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Critical collaboration: Pediatrician-school nurse partnership vital to child health: AAP policy

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In 1902, the nation's first school nurse, Lina Rogers, was hired to increase school attendance at four New York City schools in an age of communicable diseases. From its origins in public health nursing and over the past century, the role of the school nurse has expanded to include critical components such as surveillance, chronic disease management, emergency preparedness, behavioral health assessment, ongoing health education and extensive case management.

Although the position has taken on a more comprehensive approach, the core focus of keeping students healthy and in school remains unchanged.



Ideally, a qualified school nurse should be in every school. AAP News photo by Jeff Knox

Pediatricians have long recognized the important role school nurses play in the health and well-being of school-age children. However, uniformity among states and school districts regarding the role of a registered professional nurse in schools and the laws governing it are lacking. School nurse staffing patterns also vary widely across the United States.

When pediatricians collaborate with, support and promote school nurses in their communities, the health and safety of children and adolescents improve, according to the AAP policy *Role of the School Nurse in Providing School Health Services*. Revised from 2008, the statement addresses the expanding role of school nurses and the importance of the relationship between pediatricians and school nurses to improve the health and academic achievement of students. The policy is available at <http://pediatrics.aappublications.org/content/early/2016/05/19/peds.2016-0852> and will be published in the June issue of *Pediatrics*.

Ideally, a qualified school nurse should be in every school, a recommendation in the current as well as previous statement. However, in the absence of a school nurse, the Academy recommends that delegated, unlicensed assistive personnel be trained and supervised to deliver specific health services under the guidance of a



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registered nurse, a stance shared by the National Association of School Nurses and the American Nurses Association.

School nurses and pediatricians working together "can be a great example of team-based care," based on shared goals, clear roles, mutual trust, effective communication and measurable processes and outcomes, according to the policy.

Recommendations

Pediatricians can do the following:

Advocate for a minimum of one full-time professional school nurse in every school - with medical oversight from a school physician in every school district.

Ask school-related questions, including about health problems contributing to chronic absenteeism, at each visit and provide relevant information directly to the school. Electronic health records should include the name of the patient's school and primary contact. Health information exchange requirements, as defined in Stage 3 of the federal meaningful use program, should permit the direct exchange of school-related information collected in the pediatrician's office at each visit, including attendance and health issues contributing to absenteeism.

Establish a relationship with school nurses to improve chronic condition management, such as setting up a method of communication, using standardized forms and securing permission to exchange information. Communication and collaboration also can aid in the development of Individualized Healthcare Plans, care coordination and planning for transition from pediatric to adult health care.

Include school nurses as important team members in the delivery of health care for children and adolescents and in the design of integrated health systems, including school-based health centers.

School nurses provide both individual and population health through their daily access to large numbers of students, making them well-positioned to address and coordinate the health care needs of children and adolescents.

How school nurses work with pediatricians

- Interpret, reinforce medical recommendations within the educational environment.
- Provide feedback on student response to treatment plans.
- Work with parents to educate, facilitate and expedite communication between schools and the medical home.
- Help develop action plans in areas such as epilepsy management or safe transportation of a child with special needs.
- Offer insight to a student's pediatrician on topics like attendance concerns, parental noncompliance with medical home goals, or suspected neglect or abuse.
- Participate in public health efforts through asthma education, tobacco control, substance abuse assessment, obesity prevention and immunization.



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