

School Nurses and Our Supervisors: Do We Speak the same Language?

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Disclosure

I, Lee-Ann Halbert, have no financial disclosure to make regarding this presentation. No financial relationship exists with any commercial interest regarding any portion of this presentation currently, nor within the past year.

Objectives:

By the end of this webinar attendees will be able to...

- Relate the supervisor's background to the educational and health of students in the school;
- Identify at least two routes to becoming a supervisor of school nurses;
- State at least three impacts the professional background has on the clinical practice of the school nurse;
- Identify at least two actions the nurse can take to address the language gaps between school nurses and the supervisors

Health Needs of School Students

- **Chronic health issues such as asthma, diabetes, ADHD** (American Diabetes Association, 2011; U.S. Department of Health and Human Services, 2012)
- **Medication administration** (U.S. Department of Health and Human Services, 2008)
- **Supporting students who are victims of violence** (King, 2014)
- **Most frequent contact with a health care provider** (Rice, Biordi, & Zeller, 2005)

Differences in Understandings of Supervision in Education and Nursing

- **Pedagogy versus clinical nursing practice** (Butterworth & Faugier, 1992; Marzano, Frontier, & Livingston, 2011)
 - **Pedagogy: teaching (children)**
 - **Clinical nursing practice: care of the patient**

Significance of Relationship Between Subordinate and Supervisor on Nursing Practice

- **Commitment to the institution** (Brunetto, Farr-Wharton, & Shacklock, 2011; Brunetto, Shriberg, Farr-Wharton, Shacklock, Newman, & Dienger, 2013)
- **Improving skills as a nurse** (Landmark, Hansen, Bjones, & Bohler, 2003)
- **Nurses' emotional state** (Brunetto et al., 2011)
- **Ability to complete the required tasks of nursing** (Halbert, 2017)

Impact of Supervisor With Different Professional Background: Organizational Role Theory

- Interplay of
 - (1) organizational issues,
 - (2) personal, and
 - (3) professional expectations to perform work

- (Biddle, 1986; Kahn, Wolfe, Quinn, Snoek, & Rosenthal, 1964, 1964; Rizzo, House, & Lirtzman, 1970)

School Nurse Defined

- “School nursing:
 - a specialized practice of nursing,
 - protects and promotes student health,
 - facilitates optimal development, and advances academic success.
 - grounded in ethical and *evidence-based practice* (emphasis added),
 - are the leaders who *bridge health care and education* (emphasis added),
 - provide care coordination,
 - advocate for quality student-centered care, and
 - collaborate to design systems that allow individuals and communities to develop their full potential.”
- *Adopted by the NASN Board of Directors February 2017.*

Survey Information

	Number	Percent
Survey Links Distributed	1822	
Invalid Email Addresses	58	
Surveys opened	835	
Surveys started	712	85.3% of those who opened the survey
Non-certified or non-practicing	28	
Declined to consent	20	
Abandoned survey	107	
Completed surveys (of those qualified; eliminates non-qualified)	557	32.08% of valid email addresses 69.02% of surveys opened by qualified nurses **

**According to Surveygizmo.com, a typical response rate for an internal survey is 30-40%; for an external survey it is about 10-15% (Surveygizmo.com, 2019).

Research Questions

1. How do the school nurses' understandings of their roles affect their clinical practice?
2. How does the nursing supervisor's professional and educational background relate to how the nurse provides services in the school setting?

Research Question 1: How do the school nurses' understandings of their roles affect their clinical practice?

1. I have enough time to complete my work.

3. I have experienced situations in which a student's nursing needs and educational requirements have been in conflict.

4. There are times I work under education policies and/or guidelines that are incompatible with evidence-based nursing practice.

5. I sometimes receive an assignment without the support staff to complete it.

6. I have compromised on a rule or policy in order to carry out an assignment.

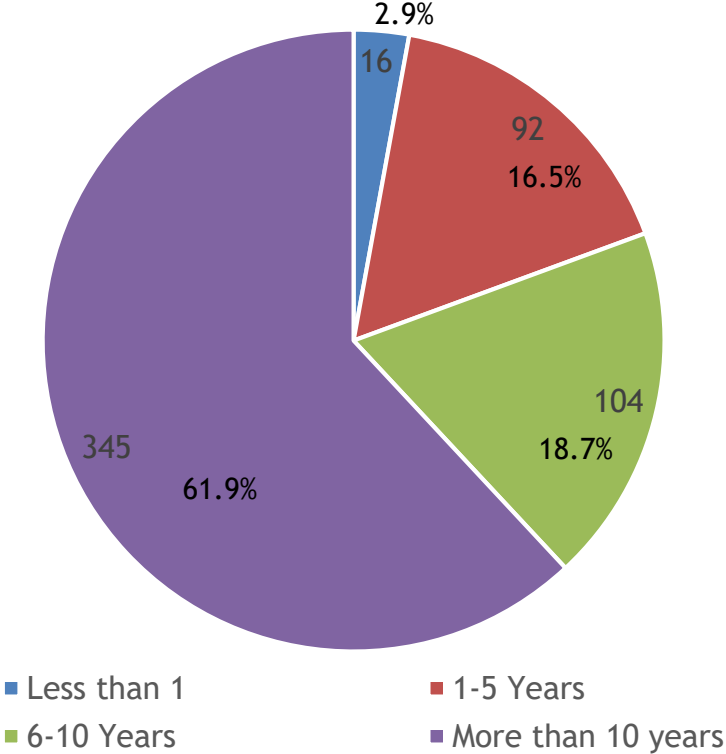
7. I have to miss student support meetings (504, I & RS, Child Study Team, or other similar support teams) because that would leave the health office without a nurse.

8. I receive incompatible requests from two or more people.

Research Question 2: How does the nursing supervisor's professional and educational background relate to how the nurse provides services in the school setting?

2. My immediate supervisor directs me to complete at least part of my work in a manner that should be done differently, according to evidence based nursing practice.
9. My supervisor has me asked to provide non-emergency medication to a teacher to give to a student on a class trip.
10. My supervisor has asked me to disclose confidential medical information that I am not permitted to share.

Demographics: Years of Experience

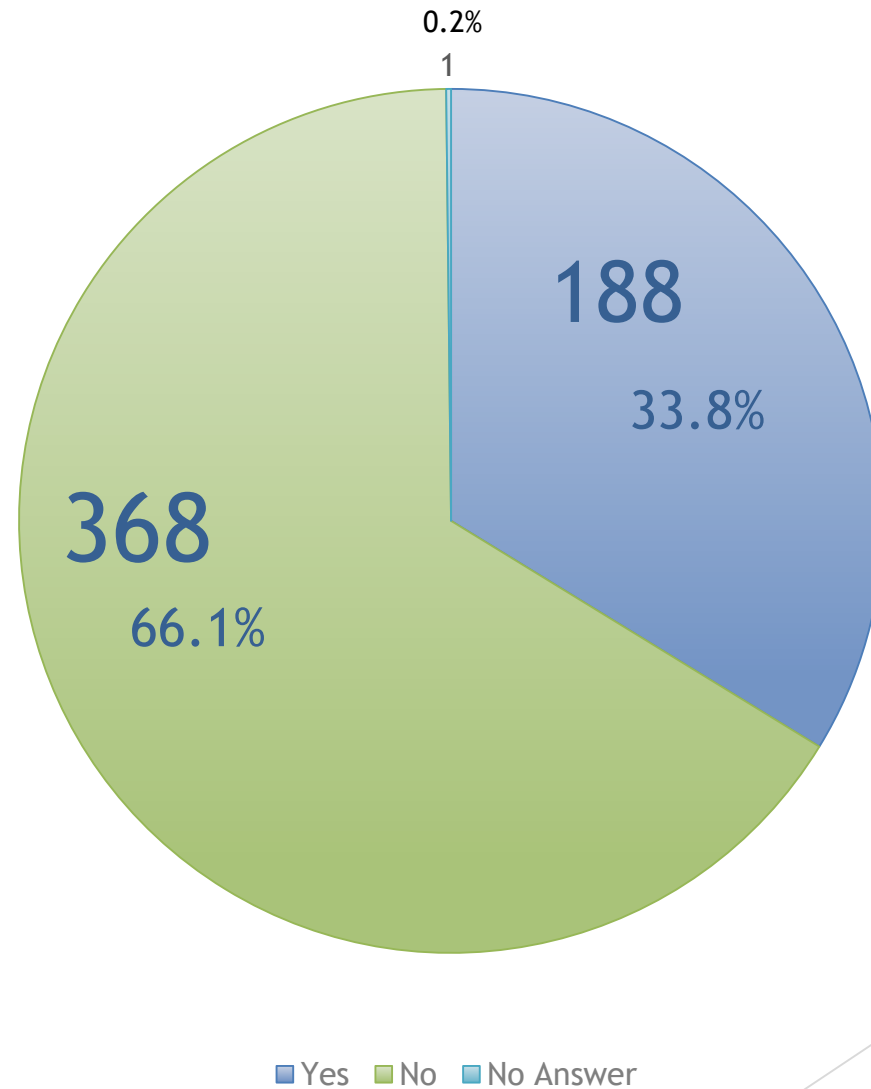


Survey Results

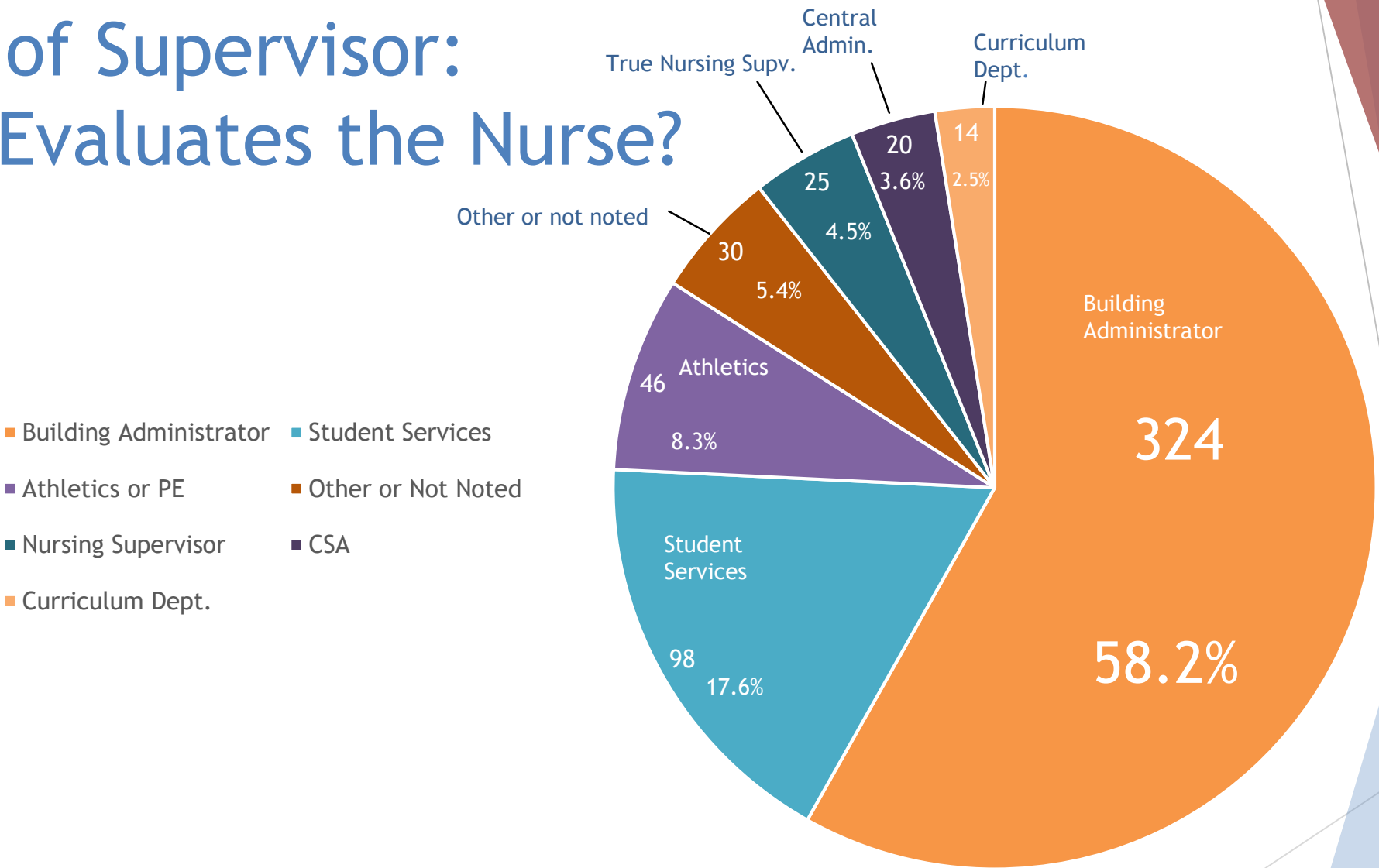
School Nursing Specific Questions



Demographics - Presence of a Lead or Head Nurse

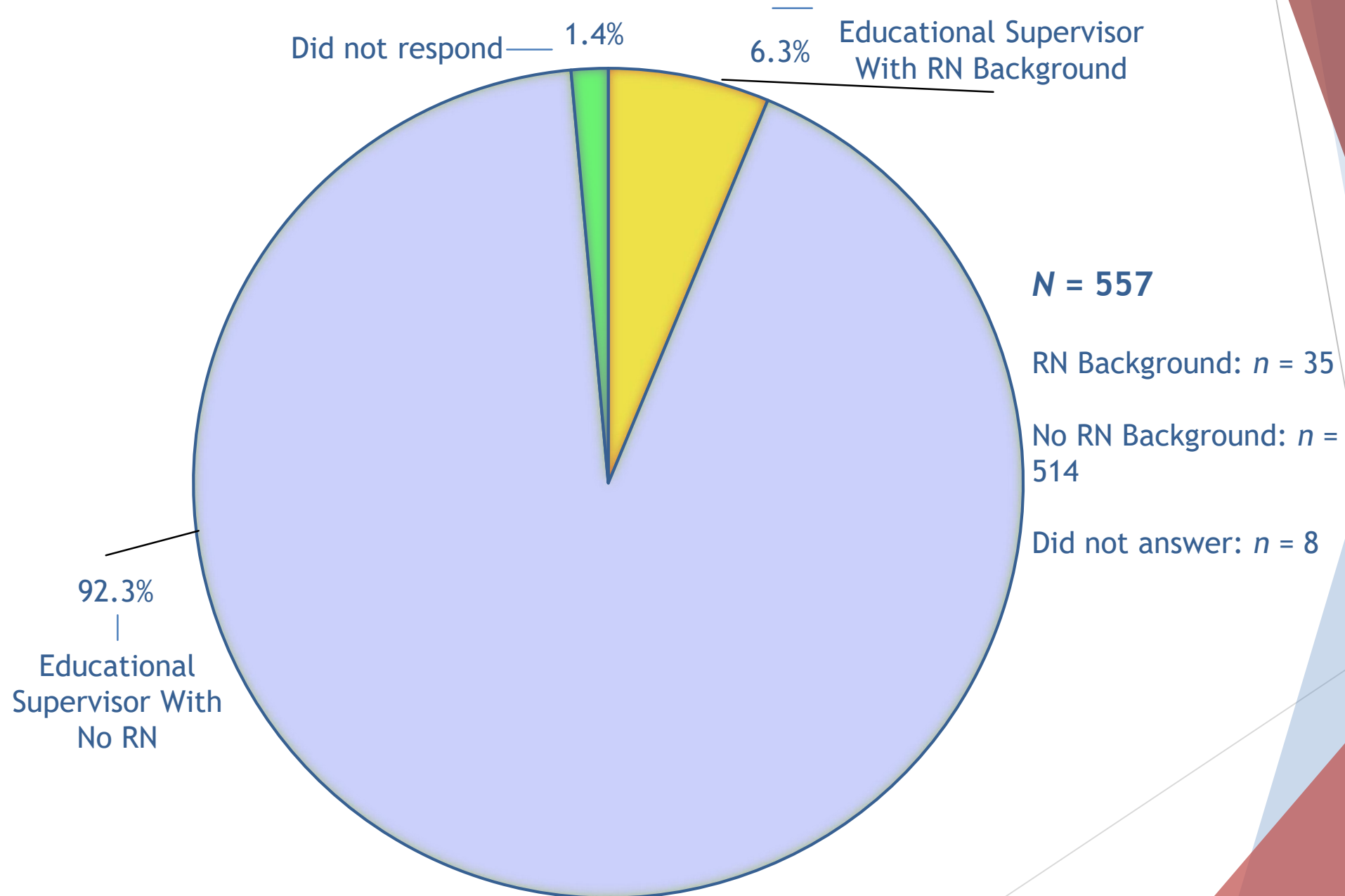


Title of Supervisor: Who Evaluates the Nurse?



- Building Administrator
- Student Services
- Athletics or PE
- Other or Not Noted
- Nursing Supervisor
- CSA
- Curriculum Dept.

EDUCATIONAL BACKGROUND OF THE SUPERVISOR



Supervisor's Background and Presence of a Lead or Head Nurse

N* = 548

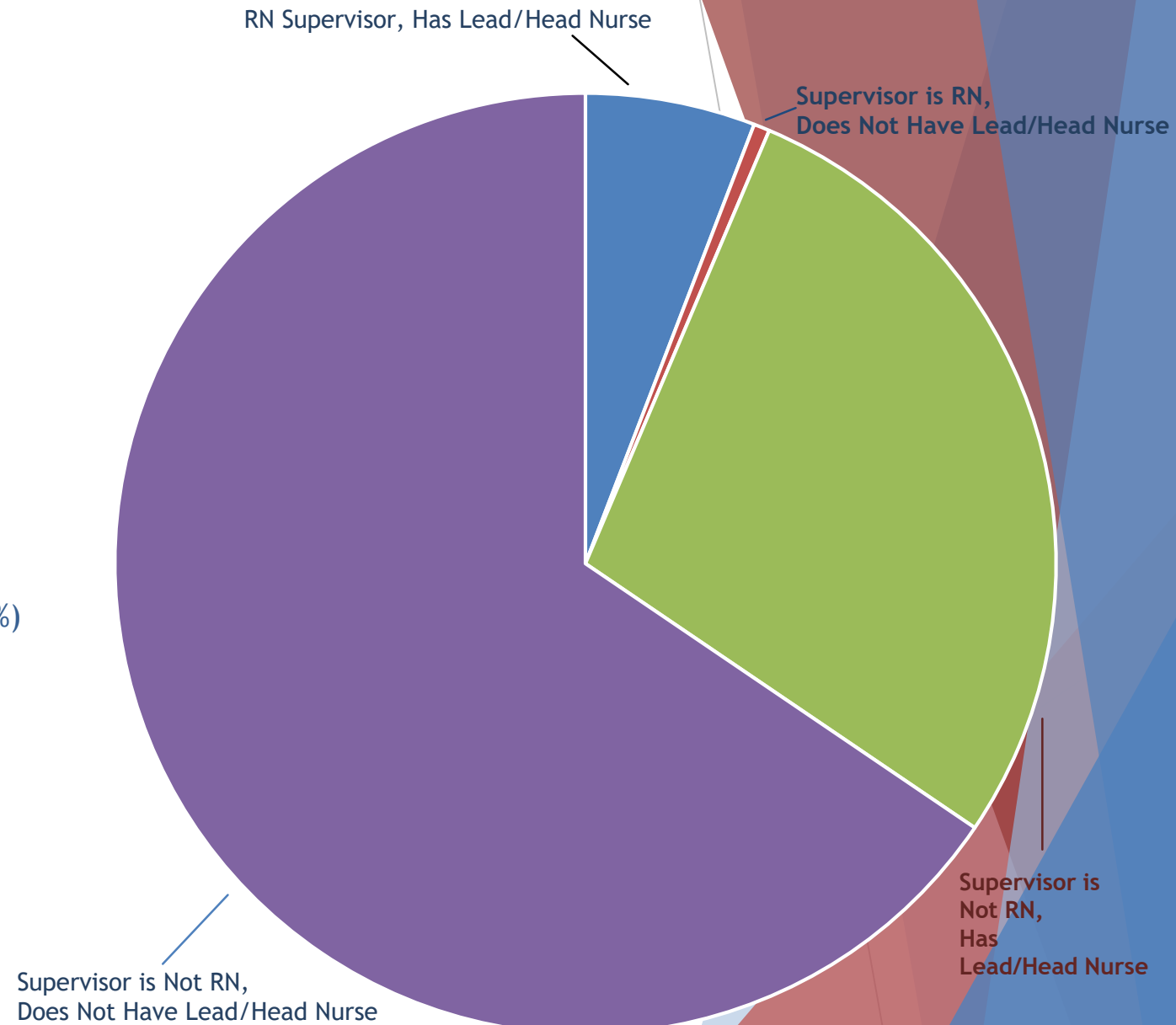
Supervisor is RN and has lead/head nurse: *n* = 32 (5.8%)

Supervisor is not RN and has lead/head nurse: *n* = 154 (28.1%)

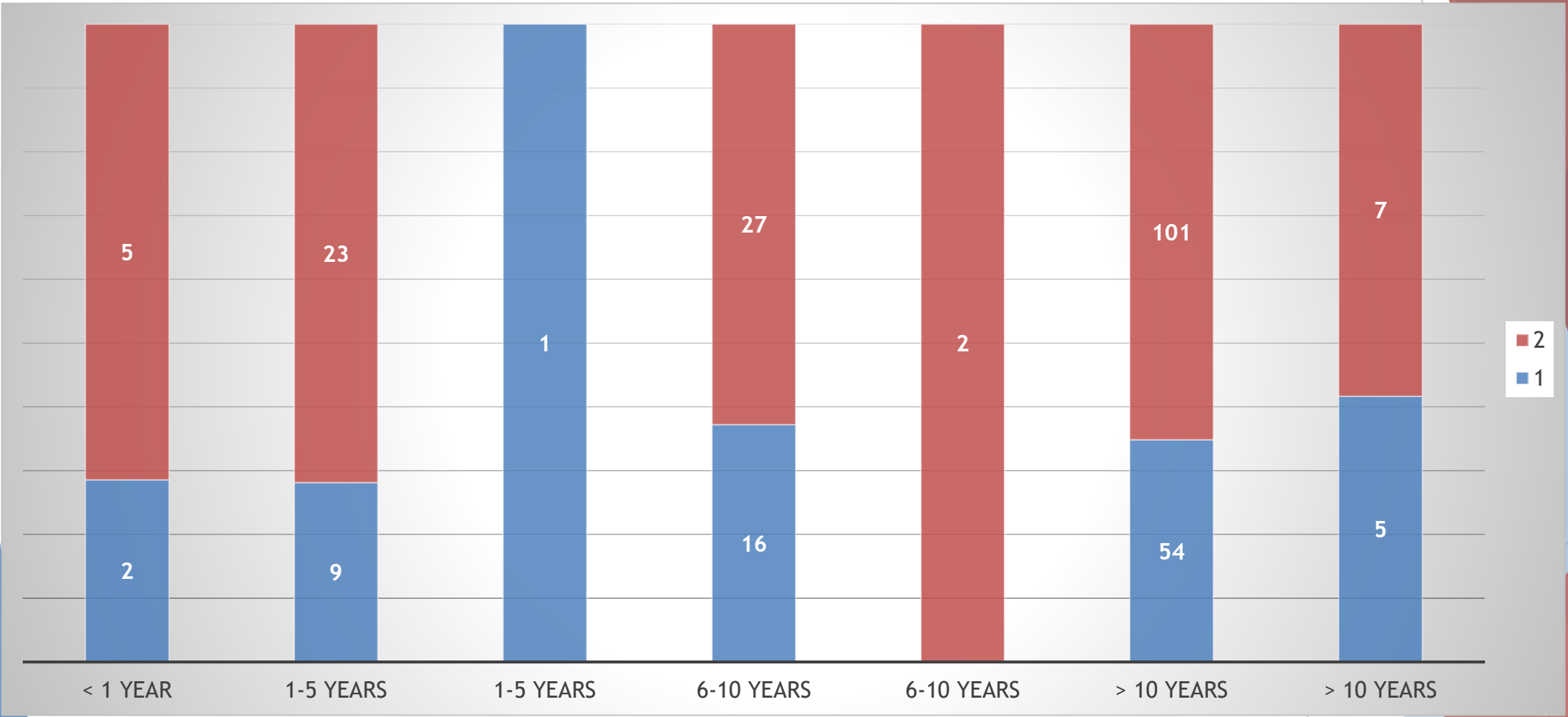
Supervisor is RN and does not have lead/head nurse: *n* = 3 (0.5%)

Supervisor is not RN and does not have lead/head nurse: *n* = 359 (65.5%)

*Does not include 9 respondents who either did not provide supervisor's background or information on



I have enough time to complete my work.



Supv is not RN

Supv is not RN

Supv is RN

Supv is not RN

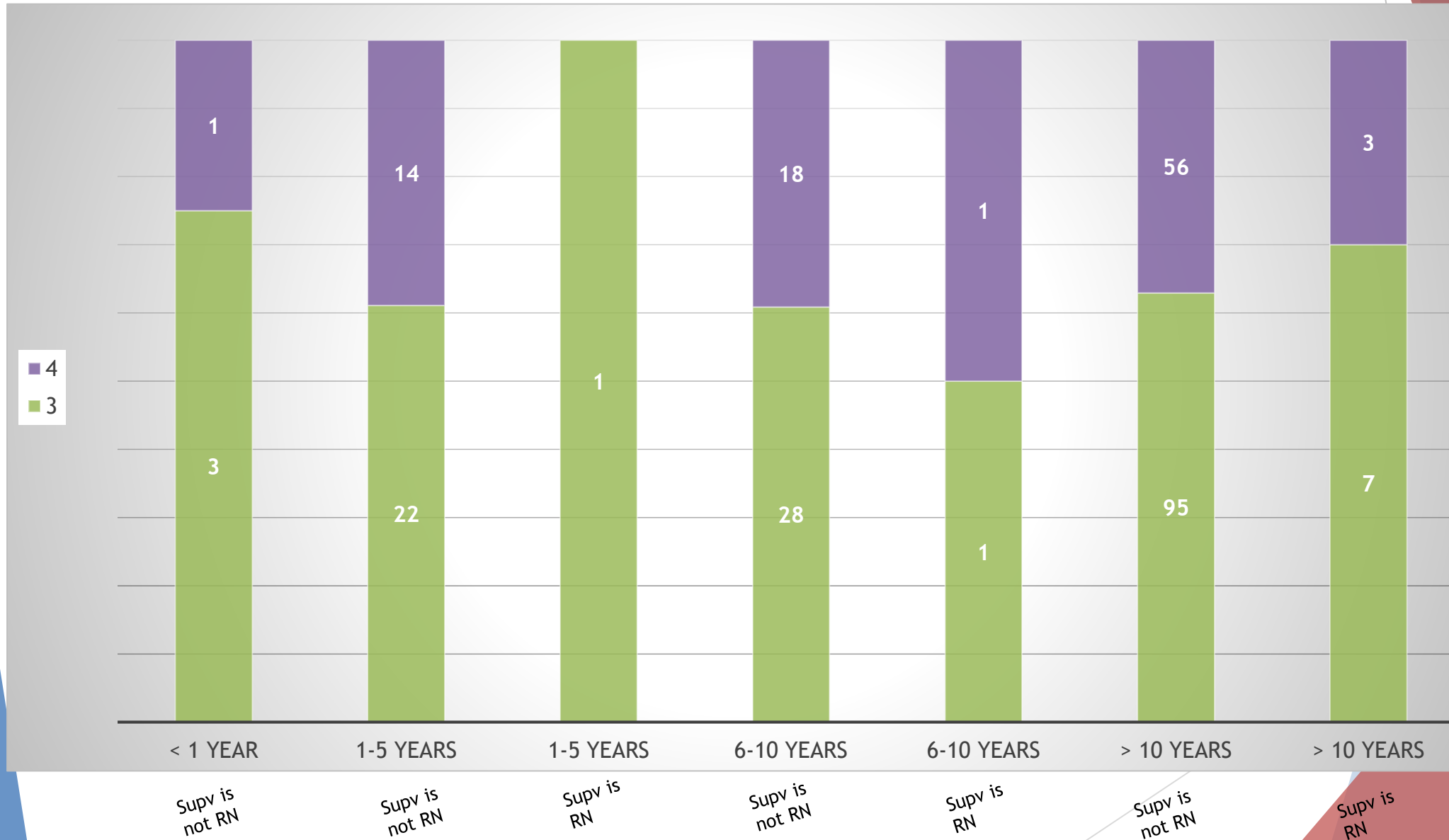
Supv is RN

Supv is not RN

Supv is RN

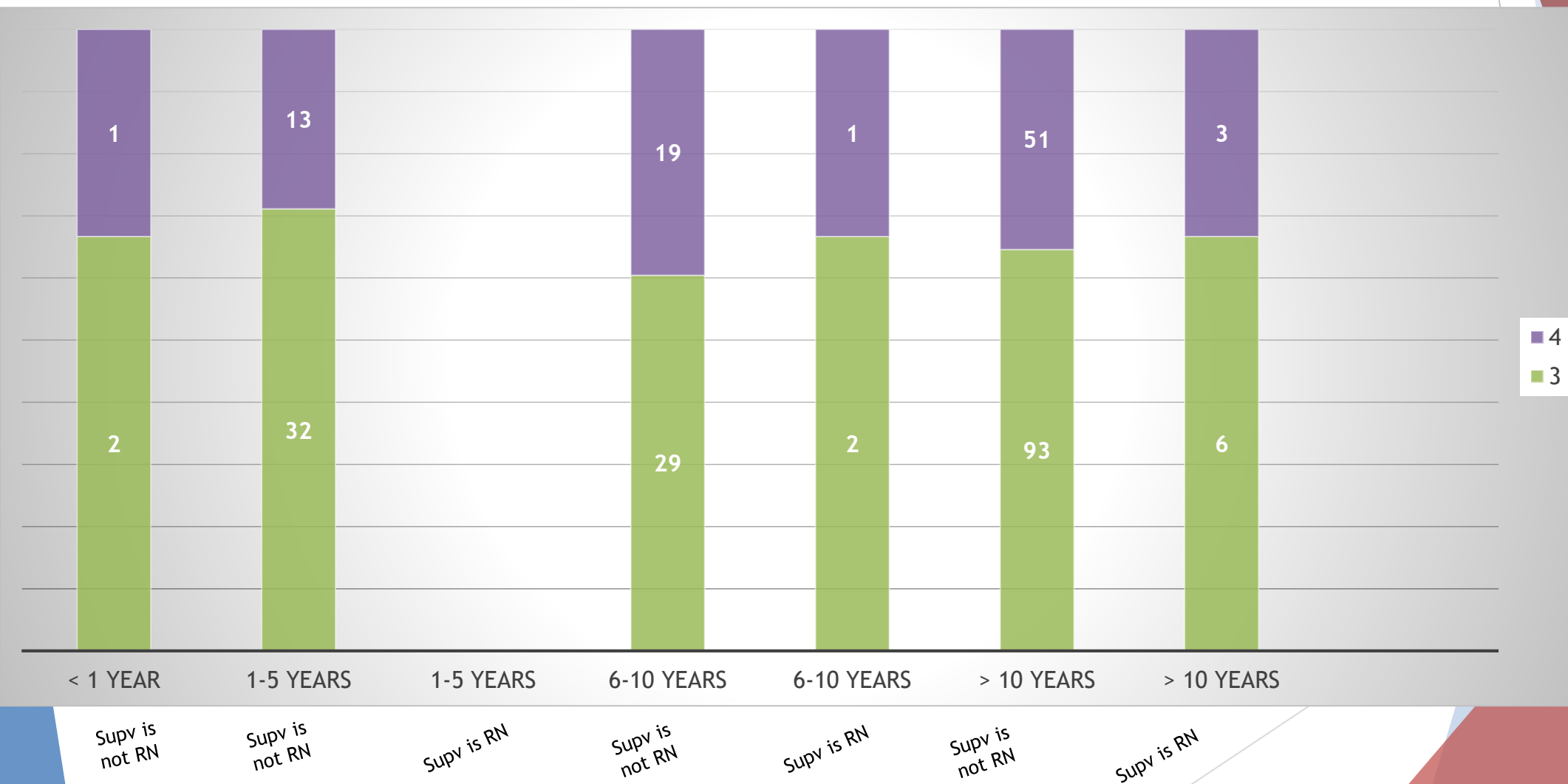
Note:
 1 = Very False
 2 = somewhat false

I have experienced situations in which a student's nursing needs and educational requirements have been in conflict.



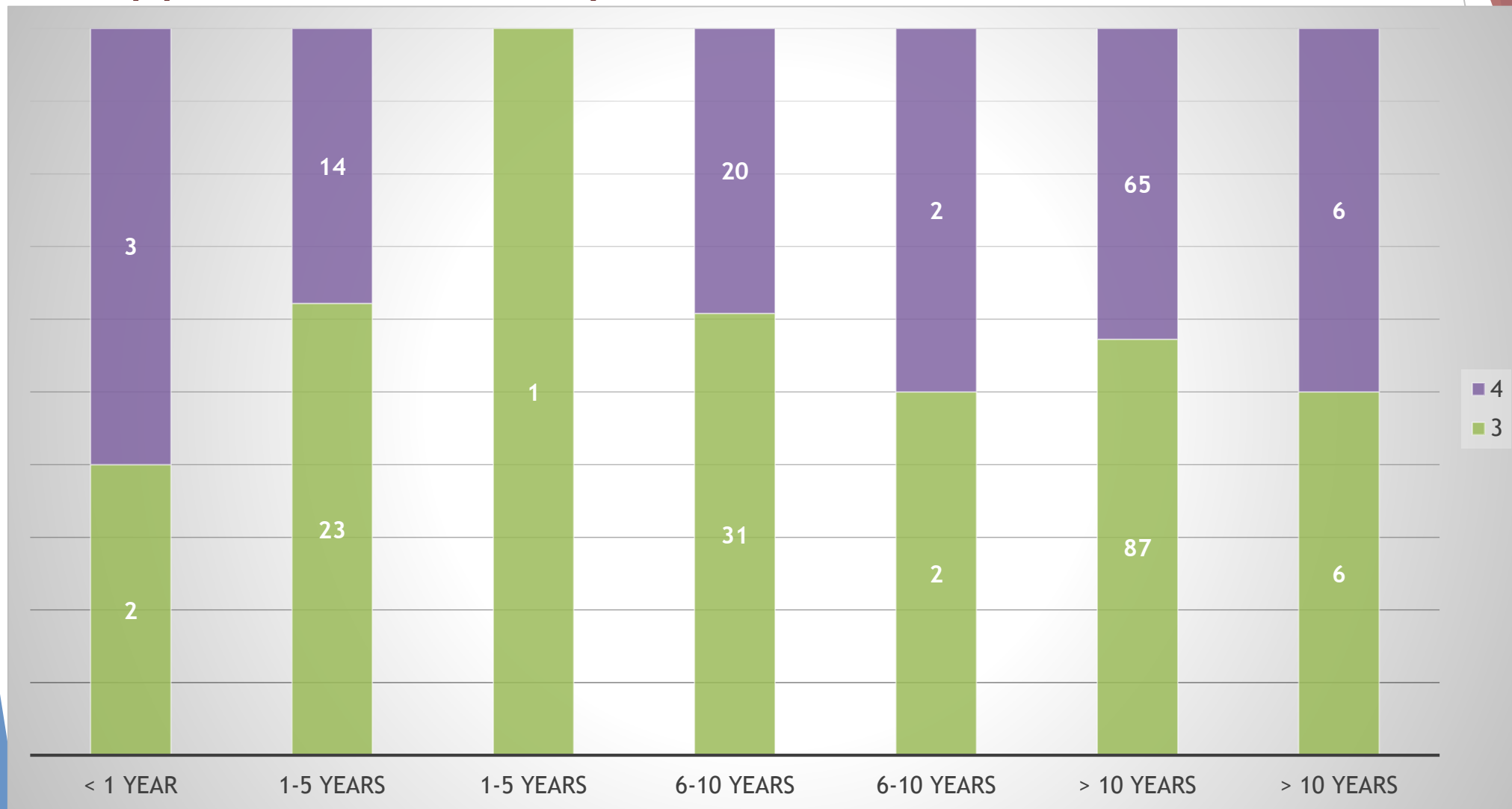
Note:
3 = somewhat true
4 = very true

There are times I work under education policies and/or guidelines that are *incompatible with evidence-based nursing practice*.



Note:
 3 = somewhat true
 4 = very true

I sometimes receive an assignment without the support staff to complete it.



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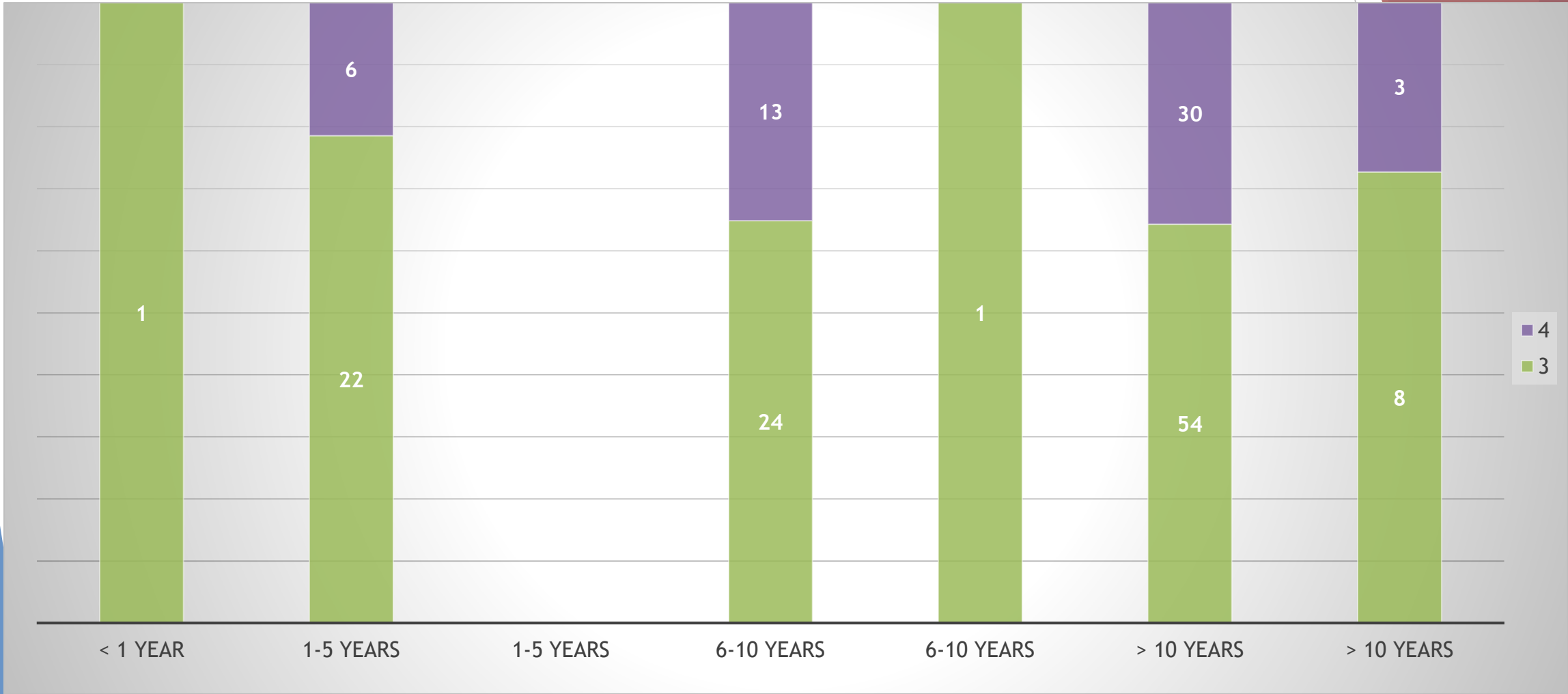
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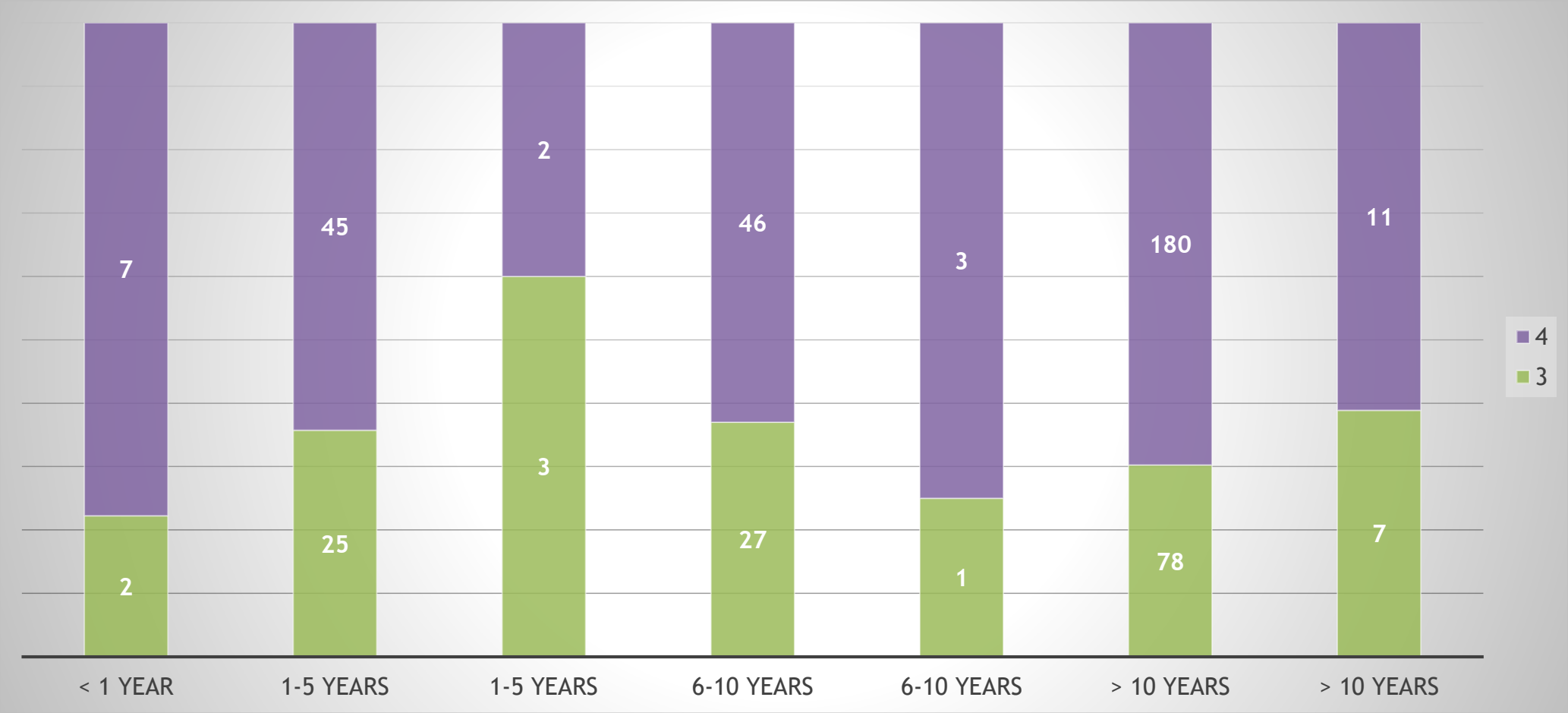
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Supv is not RN

Supv is RN

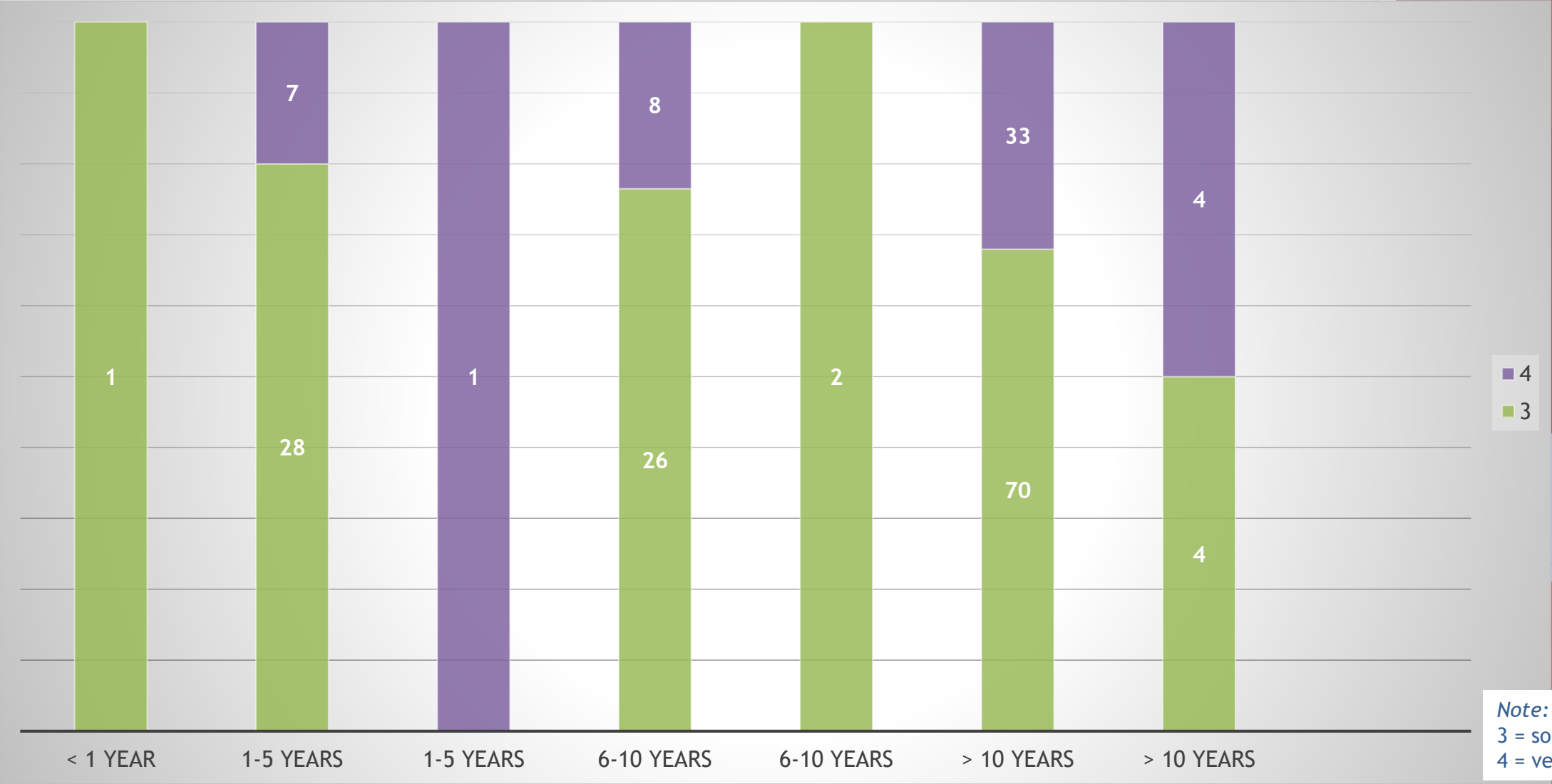
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I have to miss student support meetings (504, I & RS, Child Study Team, or other similar support teams) because that would leave the health office without a nurse.



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8 - I receive incompatible requests from two or more people.



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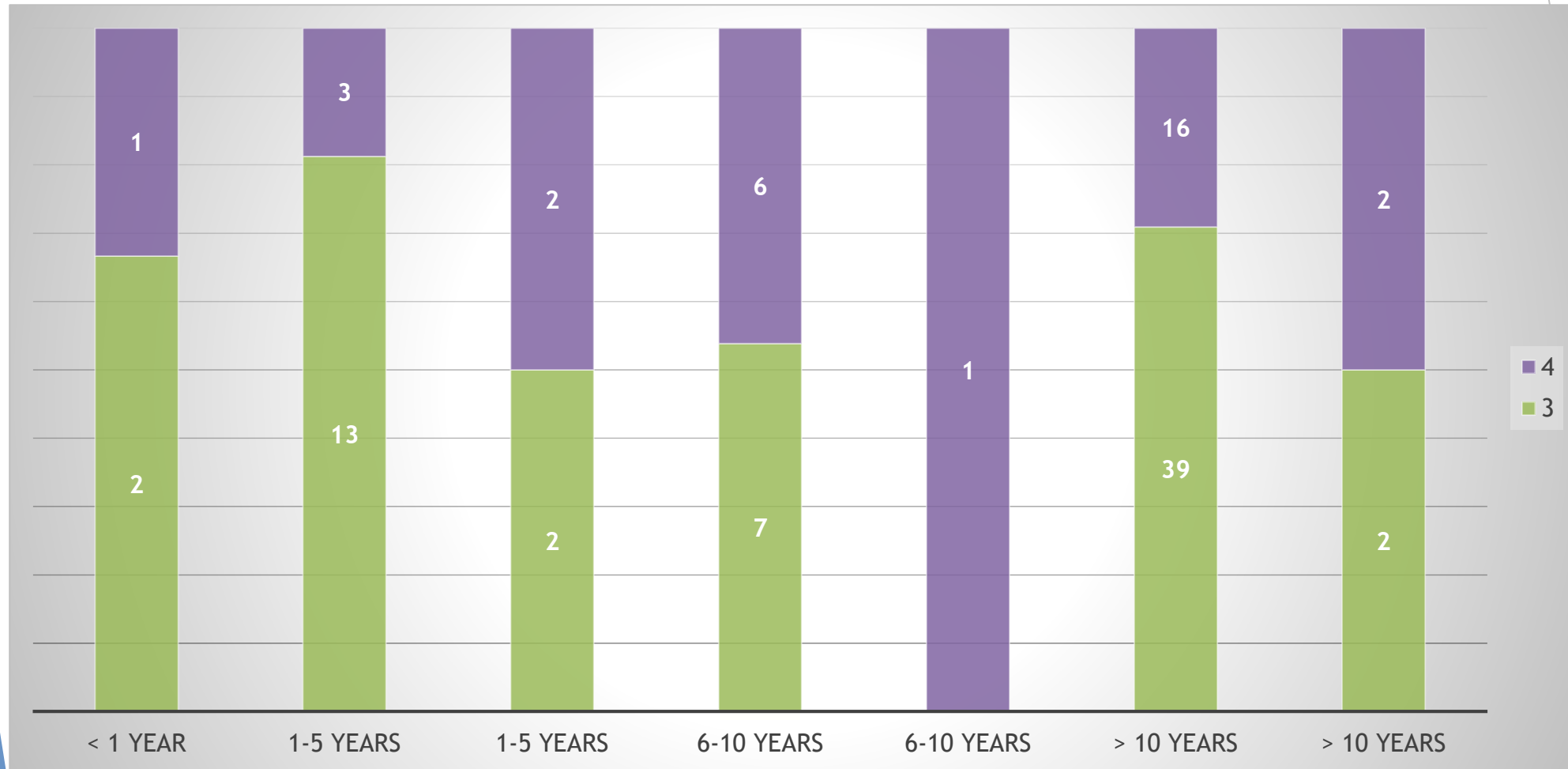
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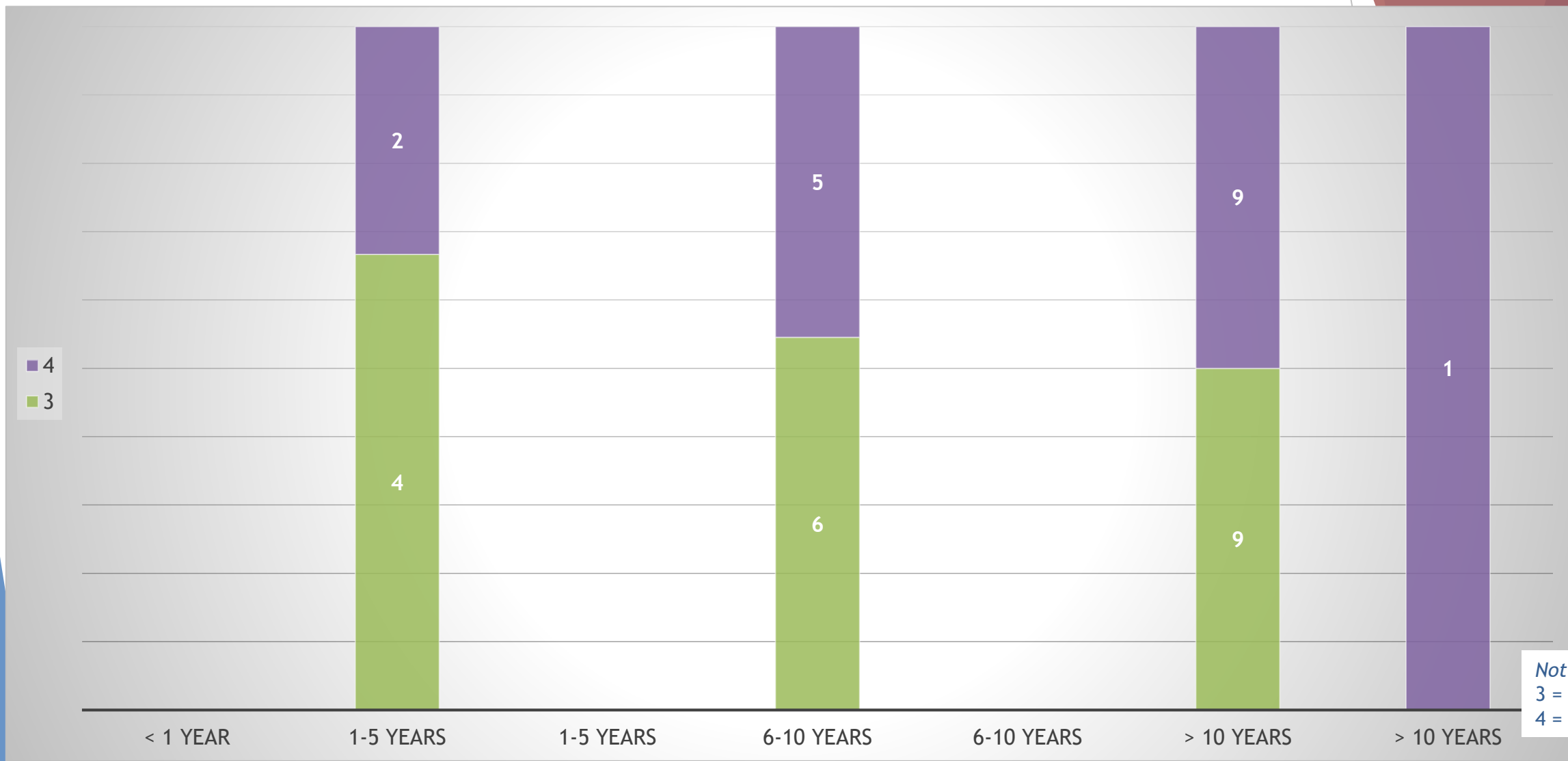
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Supv is RN

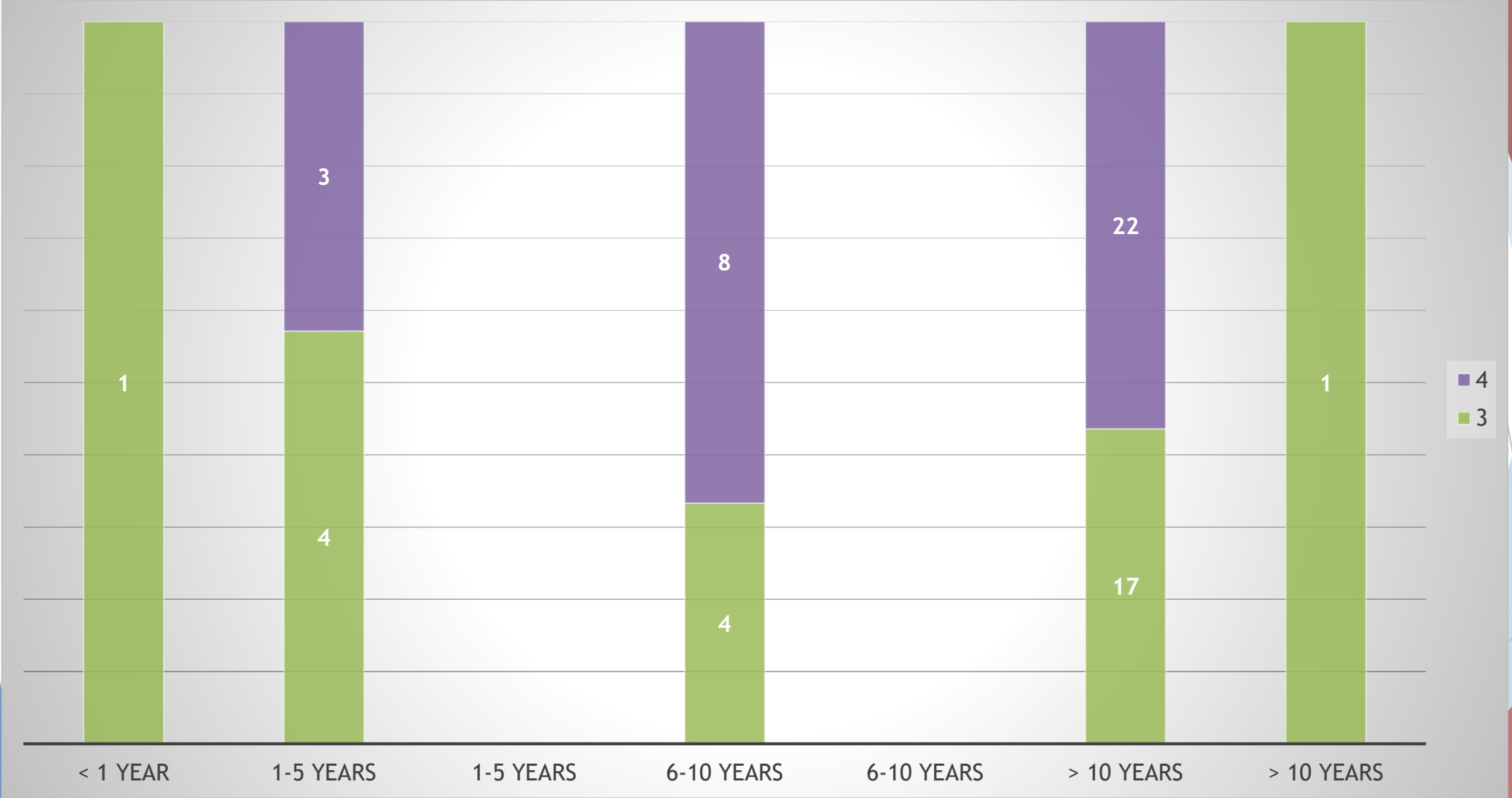
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4 = very true

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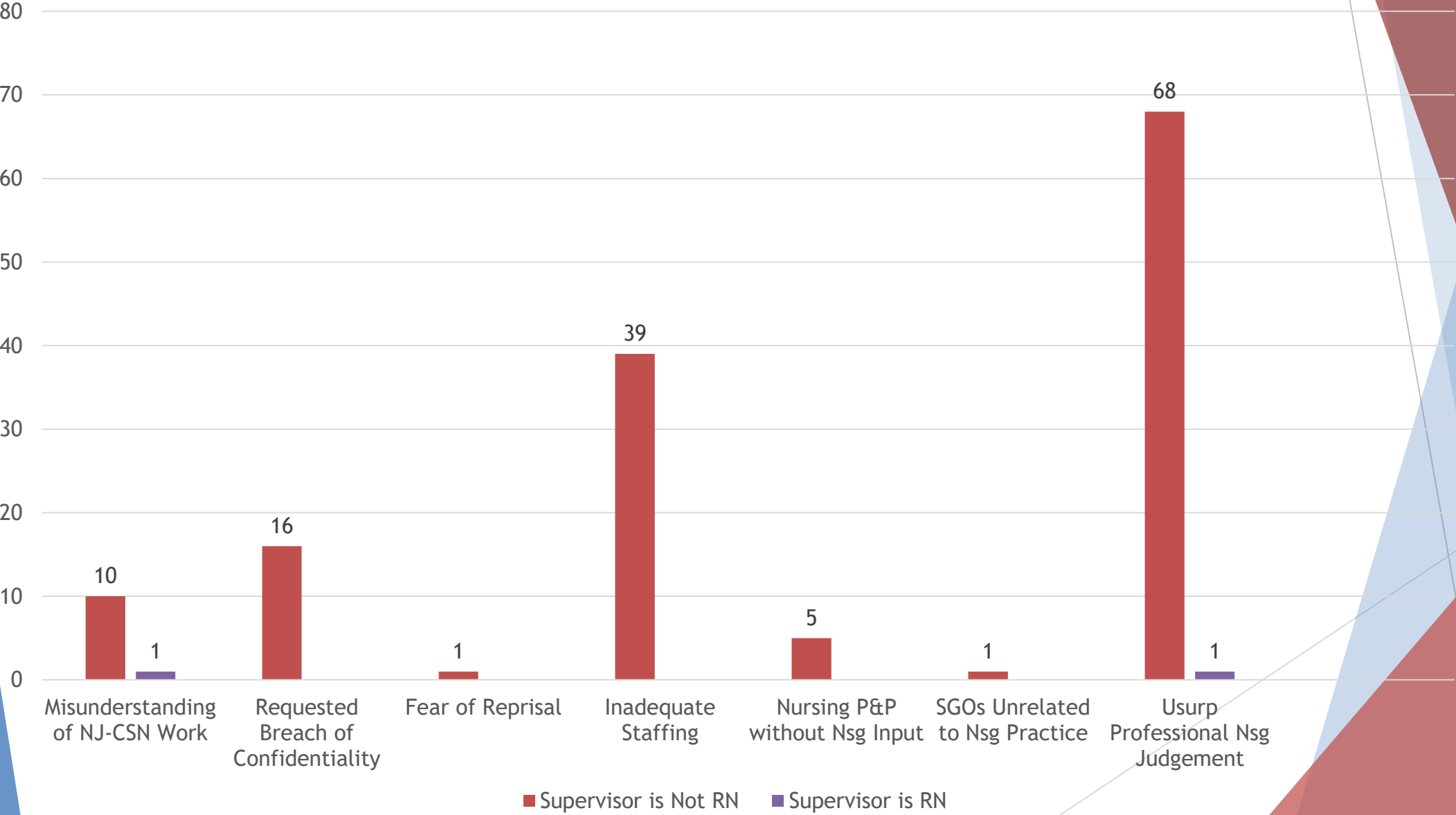
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My supervisor has asked me to disclose confidential medical information that I am not permitted to share.



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Conflict Experiences



Resolution of the Conflicts

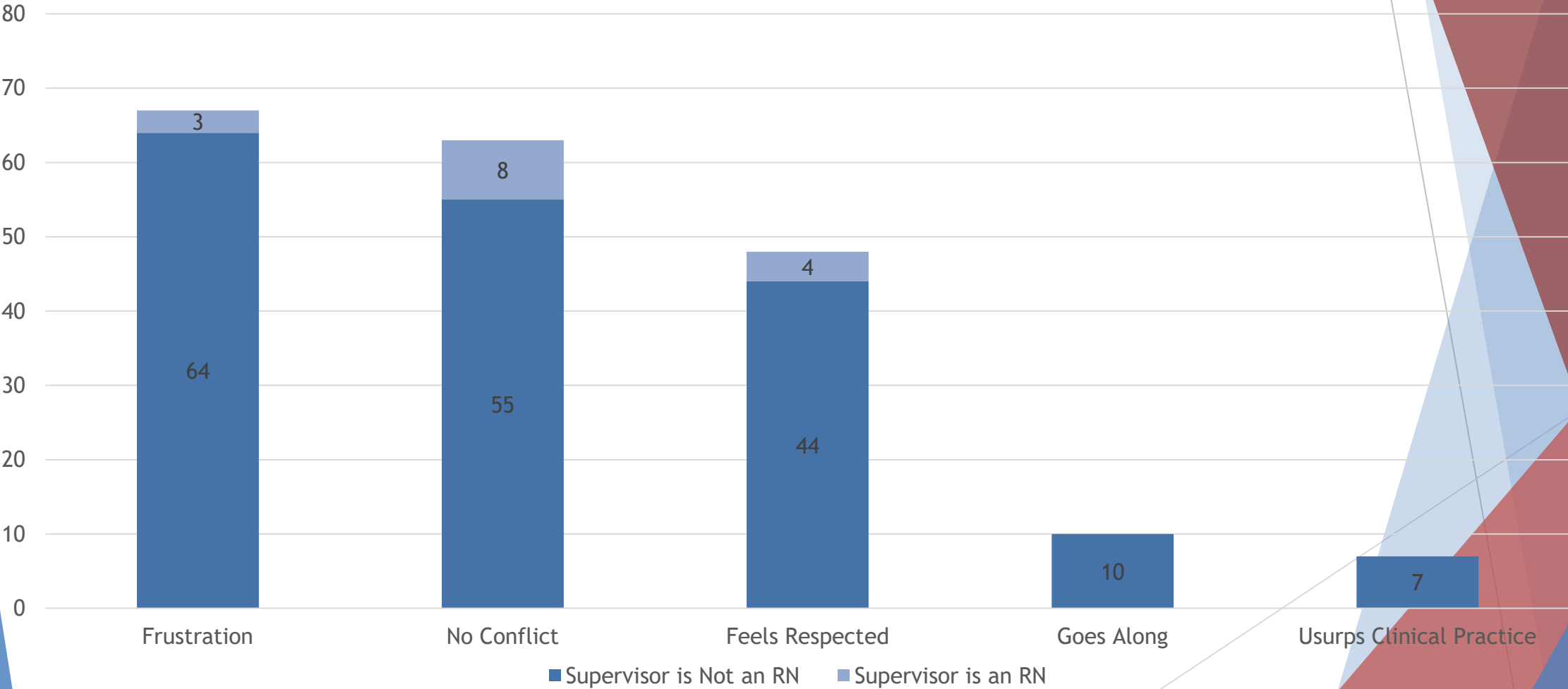
- 170 Nurses whose Supervisor is Not an RN answered:
only 140 responded to conflict question
- Compromise of nursing practice (9)
- Union or attorney involvement (9)
- Abide by State NPA, even if in conflict with directive (15)
- Educated the supervisor about the issue (34)
- Documented conflict, but no change in practice (5)
- Left the position because of the conflict (1)
- Improvement in practice (18)
- **No resolution of the conflict (79)**

Impact of Supervision on Job Performance

In Other Words:

How Does the Supervision of the School Nurse Affect the Work and Feelings of the Nurse?

Please describe any situation in which your immediate supervisor's professional and/or educational background might have influenced your *job performance*.

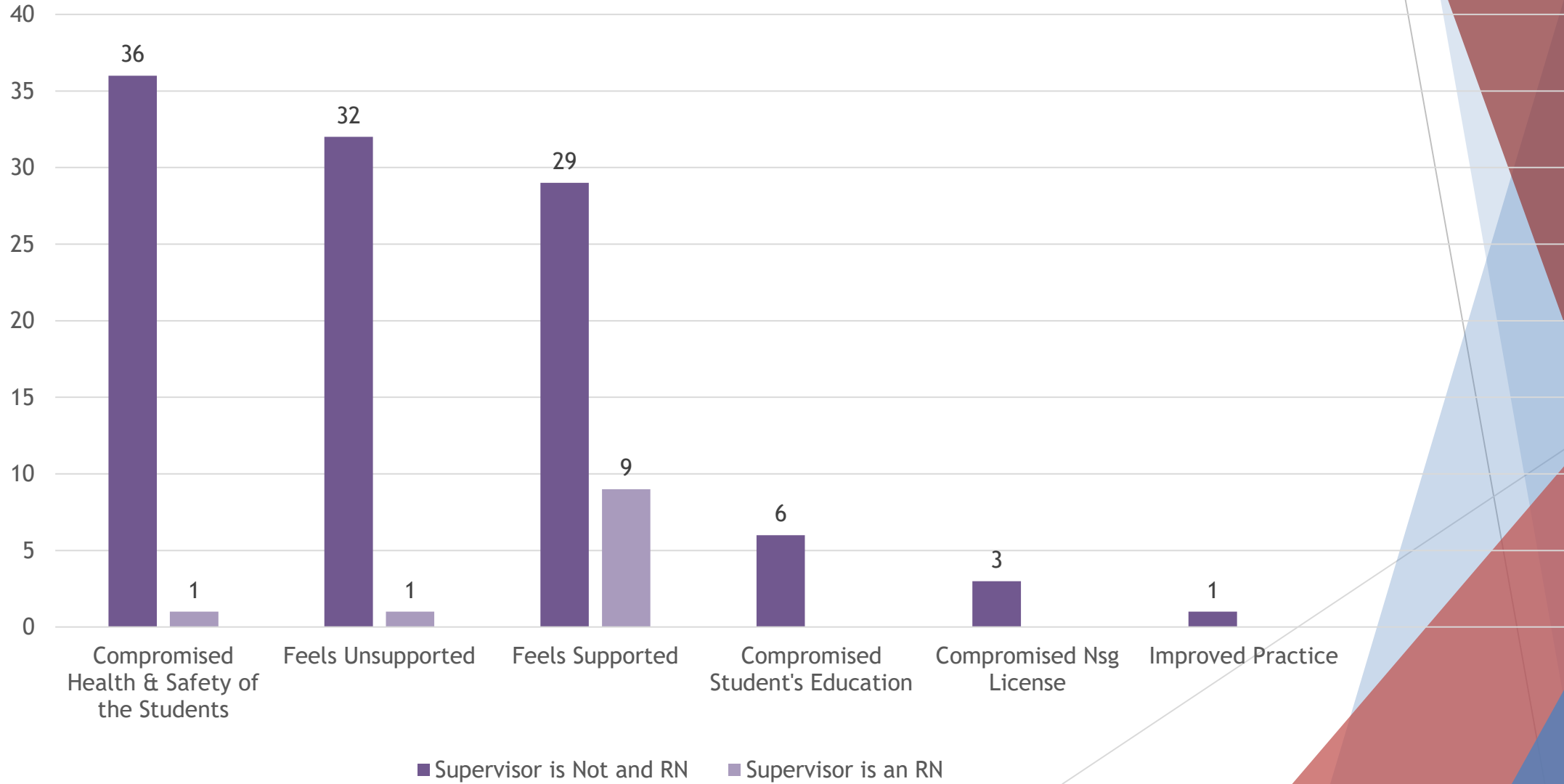


Impact of Supervision of Clinical Performance

In Other Words:

How Does the Supervisor Affect Clinical Practice of the Nurse?

Please describe any clinical situation(s) in which you believe the educational and/or professional background of your immediate supervisor had an impact on your school nursing practice.



Interpretation of Findings:

Effect of the Nurses' Understandings
of Their Roles on Clinical Practice

Role Conflict: Can Whole School, Whole Community, Whole Child be Implemented?

▪ Findings:

- Inability to complete work timely
- *Seemingly* competing goals of SNs and educators
- Involvement of union and/or attorney
- Fear of reprisal
- Ability to practice as a professional nurse

▪ Potential Consequences:

- Ability to practice as a professional nurse
- Job attrition balanced by benefits?
- Compromised job performance: HEALTH and SAFETY of students

School Nurse Practice Implications Related to *Supervisor Background*

- **Findings:**

- Conflict related to direct clinical practice
- Frustration for the school nurse
- No resolution of conflict: how can practice be improved?

- **Potential impact:**

- **For the student:** decreased achievement and risk to health
- **Parental impact** for incorrect clinical decisions
- *Noncompliance with regulations* (504, IEP, NPA)
- Inability to improve nursing practice
- **For the community:** Immunizations and health of the community

Policy Implications

- School nurse *must* provide proper care within scope of RN license
- School nursing *must* support academic achievement
- Recognize that students - youth - have no voice in policy development for nursing
- School nurse involvement in development of the school nursing program
- Health policies *must* be current and evidence based
- Enhance communication without fear of reprisal
- Encourage and support relevant school nurser professional growth

Practice Implications for School Nurses

- Take responsibility for *all* nursing actions
- Discuss conflicts with supervisor
- Document compromised practice to work toward improvement

Practice Recommendations

- **Nurse:**
 - Read and understand NPA
 - Accept that supervisors have best interests of students in mind
 - Budget constraints
 - Use evidence-based practice
 - Discuss issues with supervisor
 - Recommend constructive ideas
- **Supervisor:**
 - Accept that school nurses want to support students
 - If possible, have RN background
 - Respect professional expertise of the school nurse
 - Hold meetings with school nurse
 - Support evidence-based nursing care
 - Provide *meaningful evaluations*

Supervisors' Survey

	Number	Percent
Survey Links Distributed	1252	
Completed surveys	30	< .03% **

27/30 (90%) = School Administrator

4 RNs (13.3%)

1 reports not understanding the School Nurse role completely

1 feels “somewhat” unqualified to supervise the School Nurse

5 (16.6%) said the nurse receives incompatible requests

1 believes the educational policies and EBP nursing may be “somewhat” incongruent

7 (23.3%) said nurse misses student support meetings

1 reported asking a School Nurse to provide non-emergency medication to a teacher to take on a class trip

Lice: misunderstandings re: transmission, exclusions, screenings

Questions and Discussion

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References

American Diabetes Association (2011). *Diabetes statistics: Data from 2011 National Diabetes Fact Sheet (released Jan. 26, 2011)*. Retrieved from <http://adap-old.pub30.convio.net/diabetes-basics/diabetes-statistics/>

American Nurses Association and the National Association of School Nurses (2011). *Scope and standards of practice: School nursing* (2d ed.). Silver Spring, MD: American Nurses Association.

Biddle, B.J. (1986). Recent developments in role theory. *Annual Review of Sociology*, 12, 67-92.

Butterworth, T., & Faugier, J. (Eds.). (1992). *Clinical supervision and mentorship in nursing*. London, England: Chapman and Hall.

Halbert, L. (2017). *The supervision of school nurses in New Jersey: Parallel needs, actions, and impacts on student care* (Doctoral dissertation). Retrieved from ProQuest.

Kahn, R.L., Wolfe, D.M., Quinn, R.P., Snoek, J. D., & Rosenthal, R. A. (1964). *Organization stress: Studies in role conflict and ambiguity*. New York: John Wiley and Sons, Inc.

King, K.K. (2014) Violence in the school setting: A school nurse perspective. *Online Journal of Issues in Nursing*, 19(1), 58-66.

Marzano, R., Frontier, T., & Livingston, D. (2011). *Effective supervision: Supporting the art and science of teaching*. Alexandria, VA: ASCD.

National Association of School Nurses (NASN) (2019). *About: Definition of school nursing*. Retrieved from <https://www.nasn.org/about-nasn/about>

Rice, S.K., Biordi, D.L., & Zeller, R.A. (2005). The relevance of standards of professional school nursing practice. *The Journal of School Nursing*, 21(5), 293-298.

Rizzo, J.R., House, R.J., & Lirtzman, S.I. (1970). Role conflict and ambiguity in complex organizations. *Administrative Science Quarterly*, 15(2), 150-163.

U.S. Department of Health and Human Services. (2008). *Use of mental health services in the past 12 months by children aged 4-17 years: United States, 2005-2005*. Retrieved from <http://www.cdc.gov/nchs/data/databriefs/db08.pdf>