

An Analysis of Illness Intervention: Basis for Enhanced Nursing Intervention Process

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ABSTRACT

This study examined the utilization of the nursing process by the school nurse at the University of Baguio Laboratory Elementary School for the school year 2022-2023. The nursing process is the foundation for providing quality and professional nursing care which the researcher scrutinized by reviewing pertinent health records of students. Documents revealed that the school nurse lacked documentation on two important steps in the nursing process which were the plan of care and the evaluation phases, the rest of the processes were satisfactorily met.

INTRODUCTION

When communal schools became obligatory in the United States in the mid-nineteenth century, they were not only seen as center for learning but also an advocate in promoting good health practices. Soon after, schools were seen as perfect place to give a wide range of health and social services for children and families, also, they became the fore front in fighting infectious diseases (Allensworth et al., 1997)

According to the United Nation Educational, Scientific, and Cultural Organization (UNESCO), schools should continuously promote a healthy setting for learning, living, and working, as it has a distinct connection, because children who receive a good quality of learning are undoubtedly, to be healthy, and similarly those who are healthy excels and completes their education (UNESCO).

In the Philippines, we are guided by several school health policies. In 1947, Republic Act (RA) No. 124, "Act to Provide for the Medical Inspections of Students Enrolled in Private Schools in the Philippines", that required schools with 300 or more enrollees to administer annual medical of its pupils by a physician. However, this Act was revised by RA 951: "An Act to Require Certain Private Schools, Colleges and Universities in the Philippines to Provide Medical and Dental Service for Pupils and Students." Such revision included the dental services.

Also, with the Department of Education (DepEd) Memorandum No. 87 Series 1984 entitled "Organization of School Health Units in Private Schools." This implemented the guidelines for the establishment of school health units and comprehensive school health programs in private learning institution that aims to promote, protect, and maintain the health of the schooling population. Lastly, the 1975 Presidential Decree 856, or the "Code on Sanitation of the Philippines", specified the health facilities required in schools in Chapter VI of School Sanitation and Health Services, Section 43, which stated that trained health personnel and adequate facilities should be available so that students may be given the following health services:

- 1) Annual physical and medical examination;
- 2) Annual immunization;
- 3) Medical and dental treatment;
- 4) Treatment for common emergencies; and
- 5) Counseling and guidance (Racelis, 2013).

However, due to the recent COVID-19 pandemic, new DepEd Orders were release for strict compliance, which the University of Baguio's Occupational Health Committee were so quick to comply. The DOs are as follows:

1. DO No. 014 s. 2020: Guidelines on the Required Health Standards in Basic Education Offices and Schools;
2. DO No. 071 s. 2021: Preparations for the Pilot Face-To-Face, Expansion and Transitioning To New Normal;

Together with the DepEd School Health and Nutrition Manual, the school nurse is also guided by the University of Baguio Medical and Dental Clinic's (UBMDC) Policies and Operations Manual wherein the specific function of all health workers is specified. The nurse in particular has the following functions and duties:

Makes initial assessment of the patient regarding their complaints.

1. Takes the vital signs of the patients;
2. Administers first aid treatment;
3. Refer patients to Physician on Duty;
4. Dresses wounds of patients;
5. Administer oral or Intramuscular (IM) injections of medicines;
6. Dispenses medicines prescribed by the physician;
7. Instructs proper dosage of medicines to patients;
8. Files and follows-up insurance-related injuries of claimants;
9. Sterilizes and keeps the minor Operating Room instruments;
10. Prepares instruments for use in minor operations;
11. Hospital visitation of employees and students when informed of confinement;
12. Organize filing of medical records of employees and students;
13. Explaining the services to students and staff during school orientation;
14. Health education (Amansec & Gatchallan, 2021). Moreover, the

UBMDC, is committed to provide assistance to the University community in the assessment, protection, and, improvement of health as well as the objectives to:

1. Promote health consciousness within the University community through health education.
2. Provide preventive and remedial measures for simple and common ailments.
3. Advocate awareness to stakeholders on the importance of health and safety.
4. Utilize related research outputs for the enhancement of services.
5. Initiate programs that promote community well-being; and
6. Respond to the emergency conditions like injuries or rapid onset of illness (Amansec & Gatchallan, 2021)

THEORETICAL REVIEW

All throughout history up to the present day, school nursing practice has been beneficial and responsive to the needs of school children and the community (Selekman, et al., 2019). It is undeniable that school clinic services are very important as learning the ABC because it provides first aid treatment and prioritizing injuries and illnesses. Thus, the following presentation will discuss the significance of nursing intervention in schools.

Every child has unique and diverse needs and the chance to encounter accidents while they stay in school for up to eight hours, these needs must be addressed. In a classroom, children may have various acute conditions such as headache, upper respiratory infection, ear pain, skin rash, cuts and wounds, etc., together with children with cancer, diabetes, disabilities, socially and sexually abused, living in a foster home, etc., requires a sensitive and prudent response from a skilled nurse. Although nursing interventions may have various effects on children, it is very important that the need is immediately addressed and the pain or discomfort is alleviated.

The common intervention school nurses give is first aid treatment. First aid treatment involves medical interventions that is commonly given to relieve common ailments, or injuries. Generally, consist of a single and simple treatment to address the injury or ailment. These treatments may include rest, cold and warm compresses, wound dressing of minor cuts, scrapes, or scratches; treating a minor burn; applying bandages; removing debris from the eyes; massage; water therapy to relieve heat stress, and non-prescription medication for pain or allergies [Occupational Safety & Health Administration (OSHA)].

First aid is very important and favorable in alleviating discomfort, pain, and preserving lives. Thus, it is essential that teachers and students should also get a proper first aid training so that they can contribute to preserving lives. In the absence of an initial medical assistance, a mild injury when not treated immediately, might lead to other serious complications and can even be fatal. To ensure the safety of all the staff members and students, it is vital to make everyone aware of the basic methods they should apply after an accident occurs (First Aid for Schools).

Moreover, nursing interventions for children with illness like headache, dizziness, abdominal pain etc. may range from rest, water therapy, and warm compresses, most of them gets well and are able to spend the rest of the day without further complaints. However, some may require medication when condition does not improve. Administration of medication is a delicate process and must be done cautiously. A nurse may refer to the students' health record signed by parent or other significant others, noting any allergies, history of illness, and other precautions. The school nurse may contact the parents or guardians and informing them of their child's condition and whether they are allowing the nurse to give medicine; or if students have their own medicine prescribed by their pediatrician which they need to take in scheduled time, may also be administered (Amansec & Gatchallan, 2021).

While limiting potential exposure to hazards, which every workplace and school harbors at some degree (Soles) Students and staff may be expose to some unintentional injuries ranging from head concussion, contusion from trips, falls, and collision while playing in the playground, running up and down the stairs; burn from hot water, glue gun, and from cooking; sprain and strains, and others. For traumas, it is necessary to immediately rest the injury, the patient is quickly isolated to avoid distraction, additional injury, and provide privacy. The affected extremity is elevated and examined for bruising,

cuts, or scrapes. If wound is present, wound dressing is done first, then apply cold compresses for at least 15 minutes. Moreover, patients are also advised to observe the same "rest-cold compress- & elevation for the next 24-hours when at home. Also, it is strongly emphasized not to do any massaging or manipulation to avoid additional injury or swelling; and to immediately seek medical attention when site of injury is numb, warm and increase in swelling, and other signs of infection (Amansec & Gatchallan, 2021).

With the various functions of a school nurse, it is the recording, keeping, and updating of documents that is most tasking (Eduhealth, 2020). However, documents are maintained both for health purposes and evidence of a valid and effective health care services at school. Also, it is very important to review and evaluate the nursing interventions to be able to conclude that nursing intervention is effective or not. This paper will examine the effectiveness of the school nursing interventions rendered to students and staff of UBLES.

The National Association of School Nurses (NASN) explains school nursing as, "the exceptional discipline of nursing, where it cares for, advocate student's health, promotes exceptional progress, and boost academic success. Also, school nurses are acquainted in ethical, scientific, and research-based practice. They are healthcare workers who links health care and education, organizes students' care activities, and collaborate to design systems that allow individuals and communities to develop their full potential" (NASN, 2017).

In the school setting, the teachers are directed to the intellectual learning of students, while the school nurse attends to students' health concerns and advocating disease prevention. Students' needs may be difficult to meet at times, and the school nurse may meet a demanding duty like attending to sick students and staff, attending to parents and staff's inquiries, health teachings, etc. (Garmy, et al., 2021) and the influx of patients are unpredictable thus affecting the conditions of good works.

However, the nurse must always prioritize the comfort of his patients. According to the Theory of Comfort model, "comfort is an immediate desirable outcome of nursing care." This was developed by Katharine Kolcoba in the 1990s. She earned her Ph.D. in Nursing and since her retirement has been an active volunteer in American Nurses Association (ANA) and researcher. In her theory, she proposed that the nurse's role is to assess the patient's comfort needs and create a nursing care plan to meet those needs. She further illustrated that comfort exist in three forms: relief, ease, and transcendence (Petiprin, 2023). Relief is when patient's discomfort is alleviated and needs are met, the patient experiences comfort in the sense of relief. A classic example is the administration of medicine for headache, and after 30 minutes or so the headache is gone;

Ease fulfills comfort in a state of contentment. An example of this is when a patient's restlessness is relaxed through nursing intervention;

Transcendence is when a patient is in a state of excelling or surpassing ordinary limits (Petiprin, 2023).

The plan of comfort measures to address patients' needs is unique to every patient, however, reassessment of comfort levels after implementation

must be done to learn whether interventions were successful, needs alternative measures, or referrals.

In order to reach the goal of providing comfort to ailing students, the school nurse formulates a nursing care plan in order to determine the students' current and potential needs, and risks. The school nurse may make an Individualized Healthcare Plan (IHP) which follows the nursing process:

Assessment is gathering pertinent data on the physiological, psychological, spiritual, sociocultural, economic, and lifestyle aspect of students;

Diagnosis is the clinical judgment of the nurse about a student's response to actual or potential health condition or need. A diligent and prudent school nurse must not only reflect the illness but the whole cause of it and the potential effects of it;

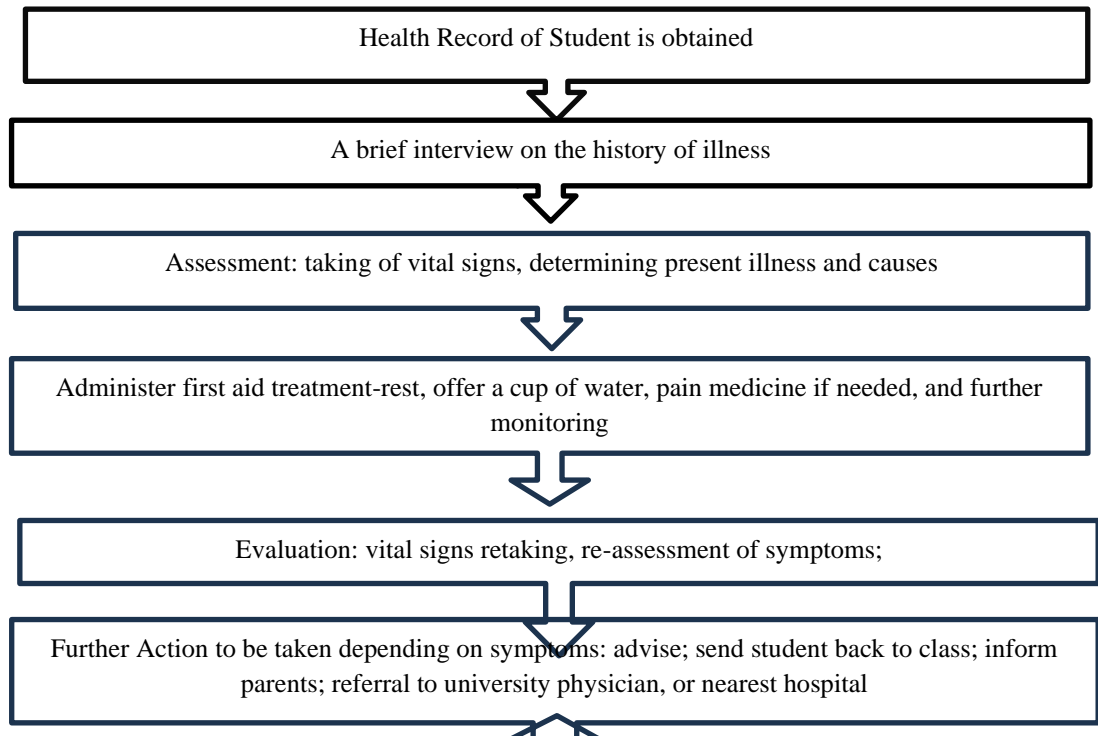
Planning/Outcome which the school nurse makes after a complete assessment and diagnosis was done;

Implementation is the actual carrying out of nursing intervention outlined in the plan of care;

Evaluation is reviewing whether the nursing care plan and the interventions made were successful or not (Butler & Thayer, 2023).

For students visiting the UBLES Clinic, the following steps are commonly observed:

Common Steps in Clinic Visit



The system approach: Input- Process- Output system was used in describing the study's conceptual framework. As shown in Figure 1, the input consists of the information that the patients give- their illness, general feeling, as well as their physiological needs; while the process contains the nursing

process that nurses follow in creating a health care plan; and the output would be the patients' health status after the nursing interventions.

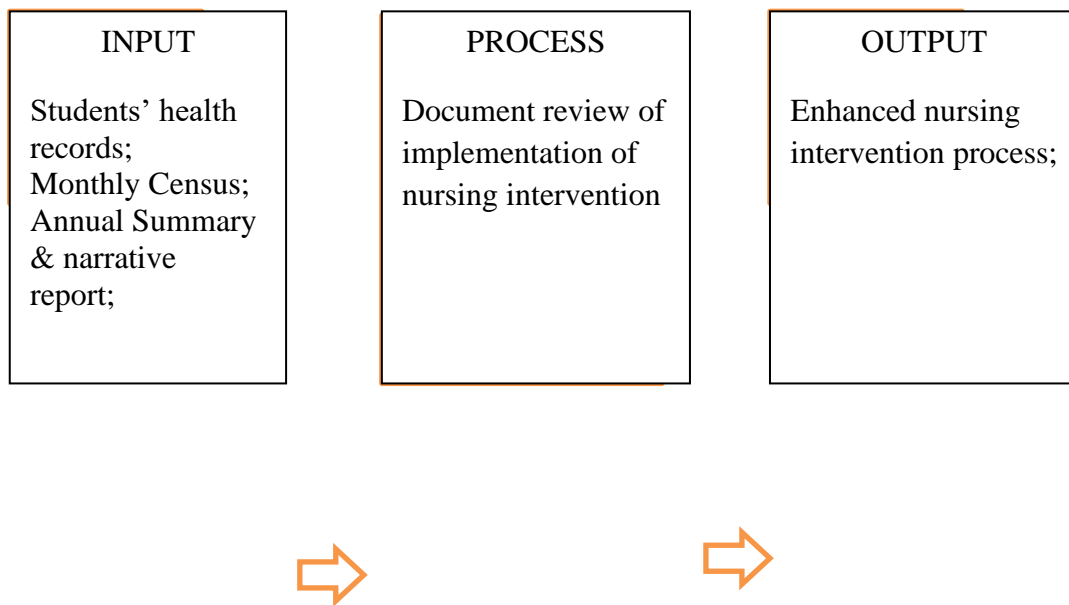


Figure 1. Paradigm of the Study

The importance of this study is to 1). review the extent of school nursing interventions and to identify factors that contributes to the success or failure of the care plan, (2) to continue, modify, or terminate the nursing care plan, and (3) to plan for future nursing care. This analysis is made to be able to fulfill the goal of school nursing which is to safeguard and boost student health, facilitates optimal development, and advances academic success.

The objective of this study is to review whether the activities of nursing processes are observed and implemented as intended to reach the goal of school nursing which is to promote safe and healthy school community, administer first aid treatment, and alleviate pain. Specifically, this study sought to provide answers to the following questions:

1. What were the common illnesses of students encountered by the school nurse?
2. Were the common illnesses addressed through the nursing process?
Assessment→Nursing Diagnosis→ Planning→Intervention→Evaluation

METHODOLOGY

This chapter will discuss the research design, population, and locale of the study, data gathering tools, and data gathering procedures.

The researcher utilized the qualitative research design using document analysis and the process evaluation method to interpret data from existing health documents which is intended to evaluate the results of nursing processes in catering to UBLES students for the academic year 2022-2023.

The key participants in this research are the grades 1 to 6 students of UBLES. They are further divided into two groups which are the lower grades of 1 to 3, and the higher grades of 4 to 6 students. Table 1 summarizes the participants:

Table 1

Patients	No. of Patients	Percentage
Grades 1-3	233	49.6%
Grades 4-6	237	50.4%
Total	470	100%

The data will be collected and reviewed from the individual student health record, clinic visit log book, monthly and annual census and narrative reports. The researcher goes through the records and analyzes the entries one by one, noting the completeness of the nursing process, date and time, clarity, and conciseness of the information, then summarized to present the 10 common illnesses, care plan, interventions, and evaluation. The researcher is guided by the following nursing process checklist below:

Nursing Process Checklist

Were the steps in the Nursing Process?	Met	Partially met	Unmet
1. Assessment: Data gathered: From patients (subjective); Validation of data (physical Exam, vital signs, observation)			
2. Diagnoses: Forms a nursing diagnosis according to data collected: 10 common illnesses: 1. Headache 2. Abdominal pain 3. Cough/colds/ 4. History of trauma 5. Wound (cut, lesion, punctured,etc.) 6. Dizziness 7. Dental concerns: toothache, loose tooth. Gum sore, etc. 8. Nausea or vomiting 9. Nose bleeds 10. Skin irritation			
3. Planning: Develops a nursing care plan for the			

patient			
4. Nursing interventions: first aid treatment			
5. Evaluation			

Patients' name and complaints were written down on the Clinic Daily Visit Log book, which will be tallied every month for census and reporting purposes. On the end of the school year, it is summarized into narrative report which will be submitted to the head of Medical/Dental Clinic at the end of every academic year.

This study was conceptualized, planned, gathered and treated in consonance with the ethical standards and considerations of research which is the moral obligation to practice honesty in collecting, presenting data, results, methods, and procedures; the desire to do good and avoiding any harm to participants or the institution, as well as providing confidentiality and anonymity for them. In this study, the identities of students were never included, only the illnesses were tallied.

RESULTS AND DISCUSSION

The provided data in Tables 1 and 2 shows the 10 common illnesses recorded for the school year 2022-2023, and the nursing interventions given to students from grades 1 to 3 and 4 to 6, respectively. Table 3 on the other hand, focused on the implementation of the nursing process. It shows the percentages of the school nurse' compliance in applying the 5 steps.

Table 1 An Analysis of Nursing Intervention for Grades 1 to 3 Students

Complaints (Top 10 common illnesses)	Total cases seen	Description of nursing intervention							Evaluation		
		Vital Signs taking	Rest	Medication	Water therapy	Wound dressing	Warm compresses	Cold compresses	saline gargle	Went back to class	Fetch by parents
7. Headache	76	76	26	61	76					75	1
8. Abdominal pain	41	41	33	16	41		33			39	2
9. Cough/colds/both	28	28	12	21	28					12	16
10. Injuries	22	22	22	8	8	11		22		22	
11. Wound (cut, lesion punctured, etc.)	16	16	0	16		16				16	
12. Dizziness	16	16	16	0	16					16	
7. Dental concern: toothache, loose tooth, gum sore, etc.	10	10		8					10	10	
8. Throat pain	7	7		7					7	7	
9. Nausea/vomiting	5	5			5					5	
10. Nose bleeds	6	6	6							6	
10. Skin irritation	2	2		2						2	
11. Other illnesses	9	9	6	1	2					9	
Total	470	470	300	198	355	48	96	47	36	434	36

Table 2 An analysis of nursing interventions for grades 4-6 students

Complaints (Top 10 common illnesses)	Total cases seen	Vital Signs taking	Description of nursing intervention							Evaluation	
			Rest	Medication	Water therapy	Wound dressing	Warm compresses	Cold compresses	saline gargle	Went back to class	Fetch by parents
7. Headache	76	76	26	61	76					75	1
8. Abdominal pain	41	41	33	16	41		33			39	2
9. Cough/colds/both	28	28	12	21	28					12	16
10. Injuries	22	22	22	8	8	11		22		22	
11. Wound (cut, lesion punctured, etc.)	16	16	0	16		16				16	
12. Dizziness	16	16	16	0	16					16	
7. Dental concern: toothache, loose tooth, gum sore, etc.	10	10		8					10	10	
8. Throat pain	7	7		7					7	7	
9. Nausea/vomiting	5	5			5					5	
10. Nose bleeds	6	6	6							6	
10. Skin irritation	2	2		2						2	
11. Other illnesses	9	9	6	1	2					9	
	238	238	121	140	176	27	33	22	17	219	19
Total	470	470	300	198	355	48	96	47	36	434	36

Tables 1 & 2 presents the summary of the 10 common illnesses that were mostly encountered by the school nurse, while the following columns were the nursing interventions given to treat them, and under each intervention were the number of students that received such treatment. Notice that for single illness various interventions were given to help hasten relief of pain and discomfort. Students with illnesses were interviewed and their vital signs were taken. Further assessment for other physiological needs were also noted down.

Headache ranked first among the common illnesses with a total of 130 students affected. This is one of the most common complaints in the general population, as well as among children and adolescents. In school children the most common form are primary headaches which is a headache that is the main problem and not cause by other underlying illness or condition. Various researchers done in Denmark, Finland, and Sweden, shows significant in increase of primary headache among school children (Straube et al, 2013).

Although headache may be caused by various factors such as stress, lack of sleep, skipped breakfast, fever, etc., most of the cases were treated with rest and a cup of water, but some were given medication after initial interventions did not work. Commonly, one tablet for higher grades of 4 to 6 were given and were sent back to class after a brief rest in the clinic. However, special precaution was given to the lower grades of 1 to 3 because they cannot state what medicine they have taken at home for pain or if they have any allergy to such. Afterwards, they were instructed to come back after an hour for further monitoring. However, if fever is present and high, they were given a sponge bath and parents were immediately notified through group chat or SMS by their class adviser (Amansec & Gatchallan, 2021).

Second in rank was abdominal pain with 109 students seen, this is also a very common symptom in children and most episodes are not serious and will get better without treatment in hours. Most cases, upon initial assessment by the school nurse, were uncomplicated and were given warm compresses and were relieved. But, if the pain is severe, does not go away, and the child seemed generally unwell, parents were contacted immediately (Amansec & Gatchallan, 2021). Also, for some, particularly the grades 4 to 6 students, usually describe an epigastric pain and were given antacids to relieve them. Next is cough and colds with 49 students seen. Colds are commonly cause by viruses and children are more likely to catch them than adults because their immune system is still developing, they may catch at least 6 cold viruses a year even after recovering from one, but as they grow older, most children catch fewer cold viruses (Healthdirect, 2023). At this time, COVID-19 protocols were still in place so children with cough and colds were immediately referred to the clinic and stayed at the isolation area until picked-up by their parents or guardian.

Also, 47 cases of injuries were incurred this school year, the most common of these were scrapes, bruises, and ankle bent which were not too serious and were treated with wound dressing and cold compresses. Often times these happens during lunch breaks and dismissal time where children are free to run and play. These makes the UBLES authorities more vigilant in promoting safety on school ground. Teachers, student marshals, student teachers, criminology student interns, other staff, as well as volunteer parent officers were always employed to oversee children at dismissal time (UBLES Handbook, 2022).

For the rest of the common illnesses; 28 students were dizzy; 26 suffered wounds; 19 had toothaches; 17 for throat pain; 13 students had nausea and vomiting; 8 students suffered nosebleeds and skin irritation; and the remaining illnesses totaled 16. Fortunately, these illnesses were not infectious and were attended to promptly by the school nurse.

Table 3 Nursing Process Checklist

Were the steps in the Nursing Process?	Met	Partially met	Unmet
6. Assessment: Data gathered: From patients (subjective); Validation of data (physical Exam, vital signs, observation)	100%		
7. Diagnoses: Forms a nursing diagnosis according to data collected: 10 common illnesses: 10. Headache 11. Abdominal pain 12. Cough/colds/ 13. History of trauma 14. Wound (cut, lesion, punctured, etc.) 15. Dizziness	100%		

16. Dental concerns: toothache, loose tooth. Gum sore, etc. 17. Nausea or vomiting 18. Nose bleeds 10. Skin irritation			
Planning: Develops a nursing care plan for the patient			100%
Nursing interventions: first aid treatment	100%		
Evaluation			100%

Extent of School Nursing Process

The following data were presented to determine the extent of the nursing process done for the different illnesses. Accordingly, the UBLES nurse was 100% compliant with the following nursing processes: Assessment, Diagnosis, and Implementation. However, she fell short on Planning and Evaluation Processes.

As a result of the document review, vital signs, and other pertinent information regarding the patient’s present condition as well as other activities resulting to or aggravating the illness were well documented in the student’s health record. According to these two school nurses, Debbie Isaacson and Christine Tuck, school nurses are good investigators because they formulate open-ended questions to facilitate important information, especially when a student is uncooperative. Moreover, the school nurse should also note the general physical appearance like facial grimacing, upset, smiling, rigidity, relaxed, with clenched fist, and posturing; as well as their behavior- sociability, quiet, talking, withdrawn, irritable, and the like (Isaacson and Tuck, 2008). Such observations should be documented to provide the nurse the corresponding interventions.

For the nursing diagnosis, it was written in the simplest layman’s term, not perfectly as a nursing diagnosis would have it but it simplifies things for easier recording, census, and reporting purposes. Example of this is “headache”, because it refers to the pain on the head, while the nursing diagnosis for it would be, “Acute pain on the head.” Nursing diagnosis should be based on the North American Nursing Diagnosis Association International (NANDA I) who promotes the improvement, refinement, dissemination and use of standardized nursing diagnostic terminology (NANDA I, 2023). Finally, the nursing interventions were provided immediately to alleviate pain or discomfort of the student. The school nurse also explained and described the nursing treatment to students before doing them. This is important so that student understands the need for this treatment and to elicit cooperation. Everything they need to know should be clear, like what sensations to expect, what they need to do, and what the expected outcome is (Wayne, 2023).

However, the school nurse had not documented the planning stage wherein the expected outcome or goal of treatment is specified. As the above table shows, planning was unmet. According to the school nurse, it is inherent and expected that the goal is to alleviate pain and discomfort of every patient

thus leaving out that part in the nursing care plan. To the contrary, the National Association of School Nurse (NASN) reiterate that it is the responsibility of the school nurse to document all pertinent data from acute to chronic medical condition as well as the individual need of students in the Individual Health Plan (IHP) record of students. This document is a variation of the nursing care plan, the IHP would contain all care plans develop by the school nurse, especially for students with intricate medical condition that requires health intervention on a daily basis, or illness that may result to a health emergency (NASN, 2015).

Also, according to Adraro and Mengistu, the nursing process is expected to be practiced in all health institution but the attitude towards it is tedious and unrealistic. However, if the nursing process is not appreciated and applied, nurses will go on intervening on the basis of a medical diagnosis rather than on the basis of a rational nursing process (Adaro & Mengistro, 2020).

Finally, the evaluation, being the last step in the nursing process was also unmet, the expected outcome which is "met, partially met, and unmet" was not specified, instead a remark of "went back to class," and "fetch by parent" was written. According to the Fundamental of Nursing, this last phase will focus on the effectiveness of the nursing interventions. Ideally, when all interventions were done, will, ideally bring positive outcome, however, if the interventions seemed not to help the patient, the nursing care plan or the IHP for school settings, must be evaluated and revised to meet the needs of the patients more effectively (Open RN).

CONCLUSIONS AND RECOMMENDATIONS

The nursing process was implemented fairly by the school nurse. Although most of the illnesses yielded a good result of recovering, the school nurse lacks the recommended documentation for it. Also, it is the responsibility of the school nurse to document, maintain, and update student's health record whenever a visit occurs.

Therefore, the following steps are recommended to enhance the quality of service of the UBLES clinic and to ensure accurate documentation of the nursing process for the patients' holistic healing and the school nurse's protection:

1. Student Health record may be revised, adding 5 columns for the 5 steps in nursing process;
2. The evaluation phase must specify if the goal of care was "met," "partially met," "unmet," and the reason why it was partially met or unmet;

FURTHER STUDY

For future research, it is recommended to conduct a comprehensive literature review to understand existing disease intervention approaches. Identify relevant theories and frameworks in nursing practice related to disease intervention.

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