

SCHOOL HEALTH UPDATE 2017

Division of School Health

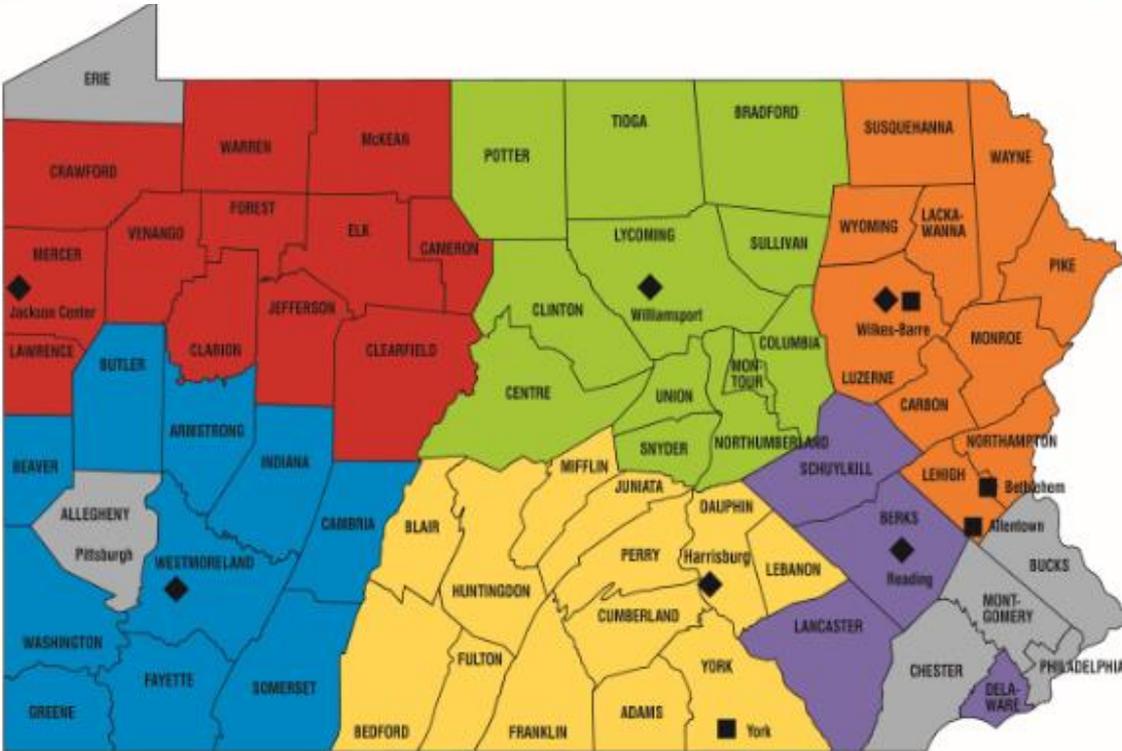
Bureau of Community Health Systems

DIVISION OF SCHOOL HEALTH

- Jill Clodgo, acting chief
- Vacant, state school health consultant
- Chris Weltmer, administrative officer
- Bureau administrative support

SCHOOL HEALTH CONSULTANTS

Pennsylvania Department of Health Community Health Districts



NC, NE and SW
Sheri Mountz
570-826-2062
smountz@pa.gov

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

SCHOOL HEALTH WEBSITE

The screenshot displays the Pennsylvania Department of Health website. At the top, the PA.GOV logo is on the left, and navigation links for MY HEALTH, MY RECORDS, HEALTHCARE FACILITIES, and YOUR DEPT. OF HEALTH are on the right. A central navigation menu lists various health topics, with 'SCHOOL HEALTH' highlighted. The main content area features a search bar, a Google search engine, and social media links for Facebook, Twitter, and Health Stats. A banner image shows a diverse group of people celebrating, with the text 'pennsylvania DEPARTMENT OF HEALTH' and 'TOM WOLF, GOVERNOR | DR. KAREN MURPHY, SECRETARY' overlaid.

PA.GOV

MY HEALTH MY RECORDS HEALTHCARE FACILITIES YOUR DEPT. OF HEALTH

A-Z HEALTH TOPICS

EMERGENCY MED SERVICES

EMERGENCY PREPAREDNESS

ENVIRONMENTAL HEALTH

IMMUNIZATIONS

INFANT AND CHILDREN

MEN'S HEALTH

ORGAN DONATION

SCHOOL HEALTH

WOMEN'S HEALTH

Enter Search Term Search

powered by Google

FACEBOOK

TWITTER

HEALTH STATS

pennsylvania
DEPARTMENT OF HEALTH

TOM WOLF, GOVERNOR | DR. KAREN MURPHY, SECRETARY

Pennsylvania Department of Health > My Health

Welcome to the My Health section for the Pa. Department of Health

[A to Z Health Topics](#)

[Emergency Medical Services](#)

[Emergency Preparedness](#)

Information regarding the following areas:

www.health.pa.gov
www.health.pa.gov/schoolhealth

Department of Health
Division of School Health

SCHOOL HEALTH WEBSITE (cont.)

[Pennsylvania Department of Health](#) > [My Health](#) > School Health

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 1-877-PAHEALTH.

[2016 Recommended Essential References for all School Health Offices](#)

Updated: Feb. 2017

QUICK LINKS

[School Health Topics A - Z](#)

[School Health Annual Reimbursement Request System \(SHARRS\)](#)

HOT TOPICS

[2016 Summer School Health Update](#)

NEW! [Management of Students with Diabetes- Act 86 of 2016](#)

[Epinephrine Auto-injector Administration](#)

[Medical Marijuana](#)

[Narcan \(naloxone\) Program for Schools](#)

Immunization Resources

[2016- 17 Letter to Parents \(English\)](#)

SCHOOL HEALTH WEBSITE (cont.)

SCHOOL HEALTH TOPICS A – Z

[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#)

A

Abuse (Child)	Access (Pennsylvania School-Based Access Program)
Accommodations	Adult Protective Services
Allergies	Arthritis
Asthma	Attention Deficit/Hyperactivity Disorder (ADD/ADHD)
	Automated External Defibrillator (AED)

B

DIABETES LEGISLATION

Act 86 of 2016 amended the Public School Code (Article XIV; 24 P.S. 14-1401 to 14-1424) with a number of provisions related to diabetes care in Pennsylvania schools.

▶ DIABETES LEGISLATION (cont.)

Act 86 permits school nurses, in consultation with their chief school administrator or a designee, to identify at least one school employee (“Identified Employee”) in each school building attended by a student with diabetes to be designated in a student’s service agreement or Individualized Education Program (IEP) to administer diabetes medications, use diabetes monitoring equipment and provide other diabetes care.

DIABETES LEGISLATION (cont.)

- Schools decide whether they want to allow unlicensed personnel to provide care to students with diabetes.
- Identified school employees shall complete annual education.
 - ▣ Employee shall have the right to decline the responsibility.

DIABETES LEGISLATION (cont.)

Section 1414.3 - Education of School Employees in Diabetes Care and Management

- Will be developed by Department of Health in conjunction with Department of Education
- Will include educational modules and guidelines

DIABETES LEGISLATION (cont.)

The educational modules shall include review of the responsibilities and instructions.

- Level 1 – All school personnel
- Levels 1 and 2 – Staff responsible for students with diabetes
- Levels 1, 2 and 3 – Administration, nurses and school staff designated as trained diabetes personnel

DIABETES LEGISLATION (cont.)

Educational modules will include:

- An overview of three types of diabetes
 - ▀ Type 1
 - ▀ Type 2
 - ▀ Gestational diabetes
- Means of monitoring blood glucose
- Symptoms and treatment of blood glucose levels outside target ranges, symptoms and treatment for hypoglycemia, hyperglycemia and other potential emergencies

DIABETES LEGISLATION (cont.)

Section 1414.4 Diabetes Care in Schools

- Parent/guardian shall provide written authorization as part of diabetes medical management plan.
- Parent/guardian and health care practitioner signs authorization that employee may administer specified medications.
- Diabetes care shall be consistent with school policy and student's service agreement.
- Bus drivers may be provided with information based on service agreement.

DIABETES LEGISLATION (cont.)

Section 1414.5 Possession and Use of Diabetes Medication and Monitoring Equipment

- The parent or guardian is to provide the following:
 - ▣ An order from the student's provider with the administration directions and emergency directions;
 - ▣ A written request from the parent that the school follow the provider orders;
 - ▣ A written statement by the school nurse that the student has demonstrated they are capable; and

DIABETES LEGISLATION (cont.)

- A written statement from the student that they received instruction from their provide on the proper use and handling of equipment and will not allow other students to access their supplies.
- The school may revoke the student's privileges due to noncompliance

Section 1414.6 Liability

- Nothing in section 1414.3, 1414.4 or 1414.5 shall be construed to create, establish or expand any civil liability on the part of any school entity or school employee

DIABETES LEGISLATION (cont.)

Section 1414.7- Coordinating,
Supervising or Educating not
Considered Delegation

Section 1414.8- Diabetes Care in
Nonpublic Schools

- May comply with education of school employees and provision of diabetes-related care to a student

BLOODBORNE PATHOGENS

The “Guidelines on Bloodborne Pathogens for the Public Sector” apply to all employers and employees in the public sector who are not covered by federal standards of the Occupational Safety and Health Administration (OSHA).

BLOODBORNE PATHOGENS (cont.)

Hepatitis B Vaccination

Within 10 working days of assignment, the employer shall make the hepatitis B vaccination series available to all employees who have occupational exposure, such as administering injectable medications and exposure to blood and body fluids.

BLOODBORNE PATHOGENS (cont.)

Such vaccinations shall be:

- at no cost to the employee;
- done at a reasonable time and place during working hours;
- supervised by a licensed physician/ licensed health care professional; and
- according to the latest recommendations of the U.S. Public Health Service (USPHS).

BLOODBORNE PATHOGENS (cont.)

- Employees who refuse the vaccination must sign a declination form, but can later decide to receive the vaccination under the same conditions listed in sub paragraph (a).
- Employees shall be offered booster doses if these are later recommended by USPHS.
- Additional information is available on school health website under Bloodborne Pathogens.

EPINEPHRINE

Epinephrine Opt-Out

Act 195 of 2014 provides parents with the right to exempt their student from administration of epinephrine. For schools that have adopted epinephrine auto-injector administration policies, the Division of School Health has finalized a template “opt-out” form. This form is not to be placed on the school’s website. If the attachment is not available, contact your regional school health consultant. Schools must also provide notice to parents that an opt-out is available. The recommended process is:

EPINEPHRINE (cont.)

Place the following information in the student handbook:

“The Pennsylvania Public School Code, Section 1414.2(g) allows parents/guardians to request an exemption to the administration of an epinephrine auto-injector for their student. In order to request this exemption, contact the school nurse to make an appointment to discuss this decision, review and sign the opt-out form.”

Parents/guardians wishing to choose this option should meet with the school nurse to discuss their decision and then review and sign the opt-out form in the presence of the school nurse.

What is the Safe Harbor?

The Safe Harbor guidelines state that a caregiver, who has completed an application provided by the Pennsylvania Department of Health and been approved, may not violate Act 16 or the Pennsylvania Controlled Substance, Drug, Device and Cosmetic Act. The caregiver legally obtains medical marijuana in one of the approved forms under Act 16 to administer to a minor (under the age of 18) who suffers from one of the 17 serious medical conditions covered by Act 16.

MM CAREGIVER

Who is considered a “caregiver” under the act?

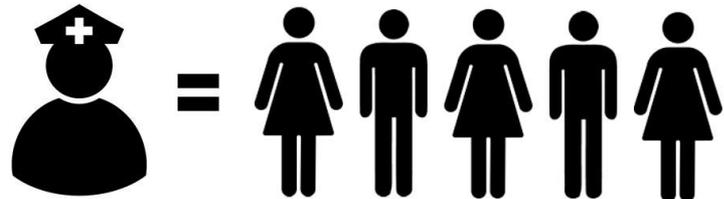
- An individual 21 years of age or older, unless otherwise authorized:
 - Parents
 - Legal guardians
 - Designees
- An individual fitting the description above who has successfully completed an application to the PADOH and completed a background check



MM CAREGIVER (cont.)

Can a caregiver be designated by more than one patient?

Yes. A caregiver can have up to **five** patients.



WHO IS ELIGIBLE FOR MM?

Who will be able to obtain medical marijuana?

Patients who are residents of the commonwealth who have a serious medical condition that have been certified by a practitioner may obtain medical marijuana. A patient may name a caregiver, and the caregiver may obtain the medical marijuana for the patient.



PHYSICIAN'S ROLE IN MM

How can a physician participate in the medical marijuana program?



- Hold a valid Pennsylvania medical license
- Apply to the PADOH
- Complete a four-hour training

HOW TO APPLY FOR MM

HOW TO GET MEDICAL MARIJUANA IN PENNSYLVANIA WHEN THE PROGRAM IS FULLY IMPLEMENTED

1



Discuss Medical Marijuana with your doctor.

2



Get a recommendation from your doctor saying that medical marijuana is right for you.

3



Apply to the Department of Health for a medical marijuana ID card.

4



Visit a dispensary in Pennsylvania to obtain medical marijuana.

▶ MM SERIOUS MEDICAL CONDITIONS

What is a “serious medical condition” under the act?

- Amyotrophic Lateral Sclerosis
- Autism
- Cancer
- Crohn’s Disease
- Damage to the nervous tissue of the spinal cord with objective neurological indication of intractable spasticity
- Epilepsy
- Glaucoma
- HIV (Human Immunodeficiency Virus) / AIDS (Acquired Immune Deficiency Syndrome)
- Huntington’s Disease
- Inflammatory Bowel Disease
- Intractable Seizures
- Multiple Sclerosis
- Neuropathies
- Parkinson’s Disease
- Post-traumatic Stress Disorder
- Severe chronic or intractable pain of neuropathic origin or severe chronic or intractable pain in which conventional therapeutic intervention and opiate therapy is contraindicated or ineffective
- Sickle Cell Anemia

APPROVED FORMS OF MM

What is medical marijuana?

- Pills, oil, topical forms such as patches or ointments
- A form medically appropriate to vaporize
- Tinctures and liquids



MM IN SCHOOLS

What if a child needs medical marijuana at school?

A **parent, legal guardian** or **caregiver** may administer medical marijuana to their child/student on school premises provided that the parent, legal guardian or caregiver:

1. provides the **school principal** with a copy of the **Safe Harbor Letter**; and
2. notifies the school principal, in advance, of each instance on which the parent or caregiver will administer the medical marijuana to the child/student.

The **school principal** shall provide notification to the **school nurse** in each instance a **parent or caregiver** will be administering medical marijuana to the child/student as well. The parent/caregiver shall **follow all school protocols** applicable to visitors to the school during the school day.

QUESTIONS ABOUT MM

Questions?

Check the Department of Health website for updates on implementation.
Visit www.health.pa.gov and click on "Pa. Medical Marijuana"
under Hot Topics.

To contact the staff at the Pennsylvania Office of Medical Marijuana,
send an email to RA-DHMedMarijuana@pa.gov.

NARCAN (NALOXONE)

- 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](#)

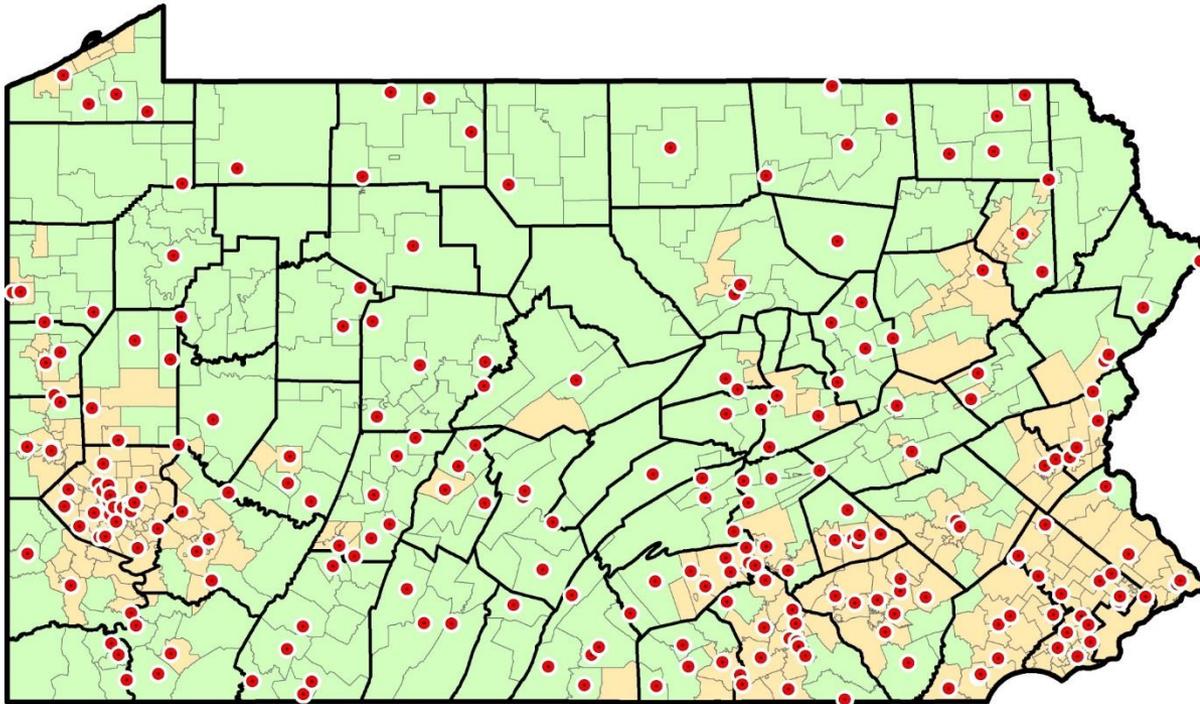
NALOXONE (cont.)

- Adapt Pharma Program
 - ▣ Free, two-dose carton to public schools housing grades 9-12
 - ▣ Intranasal spray



NALOXONE (cont.)

Public High Schools with Naloxone, 2016-2017



Urban School District
Rural School District

Public High Schools with Naloxone

Public high schools that accepted free Naloxone from Adapt Pharma.
Data excludes six Pittsburgh School Districts high schools and Intermediate Units that could not be geocoded.
Data from April 26, 2016 to of March 10, 2017. Data source: Pennsylvania Department of Health.

Prepared by the Center for Rural Pennsylvania

NALOXONE (cont.)

- Adapt Pharma Program
 - ▣ Application packet submitted
 - ▣ Standing order from the school physician submitted
 - ▣ Administrative policy in place attestation
 - ▣ Approved PADOH training has been taken by school staff attestation
 - ▣ <http://www.health.pa.gov/My%20Health/School%20Health/Pages/Narcan-Grant-Application-Packet.aspx>

NALOXONE (cont.)

- Adapt Pharma Program
 - ▣ Distribution through state health centers, county/municipal health departments
 - ▣ Address questions to:
RA-DHNARCAN-SCHOOLS@pa.gov

POTASSIUM IODIDE (KI)

- KI Pre-Distribution Program for Schools
 - Specific only to school entities located within a 10-mile radius
 - Five nuclear power plants in Pennsylvania (Beaver Valley, Limerick Generating, Susquehanna Steam Electric, Three Mile Island and Peach Bottom)

KI (cont.)

- KI Pre-Distribution Program for Schools
 - ▣ Information available on Pennsylvania Department of Health's School Health website
 - ▣ Potassium Iodide Fact Sheet
 - ▣ KI Participation Request and Agreement for Schools
 - ▣ Sample Parent/Guardian Consent Letter

KI (cont.)

- KI Pre-Distribution Program for Schools
 - ▣ Information for School Physician's Standing Order
 - ▣ KI Label and Storage Container
 - ▣ Options for KI Administration
 - ▣ KI Storage and Handling

KI (cont.)

- KI Pre-Distribution Program for Schools
 - ▣ Read the information
 - ▣ Complete the Participation Request and Agreement for Schools
 - ▣ Submit completed request to School Health Nurse Consultant for your District

FIELD TRIP CONSIDERATIONS

- Full document located on School Health website under Field trips
- Children entitled to same health services they need during school day

FIELD TRIPS (cont.)

Consider the following when planning:

- Pennsylvania licensed prescriber order and written parental consent are required for all medications, including OTC's.
- Parent may be asked, but not required, to attend.
- Parent may recruit "parental designee."

FIELD TRIPS (cont.)

- School may not request a parent to sign a waiver of liability in relation to medication administration.
- Self-administration and/or self-carrying may be permitted for certain medications: rescue inhaler, epinephrine auto-injector, and now diabetes medications (Glucagon/insulin).

FIELD TRIPS (cont.)

- EMTs and paramedics function under EMS medical command only, so they may not be utilized.
- Consider Pennsylvania licensed volunteers.

Licensure verification: www.pals.pa.gov

FIELD TRIPS (cont.)

Licensed volunteer must:

- Function within scope of practice;
- Have necessary skills;
- Know plans of care/provider order; and
- Have clearances.

Consider: orientation to district, CPR, first aid, TB test if > 10 hours per week in direct contact with students.

FIELD TRIPS (cont.)

- Out of state: School should ensure licensed nurse or licensed volunteer permitted to practice under Pennsylvania license.

<https://www.ncbsn.org>

- Out of country: U.S. State Department may be of assistance in reaching consulate.

<http://www.state.gov/s/cpr/rls/index.htm>

SCHOOL JURISDICTION

- School jurisdiction
 - ▣ Public School Code, Section 210
 - ▣ School board may adopt rules during 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 (cont.)

- U.S. Department of Education
2013 Guidance
Civil rights protections for students
with disabilities under section 504
- <http://www2.ed.gov/about/offices/list/ocr/letters/colleague-201301-504.html>

SCHOOL JURISDICTION (cont.)

“A school district that offers extracurricular athletics must do so in such manner as is necessary to afford qualified students with disabilities an equal opportunity for participation. This means making reasonable modifications and providing those aids and services that are necessary to ensure an equal opportunity to participate, unless the school district can show that doing so would be a fundamental alteration to its program.”

<http://www2.ed.gov/about/offices/list/ocr/letters/colleague-201301-504.html>

PRIVATE/NON PUBLIC SERVICES

- Provision of School Health Services to Private/Non-Public Schools
 - ▣ School Nurse Act, Act 707 of 1962
 - Equal health services are required for public and non-public schools.
 - Neither the law nor regulation distinguish differences in the level of service to public vs. non-public schools.
 - ▣ Pa. Public School Code, § 14-1401 and 14-1402
 - (1) "Children of school age" ...means every child attending or who should attend an elementary grade or high school, either public or private, within the Commonwealth
 - Section 1402(a.1) requires that "every child of school age shall be provided with school nurse services ..."

PRIVATE/NON PUBLIC SERVICES

- Provision of School Health Services to Private/Non-Public Schools
 - ▣ 28 Pa. Code § 23.74
 - A function of the school nurse is to interpret the health needs of individual children including:
 - ▣ assessment of student health care needs, development of appropriate plans of care, medication administration, first aid and emergency care, etc.
 - ▣ School nurses rotate to **every** assigned building; amount of time necessary is based on assessment of student health needs as determined by the school nurse.

PRE-K AND K

- Schools do not have to provide services to K and/or pre-K if those grades are not offered in the public school, unless there is an memorandum of understanding.
- Schools do have to provide services if the K or pre-K is an “integral” part of the school district.
 - ▀ Integral means that the pre-K is operated by the public school district, not just renting space in the school building.
- Schools may not receive reimbursement via SHARRS for “Pre-K Counts” students, as they already receive funding for these students (double dipping).

ADMINISTRATIVE AUTHORITY

- Responsibility of nurse to determine appropriate level of care
 - ▣ PDE- CSPG 95- Principal
 - A principal may supervise and direct nurses ... exclusive of directing health services controlled by the Nurse Practice Act.
 - ▣ CSPG 101- Paraprofessional
 - A paraprofessional shall not be directed to engage in health-related activities reserved exclusively for licensed professionals.

ADMINISTRATIVE AUTHORITY (cont.)

- In loco parentis
 - ▼ 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.
 - ▼ Does not provide parental authority for medication administration and other nursing functions

SHARING HEALTH INFORMATION

- Sharing health information
 - ▣ 49 Pa. Code § 21.18 Nurse Practice Act
 - Covers standards of nursing conduct, requirement for registered nurses to safeguard patients' dignity, right to privacy and the confidentiality of patient information
 - ▣ ANA Code of Ethics for Nurses
 - Nurse safeguards patient's right to privacy.
 - Nurse has a duty to maintain confidentiality.

SHARING HEALTH INFORMATION (cont.)

- Sharing health information
 - Pa. Public School Code, § 14-1409
 - All health records ... 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 ...
 - 28 Pa. Code § 23.55
 - Health records shall be maintained for each child ... kept in the school building where the child attends ... available to the school nurse at all times ... shall be transferred with the child when he moves from one school to another or from one district to another.

FERPA HIPAA

- Family Educational Rights and Privacy Act
 - Health records maintained by a school district that receives funds under any program administered by the U.S. Department of Education are “education records” subject to the Family Educational Rights and Privacy Act (FERPA).
 - FERPA allows schools to disclose a student’s health and medical information to teachers and other school officials, without written consent, if these school officials have “legitimate educational interests” in accordance with school policy.

FERPA HIPAA (cont.)

- Family Educational Rights and Privacy Act
 - The school district must issue annual notice of rights under FERPA to parents and to students over age 18, which includes information regarding criteria used by the school for determining which school staff members have been designated as “school officials” and what is “legitimate educational interest” for staff access to education records.
 - FERPA@ed.gov

FERPA HIPAA (cont.)

- HIPAA

School nurses may communicate concerns about medical orders or share related health issues or information that may be relevant to the treatment regimen with the physician.

- HIPAA allows the school nurse and physician to communicate with each other without written authorization of the parent if it is for treatment purposes.
- State licensure statutes and professional standards of practice for nurses and physicians require nurses to question/clarify medical orders, when indicated, before carrying them out, regardless of the healthcare setting. They also require physicians to provide nurses with sufficient information for safe execution of the treatment plan.

EDUCATION FOR HOMELESS YOUTH

The definition of a student “awaiting foster care placement” was removed from the definition of “homeless children and youth” effective Dec. 10, 2016.

- Access the current Basic Educational Circular (BEC) from the Department of Education's website [here](#) or by going to www.education.pa.gov and clicking BECs from the first blue column and then scrolling to Education for Homeless Youth.

EDUCATION FOR HOMELESS YOUTH

Questions?

Contact Mr. Storm Camara
Pennsylvania Department of Education
ECYEH state coordinator
717-772-2066
scamara@pa.gov

NURSE PRACTICE ISSUES

- School nurses function under multiple laws:
 - ▣ Nurse Practice Act
 - ▣ Public School Code
 - ▣ Federal accommodation laws
- Licensure requirements in effect regardless of the nurse's practice setting

NURSE PRACTICE ISSUES (cont.)

- 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.

NURSE PRACTICE ISSUES (cont.)

- 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
- CSN substitute
 - ▣ Only CSN can "officially" substitute for another CSN.

➤ NURSE PRACTICE ISSUES (cont.)

- Responsibilities:
 - ▾ Coordinate care
 - ▾ Develop plans of care
 - ▾ Participate in teams (ex. student assistance, IEP)
 - ▾ Communicate with parents
 - ▾ Perform duties exclusively connected with medical and dental school health activities (28 Pa. Code Chapter 23, Section 23.34)

▶ NURSE PRACTICE ISSUES (cont.)

- Supplemental staff:
 - ▣ May not carry a caseload;
 - ▣ Function under their own license; and
 - ▣ Function under the direction of the CSN.
 - Responsibilities:
 - ▣ Daily care of students
 - ▣ Assist with completion of mandated screens and exams

SHARRS

School Health Annual Reimbursement Request System (SHARRS)

Access SHARRS at the following link:

<https://apps.health.pa.gov/sharrs>

Important changes:

- Ungraded special education has been removed from the ADM field, as directed by PDE.
- Grade should be entered as defined in the student's IEP.

SHARRS (cont.)

- An instructions button is located in the top right corner of every page.
- The instructions provide detailed guidance on how to complete the report, manage user accounts and determine which data must be included.
- The instructions button will direct the user to the section of the instructions that correlates to the page the user is on.

SHARRS (cont.)

- SHARRS data is used for statistical reporting and should be accurate.
- A CSN should review prior to submission to ensure medical data is accurate.
- Data errors prolong the time it takes to process the report and may result in a deduction of a school's reimbursement rate.

SHARRS (cont.)

- SHARRS webpage
 - ▣ Tally sheets
 - ▣ Instruction manual
 - ▣ Hard copy report

SBAP AT A GLANCE

School-Based ACCESS Program (SBAP) Nursing Services

SBAP AT A GLANCE (cont.)

SBAP allows local education agencies (LEAs) to seek reimbursement for certain medically necessary health-related services documented in IEPs for Medical Assistance (MA)-eligible students provided in school settings.

- ▀ Includes nursing services and medication administration

SBAP AT A GLANCE (cont.)

- Medical Authorization Requirements

As a condition of Medicaid payment, health-related services identified in a student's IEP must be ordered/prescribed by a licensed practitioner (i.e. CRNP) within their scope of practice, and enrolled in the Medical Assistance (MA) Program.

- Services provided to students prior to the date of the medical authorization are not compensable.

SBAP AT A GLANCE (cont.)

- Practitioner's orders must be documented on prescription or SBAP medical practitioner authorization forms (MPAF).
- Practitioner's orders must be concurrent with the IEP and obtained at least annually, or whenever there is a change to a student's health-related service(s).

SBAP AT A GLANCE (cont.)

Ordering, Referring, Prescribing (ORP) Providers:

- Federal law requires physicians and other practitioners within their scope of practice who order, refer or prescribe services for MA beneficiaries to enroll as MA providers.
- All licensed practitioners within their scope of practice signing prescriptions or MPAFs must be enrolled in the MA program.

▶ SBAP AT A GLANCE (cont.)

- The prescribing practitioner's credentials must be provided on the prescription or MPAF:
 - National Provider Identifier (NPI) – 10-digit number, assigned to the provider on the federal level
 - MA Provider Number – 13-digit number, assigned to the provider on the state level by DHS

SBAP AT A GLANCE (cont.)

- In Pennsylvania, CRNPs must have a collaborative agreement with a licensed physician to order, refer or prescribe services (CRNP Practice [49 Pa. Code Section 21.282a](#)) and to enroll in the MA Program.
- CRNPs signing medical authorizations for SBAP must have a collaborative agreement per their scope of practice.

SBAP AT A GLANCE (cont.)

Enrolling in MA:

MA Program online provider enrollment application:

<https://provider.enrollment.dpw.state.pa.us>

- CRNPs would enroll as Provider Type 09
- DHS provider enrollment hotline 1-800-537-8862

SBAP AT A GLANCE (cont.)

Individual or group services:

- Individual and/or group must be clearly identified on both the MPAF and the IEP with the frequency and duration specified for each type of session.
- A combination of individual and/or group may be listed on the MPAF and the IEP, so long as it is deemed medically necessary and clearly indicates the frequency and duration for each type of session.

SBAP AT A GLANCE (cont.)

- **Compensable examples for IEPs:**
 - “individual speech therapy for 30 minutes 2x per week”
 - “group speech therapy for 30 minutes 2x per month”
- **Non-compensable example for IEPs:**
 - “individual or group therapy for 30 minutes 10x per month” (does not properly identify the service to be provided)

SBAP AT A GLANCE (cont.)

Billing Units:

- Most SBAP services, including nursing services, are billed on a 15-minute unit, with the exception of evaluations and medication administration.
 - Medication administration is billed on a per encounter unit of service.
 - Evaluations are billed on a per evaluation unit of service.

SBAP AT A GLANCE (cont.)

- Medication administration should be logged separately from all other nursing services, since they are separate rates.
- Service minutes can accumulate only when the following occurs: same student, same date and same service.
- Provider logs are required to contain exact “start time” and “end time” – do not round off or round up!

SBAP AT A GLANCE (cont.)

- [Provider Logs](#) for each service type have been updated for FY 2016-2017 dates of service – LEAs can modify templates but must contain all DHS-required fields
- Logs are to be completed by qualified providers only.
- Direct services, face-to-face with the student, are the only ones that are compensable.
- Discussion of “Other Direct Service” – provider must provide a clear description of the service.

SBAP AT A GLANCE (cont.)

Random Moment Time Study (RMTS)

What is the purpose of RMTS?

The Random Moment Time Study (RMTS) methodology is used to select, capture and code moments in time for determining on a statewide basis how frequently participants are involved in a Medicaid billable activity.

SBAP AT A GLANCE (cont.)

- Nurses providing SBAP services can be included on the school's Direct Services Staff Pool and would be eligible to be randomly selected for a "moment" or one minute moment of time.
- All staff receiving a "moment" must respond within five days to be valid.
- It is important for participants to both respond timely to the moment and provide a clear description of the activity during the moment.

SBAP AT A GLANCE (cont.)

- “Moment” notifications are emailed directly to the randomly selected participants each quarter and copied to the school.
- Follow-up questions are used if clarification or additional information is needed to code the moment.
- Failure to respond will disqualify the moment, impacting the state response rate.

SBAP AT A GLANCE (cont.)

RMTS Moment Questions:

1. Were you working during your sampled moment? (If the answer is "no," the survey ends.)
2. Who was with you?
3. What were you doing?
4. Why were you doing this activity?
5. Is this activity regarding a special education student?
6. Is the service you provided part of the child's IEP?

▶ SBAP AT A GLANCE (CONT.)

DHS Contact Information:

SBAP Website:

<http://www.dhs.pa.gov/provider/School-BasedACCESS/>

Becky Ludwick, SBAP director

717-787-5512

rebludwick@pa.gov

MEDICATION ADMINISTRATION

Medication Administration

- All medications in any form (including over-the-counter) must be administered by a licensed medical professional.
- CSN may designate school staff (with proper training) to administer select medications.

MEDICATION ADMINISTRATION

- ▼ Epinephrine auto-injectors
- ▼ Glucagon
- ▼ Insulin
- ▼ Narcan (naloxone)
- ▼ Rescue asthma inhalers

MEDICATION ADMINISTRATION

If staff is designated to administer medication, it requires:

- ▣ School policy;
- ▣ Provider order and permission;
- ▣ Parent/guardian permission; and
- ▣ CSN assessment (training and return demonstration has been successfully completed).
 - ▣ Return demonstration should be at least annually.

MEDICATION ADMINISTRATION

Provider orders are written to cover:

- Non-licensed staff giving emergency medications (rescue inhalers, epinephrine auto-injector, naloxone, insulin/glucagon);
- District licensed nurses providing care at non-public/private schools;
- District volunteers providing care; and
- Supplemental nurse at CTC using district standing orders.

Standing Orders

- Provider orders are good for one year.
- Summer school and other school sponsored activities may need to be considered if standing orders are used over the summer.
- School year officially begins July 1.

Standing Orders (cont.)

- Schools may minimize use of medications under standing orders for various factors, including cost, expiration date, etc.
- OTC's require an order and parent permission.
- Standing orders are null and void if the district loses its school physician, necessitating individual orders.

Standing Orders (cont.)

- Orders must contain exact dose, (age and or weight), route, frequency and indication. (Orders must not state, “per package instructions.”)
- Orders must not require nurse to diagnose. (Example= Tinactin, Lotrimin)

WORKING WITH AGENCY NURSES

- The CSN maintains the caseload at all times the student is under school jurisdiction.
- The agency staff functions as a supplemental staff under the guidance of the CSN.
- The school district must have all the necessary provider orders and nursing plans of care.

WORKING WITH AGENCY NURSES (cont.)

- The school nurse should also receive copies of agency nurse notes to show care provided during school day (maintenance of comprehensive school health record).
- The school nurse should receive copies of the medication administration record (MAR). Meds administered by an agency should be counted in SHARRS.

WORKING WITH AGENCY NURSES (cont.)

- Home Health Agencies function under HIPAA except when in a school setting, at which time they function under FERPA.
- School nurses should be included in care conferences and receive updated orders and plans of care.

POINTS TO REMEMBER

- Do not submit personally identifiable information (PII).
- Report suspected cases and questions related to communicable disease to your local Pennsylvania state health center or (when applicable) the local county or municipal health department.