

>> Oregon School Nurse Survey

2021



Oregon
Health
Authority

PUBLIC HEALTH DIVISION

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Summary

Data comes from the 2021 Oregon School Nurse¹ Survey conducted by the Oregon Health Authority, Adolescent and School Health unit. Out of approximately 400 registered nurses working in Oregon schools, 251 school nurses responded from 29 counties and 81 school districts.

During the 2020-2021 school year, Oregon school nurses provided essential support for students and school communities. Highlights include:

- **Care teams and caseloads:**
 - » School nurses **coordinated care** with multi-disciplinary teams
 - » Full-time school nurses served an average of **4 schools**
 - » The most common caseload for a full-time school nurse in the survey was **1500-2500 students**
 - » 81% of the nurses **delegated specialized care** to unlicensed staff to meet student needs.
- **COVID-19 impacts:**
 - » COVID-19 related tasks and duties typically took **50% or more** of surveyed school nurses' time
 - » 79% of school nurses had students with **unmet care needs**



¹ The term 'school nurse' used in this report refers to a licensed professional registered nurse working in the school setting, who is employed or contracted by a school, district, or Education Service District. Oregon law defines a 'school nurse' as a registered nurse certified by the Teacher Standards and Practice Commission (TSPC) as qualified to conduct and coordinate the health services programs of a school. [ORS 342.455]

- » Schools provided **fewer preventive services**, such as vision screening, compared to the prior years
- **Professional support:**
 - » Nursing services were **supervised by a non-nurse** such as a principal or special education director in 83% of school districts surveyed
 - » **93%** of school nurse respondents participated in **nurse-to-nurse support**
- **Retention:**
 - » **31%** of surveyed school nurses had worked in school settings for **10 years or longer**
 - » **36%** of surveyed school nurses had worked in school settings for **3 years or fewer**
 - » **Fewer than half** of surveyed school nurses (43%) expected to remain in their school setting **for the next 5 years**



Introduction

Background

School nurses support student wellbeing and academic success by providing individualized services for students with special healthcare needs. Additionally, school nurse efforts benefit the school community through health promotion, disease prevention, and school health policy development.

When school nursing is integrated and supported within school systems, it improves the opportunities for each student to achieve health and educational goals. The number of school nurses employed for a given student population impacts whether schools can consistently identify and address student needs. In addition to the number of nurses, student support is impacted by whether school teams collaborate and utilize the role of a school nurse effectively.

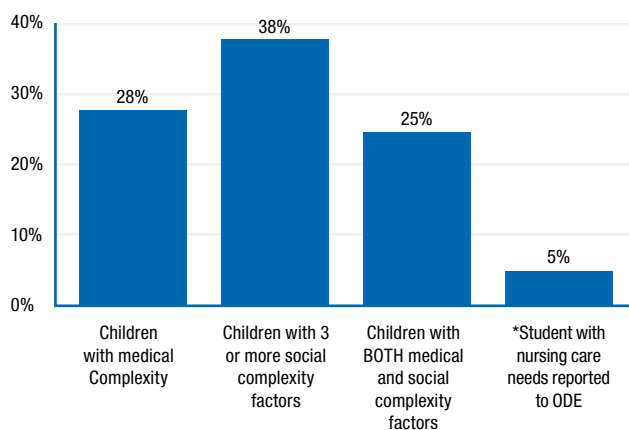
Identifying and addressing needs: Oregon school nursing service gaps

In 2021, over 500,000 Oregon youth were enrolled in Oregon Health Plan (OHP). Of those, over 25% lived with a chronic condition, such as asthma or diabetes, and over 35% lived with 3 or more social factors, such as poverty, drug use, or mental illness, which increase health risks and level of support needed ([Oregon Child Complexity Report](#)). In comparison, Oregon public schools enroll over 500,000 students, but only identify nursing service needs in about 5% of the student population ([Oregon Department of Education, 2022](#)). While not all students with chronic conditions require daily services, these data indicate gaps in identifying school nursing service needs. (See Figure 1)

Other data indicate gaps in providing school nursing services. In 2020-2021, 30% (n=60) of school districts did not report any nurse FTE (full-time equivalent hours). Out of the 137 districts who did report nurse FTE, 44 were hired for less than half time, meaning that a nurse was available less than 20 hours a week for the entire district...[and] only 15 school districts (7.6%) meet the recommended ratio of 1 nurse to every 750 students ([Oregon Department of Education, 2022](#)). During the 2020-21 school year, more than 20% of Oregon 11th graders reported unmet physical or mental health needs. ([Oregon Health Authority, 2021](#)).

Figure 1: Children with identified needs

Oregon Child Health Complexity Report 2021 (n=518,076)
*District report to ODE 2020-2021 (n=560,917)



Survey Findings

Services provided by Oregon's school nurses

Common school nursing services, provided by over 50% of surveyed nurses, included:

- **Chronic conditions support** such as care planning, care coordination, skill building
- **Mental health support** such as direct care and related trainings
- **Staff training** such as life-saving treatment protocols, medication administration, COVID-19 protocols
- **Health education** for students and families such as classroom lessons and health messaging
- **Health policy development** such as health room protocols and Operational Blueprint for School Re-Entry for COVID-19 response

Specific services varied based on setting and nurse capacity. For example, while 88% of surveyed school nurses reported care coordination for students with chronic conditions, and 95% provided trainings for school staff, just 59% provided skill-building with students and families to improve self-management of their conditions.

School assignments, ages and number of students served

Schools served

National best-practice recommendations are for a full time registered nurse in every school [[Healthy Schools 2022](#); [AAP 2016](#); [NASN 2020](#)]. In Oregon, surveyed full-time nurses served an average of 4 schools. 10% of surveyed nurses worked full-time for a single school, while 20% served 6 or more schools. (See Figure 2)

Caseloads

Most school nurses in Oregon have more students daily under their care than recommended by Oregon state law. Oregon law recommends a school nurse ratio

Figure 2

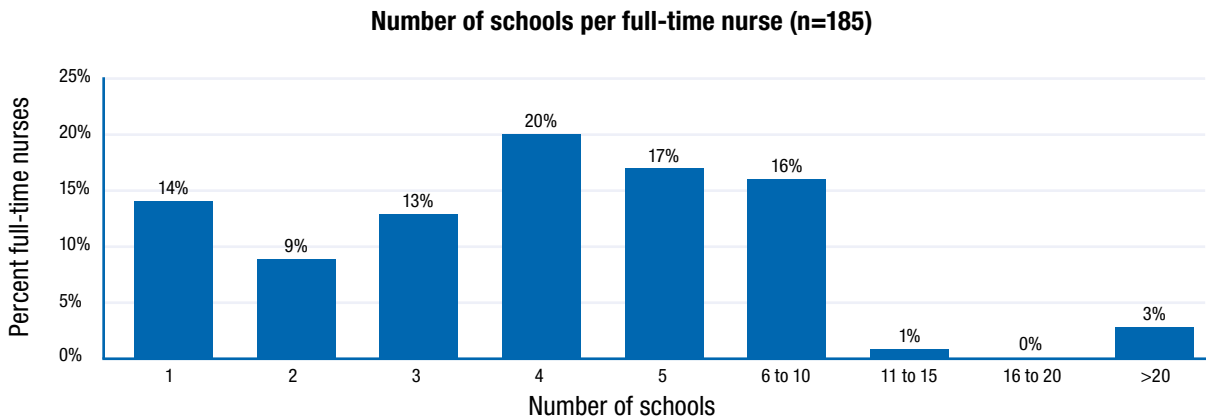
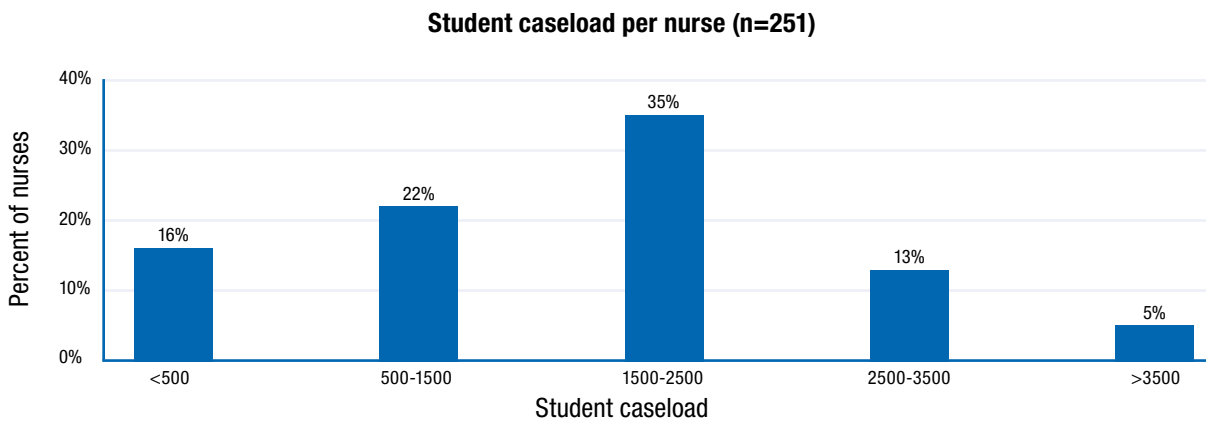


Figure 3



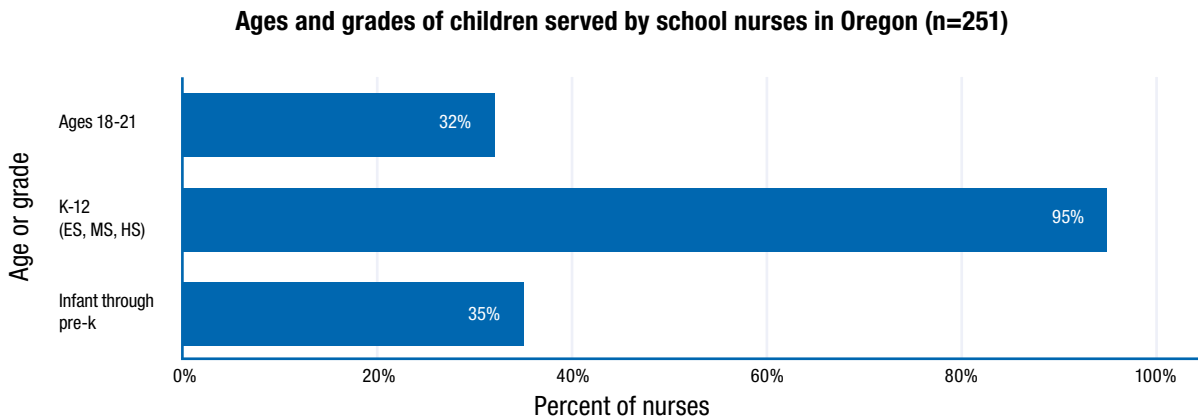
of 1:750, meaning 1 FTE of RN services per 750 enrolled students [ORS 336.201]. In 2021, 35% of surveyed nurses reported a caseload of 1500-2500 students.

Many of the nurses who reported smaller student caseloads still practiced at ratios outside of the state recommendation. This is because 26% of respondents worked less-than-full-time. For part-time nurses, ratio is higher than caseload: a half-time nurse (0.5 FTE) with a caseload of 500 students is practicing at a school nurse ratio of 1:1000. (See Figure 3)

“ My school team are incredible people. Secretary, teachers, everyone has worked so hard this year. I am so fortunate to work with these amazing humans. ”

—Oregon school nurse

Figure 4



Ages served

Oregon school nurses support persons from infancy through young adulthood. Most respondents served students in K-12 school settings, with slightly higher proportion in elementary schools compared to middle or high schools. About a third of nurses reported they also served younger populations, such as in early learning, pre-K, teen parent programs, or served older students, or both, such as in transition programs (ages 18-21). (See Figure 4)

“ I really enjoy working with the students. ”

—Oregon school nurse

Delegation of nursing care

Nursing care delegation is a licensed process by which the nurse transfers skills and knowledge to unlicensed assistive personnel (UAP) to perform specialized nursing care tasks. Oregon’s Nurse Practice Act laws establish the legal standards for care delegation which nurses must follow, and evidence-based recommendations include each nurse overseeing no more than three UAPs performing delegated care to ensure safe supervision.

“ School nursing, to me, remains a specialty of nursing that is **frustratingly misunderstood and under-appreciated** by most education staff, school communities, and families. ”

—Oregon school nurse

[[OSBN 2019](#); [OAR 851-047-0000 through 0040](#); [Ficca & Welk, 2006](#)]

During the 2020-2021 school year, 81% of Oregon school nurse respondents reported using nursing care delegation to meet student health needs. Most nurses reported delegations for 1-6 students, overseeing 1-10 staff members, with some overseeing 15 or more. Eight out of ten (79%) surveyed nurses anticipated additional delegations after all students returned from distance learning.

Examples of Oregon student needs served via nursing care delegations in 2020-2021:

- asthma care (e.g. peak flow meter, oxygen monitor, nebulizer treatments)
- respiratory care (e.g. continuous positive airway pressure (CPAP)/bi-level positive airway pressure (BiPAP), percussive vest, airway clearance, oxygen therapies)
- tracheostomy care (e.g. cannula replacement, dressing changes, oxygen therapies)
- seizure care (e.g. monitoring vagus nerve stimulation (VNS) devices, tracking seizure events)
- cardiac care (e.g. pacemaker, cardiac monitoring)
- diabetes management (e.g. calculating carbs for insulin dosing, monitoring blood sugar)
- G-tube and J-tube feeding and care (e.g. managing insertion sites, medications via feeding tube)
- ostomy / ileostomy / colostomy care
- urinary catheterization

The most commonly reported school nursing procedures delegated in 2020-2021 were related to diabetes management.

“ I have no idea if I will [be assigned the same schools] next year ... it's really challenging when I consider how much time & effort I have expended on teaching, delegating, & becoming familiar with my schools & personnel. ”

—Oregon school nurse

Care partners

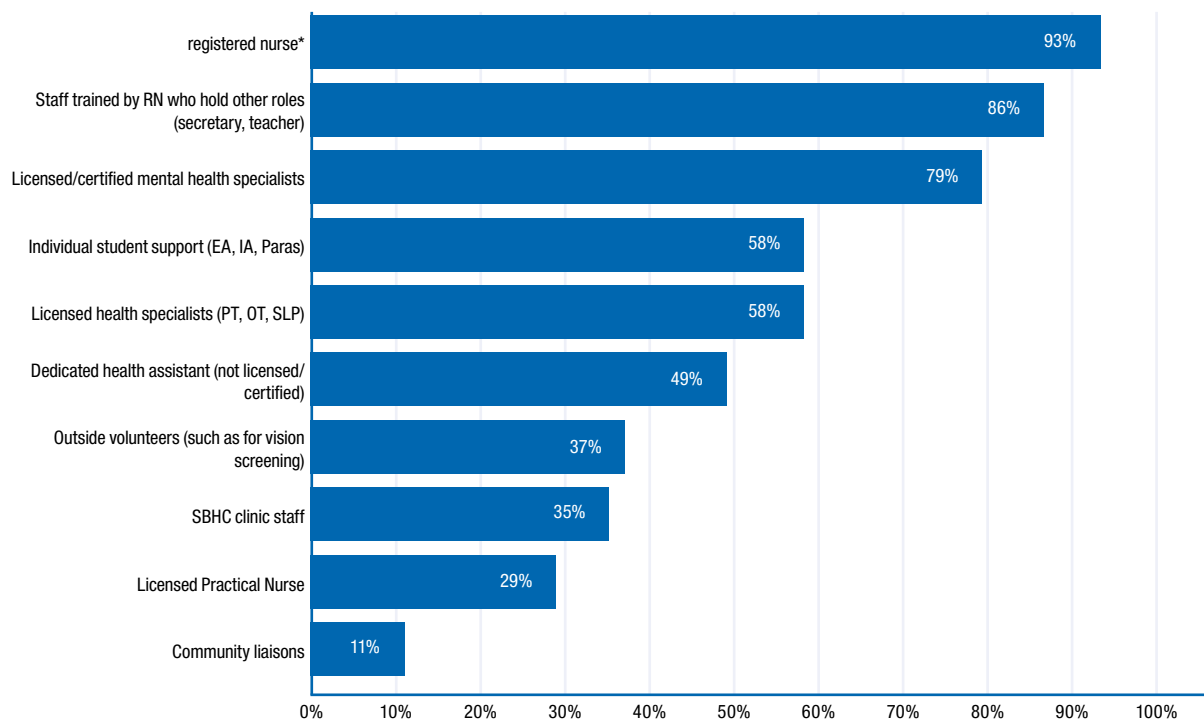
School health teams

A school nurse collaborates with many other individuals to support the health and well-being of students. Most surveyed nurses (88%) in Oregon schools engaged in care coordination with multi-disciplinary teams, such as teachers, counselors, and nutrition services staff. Local school health teams varied, most often including staff trained by the RN and mental health personnel. (See Figure 5)

Figure 5

Personnel providing health support in Oregon schools as reported by nurses (n=251)

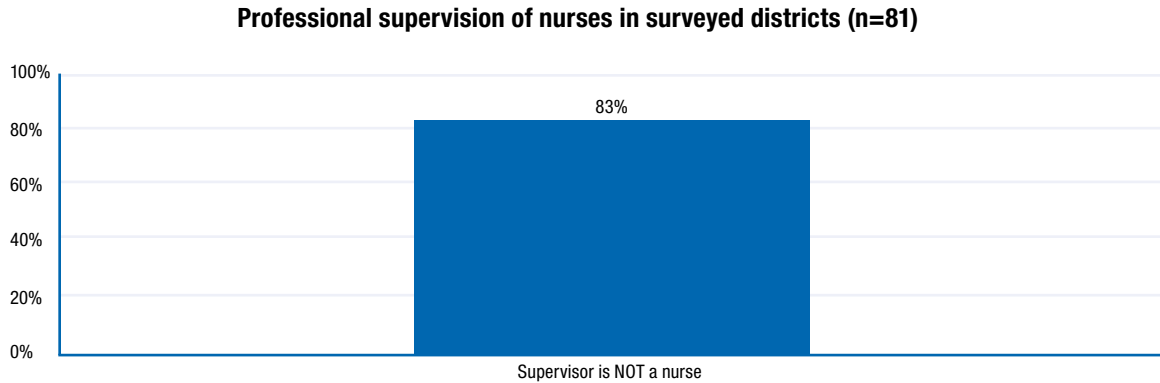
*Note: These data do not reflect availability of school nurses. All survey respondents were nurses.



Nurse supervisors

In 83% of the responding districts school nurses were supervised by a non-nurse staff. (See Figure 6) Anecdotally, the supervisor of nurses in Oregon schools is often a Special Education Director, Student Services Director, or Principal.

Figure 6



School nurse colleagues and mentors

Access to school nurse colleagues varied by setting. Nurses in suburban areas were more likely to have large teams with 6 or more nurses serving the same district, compared to urban or rural settings. Among respondents from rural settings, 41% were the sole nurse serving one or more school districts.

During school year 2020-21, 93% of nurses reported they had participated in mentorship or collaborative nurse-to-nurse sessions. Examples included local nurse-to-nurse support, Education Service District (ESD)/county/regional school nurse meetings, and statewide discussions facilitated by Oregon School Nurses' Association (OSNA). The majority (59%) reported mentorship and collaborative nurse-to-nurse sessions were “extremely” or “highly” important to their practice.

COVID-19 impacts

Workload

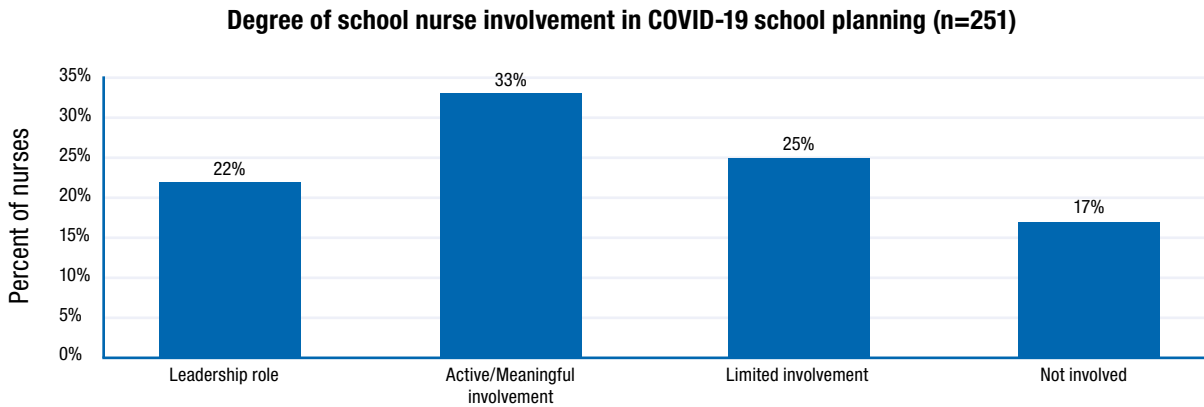
COVID-19 added to existing workload of Oregon school nurses. In 2021, most school nurse respondents (83%) were involved in planning COVID-19 mitigation and school-re-entry protocols for their schools, and over half held active or leadership roles in those efforts. (See Figure 7)

For 70% of surveyed school nurses, responding to COVID-19 took up at least half their time during the 2020-2021 school year.

“Let’s not forget all the things nurses do and bring to the table as we move out of the global pandemic.”

—Oregon school nurse

Figure 7



Examples of COVID-19-related activities include:

- evaluating best-practice guidance and emerging data
- developing local mitigation plans and protocols
- performing close-contact identification
- notifying impacted families
- providing onsite COVID-19 testing
- training and re-training school staff on updated mitigation protocols

Services for students with chronic conditions

COVID-19 impacted services for students with chronic health conditions. Eight out of ten (79%) Oregon school nurses reported they had students with unmet nursing care needs, such as incomplete care planning or lack of staff training related to the student's health condition, due to the nurse's limited time in 2020-2021.

Routine health screenings

The COVID-19 pandemic impacted routine health promotion, such as vision, hearing, and dental screenings. When asked about the prior school year, 2019-2020, 76% of nurses reported vision

“Many of us have several buildings and with the additional work from COVID, it is **almost impossible to meet needs safely.**”

—Oregon school nurse

Figure 8

Annual vision screening completed in elementary schools per reporting nurses (n=200)

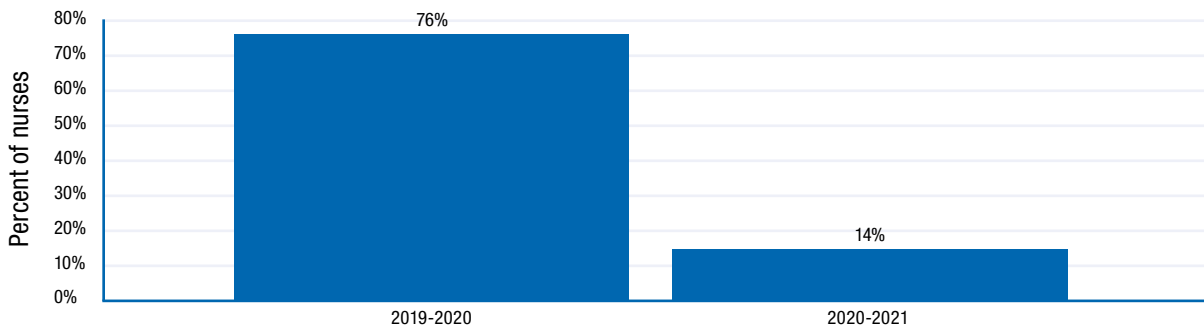
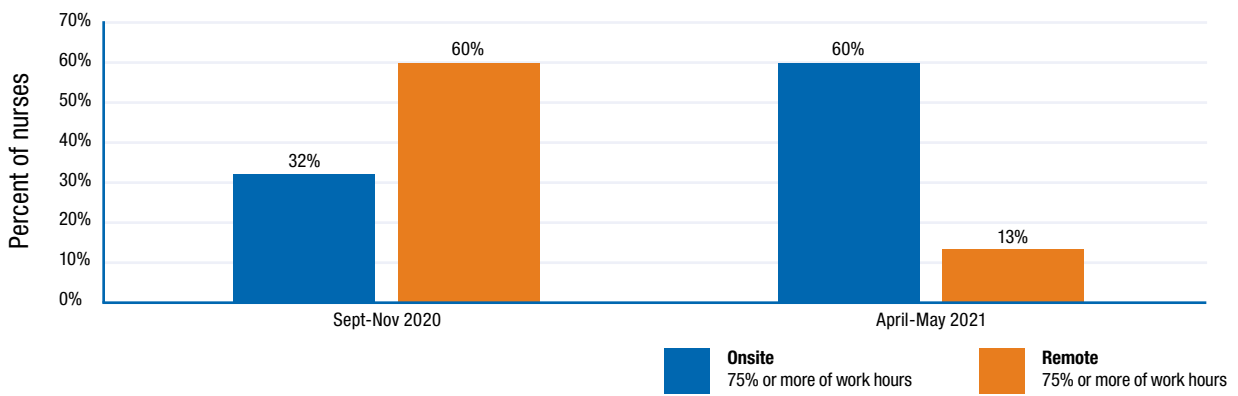


Figure 9

Work location of school nurses during school year 2020-2021 (n=251)



screening was completed in most or all elementary schools in their districts.² In comparison, only 14% of school nurses reported elementary school vision screening was completed by the end of the school year 2020-2021. (See Figure 8.)

Remote work and distance-learning services

School nurses adapted to meet needs during the COVID-19 pandemic by providing support both in-person and remotely.³ Nearly all surveyed nurses (95%) provided individualized support for in-person students, and about half of responding nurses (47%) also provided individualized support for students in Comprehensive Distance Learning (CDL). Overall, 88% of Oregon school nurses worked remotely for at least part of the school year. By the end of the school year, 44% of nurses had returned to work fully onsite, while about 1 in 10 continued to work most of their hours remotely. (See Figure 9)

2 Oregon schools closed to in-person learning March 13, 2020 in response to the COVID-19 pandemic. Some survey respondents indicated their schools had planned vision screening in 2019-2020 but were unable to complete it due to those closures.

3 At the start of the school year 2020-2021, most Oregon students received instruction via Comprehensive Distance Learning (CDL), but most schools had staff and students onsite for such as for Limited In-Person Instruction (LIPI). At the time of survey in May-June 2021, over 90% of Oregon's 1600+ public schools were either fully in-person learning (over 500 schools) or hybrid learning (about 950 schools), while about 10% of schools continued CDL with LIPI options (fewer than 130 schools). [source OHA Data Dashboards]

Community services

Above and beyond all the services provided to their schools, 53% of Oregon's school nurses volunteered additional time for COVID-19 mitigation in their communities, such as supporting COVID-19 vaccination events.

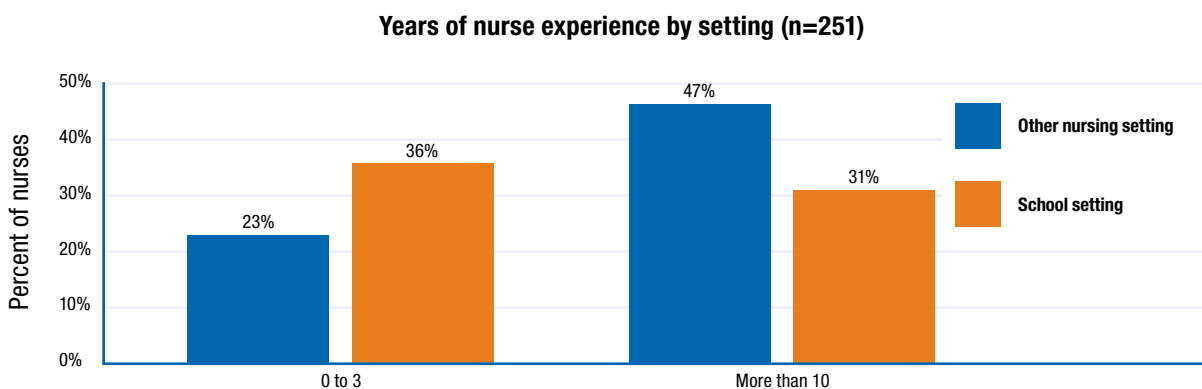
Workforce experience, education, and retention

Years of experience

Oregon school nurses contribute many years of professional experience to support students and school communities. (See Figure 10)

- Surveyed nurses had, on average, 20.7 years professional experience as a nurse, in any practice setting.
- 93% reported prior nursing experience before becoming a school nurse. Nearly half (47%) had 11 or more years of prior experience, and 14% had over 20 years of prior experience before working in schools.
- 31% of nurses have served Oregon schools for a decade or more, suggesting there are communities with well-integrated school nurses. However, almost half (49%) have been in schools for 6 years or less, and over a third (35%) have worked in schools for 3 years or less.

Figure 10



Licensure, education, certifications

Most respondents (98%) were registered nurses (RN). Respondents also included one Nurse Practitioner and one Licensed Practical Nurse. Most RNs (83%) held a Bachelors, Masters, or Doctorate degree in nursing.⁴

⁴ NP licensure requires a Master's or Doctorate degree in Nursing Practice. RN licensure requires an Associate's or a Bachelor's Degree in nursing science (ADN or BSN); some RNs hold advanced degrees in nursing or other fields. LPN licensure requires a certificate or diploma

Twelve percent (12%) of respondents held certification from Oregon Teachers Standards and Practices Commission (TSPC) as a Professional School Nurse.⁵ The most common reason for being TSPC certified was “required by employer” (66%). The most common reasons for practicing without TSPC certification were “no perceived benefit” (39%) or “unaware of the option” (21%).

Retention

Within the next five years, over half of the surveyed school nursing workforce expected to leave their current position; retire; change jobs; or were unsure whether they would continue working in schools. (See Figure 11)

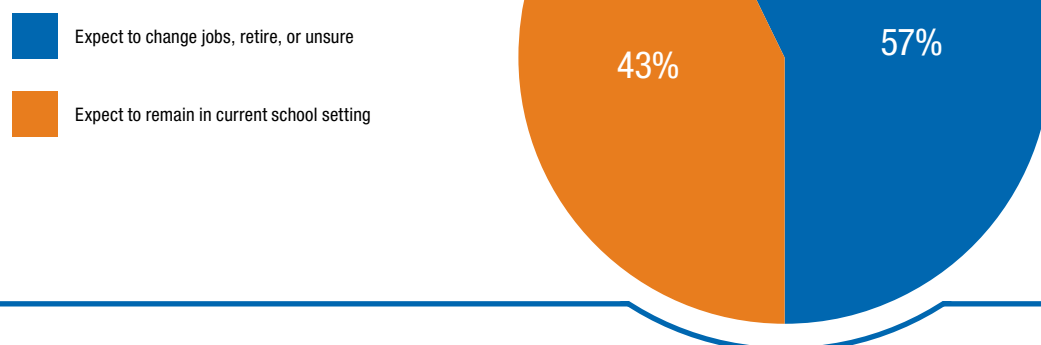
- 43% expected to continue working in their current school setting for the next 5 years.
- 23% expected to retire.
- 6% expected to work in another nurse practice setting (not schools).
- 1% expected to pursue a non-nursing career.

“As a nurse of 25 years work experience, this has, by far, been the most challenging!”

—Oregon school nurse

Figure 11

Nurses' work expectations for the next 5 years



after 1 year of study; no degree is required; some LPNs hold degrees in other fields.

⁵ Oregon law [OAR 581-022-2220] permits a school district to hire RNs to provide nursing services, with or without certification from Teacher Standards and Practice Commission (TSPC). However, per Oregon law [ORS 342.455], the title “school nurse” is reserved for those RNs certified by TSPC as qualified to conduct and coordinate school health services programs.



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