

WE EXPECT EXCELLENCE

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May 21, 2015

To: Senator Roblan, Chair Senate Committee on Education Senator Baetschiger, Senator Beyer, Senator Gelser, Senator Hass and Senator Kruse- Members of the Senate Committee on Education

From: Kimberly Bartholomew, RN, BSN, Beaverton School District Nurse and Oregon Director for the National Association of School Nurses

Re: HB 2972 requires public school students seven years of age or younger who are beginning educational program to have dental screening.

I am here as the Oregon Director of the National Association of School Nurses and a Beaverton School District Nurse to share my perspective on what HB 2972 will mean to my practice and the practice of many other school nurses around the state. HB 2972 is yet another unfunded mandate thrust upon school districts without any input from the people who it will affect most. I serve four schools in the Beaverton school district and I work 30 hours a week. That equates to about 1,080 hours a year.

The ODE fiscal impact statement for HB 2972 states that the cost will be a nominal \$16,000 or so. This is the cost to ODE- not the school districts that this legislation will affect. The actual cost is significant and the impact on my workload will be tremendous. Dr Will Trevor, dentist who testified in favor of this bill in the house committee, estimates that it will take us about five minutes to screen each child. That was also my ballpark estimate. There is not a school nurse who would not agree that good oral health is important. However, we do not agree that this bill is an appropriate method of improving the dental health for our students.

I am projected to have 620 kindergarten and first grade students next school year. At five minutes a child, it will take me 52 hours to perform a basic dental screen on my students. Now, we must also include the time that it will take for the follow up as mandated in this bill: information must be entered into our computer system, and filed in the cum file. Next I must provide the parent or guardian of each student with information regarding the dental screenings, further examinations or necessary treatments; and preventive care, including fluoride varnish, sealants and daily brushing and flossing. Do not forget that I must also assist my uninsured and underinsured families with resources for finding access to dental care. I often act as an intermediary between families and clinics when there is a language barrier. A rather conservative estimate is that this will consume between 90-100 hours. That is nearly 10% of the total hours that I work for an entire school year. Evidence based studies do not indicate that this is a good use of school nurse time. This bill will require me to spend 10% of my time on an endeavor that ,while worthwhile, is not associated with a marked change in dental outcomes.

District Goal: All students will show continuous progress toward their personal learning goals, developed in collaboration with teachers and parents, and will be prepared for post-secondary education and career success.

The Beaverton School District recognizes the diversity and worth of all individuals and groups. It is the policy of the Beaverton School District that there will be no discrimination or harassment of individuals or groups based on race, color, religion, gender, sexual orientation, gender identity, gender expression, national origin, marital status, age, veterans' status, genetic information or disability in any educational programs, activities or employment.

Please compare this to the currently also unfunded, legally mandated, vision screening and hearing screening for students. HB 3190, which would have provided additional monies to school districts to pay for vision screening support, was tabled in the house. Vision and hearing issues greatly impact the ability of a student to thrive and learn. I spend about 45 hours a year vision screening and performing vision screening follow up. I do spend many other hours repairing and replacing broken glasses for my students. About 2,035 of my students received vision screening for those 45 hours of my time. That is pretty incredible "bang for the buck". Evidenced based studies absolutely indicate that providing vision screening to children is associated with good outcome. A pair of glasses can open up the world to a child with vision issues.

Hearing screening support takes up about 23 hours of my time yearly. I assist while the Oregon Lions perform hearing screening and I provide the follow up for students who fail the screening. Since I began crafting this testimony, I have been advised by the Oregon Lions that they will no longer provide hearing screening in Oregon due to budgetary issues. Lions simply do not have the money to do both hearing and vision screening even with their great fundraising efforts. Now what will happen to my caseload? The caseload of many school districts and school nurses throughout the state that count on the Lions to hearing screen their students? Am I to be expected to now provide hearing screen to all children up through grade 3 as is mandated by Oregon law? This could add over 1200 hearing screenings to my caseload alone. I shudder to thing how much time it would take me to hearing screen these kids without assistance. Consider also that many districts will have to purchase audiometry equipment to test their students.

What will the impact be on my students without changes in this bill? With four schools that I serve, my time is spread incredibly thin to begin with. My students will suffer even more by the lack of a professional school nurse in school. Student safety is most assuredly at risk. Additional screening will cause me to spend even less time serving my students. I will likely not be there when a child comes into the health room with an asthma attack or a broken bone. I will not be there when a student has a seizure in school. I won't be there for the diabetic student with dangerously low blood sugar. I may not be able to return the important call from a medical provider or parent in a timely manner.

The national recommended school nurse ratio is 1:750 students. We average between 3,000 to 4,000 students to each school nurse in Oregon. We have the dubious honor of being the 47th worst state for student to school nurse ratio. Please do not burden us with any more unfunded mandates at this time.