

CHAPTER 8 School Health Screenings

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THE STATUTORY BASIS FOR SCHOOL HEALTH SCREENING IN NEBRASKA:

In Nebraska, school health screening is addressed in Neb. Rev. Stat. 79-248 through 79-253. Neb. Rev. Stat. 79-248 specifically names hearing, vision, and dental screening as screening requirements of schools. Other conditions may be prescribed by the Department of Health and Human Services (DHHS) but are not specified in the statutes. Neb. Rev. Stat. 79-249 provides the authority for DHHS to promulgate rules and regulations regarding school health screening. In addition, Neb. Rev. Stat. 79-214 and 79-220 address requirements for physical examination and visual evaluation for school at certain grades. These statutes are pertinent to screening in that schools may obtain confirmation that screening has been performed in the course of the physical and visual examination of the student. If such confirmation is available, the student need not be rescreened at school.

Pursuant to the statutes, regulations for school health screening are found in Title 173 NAC Chapter 7. Description of the qualified screener is found in the regulations. Competencies, essential steps for obtaining accurate, reliable measurement, are available from the DHHS School Health Program, and are included in these guidelines. The statutes requiring health screening by Nebraska schools do not allow a waiver option, as is the case for physical examination, visual evaluation, and immunizations. Parents/guardians who object to school screening must be notified they are required to provide to the school equivalent screening results from a qualified medical/dental professional at their own expense, completed within the past six months (except height & weight measurements – see 7-003.02, 7-003.02.02A, 7-003.02.02B).

Parents/guardians who do not provide such information are informed their child will be screened at school according to the minimum prescribed screening schedule.

Nebraska schools have a duty under state law to provide a quality health screening program to all students in attendance, including those who are absent on the screening day, arrive mid-year as transfers, and those with special health care needs. The school nurse or other assigned school personnel responsible for the school health screening program must be adaptable, resourceful, vigilant, and persistent in order to deliver a school health screening program that meets the requirements of the law and serves all students and families with quality practices.

THE PURPOSES OF SCHOOL HEALTH SCREENING ARE TO:

- Identify the child who may be suffering from a condition significant to health or learning and to recommend further evaluation to the parent/guardian.
- Provide the school with data on the extent to which a population of students, individually and collectively, are impacted by conditions significant to child health or learning.
- Provide the means to monitor trends and developments in student health status (potentially an evaluation tool for school wellness policies).
- To inform community health assessment with objective data and support the development of community-based wellness initiatives benefiting children and families at the local level.

Basic principles and requirements of health screening Include:

- The condition(s) to be screened for is relevant to health outcomes or learning performance in a significant way
- Frequency of occurrence is such that significant numbers of children are identified for evaluation.
- There is evidence that early identification and intervention improve outcomes.
- A reliable and cost effective method to screen is available
- A medical management plan is available for treatment of the condition
- *Important Note:* Screening is not diagnostic of a condition. Screening identifies a pool of individuals who should receive further evaluation.

School health screening programs encompass far more than the event of a single measurement. In fact, the scope of a school health screening program encompasses:

- Preparation of screeners, those to be screened, and the screening environment
- Assurance of privacy and confidentiality protections, for screening events as well as for results documentation and sharing

- Utilizing valid and reliable methods of measurement
- Practicing consistently and accurately applied methods of measurement, including RESCREENING protocols preceding referral to further validate the findings
- Accurate documentation of results
- Accurate interpretation of results
- Effective communication of results to parent/guardian (Costs of evaluation based on referral warrant accurate screening results)
- Development of meaningful, valid, useful, aggregate information, made available to internal and external stakeholders.

School nurses' tips for successful screening programs:

- While the statutes don't require prior notification to parents/guardian about the screening program, open communication and shared expectations are assets to success. Make sure your school includes information in the school handbook, or other communication home, about the school health screening program.
- Large, mass events take lots and lots of planning. Be organized!
- Communicate often with your school administrator about the screening plan, even if just to leave a note (reminder) that planning is proceeding well!
- Recruit plenty of reliable volunteers. Plan an orientation/training activity if volunteers will be directly involved in screening (versus traffic control).
- At the preschool and elementary levels, consider visiting the classroom in advance to explain, demonstrate, and have return demonstration of screening procedures.
- Consider the screening environment: how will traffic flow to minimize noise and distraction? Consult with an audiologist as needed to assess and prepare an adequate environment for valid hearing screening.
- Very young students and also middle school students often do not screen well in "mass" events – they are easily distracted by their peers!
- What works at one school may not work at another.
- If you have volunteers coming into screen, even community professionals, the school nurse remains responsible for the accuracy and quality of the screening methods. All screeners must meet competency criteria provided by the Department of Health and Human Services included in the School Nurse Role and Responsibilities Tool Kit.
- Schedule your screening program in the overall school activity calendar as early as possible and make use of opportunities to remind staff of the planned screening event(s).
- Send out reminders of screening to teachers and families. Encourage all to help assure students with glasses have them on the day of screening.
- Always rescreen before making referrals to validate and confirm results.

- Make referrals only for confirmed failed results. This will improve your credibility with parents/families and community providers.
- Before contacting a parent/guardian to notify them of screening results, review every issue or concern that needs to be addressed. Minimize the need for multiple contacts.
- The screening program is a way to let parents know you are there as a health professional, providing services to their child. Be professional in your communications.

MAKING THE SCREENING PROGRAM USEFUL AND MEANINGFUL

Measurement data that never moves farther than the student’s individual health record diminishes the value and beneficial returns on the time and effort spent on screening. Interpreting individual screening results for parents/guardians of students needing further evaluation represents only a small part of the useful picture that results from a quality screening program. Aggregate measures, and the story they tell about child well-being, can be very valuable and insightful to local schools and communities.

The Department of Health and Human Services School and Child Health Program provides a web-based tool for the interpretation of screening data by grade, gender, race/ethnicity and school. Obtain the instrument by contacting the school health program, and find more information at www.dhhs.ne.gov/schoolhealth.

172 NAC Chapter 7 SCHOOL HEALTH SCREENING, PHYSICAL EXAMINATION, AND VISUAL EVALUATION

- This document is found at http://www.sos.ne.gov/rules-and-regs/regsearch/Rules/Health_and_Human_Services_System/Title-173/Chapter-07.pdf

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RECOMMENDED HEALTH SCREENINGS

Blood Lead Screening

Lead is a toxic metal that can damage our bodies. It can be found in and around homes, in soil, and in some consumer products. Exposures to lead can cause lead poisoning, but lead poisoning can be prevented.

DHHS has developed a Blood Lead Risk Assessment and Testing plan to better guide health care providers in determining which children are at the most risk of lead exposure. The Statewide Blood Lead Risk Assessment and Testing Plan is a set of criteria that a child must meet in order to conduct a blood lead test. This is available at <http://dhhs.ne.gov/publichealth/Documents/DHHSBloodLeadTestingPlan.pdf>.

Lead Poisoning Prevention measures can be found at: <http://dhhs.ne.gov/publichealth/Pages/LeadPoisoning.aspx>

Medical Management Recommendations for health Care Professionals can be found at: <http://dhhs.ne.gov/publichealth/Documents/ProviderGuidelines082012.pdf>

This document is also available in Spanish at: <http://dhhs.ne.gov/publichealth/Documents/ProviderGuidelinesSpanish082012.pdf>

Blood Pressure Screening

High blood pressure and kids – Children's health (2019)

<https://www.childrens.com/health-wellness/high-blood-pressure-and-kids>

BMI Calculation

Although the mandate for calculating BMI was removed from the 172 NAC Chapter 7 Regulations in 2017, best nursing practice is to complete this health assessment by using the student's health and weight to calculate BMI. The CDC (Center for Disease Control and Prevention) has a reliable BMI calculator at

<https://www.cdc.gov/healthyweight/bmi/calculator.html>. The child's age at time of measurement, sex, height, and weight will be needed. The calculator automatically calculates the BMI when the data is entered and the Calculate button is clicked.

The CDC also offers its Children's BMI Tool for Schools. This is a spread sheet that is intended to calculate BMI for a group of children such as a classroom or grade level. The same data is needed – child's sex, date of birth, date of measurement, height, and weight. The BMI is automatically calculated when the data is entered on each line of the spreadsheet. Instructions for use of this tool are on the first tab and a group summary is automatically calculated on the third tab.

Mental/Behavioral Health Screening

A number of screening tools are available. Generally parent/guardian permission is needed before administering assessment tools for mental/behavioral health. Some mental/behavioral resources that are appropriate for adolescents include:

- School Mental Health Screening Playbook – Best Practices and Tips from the Field (2017) – Center for School Mental Health - <http://csmh.umaryland.edu/media/SOM/Microsites/CSMH/docs/Reports/School-Mental-Health-Screening-Playbook.pdf>
- NE DHHS Division of Behavioral Health – Behavioral Health Resources for Schools - http://dhhs.ne.gov/behavioral_health/SOC/WorkGroups/Behavioral%20Health%20Resources%20for%20Schools.pdf

