

## **5.5 SP1 Release Information Appendix A**

### **Massachusetts Public Schools School Health Care Services**

#### **Suggested Best Practice Guidelines to Complete the Monthly MA DPH Report via HealthOffice V5.5 SP1**

The pages that follow were developed to provide guidelines for Massachusetts School Nurses who must complete the MA Monthly Activities Report.

Healthmaster has included this document as part of the Release Information to provide a quick and easy reference document.

Healthmaster wishes to thank Marjorie McEttrick-Maloney for her time and effort contributed to this project.

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## Intent

The general intent of this document is to provide direction for ESHS districts using HealthOffice to guide their purposeful and consistent data entry of all health office encounter types to ensure optimal results on the new 904 MA Report.

The 904 report has been completely revised by Healthmaster and the ESHS Advisory Group to conform to the 2008-2009 Monthly Activities Report. Specific instructions related to HealthOffice data entry are identified in this document as ☺ followed by selections in a different font.

The new 904 MA report was revamped in Version 5.3, as part of the summer program release. This is intended for ESHS members using HealthOffice to help guide in-service instruction to all users for implementation in September 2006.

Since the initial release of the Best Practice Guidelines to complete the Monthly DPH Report via HealthOffice V5.3, additional enhancements have been made to the HealthOffice product. Subsequent updates completed after V 5.3 are included in this document which may be accessed and printed from the HealthOffice Documents folder from V5.4 SP2 and **forward**.

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## Assumptions

To make these guidelines work correctly the following must be done:

- All medications (PRN, Standing Orders, and Scheduled) are entered in HealthOffice with the appropriate Classification field completed.
- All special problems (e.g. seizures, asthma, diabetes) and their related special needs (e.g. seizure observance, peak flow, check ketone, check blood sugar) are entered (via Maintenance) into HealthOffice and administered from the appropriate screen (either via quick events tab on the top right hand corner of the screen, or through individual items)
- All Office Visits (all types) are documented in the computer – students and staff. Anyone who is not a student, but who is considered part of the school staff, must have the “Faculty” box checked on the Person screen.
- Use the RAD (Results/Outcomes, Actions and Dispositions)
- The “Other” category is used sparingly and only when absolutely necessary to describe the encounter or related actions.
- The report is written to **INCLUDE** “Transferred” and/or “Deleted” status students and faculty **if** they had an activity (office visit) documented during the date range selected.
- The report will **EXCLUDE** any “Outside” activities (Office Visits) documented.

Questions 1 and 2 are self-explanatory

### 3. Health Services Activity

#### Office Visit Types

This is a major change and is intended to be an executive summary of the all encounters occurring in the school health office. There are seven types of encounters for students and staff. These are unduplicated (one encounter type per visit) contacts with a student or staff person in which the school nurse provides treatment, counseling, or aid of any kind (in any location). It is assumed that every encounter will include nursing assessment and health education.

Please use your best professional judgment to categorize each encounter according to the primary presenting issue. Note there are no secondary encounters, only primary.

- Do not count health screenings; these are captured in the end of the year Results and Measures Report.
- Do not count activities such as phone calls (not associated with a face to face contact), documentation, data entry that does not involve a face-to-face encounter with a student or staff member. For example, if a parent/guardian calls to notify the nurse of a Strep throat, this encounter would be logged as an Office Visit Type of Parent/Guardian Contact or Phone Contact. This would be counted. However if you were calling a parent/guardian to notify him/her that their child was ill, this is not counted as an office visit type. It would be counted as an illness visit.
- As a result of further assessment or nursing interventions during an encounter, it may be necessary to adjust the original office visit type to more accurately reflect the visit.
- For example, a student may present with a stomach ache and the encounter type would initially be logged in as an illness assessment, however during the course of the visit it is discovered the student is having difficulty coping in class, at which time the visit type should be changed to psycho-social/mental behavioral support before the visit is “saved” and “closed” in Healthmaster. This change in office visit type is a better representation of the visit. Stomachache may still be selected as a symptom.
- **Injury/First Aid:** This would include encounters for first aid type of injuries such as head injuries on the playground/gym, abrasions, contusions, lacerations, burns, head injuries, lost tooth, nosebleeds, sprains, Include previous injuries (sprains etc occurring the evening before or over the weekend and presented to the school nurse for assessment/opinion/recommendation for further action by LMD) as well as injuries occurring on the way to school or during school hours.

☺ **Only** the following Office Visit Types are counted for Injury/First Aid:

- |                          |                   |
|--------------------------|-------------------|
| • Injury                 | • Previous Injury |
| • Injury, Serious School | • First Aid       |
| • Injury, Acute          | • Accident        |

- **Illness Assessment:** An evaluation of an acute health condition and a subsequent plan of action. This category focuses exclusively on assessment, triage, and/or reassessment related to student illness. This includes encounters for acute illness such as cold, fever, sore throat, abdominal pain, and chronic health condition such as asthma, diabetes, etc. Examples of *Triage* include phone calls to parents/guardians to recommend action on behalf of a sick child, a referral to a primary care provider, or a decision to return the student to the classroom.

☺ **Only the following Office Visit types are counted for Illness Assessment:**

- Illness
- Illness Assessment
- Illness Acute
- Chronic Care
- Chronic Illness

- **Mental Health:** Presenting issues related to anxiety, depression, behavior modification, time out, stress management, self-injury encounters, de-escalation, physical restraint. Verbal consultation intended to help an individual adjust to his/her surroundings or improve interpersonal skills in an effort to minimize cognitive, emotional, and behavioral problems. Include both *scheduled* and *unscheduled* counseling sessions.

☺ **Only the following Office Visit types are counted for Mental Health**

- Psychosocial Counseling.
- Mental Health

- **Individual Health Education:** Encounters specific for health instruction such as asthma instruction, medication instruction, menstruation, nutritional instruction/follow-up, tobacco cessation intervention, explanation of a disease process, etc.

☺ **Only the following office visit types are counted for Individual Health Education**

- Individual Health Education

- **Other:** All other encounters such as zipper repair, dog feces removal from shoes, change soiled clothing, bathroom use, chapped lips, sanitary needs.

☺ **All other Office Visit Types not previously counted in the prior four grid categories are counted here. They include the following Office Visit Types:**

- |                      |                              |
|----------------------|------------------------------|
| • 504 Conference     | • Multidiscipline Conference |
| • Classroom Lesson   | • Non-Medical                |
| • Death              | • Other                      |
| • Faculty Conference | • Parent/Guardian Conference |
| • Follow-up          | • Parent/Guardian Contact    |
| • Head Check         | • Physician Consultation     |
| • Health Maintenance | • Recheck                    |
| • Health Screenings  | • Referral Conference        |

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- Home Visit
  - Hospital Visit
  - IEP Meeting
  - Immunization Maintenance
  - Incident
  - Medical Doctor Athletic
  - Medical Doctor EPSDT
  - Medical Doctor Visit
  - Pregnancy Related
  - Referral Follow-up
  - Register Student
  - Reproductive
  - Staff In-Service
  - Staff Meeting
  - Student Conference
  - Transfer Student
  - Withdraw Student
  - Employee Health
- **Scheduled Medications:** Encounters for daily or more frequent medication administration unrelated to a disease process at the time of the encounter. These would not include visits for PRN administrations as PRN medication administration would be a result of an assessment for a specific illness, injury mental health crisis etc. If a student arrives with a complaint, and the nurse provides an assessment before deciding to administer a medication, the Primary Issue would be counted as an "Illness Assessment."
- ☺ Data to complete this grid for all Student and Faculty Only Person Types, Students or Faculty (including transferred or deleted status) who have had a scheduled prescription administered (and were not marked as 'Missed') within the date range selected.
- **Scheduled Procedures:** Encounters for daily or more frequent procedures performed in the health office such as (glucose check, catheterization, tube feeding and other scheduled visits for procedures listed in the table for item #8 Procedures.
- ☺ This category counts administered Scheduled Special Needs. If a Special Need is scheduled for more than once a day, it is counted each time the service is administered.

## 4. Incident Reports Involving an Injury

These are serious injuries resulting in the creation of a formal incident/injury report, which is maintained in the nurse's office, or submitted to the building principal for further administrative or insurance action. Select intentionality of the injury when possible, if unsure, select unknown. Examples: Injury on wet floor, fight resulting in injury, fingers jammed in fire door, injury on playground equipment.

- ☺ Nurses must document the required **Injury** field (selecting either unintentional, intentional, intent unknown, none, or not-available) located on the Office Visit Event tab **and** complete the documentation of the Office Visit using the "**Incident**" tab.

## 5. Emergency Referrals

911/Ambulance transports calls and other referrals to emergency services (including transport by car to ER by parent/staff). The intent of this field is to provide information to the DPH on the number of students who entered the EMS system either by being driven or taken to the Emergency Room/Hospital for acute care. Utilization of a hospital Emergency Room for primary care services in lieu of a regular provider is not what we are after. In essence, when dismissing a student from the health office, be careful as to where you indicate the student is going, taken to doctor vs. acute care at a hospital.

**5A.** ☺ For 911/Ambulance Transport pull RAD Dispositions of "EMT" only.

**5 B.** ☺ Other referrals to Emergency Health Services, only the following "Dispositions" from the RAD screen will be counted:

- Taken to Emergency Room
- Taken to Hospital
- Other Referrals to Emergency/Health Services.

Please note the Comment field is where the user should put any additional details about the disposition, not selecting multiple dispositions.

## 6. Disposition After Nursing Assessment (all encounter types)

Every Office Visit, Scheduled Prescription, or Scheduled Special Need encounter results in only one disposition. If more than one disposition is documented for the event, only the first disposition found will be counted.

Please refer to the chart below to show where each disposition choice is linked to the table on the monthly report.

Office Visit Type:	Disposition of:	Count in:
	Back to Recess	6B
If any of the Injury or Illness Types	Left w/Approved Other Person/Relative	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
	Dismissed	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury
	Dismissed Due to Illness	6A (1) - only

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<b>Office Visit Type:</b>	<b>Disposition of:</b>	<b>Count in:</b>
If any of the Injury or Illness Types	Dismissed Due to Injury	6A (2) - only
	Dismissed with Parent/Guardian Permission	6A (1) <sup>2</sup> If linked to OV of any illness 6A (2) <sup>2</sup> If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	EMT	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
	Health room > 2 hours	6C
If any of the Injury or Illness Types	Home on Bus	6A (1) - If linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	Left with Parent/Guardian	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	Left with Police	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	Left with Security	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
	Monitor	6C
	Other Referrals to Emergency/Health Services	6C
	Out for School Year	6C
	Reconciled	6C
	Referral Completed	6C
	Released to Child Protective Services	6C

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<b>Office Visit Type:</b>	<b>Disposition of:</b>	<b>Count in:</b>
If any of the Injury or Illness Types	Return PRN	6B
	Returned to Class	6B
	Return to Work	6C
	Sent Home	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
	Sent Home to Return	6C
	Sent on Field Trip	6B
	Sent to Cafeteria	6B
	Sent to Campus	6B
	Sent to Counselors Office	6C
	Sent to Dormitory	6C
	Sent to Guidance	6C
	Sent to Gym	6B
	Sent to Special Ed	6C
	Sent to Social Worker	6C
	Sent to Supervisor	6C
	Sent to Principal's Office	6C
	Sent to Student Union	6C
	Signed Out	6C
	Stayed in Health Office	6C
If any of the Injury or Illness Types	Taken Home by Staff	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	Taken to Doctor's Office	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
If any of the Injury or Illness Types	Taken to Emergency Room	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.

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<b>Office Visit Type:</b>	<b>Disposition of:</b>	<b>Count in:</b>
If any of the Injury or Illness Types	Taken to Hospital	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.
	Unable to Reach Parent/Guardian	6C
If any of the Injury or Illness Types	Wheelchair to Car	6A (1) - if linked to OV of any illness 6A (2) - If linked to OV of any injury <b>OR</b> 6C - If not linked to any Injury or Illness OV types.

Every scheduled prescription or scheduled special need encounter results in only one disposition. If more than one disposition is documented for the event, only the first disposition found will be counted.

Please refer to the chart below to show where each disposition choice is linked to the table on the monthly report.

<b>Event Type:</b>	<b>Disposition of:</b>	<b>Count in:</b>
Scheduled Prescription and/or Scheduled Special Need	Back to Recess	6B
	Returned to Class	6B
	Sent on Field Trip	6B
	Sent to Cafeteria	6B
	Sent to Campus	6B
	Sent to Gym	6B
	Dismissed	6C
	Dismissed with Parent/Guardian Permission	6C
	EMT	6C
	Health room > 2 hours	6C
	Home on Bus	6C
	Left w/Approved Other Person/Relative	6C
	Left with Parent/Guardian	6C
	Left with Police	6C
	Left with Security	6C
Monitor	6C	

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<b>Event Type:</b>	<b>Disposition of:</b>	<b>Count in:</b>
Scheduled Prescription and/or Scheduled Special Need	Not Applicable	6C
	Other Referrals to Emergency/Health Services	6C
	Out for School Year	6C
	Reconciled	6C
	Referral Completed	6C
	Released to Child Protective Services	6C
	Return to Work	6C
	Sent Home	6C
	Sent Home to Return	6C
	Sent to Counselors Office	6C
	Sent to Dormitory	6C
	Sent to Guidance	6C
	Sent to Special Ed	6C
	Sent to Social Worker	6C
	Sent to Supervisor	6C
	Sent to Principal's Office	6C
	Sent to Student Union	6C
	Signed Out	6C
	Stayed in Health Office	6C
	Taken Home by Staff	6C
	Taken to Doctor's Office	6C
Taken to Emerg. Room	6C	
Taken to Hospital	6C	
Unable to Reach Parent/Guardian	6C	
Wheelchair to Car	6C	

## 7. Medication Administration

The number of prescriptions kept on file as well as doses of medication administered in each of the ten categories listed. This category has been redesigned considerably to include a separate table for students looking at prescriptions and doses administered, while the staff table looks at doses administered only. Consider the following agreed upon definitions.

- Scheduled prescriptions/medications are those that are ordered to be given on a routine/ scheduled basis (qd, bid, q4h, etc.)
  - ☺ These prescriptions, when current, display within Items Scheduled
- PRN prescriptions/medications are those that are on hand for an individual student (e.g. Tylenol, Albuterol, insulin, Glucagon) to be given as needed.
  - ☺ The totals for each classification of PRN prescriptions set in HealthOffice are counted here.
- Doses administered per School Protocol are medication doses administered by school protocol consistent with the Board of Registration in Nursing requirements and signed by the school physician.
  - ☺ Medications that are entered, as Standing Orders will be counted here.

**Prescriptions:** The number of medication prescriptions kept on file that month. These are either scheduled or PRN.

**Doses:** The total number of medication doses actually administered by nurses (or administered by supervised self-administration) that month, including scheduled administration, PRN administration and doses administered by school protocol. Please note the doses are totaled, but the total is not re-entered on the first page as done in previous years.

### 1. Analgesics

Only include analgesics (pain relievers) not available over-the-counter.

### 2. Antibiotic medications

Medications prescribed and administered *p.o.*, parenteral, or topical, for inhibiting the growth of or destroying bacteria and other microorganisms.

### 3. Anticonvulsants

Medications prescribed & administered for control of seizures.

### 4. Antihypertensives

Medications prescribed and administered for control of blood pressure

### 5. Antihistamines

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## 6. Asthma medications

Medications prescribed to control asthma, administered orally and by nebulizer or inhaler.

## 7. Epinephrine

Medication prescribed and administered for life-threatening allergy conditions. Not medications for asthma containing epinephrine.

## 8. Insulin

Medication prescribed and administered for maintaining proper blood glucose levels. Insulin doses (bolus) administered by the student via an insulin pump in the presence of the nurse are to be included.

## 9. Psychotropic medications

All medications prescribed and administered to affect changes in mental status/ behavior (*regardless of their primary usage in other settings*). There are no sub- categories as in previous years.

## 10. Other Prescription/Over the Counter (OTC) Medications

Count prescription medications that do not fall into one of the prescription medication categories above, based upon primary usage. Examples would include glucagon, eye drops, GI medications, antihistamines, Tylenol, Advil, anti-fungals, benadryl, tums, and calamine lotion. If your school protocol is written for a particular medication, those doses should be put in the correct column marked "PRN Administered per School Protocol."

☺ All medication types on the Monthly DPH Report correlate directly HealthOffice with the exception of:

- Anti-Depressant which will be counted with #9
- Anti-fungal which will be counted with #10
- Anti-inflammatory which will be counted with #10
- Antipyretic which will be counted with #10
- Bronchodilator which will be counted with #6
- Corticosteroid which will be counted with #10
- Gastrointestinal which will be counted with #10
- Psychotropic, Non-ADD which will be counted with #9
- Other which will be counted with #10

☺ Healthmaster was asked, and has added a "Self-Administer" check box to the Prescription Maintenance screen (it was added in the 5.5 release).

## 8. Nursing Procedures/ Treatments and Interventions

These procedures/treatments refer to activities provided for a pre-existing condition, which usually, but not always requires a physician order. These procedures have been regrouped by system. The total number of procedures are being requested, not the number of students who have these needs as in previous years. These procedures are an indicator of skilled nursing care, and not activities that are part of one's nursing assessment to determine nursing interventions. The exception by popular demand is auscultation. "A-E" is self-explanatory; see specific clarification for "F" and "G"

### F "Other Procedures"

- Wound care refers to major wound cleansing and care, not skinned knee and application of band-aids. Examples of wound care fitting this category would include; delayed wound healing in which the wound is being packed, ulcer care, major injury requiring cleansing and application of butterfly strips or bulky dressing to prevent further bleeding for a severe injury.
- Head Checks for pediculosis are being counted here due to the amount of time that is involved. If it is your practice to do "preventative screenings" count them in the Results and Measures/End of Year Report with the other screenings.
- Administer Immunizations refers to any immunizations or vaccinations administered (Hep, Flu, Td, etc) to students and staff.

G "Other" Use this for all other types of procedures that are not appropriate to the items listed by systems in Items A-E.

<b>8. A - Respiratory Procedures</b>	<b>Special Need Service Treatment (Selected when a Special Problem has been identified and a Special Need is selected to address the problem)</b>	<b>OV Treatment/ Interventions (Selected when a treatment/ intervention is selected during an office visit)</b>	<b>Comments/ Questions</b>
1. Peak Flow Monitoring	Peak Flow Meter Respiratory Assisted Peak Flow Meter	Peak Flow	Count both types of SN plus the OV Treatment.
2. Nebulizer Treatment	Mechanical Nebulizer		Count only SP Need
3. Oxygen Saturation Check		Oxygen Saturation Level	Count only OV Treatment.
		Pulse Oximetry	Count only OV Treatment.
4. Oxygen Administration	Oxygen Administration		Count only SP Needs

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5. Suctioning	Suctioning		Count both types of SN plus the OV Treatment.
6. Tracheostomy (Care, Cleaning, Tube Replacement)	Tracheostomy: Care & Cleaning Tracheostomy: Suctioning Tracheostomy: Tube Replacement		Count all 3 types SP Need types listed here.
7. Auscultate Lungs	Auscultate Lungs	Auscultate Lungs	Count both types.

<b>8. B - Diabetic Procedures</b>	<b>Special Need Service Treatment</b>	<b>OV Treatment/ Interventions</b>	<b>Comment</b>
1. Blood Glucose Testing (Glucometer)	Diabetes: Glucose Testing	Glucose Test	Count both types
2. Insulin Pump Care	Insulin Pump	Insulin Pump Care * Insulin Pump Education *	* OV treatment added in the V5.3 release
3. Carbohydrate/ Insulation Calculation	Carbohydrate/Insulin Calculation *	Carbohydrate/ Insulin Calculation *	* OV treatment added in the V5.3 release
4. Check Ketones	Check Ketones *	Urine Ketone Testing	* OV treatment added in the V5.3 release

<b>8. C - Cardiovascular Procedures</b>	<b>Special Need Service Treatment</b>	<b>OV Treatment/ Interventions</b>	<b>Comment</b>
1. Blood Pressure Measurement	Blood Pressure	Blood Pressure Test	Count SN and OV Treatment
2. Central Line Care: Monitor Infusion or Administration, Tub Replacement or Adjustment, Pump monitoring, IV Bag Change	IV Medication and Infusion: Tube in place Administer IV Medication Change IV Bottle or Bag. Change Peripheral IV Tubing Cannula Irrigation Infusion Pump		Count all 6 of these Special Need Treatments.
3 Central Line: Site Care, Flushing	Central Line Flush		

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<b>8.D - GI/GU Procedures</b>	<b>Special Need Service Treatment</b>	<b>OV Treatment/ Interventions</b>	<b>Comment</b>
1. Naso-gastric, Gastrostomy, or other Feeding Tube Care or Usage	Gastrostomy: Tube/Button: Slow Drip or Pump  Gastrostomy: Tube/Button: Syringe  G-Tube Replacement		Count these 3 types here
2. Ostomy Care (Colostomy/ Ileostomy/ Urostomy)	Ostomy Care: Empty or Change Pouch		Count SN here
3. Catheterization or Catheter Care	1. Catheterization - Assist 2. Catheterization - Clean 3. Catheterization - Monitor 4. Catheterization - Sterile 5. Silastic Catheter: Exit Site Care		Count all 5 of these types here.
4. Bathroom Assist or Diapering	Diapering  Bathroom Assistance	Bathroom Assistance	
5. Weight Measurement for medical condition not related to screening		Height/Weight Checked	Count OV Treatment here.

<b>E - Orthopedic Procedures</b>	<b>Special Need Service Treatment</b>	<b>OV Treatment/ Interventions</b>	<b>Comment</b>
1. Orthotic or Prosthetic Device Adjustment: Wheelchair Assistance; Crutch Walking Instructions	Orthotic or Prosthetic Device Adjustment	Crutch Walking Instructions	
2. Physical Therapy (Range of Motion Exercises, etc.)		Stretching Exercises Range of Motion Exercises	Count only OV Treatment for this category.

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8. F - Other Procedures	Special Need Service Treatment	OV Treatment/ Interventions	Comment
1. Wound Care	Wound Care Decubitus Care	Wound Care	
2. Head Checks for Pediculosis	Parasitic Exams that have Pediculosis checked.  <b>Note:</b> Nurses must use the Parasitic exam with the Pediculosis option check when checking for lice. The counts reflected are based on Pediculosis being checked and not the outcome of the actual exam.		
3. Administer Immunizations	Immunization Administrations Event Totals		Counts the total of Administered Immunizations to populate each total for Student and Staff for the selected date range.

8. G - Other	Special Need Service Treatment	OV Treatment/ Interventions	Comment
	1. CPR 2. Dysreflexia (Hyperreflexia) 3. Emergency Care 4. Inhaler 5. Mechanical Vent. 6. Nutrition Screening 7. Postural Drainage 8. Other	1. Assess Tympanic Membrane 2. Auscultate 3. CPR 4. Emergency Care 5. Hot Water Bottle 6. Hyperglycemia Treatment 7. Hypoglycemia Treatment 8. Moist Cool Compress 9. Moist Heat 10. Neuro Vital Signs 11. Palpation 12. Percussion 13. PPD Reading 14. Pregnancy Test 15. Tooth Saver	

## Nursing Case Management

### 9. Communications (phone calls. Letters) with anyone regarding IEP and 504 Plans

☺ The following Office Visits types must be selected to if this data is to be reported:

- 504 Conference
- IEP Meeting

### 10. Communications with parents or guardians (with or without students present) about individual student health issues (excluding IEP or 504 Plans). Do NOT count general communications (sent to all parent/guardians) OR home visits.

☺ The following Office Visits types must be selected to if this data is to be reported:

- Parent/Guardian Contact
- Parent/Guardian Conference
- Phone Contact
- Transfer Student
- Immunization Maintenance
- Register Student
- Referral Follow-up
- Withdraw Student

☺ And if the following Office Visit "Actions" from the RAD Screen are used, they will also be counted:

- Chronic Illness Form Given
- Prescription Med From Given
- IHCP/IEMP
- Provided Form for Eye Injury
- Homebound Form Given
- Provided Form for Head Injury
- Notify Parent(s)/Guardian
- Sent Note Home
- OTC Form Given
- Special Exemption Form Given

## 11. Communications with school staff about student health issues (excluding IEP or 504 Plans)

☺ The following **Office Visit Types** must be selected to be counted here:

- Faculty Conference
- Multidiscipline
- Staff In-Service
- Staff Meeting

☺ And the Office Visit ' **Actions** from the RAD Screen if used:

- Authorize Bathroom Privileges
  - Consult with Occupational Therapist
  - Consult with Psychologist
  - Guidance Counselor referral
  - Notify School Nurse (added in the 5.4 HealthOffice release)
  - Notify Teacher
  - Referred to School Social Worker
  - Special Ed. Service Referral
  - Consult with Audiologist
  - Consult with Physical Therapist
  - Consult With Speech Therapist
  - Notify Principal
  - Referred to Administration
  - Referred to School Nurse
  - School Referral
-

## 12. Communications with community agencies and health care providers about student health issues (excluding IEP or 504 Plans)

☺ The following Office Visit types must be selected to be counted here:

- Hospital Visit
- Medical Doctor Athletic
- Medical Doctor EPSDT
- Medical Doctor Visit
- Physician Consultation
- Referral Conference

☺ And, the following Office Visits ' Actionsμ from the RAD Screen, if used:

- Abuse Registry
- Agency Referral
- Counseling Health Start Referral
- Consult w/Physician
- District Nurse Referral
- Letter to Physician
- Notify Social Services
- Police Called

## 13. Home visits by school nursing staff

☺ The Office Visit Type ' Home Visitsμ is the only selection that will populate this answer.

## 14. Number of Student Meetings Attended

Refers to all meetings you as the school nurse attend regarding any student health (medical/nursing and mental health/behavioral) issue. For example, if you attend one meeting each week where you discuss four high risk students and their health needs, you would place a 16 in this box (4 students X 4 weekly meetings =16). If you attended meetings on 8 different students at 8 different times you would place an 8 in this box.

☺ The Office Visit Type of ' Referral Conferenceμ is the only selection that will populate this answer.

## LINKAGES

### 15.–19.

“Referred” indicates an actual appointment or visit has been set up by the school nurse, parent or student over 18 years, with the selected provider or agency (dentist, nurse practitioner, primary care physician of record, new primary care or mental health care provider, including the school counselor) for a specific condition as a result of the encounter. Referral does not mean “follow-up with your physician if you don’t feel better.”

☺ Number 15 is a tally done by the nurse, not HealthOffice.

## **16. Individuals with regular primary care provider who were referred to their own primary care providers who were referred to their own primary care providers and other providers.**

☺ The following Office Visit ' Actions from the RAD Screen are the only ones that will populate this answer, if used:

- Audiology Referral
- Clinic Referral
- Hearing Referral
- Medical Referral
- OT Referral
- Physical Therapy Referral
- Psychologist Referral
- Refer to Specialist
- Speech Therapy Referral
- Substance Abuse Counseling Referral
- Vision Referral

**17.** ☺ Number 17 is a tally done by the Nurse, not HealthOffice.

## **18. Individual students referred for dental care.**

☺ For **all** Events (whether it be in an office visit or dental exam), where "Actions" from the RAD Screen = "Dental Referral".

## **19. Individual students referred to mental health services**

☺ For **all** Events, where "Actions" from the RAD Screen = "Mental Health Referral" is selected, this will populate this answer.

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## WELLNESS MANAGEMENT

### 20. Hunger management: Number of times food/snacks were provided.

This refers to the number of times a student was provided with nourishment to satiate hunger due to lack of access, for whatever reason. This **does not** include snacks/beverages for the management of diabetes.

- ☺ All Office Visits with the System Groups shown below, and the Symptom Conditions as shown below, with the Treatments/Interventions of 'Food or Snack' (for the selected date range) and populate the total count of Food or Snack Treatments/Interventions in the # 20 field box.

<u>System Group =</u>	<u>&amp; Symptom Conditions =</u>	<u>&amp; Treatments/Interventions =</u>
Nutritional/Metabolic	No Breakfast	Food or Snack
	No Lunch	Food or Snack
	Poor Appetite	Food or Snack
	Skipped Meal	Food or Snack
	Eating Disorder- Anorexia	Food or Snack
	Eating Disorder- Bulimia	Food or Snack
	Eating Disorder- Overweight	Food or Snack
Other/Miscellaneous	Hungry	Food or Snack

### 21. Number of health promotions or flyers

Self-explanatory

- ☺ Hand counted by the nurse, not HealthOffice.

## 22: Wellness/Safety topics presented this month

Using the table provided, indicate the topics presented. Include the number of presentations and the number of participants.

For example:

- If you gave a presentation to 20 professional staff on Life Threatening Allergies one day, and then to 5 cafeteria attendants a week later, then gave the presentation to the Parent Teachers Organization and 25 parents attended, the line for Life Threatening Allergies would read 3 presentations, 0 students, 25 staff and 25 community.
- If a presentation is done by more than one nurse (e.g. Heartsaver AED program with three nurses/instructors for 20 students) only one nurse should record the statistics for the presentation.

☺ Classroom Lesson

## 23: Support Groups/Clubs

Self-explanatory; refer to instructions in #22 to determine number of participants,

☺ Hand count by nurse, not HealthOffice

## 24: Number of student assessments for suspected substance abuse

Refers to any and all assessments (regardless of outcome) made by the nurse to determine if a student is under the influence of a substance. Do not include tobacco.

☺ Office Visits where the System Group of Psychological/Social is selected and the following Symptom Conditions are used with the exception of (Abuse-Tobacco) within the date range selected, where the Office Visit Treatment = Substance Abuse Assessment.

System Group =	& Symptom Conditions =	& Treatments/Interventions =
Psychological /Social	Abuse-Alcohol	Substance Abuse Assessment
	Abuse-Drug	Substance Abuse Assessment
	Abuse-Inhalants	Substance Abuse Assessment
	Abuse-Unknown	Substance Abuse Assessment

## 25. Program Development

The intent of this question is to track the number and type of building or district-wide meetings attended by the school nurse.

☺ Hand counted by the nurse, not HealthOffice

## 26:

Self-explanatory

☺ Hand counted by the nurse, not HealthOffice

## 27. Glucagon Administration by Injection for the Treatment of Severe Hypoglycemia

Provide PRN Doses Administered per Prescription this month.

The intent is to track the number of PRN Administered doses of Glucagon. The number reflected is provided through the HealthOffice system. This is new as of 5.5 SP1.