

THE COMMUNITY HEALTH NURSE IN SCHOOL HEALTH SERVICES

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INTRODUCTION

The Department of Health, Welfare and Pensions is responsible for rendering a school health service to Black, Coloured and Indian scholars in the Republic of South Africa.

This service has three main objectives:

- to promote health through health education and the creation of a healthy school environment so that the pupil can benefit optimally from the learning experiences provided at school;
- to detect ill-health or deviation from the accepted norm at an early stage and to refer the child to applicable agencies for correction or treatment of the deviation so that serious or chronic mental or physical ill-health is prevented;
- to minimise the development of anti-social behaviour by referring social problems to suitable agencies for care and follow-up.

Broadly speaking the Department renders a promotive and preventive personal health service on a primary health care basis to scholars. By its very nature the community health nurse is the key figure in this service.

THE FUNCTION OF THE SCHOOL NURSE

Although the individual child is the focal point of the service, the child is not viewed in isolation but rather as part of different relationships. The community health nurse therefore evaluates the child as a member of a family, of the school community and of the larger community.

Although it is not possible to evaluate each child in this context, any problem that presents itself, whether physical, psychological or social, is reviewed with these relationships in mind. While respecting the limits placed by confidentiality, the child and his problem are discussed with the school principal and his teachers. A child may not be achieving as expected and the reason for this could well be health related in which case the co-operation of the school in understanding the problem is essential. Furthermore the assistance of the teacher in handling the problem is of tremendous value, as the teacher is a constant factor in the life of a child within the school community.

By making the teachers aware of health, it is easier for them to detect a deviance from the norm and to alert the

school health nurse to the problem timeously.

Further promotion of health in the school situation takes place through formal and informal liaison with the school and by establishing the nurse as part of the school team. The nurse therefore instigates her participation in P.T.A. affairs, often addressing the meetings on health matters in general or dealing with specific health problems affecting a particular school. A link is then established between the school and the parents.

Because the school health service is basically a promotive and preventive service, the school nurse screens children but does not treat illness. The child must be referred to relevant centres for treatment. The principle that the child remains, first and foremost, the responsibility of the parents must always be borne in mind. Any ailment must therefore be brought to the attention of the parents, who then, either independently, or on the advice and with the support of the school nurse, decide on an appropriate course of action. If the parents can afford it they usually take the child to their family doctor and the matter is resolved in this way. The

majority of the parents however are reliant on public health services in which case the school nurse assists with references to provincial hospitals, health centres, municipal clinics or welfare organisations.

The school nurse must be fully aware of the resources available in the area she serves. This is not always as easy as it sounds because the Department's school nurses often serve both an urban and a rural community and the availability of sources for referral are totally different in urban and rural settings. In the rural situation it is also the school nurse's responsibility, where necessary, to arrange for an appointment for the child at the nearest large centre, arrange for transportation, a chaperone to accompany the child, overnight accommodation in the town or city, the return journey and a possible follow-up visit.

The school nurse, not being in a position to treat the children, must very often pave the way for easy referral by establishing a personal relationship with key figures at the different treatment centres. In particular, the relationship with the local authority community health nurse is very important. A scholar's problem is often a reflection of a problem in the home, or even a problem in the community. In this instance, as the child is not seen in isolation,

therapy or support of the family must also be undertaken on an on-going basis by the community health nurse of the local authority concerned. A system of referral and cross-referral then develops between the school nurse and the local authority nurses. Close co-operation exists in this area.

The Department of Health, Welfare and Pensions, does not employ any school doctors as a result of which an interesting shift of responsibility has taken place.

Usually the schools are visited by a community health nurse (school nurse) and a staff nurse. The preliminary planning and organisation would have been done by either a senior health nurse or in the case of Natal and the Western Cape, by an assistant organiser of nursing services. The staff nurse is responsible in loco for the daily routine including preparation of the children for physical examination and some of the record-keeping. The school nurse examines the children and does a follow-up of her findings. In order to equip the school nurse for these examinations, she receives inservice training in systematic physical examination procedures. This has paid dividends as suggested by the fact that one of the school nurses is now known as the *cardiologist of the North*. It can be said that the

nurse has extended her role in this service and that compared to previous traditional roles the school nurse has taken the place of the doctor, while the staff nurse has taken over the school nurse's role.

CONCLUSION

Black, Coloured and Indian nurses are employed in this service. Base-offices are in the larger centres, but the rural areas must also be served. Each school nurse has a country area to serve which involves travel and over-night accommodation. Accommodation facilities are virtually non-existent and the nurses have been put to a great deal of personal discomfort in handling this situation. They have however borne the problems with forbearance, dignity and some humour and have never allowed it to interfere with their duty.

As can be seen from the foregoing, certain special skills are required of a school nurse. These are for example the ability to see a problem within a larger context; to prevent problems from arising; to take the initiative; to be independent; to be able to communicate at many levels. For these reasons the specialised skills of the community health nurse are paramount to the success of this service.

BOOK REVIEW

BOEKRESENSIE

DERMATOLOGICAL NURSING AND THERAPY

by R. Seville and E. Martin
Blackwell. Oxford. 1980.

This is an excellent book for 3rd year Diploma nursing students.

The contents of the book is set at the correct level for nursing and it is clearly written. The photographs of the various skin diseases are outstanding.

Interesting aspects are the emphasis on the nurse/doctor/patient relationships and the psychological problems related to dermatology.

I think this book should be a prescribed textbook for nurses and it is also an excellent reference book which should be available in every library used by nurses.

S. OOSTHUIZEN

DIE VERWAGTENDE MOEDER

(Tweede hersiene en bygewerkte uitgawe)

Tafelberg-Uitgewers. Kaapstad. 1980.
Prys ongeveer R11,50.

Hierdie is 'n hardebandboek van ongeveer 250 bladsye geskryf vir die swanger vrou of die vrou wat swangerskap beplan, deur 'n persoon wat buitengewone insig en simpatie toon. Elke denkbare aspek van swangerskap en die bevalling, alle moontlike vrae wat gevra kan word, word bespreek, verduidelik en beantwoord. Daar is ook waardevolle inligting in verband met hospitalisasie, moederskap en vaderskap.

Vroedvroue sal hierdie boek nuttig vind. Dit kan as 'n handige gids dien oor watter en hoeveel inligting om aan swanger vroue oor te dra en hoe om dit te doen. Die vroedvrou kan hierdie boek met vertroue by moeders aanbeveel.

Die skryfstyl en terminologie is maklik leesbaar en verstaanbaar.

C. BUYS