



**City of Helsinki**

Department of Social Services and Health Care



# Collaboration within schools: the role of Finnish school doctors

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26.3.2015





## Municipal health care in Helsinki

- City of 625 000 inhabitants
- Social Services and Health Care united →
  - 15 000 employees
  - € 2.1 billion /year
    - 25 health centers
- School and student health care:
  - 100 000 pupils and students
  - 246 schools/ colleges, >200 addresses for school health care
    - 125 school health nurses
- **25+1 vacancies for full –time school doctors**



# What is a school doctor for in Finland?

- Expectations towards a school doctor:
  - Families and school personnel: a physician to be consulted
  - Employer & the Finnish law: health check-ups

26.3.2015



# Government gave detailed instructions for health check-ups 2011

- A mandatory check up by a nurse every year
- A mandatory "extensive" health check-up by a nurse AND a doctor  
3 times during the 9 year comprehensive school
- One meeting with a doctor on the secondary level

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## An extensive health check up



- Preceding
  - Questionnaire for the pupil
  - Questionnaire for the parent
  - Questionnaire for the teacher, if allowed by the parents
- Interview & physical screenings of the child by a nurse
- Meeting with the physician (30minutes)
  - A least one parent should be present



## Meeting with the physician (30minutes)

- The information gathered by the questionnaires and the nurse
- A least one parent should be present
- A full picture of the whole family:
  - Physical health, growth and development
  - Psycosocial health & development
  - Parental & the child's own concerns
  - Concerns raised by the school professionals
  - Risks for the healthy future
- Recording the comprehensive history, status, summary & plans
- In theory, 10 check -ups during a day





## Should school doctors do anything else but check ups?



- **Employer:** no.
  - School doctors should stick to preventive health care and perform 10 check ups /day.
- **Doctors:** yes!
  - It is unethical not to tackle the problems detected in the check ups
  - Questionable to refer everyone to secondary care
  - Consultations of the school nurse and other school professionals



## School and student care in Finland

- Include
  - School health nurse
    - responsible for 600 pupils, 1-3 schools
  - School doctor
    - responsible for 2100-5000 pupils
- AND (dep. of education)
- psychologist,
- social worker,
- special education teacher





## Theory does not equal practice

- **10 check-ups/day seldom possible** because
  - Immigrants and a need for interpretation
  - A lot of kids with special needs
  - No-shows common
  - Information technology problems common
  - A lot of interruptions by the pupils
  - Variety of concerns by the parents
- Acute somatic and psychosocial crises
  - extensive check -up success rate ~70%
  - Stressful situation for the nurses
  - Frustration of the doctors





## Brainstorming

9 colleagues discussed in a group >  
draft

- > all school doctors
- > approval of the bosses
- > Distribution to collaborators





## Brainstorming (1): what does a school doctor do?

1. Health check- ups:
  - a) Mandatory extensive health check-ups
  - b) Mandatory check-ups in colleges
  - c) Individual needs : immigrants, pupils in special education
2. Control visits
3. Consultations to the nurse and school personnel
4. Multi-professional co-working
5. Other tasks: first aid, lecturing etc.



## Brainstorming (2): what do we prioritize?

- 1. Multi-professional co-working**
2. Health check- ups:
  - a) Individual needs
  - b) Mandatory broad check ups
  - c) Mandatory check ups in colleges
3. Control visits
4. Consultations to the nurse and school personnel
5. Other tasks: first aid, lecturing etc.



## Brainstorming (2): what do we prioritize?

1. Multi-professional co-working
2. Health check- ups:
  - a) **Individual needs**
  - b) Mandatory broad check ups
  - c) Mandatory check ups in colleges
3. Control visits
4. Consultations to the nurse and school personnel
5. Other tasks: first aid, lecturing etc.



## Brainstorming (3): The nurses are told to

- book only 8 visits in advance > last two visits a week before
- book 60 minutes for psychosocial problems and immigrants
- book 60-90 minutes for multi-professional negotiations
- guide the somatic concerns to health center, except for
  - growth and pubertal concerns
  - weight concerns
  - suspicion of scoliosis



26.3.2015



## **Brainstorming (4):division of work between school health care and health station**



- Psychological and psychosocial matters are dealt in both places
- Growth, puberty, weight gain and loss and suspected scoliosis: primarily handled by the school doctor
- Long term illnesses: periodic examinations make sure that treatment and follow-up are proceeding as planned.
- Acne, stomach problems, headache, bed-wetting, allergies etc:if revealed during health examination, the doctor provides preliminary treatment > directs health station
- Cold, cough, asthma diagnostics and follow up at a health station



## Just a beginning...

- Lessens the pressure on individual doctors and nurses?
- Encourages the student welfare personnel to consult and call for meetings?
- Equality among citizens?
- Equality among schools?

