

**Title of report: impact of the pandemic on the mental health and well-being of pupils in schools**

Meeting: Children and young people scrutiny committee

Meeting date: Tuesday 22 March 2022

Report by: Service Director, Education and Skills.

**Classification**

Open

**Decision type**

This is not an executive decision

**Wards affected**

(All Wards);

**Purpose**

The purpose of this paper is to report to members the impact of the pandemic on the mental health and well-being of children in our education system – including both the statutory aspects (i.e., schools and colleges) and non-statutory (i.e., pre-school) settings.

The paper includes some field study material from schools and settings and offers some recommendations to support this work going forward.

**Recommendation(s)****That:**

- a.) The committee is asked to note the contents of this report

**Alternative options**

1. There are no alternative options as this is an update report for discussion

## **Key considerations**

### **2. There has been a mental health crisis in our children as a result of the pandemic's impact on education**

### **3. Key contextual background**

The pandemic has presented huge challenges to us as a local authority and for every school and setting. These pressures remain but have evolved over the last two years. This first paragraph is to remind us of the changes educational settings have grappled with – with a consequent impact on staff well-being as well as for the children. There has been no national examination system since 2019 and consequently no national school performance data. Inspections have been unpredictable, and spasmodic. Health and safety issues (including risk assessments) have dominated and responding to over 50 DFE sets of guidance has proved challenging. Setting up and moving to online provision was demanding. Maintaining staffing during COVID outbreaks and managing the mass closure (and then reopening) of schools during the early lockdowns was new to us all. For over a year school leaders have faced what was then believed to be life and death decisions daily. It is tempting to think that such changes reduce the workload – it does not – it creates an even greater workload as school systems have to be re-invented. Whilst such changes were taking place pupils and students have lived through two highly unpredictable years and managing the mental well-being of pupils of all ages has become the top priority. Moving online, for example, was a huge challenge. Children, our most resilient little people, have suffered from the changing routines, the isolation of lockdowns, the uncertainties for their own future and far less opportunity to interact, explore and be guided through the normal routines of school life.

The response from the sector was hugely professional – guidance was shared, interpreted, and implemented at rapid speed. As of March 2022, we have had only one full school closure (a small primary for 4 days due to staffing illness) – we seconded in 2 HMI who evaluated our online offer in mid 2021 and judged it to be good with some outstanding practice. We provided and supported the free school meal offer (we still do) and we fully accessed the IT and laptops DFE schemes by supplementing them with additional local support. Collaboratives of support emerged with schools close to our hospitals taking children of NHS staff from other schools – we managed to open a new nursery in one day from a standing start to help staff the NHS setting nearby. We managed to get the co-op supermarket in Bromyard to honour food vouchers for families (when DFE would not recognise the co-op. This remains the only one in the country to do so). The efforts were immense. Private nurseries closed and furloughed – we went from 180 to around 80 in a month. Now back up to 175.

On the receiving end of all this are, of course, the children for whom the pandemic has been little short of a mental health crisis. In the following report we seek to capture the impact by age range and illustrate some case study material.

Although all ages and cohorts have been impacted but we believe those who have been significantly impacted include those aged 2-4 who have missed out on a normal nursery and 'learning through play' phase, Years 1 and 2 (who as they enter a slightly more formalised system of education have demonstrated some stresses in making that change), Year 7 (who missed out on transition activities) the current GCSE cohort and the Y12-13 post 16 cohort. The latter two had no routine national tests and we are still unaware of the exact procedures in June 2022. They complete their school studies in an era of uncertainty

#### **4. Summary of findings from studies that are relevant locally:**

##### [Children and Young People's Quality of Life Survey 2021 - Understanding Herefordshire](#)

The following took part in the survey:

25 primary schools  
11 secondary schools  
2 FE settings  
1 special school

##### Emotional Health and Wellbeing

- 76% of primary pupils are 'quite' or 'very happy' with their lives at the moment. 58% of secondary pupils and 55% of FE students said the same

##### Worries

- 38% of primary pupils worried at least 'quite a lot' about coronavirus. 17% of secondary pupils and 17% of FE students said the same.
- 20% of primary pupils worried at least 'quite a lot' about their mental health. 34% of secondary pupils and 44% of FE students said the same:

##### Worries - the future

- 30% of primary pupils worried at least 'quite a lot' about the environment and climate change. 19% of secondary pupils and 23% of FE students said the same.
- 27% of primary pupils worried at least 'quite a lot' about their future e.g., getting a job, where they live etc. 44% of secondary pupils and 61% of FE students said the same:

##### Trusted adult

- 79% of primary pupils, 72% of secondary pupils and 74% of FE students said if they were worried about something, they knew a trusted adult they could talk to about this:

##### Resilience

- 24% of primary, 13% of secondary pupils and 13% of FE students had a high resilience score:

And some interesting statistics from this survey on pupils with SEND:

Special Educational Needs (SEND) Secondary pupils who have SEND are more likely to:-

- Be afraid of going to school because of bullying at least 'sometimes' (48% vs. 29%)
- Say their family have asked for help with their mental health (40% vs. 25%)
- Have received a hurtful, nasty or unwanted picture or message online (45% vs. 32%)
- Say they have been physically attacked at school in the last month (14% vs. 6%).

They were less likely to: -

- Feel like they belong to their school (55% vs. 63%)
- Be happy with life (45% vs. 59%)
- Keep trying if at first, they don't succeed (41% vs. 52%).

## 5. **Impact on pre-school and nursery children**

A report by the DfE captures the picture really well:

Children aged 2 have spent almost 80% of their life in the pandemic and those aged 18 months have spent 100% of their life in it"

<https://www.gov.uk/government/publications/education-recovery-in-early-years-providers-autumn-2021/education-recovery-in-early-years-providers-autumn>

The impact of this is:

### Personal Social and Emotional

- Children are less outgoing
- Children showing higher levels of anxiety
- Children are unsure how to react and behave in 'normal' social situations
- Children are unable to share
- Making friendships is delayed
- More children showing challenging behaviour

- Increased numbers of children still in nappies, using dummies and bottles after it is age appropriate.

### Communication and language

- Providers are concerned with the increased number of children needing interventions and referrals due to speech and language difficulties
- Some children are attending nursery or school with a strong American accent
- Children's vocabulary is limited – for many children a year without nursery provision and remaining at home (whilst their parents also struggled to work from home) has led to a speech and language delay of around a year. The age range of 2–4-year-old appear to have been significantly disrupted
- Children's understanding of words is limited.

Yearly decline in LA performance, but still above National average

Significant increase in dis-applied pupils in LA (2.7% to 3.4%)

Performance gap between boys and girls is narrowing but at the expense of girls?

Performance of pupils on EHCPs (11.4%) has dropped to half the National average (22.7%)

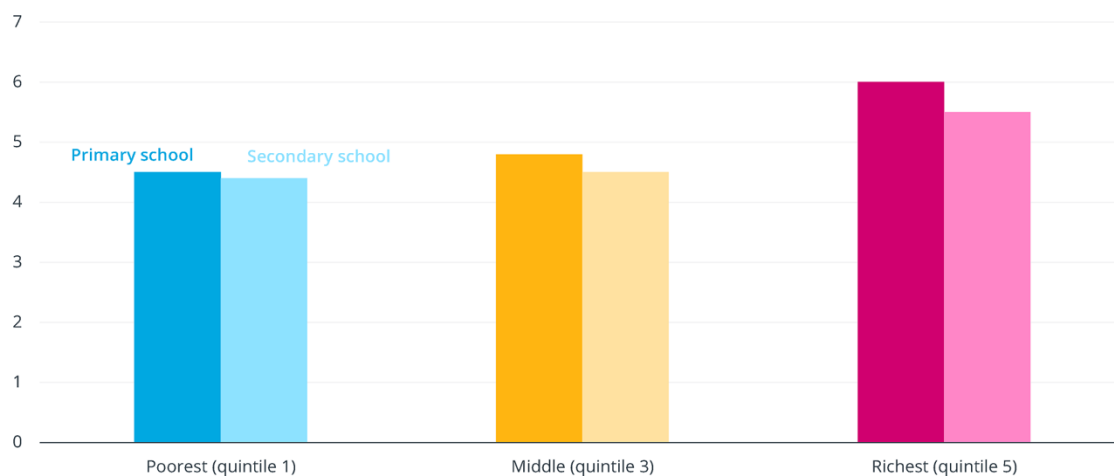
Performance of pupils eligible for FSM (63.5%) continues to sit below National average (66.3%)

However, there are some strong initiatives already underway locally. These include:

- Public health nursing (health visiting) includes maternal mental health assessments using the Edinburgh/Warwick scale and children's motional/behavioural/cognitive/social developments are assessed at each mandated check, particularly at age 2-3.
- The early years strategy which is being developed with children & families will encompass mental health and emotional wellbeing as part of a whole-system approach to ensuring the best start in life (0-5).
- We are working with the Early Help team and Talk Community to develop a 'family hub' approach.

## **6. Primary and Secondary school age students**

The chart shown below is to illustrate the impact of the pandemic on specific cohorts and to demonstrate the gap widening between richer and poorer children:



Source: Institute for Government analysis of Institute for Fiscal Studies, *Learning during the lockdown underlying data*, Figure 2.



The above illustrates in part why the disadvantaged gap, already well known in our schools, has widened post pandemic.

We canvassed 10 of our primary schools and 4 secondary schools to check for commonality across schools. These included small rural primaries, larger urban schools and both academies and maintained schools. We have not yet conducted a full-scale survey as the January – March period was the busiest for our schools in dealing with COVID outbreaks.

They report common themes that mirror those seen in Early Years settings and in summary include:

- Less resilience of pupils to stressful situations or new lesson content – quicker to tears and / or anger
- Increased problems with behavioural issues emerging sooner and quicker and more extreme
- Literacy delays leading to greater frustration and increased anxiety of tackling new tasks
- Less acceptance of the normal routines and rhythm associated with school life
- Individual children showing increased complexity of need
- Increase in need for smaller group activities and more tailored support time
- Increase in absences associated with either COVID concerns or an inability to work in such routines. Attendance in our schools is thus a key concern now
- Significant delays in vocabulary development

- Greater levels of frustration shown when pupils are exposed to new concepts and challenge (particularly evident in Y1/2 and Y7)
- Particular, and heightened, problems for children with Special Educational Needs – see attached appendix slide show with greater detail
- Concerns for children who attend our Virtual School.
- A spike in permanent exclusions and suspensions (short term) because of the sharpened behavioural concerns being seen. See the appendix slide show for greater detail
- Concerns emerging about capacity to support the most extreme behavioural support needs – we only have one specialist school which serves this cohort although many of our schools have tailored support in place already.

The following is a summary of a case study from our single Social, Emotional and Behavioural Special School (Brookfield). With apologies for the length this case study, it comes from our one provider which works with some of our most vulnerable pupils and offers places to primary and secondary age pupils.)

*This school serves some of the most vulnerable pupils and has both primary and secondary age pupils. It was the response received from the Headteacher illustrates the nature of the challenge. It is a long story shared by a dedicated Headteacher and is offered as an illustration – with apologies for the length.*

*In September 2019, we had around 70 pupils on roll; this now stands at 99. Placements have often been emergency placements due to children moving into the area, children's placements breaking down at mainstream schools or children in the care of the Local Authority.*

*The second element to this is the complexity of need. We are having referrals from children as young as 5 where placements are breaking or have broken down even in Reception and Year 1. All our children are referred from other schools, sometimes we are their third or fourth school, so their experiences are generally negative and often our children talk about feeling rejected, different, and the odd one out.*

*A child came to us in lockdown at Year 1 on intervention but full time as their mainstream school could not place them. They were working 2:1 outside the classroom and was unable to hold a pencil, access phonics or even sit at a table. Their needs illustrate the complexity of our younger population: often they have quite significant learning needs, not because of organics learning difficulties but because of poor attendance and Child Protection issues. Some cases have seen or experienced domestic violence, a family breakdown, parental substance misuse or parents showing some level of mild learning need.*

*Often, we spend as much time working with families as we do with the children, and now we can, we are holding open mornings and stay and play events to help parents and children bond. This is a sad fact that we see – so many of our parents/ carers are*

*so shocked when we tell them about the positives or show them work because their experiences of school are overwhelming negative.*

*We are seeing increasing numbers in Primary in general, again they are presenting as ever more complex. Most of our population have multiples ACEs (Adverse Childhood Events), the impact of which are only just being understood by professionals. These affect a child's ability to process information, to socialize and to respond to emotional stimulus. Allied to this, many of our children have witnessed or suffered domestic abuse, a rising proportion have suffered neglect. A sad fact of COVID and the current times is the increase in child and family poverty which has a massive impact. In some cases parents are at work and neglect the child but often we have seen a rise in substance misuse and therefore parents being unable to provide emotional warmth or basic care. Sometimes parents are second or third generation who have been diagnosed as having social, emotional and mental health needs. That I know of, at least a third of parents/ carers have mental health and/ or physical health needs which impacts on their ability to parent.*

*Rural poverty means that parents/ carers are isolated (many can't drive or don't have access to transport) which again is so crucial on childhood development.*

*Unfortunately, the spike in knife crime, with children as young as 10 recording serious assaults and sharing on social media, has had a huge impact on some of our pupils. Vaping has also been brought into school.*

*Lastly, we are seeing some of our secondary age children who came to us in Primary and then were successfully moved into mainstream schools, returning to us or schools requesting placement. It is difficult to say whether this is due to more complex needs and/ or COVID as many of these children have only known secondary schools throughout lockdown where often they were in bubbles or at home. My opinion is that with a return to something like normality in this current academic year, these children who have never experienced the demands of mainstream secondary are finding this too much of a challenge and are (often requesting) to come to us. Secondary schools are asking us for outreach/ behaviour support and short term placements or are seeking EHCPs and permanent placements as they are finding their needs too challenging for mainstream schooling.*

*Unfortunately, what we do find is that the older children who have returned to mainstream for some time, can back to us after being highly successful first time, as more complex and often damaged young people. They have experienced bullying, or fallen behind further academically, often with very low attendance, or with more challenging physical behaviour than they left with.*

*In essence, COVID has simply exacerbated trends; children who were just about coping are now not because of lockdowns, poverty, parental mental health/ domestic violence and abuse, reduction in access to service (or huge waiting times for CAMHS etc.) coupled with a huge increase in need - since 2014 the number of EHCPs in Herefordshire has doubled and many of these are autism and SEMH. It is a perfect*



*storm really, and that is alongside national trends around grooming, social media and the influence of the internet, widespread 'doom' media.*

Again, cross Directorate initiatives are already in place and the following is a summary list to illustrate the scale of the response:

- PSHE Association membership, free for schools again for 2022/23, providing access to curricular materials and resources to support mental health across all key stages.
- The Public Health Nursing Service (school nursing) provides access to advice, support and signposting to children & young people, face-face or via text messaging and are available as a resource for primary and secondary schools and parents. Key aspects of their work include supporting resilience and wellbeing; improving health behaviours and reducing risk taking; supporting healthy lifestyles; supporting vulnerable young people and those with additional health and wellbeing needs; promoting self-care and improving health literacy. Emotional wellbeing issues account for most interactions between school nurses and young people.
- An independent Quality of Life Survey 2021 covering mental health and emotional wellbeing, was completed by 4,680 pupils from across 25 primary schools, 10 secondary schools, 2 FE settings and one special school in Herefordshire. The survey was a joint initiative between public health, children & families directorate, and the intelligence team – the key findings will be presented in the public health overview section.
- Mental health and wellbeing of children & young people continues to be a priority focus for the Safeguarding Partnership and the Community Safety Partnership through the Domestic Abuse Local Partnership Board.
- The links between mental wellbeing and physical activity have been promoted through work in schools by Stride Active, who work with schools to use physical activity as a means of promoting positive learning behaviours, building emotional resilience whilst achieving 60 active minutes
- KOOTH developments, the work of the CLD Trust and the WEST programme will be presented separately as initiatives funded through the CCG.
- HealthWatch has established a schools' forum with a focus on mental health.
- Promoting positive mental health and emotional wellbeing is reflected in all public health commissioned services.

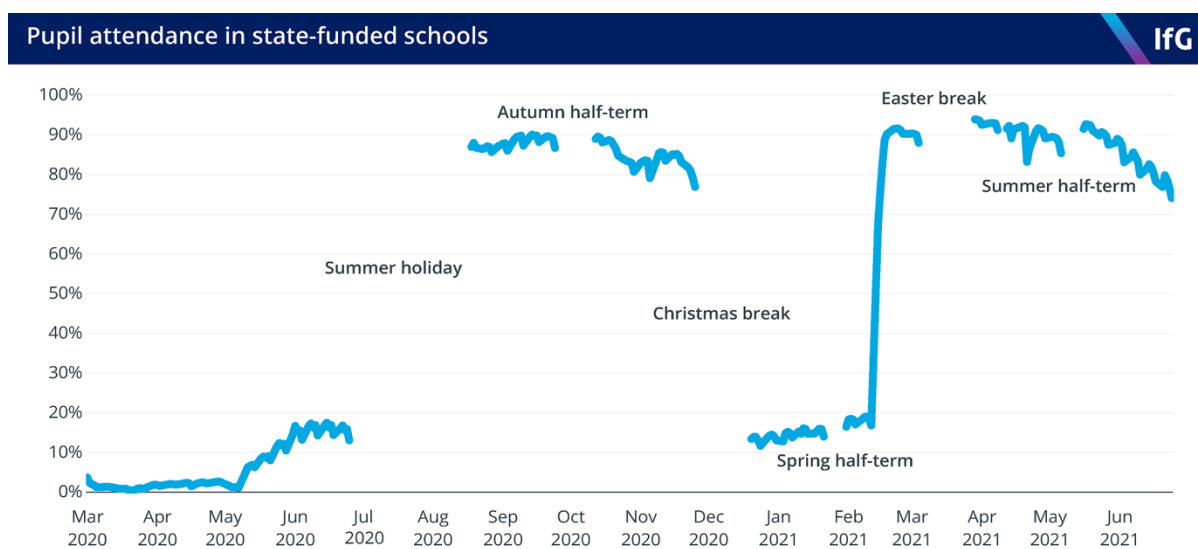
## **7. Post 16 implications and observations**

The observations in students post 16 mimic those in primary and secondary settings and include in short:

- Higher levels of anxiety – especially in relation to their prospects.
- Concerns over maturity levels with students struggling in social situations and with relationships
- Gaps in English and mathematics for learners even though they have GCSE qualifications

## 8. Attendance rates locally 2020-22, suspension rates and permanent exclusion rates 2021

The impact of this increase in mental health and well being is filtering through into attendance concerns and exclusions (either temporary – suspensions or permanent). Regular attendance at a school or setting is critical to all pupils' mental well-being – hence this featuring as a separate section in this report. It also dovetails with expected national priorities for improving attendance and re-engagement. Herefordshire has consistently outperformed the national and regional rates for attendance and for (almost) the entirety of the pandemic our attendance rates were amongst the top 2 in the West Midlands. However, they were below those seen in more normal times. Our pattern matches the national ones illustrated in the chart below but attendance levels are typically around 93% in late 2021:



Source: Institute for Government analysis of Department for Education, Attendance in education and early years settings during the coronavirus (COVID-19) outbreak, Table 1B and Table 3.



The two charts below are included in the slide show for discussion at scrutiny and show our local rate for suspensions and permanent exclusions – this is mid-way through the pandemic – the latest data will be available for 2021-22 later in the academic year. They add detail to our concerns that children who have Education and Health Care plans (EHCP) have been significantly impacted by the pandemic. However, care needs to be taken with this data as our raw numbers are so low – for example we show as 139 (from 151) in ranking for national comparisons in exclusion rates for EHCP pupils but in fact this relates to two pupils in total.

## Suspensions by Local Authority

$$\text{Proportion of Group Suspended}^\dagger = \frac{\text{Number of Pupils Suspended at least once}}{\text{Pupils on Roll}} \times 100$$

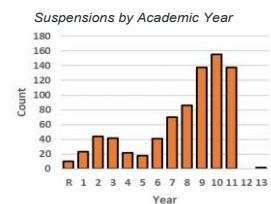
e.g. Nationally, 2.64% of boys were suspended (at least once)

	Proportion of Group Suspended							
	All	Girls	Boys	No FSM	FSM	No SEN	SEN Support	EHCP
National	1.87	1.06	2.64	1.39	4.17	1.31	4.89	5.37
West Midlands	1.93	1.06	2.76	1.47	3.71	1.38	4.76	5.17
Herefordshire	1.91	0.96	2.80	1.57	4.51	1.21	4.38	8.86

Local Authority Rank: 91 62 103 110 95 71 53 147

Suspension rates are more trustworthy than exclusions rates given the higher numbers:

- Suspension rates for **All**, **boys**, **no FSM** and **FSM** exceed the National average but are within a 'normal' range
- Suspension rates for **EHCP** significantly exceed National levels
- Herefordshire **EHCP** suspension rates are ranked amongst the worst in England (147/151)
- The majority of suspensions are for pupils in **KS4**



† 'Proportion of Group Suspended' a.k.a. 'One Plus Suspension Rate'

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## Permanent Exclusions by Local Authority

$$\text{Exclusion RATE} = \frac{\text{Number of Exclusions}}{\text{Pupils on Roll}} \times 1,000$$

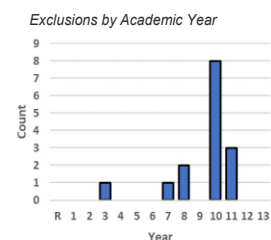
e.g. Nationally, 2 in 1000 pupils with SEN Support were excluded

School	Permanent Exclusions								Permanent Exclusions RATE per 1,000 pupils							
	All	Girls	Boys	No FSM	FSM	No SEN	SEN Support	EHCP	All	Girls	Boys	No FSM	FSM	No SEN	SEN Support	EHCP
National	5,053	1,182	3,871	2,704	2,348	2,771	2,006	276	0.6	0.3	0.9	0.4	1.6	0.4	2.0	1.0
West Midlands	767	176	591	376	391	402	315	50	0.8	0.4	1.3	0.5	2.1	0.5	2.7	1.7
Herefordshire	15	0	15	11	4	5	8	2	0.6	0.0	1.2	0.5	1.5	0.3	2.4	2.6

Local Authority Rank: 81 1 104 103 71 46 94 139

\*\* Given the low number of exclusions, this should be interpreted carefully \*\*

- 15 permanent exclusions were reported across all Herefordshire settings
- All exclusions were boys
- 14 were in Secondary Schools (11 in KS4)
- Most Herefordshire characteristic rankings are within 'normal' ranges
- Two exclusions for pupils with EHC Plans which gives one of the poorest exclusion rates in England (139<sup>th</sup>/151)



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However, a recent national survey shows the scale of the challenge facing authorities in knowing which children are missing education and what they are then doing. This

includes some of our most vulnerable. It has been produced by the National Children's Commissioner, Dame Rachel de Souza. Herefordshire contributed to the survey.

<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2022/03/cco-where-are-englands-children-interim-findings-march-2022.pdf>

As part of a national response, DfE is asking all Local Authorities to use 'Attendance Officers' to gather such data locally and redesign their role to target pupils who are most vulnerable and reintegrate them to education. We currently do not have such officers and one recommendation is that we seek to appoint two. These posts would over time become self-funding as schools would 'buy back' their services. An initial period of two years to respond to the national agenda is recommended. The chart above captures the early attendance patterns – Herefordshire mirrors the pattern but slightly outperforms the national data.

We did not see the same spike in moving to Elective Home Education (EHE) that was seen in other Local Authority areas – but we did see an increase. There are national moves to monitor this, and we have seen evidence of some pupils enjoying NOT attending schools and engaging well on line – and as a consequence some EHE pupils returned to schools as the pandemic impact receded. We will produce a report showing the exact figures in due course (the half term from January to late February 2022 was too disrupted for COVID related reasons to make reliable conclusions hard to find) – attendance (or a reluctance to attend) is an issue that was of some concern in Herefordshire prior to the pandemic (we had high authorised absence rates) - but initial data both locally and nationally suggests that since the pandemic this has become a bigger issue. One consequence of this has been some of these pupils moving into EHE: In 2020-21 56 children who became EHE cited Covid as the reason for this. It must be noted that some of these children have now returned to school. but we have around more such pupils within Herefordshire. This cohort may mask some anxiety in returning to school.

## **9. What can we do to help? Some of this is already in place.**

- a. The council note the level of impact of the pandemic on the mental health of all ages of pupils resulting from the pandemic.
- b. Each school to be encouraged to appoint a mental health champion – the title of these posts will vary from school to school – and we provide appropriate training and support for these posts.
- c. The Children's Directorate consider appointing two dedicated attendance officers to better track children missing school and **also** to support a return to mainstream schooling. These posts currently exist in some Local Authorities but not in Herefordshire. The posts would also work closely with the Elective Home Education Officer (which we do still have).
- d. Look to support the development of Brookfield School – via an expansion of the places available and / or some outreach work in other schools.

- e. Consider some funding to be allocated to play therapists and additional speech and language specialists for young children.
- f. We review the impact of the pandemic annually, including the outcomes of any intervention. It would be helpful to return to these projects in a year's time to assess the impact on outcomes.
- g. Local providers have reviewed, restructured and increased the resourcing of their pastoral support services and commissioned [Togetherall](#) an online mental health and emotional wellbeing support platform free access 24/7 for students.

## 10. Community impact

The potential community impact is likely to be seen in future years as the evidence suggests greater levels of disengagement from mainstream education with the known risk factors associated with that.

The findings from our surveys will help with the early identification of emerging trends and help to facilitate our response as the post pandemic impact emerges more clearly.

## Resource implications

- 11. Promoting a mental health champion in all schools – much of this cost will be to provide training and support for such a group – on line and conference with associated material. This cost is expected to be partly borne by the schools themselves via a cost reclaim.
- 12. The costs of two attendance officers is expected to be (including on costs of 28%) of around £100k annually. Please be aware that there is no funding allocated within the Directorate for this and none scheduled.

Revenue or Capital cost of project (indicate R or C)	2020/21	2021/22	2022/23	Future Years	Total
	£000	£000	£000	£000	£000
TOTAL			100,000		

## 13. Legal implications

The functions of the Children and Young People Scrutiny committee are set out in paragraph 3.4.5 of the constitution. The functions of the committee includes; statutory education scrutiny powers; and statutory health scrutiny powers including the review and scrutiny of any matter relating to the planning provision and operation of health services for children and young

people, including transitional health care services, affecting the area and to make reports and recommendations on these matters.

#### **14. Risk management**

This report is not seeking a decision and thus has no specific risk implications. However, we believe that the failure to respond to the findings will pose a significant future risk to the future of the mental health and well-being of our children and young people.

#### **15. Consultees**

This report uses some of the findings from the 2021 Quality of Life survey which gathered evidence of nearly 5000 children and young people

It also draws on the case study material submitted by 15 schools and settings. It is not yet a systematic survey of all schools and settings.

#### **16. Appendices**

See associated links below

Attachments and References

1. IfG - link to the 'schools performance tracker' -  
<https://www.instituteforgovernment.org.uk/publication/performance-tracker-2021/schools>
2. National Children's Commissioner, Dame Rachel de Souza' national survey. Herefordshire contributed to the survey.
3. <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2022/03/cco-where-are-englands-children-interim-findings-march-2022.pdf>
4. DFE survey for young children  
<https://www.gov.uk/government/publications/education-recovery-in-early-years-providers-autumn-2021/education-recovery-in-early-years-providers-autumn>
5. Ofsted report  
[Education recovery in further education and skills providers: autumn 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/education-recovery-in-further-education-and-skills-providers-autumn-2021/education-recovery-in-further-education-and-skills-providers-autumn-2021)
6. Government guidance  
[Promoting and supporting mental health and wellbeing in schools and colleges - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/promoting-and-supporting-mental-health-and-wellbeing-in-schools-and-colleges/promoting-and-supporting-mental-health-and-wellbeing-in-schools-and-colleges)