

Children’s Services Healthy Growth Guideline - Birth to School Leaving Age

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If developed in partnership with another agency, ratification details of the relevant agency	
Policy in-line with national guidelines:	The guideline should be read in conjunction with: Infant Feeding Guidelines for Health Professionals NICE Guidance Healthy Child Programme

Signed on behalf of the Trust:
Aidan Thomas, Chief Executive

Elizabeth House, Fulbourn Hospital, Fulbourn, Cambs, CB21 5EF Phone: 01223 726789

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1.0 Introduction

- 1.1 This guideline is designed to ensure that all children who are not growing satisfactorily are identified and referred to appropriate agencies in a timely way. Growth outside healthy parameters may be an indicator for general ill health, chronic disease, specific growth problems, neglect or obesity.
- 1.2 Children will have their weight and height (or length if < 2years old) measured where there are health problems, or where there are professional concerns or parental concerns about the child's growth. Infants may also have their head circumference measured.
- 1.3 Currently children are also measured as part of the National Child Measurement Programme (NCMP) in Reception and Year 6 in Primary School.

2.0 Purpose and scope of this guideline

- 2.1 The guideline gives clear guidance concerning when and how children should be measured, as well as giving clear guidance on when children should be referred to a Paediatrician and or Paediatric Dietician and or Weight Management Programme. The guideline is underpinned by National guidelines
- The National Child Measurement Programme
 - The Healthy Child Programme
- The aim of the guideline is to ensure that all Community Paediatric staff and GP's use consistent methods for the assessment of children and refer in a timely and appropriate way.

3.0 Duties and responsibilities

- 3.1 The welfare of children is paramount. Where a professional has a safeguarding concern, please follow the Trust Safeguarding Policy.

The guideline should be disseminated to all GP's and should be accessible to all CPFT staff having direct contact with children. All staff will be directed to access this guideline via the CPFT website and/or shared drives.

- 3.2 All new staff will be orientated to the guideline as soon as their employment begins.

4. Measuring Equipment

Length	Measure mat
Height	Leicester Height Measure or approved alternative
Weight	Weighing scales approved by European Union Directive Standards (Class III Scales) calibrated in line with D.O.H. recommendations

- 6 – 8 weeks with Head Circ. and length* where there are concerns
- 3 and 4 months (by attending clinic)
- 1 Year with Length* where there are concerns

*Length is not routinely measured but will be recorded where there are concerns about health or growth.

- 6.2 Additional opportunities are available at child health clinics. Staff will give parents information about times and venues of all local child health clinics.
- 6.3 For a complete assessment if there are any concerns and if a referral is considered a weight **and** length should always be measured. For children under 1 year of age a head circumference should also be measured.
- 6.4 Where there is professional and/or parental concern an appropriate review period should be set to further record growth measurements. Review should be ongoing until such time that there is no longer a concern or until criteria for referral is met

7. **Before making a referral**

The following should be considered and assessed:

- feeding and dietary history
- general health looking for any underlying medical conditions
- family history looking at health concerns
- family history looking at weight and height of parents and siblings
- family history for dietary / eating patterns

Standardized referral form (appendix 1) to be used and where possible this should be the electronic referral form on S1

8. **Guidelines on Referral to Hospital Paediatrician**

8.1 Neonates 0 – 1 month

When maternity support workers weigh babies on day 5

- a weight loss of 10% - refer directly back to maternity unit

When babies are weighed between 10 – 14 days of age

- Weight loss of 10% - full feeding and clinical assessment and re-weigh at 1 week
- Weight loss of >12.5% - refer to Paediatrics for urgent assessment
- Weight loss of 15% - urgent immediate referral for admission to hospital

8.2 Infants 1 month – 2 years

If weight has fallen down 2 centile spaces refer for medical opinion (GP)

If weight has fallen down 3 centile spaces refer to Hospital Paediatrician as a matter of urgency

8.3 Pre-school 2 – 4 years

All children whose **weight** is below the 0.4th centile and/or is falling away from the 2nd centile on 2 successive occasions at least 3 months apart.

Where **weight** has shown a downward trend through 2 centile spaces on 2 successive occasions at least 3 months apart.

Children whose weight is above 98th centile and **either** parent has Type II Diabetes, or there is a family history of metabolic syndrome.

8.4 Children whose **weight** is above the 98th centile and either parent has type II diabetes

8.5 All children whose **height** is well below the 0.4th centile Refer directly to Endocrine/ Growth clinic (Hospital Paediatrician's) (If they have already been investigated or are currently being followed up by a specialist –there is no need to re-refer but staff should ensure that any new or additional concerns are made known to the appropriate consultant).

8.6 Children with a falling **height** centile. Consider Height measurements over a retrospective period of at least one year. Frequency of measurements should be taken at discretion of staff, but every 6 months to yearly will usually be sufficient.

8.7 All children whose **height** is well outside the family pattern, or where parents are expressing concerns that need addressing. Refer directly to Endocrine/ Growth clinic (Hospital Paediatrician's)

8.8 All children whose growth rate is significantly **above** the normal (rare but important).

8.9 **Consider** referral to Hospital Paediatrician if child is above 98th **BMI** Centile, for assessment of co-morbidities.

These children can be referred directly to Endocrine/ Growth clinic. **Please note for Weight Assessment not Weight Management**

(Many families who attend clinic expect to be given advice and programmes for weight management which is outside the clinics remit).

9. **Guidelines on Direct Referral to Paediatric Dietetics**

The paediatric dietician will primarily see infants and children with feeding and eating problems from acute or community based services. The dietician will either suggest referral or make a referral on to the hospital paediatrician if appropriate.

Standardized referral form (appendix 2) to be used and where possible this should be the electronic referral form on S1

9.1 Infants 0 – 2 years

Where weight has increased by 2 to 3 centiles

9.2 Pre-school children aged 2 – 4 years

Where **weight** has shown a downward trend through 2 centiles and history suggests poor diet

Where **weight** has shown an upwards trend through 2 centiles, but BMI is not above the 98th BMI centile

Children whose BMI centile is between 91st & 98th centiles and the trend is perpetuated or increasing.

The SCHOOL AGED CHILD

10. National Child Measurement Programme (NCMP)

The NCMP is a well-established programme that will begin its sixth year in September 2010. Every maintained primary and middle school within the LEA boundary should be included. All children who are able to stand on weighing and height scales should be included unless their parents have declined, in writing, to the School Nursing Screening Team. Parents receive information, in writing, about the NCMP programme and how to opt out (Appendix 3)

School Nursing Screening team will measure child's height (child standing) and weight at aged 4-5 years (reception school entry)

School Nursing Screening team will measure child's height (child standing) and weight at aged 10-11 years (Year 6).

Measurement data is to be forwarded to the Child Health team who will enter the information onto System1, this information will then be extracted by ASP and uploaded into the parenting feedback tool. Parental feedback letters will then be generated (Appendix 4).

Additional Measurements and letters to parents

School Nursing Team measure height, weight, vision and hearing for children in Reception year with parental consent. BMI centile is also calculated by the School Nursing Screening team. The recordings are documented, a results sheet sent to parents (Appendix 5) and entered on clinical system within 5 working days by Child Health Admin team.

These results are used for clinical decision making and may result in a referral, or further monitoring (Appendix 6 and Appendix 7).

This same height and weight result is then used for the National Child Measurement Programme (as above).

Where a professional and/or parent or young person has concerns an appropriate review period should be set to further record growth measurements. Review should be ongoing until such time that there is no longer a concern or until criteria for referral is met

11 Guidelines on Referral to Hospital Paediatrician- see Appendix 2

11.1 School aged children 4- 16 years

All children whose **weight** is below the 0.4th centile and/or is falling away from the 2nd centile on 2 successive occasions at least 3 months apart.

Where **weight** has shown a downward trend through 2 centile spaces on 2 successive occasions at least 3 months apart.

Children whose weight is above 98th centile and **either** parent has Type II Diabetes, or there is a family history of metabolic syndrome.

11.2 Children whose **weight** is above the 98th centile and either parent has type II diabetes

11.3 All children whose **height** is well below the 0.4th centile Refer directly to Endocrine/ Growth clinic (Hospital paediatricians) (unless they have been investigated or are currently being followed up by a specialist –there is no need to re-refer but staff should ensure that any new or additional concerns are made known to the appropriate consultant).

11.4 Children with a falling **height** centile. Consider Height measurements over a retrospective period of at least one year. Frequency of measurements should be taken at discretion of staff, but every 6 months to yearly will usually be sufficient.

11.5 All children whose **height** is well outside the family pattern, or where parents are expressing concerns that need addressing. Refer directly to Endocrine/ Growth clinic (Hospital Paediatricians)

11.6 All children whose growth rate is significantly **above** the normal (rare but important).

11.7 **Consider** referral to Hospital Paediatrician if child is above 98th **BMI** Centile for assessment of co-morbidities.

These children can be referred directly to Endocrine/ Growth clinic. **Please note for Weight Assessment not Weight Management**

Many families who attend clinic expect to be given advice and programmes for weight management which is outside the clinics remit.

Children whose BMI is above the 98th centile are referred to their local 'Lets get Healthy' weight management programme.

12. Guidelines on Direct Referral to Paediatric Dietetics – see Appendix 3

The paediatric dietician will primarily see infants and children with feeding and eating problems from acute or community based services. The dietician will either suggest referral or make a referral on to the hospital paediatrician if appropriate.

School aged children 4 – 16 years

Where **weight** has shown a downward trend through 2 centiles and history suggests poor diet

Where **weight** has shown an upwards trend through 2 centiles, but BMI is not above the 98th BMI centile

Children whose BMI centile is between 91st & 98th centiles and the trend is perpetuated or increasing.

Appendix 1 – Standardised Referral Forms

Peterborough Children's Services
Winchester Place
80 Thorpe Road
Peterborough PE3 6AP

Direct Line: 01733 777937
Fax: 01733 777938

Date:

CHILD GROWTH REFERRAL FORM

Referrer:

Date	Name	Title

Referral to:

Consultant Paediatrician Peterborough City Hospital Edith Cavell Campus Bretton Gate PE3 9GZ Tel No: 01733 678000
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Child Referred

Name:

DOB:

Address:

School or Nursery:

Reason for referral – brief summary

--

Dates and measurements

Date:
Signed

0-19 Universal Childrens Services

If you require this information in another format such as braille, large print or another language, please let us know

CPFT automatically share information with all services within the organisation and other external health services providing care for you. If you have any concerns, please speak to your health professional.

Cambridgeshire Community Services

NHS Trust

Paediatric Referral Form to Nutrition & Dietetics		
Patients Details. Please also attach any relevant, recent clinical correspondence.		
Surname:	Title:	Gender:
Forename:	NHS No:	DOB:
Next of kin/Guardian:	Surname & relationship:	
Address:		
Postcode:		
Preferred Language:	Home Tel:	Consent to SMS reminders
Is an Interpreter required?	Mob Tel:	
Reason for Referral:		
Date of Referral:	Weight (kg):	Centile:
Location:	Height / Length (cm):	Centile:
	BMI (kg/m ²):	Centile:
Diagnosis/Reason for referral:		
Any other diagnosis:		
Medications:		
Weight change history: (Birth weight, centile tracking)		
Feeding history:		
Further Information: other health professionals or social services involvement, etc.		
GP Details:		
Named GP:	GP Practice Name / Address:	
GP Telephone:	Postcode	
Referral Details:		
Referred by:	Professional Group:	
Address:	Tel:	
Copy sent to GP?	Fax:	
Please send referral form to: (telephone referrals not accepted)		
Post:	Children's Dietetics Services Block 13 Ida Darwin Fulbourn Cambridge CB21 5EE	Email: CCS-TR.paediatric-dietitians@nhs.net Tel: 01223 884187

Appendix 3
NCMP information letter –parents (Reception)



Please reply to:
School Nursing Service
Screening Team
Swan House
Gloucester Centre
Morpeth Close
Peterborough
PE2 7JU
01733 74 68 22

Cpm-tr.peterboroughschoolnurses@nhs.net

Children in Reception Year are screened for Height and Weight, Vision and Hearing

The NHS needs to have a good understanding of how children are growing across the country, so that the best possible health services can be provided for them. As a result, a National Child Measurement Programme (NCMP) has been set up to weigh and measure children in England in Reception Year.

Your child's class will take part in this year's measurement programme. The measurement will be supervised by trained healthcare staff from your local School Nursing Team. The measurements will be completed in a private area away from other pupils. Children will be asked to remove their shoes and weighed in normal indoor clothing.

Routine data, such as your child's sex, postcode, ethnicity, and date of birth will also be collected to help the NHS plan services for families.

Following the measurement session we will send home a results letter and you will then be sent a in the post from the Change4life/National Child Measurement Programme advising you about the height and weight of your child and a link to calculate the BMI. We shall be passing on details of all children whose BMI falls above the 98th Centile to our colleagues in Public Health at the Peterborough City Council who will contact you to offer the "More Life Programme", and information about this is enclosed. You are welcome to phone your School Nurse to discuss the result if you have any concerns or would like any advice.

Additionally we would also like to offer your child a vision and hearing check. If you would like your child measured for the NCMP programme, and a vision and hearing check, please complete the questionnaire overleaf, sign the consent and return to the school in the envelope provided. If you would like any advice or support with your child's health please return the form to us and highlight that you would like us to contact you.

If we do not receive a completed Questionnaire, we will still see your child to measure their height and weight, unless a refusal letter has been received. We shall not assess your child's vision and hearing.

Yours sincerely

A handwritten signature in black ink, appearing to read 'J. Hodkin', is written over a light grey circular stamp.

TEAM MANAGER
School Nursing

Appendix 3
NCMP information letter parents –year 6



Please reply to:
School Nursing Service
Screening Team
Swan House
Gloucester Centre
Morpeth Close
Peterborough
PE2 7JU
01733 74 68 22

Cpm-tr.peterboroughschoolnurses@nhs.net

Children in Year 6 are screened for Height and Weight.

The NHS needs to have a good understanding of how children are growing across the country, so that the best possible health services can be provided for them. As a result, a National Child Measurement Programme (NCMP) has been set up to weigh and measure children in England in Year 6.

Your child's class will take part in this year's measurement programme. The measurement will be supervised by trained healthcare staff from your local School Nursing Team. The measurements will be completed in a private area away from other pupils. Children will be asked to remove their shoes and weighed in normal indoor clothing.

Following the measurement session you will then be sent a letter in the post from the Change4life/National Child Measurement Programme advising you about the height and weight of your child and a link to calculate the BMI. This data will be kept securely on our database and also be shared with the NCMP service and used to predict trends in child health nationally. You are welcome to phone your School Nurse to discuss the result if you have any concerns or would like any advice.

We will see your child to measure their height and weight, unless a refusal letter has been received. If you do not wish your child to take part in this screening, please write to the above address, giving your child's name, address, date of birth and school.

Yours sincerely

A handwritten signature in black ink, appearing to read 'A Godfrey', is written over a light grey circular stamp.

A Godfrey
TEAM MANAGER
School Nursing

Appendix 4 Generic NCMP results letter

PRIVATE and CONFIDENTIAL

Parent / Carer of «FirstName» «LastName»
«Address1»
«Address2»
«Address3»
«Postcode»

Please reply to:
Amanda Godfrey
Team Manager
Swan House
Gloucester Centre
PETERBOROUGH
PE2 7JU
Tel: 01733-466614

Date as postmarked

Dear Parent / Carer of «FirstName» «LastName», NHS number: «NHSNumber»

We recently measured your child's height and weight at school as part of the National Child Measurement Programme. A letter about this was sent to you before the measurements were taken. Your child's results are shown below.

Your child's results are:

Date of Measurement	Date of Birth	Height (cms)	Weight (kgs)
«DateOfMeasurement»	«DateOfBirth»	«Height»	«Weight»

Most children should fall in the healthy weight range, with fewer than one in ten in the overweight or very overweight range. Research shows that children who are overweight or very overweight have a higher risk of ill health during childhood and in later life.

If you would like an indication of where your child falls, you can compare your child's height and weight by accessing the website at: www.nhs.uk/tools/pages/healthyweightcalculator.aspx

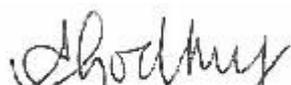
Some medical conditions or treatment that your child is receiving may mean that BMI centile is not the best way to measure your child. Your GP or other health professional caring for your child will be able to discuss this with you.

Some parents find it helpful to re-check their child's BMI after a few months, to see if they have moved into the healthy range as they grow.

Small lifestyle changes started now can help your child to grow healthily. Many parents have found the tips at www.nhs.uk/change4life useful in helping them make changes to help their child grow healthily. If you would like more advice about your child's eating or activity, visit www.nhs.uk/change4life, or phone Morelife 0800 376 5655.

If you are unable to access the website the School Nurses will be happy to answer any questions you may have regarding your child and will be able to offer support if needed.

Yours sincerely



Amanda Godfrey
School Nurse Team Manager

What is Body-Mass Index (BMI) centile?

BMI centile is a good way of finding out whether a child is a healthy weight and is used by health care professionals.

By comparing your child's weight with their height, age and sex, we can tell whether they're growing as expected. This is something you may have done when your child was a baby, using the growth charts in the Personal Child Health Record.

Once your child's BMI centile has been calculated, they will be in one of four categories:

	BMI centile range
Underweight	Below 2 nd BMI centile
Healthy Weight	Between 2 nd and 90 th BMI centile
Overweight	Between 91 st up to 97 th BMI centile
Very Overweight (doctors call this clinically obese)	At or above 98 th BMI centile

If your child is in the:

- **Underweight range**

Many underweight children are perfectly healthy, but sometimes it can mean they have a known health problem.

- **Healthy range**

Children of a healthy weight are more likely to grow into healthy adults. To keep growing healthily, it is important that your child eats well and is active.

- **Overweight range**

It can sometimes be difficult to tell if your child is overweight as they may look similar to other children of their age. Research shows that if your child is overweight now they are more likely to grow up to be overweight as an adult which can lead to some health problems.

If you are concerned about the result and would like further information and to find out about local activities, please phone Morelife on 0800 376 5655.

- **Very overweight range**

Children who are very overweight are more likely to have health problems at a young age and their confidence can be affected. Research shows that if your child is overweight now they are more likely to grow up to be overweight as an adult which can lead to some health problems.

If you are concerned about the result and would like further information and to find about local activities contact Morelife on 0800 376 5655.

Appendix 5 Parental screening results letter

Cambridgeshire and Peterborough **NHS**
NHS Foundation Trust

Understanding children, young people and families
Peterborough Integrated Child Health Services
Winchester Place
80 Thorpe Road
Peterborough PE3 6AP

To the Parent/Carer of:

Full Patient Name
Address

Direct Line: 01733 777937
Fax: 01733 777938

GP: Registered GP CHS
School: School Name

DOB: Date of Birth

The results of your child's recent checks are as follows:

1. VISION Satisfactory, but please note an annual sight test is recommended for all children. We recommend that you take your child to see an optician within the next month for a more thorough assessment. We are referring your child to the orthoptist, please await an appointment.

2. HEIGHT cms **WEIGHT**kgms

Satisfactory
Will be rechecked in 6 months / 1 year
We are referring your child to Morellife
Your School Nurse will be in contact

You will receive information from NCMP regarding your child's growth

3. HEARING Satisfactory
Re-check in 4 -6 weeks in school, you do not need to do anything.
We are referring your child to audiology, please await an appointment.

Note to Parent:

.....

Signature: **Designation:**

CPFT automatically share information with all services within the organisation and other external health services providing care for you. If you have any concerns, please speak to your health professional.

Appendix 6 - Guidance for Referral of Eating Disorders or Suspected Eating Disorders to the CAMH Team - Peterborough

Identification of Eating Disorders in Primary Care and Non- Mental Health Settings.

“When considering anorexia nervosa, note that **low BMI alone is not a reliable indicator of an eating disorder**. Attention should be paid to overall clinical assessment including rate of weight loss, growth rate, objective physical signs and appropriate laboratory tests”. **(Nice CG9 2004)**

Target groups for screening include:

“Young women with low BMI compared with age norms
 Women with menstrual disturbance or amenorrhoea
 Young people with type 1 diabetes with GI problems, signs of starvation
 People reporting repeated vomiting
 Children with poor growth
 People consulting with weight concerns who are not overweight”
(Nice CG9 2004)

Entry Criteria for CAMH – Peterborough Team

1. Age	Up to 17 th Birthday
2. Weight	Concern about low weight or rapid weight loss in limited period of time Gradual downward weight trend resulting in low BMI compared with age norms Ongoing difficulty with food Weight not responding to treatment in primary care
3. Physical health	Where there are concerns about physical health, referral should be made for medical stabilization before referral to the CAMHS team. See details below.
4. Psychological distress	Major concerns re mood Self harming Overwhelming anorexic psychopathology

Who should refer?

The CAMHS team will accept referrals from anyone but it would be very helpful to refer via the **General Practitioner** who can undertake physical and medical risk assessment and investigate other possible diagnosis.

What information do we require?

Physical Assessment

Height, weight and BMI
 BMI centile for age – if available
 Pulse and blood pressure recorded in lying and standing position
 Sit up and Squat Test – confirmation that the patient can do this.

Laboratory Investigations

1. Full blood count, ESR, U&E, Creatinine, LFT, Random blood glucose, urinalysis
2. ECG. This should be considered in all cases and is essential if symptoms/signs of cardiac compromise, bradycardia, electrolyte abnormality or BMI less than 15 Kg/M2.
3. Calcium, Magnesium, Phosphate, Serum Proteins, Creatine Kinase (CK or CPK)

The following tests may be needed in the differential diagnosis of amenorrhoea and weight loss.

4. Thyroid function test, Follicle stimulating hormone, Luteinising Hormone, prolactin, Chest X-ray.

Further Referral Information

Referrers may wish to contact a member of the CAMH team for further information before making a referral.

Contact Number 01733 776130

General information about Eating disorders

Website: www.b-eat.co.uk

Contact T: 0300123 3355

Youth Helpline 0845 634 7654

Young persons email FYP@b-eat.co.uk

WEIGHT GUIDELINE

Any queries please refer to Named School Nurse

BMI <0.4 th centile	BMI 0.4 th -9 th centile	BMI 9-91 st centile	BMI >91 st centile	BMI >98 th centile	BMI >99.6 th centile
Task SN to contact parents & make referral to Dr Puthi if required	Recall in 12 months	No further action	Recall in 6 months	Recall in 6 months Task Child Health to refer to More Life	Recall in 6 months Task Child Health to refer to More Life
No further action	Increased or parallel centiles. No further action		Decreased or parallel centiles. No further action	Decreased or parallel centiles. No further action	Task SN to contact parents & make referral to Dr Puthi if required.
	Centiles decreased.		Centiles increased	Centiles increased	No further action
	Task SN to contact parents & make referral to Dr Puthi if required		Task Child Health to refer to More Life	Task SN to contact parents & make referral to Dr Puthi if required	
	No further action		No further action	No further action	