



National Association of School Nurses

POSITION STATEMENT

Standardized Nursing Languages

SUMMARY

It is the position of the National Association of School Nurses (NASN) that the use of standardized nursing languages by school nurses will promote quality nursing care, validate the effectiveness of school nursing services, and promote research endeavors. Further, NASN believes school nurses should use the opportunity to contribute to the implementation, evaluation, and development of nursing languages relevant to school nursing. Finally, NASN supports the use of standardized nursing languages in school nursing practice, in electronic health records, and school nursing education programs.

HISTORY

Although nurses have always been an integral part of the health care system, their contributions have largely been invisible. In this era of accountability, it is essential that nurses be able to articulate their contributions to the health of the clients they serve. This is particularly essential for school nurses who work in educational settings where they may have difficulty articulating what contributions they make to the health and academic success of students. Such information can assist school nurses in justifying their positions in a time of budgetary constraints. It will also help school nurses provide the best care for children in the school setting.

Standardized nursing languages were developed to give the phenomena that represent the nursing process a name or label to make them visible. The *School Nursing Scope and Standards of Practice* specify the use of the nursing process in the planning, delivery, and evaluation of nursing care and the use of standardized language or recognized terminology to document the nursing diagnosis, the outcome, and the implementation of the plan in a retrievable form (NASN & ANA, 2005, pp. 11, 12, 16). Standardized nursing languages provide uniform nomenclature for the diagnosis, intervention, and evaluation components of the nursing process. In addition to naming diagnoses, interventions, and outcomes, nursing languages define each label and list factors describing the components of each. This standardization of terminology facilitates communication about care across settings, is useful in documentation and entering data into electronic health records, and is valuable in promoting research on the effectiveness or outcomes of care. Standardized nursing languages also have implications for competency evaluation, reimbursement for services, and curriculum design (Dochterman & Bulechek, 2004, p. 3). The use of standardized nursing languages has the potential to improve the quality of nursing care, guide policy, and assist nurses in clearly articulating how their actions contribute to positive health outcomes.

The North American Nursing Diagnosis Association International (NANDA I) defines nursing diagnosis as "a clinical judgment about individual, family, or community responses to actual or potential health problems/life processes. Nursing diagnoses provide the basis for selection of nursing interventions to achieve outcomes for which the nurse is accountable." (NANDA I, 2005, p. 227). "Nursing diagnoses give nurses a standardized language to articulate the problems they encounter in their daily practice" (Denehy, 2004, p. 11). The NANDA classification has diagnoses for problems encountered in the school setting, as well as risk and wellness diagnoses appropriate for ambulatory clientele. The 2005 classification has 172 nursing diagnoses and a taxonomy that categorizes the diagnoses into 13 domains.

The Nursing Interventions Classification (NIC) is a classification of interventions that nurses perform in all settings and specialties. A nursing intervention is defined as "any treatment, based upon clinical judgment and knowledge, that a nurse performs to enhance client outcomes" (Dochterman & Bulechek, 2004, p. xxiii). "The interventions in NIC provide a standardized language for what nurses do and list specific activities that nurses can select in implementing the interventions" (Denehy, 2004, p. 14). NIC includes interventions for illness treatment, disease prevention, and health

promotion and can be used with individuals, families and communities. The 2004 classification has 514 interventions and a taxonomy that organizes the interventions into seven domains.

The Nursing Outcomes Classification (NOC) is a vocabulary to describe "An individual, family, or community state, behavior, or perception that is measured along a continuum in response to a nursing intervention(s)" (Moorhead, Johnson & Maas, 2004, p. xix). The outcomes offer a mechanism to evaluate the effectiveness of care by providing a list of indicators that relate to the outcomes of the care delivered. The standardized outcomes were developed to measure the effects of nursing interventions and can be used in all settings and with individuals, families, and communities. The 2004 classification lists 330 outcomes that are organized in a taxonomy with seven domains.

The Omaha System, an ANA recognized nursing language, has a Problem Classification Scheme with 42 general problems organized in four domains (Martin, 2005). The Intervention Scheme has four categories; then one of 76 targets is selected to focus care. There is a five-point problem rating scale for outcomes related to knowledge behavior, and status. The system is simple and brief, but provides little standardized language for interventions and none for outcomes. The three Omaha schemes, designed to be used together, have no coding structure needed for the EHR. The main contribution of the Omaha System is detailing the types of problems seen in community health; however, this research does not extend to the intervention or evaluation schemes or publications on its use and relevance to school nursing.

DESCRIPTION OF ISSUE

The American Nurses Association (1994) supports the development and use of standardized nursing languages for use in national nursing databases and the Nursing Minimum Data Set that includes the nursing elements of diagnoses, interventions, and outcomes. The use of standardized terminology facilitates communication about nursing practice, promotes research, and provides the language needed in electronic health records used to evaluate care, determine costs of care, and develop nursing databases needed to describe not only what nurses do but also the effectiveness of their actions. NANDA, NIC, and NOC are recognized as official nursing languages by the American Nurses Association (ANA) and are included in the Cumulative Index of Nursing and Allied Health Literature (CINAHL) and the National Library of Medicine's Metathesaurus. These classifications have developed a coding system that will facilitate their use in information systems similar to the use of the International Classification of Diseases (ICD-9 Codes), a classification of diseases and medical procedures that has a coding system used for documentation and reimbursement and Current Procedural Terminology (CPT), a set of codes, descriptions, and guidelines used describe procedures and services performed by physicians and other health care providers. Such classifications are needed to meet the federal mandate for most Americans to have electronic health records in 10 years (USDHHS, 2005) that will reduce medical errors, minimize paperwork, lower costs, and improve the quality of care.

Implementation of standardized nursing languages is expected to facilitate clinical, administrative, and policy decision-making (ANA, 1995). The NANDA, NIC, and NOC classifications represent the nursing process, are supported by research, and facilitate continuity of care across settings. Studies have demonstrated the relevance of these languages to school nursing (See Reference/Resource list). Although these languages were developed and are maintained independently, work is being done to illustrate how they can be linked together in practice (Dochterman & Jones, 2003; Gordon, 1998; Johnson, et al, 2005). NANDA, NIC, and NOC have the capability to describe the wide scope of school nursing practice and are the most appropriate standardized languages for school nursing practice and documentation.

Practicing in educational settings, school nurses' image, identity, and value are vulnerable in this era of accountability. The use of standardized nursing languages can assist school nurses to uniformly describe children's health status and the effectiveness of measures taken to improve their health and academic success. It will make school nursing practice visible and validate the complex nature of school nursing practice.

RATIONALE

The use of standardized nursing languages in school settings:

- Gives a name to what school nurses contribute to student health and academic success.
- Facilitates comprehensive uniform terminology that can be used in documentation.
- Provides standardized coded terminology required for electronic health records.
- Makes school nursing services visible to clients, families, educators, administrators, and the community and in nursing and health care data sets.
- Assists in the development of nursing databases that quantify school nursing practice.
- Advances nursing knowledge through identifying and evaluating nursing care.
- Promotes research on the effectiveness of school nursing services leading to evidence-based practice.
- Assists in determining the costs of school nursing services.
- Supports the National Association of School Nurses and the American Nurses Association's *Scope and Standards of 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.
- Promotes quality school nursing practice, research, and education.

The use of standardized nursing languages by school nurses will promote quality nursing care, validate the effectiveness of school nursing services, and promote research endeavors. School nurses have the opportunity to contribute to the implementation, evaluation, and development of nursing languages relevant to school nursing. The National Association of School Nurses supports the use of standardized nursing languages in school nursing practice, in school health software, and school nursing education programs.

References/Resources

- American Medical Association (AMA). 2006. *Current procedural terminology (CPT)*. Chicago: American Medical Association Press.
- American Nurses Association (1994). *ANA's position statement on national nursing databases to support clinical nursing practice*. Washington, DC: American Nurses Publishing. Available at <http://nursingworld.org/readroom/position/practice/prdatabs.htm>.
- Cavendish, R., Lunney, M., Luise, B. K., & Richardson, K. (1999). National survey to identify the nursing interventions used in school settings. *Journal of School Nursing, 15*(2), 12-19.
- Cavendish, R., Lunney, M., Luise, B. K., & Richardson, K. (2001). The nursing outcomes classification: Its relevance to school nursing. *Journal of School Nursing, 17*(4), 189-197.
- Denehy, J. (2000). Measuring the outcomes of school nursing practice: Showing that school nurses do make a difference. *Journal of School Nursing, 16*(1), 2-3.
- Denehy, J. (2004). *Using nursing languages in school nursing practice: Nursing classification systems: North American Nursing Diagnosis Association (NANDA), Nursing interventions classification (NIC), nursing outcomes classification (NOC)*. Scarborough, ME: National Association of School Nurses.
- Denehy, J., & Poulton, S. (1999). The use of standardized language in individualized healthcare plans. *Journal of School Nursing, 15*(1), 38-45.
- Dochterman, J. M., & Bulechek, G. M. (Eds.). (2004). *Nursing Interventions Classification (NIC)* (4th ed.). St. Louis: Mosby.
- Dochterman, J. M., & Jones, D. A. (Eds.). (2003). *Unifying nursing languages: The harmonization of NANDA, NIC, and NOC*. Washington, DC: American Nurses Association.
- Fahrenkrug, M. A. (2003). Development of a nursing data set for school nursing. *Journal of School Nursing, 19*(4), 238-248.

- Gordon, M. (1998). Nursing nomenclature and classification system development. *Online Journal of Issues in Nursing*. Retrieved October 27, 2005, from: http://www.nursingworld.org/ojin/tpc7/tpc7_1.htm.
- Hootman, J. (1996). Nursing diagnosis - A language of nursing; a language for powerful communication. *Journal of School Nursing, 12*(4), 19-23.
- Johnson, M., Bulechek, G., Butcher, H., Dochterman, J. Maas, M., Moorhead, S., & Swanson, E. (2005). *NANDA, NOC, and NIC linkages: Nursing diagnoses, outcomes, & interventions* (2nd Ed). Mosby: St. Louis.
- Lunney, M. (1996). The significance of nursing classification systems to school nursing. *Journal of School Nursing, 12*(2), 35-37.
- Lunney, M. (2006). Helping nurses use NANDA, NOC, and NIC: Novice to expert. *Journal of Nursing Administration, 36*(3), 1-8.
- Lunney, M. (2006). NANDA diagnoses, NIC interventions, and NOC outcomes used in an electronic health record with elementary school children. *Journal of School Nursing, 22*(2), 94-101.
- Martin, K. (2005). *The Omaha system: A key to practice, documentation, and information management* (2nd ed). St. Louis: Elsevier Sanders.
- Moorhead, S., Johnson, M., & Maas, M. (Eds). (2004). *Nursing outcomes classification (NOC)* (3rd ed.). St. Louis: Mosby.
- North American Nursing Diagnosis Association International (NANDA I).(2005). *Nursing diagnosis definitions and classifications 2005-2006* (4th ed.). Philadelphia: Author.
- National Association of School Nurses (NASN) & American Nurses Association (ANA). (2005). *School nursing: Scope and standards of practice*. Washington, DC: Author.
- National Center for Health Statistics (NCHS). (2005, January 27). International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9CM). United States Department of Health and Human Services, Centers for Disease Control and Prevention. Retrieved February 1, 2006 from <http://www.cdc.gov/nchs/about/otheract/icd9/abtcd9.htm>.
- Pavelka, L., McCarthy, A.M., & Denehy, J. (1999). Nursing interventions used in school nursing practice. *Journal of School Nursing, 15*(1), 10-17.
- U.S. Department of Health and Human Services (USDHHS). (2005, June 6). Secretary Leavitt takes new steps to advance health IT: National collaboration and RFPs will pave the way for interoperability. Retrieved November 5, 2005 from <http://www.hhs.gov/news/press/2005pres/20050606.html>.

Nursing Classification Systems: NANDA, NIC and NOC:

Adopted: June 2001
 Revised: June 2006