• Beth Anne Bahn, Director
• Jill Clodgo, State School Health Consultant
• Administrative Officer
• Bureau administrative support
SCHOOL HEALTH CONSULTANTS

Donna Leffler  
NW and SW  
724-662-6068  
dleffler@pa.gov

Sue Templin  
SC and SE  
717-787-8092  
stemplin@pa.gov

Sheri Mountz  
NE and NC  
570-826-2062  
smountz@pa.gov
ENACTED LEGISLATION

• Act 31 of 2014 - Child Abuse Training
  - All persons licensed or certified under Department of State
    - Initial: 3 hours
    - Renewal: 2 hours
    - Training approved by the department
• Act 31 of 2014 - Child Abuse Training
• Eligibility for Exemption Provision
  ▶ Department of State - licensed school staff (CSN, LPN or non-certified RN)
  ▶ Completed PDE/DHS approved course
  ▶ Training equals or exceeds amount of training required by this act
ENACTED LEGISLATION

- Clarification from the Board of Nursing on licensure renewal and child abuse training:
  - Training must have taken place within the 2 year licensure period
  - Training must be on either the PDE or BON list of approved courses
  - Certificate must be from the approved provider, not the school district
  - Name on certificate must match name on license
• Act 70 of 2010 - Adult Protective Services
  - Adults ages 18 – 59 (physical or mental impairment that substantially limits 1 or more major life activities)
  - Bridge between CPSL and OAPSA
ENACTED LEGISLATION

• Act 70 of 2010 - Adult Protective Services
  - Organization or group of people that use public funds and are paid to provide care and support to adults
    - School nurses and other school medical personnel - mandated reporters
    - Other school employees are voluntary reporters
• Act 70 of 2010 - Adult Protective Services
  - Call hotline 800-490-8505 (answered by local Area Agency on Aging)
  - Regulations being finalized
  - Training for school nurses being finalized
Act 71 of 2014

- Beginning school year 2015-16
- Public school entities only
- Youth suicide awareness and prevention
  - Requires adoption of a policy
  - Requires ongoing professional development for educators in grades 6 – 12
    - PDE recommends training for all professional staff working in buildings which serve grades 6 - 12
  - Permits including topic in their instructional programs
• Act 107 of 2014 - CPR for CSNs
  ▪ School nurses required to be CPR-certified
  ▪ Courses approved by the Department of Health (only Healthcare Provider or Professional Rescuer courses will be approved)
<table>
<thead>
<tr>
<th>CSN Credentials</th>
<th>CSN Assigned School Building(s)</th>
<th>Days per Cycle in Bldg</th>
<th>Other* Comment required</th>
<th>Students in Building (not ADMs)</th>
<th>Students per CSN (not ADMs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Personnel ID number (PPID#): Act 48 Continuing Professional Education seven digit number is accessible on the PA Department of Education (PDE) website. <a href="https://wwwperms.ed.state.pa.us/Screens/wfPublicAccess.aspx">https://wwwperms.ed.state.pa.us/Screens/wfPublicAccess.aspx</a></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAME (as appears on RN license):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PA License #:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expiration Date:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ P ☐ NP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of students assigned to the CSN at all buildings (Caseload):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Check Other only when CSN's building assignment varies significantly from week-to-week & cannot be averaged; list # of hours per day/week/month CSN is typically present in the school building. Comment required below explaining schedule. Refer to Instruction Manual for further detail.

Changes to 2015-16 report
### SCHOOL PHYSICIAN

<table>
<thead>
<tr>
<th><strong>NAME</strong></th>
<th>as appears on MD/DO license</th>
</tr>
</thead>
</table>

| **Pennsylvania License** | License Number:__________ | Expiration date:__________ |
|--------------------------|-----------------------------|

<table>
<thead>
<tr>
<th><strong>Group Practice</strong></th>
<th>as the SCHOOL Physician?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ No</td>
<td>□ Yes, Name of Group Practice:__________</td>
</tr>
</tbody>
</table>

☐ **No Physician. Comments required (See Chapter 10 of instructions)**

---

### SCHOOL DENTIST

<table>
<thead>
<tr>
<th><strong>NAME</strong></th>
<th>as appears on DMD/DDS license</th>
</tr>
</thead>
</table>

| **Pennsylvania License** | License Number:__________ | Expiration date:__________ |
|--------------------------|-----------------------------|

<table>
<thead>
<tr>
<th><strong>Group Practice / Mobile Dentist</strong></th>
<th>as the SCHOOL Dentist?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ No</td>
<td>□ Yes, Group Practice: Name:__________</td>
</tr>
<tr>
<td>□ Yes, Mobile Dentist Group: Name:__________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Mobile Dentist Group</strong></th>
<th>as a FAMILY Dentist?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ No</td>
<td>□ Yes, Name of Mobile Dentist Group:__________</td>
</tr>
</tbody>
</table>

☐ **No Dentist. Comments required (See Chapter 10 of instructions)**
### SHARRS

#### Growth Screens – BMI (coincides with the CDC percentile)

**TOTAL for Grades K – 6**

- A. Underweight – Less than 5<sup>th</sup> Percentile
- B. Healthy Weight – 5<sup>th</sup> Percentile to Less than 85<sup>th</sup> Percentile
- C. Overweight – 85<sup>th</sup> Percentile to Less than 95<sup>th</sup> Percentile
- D. Obese – Equal To or Greater than 95<sup>th</sup> Percentile

**TOTAL for Grades 7 – 12**

- A. Underweight – Less than 5<sup>th</sup> Percentile
- B. Healthy Weight – 5<sup>th</sup> Percentile to Less than 85<sup>th</sup> Percentile
- C. Overweight – 85<sup>th</sup> Percentile to Less than 95<sup>th</sup> Percentile
- D. Obese – Equal To or Greater than 95<sup>th</sup> Percentile

**GRAND TOTAL for Grades K – 12**

---

Match CDC categories
<table>
<thead>
<tr>
<th>CHRONIC CONDITIONS</th>
<th>Public Students</th>
<th>Private / Non-Public Students</th>
<th>Total Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 Arthritis / Rheumatic Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02 Asthma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03 Attention Deficit Disorder / Hyperactivity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04 Bleeding Disorders / Cooley's Anemia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05 Cardiovascular Condition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06 Cerebral Palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07 Cystic Fibrosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08 Diabetes Type I</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09 Diabetes Type II</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Epilepsy / Other Seizure Disorders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Life-Threatening Allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 A Food Related Life-Threatening Allergies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 B Other Life-Threatening Allergies (Example: Bee stings, Latex, etc)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Sickle Cell Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Spina Bifida</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Tourette’s Syndrome</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>TOTAL</td>
</tr>
<tr>
<td>Category of Use</td>
<td>Doses by Individual Order (Primary Care Provider)</td>
<td>Doses by Standing Order (School Physician)</td>
<td></td>
</tr>
<tr>
<td>-----------------</td>
<td>--------------------------------------------------</td>
<td>------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>01 Analgesic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02 Antibiotic</td>
<td></td>
<td>Topical Antibiotics Only</td>
<td></td>
</tr>
<tr>
<td>03 Anticonvulsants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Diastat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Versed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Other than Diastat or Versed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04 Antihistamine / Decongestant</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Epinephrine (include auto-injector)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Other than Epinephrine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05 Anti-Inflammatory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06 Asthma (inhaler, nebulizer, oral, IV)</td>
<td></td>
<td>Inhaler and nebulizer only</td>
<td></td>
</tr>
<tr>
<td>07 Diabetes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Oral</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Insulin (include bolus/adjustment to insulin pump)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Glucagon</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Other Glucose Medication (glucose gel / tablet)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08 Gastrointestinal</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A. Enzymes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Other than Enzymes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09 Reversal Agents: Naloxone/Narcan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Psychotropics</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
• Changes to 2015-16 SY Requirements
  - Within the first 60 days, schools need to determine a plan for completion of the new requirements.
    - Hearing and Vision Screens- use DOH guidelines for Kindergarten students
    - Dental and Physical Screen- can use School Health forms. Include with school exams by school doctor or request from student’s private provider.
    - Mental Health and Developmental Screen- completed by classroom staff. Behavior-based screenings.
Don’t Wait.

Vaccinate.

- It’s back-to-school time – make sure your children’s vaccines are up-to-date!
- Vaccines help protect children against 14 serious childhood diseases, like whooping cough and measles.
- Vaccine-preventable diseases can be very serious, may require hospitalization, or can even be deadly – especially in young children.
- Make vaccines part of your child’s regular school physical before they enter kindergarten and seventh grade.
- Contact your health care provider today to make sure you and your family stay on track for immunizations.

Don’t wait. Vaccinate.

Protect your children and keep them safe from life-threatening childhood diseases.

www.dontwaitvaccinate.pa.gov
Proposed School Immunization Regulation Revisions

Available at
http://www.health.pa.gov/My%20Health/Immunizations/Pages/Proposed-School-Immunizations-Regulation.aspx

Will NOT go into effect for school year 2016-17
• School Immunization Law Report (SILR) 2015
  ▪ Reporting Period
  ▪ Instructional Packet
  ▪ Website Training
  ▪ Logic Values
  ▪ Medical Professional
• PA - Statewide Immunization Information System (PA-SIIS)
  - View-only access for school nurses

• KIDS Plus (Philadelphia Immunization Information System)
  - http://kids.phila.gov/
SCHOOL HEALTH PROGRAM

The School Health Program is the oldest program of public health services in Pennsylvania, with responsibilities predating 1895. The School Health Program serves all children of school age attending public, private and non-public schools in Pennsylvania. The School Health Program is responsible for providing technical assistance, training, and coordination of programs and services to schools, parents, and the community at large regarding school health programs and services.

Directory for School Health Calls - School Health issues are shared by several Departments (for example, Agriculture, Education, Health, and Public Welfare). This directory provides phone numbers and webpages for the correct Department to answer frequent school health questions.
School Health Consultants Contact Information - Questions and concerns related to school health should be directed to these nurses. Questions regarding immunizations and suspected communicable disease outbreaks should be directed to your Department of Health District Office, State Health Center or County/Municipal Health Department.

2015 Recommended Essential References for all School Health Offices

Updated: May 11, 2016

HOT TOPICS

2016 School Health Update

Epinephrine Auto-injector Administration

Narcan (naloxone) Program for Schools

Immunization Resources

2016-17 Letter to Parents (English)

2016-17 Letter to Parents (Spanish)

Back-to-School Immunization Clinic Flyer
# SCHOOL HEALTH TOPICS A - Z

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuse (Child)</td>
<td>Bedbugs</td>
</tr>
<tr>
<td>Access (Pennsylvania School-Based Access Program)</td>
<td>Behavioral Risk Factor Surveillance System (BRFSS)</td>
</tr>
<tr>
<td>Accommodations</td>
<td>Bleeding Disorders</td>
</tr>
<tr>
<td>Adult Protective Services</td>
<td>Bloodborne Pathogens</td>
</tr>
<tr>
<td>Allergies</td>
<td></td>
</tr>
<tr>
<td>Arthritis</td>
<td></td>
</tr>
<tr>
<td>Asthma</td>
<td></td>
</tr>
<tr>
<td>Attention Deficit/Hyperactivity Disorder (ADD/ADHD)</td>
<td></td>
</tr>
<tr>
<td>Automated External Defibrillator (AED)</td>
<td></td>
</tr>
</tbody>
</table>
HPV

You are the key to cancer prevention

HPV vaccine is cancer prevention.
HPV vaccination

- CDC and National Comprehensive Cancer Control Priority
- Healthy People 2020 Goal - 80% vaccinated
- Pa rates - only 48% of females & 26% of males (ages 13-15) have >3 doses
- PA Cancer Control Program Goal - increase by 20% by June 2017
HPV

• CDC recommends the following adolescent vaccines
  - Tdap
  - MCV4
  - HPV – 3 doses
  - Flu

• The #1 predictor of vaccination
  - Strong recommendation from a healthcare provider
HPV

• Pa Cancer Control HPV Toolkit
  ▶ Know the facts
    ▶ Information on the safety, efficacy and need for HPV vaccine
  ▶ Join the cause
    ▶ Increase community awareness among parents, adolescents and school professionals
  ▶ Lead the conversation
    ▶ Learn how to successfully communicate about the HPV vaccine
HPV

- Joanna Stoms MPA, RRT
  - Cancer Plan Manager
  - Pa Department of Health, Division of Cancer Prevention and Control
  - jstoms@pa.gov

- Centers for Disease Control and Prevention
  - HPV Resources for Healthcare Professionals
HEARING SCREEN

The Pennsylvania Public School Code, Article XIV School Health Services, Section 1402. Health Services requires that "Each child of school age shall be given by methods established by the Advisory Health Board,...(2) a hearing test by a school nurse or medical technician...."

The hearing screen requirement is further defined in regulation, 28 PA Code, Chapter 23, Section 23.5. Hearing screening tests:
(a) Identity. A hearing screening test determines the response to discrete frequencies presented at a specified decible level.
(b) Test equipment. An individual pure tone audiometer or other screening equipment approved by the Department of Health shall be utilized for hearing screening tests.
(c) Frequencies employed. Frequencies of 250, 500, 1,000, 2,000, and 4,000 cycles per second shall be employed in screening testing.
(d) Pupils to be tested. Each year, pupils in kindergarten, special ungraded classes and grades one, two, three, seven and eleven shall be given a hearing screening test."

Pennsylvania School Health Procedures: Conducting Hearing Screens
Hearing Screen Checklist
Daily Biologic Calibration Worksheet
Parent/Guardian Notification
Physician/Hearing Specialist Report

Updated: April 4, 2016
• Act 139 of 2014 - Administration of naloxone
  - Goal - increased availability in community setting
  - Participation by school - local decision
    - Consult with school solicitor, doctor, nurse(s), and administration
  - [School Health naloxone webpage](#)
• Adapt Pharma Program
  - Free, two-dose carton
  - Intranasal spray (only formulation FDA approved)
• Adapt Pharma Program
  - Standing order from the school physician
    - May NOT use Dr. Levin’s standing order
      - For entities who do not have a relationship with a doctor
  - Administrative policy
    - May NOT use EMS protocol as policy
    - Examples: PSBA template, Warwick, Lebanon
NARCAN (NALOXONE)

- Adapt Pharma Program
  - Proof CSN completed Department of Health approved training
  - Application
  - [http://www.health.pa.gov/My%20Health/School%20Health/Pages/Narcan-Grant-Application-Packet.aspx](http://www.health.pa.gov/My%20Health/School%20Health/Pages/Narcan-Grant-Application-Packet.aspx)
• Adapt Pharma Program
  - Distribution through State Health Centers, County/Municipal Health Departments
  - Address questions to RA-DHNARCAN-SCHOOLS@pa.gov
• Linking Actions for Unmet Needs in Children’s Health
  - Federal grant program
  - Promote social, emotional, behavioral and physical health and cognitive development of young children from birth to age 8.
  - Evidence-based programs and activities to improve child wellness
State Council
- Looking for nurses
- One face-to-face meeting every 3 months
- Member of a workgroup with monthly conference calls
- Guide launching of project statewide
- If interested, contact Brad Hartman (717-547-3375 or bhartman@pa.gov)
• Epilepsy Foundation Western/Central Pennsylvania

• One week, overnight camp for children with epilepsy/seizure disorders
GET SMART COMPETITION

- Support and promote appropriate use of antibiotics
- Focus is good handwashing/hygiene and getting vaccinated
- Open to children ages 3 – 12 who reside in Pennsylvania
- Deadline for submission, October 31, 2016
- [www.KnowWhenToSayNo.org](http://www.KnowWhenToSayNo.org)
• Provide information on health care services and other resources
• Offer service coordination through PA Elks Home Service Program
• Support 8 regional coordinators (parents of children with special health care needs)
• 800-986-4550
Contact the Regional Coordinator in Your Area

**Northwest**
Paulette Testani  
ptestani@paekshomeservice.org  
(814) 270-5553

**Northwest Central**
Cindy Dollinger  
cddollinger@paekshomeservice.org  
(814) 289-9326

**Northeast Central**
Tammy Pursel  
tpursel@paekshomeservice.org  
(814) 270-5556

**Northeast**
Kimberly Minor  
kminor@paekshomeservice.org  
(814) 279-4959

**Southwest**
Melissa Morgan  
morgan@paekshomeservice.org  
(814) 270-5595

**Southwest Central**
Shelley Lill  
sll@paekshomeservice.org  
(814) 289-9521

**Southeast Central**
Grace Egun  
egun@paekshomeservice.org  
(814) 270-5600

**Southeast**
Ekeoma  
ekeleme-washington@paekshomeservice.org  
(814) 270-5618
• Rehabilitation for Empowerment, Natural Supports, Education and Work
  • School-to-career transition planning
  • Individualized wraparound process
  • Youth with emotional and behavioral challenges
  For more information,
SCHOOL HEALTH EDUCATION AND TRAINING

The Division of School Health realizes how difficult it can be for professional school personnel and Registered Nurses to gain access to quality continuing education. This page provides a comprehensive list of continuing education opportunities which will fulfill the requirements for Act 48 of 1996 and/or Act 58 of 2006.

Trainings specific to a page on this website are now located on that page. For example, trainings related to asthma can be found on the "Chronic Disease" page under the "Asthma" link.
• On-line courses for school staff
  • School Personnel & Supplemental RNs
  • Act 48 hours through the Division of School Health
  • Act 58 hours through the Department of Health

• Become a registered user:
  • www.paprepared.net
• Example of Courses
  - Emergency Medication for Seizures
  - Asthma 101- updated in March of 2014
  - 2015 School Health Update
  - Concussion Management Team Training
    - Must be registered through BrainSTEPS for access
  - New School Nurse Orientation
CONTINUING EDUCATION

• For Act 48 hours to be submitted to PDE
  - Send e-mail to c-paschool@pa.gov
  - Include PPID number
  - Certificate (Scan and attach)
  
  OR

  - Fax certificate and PPID number to 717-783-4790, Attn: School Health
ORDERING SCHOOL HEALTH FORMS

- School Health Record only form available for bulk order
- Fax or order on-line
- Order in increments of 50
- Orders take 2-3 weeks.
- Contact school health consultant for incorrect orders
NURSE PRACTICE REQUIREMENTS

• School nurses function under multiple laws:
  - Nurse Practice Act;
  - Public School Code; and
  - Federal accommodation laws.

• Licensure requirements are in effect regardless of the nurse’s practice setting.
The nurse’s responsibility is to be familiar with licensure requirements:
- Pennsylvania Nurse Practice Act and regulations;
- ANA/NASN Scope and Standards of Practice; and
- ANA Code of Ethics.
• Nurse Practice Act/Regulations
  - Does not allow nurses to delegate
  - May administer drug ordered in the dosage and manner prescribed
    - 49 PA Code, Section 21.14
  - Must follow standards of practice developed by American Nurses Association (ANA)
    - 49 PA Code, Section 21.11(d)
• 49 Pa. Code § 21.18
  Standards of nursing conduct require a registered nurse to safeguard the patient’s dignity, the right to privacy and the confidentiality of patient information.

• ANA Code of Ethics for Nurses
  Nurse safeguards patient’s right to privacy.
  There is a duty to maintain confidentiality.
American Nurses Association (ANA)

Updated 2015

Essential part of nursing reference library
American Nurses Association (ANA) Scope and Standard of Practice

- Authoritative statements of the duties that all registered nurses, regardless of role, population, or specialty, are expected to perform competently
- Standard 7. Ethics
  - The registered nurse practices ethically.
American Nurses Association (ANA)

Updated 2015

Essential part of nursing reference library
ANA Code of Ethics

Provision 4 - the nurse has authority, accountability and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
• ANA Code of Ethics, Provision 4
  4.1 Authority, Accountability and Responsibility
  4.2 Accountability for Nursing Judgments, Decisions, and Actions
  4.3 Responsibility for Nursing Judgments, Decisions, and Actions
  4.4 Assignment and Delegation of Nursing Activities or Tasks
• ANA Code of Ethics
  
  Provision 6 - The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality health care.
  
  6.3 Responsibility for the Healthcare Environment
• Overseeing Nursing Practice in the School Setting
  - Certification and Staffing Policy Guidelines (CSPG)
  - In loco parentis
  - Pennsylvania Nurse Practice Act
  - ANA Foundational Documents of Professional Nursing
    - Nursing Scope and Standards of Practice, 3rd Edition
    - Code of Ethics for Nurses with Interpretive Statements
• Responsibility of nurse to determine appropriate level of care
  ‣ PDE- CSPG 95- Principal
    ‣ Supervision and direction...exclusive of directing health services controlled by the Nurse Practice Act
  ‣ CSPG 101- Paraprofessional
    ‣ Shall not be directed to engage in health-related activities reserved exclusively for licensed professionals
Public School Code, Section 1317. Authority of Teachers, Vice Principals and Principals over Pupils.—

Every teacher, vice principal and principal in the public schools shall have the right to exercise the same authority as to conduct and behavior over the pupils attending his school, during the time they are in attendance, including the time required in going to and from their homes, as the parents, guardians or persons in parental relation to such pupils may exercise over them.
• Pa Public School Code, Section 14-1401. Definitions

(1) CHILDREN OF SCHOOL AGE" or "CHILD OF
SCHOOL AGE" means every child attending or
who should attend an elementary grade or
high school, either public or private, within the
Commonwealth and children who are
attending a kindergarten which is an integral
part of a local school district.
• 28 PA Code, Chapter 23, Section 1402(a.1)
  • “every child of school age shall be provided with school nurse services”
  • Caseload maximum is 1:1500 students
• Determining Caseload
  
  28 PA Code, § 23.53. Determination of pupils to be served. The school administrator, in determining the number of pupils to be served by a school nurse, shall consider the number of schools, distance between schools, travel difficulties and special health needs of the area.

• Administrator determines number of students and buildings
• Nurse should determine schedule based on nursing assessment
• CSN caseload
  - CSN must go to all assigned buildings on a regular basis.
    - Based on number of students and health needs
  - CSN can’t cover a caseload they never see.
• Substitutes
  - Only a CSN can “officially” sub for a CSN
  - Can obtain Emergency Certification for RN
  - If have other CSNs in district who can temporarily carry the caseload, can hire RN or LPN to supplement
• CSN Responsibilities:
  • Coordinate care
  • Develop plans of care
  • Participate in teams (ex. Student Assistance, IEP)
  • Communicate with parents
  • ...exclusively connected with medical and dental school health activities (28 Pa. Code Chapter 23, Section 23.34)
<table>
<thead>
<tr>
<th></th>
<th>2005-06</th>
<th>2008-09</th>
<th>2011-12</th>
<th>2012-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students</td>
<td>2,050,294</td>
<td>2,007,867</td>
<td>1,939,039</td>
<td>1,903,777</td>
</tr>
<tr>
<td>CSN</td>
<td>2,182</td>
<td>2,241</td>
<td>2,173</td>
<td>2,140</td>
</tr>
<tr>
<td>RN</td>
<td>829</td>
<td>915</td>
<td>990</td>
<td>998</td>
</tr>
<tr>
<td>LPN</td>
<td>530</td>
<td>568</td>
<td>626</td>
<td>620</td>
</tr>
<tr>
<td>UAP</td>
<td>466</td>
<td>433</td>
<td>312</td>
<td>279</td>
</tr>
<tr>
<td>Condition</td>
<td>2008-09</td>
<td>2009-10</td>
<td>2010-11</td>
<td>2011-12</td>
</tr>
<tr>
<td>-------------------</td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>Asthma</td>
<td>133,683</td>
<td>231,990</td>
<td>232,788</td>
<td>230,025</td>
</tr>
<tr>
<td>Diabetes I</td>
<td>5,840</td>
<td>6.123</td>
<td>6,167</td>
<td>6,084</td>
</tr>
<tr>
<td>Diabetes II</td>
<td>1,322</td>
<td>1,342</td>
<td>1,331</td>
<td>1,216</td>
</tr>
<tr>
<td>Seizure Dis.</td>
<td>15,041</td>
<td>15,695</td>
<td>16,282</td>
<td>16,406</td>
</tr>
<tr>
<td>Arthritis</td>
<td>3,189</td>
<td>3,541</td>
<td>3,642</td>
<td>3,812</td>
</tr>
<tr>
<td>ADD/ADHD</td>
<td>102,519</td>
<td>107,058</td>
<td>112,143</td>
<td>114,357</td>
</tr>
<tr>
<td>Bleeding Dis.</td>
<td>4,094</td>
<td>4,246</td>
<td>4,462</td>
<td>4,431</td>
</tr>
<tr>
<td>Cardiovascular</td>
<td>20,634</td>
<td>21,746</td>
<td>21,097</td>
<td>21,358</td>
</tr>
<tr>
<td>Cerebral Palsy</td>
<td>3,811</td>
<td>3,727</td>
<td>3,808</td>
<td>3,564</td>
</tr>
<tr>
<td>Cystic Fibrosis</td>
<td>625</td>
<td>610</td>
<td>660</td>
<td>628</td>
</tr>
<tr>
<td>Sickle Cell</td>
<td>1,679</td>
<td>1,869</td>
<td>1,983</td>
<td>1,923</td>
</tr>
<tr>
<td>Spina Bifida</td>
<td>742</td>
<td>747</td>
<td>714</td>
<td>663</td>
</tr>
<tr>
<td>Tourettes</td>
<td>2,406</td>
<td>2,452</td>
<td>2,689</td>
<td>2,683</td>
</tr>
<tr>
<td>Skilled Nursing</td>
<td>119,268</td>
<td>133,082</td>
<td>155,431</td>
<td>147,286</td>
</tr>
</tbody>
</table>
• Part-time CSN
  - Who is covering when CSN not in district?
    - Students must be added to covering CSN caseload
    - Students are to be under CSN caseload at all times
SCHOOL HEALTH SERVICES

• Supplemental staff
  - Can’t carry a caseload
  - Must function under their own license
  - Must be under the direction of the CSN
  - Follow responsibilities:
    ▪ Perform daily care of students
    ▪ Assist with completion of mandated screens and exams
- LPN
  - Must function as part of a team
  - Cannot carry a caseload
  - Cannot substitute for a CSN
  - May not use the title school nurse

- Non-certified RN
  - Cannot carry a caseload
  - May not use the title school nurse
• Provision of services by:
  • EMTs
    • 28 PA Code, § 1003.23
      • Scope of practice performed under medical command or Statewide BLS medical treatment protocols
    • Scope of practices does not include
      • Routine administration of medications
      • Supervising students self-administering medications
• Provision of services by:
  ✩ Athletic Trainers (now licensed)
  ✩ Act 123 of 2011

  ✩ Management and provision of care of injuries to a physically active person
  ✩ Use of modalities such as mechanical stimulation, heat, cold, light, air, water, electricity, sound, massage and the use of therapeutic exercises, reconditioning exercise and fitness programs
  ✩ Shall not include administration of any controlled substance
• Provision of services by:
  💪 Agency Staff

  💪 CSN still responsible for students receiving 1:1 nursing care while under school jurisdiction

  💪 School needs medical orders to provide care in case agency nurse is absent
• School jurisdiction
   Public School Code, Section 510
    ▪ School board may adopt rules during the time students are under supervision of school, including time spent in coming to and returning from school.
   22 Pa. Code, Section 15.1
    ▪ ...equal opportunity to participate in the school program and extracurricular activities...
• School jurisdiction
  - U.S. Dept. of Education
    - Students with disabilities may not be excluded from participating in nonacademic services and extracurricular activities on the basis of disability.
    - Students must be provided opportunity to participate in nonacademic services equal to that provided to persons without disabilities.
• Public School Entities (school district, charter and cyber charter schools, comprehensive CTC, Intermediate Unit)
  ➢ Follow provisions of:
    ➢ Article XIV of PA Public School Code
    ➢ 28 PA Code, Chapter 23
• Who’s responsible for provision of services?
  - Part-time CTC
    - May have their own CSN
    - Services from School District where located
    - Supplemental staff working with home SD CSN
  - Homeschool students
    - School district approved home education plan
    - Not officially enrolled as SD student
• Who’s responsible for provision of services?
  - Licensed, Private Academic
  - Non-public, Unlicensed
  - Alternative Education
  - Approved Private
  - Behavioral Health/Day Treatment
  - Other Private, Non-Licensed
Who’s responsible for provision of services?

- Private Residential Rehabilitation Institute
- Private Tutor
- Residential Treatment Facility
- Special Education
- State Juvenile Correctional
- Early Intervention
• Provision of school health services in other educational settings
  - If student enrolled in school district:
    - School district is responsible for provision of school health services.
  - If student withdraws from school district:
    - Other educational entity is responsible for provision of school health services;
    - Entity may request services from school district where located.
• School Nurse Act, Act 707 of 1962
  - Required equal health services for public and non-public school pupils
  - Considered revolutionary at the time
  - Responsibility on public school administrators
  - Services to be rendered in school student attends
• 28 PA Code

§ 23.51. Children to be provided nursing services. A child in private, parochial and public schools shall be provided with school nurse services in the school which the child attends.

§ 23.52. Administration. The school nurse services shall be provided through the public school system and the administration of this service shall be the responsibility of the public school administrator in consultation, as needed, with the private or parochial school administrator.
Evaluation will be specific to educational specialist

Based on Charlotte Danielson

*Enhancing Professional Practice: A Framework for Teaching*

Domains:
- Planning and Preparation
- Environment
- Delivery of Service
- Professional Responsibilities
• School Nurse Rubric
  - Developed using Scope and Standards of Practice from ANA
• School Dental Hygienist
  - Patterned after School Nurse Rubric

- [Link](http://www.education.pa.gov/Teachers%20-%20Administrators/Educator%20Effectiveness/Pages/Non-Teaching-Staff.aspx)
DENTAL HEALTH SERVICES

• Mandated
  - Dentist completes exams on students in mandated grades

• Dental Hygiene Services
  - Dental Hygienists completes screens and provides education for students in identified grades
• Dental Examinations
  ▪ Public Health Dental Hygiene Practitioner
    ▪ Must have PDE certification to function in school
    ▪ Mandated and Dental Hygiene program
  ▪ Mandated Dental Program exams must be completed by a dentist
    ▪ May not send dental hygienist
• Supports legal/licensure requirements
• Provides historical record of care
• Facilitates care team communication
• Develops aggregated reports of student needs
• Supports care planning
• Describes emergency care planning
• PA Public School Code, § 14-1402. Health services

  (b) For each child of school age, a comprehensive health record shall be maintained by the school district or joint school board, which shall include the results of the tests, measurements and regularly scheduled examinations and special examinations herein specified.
§ 14-1409. Confidentiality, transference and removal of health records

All health records established and maintained pursuant to this act shall be confidential, and their contents shall be divulged only when necessary for the health of the child or at the request of the parent or guardian to a physician legally qualified to practice medicine and surgery or osteopathy or osteopathic surgery in the Commonwealth.
• § 14-1409. Confidentiality, transference and removal of health records

In the case of any child of school age who enrolls in any school, public or private, in any district and who previously attended school in another district in Pennsylvania, the district or school wherein the child is newly enrolled shall request and the district or school where the child previously attended shall surrender the health record of the child.
§ 14-1409. Confidentiality, transference and removal of health records

School districts, joint school boards or private schools, shall not destroy a child's health record for a period of at least two years after the child ceases to be enrolled, but may surrender such child's health record or portion thereof to his parent or guardian if the child does not re-enroll in an elementary or secondary school in Pennsylvania.
• 28 PA Code, § 23.8. Maintenance of medical and dental records

  (a) School districts and joint school boards shall maintain comprehensive medical and dental records of each individual child.

  (b) The records shall contain all the information the school obtains concerning the health of the child.
§ 23.55. Maintenance of health records

Health records shall be maintained for each child. These records shall be kept in the school building where the child attends school and shall be available to the school nurse at all times. Records shall be transferred with the child when he moves from one school to another or from one district to another.
• § 23.72. Maintenance of records

School nurses shall maintain comprehensive health records of each child and records of school nursing services.

• § 23.74. Assist in interpreting health needs

School nurses shall assist in interpreting the health needs of individual children to parents and teachers and assist families to utilize community resources for improving the health of their children.
• § 23.75. Provide information

School nurses shall provide current information for use of school personnel on such subjects as the growth and development pattern of children, first aid practice, accident prevention, communicable disease regulations, home nursing and civil defense, and shall assist in evaluating the content material used for health teaching, and offer assistance in providing sources of information.
• PA Nurse Practice Act, Section 3. Registered Nurse, Clinical Nurse Specialist, Use of Title and Abbreviation “R.N.” or “C.N.S.”; Credentials; Fraud.

• (a) Any person who holds a license to practice professional nursing in this Commonwealth, ... shall have the right to use the title “registered nurse” and the abbreviation “R.N.” No other person shall engage in the practice of professional nursing...
49 PA Code, § 21.11. General functions

(a) The registered nurse assesses human responses and plans, implements and evaluates nursing care for individuals or families for whom the nurse is responsible. In carrying out this responsibility, the nurse performs all of the following functions:
§ 21.11. General functions

(d) The Board recognizes standards of practice and professional codes of behavior, as developed by appropriate nursing associations, as the criteria for assuring safe and effective practice.

• (a) A registered nurse shall:
  (4) Safeguard the patient’s dignity, the right to privacy and the confidentiality of patient information.
  (5) Document and maintain accurate records.
ANA/NASN Scope and Standards of Practice: School Nursing, 2\textsuperscript{nd} ed.

1. Assessment
   Documents relevant data in a retrievable format.

2. Diagnosis
   Documents diagnoses or issues in a retrievable format that facilitates the determination of the expected outcomes and plan.

3. Outcomes Identification
   Documents expected outcomes as measurable goals.
ANA/NASN Scope and Standards of Practice: School Nursing, 2nd ed.

4. Planning

   Develops an individualized plan...
   Documents the plan in a manner that uses
   standardized language or recognized terminology.

5. Implementation

   Documents implementation and any modifications, including
   changes or omissions, of the identified plan in the
   appropriate health and educational records.
ANA/NASN Scope and Standards of Practice: School Nursing, 2nd ed.

6. Evaluation

Documents the results of the evaluation.

7. Ethics

Upholds healthcare consumer confidentiality...
Takes appropriate action regarding instances of illegal, unethical or inappropriate behavior...
Speaks up when appropriate to question healthcare practice when necessary for safety...
• Family Educational Rights and Privacy Act (FERPA)

- Protect privacy of student education records (inc. health records) maintained by a school
- All schools receiving federal funds
- Right of parents to inspect & review record
  - Right transfers to student at age 18
  - Request needs to be in writing
- Written log of all who access records
  - Include name, title, reason for access, date and time
• Family Educational Rights and Privacy Act (FERPA)

  • “Legitimate educational interest”
    • Need to know to benefit the student
    • Does not require personnel to be trained in confidentiality requirements
  • Personal or sole possession notes made by school staff are not considered education records
  • Records may be disclosed to comply with a “judicial order or lawfully issued subpoena”
• Individuals with Disabilities Education Act (IDEA)

- Create health records for eligible students
- Parent request to review records in writing
  - School has up to 45 days to respond
- Requires school maintain record of all who accessed educational records
• Americans with Disabilities Act (ADA)/Section 504 of the Rehabilitation Act of 1973

- Create health records about students with special health care needs
- Requires school maintain record of all who accessed educational records
- Parent request to review records should be in writing
• Health Insurance Portability and Accountability Act (HIPAA)
  
  - Requires health care providers to keep confidential personally identifiable health records
  - School educational records not generally bound by HIPAA
    - Exception: Medicaid reimbursement; School-based health centers
“Documentation of care is synonymous with care itself and failure to document implies failure to provide care.” (Schwab and Gelfman)

- Accurate, objective, concise, thorough, timely & well organized
- Legible and written in ink
- Include date and exact time with each entry
- End each entry with signature and title
- Do not leave blank spaces
• Able to be authenticated
  ▪ Author identified
  ▪ Nothing added or inserted
• Avoid terms suggestive of an error
  ▪ Don’t chart that an incident report was completed
• Avoid late entries
  ▪ If necessary, be sure to mark as “late entry”
• Chart only for yourself
• Use only standard abbreviations and measurements
• Names of other students should not be recorded in any health record but their own
• Try not to change pens while writing an entry
  ▪ If must change pens, document reason why
• Never document on a task before it’s completed
• Should be based on nursing classification languages
• Maintain confidentiality, security and privacy of records
• What to document:
  - Assessments
  - Clinical problems
  - Communications (including telephone, fax or e-mail)
    - Other health care professionals
    - School staff
    - Parents/guardians and other family
    - Students
  - Medication administration
  - Order acknowledgement/clarification
  - Plans of care
  - Student responses and outcomes
• Documentation 101:
  ▪ Timely Charting
  ▪ Use of abbreviations
  ▪ Didn’t chart it, didn’t do it
  ▪ Don’t use white out
  ▪ Cross out error with single line and initial, date and time
DOCUENTATION CONCERNS

- Conflicting laws (education vs health, state vs federal)
- Duplication of records
- Lack of standardization
- Time documenting takes time away from direct care
- Administration interpretation of laws/regulations differ from nursing interpretation
  - Nursing standards of documentation do not change across practice settings.
• Never recopy pages of a health record
• Don’t erase or use white-out
• Draw line through the error, initial line & write correct entry
• If enter information on wrong chart, line through incorrect entry, initial and date and note: “Entry made in error.”
CONFIDENTIALITY

- FERPA - may share for “legitimate educational interest”
  - Will further a student’s academic achievement
  - Maintain a safe and orderly teaching environment
- Share specific information and interpretation, not health record itself
- CSN (per state regulation) is responsible for maintaining and interpreting student health information
• National Task Force on Confidential Student Health Information
  - Access should be strictly limited to licensed health professionals
  - Best to interpret their meaning
  - Policy should grant school health records same protections as medical records
• National Task Force (cont)
  - Only share information that will directly benefit the student’s academic success

• No difference between electronic and paper records
  - Expectation of confidentiality the same
• Sharing Health Information
  • Expectation of privacy
  • FERPA - educational need to know

• School nurses are the “keeper” of the health records.
  • Maintain and interpret record
  • Ensure information is held in secure, confidential manner
• Access to student health records
  • Substitutes
    • Must have access to student information in order to provide appropriate care
    • Must be able to authenticate author of records
    • Provider of care is to document the care
    • Documentation is to be completed in a timely manner
• Electronic vs. paper records
  ▪ May keep health record electronically
    ▪ Not necessary to maintain paper record
    ▪ May scan paper record into electronic format
      ▪ Shredding of original paper record- up to school policy
  ▪ Electronic must keep track of changes to record
Areas of consideration:

- Confidentiality
- Security
- Legal implications
- Stand-alone nursing program vs module in education program
- Loss of data
• Confidentiality
  - Same confidentiality requirements as paper records
  - Audit of access - records user’s trail of access
  - Multiple layers of access (partitioning)
  - Set up office so computer screen can’t be seen
  - Limit time open before screensaver appears
  - CSN is trustee of health information
    - Should be person responsible for approving access to student health records
HEALTH RECORDS

Security

- Access
  - Refuses access if multiple incorrect attempts to enter password
  - Multiple layers of access
  - Access for substitutes
  - Consequences for inappropriate access

- Data
  - Secure server
  - Protections against loss or damage
• Legal implications
  - Must provide assurance that record has not been altered from original state (overwrite protection)
  - Same legal requirements as paper records
  - Authentication - legally recognized electronic signature
HEALTH RECORDS

• Legal implications
  • Audit log - log of changes to prove record is original entry & not changed in any way
  • Verification - date/time stamp for original entry and any changes
Stand-alone nursing program vs component of educational program

- **Stand-alone nursing program**
  - Often uses nursing language
  - Limited access to sensitive data
  - May not allow direct communication with education staff

- **Component of educational program**
  - Access to education data (grades, absences)
  - Direct communication with education staff
  - Increased risk of unauthorized access
• Miscellaneous considerations
  - Availability of training and support
  - Availability of computer
  - Comfort of CSN with use of technology
  - Procedure for transferring record to another school
    - Within district
    - To another school entity
  - Laptop vs desk top computer
• Transferring health records
  • Pa Public School Code, 14-1402.
    • Maintain comprehensive health record
  • 28 PA Code, 23.55
    • Records shall be kept in building where child attends
    • Records shall be transferred with child
• Transferring health records
  - No differentiation between:
    - In-state and out-of-state transfers
    - Cyber or charter school and school district
  - School may keep a copy but original comprehensive record is to be transferred
• Transferring health records
  - Student no longer enrolled in SD
    - No educational need to have access to their record
  - If student transfers, print copy of record to send to receiving school
    - Should be separated from academic records
    - Marked as confidential
• Electronic Signature
  • Acceptable
  • Must be able to verify order came from the provider
• Provider order without signature
  • Not acceptable
• Health logs
  - Sign-in logs okay (name, time of arrival, time of departure)
  - Individual record for each student for assessment and treatment

• Plans of care
  - Standard of nursing practice
• E-mails are not secure
  - Be careful about sending identifiable health information

• Division of School Health
  - Remove identifiable information on students before sending e-mail
  - Don’t have “educational need to know”

• Right-to-Know policies
• Report suspected case(s) of communicable disease
  • Call the District Office or State Health Center
  • Talk to staff – DO NOT leave messages
  • List of reportable diseases in Chapter 27 PA regulations
    • http://www.pacode.com/secure/data/028/chapter27/subchapBtoc.html
• Abuse
  • AAP- Suspected Child Abuse and Neglect Program (SCAN)
    • Document injuries, statement made by child and action taken
    • Document ChildLine notified or who was contacted to “cause a report to be made”
    • Copy of CY47 should be place in student health record
      • Add note (if available) whether outcome was unfounded, founded or substantiated
• Abuse (Cont)
  • Family Policy Compliance Office (FPCO), US Dept. of Education
    • Parents have a right to access student records
    • School may copy records and redact name of reporter

• Photos of injuries
  • Dependent on school policy
• Accident/Incident Reports
  • Student Health Record, document:
    • Objective recording of the incident
    • Quotes from student
    • Assessment and intervention
    • Communication with parent/guardian
  • Accident/Incident Report Form
    • Filed according to school policy
    • Do not mention in student health record
    • Intended for purposes of risk management
• Suspected Drug/Alcohol Use
  - Document in student health record:
    - Objective findings
    - Quotes from student
    - Assessment and intervention
    - Communication with parent/guardian
• Minor Consent Act
  - PA law allows minors (under age of 18) to consent to variety of medical testing and treatment
  - Parental consent not needed
  - Ex. Pregnancy, birth control, mental health, sexually transmitted infections

• FERPA doesn’t recognize minor consent to treatment statutes
• Individualized Health Care Plan (IHP)
• Emergency Care Plan or Action Plan (ECP or EAP)
• Individualized Transportation Plan (ITP)
• Individualized Education Program (IEP) with medical component
• 504 Accommodation Plan
• Medication orders


(a) A licensed registered nurse may administer a drug ordered for a patient in the dosage and manner prescribed.

Nurses must have an order for any medication (prescription, over-the-counter, herbal remedies, sunscreen, etc)
MEDICATION ISSUES

- Nurses may only accept orders from approved licensed prescribers
  - Parents are not recognized as licensed prescribers
  - Prescriber must be licensed to practice within Pennsylvania
  - List of licensed prescribers, Appendix G of medication guidelines
• Medication orders (cont.)
  ✶ Dosages must be specific
  ✶ Administer “per packaging instructions” not acceptable

• Standing orders
  ✶ New school year begins July 1\textsuperscript{st}
  ✶ Need orders for activities prior to start of school (ex. Band camp)
  ✶ Written to cover volunteer nurses or students in private/non-public schools
• Nurses may not delegate administration of medications to unlicensed school staff
• Administering medications requires the judgment and assessment skills of a licensed nurse.
• Nurses may train unlicensed school staff to administer:
  - Epinephrine auto-injectors
  - Rescue asthma inhalers
• Require licensed medical professional to administer
  - Insulin
  - Intranasal Versed
  - Diastat
  - Glucagon
GOOD SAMARITAN ACT

- Section 8331. Medical
- Section 8332. Nonmedical
  - Must have current certification in first aid, advanced life saving or basic life support
- Section 8337.1 School Employees
  - Specific to services rendered to students
- PP. 101-102 medication guidelines
• Waiver of liability
    - Required parents to sign “Prescription Medication Consent Form”
      - Included waiver of liability.
      - Stated that school officials had discretion not to administer a medication
      - Parents signed but deleted the liability waiver
• Waiver of liability (cont)
  ✞ OCR found school in violation of Section 504 of the Rehabilitation Act
  ✞ Student required administration of medication in order to benefit from education
  ✞ School obligated to ensure medication is administered
MEDICATION ISSUES

• Pharmacy Act, 63 P.S. § 390-8 (2)
  ❯ Unlawful for “any person not duly licensed as a pharmacist...to engage in the practice of pharmacy...”
    ❯ Includes preparing, compounding and dispensing of drugs and devices
  ❯ Taking medication from the original container and placing it in another container or envelope and relabeling it for administration by school personnel could be considered dispensing and is not within the scope of nursing practice.
• 49 PA Code § 21.11 (c)
  “The registered nurse may not engage in areas of highly specialized practice without adequate knowledge of and skills in the practice areas involved.”

• In accordance with standard nursing practice, the nurse may refuse to administer or permit the administration of a medication, which based on his/her assessment and professional judgment, has the potential to be harmful, dangerous or inappropriate.
• Role of the CSN
  - Adhere to nursing standards and nurse practice act
  - Assess student health needs and develop plan(s) of care
  - Participate in multidisciplinary meetings
  - Provide direction and oversight to other members of school health care team
  - Provide education to staff on policies, procedures and plans of care
  - Administrate and document medications
• Medication Variances (Errors)
  - Incorrect: medication, student, doses, technique, time, and/or route of administration; omitted doses
  - Document
  - Report to parent/guardian, administration, physician
  - Response to be educational, not punitive
  - Opportunity to review procedures
MEDICATION ISSUES

- Provider orders
  - Is provider aware orders may also be for school staff?
  - If a school district covers non-public/private schools, orders must be written for students who are provided school health services by XYZ school district.
EPINEPHRINE AUTO-INJECTORS

- School Bus Drivers Manual – PennDOT

- Providing emergency care - Section I
  - Depends on school district and bus company policy
  - May administer epinephrine auto-injectors – pg. I-9
Chronic Diseases

With the passage of federal laws, such as Section 504 of the Rehabilitation Act and Americans with Disabilities Amendments Act, schools are required to provide reasonable accommodations for students with chronic diseases. The Quick Links will provide specific resources for the most common chronic diseases in school age children (asthma, diabetes, life threatening food allergies and seizure disorders) and those not as common (for example, sickle cell, tourette's syndrome, and cystic fibrosis) along with pertinent educational opportunities, statistics and grant opportunities (if available).

Educational Opportunities

When Seizures Are More Than Seizures: An Introduction to Psychogenic Non-Epileptic Seizures (PNES). Tuesday, April 7, 2015, 3:30 - 4:30pm. Sponsored by the Epilepsy Foundation, this webinar will introduce PNES and compare the episodes to epileptic seizures, as well as explain how PNES is diagnosed and treated.

Connecting Chronic Health Conditions with School Attendance: Improving Data Collection and Use
Archived webinar from the National Association of Chronic Disease Directors. This webinar is available

Asthma
Diabetes
Life Threatening Allergies
Seizure Disorders
Other (A - M)
Other (N - Z)
CHRONIC CONDITIONS

DIABETES

According to the Centers for Disease Control and Prevention (CDC), diabetes is defined as a group of diseases marked by high levels of blood glucose resulting from defects in insulin production, insulin action, or both.

These guidelines were developed to provide schools with key information, tools and resources that help them effectively manage diabetes in students. This guide is based on national best practices and Pennsylvania law/regulations for creating a safe, nurturing learning environment for students with diabetes. School administrators, nurses, teachers, office personnel and other staff, along with parents and students, all play an important role in diabetes management, and important information and tools are included for all of these stakeholders. These guidelines are designed to define and clarify the school's role and responsibility in the management of diabetes. Accordingly, an entire section is devoted to summarizing state and federal laws related to diabetes management in schools.

Guidelines for Pennsylvania Schools for the Administration of Medications and Emergency Care (2010)
These guidelines have been written to assist schools in the development and implementation of
Diabetes Statistics

Public school entities are required to submit an annual report which includes aggregate totals for select chronic diseases, including diabetes type 1 and diabetes type 2. Data is not available by age, grade, sex, race, or building level. The reports below contain county level data.

DISCLAIMER: Responsibility for data accuracy lies with the individual school entities. The Department specifically disclaims responsibility for any analyses, interpretations or conclusions made by the user.

2012 - 2013
2011 - 2012
2010 - 2011
2009 - 2010
2008 - 2009

Updated: December 30, 2014
• Plans of Care
  - Individualized Education Program (IEP)
  - 504 Service Agreement
  - Individualized Health Care Plan (IHP)
  - Emergency Action Plan
  - Individualized Transportation Plan
• Procedures
  - Catheterizations, tube feedings, nebulizer treatments
    - Responsibility of a nurse
  - Blood glucose testing
    - Unlicensed school staff may be taught to perform
    - Interpretation responsibility of a nurse
• Procedures (cont)
  • Toileting/Diapering
    • Unlicensed school staff may perform

• “The Medically Fragile Child”
  • [https://www.aft.org/pdfs/healthcare/medicallyfragilechild0409.pdf](https://www.aft.org/pdfs/healthcare/medicallyfragilechild0409.pdf)
    • Flow chart- delineation of care (pp. 63-65)
• Transition Planning
   Transition to Adult Living in Pennsylvania
     English and Spanish
• School jurisdiction
  - Public School Code, Section 510
    - School board may adopt rules during the time students are under supervision of school, including time spent in coming to and returning from school.
  - 22 Pa. Code, Section 15.1
    - ...equal opportunity to participate in the school program and extracurricular activities...
• Students to receive services while under school jurisdiction
  ▪ “Door to door”
  ▪ School sponsored activities
    ▪ Field trips
    ▪ Extracurricular activities
    ▪ Transportation
• School jurisdiction
  U.S. Dept. of Education
  ▪ Students with disabilities may not be excluded from participating in nonacademic services and extracurricular activities on the basis of disability.
  ▪ Students must be provided opportunity to participate in nonacademic services equal to that provided to persons without disabilities.
• Field Trips (Section VIII in medication guidelines)
  - Can’t refuse student attendance on field trip because nurse not available (IDEA/504)
  - Advance notice to nurse for planning
  - Limit # of field trips from building per day
• Field Trips
  - Invite parent or parent designee
  - Utilize licensed nurse from sub list
  - Licensed volunteer
    - Need clearances
    - Approval as district volunteer
  - Provider permission required to change dosage time or skip a dose of medication
• Subs show certificate of training completion to each school
  - Still need school specific procedures

• Parent attending field trip
  - Required to have clearances, unless only going to care for their child
  - Training at discretion of school (not required by Act 126)
• Emergency Medications
  • PA Public School Code
    • Students may self carry and administer asthma inhalers/epinephrine auto-injectors (Epi-pens)
  • Nurses may train unlicensed staff to assist with the administration of rescue inhalers.
• Out of state field trips
  • Check with Board of Nursing in visiting state
  • Obtain their answer in writing, if possible

• Delegation to student by parent not allowed
  • Student under school jurisdiction
  • Zero tolerance drug policies

• Self-administration by student
  • Emergency medications only (epinephrine autoinjectors/asthma inhalers)
• Extracurricular activities
  • Same rules as field trips
• Pre-pouring medications
  • 28 PA Code, Part IV Health Facilities
    • § 109.62. Administration of drugs
      (a) The individual preparing a dose of medication for administration shall also administer it, except as provided by subsections (b) and (c).