

## Nurse's Health Services Encounters Two-Week Survey Instructions

### Purpose:

The purpose of the Health Services Encounters Two-Week Survey is to identify and quantify the services that school nurses provide on a daily basis. This survey is an attempt to collect data regarding a typical school nurse's day in the school health office. Do not include time or encounters related to mass screening activities, classroom presentations, and other special group events. Information regarding mass screening and special health services events will be captured on the School Nurse End of the Year Survey.

The Nurse's Daily Health Services Encounters forms are designed to assist school nurses with tracking and reporting accurate information regarding health services encounters for local school district purposes and state reports.

The data provided for state level reports may be shared with state legislative groups and other interested parties.

### Process:

1. Each year the State School Nurse Consultant will identify a specific two-week period during which school nurses should collect health services data. **The survey period for the 2014-15 school year is February 2 - February 13, 2015.** To assist with data collection, a Daily Health Services Encounters Tally Sheet and instructions are provided on pages 2 – 6 of this document.
2. At the end of the two-week period, school nurses will submit totals for requested data using the Nurse's Summary of Daily Health Services Encounters Report form available on the SC Department of Education's (SCDE's) website. **Access the Health Services Encounters Two-Week Survey Report by logging in on the SCDE's website at: [www.ed.sc.gov](http://www.ed.sc.gov).** **School nurses should submit summary information for the two-week survey period by February 27, 2015 or an earlier date if requested by the school district.** For review, a sample form and instructions are available on pages 7 – 8 of this document.
3. A designated person for each school district (usually the lead nurse) will review the information submitted by individual nurses and complete the District Summary of Health Services Encounters Report form generated from the individual nurse data. **District level reports must be signed by March 13, 2015. Access the Health Services Encounters Two-Week Survey Report by logging in on the SCDE's website at: [www.ed.sc.gov](http://www.ed.sc.gov).** See notes on page 9 of this document.

**Note: The school district's Web Access Coordinator must assign nurses the Web Nurse Participant role (School Nurse) to allow access to the encounters report form. The person designated to review the nurse forms and complete the district form must be assigned the Web Nurse Supervisor role (Web Nurse Coordinator).**

## **Instructions for Completing the Nurse's Daily Health Services Encounters Tally Sheet**

The Nurse's Daily Health Services Encounters Tally Sheet is provided as a resource for daily tracking of health services encounters during the two-week survey period. Data from the Tally Sheets can be summed and entered on the Health Services Encounters Report form at the end of the two-week period. If your school district uses an electronic health record, you may be able to retrieve the information needed to complete the Health Services Encounters Report form from the electronic database. Talk with your nursing supervisor/coordinator or lead nurse to determine the process that will be used in your school district.

While the Health Services Encounters forms are designed to capture data regarding each student encounter during the two-week survey period, it does not allow space for collecting all of the details regarding each visit. Only the following major groupings of health services descriptors will be captured during the survey period – medication, illness treatment, injury treatment, special procedures, student health counseling, and communication with parents, teachers, physicians and others.

The school nurse assigned to the school should complete the Nurse's Daily Health Services Encounters Tally Sheet each day during the survey period. If more than one nurse serves a school, each nurse should track and report his/her data separately.

In the event that the regularly assigned school nurse is absent, a Tally Sheet should be completed by the substitute nurse.

If no substitute nurse was available, do not complete a Tally Sheet for that day. In this instance when completing the Nurse's Summary of Daily Health Services Encounters Report form at the end of the two-week period, do not include the day that you were absent in the total time worked.

Each section of the Tally Sheet is explained below.

**Date:**

Enter the current date (date that services are being provided).

**School:**

Enter the name of the school. If you serve more than one school during a given day, a separate Daily Health Services Encounters Tally Sheet should be completed for each school.

**Total Student Encounters:**

Place one check mark or "x" in a box to represent *each student* that you see for health services during the two-week survey period. For the purposes of completing this form, medications given and special procedures that are being performed by unlicensed assistive personnel (UAP) under your guidance and direction should be counted as a nurse encounter.

If a student seeks services from the school nurse more than one time in a day, each time is considered a separate student encounter. This means that if a student seeks services at 10 a.m. and returns at 1:00 p.m., this will count as two separate student encounters.

Remember: This survey is an attempt to collect data regarding a typical school nurse's day in the school health office. Do not include encounters related to mass screening activities, classroom presentations, and other special group events.

**Total Staff Encounters:**

Place one check mark or "x" for each health service provided directly to staff/faculty (blood pressure checks, illness, consultation, etc.).

**General Description of Health Services Related To Student Encounters:**

Place one check mark or "x" in the appropriate area that describes the types of services rendered during the student encounter – medication, illness treatment, injury treatment, special procedure, student health counseling and/or communication with parent/teacher/ physician/other.

- a. Note that if multiple services were provided during an encounter, boxes should be checked to reflect each service. There are three student encounters scenarios at the end of these instructions that may help clarify how to document student encounters.
- b. Some services provided may not fit within one of the health services descriptors listed. If this is the case, you will still count the encounter, but will not indicate a description of the encounter.
- c. The total number of encounters and the total number of general descriptions checked probably will not be equal.
- d. In the space for "Medication," place one check mark or "x" for each medication given. Medications include all items given for medicinal purposes regardless of their route of administration. A nebulizer treatment will be counted as a medication and a special procedure. Medications include over-the-counter medications, as well as, prescribed medications. Medication encounters where a UAP is assisting a student under the nurse's guidance according to SC Board of Nursing Advisory Questions 50 and 52 should also be noted in this area.
- e. In the space for "Illness Treatment," place one check mark or "x" for each student encounter that involved treatment for an illness.
- f. In the space for "Injury Treatment," place one check mark or "x" for each student encounter that involved treatment for an injury.
- g. In the space for "Special Procedures," place one check mark or "x" for each special procedure provided. The special procedures that we will quantify for this report include catheterizations, tracheostomy care, suctioning, diabetes monitoring/management, tube feeding, nebulizer treatments, toileting/diapering, ventilator management and dressing changes. There are three spaces on the Tally Sheet for listing special procedures. If you provide more than 3 different types of special procedures during one school day, you may make notations on the back of the form or use a second form. If you make notations on the back of a form create a reminder so that you do not forget to include the notations on the back when totaling your data at the end of the day. Special procedures performed by UAP who are providing care for students under your guidance and oversight should also

be noted in this area. Nebulizer treatments should be counted as a medication and a special procedure.

- h. Examples of “Student Health Counseling” include counseling related to specific health conditions, hygiene, nutrition, healthy behaviors, etc.
- i. In the space for “Communication with Parents/Teachers/Physicians/Others,” place one check mark or “x” for each visit, phone call or correspondence that occurred on behalf of a student on the day for which you are completing the form. Examples of correspondence include notes, letters, and e-mails.

**Outcome of Student Encounters:**

- a. Place one check mark or an “x” in a box to indicate whether the student returned to class, was sent home or was sent for immediate medical care following the encounter.
- b. Students sent for immediate medical care include those sent with a parent/guardian or other responsible adult to seek immediate medical attention as well as those transported via Emergency Medical Services for immediate care.
- c. The total of all student encounters should equal the combined total of students who returned to class, were sent home and were sent for immediate care.

**Total:** At the end of the day, total the number of checks for each section where there is a box labeled “Total.”

Note: The total number of student encounters will probably not equal the combined total of the health services descriptions; however, the total number of encounters should equal the combined total of students who returned to class, were sent home and were sent for immediate care.

**Approximate amount of time spent documenting or billing for health services today:** Enter the approximate time spent documenting or billing for health services.

**Nurse’s Signature:** Write your signature on this line.

**Page \_\_ of \_\_:** If you use more than one sheet to track encounters for a given day, at the end of the day staple the sheets together and in the first space after the word “Page” number the pages consecutively. In the second space write the total number of pages used for the day. (Example: If you used 3 pages for a specific day, the pages would be numbered 1 of 3, 2 of 3, and 3 of 3.).

**At the end of the two-week data collection period,** sum all of the results for each section and enter the total on the Nurse’s Summary of Daily Health Services Encounters Report form via the SCDE’s website.

**Student Encounters Examples:**

- 1. A student comes to the health office complaining of a headache. Following an assessment, the nurse administers a medication that the parent provided, provides health counseling, allows the student to lie down for 15 minutes, allows the student to call his parent, discusses the student’s condition with the parent and then allows the student to return to class. The nurse would place one check mark in each of the following sections:

- Total Student Encounters
  - Medication
  - Illness Treatment
  - Student Health Counseling
  - Parent/Teacher Communication
  - Returned to Class
2. A student comes to the health office to be screened for vision as part of the evaluation process for special education services. The nurse provides the screening and allows the student to return to class. The nurse would place one check mark in the following sections:
- Total Student Encounters
  - Returned to Class
3. A student comes to the health office with a toothache. Following an assessment the nurse allows the student to rinse with warm water, provides health counseling, contacts the parent, and the student is sent home. The nurse would place one check mark in each of the following sections:
- Total Student Encounters
  - Illness Treatment
  - Student Health Counseling
  - Parent/Teacher Communication
  - Sent Home



## **Instructions for Completing the Nurse's Summary of Daily Health Services Encounters Report Form**

Please complete a separate Health Services Encounters Report form for each school that you serve. If more than one nurse serves a school, each nurse should track and report her/his data separately.

**Log in on the SCDE's website at: [www.ed.sc.gov](http://www.ed.sc.gov).**

**Under Web Applications, click "School Nursing Surveys".**

**Select the School Year from the drop down box. Then click "Select School Year".**

**Click "Two Week Encounter Survey".**

**Click "New Record".**

**Click the blue number that appears in the table.**

**Now you should see the Health Services Encounters Report Form.**

**Note that the system times out after 15 minutes of inactivity and you will lose any data that you have not saved. We recommend that you total your encounters data and have it ready when you access the electronic survey and that you click the "Save Data" if you must step away from the computer.**

**Nurse:** Your name should automatically appear in the box.

**Date:** The date should also automatically appear.

**School:** Select the name of the school for which you are reporting data.

**Phone:** The phone number should automatically appear.

### **Questions 1 and 2:**

Tally the totals for each section of the Nurse's Daily Health Services Encounters Tally Sheets for the two-week period and enter the results in the corresponding spaces on the Nurse's Summary of Daily Health Services Encounters Report.

### **Question 3:**

Total the amount of time that you spent documenting and billing for services during the two-week survey period and enter the results in the space provided.

### **Question 4:**

Enter the amount of time during the survey period that you worked in a direct health services provider role performing services that were applicable for the survey. For the purposes of this survey, the time noted for direct services should include hours during the regular work day spent providing direct care to students, charting health services, billing for health services, and/or following up on health care that was provided to students. Most nurses responding to the survey spend their entire work day providing direct services. Do not include the following in your direct health service time total:

- Time spent in a supervisory or other administrative role
- Time related to mass screening activities, classroom presentations, and other special group events
- Time absent

### **Once you have completed the survey:**

- **Click "Save Data" at the bottom of the page.**
- **The top of the survey will appear. Scroll to the bottom of the page and click "Signature Finished with Survey".**
- **Click "OK".**

**Nurse's Summary of Daily Health Services Encounters Report**  
**February 2 – February 13, 2015** (1/7/2015)

**Nurse:** This form is provided for data collection planning purposes; data must be entered via the SC Department of Education's website.

**Date:**

**School:**

**Phone:**

Data should reflect the survey period from February 2, 2015 through February 13, 2015. Please complete a separate Health Services Encounters Report form for each school that you serve. If more than one nurse serves a school, each nurse should track and report his/her data separately. Please submit your report by February 27, 2015.

For the purposes of this report the following definitions should be used for defining elementary, middle, high, and other school types:

- Elementary: Grades include *only* PK, K, 1, 2, 3, 4, or 5 *OR* a combination of the following grades *with no other grades included* – PK, K, 1, 2, 3, 4, 5, or 6.
- Middle: Grades include *only* 6, 7, or 8 *OR* a combination of the following grades *with no other grades included* – 5, 6, 7, 8, or 9.
- High: Grades include *only* 9, 10, 11, 12 or a combination of the following grades *with no other grades included* – 8, 9, 10, 11, or 12.
- Other: Any combination of grades not specified above.

1. Sum the totals from the Nurse's Daily Health Services Encounters Tally Sheets and write the totals in the table under the appropriate column.

Data Element	Elementary	Middle	High	Other
Student Encounters				
Medications				
Illness Treatments				
Injury Treatments				
Student Health Counseling				
Communication with Parents/Teachers/Physicians/Others				
Students Returned to Class				
Students Sent Home				
Students Sent for Immediate Care				
Staff Encounters				

2. Sum the totals from the Nurse's Daily Health Services Encounters Tally Sheets for each special procedure that was provided by you or a UAP under your guidance and write the totals in the table under the appropriate column.

Special Procedures	Elementary	Middle	High	Other
Catheterization				
Tracheostomy Care				
Suctioning				
Diabetes Monitoring/Management				
Tube Feeding				
Nebulizer Treatments				
Toileting/Diapering				
Ventilator Management				
Dressing Changes				
Screening (not mass screening)				

3. For the school noted above, what is the total amount of time that you spent documenting or billing for services during the survey period? \_\_\_\_ hours \_\_\_\_ minutes
4. What is the total number of hours you worked at this school during the survey period in a direct health services provider role providing services covered in this survey? \_\_\_\_ hours \_\_\_\_ minutes

## Notes for District Coordinators for Two Week School Health Services Encounters Survey

To access the nurse surveys and the district survey:

Log in on the SCDE's website at: [www.ed.sc.gov](http://www.ed.sc.gov).

Under Web Applications, click "School Nursing Surveys".

Select the School Year from the drop down box. Then click "Select School Year".

Select "Survey Coordinator" role from the drop down box. Then click "Select Role from Listing and Click here".

Click "Two Week Encounter Survey".

- Review the nurse surveys. You may unassign a nurse's survey if the information entered is not correct.
- Assure that all nurses have completed and signed their surveys.

Click "Return".

Click "District Two Week Encounter Summary".

- Review data.
- Enter a response to the last question – Did all nurses who provide direct health services for students participate in the survey? If no, provide an explanation in the space provided.

Once you have completed the survey:

- Click "Save Data" at the bottom of the page.
- The top of the survey will appear. Scroll to the bottom of the page and click "District Signature".
- Click "OK".

If you need technical assistance with the survey, contact Fran Boone ([BOONEFC@dhec.sc.gov](mailto:BOONEFC@dhec.sc.gov) / 803.898.0735) or Rosalind Davis ([RDAVIS@ed.sc.gov](mailto:RDAVIS@ed.sc.gov) / 803.734.8186).

For survey content questions, contact Andrea Williams ([awilliams@ed.sc.gov](mailto:awilliams@ed.sc.gov) or [williaam@dhec.sc.gov](mailto:williaam@dhec.sc.gov) / 803.734.1998 or 803.898.1998).

