



BOONE COMMUNITY SCHOOL DISTRICT

Promoting a culture of safety, respect, and collaboration

BOONE COMMUNITY SCHOOL DISTRICT SCHOOL BASED HEALTH SERVICES PLAN

The Mission of Boone Community School District is providing an educational environment that promotes academic and extra curricular excellence and the development of good character in our students.

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DEVELOPMENT PROCESS

The Boone Community School District Health Services Department developed a Nursing Plan of Services that leads to a positive climate and environment that is collaboratively and intentionally designed to support the health needs and learning needs of all students. This process was part of an effort to acknowledge and manage changes through continuous improvement in school health services.

The Nursing Plan of Services is unique in that it describes a comprehensive school health program. This plan is developmentally appropriate for all students. The coordinated school health delivery plan is an organized set of policies, procedures, and activities designed to protect and promote the health and well-being of students and staff.

The domains of the School Health Services and delivery system are aligned with the Iowa Department of Education, the Iowa School Nurse Organization, the Standards of the National Association of School Nurses and American Nurses Association, and the Iowa Board of Nursing .

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SCHOOL HEALTH OVERVIEW

The Boone School Health program promotes health and healthy behaviors in the lives of students, staff, families, and the community. School Health programs are coordinated to meet the health and safety needs of students and school staff in pre-kindergarten through grade 12 in school and school activities. The essential elements of effective school health programs, also referred to as learning supports, include eight interrelated components:



DESCRIPTION OF COMPONENTS OF SCHOOL HEALTH

Health is not just the absence of disease-it is complete physical, mental and social well being. A school health program that effectively addresses students' health, and thus improves their ability to learn, consists of many components. Each component contributes in unique ways yet overlaps with other components in other ways.

Comprehensive school health education: Classroom instruction that addresses the physical, mental, emotional, and social dimensions of health; develops health knowledge, attitudes, and skills; and is tailored to each age level. Designed to motivate and assist students to maintain and improve their health, prevent disease, and reduce health-related risk behaviors.

Physical education: Planned, sequential instruction that promotes lifelong physical activity. Designed to develop basic movement skills, sports skills, and physical fitness as well as to enhance mental, social and emotional abilities.

School health services: Preventive services, education, emergency care, referral, and management of acute and chronic health conditions. Designed to promote the health of students, identify and prevent health problems and injuries, and ensure care for students.

School nutrition services: Integration of nutritious, affordable, and appealing meals; nutrition education; and an environment that promotes healthy eating behaviors for all children. Designed to maximize each child's education and health potential for a lifetime.

School counseling, psychological, and social services: Activities that focus on cognitive, emotional, behavioral and social needs of individuals, groups, and families. Designed to prevent and address problems, facilitate positive learning and healthy behavior, and enhance healthy development.

Healthy school environment: The physical, emotional, and social climate of the school. Designed to provide a safe physical plant, as well as a healthy and supportive environment that fosters learning.

School-site health promotion for staff: Assessment, education, and fitness activities for school faculty and staff. Designed to maintain and improve the health and well being of school staff, who serve as role models for students.

Family and community involvement in schools: Partnerships among schools, families, community groups, and individuals. Designed to share and maximize resources and expertise in addressing the healthy development of children, youth, and their families.

PURPOSE/PHILOSOPHY

Developing and implementing a comprehensive school health program encompasses a philosophy and culture that creates an optimal educational setting. Health and academic achievement are directly intertwined. The philosophy of Boone School health services is centered on the belief that optimum health is essential for learning, and enhances school success. The school health program engages the entire school system- instruction, services, community, and the environment.

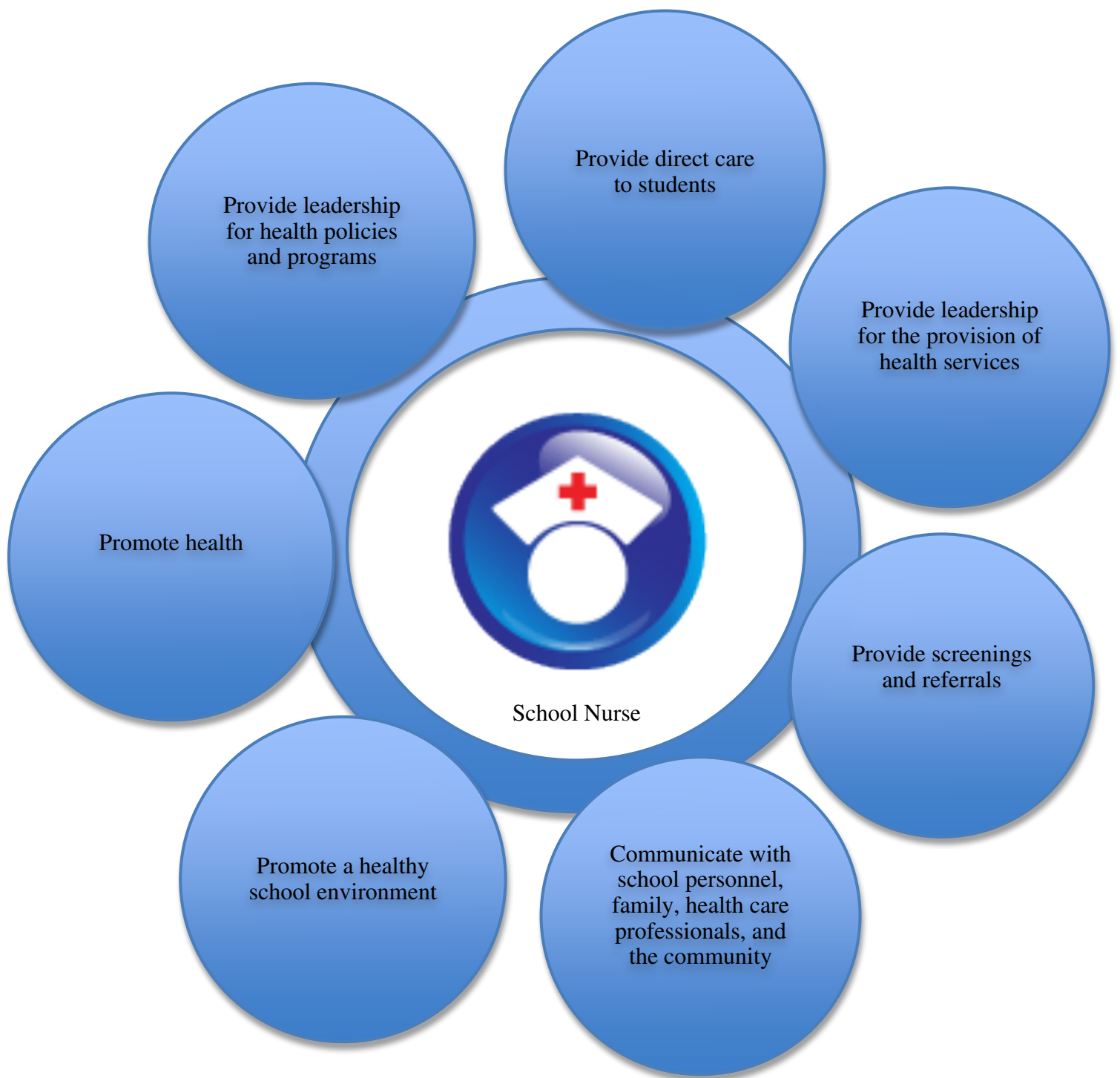
PROGRAM GOALS AND BENEFITS

Healthy students and school programs are most effective and efficient when all of the components are addressed through coordinated school health programs (CSHP) supported by school health councils, collective planning, administrative support, identified leaders, parents, and community members within the comprehensive school improvement plan.

School Health Programs can improve:

- Health knowledge, attitudes, and skills
- Healthy behaviors and health outcomes
- Educational outcomes
- Social outcomes

ROLE OF THE SCHOOL NURSE



ROLE OF THE SCHOOL NURSE

In a coordinated school health program, the school nurse may provide leadership or play a

supporting role in any of the eight components.

- ***School health services:*** By assessing student health status, providing emergency care, ensuring access to health care, and identifying and managing barriers to student learning.
- ***Health education:*** By providing resources and expertise in health curricula and providing health information.
- ***Health promotion for faculty and staff:*** By providing health information and health promotion activities, monitoring chronic conditions, and maintaining records.
- ***Counseling, psychological, and social services:*** By collaborating with counseling staff to identify student psychosocial problems and provide input and intervention.
- ***School nutrition services:*** By providing education about nutritious foods, monitoring menus and food preparation, and encouraging the inclusion of healthy foods on menus, in vending machines, and for classroom snacks.
- ***Physical education programs:*** By collaborating with physical educators to meet physical education goals, providing information to students about physical activity, and helping to design appropriate programs for students with special health concerns.
- ***Healthy school environment:*** By monitoring, reporting, and intervening to correct hazards, collaborating to develop a crisis intervention plan, and providing adaptations for students with special needs.
- ***Family and community involvement:*** By taking a leadership role in collaborating with community agencies to identify and provide programs to meet the physical and mental health needs of children and families.

RATIONALE

School nurses should assume a leadership role and collaborate with organizations, institutions and local, state and federal governments to advocate for policies, legislation, and financing for the development, implementation, and evaluation of coordinated school health programs. In particular, improving the school nurse to student ratio is a key component to ensuring that that nation's children have access to coordinated school health programs.

DESCRIPTION OF SCHOOL HEALTH

School-age children face developmental and social challenges that have an impact on

existing chronic conditions, such as asthma and diabetes and behavior that may lead to other serious problems such as pregnancy, sexually transmitted diseases, motor vehicle accidents, and suicide. Factors like poverty, lack of parental involvement, and a need for better access to high-quality health care exacerbate these problems. Educating and supporting students, particularly those at high risk, to develop health promoting behaviors and effective coping strategies can improve health and contribute to patterns of healthy behavior that will extend into adulthood. Coordinated school health programs that have a strong emphasis on health education and health promotion are an important strategy to foster student health.

HEALTH EDUCATION

Boone School Nurses are important members of the Pre-K thru twelfth grade education community. Nurses as health professionals in the schools, are teachers for individual students, parents, classrooms, plus faculty and staff.

The purpose of health education is to help each student protect, improve, and maintain physical, emotional, and social well-being in order to improve the health and educational performance of students in the Boone Community School District.

Health Components taught include:

- Individual health planning and prevention.
- Growth and Development
- Environmental Health
- Community Health
- Family Health
- Personal Health
- Consumer Health
- Mental Health

Health programs are age-appropriate, and follow a scope and sequence of instruction from pre-kindergarten through twelfth grade. Content and skills are introduced in the early grades and reinforced in later grades. Student assessments measure skill acquisition as well as functional knowledge. The needs of diverse learners are considered including bilingual students and students with cognitive, physical, and sensory disabilities.

CDC NATIONAL HEALTH EDUCATION STANDARDS

STANDARDS AND PERFORMANCE INDICATORS

Standard 1:	Students will comprehend concepts related to health promotion and disease prevention to enhance health.
Standard 2:	Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.
Standard 3:	Students will demonstrate the ability to access valid information, products, and services to enhance health.
Standard 4:	Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.
Standard 5:	Students will demonstrate the ability to use decision-making skills to enhance health.
Standard 6:	Students will demonstrate the ability to use goal-setting skills to enhance health.
Standard 7:	Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.
Standard 8:	Students will demonstrate the ability to advocate for personal, family, and community health.

Students and their parents entrust schools with their personal information with the expectation that this information will be used to serve the health needs of students effectively and efficiently. This information is a vital resource in planning comprehensive school health programs and designing individual health education plans (IHPs) and providing services. The school, parents and medical community share a common interest in ensuring that this information is kept confidential.

Confidentiality is the obligation to keep information and the contents of conversations private, unless there is a “need to know”. A school nurse protects the confidentiality of information received in the nursing relationship as specified by federal and state laws, written policies and applicable ethical standards.

Health Information Is Protected By Federal Law

Most of us believe that our medical and other health information is private and should be protected, and we want to know who has this information. The Privacy Rule, a Federal law, gives you rights over your health information and sets rules and limits on who can look at and receive your health information. The Privacy Rule applies to all forms of individuals' protected health information, whether electronic, written, or oral. The Security Rule, a Federal law that protects health information in electronic form, requires entities covered by HIPAA to ensure that electronic protected health information is secure.



Parents and Confidentiality

Nurses are frequently confronted with questions regarding their duty of disclosure to parents and the relationship between this duty and the confidential nature of the nursing relationship. Each nurse recognizes the primary obligation for confidentiality is to the student, but balances that obligation with an understanding of the legal and inherent rights of parents/guardians to be the guiding voice in their child's life.

Limits to Confidentiality

Limits to confidentiality exist to protect the safety and well-being of students. The nurse will protect the confidentiality of information received in the nursing relationship as specified by federal and state laws, written policies and applicable ethical standards. The meaning and limits of confidentiality are defined in developmentally appropriate terms for students. Information can and will be shared with the appropriate person, agency or authority using the following guidelines and circumstances:

- Potential harm to self — a belief or information that a student is in danger of hurting oneself, or is in danger of being hurt by someone else.
- Potential harm to others — a belief or information that a student is in danger of hurting someone else.
- Suspected child abuse/Mandatory Reporter — a belief or information that a child under the age of 18 has been abused by a person responsible for the care of the child.
- Legal jurisdiction — a law or court order to disclose information.

- Informed consent — the permission by a legally responsible adult to consult with others in order to provide better health services.

Disclosure

Disclosure includes the limits of confidentiality such as the possible necessity for consulting with other professionals, privileged communication, and legal or authoritative restraints. Such information is only to be revealed to others with the informed consent of the student, consistent with the nurses' ethical obligation. The nurse keeps information confidential unless disclosure is required to prevent clear and imminent danger to the student or others or when legal requirements demand that confidential information be revealed. Nurses will consult with appropriate professionals when in doubt. The Boone School nurse's utilize the AEA authorization for the Release of Health and/or Education Information form, and/or the Authorization for the Exchange of Information form.

IOWA STUDENT INDIVIDUAL HEALTH PLAN: SCHOOL NURSE INTERPRETIVE STATEMENT

Introduction

The Individual Health Plan (IHP) is a written document detailing the required special health services for general and special education students. The IHP documents health needs that affect a student's daily function and impact education or the educational environment. Considered in the plan are the student's physical, social, emotional, cognitive, behavioral, and daily living skills needs. The IHP incorporates the steps of the nursing process: assessment, nursing diagnoses, outcome/goals, planning, implementation, and evaluation. Use of standardized nursing language such as NANDA, NIC, NOC, and others is strongly recommended. The registered school nurse or other licensed qualified health care practitioner develops the IHP in collaboration with the student, family, health care provider, and school team. The plan coordinates school nurse and health services, to and from school, in school activities, at home, and in the community.

The student's health record contains the written IHP, in an accessible location for use by health service providers. The Individualized Education Program (IEP), Individualized Family Service Plan, or Section 504 plan required by federal, state, and local policy contain information from the IHP and the IHP location. The Iowa Code, Iowa Administrative Code, School Nursing: Scope and Standards of Practice, and Code of Ethics govern this process. Discussion of the nursing process IHP components and a sample format follows.

Assessment

Assessment is the collection and evaluation of pertinent information that serves as the basis for development of the IHP and establishes the baseline for measurement. Sources of information include, but are not limited to interviews with the student, family, and staff; student health record review, medical records; health history; consultation with other healthcare providers, and nursing observations. To determine the appropriate nursing diagnoses, the registered school nurse gathers, analyzes, and interprets the information using professional knowledge and expertise to indicate how the student's health status affects academic achievement, participation, and attendance.

Nursing Diagnosis

Nursing diagnosis is a method of organizing and summarizing assessment data to define the student's health needs and establish the plan of care. A complete nursing diagnosis is composed of at least a diagnostic label and related factors. It provides the basis for the selection of nursing interventions to achieve outcomes for which the registered nurse is accountable.

Outcome/Goals

Outcomes are statements of what the student is expected to do, experience, or learn¹³ as a result of implementing the IHP. Key outcome/goals center on indicators attendance, participation in general education, and academic achievement. Goals are content and time specific, measurable, realistic, and achievable. Outcome/goals direct school health care interventions. It is important to prioritize outcome/goals according to the level of urgency and the value to the student and family.

Planning and Implementation

Planning and implementation of interventions detail the delivery of health services to achieve the desired student outcome/goals. During this process, the nurse considers the

educational implications and selects nursing interventions that support the student's psychological, behavioral, safety, family, and health system functioning. Components of the documented intervention statements include the therapeutic actions, designated qualified personnel completing the intervention, and intervention time, duration, and frequency. The written emergency health plan for a student with a life threatening condition is either directly in the intervention portion of the IHP or in a separate document referenced in the IHP.

Evaluation

Evaluation is the ongoing systematic analysis of the student's response to the IHP interventions. Evaluation is in collaboration with the student, family, and school team and other health care professionals. The basis of decisions about plan modifications, additions, or deletions is on the data collected during the evaluation. Review of the student's current health status and progress toward meeting the identified outcome/goals requires communication at regular intervals and at least annually.

Summary of Interpretive Statement

The written IHP documents the student's needs for school health services, the steps of the nursing process, and the student outcome/goals to promote student health, prevent disease, and enhance school academic achievement, participation, and attendance.

IOWA STUDENTS WITH SPECIAL HEALTH NEEDS

Children with special health care needs (CSHCN) are defined by Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health

Bureau (MCHB): “...those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.”

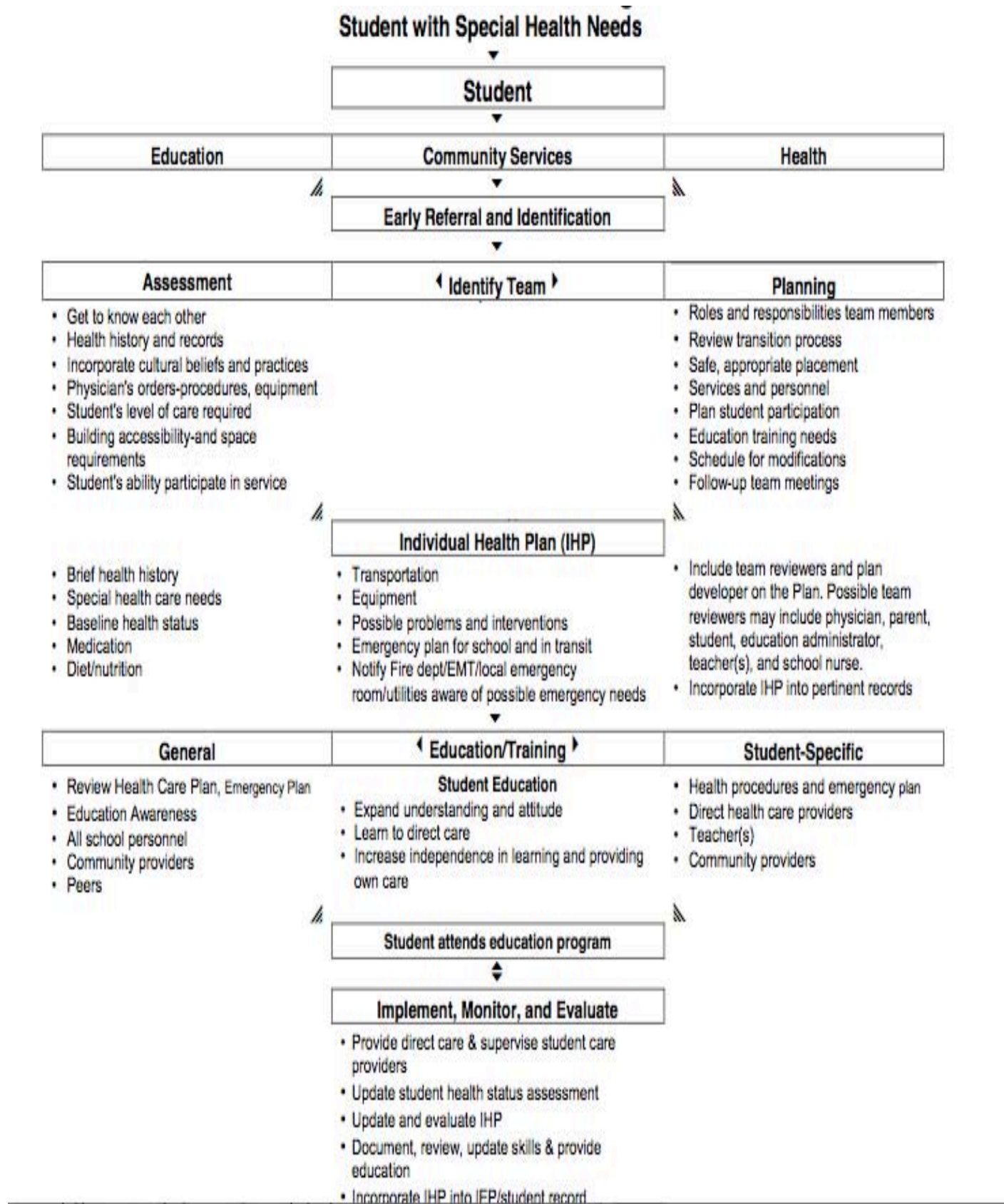
IDEA-20 USC 1401 Definitions:

Related services.— A. In general.--`related services' means... (including... school nurse services designed to enable a child with a disability to receive a free appropriate public education (FAPE) as described in the individualized education program (IEP) of the child, medical services, medical services for diagnostic and evaluation purposes required to assist a child with a disability to benefit from special education, and includes early identification and assessment of disabling conditions in children. B. Exception.-The term does not include a surgically implanted medical device, or replacement of such device.

School health services/school nurse services means health services designed to enable a child with a disability to receive FAPE as described in the child's IEP. School health services are provided by either a qualified school nurse or other qualified person.

Rehabilitation Act-Section 504 and American with Disabilities Act (ADA) -Related services are part of FAPE including health services.





The school nurse is a member of the student's IEP team. Duties of the licensed school nurse include participating as a member of the IEP team; providing the health assessment; planning, implementing and evaluating: the written individual health plan, special emergency health services; serving as a liaison and encouraging participation and communication with health service agencies and individuals providing health care; providing health consultation, counseling and instruction in cooperation and conjunction with the prescriber to : the eligible individual, individual's parent, and staff; maintain a record a of special health services; reporting unusual circumstances to parent, school administration and prescriber; assigning and delegating qualified designated personnel ; instructing and supervising qualified, designated personnel; providing technical assistance to qualified designated personnel ; updating knowledge and skills to meet special health service needs. Nurses are a part of the educational team that determines if a student is eligible for special health accommodations.

EMERGENCY PLANS

Students with life threatening conditions should have an Emergency Health Plan for both individual health needs and for safe student evacuation in case of a disaster.

This plan can either be written in the intervention portion of the IHP or in a separate document.

Nurses participate and communicate with health service agencies and individuals providing health services. Consultation, counseling and instruction are also delivered in cooperation and conjunction with the plan.

HEALTH REQUIREMENTS FOR SCHOOL ENTRY

Kindergarten and Pre-School

Starting Kindergarten – All parents receive a guide explaining requirements for enrollment and how to prepare children for kindergarten.

Immunizations – Updated immunizations are required by law, in order for children to enter school. Local Public Health audits annually in fall.

Dental Screening - Iowa law also requires that any student entering kindergarten provide the school with proof of a dental screening.

Blood Lead Testing - Schools request the date of a lead blood level test upon entering school. A list of all kindergarten students and test dates, if available, is submitted to the State within sixty days of the beginning of school.

Vision Card – Vision testing is not required to attend school. However, the school is required to give a vision card to the parent/guardian of each registering kindergartener or preschooler.

CONTINUED REQUIREMENTS

Ninth Grade

Dental Screening – Iowa law requires that any student entering ninth grade provide the school with proof of a dental check-up. A certificate of dental screening needs to be signed by the student's dentist or oral hygienist,

The Boone school board has adopted the following policy in accordance with the Iowa Administrative Code. Medication is administered per the policy, with final determination as to whether or not any medication will be administered by school personnel rests with the school's nurses or administration.

Code No. 507.3 ADMINISTRATION OF MEDICATION TO STUDENTS

Some students may need prescription and nonprescription medication to participate in their educational program.

Medication shall be administered when the student's parent or guardian (hereafter "parent") provides a signed and dated written statement requesting medication administration and the medication is in the original, labeled container, either as dispensed or in the manufacturer's container.

When administration of the medication requires ongoing professional health judgment, an individual health plan shall be developed by the licensed health personnel with the student and the student's parent.

By law, students with asthma or other airway constricting diseases may self-administer their medication upon approval of their parents and prescribing physician regardless of competency.

Persons administering medication shall include the licensed registered nurse, parent, physician, and persons who have successfully completed a medication administration course reviewed by the Board of Pharmacy Examiners. A medication administration course and periodic update shall be conducted by a registered nurse or licensed pharmacist, and a record of course completion kept on file at the agency.

A written medication administration record shall be on file including:

- date;
- student's name;
- prescriber or person authorizing administration;
- medication;
- medication dosage;
- administration time;
- administration method;
- signature and title of the person administering medication; and
- any unusual circumstances, actions, or omissions.

Medication shall be stored in a secured area unless an alternate provision is documented.

Emergency protocols for medication-related reactions shall be posted. Medication information shall be confidential information.

Delegation

Boone school nurses delegate administration of medication of school to those staff who are medication certified, per the course offered by the AEA (see below).

Medication Administration Course –

The Iowa basic course is available to Iowa School employees at

<http://www.aea11.k12.ia.us>. The course is for school personnel to whom authorized health practitioners have delegated the administration of medication at school and in school activities.

In order to best benefit from their education, students may need to take medication at school or during school activities. Some students would not be able to attend school at all if medication administration were not available. This is designed to help Iowa schools carry out medication administration for students in a safe, effective way that is consistent with their responsibilities under national and state laws. These resources are intended to be part of the comprehensive school improvement plan, which includes coordinated school nurse and school health services. In Iowa, districts and schools must establish medication administration policies and procedures. The medication administration policies need to be consistent with laws, overall district policies and good health practices. This includes a summary of relevant laws, sample policies, procedures and forms as well as materials and resources to use in training qualified designated personnel to assist with medication administration at school. Proper medication administration improves student health outcomes, attendance, performance and safety and can save lives. It can also help students learn about proper use of medication and can contribute to long-term healthy lifestyles.

IOWA ADMINISTRATIVE CODE FOR THE ADMINISTRATION OF MEDICATION AT SCHOOL

Medication Administration: 281 I.A.C. § 41.404(1-3)

This code requires all public agencies to have policies and procedures regarding administration of medication including requirements for a written medication administration record. Agencies need to establish a medication administration policy and procedures which include the following:

- a. A statement on administration of prescription and nonprescription medication.
- b. A statement on an individual health plan, when administration requires ongoing professional health judgment.
- c. A statement that persons administering medication shall include authorized practitioners, such as licensed registered nurses, physicians and persons to whom authorized practitioners have delegated the administration of prescription drugs (who have successfully completed a medication administration course). Individuals who have demonstrated competency in administering their own medications may self-administer their medication. Individuals shall self-administer asthma or other airway constricting disease medications with parent and physician consent on file, without the necessity of demonstrating competency to self-administer these medications.
- d. Provision for a medication administration course and periodic update. A registered nurse or licensed pharmacist shall conduct the course. A record of course completion shall be maintained by the school.
- e. A requirement that the individual's parent provide a signed and dated written statement requesting medication administration at school.
- f. A statement that medication shall be in the original labeled container either as dispensed or in the manufacturer's container.
- g. A written medication administration record shall be on file at school and shall include:
(1) Date. (2) Individual's name. (3) Prescriber or person authorizing administration. (4) Medication. (5) Medication dosage. (6) Administration time. (7) Administration method. (8) Signature and title of the person administering medication. (9) Any unusual circumstances, actions or omissions.
- h. A statement that medication shall be stored in a secured area unless an alternate provision is documented.
- i. A requirement for a written statement by the individual's parent or guardian requesting the individual's co-administration of medication, when competency is demonstrated.
- j. A requirement for emergency protocols for medication related reactions. k. A statement regarding confidentiality of information.

DELEGATION

*Purpose: Increasing numbers of students need special health services to participate in their educational program. Providing services requires interdisciplinary coordination between education, health, and human services. These coordinated services include nursing delegation of school health services designed to protect student health, safety, and welfare. The purpose of this interpretative statement is to provide a resource for school nurses and school personnel regarding the school nurse delegation decision-making process.

*Background: The registered nurse (RN) delegates nursing tasks while retaining accountability. There is no substitute for the professional registered nursing delegation judgment. The basis of all delegation decisions is student health, safety, and welfare. Other workers have a place and are equipped to assist, but not replace, the registered nurse in providing health services. RNs are accountable to provide safe, effective nursing care. This requires employers, peers, and coworkers to support the RN and share responsibility in providing safe, quality health services.

*The Iowa School Nurse is a registered nurse licensed to practice by a state board of nursing. The School Nurse has the legal, professional, and ethical autonomy to make decisions about delegation in accordance with the:

*Iowa Code (Iowa Code § 152) Practice of Nursing, Iowa Administrative Code Nursing Practice for RNs (655 IAC 6), Iowa Administrative Code Discipline (655 IAC 4), and Advanced Registered Nurse Practitioner (655 IAC 7) School Nursing: Scope and Standards of Practice (National Association of School Nurses and American Nurses Association, 2005) School Nursing Code of Ethics (National Association of School Nurses, 2002)

*To practice within the scope of delegation authority, the School Nurse is accountable and responsible for: Maintaining documentation of personal competence and education knowledge, skills, experience, instruction, and supervision determining if the student specific health service(s) may be delegated; appropriate circumstances, setting, and resources delegation to the right person for the right reason(s) service direction and description including clear and concise objectives, limits, and expectations, supervision including monitoring, evaluation, intervention, and feedback (Iowa Board of Nursing, March 1996) action or failure to act of self or others performing health services included in the individual health plan and emergency plan.

*By applying the legal, professional, and ethical delegation obligations, the school nurse begins the delegation decision-making process of assessment, diagnosis, outcome identification, planning, implementation, and evaluation. The student's health record contains the detailed delegation decision-making process documentation.

*Gathering Assessment Information: The School Nurse identifies: information sources including and not limited to health providers, student, family, and education team individual student health service needs resource needs student and or personnel supervision needs.

*Nursing Diagnoses and Outcome Identification: Once the assessment is completed, the resulting nursing diagnoses and outcomes direct health services and determine action priorities in the delegation decision-making. The nursing diagnoses describe the student's current health status. The outcomes are statements describing the desired health goals. They are meaningful, measurable, observable, and useful in making decisions. The School Nurse also considers the goals value to the student, family, and the achievement impact on the student's school performance. Applying the information obtained through assessment, diagnosis, and outcome identification, the School Nurse proceeds to the planning step of the delegation decision-making process.

*Planning Individual Health Service(s) and Emergency Health Service(s): The School Nurse analyzes the assessment in consultation with the student, family, staff, and education team

and determines whether to delegate considering: high outcome predictability (stability) minimal service complexity (competence) low harm potential for the student and others (harm) student level for self-care (self-care) minimal problem solving required (decision-making) If the school nurse determines the student's safety and welfare requires the RN to provide the service, the nurse communicates this decision-making process with the education team. The school nurse develops the individual health plan (IHP) and emergency plan (EP) for school and school activities, which includes a back-up plan(s) in case the service provider is not available. After completing the planning step, the School Nurse proceeds to the implementation step of the delegation decision-making process.

*Implementation: When the school nurse determines the service may be safely delegated to another person, hereafter referred to as the assistive personnel, the school nurse develops the assistive personnel implementation plan including: designating the assistive personnel to perform the service(s) instruction content and updates demonstrated competency level frequency and level of supervision (in same area, on site, or on call) provision of ongoing support. The assistive personnel providing the service(s): understands responsibility and accountability to provide the service(s) as instructed understands and follows lines of communication in the plan.

*The school nurse demonstrates service knowledge and skill(s) competency agrees to the level and frequency of supervision agrees to perform the service(s) as instructed (Iowa Code §§ 280.23) agrees to ask questions, communicate concerns promptly, and document service provision signed as agreements of understanding. The school nurse provides the ongoing continuous evaluation step of the delegation decision-making process following implementation.

*Evaluation: The school nurse will: review the delegated process and outcomes maintain ongoing communication and observation with assistive personnel determine follow-up measures to continue to meet student needs adjust the plan as needed to meet new and changing needs document the evaluation findings.

The school nurse's accountability and responsibility for student advocacy requires immediate reporting, documentation, and resolution of a situation when safety is in question. RNs are accountable to provide safe, effective nursing care. This necessitates that employers, payers, peers, and coworkers support the RN and share the responsibility to provide safe, quality student health services.

Summary

Iowa Registered School Nurses ensure safe provision of special health services through the delegation decision-making process. This process allows students to receive and benefit from their educational program through the safe, competent provision of needed special health services. Qualified health personnel may delegate service(s) to assistive personnel with the utmost regard for student safety and protection.

HEALTH SCREENINGS

School screenings provide a process that allows for the detection of health conditions that might negatively impact a child's learning success.

Health screenings performed at school are not diagnostic. They are intended to identify students who exhibit symptoms suggestive of a health problem and allow for a process for the school nurse to support the parents of students meeting referral criteria to follow up with the appropriate health care providers for a diagnostic evaluation and for treatment if warranted.

In recent years, Iowa law has mandated that students receive certain health screenings (See below).

The following is a summary of health screenings offered in Boone schools.

Height and Weight Screenings - are conducted as part of the Physical Education program yearly in grades Pre-K through grade 4.

Vision Screening - Routine vision screenings are conducted annually in Preschool – 4, 6 and 8 and 10 and special education students. Vision screening of students with suspected vision concerns, or parent/teacher request, are conducted as needed.

Hearing Screening - Routine general hearing screenings are conducted in Preschool and grades 1,2,3,4. Screening of students with a history of known hearing loss are conducted. Screenings of students, with suspected hearing concerns or those undergoing a special education evaluation are completed on an as needed basis.

Dental Screening - Iowa law requires screening to be completed on all students entering kindergarten and grade 9.

Blood Lead Screening - Iowa law requires that children enrolling into kindergarten provide proof of having been tested for blood lead levels before the age of 6 years. There are exemptions to the law in cases of religious exemption or in cases where the Iowa Department of Public Health determines the child is at an extremely low risk of lead exposure. Exemptions must be approved by the Iowa Department of Public Health.

IMMUNIZATIONS AND SCREENING

Immunizations

Iowa state law requires that all children who are enrolled in a school must have completed the recommended program of immunization.

On the day of enrollment, parents must submit the necessary data to show that their child has completed his/her immunizations or qualifies for a provisional certificate (has received one dose of each of the above vaccines and is under medical care for completion of the necessary immunizations).

Iowa Department of Public Health allows for Medical and religious exemptions under certain conditions.

The health services department reviews all student immunization records, and are audited by the Public Health Department annually.

The school nurses collaborate yearly with the Public Health Department to provide school-based immunization clinics. Clinics include both influenza and adolescent recommended immunizations.

Screenings

Boone School Health Services provide annual screenings, including vision, hearing, height and weight for elementary, and vision for 6th, 8th, and 10th grades. Other screening are done as requested or deemed necessary.

EXCLUSION FROM SCHOOL

Criteria for students' temporary exclusion from school due to illness:

While most illnesses do not require exclusion, there are times when the student should be sent home because of illness, including the following reasons:

- *Prevents the student from participating comfortably in activities.
 - *Results in needed care greater than school personnel can provide considering the health and safety of other students.
 - *Poses a risk of spread of harmful diseases to others.
- If any of these criteria exist, the best option for the student is exclusion, regardless of the type of illness.

The basic criteria above may be included in school procedures and shared with school staff and parents to describe situations for temporarily excluding students from school for illness. Detailed information intended for the school nurse in developing school procedures follows:

- *The illness prevents the student from participating comfortably in activities as observed by the school staff.
- *The illness results in a greater need for care than the school staff determine they can provide without compromising their ability to care for other students.
- *The student appears severely ill – symptoms could include lethargy, lack of responsiveness, irritability, persistent crying, difficult breathing, or quickly spreading rash, or fever (temperature above 100.5°F orally), and behavior change or other signs and symptoms such as a sore throat, rash, vomiting, or diarrhea.

INFORMING FAMILIES AND OTHER EDUCATORS:

The school nurses prepare all families for inevitable illnesses ahead of time by providing families with the temporary exclusion criteria. They also ensure that parents have provided a plan and back-up plan for student temporary exclusion and that it is on file.

The school nurses also ensure all school staff know and understand the temporary exclusion criteria and the procedure for a student requiring temporary exclusion including these considerations: Follow plan provided by parent, report symptoms, and arrange for temporary exclusion. Separate student from others. Comfort, supervise, and observe the student until plan is implemented. Notify person picking the student up of any recommended guidance and readmission recommendations (Health professional's note to readmit is generally not, but can be required).

Iowa Department of Public Health may require the school district to exclude students in cases of a communicable disease outbreak. School nurses work closely with Public Health and school administration in monitoring these situations.

MEDICAID

The Boone Community School District participates in the Medical Reimbursement Program that is provided by the Federal/State Government. The Boone school nurses are responsible to coordinate the services and documentation needed to receive reimbursement.

The following criteria are required and evaluated by the School Nurses:

1. Medical diagnosis
2. The Service must be stated in the Individual Education Plan (IEP).
3. The student must be enrolled in Medicaid.

Medicaid is a federal/state cost sharing benefit program for health and medically necessary services for low-income individuals that was established as Title XIX of the Social Security Act in 1965. Originally, Medicaid benefits could not be used for services provided under the Individuals with Disabilities Education Act (IDEA). In 1988, the Medicare Catastrophic Coverage Act allowed Medicaid to pay for covered medical services provided to Medicaid-enrolled children with special health care needs on the IEP.

MEDICAID FACTS:

*Within the Iowa Department of Education, there are three aspects to reimbursement from the Iowa Medical Assistance Program (Medicaid).

*A Local Education Agency (LEA) is a community school district that is able to seek reimbursement for services provided to children requiring special education with services identified on an IEP.

*An Area Education Agency (AEA) is a regional service center able to seek reimbursement for services provided to children requiring special education.

*The Early ACCESS Program also allows reimbursement for services to children from birth to age three with at least a 25% developmental delay and services identified on an IFSP.

*Medicaid will only reimburse a provider for their 'cost' of the service and education regulations prohibit an AEA or LEA from charging more than their 'cost' for the service. The Department of Human Services, using cost data provided by the Iowa Department of Education, calculates the reimbursement rates for each AEA and LEA on an annual basis.

CERTIFICATION RECOMMENDATIONS FOR SCHOOL NURSES

The Iowa School Nurse is a licensed registered Nurse (RN) from the Iowa Board of Nursing. 655, Iowa Administrative Code 6 Nursing Practice for Registered Nurses.

Each Iowa School District has a school nurse - Iowa Code section 256.11(9B) to provide school nurse and school health services. The school nurse endorsement, at a minimum, is a registered nurse with a license from the Board of Nursing. The school nurse is employed, shared, or contracted by the district. Available and not required is a School Nurse Statement of Professional Recognition (SPR) from the Board of Educational Examiners. The school nurse with a SPR (RN license from the Board of Nursing and baccalaureate degree) meets the definition of "teacher" and is eligible for teacher quality compensation, evaluation, and professional development.

National Association of School Nurses recommends a needs-based formula approach for determining full-time school nurse-to-students ratio.

*1:750 of WELL students

*1:225 in the student populations that may require daily professional school nursing services or interventions such as special education inclusions.

*1:125 in student populations with complex health care needs

*1:1 may be necessary with individual students with multiple disabilities.

It is the position of the National Association of School Nurses that the school district should provide a full-time professionally prepared registered nurse all day, every day, in each building. Also recommended is additional school nurse staff to accommodate other student health needs, including, but not limited to; special education evaluations, nursing service included in IEPs, nursing services for students with 504 plans, and schools with large populations and large numbers of student with mental or social concerns.

The Boone School District maintains a staff of 4 licensed registered nurses.

PROFESSIONAL DEVELOPMENT

The Boone School Nurse's demonstrate habits and skills of continuous inquiry and learning. Membership to the local (ISNO) and National (NASN) are two organizations Boone nurses are affiliated with and afford ongoing professional development.

The Nurses work collaboratively to improve professional practice and student learning. This is done by working with staff, students and parents to promote learning while addressing health needs.

Research, knowledge, and skills from professional development opportunities help improve practice. The Boone School Nurse's maintain a current Iowa License according to the Iowa continuing education requirements, as well as current American Heart Basic Life Support, Blood-borne Pathogens, and Iowa Mandatory Reporter certifications.

The Nurses establish and implement professional development plans based upon needs aligned with the Nursing Standards and district/building student achievement goals. The nurses also participate in AEA professional development.

The nurses adhere to the Boone Community School Board policies, procedures, and contractual obligations, demonstrating professional and ethical conduct as defined by state law, district and AEA policy, and professional ethics. The nurses contribute to and collaborate with other educators to efforts to achieve district and building goals. The nurses demonstrate understanding, sensitivity and respect of all learners, staff and their health.

COMMUNITY COLLABORATION AND INVOLVEMENT

The Boone Community School District and the Boone County Public Health Department collaborate together based on the belief that healthy students, staff, and communities result in optimum learning, teaching, and productive citizens. School Health Programs and Community Health Programs strengthen the school and community capacity as a healthy setting for living, learning and working.

The partnership that is formed between the Boone Community School District and the Boone County Public Health Department strengthens the following activities and programs; Boone County Disaster Team, The Safe Routes to School Committee, The Boone County Health and Safety Fair, School Based-Immunization Clinics of Adolescents and Flu Clinics, and The Boone County Board of Public Health. The Boone Community School District Nurses are involved in all of these community activities, committees and programs.

The Boone School Nurses also support the Boone Hope Foundation, which was created by the teachers of Boone Schools to give assistance to Boone students and their families who are struggling to make ends meet.

School Health Advisory Team and School Nurses

The Boone School District has a School Improvement Advisory Committee and as recommended, a sub committee of the SIAC is the local Health Advisory Team. The Health Advisory Committee made of local health professionals advocates for strong community partnerships and linkages among the school, parents, community members, health, business and others. Boone school nurses utilize the health resources of the school and community to effectively promote the health of students.

The purpose of the committee is to mobilize health resources of the school and community to meet the health needs of our students and staff. A main goal is to advise the Boone School District on matters pertaining to the health and well being of the students and staff is a major function. The activities of the committee can pertain to school environment, health services, health instruction, and school activities. The committee focuses on promotion, protection, and maintenance of the health and well being of our students which requires the coordination and support of school, families and community. Some responsibilities of the School Health Advisory Committee include:

- *Identify the health needs of students.
- *Make recommendations regarding school health and health related policies.
- *Evaluate the school health program.
- *Make recommendations and assist in the implementation of school health policies.
- *Coordinate the efforts of community members interested in the health and well-being of students, faculty, and staff.
- *See parental support and participation in school health.
- *Stress the primary responsibility of the family for the health of students.
- *Support existing health programs and aid in the development of new health related programs.
- *Assist school personnel in working out solutions to existing health problems.
- *Inform the community in regard to school health and programs.

SUMMARY

A comprehensive health program is implemented by the School Nurses in order to improve the health & well being of the student & staff of Boone Community School District. Program design, implementation, processes, standards, and evaluation, as well as preparation, are critical elements of the school health program.