

## INCREASED SCHOOL NURSE TO STUDENT RATIOS

Adopted by Convention Delegates May 1997

*Reviewed May 2006*

- WHEREAS, There is a greater need for credentialed school nurses who are the only professionals in our public schools with the knowledge, skills and capabilities to provide administration and supervision of the more complex student health care required by children during the school day; and
- WHEREAS, The responsibilities of the school nurse are defined in the Education Code Section 49426 and the legislative intent in Section 49427 states “The governing board of each school district and each county superintendent of schools maintain fundamental school health services at a level that is adequate to accomplish all of the following: (1) preserve pupils’ ability to learn; (2) fulfill existing state requirements and policies regarding pupils’ health; (3) contain health costs through preventative programs and education;” and
- WHEREAS, There are no state-mandated ratios of school nurse to student populations, some school districts have one nurse to 30,000 to 35,000 students making compliance in the delivery of mandated school health services difficult; and
- WHEREAS, It is estimated that five to 30 percent of the entire student population is afflicted with one or more chronic illnesses which may require observation or treatment during the school day; and
- WHEREAS, There appears to be a strong correlation between a lower ratio of students to the school health nurse and child well-being, and there are 16 states in the United States which have now passed legislation that mandates a student to school health nurse ratio; and
- WHEREAS, In the state of California, the California Teachers Association (CTA) Policy Handbook states that they believe the health and safety needs of children are best met through the services of a credentialed school nurse and that certificated instructional staff shall not be required to perform services of specialized health care (e.g., dispensing of medication, catheterization, gavage feeding, suctioning); and
- WHEREAS, Children with disabilities must be provided an appropriate public school education in regular classrooms to the greatest extent possible according to the Education for All Handicapped Children Act (EAHCA) of 1975 and the Amendment passed in 1990 which changed the name of EAHCA to the Individuals with Disabilities Education Act (IDEA), and Section 504 of the Rehabilitation Act of 1973; and

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**WHEREAS,** The number of children who have been identified as needing specialized health care in order to attend school has increased dramatically in the 20 years since the original law was passed; now therefore be it

**RESOLVED,** That the California State PTA and its units, councils and districts urge the citizens and policymakers of California to promote legislation that would encourage a greater concentration of school nurses to students, state funding therefore not to be taken from existing educational appropriations; and be it further

**RESOLVED,** That the California State PTA and its members throughout the state urge their local school districts to work toward establishing increased school nurse to student ratios and increasing the number of days school nurses are on school campuses.

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## **BACKGROUND SUMMARY**

In many school districts where the number of school nurses is limited the school nurse is being placed in the position of having to manage care for many more students than would be considered safe—the students themselves could be placed in jeopardy or the school district at great risk for liability. Along with their mandated duties, school nurses perform such additional tasks as hearing, vision and scoliosis screening and family referrals to community resources as well as health education curriculum development and the supervision and training of unlicensed assistive personnel. In some schools the school nurse must train personnel to do certain procedures because s/he cannot physically be in so many geographic areas at one time.

Advanced technology and procedures have increased the survival of many children which has led to an increase of school children requiring ongoing health care needs. These children now are being mainstreamed into the general education system which has increased the work load of the school nurse dramatically.

The increased number of health care needs such as oxygen use, ventilators, tube feedings, catheterizations, tracheotomy suctioning, multiple medications and emergency injections, and the increase of children with chronic health care conditions such as diabetes, asthma, allergies, epilepsy, cancers, genetic disorders, rare disease syndromes, and HIV/AIDS, require more complicated health evaluation, treatment, supervision and emergency care by the school nurse.

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**Increased School Nurse to Student Ratios – continued**

The National Association of School Nurses believes that the maximum ratio of nurse per students should be one nurse to 750 students in the general school population, one nurse to 225 students in the mainstreamed population, one nurse to 125 students in the severely chronically ill or developmentally disabled population, and in the medically fragile population, a ratio based on individual needs. The National Association of School Nurses believes that it is the school nurse who should determine the appropriate utilization of assistive personnel and supervision of the school health services.

The California School Nurses Organization recommends one nurse to 1200 elementary students, one nurse to 1500 secondary students, and one nurse to 100 severely handicapped students. According to the Department of California Basic Educational Data System (CBEDS), there are 2031.91 full time equivalent (FTE) school nurses to 5,467,224 school children, or an average of one FTE school nurse to 2690.68 students in the state of California, including the severely handicapped students, based on data collection in October 1995.