Nursing Services in Utah Public Schools

2019-2020

Annual Report

Utah Department of Health
Healthy Living Through Environment, Policy, and Improved Clinical Care (EPICC)

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Contents

School Nursing Highlights____________________________________________________1
Utah School Health Workload Census__________________________________________3
Students with Chronic Health Conditions ______________________________________8
School Nurse Funding________________________________________________________10
References__________________________________________________________________11
School Nursing Highlights

Students are best able to achieve their educational potential when they are healthy. Many students in Utah schools have been diagnosed with chronic health conditions that may need interventions while at school. Nursing services to students are individualized to meet the variety of needs of each student. During the 2002 General Legislative Session, the Utah State Legislature encouraged each school district to provide nursing services equivalent to one registered nurse for every 5,000 students, or in school districts with fewer than 5,000 students, the level of services recommended by the Utah Department of Health, as indicated on page 6.

The National Association of School Nurses (NASN) defines school nursing as follows:

“School nursing: a specialized practice of public health nursing, protects and promotes student health, facilitates normal development, and advances academic success. School nurses, grounded in ethical and evidence-based practice, are the leaders that bridge health care and education, provide care coordination, advocate for quality student-centered care, and collaborate to design systems that allow individuals and communities to develop their full potentials (NASN, 2016).”

SCHOOL NURSING SERVICES IN UTAH

The NASN Board of Directors passed a motion stating:

“To optimize student health, safety and learning, it is the position of the National Association of School Nursing that a professional registered school nurse is present in every school all day, every day (NASN, 2017).”

The NASN further states that school nurse workloads should be determined annually, using student and community specific health data (NASN, 2015).

Although data on nursing services in the public schools has been collected for the past several years, data was collected in different ways. It is unclear in the past if ratios included special education students and special education only-school nurses. It is believed the most accurate way to determine school nurse to student ratios for Utah would be to eliminate the special education students and special education only-nurses from the calculations.
What Can School Nurses Do for You?

Based on the Framework for the 21st Century School Nursing Practice, the following are things a school nurse can do for children in Utah:

- **Care Coordination** – This involves case management, chronic disease management, direct care, nursing delegation, and student-centered care. The school nurse develops individualized healthcare plans and emergency action plans for those students with chronic health conditions and ensures the staff in the schools are trained on how to care for those students.

- **Leadership** – School nurses are advocates for the students and the health of the communities they serve. They should be involved in policy development and implementation at the district and school level. They should participate on interdisciplinary teams, sharing their knowledge on how to address the individual needs of the students.

- **Quality Improvement** – School nurses submit data each year through the annual School Health Workload Census. This data shows the school nurse what services are provided to students in Utah. This process also allows them to see where improvements could be made. Evaluation is an important part of the nursing process and a standard of school nursing practice.

- **Community and Public Health** – School nurses are often the only healthcare professional in the school, so they must be knowledgeable on how to expand their focus to the entire school community, not just the students. They should be culturally competent and help their community understand the levels of disease prevention in order to reduce risks. These include vision, dental, and hearing screenings (in some districts) as well as follow-up activities in the event a problem is detected. School nurses also support healthy food service programs and promote healthy physical activity, safe sports policies, and other best practices.

- **Standards of Practice** – The school nurse provides the specialized knowledge, skills, decision-making, and standards for school nursing practice. These include clinical competence, critical thinking, evidence-based practice, and practicing in an ethical way. All of these are guided by the Utah Nurse Practice Act and accompanying rules (UCA 58-31b and R156-31b).

The center of this framework is the student, their families, and the community. By working within the Framework of the 21st Century School Nursing Practice, school nurses can ensure students are healthy, safe, and ready to learn.
Utah School Health Workload Census

Each year, student health information is collected by school nurses and compiled as aggregate data. Some data points collected include the number of registered school nurses, licensed practical nurses, and health aides in schools; total number of students; number of students with chronic health conditions; types and amount of medication administered in schools; and screenings and trainings done by school nurses. The following is a summary of some of the data collected in the 2019-2020 school year.

COVID-19

During the 2019-20 school year the world experienced a pandemic which resulted in the closure of all Utah public schools in March 2020. Data submitted may not reflect actual numbers.

CHRONIC HEALTH CONDITIONS IN UTAH

In the 2019-2020 school year, Utah school nurses submitted data on the following:

Asthma

- 17,896 students were documented to have asthma by a healthcare provider
- Of these, 6,988 students had an individualized healthcare plan or emergency action plan on file

Anaphylaxis (to anything)

- 10,379 students were documented to have anaphylaxis by a healthcare provider
- Of these, 5,863 students had an individualized healthcare plan or emergency action plan on file
- 31 doses of epinephrine auto-injector were administered at school

Type I Diabetes

- 2,257 students were documented to have type I diabetes by a healthcare provider
- Of these, 2,120 students had an individualized healthcare plan on file
- Three doses of glucagon were administered to students while at school

Type II Diabetes

- 91 students were documented to have type II diabetes by a healthcare provider
- Of these, 68 students had an individualized healthcare plan or emergency action plan on file
Seizures (all types)

- 3,450 students were documented to have any type of seizure diagnosis by a healthcare provider
- Of these, 2,347 students had an individualized healthcare plan or emergency action plan on file
- 819 school employee volunteers were trained to administer emergency seizure rescue medication
- 327 students had physician orders for emergency seizure rescue medication at school
- 53 doses of emergency rescue medication were administered at school

MEDICATIONS IN UTAH SCHOOLS

- 31 students received emergency epinephrine injections at school
- 3 students received glucagon at school
- Currently 28 school districts in Utah have a naloxone policy in place and have a supply of naloxone on hand in case of an opioid overdose. Two doses of naloxone were administered at school.

HEALTH SCREENINGS IN UTAH SCHOOLS

School nurses in Utah perform a variety of screenings, including vision screening as required by law (UCA 53A-11-203). They may also provide hearing, oral, and postural (scoliosis) screenings, as determined by district or school policy.

- 334,075 students received distance vision screening
- 25,041 students received referrals for distance vision screening
- 7,219 students received treatment for vision issues
- 2,352 students received financial help for vision exam/glasses
- 16,592 students received an oral health screening
- 10,197 students received an oral health varnish application
- 198 students received restorative dental services as part of a school-sponsored program

TRAINING BY SCHOOL NURSES IN UTAH SCHOOLS

Because there is not a nurse in every Utah school, nurses regularly train school staff to care for the students with chronic health conditions. This is done annually to ensure all staff (with a need to know) are ready to meet the needs of students with certain chronic conditions.
• 20,417 staff were trained by a school nurse on general asthma information
• 24,573 staff were trained by a school nurse on general anaphylaxis information
• 18,606 staff were trained by a school nurse on general diabetes information
• 20,274 staff were trained by a school nurse on general seizure information

In the 2019-2020 school year, students received the following trainings by a school nurse:

• 20,539 students attended a school nurse-led maturation class
• 3,655 students attended a school nurse-led asthma class
• 41,668 students attended a school nurse-led hygiene class
• 52,717 students attended a school nurse-led handwashing class
• 26,510 students attended a school nurse-led dental care class
• School nurses also taught classes/trainings on healthy eating, lifestyle, nursing careers, basic first aid, nutrition, tobacco cessation, HIV/AIDS, STD prevention, hearing loss prevention, bullying, abstinence, adoption, bloodborne pathogens, heart disease, head injury, bike safety, diabetes awareness, food allergy awareness, poison control, lice, sleep, human relationships, mental illness, body image, media influence, addiction, vaping/chewing tobacco, and alcohol and drug abuse

UTAH SCHOOL NURSE TO STUDENT RATIOS FOR SCHOOL YEAR 2019-2020

Each school district and charter school is a different community with different needs. Where some school local education agencies (LEAs) may need one nurse for each school, another may have one registered nurse covering several schools, while yet other school districts may have the assistance of health clerks (who must be supervised by a registered nurse). The National Association of School Nurses (NASN) recommends a professional registered school nurse be present in every school all day, every day, to optimize student health, safety, and learning.
<table>
<thead>
<tr>
<th>2019-2020 School Year</th>
<th>Number of Utah Students Enrolled in School Districts</th>
<th>Number of Utah School Nurse (RN) FTEs in School Districts</th>
<th>Ratio of School Nurses to Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-12 students enrolled in school districts</td>
<td>519,570</td>
<td>166*</td>
<td>1:3,130</td>
</tr>
<tr>
<td>Does not include students with disabilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>K-12 students enrolled in school districts</td>
<td>589,276</td>
<td>188**</td>
<td>1:3,134</td>
</tr>
<tr>
<td>All K-12 students, including those with disabilities</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*School nurses providing services only to students enrolled in general education. Does not include nurses who only provide services to students receiving special education services.

**Including school nurses providing services to students in general education and those students receiving special education services. Does not include nurses who only provide services to students in pre-kindergarten.

**UTAH DEPARTMENT OF HEALTH RECOMMENDATIONS FOR SCHOOL NURSE STAFFING**

The Utah Department of Health believes it optimizes student health, safety, and learning when professional registered school nurses are assigned based on the individual needs of the school and community. Factors that must be included when determining safe school nurse staffing levels are student enrollment numbers, health acuity level of the student population, and social determinants and health disparities of the school and community.

Based on these criteria, the Utah Department of Health recommends:

1. One full-time registered school nurse per school; or
2. Several full-time registered school nurses per school (for schools with high health acuity/social determinants of health/disparity needs); or
3. One full-time registered school nurse to no more than five schools (for schools with lower health acuity/social determinants of health/disparity needs). This permits the school nurse to visit each school one day per week for supervision and evaluation of delegated tasks to unlicensed assistive personnel.
2019-2020 School Nurse (RN) to Student Ratios by District

<table>
<thead>
<tr>
<th>District</th>
<th>Student Enrollment (2019 Oct)</th>
<th>Total School Nurse (RN) FTE</th>
<th>Nurse to Student Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alpine</td>
<td>81,532</td>
<td>25.25</td>
<td>2,718</td>
</tr>
<tr>
<td>Beaver</td>
<td>1,524</td>
<td>0.27</td>
<td>5,644</td>
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<tr>
<td>Box Elder</td>
<td>11,914</td>
<td>4</td>
<td>2,979</td>
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<tr>
<td>Cache</td>
<td>18,802</td>
<td>4.5</td>
<td>4,178</td>
</tr>
<tr>
<td>Canyons</td>
<td>34,178</td>
<td>8</td>
<td>3,418</td>
</tr>
<tr>
<td>Carbon</td>
<td>3,472</td>
<td>0.75</td>
<td>4,629</td>
</tr>
<tr>
<td>Daggett</td>
<td>189</td>
<td>0.09*</td>
<td>2,100*</td>
</tr>
<tr>
<td>Davis</td>
<td>72,897</td>
<td>16</td>
<td>3,471</td>
</tr>
<tr>
<td>Duchesne</td>
<td>5,164</td>
<td>3</td>
<td>1,721</td>
</tr>
<tr>
<td>Emery</td>
<td>2,141</td>
<td>0.4</td>
<td>5,353</td>
</tr>
<tr>
<td>Garfield</td>
<td>899</td>
<td>0.25</td>
<td>3,596</td>
</tr>
<tr>
<td>Grand</td>
<td>1,498</td>
<td>1</td>
<td>1,498</td>
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<tr>
<td>Granite</td>
<td>63,989</td>
<td>11</td>
<td>4,266</td>
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<tr>
<td>Iron</td>
<td>9,544</td>
<td>5</td>
<td>1,909</td>
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<tr>
<td>Jordan</td>
<td>56,339</td>
<td>13</td>
<td>2,617</td>
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<tr>
<td>Juab</td>
<td>2,655</td>
<td>1.25</td>
<td>2,124</td>
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<tr>
<td>Kane</td>
<td>1,275</td>
<td>0.05</td>
<td>25,500</td>
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<tr>
<td>Logan</td>
<td>5,420</td>
<td>No RN</td>
<td>0*</td>
</tr>
<tr>
<td>Millard</td>
<td>2,973</td>
<td>1</td>
<td>2,973</td>
</tr>
<tr>
<td>Morgan</td>
<td>3,194</td>
<td>1</td>
<td>3,194</td>
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<tr>
<td>Murray</td>
<td>6,425</td>
<td>2.37</td>
<td>2,711</td>
</tr>
<tr>
<td>Nebo</td>
<td>33,379</td>
<td>8.5</td>
<td>3,338</td>
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<tr>
<td>North Sanpete</td>
<td>2,507</td>
<td>1.48</td>
<td>1,694</td>
</tr>
<tr>
<td>North Summit</td>
<td>1,044</td>
<td>0.87</td>
<td>1,166</td>
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<tr>
<td>Ogden</td>
<td>11,460</td>
<td>3</td>
<td>3,820</td>
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<tr>
<td>Park City</td>
<td>4,757</td>
<td>6.35</td>
<td>749</td>
</tr>
<tr>
<td>Plute</td>
<td>279</td>
<td>0.15</td>
<td>1,860</td>
</tr>
<tr>
<td>Provo</td>
<td>16,603</td>
<td>4.25</td>
<td>3,321</td>
</tr>
<tr>
<td>Rich</td>
<td>498</td>
<td>0.075*</td>
<td>6,760*</td>
</tr>
<tr>
<td>Salt Lake City</td>
<td>22,017</td>
<td>6</td>
<td>3,670</td>
</tr>
<tr>
<td>San Juan</td>
<td>2,891</td>
<td>2</td>
<td>1,446</td>
</tr>
<tr>
<td>Sevier</td>
<td>4,548</td>
<td>1.3</td>
<td>3,498</td>
</tr>
<tr>
<td>South Sanpete</td>
<td>3,230</td>
<td>2.2</td>
<td>1,468</td>
</tr>
<tr>
<td>South Summit</td>
<td>1,701</td>
<td>2</td>
<td>851</td>
</tr>
<tr>
<td>Tintic</td>
<td>214</td>
<td>No RN</td>
<td>0*</td>
</tr>
<tr>
<td>Tooele</td>
<td>16,608</td>
<td>4.2</td>
<td>4,192</td>
</tr>
<tr>
<td>Uintah</td>
<td>6,989</td>
<td>3</td>
<td>2,330</td>
</tr>
<tr>
<td>Wasatch</td>
<td>7,146</td>
<td>1.75</td>
<td>4,083</td>
</tr>
<tr>
<td>Washington</td>
<td>33,884</td>
<td>9.3</td>
<td>3,405</td>
</tr>
<tr>
<td>Wayne</td>
<td>436</td>
<td>0.15</td>
<td>2,907</td>
</tr>
<tr>
<td>Weber</td>
<td>32,588</td>
<td>11.7</td>
<td>3,595</td>
</tr>
</tbody>
</table>

*Last year’s data, no data submitted this school year
Students with Chronic Health Conditions

Utah Nurse Practice Act (58-31b-101) and Rules (R156-31b-701a) allows school nurses to train and delegate nursing responsibilities to non-health professionals or unlicensed assistive personnel to meet the needs of medically complex students under certain circumstances. In Utah, it is common for one nurse to train and oversee many unlicensed assistive personnel who then perform the medical related tasks delegated by the school nurse.

Specific numbers of students with health concerns, medically complex students, medically fragile students, and nursing-dependent students were collected for the first time during the 2019-2020 school year.

Students were classified into five levels:

- **Level 1**: No/minimal occasional healthcare concerns: The student’s physical and/or social-emotional condition is stable and they see the school nurse only once a year for screening and occasionally as needed.

- **Level 2**: Health concerns: The student’s physical and/or social emotional condition is currently uncomplicated and predictable. Occasional monitoring by the school nurse varies from biweekly to annually. These students may require an individualized healthcare plan or emergency action plan. Examples of chronic health conditions these students may have include, but are not limited to:
  - Attention Deficit Disorder (ADD) or Attention Deficit with Hyperactivity Disorder (ADHD)
  - Mild asthma
  - Mild allergies
  - A condition which requires administration of medication

- **Level 3** – Medically complex: The medically complex student has a complex and/or unstable physical and/or social-emotional condition that requires daily treatments and close monitoring by the school nurse. These students should have an individualized healthcare plan or emergency action plan. Examples of chronic health conditions these students may include, but are not limited to:
  - Anaphylaxis potential (requires epinephrine)
  - Cancer
  - Diabetes without complications
  - Moderate to severe asthma (requires use of an inhaler)
Mild to moderate seizure disorder (may or may not need to have emergency seizure rescue medication)

- Spina Bifida who self-catheterize
- Students requiring fewer than 15 minutes of daily care (such as catheterizing, supervising diabetes care, tube feeding, etc.)

**Level 4 – Medically fragile:** These students live with the daily possibility of a life-threatening emergency. These students must have an individualized healthcare plan. Examples of chronic health conditions these students may have include, but are not limited to:

- Unstable or newly diagnosed diabetes (needs supervision)
- Spina Bifida that requires assistance with catheterization
- Frequent, severe seizure disorder requiring emergency seizure rescue medication
- Students requiring more than 15 minutes of daily care (such as catheterizing, supervising diabetes, tube feeding, etc.)

**Level 5 – Nursing dependent:** Nursing dependent students require 24 hours/day, frequently one-to-one, skilled nursing care for their survival. Many are dependent on technological devices for breathing. These students must have an IHP. Examples of chronic health conditions these students may have include, but are not limited to:

- Students with a trach requiring suctioning

During the 2019-2020 school year, there were 59,326 students with health concerns (level 2), 16,703 students with a medically complex health condition (level 3), 2,550 students who were medically fragile (level 4), and 163 students considered nursing dependent (level 5) in Utah public schools.
School Nurse Funding

Funding sources vary across the country for school nurses. Most school nurses in Utah are hired by the school or school district, with about one-third of school nurses being funded through a local health department. In one school district, the school nurse is hired through the local medical center and their home health division.

There are two grants which LEAs can apply for through the Utah State Board of Education to provide matching funds for the LEA to hire school nursing services.

WHAT WOULD IT TAKE TO FULLY FUND NURSES?

• There were 666,858 students in Utah public schools in the 2019-2020 school year
• 1,035 total public schools in Utah (charter and school district)
• 247 total school nurses in Utah (including part-time, charter schools, typical, and special education nurses)
• 170 school nurse full-time employee (FTE) equivalent (not including special education or pre-kindergarten nurses)
• For each school in Utah to have a full-time nurse, an additional 865 school nurses would need to be hired
• $100,000 estimated additional cost for one FTE school nurse (including benefits, Bachelor’s degree prepared registered nurse)
• $86,500,000 estimated additional cost to have one full-time school nurse for every Utah school1

SUMMARY

There are many factors to consider when determining the appropriate school nurse staffing level in each school or school district. While total student enrollment has been used primarily in the past, student needs should also be addressed, such as specific healthcare needs of the population and social determinants of health (poverty, language barriers, etc.). As a result, there is no “one size fits all” number that will work in all cases.

1035 schools minus 170 current FTE = 865 x $100,000
References


Utah Department of Health, (2017). *Recommendations for school nurse workload (staffing).*