

Randolph Township Public Schools

Nursing Services Plan
2012-2013
(NJAC 6A:16-2.1 through 2.5)

District Contact Person:
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Physician Approved:



Signature *Michael Falco, MD*

11/12/12

Date

Board of Education Approved

Date

RANDOLPH TOWNSHIP SCHOOLS
NURSING SERVICES PLAN
2012-2013

Staffing model for the Delivery of School Health Services
Severity Coding Definitions

Level I: Nursing Dependent

Nursing dependent students require 24 hours/day, frequently one-to-one, skilled nursing care for survival. Many are dependent on technological devices for breathing, for example, a child on a respirator, and/or continuous nursing assessment and intervention. Without effective use of medical technology and availability of skilled nursing care, the student will experience irreversible damage or death. Before a student enters school, an appropriate plan of care will be provided by the student's physician and approved by the school physician.

Staffing Requirements

Immediate availability of the nurse (registered nurse or licensed practical/vocational nurse as determined by the physician) on the premises being within audible and visual range of the student is required. The Certified School Nurse is apprised of the student's needs prior to the assignment of duties to the individual's care giver.

Statutory Authority:

N.J.A.C. Chapter 16, 6A:16-2.1 (f) Certified School Nurse-Duties specific.
Nurse Practice Act

Level II : Medically Fragile

Students with complex health care needs in this category, daily face the possibility of a life threatening emergency requiring the skill and judgment of a professional nurse. An IHP and EHCP is developed by the Certified School Nurse which is complete, current, and available at all times to school personnel in contact with these children on a need to know basis.

Medically Fragile Examples

Anaphylaxis

Cardiac impairment

Cystic Fibrosis

Diabetes – unstable or newly diagnosed with unscheduled blood sugar monitoring and insulin coverage

Gastrointestinal disorder

Neurologic impairment

Psychiatric disorder

Severe seizure disorder requiring medications that can be administered only by a registered nurse.

Severe asthma with potential for status asthmaticus.

Staffing Requirements

Each child in this category requires a full time Certified School Nurse in the building (if the Certified School Nurse is absent, a licensed registered nurse may "substitute" in her absence). The school nurse is on the premises and is easily accessible to students/staff. The student has been assessed by the Certified School Nurse prior to the assignment/delegation of any duties to the care giver.

Level III: Medically Complex

These students have complex or unstable physical and/or social-emotional conditions that require daily treatments and close monitoring by a Professional Registered Nurse. Life-threatening events are unpredictable but possible. Limited treatments such as Epi-pen delegation, monitoring and reporting of current signs and symptoms can be delegated as well as Glucagon delegation, monitoring and reporting of severe hypoglycemic signs and symptoms can be delegated. Appropriate delegation guidelines must be adhered to.

Medically Complex Examples

- ADHD - with medications
- Bleeding disorders
- Cardiac impairment requiring accommodations
- Cancer
- Complex mental or emotional disorders
- Diabetes
- Endocrine disorders – with medication
- Gastrointestinal disorders
- Head aches/migraines
- Hearing impairment - requiring assistive devices (hearing aids/FM system)
- Immune disorders
- Moderate to severe asthma:
Inhaler, peak flow meter and nebulizer at school
- Integumentary
- Organ transplant recipients
- Orthopedic conditions requiring accommodations
- Preteen or teenage pregnancy
- Psychiatric disorder – requiring medication
- Seasonal allergies with medication
- Seizure disorder
- Severe hypoglycemic event
- Taking carefully timed medications
- Taking medications with major side effects
- Unstable metabolic conditions
- Homicidal and/or suicidal behavior

Staffing Requirements

Students in this category require the presence of a Certified School Nurse in the building for daily intervention (if needed) or in anticipation of potential health emergencies. The Certified School Nurse is responsible for the development of the IHPs and IEPs which reflect appropriate assessments and reassessments as indicated.

Level IV: Health Concerns

The student's physical and/or social/emotional condition is currently uncomplicated and predictable. Occasional monitoring is required. Required monitoring varies from weekly to annually. IHPs are appropriate based on diagnosis.

Health Concerns Examples

ADHD – non-medicated
Cancer
Cardiac impairment without accommodations
Dental disease
Diabetes self-managed by the student
Dietary restrictions
Eating disorders
Endocrine disorder – without medication
Gastrointestinal disorders including lactose intolerance
Headache/migraines
Hearing/vision impairment not requiring assistive devices
Psychiatric disorder
Seasonal allergies without medications
Sensory impairment
Orthopedic conditions not requiring accommodations
Uncomplicated pregnancy

Staffing Requirements

Children placed in this category should have their health needs assessed at least once a school year by the Certified School Nurse at the beginning of the school year or at the time of diagnosis. Reassessment occurs as the condition requires and the nurse's judgment determines. The Certified School Nurse must be available for supervision of all delegated duties.

Treatments and Interventions

Certain treatments and / or interventions may be needed at any level of care. The following are some examples and not limited to:

Blood glucose testing
CPR
Dressing Change
Gastric tube feeding
Medication management
Monitor blood pressure
Monitor disability
Monitor illness
Monitor weight
Nebulizer treatments
Peak flow monitoring
Sterile bladder catheterization
Toileting

Extenuating Factors

Social/emotional factors, co-morbidity (more than one diagnosis), as well as certain risk factors can raise the severity level and require increased monitoring. Examples of some common risk factors are:

Substance abuse

Chronic illness

Violence

Abuse/neglect

Divorce, separation, remarriage

Death in the family

English as a second language

High mobility, moving from school to school

Homelessness

Poverty / low income

Nursing Care In Schools

The Certified School Health Nurse in the Randolph Township School District has a multitude of roles within the scope of her professional practice. The school nurses' primary responsibility is always to the students. Students attend school with a broad range of health conditions from potentially life threatening conditions to easily correctable conditions. Within this broad spectrum are a multitude of problems that could affect the quality of educational achievement and impede the student's ability to fully participate in the educational process. In an ongoing effort to ensure children remain healthy and ready to learn, the school nurse assumes the following roles: child advocate, communicator, counselor, educator, investigator, manager, mediator, nursing care provider and recorder.

Child Advocate

One of the most important roles of the school health nurse is to function as a child advocate within the school as well as in the community. With the best interest of the student in mind the School Nurse works closely with staff and families to insure that all health needs and accommodations are identified and met. Advocacy can extend beyond these areas to include referrals for health services, DYFS, counseling, community programs, and health-based camps. If the school nurse's assessment indicates that a student may be a danger to themselves or others, the Chief School Administrator, Counselor and parents are notified immediately.

Communicator

As communicator, the School Nurse uses many different approaches to disseminate important information to students, parents, staff members, physicians, health care agencies, administrators and governmental agencies. The methods most commonly employed are: flyers; meetings with Child Study Team, faculty, Intervention and Referral Services (I&RS), parents, PTO, Section 504 Committee and students; personal letters; e-mail; reporting forms from specific agencies; school functions, school notes; school web site or telephone conferences.

Counselor

The School Nurse functions in the role of counselor to students, parents and staff alike regarding health, developmental, psychosocial and personal concerns. The reasons are varied and include: abuse / neglect, bullying, conflicts with peers, parents or sibling, cutting, depression, fear, feelings of being ignored or lacking attention at home, financial concerns, inappropriate behavior of others towards them, issues with being caught in the middle of a divorce or just need to talk to someone.

The school nurse works closely with the Child Study Team and school counselor regarding student issues. Serious problems are referred to the appropriate individuals/agencies.

Educator

The role of educator is a major component of the School Nurse's responsibility. The Certified School Nurse is an educator who can develop and present age-appropriate, developmentally-based lessons.

Formal and informal teaching takes place continuously during the delivery of nursing care. The School Nurse must effectively and clearly communicate medical information-both verbally and in writing to students, parents, teachers and the medical community in terms they understand.

Investigator

Consultations with parents and guardians, students, pediatricians, specialists, health agencies, classroom teachers, counselors, dietary and custodial personnel are sought in order to gather information. As investigator, the School Nurse obtains information regarding: communicable disease patterns, current health information relevant to the

practice of school nursing, current health practices, environmental concerns, especially as it pertains to students with specific health concerns, patterns of possible abuse/neglect, safety issues, especially as it pertains to students with specific problems and student health histories.

Manager

The School Nurse works in an environment where priorities can change many times a day. She assumes a wide variety of roles and must meet specific deadlines according to pre-determined schedules. In order to balance all of the demands made on her, at any given time, the School Nurse must also be an efficient manager. In addition to the daily routines/occurrences, the nurse, as manager, must always be alert and ready to assess and manage any emergency/health problem that presents itself during the school day. For this reason, the School Nurse must be able to prudently and independently prioritize and deliver health care that best meets the needs of the child in the situation at hand. Prioritization, delegation and communication are the key components to an effective manager.

Nursing Care Provider

Within the role of nursing care provider, the School Nurse utilizes all aspects of the nursing process, which includes:

- Assessment
- Planning
- Implementation
- Evaluation

Annual responsibilities:

- Screening of all students per state mandates for: height, weight, blood pressure, vision, hearing, and scoliosis
- Development of an IEP (Individual Emergency Plan) and IHP (Individual Health Plan) for all students with acute or chronic medical problems. The national nursing standard terminology is incorporated in the development of the IHP:
 - NANDA (Nursing Diagnosis Classification System)
 - NOC Outcomes (Nursing Outcomes Classification)
 - NIC Interventions (Nursing Interventions Classification)
- The IHP (Individual Health Plan) also contains:
 - Initial and on-going assessments
 - Planning appropriate interventions
 - Providing education to specific individuals

Implementation of the plan and the evaluation of its effectiveness

- Participation in the development of all IEP and 504 Plans.

Daily and on-going responsibilities

- Assessment of each student visiting the Nurse's Office
- Administration of medications
- Monitoring each child's IHP, Section 504 Accommodation Plan & I&RS Plan

Recorder

- Documentation is becoming an ever increasing role for School Nurses. Policies, procedures, medical protocols and New Jersey Statutes are just some of the areas that dictate the type of documentation that is required. The most frequent forms of documentation are:
 - Accident Reports for students and staff
 - Animal bite reporting
 - Communicable disease reporting
 - Employee Records
 - TB Test results
 - POSHA Compliance

- Health notices mailed home for all failed screenings
- Follow-up notices mailed home every few months until a physician's report is received
- High absentee rate and symptom trends documented and sent to the county
- Individual Health Charts (A-45 Form from the New Jersey Department of Education)
- Immunizations
- Allergies, surgeries and other health problems
- Annual screening results
- Medications
- Physical exams
- TB testing results
- Individual student records for health office visits:
 - Date of visit
 - Time of visit
 - Chief complaint
 - Observations
 - Documentation of care
 - Parental notification if indicated
 - Time released to return to class or sent home
- The Confidential Medical Report is developed each school year and updated regularly with changes and additions. HIPPA permission is required to include most of the students with health issues that impact the school day. Students with life threatening conditions are automatically included on the report as this is considered a "need to know" situation. The report is distributed to specific faculty members and kept in a secure location

The Randolph Township Summary of Nursing Services Required to Address Specific Health Care Needs of Individual Students (N.J.A.C. 6A:16-2.1 (b)2 (ii))

Board of Education provides the following health care services to address student needs.

Services Required to Address Specific Health Care Needs of Individual Students with acute care needs, chronic illness, special health needs, procedures and administration of medications, procedures or treatments.	CG	FB	IR	SH	RMS	RHS
Building enrollment (student/staff) total	590	652	562	703	1376	1922
Building enrollment special services (students)	49	110	49	76	222	285
Daily practice- <u>multiple</u> students treated on a daily basis	daily	daily	Daily	Daily	Daily	Daily
First-Aid, splinting, Ace-wrap etc.	daily	daily	Daily	Daily	Daily	Daily
Nursing Diagnosis /Case-finding of actual or potential physical health problems	daily	daily	Daily	Daily	Daily	Daily
Provision of nursing care for actual or potential emotional health problems	daily	daily	Daily	Daily	Daily	Daily
Health counseling	daily	daily	Daily	Daily	Daily	Daily
Health teaching in health office	daily	daily	Daily	Daily	Daily	Daily
Dental: tooth avulsion, caries, braces, etc.	daily	daily	Daily	Daily	Daily	Daily
Medication Administration – PRN, diabetes, asthma, allergy/anaphylaxis, pain, gastro-intestinal, topical, etc.	daily	daily	Daily	Daily	Daily	Daily
Accident reports (student/staff)	44	25	16	25	90	210
Level I – Nursing Dependent	0	0	0	0	0	0
Level II – Medically Fragile	61	65	44	77	86	378
Level III – Medically Complex	65	116	85	56	335	503
Level IV – Health Concerns	50	76	145	146	431	1239
Health Screenings Ht., Wt., & BP yearly	495	590	493	623	1226	1637
Auditory screening K, 1, 2, 3, 7, 11- yearly	495	369	290	486	440	411
Scoliosis screening biennially age 10-18- yearly (4, 6, 8, 10, 12)	77	110	105	93	786	769

	CG	FB	IR	SH	RMS	RHS
Visual Acuity screening K, 2, 4, 6, 8, 10- yearly	495	285	238	262	790	502
Anaphylaxis students	33	21	35	40	58	52
Asthma Care/ Peak flow measurements/ students	27	54	25	46	55	199
Concussion Referral	4	20	5	14	35	537
Diabetic Glucose testing, insulin pump management (students)	1	0	0	2	5	11
Mantoux/PPD testing- yearly	1	5	AS NEEDED	AS NEEDED	0	0
Medication Administration- Scheduled daily, PRN's, OTC's	1500	1085	1080	1090	1800	2576
Referral for Alcohol and drug use/abuse testing or pregnancy- yearly	0	0	0	0	5	27
Referrals Blood Pressure	0	9	0	2	8	18
Referrals BMI (height/weight)	2	46	26	12	125	243
Referrals for hearing evaluations- yearly	3	11	1	5	10	69
Referrals for vision evaluations- yearly	95	60	10	53	85	71
Referrals from IEP/504/I&RS for vision & hearing evaluations, & health summary	29	90	35	60	222	13
Review field trip/field day lists for student eligibility for participation	30	33	29	35	47	272
Review of Health Care Plans which impact students participation	62	8	35	41	88	5643
Sport Physicals processed -yearly	0	0	0	0	0	1510
State mandated education of staff/faculty classes	4	4	4	4	4	4
New student enrollment - yearly	97	141	83	111	456	505
Students transferred out - yearly	50	70	19	15	85	62
Training of delegates (EpiPen/Glucagon)	7	13	10	12	10	68
Working papers	0	0	0	0	0	146