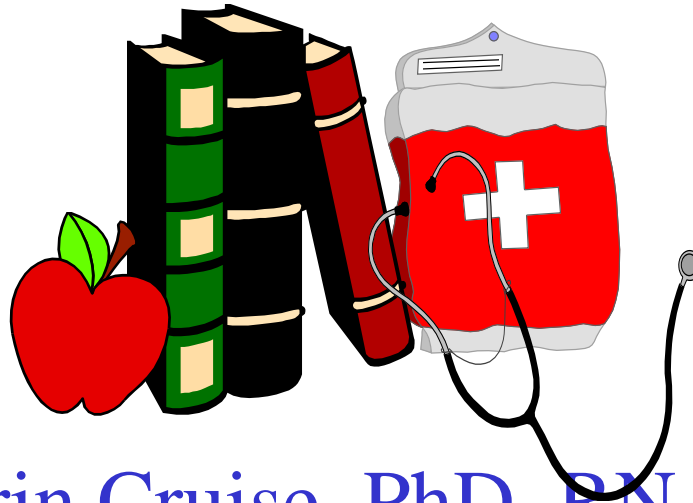


School Nursing in Virginia

Fall 2017



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Objectives

- **At the end of this class, participants should be able to:**
 - Discuss the history of school nursing in the US
 - Discuss the roles and responsibilities of school nurses
 - Identify challenges in delivering school health services to rural Virginia children
 - Discuss strategies that school nurses and community/school partners can utilize to address these challenges.

A Brief History of School Nursing

- Earliest known programs started in England in 1891
- 1897 – Medical inspections began in NYC
- Initial focus was containment of contagious disease
- Physicians conducted daily inspections and excluded children from school
- September 1902 – 10,567 excluded without follow up

History of School Nursing

(continued)

- Extreme poverty, unemployment, illiteracy, child labor
- Leading causes of death:
 - Pneumonia/influenza, TB, diarrhea, heart disease, stroke
- Henry Street Settlement started by Lillian Wald in 1893
- Donated school nurse for one month October 1902



History of School Nursing (continued)

- Lina Rogers – first school nurse in U. S.
- Had 4 schools - 4,500 students
- Conducted inspections, treatments in school
- Home visits
- Family health education
- Referral/resources
- Transportation
- Maintained detailed documentation/reports

History of School Nursing (continued)

- Within one month, exclusions down to 1,101
- Board of Health hired 12 nurses – salary \$900/year
- 129 schools - 219,239 students
- By December = 400 exclusions from all these schools compared to 24,538 under the old system
- By 1908, school nursing had spread to several major cities throughout the United States

School Nurses in rural Virginia are actively involved in all aspects of student health:

- Health Services
- Health Education
- Nutrition Environment and Services
- Employee Wellness
- Social and Emotional School Climate
- Physical Environment
- Counseling, Psychological, and Social Services
- Community Involvement
- Family Engagement
- Physical Education and Physical Activity

Health Services



Current School Nursing Practice In U.S.

- Minimum recommendation for school nurse ratios is 1:750 healthy children – currently 40.6%
- Lower recommendations for school populations with medically fragile children
- Healthy People 2020 Obj. ECBP-5: At least 44.7% of all schools will achieve this ratio
- BSN minimum recommended educational level for entry
- Supported by AAP, NASN, NEA, AFT, ANA, ASHA and many other educational and health care organizations



School Nursing Practice (continued)

- Laws vary from state to state
- Interpretations of laws vary within each state
- Various agencies involved in making laws and regulations that affect school nurse practice
- Regulations may be “recommendations” or “required”
- Range of nurse-to-student ratios found in 2009:
 - Vermont 1:311 - Utah 1:4,000+

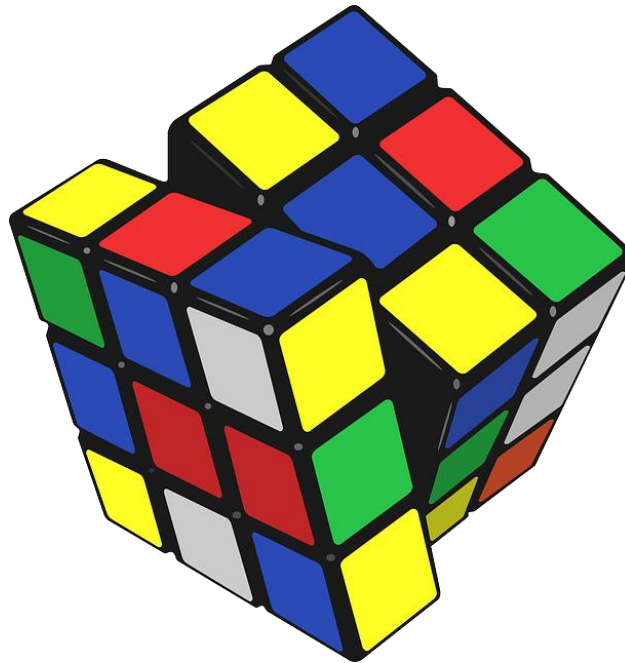
School Nursing Practice in Virginia

- Varies widely – currently no minimum standard in Virginia
- 2016: Average 1 nurse for every 923 students
- No nurse in many school systems
- Some nurses covering 4 or more schools
- Some have LPNs, EMTs, CNAs with 1 RN supervising the entire county
- School boards make decisions at local level

Challenges for Rural School Nurses

- Dental care for children with Medicaid or uninsured
- Funding for school health supplies/staff
- Clarification of school nurse roles/practice for school administrators, faculty, and staff
- Support and respect for school nurses
- Staffing school clinics with qualified personnel
- Distances to providers/specialists
- Slow emergency response time

Possible Solutions



Children's Dental Care

- Millions of missed school hours, pain, low self-esteem, inability to concentrate
- 108 million people in the U.S. lack dental insurance
- 49 million live in Dental Health Professional Shortage Areas (>1 dentist: 5,000 patients)
- Only 20% of dentists accept Medicaid
- Utilization of available services is low



Dental Care Solutions

- Mission of Mercy, Smiles for Children, Give Kids a Smile
- Federally Qualified Health Centers
- Some Free Clinics & Health Departments
- Community Colleges - Dental Hygiene Programs
- Medical Centers - Dental Services
- School Based Health Clinics – decrease urgency and caries, increase restorations/prevention
- Reinstate dental fluoride programs in rural schools
- Nursing Students

Funding

- Standards of Quality Recommended Changes:
 - § 22.1-253.13:2. Standard 2. Instructional, administrative, and support personnel.
 - Set minimum standards for nurse-to-student ratio of 1 “nurse” (RN, LPN, and CNA) to 550 students
- Partnerships:
 - Business/Industry
 - Parents
 - Parent-Teacher Associations
 - Hospitals
 - Health Departments

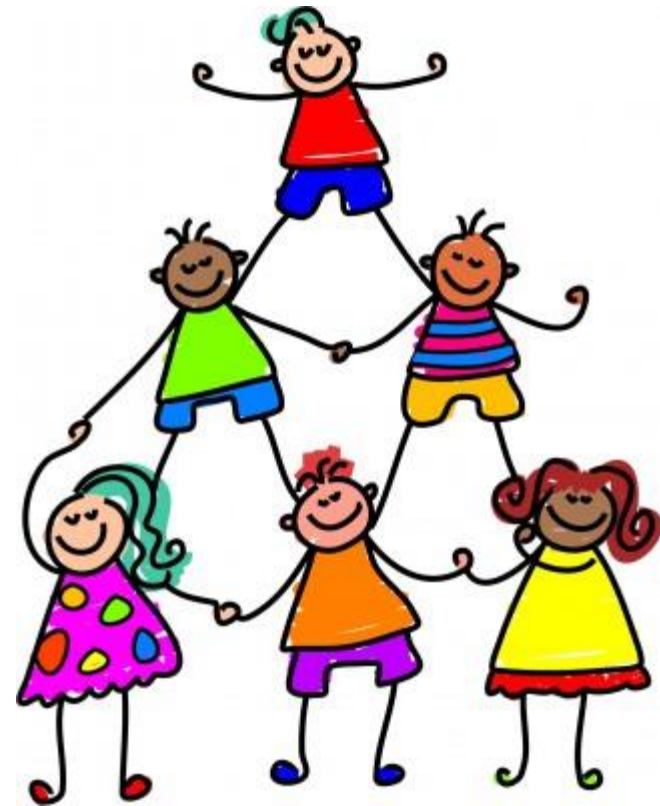


School Nurse Roles/Practice

- School nurses need to be fully informed:
 - Nurse Practice Act
 - National School Nursing Standards of Practice.
- Mentoring/Connections - Empowerment
- Collect and share data with outcomes focus
- Evidence based practice
- Conferences
 - Virginia School Nurse Institute - Longwood

Support/Respect

- Professional Organizations – NASN, VASN
- Listservs
- Educational Organizations
- Continuing education/degree
- Evidence Based Practice
- Increased visibility– posters, newsletters, sports, PTA, School Board meetings
- Share outcomes



Distances to Providers/Specialists/First Responders

- School nurse preparedness/training
- Some hospitals paying for NP education
- Telemedicine
- Mobile Health Clinics
- Collaborate with EMS providers



Qualified Personnel

- Legislation – lobbying
- Education of legislators and local policy makers
- Standards of Quality recommendations
- Partnerships with hospitals, health departments
- Partnerships with parents

Montgomery County Public Schools

2003

- ~9,000 students
- 23 schools
- Mainstreamed special education
- 4 School Nurses + Coordinator
- 389 square miles

Costs of School Nurse Staffing

Position Type	Hours Per Day	Hourly Rate	Schedule	Individual Salary	Salary w/taxes and benefits	No. Of Positions	Total Cost
RN	6.4	17.37	10 months	\$22,234	\$24,013	4	\$96,052
School Health Coordinator	Full Time	N/A	11 months	\$44,500	\$56,960	1	\$56,500
						Grand Total	\$152,552

Montgomery County Schools Health Information

Daily Medications/Medical Procedures	104/ 60
As Needed Medications	522
Number of Health Concerns Reported	5383
Total Student Population w/ health concerns	3030

Montgomery County Schools Health Concerns By Diagnosis

Health Concern	Total	Health Concern	Total
Emotional/ Mental Health	417	Urinary	84
Asthma	765	Cardiovascular	93
ADHD	540	Seizure	63
Severe Allergies	76	Sickle Cell	3
Sensory Impairment	681	Diabetes/Severe Hypoglycemia	56
Other Respiratory Disorders	29	Neurological	86
Gastrointestinal	157	Minor Allergies	370
Musculoskeletal	132	Other	344

Options and Costs for Additional Staffing

Position Type	Hours Per Day	Hourly Rate	Schedule	Individual Salary	Salary w/taxes and benefits	No. Of Positions	Total Cost
Add RNs	4.25	\$17.37	10 months	\$14,765	\$15,946	16	\$255,136
Add LPNs	4.25	\$12.00	10 months	\$10,200	\$11,016	16	\$176,256
Move current RNs to Full Time	Full Time	N/A	10 months	\$24,318	\$32,930	4	\$131,720 <u>-96,052</u> \$35,668 (new dollars)

Compared of Preparation and VBON Practice Standards

Licensed Practical Nurses and Registered Nurses

	Prerequisites/Education
Licensed Practical Nurses	<ul style="list-style-type: none">➤ 2 Years high school➤ 12-18 months training➤ Diploma from Practical Nursing Program➤ Pass written examination
Registered Nurses	<ul style="list-style-type: none">➤ High school graduate➤ 2-4 years training➤ Diploma or degree from a Professional Nursing Program➤ Pass written examination

Scope of Practice

Registered Nurse	Licensed Practical Nurse
Performs any nursing act in the care of individuals or groups	Performs selected nursing acts in the care of individuals or groups
Practices independently.	Practices under the direction or supervision of a licensed medical practitioner or registered nurse.
Requires physician's orders for administering medications and medical treatments	Requires physician's orders for administering medications and medical treatments
Performs triage and in-depth physical assessments	Contributes data to assist the registered nurse in making physical assessment.
Develops care plans for the management of student health care needs.	Implements care plans developed by the registered nurse.

Scope Of Practice (Continued)

Registered Nurse	Licensed Practical Nurse
Delegates nursing tasks to unlicensed personnel	Not allowed
Trains, supervises and evaluates unlicensed personnel	Not allowed
Provides individual or classroom education	Individual education only (except with special training)
Provides emotional guidance for individual students	Not within scope of practice

Results

- In 2003, 4 nurses worked 32 hours per week, plus full time coordinator covering 23 schools
- In 2004, increased to 10 nurses following report to School Board
- Currently, each school has a nurse for most of the school day.

Costs 2003

- Approximately \$50 per student seen in 2003
- \$17 per student if entire population counted (9,000+)
- Increased to approximately \$23 per student in 2004 with addition of 4 more nurses



Impact

- Hard to measure, due to lack of record-keeping prior to increasing school nurse ratios.
- Increased numbers of children cared for by nurses rather than non-healthcare personnel
- Increased involvement of school nurses in health education and intervention

Continued Challenges

- Money –ongoing barrier
- Personnel – low pay and lack of benefits impede hiring
- Equipment – budget cuts frequently interfere with acquiring supplies
- Facilities – improving as new schools are built

School Nurses



Care for Kids

References

- American Academy of Pediatrics (AAP) Council on School Health and Committee on Substance Abuse. (2007). The role of schools in combatting illicit substance abuse. *Pediatrics*, *120*(6), 1379-1384
- Association for Supervision and Curriculum Development. (2017). Whole school, whole community, whole child. Retrieved from <http://www.ascd.org/programs/learning-and-health/wsc-model.aspx>
- Centers for Disease Control. (n.d.). Whole school, whole community, whole child model. Retrieved from https://www.cdc.gov/healthyyouth/wsc/pdf/wsc_fact_sheet_508c.pdf
- Galemore, C. A., Bowlen, B., Combe, L. G., Ondeck, L., & Porter, J. (2016). Whole school, whole community, whole child – calling school nurses to action. *NASN School Nurse*, *31*(4), 216-213.
- Lewallen, T.C., Hunt, H., Potts-Datema, W., Zaza, St., & Giles, W. (2015). The whole school, whole community, whole child model: A new approach for improving educational attainment and healthy development for students. *Journal of School Health*, *85*(11), 729-739.

References

- National Association of School Nurses. (2013, June). Drug testing in schools. Retrieved from <http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatementsFullView/tabid/462/smId/824/ArticleID/568/Default.aspx>
- National Association of School Nurses. (2014, January). Marijuana and children. Retrieved from <http://www.nasn.org/PolicyAdvocacy/PositionPapersandReports/NASNPositionStatementsFullView/tabid/462/smId/824/ArticleID/632/Default.aspx>
- National Institute on Drug Abuse. (2003). *Preventing drug abuse among children and adolescents: A research-based guide for patients, educators, and community leaders*. Retrieved from https://www.drugabuse.gov/sites/default/files/preventingdruguse_2.pdf
- Selekman, J. (2012). *School nursing: A comprehensive text* (2nd edition). Philadelphia: F.A. Davis.
- Stanhope, M. & Lancaster, J. (2014). *Foundations of nursing in the community: Community-oriented practice* (4th ed.). St. Louis: Mosby.