



OREGON PUBLIC HEALTH DIVISION

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March 28, 2017

TO: The Honorable Senator Arnie Roblan, Chair  
Senate Committee on Education

FROM: Jessica Duke, Manager Adolescent and School Health Programs  
Center for Prevention and Health Promotion  
Public Health Division  
Oregon Health Authority

SUBJECT: Senate Bill 111 (Related to School Nursing)

Chair Roblan and members of the committee; I am Jessica Duke, manager of Adolescent and School Health within the Oregon Health Authority-Public Health Division.

I am pleased to testify today and offer a public health perspective on Senate Bill 111 Dash-2, which aims to address shortages in school nursing services by piloting a technical assistance program for school districts to maximize Medicaid billing for school-based health services allowed under the Individuals with Disabilities Education Act (IDEA). This bill aligns with recommendations of the Governor-appointed Task Force on School Nursing.

The bill directs Oregon Department of Education (ODE) to provide technical assistance to districts in creating a sustainability plan for school nursing services (with a focus on maximization of Medicaid billing) and provide training and resources for quality improvement. The bill allows ODE to collaborate with all state agencies necessary, and this should extend to Oregon Health Authority's State School Nurse Consultant (SSNC), based on the duties outlined in ORS 413.084.

Seventy nine out of the 197 Oregon school districts report no access to school nursing service. This equates to 29,734 unserved students. Oregon Department of Education's 2016 Nursing Services in Oregon Public Schools Report found there is one school nurse for every 2,635 Oregon students. This ratio puts Oregon near the bottom nationally.

School nurses support the health of students so that they can be successful at school. School nurses provide acute nursing care, health screenings, behavioral health assessment and extensive case management. Their work includes public health functions of surveillance, chronic disease prevention, emergency preparedness and ongoing health education.

Oregon law (ORS 336.201) passed in 2009 requires school districts to meet school nurse to student ratios for medically fragile, medically complex, and nursing dependent students. The State School Nursing Consultant (SSNC), in collaboration with ODE, estimates needing an additional 22 FTE school nurses to meet the required ratios mandated by ORS 336.201. The law also sets a goal of schools meeting national guidelines of one Registered Nurse for every 750 students in the general population by 2020. SB 111 can be an important step in determining whether school-based Medicaid billing can have an impact on the provision of school nursing services in Oregon.

Without adequate nursing services, school districts may be at increased liability trying to meet the health needs of students. Other school staff could be put into a situation to meet the medical needs of these children, thus practicing nursing without a license, which is against the law and could be harmful to students.

Section 2 of the Dash 2 amendment calls for providing ongoing training and other necessary resources to school nurses to improve the effectiveness of the delivery of school nursing services; and assisting school nurses in improving school nursing services, fall within the scope of the State School Nurse Consultant's work.

Thank you for the opportunity to testify. I am available to answer any questions you might have regarding the Public Health Division's role in school nursing services. I can be contacted at [jessica.duke@state.or.us](mailto:jessica.duke@state.or.us) or 971-673-0242.