

Instructions for 2017-2018 Assessment of District Student Health Services

Thank you for taking time to complete this district assessment. The data is critical for the Office of Superintendent of Public Instruction (OSPI), School Districts and Educational Service Districts (ESDs) to manage:

- Health services in schools,
- The incidence of complex health issues in schools,
- Related trends and needs(*student health and staffing*),

If you have any questions, please contact your regional School Nurse Corps (SNC) Nurse Administrator. Contact information is available at:

<http://www.k12.wa.us/HealthServices/SchoolNurse.aspx>.

You may complete the district assessment on paper or in Excel and send to the **ESD SNC Nurse Administrator** in your area. (The Excel version is available from the **ESD SNC Nurse Administrator**).

Throughout the assessment, please answer all questions as completely and accurately as possible, based on your current knowledge and available information. **Except for hours per week**, round all numbers to the nearest **whole number**.

This information is not a direct reflection of your practice, but rather a reflection of the services available given financial, physical, and time constraints. Data provides a snapshot of health services and related needs at the time you complete the assessment.

SECTION 1 – SCHOOL DISTRICT

1. Enter the district name.
2. Enter the **official** district Class – I or II (check with your district office if you are unclear).
3. Enter the total number of students in the district. This is the **head count** (not FTE) for all students under the care of the district during school or school sponsored activities. Include pre-schools, home-school students, and alternative students. Do not count virtual academy students unless you planned for health care needs including immunizations.
4. Enter the number of schools within your district (not necessarily equal to the buildings). Some buildings may house more than one school. If you are not sure, check with your district office or go to <http://data.k12.wa.us/PublicDWP/web/Washingtonweb/Snapshots/Overview.aspx> and click on the plus next to your district's name to see the schools OSPI lists for your district OR look up in *Washington Education Directory 2015-2016 book*.
5. Check each box that helps to fund nursing services in your district.

SECTION 2 – HEALTH SERVICES

1. Enter, in each category (a through d), the number of licensed nursing hours per week the district provides based upon employee job classification. Decimals may be used throughout section 2 as applicable.

1c. “Other Registered Nurse (RN)” may include those employed by hospitals, agencies, local health jurisdictions, independent contractors, etc.

Enter the number of RN hours funded by the School Nurse Corps (SNC). If no SNC funding for school nurse hours, check no SNC hours.

2. If your district purchased or contracted additional hours through the SNC, indicate the number of hours per week. If not, check no additional hours.

3. Enter, in each category (a through d), the number of licensed nursing hours per week the district provided for 1:1 care based upon employee job classification.

3c. “Other Registered Nurse” may include those employed by hospitals, agencies, local health jurisdictions, independent contractors, etc.

4. Enter the number of hours per week the district provided funding dedicated specifically for health room assistants performing health room activities (this does not include the secretary who does health room activities as part of his/her regular secretarial job).

5. Enter the number of RNs in each category (a through e) according to the highest level of education completed.

6. Enter the number of RNs in each category (a and b) that hold a certification.

7. Check the box(es) of any of the following services your district received from the ESD SNC Nurse Administrator and/or Team Leader.

- a. Direct Nursing Services: School nurse services performed on site, e.g. developing Individual Healthcare Plans (IHPs) or Emergency Care Plans (ECPs), coordinating and/or providing health screenings, overseeing immunization records, delegation and supervision of unlicensed staff in administration of medications or providing medical procedures, etc.
- b. Program Management: Oversight of the use of funds for nursing hours to provide services related to SNC program goals and objectives.
- c. Resources: Examples include use of the SNC resource library; requesting or receiving materials, supplies, sample forms, etc.
- d. Technical Assistance and Consultation: This may be phone/email consultation, on site consultation, training, or technical assistance.
- e. Training and Professional Development: Provided or contributed to training or continuing education opportunities through various regional meetings or in-services such as SNC, the School Nurse Organization of Washington, K–20, etc.
- f. Mentoring and Orientation: Provided mentoring, guidance, and/or support for all nurses and orientation for nurses new to school nursing.

8. Enter the total number for each category noted in the table:
 - Count all medications ordered: daily scheduled medications and “as needed” (PRN) medications, including emergency meds.
 - Count all medical treatments ordered, not times per day treatment is provided. Examples of medical treatment may include tube feedings, catheterizations, oral suctioning, glucose monitoring, etc.
 - Indicate the number of students referred for vision and hearing.
9. Check each box to indicate if your district provides the services described.
 9. a. and b. If your district does not have medications or treatments currently ordered, you would still check “Yes” if you would provide training and supervision if a medication or treatment were ordered.
10. Check yes or no to the questions regarding stock epinephrine
11. Enter the total number of anaphylactic events that occurred during school and school sponsored activities.
12. Check yes or no to the question regarding delegation of nasal midazolam.
13. Enter:
 - Medication orders for:
 - Epinephrine for anaphylaxis, severe allergy or asthma
 - Rectal Diastat for seizure
 - Intra-Nasal Midazolam for seizure
 - Glucagon for severe low blood sugar
 - Times medication administered by RN or LPN:
 - Epinephrine for anaphylaxis, severe allergy or asthma
 - Rectal Diastat for seizure
 - Intra-Nasal Midazolam for seizure
 - Glucagon for severe low blood sugar
 - Times medication administered by a PDA:
 - Intra-Nasal Midazolam for seizure
 - Glucagon for severe low blood sugar
 - Times medication administered by unlicensed staff:
 - Epinephrine for anaphylaxis, severe allergy or asthma
 - Intra-Nasal Midazolam for seizure
 - Times a student self-administered epinephrine

SECTION 3 – STUDENT DATA

1. Indicate the number of **students** in each severity level as described in the Staff Model.

Use the *Staff Model for the Delivery of School Health Services*, (<http://www.k12.wa.us/HealthServices/pubdocs/SchHealth.pdf>) to determine the number of students in each severity level. A brief explanation of the staffing model:

- Level A (Nursing Dependent) students require 24 hours a day, frequently one-to-one skilled nursing care.
- Level B (Medically Fragile) students require a full-time nurse in the building.
- Level C (Medically Complex) students require an RN one day a week and access to a nurse the rest of the week.
- Level D (Health Concerns) students require their health care needs assessed at least once a school year by a RN. Required monitoring varying from every two weeks to annually.
- Students should be listed only one time in one category (A, B, C, or D) at their highest severity level (not a category for each condition). Placement of a student at a particular level requires nursing judgment considering all conditions and any other life situations which may increase or decrease the student’s need for nursing availability. A student’s severity level may change during the year; therefore, record the severity level of a student at the time of the district assessment.

Example: For a student with three diagnoses: non independent diabetes, depression, and migraine headaches, determine and record one severity level considering the student’s multiple diagnoses and other life situations. This student would be considered a level B and require the availability of a full time nurse in the building.

2. Indicate the number of **diagnoses**, in each category listed in the table. Total each column.

Example: For a student with diabetes, depression, and migraine headaches, count and record each of the three conditions.

If you use Washington State School Nurse Data Sets, the table below describes which codes are contained in the conditions listed.

a. ADHD / ADD	NB
b. Anaphylaxis (Severe Allergy)	EG
c. Asthma	RA; RB; RC; RD; RE
d. Cardio-vascular	CA; CB; CC; CD; CE; CF; CG
e. Developmental Conditions (DD; Asperger’s, Autism; Downs)	AH; NA; NC; NF; NL
f. Diabetes Insulin Dependent	EK
g. Diabetes Non-Insulin; Obesity	EL; ES

h. Hematological	BA; BB; BC; BD
i. Mental / Behavioral Health	PA; PB; PC; PD; PE; PD; PF; PG; PH; PI; PJ
j. Neurologic	ND; NE; NG; NH; NI; NJ; NK; NM; NN; NO; NQ; NR; NS; NT
k. Oncological	TA; TB; TC; TD; TE; TF; TG; TH; TI
l. Seizures	NP
m. Traumatic Brain Injury	NU
n. Vision/Hearing Deficits (not corrective lenses)	YA; YB; YD
o. Other conditions not reported	AA; AB; AC ;AD; AE; AF; AG; AI; AJ; AK; AL; AM; EA; EB; EC; ED; EF; EH; EI; EJ; EM; EN; EO; EP; EQ; ER; ET; EU; GA; GB; GC; GD; GE; GF. GH. GI; GJ; GK; GL; GM; GN; GO; MA; MB; MC; MD; ME; MF; MG; MH; MI; MJ; OD; OJ; RF; SA; SB; SC; SD; SE; SF; SG; SH; UA; UB; UC; UD; UE; UF; UG; UH; YC; YE

Life threatening per RCW 28A.210.320(4): Include any health condition that will put the child in danger of death during the school day if a medication or treatment order and a nursing plan are not in place.

Care Plans: Count the number of care plans related to the condition(s) as listed. A student with a condition may have an emergency care plan, an individualized healthcare plan and perhaps a 504 or individualized education plan. Since the plans are for the same student and that condition, count them as one (1) plan. All these plans combined constitute the plan of care for the student. Some students have multiple conditions in one care plan.

An example would be a student with severe allergies and asthma. Because the plan counts are related to the condition and not the student, you would count one plan for each condition.

3. The instructions below will help you complete all fields.
 - a. Enter the total number of sites (groups of buildings within close proximity) within your district. A site may include multiple schools or school buildings with a relatively small number of students in close proximity (2-3 minute walk). Please remember to use your nursing judgment.
 - b. Enter the total number of students in the district. Use the same number from Section 1.3.

- c. Enter the total number of Level B students for the district. Use the same number from Section 3.1 Level B: Medically Fragile.
- d. Enter the total number of Level C students for the district. Use the same number from Section 3.1 Level C Medically Complex.
- e. Enter the number of RN hours needed to meet a 1:1500 nurse to student ratio. Multiply the total number of students by 40, divide by 1500 and enter the result.
- f. Enter the number of nursing hours required, based upon severity level needs for buildings with Level B and C students. Each site with Level B students needs 40 hours of nursing time per week. For each site with Level C students that does not have Level B students, count 8 hours of nursing time per week. Enter the total hours for all buildings.
- g. Determining RN hours needed requires your nursing judgment. Consider 1:1500 ratio, severity levels as well as other individual student, school population, and building needs and enter that number. Be prepared to share how you determined the number of hours needed when you discuss this with district administration.
- h. Enter the total number of RN hours currently assigned to district after excluding 1:1 nursing time.
- i. Enter the difference of RN hours needed versus the total number of RN hours currently assigned (g-h).

SECTION 4 – DATA

1. Data Collection

- a. Check yes or no to the question regarding the use of a computer program.
 - b. Indicate the programs your district is using and check all that apply.
 - c. Check the components of the student information system program you are currently using.
 - d. Check yes or no if using WA State School Nurse Data Sets.
 - e. Check yes or no if you collect health room disposition data.
 - If Yes, indicate number of student visits **seen by RN** and report disposition.
 - If Yes, indicate number of student visits **seen by other staff (not RN)** and report disposition.
2. Are you currently using student health data to identify the impact of school nurse interventions on student health and educational outcomes (for example: improved attendance, test scores, grades, and graduation rates)? If yes, please describe.

SECTION 5 – TO BE COMPETED BY THE SCHOOL NURSE AND REVIEWED WITH SCHOOL ADMINISTRATOR

1. School Nurse Impact: District administration and each building administrator should have understanding of this section. Schedule an appointment with your district superintendent or appropriate administrator to review and discuss your findings. Be ready

with specific examples without compromising confidentiality.

2. Provide at least one anecdotal story about how your nursing assessment and interventions have positively impacted a student or a staff member. Your success stories support quantitative data. Your stories paint the picture for others illustrating what nurses do in schools and how they affect children, families, and staff.
3. Unmet Needs: To be discussed with school and/or district administrator.

SECTION 6 – OTHER INFORMATION

Please attach additional comments on any aspect of the assessment.

Return your completed assessment to your regional ESD SNC Nurse Administrator. Thank you!