NURSING DOCUMENTATION and RECORD-KEEPING in SCHOOL SETTINGS

Guidance provided by the State School Nurse Consultant within the Public Health Division of the Oregon Health Authority.

Summary

This guidance document compiles the various laws and rules that impact a nurse's documentation and record-keeping in the school setting. Regardless of the practice setting, nurses must document the nursing process and the care they provide.

This document will outline:

- Required health-related documentation in the educational setting
- Nursing license requirements
- Family Educational Rights & Privacy (FERPA) requirements
- Oregon records retention rules
- Oregon student records privacy rules
- Local district policy

Required Health-Related Documentation in the Educational Setting

To start, here are some examples of documentation that should be happening within your nursing practice.

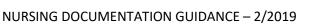
- Delegation documentation as required in Division 47 of the Oregon Nurse Practice Act (NPA).
- Medication documentation as required by OAR 581-021-0037 and district policy/procedure.
- Immunization documentation as required by Oregon law.
- Nursing documentation as necessary to implement the nursing process for students seen by the nurse, including diabetes logs or other tracking forms.
- Health screening documentation as required by OARs & district policy.
- Training records as required by district process.
- Health room visit documentation as required by district policy.

Nursing License requirements

While the NPA doesn't specifically list documentation requirements, it does include 'conduct derogatory' statements that help to clarify documentation requirements.

From Division 45 of the Oregon NPA (OAR 851-045-0040):

(4) Standards related to the licensee's responsibility for documentation of nursing practice. The licensee shall document nursing practice in a timely, accurate, thorough, and clear manner.







Conduct Derogatory to the Standards of Nursing - Defined (851-045-0070):

(4) Conduct related to communication:

(a) Failure to accurately document nursing interventions and nursing practice implementation;

(b) Failure to document nursing interventions and nursing practice implementation in a timely, accurate, thorough, and clear manner. This includes failing to document a late entry within a reasonable time period;

(c) Entering inaccurate, incomplete, falsified or altered documentation into a health record or agency records. This includes but is not limited to:

- (A) Documenting nursing practice implementation that did not occur;
- (B) Documenting the provision of services that were not provided;
- (C) Failing to document information pertinent to a client's care;
- (D) Documenting someone else's charting omissions or signing someone else's name;
- (E) Falsifying data;
- (F) Altering or changing words or characters within an existing document to mislead the reader; or
- (G) Entering late entry documentation into the record that does not demonstrate the date and time of the initial event documented, the date and time the late entry is being placed into the record, and the signature of the licensee entering the late entry to the record.
- (d) Destroying a client or agency record to conceal a record of care;
- (e) Directing another individual to falsify, alter or destroy an agency record, a client's health record, or any document to conceal a record of care;
- (f) Failing to communicate information regarding the client's status to members of the health care team in an ongoing and timely manner as appropriate to the context of care; or
- (g) Failing to communicate information regarding the client's status to other individuals who are authorized to receive information and have a need to know.

Federal Education law

Nurses practicing in the educational setting need to be aware of how their documentation and record-keeping is influenced by FERPA laws.

FERPA defines 'education records' as:

- (a) The term means those records that are:
 - (1) Directly related to a student; and
 - (2) Maintained by an educational agency or institution or by a party acting for the agency or institution.

Further explained:

Education records are records that are directly related to a student and that are maintained by an educational agency or institution or a party acting for or on behalf of the agency or

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institution. These records **include but are not limited to** grades, transcripts, class lists, student course schedules, **health records (at the K-12 level)**, student financial information (at the postsecondary level), and student discipline files. The information may be recorded in any way, including, but not limited to, handwriting, print, computer media, videotape, audiotape, film, microfilm, microfiche, and e-mail.

In addition, FERPA requires:

An educational agency or institution must use **reasonable methods** to ensure that school officials obtain **access to only those education records in which they have legitimate educational interests**. An educational agency or institution that does not use physical or technological access controls must ensure that its administrative policy for controlling access to education records is effective and that it remains in compliance with the legitimate educational interest requirement.

Oregon Law

In addition to Federal FERPA laws, Oregon has their own set of laws that impact a nurse's documentation and record-keeping.

From the Oregon Secretary of State's website (OAR 166-400-0060):

(28) **Special Education Student Records** Records document students participating in special education programs and early intervention special education services. Records may include speech/hearing, academic, motor, occupational and/or physical therapy, vision/hearing, interdisciplinary team, and classroom observation reports; records relating to student behavior including psychological and social work reports; assessments obtained through other agencies; contact sheets; severity rating scales; test result records; physician's statements; parental consent records; educational program meeting records; request for hearing records; eligibility statements; individualized education plans (IEP); individualized family service plans (IFSP); and related correspondence and documentation. Minimum retention: (a) Records documenting speech pathology and physical therapy services: Until student reaches age 21 or 5 years after last seen, whichever is longer (b) ESD copies, if program at district level: Transfer records to home district after end of student participation (c) Readable photocopies of records necessary to document compliance with State and Federal audits retained by the former educational agency or institution when a student transfers out of district: 5 years after end of school year in which original record was created.

(29) Student Health Records Records document student health care responsibilities and activities performed by school or district health professionals or non-health staff. These records are maintained by the school nurse or another individual designated by the district to maintain confidential health information. Records may include but are not limited to medication administration records; records of nursing assessment and nursing care given in the school setting; School Health Management Plans prepared by the nurse for students with special health needs, medical records from outside health care providers and health care agencies;





and psychological diagnostic test reports. Health information provided to Special Education for determining eligibility and IEP activity is maintained in the Special Education record and forwarded upon transfer of the student record. School nurse records are medical records subject to issues of confidentiality and exemption from disclosure per ORS 192.496. Health record information is protected and should be treated as other student records. Records that are made or maintained separately and solely by a licensed health care professional who is not employed by the educational agency or institution, and are not used for education purposes of planning, are excluded from educational record provisions. See Oregon Department of Education student health record policies for further clarification. SEE ALSO Student Health Screening Records and Student Immunization Records in this section. Minimum retention: Until student reaches age 21 or graduates, whichever is longer.

(30) **Student Health Screening Records** Records document the health screening status of students and mandated certifications of health. Required health screening records include vision and hearing screening results; Certificate of Immunization Status; and Tuberculosis (TB) Clearance Certificate (if required by law according to the student's birth country). Records may also include but are not limited to communications related to health and safety and directed to the school from the parent/guardian or health care provider regarding the student's attendance, participation, or activities; communications which are directed to the school by health care providers; and documentation of first aid given, and instructions sent to parents/guardians regarding these screening and first aid events. These records are part of the Student Education Record and are transferred if the student transfers to a new district. See Oregon Department of Education student health record policies for further clarification. SEE ALSO Student Health Records and Student Immunization Records in this section. Minimum retention: Until student reaches age 21 or graduates, whichever is longer.

(31) Student Immunization Records Records document the immunization status of an individual student. Records include but are not limited to the Certificate of Immunization Status (CIS), which includes student identification information, vaccine history, and medical and religious exemptions, and records tracking susceptible for those students not yet completely immunized. Records must be retained as part of the Student Health Screening Record and are transferred if the student transfers to a new district. SEE ALSO Student Health Screening Records and Student Health Records in this section, and Immunization Records, Administrative in the Administrative Records section. Minimum retention: (a) Retain certificate of Immunization Status (CIS): Until student reaches age 21 or graduates whichever is longer (b) Retain immunization Status Records – Susceptible (Tracking Cards): Until student attendance ends.

(25) **Psychological Guidance and Counseling Records**: document student psychological health care responsibilities and activities performed by school or district health professionals or non-health staff. Records that are made or maintained separately and solely by a licensed health care professional who is not employed by the educational agency or institution, and are not used for education purposes of planning, are excluded from educational record provisions.



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Oregon's implementation of FERPA rules.

STUDENT RECORDS

ORS 326.565 Standards for student records; rules. (1) The State Board of Education shall adopt by rule standards for the creation, use, custody and disclosure, including access, of student education records held by a school district or another public or private educational entity that provides educational services to students in any grade from kindergarten through grade 12. Consistent with the requirements of applicable state and federal law, the standards:

(a) Shall include requirements under which a school district or other educational entity will transfer student education records pursuant to ORS 326.575.

(b) May be applied differently to persons 18 years of age or older.

(2) The board shall distribute the rules that are adopted under subsection (1) of this section to all school districts and shall make the rules available on the website of the Department of Education.

(3) School districts shall make the rules received under subsection (2) of this section available to the public schools in the district and to the public. [1993 c.806 §3 (326.565, 326.575 and 336.187 enacted in lieu of 336.185, 336.195 and 336.215); 1995 c.15 §1; 2015 c.519 §1]

326.575 Records when student transfers or is placed elsewhere; notice to parents; amendments to records; rules. (1) Within 10 days of a student's seeking initial enrollment in a public or

cords; rules. (1) within 10 days of a student's seeking initial enrollment in a public of private school or when a student is placed in a state institution, other than an institution of post-secondary education, or a day treatment program, residential treatment program, detention facility or youth care center, the school, institution, program, facility or center shall notify the public or private school or the institution, program, facility or center in which the student was formerly enrolled and shall request the student's education records.

(2) Any public or private school, state institution, day treatment program, residential treatment program, detention facility or youth care center receiving the request described in subsection (1) of this section shall transfer all student education records relating to the particular student to the requesting school, institution, program, facility or center no later than 10 days after the receipt of the request. The education records shall include any education records relating to the particular student retained by an education service district.

(3) Notwithstanding subsections (1) and (2) of this section, for students who are in substitute care programs:

(a) A school, institution, program, facility or center shall notify the school, institution, program, facility or center in which the student was formerly enrolled and shall request the student's education records within five days of the student seeking initial enrollment; and

(b) Any school, institution, program, facility or center receiving a request for a student's education records shall transfer all student education records relating to the particular





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student to the requesting school, institution, program, facility or center no later than five days after the receipt of the request.

(4) Each educational institution that has custody of the student's education records shall annually notify parents and eligible students of their right to review and propose amendments to the records. The State Board of Education shall specify by rule the procedure for reviewing and proposing amendments to a student's education records. If a parent's or eligible student's proposed amendments to a student's education records are rejected by the educational institution, the parent or eligible student shall receive a hearing on the matter. The State Board of Education shall specify by rule the procedure for the hearing.
(5) As used in this section:

(a) "Day treatment program" means a program described in ORS 343.961.

(b) "Detention facility" has the meaning given that term in ORS 419A.004.

(c) "Educational institution" means a public or private school, education service district, state institution, day treatment program, residential treatment program or youth care center.

(d) "Residential treatment program" means a program described in ORS 343.961.

(e) "Substitute care program" has the meaning given that term in ORS 339.133.

(f) "Youth care center" means a center as defined in ORS 420.855. [1993 c.806 §4

(326.565, 326.575 and 336.187 enacted in lieu of 336.185, 336.195 and 336.215); 1995 c.15 §2; 2001 c.681 §1; 2005 c.521 §3; 2011 c.313 §2; 2011 c.701 §4]

326.580 Electronic student records; rules. (1) As used in this section, "educational institution" means:

(a) An "educational institution" as defined in ORS 326.575.

(b) A state agency.

(c) A local correctional facility.

(2) The State Board of Education may adopt by rule standards for the content and format of an Oregon electronic student record. An Oregon electronic student record may be used to transfer student record information from one educational institution to another.

(3) The board may define the Oregon electronic student record to constitute a full and complete copy of the official student permanent record, student education record, student vision health record, student dental health record and certificate of immunization status that are required by state and federal law.

(4) The standards established by the board shall include procedures and criteria for participation in the Oregon electronic student record program by educational institutions. An educational institution may apply to the Department of Education for a certificate of participation in the Oregon electronic student record program.

(5) An educational institution that is approved for participation in the Oregon electronic student record program by the Department of Education:

(a) Shall not be required to forward by mail or other means physical items such as original documents or photocopies to a receiving educational institution that also is approved for participation in the program. This paragraph does not apply to special education records that are specifically required by federal law to be physically transferred.

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(b) May elect to designate the Oregon electronic student record as the official student record.
(c) Shall retain the official student record in compliance with state and federal law.
[2001 c.450 §1; 2013 c.585 §4; 2015 c.558 §4]

Local policy (may or may not be included in every district)

Health room Log – *The School Health Room attendant, secretary, and/or nurse shall maintain a daily log of students seen for health care, education or consultation. This log will include the date, time student's name, complaint and services provided.*

This daily log will be maintained in a secure location and information kept as confidential. The log is not intended to be used to ascertain a student's whereabouts nor is it intended to be a record of the nurse's time.

For more information, contact:

The State School Nurse Consultant at the Oregon Health Authority or

The School Health Specialist at the Oregon Department of Education

Bold emphasis added by author(s).

