

**RULES
OF
TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT
BUREAU OF HEALTH SERVICES**

**CHAPTER 1200-11-5
RULES AND REGULATIONS GOVERNING
THE TENNESSEE PUBLIC SCHOOL NURSE PROGRAM**

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1200-11-5-.01 DEFINITIONS. Unless otherwise specifically indicated by the context, for the purpose of these rules and regulations, the terms herein are defined as follows:

- (1) All Students. Every student enrolled in a participating public school. This includes students regardless of parental consent.
- (2) Annual Unemployment Rate. The rate derived by dividing the number of person unemployed by the labor force, multiplied by 100. (Tennessee Department of Employment Security, Research and Statistics Division data will be used.)
- (3) Assessment. The nursing and education activities necessary for the timely identification of a health problem. This includes observation of students for signs and symptoms.
- (4) Basic Program. A comprehensive school health program with activities in the following areas: health services, health education, and a healthful school environment. It is designed to meet the broad needs of students in participating schools.
- (5) Case Management. A role which results in the coordination of efforts and services provided by multiple professionals, to a student, for the purpose of identifying or treating a health problem or maintaining or enhancing their health state.
- (6) Communicable Disease. An illness, due to an infectious agent or its toxic products, which is transmitted directly or indirectly to a well person from an infected person or animal, or through the agency of an intermediate animal host, vector, or inanimate environment.
- (7) Consultation. The provision of information and technical assistance.
- (8) Department. Tennessee Department of Health and Environment.
- (9) Effort Capacity Index. The effort/capacity index compares a county's fiscal capacity(the existing and potential tax base available to local government) with its fiscal effort(actual locally generated revenue). An effort/capacity index of 1.0 indicates balance between these variables, less than 1.0 indicates under utilization and greater than 1.0 indicates over utilization. (Fiscal Effort, Fiscal Capacity and Fiscal Disparities Among Local Governments in Tennessee by Harry A. Green and Lynne Holliday.)
- (10) First Aid Supplies:

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(Rule 1200-11-5-.01, continued)

sterile gauze pads
eye pads
roller bandage
tape - 1 inch
triangular bandage
elastic bandage 2 in., 4 in., and 6-inch
splinter forceps
scissors, bandage type
eye rinse solution
flashlight, spare batteries, spare bulb
cleansing solution
blanket
peri-pads
hot water bottle
disposable gloves
safety pins
tongue blades
applicator sticks
thermometer
splints
ice cubes or substitute

- (11) Follow-Up. Activities undertaken to help ensure referral or treatment of student health problems.
- (12) Health Counseling. A service which enables students, parents and school personnel to understand health conditions or concerns and to utilize appropriate community resources.
- (13) Health Education. The provision of information concerning the physical, mental and emotional well-being of people.
- (14) Health Screening. The process of identification of students who need further evaluation by health care professionals.
- (15) Infant Mortality Rate. Data on infant mortality are derived from matched infant death-birth cohort files. These files follow resident births occurring in a calendar year forward through their first year of life to measure the mortality experience. The rate is derived by dividing the number of infant deaths by the number of live births during a year, multiplied by 1,000. A three-year average infant mortality rate will be used. (From the State Center for Health Statistics.)
- (16) Injury Prevention Activities. The use of epidemiological methods to identify hazards either in the environment or in certain activities so that they can be corrected.
- (17) Lea. Local Public Education Agency.
- (18) Letter of Agreement. A legal document which outlines the responsibilities of the Department and the LEA for designated participating public schools.
- (19) Parental Consent. For minors, an informed decision evidenced by a written document signed by a parent or guardian which states that their child may participate in the Tennessee Public School Nurse Program. While enrolled in schools operated by the LEA the consent is considered valid unless specifically revoked in writing.

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(Rule 1200-11-5-.01, continued)

- (20) Participating Public Schools. Those schools specifically listed in a letter of agreement between the Department and a LEA as receiving basic services from the Program.
- (21) Physician-To-Population Ratio. The ratio derived by dividing the population of the area by the number of physicians providing primary medical care services in the area. Only physicians spending an average of at least 20 hours per week of their time providing direct patient care, in an office or facility-based practice and who are under 65 years of age in the year that the ratio is determined, shall be counted; interns, residents and federally assigned physicians are excluded.
- (22) Poverty Rate. The number of persons below poverty divided by the total population. (The US Department of Health and Human Services annually publishes federal poverty guidelines in the Federal Register.)
- (23) Program. The Tennessee Public School Nurse Program.
- (24) Quality Assurance Guidelines. Designated Program standards for evaluation of services, established by the Program and published in the most current Quality Assurance Guidelines, Bureau of Health Services.
- (25) Rate. "A quantity, amount, or degree of something measured per unit of something else."
- (26) Ratio "The relationship in quantity, amount, or size between two or more things."
- (27) Referral. To send or direct for treatment, aid, information or decision.
- (28) Region. A geographic area of the State including one or more counties designated by the department as such.
- (29) Reproductive Health. A collective term used to refer to a number of interrelated services and topics which include, but are not limited to, puberty and the accompanying physical changes and behaviors which lead to or prevent parenthood, including abstinence from sexual activity.
- (30) School Health Coordinator. A health care professional at the Department's Regional Office who is responsible for the overall planning and coordination of the Program staff and their activities.
- (31) Special Projects. A school health program with services specifically designed to meet a unique need or set of needs of an identified population of Tennessee public school students. With the exception of school based clinics, these are time limited projects.
- (32) Teen Pregnancy Rate. The rate derived by dividing the number of pregnancies (the sum of live births, fetal deaths and abortions) in a year, to Tennessee resident women 10 through 17 years old, by the number of Tennessee resident women 10 through 17, multiplied by 1,000. A three-year average teenage pregnancy rate will be used. (From the State Center for Health Statistics.)
- (33) Training. Instructional activities that result in an individual being qualified to perform a skilled task or procedure.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

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(Rule 1200-11-5-.02, continued)

1200-11-5-.02 PHILOSOPHY AND PURPOSE.

- (1) School health is a systematic program of activities designed to support the educational process through the maintenance and improvement of the physical and mental health status of students and staff. It places emphasis on prevention, case finding, early intervention, and remediation of health problems with additional focus on health education, counseling, and a healthful, safe school environment.
- (2) As recommended by the American Academy of Pediatrics, the Tennessee Department of Health and Environment believes that strong school health programs are critical in insuring that students stay in school until graduation and also in insuring that they achieve the greatest possible benefit from their school experiences. According to the 1980 census, only 56.2 percent of Tennesseans 25 years of age and older have high school diplomas. While not all cases of school dropout or school failure can be attributed to health-related causes, it appears that student educational outcomes can be significantly improved when a strong school health program is linked with a strong educational program. It is indisputable that healthy students learn better and that a well-educated citizenry is essential for the future of our state.
- (3) The primary target group for the program is Tennessee's public school students. However, because students' health behaviors are influenced by the attitudes and behaviors of their adult role models, some risk assessment and/or health promotion activities may be offered to parents/guardians, teachers and school staff.
- (4) The purpose of these rules and regulations is to ensure that the provisions of T.C.A. §§68-1-1201 through 68-1-1206, are implemented.
- (5) The rules and regulations establish the structure of a state coordinated public school nurse program to ensure its smooth functioning in striving to improve and safeguard the physical and mental health and well-being of the student population of Tennessee's public schools.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. *Administrative History:* Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.03 DISTRIBUTION OF RESOURCES.

- (1) To "give priority in the assignment of school nurses to those health departments or local education agencies which serve counties that are plagued by problems of poverty, unemployment and underemployment and are medically underserved to the greatest degree" the following process shall be used:
 - (a) Six criteria shall be considered for each county in the state:
 1. poverty rate under age 18
 2. physician-to-population ratio
 3. teenage pregnancy rate
 4. infant mortality rate
 5. annual unemployment rate
 6. effort/capacity index
 - (b) For each criterion the counties shall be ranked from 1 to 95 based upon the rate or ratio.

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(Rule 1200-11-5-.03, continued)

- (c) Counties shall then be grouped into five groups of 19 each.
 - (d) The 19 counties with the highest ratios or rates shall be assigned a score of 5 points descending to the 19 counties with the lowest rates or ratios which will be assigned 1 point. The largest possible point total is 30, the lowest is 6.
 - (e) Those counties with the highest scores shall receive first consideration for priority assignment of future additional resources.
- (2) Currently participating LEAs as well as LEAs that are considered for participation in the program in the future shall be asked to enter into a written letter of agreement with the program. This agreement will specify the roles and responsibilities of each party. The agreement shall be signed by the chairman of the school board and the superintendent of schools on behalf of the LEA and by the program's executive director and the Commissioner of the Department.
 - (3) The program is only responsible for delivering services in those LEAs that have entered into a written agreement.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.04 ELIGIBILITY/AVAILABILITY OF SERVICES.

- (1) Every student enrolled in a participating public school in Tennessee is eligible to receive services provided by the program.
- (2) The full range of the basic program services provided by the program at the participating public schools is available to any student with parental consent, or who is 18 years or older, or who is under 18 years old and whose minority has been removed, or who is married of any age.
- (3) Program services that are available to sustain or protect life or prevent permanent physical or mental injury are available to all students enrolled in participating schools. The Good Samaritan Law (T.C.A. §63-6-218) and the Child Sexual Abuse Law (T.C.A. §37-1-601 et seq.) shall be applied, followed and relied upon as applicable.
- (4) Assessment and follow-up services that have been implemented by the Department to prevent the spread of communicable disease are available to all students enrolled in participating schools. The communicable disease laws (T.C.A. §68-10-101 et seq.) shall be applied, followed and relied upon as applicable.
- (5) Individual health, education and counseling in the area of reproductive health are available to all students enrolled in participating schools upon specific individual student-initiated request. The Family Planning Act of 1971 (T.C.A. §68-34-101 et seq.) shall be applied, followed and relied upon as applicable.
- (6) Classroom health education, provided by program staff, which follows the approved local school system curriculum, shall be available to all students enrolled in a participating school.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

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(Rule 1200-11-5-.05, continued)

1200-11-5-.05 STAFFING.

- (1) For the basic program, services provided by the program may be delivered by registered nurses, certified nurse practitioners, health educators, medical social workers, nutritionists and other health care professionals.
- (2) The program will provide to each LEA participating in the basic program the services of a registered nurse. In addition, services of other health care professionals may be provided.
- (3) For special projects, types of personnel shall be based on the services needed to meet the unique needs the project addresses.
- (4) Each public health region shall designate a health care professional as the School Health Coordinator to work with the program staff of that region.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.06 SCOPE OF SERVICES.

- (1) Basic Program

The following services shall be available through the program:

- (a) health counseling
- (b) health education
- (c) injury prevention activities
- (d) consultation to school systems regarding health policies and issues
- (e) assistance to teachers on the state-mandated health education curriculum
- (f) promotion of a healthful school environment
- (g) consultation with special education sections of LEA's
- (h) limited training for LEA staff dealing with students with special health needs
- (i) assistance for case management of students with special needs
- (j) cooperation with community health care providers in the observation and assessment of health problems
- (k) provision of teacher education on health-related topics

- (2) Special Projects

When special projects are implemented the description and scope of services shall be delineated in the specific project proposal. This will allow for the tailoring of the services to meet the unique identified needs of the local school or school system.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.07 PROFESSIONAL STANDARDS.

- (1) Selection of a new LEA applicant or continuation of an existing LEA as a site for the Program is determined by the Department based on a determination of the population most at need, the ability of the LEA to meet the standards defined herein and the availability of funding.

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(Rule 1200-11-5-.07, continued)

(2) The following criteria must be satisfied by an LEA participating in the program:

(a) Letter of Agreement-

The LEA must enter into a written agreement with the department that specifies the roles and responsibilities of each party. This letter of agreement shall require compliance with these rules and other applicable laws.

(b) Facilities - The LEA must be willing to:

1. Provide access in each participating school to an environment compatible with the maintenance of privacy and confidentiality to include a telephone and office work space.
2. Provide first aid supplies.
3. Room for storage of supplies and equipment. (Locked cabinet?)

(c) Personnel

At least two (2) staff members in each participating school staff shall be trained in first aid and shall hold current certification to administer cardio-pulmonary resuscitation on children and adults.

(d) The LEA shall implement a written policy which provides school nurses with access to student records regarding absenteeism, injuries, emergency information, health history, screenings, grade level retention and medical reports.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.08 EVALUATION OF THE TENNESSEE PUBLIC SCHOOL NURSE PROGRAM.

(1) The department shall evaluate the compliance of the LEA to the standards stipulated in this document and the responsibilities outlined in the letter of agreement. Evaluation will primarily be accomplished through regularly scheduled site visits.

(2) The department shall evaluate the local program staff activities on a regular basis in accordance with the Quality Assurance Guidelines developed for the Bureau of Health Services of the Tennessee Department of Health and Environment.

Authority: T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-1206. **Administrative History:** Original rule filed July 28, 1989; effective September 11, 1989.

1200-11-5-.09 FEES FOR SERVICE

(1) In accordance with T.C.A. §68-1-103, fees for school health services may be initiated upon direction and approval of the Commissioner of Health and Environment.

(2) Determination of the payor and the mechanism for collection of said fee shall be determined by the Department.

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(Rule 1200-11-5-.07, continued)

- (3) All fees generated through services offered by this program shall be used to fund costs of the program.

Authority: *T.C.A. §§68-1-103 and 68-1-12-01 through 68-1-12-06. Administrative History: Original rule filed July 28, 1989; effective September 11, 1989.*