

Profile of the Youth Health Nurse



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Introduction

During the General Meeting of the Flemish Scientific Association for Youth Health Care¹, 2013, the competence profile of the youth health nurse was proposed. Additionally, 'the role of the CLB-nurse in Youth Health Care', developed as part of a Dutch post-bachelor education in Youth Health Care, was brought to the table. Both presentations were well received by those attending.

The birth of the idea to develop a profile of the Youth health nurse² followed. Four eager nurses, all members of the VWVJ, wanted to commit themselves to this cause. The decision was made to create a work group. This document is the result of this work group.

Chapter 1 describes the methodology of the work group. In chapter 2 the goal and possibilities of the profile are discussed. This is followed by an outline of the developments and trends that influence the work of the Youth health nurse in chapter 3. In chapter 4 light is shed on the fields of competence. This is followed by the conclusion of the work group in chapter 5. The bibliography is included in chapter 6, and the document ends with the appendix in chapter 7.

1. Methodology

The development of the professional profile is the consensus-based result of a work group of nurses within the VWVJ (Flemish Scientific Association for Youth Health Care). The members of the work group have field experience in the sectors Child and Family³ and Centers for Student Guidance⁴. The work group consciously chose the term 'Youth health nurse', due to the focus on the age group from -9 months to 25 years old.

The profile was developed in conjunction with the Dutch profile⁵, both initiatives have inspired one another.

A structured dialogue was started based on the recent 'professional profile of the nurse V&VN⁶ 2020'. The authors assimilated the input of the members of the work group into a draft text which was proposed and commented upon at the subsequent work group meetings. Interim feedback by e-mail was appreciated. The work group converged 3 times. The developed profile was proposed during the General Meeting of the VWVJ on the 25th of April 2014 in Leuven.

2. Goal

With this profile⁷, we aspire to shape the professional identity of the 'youth health nurse'. The profile can be used for organizational purposes such as function-descriptions for nurses that work in the various sectors⁸, recruitment policy, personal development trajectories, team composition, etc. Not

¹ Vlaamse Wetenschappelijke Vereniging voor Jeugdgezondheidszorg (VWVJ).

² By "Youth Health Nurse" or "she" are always meant to include both male and female nurses.

³ Kind en Gezin (K&G).

⁴ Centra voor Leerlingenbegeleiding (CLB).

⁵ Expertisegebied Jeugdverpleegkundige - Field of Expertise Youth Health Care Nurse (Bakker-Camu & van Kuppevelt, 2014).

⁶ V&VN: Verpleegkundigen en Verzorgenden Nederland - Nurses and caregivers The Netherlands.

⁷ By "Youth Health Nurse" or "she" are always meant to include both male and female nurses.

⁸ In addition to nurses of Child and Family and CLB, nurses working in (especially) non-curative sectors where integration of children/youth with restrictions is an important goal: (ambulatory) rehabilitation centers, Medical Educational Institutions, disability care centers for developmental disabilities, responsible child care centers, hospital-schools, schools of special education and, who knows, perhaps the future Homes of the Child

all listed fields of competence need to be equally broadly and profoundly present with each individual nurse; the profile offers a framework which can be worked towards.

The profile aims to have a stimulating, motivating, reflective, deepening and strengthening effect on the individual nurse. With this profile, we would like to foster reflection and dialogue within nursing education.

3. Developments and Trends

Society is in constant motion. There is an increase in migration, society is multicultural. The individualization of and the stress in society are increasing. More and more children/youth live in poverty and there is an increase in diversity of family structure. There is a growing awareness of the possibilities of children/youth with disabilities⁹ and/or chronic illness. Within the care and assistance for children/youth and their parents¹⁰, more attention is paid to self-management¹¹ and empowerment¹². The client¹³ is encouraged to take responsibility for his/her own somatic, social, psychological and existential wellbeing¹⁴, as well as for the wellbeing of the people in his/her environment.

A contemporary view of health is developing. The complete social, physical and mental health are no longer the central issues, instead it's the motivation and people's ability to deal with the consequences of changing circumstances on their own¹⁵. The development of the child/youth is seen in relation to the educational contexts and genetic predisposition. The influence of the socio-cultural context on health and development has been widely recognized.

This rapidly evolving society with its changing demands for care and the new developments and insights demands an adaptation in approach and health care supply. The Flemish government addresses this with the Decree Integrated Youth Aid and the Decree Preventative Family Support. The focus of this renewal is on both medical prevention and psychosocial and pedagogical support. The service must be efficient and effective, accessible and customized, and have maximum availability. Additionally, attention needs to be paid to the living situation and care needs of specific target groups¹⁶. Integrated cooperation surrounding youth and/or family is being realized from various network organizations.

⁹ The United Nations Convention on the Rights of Persons with Disabilities, ratified by Belgium on the 2nd of July 2009, establishes the rights of people with disabilities in detail as well as a code for their application (Vandeuren, 2009).

¹⁰ Parents: parents and other educators who live together with children/youth or are involved with children in the way of an educational relationship.

¹¹ Self-management: according to the Chronic Care Model: The individual's ability to deal well with symptoms, treatment, physical and social consequences and lifestyle changes when faced with a chronic condition.

¹² Empowerment: A process of strengthening whereby individuals, organizations and communities get a grip on their own situation and their environment through gaining control, sharpening critical awareness and stimulating participation (Van Regenmortel, 2002b, p. 76).

¹³ Client: the child/the youth and the parents.

¹⁴ Existential well-being revolves around the big questions about the meaningfulness or futility of life. It touches on the questions: where do we come from? what are we? and where are we going? In addition, it is not just the question of how you bring meaning to it yourself, but also how someone experiences meaning, direction and cohesion. In what does someone find support and what (religious or non-religious) values are fundamental? Alphons Marcoen.

¹⁵ How should we define health? Huber, et al., 2011.

¹⁶ Beleidsnota Welzijn, Volksgezondheid en Gezin 2009-2014 - Policy paper Welfare, Public Health and Family 2009-2014.

The government wishes more and more to implement sound policies based on figures. Output Data, reference centers, environmental analysis, performance measurement,... are terms that will promptly enter into organizations funded or subsidized by this government. They determine the funding and, therefore, the reason for their existence. The nurses in Youth Health Care¹⁷ are challenged to provide an appropriate response in their professional practice.

4. Youth health nurse fields of competence

Structure

When developing the profile of the Youth health nurse, we use the CanMEDS¹⁸, which proposes an arrangement in seven roles of fields of competence. We chose the translation of the fields of competence as included in the training-specific learning outcomes of the Master's program for Youth Health Care. The expert in Youth Health Care is central to the profession. The other fields of competence contribute to its realization and every role is of importance in order to achieve good quality Youth Health Care. We briefly describe each field of competence and name the required knowledge and skills. We build on the already acquired competences during basic nursing education¹⁹, therefore they are not excluded in this text. Because the fields of competence are not independent entities but constantly affecting each other, we chose to describe the attitudes of the Youth health nurse in an overarching manner (i.e. over the seven roles).

Attitudes of the Youth health nurse

The Youth health nurse works from a holistic human perspective and from the bio-psychosocial development model²⁰. Her focus is on respecting and strengthening the child/youth and his/her environment and on working in a multidisciplinary manner. During her contact with children, adolescents and their environment, she takes a non-discriminatory attitude, respecting ethnic and cultural diversity and differences in religious belief. She is aware of her own values and standards. She is creative, flexible and culturally sensitive, and can think beyond her own frame of reference. She reflects on her own functioning and professional practice. The Youth health nurse always puts the safety of the child/youth first. She exemplifies a participative basic attitude²¹ and takes a position

¹⁷ Youth Health Care (JGZ) is the area of social medicine targeted at youth. JGZ protects, monitors and promotes growth and development of children and adolescents on a physical, cognitive and social-emotional level. With the aim that all children and adolescents grow up to become adults who give meaning to life and can take their role in society (VWVJ, 2008).

¹⁸ CanMeds: Canadian Medical Education Directives for Specialists. The system has been accepted internationally, initially for medical education, later also for the nursing education.

¹⁹ Validated domain-specific learning outcomes Flanders, Bachelor of Nursing (Dutch-Flemish Accreditation Organization, 2012).

²⁰ The bio-psychosocial model assumes that the origin, survival and recovery of a complaint are outcomes of a combination of biological, psychological and social factors. Sometimes this may mean that more attention is needed for the child/the youth itself and sometimes for (risk) factors in the environment, for example, when the environment does not meet all the educational requirements that prevent the child from developing well (JGZ, 2013).

²¹ See Appendix

of 'multi-directed partiality'²². She interacts in a respectful manner with people, materials, and resources within the organization.

4.1. Expert Youth Health Care

The Youth health nurse is an expert in the field of Youth Health Care. She aids in the promotion, monitoring, and protection of the health, growth, and development of children/youth. In doing so, she keeps an eye on their functioning and participation in society. For children/youth with special needs, she focuses on mapping and addressing their specific needs. The nurse works with the child / youth AND his/her educational context²³, within a multidisciplinary team. She builds bridges with the client to a greater network of health care. This field of work, which covers almost all areas of life, at the same time makes the nurse a generalist²⁴. She focuses on collective and individual primary, secondary and tertiary prevention²⁵. She has a wide range of knowledge and skills to estimate vulnerabilities, pick up signals, identify support needs, and to find a suitable answer, together with the client. She helps ensure that all children and youth have equal access to preventative health care.

Knowledge Youth health nurse

- ✓ Knowledge of the most current definition of health
- ✓ Knowledge of the organization of Preventative Health Care in Flanders
- ✓ Knowledge of the Social Map
- ✓ Insight into the concepts of prevention and preventative health care for children and youth
- ✓ Understanding of the healthy overall development of the child / youth in his / her context and living environment
- ✓ Understanding of educational styles, educational support, and interventions in the field of light educational support
- ✓ Insight into health behavior and determinants

Skill Set of the Youth health nurse

- ✓ Integrates knowledge of current medical, pedagogical, psychological, sociological and societal fields in the realization of her assignment
- ✓ Is able to detect vulnerabilities and problems surrounding the growth and development of the child / youth in his/her context and living environment, and to assess their importance.
- ✓ Is able to strengthen the child / youth and his / her parents from an empowering perspective
- ✓ Is able to motivate the child / youth and his / her parents.
- ✓ Can, in close collaboration with the client and other disciplines, determine needs, select and perform interventions, monitor the course and evaluate the results

²² Multi-directed partiality: the care provider is changeably partial. This means she feels involved with regards to the history and context of each member of the client's context, in such a way that she relates to and recognizes everyone. (Boszormenyi-Nagy & Krasner, 1998).

²³ Educational context = family, family substitute and school.

²⁴ Generalistisch werken rondom Jeugd en Gezin, Berger, van Leeuwen, & Blaauw, 2013 - Generalist work surrounding Youth and Family: The youth health nurse combines knowledge from sociological, psychological, medical, educational and social fields.

²⁵ Primary prevention: prevention of disease or the development of disease. Secondary prevention: Identify diseases and conditions as quickly as possible to avoid them getting worse. Tertiary prevention: preventing a disease from manifesting again or leading to heavier complications or death.

- ✓ Can apply various interventions on, or in the immediate vicinity of child/youth and/or parent, at individual or collective level
- ✓ Can refer appropriately and follow up on health care
- ✓ Is able to work according to current guidelines and standards and able to give reasons for deviating from these if the situation or her own professional or moral consideration so demand
- ✓ Can sense/detect social trends regarding development and health and report these to the local policies
- ✓ Can recognize and eliminate barriers that prevent children/youth and their parents from having access to preventative health care
- ✓ Can translate medical expertise into action-oriented collaboration and advice
- ✓ Can apply the International Classification of Functioning Disability and Health- Children and Youth (ICF-CY) framework
- ✓ Can, in close cooperation with the doctor/team, make recommendations and/or take measures regarding the Flemish health goals
- ✓ Can provide unsolicited but socially responsible care in an effective and responsible manner
- ✓ Is able to work in different environments
- ✓ Is hard-working
- ✓ Can work in outreaching manner²⁶

4.2. Health advocate

The youth health nurse is committed to promoting the health and development of children and youth. She focuses on the relationship between health and behavior on the one hand by empowering children/youth and their parents to choose health and on the other hand by stimulating a healthy living environment. The nurse considers the personal and group characteristics, the physical and social environment and the provisions of the government. She works with locally and regionally recognized organizations in the field of preventative health care. The nurse reports trends and possible health care needs to relevant policy leaders. She motivates and contributes to the development of an appropriate health policy. She develops and initiates individual, group or environment-oriented interventions.

Knowledge Youth health nurse

- ✓ Insight into organizations with specific expertise in the field of health promotion

Competences Youth health nurse

- ✓ Can gather, interpret, and translate epidemiological data into health promotion and education support initiatives
- ✓ Integrates the knowledge of culturally and socio-economically bound health problems and perceptions of health and the way these affect the client

²⁶ Outreaching: A work method based on an active approach and focused on promoting well-being. Starting from the participatory basic attitude and focusing on vulnerable target groups that are not or insufficiently achieved by the current service, help and care offer. The healthcare provider can see from the client's perspective with recognition of the values and standards in force. With outreach work, we strive for a mutual alignment between the target group, their network, social offerings and the wider society (Maeyer, Dewaele, & Beelen, 2012).

- ✓ Can conduct individual, group, or organization-based evidence- or practice-based interventions to improve health behavior and/or the environment
- ✓ Can actively participate in consultation with partners in preventative health care

4.3. Professional

The youth health nurse operates within the provisions of the applicable laws and regulations and codes²⁷ in accordance with the mission/vision of her own organization. She acts from her own ethical identity, she is aware of the underlying reasons that motivate her to do her work. She realizes her own responsibility and how this is intertwined with the responsibility of fellow caregivers²⁸. The youth health nurse does not hide behind guidelines and standards. She can hold herself accountable for the quality of her actions and their consequences. She exhibits efficient behavior in situations of high complexity, time or work pressure and/or in case of a setback, or when there's disappointment or criticism. If she can't perform her assignment in a responsible manner, she will refer to the supervisor.

A positive attitude towards independent and lifelong learning is one of her features. She is willing to learn and grow with changes, to improve both her own functioning and the organization's functioning. Nurses help colleagues in achieving good results and growing in a position. She notices the absence of standards and protocols in relevant areas and brings this to the attention of her own organization and professional association.

The youth health nurse provides a positive contribution to the image and positioning in society, both for her own occupation and for the organization.

Knowledge Youth health nurse

Competences Youth health nurse

- ✓ Acts in accordance with applicable laws and regulations
- ✓ Applies reflective practice²⁹
- ✓ Develops professional and personal leadership within her assignment
- ✓ Knows how to create boundaries in her personal actions, taking into account her own possibilities and those of the organization she works in
- ✓ Can find balance between for example being business-like and being involved, keeping distance and being close
- ✓ Provides a positive contribution to the working environment within the organization
- ✓ Detects opportunities for improvement of organization or service

4.4. Manager

²⁷ Convention on the Rights of the Child, Decree on the Legal Status of the Minor in Youth Aid, Occupational Secrecy, Occupational Code, Rights for Persons with Disabilities, Privacy Laws, ..

²⁸ De expertverpleegkundige Jansen (De Kuper, Ettema, & Van De Sande, 2007) – The expert nurse Jansen.

²⁹ Reflective practice: applying self-reflection to our own actions and those of others (often implicit knowledge, behaviors and experiences in the workplace), which enables one to learn from (new) available knowledge and experience and apply it in everyday practice.

The youth health nurse is active in the field of preventative individual and collective health care for infants, children and adolescents. She works as a professional in the health, welfare and education sectors. She operates within network organizations at local and regional level.

The youth health nurse reaches (almost) all Flemish children and youth from -9 months to 25 years. She ensures equal access to preventative health care and contributes to the integration of children / youth with special needs in society. She plays an active role in setting up a safe and healthy living environment.

The youth health nurse contributes to a holistic and ecological approach to the client through multidisciplinary work in the organization. As a member of the multidisciplinary team, she contributes to the coordination of care / assistance surrounding the child / youth, possibly as part of a reference course.

Knowledge Youth health nurse

- ✓ Knowledge of decree assignments from her own organization / sector
- ✓ Insight into the organization, structure and supply of preventative health- and welfare-care, youth-help and education
- ✓ Understanding of the financial, economic and social interests that play a part in preventative health care

Competences Youth health nurse

- ✓ Can take care of her own as well as the client's safety
- ✓ Knows how to integrate her own and government-imposed assignments within daily operations
- ✓ Can, in consultation with her team and clients, take on the organization of preventative health care
- ✓ Can initiate, coordinate, and / or participate in the multidisciplinary care for the client, as well as follow up on care, evaluate, etc.
- ✓ Can initiate network contacts
- ✓ Makes decisions in her daily work about tasks, priorities and resources
- ✓ Integrates the principles of time-management in her own functioning

4.5. Communicator

The youth health nurse not only communicates with individuals but also with groups. She is constantly moving between the child / the youth and the different environments in which he / she grows up (family, school, leisure time). Thus, she has several clients: children, youth, parents, teachers, network partners, She constantly should adapt her perspective. This applies both to working with individuals as well as groups. Personal characteristics of the target group, such as age, socio-economic situation, culture, language control, ... determine the way of communication. Principles such as empowerment, participatory basic attitude, person as experience expert are integrated in such a way that they can be applied effortlessly.

Knowledge Youth health nurse

- ✓ Knows the possibilities and limitations of various communication methods (oral, written, physical, electronic communication, etc.)

- ✓ Has insight into intercultural communication
- ✓ Has insight into motivational conversation

Competences Youth health nurse

- ✓ Can conduct dialogue with parents / adolescents with specific attention to the timely detection of health and developmental problems in the child / the youth and in his / her educational situation
- ✓ Applies the principles of multilateral bias, with the child's best interest as a focus
- ✓ Integrates social / digital media in her work
- ✓ Can take on leadership and defend the child / child's interest if this is being threatened
- ✓ Can communicate professionally and exchange information with other professionals in terms of adequate (preventative) care for the child's / the youth's health and development
- ✓ Can apply different methods of conversation, including confrontational, motivational
- ✓ Can speak for groups
- ✓ Applies message and language to the target audience
- ✓ Uses a suitable communication-mix

4.6. Collaborator

The youth health nurse works in a multidisciplinary context with the client, her own and other disciplines, and executives. She establishes and maintains contacts. In the context of preventative health care, preventative family support and integrated youth care, she works with professionals and volunteers from other health, educational and welfare services, as well as local / regional policy actors. The youth health nurse identifies vulnerable groups and, through cooperation with partners at local / regional level, can realize a service offer. She contributes to a joint result at the level of a team, entity or organization, even when this is not immediately of personal interest

Knowledge Youth health nurse

- ✓ Knowledge of collaborative partners: expertise and competence

Competences Youth health nurse

- ✓ Can work in a way that focuses on empowering and strengthening clients
- ✓ Can communicate and report efficiently and effectively
- ✓ Can handle resistance and difference in opinion
- ✓ Can initiate contacts (directly or indirectly for the client)
- ✓ Within teams and collaborative processes, can point out her own contribution and to give contribution

4.7. Scholar

The youth health nurse as a Scholar delivers quality. Wherever possible, the nurse works in an 'evidence-informed'³⁰ way, where possible evidence-based³¹, and critically assesses what works. Evidence-based practice (EBP) helps the nurse to account for her actions towards clients, colleagues, collaborators and financiers. She follows up on results, both at the level of individual actions and at the level of interventions of the discipline and of the multidisciplinary team, with the intention to improve quality. She contributes to quality systems within the organization. The nurse is involved in the development of new guidelines, methodologies, prevention programs and visions. She is involved in locally applying and implementing standards.

Knowledge Youth health nurse

- ✓ Knows the sources of information for Youth Health Care
- ✓ Knowledge of the principles of working in an Evidence Based manner
- ✓ Has basic knowledge of methods of research
- ✓ Has knowledge of current themes and developments in her own area of expertise
- ✓ Insight into quality management systems

Competences Youth health nurse

- ✓ Can research and critically evaluate scientific information
- ✓ Can participate in practical research
- ✓ Works in a result-oriented way, efficiently and effectively
- ✓ Can synthetically summarize, analytically interpret and draw appropriate conclusions with regards to the results of her own work or organization
- ✓ Can provide active input towards preparatory policy research

5. Conclusion

The youth health nurses look at what children and young people need to have their growth and development potential optimized for development. Youth health nurses support them in growing up to become young adults who are self-reliant and capable of participating in society.

With the right prevention, the youth health nurse provides a contribution to the prevention of major problems, so that more intensive forms of child support are less needed.

The youth health nurse looks at health, growth and development of youth as a group and as part of the social environment. She makes an important contribution to the implementation of Preventative Health Policy at local, regional and Flemish levels.

To achieve all this, a nurse with specific skills is required. On the one hand, we advocate for the integration of the youth health nurse's profile in the various sectors and in the available in-depth trainings. On the other hand, we believe that the individual youth health nurse can actively contribute to the further development of the profession, e.g. through her membership in a professional association, with the slogan 'working together'.

³⁰ Evidence informed is a structured process used to find the best answer to a practical question based on (scientific) evidence.

³¹ Evidence-based practice is the careful, explicit and judicious use of current best evidence to make decisions with regards to individual patients to improve the care that is given. The practice of EBP implies integrating individual professional knowledge of the therapist, and patient's desire and preference, with the best external evidence available from systematic research. The preferences, wishes and expectations of the patient play a central role in decision-making (Cox, de Louw, Verhoef, & Kuiper, 2012)

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7. Appendix – Participatory Basic Attitude

The ideal counselor ...

- is genuine and is not afraid to show her personality in relation to the client. At the same time, she's attentive towards the impact that her behavior and appearance may have on the client (**authenticity**)
"A good supervisor must also be able to let her hair down, smile, share a story herself, ... Actually, a good supervisor should be like a good friend. She must have something about her that makes everything very normal, she must be able to have conversations about anything, even about sex. "
"When they say, they understand you, this must really be true, they can't turn with the wind. Sometimes they talk to someone else and they suddenly think completely differently about it."
- has the capacity to empathize. She has a listening ear and shows understanding when the client tells her something (**empathy**)
"It's important that they believe and understand what you're telling them. You must feel that they can enter into the same perspective as you."
"Sometimes you feel like they want to cut you short, that they don't feel like listening"
"A good supervisor must be able to listen well and therefore also be able to be silent"
- is willing to involve the client in dialogue and full partnership (**equality**)
"It's terrible when care providers make decisions in our place. First, they're all sweet and try to find out all about you, then they try to throw you into the psychiatric ward! They never inform you about your future, there's always ignorance, you never know what's going to happen to you "
"They should not take over too much and do things in our place"
- accepts the client in his / her own mind, with his / her beliefs, norms and values. She acts from an open mind for and towards other people and situations (**openness**)
"If you want to tell something to someone, you should feel that this person likes you, you have to feel comfortable with them"
"Sometimes I'm afraid they'll laugh at me, then I won't tell them anything"
"If I were to be the boss, I would only accept people who can listen well and can be open towards others"
- fully supports the client (**unconditionality**)
"It's awesome if you feel that the supervisors support you, that they are there for us, that they say no one should take charge of you but yourself "
"They must show that they will not let me down"
- Doesn't just focus on problems, but also on strengths and possibilities (**positive attitude**)
"They must also be able to have a laugh sometime"
"They need to see the human instead of the problems, they must also keep an eye on what's going well"
- is engaged with the client in a clear and committed way. As a means for the client's growth, she can be close to yet far away at the same time with regards to their relationship (**professional proximity**)
"There has to be a connection, you need to feel that they really want to help you, not simply because they have to do their job"
"Some supervisors seem concerned for you, but if you encounter them on the street, you merely get a cold greeting"
"It's a good thing that they want to help you, but they can't be overly worried, then they start to interfere too much and treat us like a little child"
- is discrete in terms of the client's privacy (**reliability**).
"Our caregivers are beautiful people. You can talk to them about everything, all you have to take into account is that the next day the whole building will know all about it. They say they only pass on the bad things, but they talk about everything"
- respects the client's pace (**respect**)

(IJH-West-Vlaanderen, 2008)