

Supporting the health and educational success of children and youth...

Dear School Administrator or other Education Professional,

The Oregon School Nurses Association is seeking nominations for the 2026 Oregon School Nurse or School Nurse Administrator of the Year award. This year all nomination information can be found on our website:

https://www.oregonschoolnurses.org/aboutus/school-nurse-nurse-administrator-of-the-year

Nominations must be received by OSNA by Friday, January 30, 2026.

Your school nurse or nurse administrator is an integral member of the education team, and plays an important role in ensuring that all students in your district receive the support, assessment, and follow up needed to keep them safe, healthy, and ready to learn. School nurses improve attendance, health and wellness, and educational attainment. We would like to recognize a school nursing professional who goes above and beyond the expectations of their position, who handles difficult situations with exceptional grace and professionalism, and who is an unrelenting advocate for all students, staff, and school community members in their care.

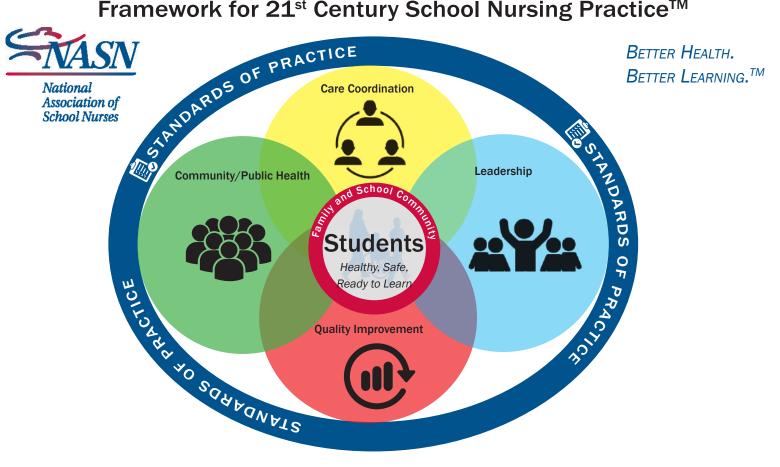
The selection committee uses the *Framework for the 21st Century School Nursing Practice* to select the award winner(s). Please carefully review this Framework, as well as the attached rubric that will be used by the selection committee, when completing your nomination. A copy of this framework, as well as our selection rubric is attached.

Please consider the exceptional attributes your particular school nurse or nurse administrator brings to the students and staff in your schools, and nominate one of them today.

Nominations must be completed by **Friday**, **January 30, 2026**. Sincerely,

Jerilyn Wernet BSN, RN, NCSN OSNA Vice President jwernet.osna@gmail.com

Framework for 21st Century School Nursing Practice™



NASN's Framework for 21st Century School Nursing Practice™ (the Framework) provides structure and focus for the key principles and components of current day, evidence-based school nursing practice. It is aligned with the Whole School, Whole Community, Whole Child model that calls for a collaborative approach to learning and health (ASCD & CDC, 2014). Central to the Framework is student-centered nursing care that occurs within the context of the students' family and school community. Surrounding the students, family, and school community are the non-hierarchical, overlapping key principles of Care Coordination, Leadership, Quality Improvement, and Community/ Public Health. These principles are surrounded by the fifth principle, Standards of Practice, which is foundational for evidence-based, clinically competent, quality care. School nurses daily use the skills outlined in the practice components of each principle to help students be healthy, safe, and ready to learn.



Standards of Practice

- Clinical Competence
- **Clinical Guidelines**
- Code of Ethics
- **Critical Thinking**
- Evidence-based
- Practice
- **NASN Position** Statements
- Nurse Practice Acts
- Scope and Standards of Practice



Care Coordination

- Case Management
- Chronic Disease Management
- Collaborative Communication
- **Direct Care**
- Education
- Interdisciplinary Teams
- Motivational Interviewing/ Counseling
- **Nursing Delegation**
- **Student Care Plans**
- Student-centered Care
- Student Selfempowerment
- **Transition Planning**



Leadership

- Advocacy
- **Change Agents**
- **Education Reform**
- Funding and Reimbursement
- Healthcare Reform
- Lifelong Learner
- **Models of Practice**
- Technology
- Policy Development and Implementation
- Professionalism
- Systems-level Leadership



Quality **Improvement**

- **Continuous Quality Improvement**
- Documentation/Data Collection
- Evaluation
- Meaningful Health/ **Academic Outcomes**
- Performance **Appraisal**
- Research
- **Uniform Data Set**



- Access to Care
- **Cultural Competency**
- **Disease Prevention**
- **Environmental Health**
- **Health Education**
- Health Equity
- Healthy People 2020
- **Health Promotion**
- Outreach
- Population-based
- **Risk Reduction**
- Screenings/Referral/ Follow-up
- **Social Determinants** of Health
- Surveillance

ASCD & CDC. (2014). Whole school whole community whole child: A collaborative approach to learning and health. Retrieved from http://www.ascd.org/ASCD/pdf/siteASCD/publications/wholechild/wscc-a-collaborative-approach.pdf



Scored By:

Nominee #:

Score:

Supporting the health and educational success of children and youth...

School Nurse of the Year Selection Tool

For each of the 5 pillars of 21st century school nursing, please rate from 1-5.

- 1: is no evidence of meeting the standard
- 3: means evidence of demonstration with individual students or student populations
- 5: is excelling (above and beyond standards) evidence of demonstration beyond that, like program development for department, district, and even statewide and nationally.

1. Standards of Practice

- Description: provide direct or appropriate delegation of student care using evidence-based practice, complies with applicable sources of authority, promotes child well-being/health/equity/diversity/inclusion, provides a sense of leadership regarding school nursing,
- b. Judging examples:
 - i. Rating of a 1: no evidence of meeting this standard
 - ii. Rating of a 3: evidence demonstrates meeting this standard at the individual student or assigned community level
 - iii. Rating of a 5: evidence demonstrates exceeding this standard beyond assign population
 - Examples:assisting at the district, state or national level regarding equity/diversity/inclusion, assisting at the state or national level regarding clinical guidelines, participate in leadership at the state or national level

С.	Nominees	Score	

2. Care Coordination

- a. Description: direct student care, working with interdisciplinary teams, student health management plans, transition planning, case management, chronic disease management, collaborative communication, student centered-care, student self-empowerment, education
- b. Judging examples:
 - i. Rating of a 1: no evidence of meeting this standard
 - ii. Rating of a 3: evidence demonstrates meeting this standard at the individual student or assigned community level
 - iii. Rating of a 5: evidence demonstrates exceeding this standard beyond assign population
 - Examples: increasing interdisciplinary team members, assisting on the state or national level regarding chronic disease management, creating systems/programs to help students with counseling and/or self empowerment beyond students assigned to their care

3. Leadership

- a. Description: student advocacy, professionalism, leadership in the provision of health services at the school or district level, supporting organizations/affiliates at the state level, reinforcing the voice of school nursing at the national level, commitment to own professional development
- b. Judging examples:
 - i. Rating of a 1: no evidence of meeting this standard
 - ii. Rating of a 3: evidence demonstrates meeting this standard at the individual student or assigned community level
 - iii. Rating of a 5: evidence demonstrates exceeding this standard beyond assign population

- Examples: Develops and implements programs, policies, and practices at a systems level which reform models of education or health care practice, pursues advanced education and/or national certification, provides evidence based professional development to others, participates at the state or national level to support areas of school nursing
- c. Nominees Score_____

4. Quality Improvement

- a. Description:continuous quality improvement, documentation/data collection, evaluation, meaningful health and academic outcomes, performance appraisal, research, uniform dataset
- b. Judging examples:
 - i. Rating of a 1: no evidence of meeting this standard
 - ii. Rating of a 3: evidence demonstrates meeting this standard at the individual student or assigned community level
 - iii. Rating of a 5: evidence demonstrates exceeding this standard beyond assign population
 - Examples: Develops and implements systems-level processes for quality improvement, data collection and/or research beyond assigned population (expands to district, county, state or national level). Actively participates in or leads regional or state work in documentation improvements. Develops and implements programs, policies, and practices to improve quality improvements.
- c. Nominees Score

5. Community/Public Health

- a. Description: providing/supporting access to care (screenings, referrals, and follow up), cultural competency, disease prevention, environmental health, health education, health equity, health promotion (healthy people 2020), outreach, risk reduction, social determinants of health, surveillance
- b. Judging examples:
 - i. Rating of a 1: no evidence of meeting this standard
 - ii. Rating of a 3: evidence demonstrates meeting this standard at the individual student or assigned community level
 - iii. Rating of a 5: evidence demonstrates exceeding this standard beyond assign population
 - 1. Examples: Develops and implements systems-level processes for referral and follow up from screenings/interventions; actively participates in or leads regional or state work in health prevention and promotion work; develops and implements programs, policies, and practices to prioritize health equity and recognition of social determinants of health at the regional or state level; partners with community or public health agencies to support state or national initiatives

C.	Nominees Score	
----	----------------	--