

IMPROVING MENTAL HEALTH COMPETENCY IN SCHOOL NURSES

Jennifer M. Walsh, MSN, CPNP, CNE
The George Washington University School of Nursing

Background

Virginia ranks 47th out of 50 states in pediatric mental health care. Mental health concerns in the pediatric population have significantly increased over recent years, even more so due to the COVID-19 pandemic. Unfortunately, time from onset of symptoms to treatment is over eight years, leaving less than 25% receiving care. Research shows school nurses spend a significant amount of workload on MH issues, an estimated 33% of their day, but often report feeling under-trained to deal with these issues. Improving access and quality of mental health care requires early identification, management, and interdisciplinary collaboration.

Purpose & Aims

Purpose: Implement and evaluate a quality improvement pilot program for school nurses designed to increase knowledge and competency of identification, management, and referrals for students with mental health concerns.

Aims:

- Increase knowledge of mental health signs and symptoms and screening tools
- Increase positive attitude toward mental health care in school setting
- Increase school nurse competency of mental health care in school setting
- Introduce a Decision Tree Algorithm to guide practice in school setting

Methods

Design: Pilot QI pre- and post-intervention project utilizing Plan-Study-Do-Act (PSDA) cycle

Sample: (N=26) school RNs

Intervention: Virtual pilot quality improvement program consisting of Mental Health Training Intervention for Providers in Schools (MH-TIPS) modules, weekly educational touchpoint emails, and introduction of Decision Tree Algorithm

Setting: Due to COVID-19, project was delivered virtually to school nurses from Northern Virginia (mix of suburban and rural)

Measurement: Pre- and post- surveys collected demographic and implementation data.

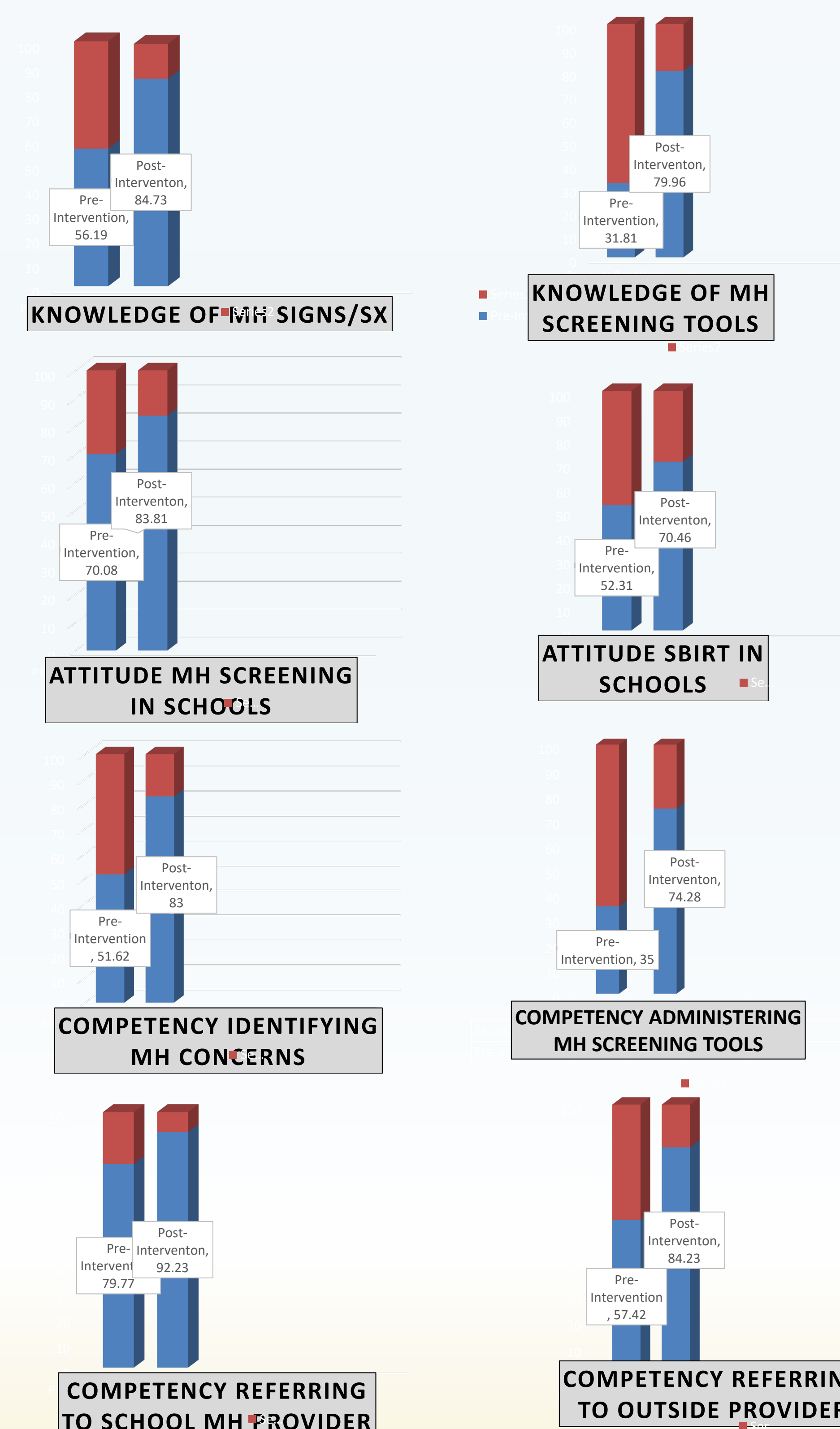
Analysis: Paired t-tests were computed examining pre- and post-test Likert self-reported measurements.

Results

Of the 26 FT school nurses who completed the project, over 53% had at least a Master's level of education and over 69% had been practicing as an RN for over 25 years. School levels served varied from elementary (46.2%) through high school (over 30%). School nurse practice sites had high volume, 92% seeing at least 24 students per day, with a significant proportion of those students having known or suspected MH concerns.

Results Cont.

Analysis of paired sample t-tests demonstrated a significant increase in each of the domains of knowledge, attitude, and competency post-intervention.



Qualitative data uncovered themes of a strong desire to improve MH competency yet barriers do exist related to heavy workload, patient volume, interdisciplinary collaboration, and implementation of a Decision Tree Algorithm.

Conclusions

In non-COVID times, children and adolescents spend a large amount of waking hours in the school setting. In this setting, school nurses are a frontline resource for pediatric mental health care. School nurses are encouraged to practice to the top of their practice license to increase access and quality of mental health care for students. Participating in a program utilizing both the no-cost MH-TIPS modules and learning opportunities focused on increasing knowledge, attitude, and competency can enable school nurses to bridge the lengthy gap that exists between onset of MH symptoms and appropriate care.

Recommendations include further study to determine if increased knowledge, attitude, and competency translate into increased access and quality of care for students once they return to face to face learning.

Limitations

The primary limitation of this pilot project was the limited sample size of Virginia school nurses. This may limit generalizability. Another limitation was not differentiating whether the MH-TIPS or the weekly educational opportunities were responsible for the significant increase in domain categories. Finally, due to COVID-19, school nurses were not able to put competencies acquired to use in person with students due to distance learning.