



Washington Office of Superintendent of **PUBLIC INSTRUCTION**

School Nurse Corps

1. **Purpose:**

The School Nurse Corps (SNC) program provides nursing services to meet student health care needs as identified by a 1997 Joint Legislative Audit and Review Committee (JLARC) study. The legislature funds the SNC program through OSPI to the Educational Service Districts (ESDs), dispatching registered nurses (RNs) to the neediest small schools to provide direct care for students, health education, and training and supervision for school staff. The SNC's first priority is to maintain and increase student safety through a system of direct student services and through regional technical assistance that helps to ensure consistent and quality school nursing services throughout the state. The nine Educational Service District (ESD) School Nurse Corps Administrators are funded to directly serve or support all districts in their region by assessing and analyzing student health needs, allocating resources, consulting, mentoring, and building partnerships.

2. **Description of services provided:**

School health requirements 30 years ago primarily addressed management of communicable diseases, immunizations, and health screenings. Student health needs and the regulatory landscape are substantially different today. SNC nurses assess students and develop individualized care plans. They train staff to respond quickly and effectively to emergency situations (especially life-threatening) and for medication delegation when the nurse is not present. Care plans outline instructions for school staff to provide daily maintenance care and accommodations for students with special health care needs, in accordance with federal requirements under Section 504 of the Rehabilitation Act and the Individuals with Disabilities Education Act. These services support school attendance for students with complex health care needs. They optimize student learning, safety, and progress toward graduation. SNC nurse administrators assist these interventions by providing customized technical assistance regarding school health and nursing issues in their individual regions. Program staff attend to quality assurance, guided by student safety, evidence, and cost containment.

In 2019-20, the SNC provided extraordinary support to districts in response to the COVID-19 pandemic, coordinating with public health stakeholders, interpreting and disseminating rapidly evolving guidance to schools, and informing district procedures for student health and access to education.

3. **Criteria for receiving services and/or grants:**

Qualifying districts must (1) demonstrate a lack of RN services existed prior to the inception of the SNC; (2) complete an assessment of district health services; and (3) meet criteria used to determine the neediest schools.

Beneficiaries in 2019-20 School Year:

Number of School Districts: 143
Number of Schools: 343
Number of Students: 79,154

Number of OSPI staff associated with this funding (FTEs): 1.0

Number of contractors/other staff associated with this funding: 0

FY20 Funding: State Appropriation: \$2.541 million
Federal Appropriation: \$0
Other fund sources: \$0
TOTAL (FY20) \$2.541 million

4. **Are federal or other funds contingent on state funding?**

No

Yes, please explain.

If state funds are not available, the state will not be eligible...

5. **State funding history:**

Fiscal Year	Amount Funded	Actual Expenditures
FY20	\$2,541,000	\$2,514,233
FY19	\$2,541,000	\$2,531,568
FY18	\$2,541,000	\$2,533,047
FY17	\$2,541,000	\$2,529,025
FY16	\$2,541,000	\$2,538,044
FY15	\$2,541,000	\$2,535,048
FY14	\$2,541,000	\$2,540,018
FY13	\$2,541,000	\$2,522,470
FY12	\$2,541,000	\$2,524,685
FY11	\$2,541,000	\$2,381,000
FY10	\$2,541,000	\$2,526,363
FY09	\$2,541,000	\$2,452,198

6. **Number of beneficiaries (e.g., school districts, schools, students, educators, other) history:**

Fiscal Year	Number of ESD's
FY20	9
FY19	9
FY18	9
FY17	9
FY16	9
FY15	9
FY14	9
FY13	9
FY12	9
FY11	9
FY10	9
FY09	9

7. **Programmatic changes since inception (if any):**

A modification to program objectives occurred in 2006, prioritizing nursing hours to focus on direct services for student safety. In addition, the program has evolved to recognize the value of having a regional nurse expert available to help districts and families resolve student health issues.

8. **Evaluations of program/major findings:**

Annually, OSPI collects and aggregates data through the *Assessment of District Student Health Services* and parent and staff surveys. Findings show that from the 2002-03 school year to present, the number of health conditions of children has more than tripled, while the number of RN hours in schools to address these clinically complex health problems has decreased so significantly that services are only focused on student safety. Other tools used to evaluate the program are parent and staff surveys. While this data is limited, the majority of parents agreed that their children are safer at school because of the SNC nurse's interventions, and nearly all staff surveyed agreed that having a school nurse in the district resulted in improved health and safety for both students and staff. In 2019-20, collection of data was impacted by school closures related to the COVID-19 pandemic. School Nurse Corps Nurse Administrators at each ESD provided vital coordination between public health agencies and district health services and facilitated access to relevant guidance.

9. **Major challenges faced by the program:**

Increased numbers and complexity of student health conditions, higher costs, increased federal and state requirements, and reduced capacity, have resulted in significantly reduced direct RN hours.

- Student chronic health conditions, unfunded state mandates, and federal requirements have increased, resulting in higher needs for RN direct care services to students that includes student health assessments and counseling, individualized health plans, mandated screenings and other direct care service needs.
- A decrease in funding and nursing hours to support health education, staff training, and prevention services such as population health and safety, immunization compliance and reduction of the spread of communicable diseases, emergency planning, coordination of care and many other critical services.
- Decreased capacity and funding to keep up with the market demands.

10. **Future opportunities:**

The COVID-19 pandemic exposed and exacerbated existing health inequities that are associated with decreased educational opportunities and higher drop-out rates for students in marginalized communities. The School Nurse Corps provides a vital link to underserved communities for improving student access to health and mental health. The partnerships created by this program can be leveraged to address health equity through training, case management support, and elevating the voices of families and students who experience chronic health conditions and adverse social determinants of health.

In the 2020 Legislative session the Legislature modified the funding mechanism for this program. Starting in FY21, the ESD's will receive funding for this program directly from the Legislature. OSPI is called out to provide leadership and coordination of this program in collaboration with the ESDs.

11. **Statutory and/or budget language:**

ESSB 6168 Sec. 520 (7) - \$2,541,000 of the general fund -- state appropriation for fiscal year 2020 is provided solely for a corps of nurses located at educational service districts, as determined by the superintendent of public instruction, to be dispatched to the most needy schools to provide direct care to students, health education, and training for school staff.

12. **Other relevant information:**

Research supports an association between student health risk factors and increased academic challenges. Nurses provide expert intervention on hundreds of different

health challenges for thousands of students and are often the first to identify mental health needs. This improves chronic absenteeism, on time graduation rates, and student, family, and community engagement. If funding for the SNC continues to erode, thousands of students with critical health care needs will not be served. If the program were ever eliminated, districts and students could be left without RN services as was the case before this program's inception. This would endanger student safety and health, lower academic achievement, increase absenteeism, and leave districts open to liability. Each SNC nurse administrator typically receives more than 100 technical assistance questions per month from Class II and Class I districts, Private Schools, and Charter Schools throughout the state. Examples include, but not limited to:

1. Students with oxygen, heart conditions, insulin pumps, anti-seizure medications that can cause respiratory arrest, feeding tubes, cancer, addiction, homelessness, suicide risks, potentially fatal anaphylactic reactions
2. Infectious diseases such as measles, flu, enterovirus D-68, or MRSA
3. Accepting medication orders from out of state
4. Assistance in identifying resources for students with dental needs, eating disorders, depression, mental health disorders, or vision problems.

Additionally, The SNC Nurse Administrators provide a structure for rapid dissemination of information and guidance in public health emergencies such as the current pandemic. The expertise and professional networks of the SNC Nurse Administrators help to ensure that districts implement public health guidance with fidelity for the safety and wellbeing of students and communities.

In 2013, Governor Jay Inslee and Secretary of Health John Weisman presented the School Nurse Corps with the Warren Featherstone Reid award, recognizing the SNC as a state leader in providing quality, cost-efficient health services that benefit all Washingtonians. The SNC program is valued, trusted and relied upon by Washington State's communities, schools, families, and students. It creates a foundation of health and wellness upon which all our educational, civic and economic aspirations and objectives depend.

13. **Schools/districts receiving assistance:**

See [OSPI's Grantee List](#)

14. **Program Contact Information:**

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