INTRODUCTION

With the rising costs of healthcare, it is no wonder that school districts are looking for ways to save money. Some districts have become very creative in staffing school sites, however there are California Education Codes which determine who can do what. Before we go into that, let’s take a look at who are the different health care providers employed at schools.

Ideally, schools should be staffed with a Credentialed School Nurse (CSN). This field of nursing requires a bachelor’s degree as well as a Registered Nurse license, and a health services credential. Some schools employ agency nurses who have a RN license only or Licensed Vocational Nurses. Unlicensed Assistive Personnel (UAP) are also used. In reviewing the mandates, there are several functions that only the CSN can perform. These tasks include but are not limited to: vision and hearing screenings, developing Individualized Health Plans, IHPs, 504 accommodation plans, training and supervising Specialized Healthcare Procedures, and medication administration training and oversight. CSNs are also responsible for annual staff in services including Blood borne Pathogens and Child Abuse Training.

Vision and hearing screenings are state mandated and are usually performed every three years or more often should there be a teacher or parent request. Children who are due for their triennial IEP assessments are also screened. Credentialed school nurses have an audiometry certification and have been trained in vision screenings.

IHPs are basically care plans to be followed at school for students with a variety of medical conditions ranging from asthma to irritable bowel syndrome. Should a student need more specific accommodations based on his or her medical diagnosis, CSNs must implement a medical 504 plan.

Training staff on Epi pen and glucagon administration is also part of their job description. Although UAP cannot administer insulin, they can supervise diabetic care if authorized by the endocrinologist, however training also must be performed. The CSN must complete the documentation of competency in performing specialized health care and all trainings must be student specific.

Annually, all staff must be trained on Blood Borne precautions and Child Abuse Prevention. This is a requirement by Occupational Health and Safety and all staff must sign off that they have been trained. All employees are mandated reporters and must submit reports should child abuse be suspected.

Since other staff are limited to their roles played at the school site, the question remains if the CSN is not available is having another discipline in place necessary? From personal experience, having a warm body in place is better than not having anyone. Credentialed school nurses can delegate many tasks such as data input, following up with vision and hearing referrals, dealing with medication issues, immunization review and follow up, helping with health office visits, answering the phone, and sending parent reminders for mandates such as California Health and Disability Prevention (CHDP) and oral health assessments.

Under California Education Codes (CEC) 49422, 49426 and 56234 both the CRN and RN can perform general health assessments, however the LVN is limited to vital signs only whereas the UAP cannot perform any health assessments. Specialized healthcare services direct care must be performed under the supervision of the CSN, CEC 49423.5. Delegation of assigned tasks and training consume much of the Credentialed School Nurses time, however having someone in place to support the school and provide services to the students is of great help.

Although the above-mentioned guidelines are specific to California schools, other states may have similar Education codes and mandates. The bottom line is with the increasing complexity of students attending school, providing adequate health care coverage will provide for a safe and conducive environment for learning.