COLORADO CHARTER SCHOOL

School Nurse Resource

Colorado League of Charter Schools
focus on achievement

Developed by the Colorado League of Charter Schools
for Colorado Charter Schools and Charter School Nurses
# Table of Contents

SECTION ONE:
The Importance of School Nurses .................................................4

SECTION TWO:
Nurse Qualifications & Essential Services .................................4

SECTION THREE:
Nurse Orientation, Induction and Mentoring ..............................6

SECTION FOUR:
Evaluation of Nurses ................................................................7

SECTION FIVE:
Professional Development .............................................................7

SECTION SIX:
Hiring a Nurse, Nurse Models/Programs, and Delegation ..............8

SECTION SEVEN:
The Nurse’s Role in Section 504, Idea/Special Education and Individualized Health Care Plans ...........................................................11

SECTION EIGHT:
Practical Tips and Tools for the School Nurse ..............................14

SECTION NINE:
The Nurse and Mental/Behavioral Health Support ........................17

SECTION TEN:
Stories From the Field – How Schools are Utilizing Nurses to Build Healthier Schools .........................................................18
With the assistance from a charter school nurse and the Colorado Department of Education’s School Nursing and Health Department, the Colorado League of Charter Schools has developed a resource to assist charter schools in providing the best care for their students and school communities while also complying with the law.

Charter schools face a variety of challenges related to health services. Brand new schools often have not considered procuring nurse services or hiring their own nurse amidst all of the other staffing that they must complete by the time they open their doors. After being in operation, more experienced schools acknowledge that they should provide more health services than they currently provide but grapple with how to scale and fund those services.

This resource is intended to underscore the many roles that nurses should and do play in a school setting. Nurses educate adults and students, connect to community resources to widen school reach and capacity, promote school safety, and link the needs of students that may at first only manifest themselves physically to symptoms of much larger issues that need to be addressed.

This resource outlines what charter schools are legally responsible for in terms of student care and differentiates between services that can be delegated versus ones that a registered, qualified nurse must provide.

In addition, this resource:
- Draws attention to the importance and efficiencies of having a school nurse
- Addresses Frequently Asked Questions that the League has assisted charter schools with over the years
- Provides resources, technical assistance, and practical tools for charter school nurses
- Proposes effective school nurse models given the context of budget constraints
- Identifies sound hiring, managing, and evaluating practices of school nurses

Using this resource, charter schools can improve access to their programs and increase student readiness to learn, teacher productivity and efficacy.
SECTION ONE: The Importance of School Nurses

From the National Association of School Nurses: Definition of School Nursing, “School nursing is a specialized practice of professional nursing that advances the well-being, academic success, and life-long achievement of students. To that end, school nurses facilitate positive student responses to normal development; promote health and safety; 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.”

ONLINE RESOURCES

- Unlocking the Potential of School Nursing: Keeping Children Healthy, In School, and Ready to Learn from Charting Nursing’s Future, a publication of the Robert Wood Johnson Foundation.
- From the Colorado Department of Education, Health and Wellness and Special Services Units School Nurses Make a Difference.
- Healthier Students are Better Learners: A Missing Link in School Reforms to Close the Achievement Gap by Charles E. Basch.
- Role of the School Nurse in Providing School Health Services from the American Academy of Pediatric.
- School Nurses are Changing Students’ Lives, from Healthy Schools Campaign, January 2014 Newsletter.
- Colorado Department of Education: School Nursing and Health.
- Fast Fact Sheet-The Role and Responsibilities of a School Nurse.

SECTION TWO: Nurse Qualifications & Essential Services

Who is the school nurse?

- A professional registered nurse (R.N.) licensed to practice nursing by the Colorado State Board of Nursing.
  AND
- Licensed by the Colorado Department of Education as a Special Services Provider.

In order to be a licensed School Nurse you have to meet the following criteria:

OPTION 1

- Hold a Bachelor’s of Science in Nursing and a Valid Colorado Registered Nurse License

OPTION 2

- Bachelor’s degree in a related field
- Current national certification in school nursing
- Three years of experience in school nursing
- Valid Colorado Registered Nurse License

NOTE: Whether qualified under option 1 or option 2, if an Associate’s degree in Nursing was earned, the applicant must submit a signed official letter from the program indicating the number of clinical hours completed.
The School Nurse needs expertise in the following areas:

- Pediatric, public health and mental health nursing with strong health promotion, assessment and referral skills.
- Education and health laws impacting children
- Teaching strategies for the delivery of health education to students and staff.

To learn, students must be in school, in class, safe and ready. Nurses can help keep students in school by providing services so students can return to class. School nurses also provide health care services to students with special needs.

School Nurses are committed to School Improvement by:

- Developing health services goals that support school improvement
- Providing expert guidance in school health standards
- Connecting school, family and community resources
- Participating on the Response to Intervention (RtI) and multidisciplinary Special Education teams.
- Providing staff development to enhance teachers’ comfort levels in working with students with special needs.

As the health services expert, the School Nurse serves as the health professional for the school community and provides the following services:

- Illness, injury assessments and interventions.
- Chronic disease management and education.
- Health assessments and participation in Individualized Education Plan development and 504 plans.
- Individualized Health Care Plans and services for students with disabilities or health conditions that interfere with learning
- Health screenings such as vision and hearing, BMI or oral health
- Health promotion education for students and staff
- Providing care and case management for children with chronic health problems.
- Providing training, delegation and supervision to school staff of specialized health care procedures
- Recommending health curriculum and activities to promote health and prevent consequences of risk taking behavior.
- School/parent/community/health care provider liaison
- Crisis team participant
Frequently Asked Questions:

I am a LPN, can I be a school nurse?
   No. You must hold a Bachelor of Science in nursing to qualify for the CDE special providers’ license.

Can I volunteer as the school nurse at my charter school since I am a former RN?
   No. You must have an active Colorado RN license and have the CDE special Provider license in order to be a School Nurse.

I’ve been an RN for many years. Do I have to participate in an induction program?
   Yes. You will need to complete the induction program with a mentor in order to obtain your CDE Special Providers license.

I already have a nursing license. Why do I need an additional license?
   All professional employees working in Colorado school districts are required to be licensed by CDE. Nurses are unique in that they are also licensed through Colorado’s Department of Regulatory Agencies. Most professional employees begin their Colorado school careers with an initial license. Induction represents a facet of professional development intended to lead to a Colorado professional license.

ONLINE RESOURCES

• Colorado Department of Education Requirements for a Qualified School Nurse.

SECTION THREE:
Nurse Orientation, Induction and Mentoring

Induction is a formally approved support program designed for new educators and related service providers. Colorado’s induction program is a requirement for all school districts, BOCES and accredited independent schools by the Colorado Department of Education for an individual to be qualified to obtain a CDE Professional Educator License.

It includes mentoring, information about ongoing professional development and school/building acculturation, and introduces the employee to laws and policies regarding performance-based standards & expectations and what is required to qualify for professional licensure in the state.

For more information about orientation, induction and mentoring in Colorado, download the Colorado Department of Education School Nurse Induction Program guide or visit the School Nursing and Health - Training Tools section of the CDE website.

Who is the mentor?

• The mentor is an experienced school nurse, knowledgeable about the role of the nurse in the school setting, who has been qualified through specific training to be a mentor – a role model - to work one-on-one with a nurse;
• As a personal/professional advisor who helps the nurse acclimate to a new career as a school nurse, the mentor can help “show you the ropes”;
• The primary roles of the mentor are to help new school nurses adjust to their jobs and better learn their responsibilities and expectations and provide assistance to understand the unique qualities of school nursing;
• The mentor is a friend; someone to talk things out with; someone who can knowingly listen to your questions, offer suggestions; someone who is never in a position to evaluate your performance.
**What's the difference between induction and mentoring?**

- Mentoring is an essential component of induction, but is treated as a one-on-one support mechanism for individual inductees; induction is a sustained, comprehensive activity involving multiple educational professionals.
- Mentors are assigned to work with a new teacher or service provider on a day-to-day basis, to help provide the new professional with a safety net, to be someone to lean on when facing perplexing tasks and to provide survival tips.
- Induction focuses more on the “big picture,” i.e. teaching school or school district policies, goals for school and student achievement, state rules for qualifying for professional licensure, etc.
- Mentoring is generally short-term, perhaps for a year; induction is a longer term, recurrent and ongoing program, generally for three years.

**SECTION FOUR: Evaluation of Nurses**

At the end of each school year the School Health Services coordinator will evaluate the school nurse using the [Rubric for Evaluating Colorado’s Specialized Service Professionals: School Nurses](#). If practicing independently, a principal will use this rubric to evaluate the nurse’s performance. Nurses use this tool to target their professional growth in the coming school year.

**SECTION FIVE: Professional Development**

The Colorado Department of Education has many great resources on their website under [School Nursing and Health - Professional Development](#), or you can check out the online resources below.

**ONLINE RESOURCES**

- [National Association of School Nurses website](#)
- [Colorado Association of School Nurses](#) or the Associations [Facebook Page](#).
- [National Board for Certification of School Nurses](#)
- To sign up for the Colorado School Nurse Listserv, [contact CDE](#).
- For regional workshops and trainings statewide, hosted by CDE
- [National Association of State School Nurse Consultants](#)
- [So you want to be a school nurse? Click here](#).
- Planning a Career in School Nursing
- Health Team Works
- American School Health Association
- Johnson and Johnson School Health [Leadership Training Program](#)
- [Colorado Association of School Nurses fall and spring Conferences](#)
- Journal of School Nursing
- Colorado’s Comprehensive Health and Physical Education Standards
- Colorado Department of Education directory of regional nurses
- Healthy Child Care Colorado
- [Colorado School Safety and Resource Center](#)
SECTION SIX: Hiring a Nurse, Nurse Models/Programs, and Delegation

Where can we find a nurse?
1. CDE Job posting listserv
2. Staffing agencies like The StaffWell Group
3. Regional Public Health Departments
4. Children’s Hospital School Health Program, Community Health Programs
5. Pediatric Nurse Consulting Services, LLC (Broomfield)
6. Visiting Nurses Association
7. Caring 4 Kids Nurse Consulting
8. Sample language to use for a school nurse job posting

Nurse Consultant Model

The Gold standard is to have one RN per building who is responsible for all things related to health and may have an aide only for a few hours a week. The RN is ultimately held responsible for the health room and duties include immunization compliance, vision and hearing screenings, attending 504 or IEP meetings, trainings relating to medications and/or emergency response teams, and writing health care plans. However, the most common model used in Colorado is the nurse consultant model. The recommended ratio of RN to student is 1:750. The reality is that the vast majority of School Nurse Consultants in Colorado have many more students under their care.

THE NURSE CONSULTANT MODEL INCLUDES:

1. Registered Nurse Consultants (RN-BSN) who have obtained School Nurse Licensure through CDE.

The nurse consultants work with school health clerks, schools administration and staff as a team to provide physical, mental, and social support to help children learn

The nurse consultants are responsible for preparing written plans of care, documenting health histories, providing support for students with Individual Education Plans (IEPs) and Section 504 plans, delegation to unlicensed personnel who provide care for students in schools, assisting with health education units, and are available at all times for consultation on health emergencies or concerns.

2. School Health Clerks who are the main caregivers in health offices in schools.

They perform first aid and TLC for ill children, medication administration after training and delegation from the School Nurse Consultant, health screenings, immunization records and health records maintenance among many other responsibilities.

Health Clerks have taken a health clerk training course and have regular CPR, First Aid, Medication Administration, and other trainings as needed for specific student health needs. They cannot perform any care independently and must be supervised by the School Nurse Consultant.

As a non-certified paraprofessional, the Health Clerk provides support services for the School Nurse Consultant. As a result of this support, the Health Clerk allows the nurse more time to better focus on functions requiring professional skill and judgment, and to resolve those health problems that interfere with learning.
In this way the Health Clerk makes a valuable contribution toward achieving, maintaining and restoring the health of students, an integral goal of every school’s program of education (excerpted from The Weld County School District 6, Health Services).

Roles and Responsibilities: School Nurse Consultant vs. School Health Clerk (Aide, Paraprofessional, Health Services Assistant)

After training by the school’s nurse consultant, the Health Clerk
• performs clerical tasks,
• implements health office procedures, and
• is responsible for diverse, non-professional health program duties
• may also perform various other technical health care functions but only if those functions are specifically delegated by the School Nurse Consultant. Delegation by RNs to unlicensed personnel means the RN transfers to a competent individual the authority to perform a selected task on a specific individual and the RN remains accountable of the application of:
  • the nursing process (assessment of the student’s nursing care needs, plan of nursing actions, implementation of the plan, and evaluation of the outcomes), and
  • the nursing theory when making the decision to delegate. Adapted from The School Health Clerk (1990) with permission from California School Nurses Association (CSNO).

Delegation Criteria:
1. It is student specific and caregiver specific.
2. The competency of the caregiver is assessed and documented.
3. A recording method is established.
4. The method and schedule for contact is defined.
5. Problem interventions are identified.
6. The entire procedure is periodically reviewed.
7. Student outcomes are evaluated.
8. The RN determines amount of supervision and monitoring

Therefore, the School Nurse cannot delegate certain functions.
• the Health Clerk may not diagnose physical, mental, or behavioral conditions
• the Health Clerk may not counsel students
• the Health Clerk may not suggest specific treatments to students, parents, or staff
• the Health Clerk may not manage mandated health screening procedures
• the Health Clerk may not supervise the health and physical development of students
• the Health Clerk may not consult with, or refer clients to, professional health care practitioners or agencies
• the Health Clerk may not deal with complex nursing care procedures requiring prior nursing or medical assessment of the student
The Health Clerk and the School Principal

The school principal is responsible for all personnel and programs at the school site. This remains the case at sites which utilize the services of a Health Clerk. Therefore, although the Health Clerk is accountable to the school nurse for all health services duties and responsibilities, the Health Clerk is also equally accountable to the site administrator for adhering to school policies. The principal retains overall jurisdictional responsibilities for the school and its policies. Consequently the full support of the school principal is invaluable in enhancing the effectiveness of the Nurse-Health Clerk team in providing a quality school health services program to the principal’s school.

ONLINE RESOURCES

- The CDE Guide to Delegation for Colorado School Nurses
- The Department of Regulatory Agencies Colorado State Board of Nurses Practice Act
- Department of Regulatory Agencies: Division of Registrations, 3 CCR 716-1, Chapter 13: Rules and Regulations for Nursing Delegation

School Based Health Clinic Model

School Based Health Clinics provide basic medical care under the supervision of an MD. The School Nurse needs to communicate with the clinic providers about any medical conditions just as the Nurse would with any health care provider. School based clinics are not a substitute for a School Nurse. The School Nurse responsibilities include ensuring the academic success of a student and advocating for necessary accommodations within the classroom related to health concerns through 504s or IEPs.

SCHOOL BASED HEALTH CLINIC MODEL RESOURCES

- Colorado.gov General Information
- Colorado Association of School Based Health Care
- Directory of School Based Health Centers in Colorado
- Denver Health: School-Based Clinics
- Colorado Health Institute – A Unique Model of Care: Colorado’s School-Based Health Centers an analysis of how School Based Health Clinics are being utilized by Medicaid patients and the uninsured

Children’s Hospital Colorado School Health Program

- School health consultation and nursing services are provided on a contractual collaborative basis according to student health needs. Nurse consultants are licensed by the Colorado Department of Education as Specialized Service Providers. Children’s School Health Program does not provide School Based Health clinics.

Contracting with a Public Health Department Nurse

In more rural areas, where nurses are more difficult to find, contracting with a public health department nurse has proven to be a successful model.
Frequently Asked Questions

We are a start-up charter school with a limited budget. Is it required to have a school nurse?
Yes. **CDE requires you to provide health services for your students.**

Is it possible to share a nurse with a different school?
Yes! Great idea. You would be using the School Nurse consultant model. Contact the Colorado League of Charter Schools for assistance in forming this type of collaborative.

Can’t I just have a parent work in the health room who has some health care experience? Why do I need a school nurse?
No, unfortunately you cannot use just a health room clerk. The clerk needs the supervision of the School Nurse in order to perform any of the required duties. Only the school nurse can delegate how to give medications or delegate how to perform more complex health care procedures such as administering EPI pens or care for a diabetic student.

Can we use parent volunteers as a school nurse?
No. In order to be a school nurse you must have an active RN license plus a CDE special providers’ license.

Do we need a school nurse if we offer summer school?
Yes. The school nurse will need to delegate to staff the proper administration of medications and provide directions on how to care for students with special health needs.

SECTION SEVEN: The Nurse’s Role in Section 504, IDEA/ Special Education and Individualized Health Care Plans

What is the difference between Individual Healthcare Plans, 504 Plans, and IEPs? The following information is excerpted directly from The United Mitochondrial Disease Foundation – IHPs, 504 Plans, and IEPs: What’s the Difference.

What is an Individualized Healthcare Plan?
An IHP is a plan that considers how to deal with what might happen with a student medically while the student is in school. It is designed to address medical issues that do not impact the student’s learning. An IHP is a formal agreement that outlines the student’s needs and a plan for addressing those needs. Parents or caregivers, the student, the student’s health care provider, and a multidisciplinary team of school staff work together to develop the IHP.

An IHP clarifies important things like how medication will be administered, how the student’s health status will be monitored, the location where care will be provided, and who will be providing the care. It should provide for staff training and specify who will provide that training. It can serve as the basis for ongoing teamwork, both between the family and school staff and among staff members. It also provides the school with an accurate, centralized source of information about the student’s medical needs, and with direction and authorization should a health need arise suddenly. To be sure the plan remains current, review dates should be written into the plan.
Unlike an IEP or 504 Plan, which has a standardized format, IHPs are developed by the school district. Certain health organizations, such as the American Diabetes Association, have also created boilerplate IHPs. No state or federal protection comes with an IHP. An IHP can be used alone or in conjunction with a 504 Plan.

What is a 504 Plan?

A 504 Plan is a legally binding agreement between the parent(s) and the school district. It is a part of the Americans with Disabilities Act (ADA). Children who have disabilities that do not interfere with their ability to progress in general education are not eligible for special education services, but they may be entitled to the protection provided by a 504 Accommodation Plan. 504 Plans are used widely and for diverse needs. They can cover a single issue or several concerns. 504 Plans typically address accommodations in academic areas, but they can also be applied to nonacademic areas. 504 Plans are developed by the parents and a team of school staff. The school team usually includes an administrator and a case manager. In many cases where the issues addressed in the 504 are related to the child’s medical conditions, the medical team is also included as an active participant.

What is an IEP?

IEPs are generally for students who have documented gaps in learning beyond what might be expected based upon the normal curve. An IEP is an individualized learning plan, developed by a team, to address these gaps. However, an IEP can also be used when the gap is anticipated, such as with a child who will have difficulty keeping up due to frequent illness and absences, or a child whose hearing impairment, orthopedic impairment, or emotional disturbance necessitates modifications and/or accommodations in the curriculum. It is a legally binding document based on the Individuals with Disabilities Education Act (IDEA). IDEA ensures services to children with disabilities throughout the nation. The federal government lays out the rules for IEPs, and states implement these rules.

Section 504

Section 504 is the part of the Americans with Disabilities Act Amendments Act of 2008 that guarantees specific rights in federally funded programs and activities to people who qualify as disabled. Title II covers public entities that do not receive federal funds.

Section 504 states: “No otherwise qualified individual with a disability in the United States... shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance...”

Section 504 is enforced by the Office for Civil Rights (OCR). OCR can be contacted by calling (303) 844-5695.

The School District is responsible for the implementation of Section 504. For more information contact the Section 504/ADA Coordinator for your District.

Under Section 504, a grievance may be filed with the School District or a complaint may be filed with the U.S. Department of Education Office for Civil Rights. For more information on Section 504, click on the links below to access the U.S. Department of Education Office for Civil Rights.
ONLINE RESOURCES

- **504 Reading Room**
- **Questions and Answers on Disability Discrimination under Section 504 and Title II**
- **Information and Technical Assistance on the Americans with Disabilities Act**
- **Child Care and the Americans with Disabilities Act (ADA), Opportunities and Resources for Child Care Providers and Families**
- **The Legal Center for People with Disabilities and Older People**
- **U.S. Department of Education Family Educational Rights and Privacy Act (FERPA)**
- **ADA National Network, Information, Guidance, and Training on the Americans with Disabilities Act – Service Animals**
- **National Association of School Nurses Position Paper on Section 504**
- **The Colorado Department of Education Information on Section 504**

IDEA/Special Education

The **Individuals with Disabilities Education Act (IDEA)** is a federal law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.

ONLINE RESOURCES

- **IDEA Part C** (birth to 2) ensures early intervention services to Infants and toddlers with disabilities and their families.
- **IDEA Part B** (ages 3-21) ensures children and youth receive special education and related services.
- **Exceptional Children’s Educational Act (ECEA)** is the Colorado law that ensures services to children with disabilities.
- **Fast Fact, November 2012: What Should Be the School Nurse’s Role in the RtI and Special Education Process?**
- **Minimum Standards of a Student Health Assessment for a Student Being Considered for Special Education Services November 2012**
- **Student with Special Health Needs: Sample Policy**
- **Flow Chart: Special Education Services**
- **National Center for Learning Disabilities Section 504 and IDEA Comparison Chart**

Individualized Health Care Plans

- **National Association of School Nurses (NASN)** Information on **Individualized Health Care Plans, The Role of the School Nurse**
- **Colorado Department of Education Information on Individualized Health Care Plans**
SECTION EIGHT:
Practical Tips and Tools for the School Nurse

ONLINE RESOURCES

- The CDE [Essential School Health Services Guidelines for the School Nurse](#)
- Colorado Revised Statutes, Section 38, Nurses Practice Act

When setting up a health office, one should have:

- School Health Manual including [these downloadable documents](#), placed in a notebook and kept in every school health office.
- [Emergency Care Guidelines](#)
- [Infectious disease manual](#) from the Colorado Department of Health and Environment (CDPHE)
- [Medication Administration trainings](#)
- [Colorado Immunization Information Systems (CIIS) for health care providers](#)
- Locked file cabinets for student health records including immunization records and results from Student Screenings
- Documentation system: Nurses and paras must record every visit in the health room in some way. Paper logs and health concerns list are discouraged due to possible FERPA violations. A school information system (SIS) is recommended, popular ones in Colorado include Infinite Campus, Power School and EduStar.
- Sharing student health information to school staff is on a need to know basis according to FERPA. Supplies: Band aids, cots, desks, computers, ice packs, locked box in fridge for meds etc.
- School Specific Crisis Management Plan/Emergency Response Team (ERT). Each team will be building specific.

The function of an Emergency Response Team is:

- Effect a prompt rescue (check, call, care)
- Administer basic emergency care
- Gather information: emergency medical info, ERT report, call emergency contact
- Protect victim from further harm, disturbance, manipulation, cold; provide privacy and protect confidentiality
- Prevent chaos: take charge, control crowd, direct traffic
- Provide emotional support: calm reassurance, allow friend or teacher to stay, encourage slow, deep breathing, inform victim, give advance notice, refer to victim by name

Roles of the Team Members

- Lead Caregiver: Provide emergency care until relieved by EMS or victim recovers. Provide emotional support for victim
- Runner: Get ERT supplies (typically a bag of first aid supplies plus a cart with emergency meds (EPI, Glucagon and diastat), emergency information and other items. Extra help as needed for cares. May bring AED if one is available.
- Recorder: Complete official forms. Record observations of victim status
- Team Leader: Monitor overall response, Assign tasks, Manage chaos, Control crowd
- Info Manager: Call 9-1-1, parents or contacts. Keep administration informed. Make copies of info if student is transported.
- Greeter: Meet the ambulance and direct them to the site.
**Things to Accomplish**
- Provide care of injured person. DO NO HARM.
- Call 9-1-1
- Take ERT kit to scene
- Call parent or emergency contact
- Provide emotional support for victim
- Control crowd, protect confidentiality and provide care for other students
- Collect information about the event
- Monitor overall functioning of response
- Assure that paperwork is completed and filed with appropriate departments.

**Recommendations for Emergency Response Teams**
- Meet occasionally as a group with School Nurse Consultant
- Know your team, its strengths, levels of training
- Know the physical location of members on campus during school day
- Maintain training and certification for all members (MUST BE CPR/FA trained to be on team)
- Define the process for your building and considerations:
  - How the team will be notified of incident: Overhead intercom? walkie talkies?
  - Who takes over your class/job duties while you are away from your usual post attending to ERT incident
  - Who calls 9-1-1? What are your school/district procedures for notifying security?
  - How to access supplies and student health information and emergency contact information
  - What happens after usual school hours during after school care or sporting events
- Who keeps supplies stocked for ERT bag
- How will copies of documents be filed
- Practice emergency scenarios on an annual basis. Run Mock drills in consultation with your School Nurse Consultant
- Know the Significant Health Conditions/Health Care Plans in your population: which students have asthma, diabetes, seizure disorder, life-threatening allergies, etc.
- De-brief after a response
- Discuss and evaluate the response
- Share all ERTs with School Nurse Consultant
- Keep copies of records: Staple together each incident: Student Accident Report, ERT Report and ERT De-briefing Form and file in the Year End Folder.
Timeline of Key Activities for the School Nurse

AUGUST
• Collect and analyze student health information
• Review and update emergency plans and procedures
• Identify, train and post roster of Emergency Response Team Members
• Prepare to identify students not in compliance with State laws
• Identify dates and plan for required professional development
• Issue letters to parents regarding Schools medication policy and consent
• Prepare trauma/emergency bags and automated external defibrillators (AEDs) for schools
• Intensive training for care of diabetic students
• Schedule staff trainings re: Epi Pens, diabetes and/or seizures
• Prepare and schedule for delegations for Health Room Paraprofessionals
• Sign up for School Nurse List Serv from CDE
• Arrange coverage to attend the CASN conference and other Continuing Ed opportunities

SEPTEMBER
• Update student health records (Kindergarten Health Assessments, immunizations, Individualized Health Care plans, Medication administration forms + HCP orders)
• Develop Individual Health Plans/Emergency Plans for students with chronic or life-threatening health conditions
• Notify principals, teachers, bus drivers, and other appropriate school personnel of health conditions affecting students (Significant Health Concerns List)

OCTOBER
• Continue to follow-up on immunization compliance
• Begin health screenings for Vision and Hearing
• Distribute educational materials to parents through school newsletters
• Annual School Nurse State Conference

NOVEMBER
• Continue surveillance of immunization records
• Begin follow-up on vision referrals

DECEMBER
• Screen individuals absent during initial screening
• Re-screen individual students as appropriate
• Continue follow-up on referrals
• Continue immunization surveillance

JANUARY
• Review absentee records to identify health problems needing nursing interventions
• Monitor communicable disease levels
• Continue immunization surveillance
• Continue to follow-up on referrals

FEBRUARY - MARCH
• Continue to monitor absences and communicable diseases
• Continue immunization surveillance
APRIL - JUNE
- Deliver presentations at Kindergarten Orientation activities
- Prepare notices regarding immunizations due next school year
- Review supplies and equipment and prepare supply order
- Review Individual Health Plans for children with special needs and revise as needed
- Distribute letters to parents regarding the collection of unused or surplus student medications
- Review School Health Services Manual
- Prepare end-of-year State School Nurse report

SECTION NINE:
The Nurse and Mental/Behavioral Health Support

Unless an RN has specific training in mental health and holds board certification, the RN’s duty is to refer the student to the appropriate members within the school. RN’s can provide community resources to families if that is school policy. Certainly the RN should work with school leadership to create a school culture focused on supporting students.

The exception is if a student states they are suicidal. In this case, the RN has the duty to keep the student with him/her at all times until appropriate resources can be found to assume care of the student.

ONLINE RESOURCES
- National Association of School Nurses (NASN) – NASN School Nurses: Supporting Student Mental Health
- National Association of School Nurses (NASN) – NASN School Nurse Support Tools for Student Mental Health

CDE Web Pages:
- A Guide for School Mental Health Services
- Behavior
- Building Bridges Tip Sheets (PDF)
- Mental Health
- Positive Behavioral Interventions and Supports
- Restraint
- Safe and Drug Free Schools and Communities

Colorado Resources:
- Planning and Programs: The Role of the School Nurse in Behavioral and Mental Health
- CDPHE Disaster Behavioral Health Training
- The Colorado Behavioral Healthcare Council (CBHC) - statewide membership organization for Colorado’s network of community behavioral health providers
- Mental Health First Aid
- Colorado Framework for School Behavioral Health: Colorado Education Initiative
SECTION TEN: Stories From the Field – How Schools are Utilizing Nurses to Build Healthier Schools

Making the Case for School Nurses: Beyond Band Aids

Undoubtedly there are typical pictures of what nurses do in school settings around the country. These limited pictures involve ice packs, band aids, and thermometers. But in reality, nurses are involved in so much more beyond the scraped knee and bee sting.

As shown by the following spotlights, nurses are often times the educator, the connector, and the anchor of school health. They are on the front lines of chronic disease management, emergency and safety planning, and Special Education service delivery. They allow schools to be effective learning environments for all children, regardless of their health condition or challenge.

Once school leaders fully understand the potential impact nurses can have on the well-being of staff, families, and students and its connection to student learning, funding to support more consistent nursing services may emerge as a higher budgetary priority.

Janice Latendresse, Monument Academy, Monument

Janice Latendresse is a full-time registered school nurse who serves 900 students at Monument Academy in Monument. Janice manages the health office which averages approximately 40 student visits per day related to injuries, general illness and chronic health care management.

Two years ago the school recognized that it was critical to have a full-time nurse on staff and Janice notes that one family chose Monument Academy based upon its ability to serve the needs of their diabetic child.

Janice's primary goal is to keep students “healthy, engaged, and learning” and she does this in a variety of ways. Janice is visible throughout the school building—she is the 504 plan coordinator and provides health history notes for IEP meetings and updates, she trains staff in first aid, chronic health conditions, and communicable diseases, and she teaches classes such as Practical Applications of Algebra.

Janice is also involved in staff wellness and in collaboration with UCCS, organizes a health fair for teachers, providing access to various diagnostic testing. Janice acknowledges that staff well-being equates to school success and has brought in free chair massage to reduce stress and fatigue. Through Monument Academy’s partnership with UCCS, nursing students connect and collaborate with teachers and offer presentations on various topics related to health.
Jody Enderle, Mountain View Core Knowledge School, Canon City

“Students cannot be educated if they are not healthy,” notes Jody, a registered school nurse who works 32 hours a week at Mountain View Core Knowledge School in Canon City, serving 270 students, grades PK-8.

Jody manages the critical care and health care plans for students with conditions such as asthma, allergies, and diabetes. Jody provides all of the training to teachers for medication administration and maintains all records. The state periodically reviews these records and Mountain View CK was 100% compliant during their last review.

Jody assists with IEP implementation and meetings and conducts vision and hearing screenings. Jody teaches students focusing her instruction on health topics aligned to Colorado’s Comprehensive PE and Health Standards. Jody is a member of the school district’s Wellness Action Team as well as the Safety Team and has developed a system to evacuate the school building in less than a minute and a half.

Observers from Washington DC have visited to learn more about this system so that it may become a national model for safety in our schools.

Hillary Miller, Peak to Peak Charter School, Lafayette

Hillary Miller is the Health Room Supervisor and Wellness Coordinator at Peak to Peak Charter School which serves approximately 1445 students, K-12th grades. Peak to Peak uses the nurse consultant model; the district provides Peak to Peak with a nurse who then in turn is able to manage Hillary’s work and delegate certain responsibilities to her.

Hillary acknowledges that a significant part of her role is to keep the students healthy so that they may attend school and be engaged learners.

Hillary simply wants students, parents, staff and teachers, to have a dialogue about health and how it relates to them. In order to achieve that, she sends out Wednesday Wellness Tips via email to the staff members. Each one features timely information including related links or resources should staff wish to explore a particular subject further. Hillary has put together a web page for teachers which highlights current health research and studies of interest, classroom and instructional resources, mental health and stress reduction resources, suggested workouts for on and off campus, easy recipes, suggested books, movies and other media, and even workout playlists.

Hillary notes that often these communications and resources spark ideas and programs that the staff then develop themselves, which increases engagement and ensures that she is not the only one who is focused on wellness.
Beth Bugosh, 
Life Skills Center, Colorado Springs

Beth is a part-time registered nurse (8 hours a week) who works with 270 high school students at the Life Skills Center in Colorado Springs. While Beth was primarily hired to address the needs of Special Education students, like many school nurses, Beth’s job responsibilities extend beyond students on 504 plans.

Beth notes that “she sees the lives of students changed before her very eyes” as she provides nursing services. These include the standard management of immunization records and individualized health care plans as well as collaborating with teachers to problem solve, arranging guest speakers to provide relevant physical and mental health discussions, and connecting students to health care and insurance providers.

Due to the profound challenges of addiction, teen pregnancy, and others that many of her students face, Beth serves as a connector between the school and the various community resources.

Judi Adams,
Pinnacle Charter School, Thornton

Judi is a registered school nurse for a total of 2400 students, K-12, at the Pinnacle Charter School in Federal Heights and the Pinnacle High School across the street in Thornton. She manages one health aide and four other staff members who are trained and delegated by her to care for students. Judi oversees medication administration (both daily and during unique circumstances such as field trips and outdoor education), immunizations records, health care plans, and serves as the school's 504 plan coordinator. Judi conducts reviews of these plans quarterly.

Judi coordinates annual hearing and vision screening plus dental, scoliosis and pre-diabetic student screenings with the assistance of nursing students from two schools of nursing. Through this partnership, Judi is able to scale her work and provide more services at low cost. Judi is a member of the Safety and Wellness Committees and collaborates with three staff mental health specialists to assess and make referrals. Judi works with teachers to provide classroom health education through the K-5 grade levels.
Margie Miller, Cheyenne Mountain Charter Academy and The Vanguard School, Colorado Springs

Margie is a full-time registered nurse at Cheyenne Mountain Charter Academy and The Vanguard School that serves 1300 students, K-12th grade. Margie provides care for students with health care plans as well as those visiting the health office. She serves on the Medical Emergency Response Team, the Response to Intervention (RTI) team and monitors 504 plans. Margie delivers education to students tied to Colorado’s Comprehensive Health and PE Standards and collaborates with the health teacher to create lessons and units.

She has organized Mental Health First Aid trainings for other nurses and in partnership with student nurses, Margie has offered topical trainings such as social media safety. She provides blood pressure screenings for staff members and other essential screenings for students. In addition to her responsibilities as a nurse, Margie also serves as the TCAP coordinator.

Tammie Chasteen, The Classical Academy, Colorado Springs

Tammie is the lead nurse at The Classical Academy, which includes 7 campuses serving approximately 3600 students. Tammie oversees three nurses with the primary focus of serving students on 504 plans, collaborating with parents and keeping students safe and ready to learn.

She trains health paraprofessionals and teachers and provides them a with a quick reference guide complete with policies and procedures related to injuries and health conditions such as allergies, seizures, asthma, and diabetes.

Tammie is a member of the Medical Emergency Response Team (MERT) and the Concussion Team that is made up of the athletic director, psychologist, counselor and others to help students (104 suffered concussions last year) return to learn/return to play. Tammie also publishes a health services newsletter, sends wellness tips out through all staff communication, leads campaigns on health issues and works with students on projects related to health.