Helsedirektoratet
Norwegian Directorate of Health

Case study from Norway: health stations and school health service

Norwegian Directorate of Health, 26. October 2021

Norway

- Population: 5.3 million
- All residents are entitled to publicly funded health care services
- Health expenditure 2018: 10.2% of GDP
- Two main sources of revenue: The general tax system (85%) and households' out of pocket payments (15%)

Health system overview

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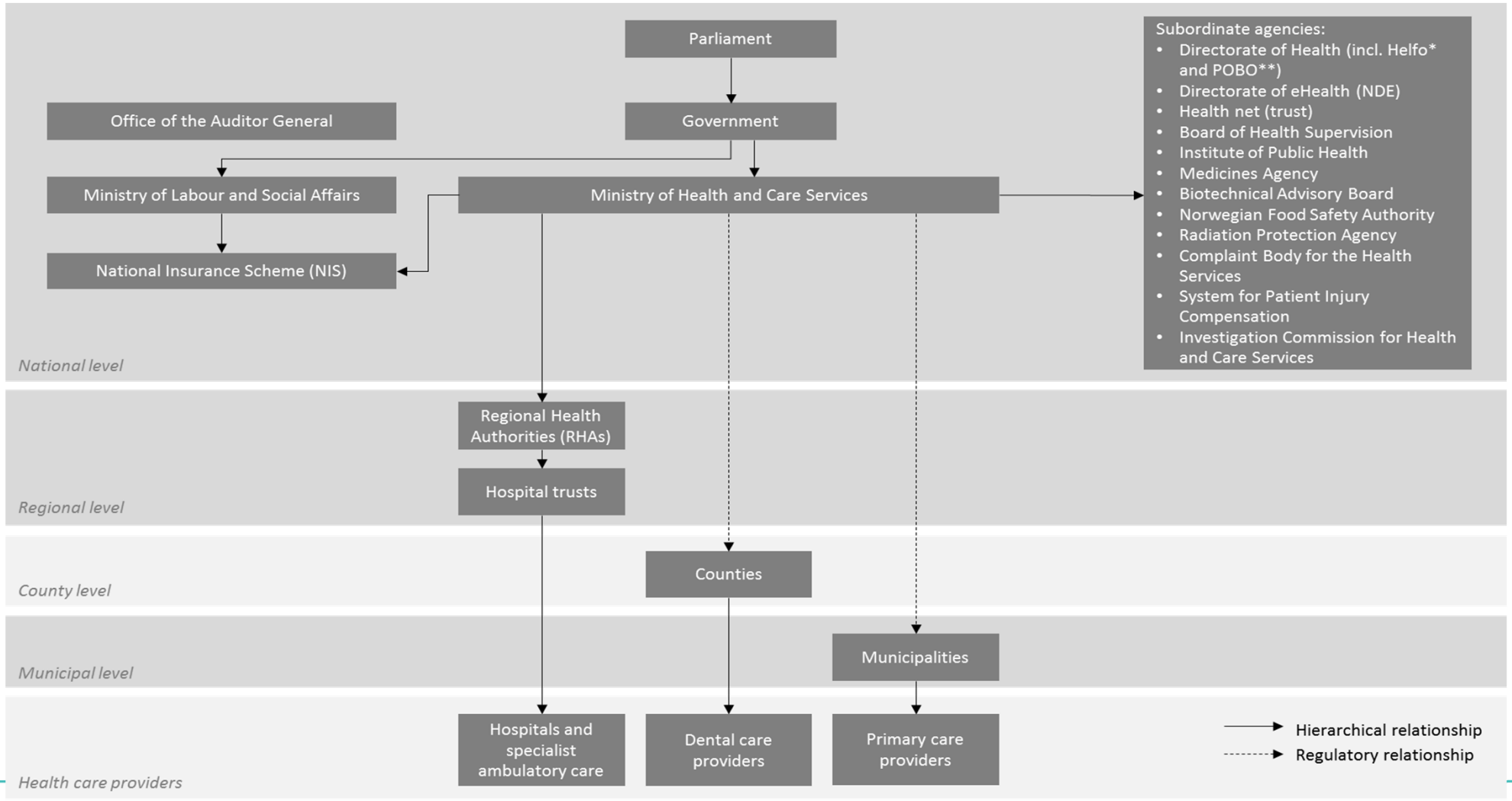
Organisation and governance



Human resources

- Doctors per 1000: 4.9
- Nurses per 1 000: 18
- Health workforce projections indicate shortage by 2035

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Health information systems

Electronic patient record systems widely used.

The sector consists of many independent actors who are responsible for their own HIS-systems.

System enablers of community care

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The history of todays health centres

- 1890: high infant mortality rates in Norway.
- Two precursors : children's care centres run by the church and health centres run by the Norwegian Women's Public Health Association.
- 1911: The first health centre for mother and child opened. Aim improve hygiene and nutrition & prevent infection.
- As living standards improved, the focus shifted to health promotion and prevention.

Low-threashold service for everyone

- The health centre service is a statutory, universal and readily available low-threshold service for all pregnant women, children and their parents, regardless of their social status.
- Services are freely available to all residents, and no one can purchase any additional services.
- All families encounter the health centre on the first level, which will assess and review whether the family is in need of additional services.
- Those with individual needs may also encounter the second level, while a few with special needs will require services provided at the third level.

Child and youth health centres and school health services – legal basis


Photo: Ole Walter Jacobsen

- The Health and Care Services Act: The municipality must offer health-promoting and preventive services, including health services in schools, and child health services

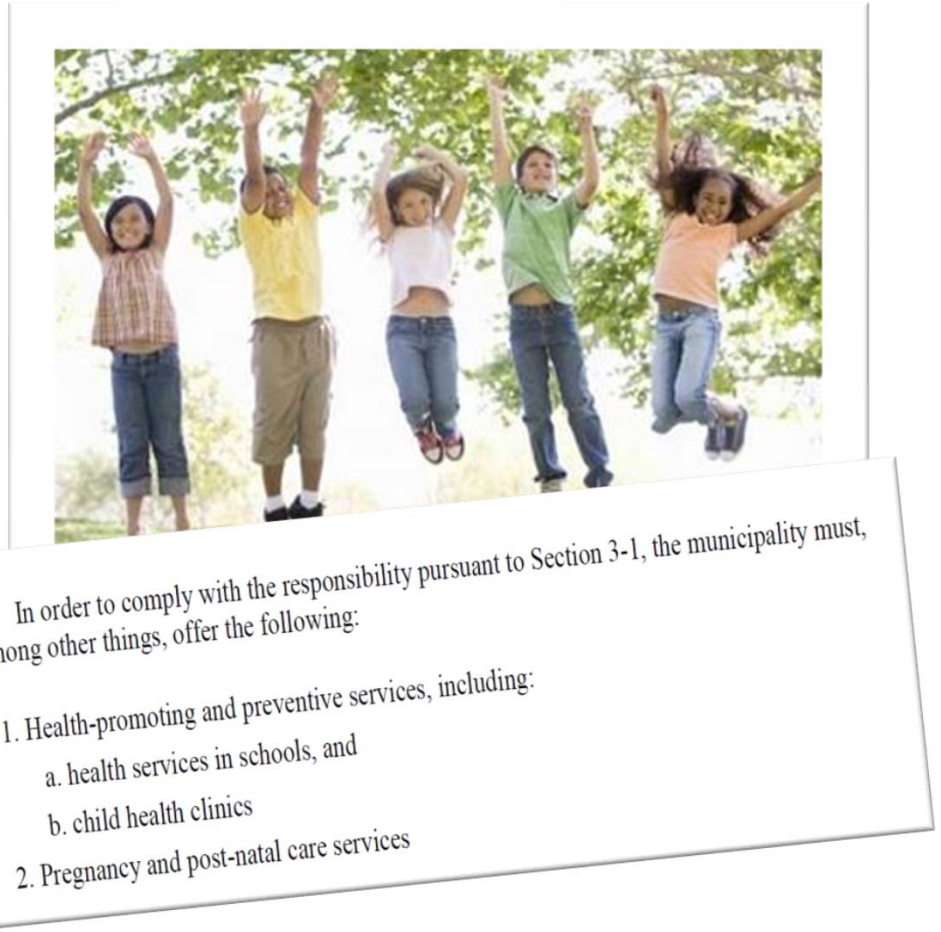
- The Patient and Users' Rights Act:
  - Children have the right to essential medical care, including check-ups
  - Parents are obligated to ensure that their children undergo health checks

- The consultations in the recommended programs are not mandatory, but if a family does not show up for consultation the services will strive to find out why, and how to assure the child and family get the follow-up they need


Photo: Jojo Studio
by John Fredrik Kvalnes

What is the health station and school health service program?

- Health promoting and preventive health services
- More detailed regulations given by the government
- The Norwegian Directorate of Health have created guidelines with recommendation for best practice
- High political interest



In order to comply with the responsibility pursuant to Section 3-1, the municipality must, among other things, offer the following:

1. Health-promoting and preventive services, including:
   a. health services in schools, and
   b. child health clinics
2. Pregnancy and post-natal care services

National guidelines for health prevention and preventive work in child and youth health centers

- Recommendations for best practice
- Based on available research and experience
- Available in English in pdf format. A simplified and practical summary shared with Romania.

Main aspects of the health stations and school health services

Main objective: An available and easily accessible, low threshold service.

The service must:

- Be customized to fit all types of people, including people of different cultural backgrounds and people with disabilities
- Have opening hours and locations which make it possible for people to visit.

Health care personnel in the health stations and school health service

- Helsesøster – «public health nurse» – nurse with specialization in health promoting and preventive health services
- Medical doctors
- Physical therapists
- Midwives
- Other personell

Functions of the health stations and school health service

Child health centres: children 0-5 years

- A program consisting of 14 consultations
- 10 consultations before the child is 1 year old
  - Tracking the child's development

- Home visit 7 to 10 days after birth
  - Fuller understanding of the family/ home situation gives the opportunity to give more individualized guidance

- Examinations by a doctor at:
  6 weeks, 6 months, 1 year and 2 years of age.

- Individualized guidance in all consultations on different subjects

- Parental mental health should be addressed regularly


Photo: Ole Walter Jacobsen

Photo: Jojo Studio by John Fredrik Kvalnes

School health services: 5-20 years

- Thourogh consultations at 1st grade and 8th grade
- Collaboration with the school
  - Teaching in classes or groups, on subjects such as sexual health, tobacco, drug and alcohol prevention and nutrition
  - Work to ensure a safe and good school environment
- Health promoting and preventive work based on the needs in the community
- Available for drop in consultations

Youth health centres

- Vital provider of information on sexual and reproductive health and rights, including contraceptions, STI testing etc.

- Detecting mental health problems and disorders:
  - Youth health centres should be particularly aware of adolecents with risk factors for developing mental problems and disorders
  - Adolecents suffering from mental health problems should be offered follow-up consultations as and when necessary

- Adolecent-friendly health services that are accessible, acceptable, equitable, appropriate and effective

Photo: Jojo Studio by John Fredrik Kvalnes

Pregnancy and maternity services

- Regular consultations and follow-up during pregnancy and after the child is born
- Consultations by midwife or regular GP or both, ultrasound screening week18-20 and homevisit by midwife within 3 days after discharge from hospital
- Early identification of mothers and couples in need of close follow-up
- Ensure information and enable self-management
- Survey psychological health during pregnancy and postnatally

Why so successful? Challenges & Covid 19

Health promoting and preventive health services: The key to success

- Universal services for everyone – attendance rates as high as 97 %
  - When everyone attends, there's no stigma
  - Everyone is offered a basis of help and guidance, but if needed, families and/or children are offered extra help
- All services are free of charge
- Interdisciplinary approach
  - Nurses, doctors, physical therapists and other personnel working together

Challenges

- More public health nurses and midwives are needed
  - Recruiting qualified staff is difficult
  - Retirement
  - Educational capacity

- Municipality determines its own priorities based on demand
  - There is a probability that the framework for each health centre will vary
  - Implementation of national guidelines
- Always difficult to identify all children with needs

Health centre and school health services during the COVID-19 pandemic

- Maintained the most important services, with some restrictions.
- Focusing on identifying children and youth with new needs during the pandemic.

Digital health promoting tool