

Beyond Band-aids: Understanding the role of school nurses in NSW

Summary Report

School Nurses Association of NSW annual conference 2008
21-22 January 2008



Prepared by

Karen Moses
Jane Keneally
Helen Bibby
Far Chiang
Fiona Robards
Clin Prof David Bennett AO

A collaboration between
NSW Centre for the Advancement of Adolescent Health and
School Nurses Association of NSW

caah
the **children's** hospital at Westmead
NSW Centre for the Advancement
of Adolescent Health



Acknowledgements

The study *Beyond Band-aids: Understanding the role of school nurses in NSW* was commissioned by the School Nurses Association of NSW.

On behalf of NSW CAAH I would like to thank the following people for their contributions to this study:

Research design, implementation, analysis & report:

Karen Moses, Project Consultant, NSW CAAH

Jane Keneally, School Nurses Association of NSW

Helen Bibby, Clinical Psychologist, Department of Adolescent Medicine

Far Chiang, Former Coordinator, NSW CAAH

Fiona Robards, Coordinator, NSW CAAH

Data Entry:

Karen Moses, Project Consultant, NSW CAAH

Fiona Robards, Coordinator, NSW CAAH

Wui Ken Yap, Project Officer, NSW CAAH

Linda Ramsbottom, Project Officer, NSW CAAH

Evelyn Camilleri, Administrative Officer, NSW CAAH

Cover design

Wui Ken Yap, Project Officer, NSW CAAH

I would also like to thank the school nurses who generously contributed their time and knowledge to the study. A list of participating schools is attached.

"You can't educate a child who isn't healthy and you can't keep a child healthy who isn't educated."
Joycelyn Elders, Former US Surgeon General



Clinical Professor David Bennett AO

Head, NSW Centre for the Advancement of Adolescent Health



The Children's Hospital at Westmead

Locked Bag 4001 Westmead NSW 2145 Australia

Tel. 612 9845 3338

Email caah@chw.edu.au

Fax. 612 9845 0663

Web www.caah.chw.edu.au

Why is school nursing important for our young people?

The World Health Organisation (1992) suggests that people's health behaviours are determined by the context in which they live their everyday lives. This would include the settings in which people live, work and seek leisure. Given the substantial time children and young people spend at school, it is realistic to assume that schools play a major role in determining such health behaviours. In support of this, Stewart-Brown (2006) presented research findings which indicate that school based health promotion is an effective means of promoting youth health. Schools have been found to have a major protective influence across a number of health issues, including mental health, healthy eating and physical activity (Stewart-Brown, 2006). Good health has also been correlated with more successful learning (NSW Health Department, 2000); again indicating the importance of ensuring good health during childhood and adolescence. School nursing plays a vital role in providing this health promotion within schools.

Significant numbers (around 22%) of Australian young people will experience health problems, some of which may be life threatening. The Australian Institute of Health and Welfare (AIHW, 2007) says that the leading causes of death and illness in young people aged 12-24 years include:

- Accidents and injuries, including unintentional and self-inflicted injuries
- Mental health problems, such as depression and eating disorders
- Behavioural problems, including substance abuse and sexual health problems

Given this and that it is known that general and nursing practitioners are often the first point of contact for adolescent health concerns (Chown et al, 2004), this suggests that presenting problems to school nurses may be diverse.

The role of the school nurse

The role of school nurses in Australia is poorly defined, with minimal literature assessing this role. Research undertaken by Barnes et al (2004), Victorian Government Health Information (2006), and Downie et al (2002) suggests that the role of the school nurse includes; clinical care, health counselling, health promotion, school community development activities, networking / resource and referral, and general clinic management. However, it is not known whether these accurately reflect the role of school nurses in NSW, what proportion of time nurses spend on these activities or what are the common health concerns of presenting students. Therefore, we have conducted research within a specific NSW context. This data can serve to: inform policy, aid planning and evaluation, and build an evidence base for the profession and its activities (Brener et al, 1997; Ryberg et al 2003; Bagnall, 1997; Fahrenkrug, 2003). By establishing a standardised activities log for nurses we can gather health data without subjecting students to further questionnaires. As the data can be collected in a structured and uniform way, it can further inform NSW school nursing practices in the future.

About the research

Project aim

Given the gaps in current research and understanding, the aims of the present study were two fold;

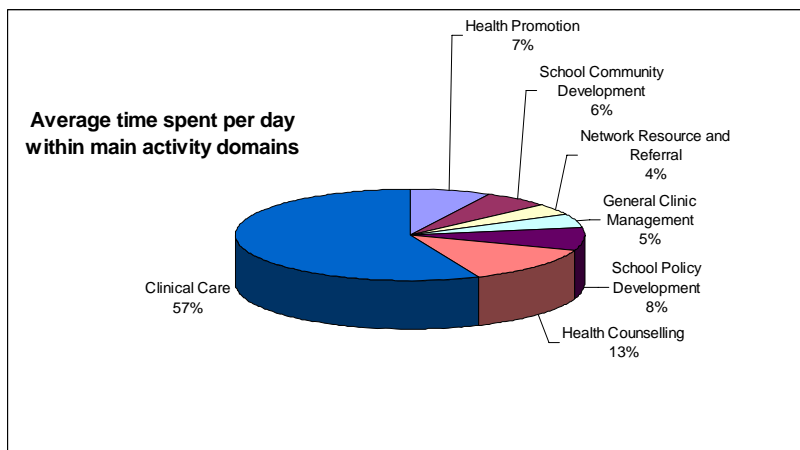
- Identify the roles of the school nurse in NSW including the proportion of time nurses spend on these activities and common health concerns of presenting students
- Develop a standardised activities log to monitor nurses daily activities

Method

The research utilised two methods of data collection

- Exploratory survey to identify the perceived role of school nurses
- Daily activities log to identify actual roles undertaken, time spent on these activities and common presenting health concerns over a 4 week period

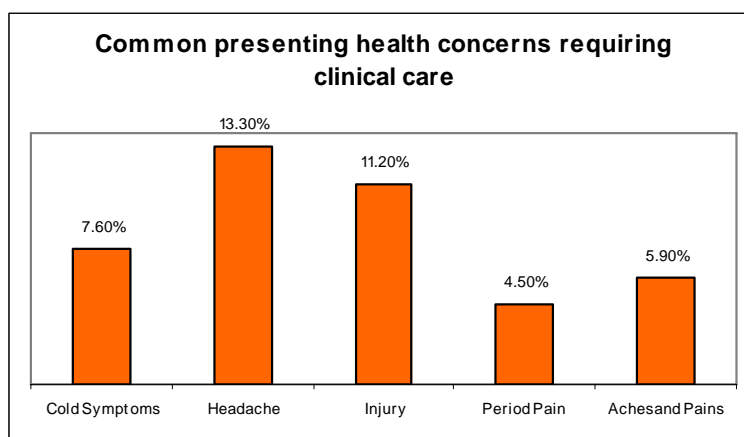
Key research findings



Clinical care

- On average the number of students seen per day requiring clinical care is approximately 19 students, ranging from 8 to 70 students.
- The average time spent with each of these students is approximately 27 minutes. These times range between spending 1 minute and 11 hours.

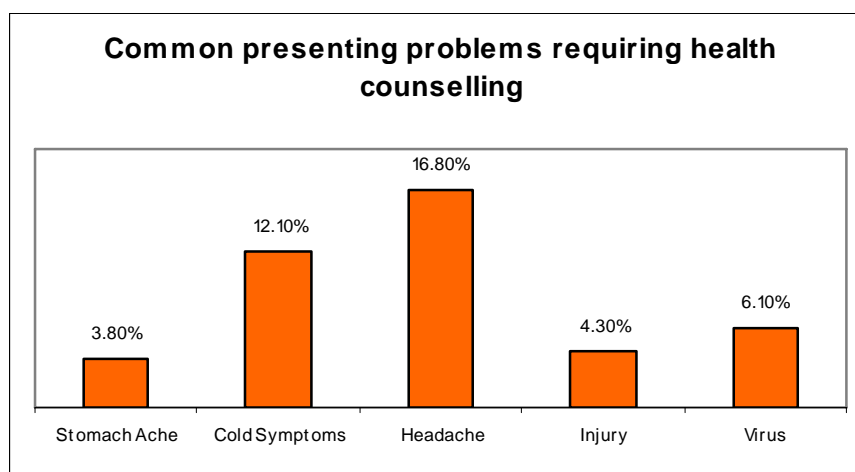
The following graph demonstrates the common presenting health concerns requiring clinical care.



Health counselling

- On average the number of students seen per day requiring health counselling is approximately 4-5 students, ranging between 1 and 25 students.
- The average time spent with each student requiring health counselling is approximately 26 minutes. These times range between 1 minute and 8 hours.

Nurses were found to most commonly provide health counselling for general medical concerns, such as giving advice on specific illnesses. Findings suggest that at present very few students access the school nurse for mental health, sexual or drug and alcohol advice. The following graph shows common general health problems students typically seek advice on.



Comparison of monitoring log to survey

The perceived activities of school nurses as reported in the exploratory survey was compared with actual activities undertaken, measured by the daily activities monitoring log. Findings suggest that actual time spent with students requiring clinical care and health counselling were both significantly underestimated by the school nurses. In addition, school nurses significantly overestimated the number of students seen per day for both clinical care and health counselling. However, it is likely that actual numbers of students and time spent were significantly lower than normal given the time of year monitoring was undertaken, that being in term 4. Therefore, caution should be used when interpreting differences between nurse's perceptions of their own roles and actual recorded activities during term 4.

Limitations of the research

This research was undertaken during term 4, the quietest time of the year with final year students only coming to school for exams. In addition, at this time of the year the weather is milder and students are less likely to present with cold symptoms. Sporting activities are less intense in the last term, for example football is replaced by athletics and cricket. Given these limitations, the current research is primarily a best representation of school nurses activities in term 4.

Importance of findings

This research has increased our understanding of the professional roles of school nurses and their importance to the health and well-being of our children and young people. Given the large number of students visiting health care centres within some of these schools, it is evident that the importance of providing access to appropriate health care within the school environment cannot be underestimated.

The present findings increase our understanding of common student health concerns requiring clinical care and health counselling. Not only does this inform our understanding of many of the common health concerns facing children and young people it is also apparent that school nursing has out of necessity moved 'beyond bandaids' given the changing roles. This in turn informs areas of professional development and ongoing training required.

Implications for current policy

This research demonstrates the importance of school nurses within all schools, given the high utilisation of school nurses. More specifically, it appears from present findings that much of a nurse's working day (approximately 70%) is spent on clinical activities. Only 13% of this time is spent on health counselling, however research suggests that children and young people most commonly experience accidents and injuries, mental health and behavioural problems (AIHW, 2007). Given that the first point of call for young people suffering mental illnesses or sexual and drug and alcohol concerns is often medical and nursing professionals (Booth et al., 2002), and that school nurses are often the most readily accessible, it is important that school nurses work towards increasing accessibility for these additional concerns. This may be done by allowing more time for health counselling and creating a safe and confidential environment for young people to access. Such needs appear to require further recognition and funding.

As large amounts of time are spent on clinical work, little time is left for non-clinical activities such as health promotion, school community development, networking / resource and referral making, general clinic management and school policy development. Given the importance of these non-clinical activities, an increase in staff or allocated time for these activities appears warranted.

The daily activities monitoring log has the potential to contribute to the ongoing monitoring and evaluation of school nursing. It can be used to gather health related data specific to school age populations, provide an evidence base for the profession and its activities and provide evidence in applications for additional funding for more nursing support.

Further information

Copies of this report and the daily activities monitoring log can be obtained from the NSW CAAH. website: www.caah.chw.edu.au

References

- Australian Institute of Health & Welfare. (2007). *Young Australians: Their health and wellbeing 2007*. Cat no. PHE 87. Canberra: AIHW.
- Bagnall, P (1997). The dangers of cutting school nursing services, *Nursing Times*, 93(24), 57-8.
- Barnes, M., Courtney, M., Pratt, J., & Walsh, A. (2004). School based youth health nurses: roles, responsibilities, challenges and rewards. *Public Health Nursing*, 219(4), 316-322.
- Booth, M., Bernard, D., Quine, S., Kang, M., Usherwood, T., Alperstein, G., Beasley, L., & Bennett, D. L. (2002). Access to health care among NSW adolescents. NSW CAAH: Westmead.
- Brener, N., Krug, E., Dahlberg, L., & Powell, K. (1997). Nurses' logs as an evaluation tool for school-based violence prevention programs. *The Journal of School Health*, 67(5), 171-4.
- Chown, P., Kang, M., Bennett, D.L. & Sanci, L. (2004). Adolescent Health: A Resource Kit for GPs. NSW CAAH and TMHC: Westmead.
- Downie, J., Chapman, R., Orb, A., & Juliff, D. (2002). The everyday realities of the multi-dimensional role of the high school community nurse. *Australian Journal of Advanced Nursing*, 19(3), 15-24.
- Fahrenkrug, M. (2003). Development of a nursing data set for school nursing. *The Journal of School Nursing*, 19(4), 238-48.
- NSW Health Department (2000). Health promotion with schools: a policy for the health system. Health Promotion Branch, NSW Health.
- Ryberg, J., Keller, T., Hine, B, Christenson, E. (2003). Data speak: Influencing school health policy through research. *The Journal of School Nursing*, 19(1), 17-22.
- Stewart-Brown, S. (2006). *What is the evidence on school health promotion in improving health or preventing disease and, specifically, what is the effectiveness of the health promoting schools approach?* Copenhagen; WHO Regional Office for Europe (Health Evidence Network report; <http://www.euro.who.int/document/e88185.pdf>)
- Victorian Government Health Information (2006). School nursing program. <http://www.health.vic.gov.au/schoolnursing/index.htm>.
- World Health Organisation, United Nations Educational Scientific and Cultural Organisation, United Nations Children's Fund. (1992). *Comprehensive School Health Education: Suggested Guidelines for Action*, World Health Organisation, Geneva.

Participating schools

- Abbotsleigh School for Girls, Wahroonga
- All Saints' College, Bathurst
- Barker College, Hornsby
- Cranbrook School, Bellevue Hill
- Kambala, Rose Bay
- Knox Grammar, Wahroonga
- MLC School, Burwood
- Moriah College, Bondi Junction
- Newington College, Stanmore
- PLC, Armidale
- Pymble Ladies College, Pymble
- Ravenswood school for Girls, Gordon
- SHORE School: Sydney Church of England Grammar School, North Sydney
- St Andrew's Cathedral School, Sydney
- St Joseph's College, Hunters Hill
- St Vincent's College, Potts Point
- TARA Anglican School for Girls, North Parramatta
- The Pittwater House School, Manly
- William Carey Christian School, Prestons