



Royal College of Nursing
Shaping nursing since 1916

Royal College of Nursing briefing for the Second Reading of the Children and Social Work Bill in the House of Commons

Key summary

The number of looked after children is currently at its highest point since 1985¹ and their health and wellbeing has been consistently found to be poorer than that of children and young people who have never been in care. The Children and Social Work Bill presents an opportunity for the Government to rectify this by ensuring that vulnerable children and young people get the timely access to the services they need and deserve.

We welcome amendments introduced in the House of Lords to ensure mental and physical health are treated equally by local authorities and the new approaches to mental health assessments for looked after children are steps in the right direction.

However, we believe the Government's aspiration to drive up physical and mental health outcomes for children and young people must be underpinned by the implementation of a sustainable nursing workforce, with the appropriate child specific skill mix. Cuts to the children's nursing workforce since 2010 makes the accomplishment of this goal challenging.

We are calling on the Government to:

- **Continue the universal health visitor reviews** by supporting the mandation of health visiting services for local authorities' post 2017 and for the reviews to go even further to include an additional contact at 3-4 months to identify perinatal mental health problems.
- **Recognise** the role played by looked after children, specialist, 'named' and 'designated' nurses, health visitors and school nurses in supporting the health, wellbeing and safeguarding of children and young people.
- **Commit** to developing a sustainable and long-term children's nursing workforce. There are serious pressures on the children's nursing workforce. School nursing has experienced a 13% decrease in posts since 2010², and both school nurses and looked after children's nurses' report increasing caseloads and funding cuts to services, limiting their ability to provide personalised care.
- **Stop cuts** to health visiting services. 722 health visitor posts have been lost in the NHS since January 2016, a 7% decrease³. Failure to reverse these cuts will result in intervention rates dropping and poorer health outcomes for children and young people.

¹ House of Commons Library, *Children in Care in England: Statistics*, October 2015. Available [here](#).

² NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, August 2016

³ NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, June 2016

Mandation of health visiting services

Following the transfer of 0-5 public health commissioning responsibilities in October 2015, local councils are responsible for delivering health visitor checks. At the point of transfer, statutory regulations were enacted to mandate councils to carry out five checks for all babies; an antenatal health visit; a new baby review; a 6-8 week assessment; a one year assessment; and a 2 to 2.5 year review. These checks are referred to as “universal health visitor reviews”. The regulations mandating these checks expire in March 2017.

The intention behind them is to safeguard services for families and to provide a degree of national consistency in local council’s provision to families. Health England has undertaken a review of the mandate and reported its findings and advice to Ministers in October 2016. A decision is still yet to be made whether the regulations should expire, be revised or cease altogether.

We firmly believe mandate of universal health visitor reviews must be continued. We are calling for the reviews to go even further to include an additional contact at 3-4 months to identify perinatal mental health problems.

The value and contribution of nursing to children in care

School nurses, health visitors, children’s nurses and specialist children’s mental health nurses are at the forefront of providing care to children and young people, promoting physical psychological and emotional wellbeing in families and local communities, and identifying and sign posting at risk children to the services they need.

Looked after children nurses

‘Designated Nurses’, ‘Named Nurses’ and specialist nurses for looked after children provide vital expertise in supporting children in care, including bringing together key partners to commission and deliver strong, integrated support for those in the care system. Worryingly, an RCN survey of nurses working with looked after children found that a lack of service capacity, role clarity and understanding of the importance of health care received by looked after children, are significant barriers to these nurses effectively carrying out their roles.²

Statutory guidance currently states that clinical commissioning groups are required to have access to the expertise of a designated doctor or nurse for looked after children. The role of these professionals is to assist commissioners to fulfil their responsibilities to improve the health of looked-after children. However, members report the designated nurse role in some areas is incorporating additional responsibilities, such as infection control, splitting the intended focus and potentially undermining its impact to provide a strategic focus on the needs of vulnerable children and young people.

The Bill is an opportunity to strengthen existing expectations on the NHS to appoint dedicated designated doctors or nurses for looked after children in each local area. Primary legislation is necessary to improve understanding and recognition of looked after children’s needs both at a strategic level and on the frontline.

Health visiting services

Health visitors make a significant contribution to the health and wellbeing of families and local communities through child health development programmes, generic health promotion across the lifespan, and community health. They provide invaluable support during pre and post pregnancy for women, in conditions such as postnatal depression; and monitor and assess the health and wellbeing of all infants and young children, and

work closely with other health services, including schools, to ensure that the child's health needs are met.⁴

We are extremely concerned to learn that since local authorities took over responsibility for commissioning health visiting services in October 2015, some councils have responded, as a result of decreased funding, by decommissioning, redesigning or paring back these services⁵. Overall, 722 health visitor posts have been lost in the NHS since January 2016, a 7% decrease⁶. This is a retrograde step and short term approach that will undo the progress made by the Government's *Health Visitor Implementation Plan 2011-15*.

School nurses

There has been a 13% decrease in school nursing posts since 2010⁷ and the result of removing school nurses can have a serious impact on children and young people's health and well-being by cutting the link between health services, schools and families. School nurses are increasingly providing care and support to children with additional health needs as well as child protection activities.

School nurses are in a unique position to develop relationships with education colleagues to raise awareness and help young people talk about how they are feeling. However, we know the level of support available varies between schools and a survey of our members highlighted how increasing caseloads against the back drop of cuts to school nurse numbers, funding and increasing student numbers is resulting in serious strain being placed on school nursing services⁸. This has been echoed by the National Children's Bureau⁹ as well as 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*"¹⁰, undermining their ability to build relationships with children and advise them about their health and wellbeing.

November 2016

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.

For further information, please contact:

John Considine,
Parliamentary Adviser
John.Considine@rcn.org.uk
020 7647 3731

⁴ Royal College of Nursing, *The RCN's UK position on health visiting in the early years*, July 2011

⁵ The Guardian, *The NHS trust that said no to Osborne's nightmare cuts*, 17 May 2016. Available [here](#).

⁶ NHS Digital, Health and Social Care Information Centre, Provisional NHS Hospital & Community Health Service (HCHS) monthly workforce statistics, June 2016

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

⁸ Royal College Nursing, RCN School Nurse Survey, 2016

⁹ National Children's Bureau, *Nursing in schools*, September 2016

¹⁰ Children's Commissioner, *Lighting Review: School Nurses*, September 2016.