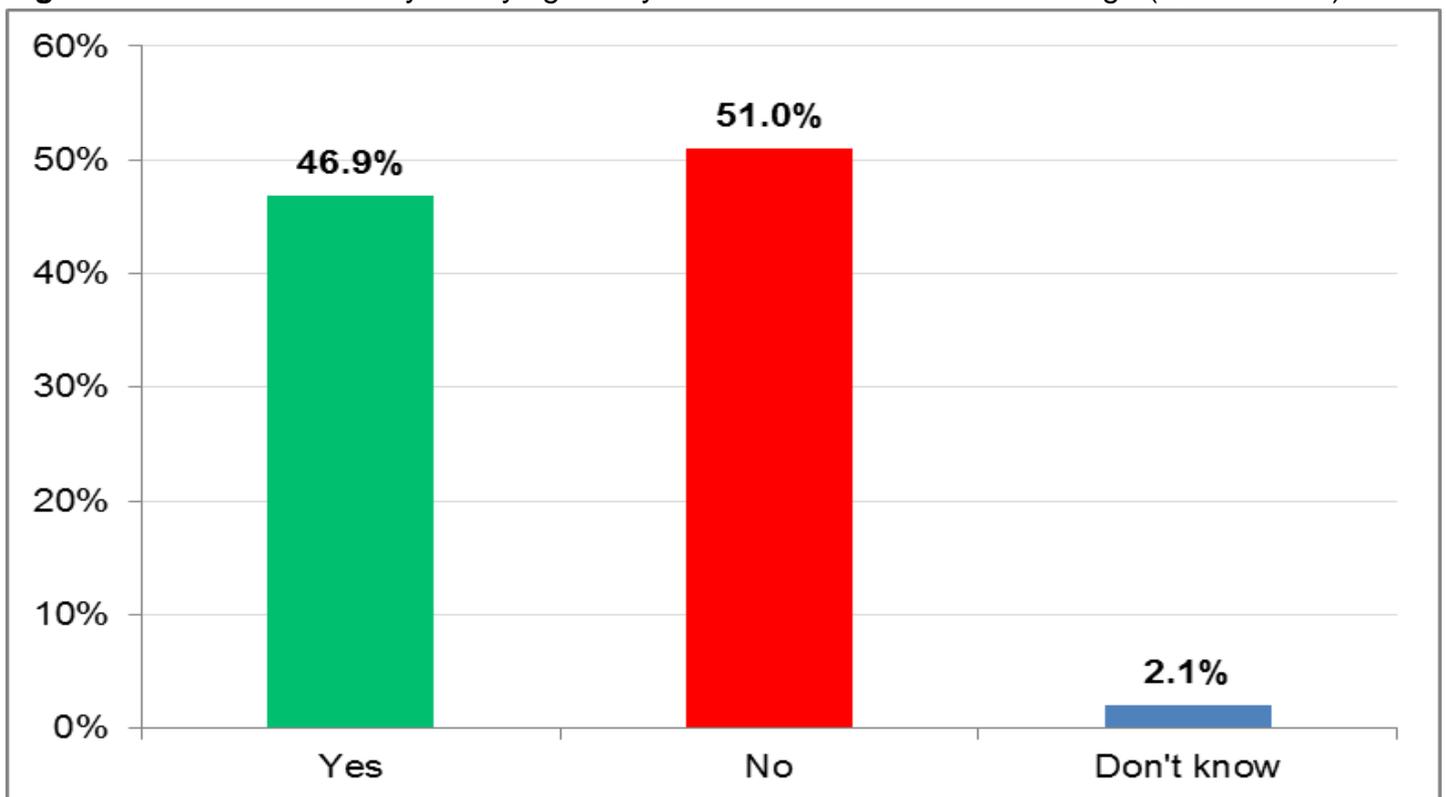
Figure 2: If yes, have the CAMHS training topics met the training needs of your organisation? (Question 9)



Mental Health First Aid Training

Respondents were asked if their staff had accessed mental health first aid training (Question 10-12); of the 96 respondents (1 responder didn't answer this question), 44 (or 46%) had accessed the training. They were also asked if they had bought in some additional mental health training. Of the 96 respondents who answered the question, just under half (45, 47%) had said they had, see figure 3 below:

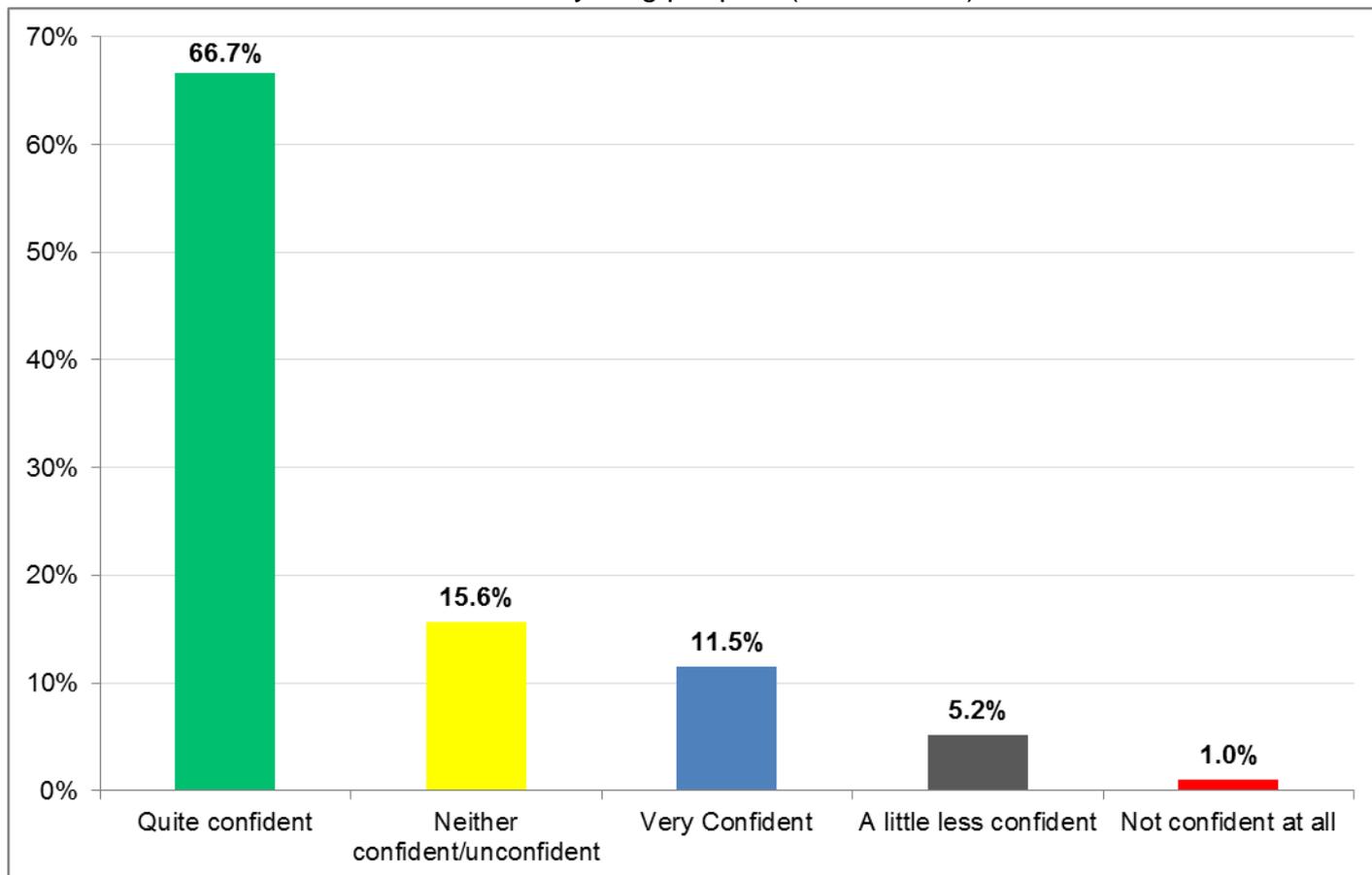
Figure 3: Feedback on Are you buying-in any additional mental health training? (Question 11)



Of the 45 responders to saying yes to the buying in of additional mental health services (Question 12) most participants had bought more than one service in. The main services bought in were the ADHD (Attention Deficit Hyperactivity Disorder) Foundation, Thumbs Up and My Esteem. There were other various services mentioned in the questionnaire ([see appendix 3b for all responder's full answers](#)).

Participants were asked how confident they were in the ability of their staff team to deal with emotional wellbeing and mental health issues in children and young people. 64 of the 96 responders reported they were quite confident with the service provided, see figure 4 below:

Figure 4: How confident are you in the ability of your staff team to deal with emotional wellbeing and mental health issues in children and young people? (Question 13)



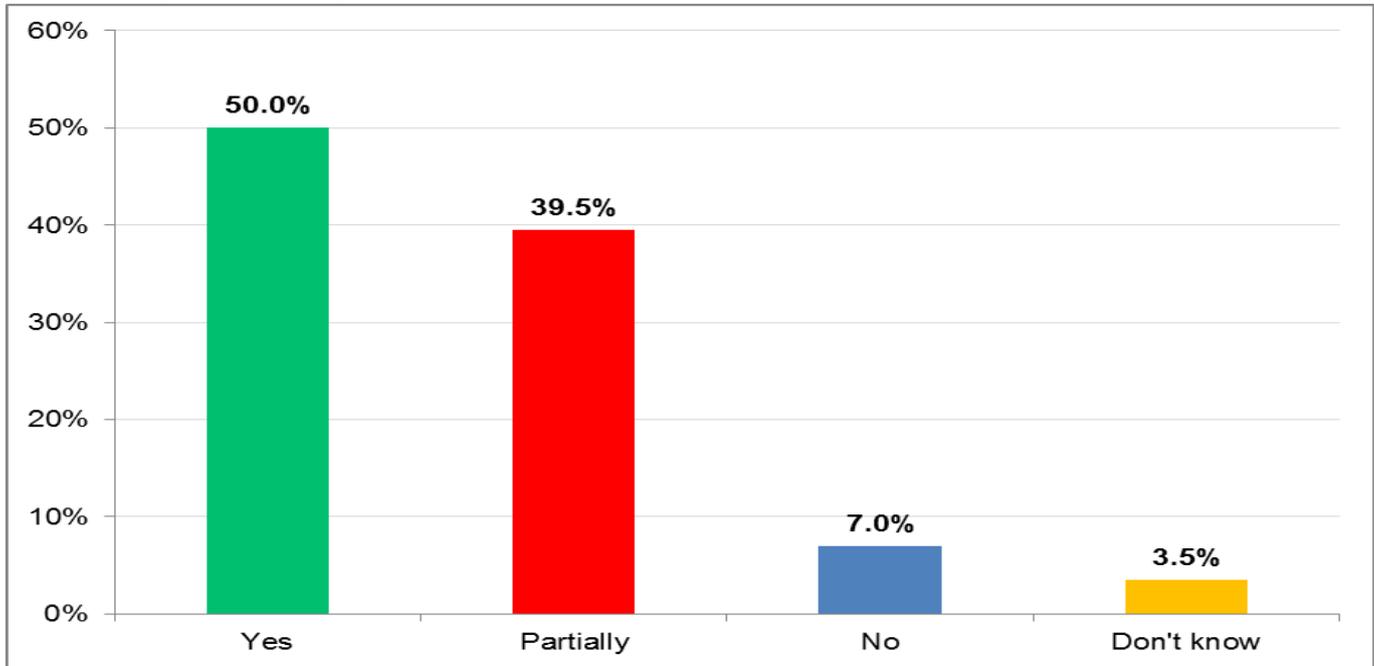
As shown above in figure 4, overall three quarters of participants reported they were either very confident or quite confident in the ability of their staff team to deal with emotional wellbeing and mental health issues in children and young people. Just over 6% were either less confident or not confident at all and 16% neither confident/unconfident.

Advice Line

Participants were asked if their staff had used the Advice Line provided by CAMHS; of the 96 respondents (1 responder didn't answer question 14), 84 (or 88%) had used the service, only 4 (4%) hadn't used the service and the others (n=8, 8%) didn't know.

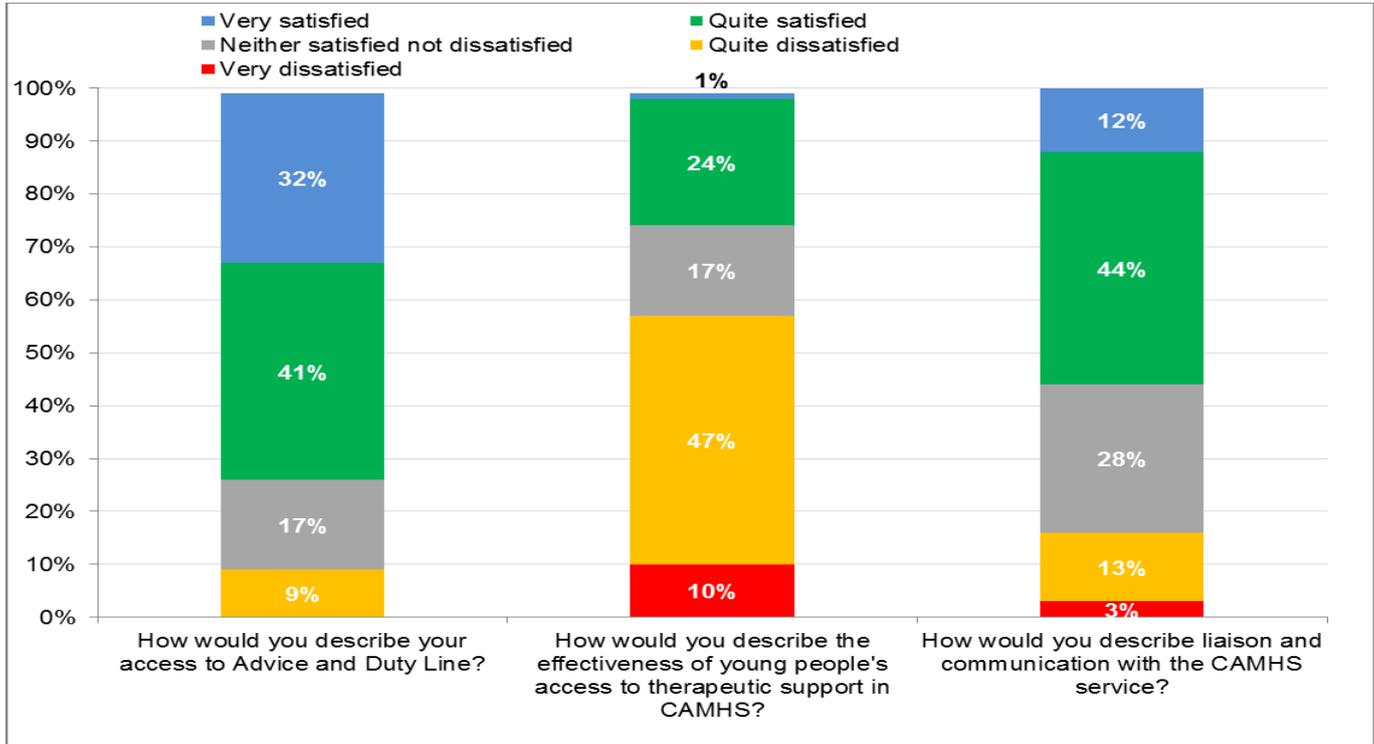
Figure 5a shows the feedback received from those 96 respondents around whether it enabled staff to support the wellbeing of the child.

Figure 5a: If so, did Advice and Duty Line from CAMHS enable staff to support the wellbeing of the child? (Question 15)



Participants were also asked to provide their views and experience of CAMHS service provision. This was provided by a multiple choice question, the breakdown of which is detailed in Figure 5b.

Figure 5b: Your views on access to and communication with CAMHS (Question 16)

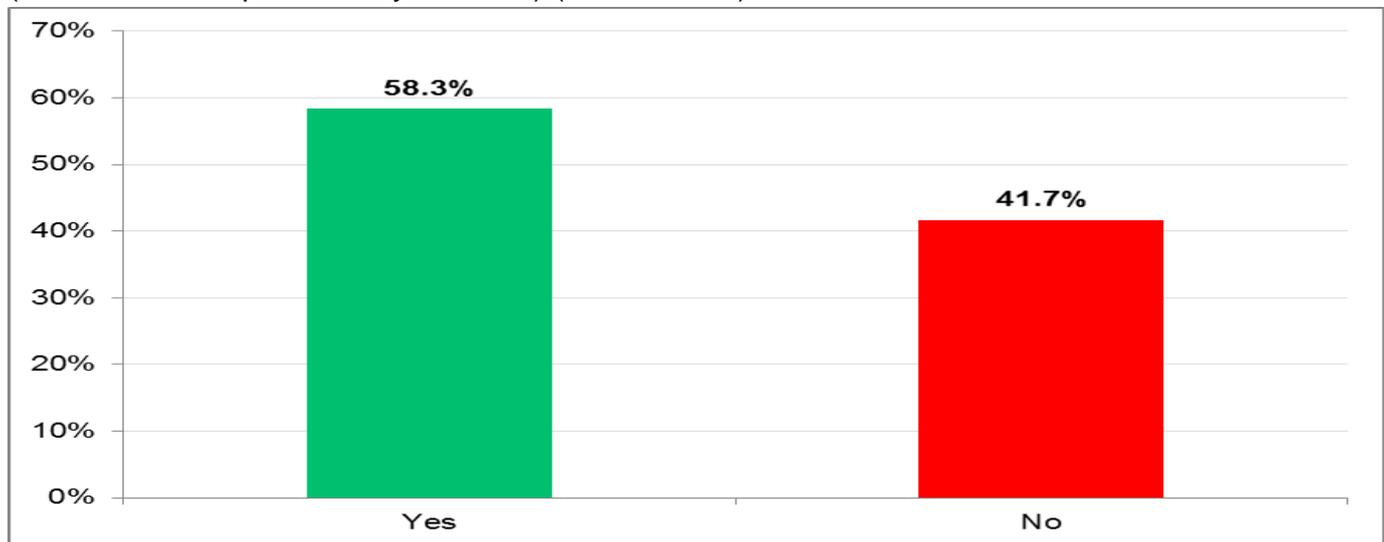


- Figure 5b shows that 73% of respondents (or n=64) were either “Quite Satisfied” or “Very Satisfied” with the Advice Line.
- In contrast to this, the majority of respondents were dissatisfied (with 10% being “Very dissatisfied”) with the effectiveness of access to therapeutic support; 57% expressing dissatisfaction overall, or n=49.
- Similarly, the majority of respondents were satisfied with liaison and communication with CAMHS (56% or n=48).

Additional Mental Health support services for pupils

Participants were asked if they bought in additional mental health service provision for their school to support their pupils, other than CAMHS. As seen in Figure 6, nearly 60% of schools (or 56 of 96) do buy in additional mental health provision.

Figure 6: Do you buy-in additional mental health support services for the pupils at your school? (Other than that provided by CAMHS) (Question 17)



The services and additional options being bought-in by the 56 schools were:

- A Place 2 Be
- Additional trained staff
- Behaviour outreach
- Caritas
- Cherished
- Dove
- Education Psychologist
- Full of Beans Project
- Girls Project
- HYPE
- KIND
- Action for children
- ADHD Foundation
- Brook
- CBT Therapist
- Counselling Service
- Edsential
- Forest School
- Gilbrook
- Heath Services in schools
- Kilgarth Outreach
- Kooth
- Learning Mentor
- LJMU Project
- Mindfulness
- My Esteem
- Positive Resolutions
- Relax kids
- Season for Growth
- SIBS Talk Primary
- School Intervention Programme
- Speech & Language Therapist
- Thumbs Up
- Time to talk
- Utopia
- Lego Therapy
- Military Style Education
- Momentous
- Play Therapy
- Pressure Point
- Response
- Shaping Futures
- Solihull online
- Well Being Mentor
- Wirral Youth for Christ

[\(A full list of all services can be found in appendix 3c\)](#)

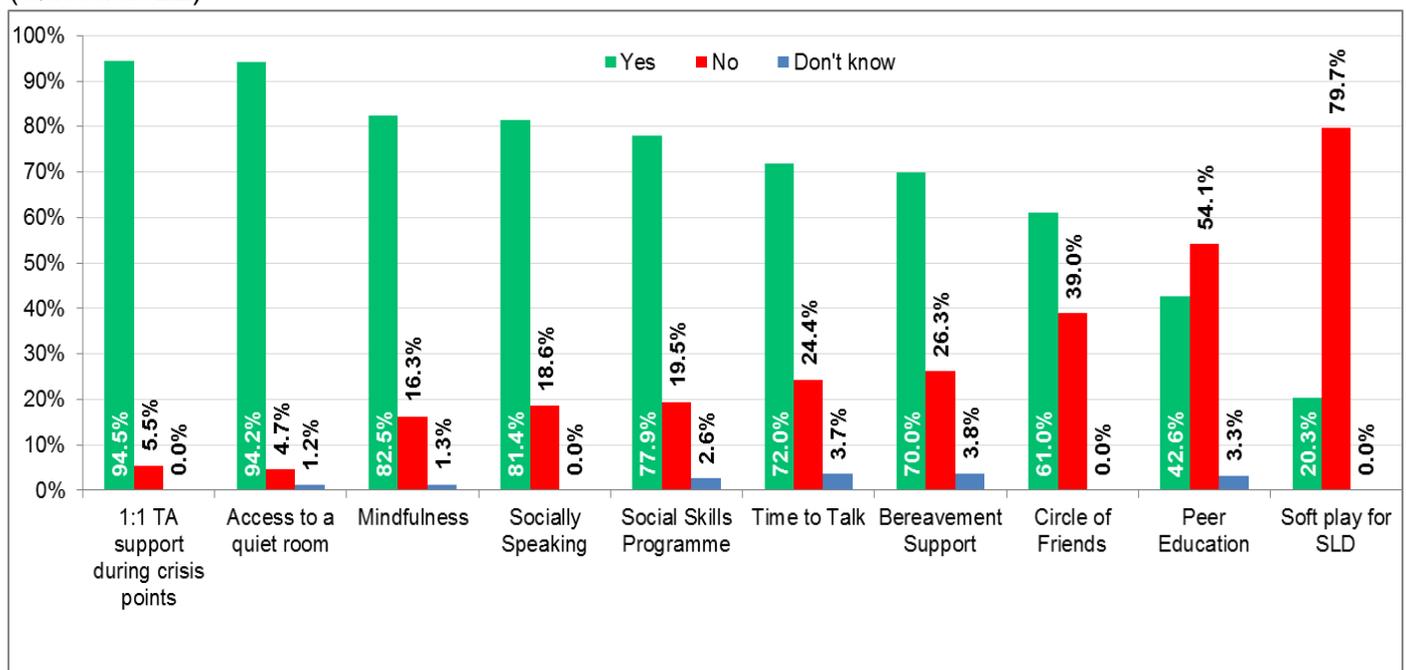
Participants were also asked if those additionally bought-in Mental Health support service providers were accredited by a professional body. Of the 44 services above, it was stated that 28 were accredited, with 13 services where accreditation status was unknown and 3 with no accreditation.

Participants were asked about the access criteria and referral process of these services. Of the 59 responses recorded, 30 (or 51%) stated there was an access criterion, including processes such as referral by teachers, liaison with parents and children, discussion with external advisers ([See full list in appendix 3d](#))

In-house support and/or programmes performed by school teaching or support staff

Participants were asked to consider their schools provision of in-house options performed by school staff. A pre-populated list was provided, in addition to the option to add other provision unique to their school, the results of which can be seen in Figure 7.

Figure 7: Range of support and/or programmes delivered in-house by school staff? (Question 22)



The options that received the highest recognition from respondents was “1:1 Teaching Assistant (TA) support during crisis”, which registered 94.5%, followed by “Access to a quiet room” with 94.2% and “Mindfulness” (82.5%). There were 96 responders to this question and 44 participants filled in the section labelled “Other”.

[\(A full list of the “Other” services being provided can be found in appendix 3e\)](#)

Issues currently affecting the mental health & wellbeing of pupils

Schools were asked to note what they felt the issues affecting their pupils' mental health and wellbeing were and, from these, to rank the top 5 issues. This question generated 534 suggestions as to current issues, which have been analysed and coded into 29 headline areas, as can be seen in Table 2. The responses generally covered 4 themes:

- Pupil's feelings, attitudes and behaviour
- Family/Home life and environment
- Issues happening to the pupil, i.e. transition and/or exam pressure
- Social skills and relationships, including social media

The most commonly suggested issues reflected pupils' school life, e.g. Exam and school pressure and issues.

Table 2: Suggested issues affecting pupils' mental health and wellbeing

Issue	Number of responses	% of responses	% of respondents
Exam/School Pressure/Issues	29	8.2%	30.2%
Self-esteem / Self-confidence / Self image	27	7.6%	28.1%
Access to services/help	23	6.5%	24.0%
Behavioural outbursts / Anger management	22	6.2%	22.9%
Social Media / Internet / Gaming	22	6.2%	22.9%
Friendships / Social interaction / Communication	22	6.2%	22.9%
General pressure/stress	21	5.9%	21.9%
Home/Neighbourhood Environment	21	5.9%	21.9%
Anxiety / Worrying	18	5.1%	18.8%
Parental Physical/Mental Health	17	4.8%	17.7%
Autistic Spectrum Condition / Other learning disability	15	4.2%	15.6%
Parenting Skills	15	4.2%	15.6%
Family discord	13	3.7%	13.5%
Attachment issues	11	3.1%	11.5%
Parental Separation / Divorce / Family breakdown	9	2.5%	9.4%
Domestic Violence	7	2.0%	7.3%
Low mood / depression	7	2.0%	7.3%
Addiction / Substance Misuse (in family)	7	2.0%	7.3%
Resilience	7	2.0%	7.3%
Physical Health	7	2.0%	7.3%
Peer Pressure	6	1.7%	6.3%
Sexuality / Gender identity	5	1.4%	5.2%
Bereavement	5	1.4%	5.2%
Poor sleeping patterns	4	1.1%	4.2%
Bullying	4	1.1%	4.2%
Eating disorders	4	1.1%	4.2%
Self-harm and suicide	4	1.1%	4.2%
Trauma	2	0.6%	2.1%
Undiagnosed conditions	1	0.3%	1.0%

Note: Number of responses n=534. Number of respondents n=96

Table 3a and Table 3b are split to show those issues that were ranked as the most pressing issues, and those that did not have a number 1 ranking but were ranked amongst the top 5 issues.

As Table 3a shows, the most ranked issue centred on pupil's view of themselves. However, the issues most commonly ranked as the most pressing issue were:

- Anxiety / Worrying
- Self-esteem / Self-confidence / Self image
- Behavioural outbursts / Anger management
- Social Media/Internet/Gaming

The above issues were each ranked as the top priority by 4 respondents of this question. Examples of answers provided include 'self-regulation' (behaviour), '11+ pressure', 'impact of social media on self-esteem and friendships' and 'mental health issues in the family'.

Table 3a: Suggested issues affecting the mental health and wellbeing of pupils, by rank

Issue	1st	2nd	3rd	4th	5th	Total
Anxiety / Worrying	31	7	8	9	3	58
Self-esteem / Self-confidence / Self image	6	15	12	10	10	53
Behavioural outbursts / Anger management	5	7	9	8	4	33
Social Media / Internet / Gaming	7	6	6	9	0	28
Low mood / depression	1	5	8	5	3	22
Attachment issues	5	3	4	3	6	21
Home/Neighbourhood Environment	3	6	2	5	5	21
Parental Physical/Mental Health	9	4	2	1	4	20
Exam/School Pressure/Issues	2	4	4	3	6	19
Access to services/help	6	3	4	2	4	19
Parenting Skills	1	4	7	3	1	16
Autistic Spectrum Condition / Other learning disability	2	5	6	2	1	16
Friendships / Social interaction / Communication	2	2	3	5	4	16
General pressure/stress	3	6	3	2	2	16
Family discord	5	3	1	3	0	12
Parental Separation / Divorce / Family breakdown	3	3	1	1	1	9
Domestic Violence	2	3	2	0	2	9
Addiction / Substance Misuse (in family)	1	0	3	2	1	7
Bereavement	1	1	1	3	1	7
Resilience	1	3	1	1	0	6

Table 3b: Suggested issues affecting the mental health and wellbeing of pupils, by rank

Issue	1st	2nd	3rd	4th	5 th	Total
Peer Pressure	0	2	1	2	2	7
Self-harm and suicide	0	1	0	0	4	5
Bullying	0	1	0	3	1	5
Physical Health	0	1	1	0	2	4
Poor sleeping patterns	0	1	1	1	0	3
Trauma	0	0	0	1	2	3
Sexuality / Gender identity	0	0	1	1	0	2
Undiagnosed conditions	0	0	0	1	0	1
Eating disorders	0	0	0	0	1	1

Table 3c: Colour Code

	Family/Home life and environment
	Issues happening to the pupil
	Social skills and relationships
	Pupil's feelings, attitudes and behaviour

Table 3b shows that peer pressure was the most commonly ranked issue, without being ranked as the top issue. This was followed by self-harm and suicide, bullying and physical health.

Although the respondents were asked to note and rank the key issues that in turn have been separated into the 4 categories (Table 3c), they are intrinsically related and should therefore not be considered in isolation, and e.g. self-esteem could be affected by friendship/social media.

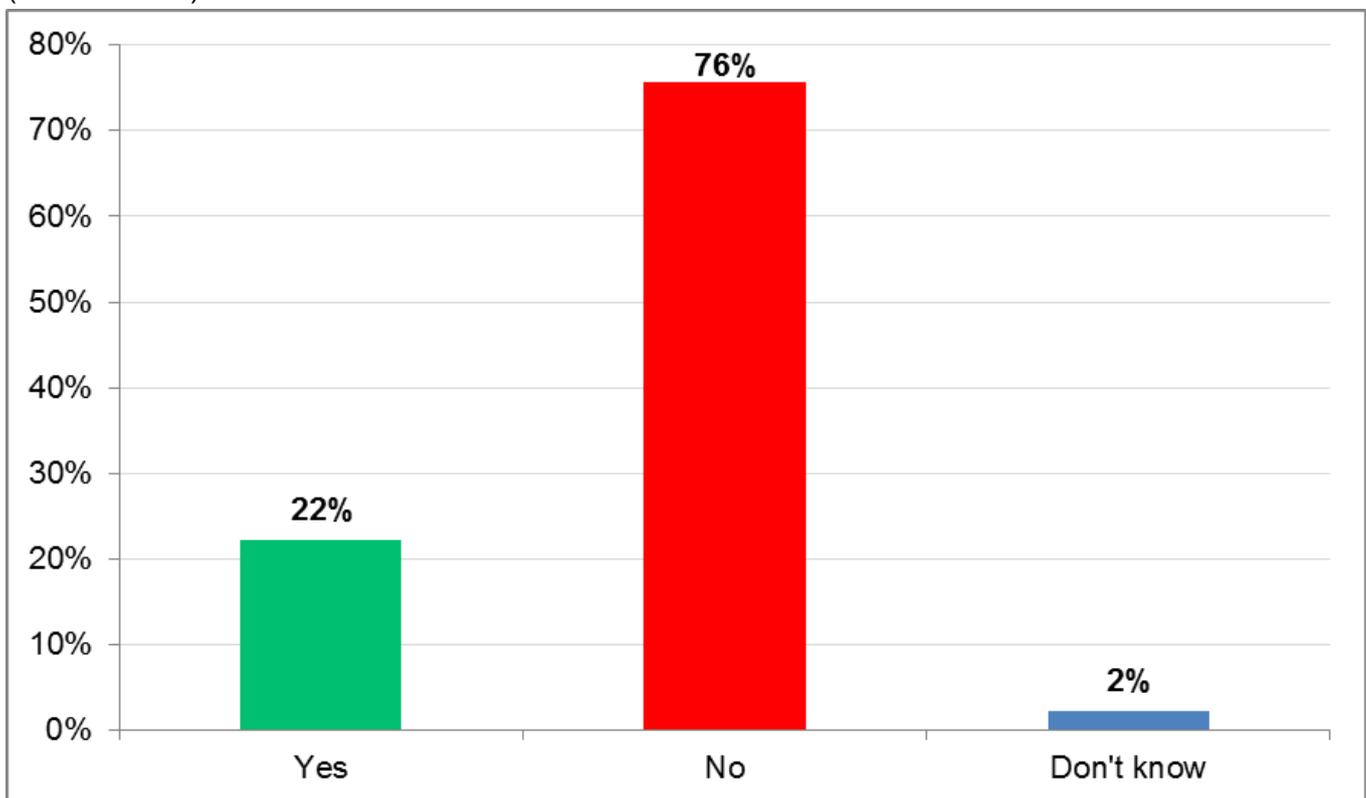
Additional Neurodevelopment Support

Participants were asked what top 5 things they are currently providing for children with neurodevelopment conditions. 93 of the 97 participants responded to this section with 100% giving at least one of five answers, 95% (n=88) giving two answers, 90% (n=84) giving at least three answers.

The main themes in the first three answers reported were that these children are given one to one support, additional teaching assistants and group support. Various interventions were repeatedly mentioned with regards to quiet time and time out spaces being prominent. ([Lists of all responses to this question are available in the appendix section 3f](#))

Participants were asked if additional neurodevelopment support was bought in, see figure 8 below:

Figure 8: Do you buy-in additional neurodevelopmental support (e.g. ADHD, ASC)? (Question 25)



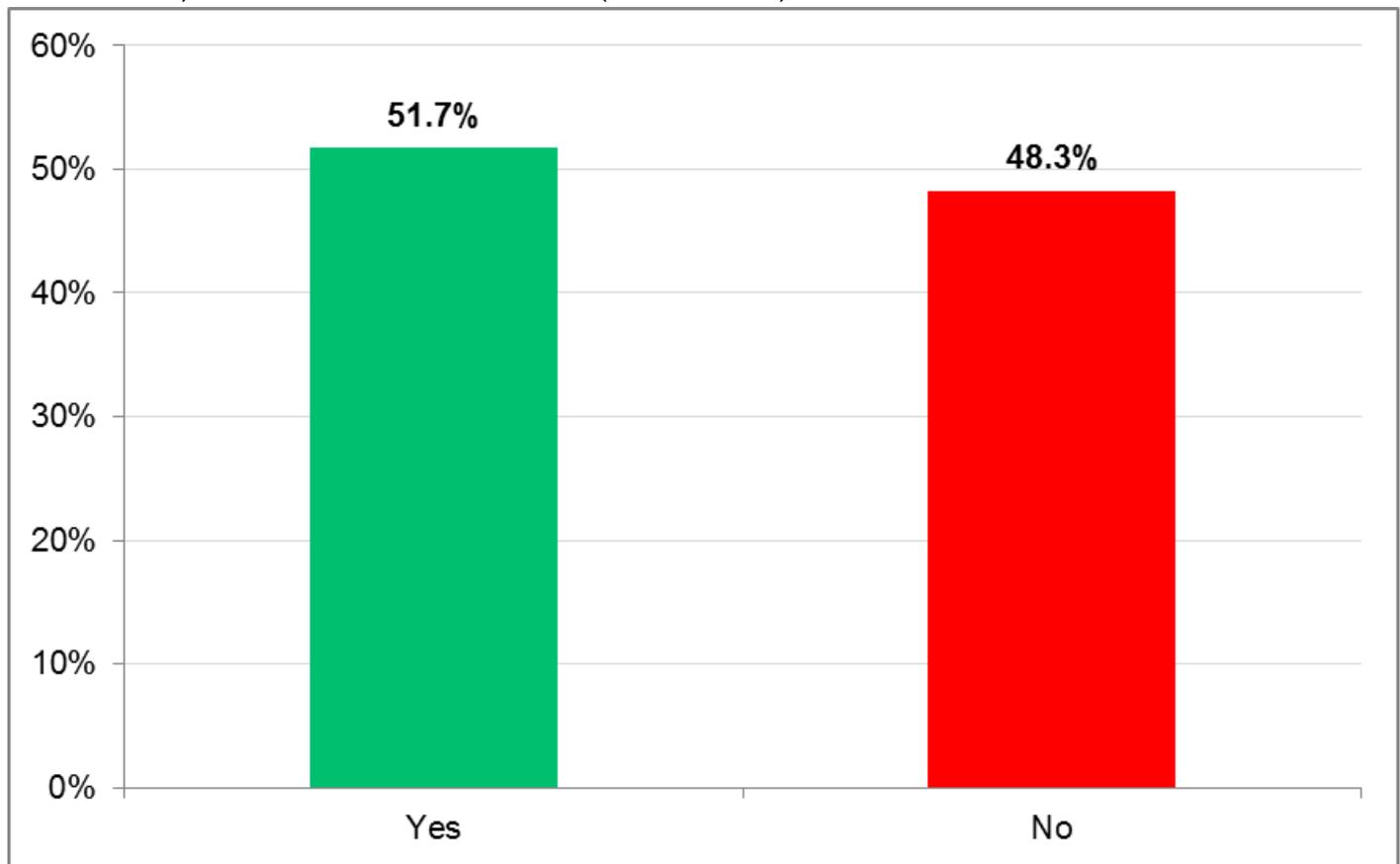
Of the 95 participants answering this question only 22% (n=21) schools buy in extra support currently with 76% (n=72) not requiring additional support at this current moment and just 2% (n=2) reporting unknown.

Of those 21 responders who do buy in additional neurodevelopment support the most prominent types of support brought in were the ADHD Foundation and Education psychologist services. 17 different bought in services were recorded and of these 82% (n=14) are accredited by a professional body, 18% (n=3) recorded don't know and none were recorded as not accredited

([A full list of the services bought in can be found in the appendix section 3g](#))

Figure 9 shows below that in terms of access criteria the distribution is virtually 50/50. 11 responders gave a clarification to their answers for the access criteria, see appendix for answers supplied.

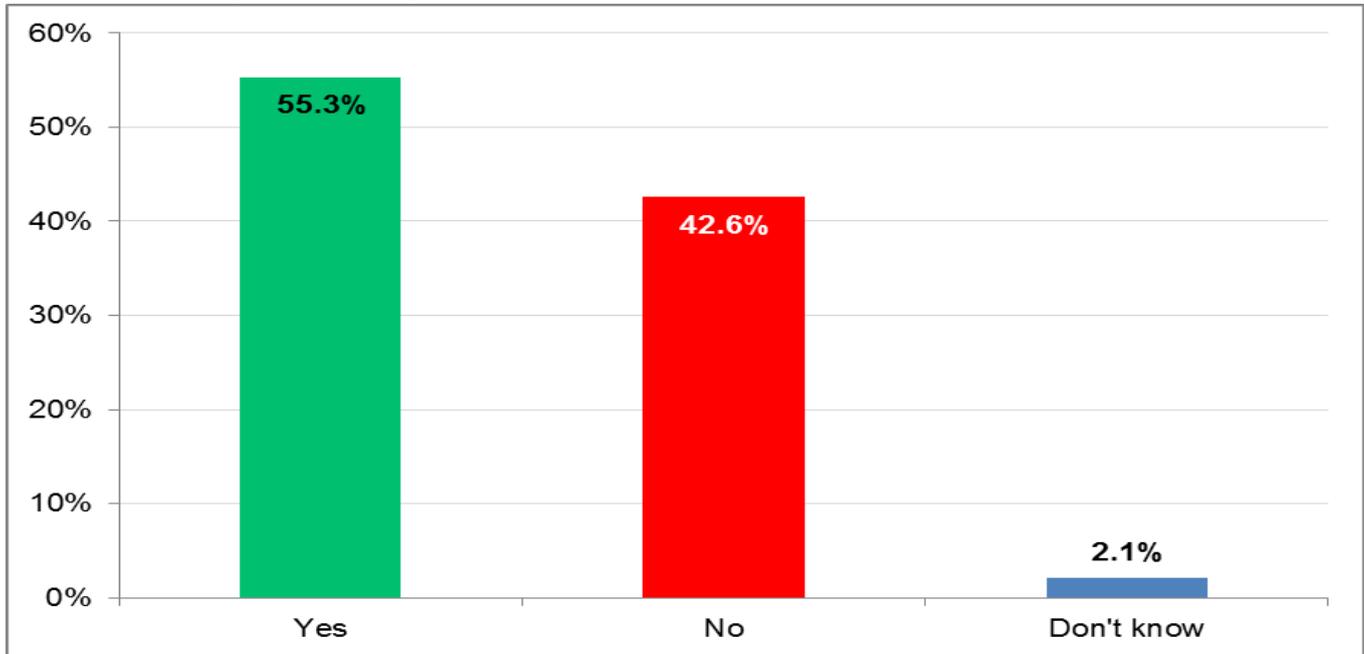
Figure 9: In order for your pupils to access your additional neurodevelopmental support (e.g. ADHD, ASC), is there an access criteria? (Question 28)



Additional Speech & Language Therapy (SALT) services

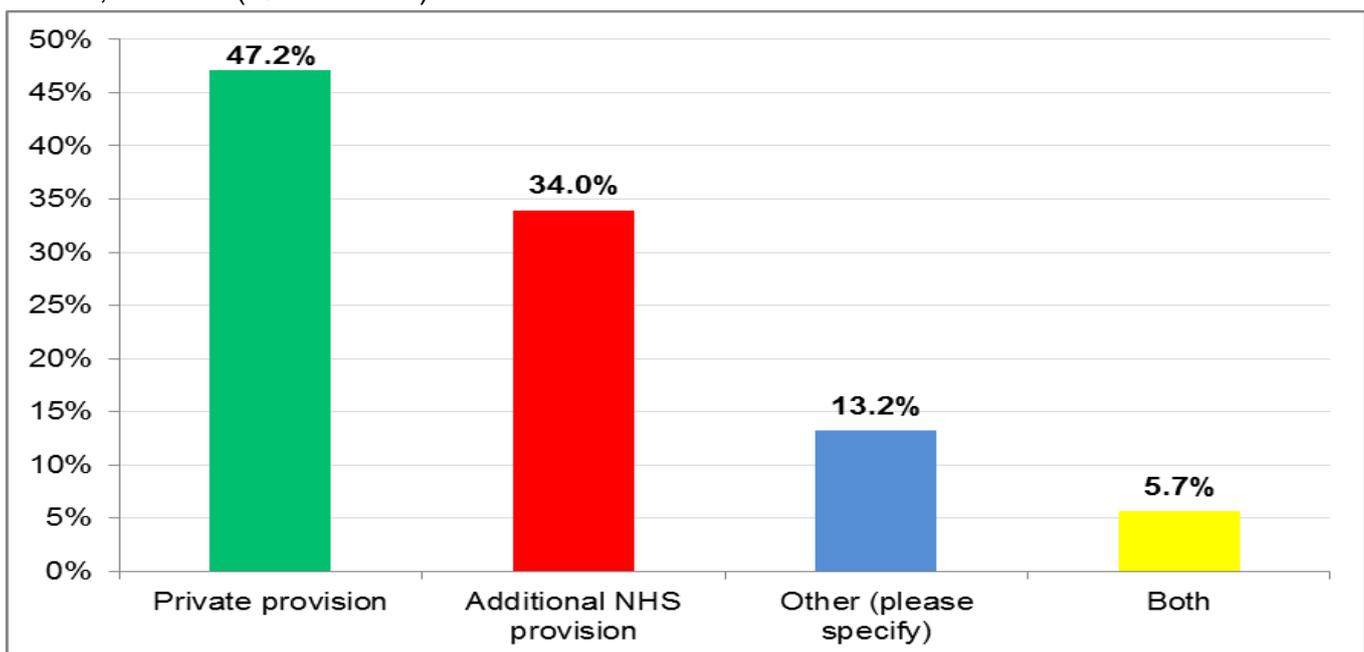
Respondents were asked to consider their provision of Speech and Language Therapy (SALT) services, in particular whether additional provision was being bought-in. Figure 10 shows that 55.3% (n=52) of respondents stated that additional services were bought-in whereas 42.6% (n=40) did not and 2.1% (n=2) didn't know.

Figure 10: Are any additional SALT services for pupils bought-in over and above the core NHS SALT service? (Question 30)



For those who answered 'Yes' to above, an additional question was asked regarding the type of provision bought-in (Figure 11).

Figure 11: If you do buy-in additional Speech & Language (SALT) services for the pupils at your school, is this... (Question 31)



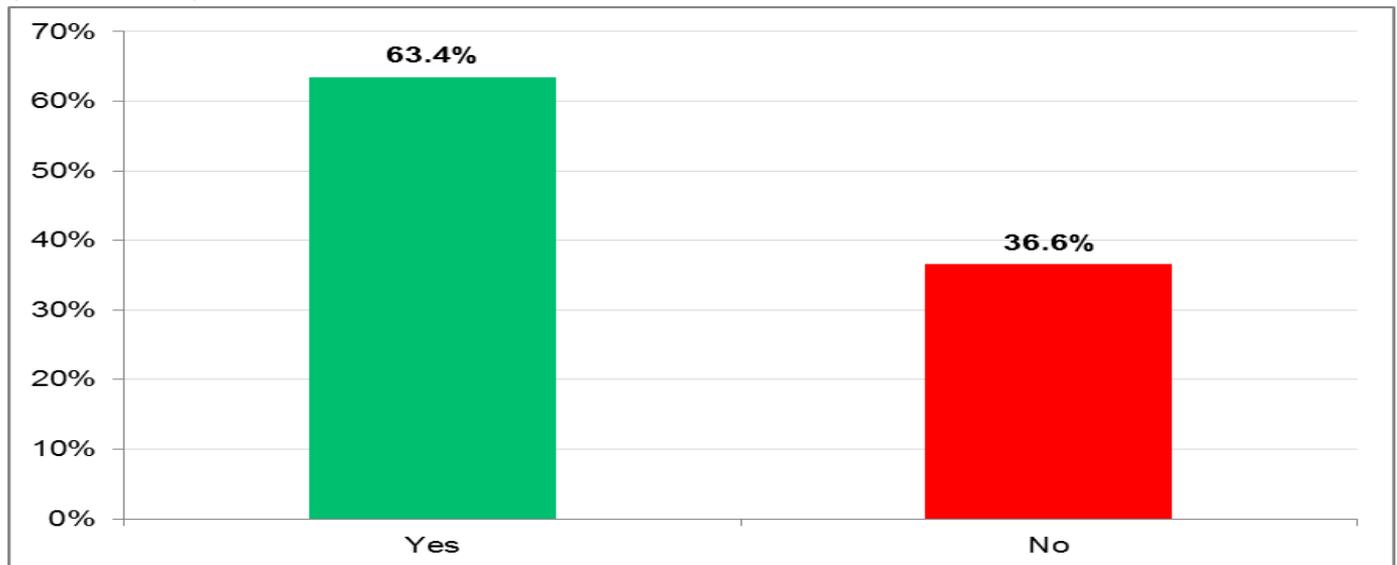
Note: 'Other (please specify)' is "Teaching assistant delivers SALT packages", "currently under review as we are disappointed at the lack of SALT personnel", "Ex-NHS Therapist" and "Talk about Town"

As Figure 11 shows, additional provision is predominantly from a private supplier, with additional NHS provision closely following (47.2% n=25 compared to 34.0% n=18). Also of note, 5.7% (n=3) of those buying in additional provision purchase a mix of NHS and private provision.

Parenting/Family Support

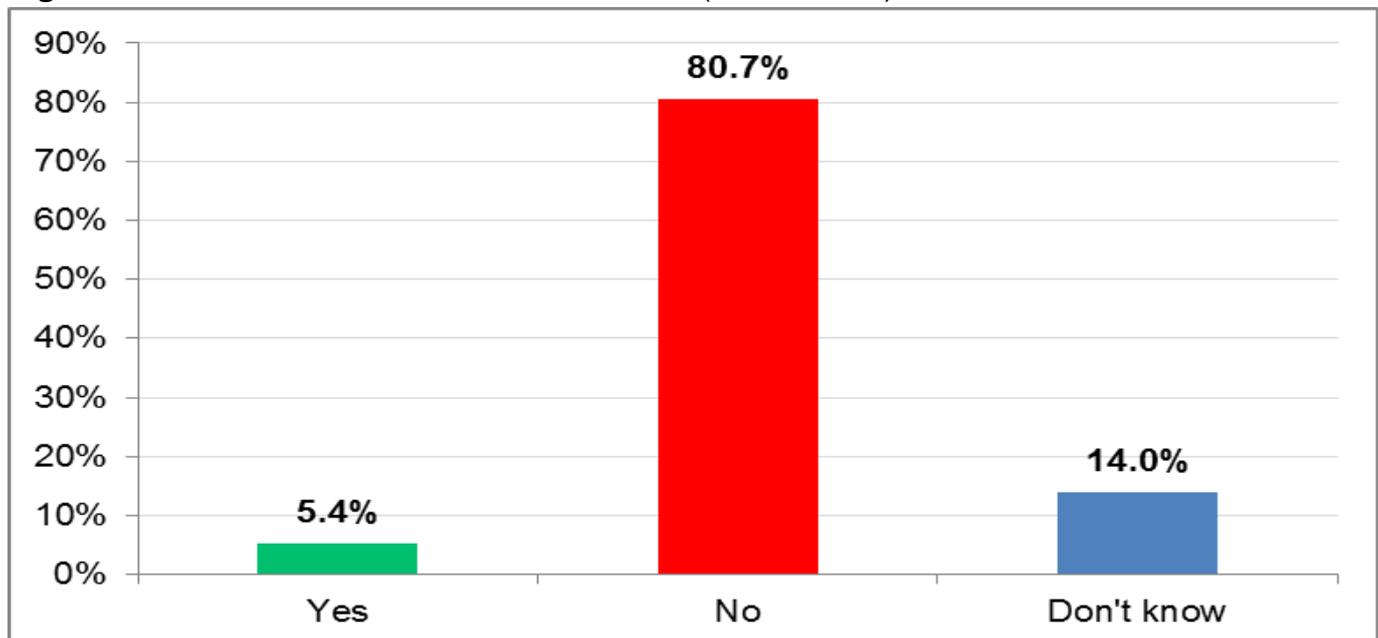
Participants were asked if they employ non-teaching staff to work with families/provide parenting support within your school. Some examples were provided such as family support worker, wellbeing manager, pastoral support. 93 participants answered the question and nearly two thirds (63%, n=59) do employ non-teaching staff as figure 12 below shows.

Figure 12: Do you employ non-teaching staff to work with families/provide parenting support within your school? (E.g. family support worker, wellbeing manager, pastoral support) (Question 32)



The list of the type of jobs/roles given in answer to the 63% and the fulltime equivalent (FTE) for the above is available in the appendix 3h and 3i. The vast majority (81%, n=75) of the types of roles are not shared between schools as figures 13 below shows:

Figure 13: Is this role shared between schools? (Question 35)



Participants were asked to list support that is currently offered around parenting/family support. Of the 97 responders just under half gave a response (46%, n=45). There was over 150 different answers, the most prominent groups were parent support, family support and one to one support. ([A full list can be found in appendix section 3j](#))

Participants were also asked if the support offered to parent/family's was supplied by their own staff or brought-in. 60% of services offered were done so by schools own staff followed by 46% of services bought-in and 19% didn't know if they were bought-in or not.

Figure 14: If appropriate training and support was available, would staff in your school have the capacity to deliver parenting courses/support (Question 39)

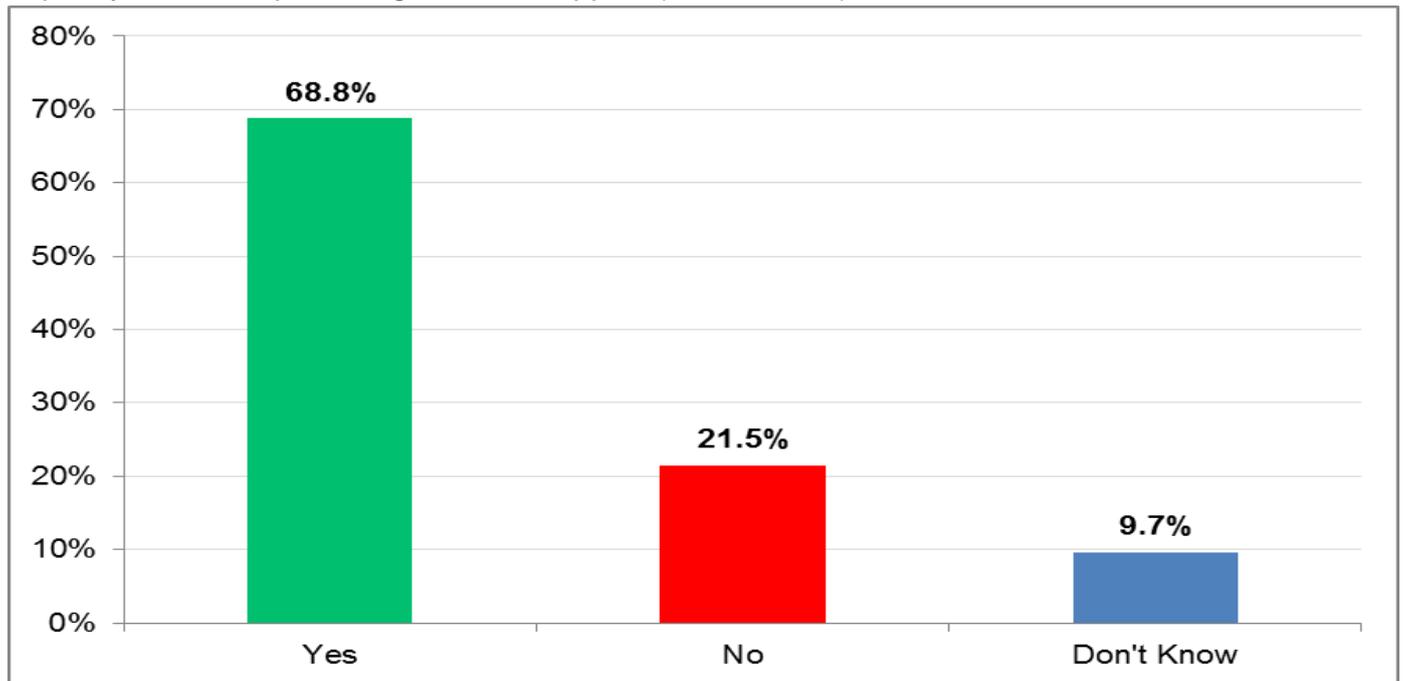


Figure 14 above was answered by 93 of the 97 participants in the survey. Of those 93, 64 (69%) thought that staff would have the capacity to deliver parenting courses/support. Only 20 (22%) thought they couldn't supply this type of support and just under 10% (n=9) didn't know if they could or not.

Staff Mental Health & Wellbeing

Participants were asked to consider their approach to maintaining and improving staff's mental health and wellbeing, namely the most effective strategies in place. This question generated 354 responses that have been analysed and coded into 27 overarching categories.

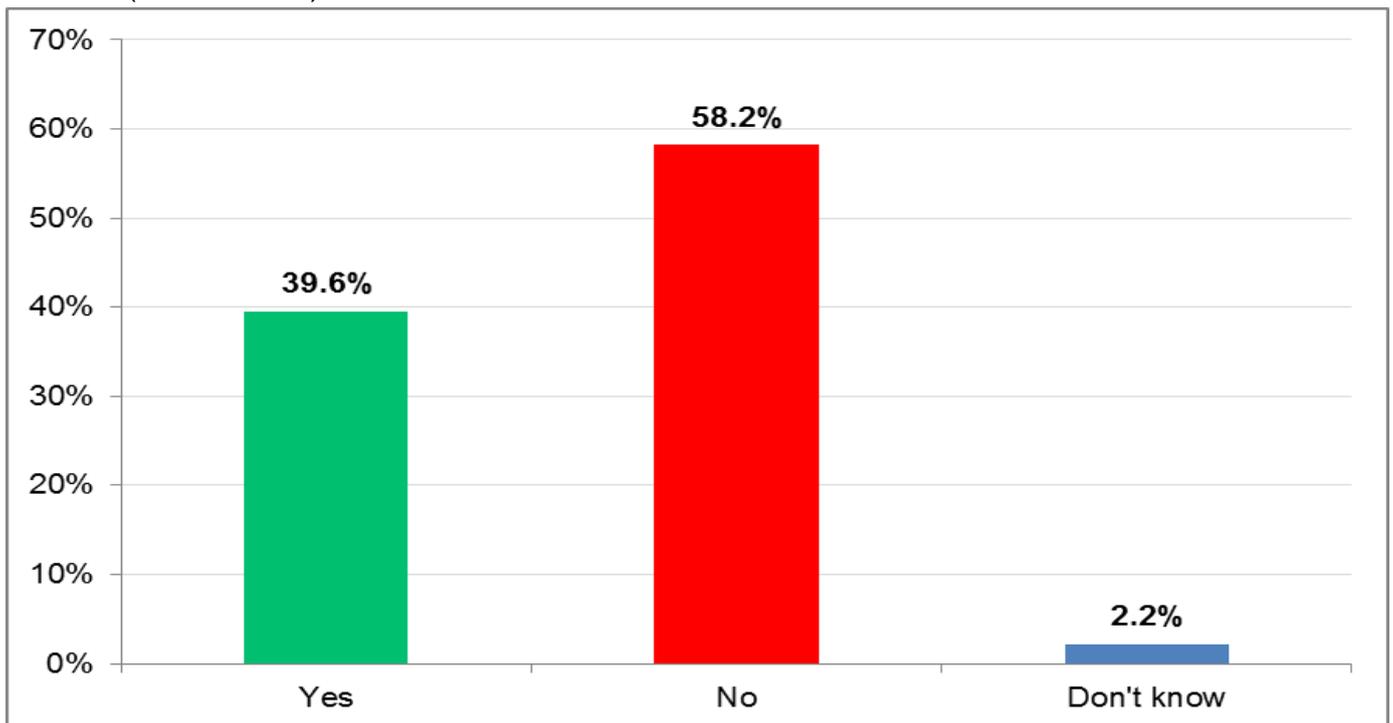
Table 4: Approaches in supporting staff mental health and wellbeing

Approach	Number of schools with approach	% of schools with this approach
Wellbeing Time/Promotion	33	34.0%
Workload reduction initiatives	32	33.0%
Supervision/1-2-1 Communication meetings	29	29.9%
Access to 1-2-1/Group Support	27	27.8%
Mental Health & Wellbeing Policies & Resources, e.g. Stress Management	26	26.8%
Team Building	24	24.7%
HR Support, e.g. Occupational Health, Absence policy	24	24.7%
Physical Health/Exercise Classes	17	17.5%
Appropriate Training	17	17.5%
Advice & Support	15	15.5%
Whole School Development activities	13	13.4%
Adaptable/Flexible working conditions/workload	11	11.3%
Open school culture	11	11.3%
PAM Assist	9	9.3%
Clear policies and procedures	8	8.2%
Minimal/Reduction of out-of-school-hours meetings/working	7	7.2%
Offsite working	7	7.2%
Governor/SLT responsibility for staff wellbeing	6	6.2%
A Place 2 Be	6	6.2%
Celebration Events, e.g. employee of the month	6	6.2%
Mindfulness	6	6.2%
Clear communication policies	5	5.2%
Coaching	5	5.2%
Improved staff facilities	3	3.1%
Peer Support	3	3.1%
Other	3	3.1%
Paid Flu Immunisation for Staff	1	1.0%

Table 4 shows that the top two most commonly used strategy by schools is providing “Wellbeing Time/Promotion” and “Workload reduction initiatives” with more than a third of schools adopting this type of approach. Following this, just under a third (29.9% or n=29) of schools who responded provide access to support services, such as 1-2-1 counselling and group support. A very similar number of schools reported having “Access to 1-2-1/Group Support” available.

Participants were also asked if they buy in any additional support, see figure 15 below:

Figure 15: Do you buy-in any additional support for staff mental health and wellbeing at your school? (Question 41)



Just under 40% (n=36) of schools buy in additional support when compared to close to 60% (n=53) that do not buy in support. Of the 36 responders to the question above, the most common support bought in was PMA assistance and occupational health support. A total of 45 services were recorded and of them 77% (n=35) were accredited and only 22% (n=10) unsure of accreditation status. In order for staff to access additional support only 10% (n=5) responders said there was some sort of access criteria to the additional support and 90% (n=46) reported no access or don't know of any access criteria. ([A full list can be found in the appendix 3k and 3l to all the examples of support given above](#))

Whole School Approach

Participants were asked to describe the key points of their whole school approach to supporting emotional health and wellbeing.

This question allowed free text responses, of which 91 were received and broken down into 205 individual points.

These were analysed and coded into 44 overarching categories. Over three quarters of responding schools reported that “promoting a supportive and open school culture and a “whole school commitment” was a key part of their whole school approach.

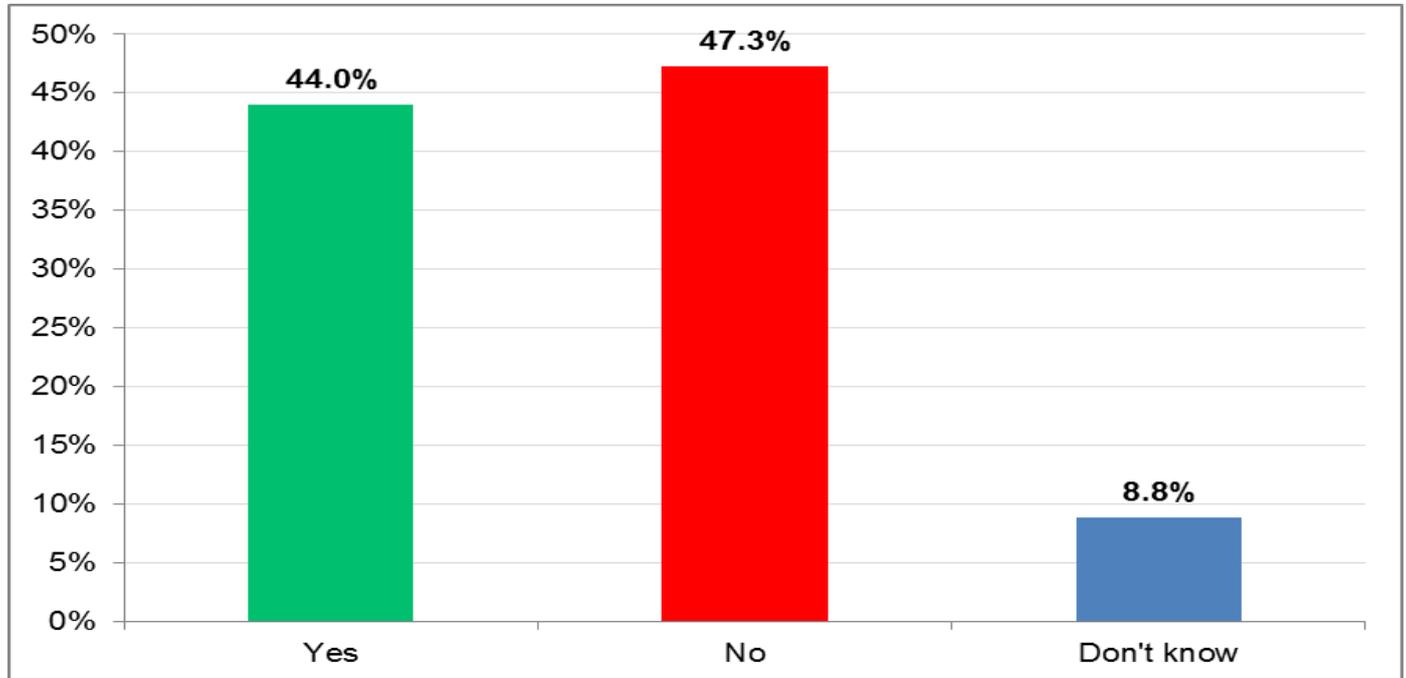
Table 6: Key points of the whole school approach to supporting emotional health and wellbeing

Key Point	Number of schools	% of schools
Promoting a supportive and open school culture	38	41.8%
Whole school commitment	38	41.8%
Advice & Support	22	24.2%
Staff wellbeing	13	14.3%
Communication & Support tools	12	13.2%
Wellbeing Policy & Strategy	9	9.9%
Parent engagement/access to support	8	8.8%
Dedicated Staff	6	6.6%
Training provision	6	6.6%
Clear referral pathways (external)	4	4.4%
Adaptable/Flexible working conditions/workload	4	4.4%
Individualised programmes and reviews for children	4	4.4%
Strong leadership	3	3.3%
Open school culture	3	3.3%
Mental Health and Well-Being Policy	3	3.3%
Alignment of MHWB to School Vision	2	2.2%
Clear referral pathways (internal)	2	2.2%
Health Support	2	2.2%
Promoting physical health and fitness	1	1.1%
Flexible working	1	1.1%
Development Plan	1	1.1%
Governors Wellbeing	1	1.1%
Appropriate Training	1	1.1%
Budget Issues	1	1.1%
Service provision	1	1.1%
Whole School Development activities	1	1.1%
Student Access Support	1	1.1%
HR Support	1	1.1%
Accessible leaders	1	1.1%
Celebration/Recognition of achievements (staff and pupils)	1	1.1%
Awareness raising	1	1.1%
Investment in community support	1	1.1%
Raising Awareness of Mental Health	1	1.1%
Key Relationships	1	1.1%
Share training skills	1	1.1%
Line Management Structures	1	1.1%
Early Strategies in place	1	1.1%
Advice & Support	1	1.1%
Emotional coaching	1	1.1%
Mental Health Leads high profile	1	1.1%
Flexible approaches to promoting wellbeing	1	1.1%
MHWB curriculum	1	1.1%
Access to activities and after school/lunch clubs	1	1.1%
Healthy Lifestyles adopted	1	1.1%

Policy and Priority

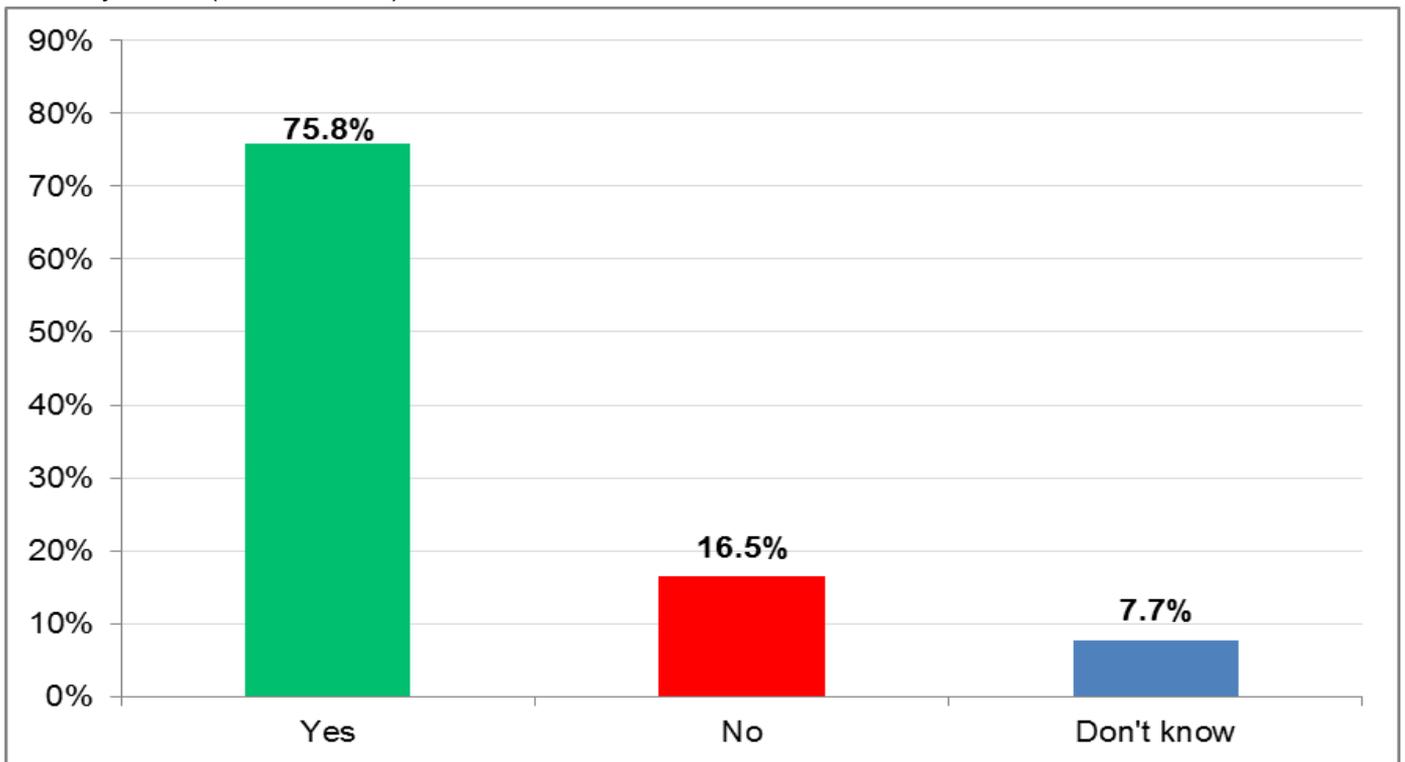
The final section of the survey focussed around policy and priority. The participants were asked whether there was currently a mental health and wellbeing policy implemented at their school. Figure 16 shows that 47.3% (N=43) (of the 91 responding) schools did not currently have a policy in place.

Figure 16: Do you currently have a mental health and wellbeing policy in your school?
(Question 47)



Participants were then asked whether mental health and wellbeing is a priority in the school development plan over the next two years. Figure 17 shows that 75.8% (n=69 or 3 in 4 schools) have included mental health and wellbeing as a priority in their school development plan.

Figure 17: Is mental health and wellbeing a priority in your school development plan over the next 2 years? (Question 48)



[\(A list of other comments and views or experiences supplied by 23 of the 97 responders is available in the appendix 3m\)](#)

Appendices

Appendix 1

[Appendix 1 Future in Mind 2018 Survey Questions](#)

Appendix 2

<u>SCHOOL</u>	<u>SCHOOL</u>	<u>SCHOOL</u>
Ganneys Meadow EYC	Mersey Park Primary	Woodchurch Rd Prim
Leasowe EYC	Millfields Primary	Woodlands Primary
Somerville Nursery School	Mount Primary	Woodslee Primary
Barnston Primary	New Brighton Primary	
Bedford Drive Primary	Our Lady & St Ed's RC	
Bidston Avenue Primary	Our Lady of Pity RC	
Bidston Village CE Prim	Overchurch Infant	Bebington High Sports
Black Horse Hill Infant	Overchurch Junior	Birkenhead High Ac
Black Horse Hill Junior	Park Primary	Birkenhead Park School
Brackenwood Infant	Pensby Primary	Calday Grange Grammar
Brackenwood Junior	Portland Primary	Hilbre High
Brookdale Primary	Poulton Lancelyn Prim	Mosslands
Brookhurst Primary	Prenton Primary	Oldershaw
Castleway Primary	Raeburn Primary	Pensby High School
Cathcart Street Primary	Riverside Primary	Prenton High Girls
Christ Church CE Pri (B)	Rock Ferry Primary	Ridgeway High
Christ Church CE Pri (M)	Sacred Heart RC Prim	South Wirral High
Christ the King RC Prim	Sandbrook Primary	St Anselm's College
Church Drive Primary	Somerville Primary	St John Plessington
Dawpool CE Primary	SS Peter & Paul's RC	St Mary's College
Devonshire Park Primary	St Alban's RC Primary	Upton Hall School
Eastway Primary	St Andrew's CE Prim	Weatherhead High
Egremont Primary	St Anne's RC Primary	West Kirby Grammar
Fender Primary	St Bridget's CE Prim	Wirral Grammar Boys
Gayton Primary	St George's Primary	Wirral Grammar Girls
Greasby Infant	St John's RC Infant	Woodchurch High
Greasby Junior	St John's RC Junior	
Great Meols Primary	St Joseph's (B)	
Greenleas Primary	St Joseph's (U)	Clare Mount S
Grove Street Primary	St Joseph's (W)	Elleray Park P
Heswall Primary	St Michael & All Angels	Foxfield S
Heygarth Primary	St Paul's RC Primary	Gilbrook P
Higher Bebington Junior	St Peter's CE Prim (H)	Hayfield P
Hillside Primary	St Peter's RC Prim (N)	Kilgarth S
Holy Cross RC Primary	St Saviour's CE Oxtan	Meadowside S
Holy Spirit RC & CE Prim	St Werburgh's RC Primary	Observatory School S
Hoylake Holy Trinity Prim	Stanton Road Primary	Orrets Meadow P
Irby Primary	The Priory CE Primary	Stanley School P
Kingsway Primary	Thingwall Primary	Wirral Hospital S
Ladymount RC Primary	Thornton Hough Prim	Emslie Morgan S
Leasowe Primary	Town Lane Infant, Beb	
Lingham Primary	Townfield Primary	
Liscard Primary	Well Lane Primary	
Manor Primary	West Kirby Primary	
Mendell Primary	Woodchurch CE Prim	

Appendix 3

All text has been left as the responders have inputted into the survey and not altered in any way. This is to demonstrate for future surveys the possibility of grouping the answers up before launching the questionnaire as similar themes occur multiple times. The length of answers and amount of different answers for this appendix section had to be added into the link below with reference to the actual question asked in the questionnaire and then referenced for this document into separate answers (3a to 3m).

[Appendix 3: Responses to ALL open questions posed in FiM Survey 2018](#)

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