

Senators Dembrow, Thomsen, and other members of the Senate Committee on Education,

Thank you for granting a hearing on SB 356. We greatly appreciate the opportunity to share our intentions for this legislative solution. I am writing in support of that bill. To that end, I want to share the recommendations from a previous school nursing task force which thoroughly studied the state of school nursing in Oregon. Our bill takes the next step in fulfilling these well researched solutions.

In 2008, after a year long effort, the Task Force on School Nurses offered two recommendations. The first was to “mandate and fund increased numbers of school nurses in order to meet the national school nurse staffing standards in Oregon’s kindergarten through grade 12 schools.” In 2009, HB2693 declared an emergency to exist and made the first step toward meeting this recommendation by putting in place an unfunded mandate for school nursing services to meet the needs of medically fragile, complex and nursing dependent students with a focus on collecting data about the need for school nursing services in Oregon. More districts are approaching the required metrics for those high need students; however, the school nurse is critical to support the needs of all students. The bill made a recommendation that “each school district is encouraged to have one registered nurse or school nurse for every 750 students in the school district.” The time frame set out to meet that goal was July 1, 2020. Only 4 school districts in Oregon currently meet this recommendation, and fully 1/3 of school districts report no access to a registered nurse in the school setting. Indeed, the statewide ratio of school nurses (who are not already designated for students with medical needs) to students from the 2020 School Nursing Service Report is 1:4,572. So while the legislation arising in 2009 to meet the first recommendation of that school nurse task force has yielded some important data, it has not ultimately resulted in the necessary changes to adequately serve students in Oregon. A registered school nurse expert at ODE would support the understanding within ODE and among district administration across the state about the essential services of nurses in the school setting.

The other recommendation from the 2008 Task Force on School Nursing was to create two 1.0 FTE positions to support school nursing in Oregon. The first, “to maintain a permanent 1.0 FTE position (school nurse consultant) at the Oregon Department of Education to support the successful implementation and sustainability of expanding school nursing services” was partially fulfilled by SB698 which established the permanent position of a State School Nurse Consultant (SSNC) at OHA. SSNC supports school nurses by providing technical assistance to school nurses and brings school nursing expertise to critical OHA divisions, including an understanding of the realities of school health provision for immunizations, communicable disease, and chronic conditions.

The second distinct position recommended in that 2008 report was to establish “a permanent 1.0 FTE position (school nurse technical assistance) at the Oregon Department of Education to provide support for ensuring quality and capacity in school nursing services.” While the SSNC

at OHA provides critical support for school nursing licensed practice, a registered nurse position at ODE is essential for ensuring the communication of that technical assistance and incorporating nursing and school health knowledge in the development of education policy and processes at ODE. Our bill SB356 specifically aims at meeting the recommendation for this nursing position at ODE.

We have welcomed opportunities to be involved in planning during this pandemic. Unfortunately, we have repeatedly had to advocate for a seat at the table. In each instance, planning committees have graciously accepted our input, in some cases stating that they did not think to include school nursing expertise in their processes. The absence of a registered nurse position at ODE has precluded the consistent inclusion of school nursing and school health expertise in the RSSL planning. Beyond that, the gap left by the absence of a registered nurse voice at ODE has contributed to a serious lack of understanding about the work being done by school nurses, leaving some students with serious unmet health needs as nurses are pulled to do more and more COVID work.

A registered nurse at ODE would inform policy and process, ensuring school health services are considered in decisions resulting in practice which fully supports health and learning for all of Oregon's students.

Respectfully Submitted,

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