

## Section 8000 – Students

### 8482 Student Health Services and Delegation of Services

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#### Health Services

The Board and Superintendent recognize that nursing services enable students to participate in the educational process. The focus of these services is to promote health, maintain a safe environment, prevent or control spread of disease and minimize the impact of illness or disability.

#### Delegation of Health Services

The Grand Rapids Public Schools commitment to provide for the health and safety of all students in the school setting includes the provision of needed health care services by qualified staff. Sometimes health care services may need to be provided by an individual or individuals other than the school District's professional nursing staff. The Board recognizes and approves such delegation under certain conditions.

Delegation of nursing responsibilities must adhere to the Michigan Public Health Code and Grand Rapids Public Schools "Guidelines for the Delineation of Roles and Responsibilities for Health Procedures," The Guidelines are considered as part of this policy statement and incorporated by reference herein. The guidelines will not be modified without action by the Board.

The Superintendent is authorized to assign school nurses to develop necessary rules, procedures, and guidelines to see that student health and safety are protected if the delegation of health services is necessary.

Approved: June 29, 2009

Revised: February 17, 2014

Revised: February 18, 2019

LEGAL REF. Michigan Public Health Code Part 172, Nursing 333.17201 Delegation 333.16104, 333.16215;. Department of Licensing and Regulatory Affairs Director's Office Board of Nursing-General Rules Regarding Delegation 333.10104.

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8482 Student Health Services and Delegation of Services

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### GRAND RAPIDS PUBLIC SCHOOLS GUIDELINES FOR THE DELINEATION OF ROLES AND RESPONSIBILITIES FOR HEALTH PROCEDURES

Procedure	Physician Order Required	Registered Nurse (RN)	Licensed Practical Nurse (LPN)	Unlicensed Assistive Personnel
<b>1.0 Activities of Daily Living</b>				
<b>1.1 Toileting/Diapering</b>		A	A	A
<b>1.2 Bowel/Bladder Training (Toilet Training)</b>		A	A	A
<b>1.3 Oral Hygiene</b>		A	A	A
<b>1.4 Lifting/Positioning</b>		A	A	A
<b>1.5 Feeding</b>				
<b>1.5.1 Nutrition Assessment</b>		A	X	X
<b>1.5.2 Oral Motor Assessment</b>		X	X	X
<b>1.5.3 Oral Feeding (special needs)</b>	*	A	A	S
<b>1.5.4 Naso-Gastric Feeding</b>	*	A	A	X
<b>1.5.5 Monitoring of Naso-Gastric Feeding</b>		A	A	X
<b>1.5.6 Gastrostomy Feeding</b>	*	A	A	S
<b>1.5.7 Monitoring of Gastrostomy Feeding</b>		A	A	S
<b>1.5.8 Jejunostomy Tube Feeding</b>	*	A	A	X
<b>1.5.9 Total Parenteral Feeding (Intravenous)</b>	*	A	S	X
<b>1.5.10 Monitoring of Parenteral Feeding</b>		A	S	X

#### DEFINITION OF SYMBOLS

A Qualified to perform task, not in conflict with professional standards

S Qualified to perform task with RN supervision and in-service education

X Should Not Perform

Unlicensed Assistive Personnel (UAP) “an unlicensed person trained to perform a nursing activity” (Resha & Taliaferro, 2017)

**GRAND RAPIDS PUBLIC SCHOOLS GUIDELINES FOR THE DELINEATION OF  
ROLES AND RESPONSIBILITIES FOR HEALTH PROCEDURES**

Procedure	Physician Order Required	Registered Nurse (RN)	Licensed Practical Nurse (LPN)	Unlicensed Assistive Personnel
<b>1.0 Activities of Daily Living (continued)</b>				
1.5.11 Naso-Gastric Tube Insertion	*	A	S	X
1.5.12 Naso-Gastric Tube Removal	*	A	S	X
1.5.13 Gastrostomy Tube Reinsertion	*	A	S	X
<b>2.0 Catheterization</b>				
2.1 Clean Intermittent Catheterization	*	A	A	S
2.2 Sterile Catheterization	*	A	S	X
2.3 External Catheter	*	A	A	S
2.4 Care of Indwelling Catheter (Not Irrigation)	*	A	A	S
<b>3.0 Medical Support Systems</b>				
3.1 Ventricular Peritoneal Shunt				
3.1.1 Pumping	*	A	X	X
3.1.2 Monitoring	*	A	S	X
3.2 Mechanical Ventilator				
3.2.1 Monitoring	*	A	S	X
3.2.2 Adjustment of Ventilator	*	X	X	X
3.2.3 Equipment Failure	*	A	S	X
3.3 Oxygen				
3.3.1 Intermittent	*	A	S	S
3.3.2 Continuous (Monitoring)	*	A	S	S
3.4 Central or Intravenous Lines	*	A	S	X
3.5 Peritoneal Dialysis	*	A	S	X
3.6 Apnea Monitor	*	A	S	S
3.7 Pulse Oximetry		A	A	S

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<b>4.0 Medications</b>				
4.1 Oral	*	A	S	S
4.2 Injection				
4.2.1 Injection (manual)	*	A	S	X
4.2.2 Insulin via auto injector penshot	*	A	S	X
4.2.3. Insulin pump (bolus per carb calculation)	*	A	S	S
4.2.4 Insulin pump auto correction	*	A	S	S
4.2.5 Insulin pump monitoring	*	A	S	S
4.2.6 Insulin pump site change		A	S	X
4.3 Epi-Pen Allergy Kit or Glucagon	*	A	S	S
4.4 Inhalation	*	A	S	S
4.4.1 MDI -Metered Dose Inhaler	*	A	S	S
4.4.2 Nebulizer	*	A	S	S
4.4.3 Dry Inhaler	*	A	S	S
4.5 Rectal	*	A	S	S
4.6 Bladder Installation	*	A	S	X
4.7 Eye/Ear Drops	*	A	S	S
4.8 Topical	*	A	S	S
4.9 Per Nasogastric Tube	*	A	S	X
4.10 Per Gastrostomy Tube	*	A	S	X
4.11 Intravenous/Heparin Locks	*	A	S	X
4.12 Nasal	*	A	S	S
4.12.1 Medication w/ potential adverse reactions	*	A	S	S
4.13 Baclofen Pump	*	A	S	X

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<b>Procedure</b>	<b>Physician Order Required</b>	<b>Registered Nurse (RN)</b>	<b>Licensed Practical Nurse (LPN)</b>	<b>Unlicensed Assistive Personnel</b>
<b>5.0 Ostomies</b>				
5.1 Ostomy Care		A	S	S
5.2 Ostomy Irrigation	*	A	S	X
<b>6.0 Respiratory Assistance</b>				
6.1 Postural Drainage	*	A	S	S
6.2 Percussion/Flutter	*	A	S	S
6.3 Suctioning				
6.3.1 Pharyngeal/Oral	*	A	S	S
6.3.2 Deep Suctioning	*	A	S	X
6.3.3 Tracheostomy (shallow/tip suctioning)	*	A	S	S
6.4 Tracheostomy Tube Replacement	*	A	S	X
6.5 Tracheostomy Care (Cleaning)	*	A	S	X
<b>7.0 Screenings</b>				
7.1 Growth		A	S	S
7.2 Vital Signs		A	S	S
7.3 Hearing		A	X	X
7.4 Vision		A	X	X
7.5 Head Lice		A	S	S

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Procedure	Physician Order Required	Registered Nurse (RN)	Licensed Practical Nurse (LPN)	Unlicensed Assistive Personnel
<b>8.0 Specimen Collecting/Testing</b>				
8.1 Blood Glucose	*	A	S	S
8.2 Urine Glucose or Ketones	*	A	S	S
8.3 Spirometer	*	A	S	S
<b>9.0 Other Health Care Procedures</b>				
9.1 Seizure Monitoring & Documentation		A	A	S
9.1.1 Vagal Nerve Stimulator	*	A	S	S
9.2 Soaks	*	A	S	S
9.3 Dressings, Sterile	*	A	S	S
9.4 First Aid		A	S	S
9.5 Health Record Keeping (Need Standardized)		A	S	S
<b>10.0 Development of Protocols</b>				
10.1 Health Care Procedures		A	X	X
10.2 Emergency Protocols	*	A	X	X
10.3 Individual Education Plan Health Objectives		A	X	X
10.4 Nursing Assessment and Care Plan		A	A	X

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Reference:

Resha, C. & Taliaferro, V. (2017). *Legal Resource for School Health Services*. SchoolNurse.com: Nashville

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### **8482 Student Health Services and Delegation of Services**

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Format from Joint Task Force for the Management of Children with Special Health Needs and is a joint product of the American Federation of Teachers, the Council for Exceptional Children, the National Association of School Nurses, Inc., and the National Education Association, 1990.