

Sue-see-a

Thank you, Madam Chairwoman. My name is Kelly Grenham, I have been a school nurse for 18 years. I work in an urban school district. I am excited and grateful to testify in support of House Bill 1203. Today I represent the Colorado Association of School Nurses. I am here today to support this bill, which could provide daily access for children to a registered school nurse.

Children who have daily access to a registered school nurse, are shown to have significantly improved health, safety, and abilities to learn, and this is according to the American Academy of Pediatrics and the National Association of School Nurses.

School Nurses are intricately involved in both Physical and Behavioral Health in schools.

Imagine your child is diagnosed with Diabetes. You must immediately learn how to give shots, check blood sugar and count carbohydrates many times a day. Your child will back in school within a couple of days and will need assistance managing this disease. The comfort of knowing that a registered nurse is at school to support you and your child in this challenging life change is immeasurable!

We have wonderful school staff who provide basic first aid, but a nurse can provide so much more.

insufficient and potentially non-reval

School nurse are paid through a variety of sources: School district general funds, School Medicaid reimbursement, and since 2017 the School Health Professional Grant.

There are 181 school districts and the state average is now one nurse for 1,500 children. There can be one nurse in a school and another nurse covers 5 schools. A one size fits all financial solution will not work for every school district.

Small rural school district typically do not have the staff to obtain and manage School Medicaid or School Health Professional Grant fund and need another funding stream.

#The majority of the nurses are between Col. Springs and Fort Collins

We are asking for a funding stream that would prioritize rural school districts and in addition help districts who serve larger proportions of families living in poverty.

I believe every child deserves a school nurse and I hope you will vote in favor of this bill. I am happy to answer any questions or concerns.

As a rural nurse could not be here in person, I am also going to read testimony from 5 nurses working in rural south west: Sue's testimony here:

We have the unique responsibility of being the only professional member of the team to treat the whole person. *NOTES:*

I want you to testify first to set the stage if you will. That means you will have to pay close attention to the questions the committee is asking so you may weave the answers into your testimony. Also, if there seems to be confusion or there are a lot of questions from the committee about the school health grant program and our bill, please make sure you help them understand the difference.

School nurses are often a child's the first access to health care, frequently the nurse is the only health professional a child sees in a year. If your child or grandchild is at school would you prefer a trained registered nurse or a well-trained lay person, who cannot perform nursing assessment or take vitals? If a child with diabetes comes in to the health office experiencing dangerously low blood sugar, would you prefer a registered nurse or a trained lay person who follows a written plan? We have wonderful school staff who provide basic first aid, but a nurse can provide advanced first aid and provide physical and mental health care.

<https://www.centerforhealthjournalism.org/2019/02/14/why-battle-bring-back-school-nurses-such-big-deal-health-and-academics>

“Research has shown that a full-time school nurse helps to improve students’ academic achievement, in part due to better attendance. Students with chronic illnesses such as asthma who attend a school with a nurse miss fewer days due to illness, have fewer visits to emergency rooms and result in lower health care costs for their parents. Similar benefits have also been shown for students with other chronic illnesses, including food allergies, diabetes, seizures and mental health problems.

For students with complex conditions, nurses can make the difference between getting to school or not.”

It is not always immediately apparent whether a symptom is physical or behavioral. Take for instance, the student with a stomach ache. The school nurse considers viral infections, appendicitis, gall bladder attack, lack of food at home, eating disorders, nerves about the math test, or depression from learning of a loss or being bullied. Some of these possibilities require medical management, others require behavioral health intervention.

March 5, 2019

Madame chair, members of the committee, my name is Julie Wilken and I am here today to support HB 1203. I am a nursing director for a school district in Colorado and have been a registered nurse for 21 years.

Today I am here to express great passion in the hard, dedicated work school nurses demonstrate daily. Any opportunity for the state to help fund additional school nurses is not only an educational desire, but also a fundamental educational commitment. The work school nurses do, matters!

I want to share with you today a story of school nursing success. In spring 2017, our district was able to hire three additional school nurses through the School Health Professional Grant from the Colorado Department of Education. This was a grant developed by the state using marijuana tax funds. Part of the provisions of this grant was to train nurses in working with students on drug prevention programs and drug intervention strategies. Our district decided to establish three high school site-based nurses in order to perform this work with fidelity. Now, we are towards the end of year two of three in this grant, and the work these three nurses have done has not only been monumental in our district, but has also set a precedence in our district for the superior value of a dedicated, full-time, site-based school nurse. These nurses have continued to perform the same physical health components of their positions, as well as adding the work of drug prevention and intervention. They have learned and been trained to expand their traditional role which covers mostly physical health, to becoming an active role in providing drug intervention strategies including alternative to suspensions. By adding this strength to our high school nurse role, we are looking for outcomes presented as a decrease in suspension/expulsion rates amongst our high school students.

We, as a district, have watched the professionalism of these nurses grow and expand and they have received much praise from school administrators and parents. These nurses have become the students' trusted adult in the building and students have confided in them about their substance addictions. These nurses will be the first to tell you that this is not a just a phase of our youth, this is an addiction that needs acting upon now. The work that these nurses do, matters!

Because of this amazing work, our Board of Education has recognized this work and agreed to fund five additional site-based nurses in 2018 that can dedicate their skills to treating the whole child and not just substance abuse work. The work has continued to grow and expand this current school year with all of these site-based nurses, which has once again, resulted in our Board of Education funding 9 additional site-based nurses for school year 2019-2020 through the school district's general funds. As soon as we are able to hire these nurses, our district will have a site-based nurse at every high school supporting the physical health and emotional well-being of our students.

We, as school nurses, are driven and dedicated to help support our youth, providing them with the tools to make positive decisions that help promote their autonomy. Our youth is our future, the investment is needed and their health will make a difference to our society. School nurses are needed now, please vote in favor of this bill. I am happy to answer any questions. Thank you for your time.

- Concussion training -
- Back to training → why?

Brianna Pittman

- Job description

March 13

- Things going to happen on occasion

12 noon - 4 pm -

Email

- Diabetes training →

(Certify → IT)

Madam Chairwoman, I am Sue Ciccio and have been a rural school nurse in Cortez, Colorado for the past 19 years. I would like to share my testimony in support of House Bill 1203.

In preparing this testimony I consulted with school nurses in smaller districts than ours in Mancos and Dolores, Colorado. They are strongly in favor of this bill as well. Each of these school districts has one school nurse for the entire pre-K through 12th grade program. We want to focus on supporting students with chronic health conditions and providing mandated health and safety activities.

My school district has 2800 students who attend school in 10 different locations. Six of our schools are served by Title I funding. The students in our small country schools would have more consistent access to a school registered nurse, building trusting relationships with students, parents, and staff members.

We struggle with being spread too thin given our current staffing; the number of schools we must cover; and the distance between the schools. This leads to several common dilemmas. First, health emergencies can strike at any location. If I am at one elementary school and there is a health emergency at another one, I am asked "why weren't you here when our student needed you?" Secondly, we are working to meet the needs of our students with chronic health conditions that require consistent monitoring. Ms. Grenham used the example of the student with diabetes who must take insulin at school. I have students with diabetes who require assistance at 3 different schools. All need supervision with lunchtime calculations and insulin dosing. What happens when the school nurse is absent, or at training to improve care, or in Denver, testifying in support of a bill to fund school nurses? Every student is deserving of professional health services in the school setting. Our third dilemma is how to monitor our students who have complex medical needs such as cerebral palsy or seizures or special medical procedures at school when we are not in a building. School nurse are often the ones who identify when the health condition of one of these special students changes or fails. Long minutes can be lost when the nurse is at a different location.

One key aspect of House Bill 1203 is to address the health needs of students in poverty through access to more school nurses. The students we serve are battling not only higher rates of critical illnesses, but the negative experiences of their parents' youth. When the school nurse reaches out to a parent with support, suggestions and assistance in a non-judgmental way it can change the course of the student's health, their sibling's health, and the parent's buy-in to the value of the educational experience. I once identified an ear infection in a 1st grade student. The parent arrived with 3 pre-school siblings and asked me to check their ears also. She was open to allowing me to assist her in getting to a clinic appointment across town. Such relationships allow health concerns to be identified quickly before they become more costly, and difficult to address.

My school administrators appreciate the role of the school nurse in addressing student health and safety needs so they can focus on supporting educational needs. The absence of a school nurse dilutes the resources of time and focus that administrators, office staff and teachers need for education. Your support of this bill will enable our districts can ensure they can meet the academic, as well as the health and safety needs of their precious charges.

Thank you for allowing me to share my story and advocate for House Bill 1203: School Nurse Grant Program.

- medication incidents -

Part of our nursing practice is training + delegating medication administration. Long term proposal

~~The Montezuma-Cortez School District covers the southwest corner of the state from the New Mexico border to the south and the Utah border to the west.~~

~~which is indicative of high poverty rates. The funding provided by House Bill 1203 would allow us to have a school registered nurse in all 3 'town' elementary schools which qualify for Title I Poverty Funding. Additionally~~

~~For the rest of the year, she would bring in any of her children, school aged or not, whenever she had a concern about their health.~~

The nurses envision the value of a health aid to manage data input, and other administrative tasks so that they, as health professionals,

Date: March 5, 2019
To: Chairwoman McLachlan
Members of the House Committee on Education
From: Jessica Francois
Re: Comments on H.R 1203: School Nurse Grant Program

Chairwoman McLachlan, committee members, it is an honor to be given the opportunity to support House Bill 1203. My name is Jessica Francois and I am a constituent of House District 30. I have been a nurse for six years, and a school nurse consultant for the last year. I work 30 hours a week and serve as the school nurse for six schools two of which qualify under Title I.

Students in Title I schools suffer from health and health care disparities. This means that students in these schools have a higher burden of illness and injury as well as having issues related to insurance coverage, access to health care and quality of care. These disparities are preventable. Increasing the amount of school nurses can help to reduce disparities in these vulnerable populations and decrease health care costs.

Evidence supports that health and education are closely linked. According to research on the impact of health and health behaviors on educational outcomes there is a strong positive association between health and education. This means better attendance which leads to higher graduation rates and higher rates of college attendance.

Many of the students in Title I schools are not well connected with health care homes. It is a really good week if I can be in my school for 3-4 hours and in this time I am trying to fit in training, parent and student communication, contributing to 504 and special education meetings, development of health care plans and so much more. School nurses manage medically complex students with diabetes, seizures, brain injury, allergies, and asthma that require nursing care like oxygen delivery, catheterization, g-tube feeds, and artificial ventilation.

A student at one of my schools will not graduate this year because we were unable to collaborate with her, her family, and her medical provider to get a grasp on her medical needs so that she could be in school and be successful. It is a helpless feeling knowing that these students need so much more, but that even with the passion and desire I have to help every student it is impossible. It is impossible to even help the ones that need it most. If I had time to truly dig into this students' medical concerns and work with her doctors and family I truly believe this student would be graduating in May. Instead we hope she will graduate next year as long as she doesn't drop out which she has talked about multiple times.

To conclude, increasing the amount of school nurses specifically in Title I schools is an investment that will positively impact student's health and therefore their academic success. School nurses are vital professionals that are trusted by students and families. Nurses have a multitude of skills that support and improve students mental, social, emotional, and physical health. Please prioritize this bill and I urge you, Chairwoman McLachlan and the Education committee to pass this bill and move it into the House for a vote. Thank you for your consideration.

Respectfully, Jessica Francois BSN, RN