What added value can school nursing bring to integrated care systems?

Integrated care systems will help provide real opportunity for school nursing services to improve the care of children and young people. Sharon White explains

Sharon White OBE, CEO, SAPHNA

Back in April 2021, a range of children's charities came together to combine our voices in shaping the Health and Care Act 2022, which is the legal framework which underpins Integrated Care Systems (ICS); we named ourselves the Children and Young People's Health Policy Influencing Group (HPIG) and I am delighted to say, we did just that!

As a result of nearly a year of collective effort, children, and young people (defined as up to the age of 25) are now on the face of the Act; this a key shift from the original documents. As a result of this, there are now specific commitments in relation to ICS. These include:

- Integrated care boards (ICBs) will be required by primary legislation to set out the steps it will take to address the needs of children and young people under the age of 25 in the forward plan
- NHS England will issue statutory guidance that states that each ICB must nominate an executive children’s lead, ensuring leadership for babies, children and young people on every ICB
- Bespoke guidance will contain provisions for integrated care partnership (ICP) strategy to consider child health outcomes and integration of children’s services, as well as providing that the ICP should consult local children’s leadership and CYP/families themselves.

In addition, the government has acknowledged serious and distinct challenges with sharing relevant information about children and committed to delivering change in this area. The government will now lay a report before Parliament within a year setting out:

- The government's policy on a consistent identifier for children and its approach to improving information sharing more generally
- How this can be achieved across health, children’s social care, police and education settings
- The cross-government actions that will be taken to implement the policy set out in the report.

The changes we have managed to bring about represent a huge and significant achievement and ensures ongoing focus on babies, children, and young people in the new system, and within the Department of Health and Social Care and NHS England, that we have not seen for many years. Of course, there is still a long way to go, and we will, as a group, continue our efforts to support implementation and more detailed policy development.

This, I feel, provides new, refreshed, and exciting times ahead for school nursing who, let's face it, are one of the workforces that co-depend on an integrated system/collaboration in supporting the health and wellbeing of children and young people; in fact, we're very experienced at it! The difference this time is that this affords real opportunity.

The King’s Fund has produced a very useful animation to help us better understand the relevance of ICSs to our work: How does the NHS in England work and how is it changing? (see Further information).

School nursing services know only too well of the stark and widening health inequalities faced by our population with many giving much of their time over the summer to supporting access to health care, housing, food, tech, fuel, and uniform poverty and much more. One of the key roles and opportunities we have within ICSs is in our continued advocacy for our most vulnerable. This is where the real magic can and should happen.

The Health Foundation (Dunn et al, 2022) sums this up so eloquently:

- ‘Integrated care systems are the...’

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The centrepiece of the biggest legislative overhaul of the NHS in a decade. From July 2022, England will be formally divided into 42 area-based ICSs, covering populations of around 500,000 to 3 million people.

- ICSs face a mammoth task. Staffing shortages in the NHS are chronic, health and care services are under extreme strain, and health inequalities are wide and growing...
- The task facing ICSs is not equal. Pressures on services and the health of the population vary widely between ICSs – as do the resources available to address them. ICSs also look very different in their size, complexity and other characteristics that will shape how they function and their ability to collaborate to improve services.
- National policy on ICSs must acknowledge this variation and be realistic about what different areas can achieve. Differences in local context should be reflected in how ICS performance is assessed and reported. Policymakers must target support for ICSs with different needs, and some areas will likely require additional resources to help deliver national policy objectives.

'School nursing: Looking after the health and wellbeing of school children,' a recent publication from the Local Government Association (2022), which SAPHNA is delighted to have supported, shines a very clear light on how specialist community public health school nurses and their teams have the skills, knowledge, experience and local practitioner intelligence with which to help make a significant positive difference in working alongside our ICS.

Are you ready to bring up your chair?

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FURTHER INFORMATION

SAPHNA
https://saphna.co/

Local Government Association

Health and Care Act 2022
https://www.legislation.gov.uk/ukpga/2022/31/contents/enacted

The King’s Fund
Animation to discover the key organisations that make up the NHS and how they can collaborate with partners in the health and care system to deliver joined-up care. https://www.youtube.com/watch?v=blapgFKXv0l