AGENDA FOR CHANGE
NHS JOB EVALUATION SCHEME

JOB DESCRIPTION

1. JOB IDENTIFICATION

Job Title: School Nurse

Reports to: Child Health Team Lead

Department, Ward, or Section: Health and Social Care

Operational Unit/Corporate Department: Highland Council

Job Code: HCCHLDNURSMGMT03

No of Job Holders:

Last Update: May 2025

2. JOB PURPOSE

School nurses are Specialist Community Public Health Nurses who provide support to school age children and young people. School Nursing builds on the early prevention and intervention support offered within a universal health visiting service in the early years by providing targeted complex assessment, intervention and support for the most vulnerable school aged children and families, particularly those suffering the impact of health inequalities and poverty. As public health nurses, school nurses contribute to early prevention in school years through health education and promotion.

Working through the Getting it Right Practice Model, and as a named health partner to the plan for children and young people, school nursing service is universally accessible and provides targeted support across ten priority areas as set by the Scottish Government.

School nursing functions as part of the whole system of mental health support, having a key contribution to tier 1 and tier 2 mental health care and enable appropriate access to Tier 3 CAMHS when required.

School nurses are responsible for delegating work to other members of the school nursing team as appropriate to coordinate care.

3. DIMENSIONS

School nursing is a delegated function within the Highland Health and Social Care Partnership Integration Scheme. The school nursing service is universally accessible to around 30,000 school aged children and young people. This covers the Highland Council area, 29 Secondary Schools, 166 Primary Schools and 3 Special Schools.

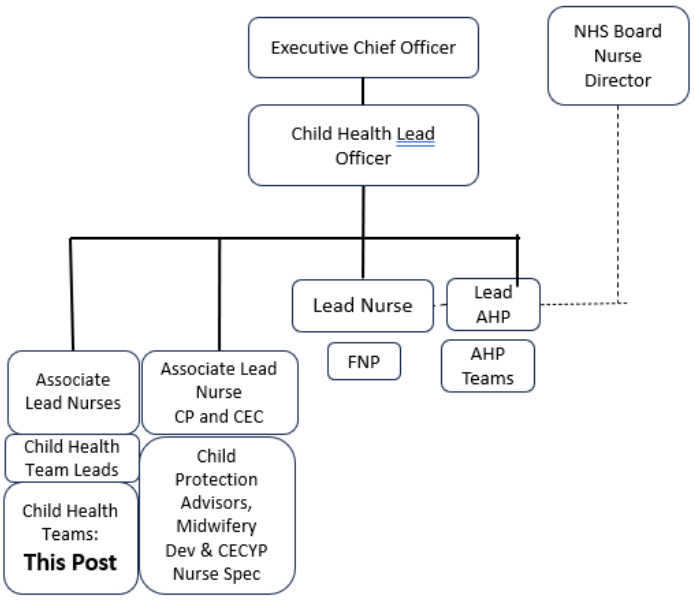
School nurses work as part of health and social care within family teams. They provide supervision and leadership to the child health skill mix team, including staff nurses and support assistants, provide whole family support in a variety of settings including schools, communities, pre-schools, clients' homes, residential homes and other community settings.

Working across the whole system, key co-dependencies include education, paediatrics, CAMHS, children and families social work, acute health care, and primary care.

The Postholder will work within the identified National School Nursing Pathway key priority areas:

1. Child Protection
2. Emotional health and wellbeing
3. Looked After Children (Care Experienced Children & Young People)
4. Youth Justice
5. Substance misuse
6. Domestic abuse
7. Homeless children and families
8. Young Carers
9. Sexual health - pregnancy and parenthood
10. Transition points

4. ORGANISATIONAL POSITION



5. ROLE OF DEPARTMENT OR SECTION

Child Health functions within the People's Directorate of the Highland Council and provides comprehensive and continuous whole family health support. The support focuses on early prevention and intervention with targeted support for families affected by inequalities.

School nursing works within all national, partnership and professional policy frameworks. In ensuring that children, young people and families get the right help at the right time, school nurses work to the National Practice Model (GIRFEC). School nurses also ensure that the rights and the voice of children and young people (UNCRC and The Promise) are central to planning care and family support.

School nurses work within the Integrated Children's Service Framework across the Highland Health and Social Care Partnership.

6. MAIN TASKS, DUTIES AND RESPONSIBILITIES

Professional and Leadership Responsibilities:

1. The postholder will work autonomously and must abide by professional and local principles and policies and seek advice and guidance from the Team Lead or Associate Lead Nurse on complex, sensitive matters, where appropriate.

2. As a clinical specialist, the post holder must have the ability to analyse highly complex information from a wide array of sources. They must be highly competent to make complex decisions and the ability to act without direct supervision but as guided by their Team Lead and/or Associate Lead Nurse in accordance with their scope of practice.
3. The post holder will manage risks and concerns using critical analysis of highly complex information to enable professional decision making on a case-by-case basis regarding the care of a child/young person's wellbeing and protection needs within clinical/professional guidelines, as determined by the employer's legal duties and responsibilities.
4. Working as a positive role model by representing the values and beliefs of the nursing profession as well as that of the organisation.
5. Actively participating in all supervision sessions in line with policy.
6. Day-to-day supervision of staff nurses and support staff, ensuring the delegation of work takes account of the role, skills and competence of staff and is appropriate to their scope of practice.
7. Establishing and participating in systems of practice support, clinical supervision and personal development plans for the school nurse team.
8. Identify capability and performance issues of team members and support capability support plans under the guidance of the team lead.
9. As a practice assessor and supervisor, the post holder will ensure that systems are in place to supervise and support both pre- registration students and post-registration school nurse trainees. This involves supervising, and assessing aspects of the learner's work, to ensure the assessor has the information needed to establish whether the practitioner is safe, competent and fit to practice as set out by the Nursing and Midwifery Council.
10. The post holder will have the ability to identify their own learning needs and recognise who or where to contact for support. They are responsible for their own continued professional development and should encourage and facilitate the development, of other members of the school nursing team as directed by the Team Lead and/or Associate Lead Nurse.

Assessment and analytical skills:

1. Undertake highly complex health assessments and interventions for children and young people suffering the impact of inequalities or poverty.
2. The post holder is accountable for their own professional actions in accordance with the NMC code and organisational framework of supervision. Using evidence-based research they will have a role in assessing, implementing, and evaluating programmes of care for children/young people and families, doing so independently, or as an integral part of a multiagency team.
3. A considerable part of the role is to have a high degree of analytical skills enabling robust assimilation and analysis of health and medical information from multiple sources for case conferences, and child plan meetings.
4. Be able to enable and empower other professionals in the support of the health needs of families
5. Be able to provide complex health reports to external bodies, including legal reporting to The Children's Reporter. The school nurse may also be required to present health information in person or give evidence in Children's Hearings Courts.
6. Thoroughly seek out health needs from a public health perspective, understanding the social determinants of health, enabling and empowering families to positive health choices and improved life outcomes.

7. Be accountable for statutory health assessments for care experienced children and young people.
8. Be accountable as named health partner to the plan for children in risk and in need of protection.
9. Be accountable for the delegation of duties to staff nurses and support staff within the team in accordance with NMC guidance.
10. Be responsible to support the tripartite Child Protection Inter Agency Referral Discussion process for Child Concern.
11. Be responsible for ensuring the delivery within the team of the child health screening and surveillance programme as agreed locally e.g. P1 screening, hearing checks, vision check follow-up.
12. Undertake the responsibilities of named health partners to the plan for highly complex plans and statutory multi agency child's plans, including those for child protection, care experienced children and young people. Where deemed appropriate the school nurse may undertake the responsibilities of lead professional in accordance with the National Practice Model.
13. Support the named person/lead professional by ensuring robust and accurate contributions to a single agency child's plan.
14. Facilitate the transfer/handover of health information from the health visitor during the transition into school.

Support, advice and guidance responsibilities:

1. Responsible for supporting colleagues across health, education and social work with expert advice, guidance and support with respect to the health needs of children and young people of concern.
2. Responsible for providing support, induction and mentoring to all new staff
3. Fulfil the roles of practice assessor and supervisor

Budgetary responsibilities:

1. School nurses do not hold a direct budget they have a responsibility to monitor and ensure the appropriate use of resources and to highlight any problems or discrepancies through designated processes in conjunction with relevant parties.

Policy and Service Development:

1. Support and contribute to the continuous improvement of the service through the initiation of audit, collation, interrogation, and analysis of data to identify gaps, and propose policy or service changes.

2. As part of the supervisory responsibility the post holder will be familiar with and ensure the implementation of local and national policies, procedures, and guidelines pertinent to all staff within their area of responsibility in the pursuit of the highest standard of care.

3. In line with the transformation and refocused role, the post holder has an ongoing collective responsibility for future service development as part of the school nursing team. This will include supporting tests of change using organisational change policy while collaborating with partner agencies to continue, develop and sustain the ten priority pathways.

4. The post holder will also be responsible for reporting incidents and critically appraising them to reduce any recurrences and participate in further investigation as required.

Research and Development:

1. The post holder will undertake routine data collection for national statistical data collection as per national and local policies.

2. Identify gaps in current practice, initiating and participating in evidence-based research, apply findings to improve health interventions and policy.

3. Propose and lead improvement projects using recognised improvement methodology.

4. Advocate for the integration of research findings into clinical guidelines and promote a culture of continuous learning and reflective practice in school nursing services

7. EQUIPMENT AND MACHINERY USED

1. Weighing scales/ Height/length measurement equipment
2. Child development assessment equipment including vision and hearing screening
3. Health promotion resources (books, leaflets, DVDs, posters)
4. Computer/Laptop/Shredder/Printer/IT equipment/Smartphone

8. SYSTEMS

1. Maintain patient records in accordance with NMC guidelines and NHS Highland standards.
2. Follow all relevant NHS and Highland Council professional policies, procedures and guidelines.
3. Responsible for efficient use of resources and stock control, ordering stores and supplies.
4. Undertake Personal Development Planning and Appraisal in accordance with NHS Highland policy.
5. Undertake risk assessments within the team. Identify, analyse, mitigate and escalate risks according to local procedures.

9. ASSIGNMENT AND REVIEW OF WORK

1. The post holder is an autonomous practitioner with responsibility for the management of a defined caseload using significant professional discretion regarding their actions and outcomes.

2. Accountable for own professional actions and decisions with the ability to recognise more

complex cases requiring escalation to ensure appropriate practice or policy intervention or improvement.

3. Accountable for activity profiling of caseload to inform team and service workforce planning.
4. Ability to prioritise workload to meet the changing needs of the caseload population
5. Professional development is reviewed via PDP process.

10. DECISIONS AND JUDGEMENTS

1. Makes autonomous decisions analysing and synthesising unique sets of information using comprehensive knowledge, skills and experience of the public health nursing service, taking account of the guidance of the professional body (Nursing and Midwifery Council) and the employer's policies and procedures.
2. Makes autonomous clinical decisions in planning and prioritising client care and appropriate delegation to members of the wider skill mix team while holding overall responsibility.
3. Recognises own limitations in the provision of care and urgency of client needs referring to other health care professionals and multi-agency teams accordingly.
4. Makes highly complex and difficult decisions concerning the reporting of child protection issues as per the Highland Child Protection Guidelines.

11. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

1. Management of change in both service delivery and individual practice
2. Working across the whole system of support for families, acknowledging differing cultures and models of working and being able to ensure the needs of the child and family remain central
3. Being able to work flexibly, picking up relevant caseloads across an area to ensure continuity of service
4. Effectively manage challenging caseload and competing pressures.
5. There is a need to concentrate for prolonged periods of time in often distressing circumstances when involved in child protection case conferences and hearings.
6. Being able to effectively manage the mental and emotional demands which are driven by service users who themselves may have suffered adversity, crisis or trauma.
7. Being able to cope with the varying working conditions as school nurses are expected to visit families in their own homes/community settings.

12. COMMUNICATIONS AND RELATIONSHIPS

1. Responsible for working in a trauma informed way and understanding the impact of adversity on the developing child.
2. Able to establish and maintain professional relationships with colleagues across health, social care, education, 3rd and voluntary sector to provide a planned co-ordinated, and seamless service for children and their families.
3. Able to ensure that complex health information can be communicated in a way which is understood and enables and empowers families to better health choices.
4. Ensure that the rights of children, young people and families are upheld across all aspects of professional practice, including observing confidentiality and enabling and empowering young people's right to choice.
5. Ensure that the voice and choice of children and young people is central to the help and support offered.
6. The post holder frequently communicates sensitive information in emotive situations, this requires advanced communication skills such as persuasion, reassurance, empathy, and negotiation: where there may be barriers to understanding e.g. – substance misuse, hostility, antagonism, manipulation, denial and learning difficulties.

13. PHYSICAL, MENTAL, EMOTIONAL AND ENVIRONMENTAL DEMANDS OF THE JOB

Physical:

1. Manual handling is required to transport clinic equipment such as weighing scales, height measures, nursing records, vaccine porters, and stationary to different working clinic locations. This involves an element of repetitious bending and lifting of equipment in and out of car boots.
2. Bending and stretching involved in setting up 'drop- ins' in schools.
3. Pushing and pulling trolleys with clinic equipment to and from base to community locations.
4. Frequent hand washing.
5. Driving skills are essential for delivery of service.
6. Delivering this service in a remote and rural location can involve long periods of driving, driving on single track roads, driving in the absence of day light, and driving in changeable/adverse weather conditions.
7. The remote and rural location requires occasional transportation on ferries, which can be subject to changing weather conditions causing interruptions of services limiting or extending travel and delivery of services.
8. Exposure to illness/infectious diseases such as lice/scabies/Covid-19/flu.
9. Lone working in rural and remote locations increases risk of physical violence and/or abuse when performing home visits where risks are unidentified.
10. Working with distressed children/young person/ families who can be verbally and physically aggressive.

11. Performing homes visits may expose the post holder to passive smoking or areas with concerns regarding hygiene, pets/animals.
12. Exposure to bodily fluid such as spitting.

Mental:

1. Frequent concentration, decision-making and organisational skills used to cope with competing demands, (dynamic changes in client situations, unpredictable nature of client needs, contacts from within and out with the organisation – managers, other departments, other agencies) daily.
2. Daily lone working in the community requiring self-reliance to continually assess risk to self, team and clients.
3. Recognising the changing need for clients and making rapid decisions to provide appropriate case management - frequency.
4. Negotiation skills to co-ordinate complex care plans and/or child's plans with a wide range of people and agencies with varying degrees of frequency.
5. Daily and continuous concentration to assess and provide client care and manage a caseload with frequent interruptions either in person or by telephone.
6. Concentration to drive in a busy urban/remote and rural environment visiting clients' homes to deliver care – daily.
7. Prioritise workload in response to competing demands.

Emotional:

1. Emotional demand in relation to family and human dynamics, dealing with other health professionals and partner agencies, clients and their families in crisis.
2. Working with distressed children/young person/ families who can be verbally and physically aggressive.
3. Emotional demand while working with highly complex child protection or distressing cases, often over long periods of time (years) such as, child abuse, domestic violence or child death.
4. Emotional demands related to managing and implementing change, organisational, policy and practice - ongoing.
5. Emotional demands of involvement in families who are challenging in their behaviour.
6. Exposure to verbal or physical aggression especially when lone working.

14. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

1. Current first level registration.
2. Post-graduate level study (SCQF level 11, master's level) which leads to a professional registration on part 3 of the NMC Register as a Specialist Community Public Health Nurse (SCPHN).
3. Evidence of continuing professional development.

4. Knowledge and understanding of national and local policy drivers including Getting it Right, UNCRC and The Promise.
5. Knowledge of, and ability to interpret and apply all relevant Highland and professional policies, procedures and guidelines.
6. Knowledge of processes involved in health and social policy development and of current policies and their impact on public health nursing services.
7. Strong analytical skills.
8. Ability to work positively and effectively as part of a team.
9. Ability to work on own initiative.
10. Ability to work to challenging deadlines.
11. Active problem-solving skills.
12. IT skills – e-mail, basic word processing, ability to search inter and intranet.
13. Good level of physical health and stamina, large and fine motor fitness and dexterity.
14. Ability to travel for work requirements.

15. JOB DESCRIPTION AGREEMENT	
I agree that the above Job Description is an accurate reflection of my duties and responsibilities at the date of signing.	
Job Holder's Signature:	Date:
Manager's Signature:	Date: