



IHPE Position Statement: School Nursing

KEY INFORMATION

History

School nursing was not widely introduced until around 1907, with the introduction of an Act of Parliament to allow the medical inspection of children in school.

The first school nurses were appointed to improve the health of children living in poverty and to reduce the number of children missing school due to minor illnesses.

Children's health

Leading academics and public health organisations paint a bleak picture of child health in the UK in 2024. Health outcomes are particularly poor for children who live in deprived areas. Poverty, mental health, physical inactivity, obesity and youth violence are just some of the diverse public health issues that require urgent action.

Child health in the UK is currently deteriorating, with inequalities widening between the health of the most and least deprived.

Effective interventions

There is substantial evidence identifying where interventions need to be made to improve child health and wellbeing. Schools have been identified as a key setting with the potential for improving population health and contributing to health inequality reduction. However, considerable work also needs to take place in other settings.

In relation to health promoting schools, a significant amount of academic material has been generated including descriptive studies, evaluations, reviews and theoretical papers.

Personal, social, health and economic (PSHE) education should be an integral part of a whole school approach to promoting health. It is important that parents, carers and families are involved when a school's PSHE curriculum is being developed.

Health and academic achievement are integrally linked, and there is increasing evidence that improving health improves educational attainment.

Qualifications

School nurses are Nursing and Midwifery Council registered nurses or midwives who have undertaken additional post-graduate training and qualifications to become specialist community public health nurses.

Many school nurses also have additional post registration and post graduate qualifications in other fields including mental health, sexual health, leadership, and specific medical conditions e.g., asthma management.

Unique positions

Professional relationships can be built up which cover the whole time a child is growing and learning in a school.

Teachers and school nurses are uniquely placed to develop trusting professional relationships with children and young people, their parents, their carers, their school and the local community.

School nurses are ideally placed to provide continuity of healthcare and developmental support initiated by health visitors. They can therefore target early prevention and seamless care in early years as part of public health nursing interventions and support for ages 0–19 and their families.

Crucial roles of school nurses

Their crucial roles include health promotion, health protection, early help, brief intervention and referral to other agencies, as well as supporting children and families. The important public health topics covered include: mental health, child protection, obesity/being underweight, management of long term conditions, physical activity, safeguarding, alcohol and other drugs. Two examples are briefly mentioned below.

Mental health – a key role

Promoting and protecting children's mental health is a central role of school nurses, impacting strongly on overall health and educational attainment. This relationship works both ways, as general health and improved access to education are closely linked to improvements in mental health.

Promoting good positive mental health alongside detecting and addressing mental health problems at an early stage can prevent escalation. Empowerment, and building of trusting long lasting relationships, are central to the school nurse's approach. They have unique home/school health links and provide support and education for parents/carers.

Issues to which school nurses can contribute include life skills, bullying, and risks associated with substance use. Within life skills nurses may include resilience, communication, equality and prejudice, consent, handling peer pressure, use of social media, being safe (e.g. online) and where to receive support.

School nurses take a holistic approach looking at root causes of ill health and including parents, carers and families in solution-focussed actions. As part of the primary healthcare team they are ideally placed to liaise with, and refer

to, other agencies. When resources permit, a whole school approach should be taken and a goal would be to create a health promoting school.

Supporting children with medical needs – a key role

As leaders of the Healthy Child Programme, school nurses support children with medical needs through working with school, child, family and the most appropriate health professionals (e.g. paediatricians and specialist diabetes nurses).

This vital role of school nurses enables children to fully access education, including access to extracurricular activities in a holistic approach to the support of both physical and mental health conditions.

Working with others

School nurses work with individuals and organisations in integrated pathways to support a child or young person's journey through services and prevent them falling through gaps. This includes teachers, Child and Adolescent Mental Health Services (CAMHS), GPs, therapy services, specialist nurses, health visitors, community paediatricians and other members of primary care teams.

Pathways on interrelated issues such as domestic violence, child sexual exploitation, neglect, and substance misuse are crucial. School nurses, alongside other professionals, have responsibilities to safeguard.

Health promoting schools

The health promoting school is the gold standard for health promotion in this setting. Five elements of a health promoting school are:

1. Health topics are promoted through the formal school curriculum.
2. The health and well-being of pupils are promoted through the 'hidden' or 'informal' curriculum e.g. school meals.
3. The health and well-being of all staff are promoted.
4. School health services actively support the curriculum.
5. Links are made with families, outside agencies and the wider community.

Current school nurse workforce

Over recent years public health grants have been dramatically reduced and this has led to a disinvestment in school nursing services. In 2010 there were approximately 3000 FTE school nurses in the UK. Current estimates suggest there are now significantly less than 1000 FTE.

There is now variation in delivery across the country and, in some areas, this has impeded the delivery of the Healthy Child Programme and the ability to focus on key public health priorities.

STATEMENT

1. The IHPE strongly recommends that there should be a school nurse for every secondary school and cluster of primary schools. This must be a political priority in order to reverse the downward trend in child health in the UK.
2. There needs to be a comprehensive workforce plan to address shortages. It needs to include initial training and in-service training.
3. School nurses should contribute to effective PSHE programmes in a whole school approach to health and well-being, and provide advice and support to parents, carers and families when needed.
4. The IHPE recommends school nurses as being vital to key interventions within schools. This includes vaccination programmes, accident prevention, sexual health, drug and alcohol education, and management of long-term conditions such as asthma. They are also crucial as appropriately trained advisors for outbreaks of infectious diseases and guiding evidence-based pandemic strategy planning.
5. Mental health interventions undertaken by school nurses should consider root causes linked to external circumstances, such as poverty, family difficulties, bullying and co-morbidities such as physical conditions and special educational needs and disability (SEND). They should support healthy, active lives in a holistic approach to health.
6. Healthy school communities require a multidisciplinary team including school nurses, which links to specialist support in primary and secondary care health services, together with charities and local support groups.
7. A National Health Promoting Schools Award Scheme should be developed. School nurses should play key roles in creating and supporting health promoting schools. Positive health indicators should be created to support development rather than negative indicators such as absence and morbidity.
8. Groups most in need, including children living in poverty and those with SEND, should have access to a school nurse throughout their educational journey, in a needs-based approach with an inclusive school environment provided through understanding and education.
9. School nurses are recommended as an important source of support for children struggling to attend school, and their families. Root causes should be addressed enabling the provision of appropriate information, resources to promote health and linking to appropriate specialist support in a needs-based approach.
10. Children suspended or excluded from school, and their families, should continue to have access to a school nurse to help identify underlying causes of difficulties impacting behaviour and link to appropriate support and safeguarding.

Resources

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