



Community Health Nurses working with primary schools

WHO ARE THE COMMUNITY HEALTH NURSES?

School Health Services are delivered in all public and private primary schools and district high schools across Western Australia. The Community Health Nurses, sometimes known as 'district nurses', who deliver the services, are employed by WA Country Health Services or Child and Adolescent Health Service (in metropolitan Perth). Teams of Community Health Nurses are based in over 30 sites across the State, from which they travel to provide services in local primary schools.

WHO ARE THEIR CLIENTS?

Community Health Nurses working in primary schools provide services to children, especially to young children and their families. They collaborate extensively with teaching and other school staff.

WHAT ARE THE HEALTH SERVICES IN PRIMARY SCHOOLS?

Community Health Nurses are primarily involved in early detection and health education. They build capacity within the schools to care for children with particular health needs, (i.e. anaphylaxis, asthma), and often assist classroom teachers with delivery of the health education curriculum, especially in the area of puberty, growth and development. A School Level Agreement is negotiated between the School Health Nurse and the Principal to guide service delivery at individual schools.

Community Health Nurses work in schools to promote healthy development and wellbeing so students may reach their full potential. A major part of their work is focussed on early intervention and the School Entry Health Assessment program. Community Health Nurses serve as a health contact point for children, and their families, providing information, assessment, health counselling and referral. They may provide;

- Information, advocacy and support for children and their parents to make informed decisions about health, wellbeing and development.
- Health and development assessments.
- Referral to other health services for further assessment, tests, diagnosis, treatment or therapy.
- Parenting advice and parenting programs (i.e. Triple P).
- Support for teachers to provide health education in the classroom.
- Student health and wellbeing programs, e.g. protective behaviours.
- Support for school health promotion initiatives.
- Facilitation of professional development for teachers, e.g. asthma or anaphylaxis.
- Help to school staff and parents to develop health care plans for students with special needs (eg chronic disease; physical disability or other complex health conditions).

As a *general rule* Community Health Nurses;

- Do not provide minor first aid. (The school is responsible for this).
- Do not administer medication.
- Do not conduct invasive physical examinations.
- Do not conduct checks for head lice.
- Do not undertake long term counselling about psychological, relationship or educational problems.

SCHOOL ENTRY HEALTH ASSESSMENTS

Community Health Nurses endeavour to conduct a **School Entry Health Assessment (SEHA)** for every child during the first year of school – usually Kindy. This universal screening program aims to detect problems with hearing, vision and development, and any other health and wellbeing issues which are of concern for parents. These assessments are usually conducted without a parent present.

Activity	Details	Timeframe
Information gathering	A parent questionnaire (CHS 409) is sent via the school to inform parents about the SEHA and seek their consent. The questionnaire facilitates collection of relevant health history and gives parents an opportunity to identify concerns.	
Prioritising	Community Health Nurses regularly liaise with teachers to identify children at risk and to prioritise assessments. Review of parental responses in the CHS 409 is another important means of establishing priority children.	Term 1-3
Assessment	<p>Screening tests are not comprehensive assessments, but highlight issues which may need further assessment and/or treatment. The tests are non-invasive and quickly applied.</p> <ul style="list-style-type: none">• Vision screening includes; LEA symbols chart (distance vision), cover and corneal light reflex tests (eye health and development). Rechecks are conducted if required.• Hearing and ear health screening involves non-invasive tests, including; audiometry (listening to sounds) and otoscopy (check of ear drum and canal). Rechecks are conducted if required.• Developmental screening includes a 'first level screen' using a parent evaluation tool (included in the CHS 409), and teacher observations. If there may be a problem, the Community Health Nurse will assess the child against expected development milestones. <p>In 2018, the SEHA forms were updated and now include Body Mass Index (BMI) and Lift the Lip (Dental Health) assessments.</p> <p>If indicated, other tests and observations are conducted for specific issues, for instance, behaviour problems.</p> <p>Nurses communicate and work with parents to provide information and support and link them to other health providers, as required.</p>	Term 2-4
Follow-up and liaison	Community Health Nurses liaise with parents to empower, support and follow-up with care and referral. Community Health Nurses liaise with teachers and school staff on matters of child health, development and wellbeing.	Ongoing
Referrals	Community Health Nurses refer clients to a range of providers for further assessment and treatment, most commonly to general practitioners and child development services. Referrals can be done collaboratively with the classroom teacher.	Ongoing

CONTACT DETAILS

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