The Nurse's Role in the Special Education Process

School Nurse Organization of Minnesota Special Education Committee

What is Special Education?

Special Education means any specifically designed instruction and related services to meet the unique cognitive, academic, communicative, social and emotional, motor ability, vocational, sensory, physical, or behavioral and functional needs of a pupil as stated in the Individualized Education Program Plan (IEP)

MN Rule Chapter 3525 Subp. 42

How does the State of MN define a child with a disability?

Every child who has a hearing impairment, blindness, visual disability, speech or language impairment, emotional/behavioral disorder, specific learning disability, autism, traumatic brain injury, multiple disabilities, or deaf/blind disability and needs special instruction and services, as determined by the standards of the commissioner, is a child with a disability.

MN Statute 125A.02

What is School Nursing?

Federal definition is found in the Individuals with Disabilities Education Improvement Act of 2004 (34 C.F.R. 300.34)

Commonly known as-IDEIA

 Defines Nursing as a related service and nurses as related service providers

What is a School Nurse?

Related Service means transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services for diagnostic and evaluation purposes. Related services also include school health services and school nurse services, social work services in schools, and parent counseling and work services in schools, and parent counseling and training.

34 C.F.R. 300.34

School Nurse, definition

School Health and School Nurse Service means health services that are designed to enable a child with a disability to receive a free and appropriate public education (FAPE) as described in the child's IEP. School nurse services are services provided by a qualified school nurse. School health services are services that may be provided by either a qualified school nurse or other qualified person.

C.F.R. 300.34 (13)

How does the State of Minnesota Define a School Nurse?

- Minnesota Administrative Rules
- 8710.6100 SCHOOL NURSE
- Subpart 1.
- Scope of practice.
- A school nurse is authorized to provide to prekindergarten through grade 12 students nursing services in a school setting.
- Subp. 2.
- Requirements for first professional license.
- A candidate for licensure as a school nurse shall:
- A.
- hold a baccalaureate degree in nursing from a regionally accredited college or university;
- B.
- be currently registered in Minnesota to practice as a licensed registered nurse under the Board of Nursing; and
- C.
- be currently registered in Minnesota as a public health nurse under the Board of Nursing.
- Subp. 3.
- [Repealed, 25 SR 805]
- Subp. 4.
- Professional license.
- A professional license shall be renewed according to the rules of the Board of Teaching governing professional licensure. Evidence of current Minnesota Board of Nursing registration as a licensed registered nurse is also required.
- Subp. 5.
- Maintaining board of nursing registration.
- In order to retain licensure as a school nurse, current registration as a registered nurse and registration as a public health nurse must be maintained at all times. Lapse of this registration or licensure is grounds for revocation of licensure as a school nurse.

The Nurse's Role in Special Education

The nurse is an integral part of the Special Education team.

- Nurses collect and provide health related information for the IEP team
- Nurses professionally interpret and synthesize health related information
 - In order to determine how the health condition impacts learning and the school environment
 - In order to determine the student's need for nursing services during the school day

The Special Education Process is a Cycle-

Referral
Pre-Evaluation
Evaluation
IEP Planning and Writing
Documentation of Services
Re-Evaluation
Required every 3 years
IEP Planning and Writing
Required annually

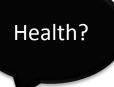
Referral and Pre-Referral Activities-

- A parent or public agency can bring concerns about the child and learning to the child study team (CFR 300.301, Initial Evaluations)
- The team then needs to decide if an evaluation will be done and must respond to the parent in writing, often referred to as Prior Written Notice
- If an evaluation will be done, a notice of the evaluation is sent to the parent or guardian detailing who will evaluate and what testing will be done. Once the district receives written consent to evaluate from the parent or guardian, the team has 30 days to complete the evaluation process. (MN Rule 3525.2550 subp. 2)

Evaluation Procedures-

- The Child will be evaluated in all areas related to a suspected disability, including, if appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.
- The evaluation is sufficiently comprehensive to identify all of the child's special education and related service needs, whether or not commonly linked to the disability category in which the child has been classified.
- (CFR 300.304, Sec 4, 6) & (MN Rule 3525.2710 subp.4)

The nurse should use these guidelines to assist in determining if their service should be part of the evaluation. Is the evaluation comprehensive if health is not assessed?



Evaluation Procedures-

School nurses use a health interview style tool to gather the information needed for a special education evaluation. This tool is called the *Health and Physical Assessment*.

 In Minnesota, the Health and Physical Assessment tool must be completed by a LSN or PHN, and should meet current professional standards. (CFL memo 4/8/93, DHS IEP Technical Assistance Guide, 2/16)

The health and physical assessment tool on the SNOM website has all of the components to meet current professional standards.

Evaluation Procedures- How does a nurse decide when a Health & Physical Assessment should be part of the evaluation process?

- The LSN should be included in the pre-referral and referral process in order to determine if there may be a health need that is impacting learning or is educationally significant.
- The nurse's decision to be part of the evaluation is always an individual decision based on the needs of the student.
 Do not base the decision to be part of the evaluation on a particular diagnosis or disability category alone.

Evaluation Procedures- When is a Health and Physical Assessment required?

 Required in order for a student to qualify for special education services under the disability category of Physically Impaired (PI)

This is the only disability category for which a Health and Physical Assessment is mandatory

(MN Rule 3525)

Evaluation Procedures-

A Health and Physical Assessment is highly recommended when-

Documentation of the health condition by a health care provider is *required* when determining eligibility for categories such as

- Other Health Disability
- Traumatic Brain Injury

Evaluation Procedures-

- Regardless of the disability category, a Health and Physical Assessment is *necessary* component of the evaluation for students who have a health conditions (physical or mental) that require school nursing services-
 - Individual or Emergency Care Plans
 - Direct services: Medications, treatments, hearing monitoring
 - Indirect services: Medication management, care coordination, chronic condition management

Evaluation Procedures-

A Health and Physical Assessment is also recommended as part of the evaluation when-

- Students have a physical/mental health condition but the team has little to no information about the condition
- Students have a complex health history
- Students have a physical/mental health condition and additional information is needed in order to understand how the condition impacts learning or participation at school

Evaluation Procedures-

- A **Health History <u>Review</u>** is allowed when determining eligibility for students under the disability categories of Other Health Disability and Emotional Behavioral Disability (MR 3525.1335, Subp. 3.D, MR 3525.1329, Subp. 3.A.6)
- A health history review is a less extensive examination of health and a school nurse is not required to be the professional to collect health information for a review.
- If the student has a health condition that requires nursing services, the school nurse would evaluate using a health and physical assessment as usual.

Evaluation Procedures- The Evaluation Report (ER or Evaluation Summary Report, ESR)

The evaluation report is a collective summary of the results of each of the evaluations done by the team members.

The nurse's evaluation summary-

- Is a description of the health conditions that are currently affecting the student in the educational environment and the resulting needs of the student at school.
- The summary report is written in language that is clear to parents and non-health professionals.

Evaluation Procedures- The Nurse's Role, Writing an Evaluation Report Summary Statement

- Data from the Health Assessment is used to write a summary in the Evaluation Report.
- The ER is a *synthesis* of data from the Health and Physical Assessment
 - Past and current data relevant to determining eligibility for special education services. Other information gathered in the health and physical assessment may be important, but may not be relevant to special education. For example determining that a student is under immunized.
- The ER is an analysis of the data from the Health and Physical Assessment
 - What do you know about that particular health condition?
 - How does the health condition impact this student's learning?

Example of Evaluation Report (ER or ESR) Statement

Kelly is a seven year old second grader who was born prematurely at 30 weeks gestation, weighing 3 pounds 8 ounces. She was hospitalized for one month following birth due to respiratory distress syndrome that required CPAP and oxygen; sepsis (infection); and jaundice or hyperbilirubinemia. Kelly was referred to ENT by the NICU follow-up clinic and was diagnosed with a bilateral, severe high frequency sensorineural hearing loss, worse on the left side, with normal tympanograms. Audiologic evaluation and hearing aid fitting was completed in January 2010. Progress notes from Minneapolis Clinic (5.17.17) indicate that the hearing loss was acquired as a result of complications and treatments associated with the infection or septic event in infancy.

Vision screening was passed on 4/18/17, there are no past vision concerns

Currently hearing follow-up visits are scheduled in the audiology department at

Minneapolis Clinic every 6 months.

There are no other ongoing health concerns per Kelly's parents and primary care provider also at Minneapolis Clinic. Kelly is seen at least annually for primary care.

Kelly has missed three days this school year due to minor illnesses. Health has never led to attendance concerns.

- The next step, The IEP Process
- A meeting to develop an Individual Education Program Plan (IEP) for a child is conducted within 30 days of a determination that the child needs special education and related services (CFR 300.323)
- Through evaluation the nurse has determined if nursing is a necessary related service in order for the student to benefit from Special Education
- Next, determine how you will describe the Nursing Service on the IEP, this is the 'statement of need'
- The IEP is reviewed annually

Describing Direct Service on the IEP

- The time spent providing a "face to face" special ed or related service to a student (MR 3525.0210, Subp.14)
- Examples are medication administration and management, tube feeding, hearing thresholds, health education or counseling
- The amount of direct time put on the IEP is determined by how long it takes to provide the face to face service to the student. It can be indicated in increments such as daily, weekly, monthly, per school year
- e.g. Nursing is a necessary related service 15 minutes daily for medication administration and management, 60 minutes twice a school year for teaching and counseling regarding diabetes management

Describing Indirect Service on the IEP

- The time spent providing the ongoing planning, consultation, training, adapting (MR 3525.0210 Subp.14)
- Examples of indirect nursing services are case coordination, training other staff regarding an individual student's health condition, communication with parents, health care providers and other agencies, delegation
- Nurses often under represent the amount of time this takes on the IEP!
- It is not required that a direct service is on the IEP in order to put indirect services on the IEP.
- e.g. Nursing is a necessary related service twice a school year for 60 minutes for case coordination

The IEP Process

Writing a Nursing Statement of Need

- Describes the student's need for Nursing service on the IEP plan
 - The Licensed School Nurse will provide hearing management measuring pure tone threshold hearing assessments twice per school year.
 - The Licensed School Nurse will facilitate care coordination between school staff, family and health care providers.

The statement of need, time and frequency may be written into the adaptation section of the IEP, or may be on a service grid. This varies as school districts use different IEP formats and electronic systems. The requirements of what must be documented does not vary.

2010 Minnesota Statutes- 125A.21 THIRD-PARTY PAYMENT

Subd. 2.Third-party reimbursement

(a) Beginning July 1, 2000, districts shall seek reimbursement from insurers and similar third parties for the cost of services provided by the district whenever the services provided by the district are otherwise covered by the child's health coverage. Districts shall request, but may not require, the child's family to provide information about the child's health coverage when a child with a disability begins to receive services from the district of a type that may be reimbursable, and shall request, but may not require, updated information after that as needed.....

- (2) inform the parent or legal representative that a refusal to permit the district or state Medicaid agency to access their private health care coverage does not relieve the district of its responsibility to provide all services necessary to provide free and appropriate public education at no cost to the parent or legal representative.
- Subd. 6.District obligation to provide service.
- To the extent required by federal law, no school district may deny, withhold, or delay any service that must be provided under an individual education plan because a family has refused to provide informed consent to bill a health plan for services or a health plan company has refused to pay any, all, or a portion of the cost of services billed.

Third party reimbursement- MN 256B.0625

• (h) Nursing services as defined in section 148.171, subdiv 15, and provided as an individual education plan health-related service, are eligible for medical assistance payment if they are otherwise a covered service under the medical assistance program. Medical assistance covers the administration of prescription medications by a licensed nurse who is employed by or under contract with a school district when the administration of medications is identified in the student's individualized plan.....

- Covered IEP Services, Nursing (DHS IEP Technical Assistance Guide, see link in resource section)
- <u>Face to Face Nursing Care</u> med admin, cath, tube feeds, glucose tests, health counseling, vent/tracheostomy care
- Medication Management review of meds, adherence, eval for adverse rxn, diagnostic checks of meds (vital signs, reagent strips), assessing health needs, eval of behavior and education regarding meds and adherence, any contacts with the physician about prescriptions, tolerance or adherence to the med regime.
- <u>IEP Evaluations</u> (provided by a Licensed School Nurse or Public Health Nurse) must include face to face assessment, also may include time for pre-IEP eval that end in an IEP, assessment to determine the progress/needs, interpreting test results, writing reports. May not include meeting time.

- Documentation Key Points-
- All related services working with the student must be documented on the IEP.
- All related service providers must document the services they provide to the student, direct and indirect.
- School districts are able to seek third party reimbursement with proper documentation. Covered services and the requirements for documentation for third party billing can be found in the DHS Technical Assistance Guide.

- MN Statute 256B.0625
- Subd. 26- Special Education Services

Medical Assistance covers medical services identified in a recipient's individualized education plan and covered under the medical assistance state plan. Covered services include OT, PT, speechlanguage therapy, clinical psychological services, nursing services, school social work services, personal care assistants serving as management aides, assistive technology devices, transportation services, health assessments, and other services covered under the MA state plan.

• ...The nonfederal share of costs for services provided under this subdivision is the responsibility of the local school district as provided in section 125A.74.

Resources

Resources

Electronic Code of Federal Regulations

http://ecfr.gpoaccess.gov

Minnesota Office of the Revisor of Statutes

https://www.revisor.mn.gov

Minnesota Department of Human Services IEP Technical Assistance Guide

http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_C ONVERSION&RevisionSelectionMethod=LatestReleased&dDocName= DHS16_151385

School Nurse Organization of Minnesota

http://www.minnesotaschoolnurses.org