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Part

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Ansanta Cole



SCHOOL NURSING AND SCHOOL-BASED HEALTH CENTERS

Working Together for Student Success



SCHOOL NURSING

- Registered nurses who practice in schools and lead the delivery of student health services
- Serves the entire student population and school community
- 82% of schools report they have a school nurse¹
- Practices within the *Framework for 21st Century School Nursing Practice*^{TM 2}
 - ◆ Standards of Practice
 - ◆ Care Coordination
 - ◆ Leadership
 - ◆ Quality Improvement
 - ◆ Community/Public Health
- Funding Models:
 - ◆ Local school district
 - ◆ Local public health department
 - ◆ Children's hospital
 - ◆ 3rd party payer

SCHOOL-BASED HEALTH CENTERS

- Multidisciplinary healthcare teams located in schools or on school grounds
- Serve enrolled students and families
- 4.6% of schools have a school-based health center¹
- Provide primary care including the following:
 - ◆ Laboratory services
 - ◆ Medical diagnosis and treatment
 - ◆ Medication prescriptions
 - ◆ Oral health care (optional)
 - ◆ Mental health care (optional)
- Funding Models:
 - ◆ Foundations
 - ◆ Healthcare systems
 - ◆ 3rd party payer

School nursing and school-based health centers complement care provided at school. One does not replace the other.

Collaboration between school nurses and school-based health centers enhances students' health, overall well-being, and academic success.

¹U.S. Department of Health and Human Services & Centers for Disease Control and Prevention. (2015). *School policies and practices study*. Retrieved from http://www.cdc.gov/healthyyouth/data/shpps/pdf/shpps-508-final_101315.pdf

²National Association of School Nurses. (2016). Framework for 21st century school nursing practice. *NASN School Nurse*, 31(1), 45-53. Also available at <https://www.nasn.org/portals/0/resources/21stCenturySchoolNurseFramework2015.pdf>

APPENDIX M

HEALTH REQUIREMENTS FOR CHARTER SCHOOLS

HEALTH REQUIREMENTS

Substance Abuse and Prevention

- Grades K-9 Provides a minimum of 16 hours per year of substance abuse prevention incorporated into a comprehensive school health program.
- Grades 10-12 Provides a minimum of 8 hours per year of substance abuse prevention incorporated into a comprehensive school health program.
- Grades K-12 Addictive disorders professionals are available for, and regularly visit, every secondary and elementary school (*ratio of 4 schools to one professional*).

Health Services

- Grades K-12 All students' records have been reviewed to ensure that immunization requirements set forth by the Office of Public Health are enforced.
- Grades K, 1, 3, 7, 11 Hearing screening has been performed on all students in the grades mentioned.
- Grades K, 1, 3, 5, 7, 9, 11 Vision screening has been performed on all students in the grades mentioned.
- Grades 7-12 Female students are provided instruction on proper procedure for breast self-examination and the need for an annual PAP test for cervical cancer.
- Grades K-12 Procedures have been established for the administration of medication during school day.

Health Related Policy

- Grades K-12 The school system has policies and procedures that address, but are not limited to, the following items:
- a) excluding students with communicable diseases and readmitting them following their recovery;
 - b) controlling of communicable problems such as lice and scabies;
 - c) taking care of sick or injured students, including notification of parents in cases of emergencies that occur while students are under the jurisdiction of the school;
 - d) administering medication in schools (including the procedures to be followed);
 - e) developing and enforcing a written personnel policy that requires the use of universal precaution when individuals have direct contact with blood or other body fluids and that provides sanction, including discipline if warranted, for failure to use universal precautions.

The Code of Ethics for Nurses was developed as a guide for carrying out nursing responsibilities in a manner consistent with quality in nursing care and the ethical obligations of the profession. To learn more about the creation of the Code of Ethics, purchase a copy of your own, or view the nursing Code of Ethics online, please refer to the links listed below.

The ethical tradition of nursing is self-reflective, enduring and distinctive. A code of ethics for the nursing professional makes explicit the primary obligations, values and ideals of the profession.

Nursing encompasses the protection, promotion and restoration of health and well-being; the prevention of illness and injury and the alleviation of suffering, in the care of individuals, families, groups, communities and population.

The code of ethics for nurses with interpretive statements (the code) establishes the ethical standard for the profession and provides a guide for nurses to use in ethical analysis and decision making. The code is nonnegotiable in any setting. It may be revised or amended.

It is important for all nurses to read all 76 pages. There are many references in this document that directly refer to school nursing in the context of the ever increasing practice of schools hiring nurses *directly out of nursing school*. It is most likely part of saving money to pay less for less experience, I really don't know. It absolutely reflects the severe lack of understanding or appreciation of the role of practicing nursing in the school and need for a health professional to have a strong foundation of experience in clinical practice and exposure to the nursing identity (exposure working with the hierarchy of nursing) before taking on the role that is so totally alone and independent without direct professional supervision and oversight.

This is a serious concern, perhaps even a developing crisis, that is happening more and more. I go as far to say that a nurse accepting a position as a school nurse directly out of nursing school is unethical as many statements in this document point to that support it.

National standards requiring a minimum number of years of experience (3 years) in nursing (in an area where there is a nursing team and supervision of practice) to be a school nurse in ANY school (public and private. Most public schools (at least in NYC) require experience for their full time school nurses but not for their subs. The public schools use private employment agencies that supplement them with large numbers of subs, many right out of nursing school (usually working for the agency while they search for a full-time nurse position in a clinical setting). The non-public (private, parochial, charter) schools do not require experience and more and more are turning to new graduates or nurses with little or no experience to fill positions as experienced SN retire. There is also a trend of laying off experienced nurses to replace with the new graduates as cost saving and possibly to have more control over the novice. I suspect this is happening nationwide and not generally reported or tracked.

This practice *is* unethical and is missed or dismissed or not understood by the nurses accepting the positions. In part it is also reflective of how nurses and schools, see school nursing as "easy, not real nursing, just sitting reading/knitting until a kid throws up", sending kids home"

and all the other misunderstood ideas we have had to work to overcome. Not until a nurse works in a school do they fully learn and understand that in most ways it is one of the most challenging area of nursing that requires a deep and vast amount of experience, knowledge, judgment, clinical background and independent decision making and responsibility.

It is common understanding and knowledge among school nurses that what we contribute and all that we do is not understood. We have many conversations about this problem and how to overcome it. Starting at this point, the foundation of ethical practice that requires a nurse to have the knowledge and skills to take on an assignment. Having this as the accepted and required professional standard within the nursing community and communicated as the rule, not exception is a must. Our national and state organizations, schools of nursing and professional leadership must make it a priority to support the implementation and education of this is a must. Advocacy is part of the ethical practice of nursing and this is advocacy for our students, school communities and even more for the specialty of school nursing. The need to address and correct this is reflected in ethical practice that is laid out in this document and the oath nurses take.

Ventilator Assisted Care Program

References:

Louisiana Department of Education, (2006) Nurses Medication Resources Guide. Children's Hospital New Orleans Pursuant to R. S. 43:31.

Louisiana Department of Education, (2001) Health Resource Guide for Educators.

Louisiana Department of Education, (2015) School Based Nursing Services in Louisiana Schools: A resources handbook for School Nurses and School Administrators.

Recovery School District-New Orleans, (2011) School Nurse Administrative Manual.

Orleans Parish School Board, (2012) School Nurse Manual.