

2025 School Health Annual Report Survey

Start of Block: INTRODUCTION & SCHOOL ADMINISTRATIVE UNIT INFORMATION

Intro

2024-2025 School Annual Health Annual Report Survey

In accordance with Department of Education Chapter Rules 40 and 45, each administrative unit and approved private school shall provide an annual report summarizing emergency medication administration, and other medication as determined by the department, as well as hearing and vision screenings completed. This form is to be used to make this annual report. The final (optional) section represents Maine's work to promote nationwide school health data collection. Data helps build bridges that connect school nursing services to the rest of the health care system. This data collection will help to demonstrate their unique and critical contributions to the health of school-age children. Following the definitions of each data set is critical for this to be successful.

Q1 Select your school administrative unit/district
District (1)

▼ Acadia Academy (1) ... York Public Schools (386)

Q2 In case we need to contact you after submission please provide your contact information.

☐ Person Completing Form (1)

☐ Title (2) _____

☐ Phone number (3) _____

☐ Email address (4) _____

End of Block: INTRODUCTION & SCHOOL ADMINISTRATIVE UNIT INFORMATION

Start of Block: SCHOOL HEALTH ADVISOR

Q3 Enter the name and email of your school health advisor/school physician as required by M.R.S. Title 20-A §6402-A.

End of Block: SCHOOL HEALTH ADVISOR

Start of Block: SCHOOL-BASED HEALTH CENTERS

Q5

Do you have a school-based health center? A School Based Health Center means a clinical site located within a school building, which provides routine Medical Services and Behavioral Health Services to the student body of a school.

☐ YES (1)

☐ NO (5)

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site loca... = YES

Q5.1 Grade levels served by the SBHC:

☐ Elementary (5)

☐ Middle (6)

☐ High school (7)

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site
loca... = YES

5.2 Do you partner with a health center or healthcare organization for your SBHC?

- ☐ YES (1)
- ☐ NO (5)

Display this question:

If Do you partner with a health center or healthcare organization for your SBHC? = YES

Q5.2.1 You indicated that you partner with a health center, please select the best match for the type of organization:

- ☐ Hospital System (Northern Light, Maine Health, Maine General) (1)
- ☐ Federally Qualified Health Center (FQHC) (7)
- ☐ Community Health Center (8)
- ☐ Other: _____ (9)
- _____

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site
loca... = YES

Q5.3 Please select the services provided through your SBHC. Do not include services that are provided through the health office that is staffed by the school nurse.

- ☐ Medical Services with a Medical Provider (MD, FNP, PA) (1)
- ☐ Behavioral Health Services (LCSW, LCPC, etc.) (5)
- ☐ Dental Services (Hygiene, Sealants, etc. (6)
- ☐ Seasonal influenza or COVID19 immunization clinic (7)
- ☐ Routine Immunizations (8)
- ☐ Laboratory Services (bloodwork) (9)
- ☐ Reproductive Health Services (10)
- ☐ Other (11) _____

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site loca... = YES

Q5.4 Are any of the services provided through your SBHC provided through telehealth?

- ☐ YES (1)
- ☐ NO (5)

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site loca... = YES

Q5.5 How many hours per week is the SBHC open to students?

- ☐ 8-16 hours (7)
- ☐ 17-24 hours (8)
- ☐ 25-40 hours (9)
- ☐ Other (1) _____

Display this question:

If Do you have a school-based health center? A School Based Health Center means a clinical site loca... = YES

Q5.6 Does the SBHC provide services to staff?

- ☐ YES (1)
- ☐ NO (4)

End of Block: SCHOOL-BASED HEALTH CENTERS

Start of Block: VISION & HEARING

VISION SCREENINGS

Q6 Have those who are responsible for administering the vision screening program participated in evidence-based screening training or professional learning in the past three years?

- ☐ YES (1)
- ☐ NO (2)
-

Q7 Visual Screening Completed- Total number of students screened

Definition: Number of students screened in accordance with Chapter 45.

_____ TOTAL NUMBER, ALL GRADES (3)

Q8 Number of referrals made for further evaluation due to vision screening concerns.

Definition: Include the number of students referred for further evaluation based on the results of the screening.

_____ TOTAL NUMBER, ALL GRADES (1)

Q9 Referral Outcome Of the referrals made, indicate the number for each category:

_____ Referral completed indicating normal eye function (8)

_____ Referral completed and treatment was recommended (prescription glasses, eye patching, etc.) (9)

_____ Referral outcome unknown, lost to follow up (10)

HEARING SCREENINGS

Q10 Have those who are responsible administering the hearing screening program participated in evidence-based screening training or professional learning in the past three years?

☐ YES (1)

☐ NO (2)

Q11 Hearing screening completed. Total number of students screened:

Definition: Number of students screened in accordance with Chapter 45.

_____ TOTAL NUMBER, ALL GRADES (1)

Q12 Number of referrals made for further evaluation due to hearing screening concerns.

Definition: Include the number of students referred for further evaluation based on the results of screening.

_____ TOTAL NUMBER, ALL GRADES (1)

Q13 Referral Outcome Of the hearing referrals made, indicate the number for each category:

_____ Referral completed indicating normal ear function (8)

_____ Referral completed and permanent hearing loss identified (12)

_____ Referral completed and temporary hearing loss or other temporary problem identified (13)

_____ Referral outcome unknown, lost to follow up (15)

End of Block: VISION & HEARING

Start of Block: UNIVERSAL BEHAVIORAL HEALTH SCREENING

Q14 Does your school administrative unit conduct universal behavioral health screenings for students? *Definition: Universal behavioral health screening means- A consistent process of valid, reliable, and age- appropriate screening for behavioral, or social/emotional needs.*

☐ YES (1)

☐ NO (2)

Q15 How many students were screened?

_____ number (4)

Q16 How many students were referred for additional support, based on the universal screening?

_____ number (1)

End of Block: UNIVERSAL BEHAVIORAL HEALTH SCREENING

Start of Block: MEDICATION ADMINISTRATION

Q17 Does your district have a written protocol for medication errors?

☐ YES (1)

☐ NO (2)

Q18 Total number of students that have regularly scheduled medication at school
_____ TOTAL NUMBER, ALL GRADES (1)

Q19 Total number of students that have prn (as needed) medication at school prescribed to them (e.g., albuterol, epinephrine, Diastat, or any other prescription medication given that is not regularly scheduled)
_____ TOTAL NUMBER, ALL GRADES (1)

EPINEPHRINE SUMMARY

Q20 Does the district have a collaborative practice agreement that allows unlicensed staff to administer **epinephrine** after completing training to a student with a previously unknown allergy suffering from anaphylaxis?

☐ YES (1)

☐ NO (2)

Q21 Please enter the total numbers for the school year of epinephrine administrations:

To students : _____ (1)

To staff : _____ (2)

To visitor : _____ (3)

Total : _____

Q22 How many doses were administered to someone with:

Known allergy diagnosis : _____ (1)

Unknown diagnosis : _____ (2)

Total : _____

NALOXONE SUMMARY

Q23 Does the district have a policy for **naloxone** (or other opioid antagonist) administration in case of opioid overdose?

☐ YES (1)

☐ NO (2)

Q24 Does the district have a collaborative practice agreement that allows unlicensed staff to administer **naloxone** after completing training to a person suspected of experiencing opioid overdose?

☐ YES (1)

☐ NO (2)

Q25 Where is naloxone stored in your school building(s)? (check all that apply)

- ☐ Nurses office (1)
- ☐ Public area in elementary school (2)
- ☐ Public area in middle school (3)
- ☐ Public area in high school (4)
- ☐ School resource officer (5)
- ☐ Other (6) _____
-

Q26 Enter the total number of naloxone administrations for the 2024-2025 school year:

To students : _____ (1)

To staff : _____ (2)

To visitor : _____ (3)

Total : _____

Q27 Was training on the administration of naloxone hydrochloride nasal spray or other FDA approved overdose prevention nasal spray offered to students within your school administrative unit during this school year in accordance with Chapter 41?

☐ YES (1)

☐ NO (2)

End of Block: MEDICATION ADMINISTRATION

Start of Block: STAFFING

Q28 **Health Office Staff**

*A full-time equivalent (FTE) is based on a teacher FTE (i.e., working 5 complete school days per week equals 1 FTE). Please do **not double count any person**. One FTE may provide services*

at more than one school within your school system, this person is only counted once.

Q29 Number of Full-time Equivalent (FTE) Registered Nurses in the district providing direct services in the health office:

Definition: Direct services means responsible for the care of defined group of students in addressing their acute and chronic health conditions. It includes health screenings, health promotion and case management. Include long term substitute (but not the substitute RN list for short term needs) and exclude nurses working with medically fragile students.

_____ RN FTE (1)

Display this question:

If Number of Full-time Equivalent (FTE) Registered Nurses in the district providing direct services... [RN FTE] < 1

Q30 If your district does not directly employ a full-time registered nurse (i.e. you entered a number less than 1 for the previous question) please select the options below that best describe how essential/required school health services are delivered in your school district. For reference, a list of essential services as defined in statute is provided below: 1. *Supervision and coordination of health services and health-related activities required by the statute.* 2. *Vision and hearing screenings, as required by Chapter 45* 3. *Medication coordination, training, and supervision, as required by Chapter 40* 4. *Immunization record keeping and reporting, as required by Chapter 126* 5. *Meeting the individual health and medical needs of students so they can access their education*

☐ The district has a limited contract with a third party (such as a staffing agency, healthcare provider, etc.) to supply all essential services. "Limited" means that the contract is capped in terms of the total cost, number of students, or amount of services or patient visits available under the contract. If, for example, the district pays per visit and has committed to paying for all visits for essential services, this would be considered "unlimited." (1)

☐ The district contracts for the delivery of all essential services with no limits or caps specified for the cost, number of students served, or number of services provided to enrolled public students. (2)

☐ The district has a limited contract with a third party to provide some essential services. (3)

☐ The district has an unlimited contract with a third party to provide some essential services. (4)

☐ The district is currently in the process of searching for or hiring a full-time registered nurse. (5)

☐ The district is currently in the process of searching for or hiring a part-time registered nurse. (6)

☐ We have another way to provide essential health services that is not represented in the options above (please write a description in the text box) (7)

Q31 Number of FTE Licensed Practical Nurses (LPNs) in the district providing direct services in the health office (not special assignment or private duty):

Definition: *Direct services means responsible for the care of defined group of students in*

addressing their acute and chronic health conditions. It includes health screenings, health promotion and case management. Include long term substitute (but not the substitute LPN list for short term needs) and exclude LPNs working with medically fragile students.

_____ LPN FTE (1)

Q32 Number of FTE Health Aides or Unlicensed School Personnel in the district providing services in the health office (not special assignment or private duty):

Definition: This number should reflect only those whose main assignment is health related. Exclude secretaries, teachers or principals who only address health issues at times. You may include FTE of secretary or other aides IF it is included as a specific part of their responsibility (i.e. cover health office regularly).

_____ Health Aide FTE (1)

Q33 Number of FTE Registered Nurses in the district with special assignments, such as working with a limited caseload providing direct services to one or group of medically fragile students:

Definition: Include RNs working with a limited caseload providing direct services such as medically fragile students.

_____ RN Special Assignment FTE (1)

Q34 Number of FTE LPNs in the district with special assignments, such as working with a limited caseload providing direct services to one or group of medically fragile students:

Definition: Include LPNs working with a limited caseload providing direct services such as medically fragile students.

_____ LPN Special Assignment FTE (1)

Q35 Number of FTE Health Aides in the district with special assignments, such as working with a limited caseload providing direct services to one or group of medically fragile students:

Definition: Include health aides (non-RN, non-LPNs) working with a limited caseload providing direct services such as medically fragile students.

_____ Health Aide Special Assignment FTE (1)

Q36 Total number of **RN FTEs** providing administrative or supervisory school health services:

Definition: RN's providing management/clinical supervision to RNs, LPNs, or other health aids or conducting other administrative health services, e.g. case management. Do not double count any person. This count is in addition to any other RNs already counted in previous questions.

_____ RN Supervisor/Administrator (1)

Q37 Total number of **LPN FTEs** providing administrative or supervisory school health services:

Definition: LPNs providing management/clinical supervision to LPNs, or other health aids or conducting other administrative health services. Do not double count any person. This count is in addition to any other LPNs already counted in previous questions.

_____ LPN Administrator (1)

Q38 Total number of Assistant FTEs providing administrative support services to RNs or LPNs:

Definition: Assistants providing administrative support services to RNs or LPN, e.g. clerical assistance.

_____ Assistants (1)

Q39 Total number of **supplemental/float RN FTEs**: **Definition:** Permanently hired/contracted RNs who provide supplemental/additional direct nursing services or specific procedures, e.g. child find/EPSTD. Do not include RNs with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the RNs previously counted.

_____ Float RNs (1)

Q40 Total number of **supplemental/float LPN FTEs**: **Definition:** Permanently hired/contracted LPNs who provide supplemental/additional direct nursing services or specific procedures, e.g. child find/EPSTD. Do not include LPNs with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the LPNs previously counted.

_____ Float LPNs (1)

Q41 Total number of **supplemental/float Health Aid (non-RN, non-LPN) FTEs:**

Definition: Permanently hired/contracted Health Aides who provide supplemental/additional direct nursing services or specific procedures, e.g. child find/EPST. Do not include health aids with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the health aids previously counted.

_____ Float Health Aid (non RN/LPN) (1)

Q42 Number of health services staff serving your student population, who hold a certification/degree at the level of education indicated. For each staff record **only** the single highest degree related to their health care role with the school district.

Doctorate in nursing : _____ (1)
Doctorate in another field : _____ (2)
Master of nursing : _____ (3)
Master of education : _____ (4)
Master of public health : _____ (5)
Master of another field : _____ (6)
Bachelor of nursing : _____ (7)
Bachelor of another field : _____ (8)
Associate of nursing : _____ (9)
Associate of another field : _____ (10)
Diploma of nursing : _____ (11)
Technical/program certificate : _____ (12)
High school diploma/GED : _____ (13)
Other (please specify) : _____ (14)
Total : _____

Q43 For school nurses (RNs) serving your student population, please indicate the number who have each of the following non-degree credentials:

_____ National Certification as a School Nurse (NCSN) (1)
_____ State-specific School Nurse credentials issued by state DOE (e.g., 524 Endorsement)
(2)
_____ National Nurse Practitioner Certification (3)
_____ Other (please specify) (4)

End of Block: STAFFING

Start of Block: CHRONIC CONDITIONS

Q44 Enter the number of students in the district with a diagnosis from a health care provider:

Include only those with a diagnosis from a health care provider.

- _____ Asthma (1)
 - _____ Type 1 Diabetes (2)
 - _____ Type 2 Diabetes (3)
 - _____ Seizure Disorder (4)
 - _____ Life Threatening Allergy (5)
 - _____ Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) (6)
-

Q45 Total number of students with one or more of the diagnoses above. (For example, one student may have a diagnosis of asthma and diabetes. For this question, count that student once)

_____ Enter a whole number (1)

Q46 What are the most common chronic conditions the school nurse is managing that are not represented in this section (For this question, a written diagnosis from a healthcare provider is not necessary)?

End of Block: CHRONIC CONDITIONS

Start of Block: INDIVIDUALIZED HEALTH PLANS

Q47 Number of students who have an individualized health plan created by a registered nurse (this would include emergency action plans and allergy action plans. Do not double count students if they have more than one plan.)

_____ Total number of students (1)

End of Block: INDIVIDUALIZED HEALTH PLANS

Start of Block: CONCUSSIONS

Q48 Number of concussions diagnosed by a provider:

_____ Number of Students Diagnosed (1)

Q49 Of the students diagnosed with a concussion, how many concussions were injuries resulting from (the total must equal the total number of concussions diagnosed, from question 48):

Participation in an organized athletic event : _____ (1)

Participation in routine daily activities or play : _____ (4)

Unknown cause : _____ (6)

Total : _____

End of Block: CONCUSSIONS

Start of Block: HEALTH OFFICE VISITS

The following questions are optional about Health Office visits and ending disposition (returned to class, sent home, or called 911).

Q50 Did the district collect information about Health Office visits and ending dispositions (returned to class, sent home, or called 911)?

☐ YES (1)

☐ NO (2)

Display this question:

If Did the district collect information about Health Office visits and ending dispositions (returned... = YES

Q51 Please enter the number of health office visits resulting in student **returning to class or staying in school**:

Seen face to face by RN : _____ (1)

Seen face to face by LPN : _____ (2)

Seen face to face by Health Aide : _____ (3)

Total : _____

Display this question:

If Did the district collect information about Health Office visits and ending dispositions (returned... = YES

Q52 Please enter the number of health office visits resulting in student **being sent home**:

Include students sent home with recommendations to see a health care provider.

Seen face to face by RN : _____ (1)

Seen face to face by LPN : _____ (2)

Seen face to face by Health Aide : _____ (3)

Total : _____

Display this question:

If Did the district collect information about Health Office visits and ending dispositions (returned... = YES

Q53 Please enter the number of health office visits resulting in a **911 call** and transport:

Seen face to face by RN : _____ (1)

Seen face to face by LPN : _____ (2)

Seen face to face by Health Aide : _____ (3)

Total : _____

End of Block: HEALTH OFFICE VISITS
