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Association of School Nurses of Connecticut

## **Raised Bill 224**

### ***AN ACT CONCERNING RECOMMENDATIONS OF THE SCHOOL NURSE ADVISORY COUNCIL.***

Thank you to the Chairs of the Public Health Committee, Senator Gerratana and Representative Johnson, and Committee Members for the opportunity to testify on Raised Bill 224. As Co-chair of the School Nurse Advisory Council, I would like to acknowledge the existence of the Council is directly due to your support and recognition of the importance of school health services in the success of children in school as well as for life.

The Council first met in August of 2013. Our members are multidisciplinary representatives of education and health. All of the original members of the Council chose to continue on for the coming year. I urge you to support the Council's recommendations, the result of thoughtful consideration for the welfare of children. In addition, the Council remains cognizant of the needs of school districts in Connecticut and with respect for the interests of all stakeholders.

Thank you for recognizing the importance of professional development as necessary for the appropriate and safe transition of nurses into the educational environment. Professional development is essential in the appropriate and safe care of children and serves to protect the child, the district, and the nurse through a standard of care and a shared body of knowledge.

- ✓ **In addition to the professional development requirements already specified by state regulation, all new Connecticut school nurses must complete the CSDE school nurse orientation program, within one year of hire.**

In the recommendation related to school nurse staffing, the language contained in the Advisory Councils' final recommendations is:

- ✓ **Every district is to maintain a staffing ratio of qualified school nurses to students, consistent with the health care needs of its students, at a level of not less than one qualified school nurse to 750 students.**

With respect to the needs of everyone involved, I urge you to insert the same language into this bill. This was intended to recommend a minimal standard for a relatively healthy population of students, allowing districts to have flexibility to increase nursing resources to meet the needs of the student population with more complex health care needs. Adequate staffing, based on the health needs of every student, is important to teachers, administrators, and parents. Adequate

staffing allows teachers to teach, administrators to lead, and parents to know their child is served by an expert with the ability to manage a range of issues safely and well.

Excerpt from Handout

### ***NASN Caseload Assignments***

#### ***Position Statement***

<http://www.nasn.org/Portals/0/positions/2010pscасeload.pdf>

“School nurses use assessment and intervention skills to keep students in classrooms where education takes place. One study’s results showed that school nurses attended to 64% of a given student population (grades 1 – 12) and returned 95% to class as opposed to the non-licensed staff that saw 36% and returned 82% to class (Pennington, 2008). A similar separate study result showed that students were two times as likely to leave school early on days that the school nurse was not in the building (Wyman, 2005).”

#### Case Examples

1. A student with a 504 plan for ADHD has an accommodation for medication administration as part of the plan. The school has a nurse 2 days a week. On the days, the nurse is not there a staff member has been trained to administer the medication. The teacher reports that the student exhibits differences in behavior and academics, usually 3 times per week. The reason- on the days the nurse was not in the school, if the student did not independently come down to the office the trained staff member did not have time to find him, so he did not receive his medications on those days.
2. A student with diabetes and seizures attends a school **that has a school nurse two days a week**. The school staff wrote the Health Care Plan and Emergency Health Care Plan. The nurse did not participate. **The student is at risk for requiring urgent medical assessment and care, but has no nurse available 3 days/week**. A school with a nurse assigned 2 days per week used 911 multiple times in a week. The school staff admitted they would not have called if the nurse was there.



### Position Statement

#### SUMMARY

It is the position of the National Association of School Nurses (NASN) that schools should employ professionally prepared Registered Nurses, to conduct and supervise school health programs which address the variety of health problems experienced by school children. NASN recommends a formula-based approach with minimum ratios of nurses-to-students depending on the needs of the student populations as follows: 1:750 for students in the general population, 1:225 in the student populations requiring daily professional school nursing services or interventions, 1:125 in student populations with complex health care needs, and 1:1 may be necessary for individual students who require daily and continuous professional nursing services. Other factors that should be considered in the formula-based approach are number of students on free or reduced lunch, number of students with a medical home, and average number of emergency services per year.

#### HISTORY

The school nurse functions as a leader and the coordinator of the school health services team. The American Academy of Pediatrics (AAP) emphasizes the crucial role school nurses have in the seamless provision of comprehensive health services to children and youth as well as in the development of a coordinated school health program. The AAP acknowledges that the school nurse facilitates access to a medical home for each child and coordinates a school health program that meets the needs of the whole child and supports school achievement (American Academy of Pediatrics [AAP], 2008). It continues to be the goal of NASN to provide children and youth with access to the primary school health care resource, the school nurse. There are a wide variety of factors that have historically affected the school nurse to student ratios. These include insufficient funding for school health services, local acceptance and understanding of the school nurse role. School districts across the nation use various models to deliver school health services. To date, 45% of public schools have a school nurse all day, every day, with another 30% working part time in one or more schools (NASN, 2007). Caseloads vary widely, between states and within states. Throughout the nation, many school nurses provide health services to multiple school buildings, limiting the access that students have to a school nurse. When there is no registered nurse on the school premises, the responsibility to administer the necessary medications and treatments, and appropriate monitoring of the children falls on the shoulders of administrators, educators, and staff that are ill-prepared to perform these tasks (ANA, 2007).

#### DESCRIPTION OF ISSUE

Currently 98% (52 million) of the nation's school children spend their day in schools (NCES, 2008). Notably 16% of the 52 million students have chronic physical, emotional or other health problems. Students today face increased social issues as well as the need for preventative services and interventions for acute and chronic health issues (AAP, 2008). Factors that impact the need for a more comprehensive delivery of health care services in schools include:

- The IDEA/Individuals with Disabilities Education Act Federal law and the Section 504 provision of the Vocational Rehabilitation Act which mandate health-related services to children and adolescents in school (Section 504, 2005; IDEA, 2004).
- An increase in the number of children with complex health problems. Overall, 15% to 18% of children and adolescents have a chronic health condition (Perrin, 2007). From 2002 to 2008, the percentage of children in special education with health impairments, due to chronic or acute health problems, increased 60% (Bloom, 2009). Within

# ***Role of the School Nurse***

## ***Position Statement***

### **SUMMARY**

It is the position of the National Association of School Nurses that the registered professional school nurse is the leader in the school community to oversee school health policies and programs. The school nurse serves in a pivotal role to provide expertise and oversight for the provision of school health services and promotion of health education. Using clinical knowledge and judgment, the school nurse provides health care to students and staff, performs health screenings and coordinates referrals to the medical home or private healthcare provider. The school nurse serves as a liaison between school personnel, family, community and healthcare providers to advocate for health care and a healthy school environment (American Nurses Association & National Association of School Nurses [ANA & NASN], 2011).

### **HISTORY**

The practice of school nursing began in the United States on October 1, 1902, when a school nurse was hired to reduce absenteeism by intervening with students and families regarding health care needs related to communicable diseases. After one month of successful nursing interventions in the New York City schools, Lina Rogers, the first school nurse, was able to provide leadership to implement evidence-based nursing care across the city. The school nurse's role has expanded greatly from its original focus, the essence and goals of the practice remains the same (Vessey & McGowan, 2006).

### **DESCRIPTION OF THE ISSUE**

A student's health status is directly related to his or her ability to learn. Children with unmet health needs have a difficult time engaging in the educational process. The school nurse supports student success by providing health care through assessment, intervention, and follow-up for all children within the school setting. The school nurse addresses the physical, mental, emotional, and social health needs of students and supports their achievement in the learning process. The school nurse not only provides for the safety and care of students and staff but also addresses the need for integrating health solutions into the education setting.

The number of children that have a chronic condition has increased dramatically over the past four decades (Perrin, Bloom, & Gortmaker, 2007). Chronic conditions such as asthma, anaphylaxis, type 1 diabetes, epilepsy, obesity and mental health concerns may impact the student's ability to be in school and ready to learn.

The number of students with special health care needs has also increased dramatically over the past decade. Students are coming to school with increasingly complex medical problems, technically intricate medical equipment, and complicated treatments (Robert Wood Johnson Foundation, 2010).

The school nurse is a registered professional nurse who has a commitment to lifelong learning. Educational preparation for the school nurse should be at the baccalaureate level, and the school nurse should continue to pursue professional development and continuing nursing education. School nurses typically practice independently and are called upon to assess student health, develop and execute plans for care management, act as first responders, and engage in public health functions such as disease surveillance, immunization compliance, and health promotion. The school nurse is a vital member of the school team that leads change to advance health and collaborates with school staff members, parents and community members to keep students safe at school and healthy to learn.

### **RATIONALE**

School nursing has multiple components and the role of the school nurse is a broad one, dependent on many factors, including the school setting (rural, urban, suburban), health needs of the student population and the availability of specialized instructional student support services and programs.

The National Association of School Nurses defines school nursing as a specialized practice of professional nursing that advances the well-being, academic success and lifelong achievement and health of students. To that end, school nurses facilitate normal development and positive student response to interventions; promote health and safety including a healthy environment; intervene with actual and potential health problems; provide case management services; and actively collaborate with others to build student and family capacity for adaptation, self-management, self-advocacy, and learning (NASN, 2010).

□ **School nurses facilitate normal development and positive student response to interventions.**

The school nurse serves as the health care expert in the school to meet student health needs with an understanding of normal growth and development in children and youth as well as students with special needs. The school nurse develops plans for student care based on the nursing process, which includes assessment, interventions, and identification of outcomes and evaluation of care (Wolfe, 2006).

□ **School nurses provide leadership in promoting health and safety, including a healthy environment.**

The school nurse provides health-related education to students and staff in individual and group settings and provides consultation to other school professionals, including food service personnel, physical education teachers, coaches, and counselors. Responsibilities in the provision of a safe and healthy school environment include the school nurse's monitoring of immunizations, managing communicable diseases, assessing the school environment for safety to prevent injury and spearheading infection control measures. The school nurse is also a leader in the development of school safety plans to address bullying, school violence, and the full range of emergencies that may occur at school (Wolfe, 2006).

□ **School nurses provide quality health care and intervene with actual and potential health problems.**

Health care for chronic and acute illness, as well as injuries in the school setting, is a major focus of the role of the school nurse. The school nurse is responsible for medication administration, health care procedures, and the development of health care plans. Students often have multiple needs that should be examined in order for the student to be able to be successful in the classroom, and school nurses often engage in health screenings that include vision, hearing, body mass index, mental health index or other screening procedures (often based on local and state regulations) to address those issues (Wolfe, 2006).

□ **School nurses use clinical judgment in providing case management services.**

The school nurse receives medical orders to guide the health care needed to assist each student to be safe and successful at school. As in other clinical settings, the nurse develops Individualized Healthcare Plans (IHPs) in nursing language to direct nursing care for students as well as Emergency Care Plans (ECPs) written in lay language to guide the response of unlicensed personnel in a health-related emergency. Both plans are tailored to the individual needs of a specific student to improve expected care outcomes. The nurse makes decisions related to the appropriate delegation of healthcare tasks as directed by state laws and professional practice guidance (American Nurses Association [ANA]/National Council of State Boards of Nursing [NCSBN], 2006). As medical and information technology advance and change, it is imperative for the school nurse to pursue professional development so the school nurse is able to provide the best possible care for the student population (Wolfe, 2006).

□ **School nurses actively collaborate with others to build student and family capacity for adaptation, selfmanagement, self-advocacy and learning.**

Coordinating the linkage between the medical home, family and school is an important aspect of the role of the school nurse. The school nurse has health expertise that is essential to school educational teams, such as the Committee on Special Education, the Individualized Educational Plan (IEP) team and the Section 504 Team so that health-related barriers to learning can be reduced for each student. The school nurse can provide families with referral information along with available community resources to improve access to health care. The school nurse can also assist families in obtaining health insurance as needed and can represent the school on community coalitions to advocate for school-based health care (Wolfe, 2006).

The school nurse may take on additional roles as needed to meet the needs of the school community. Healthy children are successful learners. The school nurse has a multi-faceted role within the school setting, one that supports the physical, mental, emotional, and social health of students and their success in the learning process. It is the breadth of nursing activities contained within the role of the school nurse and the unique nonmedical

setting that differentiates school nursing from other nursing specialties.

#### **REFERENCES**

American Nurses Association & National Association of School Nurses. (2011). *Scope and standards of practice – School nursing* (2<sup>nd</sup> ed.). Silver Spring, MD: Nursesbooks.org.

American Nurses Association & National Council of State Boards of Nursing. (2006). *Joint statement on delegation*. Retrieved from [https://www.ncsbn.org/Delegation\\_joint\\_statement\\_NCSBN-ANA.pdf](https://www.ncsbn.org/Delegation_joint_statement_NCSBN-ANA.pdf)

National Association of School Nurses. (2010). *Definition of school nursing*. Retrieved from <http://www.nasn.org/RoleCareer>

Perrin, J. M., Bloom, S.R., & Gortmaker, S. L. (2007). The increase of childhood chronic conditions in the United States. *Journal of the American Medical Association, 297*(24), 2755-2759. doi: 10.1001/jama.297.24.2755

Robert Wood Johnson Foundation. (2010). *Unlocking the potential of school nursing: Keeping children healthy, in school, and ready to learn*. Retrieved from <http://www.rwjf.org/files/research/cnf14.pdf>

Vessey, J., & McGowan, K. (2006). A successful public health experiment: School nursing. *Pediatric Nursing, 32*(3) 255 – 256.

Wolfe, L. C. (2006). Roles of the school nurse. In J. Selekman (Ed.), *School nursing: A comprehensive text*. Philadelphia, PA: F.A. Davis Company.

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