

A Partnership to Evaluate a Newly Developed Nursing Tool to Assess Children and Youth Who Are Experiencing Homelessness

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Purpose

This poster describes outcomes from a partnership between school nurses and a pediatric nurse practitioner (PNP) to evaluate a newly developed assessment tool intended for inclusion in student health electronic records.

Objectives

1. To increase school nurses' ability to better identify students who are experiencing homelessness & assess their needs through piloting and evaluating a new tool
2. To foster better communication between school nurses and primary care providers regarding health care needs
3. To ultimately improve both the health and academic outcomes of this vulnerable population through enhanced care coordination



Background

Federal data indicates >1.5 million students are homeless (National Center for Homeless Education, NCHE, 2023). Of these, 4000 are in Boston Public School (BPS). Homeless is defined as “a lack of a fixed, regular, and adequate nighttime residence” (NCHE, 2023). <https://nche.ed.gov> Homelessness is a key predisposing factor directly affecting children’s health and well-being (CDC, 2023). Care coordination between health care providers & school nurses is currently limited. (Slas, Nguyen & McIltrout, 2022)

Northeastern University (NU) IRB and BPS determined it to be quality improvement (QI).

Methods

The project team, consisting of a PNP, two BPS nurses, and 3 expert nurse consultants, reviewed a tool developed by the school nurse project director based upon feedback from 114 school nurses from a statewide survey (Anidi, 2019). Six expert nurses reviewed the tool for content validity, yielding a CVR of 1.00. Two webinars introduced the tool to a broad audience of nurses, health care providers, and other team members in collaboration with the Northeastern University School Health Academy.

SNAP EHR- CHILDREN EXPERIENCING HOMELESSNESS INITIAL STUDENT SCREENING TOOL (TEMPLATE)

Please Note: This will be an initial screening tool that can be used by nurses. Depending on the responses, follow-up may be needed.

Area of Focus	Screening Questions	Response Circle your response
Lack of Educational Continuity	Attendance Issues?	Yes No
	Missing records needed to enroll?	Yes No
Poor Health and Nutrition	Missing immunizations and medical records?	Yes No
	Chronic hunger or food hoarding?	Yes No
	Fatigue (may be falling asleep in class)?	Yes No
Transportation and Attendance Issues	Erratic attendance and tardiness?	Yes No
	Numerous absences?	Yes No
	Lack of participation in afterschool activities?	Yes No
	Lack of participation in field trips?	Yes No
Poor Hygiene	Wearing clothes for several days?	Yes No
	Inconsistent grooming?	Yes No
Social and Behavioral Concerns	Extreme shyness?	Yes No
	Unwilling to form relationships with peers and teachers?	Yes No
	Anxiety, exhibiting anger or embarrassment when asked about current address?	Yes No
	Avoidance of questions related to current address?	Yes No
	Statements made about staying with grandparents, other relatives, friends, or in motels and campgrounds?	Yes No
	Statements such as: "I don't remember the name of the last school I was in."?	Yes No
	Statements such as: "We've been moving around a lot."?	Yes No

If < 3 yes responses or any 1 area with all yes responses monitor closely
 If ≥ 3 but ≤ 6 yes responses or any 2 areas with all yes responses then refer for further assessment
 If > 6 or any 3 areas with all yes responses then refer for immediate follow-up and intervention

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Evaluation

Usability was evaluated by a mixed group of nurses & school team professionals through completion of a 15-item modified Systems Usability Scale (SUS) in multiple formats both virtual and in person at local, state, and national venues. SUS has been found to be highly reliable (Cronbach’s alpha = 0.91 with concurrent validity 0.806 (Brooke, 2013).

Funding:

Teacher Leadership Fund Grants, Boston Public Schools 2021-23
 All relevant financial relationships have been mitigated.

Results

Evaluation data collected online & in-person. n=210, overall >95% respondents rated tool as:

- ❖ Easy to use, collects useful information
- ❖ Helpful, practical, excellent resource
- ❖ Valuable addition to student’s electronic record
- ❖ Relevant in multiple settings

Anticipated Outcomes

- ❖ Adequate assessment of individual students
- ❖ Access specific information related to the care of students who are experiencing homelessness
- ❖ Make appropriate referrals to specific agencies
- ❖ Collaborate effectively with other team members
- ❖ Provide consistent follow up primary care through improved care coordination

Conclusion

Strengthened collaboration between school nurses and primary care providers can facilitate communication and improve care coordination of children and youths experiencing homelessness.

Implications for Practice

This tool is applicable in multiple settings, including school-based clinics, college health, primary and chronic care. Sharing electronic communication can enhance care coordination for all students.

References

- Anidi, M. (2019) / Evaluation of School Nurses’ Knowledge of School-age Homeless Children.[Unpublished Doctor of Nursing Practice Scholarly Project.] Northeastern University.
 Brooke, J. (2013). SUS: A retrospective. *Journal of Usability Studies*,8(2):29-40.https://uxpajournal.org/wpcontent/uploads/sites/7/pdf/JUS_Brooke_Feb_ruary_2013.pdf
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