Role of the School Nurse: Students with Special Needs

How should we support the needs of students with special needs?

Research has demonstrated that a prevention-oriented approach leads to significantly better outcomes in social, academic, and disciplinary areas over the long-term (Beard & Sugai, 2004; Fox, Dunlap, & Cushing, 2002; Isaacs, 2008; Reid, Patterson & Snyder, 2002; Kagan & Neuman, 2000; Weist, 2003). The Colorado Department of Education has adopted the framework of a Multi-Tiered System of Supports (MTSS) as an overall structure to address the academic and behavioral needs of every student. MTSS is a prevention-based framework of team-driven, data-based, problem-solving, for improving the outcomes for every student through family, school, and community partnering and a layered continuum of evidence practices applied at the classroom, school, district, region, and state level. It emphasizes the development of a problem-solving culture and the use of evidence-based practices for screening, instruction, assessment and early intervention to support students’ emotional and academic needs. The integration of an MTSS framework increases the chance that appropriate services are provided to students early in order to mitigate the need for additional services and reduce the likelihood of educational challenges from occurring.

The Individuals with Disabilities Education Act of 2004 (IDEA, 2004), and its regulations in 2007, allowed for increased support of all students’ with disabilities in the school setting. IDEA 2004 included a heightened emphasis on effective core instruction and universal interventions, as demonstrated within an effective MTSS. Often these supports were provided through two parallel frameworks, Response to Intervention (RtI) and Positive Behavioral Interventions and Supports (PBIS) now included under MTSS. The alignment in practice results in improved educational outcomes for all students, including those at-risk for being identified and those already identified as having a disability. Response to Intervention continues to exist under the overarching framework of a MTSS.

What is the role of the School Nurse in the MTSS process?

The school nurse is a key informant regarding health and medical issues for every student within the school. Students may need health or medical interventions to successfully access their educational program. Decisions related to increased layers of support may occur as a result of a problem-solving team process. More specifically, a multidisciplinary problem-solving team is foundational to an effective MTSS process.

As a related service provider, the school nurse is responsible for:

- providing health services;
- identifying eligible student;
- assessing the student’s functional and physical health status;
- developing healthcare plans;
- aiding parents in connecting with community resources;
- helping parents and teachers remove health-related barriers to learning;
- providing in-service education to teachers and staff about the student’s needs;
- delegating to or supervising personnel providing special health services;
- evaluating the effectiveness of the health components of the Individualized Education Program (IEP);
- collaborating with health providers and identifying services within the community.

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The role of the school nurse on the problem solving team is to determine if there are any health concerns that may be a barrier to the student’s learning and to identify and support health needs of students having difficulties with learning. School nurses are the bridge between the educational and medical world.¹

**What assessments should be done by the School Nurse for a Special Education Evaluation?**

There are not any specifically mandated assessments required during the special education evaluation. It is up to the multidisciplinary team to determine what assessments should be done for a particular child according to their needs. All personnel conducting the evaluations should be appropriately licensed and endorsed. The Rules for the Administration of the Exceptional Children’s Act (ECEA Rules) requires that:

“The initial evaluation is sufficiently comprehensive to appropriately 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. (4.02(4)).”²

**What should be included in the IEP?**

The school nurse must use his/her professional judgment to determine whether health related information is relevant to the child’s educational program to ensure that all needs are met. The student’s health history should be reviewed & summarized if necessary. The school nurse should also determine what health services are needed during the school day and during school sponsored events. These interventions should be documented in the IEP under Student Needs and Impact of Disability. Interventions are listed as either direct or indirect services. Including this information is important for the purpose of reimbursement if the student is Medicaid eligible.

Pertinent health information should be documented by the school nurse in the present level of achievement and functional performance (PLAAFP) and should include any interpretation of results related to the health condition. This summary of pertinent data should include the impact on the student’s ability to learn or participate in the educational program. Any nursing or health services should be included in the Student Needs and Impact of Disability.

Best practice indicates that a current hearing and vision screening should be reviewed and referenced during the MTSS process or in a special education initial evaluation. Vision and hearing screening are mandated for the usual years (kindergarten, grades 1, 2, 3, 5, 7 and 9 yearly (C.R.S.22-1-116) OR If there are any concerns about vision or hearing. 4.02(2)(c)(iii).²

Again, there are no mandates in Colorado that specify certain health-related information must or must not be included in a child’s IEP. A summary of pertinent health-related information that is inclusive enough to assure that all needs are addressed should be included in the IEP. It is also important for the school nurse to periodically evaluate the effectiveness of the health-related components of the IEP with the child, parent(s), and other team members, and make revisions to the plan as needed.³

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1 Zirkel, Grantham & Lovato, 2012  
2 CO Department of Education, 2015  
3 NASN, 2013
Section 504

Students who are ineligible for services under IDEA may be eligible for 504 accommodations; Section 504 is part of the Americans with Disabilities Act Amendments Act of 2008 that guarantees specific rights in federally funded programs and activities to people who qualify as disabled. The school nurse’s role as key informant for health and medical issues remains the same.

Can a student’s health information be shared?

The nurse should determine whether individuals who have access to the IEP have a legitimate need to know the health information. As a result, pertinent health-related information should be inclusive enough to assure that all needs are addressed in the IEP. If the student has a healthcare plan (IHP) it should referenced in the IEP but not attached. Since the IHP may need changes periodically during the year, updates can be done without conducting an IEP meeting. The IEP is one of very few documents required to be forwarded when a child moves to a new school setting and care should be taken to include adequate information in the document to assure continuity of care in the new setting.

References:


This CDE guidance document is meant for clarification, is not legally binding, and is not to be confused with legal advice. This guidance reflects CDE’s recommendations, but Administrative Units (AUs) may have developed their own policies or procedures that differ from those described herein. Be sure to refer to your local AU’s policies and procedures through the Director of Special Education. If you are seeking legal advice, please contact your legal counsel.

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