

Standards of proficiency for specialist community public health nursing

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Introduction

The Nursing and Midwifery Council has a duty to review the standards of proficiency it sets for the professions it registers on a regular basis to ensure that standards remain contemporary and fit for purpose in order to protect the public. In reviewing these standards, we have taken into account new evidence and the changes taking place in society, and in health and care.

Developing ambitious new outcome focused standards of proficiency for specialist community public health nurses (SCPHNs) will ensure that future health visitors (HVs), occupational health nurses (OHNs) and school nurses (SNs) lead, influence and make a difference to people and public health services.

These new draft standards were developed during an unprecedented global pandemic that continues to affect people, communities and populations across the world. In the UK, as in other countries, Covid-19 has not affected all population groups equally. Inequalities caused by wider determinants of health have increased the risk of adverse outcomes from Covid-19. This pandemic has exposed and exacerbated long standing inequalities and poorer health outcomes affecting people from black and minority ethnic groups within the UK. It is therefore fitting that early studies and learning from the Covid-19 pandemic have influenced and contributed to the evidence base that informed the drafting of these standards.

The role of the specialist community public health nurse in the 21st century

Specialist community public health nurses (SCPHNs) are culturally competent, autonomous practitioners who are committed to improving people's health and seeking to reduce health inequalities across the diverse communities and populations of the UK.

They will work with people to prevent ill health, protect health and promote wellbeing. Using a formidable evidence base they will lead, influence and collaborate with other agencies and organisations to improve and embed sustainable changes to the overall health and wellbeing of people at home, within communities, in schools and in the workplace. SCPHNs will commit to safeguard those people who are most vulnerable in society and be ambitious for the communities they serve. They will actively pursue [sustainable development goals](#) that promote everyone's right to a healthy life.

The role of the SCPHN health visitor in the 21st century

Health visitors are in the front line of public health. They are uniquely placed to reach every child in their own home, and to be connected to their whole family and community. They build trusting relationships with individuals and families, understanding their needs and strengths to empower them to positively influence their health outcomes.

Health visitors' interpersonal qualities and communication skills enable them to build relationships with parents and families quickly, identify health needs early and deliver timely, effective, evidence-based interventions in partnership with them. They provide a universal service that ensures support for children and families is personalised, effective, timely and proportionate. The needs and the welfare of the child are at all times central to their work.

Health visitors use their professional autonomy to adapt and tailor their response to the health and wellbeing needs of individuals, families and communities within diverse and changing contexts. They are sensitive to different cultural perspectives and use in-depth knowledge of local communities to develop strong community relationships and to connect families with the community resources that best meet their needs.

Health visitors are advocates for fairness, equity and social justice and will use their influence to challenge discriminatory practices and behaviours. They understand the impact of the wider determinants of health and are committed to reducing health inequalities through prevention and early intervention and the promotion and improvement of health.

They lead services that are client and evidence driven, and policy influenced, with creativity and resourcefulness, and evaluate the impact of their interventions to continuously improve the quality of care and outcomes for families. They maximise the impact of the service by working within a collaborative system, planning and coordinating care and maintaining continuity across different services and agencies. They embrace and champion new technologies and are skilled in leading changes in service delivery.

The role of the SCPHN occupational health nurse in the 21st century

Occupational health nurses lead and work in a range of working environments and businesses. They lead services to enhance the health and wellbeing of people in their workplaces and beyond. Working autonomously, they promote health and protect the workforce ensuring a healthy balance between work and wellbeing. As a distinct group of public health professionals, they help to prevent work-related ill health and disease, designing workplaces that are safe, efficient and inclusive.

Occupational health nurses collaborate with other professionals, industry experts, employers and employees to lead workplace health initiatives responsive to the needs of individuals and organisations. They adopt a data-driven approach, ably combining their specialist nursing skills with broader understanding and experience of the unique sector they work in to embed health

initiatives in the wider organisational planning. This creates a positive impact on families and communities, helping to address some of the socio-economic inequalities that deeply influence individual capabilities and societal wellbeing.

Applying their professional judgement and business acumen, occupational health nurses create innovative strategies for inclusive workplaces that enable people of varied abilities to be productively employed.

They champion the need for workplace health and wellbeing strategies that recognise the impact of health on work and the value of work to health. Recognising the value of a diverse working population, occupational health nurses embed [person-centred](#) approaches to health that address the needs of a varied workforce.

They are change agents who influence at strategic and industry level, thinking globally but acting locally, to create a healthy workforce for the present and the future.

The role of the SCPHN school nurse in the 21st century

School nurses lead services which aim to improve the health and wellbeing of the school age population and they are able to provide local support for children and young people in educational and other community settings.

They are autonomous practitioners and champions for children's rights. Working collaboratively across health, education and other services, and as an integral part of a broader evidence-based public health service, school nurses advocate for better health for all children and young people, seeking to ensure that services are inclusive, anti-discriminatory and advance health and wellbeing.

School nurses understand the wider determinants of health and are committed to reducing health inequalities across the life course, through health education, health promotion and evidence-based early interventions.

Using a variety of advanced communication skills, school nurses build trusting relationships with children and young people, their parents, carers and families. School nurses listen to children and young people.

Using their professional judgement, school nurses provide culturally appropriate support and early interventions which aim to promote positive lifestyle choices and reduce risk-taking behaviours. They improve and support the physical, mental and emotional health and wellbeing of the school age population.

About these draft standards

These draft standards have been developed through an extensive and rigorous process of evidence review and engagement with people across the UK, including members of the public, nurses, midwives, health visitors, occupational health nurses, school nurses, students, educators, employers, multidisciplinary colleagues, professional organisations, researchers, policy makers, and charity and advocacy groups.

They reflect best practice evidence on the health, wellbeing, public health needs, views and preferences of people, families, communities and wider populations. These draft standards align with the recommendations of government positions on public health strategy, policy and intention in each of the four UK nations (England, Northern Ireland, Scotland and Wales).

These standards take into account the changing context in which health visitors, occupational health nurses and school nurses work and practice in the UK today. They signal future ambitions to show that SCPHN registrants are ideally placed to make a difference to public health and the wellbeing of people of all ages, and across communities and populations.

Positive changes in these new outcome-focused draft standards include the ways that SCPHN practitioners use a contemporary public health evidence base to drive their practice, ensuring that they are at the forefront in influencing changes to tackle health inequity, aid those in poverty, and importantly in providing support and interventions to those most in need.

Public health challenges exist across all of society, from the pandemic of obesity to the significant increase in people of all ages at risk of living with type two diabetes. Equally there is a need to protect and safeguard those people who are most vulnerable, and to support people who are affected by ill health and its impact on their ability to make choices about their well-being, and/or their participation in early years and school age education or work including deployment or unemployment.

SCPHNs are uniquely placed to encourage people to make choices about their own mental and physical health and wellbeing. They know their community, its assets and areas where new initiatives are needed. Working autonomously and collaboratively, SCPHNs are formidable frontline professionals who make a difference to the health outcomes of people, communities and populations.

How to read these draft standards

The draft proficiencies in this document specify the knowledge, skills and behaviours that registered nurses and midwives go on to achieve in order to support and care for people, communities and populations across the life course in specialist community public health nursing roles. They reflect what the public can expect health visitors, occupational health nurses and school nurses to know and be able to do in order to lead, collaborate, promote, protect and prevent ill health across the life course.

These standards of proficiency consist of:

- **Core standards of proficiency** that apply to **all** fields of SCPHN practice – health visitors, occupational health nurses and school nurses, and are grouped under six headings called spheres of influence, and;
- **SCPHN field specific standards of proficiency** that apply to **each of the following** fields of SCPHN practice: health visitors, occupational health nurses and school nurses, and are grouped under four of the six spheres of influence.

The headings for the six spheres of influence are:

- Autonomous specialist community public health nursing practice
 - **Core standards of proficiency that apply to all fields of SCPHN practice for HV, OHN and SN**
- Transforming specialist community public health nursing practice; evidence, research, evaluation and translation
 - **Core standards of proficiency that apply to all fields of SCPHN practice for HV, OHN and SN**
- Promoting human rights and tackling inequalities: assessment, surveillance and intervention
 - **Core standards of proficiency that apply to all fields of SCPHN practice and field specific standards of proficiency for HV, OHN and SN**
- Population health: enabling, supporting and improving health outcomes of people across the life course
 - **Core standards of proficiency that apply to all fields of SCPHN practice and field specific standards for HV, OHN and SN**
- Advancing public health services and promoting healthy places, environments and cultures
 - **Core standards of proficiency that apply to all fields of SCPHN practice and field specific standards of proficiency for HV, OHN and SN**
- Leading and collaborating: from investment to action and dissemination
 - **Core standards of proficiency that apply to all fields of SCPHN practice and field specific standards of proficiency for HV, OHN and SN**

These proficiencies will provide new post-graduate specialist community public health nurses entering the profession with the knowledge, skills and behaviours they need at the point of registration. SCPHN health visitors, occupational health nurses and school nurses will build on this knowledge and understanding and these skills as they gain experience and fulfil their professional responsibility. They will demonstrate their commitment to develop as a SCPHN in their chosen field of SCPHN practice and to build a career pathway, engaging in ongoing education and professional development opportunities necessary for revalidation.

Specialist Community Public Health Nursing (SCPHN)

Health Visiting (HV), Occupational Health Nursing (OHN), School Nursing (SN)

SCPHN core proficiencies	SCPHN field specific proficiencies
A Autonomous specialist community public health nursing practice	
B Transforming specialist community public health nursing practice: evidence, research, evaluation and translation	
C Promoting human rights and tackling inequalities: assessment, surveillance and intervention	HV OHN SN
D Population health: enabling, supporting and improving health outcomes of people across the life course	HV OHN SN
E Advancing public health services and promoting healthy places, environments and cultures	HV OHN SN
F Leading and collaborating: from investment to action and dissemination	HV OHN SN

These standards of proficiency apply to all NMC registered SCPHN HVs, OHNs and SNs. They should be read alongside Realising professionalism: Standards for education and training, which set out our expectations regarding provision of all pre-registration and post-registration NMC approved nursing and midwifery education programmes.

These standards apply to all approved education providers and are set out in three parts:

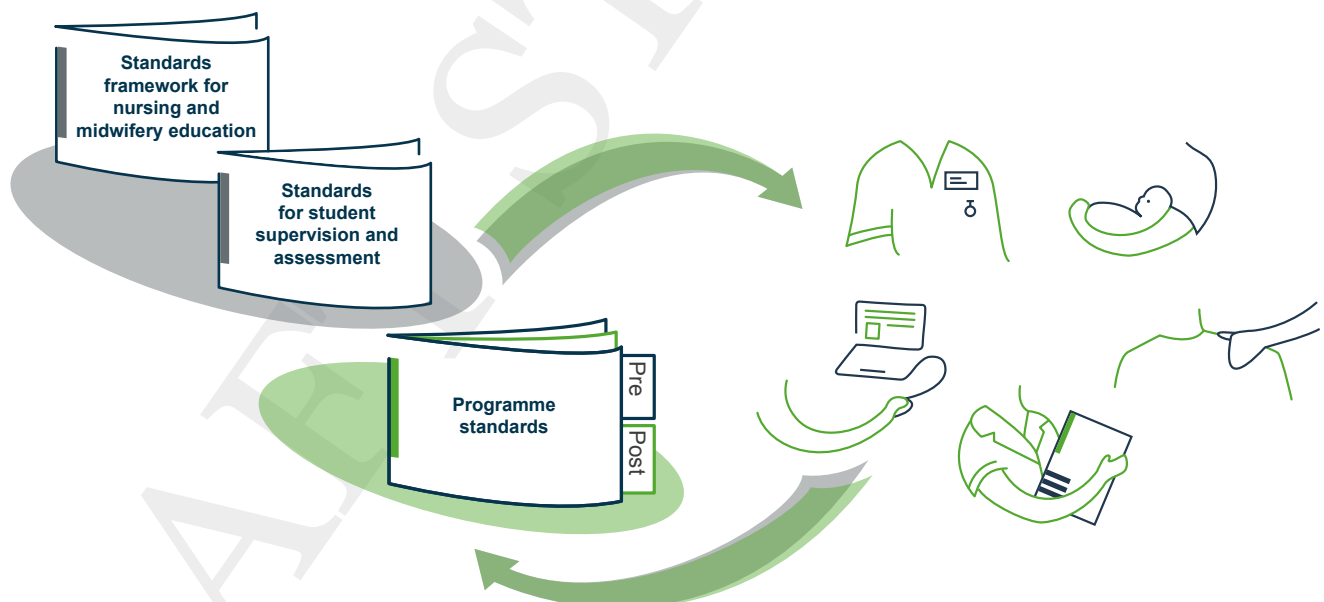
- [Part 1: Standards framework for nursing and midwifery education](#)
- [Part 2: Standards for student supervision and assessment](#)
- Part 3: Programme standards, which are the standards specific for each pre-registration or post-registration programme.

Education institutions must comply with our standards to be approved to run any NMC approved programmes. Together these standards aim to provide approved education institutions (AEIs) and their practice learning partners with the flexibility to develop innovative approaches to education for SCPHN health visitors, occupational health nurses and school nurses, while being accountable for the local provision and management of approved post-registration SCPHN programmes in line with our standards. This is shown in the diagram below.

Standards for education and training

Standards of proficiency

for nursing and midwifery professions



Legislative framework

Article 15(1) of the Nursing and Midwifery Order 2001 ('the Order') requires the Council to establish standards for education and training which are necessary to achieve the standards of proficiency for admission to the register, as required by Article 5(2) of the Order. The standards for nursing and midwifery education providers are established under the provision of Article 15(1) of the Order.

Article 5(2) of the Nursing and Midwifery Order 2001 requires the NMC to establish standards of proficiency necessary to be admitted to each part of the register and for safe and effective practice under that part of the register. The standards of proficiency have been established under this provision.

As SCPHN standards are post-registration standards, individuals can only enter the SCPHN part of the register if they are a registered nurse or midwife and have successfully met all the requirements of their NMC approved SCPHN programme. Only those on our register can use the protected title of specialist community public health nurse.

Sphere of influence A

Autonomous specialist community public health nursing practice

Health visitors, occupational health nurses and school nurses understand that health and access to health support is a fundamental human right. They use their professional autonomy to adapt and tailor their response to the health and wellbeing needs of people and communities within diverse and changing contexts at home, in school and in the workplace. They are sensitive to different cultural perspectives and advocate for and protect those people, communities and populations who are most vulnerable. They are innovative, creative, promote health literacy and maximise the use of new technologies in their day to day practice.

Registered nurses with this qualification will be able to:

1. demonstrate the ability to practise with a high level of autonomy, entrepreneurship and innovation as a specialist community public health nurse
2. use an expanded knowledge of the links between global and national socio-economic and political agendas and public health to drive and influence their own field of practice
3. expertly apply relevant legal, regulatory and governance requirements, policies and ethical frameworks to all areas of specialist community public health practice, differentiating between the devolved legislatures of the UK
4. lead on the application of legislation, guidance and advice regarding sustainable development goals, including environmental factors that affect the health and wellbeing of people now and in the future
5. influence and promote health as a fundamental human right and as a [shared value](#) through engagement, inclusion and participation
6. make professional judgements and decisions, and work in complex, unfamiliar and unpredictable environments, proactively identifying actions and solutions to problems that may have many interacting factors
7. demonstrate [cultural competence](#) and speak up against discriminatory, oppressive cultures and behaviours, including those in the work environment
8. demonstrate critical awareness of the impact of [unconscious bias](#) and take action to raise awareness of and address unconscious bias
9. recognise the need for and lead on action to provide reasonable adjustments for people, groups and communities, influencing public health policy change and best practice

10. demonstrate the advanced numeracy, literacy, digital and technological skills required to meet the needs of people, communities and the wider population, to ensure safe and effective specialist public health nursing practice
11. use safe and effective independent and supplementary prescribing (V300) and medicines administration, optimisation and medicines reconciliation.

Sphere of influence B

Transforming specialist community public health nursing practice: evidence, research, evaluation and translation

Health visitors, occupational health nurses and school nurses locate, critique, use, generate and apply evidence, data and information that seeks to promote health and prevent ill health and disability from non-communicable diseases and conditions. They are capable of evaluating public health interventions to better understand what works. They propose new ideas and concepts when innovation is needed to inform and improve the health and wellbeing of people across the life course and in disseminating evidence programmes and interventions.

At the point of registration, the registered SCPHN HV, OHN and SN will be able to:

1. assess the impact and benefits of local and national health and other policies on the health and wellbeing of people, communities and populations
2. identify, evaluate and skilfully use multiple sources of evidence and research relevant to people, communities and populations to inform specialist community public health practice
3. identify gaps in research, evidence and policy that impact on public health nursing practice and influence how to address those gaps
4. utilise and know how to participate in new areas of research across interdisciplinary and multiagency teams related to public health priorities and community and population level interventions
5. use reliable data, statistics and informatics to support policies and programmes that improve the health outcomes of people, communities and populations
6. identify gaps in public health informatics related to public health priorities and national intervention strategies and how this may be addressed by refining data sets or in recognising the need for further study to inform best practice
7. critically appraise epidemiological research and demonstrate its use in evidence-based specialist public health nursing practice

8. synthesise and apply knowledge from research, evaluation and global innovation that leads to improvements in the health of people, communities and populations and reduces health inequalities
9. use public health and nursing science in practice at community and population levels and support innovative approaches to influence people's motivation, lifestyle choices and behaviours
10. critically appraise the evidence that informs innovative approaches to public health programmes, including genomics, and evaluate progress and outcomes
11. share outcomes and lessons learned from research and evaluation in specialist public health nursing practice locally and nationally and across sectors through professional and peer reviewed processes.

Sphere of influence C

Promoting human rights and tackling inequalities: assessment, surveillance and intervention

Health visitors are ideally placed to identify, highlight and tackle health inequalities due to their unique reach into every family and their deep understanding of the broader determinants that affect the physical, social, mental, spiritual and emotional health and wellbeing of children, parents, carers and families. They actively seek to uphold the human rights of all of those they engage with, and advocate on behalf of those who are vulnerable or unable to speak up for themselves.

Occupational health nurses use their specialist knowledge to recognise the value of work to health and the impact of health on work. They lead on the creation of occupational health nursing services that meet the needs of a diverse workforce, ensuring the promotion and protection of health and wellbeing. Using their knowledge and experience of the wider socio-economic influences on health and work, they plan interventions that are suitable to the specific sectors and organisations that they work with, bringing in a person-centred approach.

School nurses uphold the rights of children and young people, they identify and address health inequalities in the school aged population. School nurses use their expert knowledge of the wider determinants of health which affect physical, mental, emotional and spiritual health and wellbeing to highlight needs, risks and vulnerability and to advocate for children and young people. They consider the home dynamic and complexity for looked after children and young people, they support children and young people living, learning and developing in a range of different circumstances.

At the point of registration, the registered SCPHN HV, OHN and SN will be able to:

1. critically analyse the causes of health inequalities and health inequity in communities and populations and take appropriate action to mitigate their impact on people and families
2. demonstrate compassionate leadership in applying human rights, equality, diversity and inclusion, to improve the health and wellbeing of people, communities and populations
3. appreciate the legal, ethical, moral and spiritual needs and challenges that may be faced when promoting population health, helping to remove barriers to enable people and families to live to their full potential
4. assess the impact of complexity and comorbidity and their impact on people, communities and populations, in order to share knowledge and lead on person-centred public health approaches
5. develop, promote and support opportunities to educate individuals on the risks to themselves and others of the abuse of tobacco, alcohol and other substances or potentially addictive behaviours
6. conduct, interpret and evaluate health assessment and screening, surveillance and profiling checks, and immunisation and vaccination programmes for people, communities and populations
7. ensure equitable and accessible services to all through improved health literacy communication and networking
8. consult with, listen to and support people, communities and populations when assessing and planning public health interventions
9. use models, evidence and concepts to plan, conduct and evaluate population level interventions to address specific public health issues
10. apply understanding of determinants of health to develop culturally responsive and inclusive public health interventions with people, communities and populations
11. lead on identifying vulnerable people, families, communities and populations and take action to support, safeguard and protect them and coordinate timely emergency care and support when needed
12. implement targeted nationwide initiatives and local interventions designed to offset ill health.

Health visiting

At the point of registration, the SCPHN health visitor will be able to:

1. critically analyse and apply evidence-based knowledge of the broader determinants of health, intergenerational cycles of deprivation and health inequalities that affect the physical, mental, social, emotional and spiritual health and wellbeing of children, parents, carers and families
2. continually assess and skilfully adapt to different environments and complex situations in order to identify and advocate for those families most at risk, while at all times safeguarding the welfare of the child and others at risk
3. play a significant role in promoting mental health for parents, families, infants and children during the perinatal period and in the assessment and early identification of perinatal mental ill health, providing care and support where appropriate and facilitating access to specialist services according to the level of need
4. promote infant mental health and early identification of infant distress, and provide support to families to enable them to respond to their baby's needs
5. initiate appropriate evidence-based interventions to promote healthy relationships and minimise risks of domestic violence, child maltreatment and other forms of abuse within the family through using evidence-based knowledge of healthy relationships, the epidemiology of domestic violence and abuse and the developmental impact of parental conflict on children
6. use their professional judgement to observe, recognise and respond to signs of abuse and neglect in infants, children, young people or adults.

Occupational health nursing

At the point of registration, the SCPHN occupational health nurse will be able to:

1. synthesise their specialist knowledge and experience to appraise the impact of socio-economic and political issues on work and health to implement occupational health interventions
2. lead an occupational health service that is open, holistic, inclusive and responsive to wider socio-economic and health concerns including but not limited to safeguarding and abuse within and outside the workplace
3. evaluate the relationship between work, life, physical and mental health and ill health to lead on proactive organisational approaches to promote and protect health and wellbeing within and outside the workplace

4. lead the development, delivery and evaluation of inclusive, multifunctional occupational health services that meet the diverse needs of employees and organisations, adopting a life course approach.

School nursing

At the point of registration, the SCPHN school nurse will be able to:

1. use specialist evidence-based knowledge to identify vulnerability and inequality within the school community, identifying those needing support and those at risk
2. connect with, safeguard and prioritise support for children and young people most at risk, escalating concerns and providing specialist expertise for safeguarding and child protection pathways within and external to the school environment
3. evaluate the impact of intergenerational cycles of dependency and adversity on children and young people and the opportunities and protective factors presented by early help and interventions
4. use specialist evidence-based knowledge of safeguarding, mental capacity, consent, and confidentiality for children and young people to critically analyse, reflect and manage challenges and potential conflicts related to consent and confidentiality
5. foster positive relationships and facilitate inclusion in the school community, applying specialist knowledge about the potential impact of unconscious bias and assumptions that people make about children and young people, including those with long term and complex conditions, disabilities and neurodiversity
6. demonstrate knowledge and understanding of identity and how to support children and young people to develop their identity, considering factors that influence identity, including sex, gender, sexuality, ethnicity, culture, socio-economic status and intersectionality
7. evaluate and identify gaps in available support for children and young people in the school community who are living with long term conditions, complex needs and disabilities or those without a diagnosis and maximise access and support according to age and maturity.

Sphere of influence D

Population health: enabling, supporting and improving health outcomes of people across the life course

Health visitors take the lead role in ensuring that the physical, social, mental, spiritual and emotional health and wellbeing of children, parents, carers, families, communities and populations is maintained, improved and protected. They understand and apply knowledge of genomics, the life course and human development. This includes child development trajectories and processes of adjustment, and the anatomy, neurodevelopment, physiology and epigenetics of the newborn.

They support all those they engage with to make informed decisions and choices, while always ensuring that the rights and welfare of the child are protected and safeguarded. They proactively develop open and meaningful dialogue with families to develop mutually trusting relationships and use their advanced assessment and communication skills to assess need and prioritise support based on risk. They assess health needs within local communities and use their knowledge of [community assets](#) to improve access to appropriate services and protect and promote health through a wide variety of interventions that aim to improve community and population health.

Occupational health nurses use their specialist knowledge and professional judgement to interpret legislation and industry principles to develop inclusive workplace strategies that enable people of all abilities to remain productively in work. They use evidence informed approaches for designing occupational health services that add value to employees and employers.

School nurses are able to use their expert knowledge of the development of children and young people and apply that understanding to improve health outcomes. School nurses work with children and young people, throughout the formative years. Using age appropriate interventions school nurses support and empower children and young people in their life choices and they safeguard and protect those that are vulnerable.

At the point of registration, the registered SCPHN HV, OHN and SN will be able to:

1. recognise, critically evaluate and monitor trends in global and national strategies and programmes for preventative interventions and promotion of health to inform specialist public health practice locally and globally
2. appreciate and use community assets to support positive health and wellbeing of people and communities
3. in partnership with people, adopt a life course approach when assessing the public health needs of people, places, communities and populations

- empower people, communities and populations to connect effectively with local initiatives, support networks, community assets, programmes and resources that support their health and wellbeing
- expertly apply knowledge of behavioural, psychological and social sciences to the health of populations, communities and specialist public health practice that enhances collaborative, strength-based therapeutic relationships
- use culturally appropriate, evidence-based approaches to assess, support, monitor and appropriately refer to specialist services
- critically apply knowledge of populations, places, communities and social determinants of health to inform key areas of specialist public health practice
- in partnership with communities, develop and implement plans for specific communities and populations to deliver public health outcomes
- assess the health status and health literacy of populations and their related determinants of health across the life course
- lead and contribute on policy and reporting into environmental, [social-structural factors](#) and behaviours that impact on population health across the life course
- use data and observation to evaluate the effectiveness and acceptability of services that seek to improve health outcomes of their intended users, and be able to highlight with them any need for improvement.

Health visiting

At the point of registration, the SCPHN health visitor will be able to:

- apply expert knowledge and the skilled use of validated tools to deliver holistic health assessments and programmed development reviews, working in partnership with parents to promote health and identify emergent and existing concerns including vulnerability and inequality, and facilitate and prioritise support or early intervention for the child and family as appropriate
- assess and diagnose the early signs of atypical patterns of development or significant anomalies likely to result in disability, and of emotional or health needs or risks, and deliver evidence-informed anticipatory guidance or targeted intervention tailored to individual and family circumstances and needs
- work in partnership with families to assess, re-assess and appraise the impact of changing circumstances and relationships on child and family health and wellbeing and adapt support accordingly, acknowledging the needs of the family as a whole and prioritising support on the basis of risk and need

4. work in partnership with families to promote, educate and support sensitive, responsive relationships between parents and their children through the application of specialist knowledge of early emotional development, theories and models of attachment and the impacts of positive and enduring parental-child relationships
5. evaluate the effects of trauma on child development and how they adjust to those effects, and work in partnership with children and families who are affected by trauma to strengthen their resilience
6. critically apply specialist knowledge of the anatomy, neurodevelopment, physiology and epigenetics of infant feeding, including the implications of infant feeding for child and maternal health, child physical and socio-emotional development and later behaviour patterns
7. work in partnership with children and families to identify risks to healthy weight in childhood, including childhood obesity, malnutrition and body image, promoting family nutrition and supporting them to make positive lifestyle choices, and referring to other services according to need and risk
8. work in partnership with families to promote the benefits of children learning life skills in the home environment
9. support parents, families and children who receive a life changing or life limiting diagnosis in the early years, including following antenatal screening, and in partnership with them use a strengths-based and empowering approach to respond to resulting needs, which may be complex
10. use expert knowledge to facilitate access to a range of appropriate and effective available resources to support children, parents and families with additional needs due to mental ill health, learning disabilities or physical disability, and/or with multiple, complex, long term conditions
11. instil self-confidence in parents, carers and families by advising them on symptom identification and relief, thereby enabling them to manage minor illnesses and injuries competently and effectively, while also diagnosing and referring cases onwards for further treatment where necessary
12. provide expert, evidence-based support and advice on child, adolescent and adult sexual and reproductive health and contraception
13. provide expert, evidence-based support to bereaved parents, children and families in the event of miscarriage, stillbirth or parental death.

Occupational health nursing

At the point of registration, the SCPHN occupational health nurse will be able to:

1. use evidence to justify the impact and value of occupational health services for employees, organisations and the wider population
2. apply specialist knowledge when making professional judgement to interpret and advise on case law, health and safety legislation and the principles of occupational hygiene, engineering controls and ergonomics
3. critically analyse how diseases, illnesses and impairments act as barriers to gaining, sustaining and returning to work and the impact of this on all areas of life
4. develop inclusive strategies that enable innovative, person-centred approaches for employees who may need adaptations and adjustments to their work due to health reasons
5. develop evidence-informed strategies to support and enable employees with multiple or long term conditions to have sustainable, productive and fulfilling work
6. provide specialist, personalised occupational health advice on work adjustments to employees and employers which considers the impact of diagnoses, therapies, interventions, medications and treatments.

School nursing

At the point of registration, the SCPHN school nurse will be able to:

1. critically analyse and apply knowledge of the [biopsychosocial](#), moral and spiritual development of children and young people at differing and key phases in the life course
2. evaluate how age and biopsychosocial development influence communication skills in children and young people, using advanced communication techniques which facilitate positive, trusting relationships with children and young people, parents, carers and families
3. evaluate how biopsychosocial influences in adolescent years impact on behaviour, life skills and transition to adulthood, recognising adolescence as a distinct stage of the life course
4. assess the impact of key transition periods for children and young people including starting and leaving school, change of care provider, illness and bereavement, and through evidence-based intervention support children and young people in developing self-managing behaviours
5. use a range of evidence-based interventions to support the school age population's transitions which demonstrate how collaboration and professional knowledge and skills positively impact safe transition to adulthood

6. optimise positive behaviours in parents, carers, families and peers and, through evidence-based interventions, promote trust and [self-efficacy](#) to improve health and wellbeing for children and young people
7. use evidence-based observations, assessment and professional judgement to minimise the risk of adverse childhood experiences and to support and guide children and young people, parents and carers in prevention and mitigation
8. through skilful observations, assessment and using professional judgement demonstrate knowledge and understanding of children and young people's emotional literacy, cognitive ability, wellbeing and resilience skills development
9. use professional judgement to identify children and young people experiencing low mood and anxiety and through early assessment and sustained interventions support emotional and mental health and wellbeing
10. evaluate how professional judgement and evidence-based intervention help children and young people consider the impacts of and risks associated with specific behaviour choices related to social media, alcohol/substances, violence, exploitation, gangs and potential involvement with youth justice
11. evaluate the effects of trauma on children and young people's development and adjustment and use culturally appropriate, evidence-based, trauma-informed approaches to assess, support, monitor and use professional judgement when making decisions to refer to specialist services
12. enable and support evidence-based peer mentoring between children and young people and aid development of positive behaviours and influencing skills in children and young people
13. signpost and support children and young people, parents, carers and families to local grants, financial support and other services and resources to develop self-advocacy, capability, opportunity and motivation to influence and use facilities/assets in their community.

Sphere of influence E

Advancing public health services and promoting healthy places, environments and cultures

Health visitors actively seek out opportunities to promote and improve health visiting services and the quality of care that is delivered to children, parents, carers and families by their services. They promote healthy environments for infants and children to grow up in as well as working attitudes and cultures that acknowledge and respect the uniquely individual nature of each home setting and family unit.

Occupational health nurses put health and wellbeing at the core of job design and workplace strategies. With their specialist inputs they help to embed employee health and wellbeing initiatives within the business planning cycle, leading on environmentally sound and ambitious strategies. They recognise the impact of new and emerging technologies on work harnessing technology to improved participation in work for all.

School nurses work with educators and authorities and in local communities to promote healthy environments, places and cultures. They recognise that contextual factors have an impact on an individual's lived experience. School nurses continually strive to improve the visibility of their service to ensure it is accessible to children and young people.

At the point of registration, the registered SCPHN HV, OHN and SN will be able to:

1. critically appraise what improves home, community and workplace cultures and environments and use this to enhance the health and wellbeing of people and communities in the places they live, learn and work
2. critically appraise the use of new and assistive technologies that will support people's choices for their own health and wellbeing and access services that influence the health of people, communities and populations
3. demonstrate professional business and financial acumen when developing and presenting business cases that create investment for change and value for money
4. tailor nationwide programmes or commission new services that promote healthy cultures, environments and behaviours for local implementation
5. lead and support a culture of learning and continuous professional development for colleagues, and with interdisciplinary and multiagency teams
6. promote and lead effective public health workplace cultures that benefit people and communities

7. advance public health through identifying sustainable development goals and prepare to take action on risks to the environment
8. protect public health by enabling the application of communicable disease surveillance, infection prevention and control, including immunisation and vaccination programmes
9. know how to assess and manage major incidents and outbreaks including contamination and communicable disease locally and across wider boundaries
10. know how to identify, critically analyse and manage new and enduring risks and hazards to health at local, national and global levels
11. plan for emergencies and pandemic threats to population health taking account of the direct and wider risks, impacts and [hierarchy of controls](#) on health and wellbeing and service provision.

Health visiting

At the point of registration, the SCPHN health visitor will be able to:

1. work with parents and carers to promote child safety, reduce risk behaviours and enhance awareness of the differentials of risk in relation to the child's age and stage of development
2. respect parents' and carers' need for autonomy and control with sensitivity to a wide range of attitudes, beliefs, expectations and approaches to parenting, while at all times safeguarding the welfare of the child
3. demonstrate sensitivity and respect for privacy in assessing whether the child or family's home situation and environment is appropriate for facilitating and encouraging open discussion and disclosure of personal issues
4. evaluate community health needs and assets and enhance practice through community profiling, the synthesis and application of data informatics and other techniques
5. develop sustainable and innovative health visiting strategies with long term aims and evaluation that contribute effectively to [place-based complex interventions](#), meeting internal and external audit requirements.

Occupational health nursing

At the point of registration, the SCPHN occupational health nurse will be able to:

1. develop sustainable, data-driven occupational health strategies with short, medium and long term aims to improve employee health and wellbeing, embedded as part of the business improvement cycle
2. focus on inclusion and innovation in job design to lead, improve and innovate ways to address health hazards by elimination, mitigation and control
3. lead on the organisational response to safe, appropriate and economically viable approaches to clinical waste management, infection control and minimising the impact of environmental pollution on health and wellbeing
4. critically examine and use the hierarchy of controls to manage risks to health, safety and wellbeing in the workplace
5. appraise and anticipate the impact of new and emerging technology to improve [workability](#) now and in the future
6. facilitate workplace adjustments that enable wider participation of people in work, critically using assistive technologies which focus on health in job design
7. evaluate the impact of job redesign and [worklessness](#) on the health and wellbeing of people
8. critically appraise and use assistive technologies, recognising their potentially varied impact on individual's work and health.

School nursing

At the point of registration the registered school nurse will be able to:

1. use community and population profiling to identify and assess community needs, and support collaborative cultural and community developments that improve health and wellbeing in the school age population
2. design and lead on local health education and health promotion campaigns aligned to key public health priorities for the school age population
3. raise awareness of the impact of socio-economic disadvantage and digital poverty and work with others to facilitate policy changes that support children and young people in achieving their potential
4. explore the lived experiences which impact children's and young people's behaviour, health and wellbeing, holding children's and young people's needs as paramount when working in partnership with others and planning interventions to improve health and wellbeing for the school age population.

Sphere of influence F

Leading and collaborating: from investment to action and dissemination

Health visitors take the leading role in providing and coordinating care to infants, children, parents, carers and families, as well as managing caseloads and prioritising the delivery of health visiting services. They promote collaborative working, not only in terms of leading and working within multidisciplinary teams and ensuring smooth transition between services, but also by working in partnership with families, communities and populations to provide a safe, effective and person-centred universal health visiting service that addresses the physical, social, mental, spiritual and emotional health needs of all they engage with.

Occupational health nurses are leaders of services, with the ability to influence at policy and strategy level. They bring their unique nursing knowledge and skills, combining them with their business acumen skills to plan occupational interventions that are tailored to the specific requirements of the employees and organisations they work with.

School nurses lead services that prioritise and implement the public health agenda for the school age population, collaborating with children and young people, parents, carers, families and educators to ensure that public health initiatives are disseminated to the local population. School nurses advocate for children and young people and they promote safe and effective universal services.

At the point of registration, the registered SCPHN HV, OHN and SN will be able to:

1. drive public health services that promote and improve health and wellbeing of people, communities and populations
2. lead teams that are effective in delivering public health services, both on their own and in collaboration with others
3. influence policy development and strategic planning that addresses population health needs and builds approaches for prevention and risk management
4. monitor and report on the outcomes of strategy and policy implementation and make recommendations for improvement including changes to commissioning
5. evaluate service requirement and efficacy and be able to triangulate outcome measurements of audit, continuous improvement methodologies, governance, risk management and performance
6. compassionately lead and support a culture of critical reflection and continuous professional development that promotes team and interdisciplinary learning

7. build alliances and partnerships that support collaboration and sharing of new ideas and solutions, and be able to agree shared goals and priorities
8. be an ambassador, role model and passionate leader in public health nursing to promote, influence and effect change that improves the health outcomes and strengthens the wellbeing of the people and communities served
9. use a range of advanced communication skills with people, communities, peers and interdisciplinary and multiagency colleagues including those using digital technology and virtual and remote environments
10. communicate simple and complex public health information that is tailored for different community and population audiences
11. challenge and persuade at peer and strategic levels on public health issues that affect people, communities and populations.

Health visiting

At the point of registration, the SCPHN health visitor will be able to:

1. apply high-level communication and interpersonal skills to establish trusting relationships with all families that are respectful of their capabilities, priorities and values
2. lead creative, flexible approaches to engage and collaborate with parents and carers in child health promotion programmes, including advising and supporting decision making
3. lead discussions and make decisions in conjunction with other professionals regarding the referral, support and management of children and families where there are concerns around the wellbeing of the child, based on an assessment of complex situations and on knowledge of the child and family
4. work in partnership with midwives and other primary and secondary health and social care professionals, services and agencies during the antenatal period and first days of the baby's life to ensure consistency and continuity of care for parents and carers, and a smooth transition between midwifery and health visiting services
5. work in partnership with school nurses to ensure the transition of support for the child from the health visitor to the school nursing service is positive, seamless and effective.

Occupational health nursing

At the point of registration, the SCPHN occupational health nurse will be able to:

1. triangulate and appraise organisational and workforce profiling data to secure resources for the development and delivery of occupational health and employee wellbeing
2. create information and data collection, retrieval and dissemination protocols for enhancing occupational health nursing practice
3. develop and promote innovative, evidence-informed workplace protocols and strategies that are capable of leading a safe and effective occupational health nursing service
4. influence organisational policy and strategy for employee health and wellbeing linking to national and international public health agendas and strategies
5. critically apply business acumen to develop and promote evidence-based occupational health and wellbeing initiatives that take account of economic and non-economic resources
6. quantify and qualify the positive impact of occupational health interventions on business targets and outcomes.

School nursing

At the point of registration, the SCPHN school nurse will be able to:

1. synthesise data, information and intelligence about health priorities for home, school and community environments and using professional judgement determine how this can be used to positively impact individual and community health and wellbeing for the school age population
2. advocate for children and young people in public health services, ensuring their voice is heard, supporting co-production, co-design and development at universal, targeted and specialist service levels
3. design and lead evidence-informed school nursing services, educational campaigns and co-produced interventions aligned to regional and national public health initiatives to protect and promote the health and wellbeing of children and young people
4. use specialist expertise and public health knowledge, skills and evidence when influencing and advocating for the safety and wellbeing of children and young people at multiagency collaborations, meetings and hearings
5. capture the lived experience and lived existence of children and young people of this generation and evaluate how this influences and informs current and future specialist practice, policy decisions and design of services

6. promote visibility of school nursing services and ensure accessibility through engagement with children and young people, parents, carers, families, school staff, other professionals and voluntary sector organisations with methods and skills which recognise and respect children and young people's privacy and dignity when accessing support and services
7. critically analyse the opportunities, benefits and risks for school nursing services when communicating with children and young people face to face and via social media and virtual platforms.

Glossary

Biopsychosocial: a model that assumes that biological, psychological and social factors must be considered to understand disease, illness and health.

Community assets: resources that can be used to contribute to developing and improving local health and wellbeing. It may include people and their knowledge, skill, networks and relationships, physical structures, local services, businesses charities and funds.

Cultural competence: knowledge, skills and attitudes needed to support and provide health and care services to people that is respectful, responsive and honours the culturally based needs of diverse populations.

Hierarchy of controls: a step-by-step approach to eliminating or reducing risks, ranking risk controls from the highest level of protection and reliability through to the lowest and least reliable protection.

Holistic assessment: collection, analysis and sorting of multiple sources of observation and information about a person or people to inform interventions to improve health. The focus is on the whole person, not just a potential or actual illness.

Person-centred: an approach where the person is at the centre of the decision making processes and the design of their health and care needs, their public health nursing care and treatment plan. In the context of public health this can also apply to public health services.

Place-based interventions: service providers, communities and civic partners working together to improve health and care for the populations they serve.

Self-efficacy: belief in one's own capability to organise and take action which could influence the adoption and maintenance of health-promoting behaviour.

Shared value: awareness of behaviours and attitudes to health and recognition that individuals, families, workplace, communities and populations have a role in improving health for all.

Social-structural factors: the social environment, physical environment, health services, and structural and societal factors that can influence health.

Sustainable development goals: development of institutions, infrastructure and services to end poverty and protect the environment, aims which go beyond health and wellbeing as set out by the United Nations <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

Unconscious bias: underlying attitudes and stereotypes that people unconsciously attribute to another person or group of people that affect how they understand and engage with people and groups. When focused on social class, race, ethnicity, religious beliefs, gender, and nationality unconscious bias can have negative consequences.

Workability: consideration of people's health and their ability to work.

Worklessness: having no paid work or employment, may be extended to people who are unable to work or be employed as a result of disability, carer responsibilities, students and pensioners.



The role of the Nursing and Midwifery Council

What we do

Our vision is safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing. As the regulator of almost 725,000 nursing and midwifery professionals, we have an important role to play in making this a reality.

Our core role is to regulate. First, we promote high professional standards for nurses and midwives across the UK, and nursing associates in England. Second, we maintain the register of professionals eligible to practise. Third, we investigate concerns about nurses, midwives and nursing associates— something that affects less than one percent of professionals each year.

To regulate well, we support our professions and the public. We create resources and guidance that are useful throughout people's careers, helping them to deliver our standards in practice and address new challenges. We also support people involved in our investigations, and we're increasing our visibility so people feel engaged and empowered to shape our work.

Regulating and supporting our professions allows us to influence health and social care. We share intelligence from our regulatory activities and work with our partners to support workforce planning and sector-wide decision making. We use our voice to speak up for a healthy and inclusive working environment for our professions.

These standards were approved by Council at their meeting on (DATE TBC).