

Government Oversight and Reform Committee

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Opponent Testimony on House Bill 6

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Chairwoman Roegner, Vice Chair McColley, Ranking Minority Member Craig and members of the Ohio Senate Government Oversight and Reform Committee, thank you for the opportunity to testify today as an opponent of HB 6 on behalf of Ashland University Dwight Schar College of Nursing and the Ohio Association of School Nurses Professional Practice Committee.

My name is Dr. Kimberly Stanislo. I have had the pleasure to educate and mentor future school nurses as the Program Director for the School Nurse Certificate Program at Ashland University, Dwight Shar College of Nursing and Health Sciences for the past 6 years and have served on the Board of Directors for the Ohio Association of School Nurses for the past 9 years. Before I talk with you as the Program Director, School Nurse Educator, and Chair of the Professional Practice Committee of the Ohio Association of School Nurses, I want to share with you my personal experience in school nursing:

- I have been working in school nursing for the past 17 years, including 15 years as an ODE licensed School Nurse.
- Prior to school nursing, I worked as an:
 - RN on an adult trauma-post-surgical unit
 - RN on a pediatric respiratory, renal, neuro and general medicine unit
- After obtaining my Masters of Science in Nursing, I practiced a Certified Pediatric Nurse Practitioner at an Ohio children's hospital for 5 years. I practiced in outpatient Pediatric GI and a nurse practitioner-run urgent care side of the emergency department.

When moving to school nursing, I was shocked to hear I needed to go back to school to earn a school nurse certificate for an ODE license. To be honest, I questioned it more than once...after all, I was a pediatric nurse practitioner who could diagnose, write prescriptions, and direct the care of my patients. The school nursing job required an RN and I was an APRN. I was trained and had experience working autonomously and had experience with advanced triage skills in the emergency department. Shortly after accepting a school nursing position, I reluctantly applied to a school nurse certificate program in Ohio. After the first day working as a nurse in the school setting, I had **no doubt** that I was completely unprepared for this role. You see, school nursing practice is not just nursing practice. School nursing is an amalgamation of nursing practice and educator practice. A school nurse cannot adequately practice in the school setting without learning and integrating educational principles and processes into every decision. Our role is not only related to maintaining and improving the health outcomes of our students...we also play a vital role in supporting the academic outcomes of our students through attendance, the scores, engagement, school climate, behavior referrals, graduation rates, and most importantly implementation of the Whole Child model.

My story is the perfect example of... we don't know what we don't know until we learn it...and when we know better, we do better.

HB 442, passed in Dec 2020, rescinded Section 3319.221 of the Ohio Revised Code. HB 6 is proposing to modify the new language. These changes have multiple implications:

1. The established standard of school nursing educational preparation in Ohio, in place since 1972, was eliminated. From 1972-2001, School Nurses earned a certification in Ohio as a School Nurse. In 2001, the certification was changed to a license under the ODE Professional Pupils Services category. School Nurse was a protected title for those with the ODE license. A title that identified a nurse as holding additional specialty training and qualifications in school nursing.
2. Under HB 442, nurses with an OH RN license and Bachelors of Science in Nursing (BSN) may instead register with the Ohio Department of Education and assume all titles and benefits of School Nurse in Ohio...without any requirements of specialty educational preparation or experience, on a bachelor's degree in nursing (BSN). HB 6 now proposes to change this to a nurse with an Ohio RN license and a bachelor's degree in any field.
3. HB 442 passed to deregulate duplicate licenses and reduce the restrictions districts may experience in their hiring practices. This deregulation, however, do not provide benefit to the consumers. Employers (districts) are not provided with the applicants with the same qualifications as expected with the School Nurse title or job description. Students, the most vulnerable consumer, are not getting access to the services they expect and deserve. The nurses also do not benefit from the change. The expertise of School Nurses has been devalued and places RNs without the necessary educational preparation at increased professional liability. IN a court of law, these RNs would be held accountable to the standards of practice of professional school nursing and their decision and practice held against the standard of prudent peers. These prudent peers would be ODE licensed School Nurses.
4. There was no discussion with school nursing professionals in Ohio prior to the last-minute amendment to HB 442, 5 days prior to passing, which added School Nurses and other professionals holding ODE Professional Pupil Services licenses. There was no discussion of the consequences of removing the school nursing educational preparation on the role, preparedness of the RNs, nor the impact on Ohio's school children and communities.
5. The ODE Professional Pupil Services license as a School Nurse is not a duplicate license; it is a license earned over and above the Ohio RN license. The School Psychologists and Guidance Counselors were purposefully removed from HB 442 when introduced, School Nurses should also have been removed.

Since 2015, Ohio Schools have been permitted to contract nursing services through hospitals and private agencies without the requirement of the nurse being an ODE licensed School Nurse. Although this opened up the opportunity for schools to increase nursing services, this change from nursing services to health services has had an impact on the value of the school nurse role and educational preparation in Ohio. Many schools now provide school health services, not by RNs, but by LPNs and health aides. Health departments with School Nursing divisions, who had previously contracted with schools, were eliminated due to being underbid for services. Non-ODE licensed RN, LPNs, and health aides are less of an expense for districts because they are paid on a classified scale instead of a certified scale, like teachers and ODE licensed School Nurses. We have seen districts lay off School Nurses or change the job description after a retirement and replace them with contracted services, again which were less of an

expense. Are the quality health services, in most cases, yes, but they are not school nursing services. As a parent of 3 children, 2 with special healthcare needs, I have personally experienced the impact on my children from having school health service provided by a health aide. I have had to assume the role a School Nurse would have provided, in addition to the parent, in my children's intervention service planning. I have that luxury, but other parents and children do not.

Schools hire RNs without the ODE license under a job titles other than School Nurse. This is a common practice in Ohio and is not a new practice. So in reality, the deregulatory changes brought by HB 442 and HB 6 are not necessary to increase the ease and access to health services by Ohio schools. School nurses are not mandated in Ohio, so one might ask, aren't schools with health services better than schools with no services? Before I answer that question, I invite you to think if we would tolerate this same concept to other professions working in the school setting... As the number of vulnerable students (whether medically, socially, emotionally, or educationally) increases in this state, the value and access to educationally prepared ODE licensed school nurses has decreased. The Ohio Association of School Nurses Every Student Counts data, as part of the National Association of School Nurses Standardized School Health Services: Every Student Count data initiative, demonstrates the impact licensed School Nurses have on the health and academic outcomes of students...the ultimate purpose of school nursing services. Licensed school nurses keep more kids in school, which means they spend more time in the classroom learning. Schools with non-ODE licensed RNs, LPNs, and unlicensed personnel (health aids and secretaries) send students home at progressively higher rates than the licensed School Nurse...which leads to decreased classroom time and opportunities to learn.

Why would a district not want to provide access to the best resources possible to support student success? In some cases, it is budgetary, in others it is due to the myth that a nurse is a nurse is a nurse... Not every nurse is equivalent nor interchangeable. Nurse represents LPN, RN (associates degree, diploma, Bachelors, Bachelors of science in nursing), and APRN. Non-healthcare professionals are not expected to be experts in nursing scope of practice and understanding the role of each level of nurse. That is why we have licenses and certifications, including the School Nurse Certificate and ODE license. Districts do not hire teachers without knowing their qualifications. They do not expect nor hire a PE teacher to teach math or the math teacher to teach reading intervention. They are all teachers and all understand the basic principles of lesson planning, educational standards, and student assessment, but it is the specialized training, certifications, and license endorsements that provide districts with assurance of their job qualifications. **THIS** is the reason why the School Nurse title and the ODE license is critical to ensuring Ohio school districts have the critical information they need to make decisions on the local level to best serve their students.

On behalf of the Ohio School Nurse Educators, representing five Ohio universities, I submitted an in-depth look at the consequences of HB 442 and HB 6. I invite you to read the submitted letter for additional evidence and rationale regarding our concerns.

In summary: School nursing is ADVANCED nursing practice and required ADVANCED skills and knowledge to practice in this non-healthcare setting. An RN license indicates a nurse has met minimal competencies as a GENERALIST. School Nurse Certificate/Licensure programs in Ohio provide preparation for ADVANCED NURSING skills and knowledge in assessment, care coordination, resource utilization, and leadership, but also ADVANCED EDUCATIONAL skills and knowledge related to linking health to academic implications, evaluation of students for intervention services, confidentiality (FERPA

vs HIPAA regulations), educational models such as the Whole Child, and formal educational preparation for the delivery of health education. Ohio's School Nurse Certificate/Licensure programs provide this rigorous specialty preparation, including supervised on-site clinical training.

Over the past 6 years I have been providing these educational services, as the Program Director of the School Nurse Certificate Program at Ashland University. Nurses come to school nursing with rich many experiences, including those who enter Ohio's school nurse preparation programs. Some with 20 years in the ICU, some with various years in public health settings, and even some with 20 years in the school setting. One thing they all have in common (regardless of university or program) ...they are all surprised how much they did not know...how complex the role of the school nurse is...and how completing the school nurse education for the ODE license improved their practice AND increased their ability to better serve their students. I know this not only because I teach it every day, but I have also lived it.

Here are some additional examples shared from Ohio school nursing students:

- As a nurse with over 30 years of experience, I started working as a school nurse substitute over the past 10 months. I have a lot of experience with the day to day work at school but had no idea about doing the paperwork that is required for the students. In my school nurse certificate program, I have learned how to do IEPs, ETRs, and 504 plans. I have also learned how to identify academic barriers and how they are influenced by the healthcare barriers for students. None of these are taught in the BSN program for RNs. In the school setting there is no one for the RN to call in emergencies unless there is another nurse to consult in a separate building. The RN is on her own to make the call. Several years ago, I had a student who fell and was kneed in the stomach accidentally. She felt fine at first, but then stated that her stomach really hurt. The principal told her that she would be fine and just shake it off. I was on my own as the only health professional in the building. I called 911 because I recognized she was going into shock. She had emergency surgery to remove her ruptured spleen. If I had not been in the building that day or not been confident enough in my skills and just listened to the advice of the principal, the outcome would have been very different.
- I didn't know what I didn't know until I earned my School Nurse Certificate. I have been in the school setting for 15 years and there was so much I did not know and was not doing! There are so many different things to learn as a school nurse...things you wouldn't do in another nursing job...and are not prepared for in your BSN education.
- The school nurse has been on the front lines with the recent pandemic and will continue to be on the front line keeping the next generation healthy and well educated. My school nurse certificate education has prepared me to take on this challenge in ways I was not otherwise prepared to do.

Ohio School Nurses have been on the front lines supporting school responses to the COVID 19 pandemic over the past 14 months...contract tracing, policy revision and implementation, staff training, engaging students who would otherwise be lost in the delivery of remote learning and transition from remote to in-person learning, and providing health care to students who otherwise may not be able to access critical healthcare services. These School Nurses have been applying their ADVANCED nursing and educational skills to support Ohio's most vulnerable students. Over the past 4 months, however, we've had to add additional time and attention to efforts to defend the value of our expertise, educational

preparation, licensing, and our impact on each and every Ohio student. While our attention was focused on Ohio's students, we were blindsided with HB 442 and are now working to restore the educational preparation requirements for School Nurses in Ohio and for the health and safety of Ohio students. Ohio schools have a long road ahead, as we work to get all of our students back to in-person learning. Our ADVANCED skills will guide our continued efforts to support our students, families, schools, and communities in their recovery from the health, social-emotional, socio-economic, and academic consequences of this pandemic. Please consider our proposed amendment language to HB 6 that restores Ohio's long-standing standard for school nursing educational preparation and expertise. Ohio's students are relying on ALL OF US to ensure they are healthy, safe, and ready to learn.

Thank you for your time. I will gladly take your questions.

Respectfully submitted,

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