

THE ROLE OF THE SCHOOL NURSE
AS AN EDUCATIONAL RESOURCE

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Introduction

School nursing in America was begun in 1902 in New York City by Lillian Wald as a separate area of nursing practice. This was begun in response to prolonged exclusion of a number of children from school who were infected by a skin disease.¹ Since that time school nursing has undergone tremendous growth and development in numbers and in responsibilities. According to the 1968 Facts About Nursing, 15,282 nurses were working for boards of education in 1966; and 16,562 additional nurses were employed elsewhere but were expected to carry some responsibility for school children.² Along with this tremendous growth in numbers has come a widening area of responsibilities of the nurse in the school system. Freeman identifies three broad functions of the school nurse which are as follows:

(1) to contribute to the personal health care and health education of the school population, (2) to contribute to the improvement of the physical and social environment in which the school population spends its school hours, and (3) to relate these efforts toward health improvement to those of the family and of the community at large.³

¹American Nursing: History and Interpretation, 1954, quoted in Ruth B. Freeman, Community Health Nursing Practice (Philadelphia: W. B. Saunders Company, 1970), p. 307.

²Facts About Nursing, 1967 ed. quoted in Ruth B. Freeman, Community Health Nursing Practice (Philadelphia: W. B. Saunders Company, 1970), p. 307.

³Ruth B. Freeman, Community Health Nursing Practice (Philadelphia: W. B. Saunders Company, 1970), p. 309.

These general responsibilities have been defined by the employer of every school nurse with varying degrees of emphasis and application.

Recently, various sources have begun to examine the role of the school nurse and her effectiveness in depth. Loretta Ford (1970) urged nurses to re-evaluate their roles regarding nurse-pupil-family, nurse-doctor-pupil, and nurse-doctor-teacher interactions.⁴ Rosner, Pitkin, and Rosenbluth (1970) presented possible changes in the New York City Schools which were instituted in order to improve the efficiency and effectiveness of their health care system.⁵

Gertrude Cromwell (1963) has stated that,

The problems of the public health nurse in the school are not always due to her failure to see the needs of the school and the school child, but more often to the limited amount of time the public health nursing agency can assign to the schools in addition to its other programs.⁶

This observation regarding available time seems to be relevant not only to nurses employed by public health agencies per se but also to nurses employed by a school board who are expected to carry out a wide variety of non-nursing functions. In a study of "Utilization of Available 'Nurse Power' in Public Health," Daphne Doster presented a chart showing how

⁴Loretta C. Ford, "The School Nurse Role--A Changing Concept in Preparation and Practice," The Journal of School Health, I (January, 1970), 21-23.

⁵Lester J. Rosner, Olive E. Pitkin, and Lucille Rosenbluth, "Improved Use of Health Professionals in New York City Schools," American Journal of Public Health and the Nation's Health, LX (February, 1970), 328-334.

⁶Gertrude E. Cromwell, The Nurse in the School Health Program (Philadelphia: W. B. Saunders Company, 1963), p. 12.

school nurses used their time.⁷ She found that 40.2% of the time was spent in actual nursing, 30.4% was clerical work, 18.5% was unclassified, 6.0% was administrative, 4.4% was housekeeping, and 0.5% was spent being a messenger. Of the actual nursing time only 2% of the nurse's time was spent in some type of teaching. This breakdown of nursing time combined with the fact that many nurses are expected to be responsible for more than one school makes Forbes' findings (1967) more understandable. In a survey of the role and functions of the school nurse as perceived by 115 public school teachers from three Oregon counties, Forbes found that, "Many teachers didn't know the role of the nurse," and that ". . .there was serious lack of communication on health matters between the teacher and the nurse."⁸

As noted earlier, Freeman indicates that one of the three basic duties of the school nurse is, "to contribute to the personal health care and health education of the school population." Assuming that Forbes' findings about the communication breakdown are true, then it follows that the nurse's ability to foster improved health education would be seriously hampered.

⁷Daphne D. Doster, "Utilization of Available 'Nurse Power' in Public Health," American Journal of Public Health and the Nation's Health, LX (January, 1970), 33.

⁸The Journal of School Health, Vol 37, n. 101, quoted in Ruth B. Freeman, Community Health Nursing Practice (Philadelphia: W. B. Saunders Company, 1970), p. 320.

Hypotheses

In this study the researcher assumed the null hypotheses that:

- 1) There is adequate communication on health matters between the school nurse, elementary teachers, and administration.
- 2) The teachers are aware of the availability of the school nurse as a resource person for health education.
- 3) The teachers do make use of the school nurse as a resource person for health education.

Assumptions

In undertaking this study, several assumptions were made as follows:

- 1) Adequate communication between teachers, nurses, and administration is necessary in order for the school nurse to fulfill her role of a resource person for health education.
- 2) Teachers must be aware of the availability of the school nurse as a resource person in order for her to be effective in that role.
- 3) Teachers must utilize the school nurse as a resource person in order for her to effectively contribute to improved health education.

Research Design and Method

As an attempt to test the hypotheses, four schools were chosen. Due to limited funds and due to limited time on the part of both the researcher and the teachers, it was decided to restrict the scope of the study to two counties--those being Henry County and Delaware County--and to two elementary

schools within each county. The sampling technique used in the study could be described basically as an availability sample; although, an attempt was made to include an elementary school from a city school system and one from a more rural school system within each county. The schools finally chosen as subjects were Wilbur Wright School in New Castle and Sulphur Springs School in Sulphur Springs (both in Henry County), and Garfield School in Muncie and Selma School in Selma (both in Delaware County.) Within each school one teacher was selected from each grade level--kindergarten through six--for interviewing along with the principal and the school nurse.

In order to determine the degree of communication, an attempt was made to ascertain the similarity of role perceptions among the school administration, the school nurse, and the elementary teachers with increasing similarity of role perceptions being used as an indication of increasing amounts of communication. Interviewees were also asked questions regarding the extent to which the school nurse is used as a resource person and how she could be more effective in that role. In order to minimize interviewer bias and due to the researcher's limited knowledge of the actual attitudes of the interviewees, a rather open-ended interview technique was utilized with only basic questions used to initiate discussion.

Summary of Findings

Role of the school nurse.--The following were given as major roles of the school nurse in all four schools:

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
1) To work with special health programs.	1) To give first aid care.	1) To work with special health programs.
2) To do routine health screening.		2) To do routine health screening.
3) To be a medical counselor.		3) To serve as a resource for teachers.
4) To give first aid care.		4) To give talks in class.
		5) To supervise health care for three or more schools.

The following were given as major roles of the school nurse in only three of the schools:

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
1) To inform teachers of students' special health problems.	1) To maintain health records.	1) To maintain health records.
	2) To supervise health screening.	2) To give first aid care.
		3) To work as a school social worker.

The following were given as major roles of the school nurse in only two schools:

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
1) To make home visits.	1) To make home visits.	1) To be a truant officer.
2) To help deal with students' emotional problems.	2) To be a truant officer.	
	3) To serve as a resource person to teachers.	

Use of the school nurse as a resource.--For the use of the school nurse as a resource person it is evident (see Appendix) that all of the contacts between the school nurse and the teacher were initiated by the teacher except in one school. There an attempt was made to have the school nurse speak at a group orientation meeting for first year teachers.

Improved use of the school nurse as a resource.--A wide variety of comments were offered for how the school nurse could be more helpful as a resource person. The following suggestions were given in all four schools:

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
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| 1) By being there more often. | | |
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The following suggestions were given in only three of the schools:

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
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| 1) By providing a list of available speakers on health topics. | | |
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The following suggestions were given in only two of the schools (for further suggestions, see Appendix):

<u>Teachers</u>	<u>Principal</u>	<u>School Nurse</u>
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|---|------------------------------------|-------------------------------|
| 1) By talking to the classes more. | 1) By talking to the classes more. | 1) By being there more often. |
| 2) By ordering or making available various visual aids for the classroom. | 2) By being there more often. | |
| 3) By being on health adoption committees. | | |

Limitations of Study

- 1) Since the scope of the study was limited to only four schools, it must be realized that the conclusions can only be justified in relation to those schools. However, it is hoped that the implications of this study will lead to further research in other schools.
- 2) In the original design of the study, the plan for interviewing teachers was to talk to them in two groups of kindergarten through third and fourth through sixth, respectively. The purpose of this grouping was to facilitate expression of ideas on the part of the teachers. Interviewing according to this plan was possible in two of the schools, Wilbur Wright and Garfield. However, individual interviews were necessary at the remaining two schools, Selma and Sulphur Springs, since the administration was unable to schedule group interviews in either case. The data may be somewhat influenced by the difference between the two interviewing techniques used.
- 3) A third possible limitation to the study stems from the fact that the principal from Garfield was not available for the scheduled interview. He sent the vice-principal to the interview in his place. The fact that the vice-principal was also one of the sixth grade teachers might also influence his responses.
- 4) A final limitation stems from the fact that Sulphur Springs included grades kindergarten through seven since they had no junior high, and Selma included only grades kindergarten through five since they had a middle school.

Implications of Findings

Even with due consideration of the above stated limitations, several conclusions seem to be apparent from the data as follows:

- 1) There was not always adequate communication on health matters between the school nurse, the elementary teachers and the administration.
 - a) This is apparent first of all from the discrepancy among the roles which the school nurse sees for herself and the roles which the teachers and the principal see her as having.
 - b) Secondly, it is interesting that it is usually the teacher who initiates interactions with the school nurse. According to Webster (1963), to communicate means to "share," and communication means, ". . .an exchange of information."⁹ It follows that if communication is to share information, it would be more effective if it flowed freely among school nurse, teacher, and administrator rather than stemming continually from the same source.
 - c) Finally, it is interesting to note the numerous suggestions offered by the teachers of how the school nurse could be more effective as a resource as opposed to the limited number of ideas offered by the school nurses themselves. In fact, the most commonly mentioned way which the school nurses saw as a method for improving

⁹Webster's Seventh New Collegiate Dictionary, (1963), s.v. "Communicate."

their effectiveness as a resource person--that of being in the school more often--was technically out of their control.

The above seems to support Forbes' findings that there is a lack of understanding of the role of the school nurse and that there is a lack of communication on health matters.

- 2) A second conclusion which can be drawn from the findings is that teachers are not always aware of the availability of the school nurse as a resource person. This was especially apparent in the individual interviews where some teachers expressed that they had never thought of using the school nurse as a resource (see Appendix.) Also, many of the teachers who did utilize the school nurse as a resource did so to a very limited extent and stated that they had not thought of using her further.
- 3) A third conclusion which is similar to the second is that the teachers usually do make use of the school nurse as a resource person, but she is much more frequently used as a medical advisor for short term health and first aid needs, which often pertain to only one student, rather than as an advisor in more long term planning such as curriculum design in health education which would have a lasting effect on a larger number of students.
- 4) A fourth conclusion which is apparent from the data (see Appendix) is that needs of the elementary teachers for the nurse as a resource person vary quite a bit from school to school. This is especially noticeable when comparing

such schools as Sulphur Springs and Wilbur Wright. Sulphur Springs is an old school with a very limited amount of resource material. There one of the major needs of the teachers is for the school nurse to provide them with additional resource material and visual aids. In contrast, Wilbur Wright is a newer school, and since it is located in a city school system, it has access to a very well-developed curriculum lab which is available to all of the New Castle elementary schools. There the need for the school nurse to actually provide visual aids was much less than at Sulphur Springs.

- 5) A final conclusion was not anticipated at the beginning of the study. At Selma, twenty Red Cross Volunteers are utilized by the schools for the purposes of giving emergency first aid care and maintaining thorough health records on all of the students. These people work closely with the school nurse while providing continual health staffing for all of the Selma Schools and, at the same time, freeing the school nurse to be much more active in social work and health education. In this school a high degree of satisfaction with the school health program was expressed by the school nurse, the teachers, and the administration. It was also in this school that the fewest suggestions for improvement were offered by any of the interviewees. It is possible that use of the Volunteers may have contributed to this high level of satisfaction.

Recommendations

On the basis of the data obtained from this study, the recommendations offered by the teachers, and some observations made by the researcher; the following suggestions are offered for making more effective use of the school nurse as a resource person for health education:

- 1) The school nurse could work with the administration in interpreting her role to them and in developing her job description. This job description should be reviewed periodically by the school nurse and by the administration together in order to keep abreast of changing needs of teachers and trends in school nursing.
- 2) The school nurse could meet with all teachers at the beginning of the year to define her role to them and to re-evaluate their needs. A periodic survey of the teachers' role perceptions and needs would probably facilitate communication between the teachers and the school nurse.
- 3) The school nurse could have recent curriculum information available for teachers. One source of such information is A Guide for Health and Safety Education which includes suggested health units for kindergarten through high school and lists desirable outcomes, content, learning experiences, resources, and a means of evaluation within each unit. This is available free by writing to the Indiana State Department of Public Instruction. Many textbook companies also provide suggested health curriculum for the various grade levels. Current school health journals would also be valuable sources of information.

- 4) The school nurse could have available a cross-indexing system to inform teachers regarding available speakers and where to find information or visual aids appropriate to the health unit they are teaching.
- 5) The nurse could maintain a file which would include information regarding the nature of common health problems of students and how to deal with them. These could include information on a child who has diabetes, epilepsy, rheumatic fever and others. This file could be used in the presence or absence of the school nurse.
- 6) The school nurse could investigate and encourage the use of auxiliary health personnel such as the Red Cross Volunteers which would increase community involvement in the school health program without increasing the cost of health care to the school.
- 7) A final recommendation, which could be carried out by the school nurse or another interested person, is for further investigation of the usefulness of the school nurse as a resource person. By utilizing the information presented in this study, it would be interesting to devise a written, multiple choice survey designed to determine the use of the school nurse as a resource person on a much larger scale than was possible for this study.

All of the above recommendations have been made with the understanding that the school nurse is usually unable to be in only one school at all times even though this might be the ideal situation. All of the above recommendations are also actions which could be undertaken by the school nurse

without waiting for major administrative changes, and without greatly increasing the amount of time she is required to spend at each school. It is believed that the utilization of any or all of the above suggestions could serve to upgrade the effectiveness of the school nurse and could help her to better fulfill one of her major roles--"to contribute to the personal health care and health education of the school population."¹⁰

¹⁰Freeman, Community Health, p. 3.

APPENDIX

In the following section the schools are listed in the order in which they were interviewed. Within each school system are summarized the attitudes as expressed by the teachers, the principal, and the school nurse in response to the various questions.

Sulphur Springs

Teachers

- a) Role of the school nurse.--To be a medical counselor for illnesses which occur at school; to give first aid; to do various health screening programs such as vision screening, and dental screening; to provide emergency procedure cards (giving the student's doctor and a number to call in case of an accident); to encourage outdoor play at recess; to show films on sex education; and to inform them on special health problems of the children.
- b) Use of the school nurse as a resource.--Two teachers stated they had never thought of using her as a resource for teaching and never had used her; however, they did use her to examine sick children. One teacher did not teach health and therefore did not use the school nurse as a resource except for the care of sick children.
Four teachers used the school nurse to varying degrees

on a one-to-one basis especially with sex education.

- c) How the school nurse could be a more effective resource.--
By being there more often; by arranging for speakers on various health topics; by talking to the classes more herself; by providing visual aids, models, movies, posters, books, filmstrips, flannelboard sets, and mobiles; and by providing current reference material in various health units taught.

Principal

- a) Role of the school nurse.--To give first aid when available; to do health screening (kindergarten pre-school round-up and checking to be sure students have proper immunizations); to relate health problems to parents.
- b) Use of the school nurse as a resource.--Mainly an authority figure for teachers when she speaks in the classroom; not only a resource but a teacher.
- c) How the school nurse could be a more effective resource.--
By having more time in the school; and by talking to teachers and classes.

School Nurse

- a) Role of the school nurse.--To be a resource person for person-to-person contact; to help with programs on drugs, cigarettes, and personal hygiene; to do dental, heart, and vision checks; to give talks about health in class; to give first aid; and to care for four schools.
- b) Use of the school nurse as a resource.--One-to-one contact initiated by the teacher.

c) How the school nurse could be a more effective resource.--

By having a nurse in each building; by having health records on each child.

Wilbur Wright

Teachers

- a) Role of the school nurse.--To do emergency care; to do health screening (check heads for lice and weigh and measure children); to be a medical counselor; to do a puppet show on dental health; to make home visits; to be a truant officer; to take care of free lunches; and to help teachers deal with children's emotional problems.
- b) Use of the school nurse as a resource.--One-to-one basis initiated by teacher except for explaining her role to new teachers at the beginning of the school year--used mainly for special health problems.
- c) How the school nurse could be a more effective resource.--
By having more time in the school; by having resource information for a teacher who has a child with a special health problem such as epilepsy, diabetes, heart problems, or asthma; by having a drug book to help identify the children's drugs; by having a cross-reference for resource material and where it is available; by being on health curriculum adoption committees; and by having a room where she could work with the children on a medical level or do small group instruction.

Principal

- a) Role of the school nurse.--To care for minor accidents and injuries; to maintain health records; to confer with the classroom teacher about health problems; to make home visits; to be a truant officer; and to be in charge of nursing service.
- b) Use of the school nurse as a resource.--No real role in education now--more hit and miss.
- c) How the school nurse could be a more effective resource.--By being in the school full time; and by going into the classroom more if she were here.

School Nurse

- a) Role of the school nurse.--To do routine screening; to care for three elementary schools; to be a truant officer; to be a social worker for the school; to promote the physical and mental welfare of the child; to help the child to accept his homelife; to take care of the free food lunch program; to do counseling on minor problems; to meet new teachers at the beginning of the year and explain the program; to follow up on teacher health; to show films on sex education; and first aid which is at the bottom of the duties.
- b) Use of the school nurse as a resource.--Mainly on a one-to-one basis for teachers with health problems especially in the areas of dental care and personal hygiene; seldom on adoption committees; do some actual in-class teaching.
- c) How the school nurse could be a more effective resource.--

Likes role as it is.

Selma

Teachers

- a) Role of the school nurse.--To give emergency care; to do health counseling; to carry out a motor control program for kindergarten; to work with special programs such as dental health, sex education, and eye and ear testing; to maintain health records; to work in the classroom as a resource; to help the children to achieve good mental health; to help with understanding of students' handicaps; and to coordinate the Red Cross Volunteer program.
- b) Use of the school nurse as a resource.--Two teachers stated they had not asked the school nurse for help as a resource since they had not thought of it. One teacher stated that she had individual conferences with the school nurse as a resource about once per week. Three teachers indicated they used the school nurse as a resource occasionally on a one-to-one basis.
- c) How the school nurse could be a more effective resource.--By being there every day; by being in the classroom more often as a resource; and by planning for extra people to come in and talk.

Principal

- a) Role of the school nurse.--To give emergency care; to coordinate the work of the Red Cross Volunteers; to supervise health checks; and to be finally responsible

for maintenance of health records..

- b) Use of the school nurse as a resource.--Teachers initiate the one-to-one contact.
- c) How the school nurse could be a more effective resource.--
Feels that the school nurse is effective as she is now.

School Nurse

- a) Role of the school nurse.--To give health care to two elementary schools, one middle school, and a high school; to do screening programs; to talk to classes about health; to be a medical counselor; to be a social worker; to be a truant officer; to serve as a liason between parents and administration; to work with the migrant program; to maintain accurate health records on all students; and to provide coloring books, films, and plays on health topics for teachers to use.
- b) Use of the school nurse as a resource.--Used more at the high school level as a resource than at the elementary level; one-to-one basis on the initiation of the teachers.
- c) How the school nurse could be a more effective resource.--
Feels she is effective in her role.

Garfield

Teachers

- a) Role of the school nurse.--To give first aid care; to help with special health programs such as weight watchers, sex education, grooming, and cleanliness; to inform teachers of children's special health problems; to serve as a social worker especially for needy children;

to make home visits; to give health counseling; to keep first aid supplies stocked; and to take sick children home.

- b) Use of the school nurse as a resource.--One-to-one basis usually initiated by the teacher.
- c) How the school nurse could be a more effective resource.--
By having her there more often; by having a list of available speakers on health; by ordering models for the school; by being on the health book adoption committee; and by giving seminars, demonstrations, and teaching simple life saving techniques.

Principal (Principal did not appear for the scheduled appointment--talked to the vice principal who is also the sixth grade teacher)

- a) Role of the school nurse.--To give first aid care; to do routine screening; to help with sex-education and grooming; to be a social worker for the school; to make home visits; and to be a truant officer.
- b) Use of the school nurse as a resource.--One-to-one basis with the teacher initiating the contact.
- c) How the school nurse could be a more effective resource.--
By having group seminars and demonstrations; and by serving on the health adoption committees.

School Nurse

- a) Role of the school nurse.--To care for three elementary schools; to do routine screening; to participate in special programs such as tooth fluoridation, and sex education; to be a resource person for teachers; to serve as a social worker; to make home visits; to give talks in

class; and to keep record of children's immunizations.

- b) Use of the school nurse as a resource.--Mainly on a one-to-one basis initiated by the teachers especially in the areas of nutrition, venereal disease, sex education, drugs, and smoking.
- c) How the school nurse could be a more effective resource.--
By being in only one school; and by having more modern facilities.

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