



# **Partnership Agreement between North East Lincolnshire**

## **Youth Offending Service (YOS)**

**and**

## **School Nursing Service**

Status	Date	By Whom
Approved	June 2018	K Goy / D Abernethie
Last Reviewed	May 2021	K Goy / D Abernethie
Next Review Due	May 2023	K Goy / D Abernethie

## 1. Purpose

This document details the partnership arrangements between the Youth Offending Service and School Nursing Service to work together to identify, provide support and meet the physical health needs of children and their families in North East Lincolnshire. It specifies the roles and responsibilities of the services.

- Relevant legislation and guidance is adhered to in all activities and provisions.
- Children and young people's needs are clearly assessed and interventions are planned in consultation and partnership with children and young people, their parents/carer's and all relevant services providing or involved in providing services to meet their needs.
- Children's and young people's health and development is considered in all areas of work with clear objectives being set to achieve interventions that are coordinated and have measurable improvement targets and are outcome based.
- There are clear communication pathways, information sharing partnerships and agreements between the Youth Offending Service and School Nursing Service.

## 2. Principles

The Youth Offending Service and School Nursing Service are both provided by North East Lincolnshire Council, they are committed to ensuring the needs of children and young people within the criminal justice system are met by collaboratively working together in a positive way with all agencies involved.

## 3. Youth Offending Service

The primary aim of the Youth Offending Service is to prevent offending and re-offending by young people aged 10 – 17 years. The Youth Offending Service is a multi-agency service.

Youth Offending Teams were created by the Crime and Disorder Act (1998) to achieve this aim.

The Crime and Disorder Act (1998) also imposed the statutory duty that every local authority in England and Wales has a multidisciplinary Youth Offending Service made up of representatives from;

- the police;
- probation service;
- Children's Services;

- Health;
- Education;
- Drug and alcohol services
- Accommodation Services.

The overarching aim of the Youth Offending Service is “to work to prevent offending and re-offending by children and young people under the age of 18, and to ensure that custody for them is safe, secure and addresses the causes of their offending. It is also widely acknowledged that The Children Act (1989, 2004) influences and impacts on the Youth Justice Service.

Other aims of the service are to:

- Confronting young offenders with the consequences of their offending and helping them to develop a sense of personal responsibility.
- Intervention – tackling the risk factors associated with offending – personal, family, social, educational, health, drugs, accommodation, peer group pressure, low self-esteem, poor academic attainment etc.
- Punishment proportionate to seriousness and persistence of offending.
- Encouraging reparation to victims or to the community by young offenders.
- Reinforcing the responsibilities of parents.

#### **4. Children’s Public Health Provision – School Nursing Service**

The School Nursing service provide a progressive universal public health provision to all children and young people, with a focus on early intervention and prevention. School nursing teams lead and contribute to improving the outcomes for children and young people in partnership with others. The overall aim to improve health and contribute towards tackling key public health priorities, address health inequalities and safeguard children. Other aims of the service are:

- Working in partnership with other professionals, including for example, school leaders, teachers and youth services to support children and young people to become healthy decision-makers in lifestyle choices, particularly in relation to: physical activity and healthy eating, emotional well-being, smoking, sexual health, alcohol and substance misuse. Particular attention should be paid to the vulnerable children who experience worst health outcomes, such as Children in Care, NEET, young offenders, children with disabilities and young carers;
- Supporting children, young people and families to navigate the health and social care services to ensure timely access and support;
- Ensuring early identification of children, young people and families where additional evidence based preventive programmes will promote and protect health in an effort to reduce the risk of poor future health and wellbeing;
- Working in partnership with primary and secondary care colleagues to support children and young people with long term conditions or complex needs and

facilitate appropriate management of health conditions to ensure hospital admissions are kept to a minimum.

## 5. Referral Process

All children and young people who are referred into YOS should receive an assessment of their health within 15 working days of notification. Allocations are sent on a weekly basis to the YOS.

### YOS Process:

- Once allocated a young person email [childrenshealthprovision@nelincs.gov.uk](mailto:childrenshealthprovision@nelincs.gov.uk) advising that they are overseeing the case and require a health assessment.

### School Nurse Process:

- Admin:
  - ✓ Allocate cases to either the Link School Nurse or SN allocations, task via the health record and include the YOS case manager name. Reply to the YOS caseworker advising who the School Nurse is or in the case of SN allocations that a School Nurse will make contact in due course.
- Allocated School Nurse:
  - ✓ Undertake a full review of the electronic health record to review any ongoing/outstanding health needs - complete the YOS Health Return Form.
  - ✓ Share this information with the YOS case manager and ascertain if there are any other concerns following their own assessment. It might be necessary for the School Nurse to undertake a face-to-face assessment if concerns such as weight, growth are identified.
  - ✓ Contribute to the young persons YOS care plan by including any outstanding health needs and follow these up where appropriate or signpost to the relevant agency.

There will be a clear record of this process stored within the Health Record.

## 6. Assessments

YOS/School nurse will respond to the inequalities experienced by children, young people and their families who are on the edge of, within or exiting the youth justice system (Crime and Disorder Act, 1998).

There will be timely sharing of accurate information about health and wellbeing needs of children and young people and plans for meeting those needs. Where health and wellbeing needs are identified, there will be an agreement of package of care for children, young people, families and carers. This information will build upon and take account of any assessments conducted through the youth justice service.

Assessments may include positive support where health and wellbeing needs are identified for example but not limited to:

- Alcohol and/or drug misuse
- Emotional health and wellbeing
- Sexual health
- Physical activity
- Immunisation status
- Healthy eating and physical activity
- Oral health
- Continence
- Unmet health needs due to ongoing health conditions i.e asthma

YOS/School Nurses work in partnership with the following services:

- GP, Practice Nurses
- Speech and Language Therapy Services
- Community Children's Nurse
- Hospital
- CAMHS practitioner
- Families / Carers
- Head Teachers / Teachers
- Family Hubs
- Youth Services
- Children's Services (Social Care)

Interventions may include:

- Advice and Guidance
- Signposting
- Referrals to other health agencies
- Cognitive behavioral therapy
- Brief Interventions

## **7. Confidentiality and Information Sharing**

It is recognised that young people can be reluctant to disclose or discuss their health with service providers. Therefore it is essential that young people must be given a safe and confidential environment to discuss their views/concerns etc.

It is also widely acknowledged that young people may act in ways that put themselves or others at risk, or may be vulnerable to harm from others. Emotional health and learning disability needs may further increase this vulnerability. In these circumstances information will need to be shared in order to start the process outlined by Child Protection procedures. Information may also need to be shared if the young person becomes subject to a formal assessment under the guidance of the Children Act.

Good practice guidelines advise that for young people to receive the best quality and value of care, it is essential to actively involve other relevant agencies and parents and carers in the sharing of appropriate information and concerns in order to prevent offending.

Young people referred to other professional partners for assessment through the YOS will receive services in line with NELC confidentiality policies. The

confidentiality policy will be explained to the young person during the introductory session along with the need to share information where appropriate.

The young person should be informed that information obtained by the YOS/School Nurse in screening and assessing health issues will not be used against the young person in any way, and forms part of the health assessment as part of the multi-disciplinary assessments within the YOS. The information obtained by YOS/School Nurse will form part of their agency's Health Record and is subject to NELC confidentiality policies and procedures. Information will be shared with other agencies with consent.

The young person will be encouraged to share as much information as possible with other professionals throughout their treatment. The following information will always be shared between the YOS/School Nurse and the other Youth Offending Service staff:

- Basic details of contacts
- Dates and locations of contacts with clients
- Attendance and non-attendance of young person/worker
- Child protection concerns
- Concerns about risk of harm to self or others. (including risks to staff)
- Any information needed through obligation placed on staff through the courts.

Otherwise decisions to share any other information will be made on a case by case basis and discussed with the young person.

Agreed shared information should adhere to the following guidelines. The information should be:

- Reasonable in the circumstances of the young person's needs
- Be on a need to know basis
- Be in the best interest of the young people
- Evidence based and factual
- Take into account the need to put the mental health issues into a context of re-offending behaviour patterns and risk to the community and others.

Any decision that is taken to breach confidentiality will be shared with the young person at the earliest opportunity, ideally before the breach takes place.



**Signed**

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**Karen Goy, Head of Children's Health Provision**



**Signed**

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**Donna Abernethie, Operations Manager, Youth Offending Service**