North Carolina School Nurses, Partners in Education

ANN O. NICHOLS MSN, RN, NCSN STATE SCHOOL HEALTH NURSE CONSULTANT NC DIVISION OF PUBLIC HEALTH AUGUST 2017



DPI & DPH, A Collaborative Relationship in School Health

1985 - Basic Education Plan includes School Nurses (Registered Nurse) as a necessary student support services position Majority of school nurses located in community based positions with local health departments at that time 1995 – State School Health Nurse Consultant position established and hired by North Carolina Department of Environment, Health and Natural Resources

1995 to date, the office of the State Consultant has provided consultation, technical assistance and continuing education for NC school nurses

A strong working relationship and regular communication are maintained with staff and programs at DPI Data Source for NC Student Health and School Nurses

NC Annual School Health Services Report Surveys

- Respected twenty year history
- 100% district participation
- Fosters district school health program improvement

- School Nurse Supervisors generally complete surveys
- School Nurse workforce and programmatic information are provided in December
- District aggregated information on clinical services and health issues of students is provided in June

School Year 2105-2016 Snap Shot (2016-17 in process)

Statewide School Nurse to Students Ratio: 1:1086

Ratio Range: 319 to 2242, covering 1 to 6 schools

Districts with one nurse per school: 5

Employers of NC School Nurses:

Туре	Positions
LEA	55%
Health Department	40%
Hospital/Health Alliance	5%

Authority for Nursing Practice

North Carolina State Legislature

Establishes and defines the role of the NC Board of Nursing

Enacts legislation that directs school nurses in some activities

North Carolina Board of Nursing

Defines and establishes regulations and requirements for Registered Nurses (RN), Licensed Practical Nurses (LPN), Nurse Aides (NA)

Professional Standards and Evidence Based Best Practices

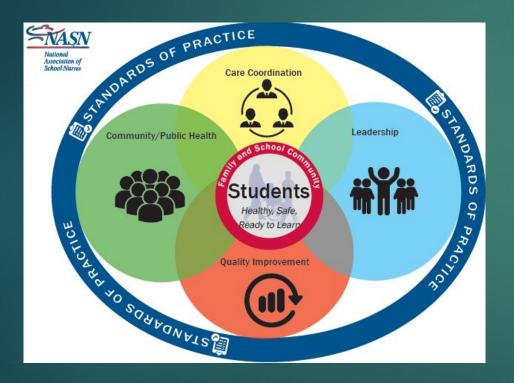
Provides specifics for nursing practice activities

Local Policy and Procedure

Directs local implementation

School Nurses Work within Common Models

21st Century School Nurse Practice Model



Whole School, Whole Community, Whole Child

6



School Nurse Credentials

The role activities of the <u>School Nurse</u> occur in an independent practice setting (Links enabled to North Carolina Board of Nursing in blue)

Registered Nurse

Scope of Practice -

Independent full scope of nursing (not required to be supervised by another license)

Education -

Fully qualified school nurse is baccalaureate prepared with specialty certification

Associate Degree Nurses (ADN) have three years from date of hire to become fully qualified

<u>Licensed Practical</u> <u>Nurse</u>

<u>Scope of Practice</u> – Dependent and directed (required to be directed and supervised by an RN)

Education -

One year program in practical nursing. To become an RN must obtain additional education in a NC BON approved program for a registered nurse

An LPN may be a school nurse extender

Nurse Aides

<u>Scope of Practice</u> – <u>U</u>nlicensed <u>A</u>ssistive <u>P</u>ersonnel (UAP) that must be supervised and directed by RN/LPN

Education -

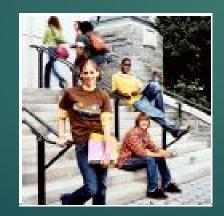
Trained to provide defined tasks as directed by a licensed health care provider

Unlicensed and must have same direction as school staff persons

Goal of NC DPH School Health Unit







Healthy Students, In School, Ready to Learn

Goals of the North Carolina State Board of Education

- Every student in the NC Public School System graduates from high school prepared for work, further education and citizenship.
- Every student has a personalized education.
- Every student, every day has excellent educators.
- Every school district has up-to-date financial, business, and technology systems to serve its students, parents and educators.
- Every student is healthy, safe, and responsible.

Discussion will not Include NC Public Charter Schools

- Unlike LEAs, charters have not been required to make the services of a registered nurse available in planning and caring for students with complex health needs, (NCAC rule number16 NCAC 6D.0402 Policy designating special health care services to be provided).
- Charters <u>are</u> specifically directed to comply with several statute and policy based health care service requirements that are managed by school nurses in LEAs.
- Needs of charter school students with episodic and chronic health conditions does not vary from that of the general school population.
- Charters reporting access to a Registered Nurse at least part-time: 16% (2016-17).
- The School Health Unit collects minimal charter school health information to satisfy statute requirements.



On average, a NC classroom can expect to contain:

11

- 2 students on medication
- 1 student with ADD/ADHD
- 1 student with a life- threatening allergy
- 2 students with asthma
- 1 student with a less common health condition

Each school year 15 to 20 percent of our NC student population lives with an active health condition.

Every student in the NC Public School System graduates from high school... Common Goal: Keeping Children in School

School Nurses assess and coordinate information in completing student health care plans. They provide, or teach and oversee staff in providing, direct care and procedures:

- Help students, families and their physicians to better control chronic health conditions during the school day through Care Coordination activities.

- Good management of health conditions = less time missed from school and more ability to be attentive.

- In North Carolina about 90% of students with illness or health issues who are assessed by the school nurse, when present, are returned to class.

- School nurses identify and intervene with health related issues that contribute to chronic absenteeism for students.

<u>Every student</u> <u>has a</u> <u>personalized</u> <u>education.</u>

Common Goal: Student Based Educational Planning and Accommodation School Nurses are related service providers on Individual Education Plans (IEP) and assist with Section 504 accommodations and other health-related student modifications for all students:

- Active participants on district Student Support Services Teams
- Work with school team addressing mealtime needs for students with medical issues
- Involved in school concussion return-to-learn/play procedures
- Serve as liaison between family, provider and school staff in obtaining consents and medical information needed for educational planning
- Home visit families to help identify health-related barriers to regular school attendance
- Respond to health needs that support student return to school after a prolonged health-related absence

Every student, every day has excellent

educators.

Common Goal: Support for Staff in Work and Wellness

- Support classroom instruction, when related to health and wellness, through resources or serving as a guest speaker. 23,295 presentations were provided in 2015-16.
- Offer wellness activities and support for teachers staff wellness committees, resources for individual questions and blood pressure checks when district supported, programs for increased staff activity and weight management, etc.

▶ When present, frees up school staff to do their education related work:

- A school nurse present every day can manage student's acute health needs, and triage appropriately.
- Studies demonstrate that a nurse in the building every day saves 60 minutes for administrators, 20 minutes for every teacher, and 45 minutes for clerical staff, on average.

Every school district has up-to-date financial, business, and technology systems to serve its students, parents and educators.

Common Goal: Safe, Accessible, Accurate Student Records

- School nurse records and student health information are considered education records and protected under the Family Educational Rights and Privacy Act (FERPA).
- Health encounter and school nurse documentation is best supported in a system designed for that purpose (privacy protection, searchable, retrievable).
- Despite many efforts, NC PowerSchool, in its present form, does not provide health record functionality.

Few districts are able to purchase school health record software. Several PowerSchool compatible programs are available.

Type of System Used	# of Districts
PowerSchool	33
Purchased PowerSchool Compatible	21
Self-created Electronic System	16
No Electronic Documentation	45

Every student is healthy, safe, and responsible. Common Goal: Healthy Students Cared for in a Safe Manner that Assures Good Outcomes

2,220,622 student encounters with school nurses were reported during 2015-16

16

School Nurses

- Establish and oversee medication administration processes that are standards based; More than 9% of the total 2015-16 student population received medication at school.
- Lead implementation of statute based health requirements immunization, health assessments, epinephrine, concussion requirements, diabetes care, etc.
- Direct health screening programs (vision, hearing, etc.) and provide follow-up that reduces barriers to education.
- Administer and provide oversight for specialized services to students insulin pump, tube feeding, catherization, suctioning, etc. 11,512 students reported during 2015-16 with complex procedures.
- Prevent and control the spread of communicable disease and outbreaks.
- Respond to medical emergencies and serve on school Emergency Response Teams.
- Counsel students regarding health, mental health, and emotional issues including screening for suicide risk; 396,199 counseling sessions provided to students during 2015-16.

17

Time for Questions Contact Information: <u>Ann.Nichols@dhhs.nc.gov</u> 919-707-5667



Resources

- Five Ways a School Nurse Benefits the School
- Cost Benefit Study of School Nursing Services
- ► The Case for School Nursing
- School Nurses Battle Chronic Absenteeism
- American Academy of Pediatrics Position Statement on Role of the School Nurse
- School Health Nurse Consultant Team Map