



LOS ANGELES UNIFIED SCHOOL DISTRICT POLICY BULLETIN

TITLE: Guidelines for an Individualized Health Assessment and the Participation of the Credentialed School Nurse in the Individualized Education Plan (IEP) Process

NUMBER: BUL-2030.1

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DATE: January 31, 2012

ROUTING

Local District
Superintendents
Administrators
Support Unit
Administrators
Division of Special
Education
Principals
APEIS
School Nurses
School Physicians
School Administrative
Assistants

POLICY: The purpose of this Bulletin is to describe policies and procedures established to assure adherence to guidelines related to an individual health assessment and the participation of the Credentialed School Nurse in the Individualized Education Plan (IEP) process.

MAJOR CHANGES: This Bulletin updates BUL-2030.0, “Guidelines for an Individualized Health Assessment and the Participation of the School Nurse in the Individualized Education Plan (IEP) Process.” The content has been updated to clarify health assessments and electronic documentation.

GUIDELINES: The following guidelines apply:

Federal legislation including the Individuals With Disability Education Act (IDEA) and state legislation including California Education Code (CEC) and California Administrative Code (CAC) Title 5, assure that all individuals with exceptional needs (IWEN) have specific individual rights and protections relating to a free, appropriate public education (FAPE) in the least restrictive environment (LRE). Section 49423.5 CEC authorizes Specialized Physical Health Care Services (SPHCS) to be performed during the school day. When the term school nurse is used, this refers to credentialed school nurse. District Assigned Qualified Provider (DAQP) are trained and supervised on the assigned procedure by the school nurse to assist students with health needs during the school day.

HEALTH ASSESSMENT

The individualized health assessment is intended to be a useful supplement to educational and psychological data to ensure that a student’s health and/or medical condition is considered in addressing access to the instructional progress. When a student is assessed, he or she should be assessed in all areas related to his or her suspected disability.



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CEC 56320f "...including, where appropriate, health and development, vision, including low vision, hearing, motor abilities, language function, general ability, academic performance, self-help, orientation and mobility skills, career and vocational abilities and interests, and social and emotional status."

CEC 56324b "...any health assessment of students shall be conducted by a school nurse or school physician who is trained and prepared to assess cultural and ethnic factors appropriate to the pupil being assessed."

NOTE: All initial health assessments of children, birth to 4 years, not enrolled in a school based general education program are assessed by the District infant pre-school special education nurses.

- Assessments of 3 and 4 year old students enrolled in school-based general education programs such as, but not limited to, SRLDP, State Pre-K, Head Start, and Ready for School are the responsibility of the school site nurse.
- Once a student is receiving special education services, any reassessments are the responsibility of the school of attendance or program in which the student is enrolled.
- Assessments for students enrolled in Carlson Home Instructional Program and Hospital School are the responsibility of the school site nurse at the cumulative record carrying school.
- Assessments for students attending continuation school are the responsibility of the high school of residence.

INITIAL HEALTH ASSESSMENT

1. The initial health assessment timeline starts with the following documentation:
 - a. The student's case manager initiates the Special Education Assessment Notification and Special Education Assessment Plan, which is signed by the parent/legal guardian.
 - b. Once the parent/legal guardian signs the plan, the case manager at the school site assigns the assessment in the computerized IEP system to the school nurse to complete. The following sections must be marked: "Health and Development" and "Nurse/Physician."
 - c. The administrator over special education can assist in identifying the student's case manager.
 - d. The timeline allows 60 days to conduct assessment(s) and hold the IEP meeting.
2. The *Authorization to Receive/Release of Medical Information* is to be initiated at the discretion of the school nurse when appropriate.
3. The *School Nurse Health Assessment* is completed electronically in the computerized IEP system under Office Visit, IEP Initial Health Assessment.



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- a. Height, weight and vision must be documented in the Screening section prior to completing the health assessment.
- b. If in the professional opinion of the school nurse the student's health warrants the expertise of the school physician, he/she will refer the case to Student Medical Services.
- c. Copies of vision and hearing screenings and any health information that may impact the validity of the testing should be given to other assessors on the team prior to their testing.
- d. The health assessment must be completed before the IEP meeting.
- e. The initial health assessment will be completed in all areas related to the suspected disability.
- f. A copy of the health assessment may be shared with parent/legal guardian upon their written request with four days notice.
- g. Educationally relevant health information including the need for health support shall be documented on the IEP in the section designated for the Present Level of Performance (PLP). [See Written Guidelines section.]

ANNUAL REVIEW

The school nurse will provide updated health information on an annual review when there is an on-going health condition that requires monitoring and support. This includes, but is not limited to, students with the following eligibilities: Other Health Impaired (OHI), Orthopedic Impairment (OI), Multiple Disabilities Orthopedic (MDO), and Established Medical Disability (EMD). If the health status of the student has changed significantly to impact the educational program, updated health information is required for an annual review.

1. When monitoring health status, no assessment is necessary; therefore a new consent is not required.
 - a. Verify the signed consent from the initial/triennial Special Education Assessment Plan.
 - b. The *School Nurse Health Assessment* is completed electronically in the computerized IEP system under Office Visit, IEP Annual Health Assessment.
2. If the health status of the student has changed significantly to impact the educational program, then a NEW Assessment Plan is required for the health assessment.
3. For students requiring support in the area of health, the school nurse must provide a Health Assessment and Present Level of Performance on each Annual IEP.

TRIENNIAL COMPREHENSIVE RE-EVALUATION

CA Education Code 3027 states "all pupils being assessed for initial and three-year



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review for special education services shall have had a hearing and vision screening unless parental permission was denied.” This screening is not a comprehensive re-evaluation and does not require a signed consent.

The determination to conduct or not conduct a reassessment that meets all the elements of an initial assessment must be made by the IEP team with the input of the school nurse when there are health issues or a need for health support. This should take place at the Annual IEP meeting prior to the time that a triennial assessment would be due.

For students requiring support in the area of health, the school nurse must provide a Health Assessment and Present Level of Performance on the triennial IEP. An assessment plan is required when a comprehensive reassessment of health is being conducted.

THIRTY (30) DAY OUT-OF-DISTRICT IEP

When a student enters LAUSD with an IEP from another school district within California (CA), LAUSD will provide comparable services in consultation with the parents until a review IEP is held within 30 days.

1. The school nurse will participate in the review IEP when there are health issues or need for health support.
2. If an assessment is needed to determine health needs, then an assessment plan is required.

When a student enters LAUSD with an IEP from another state, comparable services in consultation with the parents are offered until a new evaluation can be conducted if necessary. If a new evaluation is required to determine CA eligibility, it is considered an initial evaluation.

TRANSITION IEP

A Transition IEP is convened when a student moves from one level to the next: infant services to pre-school special education, pre-school to elementary school, elementary school to middle school, and middle school to high school. This IEP is a review of records and therefore no assessment plan is signed.

The pre-school transition IEP is considered the triennial review. The school nurse reviews the Preschool Health Questionnaire, which is completed by the parents as part of the Classroom Team Assessment Report (CTAR); conducts an additional assessment if needed; and documents the health report in the electronic health record. An assessment plan is only required if additional assessments are needed.



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EXIT IEP

An Exit IEP is conducted when special education services are no longer required to meet the student's educational needs or when a student leaves high school.

1. If the student continues to have health needs that require accommodations in the school setting, a Section 504 Plan should be considered.
2. When conducting a high school Exit IEP, a school nurse should be consulted for recommendations to meet continuing health needs.

INDIVIDUAL EDUCATION PLAN (IEP) PROCESS

The school nurse is a team member in the IEP process, and follows the timelines initiated by the assessment plan. As an assessor for the IEP team, the school nurse will be electronically notified within the computerized IEP system through the Message Center when assigned an assessment.

WRITTEN GUIDELINES FOR THE IEP

1. The health summary must be written to include educationally relevant health, developmental, and medical information. The summary should be written in language easily understood by lay personnel and the parent/legal guardian.
 - a. All initial and triennial assessments require results of vision and hearing acuity done within the previous twelve (12) months, written as mm/dd/yy. (Time frame for screening is per 1997 Systemic Action Agreement with the California Department of Education.)
 - b. The Health PLP is to be written by the school nurse and is not altered. If additional health information becomes available at the IEP meeting, a school nurse should be consulted prior to including this information in the FAPE Part 4 *Additional Discussion* summary.
2. Present Level of Performance (PLP) Summary should be written noting the following:
 - a. The PLP should address the student's strengths, areas of need, impact of disability on student performance and recommend health-related accommodations, modifications and supports that may be needed for the student to access the educational program.
 - b. Information regarding SPHCS required during the school day.
 - c. Information regarding effects of medications taken at home or at school which may impact school performance.
 - d. Describe specific assistance and/or supports required with activities of daily living, including, but not limited to, feeding, toileting, mobility and accessing educational materials.
 - e. Information regarding the ongoing monitoring of health needs and appropriate interventions.



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- f. The school nurse determines the level of care required: licensed versus unlicensed to support health needs based on professional judgment per CA Education Code 49423.5.
3. Additional areas of documentation for health needs in the IEP:
 - a. Participate in the IEP Team discussion regarding Eligibility for Low Incidence funding if a student has one of the following disabilities: visual impairment, severe orthopedic impairment or deaf/hard of hearing.
 - b. Document in FAPE Part 1, *Other Non-Academic Supports* training of school staff regarding health needs and assistance needed with activities of daily living: feeding, toileting, mobility and transferring.
 - c. Document in FAPE Part 1, the equipment to be provided by low incidence funding that a student needs for health services (i.e. changing/treatment table, patient lift).
 - d. Complete the services section on FAPE Part 2, *Summary of Services* for the provision of protocols by “district assigned qualified providers” (DAQP) (i.e., health care assistant or licensed vocational nurse).
 - e. FAPE 2 Part 4, *Additional Discussion* should include information regarding the offer of services for a licensed nursing provider, the declination of any services offered and how needed services will then be provided, and discussion of parental concerns.

PARTICIPATION AT IEP MEETINGS

At every IEP meeting where the health status impacts the student’s access to the educational program, a school nurse must participate in the IEP meeting to interpret the assessment, recommend necessary accommodations, modifications, supports and services; and at the conclusion of the meeting, ensure proper documentation of supports and services.

When determining the need for transportation services, the school nurse needs to be prepared to participate in the IEP team discussion for students who have disabilities impacting health, endurance, stamina or for those requiring specialized equipment. (See BUL-5003.3 *Transportation Guidelines for Individualized Education Program [IEP] Teams*.)

The school nurse needs to be prepared to contribute to the discussion regarding eligibility for extended school year (ESY) when there are health needs. (See REF-5276.1, *Guidelines for the Individualized Education Program [IEP] Team When Students with Disabilities are Being Considered for Extended School Year [ESY] Programs and Services*.)

If the PLP Summary indicates no substantial health issue, attendance at the meeting is not required. However, a school nurse must be consulted by telephone if questions regarding the student’s health status arise during the IEP meeting.



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If the health status does not impact the student's access to the educational program, the school nurse may attend the IEP meeting for the purpose of giving their report. The school nurse may leave the meeting after giving the report following procedures in REF-3804.0, *Individualized Education Program (IEP) Team Membership Requirements and the IEP Team Member Excusal Process*.

NURSING SUPPORT FOR SCHOOL SITE NURSE

1. Request for assistance from the Field Nursing Coordinator may be made by the school site nurse or school administrator/designee to:
 - a. Assist with maintaining compliance if the school site nurse cannot complete the IEP cases within the prescribed timeline.
 - b. Consult regarding students with extensive health needs, and/or who may require support from DAQPs.
 - c. Assist with training and supervision of qualified designated personnel assigned to perform SPHCS at their school.
 - d. Consult when a change in placement is being considered or there are accessibility issues.
 - e. Assist with assessment requests when the student is not enrolled in a public school.
2. Request for assistance from the Central Nursing Services office may be made by the Field Nursing Coordinator office and/or school site nurse when:
 - a. The student has extensive health needs, requires SPHCS and/or may require support from DAQP or licensed nursing provider. See REF-2481.4, *Support for Students With Assessed Health Needs in Special Education Programs*. The form Review for Support Services Due to Health Needs must be completed prior to the IEP meeting (per REF-2481.4, Attachment C.)
 - b. Assessments are required for students in nonpublic schools, charter schools, and options programs.
 - c. Assistance with training and supervision of unlicensed assistive personnel to provide SPHCS.

CREDENTIALLED SCHOOL NURSE ROLE WHEN STUDENT HAS ORDERS FOR SPECIALIZED PHYSICAL HEALTHCARE SERVICES

CEC 49423.5 states that any student with exceptional needs who requires SPHCS may be assisted by qualified designated personnel provided the services are performed under the supervision of a school nurse. Supervision means review, observation and instruction in the performance of the procedure, care of equipment and environment, and documentation. The level of supervision, immediate, direct or indirect, is determined by the school nurse.



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The school nurse supervises care by:

1. Assigning the specified procedure
2. Providing specific training
3. Ensuring competency to perform the procedure
4. Monitoring regularly the performance of the assigned task
5. Ensuring accurate and timely documentation of the services

AUTHORITY: This is a policy of:

- Federal Legislation: Individuals With Disability Education Act
- State legislation:
 - CEC 56320f "student shall be assessed in all areas of suspected disability including where appropriate health and development, vision and hearing..."
 - CEC 56324b "any health assessment shall be conducted by a Credentialed School Nurse or School Physician"
 - CEC 49423.5 "authorizes Specialized Physical Health Care Services to be performed during the school day."
- California Administrative Code Title 5: "assure that all individuals with exceptional needs have specific individual rights and protections relating to a free, appropriate public education in the least restrictive environment."

**RELATED
RESOURCES:**

Special Education Policies and Procedures Manual (July 2007)

BUL-5003.3, *Transportation Guidelines for Individualized Education Program (IEP) Teams*, dated January 25, 2010

REF-2481.4, *Support for Students with Assessed Health Needs in Special Education Programs*, dated May 24, 2010

REF-3804.0, *Individualized Education Program (IEP) Team Membership Requirements and the IEP Team Member Excusal Process*, dated July 23, 2007

REF-5276.1, *Guidelines for the Individualized Education Program (IEP) Team When Students with Disabilities are Being Considered for Extended School-Year (ESY) Programs and Services*, dated November 1, 2010

ASSISTANCE: For assistance or further information, please contact District Nursing Services at (213) 765-2800.