Royal College of Nursing (Scotland)

Evidence to the Education and Culture Committee on the Principles of the Children and Young People (Scotland) Bill

July 2013
The Royal College of Nursing is pleased to respond to the Scottish Parliament’s Education and Culture Committee’s call for written evidence on the general principles of the Children and Young People (Scotland) Bill. The Royal College of Nursing (RCN) is the UK’s largest professional association and union for nurses with around 400,000 members, of which around 39,000 are in Scotland. Nurses and health care support workers make up the majority of those working in health services and their contribution is vital to delivery of the Scottish Government’s policy objectives.

The Royal College of Nursing welcomes the Children and Young People (Scotland) Bill and the opportunities it presents to make a positive difference to children’s rights and children’s services in Scotland. The Bill presents the Scottish Government with an opportunity to invest in the lives of children in the early years; supporting all families through a well resourced, statutory, universal health visiting service and targeting additional support in a timely way, which could lead to positive change for a whole generation.

In our evidence, we have chosen to focus on two parts of the Bill: part 3, the provision for children’s services planning and part 4, the provision of named persons. Our evidence then goes on to outline the proposal that an additional entitlement to health visiting services should be added to the Bill.

**RCN views on provisions within the Bill and their possible impact**

**Part 3 - Children’s Services Planning**
A key policy objective of the Children and Young People Bill is to ‘improve the way services support children and families by promoting cooperation between services’. In our responses to consultations on this Bill and the Adult Health and Social Care Integration Bill, the RCN raised concerns that the two separate legislative proposals would set up different approaches to the planning, delivery and governance of integrated services for different age groups. At a time when frontline practitioners will be expected to deliver seamless integrated services for whole families and communities, we questioned the effectiveness of having two different approaches rather than offering one simple, streamlined approach to support staff in their efforts to deliver integrated services. We are still concerned that the proposed planning and governance systems within the two published Bills are not connected and could therefore fail to improve the way services support both children and adults. The complexity in running two parallel systems risks complicating, rather than promoting, cooperation.

Along with other organisations, the RCN proposed that the adult integration Bill be renamed, without reference to age groups so that all approaches to delivering integrated care and support could be focused through a single piece of joined-up legislation. The Scottish Government subsequently changed the title of the original adult Bill to the Public Bodies (Joint Working) (Scotland) Bill, which we believe could give the necessary freedom to expand the scope of integrated services across whole families and communities. However, Part 3 of the Children and Young People’s Bill sets out a separate approach to the planning of children’s services, so we continue to query the need for two separate Bills addressing the planning of services.
Part 4 – Provision of Named Persons
The RCN welcomes the role of named person in relation to pre-school children as set out in Section 20 of the Bill, which states that the health board is the service provider to take the lead for pre-school children.

We believe, however, that the regulations associated with the Bill should clearly and specifically state that the Named Person (following on from maternity services) for under 5s is a **health visitor** (a nurse on the specialist community public health nurse part of the Nursing and Midwifery Council register). Health visitors are trusted by the public¹ and have a unique role in supporting and assessing the development of all children in the early years and ensuring they are referred to specialist colleagues in a timely way.

To continue to provide this vital preventative support in the early years, health visiting capacity across Scotland needs to be reviewed. The number of health visitors must reflect the workload associated with the Named Person role, including the coordination of a team approach to early intervention. Workforce planning must take into account local need and be based on robust workforce plans using agreed caseload weighting tools which are put in place at both local and national level. This will ensure the ongoing sustainability of the health visiting workforce across Scotland and, crucially, enable the Scottish Government and health boards to plan the necessary workforce based on community need.

The financial memorandum to the Bill makes it clear that there will be additional resource required for the implementation of the Named Person service across Scotland. These additional costs are associated with freeing health visiting staff for training around their new duties as Named Person and the additional time associated with the creation of a Child’s Plan where needed.

**Relevant issues which are not currently included within the Bill**

The RCN fully supports the need to fundamentally reform children’s services in line with the report of the Christie Commission, which highlighted the importance of early years and prevention. We recognise that the Scottish Government is pursuing a range of policy initiatives and alternative approaches as part of its agenda to improve the lives of young people. Yet we remain convinced that within Part 3 of the Bill, the fundamental role of health visitors in providing a universal service to children and families in the early years should be enshrined in legislation.

Parents tell us that they value the role of health visitors as a point of contact and someone to turn to for advice and support. Two surveys have been undertaken by Ipsos Mori on behalf of Parenting across Scotland which showed that depending on the specific issue they are facing, parents rely on health visitors, for information and advice on parenting issues².

¹ Parenting across Scotland (2010) What Scottish parents tell us – summary of Ipsos Mori poll undertaken for Parenting across Scotland
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² Parenting across Scotland (2010) What Scottish parents tell us – summary of Ipsos Mori poll undertaken for Parenting across Scotland
A recent comprehensive review of the research evidence on health visiting concluded that the benefits of health visiting interventions can be “hard to gauge because of the complex situations in which families exist. Nonetheless some apparently small changes (such as more relaxed mothering, improved mother-child interactions or early identification of post-natal depression) have been found to translate into immediate and long-term benefits, either later in an infant’s life, or through improved parental confidence in services, leading to their better use.” The research team recommendation for policy was that “Health visitors can make the difference expected . . . if they have appropriate skill sets and services, delivered using specific programmes and interventions, (and) are organised in a way that enable appropriate use of those skills in practice.”

This important study, when put together with a wealth of other evidence, suggests that health visiting interventions, when well planned and co-ordinated, reduce problems in later childhood, promote self-care and resilience, and prevent ill health throughout life. It is for these reasons that the RCN believes that the proposed Children and Young People Bill should include a statutory entitlement to universal services from health visiting teams for all under-fives.

This prioritises prevention at a time when health visitors on the ground are experiencing a high degree of pressure to focus on complex child protection cases and there is considerable variation in the contact time that parents have with health visitors within and across areas of Scotland. An emphasis on early intervention is at the heart of the Children and Young People Bill proposals and we believe that giving children a right to consistent early years support from health visiting within the bill is the only way to ensure that universal preventative care is provided. This is in line with the priorities of the Scottish Draft Budget 2013-14 that is clear about the importance of early intervention, which can only happen as a result of universal screening and assessment: “Evidence shows that a failure to intervene effectively to address the complex needs in the early years of an individual’s life can result in a nine-fold increase in direct public costs over the long term.”

The RCN has launched a major campaign with Children in Scotland, Parenting across Scotland, Scotland’s Commissioner for Children and Young People, the Community Practitioners and Health Visitors Association (CPHVA), the Royal College of General Practitioners, the Queens Nursing Institute Scotland and the Institute of Health Visiting. All these organisations are campaigning for a new statutory entitlement to universal services from health visiting teams for all under-fives to be added within the Bill.

Parenting across Scotland (2008) What Scottish parents tell us - summary of Ipsos Mori poll undertaken for Parenting across Scotland


As demonstrated by the partners within our campaign alliance, the nursing profession is not alone in the view that investment in health visiting services and making this a legal right for families is key to the Scottish Government’s approach to primary prevention. For example, John Carnochan, Former Chief Superintendent with Strathclyde Police and Co-Director and one of the founders of the Violence Reduction Unit has written:

“The need for primary prevention strategies that focus on the Early Years are now accepted by the Scottish Government, who are working hard to make the shift to prevention possible. . . . Health visitors are a profession that currently work in this crucial area of public service, delivering significant positive outcomes for children and families in every community in Scotland. . . . I have said publicly that to deliver primary prevention Scotland it would be better to invest in extra health visitors even at the expense of other public services, including the police; I still believe this. It is my personal view that their suitability for fulfilling the key role in delivering an Early Years strategy for Scotland is without equal. I fully support and commend the suggested inclusions in the Bill that would facilitate and enable health visitors to play the pivotal professional role in children’s lives. 6"

It is our view that a statutory entitlement within the Children and Young People (Scotland) Bill will protect health visiting services for children in the early years and their families and this will pay dividends for future generations. This builds on existing cross party commitment within Scottish Parliament to prioritise preventative services.

If you would like to discuss any issue further, please contact Clare Mayo, Policy Adviser,
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6 John Carnochan writing for Health Visitors for Scotland campaign website http://www.rcn.org.uk/scotlandhealthvisitors