

Partnering with School-Based Health Centers: What Schools Need to Know

Guidelines for Schools with School-Based Health Centers

Chicago Public Schools (CPS) developed a **School Nurse Handbook** to provide easy reference to the procedures used most often in selected segments of the school health services for students. This section takes relevant information from that handbook and applies it to schools with school-based health centers (SBHC). The accompanying chart includes relevant guidelines for schools with SBHCs and delineates implications for the SBHC.

It is also noted that on-going communication between the school and SBHC staff is integral in building comprehensive health services for the students. One suggested strategy to strengthen collaboration is to create a **school health team** which meets on a regular basis to develop protocol and clarify roles and responsibilities. Suggested members of the team may include school administration, teachers, main office staff, guidance counselors, nurses, social workers, food service staff, engineers, and SBHC staff. Possible tasks for the team may include:

- Develop protocol to clarify roles during an emergency in the school and when a communicable disease is diagnosed.
- Develop strategies to inform school staff of current health trends and to delineate the roles and responsibilities of school and SBCH staff.
- Develop strategies to increase enrollment in the SBHC in order to optimize service utilization.

CPS School Nurse Handbook – Guidelines for Schools with SBHCs

1. Consent by Minors to Medical Operations
This statute states that minors may consent to certain medical procedures as stipulated in the Act. This consent applies to married minors, minors who are pregnant, parents who are minors, emergency treatment or first aid to minors, and consent for treatment of venereal disease, alcohol and drug abuse for minor. Minors at least 18 years of age may consent for required vaccinations (CDPH). IL School Code Chapter 23, Sect. 4501
Implications for schools with SBHCs
<ul style="list-style-type: none">▪ Though parental (or legal guardian) consent is generally required for students to be seen at the SBHC, there are some circumstances where students can be seen without consent. SBHCs always try to include the parent when possible but in some instances this may not be realistic. Parents may approach a school administrator and be angry or confused about a student who was seen without consent. It is best for the administrator to refer the parent directly to the SBHC.
2. Infectious Disease Control
Infectious diseases are illnesses in the school setting that may be caused by viruses, bacteria, fungi or parasites. Contagious or communicable diseases can be spread from one individual to another. Contagious illnesses are one of the major problems that schools face, causing both staff and student absences, discomfort for the student and loss of work for the parent/guardian. Parents are responsible for the care of their child with a contagious condition.
The <i>Illinois Department of Public Health Communicable Disease Manual</i> guides the management of communicable diseases and exclusion of students from school. It is important that the nurse keep informed about diseases common in the United States, as well as illnesses and diseases uncommon to the United States but which may be common in other countries from which our students come.
The category of conditions commonly referred to as nuisance diseases includes conditions such as pediculosis, ringworm, impetigo, and scabies. The nurse deals with a single case as it occurs by making an appropriate referral and providing the necessary follow-up. The student is excluded until proof of treatment is established

and/or there is an absence of symptoms.												
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<ul style="list-style-type: none"> ▪ SBHCs can diagnose and treat communicable diseases and provide the required documentation to the appropriate school contact. When there is a concern of contagion within the school in cases such as scabies or lice, SBHC personnel will inform the identified school contact. It is the school’s responsibility to notify the appropriate District and school community members. ▪ It is important for the school and the SBHC to designate the school contact and mechanism for communicating information in these circumstances. 												
3. Exclusion for Illness												
Nurses, upon assessment or knowledge of a student, may exclude a student to prevent spread of a suspected communicable disease, pending medical diagnosis, and following the guidelines of the <i>Illinois Department of Public Health Communicable Disease Manual</i> . A student who has been excluded must provide proof of treatment, and depending in the condition, a statement from the physician documenting non-contagious status before returning to school.												
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<ul style="list-style-type: none"> ▪ SBHC will notify the identified school contact when a communicable disease has been diagnosed. The school is responsible for education and notification of relevant contacts. SBHC personnel can work with school staff to help educate appropriate stakeholders. 												
4. Excluded Students												
Nurses should provide in-service training to teachers and staff on the pathophysiology (causative organism, mode of transmission, methods of control) to observe for and detect early signs of illness. Students should be excluded on the basis of symptoms, behavior, or complaints of not feeling well. If the child’s condition is sufficiently different from usual to attract attention, there may be cause for exclusion. Some characteristics suggesting the possibility of illness or communicable disease are:												
<table border="0"> <tr> <td>1. Unusual pallor or flushed face</td> <td>7. Skin rash</td> </tr> <tr> <td>2. Unusual listlessness</td> <td>8. Diarrhea</td> </tr> <tr> <td>3. Red or watery eyes</td> <td>9. Nasal discharge</td> </tr> <tr> <td>4. Photophobia</td> <td>10. Headache, sore throat and stomachache, or elevated temperature</td> </tr> <tr> <td>5. Cough</td> <td></td> </tr> <tr> <td>6. Nausea with or without vomiting</td> <td></td> </tr> </table>	1. Unusual pallor or flushed face	7. Skin rash	2. Unusual listlessness	8. Diarrhea	3. Red or watery eyes	9. Nasal discharge	4. Photophobia	10. Headache, sore throat and stomachache, or elevated temperature	5. Cough		6. Nausea with or without vomiting	
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<ul style="list-style-type: none"> ▪ If the SBHC determines that a student needs to be excluded due to illness or injury, they call the parent and follow school protocol for excluding students. This includes informing the main office or attendance office that a parent has been called and the student is being sent home. The student will be sent to the main office or attendance office to wait for their parent. If a referral is needed, the SBHC will be responsible for working with the parent. 												
5. Early Dismissals												
If a student requires an early dismissal from school because of an illness or extreme emergency, the protocol of the school must be followed. High school student must report to the Attendance Office. Attendance personnel will call the parent or legal guardian listed on the emergency information form. All students presenting with an illness, under the age of 18, must be accompanied home by a parent or guardian.												
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6. Care of a Sick or Injured Child												
An ill or injured student is never sent home alone, but should always be accompanied by an adult. Parents should be notified via phone or letter of the student’s complaint of illness. The parent or guardian is												

responsible for arranging for the child's transportation home if warranted. If the parents do not understand the importance of further care of the child, the nurse should provide health counseling and a written referral. The nurse may suggest sources of treatment or make referrals to community health care providers. The nurse must document the encounter. If, in the nurse's professional judgment, the student should be seen by a physician, advise the parents to seek medical care, and document findings with a written referral to the physician. Always put a copy of the referral in the student's health folder.

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7. Emergency Care and Ambulance Transport

An emergency is defined as a situation in which immediate medical care is needed to prevent death or irreversible health problems. The school nurse should be notified of any serious accident or illness. It has been best practice to have a trained/certified first aid responder in all CPS schools and the nurse must be consulted regarding health policies, procedures, protocols, in health/nursing issues. It is essential that parents be informed promptly and be involved in decision making. If an ambulance is needed, the call to 911 is placed first, and then the parents are notified. A responsible adult should accompany the child to the hospital. Nurses should not leave the school to accompany the student to the hospital unless medically necessary. Check with the school building administrator regarding specific procedure related to 911 calls.

Implications for schools with SBHCs

- SBHC staff are first responders and can be utilized for emergencies as determined by the SBHC staff and building administrator.
- The student or employee in need of first aid should be encouraged to go to the SBHC if at all possible as anytime the health care provider is away from the SBHC, it leaves the health center unattended for other emergencies.
- The initiator of a 911 call is determined by where incident occurs. For example, if student falls ill or is injured in a classroom or in the hall, the school would call 911. If it is determined that a student needs emergency care while they are in the SBHC, then SBHC staff will call.
- SBHC staff should not accompany students who are being transported via ambulance as this leaves the SBHC unattended in the event of another emergency. CPS requires that a CPS employee escort all students in ambulances.

8. Emergency Care Protocol

1. An emergency information card should be on file for each student. Check the emergency card or access the SI system for the student's parent/guardian, address, phone and contact information.
2. When an accident or serious illness occurs during the school day, the teacher should notify the school nurse (if on site), school administrator and/or the school's first aid responder.
3. The nurse/school's first aid responder should provide, or direct, emergency care until wither the parent or medical authorities assume the responsibilities.
4. The nurse/first aid responder should notify the student's parents or other responsible person designated by the parent as soon as possible.
5. If the parent or other responsible person is not available and/or immediate medical attention seems warranted, the child's physician should be contacted for instructions.
6. If the parent or other responsible person is not available and immediate medical attention seems warranted, call 911 for the child to be taken to a hospital with emergency room facilities. School personnel designated by the principal should accompany the student. **Under no circumstances are school personnel to transport students in their private vehicle.**
7. It should be remembered that a parent who can be reached at work is an available parent and should be contacted to assume responsibility for the child although it may still be expedient for school personnel to meet the parent at the hospital/physician's office with the child.

8. If the school nurse is not in the school, these procedures should be carried out by appropriately trained first responder/school personnel designated by the principal.

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