

Health and Education

Working Together for all Children

The Role of the School Health Nurse

Summary

Historically, the school nursing service has been perceived as one which offers advice to school age children on first aid, personal hygiene and general health. There has been an emphasis on routine surveillance and screening. The effectiveness of much of this activity has not been proven.

Until now, the way in which the school nursing service has been organised has not always supported practitioners to work flexibly to tackle local health and education priorities, or to work in teams to tackle the causes of ill health and poor school achievement.

With the development of –

- Health Improvement Programmes (HimPs)
- National Service Framework (NSF)
- Primary Care Trust (PCTs)
- Social Inclusion Agenda

and new models of service delivery, such as –

- National Healthy Schools Standard (NHSS)
- Connexions
- Youth Offending Team (YOTs)

School nurses will have opportunities to focus on the most important issues affecting children and young people's health. They will be able to work with population groups having the greatest needs. It is recognised that there has been a shift in the health needs of young people from mainly physical problems to emotional/behavioural issues

A child-centred public health approach will enable school nurses to reclaim their public health roots whilst providing a framework to maximise the impact of their child based work.

Core tasks for school nurses have been identified together with the professional competencies required to fulfil those tasks.

Introduction

The role of the school health nurse has changed and will continue to do so. Plans for change should be agreed between the school health nurses and the users of services, parents, schools, primary care colleagues, public health specialists, partners in the local authority and the voluntary sector. The Department of Health has issued the "School Nurse Practice Development Resource Pack" to offer a framework for practice and guidance for practitioners and managers.

To quote from the 2nd chapter of the resource pack, "Why is Change Needed"?, - "there are pressing health challenges facing children and young people in this country. Unacceptable inequalities in health persist, poor educational achievement compounds poverty by reducing young people's future life chances. Education and health go hand in hand both impacting on children's current and future well being.

Too many young people live with bullying, harmful relationships and become parents at a young age. Smoking, alcohol and drug misuse are a feature of many young people's lives and children today are eating less fruit and vegetables and taking less exercise. Accidents continue to be a leading cause of death and injury to people, particularly for boys.

These issues have to be tackled. The *NHS Plan* (DoH, 2000) has set out a blueprint for action, emphasising the need to strengthen the role of the NHS in health improvement and prevention and to develop services that are accessible, convenient and delivered to a consistently high standard.

As key public health and primary care practitioners, school nurses have an important part to play in achieving these goals. The significance of their contribution was underlined in *Saving Lives: Our Healthier Nation* (DoH, 1999) and *Making a Difference* (DoH 1999) which set out a child centred public health role for school nurses, working with individual children, young people and families, schools and communities to improve health and tackle inequality. In addition, the *National Healthy School Standard* (DoH, DfEE 1999) recognises the valuable contribution of school nursing to raising education standards".

A New Role for School Nurses

The question then arises as to how far this is a new role for school nurses. The resource pack goes on to state: "School nursing has always been based on public health principles with a strong preventive emphasis. But the way in which school nursing services have been organised has not always supported practitioners to work flexibly to tackle local health and education priorities, or to work in teams to tackle the cause of ill health and poor school achievement.

The development of Health Improvement Programmes (HimPs), National Service Frameworks (NSF), Primary Care Trusts and new models of service delivery such as National Healthy Schools Standard (NHSS), ConneXions and Youth Offending Teams (YOT) gives school nurses opportunities to focus on the most important issues affecting children and young people's health and to work with population groups in greatest need. A child centred public health approach enables school nurses to reclaim their public health roots, whilst providing a framework to maximise the impact of their child based work".

See **Appendix** for DoH recommendations on the role school health nurses.

Core Tasks of School Health Nurses

It may be helpful to identify core tasks which would be expected of school health nurses in any setting. These tasks include:

- A. **Supporting individual children and families.** At different times, children and families may have particular needs. They may require more support from the school health services, for example, a child with a chronic illness or special needs, a child who self harms or one who has behaviour problems. Not all care for children will need to be provided by the school nurse and other services may have to be identified where there are gaps that need addressing.
- B. **Community development including health promotion.** Community development work is an effective way of regenerating and empowering communities to influence local health policy and service development. Children and young people can be helped to access resources that promote health.
- C. **Immunisations.** Protecting the population against infectious diseases has always been a corner stone of the public health work of school nurses and the rest of the primary care team.
- D. **Surveillance and screening.** Children will have a screening examination at school entry. Thereafter, the development of a child centred public health role for school health nurses supports a more proactive approach to promoting child health and a reduced emphasis on surveillance. Creative ways of providing children and young people with access to the school nursing service will include drop in clinics and out of school activity sessions and parent support groups.
- E. **Child protection.** School nursing provides an accessible and non stigmatising service. With their knowledge of children and schools, and expertise in child health and development, school nurses may identify children in need of protection and work with vulnerable families. Practice should be in accordance with national and local guidelines.

School health nurse competencies

The Resource Pack identifies 9 competencies for the school nurse child centred public health role. No all of these competencies would be expected from any one nurse but they should be available from the local school health nurse team serving your academic council area. With the progressive blurring of the margins between health visiting, school health nursing, primary care practice and community nursing, some competencies may be held by nurses working in other disciplines. The identified competencies are as follows:

- 1) **Interagency working.** To be able to work collaboratively with other agencies to maximise their contribution to health improvements in the local community.
- 2) **Working with groups.** To be able to facilitate groups effectively in a variety of settings.
- 3) **Contributing to school programmes.** To be able to contribute to health and social learning programmes for young people.
- 4) **School health plans – needs assessment.** To be able to lead/co-ordinate and/or participate in school health plans, including the following elements:
 - Working with colleagues at school, the primary health care team, public health and the local community in identifying, collating and interpreting a wide range of local health information.
 - Critical analysis of qualitative and quantitative data to determine local school health needs
 - Priority setting within a multi-disciplinary forum, engaging young people, parents, teachers and the local community, demonstrating effective influencing/negotiation skills.
 - Developing a school health plan, agreed between local health and education agencies, based on findings from the school health needs assessment and the local Health Improvement Plan and Education Development Plan.
- 5) **Multi-disciplinary team working.** To be able to develop and work as a member of a multi-disciplinary team within which the skills and knowledge of each member are harnessed for maximum benefit in achieving health improvement for children and young people of school age.
- 6) **Addressing health inequalities.** To be able to identify health inequalities and to take action with others to promote equity.
- 7) **Health protection programmes.** To be able to initiate, co-ordinate and audit programmes for health promotion, including national child health screening and immunisation programmes and locally developed programmes.

- 8) Community involvement and participation.** To be able to increase the ability of young people, school staff and the local community to participate in action to protect and promote the health of school age children.
- 9) Parenting programmes.** To be able to initiate, co-ordinate and contribute to programmes of parent education, health advice and information targeting vulnerable families and priority health needs.

Health Priorities

Armed with these competencies, there are key areas that need to be addressed if the health of the school age population is to be improved significantly. The drive on health priorities is determined by Government and by locally agreed priorities as in the Health Improvement Plan. In the following areas, school health nurses may link with other organisations and professional groups in Health and Education, they may work at the level of the individual child, the school and the community. There will be partnership with young people:

- Accidents
- Alcohol and drugs
- Minority ethnic health needs
- Child and adolescent mental health
- Children and young people with disabilities or special needs
- Domestic violence
- Helping people to stop smoking
- Nutrition
- Promoting physical activity
- Sexual health
- Teenage pregnancy and teenage parent hood
- Supporting families and parenting

The Future

Effective partnership between Health and Education is vital to the successful implementation of the proposals outlined in the School Nurse Practice Development Resource Pack. School health nurses are anxious to hear the views of individual teachers and schools on the matters outlined in this letter. You can make your points known to your representative on your local Academic Council, it is planned for a member of the local Primary Care Trust to attend meetings of all the Academic Councils in the Devon Local Education Area over the next few weeks. Alternatively, you can respond on the “comments” sheet attached and pass this sheet to your school representative on the Academic Council.

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Consultant Community Paediatrician
Chair of the Well Child Subgroup of Children’s Steering Committee

Mrs Jill Rose
School Nurse Advisor

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Appendix

“Saving Lives: Our Healthier Nation”, para 11.19.

School nurses can provide advice and help in a areas such as personal relationship, managing stress and risk taking behaviours. They can complement primary care services by providing a safety-net for children, particularly the most disadvantaged, who may not have had a full child health service before starting school. Their role needs to be developed and supported to enable them to:

- Lead teams
- Assess the health needs of individuals and school communities and agree individual and school health plans
- Develop multi-disciplinary partnerships with teachers, general practitioners, health visitors and child and adolescent mental health professionals to deliver agreed health plans.

The school nursing team will provide a range of health improvement activities including:

- Immunisation and vaccination programmes
- Support and advice to teachers and other school staff on a range of child health issues
- Support to children with medical needs
- Support and counselling to promote positive mental health in young people
- Personal health and social education programmes and citizenship training
- Identification of social care needs, including the need for protection from abuse
- Providing advice on relationships and sex education by building on their clinical experience and pastoral role
- Aiding liaison between for example, schools, primary care groups, and special services in meeting the health and social care needs of children.
- Contribute to the identification of children’s special educational needs
- Working with parents and young people alongside health visitors to promote parenting

“Making a Difference” para 10.9

We expect school nurses to lead teams, including nurses and other community and education workers to:

- Assess the health needs of the children and school communities, agree individual and school health plans and deliver these through multi-disciplinary partnerships
- Play a key role in immunisation and vaccination programmes
- Contribute to personal health and social education and to citizenship training
- Work with parents to promote positive parenting
- Offer support and counselling, promoting positive mental health in young people

For a full discussion on the public health role of the School Health Nurse in the Local Health and Education Community, see

“The Health of the School Age Child”

Report of Working Party, North & East Devon Health Authority 2001

Copies of this document can be requested from Dr C O Holme

For comments please

Name

School

Address

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Please return to:

Directors of Public Health
North Devon PCT
Exeter PCT
East Devon PCT
Mid Devon PCT
Teignbridge PCT
South Hams PCT

**Royal Devon and Exeter
Hospital (Wonford)**
Barrack Road
Exeter
EX2 5DW

Tel: 01392 411611

Our ref: COH/JS
5 September, 2007

Department of Child Health
Direct Dial: 01392 403141
Direct Fax: 01392 403158

Dear Dr.....

The Role of the School Health Nurse

Firstly, may I welcome you to your post of Director of Public Health in Primary Care Trust.

You may be aware of some of the work that is being carried out nationally and locally on the public health role of the school health nurse.

With the development of the National Service Framework for Children, agencies in North and East Devon have committed themselves to support a Children's Steering Committee with links to the Regional Task Force and local practitioners. A subgroup of the Steering Committee will be examining the needs of the well child from birth to age 16 years. Members of the subgroup are drawn from Education, Child Health, Primary Care Trusts, School Health Nurses, Health Visitors and the Healthy Schools Project. Until recently, the subgroup reported only to the Healthy Schools Steering Committee but with the approach of the Children's NSF, there will be a reporting link with Children's Steering Committee. The well child subgroup has representatives from all the Devon PCT's excluding the unitary authorities of Torbay and Plymouth.

Following the publication of the School Health Nurse Practice Development Resource Pack by the Department of Health, the well child subgroup is anxious to discuss the public health role of the school health nurse with colleagues in Education. We would suggest that this discussion is held at a local level between representatives of the PCT (ideally from the School Nursing Service) and members of school Academic Councils in your area.

I enclose a consultation document which details our proposals and I would be most grateful if it could be distributed to Primary, Secondary and Special School Headteachers and Chairs of School Governors in your PCT area, in the State and Private sectors. (A list of contact telephone numbers for the Academic Councils in your locality is attached). I make no apology for the length of the document, it is important that all understand the complex issues involved. May I thank you for your assistance in this matter. Your contribution to the discussion will be very welcome, indeed, you may wish to give us some direction as a senior practitioner in public health.

I would be grateful if arrangements for meetings between PCT representatives and Academic Councils could be made at local level.

Yours sincerely

Dr C O Holme

Cc All members of the Well Child (School Nurse) Subgroup
Dr Tony Smith – Director of Education, Devon County Council

