Local Control Funding Formula (LCFF) and School Nurses

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It is an unprecedented time in California schools. In June of 2013, the Legislature approved Governor Jerry Brown's Local Control Funding Formula (LCFF) which has ignited educational fiscal reform. LCFF represents a historic shift in how California funds public schools. Rather than legislators mandating programs which determine how school district funds should be spent, LCFF shifts the focus on local decision-making, equity, accountability and transparency. Essentially, it lays the foundation for local education agencies to improve student outcomes and close the achievement gap, by identifying how school district funds will be spent. School districts must develop an eight-year implementation plan, with 2013-14 as the transition year.

The paradigm shift to reallocate local control of school funding places an emphasis on enlisting parental involvement and community engagement to serve as the trajectory in placing educational organizations on the right path to ensure all students have equal opportunities in school and in life.

What does this mean for school nurses? It means that local decisions for school nurse funding will come from community and parent input as well as key district decision makers and school board members. Now is really the time for school nurses to capitalize on the relationships they have built to advocate for more school nurses with in the districts. If we are not at the table this year while plans are being developed, we could possible miss the chance for initial or additional funding for school nurses over the next eight years.

What to do? Find out when LCFF talks and input will be held. Link up with those who are developing the LCFF plan. It is often the district Federal and State Categorical person who has been charged with this responsibility. Ask questions and assert your role in supporting the district in this arena of supporting student outcomes.

When meeting with district administrators, school nurses should focus on these key talking points:

• Share your impact on student attendance. District funding centers on seat time of students (ADA – Average Daily Attendance). Emphasize as a school nurse, how you help case manage and coordinate services for chronically ill/truant students by working with local health care providers to keep students healthy and in school. Rather than sending students home, school nurses “assess” students to see if they are truly ill. Additionally, school nurses can make home visits to check up on students and work with parents to
help support school attendance. Further share the role you have had in helping students with asthma, diabetes, and other health issues come to school ready to learn each day.

- Remind district officials about the recent decision from Supreme Court ruling, that permits unlicensed school personnel to administer many medication, but prohibits unlicensed personnel from administering controlled substances, such as Ritalin and many other ADHD medications.

- Also, the Legislature has mandated specific training before unlicensed school personnel may administer three specially regulated emergency medications to students.
  
  - Education Code 49414 epinephrine auto-injectors for anaphylaxis,
  - Education Code 49414.5 glucagon for severe hypoglycemia,
  - Education Code 49414.7 antiseizure medication for epilepsy.

A school employee without the licensure or training required by statute for such medications would not be “allowed by law” (tit. 5, § 604, subd. (a)) to administer them and, thus, not permitted to do so solely by force of the Board’s regulations. Compliance with those other laws would also be necessary. Pursuant to the California State Supreme Court, it is not legal for classified staff to administer any controlled substance, including Ritalin and Adderall.

- Explain that the expansion of Medi-Cal means that more students within your districts, including students in special education, will qualify for Medi-Cal services. With increased numbers of students eligible for Medi-Cal, there will be increased LEA Medi-Cal Billing Reimbursement for districts. If the district has additional school nurses, those nurses can bring increased reimbursement to the district for those “newly identified” Medi-Cal eligible students.

- School nurses, as a job title, that have a specific role in MAA. Medi-Cal Administrative Activities (MAA) identifies specific individuals that can participate in the Universal Claiming Pool for MAA. The more school nurses a district has participating in MAA, the more unrestricted federal MAA reimbursement dollars available to the school.

- Tell administrators of the VSP vision certificates and other local health resources school nurses provide for students.

- What are others that you can think of? Do you have school nurses working with community partners to write grants? Perhaps you have helped in securing local business support for health related supplies? Or you have even brought business partners in supporting school health policies, which in turn has increased school district revenue. Your role in your district and school must be conveyed to local decision makers especially the LCFF planners. Who are they?
It will be critical for you to advocate not only for your school nurse position but also increasing the number of school nurses during this LCFF development time to enhance the revenue for districts. If districts view you as a critical piece in closing the achievement gap and helping increase student outcomes and revenue, they will be sure to support your role as a school nurse. We must step up to the plate during this LCFF shift and let our voices be heard.

For more information on LCFF, visit the following Websites: Association of California School Administrators (ACSA) at http://www.acsa.org/MainMenuCategories/Advocacy/LCFF.aspx, and the California State Parent Teacher Association at http://www.capta.org/sections/programs/lcff-lcap.cfm

For more information and talking points on why school nursing services are important, visit the NASN Website at www.nasn.org and go to http://www.nasn.org/AboutNASN/pressroom.

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