

**Standards of Quality and Effectiveness for Programs of
Professional School Nurse Preparation in California**

Commission on Teacher Credentialing

State of California

October 1989

Revised November 1994

**Standards of Quality and Effectiveness for Programs of
Professional School Nurse Preparation in California**

**Prepared by the
Advisory Panel on School Nurse Preparation
and the
Professional Services Division**

**Commission on Teacher Credentialing
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Definitions of Key Terms

Standard

A standard is a statement of program quality that must be fulfilled for initial approval or continued approval of a professional preparation program by the Commission. The Commission determines whether a program satisfies a standard on the basis of a consideration by an evaluation team of all available information related to the standard.

Factors to Consider

"Factors to consider" will guide evaluation teams in determining the quality of a program's response to each standard. Within the scope of a standard, each factor defines a dimension along which programs vary in quality. To enable an evaluation team to understand a program fully, a college or university may identify additional quality factors, and may show how the program fulfills these added indicators of quality. In determining whether a program fulfills a given standard, the Commission expects the team to consider, in conjunction with each other, all of the quality factors related to that standard. In considering the several quality factors for a standard, excellence on one factor compensates for less attention to another indicator by the institution.

Key Terms for School Nursing

Definitions of the following terms will assist in using this document. Other definitions are found in the Glossary.

Assessment	A systematic, dynamic process by which the nurse, through interaction with the client, school personnel and health care providers and other providers, collects and analyzes data about the client. Data may include the following dimensions: physical, psychological, socio-cultural, spiritual cognitive, functional abilities, developmental, economic, and life-style.
Nursing Diagnosis	A clinical judgment about the client's response to actual or potential health conditions or needs. Diagnoses provide the basis for determination of a plan of care or program development to achieve expected outcomes.
Evaluation	The process of determining both the client's progress toward the attainment of expected outcomes and the effectiveness of nursing care.
Implementation	May include any or all of these activities: intervening, delegating, coordinating. The client, significant others, or health care providers may be designated to implement interventions within the plan of care.
Outcomes	Measurable, expected, client-focused goals.
Plan of Care	An outline of care to be delivered to attain expected outcomes.
Client	Recipient of nursing actions. When the client is an individual, the focus is on the health state, problems, or needs of a single person. When the client is a family or group, the focus is on the health state of the unit as a whole or the reciprocal effects of an individual's health state on the other members of the unit. When the client is a community, the focus is on personal and environmental health and the health risks of population groups. Nursing actions toward clients may be directed to disease or injury prevention, health promotion, health restoration, or health maintenance.
Health Care Providers	Individuals with special expertise who provide health care services or assistance to clients. They may include nurses, physicians, psychologists, social workers, nutritionists/dietitians, and various therapists. Providers also may include service organizations and vendors.

Introduction to the Report: History of School Nursing and Licensure

Nursing in California public schools has several decades of varied and rich history. Prior to 1945, no formal credential was required for nursing services. California Registered Nurse licensure was sufficient. Nurses were licensed as Registered Nurses following three calendar years of preparation, most commonly in hospital schools of nursing. Many school nurses, however, especially those in metropolitan areas, pursued additional coursework to assist them in their practice, recognizing the differences between nursing in hospitals, and community nursing in school settings (Casady, personal communication, 1987).

Following World War II, nurses working in public schools were required to hold a Health and Development Credential. The Health and Development Credential required either California public health nurse certification, or a baccalaureate degree and thirty six semester units of specified undergraduate coursework. Partial completion of coursework was allowed. At that time, and continuing to the present, public health nurse certification was commonly awarded following completion of a program leading to a Bachelor of Science degree in Nursing (BSN). Nurses graduating from BSN programs during this period were automatically eligible for a Health and Development Credential, as they had met the public health nurse certification requirement within the baccalaureate nursing degree curriculum (CTPL 1972).

In 1961, the "Fisher Act" was passed and fully enforced in 1964. Under this law, the title of the nursing credential was changed to Standard Designated Services Credential with a Specialization in Health (School Nurse). The Standard Designated Services Credential required all applicants to hold a baccalaureate degree with public health nurse certification. Additionally, an applicant was required to complete either a school nursing internship program under the joint supervision of a higher education institution and a public health department or school district, or, specific coursework equal to approximately one year of post-graduate study to include a supervised school nurse field experience. This credential allowed for past successful nurse or public health nurse experience to be substituted for the field work component (CTPL, 1972).

The Standard Designated Services Credential was the nursing credential issued during much of the 1960's and early 1970's. This credential was similar to the previous Health and Developmental Credential in that it allowed holders to be issued a "provisional" credential if they had not met all the requirements for the full credential. Provisional credentials were valid only to the end of the academic year in which they were issued and were not renewable.

The Teacher Preparation and Licensing Law of 1970, known as the "Ryan Act", again altered nursing credential requirements. Implemented in 1974, the Ryan Act renamed the nursing credential the Health Services Credential: School Nurse. The 1970 statute eliminated the requirement for public health nurse certification, and allowed for the issuance of a "preliminary" credential for five years during which time the holder pursued coursework in an approved program, equal to a fifth academic year (not less than 24 semester units) (CTPL, 1974).

Eligibility requirements for a preliminary Health Services Credential were (and continue to be) valid California Registered Nurse licensure and a baccalaureate degree. The Health Services Credential continued to require field work, but also provided for a waiver of this requirement in-lieu of successful school nurse experience until the Fall of 1988. Following completion of the academic course requirements including field work or its waiver, applicants were formerly eligible for a clear Health Services Credential. The clear credential was subsequently replaced by a professional credential which has identical program requirements, but requires a two-year professional school nurse experience.

In 1994, California has ten institutional programs approved to provide coursework and clinical field work experiences for the nursing credential *(CSNO, 1987-94). It is the opinion of graduates and faculty of these programs that curricula established under the Ryan Act have had a very positive effect on the quality of nursing services in the schools, and on the effective meeting of the health needs of California school children.

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Rationale for the Standards

Students' ability to profit from the learning experiences offered in schools is directly affected by their physical and emotional health (Morgan, 1987; Brown, Grubb, Wicker and O'Tuel, 1985). The primary objective of the school health services provided by professional school nurses is to strengthen the education of children and youth by assisting them in attaining or maintaining a high level of health, and to support their families in obtaining care for each child's identified and potential health needs (NASN, 1979; CSNO, 1983).

Needs Statement

School nursing has progressed from its primary concern of communicable disease and infectious disease control to addressing the more complex health needs of today's children. The "new morbidity" affecting the health of children today involves a broad spectrum of behavioral, social, emotional, physical and educational problems which require a complex range of services (Gephart, Egan, Hutchins, 1984). The complexity of these health issues has led to a myriad of new health threats to the school population. As a result, the role of the school nurse has evolved into a role encompassing a broad range of activities. These may include, but are not limited to:

- Identification of, and intervention, with, the child at risk for abuse and neglect.
- Detection and control of communicable diseases within the school.
- Provision of counseling, guidance, and to individuals and groups about personal health practices and needs.
- Provision of pre- and post-natal education for pregnant and parenting teens.
- Intervention to prevent accidents and suicide, adolescent pregnancy, and drug use and abuse through health education and counseling.
- Provision of skilled nursing services to students with exceptional needs.
- Case management of students with exceptional needs to include supervision of assisting personnel providing health-related services to students
- Monitoring the immunization status of students which may include the provision of appropriate immunizations.
- Assessment of, and intervention in the health problems of refugee children.
- Provision of other health education programs designed to promote and maintain health.

The evolution of the nurse's role has also led to nursing involvement in the assessment of the physical, emotional, and social health of children and their families. The goal of this assessment is to assist the student and the family toward greater health and well being. The impact of a child's health problems is either minimized or exaggerated by the family's response to the problem and by the family's ability to access the appropriate medical services needed for resolution of the problem. Limited services to any segment of our population will lead to the decline in the health of our population as a whole. The severity of this decline is suggested by relevant studies which report that, at any one time, approximately 31 million Americans or 13% of the non-aged population, are not covered by health

insurance, yet do not qualify for government-sponsored programs (Butler & Kilbreth, 1991). Butler and Kilbreth further posit that almost one-third of the uninsured are below the age of 19 years. Ethnic and minority groups are disproportionately represented in the uninsured group: 22% of Blacks and 32% Hispanics lack insurance coverage (Butler & Kilbreth, 1991).

In addition to the complex social and emotional issues that impact the health of our children, there is a need to recognize, and provide services to, the children with chronic diseases and physical disabilities. The health issues these children deal with on a daily basis can impose almost insurmountable barriers to their education. Asthma, for example, is a major chronic condition that limits children's activity and leads to excessive school absences. It is estimated by the California State Department of Health Services that as many as 70,000 children now fall into the category of medically fragile (Robinson-Hayes, 1991b).

There are estimated 7.8 million children in California. As a group, our children are a far more culturally and ethnically diverse than in the previous generations (California Dept. of Health and Human Services, 1991). Many of the children are recent immigrants to the US and because of limited health care resources in their country of origin, many have poorer health than do children of the population at large. These children have a greater number of illnesses and nutritional deficiencies, may lack immunizations, suffer from severe dental problems and have long-standing unresolved health problems (Bullough & Bullough, 1982), as well as culturally derived health practices and beliefs which can cause treatment and resolution to be more complex.

Health problems come with children. If the commitment to quality education is to be taken seriously, the commitment to health care must be taken seriously. Data suggest nothing less.

The Role of the School Nurse

The health of the school population is the focus of nursing services in the school. Contemporary school nursing has moved into a role that demands the training and expertise of professional school nurses to meet the complexities and multiple demands of the health programs. The professional preparation of the registered nurse, and the subsequent education in a school nurse credential program, enables the nurse to meet the challenges of the health problems described above.

The challenge of the "new morbidity" of children is the early identification of the problem in the individual child. Emphasis given to prevention and health promotion services, as well as to early detection and intervention, decreases the incidence and impact of physical, social or emotional illness. The school nurse utilizes a developmental approach to recognize and to address the health problems of children and families. The holistic approach to health-problem identification allows focus on the physical, emotional, social, and cognitive needs of the child and family. Serving children well requires recognition of the unique needs of children at varying ages throughout the entire maturational process. It also demands understanding of the interrelationships between children, their families and their overall environment.

The school nurse, with training in interviewing skills, is prepared to sensitively communicate with the student who is pregnant, who has been abused or neglected, or who is involved with substance abuse. During the professional program, the school nurse learns to provide health education and counseling to groups and individuals. The school nurse recognizes that progress in decreasing childhood morbidity and mortality rests more on health education, for both parents as well as students, than on scientific discoveries such as new antibiotics.

The school nurse has been professionally prepared to assess physical injuries. Additionally, the clinical nursing expertise of the nurse has become vital as children with significant health problems have moved into the mainstream of education. Legislation mandating "a free and appropriate education for all children" has also recognized that children with special health needs have the right to receive the skilled nursing services needed to allow them to remain in the educational setting. These nursing services may include, but are not limited to: catheterizations, nasogastric tube feeding, monitoring of respirators, endotracheal suctioning, stomal care, and administration of prescribed medications. School nurses are responsible for providing these services to students, or, directly supervising other school personnel who might deliver these services.

The school nurse is also involved in the identification and educational placement of the student with exceptional needs. The nurse's role includes assessment of the student, interpretation of health and developmental findings, provision of information about the student's medical condition to other educational personnel, and supporting and assisting the parents to meet the student's health needs. The school nurse has the knowledge and skills to access resources and capitalize on the entire system of health care to effectively meet the needs of children and families.

The school nurse's preparation in public health brings a community focus to practice and serves to meet the cross-cultural needs of contemporary society. Understanding of culture and its impact on health, development and education is an

integral part of the nursing role (Pickwell, 1983). The appraisal of vision and hearing, screening for scoliosis, monitoring and/or administering physicals for Child Health Disability Prevention Program compliance, and monitoring and/or administering needed immunizations continue to be part of the school nurse's role. First aid protocols and emergency care readiness are facilitated by the nurse working in the school setting. School nurses also continue in care management roles and are participating in managed care systems as health care reform progresses.

The need for a comprehensive health education program, designed to help students recognize how their behavior affects their health, is essential. This program should provide students with information, concepts and skills that will allow them to make responsible health-related decisions, acquire health-related knowledge, and develop positive health attitudes and habits. The school must utilize a team approach in the program planning and implementation of health promotion and health education programs. Many professional, e.g. nurses, administrators, teachers, psychologists, and students, must work cooperatively to educate and motivate our young people to lead healthy lives. The school nurse, by virtue of professional training in health as well as a role in the educational system, is able to lead this team effort and to solicit community support. The school nurse's leadership and the collaboration of school personnel, families and communities, will assist students to achieve their highest health and educational potential.

Standards of Quality and Effectiveness for Programs of Professional School Nurse Preparation in California

CATEGORY I INSTITUTIONAL RESOURCES AND COORDINATION

Standard 1 Program Design, Rationale and Organization

Each program of professional preparation is organized effectively in accordance with a cohesive design that has a cogent rationale.

Rationale

To be well prepared as school nurses, candidates need to experience programs that are cohesively designed based on a logical rationale, and that are effectively operated in keeping with their intended designs.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The program has an organizational structure that forms a logical sequence among the institutional components and that provides for coordination of the administrative components, such as admission, advisement, candidate assessment, and program evaluation.
- There is effective coordination between the program's faculty and staff, between the education unit and other academic departments on campus, and between the institution, local districts and schools where candidates pursue field experiences.
- The overall design of the program is consistent with a stated rationale that has a sound theoretical and scholarly basis, and is relevant to the contemporary conditions of schooling (such as recent demographic changes)
- Quality programs for professional preparation of school nurses may have a variety of curriculum designs. The design should include the subject areas and competencies described in this document. The design should provide for logical progression of acquisition of knowledge and skills and application to the school nurse role.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 2

Institutional Attention to the Program

The institution gives ongoing attention to the effective operation of each program, and promptly resolves each program's administrative needs. The institution gives a designated faculty member with expertise in school nursing the assigned responsibility for coordination of the program.

Rationale

The quality and effectiveness of a program depends in part on the attentiveness of institutional authorities to the program's, effectiveness and needs, which can suffer from institutional neglect.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Administrators of the institution support the goals and purposes of the program, the program coordinator is included in the appropriate institutional decision making bodies, and the actual administrative needs of the programs are resolved promptly.
- The institution has effective procedures to quickly resolve grievances and appeals by faculty, students, and staff.
- The institution allocates adequate and sufficient assigned time to a nursing faculty member or nursing faculty team for program coordination.
- The institution allocates sufficient clerical resources for the program.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 3

Resources Allocated to the Program

The institution annually allocates sufficient instructional and fiscal resources to enable each program to fulfill the Standards in Categories I through VI.

Rationale

A program's resources affect its quality and effectiveness. If resources are insufficient, it is neither realistic nor reasonable to expect its staff or students to achieve high standards of quality or competence.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Adequate funding is evidenced by a student-faculty ratio comparable to other programs offered by the unit, and by, allocation of sufficient material resources, support services, and assigned coordination time, commensurate with the size of the program and curriculum offerings.
- The program's faculty, staff, and candidates have access to appropriate buildings, classrooms, offices, study areas, furniture, equipment, library services, and instructional materials.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 4

Qualifications of Faculty

Qualified persons teach all courses. Faculty teaching school nursing courses and supervising clinical experiences are recognized as having expertise in the field of school nursing.

Rationale

The qualifications of a course instructor or field supervisor may assume many forms, and be derived from diverse sources. For candidates to have legitimate learning opportunities, courses must be taught or supervised by qualified persons.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Each faculty member who teaches courses or supervises field experiences in the program has an appropriate background of advanced study and professional experiences that are directly related to her/his assignment in the program.
- Each faculty member who teaches courses or supervises field experiences in the program has current knowledge of schools and classrooms that reflect the cultural diversity of society.
- The program has effective affirmative action procedures with established recruitment policies and goals to ensure the equitable hiring of faculty.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 5

Faculty Development and Evaluation

The institution evaluates regularly the quality of courses and field experiences in each program, contributes to faculty development, recognizes and rewards outstanding teaching in the program, and retains in the program only those instructors and supervisors who are consistently effective.

Rationale

For a program to maintain high levels of quality and effectiveness, courses and field experiences must be assessed periodically, faculty and supervisors must develop professionally, excellent teaching must be recognized and rewarded, and effective instructors and supervisors must be identified and retained in the program.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The institution evaluates all courses and field experiences at regular intervals of time, including surveys of candidates.
- Course development and evaluation are consistent with the practices in the academic unit.
- Faculty evaluation is consistent with practices in the academic unit and may include student and peer evaluations.
- Faculty development is provided for and faculty currency is maintained through measures such as faculty in-service programs, funding for attendance at professional meetings, professional development activities, continuing education, and/or research.
- The institution recognizes excellence of faculty by appointing and promoting faculty members who serve in the program.
- The institution follows equitable procedures for the identification of effective and ineffective course instructors and field supervisors, and removes from the program each instructor and supervisor who has been persistently ineffective.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 6

Program Evaluation and Development

The institution operates a comprehensive, ongoing system of program evaluation and development that involves program participants, local practitioners and community members, and that leads to substantive improvements in each program.

Rationale

To achieve high quality and full effectiveness, a program must be evaluated comprehensively and continually by its sponsors and clients. Developmental efforts and substantive improvements must be based on these systematic evaluations.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The institution evaluates the program systematically on the basis of criteria that are relate to the design, rationale, goals and objectives of the program, and to the competence and performance criteria that are used to assess candidates in the program.
- The institution collects information about the program's strengths, weaknesses and needed improvement from all participants in the program, including courses instructors, university and district supervisors, the employers of recent graduates, and each cohort of candidates during their enrollment and following their completion of the program.
- Improvements in all components of the program are based on factors such as the results of program evaluation, new regulations affecting school nurse practice, trends in school nurse practice, and/or new knowledge in the field of nursing to maintain a high level of quality, and the identified needs of schools and districts in the local service region.
- There are opportunities for involvement by persons who represent the diversity of the community in program evaluation and development that are meaningful and substantive.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

**CATEGORY II
ADMISSION AND STUDENT SERVICES**

**Standard 7
Admission of Candidates: Academic and Professional
Licensure Qualifications**

As a group, candidates admitted into the program each year have attained a level of academic qualifications, using one or more indicators selected by the institution, equivalent to or higher than candidates admitted to other post-baccalaureate programs offered by the institution. Each admitted candidate holds valid licensure as a registered nurse in California and the appropriate academic degree as determined by the institution.

Rationale

The academic qualifications of credential candidates influence the quality and effectiveness of the program and the profession, so each group of candidates should attain at a level of academic qualifications equivalent to or higher than candidates admitted to other post-baccalaureate programs at the institution. School nurse preparation is a specialty area of the nursing profession and is post baccalaureate; candidates must be professionally licensed as Registered Nurses and hold a baccalaureate degree prior to program admission.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The institution uses multiple measures to define academic achievement.
- The program's recruitment and admission policies and practices reflect a commitment to achieve a balanced representation of the population by sex, race, ethnicity, and handicapping conditions.
- The institution maintains record of all post-baccalaureate admissions and the programs uses these in making admission decisions.
- Evidence is available to the team that the program consistently adheres to this policy.
- Successful candidates have met the identified institutional standards for admission.
- Program applicants demonstrate evidence of potential for academic achievement and have completed prerequisites.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 8

Admission of Candidates: Personal Attributes and Professional Skills

Before admitting candidates into the program, the institution determines that each individual has personal attributes and professional skills that suggest a strong potential for success and effectiveness as a school nurse.

Rationale

Academic qualifications are not sufficient factors for program admission. Appropriate personal characteristics as well as professional skills and experience are essential in assuring a basis for building both advanced nursing skill and attaining the human qualities necessary for effective school nursing.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The institution uses multiple measures for determining each applicant's personal qualities and prior experiences, for example, personal interviews with candidates and written evaluations of candidate's experiences with children and youth and other relevant experiences.
- The program's admission criteria consider the candidates' sensitivity to (and interest in) the needs of children and youth, with special consideration for sensitivity to students from diverse ethnic, cultural and socio-economic backgrounds.
- The program's admission criteria require the candidate to have prior experiences in which suitability for the specialist or service area is demonstrated.
- Programs do not discriminate on the basis of race, gender, age, ethnic origin, language, religion, or physical handicap.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 9

Availability of Program Information

The institution informs each candidate in the program about (a) all admission requirements, academic standards and procedures that affect candidates' progress toward certification, and (b) all individuals, committees and offices that are responsible for operating each program component.

Rationale

To make informed decisions regarding professional competence and certification, applicants must have information about the applicable policies and requirements. With this information, the applicants are better able to make sound career decisions.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Each candidate is informed in writing, early in the program about: (1) the program's prerequisites and goals; (2) program coursework and fieldwork requirements; (3) the legal requirements for certification; and (4) specific standards and deadlines for making satisfactory progress in the program.
- Each candidate is informed in writing, early in the program, about: (1) advisement services, assessment criteria and candidate appeal procedures; (2) individuals who are responsible for program coordination and advisement and assessment of candidates; and (3) individuals who are responsible for administering student financial aid programs on campus.
- Program information is clearly written.
- Specific faculty or staff members are designated as advisors or contact persons for interested applicants and students.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 10

Candidate Advisement and Placement

Members of the institution qualified in school nursing are assigned and available to advise candidates about their academic progress, professional growth and personal development as the need arises, and to assist with professional placement.

Rationale

Once an educational institution admits a candidate to a professional program, it has an obligation to provide for her or his academic, professional and personal development as the need arises.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Student services, including academic advisement, professional assessment, personal counseling and career placement services, are provided by qualified individuals (including faculty members of appropriate academic departments) who are assigned those responsibilities and who are sensitive, competent and readily available when candidates need them.
- The institution provides advice regarding the realities and opportunities for entry into different areas of professional service, and assists each candidate in the pursuit of employment upon completion of the program.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 11

Candidate Assistance and Retention

The institution identifies and assists candidates who need academic, professional, or personal assistance. The institution retains only those candidates who are suited to enter school nursing and who are likely to attain the necessary skills and knowledge to practice as a School Nurse.

Rationale

An institution that prepares school nurses has an obligation to attempt to retain promising candidates who experience difficulties during professional preparation. Conversely, the institution has an obligation to the public schools to dismiss candidates who are unsuited or who are unlikely to become competent as school nurses.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The institution provides special opportunities for students who need academic, professional or personal assistance, provides information to all candidates about these opportunities, consults with candidates about the nature of the necessary assistance, and provides legitimate opportunities for candidates to comment prior to taking adverse actions against them.
- The institution reviews each candidates competence at designated check points, informs candidates of their strengths and weaknesses, provides opportunities for corrective learning, places marginal candidates on probation, dismisses candidates who are determined to be unsuited to practice in the credential area and considers candidate appeals.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 12

Determination of Candidate Competence

Prior to recommendation for the School Nurse Credential, the candidate is evaluated to determine that all performance standards have been met and that the advanced knowledge and skills necessary for school nursing practice have been acquired. This determination is made in writing by university program faculty and staff, and when applicable, by the nurse preceptor.

Rationale

If the completion of a professional preparation program is to constitute a mark of professional competence, as the law suggests, responsible members of the program staff must carefully and systematically document, and determine that the candidate has fulfilled the standards of professional competence.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- There is a systematic summative assessment by one or more persons responsible for the program of each candidate's performance that encompasses the skills and knowledge necessary for professional competence and that is based on documented procedures or instruments that are clear, fair, and effective. The assessment must include a clinical evaluation component.**
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.**

CATEGORY III CURRICULUM

Standard 13 Attainment of School Nurse Competencies

The program gives each candidate adequate opportunities to attain the standards and professional competencies in Category V and to apply and practice those standards and competencies in the school nurse clinical experience.

Rationale

A primary mission of specialty practice preparation programs is to give candidates opportunities to acquire the skills and knowledge that meet standards of professional care, professional performance and current mandates. Didactic and clinical experiences are related and integrated to promote optimal learning.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The program prepares the candidate to assume the multifaceted role of the school nurse through curriculum based on current standards of practice.
- The curriculum provides preparation related to both mandated and other professionally recommended competencies for school nurses.
- The curriculum is designed to coordinate didactic content with the clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 14

Development of Professional School Nursing Perspectives

Within the program, each candidate examines contemporary issues, theories, and research in nursing, education, and related disciplines.

Rationale

Prospective school nurses must develop philosophical, theoretical, and practical perspectives which are compatible with a contemporary role for school nursing.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Curriculum for the School Nurse Program is developed within the context of professional nursing, its relationship to the education profession, and to other health and human service professions.
- Contemporary trends and issues related to nursing and school health are incorporated into the curriculum.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 15

Institutional Rationale for Variations in Candidate Requirements for Program Completion

Program requisites that vary from those required for the majority of candidates must be based on a sound rationale.

Rationale

To justify the inclusion of varied or additional program requirements for individuals, an institution must identify what is indispensable about the variation, and must logically and soundly support its position.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Each program identifies a sound rationale for admission standards and/or program requirements. This may be based on data such as profiles of successful candidates, program evaluation results, or recommendations of national nursing organizations.
- Variations in, or additions to, program requirements are based on the unique competencies and/or specific needs of individually evaluated candidates.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 16

Preparation for Crosscultural Nursing

Prior to or during the program, each candidate engages in crosscultural study and participates in crosscultural experiences.

Rationale

California's population is multicultural. Each school nurse must be prepared to effectively provide nursing and health services to members of its varying cultures.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The curriculum includes exploration of the multicultural aspects of contemporary society.
- The unique health issues of major cultural groups are addressed.
- Socio-economic factors affecting the health status of students are addressed.
- Opportunities are provided for candidates to work with children and families from diverse cultures and ethnic groups.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

**CATEGORY IV
CLINICAL EXPERIENCE**

**Standard 17
Clinical Experience**

The School Nurse clinical experience program component: (1) provides each candidate with a substantive supervised, guided and evaluated clinical practicum with credentialed School Nurse Preceptor(s); (2) provides opportunity to practice school nursing with children of varying ages, developmental stages and health needs; (3) provides for achievement of the Standards in Category V; and, (4) defines and describes candidate roles, responsibilities and performance expectations.

Rationale

Consistent with nursing education standards, a substantive supervised clinical experience is essential. The purposes are to: (1) provide opportunities to integrate theory and practice; (2) prepare the candidate for assuming the role of the school nurse; (3) enable the program faculty to evaluate the candidate's readiness to practice school nursing; and (4) provide opportunities to fulfill the candidate's professional needs.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- A substantive supervised, guided clinical practice may be demonstrated by the use of a planned and systematic process with input from the preceptor, faculty and student.
- Optimal learning within the clinical placement setting is promoted and facilitated.
- Candidates assess the role of the school nurse with children of varying ages and developmental stages.
- Candidate roles and responsibilities are clearly defined and reflective of Category V.
- The school nurse clinical experience is in field settings reflective of California's ethnic, cultural, and racial diversity.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 18

Qualifications and Recognition of School Nurse Preceptors

Each school nurse who serves as preceptor to one or more school nursing candidates is (1) credentialed and experienced in school nursing; (2) jointly selected by the institution and an authorized school district official; (3) oriented to the roles, rights and responsibilities of school nursing students and preceptors; and (4) appropriately evaluated and recognized by the institution.

Rationale

Supervising school nurse preceptors are significant sources of professional role modeling for credential candidates; therefore, they must be well qualified, selected, oriented, and recognized.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- Criteria are used for the selection of preceptors.
- The role and responsibilities of the preceptors are clearly defined and described.
- Preceptors are evaluated for effectiveness.
- A mechanism for recognition of preceptors exists.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 19

Candidate Performance

Throughout the school nurse clinical experience, each candidate's performance is guided and evaluated in relation to the standards in Category V by a school nurse preceptor, by the institutional faculty, and by the candidate.

Rationale

Candidates can reasonably be expected to attain competence only if their performances are guided and evaluated in relation to standards of competence, if they receive complete, accurate and timely information about their progress toward competence, and if they participate in the evaluation process.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- An ongoing systematic process for evaluation of the student is used.
- Input from the preceptors, faculty and the students is used in the evaluative process.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

CATEGORY V
CURRICULUM , CANDIDATE COMPETENCIES AND PERFORMANCE

Introductory Rationale: Recognizing that school nursing is not an entry-level arena for the practice of nursing, school nurse credential programs shall be designed to build upon basic nursing knowledge and skills. Programs must facilitate the development of "advanced nursing knowledge and its application to a specialized area of nursing" (N.L.N 1983). Programs that are designed for the preparation of school nurses in California shall incorporate the curricular dimensions described in this Category into the course of study.

The curricular framework in Category V was developed using six overall role concepts adapted from the roles and functions of nursing as defined in the Preparation and Utilization of New Nursing Graduates (W.I.C.H.E. 1985), as well as the eight standards contained in Standards of School Nursing Practice (A.N.A. 1983). Two additional standards were developed by the School Nurse Panel. Specific curricular components were selected in response to California state mandates (C.S.N.O. 1991), suggested roles and standards for practice (N.A.S.N. 1993), Standards of Clinical Nursing Practice (A.N.A 1991), and contemporary child health and professional practice needs.

Role Concept I

School Nurse Role as
Provider of Client Care
Standards 20, 21, and 22

Role Concept II

School Nurse as
Planner and Coordinator of Client Care
Standards 23, 24 and 25

Role Concept III

School Nurse Role-as
Client Teacher
Standard 26

Role Concept IV

School Nurse Role
Within the Discipline of Nursing
Standard 27

Role Concept V

School Nurse Role as
Investigator
Standard 28

Role Concept VI

School Nurse Role as
Communicator
Standard 29

ROLE CONCEPT I

SCHOOL NURSE ROLE AND FUNCTION AS PROVIDER OF CLIENT CARE

Standard 20

Clinical and Theoretical Knowledge

The school nurse utilizes appropriate theory and clinical knowledge as a basis for decision-making in nursing practice. The candidate applies theoretical concepts from nursing, the behavioral, social, and public health sciences. The program includes but is not limited to several of the following specific theories and clinical knowledge domains delineated below (Adapted from A.N.A. Standard I, 1993).

Rationale

Quality school nursing practice requires clinical knowledge and skills as well as knowledge of appropriate theories and concepts upon which to base decisions and actions.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate applies theoretical concepts from nursing, the behavioral, social and public health sciences. These include (but are not be limited to) several of the following domains:
 1. adaptation
 2. caring
 3. change
 4. communication
 5. crisis
 6. cultural care
 7. developmental
 8. epidemiological
 9. ethical
 10. family
 11. hierarchy of needs
 12. learning
 13. management
 14. maternal role attainments
 15. motivational
 16. parent child interaction
 17. self care deficit
 18. social support
 19. stress and coping
 20. systems
 21. wellness-illness

- The candidate acquires clinical knowledge and experiences related to contemporary health/social concerns. These include, but are not limited to the following domains of knowledge and experience:
 1. access to health care
 2. adolescent pregnancy
 3. child abuse/neglect
 10. infectious/communicable disease
 11. multi-problem family

- | | |
|---|-----------------------------------|
| 4. child/adolescent suicide | 12. nutritional issues |
| 5. common health, developmental and learning problems | 13. poverty |
| 6. cultural aspects of health care | 14. sexuality and sexual behavior |
| 7. environmental health | 15. substance use/abuse |
| 8. disabling conditions of childhood | 16. violence |
| 9. health promotion/risk reduction | |

- The candidate acquires theoretical knowledge and has opportunities to practice selected psychomotor skills in the school setting. The program includes but is not limited to the following psychomotor skills:

- | | |
|------------------------|------------------------|
| 1. hearing screening | 3. vision screening |
| 2. scoliosis screening | 4. physical assessment |

- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 21

Nursing Process

The school nurse uses a systematic approach to problem solving in nursing practice. (Adapted from A.N.A. Standard III, 1983).

Rationale

The problem-solving process used by nurses is the Nursing Process. Nursing Process is defined as a systematic process used in nursing that includes assessment (data collection), nursing diagnosis (analysis), planning, implementation (intervention), and evaluation. The Nursing Process is taught to guide the delivery of nursing and health services in order to achieve desired outcomes with children and families.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate collects health data in a systematic continuous manner.
- The candidate analyses collected data through comparison to norms and standards in order to formulate a nursing diagnosis.
- The candidate develops a plan of care.
- The candidate identifies and implements elements of the plan of care.
- The candidate identifies expected outcomes unique to the client.
- The candidate evaluates the appropriateness and effectiveness of the plan of care.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 22

Clients with Special Health Needs

The school nurse contributes to the education of the client with special health needs by assessing such clients, planning appropriate nursing care, implementing the care, and evaluating the outcome of care.

Rationale

Contemporary school populations enroll clients with special health needs. This includes clients in Special Education Programs and clients with chronic health problems. The school nurse must be prepared to assist these clients as a health professional knowledgeable about health-care laws, programs and personnel.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate assesses, plans, diagnosis, identifies outcomes, implements and evaluates nursing care for the client with special health needs.
- The candidate demonstrates an understanding of the history of and current laws governing clients with special health needs.
- The candidate is cognizant of programs designed to meet the needs of clients with special health needs.
- The candidate demonstrates an understanding of the role of the school nurse with regard to clients in Special Education and other clients with chronic health problems.
- The candidate demonstrates an understanding of the role of allied professionals and of the family in serving the special health needs of clients.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

ROLE CONCEPT II

SCHOOL NURSE ROLE AND FUNCTION AS PLANNER AND COORDINATOR OF CLIENT CARE

Standard 23 Program Management

The school nurse is prepared to establish, maintain and coordinate a comprehensive school health program and to contribute to the formulation and evaluation of school health policy. (Adapted from A.N.A. Standard II, 1983).

Rationale

Contemporary nursing role in the schools goes beyond the delivery of services and necessitates skills in guiding both policy development and program operation and evaluation.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate demonstrates an understanding of school health policy including the development, implementation and evaluation of health policy and procedures. This shall include, but not be limited to policies and/or procedures for: emergency care management; communicable disease control; child abuse and neglect management; medication and treatment administration; para-professional supervision; documentation, recording and reporting of health data; family life education activities; and, the provision of specialized physical health care services.
- The candidate demonstrates an understanding of program planning including the development, planning, implementation and evaluation of nursing, health or health education programs.
- The candidate demonstrates an understanding of concepts related to the overall organization, budgeting and management of the school health program. This shall focus on sources of funds for nursing and health services, the organization of the school year with regard to staff-nurse level concerns and the development of a simple budget.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 24

Collaboration Within the School System

The school nurse collaborates with other school professionals, parents, and care givers to meet the health, developmental and educational needs of clients . (Adapted from A.N.A. Standard IV, 1983) .

Rationale

Many child health, developmental, and learning problems can be effectively remediated by the combined efforts of school professionals, including the nurse, parents and care givers, working collaboratively to bring about change, or to promote, and maintain the client's health.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidates demonstrate an understanding of the role and function of the school nurse in collaborative efforts including school based clinics. This shall include an emphasis on nursing's primary function as an advocate for clients.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

Standard 25

Community Health Systems

The school nurse collaborates with other key members of the community in the delivery of health care to clients and families, and utilizes knowledge of community health systems and resources to function as a school and community liaison. (Adapted from A.N.A. Standard VII, 1983.)

Rationale

The delivery and management of nursing and health services to a pupil, family or community is integrally tied to the network of health services available through public or private agencies within the community. Many client needs may not be met without the assistance of community resources. The school nurse, as a community health nurse, promotes primary, secondary, and tertiary prevention.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate demonstrates an understanding of interagency communication and networking.
- The candidate utilizes and evaluates appropriate community agencies and resources.
- The candidate demonstrates an understanding of the contemporary role of the public health nurse.
- The candidate demonstrates an understanding of the importance of the home visit and makes home visits. This shall emphasize the role of the nurse as a professional skilled in family and home assessment.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

ROLE CONCEPT III

SCHOOL NURSE ROLE AND FUNCTION AS CLIENT TEACHER

Standard 26

Health Education

The school nurse assists clients to achieve optimal levels of wellness through appropriately designed and delivered health education. (Adapted from A.N.A. Standard V, 1983.)

Rationale

The school nurse, because of professional preparation, has the knowledge and skills to provide health instruction in the classroom settings or acts as a resource to promote the development of appropriate health attitudes, values, and behavior.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate demonstrates an understanding of developmentally appropriate concepts and methodologies in the design of health curricula.
- The candidate develops, delivers and evaluates a health instructional unit.
- The candidate provides the client with individual health instruction.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

ROLE CONCEPT IV

SCHOOL NURSE ROLE AND FUNCTION WITHIN THE DISCIPLINE OF NURSING

Standard 27

Professional Role

The school nurse identifies, delineates and clarifies the nursing role, promotes quality of care, pursues continued professional development, and demonstrates professional conduct. (Adapted from A.N.A. Standard VI, 1983.)

Rationale

In order to be effective in the school setting, and to provide quality care and services, the school nurse must have a clear vision of role and maintain knowledge and professionalism. Issues related to school nurse role, evaluation and professionalism must be comprehensively understood if nursing is to be effective in the school setting.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate demonstrates knowledge of the legal aspects of school nursing practice.
- The candidate demonstrates an understanding of ethical issues in school nursing practice.
- The candidate synthesizes a school nurse role. This shall include national, state, and local definitions of school nursing, personal philosophy of school nursing, and methodologies for communicating, clarifying, and implementing this role.
- The candidate projects an understanding of concepts related to nursing performance evaluation and quality of care in school nursing practice. This includes appropriate performance evaluation, peer and self-review.
- The candidate demonstrates and professional growth and collegiality.
- The candidate demonstrates an a professional image through responsible behavior and accountability.

- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

ROLE CONCEPT V
SCHOOL NURSE ROLE AND FUNCTION
AS INVESTIGATOR

Standard 28

Research

The school nurse contributes to nursing and school health through innovations in practice and participation in research related activities. (Adapted from A.N.A. Standard VIII, 1983.)

Rationale

Each professional nurse has the responsibility for the continuing development and refinement of knowledge and skills in the practice of school nursing and school health through research or research related activities.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The candidate has the opportunity to collect data in the school setting and to relate the data to client health problems.
- The candidate demonstrates an understanding of the importance of responsible standards of research in investigative studies, including assurance that a mechanism for the protection of human subjects exists.
- The candidate shares and applies research or research related activities.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

ROLE VI

SCHOOL NURSE ROLE AND FUNCTION AS COMMUNICATOR

Standard 29

Communication

The school nurse uses effective written verbal and non-verbal communication skills in school nursing practice.

Rationale

For the nurse, as the sole health professional working in the school setting, effective communication with multiple constituencies is an essential skill.

Factors to Consider

When an evaluation team judges whether a program meets this standard, the Commission expects the team to consider the extent to which:

- The nature and quality of the candidates' verbal, non-verbal, and written communication with client and other professionals is evaluated.
- The candidate has knowledge of the skills necessary for health-related counseling with clients.
- The candidate demonstrates an understanding of the importance of effective team work, sensitivity to the body politic and strategies for working effectively as an individual within the organizations.
- There is evidence that the curriculum components which comprise this standard are included within both program didactic courses and the school nurse clinical experience.
- The program meets other factors related to this standard of quality that are brought to the attention of the team by the institution.

APPENDIX A

GLOSSARY

<i>Candidate</i>	A registered nurse holding a baccalaureate or higher degree who is seeking a school nurse credential.
<i>Clinical Experience</i>	Student field work practice within schools or associated community agencies as part of approved program curricula in school nursing.
<i>Comprehensive School Health Program</i>	School procedures and activities designed to protect and promote the well-being of clients, families and school personnel. These include three categorical bases: health services, health education/instruction and healthful school living/environment.
<i>Nursing Diagnosis</i>	A clinical judgment about the client's response to actual or potential health conditions or needs. Diagnosis provide the basis for determination of a plan of care or the direction for program development in order to achieve expected outcomes.
<i>Nursing Process</i>	A systematic process used in nursing that includes assessment (data collection), nursing diagnosis (analysis), outcome identification planning, implementation (intervention), and evaluation of nursing interventions.
<i>Preceptor</i>	A credentialed school nurse engaged in nursing practice within a school district who acts as a mentor or supervisor for a nurse credential candidate.
<i>Professional Licensure</i>	The authorization to practice professional nursing following successful passing of a written state board licensure examination. Professional licensure allows the holder to use the title "Registered Nurse."

* From Standards of School Nursing Practice, American Nurses' Association, 1991.

A P P E N D I X B

ANNOTATED REFERENCE LIST

American Nurses' Association: Standards of School Nursing Practice. Kansas City, MO: A.N.A., 1983.

This comprehensive set of guidelines for nursing practice in school settings was jointly developed by five professional nursing and health organizations. It speaks to rationale, structure, process and outcome criteria for eight collectively identified standards of practice.

American Nurses' Association (1991)). Standards of Clinical Nursing Practice. Kearneysville, WV: American Nurses Publishing.

This important document is a synthesis of the work of some 30 specialty organizations within nursing. It delineates standards for the practice of nursing in any setting through generic "Standards of Care" and "Standards of Professional Performance."

California School Nurses' Organization: The School Nurse Services Program Pt. I. Sacramento, CA: C.S.N.O., 1983, 3rd Edition.

This document, developed by C.S.N.O., is designed to assist Boards of Education, school administrators, and school nurses in determining the school nursing services that will fit their district's needs. It outlines the major functions that the school nurse should perform and includes broad goals for each of the functions.

California School Nurses' Organization: Legal Guidelines for School Health Practice. Sacramento, CA: C.S.N.O., 1991.

This document, compiled by C.S.N.O., cites all the legal requirements of California codes and laws effecting the practice of school nursing. Referenced are the California Health and Safety Code, the California Administrative Code, the California Education Code and the California Business and Professions Code as they relate to nursing services and health issues in public schools.

National League for Nursing, Council of Baccalaureate and Higher Degree Programs: Criteria for the Evaluation of Baccalaureate and Higher Degree Programs in Nursing. New York, N.Y.: N.L.N., 1983.

This document was prepared to assist both schools of nursing and the primary national nursing education accrediting body, the National League for Nursing in guiding the development and improvement of educational programs. It serves as a framework for self study and the development of future goals. The criteria contained examine all aspects of educational program function from administration through student policies.

Proctor, S.E., Lordi, S.L. Zaiger, D.S. (1993), School Nursing Practice: Roles and Standards. Scarborough, ME, National Association of School Nurses, Inc.

This set of ten standards builds on the ANA, 1983 standards as well as integrated generic nursing standards contained in ANA, 1991. Standards of Clinical Nursing Practice. Kearneysville, WV, American Nurses Publishing. It was modeled on early drafts of the Commission on Teacher Credentialing Nursing Education Standards.

Western Interstate Commission on Higher Education: The Preparation and Utilization of New Nursing Graduates. Boulder, CO: W.I.C.H.E., 1985.

This report of the WICHE/W.C. Kellogg Foundation-funded project was directed toward achieving agreement between nursing education and nursing service regarding the preparation, utilization, and performance of associate degree and baccalaureate degree nurses. Project objectives, activities, and outcomes are discussed and selected presentations from workshops are included. Nursing in the future is addressed.

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