

**School Nursing in the time of Covid:
Focus Group and Interview stage**

Summary



Background

Covid-19 had unprecedented effects on the health and wellbeing of children and young people (CYP) globally. As the pandemic progressed, school nurses (SNs) across the world swiftly adapted their practice, demonstrating flexibility and creativity to mitigate negative health outcomes for CYP and provide additional school-focused and wider public health responsibilities. SNs faced significant challenges in accessing and supporting CYP, particularly vulnerable CYP and their families. Their work became largely reactive with reduced opportunities for preventative work. Delayed identification of concerns has led to more complex problems once identified.

Aim

This qualitative stage of a mixed methods study aimed to explore the effects of Covid-19 on SN practice in the UK, with a focus on the impacts on vulnerable CYP. Data collection focused on: practical methods introduced, or accelerated, by SNs to aid practice; changes to interdisciplinary working; new practices SNs felt should endure post-pandemic.

Method

Virtual focus groups and one-to-one interviews. Twenty participants across ten sessions (six focus groups and four one-to-one interviews). All participants were practicing SNs during Covid-19; ranging in role and experience. Participants worked across state and independent schools, and with primary and secondary school-aged children. Qualitative data was reflexively thematically analysed.

Findings

CYP and families:

- considerable increase in health needs
- exacerbation of pre-existing vulnerabilities
- reduced opportunity to access other key services
- digital poverty compromised virtual contact

Service delivery:

- balancing what was needed (delivery of key services) with what was feasible, within limitations of large caseloads and compromised staffing levels

- alternative consultation modes (i.e. non-face-to-face) were introduced or used more extensively
- processes were introduced, streamlined or reconfigured ie “RAG” rating to help manage their expanding safeguarding caseloads
- new communication channels were established for MDT working

Workforce:

- redeployment: stressful for those redeployed, increased caseload and burden for those remaining
- challenges of recruiting and retaining SNs during a-typical service delivery
- challenging changes to SNs’ working arrangements (e.g. working from home, team divisions)
- pandemic-driven changes to MDT working had positive impacts on connectivity
- variability in the managerial input and support that SNs received

School nurse profile

- redeployment communicated the idea that SNs were non-essential
- raised profile led to greater understanding of the SN remit by allied professionals
- constant presence throughout the pandemic (in contrast to other professional groups) led to increasing SN visibility with CYP and families
- however, the invisibility of their work within the public arena led to feeling undervalued

Key messages

- New wave of concerns a challenge for SNs, working in depleted and exhausted teams
- Variability in SNs’ reporting of the usefulness of different methods used to engage with CYP and their families
- Concerns about an increasing reliance on virtual platforms for service provision
- A lack of clarity about the scope of SNs’ public health role prevails within the MDT
- A need for clear guidance regarding the boundaries of SN practice on local and national scale
- A need for restorative work with the SN workforce

What next?

In collaboration with key professional SN organisations, the development of a ‘toolkit’ for SNs. This will outline the range of methods that were introduced or accelerated during the pandemic to engage CYP and their families, work with the MDT, and strengthen SNs’ teamwork.