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## Position Statement

### SUMMARY

It is the position of the National Association of School Nurses (NASN) that standardized nursing languages (SNL) are essential communication tools for registered professional school nurses (hereinafter, school nurses) to assist in planning, delivery, and evaluation of quality nursing care. SNL help identify, clarify and document the nature and full scope of quality school nursing practice (i.e., nursing diagnoses, interventions and outcomes). There are four main reasons that SNL are essential in school nursing documentation. SNL provide a common language, contribute to quality of care, enable continuity of care, and support research (Denehy, 2010). SNL enable communication about the contribution of professional school nursing practice to the health and academic success of students.

NASN supports the use of SNL in school nursing practice, electronic health records (EHR), and school nursing education programs. NASN further supports the continued research and development of SNL to advance evidence-based, quality school nursing practice.

### HISTORY

The development of SNL began more than four decades ago. There are currently twelve terminology sets that support nursing practice approved by the American Nurses Association (ANA, 2012). They are:

- NANDA International (NANDA-I)
- Nursing Interventions Classification (NIC)
- Nursing Outcomes Classification (NOC)
- Clinical Care Classification System (CCC)
- The Omaha System
- Perioperative Nursing Data Set (PNDS)
- International Classification for Nursing Practice (ICNP)
- Systemized Nomenclature of Medicine Clinical Terms (SNOMED CT)
- Logical Observation Identifiers Names and Codes (LOINC)
- Nursing Minimum Data Sets (NMDS)
- Nursing Management Minimum Data Sets (NMMDS)
- ABC Codes

Five of the terminology sets include nursing diagnoses, interventions and outcomes (i.e., CCC; ICNP; a combination of NANDA-I, NIC and NOC; the Omaha System; Perioperative Nursing Data Set). SNOMED CT allows for the use of multiple nursing language sets in a standardized format within an electronic health record. Also, with SNOMED CT, all of the ANA approved terminology sets can be mapped to accommodate NANDA-I, NIC and NOC.

While there are a number of nursing languages that have been approved by the ANA, NANDA International (NANDA-I), Nursing Interventions Classification (NIC), and Nursing Outcomes Classification (NOC) are probably the best known, well developed, and most applicable to school nursing practice (NANDA-I, 2011; Moorhead, Johnson, Maas & Swanson, 2008; Bulechek, Butcher, & Dochterman, 2008). The NASN publication, *Using Nursing Languages in School Nursing Practice, 2nd edition* by Janice Denehy, PhD, RN, FNASN, summarizes the history and development of the three nursing classifications. The North American Nursing Diagnosis Association began in 1973 when nurse experts from the United States and Canada came together to identify and classify health problems within the domain of nursing.

NIC started in 1987, and NOC followed in 1991 (Denehy, 2010). In 2002, North American Nursing Diagnosis Association changed its name to NANDA International (NANDA-I) to reflect the growing involvement of nurses from many overseas countries (Jones, Lunney, Keenan, & Moorhead, 2010).

NANDA-I, NIC, and NOC are recognized as official nursing languages by ANA (2012) and are included in the Cumulative Index of Nursing and Allied Health Literature and the National Library of Medicine's Metathesaurus. The NANDA-I, NIC and NOC classifications represent the nursing process, are supported by research, and facilitate continuity of care across the entire health care infrastructure.

## **DESCRIPTION OF ISSUE**

The ANA (ANA, 2012) and NASN support the development and use of SNL to communicate the increasingly important role of nurses in health care, to promote research, and to provide the standardized terminology needed for use in EHR. Use of SNL in school nursing documentation provides a common language for school nurses to describe interventions and responses of their students and staff to those interventions. Without SNL, school nursing documentation is a personal or locally understood description of activities, and the words have different meanings for different readers. Therefore information cannot be translated or applied to other settings.

Important data is collected everyday in school health rooms and recorded in school health records. Increasingly the data is stored in EHR (NASN, 2009) which can enable meaningful use (MU) of EHR whereby electronic data can be used for exchange of information across care settings to improve quality and coordinated health care for clients. MU of EHR standards are outlined in the Health Information and Technology for Economic and Clinical Health Act of 2009 (HITECH), a law designed to improve quality and coordination of health care in the United States (Johnson & Bergren, 2011). Electronic school health data can contribute to the goal of HITECH, but first, to be meaningful, the data must be collected using SNL.

With SNL, standardized interventions are implemented and evaluated using standard outcome measures. Then data sets will emerge describing the work of school nurses (Jones, Lunney, Keenan, & Moorhead, 2010). Data sets are critical tools for research to identify many things that school nurses do to influence student health and achievement. NASN supports the use of the Nursing Minimum Data Set (NMDS) as the initial structure to identify data needed to describe care provided to students and characteristics of those students.

There is no national clinical school health database to support research to build evidence-based health services programs for schools. Analysis of data from school nursing documentation from across the United States can generate the elements for such a database. However, In order for the information collected daily in school health offices to be transformed into a useful database, the data must be organized in a standardized format that lends itself to comprehensive reporting and analysis (Johnson, Bergren, & Westbrook, 2012). SNL is a critical first step in MU of EHR, in establishing a national clinical school health database and in supporting school nursing research.

SNL enables ongoing retrieval and analysis of documentation over time to support evidence-based practice and quality nursing care. In analyses of documentation in standardized format, interventions are known and patient responses are understood. Information can be collated and compared by researchers to determine which interventions in a specific situation lead to quality outcomes. Nursing research using the data can provide evidence for school nursing practice as it relates to cost effectiveness, student health outcomes, and the overall impact of nursing within the schools.

## **RATIONALE**

The use of SNL in school settings:

- Provides the structure for quantifying school nursing practice (Lee, Park, Nam & Whyte, 2010).
- Communicates elements of school nursing practice within the EHR (Jones et al., 2010).
- Supports two goals of the Robert Wood Johnson Foundation Initiative on the Future of Nursing, at the Institute of Medicine Consensus Report (2010):
  1. Nurses should be full partners, with physicians and other healthcare professionals, in redesigning health care in the United States.

2. Effective workforce planning and policy making require better data collection and information infrastructure.

- Provides accurate data on the value, role and necessity of school health services (Johnson et al, 2012).
- Advances nursing knowledge through identifying and evaluating nursing care (Rutherford, 2008).
- Promotes research on the effectiveness of school nursing services, leading to evidence-based practice which can improve patient care (Jones et al., 2010).
- Assists in determining actual costs of school nursing services for resource planning.
- Facilitates reimbursement for school nursing services.
- Supports the scope and standards of school nursing practice which specify the use of the nursing process in the planning, implementation, and evaluation of nursing care and the use of standardized languages in documentation (ANA & NASN, 2011).
- Supports nursing education, research and administration (Rutherford, 2008).
- Supports advocacy for school nursing.
- Communicates the contributions of school nursing practice to all stakeholders, including parents, education leaders, legislators, and community leaders.

Through use of SNL, school nurses promote quality nursing care, validate the effectiveness of school nursing services, and enable data collection for research. NASN supports continued school nurse contributions to the development, implementation, and evaluation of nursing languages relevant to school nursing practice.

NASN believes that use of SNL and research using the data collected from school nursing documentation will provide evidence to link school nursing interventions to quality outcomes for students.

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**Acknowledgement of Authors:**

Carolyn Duff, MSN, RN, NCSN  
Patricia Endsley, MSN, RN  
Elizabeth Chau, SRN, RN  
Judith Morgitan, MEd, RN

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