

## **Royal College of Nursing submission to the Health Select Committee inquiry on children and young people's mental health - the role of education**

### **Key summary**

1. We warmly welcome the Government's commitment to transform children and young people's mental health services and we believe the focus on promoting good mental health through health education, particularly in schools, is a good starting point. However, this commitment must be underpinned by sustainable long-term funding, alongside a multi-skilled mental health workforce. As part of this, we believe it is crucial that the value, contribution and potential of the nursing workforce is recognised.
- 1.2 School nurses, health visitors, children and young people's nurses and specialist children's mental health nurses are at the forefront of providing care to children and young people with mental health problems. These nurses act as knowledge brokers, working at the interface between families and core health, social care and education services to support vulnerable children and young people to point of recovery. They deliver truly holistic care, encompassing both physical and mental health promotion and health education to support emotional wellbeing and build resilience.
- 1.3 We are highlighting five key areas which we encourage the Committee to consider:
  - **Support investment in nurse-led initiatives** designed to promote mental health and emotional wellbeing, and identify and support children and young people with mental health conditions.
  - **Examine the sustainability and capacity of the children and young people's nursing workforce.** There has been significant cuts to the children and young people's nursing workforce since 2010<sup>1</sup>. This is coupled with increasing caseloads and patients with more complex conditions who require more personalised care.
  - **Continue to invest in continuing professional development.** We believe this it is essential to equip nurses with the expertise they need to support children and young people with complex mental health conditions.
  - **Utilise nursing expertise to build the capacity of other professionals.** We believe that everyone who works with children and young people must have completed a level of mental health training, and nurses can play an active role in delivering this.
  - **Make Personal, Social, Health Education (PSHE) mandatory on the national curriculum** to equip children and young people with the skills they need to protect their emotional wellbeing and build their resilience.

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<sup>1</sup> NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, August 2016

## Support investment in nurse-led initiatives

2. Nurse-led initiatives are in operation across the UK that are using new and effective education based approaches to promote emotional wellbeing, build resilience, and establish good mental health techniques for children and young people. These services often take a multi-sectoral approach, and at the centre of their success is the unique contribution of nursing expertise.
  - 2.1 Initiatives run by school nursing teams provide vital services for children and young people. They can provide open access drop-in services, which offer pupils a safe place to discuss a wide range of health issues, including mental health issues. For example, a school nursing team working across the boroughs of Hounslow and Richmond in London led the development of an interactive mobile app as a platform for delivering information and advice on healthcare issues to young people of secondary school age. In addition to information on topics such as sexual health, drugs and alcohol, the app also provides information dedicated to mental health and emotional wellbeing, including a specific section for young carers. The app offers a safe and discreet place for young people to access health information and enables the school nurse teams to engage directly with young people to provide safe and reliable information<sup>2</sup>.
  - 2.2 In Scotland, NHS Fife child and adolescent mental health services (CAMHS) has an established nurse-led Intensive Therapy Service (ITS), providing personalised community care for 8-18 year olds with severe and complex mental health difficulties. The multi-disciplinary team of nurses, psychiatrists, psychologists offer high-intensity home support, working closely with families, schools and services around the child to provide a holistic approach to care. NHS Fife CAMHS is being further developed, through the introduction of Primary Mental Health Workers, to expand its reach within schools, building a joint Framework for Emotional and Mental Wellbeing in collaboration with wider health services and education colleagues. The focus is on building up knowledge and capacity in schools for early recognition and response to mental health issues and the promotion of mental wellbeing.
  - 2.3 Moreover, third sector organisations are also drawing on the expertise of nursing staff to deliver mental health services in schools. Place2Be provides counselling and group therapy to pupils, families and carers, using a mix of clinical staff and volunteers. In 2015, parents reported an improvement in wellbeing for 74% of pupils who received Place2Be counselling<sup>3</sup>.
  - 2.4 We are calling for similar nurse-led initiatives to be developed and supported. To maximise their impact, they must be given sustainable funding alongside appropriate workforce capacity.

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<sup>2</sup> Royal College of Nursing, The value and contribution of nursing to public health in the UK: Final report, January 2016. Available [here](#).

<sup>3</sup> Department of Education, Counselling in schools: a blueprint for the future, February 2016. Available [here](#).

## **Examine the sustainability and capacity of the children and young people's nursing workforce**

3. We have consistently highlighted how cuts to the nursing workforce since 2010 has caused a nursing workforce crisis in England. We have seen significant reductions across a number of areas including mental health nursing<sup>4</sup>, learning disabilities nursing<sup>5</sup> and children and young people's nursing.
  - 3.1 For example, there has been a 15% decrease in school nursing posts<sup>6</sup> since 2010. In addition, we are also seeing a worrying downward trend in health visiting services. Over 900 health visitor posts have been lost in the NHS since January 2016, representing an 8% decrease<sup>7</sup>. Furthermore, the children and adolescent mental health nurses (CAMHS) nursing workforce is reducing and becoming less experienced as a result to cuts to nursing posts and downbanding of nursing roles<sup>8</sup>. This is at a time when demand for CAMHS continues to grow.
  - 3.2 In addition, our members are telling us that increasing workloads is placing a serious strain on their ability to provide high-quality and personalised care. In relation to school nurses, some members are telling us that their school nursing team covers more than 15 schools while others report consistently working in excess of their contracted hours several times a week.<sup>9</sup> This has been echoed by the National Children's Bureau<sup>10</sup> and the Children's Commissioner who reported that "*paper work, bureaucratic tasks and reactive work, are reducing their face-to-face time with children to an alarming extent*"<sup>11</sup>, undermining their ability to build relationships with children and advise them about their health and wellbeing.
  - 3.3 Moreover, a survey of looked after children nurses showed that a lack of service capacity is acting as a significant barrier to these nurses effectively carrying out their roles.<sup>2</sup>
  - 3.4 We believe that it is crucial that services commissioned to promote good mental health for children and young people are supported by a highly-skilled nursing workforce. These vulnerable groups often require specialised and holistic care, and therefore, nurses must be equipped with the right skill and expertise, as well as having enough capacity to deliver preventative care and education activities, such as mental health promotion.

## **Continue to invest in continuing professional development for nurses**

4. Continuing to invest in and build, the clinical expertise of the children and young people's nursing workforce is crucial. At a time when we are seeing increasing demand for mental health services, coupled with more complex patients who require more specialised care, we believe it is critical that we continue to invest in continuing

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<sup>4</sup> Royal College of Nursing, Frontline First: Turning back the clock? Report on mental health services in the UK, 2014. Available [here](#).

<sup>5</sup> Royal College of Nursing, Connect for Change: an update on learning disabilities services in England, 2016. Available [here](#).

<sup>6</sup> NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, August 2016

<sup>7</sup> NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, August 2016

<sup>8</sup> Royal College of Nursing, Frontline First: Turning back the clock? RCN report on mental health services in the UK, 2014. Available [here](#).

<sup>9</sup> Royal College Nursing, RCN School Nurse Survey, 2016. Available [here](#).

<sup>10</sup> National Children's Bureau, Nursing in schools, September 2016. Available [here](#).

<sup>11</sup> Children's Commissioner, Lighting Review: School Nurses, September 2016. Available [here](#).

professional development (CPD) for nurses in order to equip them with the necessary skills to support and care for vulnerable children and young people who are at risk.

- 4.1 Worryingly, at present there is a substantial reduction in the funding of education and professional development for the nursing community. In March 2016, Health Education England reduced funding for workforce development by around 50% for each of its 13 local education and training boards across the country<sup>12</sup>. As a result, some regions have faced cuts of more than 45% to CPD budgets.
- 4.2 We believe this is an extremely short sighted move. It is only by equipping nurses working in health and care environments with professional development, training and support that our existing workforce can help drive service transformation.

### **Utilise nursing expertise to build the capacity of other professionals working with children and young people**

5. We believe that everyone who works with children and young people should have some level of access to appropriate training and support to promote mental health and wellbeing. Training on mental health promotion and building resilience should be included within training programmes and a clear competency framework should be developed to test and measure skills and abilities.
- 5.1 Moreover, there is a real opportunity to draw on the expertise from different parts of the children and young people's nursing workforce to upskill education professionals, foster inter-professional collaboration, and coordinate multi-agency approaches. For example, school nurses and children and young people's mental health nurses often run training sessions for teachers and education staff on inset days. These help to upskill teachers by sharing mental health promotion techniques and helping to build their understanding of mental health prevention and communication with at risk individuals.
- 5.2 The RCN has contributed to key resources such as *MindEd* - a free educational resource on children and young people's mental health. It includes a resource for professionals and volunteers to give adults who care for or work with, young people the knowledge to support their wellbeing; the understanding to identify a child at risk of a mental health condition; and the confidence to act on their concern and, if needed, signpost to services that can help.

### **Introduce a mandatory duty on all schools to include Personal, Social, Health Education in the national curriculum.**

6. We support calls to introduce a mandatory duty on all schools to include Personal, Social, Health Education (PSHE) in the national curriculum. This should include supporting wider school policies, such as promoting the benefits of food and nutrition to improve pupils' ability to learn. Nurses see first-hand the effects on the health of young people who have not had comprehensive education around health, sex and relationships, such as obesity, mental health issues or teenage pregnancy.
- 6.1 However, it is important that staff have the appropriate skills and training to deliver PSHE lessons, that appropriate resources are invested and that there is a UK-wide standard for teaching. Ofsted reported that the quality of PSHE was inadequate in

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<sup>12</sup> Health Education England Board, 2016/17: Budget Setting and Business Plan: Paper 1, pp. 4-5, March 2016. Available [here](#).

40% of schools reviewed in 2013<sup>13</sup> and therefore, consistent provision by appropriately trained staff is essential.

6.2 The nursing community is already supporting the delivery of PSHE in schools. As specialist practitioners working across education and health, school nurses provide a link between school, home and the community. They function as both health promoters and health educators and work in collaboration with teachers, youth workers and counsellors. Furthermore, we know there is a significant appetite from the nursing community to take a more active role. In a survey of our membership, nearly 40% of respondents said that they would prefer to spend more time on PHSE activities<sup>14</sup>.

### **About the Royal College of Nursing**

The RCN is the voice of nursing across the UK and the largest professional union of nursing staff in the world.

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<sup>13</sup> Ofsted, Not yet good enough: personal, social, health and economic education in schools, May 2013. Available [here](#).

<sup>14</sup> Royal College Nursing, RCN School Nurse Survey, 2016. Available [here](#).