School Nurse 121 Campaign

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School nurses are uniquely situated to carry out the improvements in health outcomes everyone wants – so why is it so difficult to maintain staffing levels? We know, empirically, that we make a tremendous difference to young people's lives simply by being a non-judgemental health professional. However, nowadays everyone wants data to prove the worth of a service and school nurses must learn to provide this.

Ideally, everything should be uploaded onto the computer system so that added value can be shown via downloads; but I wait in vain, as area after area informs me of IT problems. So, remember, as you go about your busy life, take a simple questionnaire to ask your clients whether they were satisfied with your response.

By the way, if you are a qualified school nurse wondering where all the jobs are; they are in London and Kent.

You will have been horrified by the recent revelations about safeguarding from serious case reviews. School nurses haven't come out particularly badly, but that may be because the children died before they reached school age.

The (English) government's effort to increase the numbers of health visitors looks more compelling when set against these extremely difficult-to-engage families who weave a tissue of lies. It takes a lot of time and inter-agency communication to see the bigger picture of these children's blighted lives. However, there are some public health nurses who claim to be acting competently when they have large number of children on the child protection register on their caseload. I challenge anyone to remain competent according to the NMC code when monitoring 36 children on the child protection register (as I heard about this week). If you are over-burdened with child protection cases, seek help from your rep (or become a rep yourself).

We recently did a Unite in Health 'Thinking Thursday' session on safeguarding, and it is available to download from the website (www.unitetheunion.org) as we said in our recent email bulletin to members. Online, we spelled out the questions (taken from the Scottish government's report, Getting it Right for Every Child) you need to ask yourself when dealing with child neglect:

- What is getting in the way of this child or young person's wellbeing?
- Do I have all the information I need to help this child?
- What can I do now to help this child?
- What can my agency do to help this child?
- What additional help, if any, may be needed from others?

Health professionals need to make a 'step change' in our approach to child protection, and school nurses should be in the vanguard; if you can't identify the 'lead professional', you must assume it is you, and act accordingly.

The question then arises about what to do if school staff do not appear to know how to deal with safeguarding issues. You will be aware that each school must have a lead governor for safeguarding, so you must liaise with them and do a presentation about the school nurse role. I will put a presentation on the 121 page of the website for you to use.

I saw on Twitter last week a comment that some school nurses at their study day were trying to define their 'unique selling point'. Members may remember that the forum did that a couple of years ago, and it is still on the CPHVA website (www.unitetheunion.org/121).

I'm looking forward to organising 'Lunch & learn' and 'Cake & catch-up' sessions for those of you who have responded to my emails. This is an initiative we are rolling out to try to reach all school nurses, as we know that you are so busy with your day job.

I also hope to see some of you at the CPHVA Annual Professional Conference and others at the forthcoming Public Health England study days.

Meanwhile, which slogan do you like best? 'Every child deserves a school nurse' or 'Every school nurse matters'? Let me know at the email address above.