NASN/NASSNC UNIFORM DATA SET:
DATA POINTS FOR 2016-2017 YEAR

District: _____ or Private, Charter or Parochial: _____

Contact person (name, phone number, email): _____

Date: _____

DISTRICT LEVEL DATA

POINT IN TIME DATA-
Please see the reverse side for a more detailed definition of each item.

School Health Staffing

Total number	DATA POINT
	1. Number of enrolled students in district in 2016-17 school year
	2. Total number of **RN FTEs** with an assigned caseload providing direct services
	3. Total number of **LPN/LVN FTEs** with an assigned caseload providing direct services
	4. Total number of **health aide (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)
	5. Total number of **supplemental/float RN FTEs**
	6. Total number of **supplemental/float LPN/LVN FTEs**
	7. Total number of **supplemental/float health aide (non-RN, non-LPN/LVN) FTEs**
	8. Total number of **RNs with special assignment FTEs**
	9. Total number of **LPN/ LVNs with special assignment FTEs**
	10. Total number of **health aides (non-RN, non-LPN/LVN) with special assignment FTEs**
	11. Total number of **RN FTEs** providing administrative or supervisory school health services
	12. Total number of **LPN/ LVN FTEs** providing administrative or supervisory school health services
	13. Total number of **assistant FTEs** providing administrative support services to RNs or LPNs/LVNs

Name of District or Public, Private, or Charter: *Include name of district; or name of the private, charter, or parochial school. This contact information is for the state level collector and will NOT be passed on to the national level.*

Contact person: (name, phone number, email): *Include contact information in case there are questions regarding report. This contact information is for the state level collector and will NOT be passed on to the national level.*

Date: *Date report was submitted.*

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POINT IN TIME DATA- DISTRICT LEVEL DATA

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(To be completed at the district level for school health staffing in the district. Ideally this would be a designated lead nurse. If a lead nurse does not exist, work with district to identify appropriate person. The data will be shared with the districts who participate.)

DO NOT double count any nurse.

Mark any data points you do not collect as DNC (Do not collect), then report the data you do collect.

DATA POINT DEFINITION

The purpose of this section is to identify the number of school health staff providing DIRECT SERVICES in the school as well as determine an RN caseload.

1. Please use the District's official October count (many states submit this number to DOE).

2. RN=Registered Nurse.

*The FTE is based on a teacher FTE in the district, e.g. a teacher may work 7 hours a day (or 35 hours a week). This would be considered 1 FTE. If an RN works the same hours the RN FTE is 1 FTE. If an RN works 5 hours a day (or 25 hours a week), the FTE would be calculated as 5/7 or .71 FTE. Each state/district may vary in the number of hours a full time teacher works, so it is important to follow **your** district definition. If school nurses work more hours per day than a teacher, the FTE still equals 1. The number should reflect every RN providing direct services. For example, if the district has 3 RNs and each works .75 FTE, it would be reported as 2.25.*

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. 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. See #2 regarding % teacher FTE.

LPN=licensed practiced nurse

LVN=licensed vocational nurse

4. See #2 regarding % teacher FTE.

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. See #2 regarding % teacher FTE.

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. See #2 regarding % teacher FTE. 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. See #2 regarding % teacher FTE. 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. See #2 regarding % teacher FTE 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. See #2 regarding % teacher FTE. 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. See #2 regarding % teacher FTE. 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. See #2 regarding % teacher FTE. RNs providing management/clinical supervision to RNs, LPNs/LVNs, or other health extenders, or conducting other administrative health services, e.g. case management.
12. See #2 regarding % teacher FTE. LPNs/LVNs providing management/clinical supervision to LPNs/LVNs, or other health extenders, or conducting other administrative health services.
13. See #2 regarding % teacher FTE. Assistants providing administrative support services to RNs or LPNs/LVNs, e.g. clerical assistance

For additional information and "frequently asked questions" please go to: nasn.org/stepupbecounted (webpage will be launched by the end of July). Contact your State Designated Data Champion (SDDC) with specific questions regarding data collection. SDDC are the State School Nurse Consultants in states with consultants, check website if your state does not have a consultant to learn who your contact person.

School Level Data

Please see the reverse side for a more detailed definition of each item.

Number of RNs reporting: _____ Number of RNs: _____

Number of schools reporting: _____ Number of schools in district: _____

Number of total students in district: _____

POINT IN TIME DATA

Chronic Conditions

Answer	DATA POINT DEFINITION
	14. Number of students enrolled in assigned school(s)
	15. Number of students with an **asthma** diagnosis
	16. Number of students with **Type 1 Diabetes** diagnosis
	17. Number of students with **Type 2 Diabetes** diagnosis
	18. Number students with a **seizure disorder** diagnosis
	19. Number students with **life threatening allergy** (anaphylactic reaction) diagnosis

School Level Data
POINT IN TIME DATA

(This data is being collected to better understand the outcome of school health office visits and the common chronic conditions found in the school setting. The school nurse should complete this on the school(s) for which he/she is assigned to provide primary coverage. Only one nurse should complete on a given school, and data should be aggregated at a district level before sending to State Designated Data Champion.)

Number of RNs reporting: _____ Number of RNs: _____

Number of schools reporting: _____ Number of schools in district: _____

Number of total students in district: _____

(Completed at district level when compiling school level data to determine the percentage of the schools represented)

Date: *Date report was submitted.*

Chronic Conditions

DATA POINT DEFINITION
14. Please use official October count (many states submit this number to DOE Department of Education). This should be the number from schools reporting conditions.
*15. Include only those with a diagnosis of **asthma** from a health care provider.*
*16. Include only those with a diagnosis of **Type 1 Diabetes** from a health care provider.*
*17. Include only those with a diagnosis of **Type 2 Diabetes** from a health care provider.*
*18. Include only those with a diagnosis of **seizure disorder** from a health care provider.*
*19. Include only those with a diagnosis of a **life threatening allergy** from a health care provider.*

Please see the reverse side for a more detailed definition of each item

Number of RNs reporting: _____   Number of RNs: _____
Number of schools reporting: _____   Number of schools in district: _____
Number of students in schools reporting: _____
Number of total students in district: _____

Does this data reflect entire school year? ____ Yes ____ No (if no, what % of year is represented)

Health Office Visits-Disposition

Answer	DATA POINT DEFINITION
	20. Number of student encounters/health office visits to **RN** resulting in the student returning to class or staying in school during the 2016-2017 school year
	21. Number of student encounters/health office visits to the **RN** resulting in 911 being called or regionally appropriate equivalent during the 2016-2017 school year
	22. Number of student encounters/health office visits to the **RN** resulting in the student being sent home during the 2016-2017 school year
	23. Number of student encounters/health office visits to **LPN/LVN** resulting in the student returning to class or staying in school during the 2016-2017 school year
	24. Number of student encounters/health office visits to the **LPN/LVN** resulting in 911 being called or regionally appropriate equivalent during the 2016-2017 school year
	25. Number of student encounters/health office visits to the **LPN/LVN** resulting in the student being sent home during the 2016-2017 school year
	26. Number of student encounters/health office visits to **health aide/UAP (non-RN, non-LPN/LVN)** resulting in the student returning to class or staying in school during the 2016-2017 school year
	27. Number of student encounters/health office visits to the **health aide/UAP (non-RN, non-LPN/LVN)** resulting in 911 being called or regionally appropriate equivalent during the 2016-2017 school year
	28. Number of student encounters/health office visits to the **health aide/UAP (non-RN, non-LPN/LVN)** resulting in the student being sent home during the 2016-2017 school year

YEAR LONG DATA COLLECTION

Number of RNs reporting: _____ Number of RNs: _____
Number of schools reporting: _____ Number of schools in district: _____
Number of students in schools reporting: _____
Number of total students in district: _____
(Completed at district level data when compiling school level data to determine the percentage of the schools represented). ==This is listed twice because some school nurses may report chronic conditions, but may not report dispositions and we need to know the context for each question.==
Please indicate if the data reflects all year or a percentage of the year.

Health Office Visits-Disposition *(All students seen should have a disposition)*

DATA POINT DEFINITION
20. Include only students who are seen (face to face) by RN (not other health office staff)
21. Include only students who are seen (face to face) by RN (not other health office staff)
22. Include only students who are seen (face to face) by RN (not other health office staff). Includes students sent home with the recommendation/directive to see a health care provider.
23. Include only students who are seen (face to face) by LPN/LVN (not RN or other health office staff)
24. Include only students who are seen (face to face) by LPN/LVN (not RN or other health office staff)
25. Include only students who are seen (face to face) by LPN/LVN (not RN or other health office staff). Includes students sent home with the recommendation/directive to see a health care provider.
26. Include only students who are seen (face to face) by other health/UAP staff (non-RN, non-LPN/LVN). You may include secretary or others IF it is included as a specific part of their responsibility.
27. Include only students who are seen (face to face) by health/UAP staff (non-RN, non-LPN/LVN). You may include secretaries or others IF it is included as a specific part of their responsibility.
28. Include only students who are seen (face to face) by health/UAP staff (non-RN, non-LPN/LVN). You may include secretaries or others IF it is included as a specific part of their responsibility. Includes students sent home with the recommendation/directive to see a health care provider.

Mark any data points you do not collect as DNC (Do not collect). Please then report the data you do collect.

For additional information and "frequently asked questions" please go to: nasn.org/stepupbecounted (webpage will be launched by the end of July). Contact your State Designated Data Champion (SDDC) with specific questions regarding data collection. SDDC are the State School Nurse Consultants in states with consultants, check website if your state does not have a consultant to learn who your contact person.