

21st Century School Nurse Leadership

Moving Evidence into Action



New Jersey Collaborating Center for Nursing





School Health Leadership Program

Edna Cadmus, PhD, RN, NEA-BC, FAAN
Executive Director

Danielle Cooper, MPH
School Health Leadership - Program Manager

Beth Jameson, PhD, MSN, RN, CSN-NJ
School Nurse Consultant

Adjo Somenou, BS
School Health Leadership - Program Assistant

21st Century School Nurse Leadership *Moving Evidence Into Action*

Funding for this program was provided by New Jersey Health Initiatives, a national program of Robert Wood Johnson Foundation

Questions about this report:

New Jersey Collaborating Center for Nursing
School Health Leadership Program
Phone: (973) 353-2715

Acknowledgements:

New Jersey State School Nurse Association (NJSSNA)
National Association of School Nurses (NASN)

Special Acknowledgement:

We would like to thank the New Jersey school nurses who attended our school nurse retreats and contributed to the brainstorming sessions that inspired the development of this toolkit. We appreciate the continued leadership, support, and direction from Dr. Edna Cadmus and the strategic planning provided by Dr. Robert Phillips and Sonya Ferreira of Hackensack Meridian *Health*. Thank you to Dr. Erin Maughan and Nichole Bobo of NASN for serving as content reviewers and Robin Cogan for her contribution to chapter 5. A special thank you to Dr. Beth Jameson, we are especially appreciative for her commitment to improving school nursing practice and developing the research for these action plans, and Danielle Cooper for her continued dedication and support for School Health Leadership.

Electronic Access:

To download and view this document visit: njccn.org

"Every attempt was made to check the resources that are available as "click-able links" at the time of publication. However, we have no control over when a website may choose to move or delete a link. If you find a link no longer available, please check the primary website of the referenced source to see if it has moved on the website, or see the list of updated links at www.njccn.org. We apologize for any inconvenience."



About the New Jersey Collaborating Center for Nursing

The New Jersey Collaborating Center for Nursing was established by state legislation on December 12, 2002 (P.L.2002, c.116). The Center works on behalf of nurses to provide evidence-based recommendations regarding the nursing workforce and its impact on patient care. The Center is housed in Rutgers University, School of Nursing, Newark Campus, and is guided by a 17-member board representing New Jersey nursing and healthcare stakeholders.

Vision:

- To be the dominant voice on nursing workforce solutions for New Jersey citizens.

Mission:

- Ensure that competent, future oriented, diverse nursing providers are available in sufficient numbers and preparation to meet the demand of the evolving healthcare system in New Jersey.
- Transform the healthcare system through research and innovative model programs.
- Create a central repository for education, practice, and research related to nursing workforce.
- Engage academic/practice partners, inter-professional colleagues, government and legislative agencies, consumers, business and industry in workforce solutions.
- Promote a positive image for nursing.

About the School Health Leadership Program

Vision:

- To evolve New Jersey school nurses as leaders in their communities through a population health lens.

Mission:

- Ensure school nurses are embedded within their school communities
- Promote a positive image for school nurses
- Engage and support school nurses to increase visibility as school health leaders

The Framework for 21st Century School Nursing Practice™

- Definitions of the Framework for 21st Century School Nursing Practice™ key principles and components from (most current at time of printing): National Association of School Nurses. (2016a). Framework for 21st Century School Nursing Practice™. NASN School Nurse (31)1, 45-53. doi: 10.1177/1942602X15618644; Maughan, E. D., Duff, C., & Wright, J. (2016). Using the Framework for 21st-Century School Nursing Practice™ in daily practice. NASN School Nurse, 31(5), 278-281.

Table of Contents

Introduction	1
Preface	1
How to Use This Document	2
About the Framework for 21st Century School Nursing Practice™	3
Figure 1. Framework for 21st Century School Nursing Practice™	4
Figure 2. Whole School Whole Community Whole Child Model	5
Making Change Happen	6
 Chapter 1: Standards of Practice	 9
 Chapter 2: Care Coordination	 13
Quick Start Fact Sheet: Chronic Disease Management Resource	17
Idea 1: Chronic Disease Management	
Absenteeism in Chronic Disease, Asthma	18
Quick Start Fact Sheet: Interdisciplinary Teams Resource	25
Idea 2: Interdisciplinary Teams	
Mental/Behavioral Health – Calming Classroom	26
 Chapter 3: Leadership	 33
Quick Start Fact Sheet: Policy Development and Implementation Resource	37
Idea 1: Policy Development and Implementation	
Opioid/Naloxone Policy and Procedures	38
Quick Start Fact Sheet: Change Agents Resource	46
Idea 2: Change Agents	
Safe Routes to School	47
 Chapter 4: Quality Improvement	 55
Quick Start Fact Sheet: Performance Appraisal Resource	58
Idea 1: Performance Appraisal	
Develop Uniform School Nurse Specific Evaluation Tool	59
Quick Start Fact Sheet: Collecting Community Health Data Resource	67
Idea 2: Collecting Community Health Data	
Identify Strengths and Weaknesses of School Health/Safety Policies and Programs	68

Chapter 5: Community/Public Health	75
Quick Start Fact Sheet: Outreach Resource	79
Idea 1: Outreach	
Community Café, Conversations that Matter	80
Quick Start Fact Sheet: Screenings/Referrals/Follow-Up Resource	91
Idea 2: Screenings/Referrals/Follow-Up	
Get Assistance to Complete Screenings/Vision Screening	92
 Resources: Ideas for Implementation	 101
Challenges and Barriers	101
Key Terms	103
Federal and State Laws	111
Framework for 21st Century School Nursing Practice	114
New Jersey Department of Education - SGO	115
Health Data Assessment	116
 References	 117
 Appendix	 125
Appendix A: NASN Mission and Vision Statements	125
Appendix B: SMART Goals	126



Introduction

PREFACE

School nurses are key professionals “that collaborate with families, school personnel, other healthcare providers, and are responsible for the health and wellbeing of school students, and the school community” pg. 3. School Nursing scope and standards of practice ANA and NASN 2017.

In 2016, New Jersey Health Initiatives, a national program of Robert Wood Johnson Foundation, funded New Jersey Collaborative Center for Nurses (NJCCN), a grant defined a need to address the role of New Jersey school nurse as leaders in school health. This initiative led to a series of New Jersey school nurse retreats during 2017 in which the participants were charged with using NASN’s Framework for 21st Century Practice™ key principles and components to brainstorm ideas and initiatives. From those brainstorming sessions, the inspiration for this toolkit developed.

The Framework for 21st Century School Nursing Practice,™ introduced in 2016, provides the framework to help school nurses focus on their role of optimal health outcomes and academic success for all students (NASN, 2016a). Additionally, the framework is in alignment with the Whole School, Whole Community, Whole Child model (WSCC) (ASCD & CDC, 2014). By using a framework that reflects the uniqueness of school nursing practice, direction is provided to school nurses as a method to reflect upon their work, and to integrate the overlapping key principles as part of their job responsibilities. The result reflects the holistic and comprehensive art and science of school nursing practice; that the student is at the center of everything.

PURPOSE

The purpose of this toolkit is to identify how the principles and components of the framework can serve as a guide for school nurses to implement professional development activities with the goal of promoting student and/or community/public health outcomes. The Framework for 21st Century School Nursing Practice™ is a model for the foundation of Student Growth Objectives (SGOs) that many school nurses must develop and implement as part of their annual individual professional development plan. Use of a model as a framework shapes professional practice and directs the user toward evidence-based goals and objectives that encompass the foundation of school health nursing (Glassman, 2016). Many nurses and schools are already using components of the key principles, but now have a larger, collective vision of how their efforts contribute to the big picture of the outcome of their work (Maughan, Duff, & Wright, 2016).

Learning and professional development are elements of a healthy work environment that provide a source of joy and elevate the inner spirit (Narayanasamy & Penney, 2014). This sense of joy spills over into our practice and impacts the quality of care and student outcomes (Cottrell, 2016).



HOW TO USE THIS DOCUMENT

You can:

- **Download the entire toolkit.**
(*Note: you will lose the electronic interface with elements that have “clickable” links.*)
- **Browse the Table of Contents and go directly to ideas that interest you.**
- **Go to our Quick Start Fact Sheet pages. If you need further resources or help, please see the individual “Ideas for Implementation” under the appropriate key principle.**

This toolkit is designed to help you plan your project and enlist stakeholders who can help you. You can start anytime during your school year, however, many of the projects work best when you plan for activities to begin in September. This is especially true if you are planning to use an idea for your Student Growth Objective (SGO) or annual professional development plan. Do not feel that you need to accomplish all the goals or objectives. Instead, choose which may work best for you and then build upon your idea to do more in the following year.

This document is intended to be used by individual school nurses, their school nurse supervisors, school administrators, and other community partners interested in promoting competency, quality and safe care, evidence-based research and/or projects, and professionalism in school nursing practice.

The ideas represented in this document promote a safe and healthy school community through professional development, collaborative planning, community initiatives, policy advocacy, connecting ideas and resources, and research initiatives. The ideas focus on activities that are grounded in evidence-based standards of practice, are relevant, and support the role of the school nurse in the 21st century. Use these ideas to start dialogues, engage partners, and perhaps as the springboard for your own initiatives.

It is divided into four sections: care coordination, leadership, quality improvement, community/public health, surrounded by the fifth principle standards of practice. Each key principle has a “How does this impact Standards of Practice” section to demonstrate the link to the standards of practice as the surrounding foundation of the framework. The standards of practice principle are intended to act as the foundation for the other four key principles. Each of the four key principles has two sample project ideas to serve as an example for developing a project initiative. In addition, each key principle has a quick start fact that provides ideas, goals, action steps, resources, measure outcomes and social media.

The last section of the document includes resources and sources for partners, funding, and sample templates to guide your project.

Definitions

Definitions of the framework principles and components were taken from the original articles that developed the Framework for 21st Century School Nursing Practice™ (NASN, 2016a; Maughan, Duff, et al., 2016). Where applicable the original source is cited.



Permission to use granted by the National Association of School Nurses. Re-printed with permission by the National Association of School Nurses.

ABOUT THE FRAMEWORK FOR 21ST CENTURY SCHOOL NURSING PRACTICE™

The National Association of School Nurses (NASN), identified that a more current, comprehensive framework that reflects school nursing practice was needed. NASN believed that the framework must include concepts that represent the complexity of school nursing practice, embodies evidence-based practice and is guided by the scope and standards of professional school nursing practice. A panel of experts that included NASN nursing staff, outside experts in conceptual framework development, practicing school nurses and school nurse leaders provided input and feedback (NASN, 2016a).

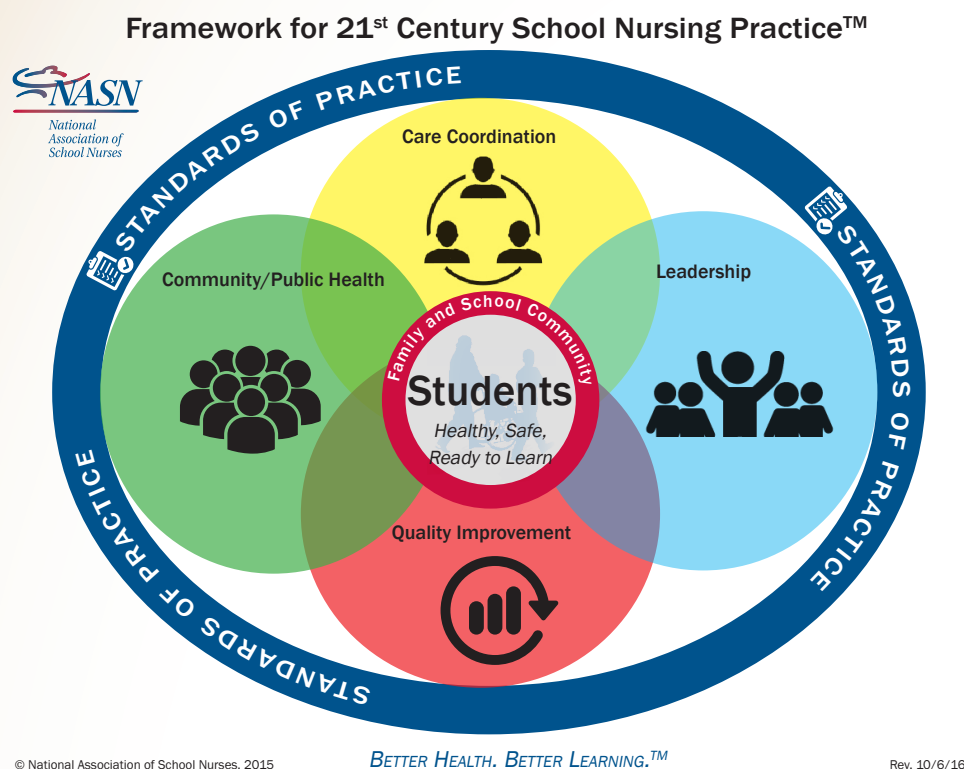
The draft of the framework was first published in July 2015, with final revisions made in October 2016. NASN's Framework for 21st Century School Nursing Practice™ central doctrine is that student-centered nursing care occurs within the context of the students' family and school community. See Figure 1.

Additionally, it was important to align the framework with the Whole School, Whole Community, Whole Child Model (WSCC) (Lewallen, Hunt, Potts-Datema, Zaza, & Giles, 2015; Maughan, Duff, et al., 2016). The WSCC model integrated and built upon the old Centers for Disease Control (CDC) Coordinated School Health model. A collaborative effort from the Association for Supervision and Curriculum Development (ASCD) and the CDC, including input from NASN, developed this new model. See Figure 2.

The purpose of the Framework for 21st Century School Nursing Practice™ is to provide an evidence-based, visual illustration of the holistic role school nurses play in keeping students healthy, safe and ready to learn. NASN envisioned the application of the framework to multiple areas of the school nurse practice. For example:






- Novice school nurses can use the framework to enhance their understanding of the expectations of the school nurse role;
- Facilitate professional development;
- Enhance the vision of how daily activities fit into keeping students healthy, safe, and ready to learn;
- Incorporate the key principles and components into school nurse job descriptions and provide guidance for annual reviews;
- Guide the development of continuing education and school nurse orientation programs;
- Provide foundation and focus for research and evidence-based practice projects;
- Share the framework with internal and external stakeholders and partners to create meaningful discussions that can advance school nursing practice and student health;
- Provide an opportunity to explore potential shift in practice from technical (task) to professional school nursing practice;
- Offer ways to investigate opportunities to reform the healthcare system to improve outcomes; and
- Creates framework that enhances the school nurses' ability to articulate how their role impacts students' health (NASN, 2016a).

Figure 1. Framework for 21st Century School Nursing Practice™.



Framework for 21st Century School Nursing Practice™

NASN's *Framework for 21st Century School Nursing Practice* (the *Framework*) provides structure and focus for the key principles and components of current day, evidence-based school nursing practice. It is aligned with the Whole School, Whole Community, Whole Child model that calls for a collaborative approach to learning and health (ASCD & CDC, 2014). Central to the *Framework* is student-centered nursing care that occurs within the context of the students' family and school community. Surrounding the students, family, and school community are the non-hierarchical, overlapping key principles of *Care Coordination*, *Leadership*, *Quality Improvement*, and *Community/Public Health*. These principles are surrounded by the fifth principle, *Standards of Practice*, which is foundational for evidence-based, clinically competent, quality care. School nurses daily use the skills outlined in the practice components of each principle to help students be healthy, safe, and ready to learn.

 Standards of Practice <ul style="list-style-type: none"> Clinical Competence Clinical Guidelines Code of Ethics Critical Thinking Evidence-based Practice NASN Position Statements Nurse Practice Acts Scope and Standards of Practice 	 Care Coordination <ul style="list-style-type: none"> Case Management Chronic Disease Management Collaborative Communication Direct Care Education Interdisciplinary Teams Motivational Interviewing/Counseling Nursing Delegation Student Care Plans Student-centered Care Student Self-empowerment Transition Planning 	 Leadership <ul style="list-style-type: none"> Advocacy Change Agents Education Reform Funding and Reimbursement Healthcare Reform Lifelong Learner Models of Practice Technology Policy Development and Implementation Professionalism Systems-level Leadership 	 Quality Improvement <ul style="list-style-type: none"> Continuous Quality Improvement Documentation/Data Collection Evaluation Meaningful Health/Academic Outcomes Performance Appraisal Research Uniform Data Set 	 Community/Public Health <ul style="list-style-type: none"> Access to Care Cultural Competency Disease Prevention Environmental Health Health Education Health Equity Healthy People 2020 Health Promotion Outreach Population-based Care Risk Reduction Screenings/Referral/Follow-up Social Determinants of Health Surveillance
---	--	---	--	---

ASCD & CDC. (2014). *Whole school whole community whole child: A collaborative approach to learning and health*. Retrieved from <http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wscc-a-collaborative-approach.pdf>

Figure 2. Whole School Whole Community Whole Child Model

WHOLE SCHOOL, WHOLE COMMUNITY, WHOLE CHILD

A collaborative approach to learning and health



(ASCD & CDC, 2014; Lewallen et al., 2015)

MAKING CHANGE HAPPEN: SCHOOL NURSES LEADING CHANGE AND TRANSFORMATION

“Developing communities of reflective leaders, who have increased understanding of self, who feel empowered to challenge self and subsequently transform practice is required to meet demands within contemporary healthcare” (Boomer & McCormack, 2010, p. 642).

This toolkit utilizes eight steps of organizational change identified by Kotter (2007). The stages are:

- (1) establish a sense of urgency;
- (2) form a powerful guiding coalition;
- (3) create a vision;
- (4) communicate the vision;
- (5) empower others to act on the vision;
- (6) plan for short-term wins;
- (7) consolidate improvements and produce more change;
- (8) institutionalize new approaches.

The challenges of change and transformation must begin with recognizing that organizations are complex systems. Additionally, change is a process, not an event. The change process is built upon steps and stages. Skipping steps or using shortcuts creates failure. Communication is key. The role of leadership to ensure long-term sustainability is significant. Two main themes emerge when an organization seeks to incorporate change into practice: the ability to apply and integrate the knowledge into practice and the leadership strategies to promote those changes (White & Dudley-Brown, 2016).

From the development of the initiative to the long-term sustainability of the project, leadership is a significant force. Forming a powerful guiding coalition and ensuring that all levels of management communicate the initiative through actions and words is essential. Borkowski (2009) describes this as demonstrating “authentic passion” (p. xvii).

Embarking on change is a process. Successful initiatives are grounded in an understanding that change is a process. One must utilize transformation steps and actions, or that great idea will fail.

Implementing Change Strategies

- ✓ Use of Kotter’s Eight Steps
- ✓ Policy Makers
- ✓ Team of Stakeholders
- ✓ Budget
- ✓ SWOT Assessment
- ✓ Time Allotment for Professional Development
- ✓ Develop Measurement/Outcome Indicators
- ✓ Do I need an IRB or other organizational approvals?



Resources for Leading Change and Transformation

- Bondurant, P. G., & Armstrong, L. (2016). Nurses: Leading change and transforming care — expert opinion. *Newborn and Infant Nursing Reviews*, 16, 155-160. doi:10.1053/j.nainr.2016.07.004
- Boomer, C. A., & McCormack, B. (2010). Creating the conditions for growth: a collaborative practice development programme for clinical nurse leaders. *Journal of Nursing Management*, 18(6), 633-644. doi:10.1111/j.1365-2834.2010.01143.x
- Colby, D. C., Quinn, B. C., Williams, C. H., Bilheimer, L. T., & Goodell, S. (2008). Research glut and information famine: Making research evidence more useful for policymakers. *Health Affairs*, 27, 1177-1182. doi: 10.1377/hlthaff.27.4.1177
- Deming, W. E., Orsini, J., & Cahill, D. D. (2012). *The essential Deming: Leadership principles from the father of quality*. doi:10.1036/9780071790215
- Gebauer, J. & Lowman, D. (2008). *Closing the engagement gap: How great companies unleash employee potential for superior results*. New York, NY: Penguin Group.
- Kotter, J. P. (2007). Leading change: why transformation efforts fail. *Harvard Business Review*, 85(1), 96-103.
- Kotter, J., & Rathgeber, H. (2016). *Our iceberg is melting: changing and succeeding under any conditions* (2nd ed.). New York: Penguin House.
- Lavis, J. N., Posada, F. B., Haines, A., & Osei, E. (2004). Use of research to inform public policymaking. *Lancet*, 364(9445), 1615-1621.
- Lenert, L., & Sundwall, D. N. (2012). Public health surveillance and meaningful use regulations: A crisis of opportunity. *American Journal of Public Health*, 102(3), e1-7. doi:10.2105/AJPH.2011.300542
- Sherman, R., & Pross, E. (2010). Growing future nurse leaders to build and sustain healthy work environments at the unit level. *Online Journal of Issues in Nursing*, 15(1), 4.
- Smith, P., Hadler, J., Stanbury, M., Rolfs, R., & Hopkins, R. (2013). "Blueprint version 2.0": updating public health surveillance for the 21st century. *Journal of Public Health Management & Practice*, 19(3), 231-239. doi:10.1097/PHH.0b013e318262906e
- White, K. M., Dudley-Brown, S., & Terhaar, M. F. (2016). *Translation of evidence into nursing and health care* (2nd ed.). New York, NY: Springer Publishing Company.