

Meeting Current Standards for School Nurses Statewide May Cost Up to \$79 Million Annually

A presentation to the Joint Legislative Program Evaluation
Oversight Committee

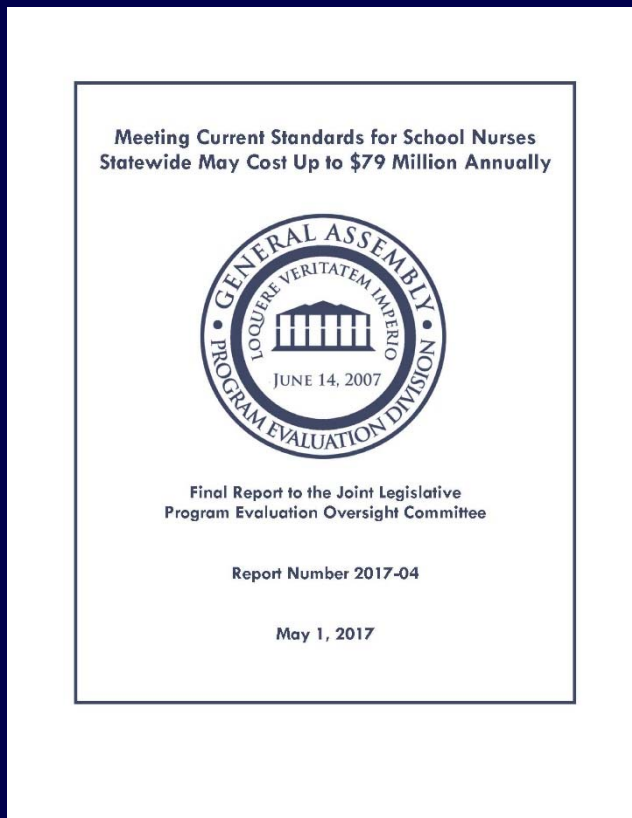
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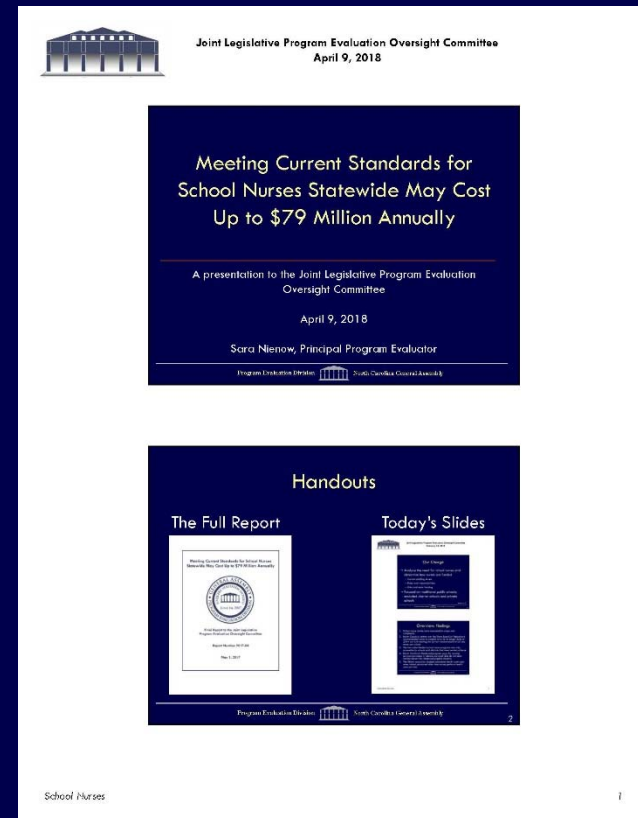


Handouts

The Full Report



Today's Slides



Our Charge

- Analyze the need for school nurses and determine how nurses are funded
 - Current staffing levels
 - Roles and responsibilities
 - LEA and state funding
- Focused on traditional public schools

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Overview: Findings

1. Duties have increased in scope and complexity
2. North Carolina didn't meet nurse-to-student ratio by 2014 nor does it have one nurse per school
3. State-funded programs are only accessible to schools and LEAs that meet criteria



Overview: Findings (cont.)

4. Medicaid pays for school nursing services; most LEAs do not seek reimbursement
5. Education budget subsidizes health care when non-nurses provide care



Overview: Recommendations

The General Assembly should direct

1. State Board of Education to update the school nurse staffing standard
2. DHHS and DPI to plan to combine state-funded programs and implement acuity models
3. DHHS to examine the Medicaid rates for school nursing services
4. DHHS to request a Medicaid State Plan Amendment to authorize reimbursement for services on IHP or 504 Plans



Background



North Carolina School Health Nurses

*Keeping Students in Class
and Ready to Learn*



Background

School nursing is a specialized practice of nursing that advances the well-being, academic success, and lifelong achievement and health of students

- Frequently, the school nurse is the only licensed health care provider in a school
- School nurses manage all school health services and programs

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Funding for School Nurses

- Local governments provided most funding for school nurses until 2004
- The General Assembly:
 - School Nurse Funding Initiative (SNFI) in 2004
 - Child and Family Support Teams (CFST) in 2005
- Other funding:
 - instructional support positions
 - local hospitals
 - federal grants

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Division of State Responsibilities

- Department of Health and Human Services (DHHS)
 - SNFI funding
 - Professional oversight and technical assistance
 - Continuing education
- Department of Public Instruction (DPI)
 - CFST funding
 - Communicates federal, state, and State Board of Education policies and procedures

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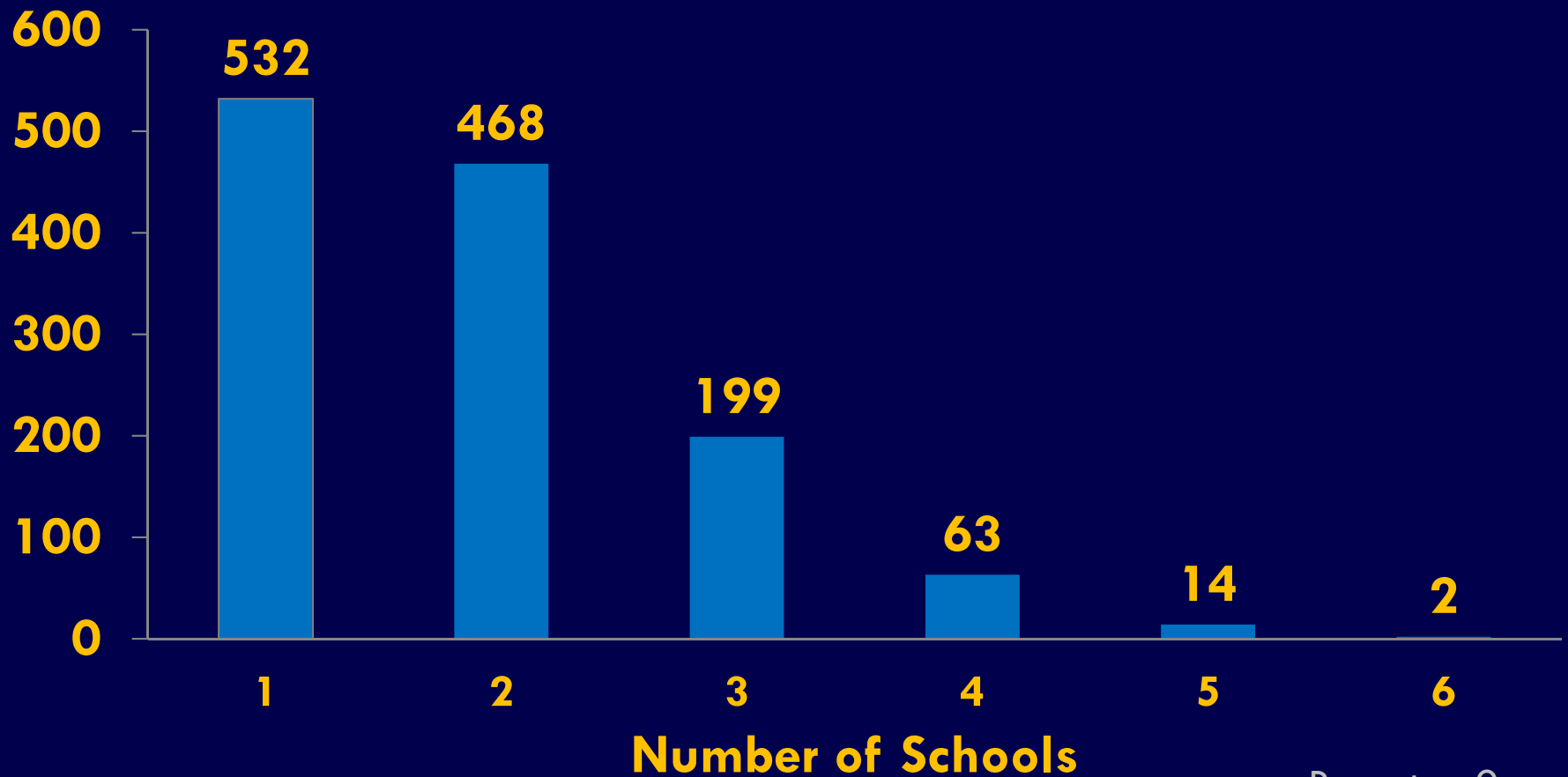
School Nurse Facts FY 2015–16

- 1,318 FTE nurses served 2,313 schools
- Responsibilities include
 - Medication distribution and distribution audits
 - Delegation of tasks to assistive personnel
 - Verification of all immunization and health assessments
 - Individual student health counseling

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22% of School Nurses Serve 3 or More Schools



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Findings



Finding 1

School nurse duties have increased in scope and complexity due to

- an increase in student health issues
- increases in federal and state legislation
- other cultural and contextual factors

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Increasing Number of Health Conditions

- More prematurely born children survive infancy
 - Increases number of school-aged children with moderate to severe disabilities
- 75% increase in chronic health conditions such as asthma, diabetes, and food allergies from 2002–2015

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Increases in Federal and State Legislation

Federal Legislation

- Individuals with Disabilities Education Improvement Act 1975, 1991
 - Nearly 14% of school children are in Exceptional Children programs
- Vocational Rehabilitation Act 1973

State Legislation

- Health Assessments for Children in Public Schools 2014
- EpiPens in Schools 2014

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Cultural and Contextual Factors

- Familial and community factors increase school nurse workloads
 - Lack of transportation
 - Poverty
- Nurses provide home visits to assess and address needs
 - More than 8,300 in 2015-16

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Finding 2

North Carolina neither met the State Board of Education's recommended nurse-to-student ratio by its target date of 2014 nor is it meeting the National Association of School Nurses' current recommendation of one nurse per school

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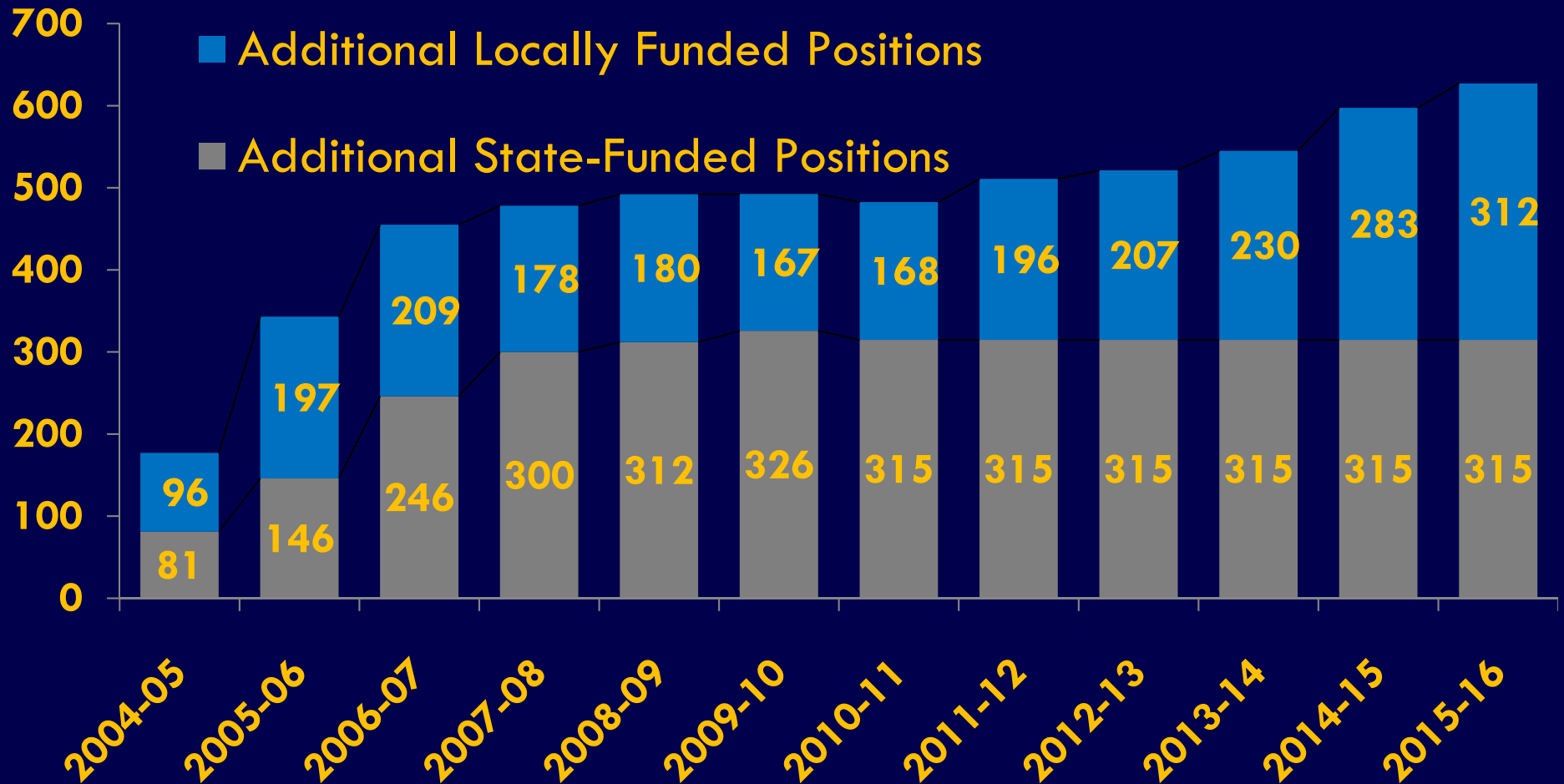
School Nurse Standards

- In 1985, Basic Education Act required
 - 1 state-funded school nurse for 3,000 students
- In 2004, SBE recommended ratio of 1:750
- Current state ratio is 1:1,086; 46 LEAs have a 1:750 ratio or lower

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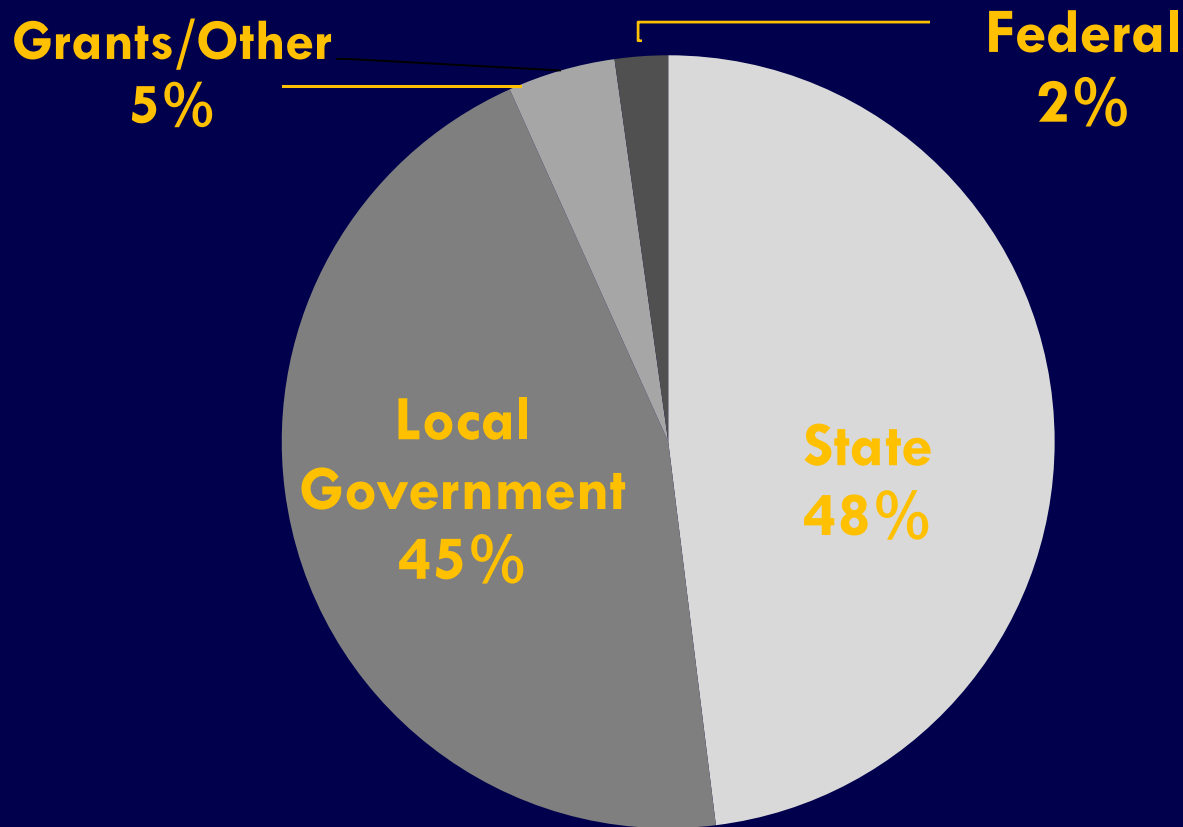
Growth in School Nurse Staffing 2004–2016



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Sources of School Nurse Funding 2015–2016



Total Spending on School Nurses is \$91.6 million

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Achieving Staffing Standards

- National Association of School Nurses recommends students have access to an RN at all times
- 1 school nurse per 750 students \approx \$45 million
- A school nurse in every school \approx \$79 million
 - Based on cost of new instructional support positions
 - Will be less due to co-located schools

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Finding 3

The two state-funded school nurse programs are only accessible to schools and LEAs that meet certain criteria, and these criteria are not reevaluated at regular intervals

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School Nurse Funding Initiative

- Distribute funds based on
 1. greatest need & least ability to pay
 2. nurse-to-student ratio
 3. economic status of the community
 4. health needs of children
- Program partially funds 236 positions; costs \$11.8 million
- Last redistributed in 2011

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Child and Family Support Teams

- Award criteria:
 1. Number of at-risk children
 2. Commitment to address the needs of children and families
 3. Geographic diversity
 4. Readiness to implement at community and school level
- State oversight and support removed 2011–14
- 79 positions, costs \approx \$5.5 million
- Allocations have never been reevaluated

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Two State School Nurse Programs

- SNFI awards less valuable than CFST
 - \$50,000 versus approximately \$69,500
- 10 LEAs receive neither CFST nor SNFI
- 14 CFST or SNFI positions could be reallocated to LEAs that do not achieve 1:750 ratio

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Finding 4

The North Carolina Medicaid program pays for school nursing services, but most LEAs do not seek reimbursement for Medicaid-eligible students

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Medicaid Reimbursement for School Nurse Services

- Medicaid-eligible students must have an IEP and a plan of care
- 4 LEAs currently seek reimbursement
- Barriers
 - Medicaid reimbursement rates are low
 - IEPs fail to address school-based nursing services

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More Students Now Eligible for Medicaid Reimbursement

- Services can be documented in IHP or 504 plan
- The Division of Medical Assistance must be directed to amend North Carolina's State Medicaid Plan
- Will take \approx 2 years to implement

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Finding 5

The State's education budget subsidizes health care costs when school personnel other than nurses perform health care services

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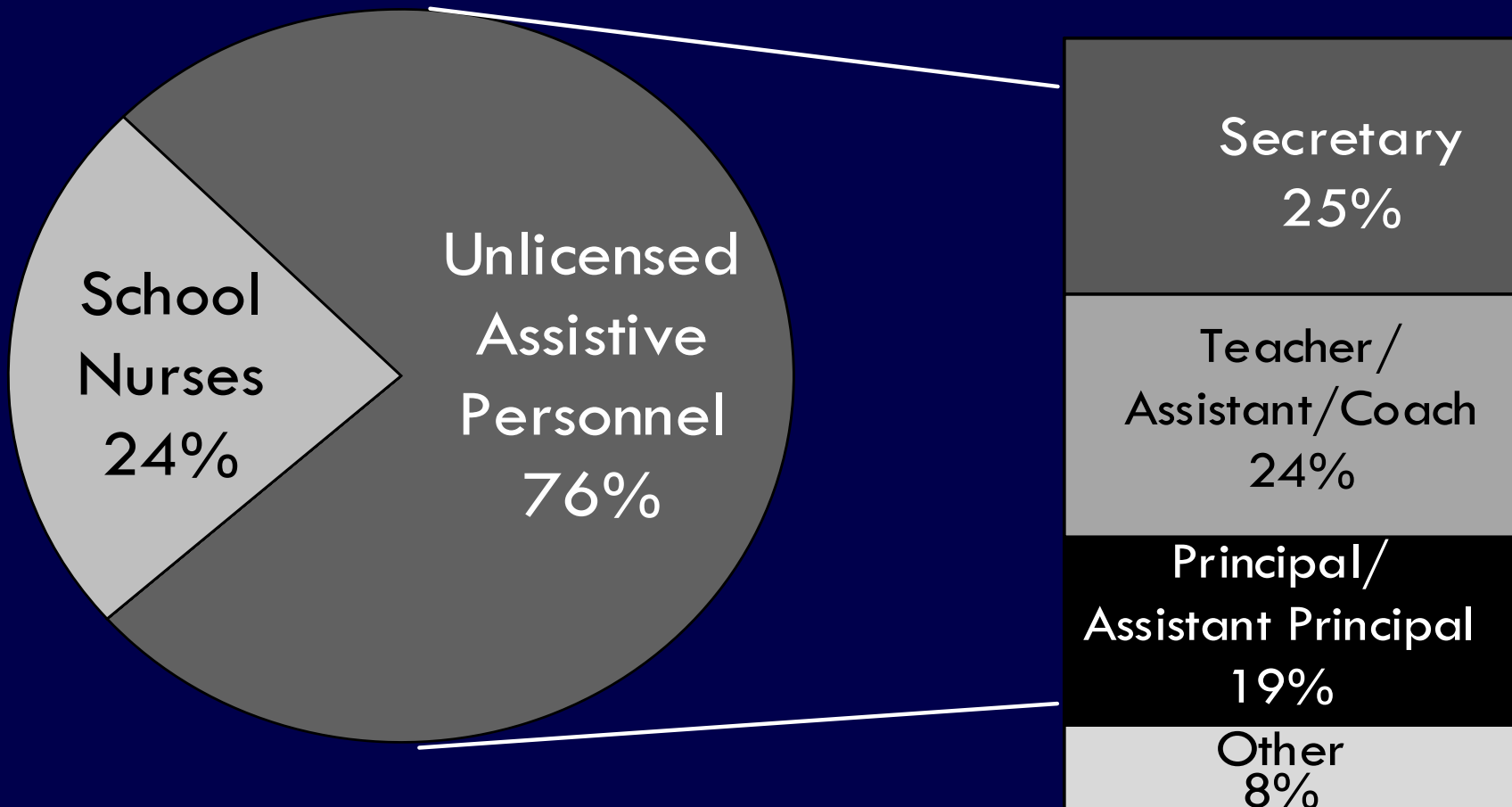
Who Provides School Medical Care?

- Registered Nurses (RN)
 - May practice independently
 - May delegate some tasks
- Licensed Practical Nurses (LPNs)
 - Unable to practice independently
- Unlicensed Assistive Personnel (UAP)
 - Must receive training and oversight from RN

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76% of Medication Administration is Performed by UAPs



Education Dollars Subsidize Health Care

- Medication administration by non-health school staff = 331 full time jobs in school year 2015–16
- Total cost to system is greater because of other tasks assigned to UAPs

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Acuity Models

- Allow districts to prioritize nurse time
- Acuity models are used in other medical settings
- Several districts are in the process of using or designing model

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Recommendations



Recommendation 1

The General Assembly should direct the State Board of Education to:

1. Update the school nurse staffing standard
2. Develop an implementation plan for achieving the revised standard

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Recommendation 1 (cont.)

The revised staffing standard and implementation plan should be submitted to legislative committees by January 15, 2020



Recommendation 2

The General Assembly should direct DHHS and DPI to

1. Prepare a consolidation plan for the two state-funded school nurse programs
2. Implement the use of acuity models

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Recommendation 2 (cont.)

- Complete initial reallocation of school nurse funding starting in FY 2020–21
- DHHS and DPI should report on the consolidated school nurse plan to legislative committees by May 1, 2020



Recommendation 3

The General Assembly should direct DHHS to examine the Medicaid rates for school nursing services and determine whether the rates should be increased

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Recommendation 4

The General Assembly should direct DHHS to request a Medicaid State Plan amendment to authorize Medicaid reimbursement for school-based nursing services documented in an Individual Health Plan or a 504 Plan

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Summary: Findings

1. Duties have increased in scope and complexity
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Summary: Responses

Both DHHS and DPI reported general agreement with findings and recommendations



Report available online at
www.ncleg.net/PED/Reports/reports.html

