



January 25, 2021

Senators Dembrow, Thomsen, and other members of the Senate Committee on Education,

Thank you for inviting me to speak on behalf of the school nurses of Oregon. School nurses are licensed, registered nurses who conduct and coordinate school health services. Nurses are crucial education partners who ensure all students can be safe, healthy, and able to access their education. Nurses provide support for students with special health-care needs, which include (but certainly are not limited to) diabetes, life-threatening allergies, seizures, and asthma. Any condition that puts a student at risk or presents a barrier for that student to access their education should be addressed by a nurse in the school setting, in collaboration with families and other healthcare providers. Oregon data shows that as many as 25% of young people have a chronic health condition, and many more face social needs that can impact their health. Beyond supporting students with chronic health conditions, registered nurses can be invaluable in supporting the health of the entire school population.

During the COVID-19 pandemic, the responsibility to keep students and staff healthy and safe has increased dramatically, and many educators have come to recognize the role school nurses can play. As experienced healthcare professionals who understand both the healthcare and education settings, school nurses are critical for the implementation of public health guidance in the school setting. With an understanding of practice in traditional healthcare settings, school nurses can best strategize about how to manage health needs, from chronic conditions to acute care emergencies, in non-traditional settings with school staff and little or no medical equipment.

School nurses across Oregon have supported the drafting and implementation of the COVID-19-specific operational blueprints which each school is now required to have. Beyond providing the direct care planning for high risk students that school nurses are typically known for, they are interpreting the RSSL guidance from ODE/OHA to design and implement public health protocols - including training school staff to ensure they understand and can follow the Ready Schools Safe Learners guidance.

School nurses are regularly involved in helping schools identify and respond to communicable disease outbreaks by coordinating with LPHAs, other providers, and district administration. The events of this year have certainly shifted this role to the forefront. In addition to implementing RSSL guidance within the schools, many school nurses are serving public health roles as points-of-contact between their schools and their local public health authorities, helping to navigate school exclusions, isolation, quarantine, and contact tracing. School nurses are essential for helping administrators or their designees make accurate exclusion decisions regarding all communicable disease concerns, but especially with COVID-19 during a global pandemic. Determinations about quarantining cohorts requires sophisticated decision making. Establishing the time frame during which a student or staff member is contagious relative to when they were in contact with their cohort requires a detailed investigation to ensure that cohorts being quarantined were truly exposed. With many of our public health departments being over capacity while community case rates remain elevated, schools will be largely on their own to make these complex public health decisions that can disrupt student education and adversely impact families; a school nurse has the



experience and knowledge to help school staff ensure that the most responsible and safe decisions are made to protect the school community.

One of the most compelling reasons to return students to school as soon as possible is the concern over their mental health. Data suggests that school nurses are often the first contact in the school building for students with mental health concerns, and that school nurses spend 32% of their time providing behavioral health services. Evidence shows that students with physical complaints utilize school health resources disproportionately, and are frequently sent home without assessment. These somatic complaints are often associated with anxiety and depression, childhood trauma, and school stress. Students not already identified with mental health diagnoses most often come to the health room with headaches, stomach aches, or other somatic concerns, and a school nurse can identify these mental health concerns and refer these students for appropriate follow-up. In coordination with other behavioral health staff in our schools, the school nurse will be essential in supporting the behavioral health needs of students (many of whom have experienced trauma) as they return to schools, thereby enhancing the student's satisfaction with school and improving educational outcomes.

Unfortunately, access to school nursing to support a safe return to school buildings during a pandemic is inconsistent across the state: 1/3 of Oregon school districts today have no access to registered nurses. Where nurses are present, they are often spread dangerously thin. OSNA surveys this past August showed the average nurse in an Oregon school serves 2,500 students -- that's more than 3 times the recommended ratio and certainly does not meet the modern day recommendation of a registered nurse in every school. Fifty percent of Oregon school nurses serve 3, 4, or 5 schools, while 25% serve 6 or more sites. Of those nurses serving a single school, many are part time, only available to the school population a few days or a few hours per week. Increasing access to registered nurses familiar with practice in the school setting would support the academic success of students, and the health and safety of students, staff, and their communities during this pandemic.

OSNA recognizes the difficult decisions ODE has had to make regarding communicable disease management in schools, without having a registered nurse as a permanent member of their decision-making team to provide guidance and expertise. Since March of last year, OSNA has worked hard to be included in the state level planning process for safely returning students and staff to our schools. We are grateful for those instances when the inclusion of school nurse expertise has resulted in more detailed process steps which support schools in operationalizing the public health guidance in a practical and safe way. Consistent, continuing collaboration between OSNA, ODE, and OHA will benefit all school communities in Oregon. OSNA and its school nurse members will strive to ensure that the public health guidance is understandable and can be implemented in the school setting with fidelity, thereby minimizing the risk of the spread of COVID-19 within our schools.

I am happy to answer any questions you may have.

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