**Competencies when Screening Activities in Schools**

*The purpose of this checklist is to outline the expected behaviors of a school nursing as it relates to school screenings. The self-assessment can also be used to identify areas where further professional development may be needed.*

**Overall**

|  |  |  |  |
| --- | --- | --- | --- |
| **Competency** | **Self-Assessment**  D=Developing  E=Emerging  P=Proficient | | |
| **D** | **E** | **P** |
| Uses evidence-based screening tools and processes   * *(i.e. evidence-based vision chart, validated depression screening tool)* * *This includes recognizing environmental factors that could impact results (i.e. noise during hearing, lighting during vision screening)* * *May also include coordinating community organizations conducting various screenings in the school.* |  |  |  |
| Sends results to families/caregivers in a timely manner (as appropriate).   * *Uses professional and evidence-based and professional wording at the appropriate reading levels and takes into account results that may be more sensitive (i.e. BMI).* * *Utilizes district-approved translation services for written material going home to families whose primary language is not English.* * *Provides resources and clear directions for family/caregiver regarding next steps.* |  |  |  |
| Follows up on screening referrals that have not reported back.   * *Utilizes district-approved interpretation or translation services when communicating with families whose primary language is not English.* * *Seeks to understand cultural impact of situation.* * *Creates a safe space for students or families to discuss concerns.* |  |  |  |
| Addresses home and family factors that may be impacting family’s ability to follow up on referrals (i.e. not get glasses).   * *Utilizes systems, organization, and community resources.* * *Provides referrals to community providers and resources.* |  |  |  |
| Reviews data from screenings and referral follow up to identify groups at greater risk or need.   * *Review data by groups where there are often disparities such as lower socio-economic areas, race/ethnicity, and other vulnerable populations.* |  |  |  |
| Accepts authority, ownership, accountability, and responsibility of practice |  |  |  |
| Communicates activities, progress, and outcomes with administrators, school board, and community. |  |  |  |
| Documents each step in the process and tracks referrals returned. |  |  |  |

**Reference**

National Association of School Nurses (2022). School Nursing: Scope and Standards of Practice, 4th Edition. Silver Spring, MD: NASN.

**Created by the Center for School Health Innovation & Quality (2024) based on NASN’s Scope and Standards of School Nursing Practice (intentionally using wording from S&S for fidelity) with the intention of state and district leaders updating to include state or district specific laws or policies.**

**(break down by type of screening if needed)**