



# **Special School District**

## **Health Services Program Evaluation**

Debra D'Arcy, Chair

Board Approved: May 10, 2011



# Health Services Standard Program Evaluation

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## Executive Summary

As required by the Missouri School Improvement Plan (MSIP) standards, school districts must evaluate Health Services biennially. The question approved by the Board of Education for the present program evaluation was as follows: *Has SSD developed and implemented a program for school health services including goals, objectives and service activities as required by MSIP Standard 8.12?* The present evaluation includes a review of MSIP indicators related to health services and SSD policies and practices. Based on stakeholder review of the data, strengths, concerns and recommendations are noted.

## Results

### Strengths

- SSD currently has policies and procedures in place related to Health Services as required by MSIP Standard 8.12.
- Monthly nurses' meetings have been well received by those in attendance. Health Services is utilizing the SSD Life community site for nursing staff "meeting space" to post monthly meeting agendas, objectives and other pertinent information for nurses to reference if they miss a meeting or want to review it.
- All SSD building nurses are fully utilizing Student Information System (SIS) of Tyler Technologies to record all clinic visits, track immunizations and screening results, and run a variety of reports.
- Currently, Health Services is working with Tyler Technologies to upgrade the medical/health component of SIS. These upgrades are in direct response to the nurses concerns voiced that portions of SIS are not user-friendly.

### Concerns

- Many of the substitute nurses are not trained to use SIS, which causes an undue burden on the SSD building nurses during nursing staff absences.
- Substitute nurses do not have access to SSD Life which contains many Health Services resources on the Nursing Staff community site.
- Nurses working one on one with students are not currently using SIS for record keeping. These nurses are keeping paper records.
- Early Childhood Special Education (ECSE) nurses currently do not have a uniform system for tracking immunizations. Some are using a Microsoft Access program; others are using Excel or a paper system. All are currently using a paper system for visit record documentation.

### Recommendations

- Follow the established training plan to ensure SIS learning opportunities for substitute and one on one nurses. Investigate procedures for using SIS computerized system for



# Health Services

## Standard Program Evaluation

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ECSE nurses to track immunizations by the end of first quarter for the 2011-2012 school year. Provide appropriate training for ECSE nurses to use SIS.

- Collaborate with Technology Services with regard to technology and/or equipment needs to facilitate implementation of computerized health services software applications for ECSE nurses.
- Assure that all nursing staff including substitute nurses has SSD e-mail accounts to assure access to SSD Life Nursing Staff community site.

### **Program Evaluation Question(s)**

Has SSD developed and implemented a program for school health services including goals, objectives and service activities (e.g., policies, comprehensive health screenings, etc.) as required by MSIP Standard 8.12?

### **I. Program/Service Information**

1. Name of Program or Services: Health Services Program
2. Personnel Responsible for Evaluation and Program (list):  
Debra D'Arcy RN, MSN, Effective Practice Specialist for Health Services  
(Program and Evaluation)
3. Demographic Description of Program:  
Location(s): Eight SSD building health offices, 14 school-age one on one positions, 3 at Litzsinger School and 11 in partner districts, 20 Early Childhood Special Education sites throughout the county, and 3 early childhood one on one positions.

Number of staff: 40 total staff members, 31 full-time staff RN's, 1 staff LPN, 1 Health Room Assistant, 1 Effective Practice Specialist of Health Services, 6 hourly/substitute RN's working regularly with students, and additionally 16 available substitute nurses.

Participants: Nurses, Effective Practice Specialist of SSD Health Services, Partner District Nurses, SSD Consulting Physician.

Length of program/service: School year calendar, excluding extended school year program.

4. Date of Evaluation (Year/Duration):  
2010-2011
5. Goal/Objective of Program/Services:



# Health Services

## Standard Program Evaluation

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The goal is to provide supportive, professional and specialized health care services for the students and school staff for the purpose of moving all children forward in the educational process. Optimizing the health and well-being of students and staff has a direct impact on each student's learning potential.

6. Brief description of relationship between program goals, CSIP and MSIP Standards: Program goals are related to MSIP Standard 8.12 (School Health Services), MSIP Standard 8.1 (Biennial Program Evaluation), CSIP Goal I (Student Performance) and CSIP Goal III (Facilities, Support and Instructional Resources).

### II. Evaluation Criteria for Programs/Services Offered (check type utilized)

MSIP Standard and Indicators

Review of Policies and Procedures

### III. Description of Stakeholders Engagement in Program Evaluation:

- Debra D'Arcy RN, MSN, Effective Practice Specialist
- Dr. David Campbell, MD, District Consulting Physician
- Marjorie Cole, RN, MS, Retired SSD Lead Nurse and Missouri State Nurse Liaison for the Department of Health and Senior Services.
- Debbie Tuitasi, RN, BSN, NCSN, Lead Nurse for MICDS and Research Contributor to the Missouri Guidelines for Allergy Prevention and Response.
- Christina Blankenship, parent who worked on the SSD Allergy Prevention and Response Policy.
- Lisa Greenlee, RN SSD Health Services, member of the SSD Allergy Prevention and Response Committee.

### IV. Results

#### MSIP Standard

Fourth cycle MSIP Standard 8.12 notes that the district has developed and implemented a program for school health services which includes goals and objectives, service activities, and an evaluation design. DESE outlines three indicators in this area which are used to more fully define Standard 8.12. These three indicators are as follows:

- 8.12.1: The district has a written health services plan and health care services which include:
  - goals and measurable objectives aligned with the CSIP and student performance data
  - program evaluation criteria and procedures



# Health Services

## Standard Program Evaluation

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- board-approved written policies on the administration of medication, contagious and infectious diseases, immunizations for school children, confidentiality of health records, and child-abuse reporting
  - procedures for first aid and emergency care (including accident-reporting procedures and records of students served)
  - procedures for maintaining up-to-date cumulative health records including immunization records and emergency contact information
  - procedures for providing comprehensive health screenings, making referrals for identified health problems, and sharing information with parents/guardians
  - Procedures for monitoring students' chronic health problems and for developing strategies for addressing such problems to ensure individual students' academic progress.
- 8.12.2: The health services plan and program is reviewed by a registered nurse and/or a consulting physician annually.
  - 8.12.3: Program improvement strategies have been identified and implemented.

Each of these indicators will be addressed below with regard to implementation at SSD. Supporting documents are available upon request.

### Health Services Plan (8.12.1)

*Goals and Objectives:* The goal is to provide supportive, professional and specialized health care services for the students and school staff for the purpose of moving all children forward in the educational process. Optimizing the health and well-being of students and staff has a direct impact on each student's learning potential.

*Evaluation:* Health Services is formally evaluated biennially as required by MSIP Standard 8.1. In addition, all nurses are responsible for submitting monthly reports of health services provided and their frequency. This is submitted to the EPS and her designee, and then totaled annually. In the 2010-2011 school year, we transitioned to utilizing SIS for tabulating the monthly reports for the SSD buildings. The 1on 1 nurses and ECSE nurses are utilizing an updated excel format in lieu of the handwritten monthly report. Individual Health Care Plans (IHPs) are developed by the nurse to address specific health concerns and needs. These are updated annually by the nurse in conjunction with the parent and student's physician. Emergency Action Plans (EAPs) are developed by the nurse to address how to react to potential emergencies that are student specific. These are then shared with the staff working with the student. The Special Health Care Needs Inventory for the State of Missouri (SHCN) is completed biennially and reflects the severity of health care needs of students provided services by SSD nurses.

*Board Approved Policies:* Documentation indicates the following Board policies were developed or updated, discussed and are currently in place: policy JCHF Student Allergy Prevention and



# Health Services

## Standard Program Evaluation

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Response to go into effect July 1, 2011. The Student Allergy Prevention and Response Regulation is being drafted and will be completed by July 1, 2011. The regulation will provide guidance for all staff, and for outlining procedures. Policy GCAA School Health Nursing Services (formerly, Delegation) was renamed and revised.

*First-Aid/Emergency Care:* Health Services established a protocol for emergency response. Students with a potential for a life-threatening emergency have an Emergency Action Plan (EAP) developed by the nurse in conjunction with the parent and physician if needed. This written plan is shared with staff involved in the care of the student. Staff is trained on responding to the potential emergency. The nursing staff reports to the EPS the number of students with EAPs. Health Services is utilizing a standardized Seizure Action Plan developed by the Epilepsy Foundation, a Severe Allergy Action Plan recommended by the Missouri guidelines for Severe Allergy Prevention and Response Manual and Asthma Action Plan developed by the Asthma and Allergy Foundation. Automatic External Defibrillators (AEDs) are located in each district school building, the central administration office, and in 2010 AED units were placed in the Learning Center, the warehouse, and the central and south transportation garages. A team has been established at each location and trained in CPR and AED usage by the SSD nurses who are American Heart Association certified instructors in Basic Life support and use of the AED. The District's Consulting Physician oversees the AED program which is reviewed and approved annually. New AEDs were purchased in 2011 to replace obsolete AED's in our SSD school buildings. The new AED's align with the American Heart Association recommendations for 2010. The new AED's are fully automatic and have a text prompt feature for noisy areas and the hearing impaired. Health Services updated the protocol to align with the new AED's. Clinic visit logs are kept on each student receiving care. An updated protocol has been developed for Nursing Services Documentation in School. The district is fully implementing SIS computerized health record charting for health room visits in our SSD buildings. Accident/incident reports are currently recorded in triplicate on paper. These are forwarded to the building administrator, insurance department and EPS of Health Services for further evaluation. The safety committee reviews the reports monthly and makes recommendations for any changes. Mobile-ease first aid carts were purchased and are in use in all of our SSD buildings.

*Cumulative Health Records:* A computerized system for documenting health records is fully utilized by the SSD building nurses. SSD nurses are currently using the Student Information System (SIS) for immunization tracking and reporting, clinic visit log, medication documentation, tracking and identifying medical concerns and chronic health problems, tracking health screenings and referrals, etc. Each SSD building nurse has been assigned a computer for documenting in SIS. In addition, refurbished laptop computers are now readily accessible for each medication room or medication cart for ease of documentation. Ongoing training has been provided, most recently on 3/25/11. Prior nursing staff concerns and subsequent suggestions are currently being addressed regarding SIS to make it more user-friendly in health services application. Tyler Technologies are currently preparing an upgrade for the health services/medical component in SIS. An anticipated date for the upgrade is July 2011 or



# Health Services

## Standard Program Evaluation

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September 2011. Further training will be provided to the SSD building nurses on the upgrade. All one on one nurses are expected to receive netbooks and SIS training in June 2011 to enable all charting to be computerized. All substitute nurses are scheduled to receive SIS training in May 2011. This will relieve the burden of entering the clinic visits from the building nurses if they are absent.

*Health Screenings/Referral/Information Sharing:* Health screenings are performed per the State of Missouri Department of Health and Senior Services recommendations. Referrals are made for further evaluation if a problem is detected during the screening(s). Many of our students are difficult to test due to their disability and may be referred for further evaluation of hearing, vision, scoliosis or growth concerns to his or her private physician or to the District's audiology department if related to hearing. The nursing staff shares resources with parents if they are unable to obtain the necessary follow up for their child or if financial constraints or access to care is problematic.

*Immunization Compliance:* The process for tracking student immunization compliance has been streamlined with the use of SIS which has the capacity to generate compliance reports and parent/guardian letters for compliance issues that need to be addressed. A written procedure is now available for the nurses.

*Monitoring Chronic Health Problems:* Students with chronic health problems are identified on an ongoing basis. Once identified, IHPs are developed by the nurse in conjunction with the parent(s) and student's physician to enable the student to overcome health-related barriers in the school setting. We have 19 nurses providing individualized nursing services to 17 specific students with significant health concerns in partner districts and one of our SSD buildings enabling these students to attend school in the least restrictive environment. Four of these nurses are job sharing in early childhood. Procedures regarding disposal of sharps containers and school-age nutritional services were updated due to a need for clarification and new procedures.

### Health Services Plan/Program Review (8.12.2)

The Effective Practice Specialist for Health Services, the District Consulting Physician and the Director of Special Education review the Health Services Plan/Program annually. Additions, deletions and revisions are completed when needed on an ongoing basis. Collectively, we review policy and procedures and relate them to the most updated best practice standards.

### Program Improvement (8.12.3)

Health Services sets aside time for identifying and implementing improvement strategies during our monthly nurses meetings. Monthly meetings are held on the 3<sup>rd</sup> Tuesday of each month, August through May from 4:00PM to 6:00PM. Meeting agendas are included in Appendix L. Meetings allow for in-servicing on a variety of current topics with guest speakers/presenters. In addition, these meetings facilitate communication between all district nurses, dissemination of materials and information, and professional and meaningful conversation on ways to improve





# Health Services

## Standard Program Evaluation

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and streamline paperwork needed to provide students with a healthy and safe school experience. This year we were in-serviced on Parent Education and Diversity by Judy Presberg; Kronos usage for our hourly and substitute nurses by Kay Alleman; and the SSD Life Nursing site, specifically our actions to become “greener” by using electronic forms for monthly reports and warehouse orders. In October, we had Brei Carter from Cyberonics in-service us on vagus nerve stimulators. In December, we worked together to develop a mission statement for health services. In February, Ronda Bradley, Registered Respiratory Therapist from Spiritus provided an in-serviced on ventilators. In March, we had a representative from Tyler Technologies in-service us on generating reports in SIS. Approximately 75% of the nurses attend the monthly meetings. This is an average of all meetings. Some meetings have up to 86% of nurses attending; others have as low as 65% during the winter months when travel is more difficult. Those attending voiced positive comments on the value of holding monthly meetings, receiving valuable information that impacts the care delivered, and the opportunity to have meaningful discussion with fellow nurses. It is a continued concern that some nurses have difficulty attending the meetings due to duty time constraints (e.g., building release times, accompanying student on bus, etc.). While use of substitute nurses to cover the few that have duty issues has met with some success, we now use the SSD Life Nursing Staff site to post all meeting notes and documents for all nurses to view.

### V. Summary

#### Strengths

- SSD currently has policies and procedures in place related to Health Services as required by MSIP Standard 8.12.
- Monthly nurses’ meetings have been well received by those in attendance. Utilization of SSD Life Nursing Staff Meeting Space has been well received by those not able to attend the nurses’ meetings.
- All SSD building nurses are fully utilizing the medical/health component of SIS.

#### Concerns

- Use of SIS by the substitute nursing staff and one on one nurses continues to be a concern.
- Substitute nurses do not have access to SSD Life.
- No computerized system is currently consistently used for the ECSE nurses to track immunizations and record visits or care rendered.





# Health Services

## Standard Program Evaluation

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### Recommendations

- Continue to increase attendance at monthly meetings by providing substitute nurses to cover nursing assignments for those with schedule and duty conflicts. Continue to utilize SSD Life Nursing Staff site to share agendas, minutes and documents from nurses' meetings. This would allow all of the District nurses to share their strengths with each other, with potential to share with partner districts in the form of in-service offerings.
- Continue to provide ongoing SIS training opportunities for all nursing staff.
- Explore using SIS by ECSE nurses in partner districts to record health services information, specifically immunization tracking for students served.
- Continue to collaborate with Technology Services with regard to technology and/or equipment needs to facilitate implementation of SIS and/or other health services software applications.
- Provide all nurses, including substitute nurses, access to SSD Life.

### **V. Action Plan for Recommendations as A Result of Program Evaluation**

- SIS training scheduled on May 20, 2011 for all substitute nurses.
- SIS training scheduled on June 22, 2011 for all one on one nurses.
- Acquire e-mail accounts for substitute nurses by May 20, 2011, to assure access to SSD Life.

### **VI. Follow up from previous Program Evaluation**

- *Increase attendance at monthly meetings by providing substitute nurses to cover nursing assignments for those with schedule or duty conflicts.* Most nurses were able to make arrangements to attend without substitute nurse coverage, arriving just a few minutes late. Reasons for nurses not being able to attend were: attending school for further degrees, unplanned family illness, poor weather conditions, or unexpected personal needs. We utilized the strategy of posting meeting information and minutes on SSD Life Nurses' Meeting site to reach those nurses who could not attend due to reasons other than duty conflicts.
- *Develop a plan to ensure SIS training opportunities, computer access and support and substitute nurses to cover nurse assignments during training. Investigate the train the trainer model.* All SSD building nurses have computer access, one on one nurses will have netbooks and training this summer. We employed a "train the trainer" model in each region which supported the nurses during the 2009-2010 school year. This is no longer needed due to the level of abilities of the building nurses has improved tremendously. ECSE nurses will look into utilizing SIS for tracking immunizations.
- *Explore software applications for use by 1:1 nurses in partner districts to record health services information for students served.* Upon further exploration with SIS and Tyler Technologies, we discovered that the 1:1 nurses in partner districts could use SIS



# Health Services Standard Program Evaluation

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medical/health component in isolation that is, not using it for all other applications, e.g. attendance, grades, etc.

- *Collaborate with Technology Services with regard to technology and/or equipment needs to facilitate implementation of SIS and/or other health services software applications.* Technology services assisted Health Services in attaining computers, laptops, and other equipment and support needed to utilize SIS.

Person responsible to champion action plan:

Debra D'Arcy RN, MSN, NCSN, CNS BC, EPS Health Services

Timeframe for reporting updates to Board of Education: Biennially

Date: \_\_\_\_\_

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**Signature of Administrator Responsible for Chairing Evaluation**