

**Partnership Working**

**Agreement (Ealing Primary Schools)**

**Between Central London Community**

**Healthcare NHS Trust (CLCH) School Nursing Service**

**And the School**

**Agreement between:**

(School Name) and CLCH School Nursing Service.

Signed by:

..……………………… ………………………………

(Head Teacher) (0-19 Team Leader)

………..…………………………… …………………………………………………

(Head Teacher’s Name) (CLCH 0-19 Team Leader’s Name)

………..…………………………… …………………………………………………

(Telephone Number) (Telephone Number)

Date:

Review Date (every academic year): September **2019**

**Purpose of agreement:**

To facilitate partnership working and the provision of a high quality school nursing service to the pupils, their parents/carers and staff within schools. A high quality service will be achieved between schools and the school nursing service through better understanding and clear expectations of the differing roles of each party through mutual cooperation, and partnership working.

**School Health Team**

For the school year beginning September 2019

**Contact details**:

**Named School Nurse:**

**Team Leader:**

**Ealing Admin Single Point of Access:**

**Ealing School Nurse duty:**

**School Education Team**

**Designated Child Protection Link:**

**SENCO:**

**Mental Health Lead:**

**Medical Conditions Champion:**

**School Office:**

**Summary of the role of school nursing in this service**

1. Co-designing a school health action plan and providing a quality assurance role as part of the head-teacher annual review, in conjunction with the Health Improvement team.
2. Delivering a high quality training offer to school staff around supporting pupils with medical conditions (2 training sessions: Managing Medical Emergencies and Implementing the Supporting Pupils with Medical Conditions Policy)
3. Responding to queries and providing advice as part of the duty desk, including support for individual healthcare plans.
4. Providing support for those with an identified health need, including pupils with medical conditions and those with safeguarding needs.
5. Delivery of National Child Measurement Programme and child vision screening.

**The CLCH School Nursing Service’s responsibilities:**

* To provide a school nursing service that meets the health needs of school-aged children working together with their parents/carers and school staff and wider agencies.
* The named school nurse/team leader will agree with the school a set time when they can attend an annual liaison meeting, initially with the head teacher or identified education lead/link person to discuss a school action plan and quality assurance. Ideally, this meeting should take place with the LBE Health Improvement team. This meeting may also involve the medical conditions champion who leads on implementing the ‘Supporting pupils with medical conditions’ policy.
* To offer and promote training sessions on: 1) Managing medical emergencies and 2) Implementing the ‘Supporting pupils with medical conditions policy’ (see Appendix 3 for frequency),
* To review annually all health care plans and provide support for those children with complex health needs, in line with the Ealing ‘Supporting pupils with medical conditions’ policy.
* To work with schools and in line with CLCH safeguarding policy to ensure vulnerable children and those subject to Child Protection Plans are protected and receive the support and services they require. This includes a termly health review.
* The named school nurse and school lead will work together in partnership where a child/young person is thought to be at risk of abuse or neglect adhering to organisational safeguarding policies and the London Child Protection procedures (2018).
* To offer screening programmes - National Child Measurement Programme to reception aged children and Year 6 and to offer Vision screening to reception aged children.
* The named school nurse will provide the school with a schedule of the NCMP as set out in the academic year planner
* When the named school nurse is unable to attend the school for any reason a member of the school nursing team will inform the head teacher or identified link person. If a session or health review has been planned, this will, where possible, be covered by a colleague. If another school nurse is not available, the session will be rescheduled.
* The outcome of any referral to the school nursing service will be communicated to the referrer within five working days of the appointment, pending student and parental consent to share this information.
* Service user feedback is an integral part of the school nursing service. Parents, carers and children will be contacted and asked for their views and suggestions through different consultation and participation processes to improve the delivery of services. This will be agreed with the school and feedback shared as appropriate.
* The school nursing service will also conduct an annual survey with head-teachers to assess the accessibility of their service.
* CLCH will inform the school, via a meeting with a team leader, if there are any proposals to the current service provision which may impact on the delivery of the school nursing service.

**The School’s responsibilities:**

* To ensure the school nurse has up-to-date information for all key staff within the school including: Head Teacher, SENCO, Mental Health Lead, Medical Conditions Champion and the Designated Teacher for Child Protection.
* To provide a designated member of staff as the key contact for the School Nurse.
* To provide the school nurse with appropriate accommodation in a confidential setting/room (see appendix 2) for: consultations with children, their parents/ carers, undertaking health reviews, screening (vision/ weighing/height). The designated room to be available for all agreed and specified times
* To provide the school nurse with a list of all children who have a medical condition and require an individual healthcare plan, as per the Ealing ‘Supporting Pupils with Medical Conditions’ policy. Ensure that all the Individual Health Care Plans for children are collated so that at the start of the academic year all individual health care plans can be reviewed in line with the medical conditions policy. School nurses will attend meetings for those with severe health needs, as per the Ealing medical conditions policy.
* To provide the school nurse with a list of all children in the school who have an Education Health and Care plan
* To ensure that all children who start at the school after September have their health information, individual healthcare plan or EHCP shared with the school nurse.
* To ensure that designated staff attend both the ’Implementing the ‘medical conditions policy’ training and ‘Managing medical emergencies’ training, at least every other year.
* All referrals to the school nurse by school staff will be completed using the relevant school nurse referral form. (for form see appendix 4 and also on EGFL) All referrals should be discussed with the child’s parent/carer and/or the child themselves and requires their consent for referral. A child can independently consent when they are deemed Fraser/Gillick competent.
* To inform the school nurse of any safeguarding concerns or any new referrals to Children’s Services.
* To inform the school nurse immediately of any infectious diseases and any illnesses causing a high level of absenteeism within the school.
* To support the uptake and smooth running of the National Child Measurement Programme and Vision Screening (including the distribution of letters to parents).
* The school will be responsible for the health and safety of all CLCH school nursing staff whilst they are attending school premises.
* The school to inform the school nurse the names of the Looked After Children in the school and this to be followed up with regular meetings with the Designated Safeguarding lead.

**Practicalities:**

* All school nursing staff will have undertaken a DBS check, which is renewed every three years. The school nursing staff will ensure that the school has a photocopy of the letter from CLCH advising of the date the check was undertaken including the unique reference number.
* Any changes to school nursing staff allocated to the school will be communicated as soon as practicably possible, by the team leader and within 5 days.

**Consent:**

* Good practice is that the school nursing team will always seek parental permission to share health information with the school. By completing the school health referral form, this facilitates and highlights to the parents/carers that the school nursing team will be working in partnership with the school to meet the needs of their child/young person. School nurses also seek consent to share screening results with the school where applicable.

**Escalation process:**

* In the event of disputes, complaints, performance issues or difficulties, the escalation process within each agency will be followed. The two parties will then work together to resolve the issue in the first instance.

**CLCH escalation process:**

* Any concerns in the first instance should be initially brought to the attention of the named school nurse, if following discussion a resolution is not achieved then the issue will be escalated to the team leader who will then notify the Locality Lead as appropriate. In the event of a high level concern the Locality Lead will be contacted directly and take the necessary steps to manage the issue.

**School escalation process:**

* 1-1 with the individual if possible.
* If deemed inappropriate to discuss with the individual, or of a significant serious nature, discuss with the Head Teacher as soon as able.
* If in the rare occasion, the incident is with the Head Teacher, then the SN should contact the School Chair of the Governors.

**Review of the Agreement:**

This agreement will be reviewed in the last month of the academic year in preparation for the commencement of the next school year.

**Appendix 1**

**School Nursing Core Service Offer**

The school nursing service is the universal health service for school aged children. It is commissioned to deliver the Healthy Child Programme (DH 2009): 5-19 years, an evidence based programme for prevention and early intervention. School nurses have an important safeguarding role and also support children with medical needs and disabilities within the school environment. The service also delivers the NCMP (National Child Measurement Programme) and there are plans to roll out child vision screening during the lifetime of the contract.

|  |  |
| --- | --- |
|  | Core Service Offer |
| Reception  Class | Termly Health Review of vulnerable children  NCMP  Vision screening  Annual Reviews of Individual Health Care Plans |
| Year 1 | Termly Health Reviews of Vulnerable Children  Annual Reviews of Individual Health Care Plans |
| Year 2 |
| Year 3 |
| Year 4 |
| Year 5 |
| Year 6 | NCMP  Support with transition and annual reviews of Individual Health Care Plans |

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**Appendix 2**

**Minimum requirements for a School Nurse Room:**

* The room needs to be at least 3 meters in length as 3 meters is the required screening distance for vision, and sufficient lighting.
* The room needs to be confidential and private, be able to store scales/Leicester height measure Access to electricity socket for lap top.

**Additional suitable environments/rooms required for:**

* NCMP measurements
* Rooms available to host the training sessions to provide education staff with updates - with power point facilities /DVD etc.
* A room available to enable confidential health reviews/safeguarding work.

**Appendix 3**

**School Nursing Service Specification**

The school nursing service will be accessible to all state-funded primary and secondary schools (excluding special schools), academies, free schools and state funded pupil referral units in LBE, providing a named school nurse for each of these schools, and coordinating the delivery of the key activities outlined in the Healthy Child Programme 5-19 years. From October 2018, this includes 68 primary schools, 1 all through school (nursery to post 16), 15 secondary schools (16 secondary schools from September 2019) and 2 pupil referral units (one primary and one secondary) in Ealing. The service will be expected to manage any increase in the number of state funded schools over the lifetime of the contract within the budget. The service will also provide health input for children and young people who are electively home educated who have safeguarding needs.

The school nursing service will deliver the following activities:

**Universal**

* Conduct an **annual strategic health review with every head-teacher,** or relevant lead, together with a member of the Ealing Health Improvement team. A named school nurse will use local survey data and information from the school, to inform a discussion about the key health challenges for the school. The school nurse will use knowledge of the evidence base and policy guidance to co-design an action plan with the school in order to tackle these issues. It is envisaged that the school nursing service will focus on promoting a whole school approach for mental health and wellbeing, healthy weight and supporting pupils with medical conditions, but the discussion will depend on the data and priorities for the school. The meeting may also involve other relevant staff, such as the designated senior leader in mental health or medical conditions champion. During the meeting the school nurse will also undertake a risk assessment of each school’s ability to protect the health of their children and young people, including reviewing staff training needs and will support schools to develop appropriate quality assurance processes for health in schools.
* **Provide a specific training offer to schools** on managing pupils with medical conditions. This will include two training modules aimed at staff with medical responsibilities as outlined in the Ealing ‘Supporting Pupils with Medical Conditions’ policy document[[1]](#footnote-1). The first training module will be around ‘Implementing the school medical conditions policy’, and will include topics such as individual healthcare plans and medicines management. This training should be interactive, with staff bringing cases or issues to discuss. This will also promote shared learning and peer support for staff with these responsibilities. The second training module will be ‘Managing medical emergencies’ to cover the emergency management of common medical conditions, including asthma, anaphylaxis, epilepsy and diabetes. The two training modules should be offered to groups of local schools (e.g. to the four primary school quadrants and to the high schools), and each training module should be delivered on at least five whole days per year (morning and afternoon sessions). The service is required to work with schools to improve uptake of these training opportunities in order to meet the KPI (Appendix C of the Terms and Conditions). The service may develop a ‘buy-back’ training offer to schools for additional support, but only after the core service has embedded and should have no detrimental impact to delivery of the core offer.
* **Provide health and wellbeing workshops for parents in year 7, with a focus on mental wellbeing.** The service will work with each high school to decide the format of these sessions. This may be delivered as part of transition/induction processes at the start of the school year. This may take the format of a workshop provided to parents, covering issues including healthy eating, exercise, psychoeducation about mental health and wellbeing, sleep hygiene, internet safety and youth violence, as well as signposting for further information and how to seek help. This workshop should be co-produced, with parents, young people, school staff, with input from CAMHS clinicians. An alternative format that schools may prefer is a school nursing stall during an induction event for parents. This year 7 parent workshop should be offered twice per year to all high schools in Ealing. As this is a new initiative, the service is required to trial and evaluate this approach in year 2 and roll out successful approaches by year 3.

**Universal Plus and Universal Partnership Plus**

* Where additional needs, including long term conditions or safeguarding concerns, have been identified, a referral is made into the service (via the ‘duty desk’). The duty desk work may also include follow up of children admitted to A&E and safeguarding referrals. The 0-19 service will also provide level 1 support for bowel and bladder continence issues, including basic advice and support.[[2]](#footnote-2)
* All school nursing service staff will be trained in Mental Health First Aid.
* Support for pupils with medical conditions is a local priority. In line with Ealing’s ‘Supporting Pupils at School with Medical Conditions’ (2018), the service will be **required to support schools with individual healthcare plans (initial or review)** when referred to them, so that an up to date individual healthcare plan is in place for every pupil with a medical condition. It is envisaged that the majority of requests for support for individual healthcare plans will come before the start of the school year (July-September) which the service will be required to support. The service should develop a protocol about how this support will be delivered to each school. In accordance with the Ealing medical conditions policy (Appendix 3), a healthcare professional should attend a meeting to discuss the individual healthcare care plan where the needs are severe/complex/life threatening. In the case of mild/moderate health conditions, the school nursing service may be required to provide health professional input by reviewing the individual healthcare plan that the school/parent has completed.
* The service will have in place a protocol that clarifies the role of the school nurse in safeguarding meetings, based on Ealing revised safeguarding protocol. The school nurses will provide **termly health reviews** for all children with safeguarding needs, including those who are electively home educated.
* The school nursing service will also be required to **contribute to the Education, Health and Care (EHC) assessment and planning process**, and will be required to have a record of those children with EHC plans.

A named school nurse will make an assessment on the need for timely, expert and evidence-based advice and support, which the school nurse may provide, delegate or refer to other services. To this end, it is expected that the service has excellent working relationships with relevant partners, including children’s social care, ESCAN, CAMHS, sexual health services, paediatrics, general practice, and future ‘mental health support teams’[[3]](#footnote-3)).

**National Child Measurement Programme and Child Vision Screening Programme**

The school nursing service will oversee and manage delivery of the National Child Measurement Programme (NCMP) and the child vision screening programme, adhering to national guidance[[4]](#footnote-4)[[5]](#footnote-5). This will involve:

* **Preparation:** securing local engagement with schools and families (parental consent letters) to maintain high participation rates, scheduling data collection including obtaining class/pupil details, collating opt-out data and seeking to reduce numbers and agreeing programme timelines with commissioners. Parental consent should include consent for use of data, in line with the General Data Protection Regulation.
* **Data collection:** using skill mix staff to undertake annual height and weight measurements and vision screening to reception year pupils (aged 4-5 years) and height and weight measurements to year 6 pupils (aged 10-11 years). The service will have a process in place to reduce human error and an auditing process to ensure that correct measurements are obtained. For vision screening, the service should be orthoptic-led (the screening test is either delivered by a registered orthoptist or by a vision screener with competency confirmed by a registered orthoptist).
* **Catch up sessions:** for NCMP, as required in order to meet the KPIs (Appendix C of the Terms and Conditions).
* **Data processing:** collating and submitting the relevant data for the national NCMP data return including validating the data (in line with guidance published by NHS Digital).
* **Feedback and follow up:** providing written feedback to parents within 6 weeks. The letters will be designed in conjunction with commissioners, in order to signpost parents to local services if a child is identified as overweight or obese, or a referral for further orthoptic diagnostic testing if there is an abnormal vision screening result. The service will be required to ensure onward referrals have been processed appropriately and safely. The service will be required to share NCMP data with the local child weight management service, ensuring that information sharing protocols are in place, and to facilitate engagement between those identified as overweight/obese and the child weight management service. For child vision screening, the provider will be required to work to common standards, policies and protocols with providers of other elements of the complete pathway (such as primary care, community and hospital eye services) or interfacing services.
* **Responding to queries/complaints and ‘opt out’ information** and update the information passed onto the child weight management service.
* **Working within an appropriate clinical governance and quality assurance framework:** ensuring appropriate governance structures are in place, developing and implementing risk reduction measures

**Appendix 4**



Referral to School Nurse.

PARENTAL CONSENT MUST BE OBTAINED PRIOR TO REFERRAL

Please provide the following details:

School:

Name of Child/Student:

Date of Birth:

Address:

Telephone Number:

Please indicate that parental consent has been obtained:

Yes:

Date obtained:

Summary of concerns / input requested

Name (please print) and signature of referrer:

Date:

Contact details:

When completed please either post this form to:

School Nurses

South Acton Children’s Centre

Castle Close

W3 8RX

Tel: Admin Hub: 0208 102 5888 / School Nurse Duty: 07391 414806

E-mail to: clcht.ealingschoolnurseteam@nhs.net (where possible please use secure EGRESS email)

**Appendix 5**

**INDIVIDUALISED SCHOOL AGREEMENT TEMPLATE**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Partnership Agreement – School Meeting and CLCH School Nursing service | | | |  |
| Contact Details- as highlighted in the agreement | | | |  |
| Present: | | (Head Teacher) | 0-19 Team Leader | |
|  | **ITEM TO BE AGREED** | | **AGREEMENT/DECISION** | |
| 1 | Identified specific needs of the school population | |  | |
| 2 | School Nursing health promotion programmes: | | ***Reception***  *NCMP*  *Vision Screening*  *Health Care Plans review*  ***Year 1*** *-5*  *Health Care Plans Review*  ***Year 6***  *NCMP*  *Health Care Plans review*    ***Parents:*** | |
| 3 | Agreed School nurse allocation | |  | |
| 4 | Agreed communication with the head teacher:   1. Frequency 2. Method, e.g. face to face /email 3. Cover arrangements for leave | | If the school nurse is unable to attend she will notify the head by email. | |
| 5 | School Nurses Induction details | | To be organised by the SN Team Leader | |
| 6 | Key contact details | | Detailed in the agreement | |
| 7 | Arrangements for room use | |  | |
| 8 | Agreed mechanism for communicating changes | | Via team lead within 5 days | |
| 9 | Agreed schedule of CLCH management input | | heads cluster meetings | |
| 10 | Agreed escalation process | | As detailed | |
| 11 | Safeguarding and LAC | | Within the touch base meetings and the 6 weekly TAS meeting. | |

Agreed actions=

1. <https://www.egfl.org.uk/facilities/health-and-safety/managing-medical-conditions-schools> [↑](#footnote-ref-1)
2. Paediatric Continence Forum (2015) Paediatric Continence Commissioning Guide [↑](#footnote-ref-2)
3. Department for Education and Department for Health (2017) Transforming Children and Young People’s Mental Health Provision: Green Paper [↑](#footnote-ref-3)
4. https://www.gov.uk/government/publications/national-child-measurement-programme-operational-guidance [↑](#footnote-ref-4)
5. https://www.gov.uk/government/publications/child-vision-screening [↑](#footnote-ref-5)