

RANDOLPH TOWNSHIP SCHOOLS

2015 - 2016

NURSING SERVICES PLAN



Interim Superintendent:
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School Nurses:
Mary Sharon Lopez – Center Grove School
Carol Minarick – Fernbrook School
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Maureen Delanoy – Shongum School
Karen Ivin – Middle School
Janet Hawkins – Middle School
Erin Kielty – High School
Carol Vorhies – High School

District Physician Approval:

A handwritten signature in black ink, appearing to read "Marisa Ciufalo".

Marisa Ciufalo, MD

October 26, 2015

Date

Board of Education Approval:

November 17, 2015

Date

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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 EpiPen 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
- Headaches/migraines
- Hearing impairment – requiring assistive device (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 but 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 nurse's 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 the 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 predetermined 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 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, and I&RS Plan

Emergency Management:

- District employs certified school nurses for each school
- Emergency "Go" bags in all schools – in process
- AEDs (Automated External Defibrillators) in each school and Board Office
- Nebulizer for asthma treatment in every school
- Annual training of faculty/staff on Bloodborne Pathogens, First Aid, Asthma, and Anaphylaxis
- MERT (Medical Emergency Response Team) in each school – in process
- CPR trained teachers/staff in each school – in process
- Crisis management team in each building
- Evacuation procedures
- Transportation to acute care facility will be provided by local First Aid Squad. In the absence of a parent/guardian, the principal will assign a faculty member to accompany the student in the ambulance.
- The schools have available and follow protocol regarding administration of epinephrine via EpiPen and Glucagon including assignment of delegates for students.
- Students may be approved to self-administer emergency medications.
- Individual Emergency Health Care Plan for students with life-threatening health conditions – Anaphylaxis Allergy Plan, Asthma Treatment Plan, Diabetes Action 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.

Nursing Services Provided to Nonpublic Schools

Provide nursing services to the nonpublic schools in Randolph Township. Randolph Township receives grant monies from the state appropriated for nursing services in the nonpublic schools. Randolph contracts with the Morris Education Services Commission

for nursing services to the nonpublic schools: Academy Preschool/Kindergarten, Apple Montessori, Goddard School, and Gottesman RTW Academy.

Randolph Township Schools
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)

The 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 Medication, Procedures or Treatments	CG	FB	IR	SH	RMS	RHS
Building enrollment (student/staff total)	479	633	513	555	1235	1620
Building enrollment Special Services (students)	87	92	77	75	220	278
Daily practice – multiple 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 gastrointestinal, topical, etc.	Daily	Daily	Daily	Daily	Daily	Daily
Accident reports (student/staff)	36	30	15	23	67	218
Level I – Nursing Dependent	0	0	0	1	0	0
Level II – Medically Fragile	55	46	31	2	113	368
Level III – Medically Complex	62	116	32	65	444	450
Level IV – Health Concerns	113	126	85	140	346	988

Services Required to Address Specific Health Care Needs of Individual Students with Acute Care Needs, Chronic Illness, Special Health Needs, Procedures and Administration of Medication, Procedures or Treatments	CG	FB	IR	SH	RMS	RHS
Health Screenings – height, weight & blood pressure - yearly	566	575	448	475	1235	1620
Auditory screening (grades K, 1, 2, 3, 7, 11) – yearly	499	401	285	280	421	372
Scoliosis screening biennially – ages 10-18 - yearly (grades 4, 6, 8, 10, 12)	55	95	72	102	835	860
Visual Acuity screening (grades K, 2, 4, 6, 8, 10) - yearly	566	354	212	241	835	520
Anaphylaxis students	29	25	30	30	75	81
Asthma Care/Peak flow measurements/students	25	62	50	30	96	128
Concussion Referral	7	13	5	6	44	168
Diabetic Glucose testing, insulin pump management (students)	2	0	0	2	3	8
Mantoux/PPD testing - yearly	0	1	0	0	4	0
Medication Administration – scheduled daily, PRN's, OTC's	2160	644	388	900	3604	2502
Referrals for alcohol, drug use/abuse testing or pregnancy – yearly	0	0	0	0	5	12
Referrals – blood pressure	2	4	0	1	5	16
Referrals – BMI (height/weight)	5	56	29	12	132	162
Referrals – hearing evaluations - yearly	6	5	2	5	5	3
Referrals – vision evaluations – yearly	51	60	13	27	151	101
Referrals – scoliosis – yearly	0	5	0	10	72	21
Referrals from IEP/504/I&RS for vision and hearing evaluations and health summary	30	58	25	80	220	278
Review field trip/field day lists for student eligibility for participation	81	42	23	26	48	478
Review of Health Care Plans which impact student's participation	35	81	50	60	228	1288
Sports physicals processed - yearly	0	0	0	0	0	1250
State-mandated education of staff/faculty classes	4	4	4	4	4	8

Services Required to Address Specific Health Care Needs of Individual Students with Acute Care Needs, Chronic Illness, Special Health Needs, Procedures and Administration of Medication, Procedures or Treatments	CG	FB	IR	SH	RMS	RHS
New student enrollment – yearly	83	202	125	85	499	488
Students transferred out – yearly	27	88	13	20	103	82
Training of delegates (EpiPen/Glucagon)	26	18	15	30	34	108
Working papers	0	0	0	0	0	106