# SCHOOL HEALTH DATA DEFINITIONS

| Data Point | Data Points Definition | Characteristics and Predicted Prevalence | Mandates | [ICD-10 2010 classifications](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdocs.google.com%2Fdocument%2Fd%2F1xG5K5e3qFVx1oIUhtWxQyET0PN5iOncI%2Fedit&data=05%7C02%7CBrodecky_A%40cde.state.co.us%7C5a03ce7b02b94d88f69908dd6e4b6fc6%7Ca751cfc81f9a4edb83709f1c6d4bea5a%7C0%7C0%7C638787992496306809%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=LeAn%2Fauq1kXHwZ%2FmU48WhJODFJMG3ImSWK9yMJ%2Fli4E%3D&reserved=0) |
| --- | --- | --- | --- | --- |
| 1. Number of enrolled students | Official [October count](https://www.cde.state.co.us/cdereval/pupilcurrent%20%20) for the district. **Only include schools you are reporting for (i.e., if charter schools in your district report separately, do not include them in** **this number).** | PK-12. |  | **N/A** |
| 2. Total # of **RN FTEs** with assigned caseload providing direct services | Direct services means responsibility 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. Direct services also include care provided in a health care team including LPNs or aides. | Inclusion/Exclusion -Include long term substitute (but not the substitute RN list for short term needs) Exclude nurses working with medically fragile students (1:1, 1:2, 1:3, 1:4, 1:5) -Exclude % of administrative assignment |  |  |
| 3. Total # of **LPN/LVN FTEs** with assigned caseload providing direct services | See definition of direct services above. |  |  |  |
| 4. Total # of **UAP/health aides non-RN Non-LPN/LVN FTEs** with an assigned caseload providing direct health services (e.g., give medication, staff health office, perform specific health procedures) | See definition of direct services above. 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). |  |  |  |
| 5. Total # of supplemental/float **RN FTEs** | Permanently hired/contracted RNs who provide supplemental/additional direct nursing services or specific procedures e.g., child find/EPSDT. Do not include RNs with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the RNs identified in #2 and #8. |  |  |  |
| 6. Total # of supplemental/float **LPN/LVN FTEs** | Permanently hired/contracted LPNs/LVNs who provide supplemental/additional direct nursing services or specific procedures. Do not include LPNs/LVNs with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the LPNs/LVNs identified in #3 and #9. |  |  |  |
| 7. Total # of Supplemental/float **UAP/Health Aides (non-RN Non-LPN/LVN) FTEs** providing direct services | Permanently hired/contracted health aides (non-RN, non-LPN/LVNs) FTE who provide supplemental/additional direct nursing services or specific procedures. Do not include those with 1:1, 1:2, 1:3, 1:4, 1:5 assignments. This count is in addition to the health aides identified in #4 and #10 |  |  |  |
| 8. Total number of **RNs with special assignment FTEs** | Include RNs working with a limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1:3, 1:4, 1:5). |  |  |  |
| 9. Total number of **LPN/ LVNs with special assignment FTEs** | Include LPNs/LVNs working with a limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1:3, 1:4, 1:5). |  |  |  |
| 10. Total number of **UAP/Health Aides (non-RN, non-LPN/LVN) with special assignment FTEs** | Include health aides (non-RN, non-LPN/LVNs) working with a limited caseload providing direct services such as medically fragile students (1:1, 1:2, 1:3, 1:4, 1:5). |  |  |  |
| 11. Total # of **RN FTEs** providing administrative/supervisory support | RNs providing management/clinical supervision to RNs, LPNs/LVNs, or other health extenders, or conducting other administrative health services, e.g., case management. |  |  |  |
| 12. Total number of **LPN/ LVN FTEs** providing administrative or supervisory school health services | LPNs/LVNs providing management/clinical supervision to LPNs/LVNs, or other health extenders, or conducting other administrative health services |  |  |  |
| 13. Total number of **UAP/Health Aide FTEs** providing administrative support services to RNs or LPNs/LVNs | Assistants providing administrative support services to RNs or LPNs/LVNs, e.g., clerical assistance |  |  |  |
| 14. Total # of Private Duty Nurses paid by LEP | Do not include in # 2, 5 or 8 |  |  |  |
| 15. Total # of Private Duty Nurses provided by family | Do not include in # 2, 5 or 8 |  |  |  |
| Did all schools report health conditions? | Y/N | If answer no, indicate total enrollment for schools that reported health conditions - would need to be new field |  |  |
| Life threatening allergies (e.g., insect, food, latex) | Only include those with a current, health care provider diagnosis. **The term diagnosis as used here is a medical diagnosis of a condition identified by a qualified healthcare provider (M.D., D.O, P.A., N.P.) and noted on a physical exam form, prescription, medication permission form, allergy/anaphylaxis care plan, or similar. In addition, if there is a noted health care provider history of the diagnosis and the nurse is currently seeking additional orders because there have been reliable reports of current symptoms., include them. If there is no noted history or indication other than parent report, do not include them.** | The prevalence of food allergy among children under age 18 increased 18% from 1997-2007, with 3.9% of children reported to have a food or digestive allergy in the previous 12 months. In a survey of school epinephrine administration, approximately 25% of recipients had no previous diagnosis. | 1 CCR 301-68 ADMINISTRATION OF COLORADO SCHOOL CHILDREN'S ASTHMA AND ANAPHYLAXIS ACT AND COLORADO SCHOOL CHILDREN'S FOOD ALLERGY AND ANAPHYLAXIS MANAGEMENT ACT | T78 Adverse effects, Anaphylactic shock, unspecified. T78.4 Allergy, unspecified-allergic reaction NOS, Hypersensitivity NOS, Idiosyncrasy NOS |
| Diabetes Type I | Only include those with a current health care provider diagnosis, (\*See diagnosis definition under data point Life threatening allergies) | The incidence of type 1 diabetes has increased 1.6-fold among Colorado youth from 1978-1988 to 2002-2004.1 | Section 504 of the Rehabilitation Act of 1973 | E10 Insulin-dependent diabetes mellitus |
| Diabetes Type 2 | Only include those with a current health care provider diagnosis. (\*See diagnosis definition under data point Life threatening allergies) |  |  |  |
| Convulsions/seizures (e.g., epilepsy) | Only include those with a current health care provider diagnosis. (\*See diagnosis definition under data point Life threatening allergies) | By 16 years of age, 0.4% to 0.7% of children will have developed epilepsy. | Section 504 of the Rehabilitation Act of 1973 | G40– Epilepsy and recurrent seizures. Focal onset (aware or partial awareness, motor and non-motor), Generalized onset (impaired awareness, tonic-clonic, absence), Unknown onset (tonic-clonic, absence) idiopathic epilepsy and epileptic syndromes with seizures of localized onset. (**Not to include Psychogenic Non-Epileptic Seizures)** [epilepsycoloradowyoming.org/what-is-epilepsy/types-of-seizures/](https://epilepsycoloradowyoming.org/what-is-epilepsy/types-of-seizures/) |
| Asthma | Only include those with a current health care provider diagnosis. (\*See diagnosis definition under data point Life threatening allergies) | Approximately 10% of school-aged children have asthma. Asthma is responsible for 13 million missed school days each year. | 1 CCR 301-68 ADMINISTRATION OF COLORADO SCHOOL CHILDREN'S ASTHMA AND ANAPHYLAXIS ACT AND COLORADO SCHOOL CHILDREN'S FOOD ALLERGY AND ANAPHYLAXIS MANAGEMENT ACT | J45 – Allergic, non-allergic, idiosyncratic, intrinsic non allergic, mixed asthma |
| Head injury, closed (e.g., TBI, concussion) | Include those with a health care provider diagnosis provider or licensed behavioral health care provider diagnosis, (e.g. psychologist, social worker, counselor not to include school psychologist, social worker or counselor), as well as those identified by a concussion, 504 or IEP team. (See diagnosis definition under data point Life threatening allergies) | An estimated 1.6 to 3.8 million concussions occur each year. Colorado uses the Response to Intervention (RTI) framework to describe all aspects of traumatic brain injury. | Senate Bill 11-040 The Jake Snakenberg Youth Concussion Act | S01-S09 – Open wound of head. Fracture of skull and facial bones. Dislocation, sprain and strain of joints and ligaments of head. Injury of cranial nerves. Injury of eye and orbit. Intracranial injury. |
| Mental or Behavioral Conditions/disorders (e.g., anxiety, depression, suicidal ideation/attempts) | Include those with a health care provider or licensed behavioral health care provider diagnosis, (e.g. psychologist, social worker, counselor not to include school psychologist, social worker or counselor), as well as those identified by 504 or IEP team. (\*See diagnosis definition under data point Life threatening allergies) | Overall prevalence of mental/emotional disorders with severe impairment and/or distress was 22.2%. Approximately one in every four to five youth in the U.S. meets criteria for a mental disorder with severe impairment across a life-time. See CDE 'School Nurse Role in Mental Health' & 'Serious Emotional Disability ' | McKinney-Vento Act Individuals with Disabilities Education Act  Exceptional Children's Educational Act 1 CCR 301-8 | F00-F99 – Except F84 conduct disorders, mixed disorders of conduct and emotions, Emotional disorders with onset specific to childhood, disorders of social functioning with onset specific to childhood and adolescence, Tic disorders, other behavioral and emotional disorders with onset usually occurring in childhood and adolescence. Mental and behavioral disorders due to psychoactive substance use. Schizophrenia and delusional disorders. |
| Medically fragile (e.g., high acuity)/Medically Complex | Students with one or more chronic conditions with potential for a life-threatening emergency requiring the skill and judgment of a professional nurse. (see [OCR findings](https://docs.google.com/document/d/10P5RFma82TM4AE90xTfI4OvTqByRSfww/edit?usp=drive_link&ouid=116125876698207956481&rtpof=true&sd=true) for further clarification) | Students with one or more chronic conditions with potential for a life-threatening emergency requiring the skill and judgment of a professional nurse. Determined by task force to be critical element in describing Colorado student health conditions. | Colorado Nurse Practice Act | Multiple health vulnerabilities requiring intensive nursing care. Q00-99 – Congenital malformations, deformations, and chromosomal abnormalities. |
| ADD/Attention deficit disorder | Include those with a health care provider diagnosis provider or licensed behavioral health care provider diagnosis, (e.g. psychologist, social worker, counselor not to include school psychologist, social worker or counselor), as well as those identified by 504 or IEP team. (See diagnosis definition under data point Life threatening allergies) | Prevalence of 4% although parent-reported prevalence of ADHD was 9.5%. See CDE 'Evidence Based Practices in School Mental Health: Attention Deficit Hyperactivity Disorder (ADHD) | Individuals with Disabilities Education Act  Exceptional Children's Educational Act 1 CCR 301-8 | F90-Hyperkinetic disorders, hyperkinetic conduct disorders, disturbance of activity and attention |
| Autism | Include those with a health care provider diagnosis provider or licensed behavioral health care provider diagnosis, (e.g. psychologist, social worker, counselor not to include school psychologist, social worker or counselor), as well as those identified by 504 or IEP team. (See diagnosis definition under data point Life threatening allergies) | It is estimated that between 1 in 80 and 1 in 240 with an average of 1 in 110 children in the United States have an ASD. | Individuals with Disabilities Education Act  Exceptional Children's Educational Act 1 CCR 301-8 | F84 – Childhood Autism, atypical autism, Rett’s syndrome Childhood disintegrative disorder, overactive disorder associated with mental retardation and stereotyped movements. Other pervasive developmental disorders. Pervasive developmental disorder, unspecified. |
| Myalgic Encephalomyelitis/ Chronic Fatigue Syndrome (ME/CFS) | Number of students with a current diagnosis from a health care provider. (See diagnosis definition under data point Life threatening allergies) |  | No mandate-NASN in partnership with CDC to support school nurses to track chronic absenteeism using ME/CFS as an example of a condition that can result in chronic absenteeism. | G93.32-Myalgic encephalomyelitis/chronic fatigue syndrome, chronic fatigue syndrome, and myalgic encephalomyelitis. |
| Technical Nursing Procedure (e.g., g-tube) | Procedure that requires technical nursing skills.  Implies the use of some type of medical technology, (g-tube care or feeding, trach care, ng-tubes, catheterizations, implanted devices (VNS, glucose pump, etc.), and others. | Determined by task force to be critical element in describing Colorado student health conditions. | Colorado Nurse Practice Act | Z43-Z51 Persons encountering health services for specific procedures and health care. Attention to artificial openings. Fitting and adjustment of external prosthetic device. Adjustment and management of implanted devices. Fitting and adjustment of other devices. Other orthopedic follow-up care. Care involving dialysis. Care involving use of rehabilitation procedures. Other Medical Care. |
| Number of students screened for vision/hearing |  |  |  |  |