

**PROCEDURE FOR THE HANDOVER AT SCHOOL ENTRY  
BETWEEN HEALTH VISITORS AND PUBLIC HEALTH NURSE (SCHOOLS)  
INCLUDING:  
HOME EDUCATED CHILDREN & PRIVATE EDUCATED CHILDREN**

## Child Protection Action Group

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### Distribution

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### Method

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## 1.0 Purpose of Procedure

The Nursing and Midwifery Council (NMC) 2009 believes that “record keeping is an integral part of nursing and midwifery and specialist community public health nursing practice. It is a tool of professional practice and one that should help the care process. It is not separate from this process and it is not an optional extra to be fitted in if circumstances allow.” The approach to record keeping that the court of law adopts tends to be that ‘if it is not recorded, it has not been done’ [www.nmc-uk.org/aArticle.aspx?Article=3791](http://www.nmc-uk.org/aArticle.aspx?Article=3791)

The NMC guidance also describes that the way information is recorded at key communication points such as at handover, referral and in shared care are crucial (NMC 2009).

**The purpose of this procedure is to provide practitioners with the guidance necessary to:**

- 1. Standardise communication and dissemination of information between Public Health Nurse (Schools) and Health Visitors**
- 2. Provide safe, consistent, timely and effective continuity of care at school entry**
- 3. Raise awareness of both Public Health Nurse (Schools) and Health Visitors’ professional accountability and joint responsibility to the above**
- 4. Fulfil governance requirements through the implementation and practices of ‘Getting it Right for Every Child’.**

## 2.0 Actions

To ensure the above purpose is met, the following procedures and actions must be followed:

2.1 In readiness for handover, Health Visitors must ensure that the Health Visiting Record is accurately completed and the quality reflects the standard of professional practice expected. The record will include the name of the intended school.

- Nurses in dual Health Visitor / Public Health Nurse (Schools) roles will actively update their records when the child enters school.

2.2 The Health Visitor will hand over the Health Visiting Record in its entirety to the Public Health Nurse (Schools) by the end of the second full week of the school year (this must include well being indicators (SHANARI) and ‘My World’ assessments with child’s plans).

2.3 The handover will be mutually agreed and take place by the end of the second full week of the new school year. This is a joint responsibility. The inability to comply with this, for whatever reason, must be discussed and documented in writing to the respective line manager, with an alternative solution.

- The Health Visitor will arrange the appointment by contacting the relevant Public Health Nurse (Schools) before the end of the summer term.

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2.4 NHS Highland Child Health Department (pre-school) will prepare a printout of all children of school entry age on 1<sup>st</sup> July of each year. The Child Health Department will issue this printout to each Health Visitor.

*Argyll and Bute Child Health Surveillance Schools will prepare a print out of all children of school entry age on 1<sup>st</sup> July each year and issue to each Health Visitor.*

- The Health Visitor and the Public Health Nurse (Schools) will sign beside the name of each relevant child to confirm that the handover has taken place.
- A copy will be retained by each party, including Child Health for 18 months.

2.5 The Highland Director of Education *and Argyll and Bute Education Department* have stated that all schools will provide Health with an up to date school roll for Primary One, Secondary One and any other movements of children in to and out of schools.

- The Public Health Nurse (Schools) is responsible for cross-referencing the school roll list with the handover list. This must be completed within a month of the commencement of the school term.
- Failure by the school to provide the school roll to the Public Health Nurse (Schools) must be reported to the Child Protection & Screening Admin Manager based at Morven House, Raigmore Hospital.

2.6 Discrepancies in the cross-referencing of the two lists must be followed up by the Public Health Nurse (Schools) as follows:

- (a) Where the Public Health Nurse (Schools) holds notes but the child does not present at the school, the Public Health Nurse (Schools) will treat this as a matter of urgency. The Public Health Nurse (Schools) is responsible for ensuring that the location of the child is actively pursued. Failure to locate the child must be reported to the Child Protection Advisor in their locality. This process will be documented.
- (b) Where the child presents at the school but the Public Health Nurse (Schools) holds no notes, the Public Health Nurse (Schools) is responsible for actively locating the notes using normal procedures. A temporary record must only be made by the Child Health Records Team, Morven House, until original notes are acquired. Duplicate notes must **NOT** be made. This process will be documented.

2.7 Where the child moves from primary to secondary school, and a change of public health nurse (schools) occurs the same handover procedure should be followed.

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### 3.0 References

GIRFEC 'getting it right for every child' The Highland Pathfinder Guidance March 2008

Nursing and Midwifery Council NMC The Code: Standards of Conduct Performance and Ethics for Nurses and Midwives 2008

NMC Record keeping: Guidance for nurses and midwives 2009

[www.nmc-uk.org](http://www.nmc-uk.org)

Scottish Executive Protecting Children: A Shared Responsibility January 2000

Scottish Executive A Scottish Framework for Nursing in Schools 2003

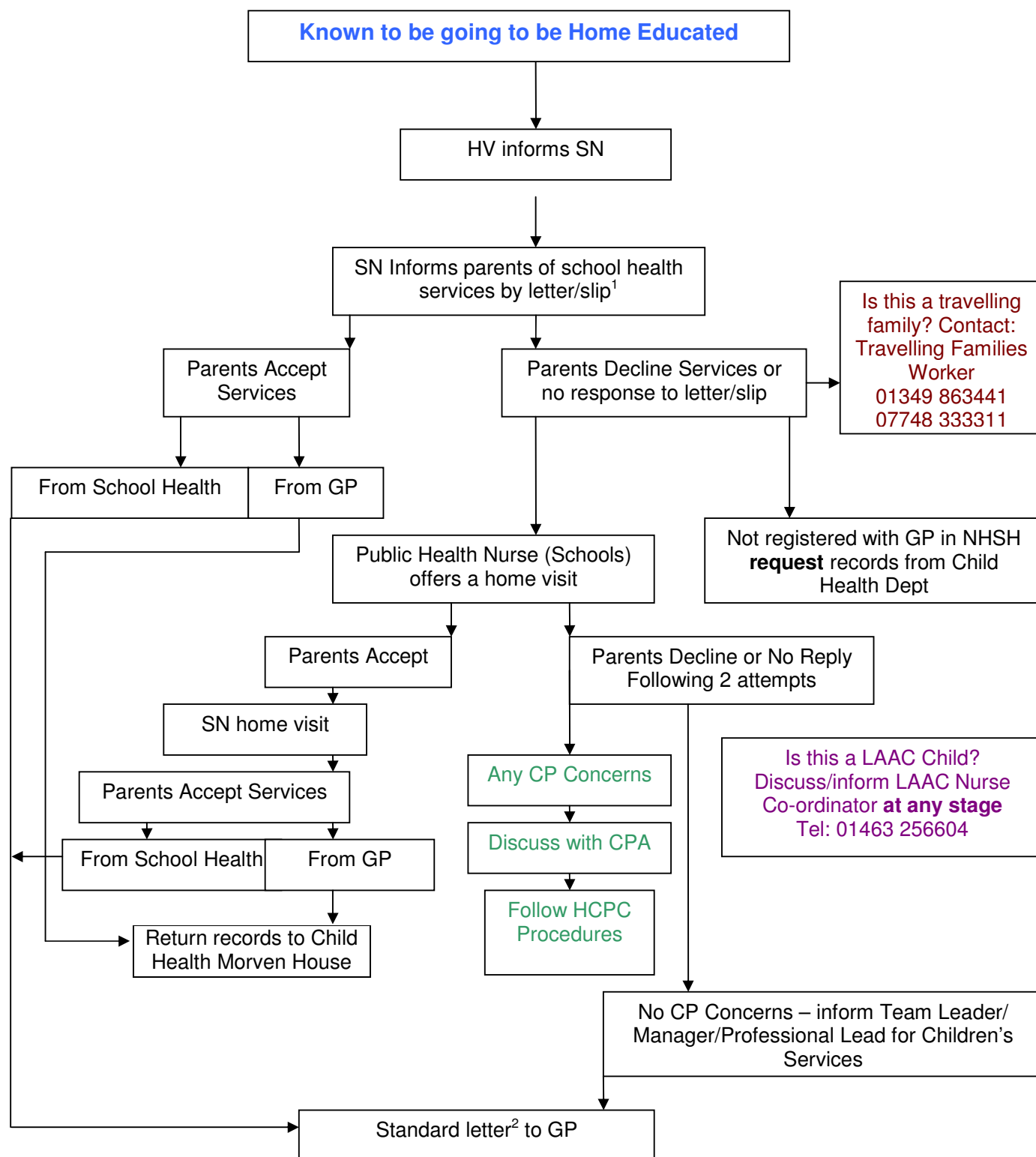
Scottish Executive Sharing Information about Children at Risk: a guide to good practice 2003

Scottish Executive Protecting children and young people: Framework for Standards 2004

Scottish Executive, Safe and Well – The National Framework for Standards for Protecting Children and Young People 2005

The Lord Laming The Protection of Children in England: A Progress Report March 200

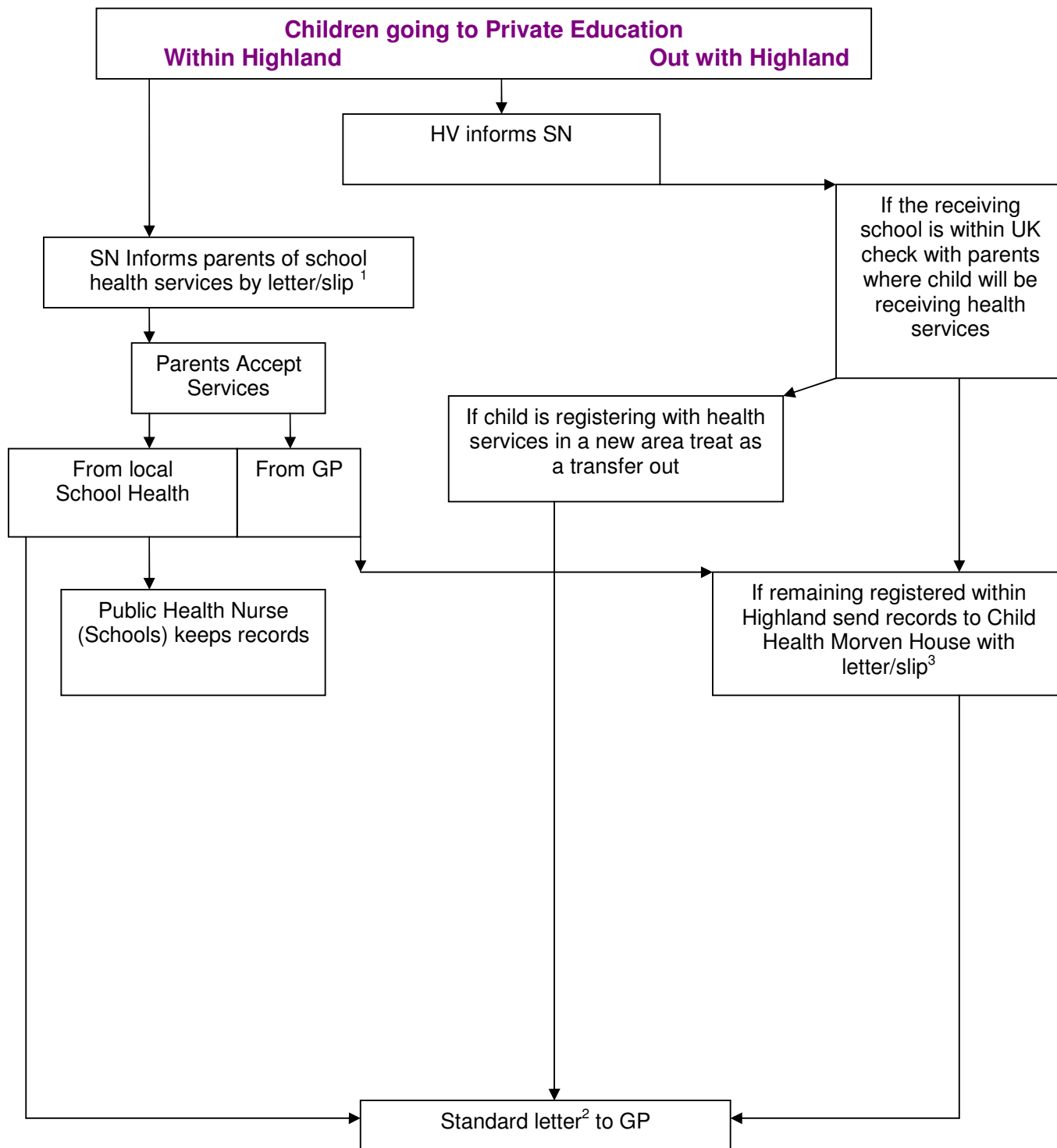
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**ALWAYS DOCUMENT EACH STAGE IN RECORDS**

4.2

Appendix 2



**ANY CHILD PROTECTION CONCERNS DISCUSS WITH CPA AND FOLLOW HIGHLAND CHILD PROTECTION PROCEDURES**

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## STANDARD LETTER/RETURN SLIP 1 FOR PARENTS/CARERS re HEALTH SERVICES

4.3

*If you require this document in an alternative format please contact the clinic directly as per letterhead*

*Textphone users can contact NHS Highland directly via Typetalk 0800 959 598*

[Insert department here]  
[Insert address here]  
[Insert address here]  
Telephone [Insert number here]  
Fax [Insert number here]  
www.show.scot.nhs.uk/nhshhighland/



Parent(s) /carers details

Date  
Your Ref  
Our Ref  
CHI  
Enquiries  
Direct Line  
Email [firstname] [surname]@nhs.net

Dear Mr and Mrs Bloggs

### CHILD'S NAME, DOB/CHI, ADDRESS

As your child is of school age this year and not going to be attending your local school I am writing to advise you of the child health services available for your child for routine health checks and immunisations.

*Please tick preferred choice, sign and return to above address*

You can be offered an appointment at your local school and the Public Health Nurse (Schools) will keep you informed of child health checks and immunisation dates

You can discuss/attend your GP

**Signature:**

**Relationship to child:**

**Date:**

It is our NHS Highland policy to inform your GP and the Public Health Nurse (Schools) of your preferred choice.

Should your child have additional needs this will be discussed with you, your paediatrician will be informed.

Yours sincerely

Name

Title Health Visitor

cc General Practitioner  
Health Visitor/Public Health Nurse (Schools)  
Paediatrician

*Working with you to make Highland the healthy place to be*

Chairman: Mr Gary Coutts  
Chief Executive: Dr Roger Gibbins BA MBA PhD

NHS Highland, Assynt House, Beechwood Park, INVERNESS  
IV2 3HG

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**STANDARD LETTER 2 TO GP**

[Insert department here]  
 [Insert address here]  
 [Insert address here]  
 Telephone [Insert number here]  
 Fax [Insert number here]  
 www.show.scot.nhs.uk/nhshhighland/



General Practitioner

Date  
 Your Ref  
 Our Ref  
 CHI  
 Enquiries  
 Direct Line  
 Email [firstname] [surname]@nhs.net

Dear Doctor

**CHILD'S NAME, DOB/CHI, ADDRESS**

Joe Bloggs is due to start at school this year. His/her parents/carers have decided to home educate/private educate at:

It is the choice of the parents/carers to have Joe's health checks /immunisations offered/administered by

- The Public Health Nurse (Schools) at: (*insert location*)
- From your GP practice

(*delete as appropriate*)

Other

Yours sincerely

Name  
 Title

cc Health Visitor/Public Health Nurse (Schools)  
 Paediatrician

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[Insert department here]  
 [Insert address here]  
 [Insert address here]  
 Telephone [Insert number here]  
 Fax [Insert number here]  
 www.show.scot.nhs.uk/nhshhighland/



Date  
 Your Ref  
 Our Ref  
 CHI  
 Enquiries  
 Direct Line  
 Email [firstname] [surname]@nhs.net

Dear

**CHILD'S NAME, DOB/CHI, ADDRESS**

**Joe Bloggs** is to be educated at:

His/her immunisations and child health checks will be offered/administered by:

I am returning the records for local storage/extended storage (eg if overseas/SAFFA).

**Joe Bloggs** will/will not return home for holidays and I may/may not need to request them

- *Insert additional information if relevant:*

(Our NHS Highland policy is to return most records from children educated out of area for safe storage to Child Health Department. The records can easily be retrieved if requested.)

Yours sincerely

Name  
 Title

cc General Practitioner  
 Health Visitor/Public Health Nurse (Schools)

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