

B-Engrossed
Senate Bill 698

Ordered by the Senate June 22
Including Senate Amendments dated April 13 and June 22

Sponsored by COMMITTEE ON RULES

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Creates position of State School Nursing Consultant in Oregon Health Authority and specifies duties.

Establishes Task Force on School Nursing.

Sunsets task force on December 31, 2016.

Declares emergency, effective on passage.

A BILL FOR AN ACT

1
2 Relating to school nursing; and declaring an emergency.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. The position of State School Nursing Consultant is created in the Oregon**
5 **Health Authority. The responsibilities of the consultant include, but are not limited to, all**
6 **of the following:**

7 (1) **Coordinating and collaborating with the school nurse specialist within the Department**
8 **of Education.**

9 (2) **Providing school nursing policy and program guidance for the authority, the depart-**
10 **ment and other agencies.**

11 (3) **Supporting and leading the integration of coordinated school health teams and pro-**
12 **viding assistance in sustaining the teams.**

13 (4) **Providing technical assistance to school nurses on the delivery of nursing care using**
14 **evidence-based best practice standards and assisting in the establishment of protocols and**
15 **standards of care in collaboration with professional associations and state agencies.**

16 (5) **Providing leadership in the delivery of nursing services in schools.**

17 (6) **Providing clinical consultation and technical support to school nurses and school**
18 **nursing programs.**

19 (7) **Serving as a liaison and expert resource in school nursing and school nursing pro-**
20 **grams for local, regional, state and national health care providers and policymaking bodies.**

21 (8) **Coordinating school nursing program activities with public health, social services,**
22 **environmental and educational agencies as well as other public and private entities.**

23 (9) **Monitoring, interpreting, synthesizing and disseminating information relevant to**
24 **changes in health care, school nursing practices, laws and regulations and other legal issues**
25 **that impact schools.**

26 (10) **Promoting quality assurance in school nursing programs by initiating and coordi-**

NOTE: Matter in **boldfaced** type in an amended section is new; matter [*italic and bracketed*] is existing law to be omitted. New sections are in **boldfaced** type.

1 nating a quality assurance program that includes needs assessment, data collection and
2 analysis and evidence-based practices.

3 (11) Representing school nurses in state level partnerships between agencies and between
4 public and private entities, to foster a coordinated school nursing program and other multi-
5 disciplinary collaborations.

6 **SECTION 2.** (1) The Task Force on School Nursing is established.

7 (2) The task force established by this section consists of 14 members appointed as follows:

8 (a) The President of the Senate shall appoint one member from among members of the
9 Senate.

10 (b) The Speaker of the House of Representatives shall appoint one member from among
11 members of the House of Representatives.

12 (c) The Governor shall appoint 12 members as follows:

13 (A) One member who represents education service districts that provide health services.

14 (B) One member who represents a school district that primarily serves an urban area.

15 (C) One member who represents a school district that primarily serves a rural region.

16 (D) One member from the Oregon Health Authority who is involved in school health.

17 (E) One member from the Department of Education who is involved in school health.

18 (F) One member who is a member of a statewide nonprofit organization that is an asso-
19 ciation organized by and for Oregon school nurses.

20 (G) One member who represents a statewide nonprofit organization that is a professional
21 association for nurses in this state.

22 (H) One member who represents classified school employees who work directly with
23 school nurses.

24 (I) One member who represents a statewide nonprofit organization that is dedicated to
25 developing school-based health centers.

26 (J) One member who represents a coordinated care organization that provides health
27 services in this state.

28 (K) One member who represents a private insurer in this state.

29 (L) One member who is a local public health official.

30 (d) When appointing members under paragraph (c) of this subsection, the Governor shall
31 consider whether the composition of the task force represents diversity in relation to race,
32 ethnicity, languages and disability status.

33 (3) The task force shall:

34 (a) Examine other health care funding sources, including the billing of students' health
35 insurance for the costs of school health services provided at school, for the purpose of de-
36 termining if schools may transition from using moneys received for educational purposes to
37 using moneys from the other health care funding sources to pay for school health services.

38 (b) Recommend sustainable funding sources for school health services that could be used
39 to fund required school health screenings and to achieve the level of school nursing services
40 described in ORS 336.201.

41 (c) Recommend standards of school nursing practices that include outcome measures
42 related to health transformation and academic performance.

43 (d) Recommend ways to create a coordinated school health services model and to foster
44 and promote a noncompetitive strategy that is collaborative and that directs an appropriate
45 level of funding to school nursing and school-based health centers.

1 (4) A majority of the members of the task force constitutes a quorum for the transaction
2 of business.

3 (5) Official action by the task force requires the approval of a majority of the members
4 of the task force.

5 (6) The task force shall elect one of its members to serve as chairperson.

6 (7) If there is a vacancy for any cause, the appointing authority shall make an appoint-
7 ment to become immediately effective.

8 (8) The task force shall meet at times and places specified by the call of the chairperson
9 or of a majority of the members of the task force.

10 (9) The task force may adopt rules necessary for the operation of the task force.

11 (10) The task force shall submit a report in the manner provided by ORS 192.245, and
12 may include recommendations for legislation, to an interim committee of the Legislative
13 Assembly related to education or health care no later than September 15, 2016.

14 (11) The Department of Education shall coordinate with the Oregon Health Authority to
15 provide staff support to the task force.

16 (12) Members of the task force who are not members of the Legislative Assembly are not
17 entitled to compensation, but may be reimbursed for actual and necessary travel and other
18 expenses incurred by them in the performance of their official duties in the manner and
19 amounts provided for in ORS 292.495. Claims for expenses incurred in performing functions
20 of the task force shall be paid out of funds appropriated to Department of Education for
21 purposes of the task force.

22 (13) All agencies of state government, as defined in ORS 174.111, are directed to assist
23 the task force in the performance of its duties and, to the extent permitted by laws relating
24 to confidentiality, to furnish such information and advice as the members of the task force
25 consider necessary to perform their duties.

26 SECTION 3. Section 2 of this 2015 Act is repealed on December 31, 2016.

27 SECTION 4. In addition to and not in lieu of any other appropriation, there is appropri-
28 ated to the Oregon Health Authority, for the biennium beginning July 1, 2015, out of the
29 General Fund, the amount of \$216,365, for the purpose described in section 1 of this 2015 Act.

30 SECTION 5. This 2015 Act being necessary for the immediate preservation of the public
31 peace, health and safety, an emergency is declared to exist, and this 2015 Act takes effect
32 on its passage.