

# School Nurse 121 Campaign



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**R**elax! I'm not going to harangue you at all this month. Just a gentle round up of what has been going on. Many of you are on holiday, reversing the trend I hear that some areas are returning to term-time only working. Whether this is a cost-cutting measure or the result of difficulty filling posts, I'm not sure. If you have an opinion, let me know.

I discussed commissioning last month, and have had feedback from the Organising Professional Committee (OPC) that some nurses are finding it difficult to understand it, so I will try to get a clear fact sheet out. Meanwhile, if you are still not sure about how the new health organisations are supposed to relate to each other, you might be interested in this from the King's Fund: [www.kingsfund.org.uk/sites/files/kf/media/structure-of-the-new-nhs-animation.pdf](http://www.kingsfund.org.uk/sites/files/kf/media/structure-of-the-new-nhs-animation.pdf)

I was privileged to be invited to see the posters designed by Wolverhampton Specialist Community Public Health Nurse (SCPHN) students as part of their course. The standard was very high and emphasised once again to me that school nurses who undertake the SCPHN course enter another dimension. They see everything from a public health (preventive) point of view. Topics that caught my eye included resilience-building workshops, safeguarding issues due to faith or belief, developing a mobile app and raising awareness of hate crime in young people with learning disabilities. If you are a student



who has done an interesting piece of work, do consider writing it up for *Community Practitioner* as other public health nurses are always interested in reading about different practice.

## **SRE**

The National Children's Bureau sex education forum held its summer meeting, including a display of games and other materials on the topic of 'porn versus reality'. The subject of young people's exposure to pornography and the corrosive effect this may be having on their body image and ability to form loving relationships is something that needs more research. The children's commissioner for England carried out a scoping exercise earlier this year and discussed this with the group. I specifically asked her, 'What do you want school nurses to do with this information?' She

replied that awareness, listening and reporting (as a safeguarding concern) are crucial. Be wise to the risk of sexual exploitation within the school environment and especially concern yourselves with children missing from school. 'How am I going to be everywhere at once?' I hear you cry. It would be wonderful to have the time to get involved with sex and relationships education (SRE), but we don't have time! Well yes, the service is differently organised over the country, but if you want resources you must show the need via the Joint Strategic Needs Assessment (England).

## **Online presence**

If you can't physically be there at your schools all the time, do you have an online presence? I visited a school in London this week where the school nurse had set up an interactive webpage on the school's intranet. The

advantage of the intranet is that only young people and families from that school could access it. Through the site young people can search for specific health information and see if the FAQs are useful. They can ask questions and receive answers within a day or two, and make an appointment to see the nurse. They now know who the school nurse is, and what she does; it has raised her profile no end! Student health forms, healthcare plans, health policies and immunisation consent forms are all downloadable.

Online first aid updating training for staff is also possible, and specific resources available commercially, such as YouTube and websites can be signposted. Really, every school should have one! Talking of being interactive, don't forget to use the twitter hashtag #SNSoMe, which stands for school nurses in social media.

### Setting an example

Public Health England held an inaugural conference for nurses and midwives recently, as we are the largest group who could make the greatest impact on upstream work. It was well attended and there was constant tweeting throughout. School nurses were regularly mentioned as being an important group in the system. The emphasis was around linking evidence to practice, using a 'life course' approach to public health, and 'making every contact count'.

However, there was one niggling concern: are nurses and midwives themselves the greatest exponents of a healthy lifestyle? Do we walk the walk or just talk the talk? Should we improve our own public health first before expecting others to change their lifestyle? One interesting fact: all PHE staff are being allowed five paid days a

year to do voluntary or charity work. Most nurses present thought that they already 'volunteered' five days extra a year in overtime hours to the NHS!

### WHO food campaign

The World Health Organization (Europe) has released an update on the marketing of foods high in fat, salt and sugar to children ([www.euro.who.int/en/what-we-publish/abstracts/marketing-of-foods-high-in-fat,-salt-and-sugar-to-children-update-20122013](http://www.euro.who.int/en/what-we-publish/abstracts/marketing-of-foods-high-in-fat,-salt-and-sugar-to-children-update-20122013)). I hardly need to tell you in which direction it is going. Do keep your eyes open for inappropriate marketing and sponsorship at schools, youth clubs, summer play schemes and other places where children and young people congregate. If you can take photos please let us have them and tell us about the promotion. Have a happy and relaxing holiday.